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MONMOUTHSHIRE COUNTY COUNCIL.



ANNUAL REPORT
OF THE
COUNTY MEDICAL OFFICER OF HEALTH.
FOR THE YEAR 1958.

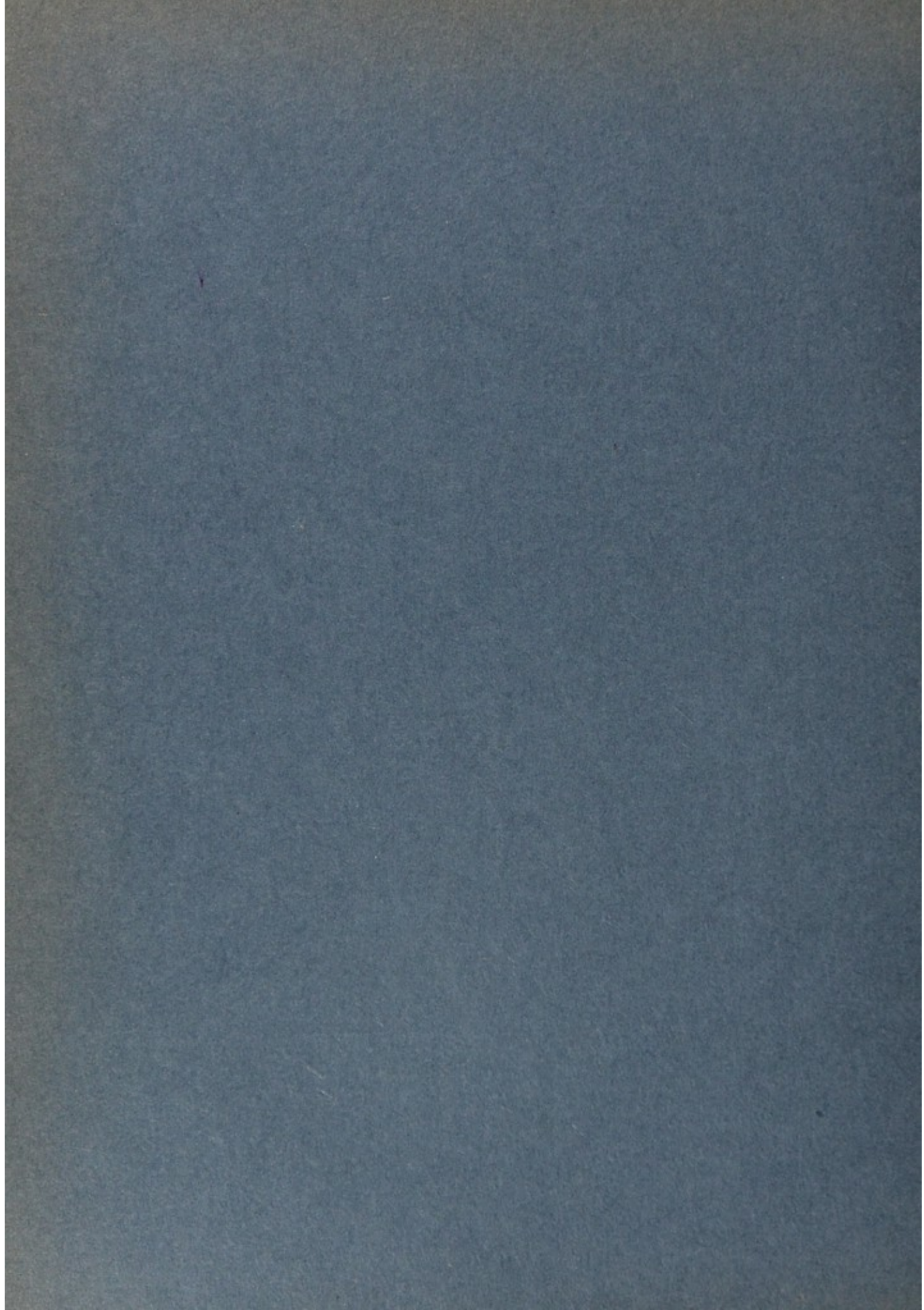


GWYN ROCYN JONES,

M.A., M.D., B.Chir., D.P.H.,

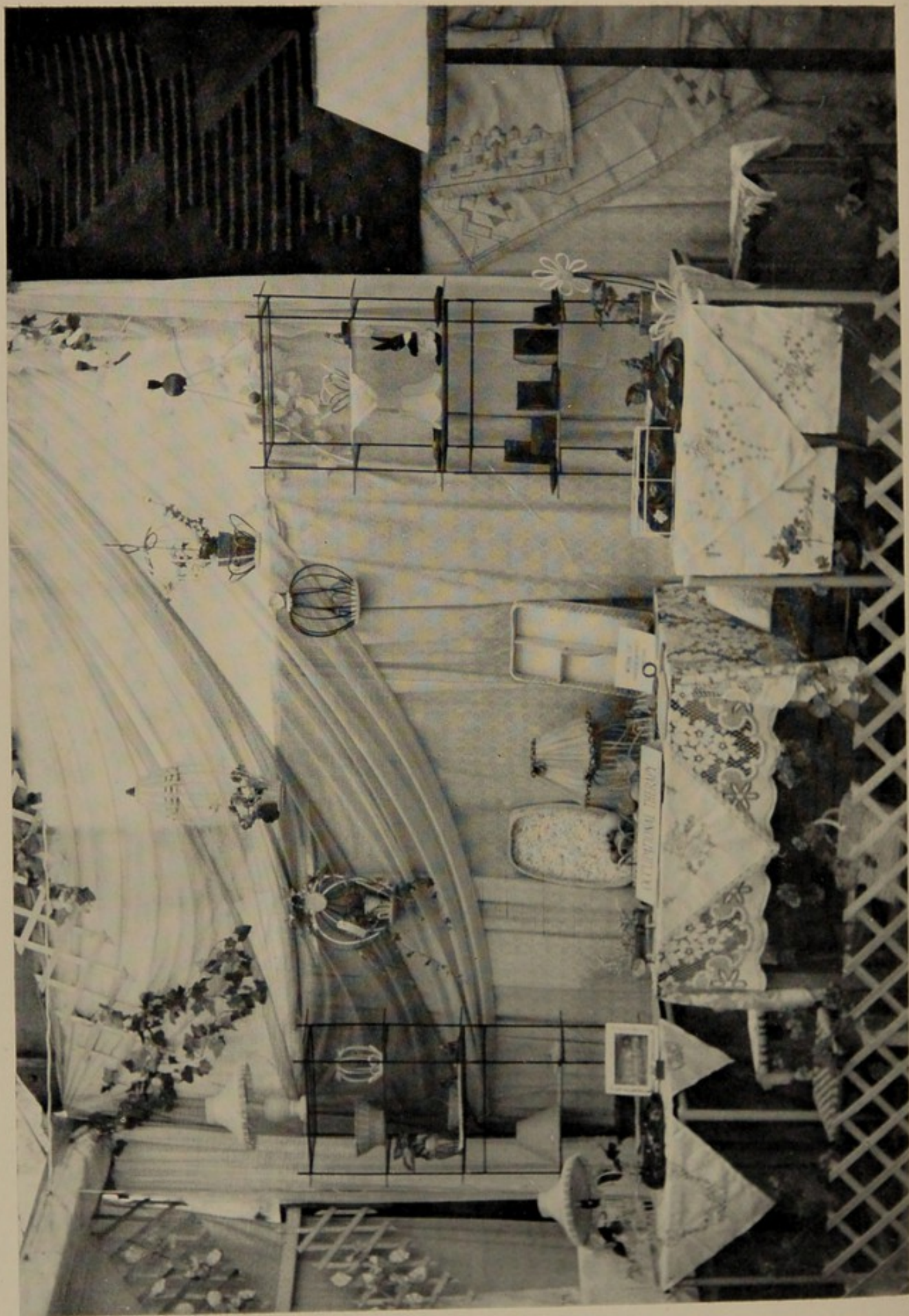
County Medical Officer.

CAMBRIA HOUSE,
CAERLEON, MON.





Visit of the Rt. Hon. Derek Walker-Smith, Q.C., M.P., to The Occupation Centre, Garndiffaith, September, 1958.



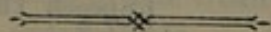
One of the exhibits at the Health Exhibition, National Eisteddfod of Wales, Ebbw Vale, 1958.



MONMOUTHSHIRE COUNTY COUNCIL.



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OF THE
COUNTY MEDICAL OFFICER OF HEALTH.
FOR THE YEAR 1958.



GWYN ROCYN JONES,

M.A., M.D., B.Chir., D.P.H.,

County Medical Officer.

**CAMBRIA HOUSE,
CAERLEON, MON.**

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PREFACE.

TO THE CHAIRMAN AND MEMBERS OF THE HEALTH COMMITTEE.

MR. CHAIRMAN, LADIES AND GENTLEMEN.

It is my honour and pleasure to submit my Annual Report, as County Medical Officer, for the year 1958.

This year, the Report has been drawn up on different lines to previous occasions, and it is hoped that its new form will facilitate ease of reading, whilst all statistical data is readily available in the Appendix.

The estimated mid-year population continues to expand, whilst the live-birth rate per 1,000 population for 1858 showed a decrease of 0.06 on 1957.

There was also a decrease in the death rate per 1,000 population, this being 11.73 as against 11.98 for 1957, showing a drop of 0.25.

Infant Mortality showed a diminution in the rate per 1,000 live births, with a figure of 25.81. The rate for 1957 was 30.98, so that the decrease was 5.17.

There was no significant outbreak of infectious diseases during the year, and a welcome feature was the small number of notifications of acute Poliomyelitis. 6 paralytic and 1 non-paralytic cases were notified, and in later pages will be found remarks upon the situation.

My thanks are due to the members of the Health Committee for the ready help which I have received throughout the year and for the co-operation and encouragement I have received from them. I would like to express my appreciation, also, to the Consultant Staffs of the Hospitals and also the other members of their Staffs who have all been so willing to assist in the details of co-operation.

Further, to the members of the Staff of my Department, both Professional and Administrative, I extend my gratitude for continued loyal help and zealous application.

I have the honour to be,

Your obedient Servant,

G. ROCYN JONES.

Cambria House,
Caerleon, Mon.
November, 1959.

PREFACE

To the Chairman and Members of the Health Committee
Mr. Chairman, Ladies and Gentlemen:

It is my honor and pleasure to submit my Annual Report, as Health
Medical Officer for the year 1958.
This year, the report has been drawn up on different lines to previous
ones, and it is hoped that these lines will facilitate some of the
work which all interested have to do in the Appendix.
The statistical and other information continues to expand, while the
birth rate per 1,000 population in 1958 showed a decrease of 0.08 on 1957.
There was also a decrease in the death rate per 1,000 population this
year, 11.73 as against 11.87 in 1957, showing a drop of 0.14.
Infant Mortality showed a diminution in the rate per 1,000 live births,
with a figure of 55.51, the rate for 1957 was 58.98, so that the decrease was
3.47.
There was no significant outbreak of infectious disease during the year,
and a welcome feature was the small number of notifications of acute Polio-
myelitis, 6 patients, and 1 sub-acute case were notified, and in later
pages will be found remarks upon the situation.

My thanks are due to the members of the Health Committee for the ready
help which I have received throughout the year and for the co-operation and
encouragement I have received from them. I would like to express my appre-
tiation, also, to the Consultant Staff of the Hospital and also the other mem-
bers of their Staff who have all been so willing to assist in the health of co-
operation.

Further, to the members of the Staff of the Department, both Professional
and Administrative, I extend my gratitude for continued loyal help and
zealous application.

I have the honor to be,
Your obedient servant,
R. HOOBY JONES.

R. HOOBY JONES

Cardiac House,
Carden, Mon.
November, 1958

Mr. Chairman,
Members of the Health Committee,
I have the honor to be,
Your obedient servant,
R. HOOBY JONES

THE STAFF OF THE MONMOUTHSHIRE COUNTY COUNCIL HEALTH DEPARTMENT.

COUNTY MEDICAL OFFICER OF HEALTH :

G. Rocyn Jones, M.A., M.D., B.Chir., D.P.H.

Health Department, Cambria House, Caerleon, Mon. Tel. Caerleon 421.

DEPUTY COUNTY MEDICAL OFFICER OF HEALTH :

William Panes, M.R.C.S., L.R.C.P., D.P.H.

CONSULTANT MEDICAL AND SURGICAL STAFF :

J. T. Rice Edwards, F.R.C.S., L.R.C.P. (Surgical).

G. W. Hoare, M.A., M.B., F.R.C.S., M.R.C.S., L.R.C.P. (Ophthalmic).

D. N. Rocyn Jones, M.A., M.D., F.R.C.S. (Orthopaedic).

D. B. Sutton, F.R.C.S., L.R.C.P. (Ear, Nose and Throat).

R. Vaughan-Jones, M.B., Ch.B., D.O.M.S., F.R.C.S. (Ophthalmic).

Professor A. G. Watkins, M.D., M.R.C.S., F.R.C.P.

(Heart and Rheumatic).

M. L. Insley, M.B., Ch.B. (Geriatric).

Nora L. Keevil, M.D., B.S., M.R.C.O.G. (Obstetrics),

D. F. V. Johnston, B.Sc., M.B., B.Ch. (Child Psychiatric).

David Thomas, B.Sc., M.B., M.R.C.P., D.P.M., (Child Psychiatric),

DISTRICT AND AREA MEDICAL OFFICERS OF HEALTH :

Rhymney U.D.C.

Tredegar U.D.C.

Bedwellty U.D.C.

Abercarn U.D.C.

Mynyddislwyn U.D.C.

Ebbw Vale U.D.C.

Nantyglo & Blaina U.D.C.

Abertillery U.D.C.

Magor & St. Mellons R.D.C.

Bedwas & Machen U.D.C.

Risca U.D.C.

Pontypool U.D.C.

Blaenavon U.D.C.

Cwmbran U.D.C.

Caerleon U.D.C.

Chepstow U.D.C.

Chepstow R.D.C.

Monmouth U.D.C.

Monmouth R.D.C.

Abergavenny U.D.C.

Abergavenny R.D.C.

Usk U.D.C., Pontypool R.D.C.

Area No. 1 M. J. Donelan, M.B., B.Ch., D.P.H.

Area No. 2 R. A. Hoey, M.R.C.S., L.R.C.P., D.P.H.

Area No. 3 H. V. M. Jones, M.B., B.S., D.P.H.

Area No. 4 Thomas Stephens, M.C., B.Sc., M.R.C.S.,
L.R.C.P., D.P.H.

Area No. 5 J. Walters Bowen, M.B., B.Ch., D.P.H.

Area No. 6 K. P. Giles, M.B., Ch.B., D.P.H.

Area No. 7 F. J. Hallinan, M.B.E., M.B., B.Ch.,
B.A.O., D.P.H.

Area No. 8 Evelyn D. Owen, M.B., B.S., M.R.C.S.,
L.R.C.P., D.P.H.

Area No. 9 E. N. Dowell, M.R.C.S., L.R.C.P., D.P.H.

Area No. 10 Sadie M. R. Harvey, M.B., B.Ch., B.Sc.,
D.P.H.

SENIOR MEDICAL OFFICERS OF HEALTH:

L. Anne Wilson, M.D., Ch.B., B.Sc., D.P.H., D.C.H. (Maternity and Child Welfare).

Mary Wells Jenkins, B.Sc., M.B., B.Ch., D.P.H.

SENIOR MEDICAL OFFICER FOR MENTAL HEALTH:

Mary E. Cochrane-Dyet, M.B., Ch.B.

ASSISTANT MEDICAL OFFICERS:

Mary Rose MacQuillan, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H.

A. Joan Lewis, M.R.C.S., L.R.C.P.

Anna Gregory, M.R.C.S., L.R.C.P.

Margaret C. Jenkins, M.R.C.S., L.R.C.P.

Mary Stewart, B.Sc., M.B., B.Ch.

Mary Ll. Williams, M.B., B.Ch.

Cicely Waters, M.D., B.Sc., D.P.H., R.C.P.S.

Lilian J. Powell, M.B., B.Ch., B.Sc.

Rhiannon Morgan, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.

Elfreda Alice Davies, M.B., B.Ch.

Glenys G. Trenhaile, L.M.S.S.A.

Nano Joyce Sumption, M.B., B.Ch., B.Sc. (Wales).

Hywel G. Jenkins, M.B., B.S. (Lond.), D.P.H.

Esther Hughes Rees, M.B., B.Ch.

William L. P. Gould, T.D., L.M.S.S.A. (Lond.), (Permanent from 22-9-58).

SENIOR DENTAL OFFICER:

E. F. J. Sumner, L.D.S., R.C.S.

ASSISTANT DENTAL OFFICERS:

J. C. Morley, L.D.S.

Greta McHarg, L.D.S.

W. S. Hazell, L.D.S., R.C.S. (Part-time).

D. J. Coughlin.

R. V. Clarke, L.R.C.P. & S., L.D.S.(Ed.).

Maureen F. E. Vaughan Jones, L.D.S.

Ruth G. Phillips, B.D.S. (Commenced 28-4-58).

COUNTY HEALTH INSPECTOR:

H. C. Bird, M.S.I.A., A.R.S.H.

ADDITIONAL COUNTY HEALTH INSPECTOR:

C. A. Lewis, M.S.I.A., A.R.S.H.

COUNTY AMBULANCE OFFICER:

H. Price.

MEDICAL COMFORTS OFFICER AND EQUIPMENT OFFICER :

Mr. Idris Williams.

SUPERVISOR OF MIDWIVES :

Miss O. Griffiths, S.C.M.

SUPERVISOR OF HEALTH VISITORS :

Miss E. Morgan, S.R.N., S.C.M., H.V.

SUPERVISOR OF DISTRICT NURSES :

Miss A. R. Collins, S.R.N., S.C.M., H.V.

SUPERVISOR OF HOME HELPS :

Mrs. M. V. Hughes.

WELFARE OFFICER (Illegitimate Children) :

Miss G. A. Knight, S.R.N., S.C.M.

SPEECH THERAPISTS :

Mrs. U. E. Billingham, L.C.S.T., (R.M.A.).

Miss K. B. Powell, L.C.S.T. (R.M.A.).

Miss Patricia Powell, L.C.S.T., (R.M.A.).

Miss Enid Iles, L.C.S.T. (R.M.A.). (Commenced 3-2-58).

ORTHOPTIST :

Miss Margaret Ericson, D.B.O.

TEACHER OF THE DEAF :

Miss Audrey Guy. (Commenced 1-5-58).

MENTAL HEALTH WORKERS :

Mr. E. T. Pritchard.

Miss Sheila Readman.

Mr. Brynley Price.

LADY HEALTH VISITORS :

Baldwin, M.

Bevan, J. I.

Cooper, M. S.

Davies, M. J.

Delahaye, M.

Dredge, M. W.

Edwards, E. M.

Edwards, M.

Elias, M.

Fraser, E.

Giles, H.

Giles, M. R.

Gilford, M.

Golding, G. I.

Harvey, B.

Hockaday, S.

Hopkins, F.

Jackson, J. P.

James, E. N.

Jones, A.

Jones, E.

Jones, I.

Jones, B.

Kavanagh, P. G.

Lewis, M.

Lewis, R.

Meyrick, J.

Morgan, C.

Prosser, I.

Pulsford, M.

Redwood, M. A.

(Retired 26-11-58).

Rogers, G. M.

Rowlands, L. M.

Silk, J. (Resigned 31-8-58).	Tristram, L.	Williams, N.
Simms, C. D.	Walters, M.	Wilmot, E. G. (Retired 9-9-58).
Smith, H. M.	Watson, M. (Commenced 11-8-58).	Wixey, N. A.
Sparkes, E. S. (Commenced 1-9-58).	Webb, E.	Holland J. (Permanent from 1-2-58).
Stevens, S. L.	Wibberley, N. E.	
Stinchcombe, N. G.	Wilcox, D. G.	
	Williams, F.	

ORTHOPAEDIC SISTER:

Pugh, Miss M. M., S.R.N., S.C.M., H.V,

REFRACTION UNIT SISTER:

Mrs. G. Sillman, S.R.N. (Commenced 8-9-58).

AUDIOLOGY UNIT SISTER:

Mrs. B. Pearce, S.R.N. (Commenced 1-2-58).

ORAL HYGIENIST:

Mrs. P. Schofield.

DENTAL ATTENDANTS:

Miss O. Joan Annetts, B.E.M. (Resigned 28-2-58).	Mrs. O. Church.
Mrs. Carol Huggett, S.R.N.	Mrs. R. Fiveash.
Miss Betty Wynn.	Mrs. S. M. Morgan.
Mrs. Olwen P. Brodie.	Miss C. F. Bufton (Commenced 23-6-58).
	Mrs. Evans.

DOMICILIARY PHYSIOTHERAPISTS:

Mr. E. Stratford-Leach, C.S.P.

Mr. R. J. Holley.

CHILD PSYCHOTHERAPIST:

Miss M. H. Dundas, B.A. (Hon.) Psych., Dip. I.C.P., (Commenced
1-5-58).

PERIPATETIC OCCUPATIONAL THERAPIST:

Miss Linda Bissett.

THE FIRST TEN YEARS OF THE NATIONAL HEALTH SERVICE ACT, 1946.

In Circular 22/58 (Wales) dated 9th December, 1958, a request was made that my Annual Report for 1958 should include a brief general review of the manner in which the local health services have functioned in the wider setting of the National Health Service generally.

On perusing my Annual Report for the year 1948, I find that I stated that the Council had been able to lay the foundation stones of its new service (with the exception of Health Centres) and to build a substantial part of the superstructure. I also remarked that this re-construction had been accompanied in Monmouthshire by goodwill on a totally unexpected scale from those interested, and allied organisations which have had to be either built into or co-ordinated with the new scheme.

After ten years' experience of the new services, I am pleased to report the continuance of the good will and good progress in the various branches of the local health services.

At the beginning, decentralisation of Medical Services took place on a considerable scale and the twenty-three Urban and Rural Districts were divided into ten Areas, each with an Area Medical Officer of Health and Area Health Clerk. Each District Council thus had the part-time services of a Medical Officer who was engaged whole-time in preventive health work, in place of, as heretofore, utilising general medical practitioners on a part-time basis. The new system has worked very well and as time has progressed the Medical Officers have built up local connections in their areas and have worked with intimate knowledge of their local conditions.

The Ambulance Service has been developed from its initial phase to a now highly-organised organisation. All new demands on the service have been adequately met by developing the service in accordance with the approved scheme, and no major alteration of that scheme has been necessary.

The premises formerly occupied by Medical Aid Societies in Rhymney, Tredegar, Ebbw Vale and Blaenavon were in 1948 taken over to act as experimental Health Centres. These centres still perform that function, with co-operation and good will from the participating general medical practitioners and other staff. No developments in the way of provision of extra services, i.e., such as X-ray facilities, under the National Health Service scheme have taken place, nor have any new Health Centre premises been opened in the County. New County Council Clinics have been opened but none of these had Health Centre facilities.

Home Nursing has proceeded very smoothly, with the numbers of home visits increasing from 214,702 in 1949, the first full year of the National Health Service to 327,336 in 1958. The pattern of treatment has changed during the period under review, and with the evolution of the various antibiotic agents, a large number of injections are now given by home nurses. The Home Nursing Service has been instrumental in reducing the number of cases who would otherwise have been admitted to hospital. The provision of motor-car allowances has increased the case potential of about a quarter of the nurses.

In 1949 there were a total of 371 Home Helps employed and 1,633 homes were supplied with help, the large majority being in cases of the aged and chronic sick. In 1958 there were a total of 741 Helps and 2,474 cases were dealt with, the large majority of these still being aged and chronic sick. One development in this Service is the employment of specially chosen Helps to assist with cases of Problem Families.

Caring for the aged and chronic sick has been one of the responsibilities of the County Council, and this has been effected by constant co-operation between medical practitioners and this Department. By the use of a special medical officer, these patients have been, where necessary, provided with domiciliary physiotherapy, home nursing, home helps and all possible assistance to keep the patient comfortable at home. Hospital admission has also been effected in many extreme cases.

Ante-natal supervision of expectant mothers has increased during the last ten years. It has become an increasing practice for general practitioners to conduct their own Ante-natal Clinics, and this has inevitably reduced the number of attendances at the County Clinics. Individual attention, however, has increased, and now includes blood investigation and measures for early detection of toxæmia of pregnancy.

Domiciliary Midwifery has managed to keep pace with the demands upon it, in spite of progressive difficulty in obtaining midwives to replace wastage owing to retirement. Although there has been a tendency to a reduction in the number of home births attended, the larger number of hospital births has resulted in an almost doubled number of cases discharged from maternity hospitals before the fourteenth day. This has thrown on domiciliary midwives the load of completing the midwifery care.

In my 1948 Annual Report I recommended that the Local Health Authority should treat domiciliary Tuberculosis as an entity, and that a Domiciliary Anti-Tuberculosis organisation should be built up. Since then the problem of tuberculosis has been dealt with almost as recommended. With early detection of pulmonary tuberculosis by Mass X-ray methods, etc., and the development

of chemotherapy and antibiotic therapy it has been possible to institute treatment at home while the patient, if hospital treatment is required, is awaiting admission. With the great demand for hospital beds this wait could be a long one. While the patient was at home, all the local health services were provided, including instruction by Health Visitors in hygiene and the prevention of spread of infection. In many cases the need for hospitalisation receded and thus gradually the pressure on the hospitals diminished, so that those cases in need of surgery were expeditiously attended to. The dramatic diminution in the incidence of tuberculosis is a testimony to the success of the scheme.

In 1948, the administration of the Lunacy and Mental Treatment Acts was delegated to the Local Health Authority, in addition to its previous responsibilities regarding Mental Deficiency, and since then there has been a steady increase in the work of the Mental Health Section of the Health Department. As time went on the advent of a special whole-time medical Mental Health Officer, three social workers and the opening of two Occupation Centres showed the Council's awareness of the needs of mental health.

The Council has developed two fully staffed Child Guidance Clinics, these being administered by the Mental Health Department, the Consultant Child Psychiatrists being provided by the Welsh Regional Hospital Board. There are no other Child Guidance Clinics in the Administrative County.

Increases in the number of patients put out of hospital on licence for supervision, the larger number of discharges from the Order under the Mental Deficiency Acts, and the increase in the number of admissions to Mental Deficiency Hospitals were all evidence of the expanding service.

Now, in 1958, there looms on the horizon the new Mental Health Bill, with its new vision of this field of work and its fresh conception of its administration.

It will be seen that the Local Health Services have prospered in the wider scope of the National Health Service and have played a great part in its success. The good-will and co-operation which has abounded has confounded any gloomy predictions which may have been made at its inception.

MATERNITY AND CHILD WELFARE.

Work of the Health Visitors.

In the work of the Health Department, a most important function is performed by the Health Visitor. At the end of 1958 there were 45 Health Visitors on the Council's Staff, these being in the charge of a Superintendent Health Visitor. Two vacancies had occurred which were temporarily unfilled and it was hoped that suitable applicants would soon be available.

The duties of the Health Visitor are many and varied, and so tactful and friendly is her approach that in most cases her visits are accepted by the people as visits of a friend and counsellor. Which indeed she is! To list her normal functions, one would say that she visits homes to give advice to expectant mothers and to nursing mothers with regard to the welfare of young children, but her supervision carries on until the children reach school age. Her interest does not end there, however, and she still casts a watchful eye over her charges in the guise of School Nurse, as under the Council's Co-ordinated Service she is designated as a Health Visitor—School Nurse. She gives advice on personal hygiene in cases of tuberculosis, carries out investigations as to causes of certain accidents in the home, makes home visits with regard to hospital almoners' enquiries, performs follow-up visits for ex-hospital cases and ensures that children who have sustained accidents at school have received adequate medical attention. Add to this her attendance at Ante-Natal and Child Welfare Clinics, at which she renders invaluable service and includes a good deal of health education, her interest in problem families and her duties in performing periodic inspections at schools, with the necessary follow-up visits, and it will be seen that the Health Visitor is the king-pin of the domiciliary health services. Most new schemes which are formulated seem, at some stage, to involve this branch of the services and the work of the Health Visitor tends to get more and more important and all-embracing.

Many Health Visitors attend at School Clinics in order to assist at the various sessions held by Consultant Physicians and Surgeons, and by School Medical Officers, and it is becoming a practice that they should attend at Out-Patient Clinics held by Paediatricians at Hospitals.

A sense of humour is a useful part of the Health Visitor's make-up, and it was a saving grace in the case of the young officer who made a visit to a farmhouse in her area, only to hear the son of the house announce to his mother that the Artificial Insemination woman had called! This was indeed an unexpected addition to her duties!

During the summer of 1958, three Health Visitors attended a two-week refresher course at Oxford.

ANTE-NATAL CLINICS.

In the County of Monmouth there were 29 Ante-Natal Clinics in operation at the end of 1958, and a total of 146 half-day sessions per month were held. These were all staffed by Medical Officers of the Council's Staff together with Health Visitors. The local County Midwives were encouraged to attend in order to see cases in which they were interested. In the main the Clinics were held a whole or half-day weekly, but in certain cases they were fortnightly.

Medical advice is given at the Clinics in order to maintain the health of expectant mothers and to prevent illness and difficult confinement. Relaxation exercises were prescribed and demonstrated in some clinics and in others were advised.

Dental treatment was recommended where needed, and facilities for free treatment were available at Dental Clinics situated in easily accessible parts of the County. Free provision of dentures was included in the dental service.

Close co-operation was maintained with the National Blood Transfusion Service in order to prevent babies suffering from the effects of incompatibility of parents' blood-groups. Blood specimens from expectant mothers collected at the first visit and thirty-second week were transmitted to the Laboratories for blood grouping, and the results were returned to the Medical Officer of the Ante-natal Clinics and also the local main hospital at which the special obstetrical treatment would be required in case of Rh. sensitisation, thus ensuring that vital information would be readily available at that hospital. The first blood specimen was also submitted to Wassermann and C.F.T. (Gon.) tests and haemoglobin estimation was carried out.

Medical Officers kept a special watch for early cases of toxæmia of pregnancy, and the provision of weighing machines facilitated the detection of abnormal increases in weight which are associated with this condition.

Each expectant mother was encouraged to take advantage of the opportunity of receiving vaccination against paralytic poliomyelitis, and was also referred for X-ray examination of the chest.

Many general medical practitioners hold their own Ante-natal sessions and some hospitals which have maternity accommodation like to arrange their own Ante-natal examinations. This has caused a gradual tendency for attendances of new cases at the Council's Ante-natal Clinics to diminish, and in 1958 this tendency, although slight, persisted. The total number of attendances, however, showed an increase.

MATERNITY AND CHILD WELFARE CLINICS.

49 Infant Welfare Clinics, with a total of 304 half-day sessions per month, were functioning at the end of the year. These Clinics are available for the care of children from the time the midwife concludes her attention until the time of entry to school. Mothers are advised upon the upbringing of the infant and supervision is exercised by a Medical Officer and Health Visitor to ensure that normal health and growth are being maintained. The regular medical examinations are invaluable as a means of detecting illness or disability in

the earliest stage, making it possible for treatment to be commenced with a minimum of delay. Treatment of defects is most likely to be effective when detected early in their development.

Certain Health Visitors in attendance at Child Welfare Clinics have received instruction in the detection of deafness in infants and a special watch is kept for this defect, which, if present, is notified to the Audiology Clinic.

Prophylactic measures such as vaccination against smallpox and poliomyelitis and immunisation against diphtheria and whooping cough are undertaken at the Clinics.

Facilities were available to mothers attending the clinic for the purchase of proprietary infant foods at a little over cost price, the amount paid by mothers in 1958 being £21,417. Welfare Foods were on sale at 37 of the Infant Welfare Clinics and at 44 other centres such as shops, private houses, W.V.S. Centres, etc., where the distribution was carried out by voluntary workers.

A Mobile Clinic catered in a similar way for rural areas in which mothers found it difficult to attend fixed Clinics.

Examination of the returns shows that during 1958 the number of total attendances at Infant Welfare Clinics exceeded those for 1957, 1955 and 1954. An endeavour was made to find the cause of this upward trend and it would appear that the main credit should go to the assiduous work of the Health Visitors. It is an accepted fact that a good local Health Visitor implies a good local Infant Welfare Centre. The general public is also becoming more health-conscious and anxious to take advantage of health preserving facilities. I have also gathered that of late certain television programmes have also helped to stimulate interest.

Post-Natal Clinic.

Mothers who have not undergone a medical examination, either by the family doctor or in hospital, following the birth of the baby, are encouraged to attend a Post-natal Clinic, where the examination may be carried out.

A central Post-natal Clinic was held at Stanley Road Clinic, Newport, throughout 1958 in charge of Dr. Nora Keevil. At this clinic were seen all cases referred from the Ante-Natal Clinics as being in need of further consultation.

All detected cases of sterility were referred to Dr. Keevil.

The number of new cases examined post-natally more than doubled.

Birth Control Clinics.

These Clinics continued at the same five centres in the County and the demand for appointments for treatment on medical, and not social grounds kept up. Specially trained Medical Officers of the Department were in charge, assisted by Health Visitors.

Family Planning Clinics.

The County Council has agreed to the use of clinic premises at Newport and Chepstow by the Family Planning Association for weekly sessions. The Council does not accept any responsibility for these clinics other than allowing the use of the rooms

Patients are treated on social grounds.

At Stanley Road, Newport, sessions are held on Thursdays, afternoons and evenings alternately, and at Chepstow on Monday evenings.

Speech Therapy.

At the commencement of 1958 the Speech Therapy Staff consisted of three officers, one vacancy existing which it was hoped shortly to fill. On February 3rd, 1958, the post was filled and a full complement of four officers remained for the rest of the year.

Speech Therapy Clinics were held, as previously, at 12 Centres, and dealt with all types of speech defects in children. The Clinics worked in close co-operation with the School Ear, Nose and Throat Clinic, where the advice of a consultant surgeon was available.

Information as to level of intelligence was of value, and the special tests were arranged as required.

INFANT PROTECTION.

The responsibility for the welfare of children who have been deprived of parental care and attention rests with the Children's Department, which was set up by the County Council under the provision of the Children's Act, 1948. The County Medical Officer of Health, however, acts as Medical Adviser to the Children's Committee and undertakes the management of medical matters relating thereto.

CHILDREN'S HOMES.

These are administered by the Children's Department, and day-to-day medical treatment is provided by general medical practitioners by arrangement with the Children's Committee. Over-all medical supervision, however,

rests with the County Medical Officer, and regular quarterly medical inspections of the children are carried out by Medical Officers of the Health Department.

CARE OF UNMARRIED MOTHERS.

By arrangement with the Salvation Army Hostels at Cardiff and Bristol, the County Council accepted the financial responsibility for maintenance of admitted expectant unmarried mothers. The patients, however, were expected to contribute the amount of National Health Insurance benefit to which they were entitled. Only about one quarter of the total number of cases were actually admitted.

A social worker was employed to superintend the care of illegitimate children; she also carried out supervision of adoption cases and gave advice to maternal and foster-parents. Attendance at Magistrates' and County Courts in the capacity of guardian *ad litem* was also part of her duties. The duties of this worker entailed the employment of much tact and the human touch, and in all except a few cases, her services were gratefully accepted by the unmarried mothers. It was one of the pleasurable experiences of the department to witness the care expended on the infants being taken to foster parents, and the expressions of joy in the reception of the youngster.

Dr. Barnado's Auxiliary Boarding-out Allowance was still being received for three children. In one case the child lived with the grandmother and in the other two the children lived with the mother and step-father. Two children were admitted as residents to Dr. Barnado's Homes.

REPORT OF THE PRINCIPAL DENTAL OFFICER ON DENTAL TREATMENT FOR EXPECTANT AND NURSING MOTHERS, AND CHILDREN UNDER FIVE YEARS OF AGE.

The year 1958 commenced with a Dental Staff of six full-time and one part-time Dentists, including the Principal Dental Officer. In April another Dental Officer joined the staff so that from then to the end of the year there were seven full-time, and one part-time, officers on duty. There remained one unfilled vacancy, but there was no applicant for the post.

Whilst it was not possible, with the dental staff available, to carry out routine dental inspections of Maternity and Child Welfare patients in addition to the school work allotted to them, a satisfactory service was maintained as regards treatment. The treatment available was comprehensive, including provision of free dentures for nursing and expectant mothers and young children. The Dental Clinics were held in eleven of the County's Clinic premises situated in convenient localities. Cases examined at Maternity and Child Welfare Clinics and recommended for dental treatment did not all accept the offer,

some making their own arrangements. However, those who made a first visit to the dental clinic did, generally, complete the treatment.

HEALTH CENTRES AND CLINICS.

During 1958 there was no change in the operation of the Health Centres at Tredegar, Rhymney, Ebbw Vale and Blaenavon, and their smooth operation continued.

CLINICS.

The only new clinic opened during the year was at "The Grove", Tredegar. This large house was intended to house numerous clinic services but was in need of certain structural alterations before it could come into full service. However, it was opened on a temporary basis on the 24th September, 1958, pending the attention of the building contractors and until the end of the year clinics for defective vision, orthoptics, ear, nose and throat ailments, speech therapy, audiology and teaching of the deaf were conducted there.

SPECIALIST CONSULTANT SERVICES.

On page one of this report will be found a list of names of Medical and Surgical Consultants whose services were available to the County Council at Clinics, etc. With the exception of the Consultant Orthopaedic Clinic, which was held in various parts of the County, all the sessions were held at the Central Clinic at Stanley Road, Newport. Appointments for other specialist examinations were made, with the approval of the general practitioners concerned, at Out-patient Departments at the major hospitals in the area.

HOME NURSING SERVICE.

It is now 10 years since the Home Nursing Service became the direct responsibility of the County Council.

During this time the service has grown. In 1950 the total number of visits to patients was 262,552, in 1958, the number of visits was 327,336.

The service has worked smoothly, the district nurses receiving instructions from the General Practitioners to visit and treat patients.

The care of the Elderly Sick patient continues to be an important part of district nursing work. During the year three Oxford Hoists were bought to be loaned to elderly sick and handicapped patients. They have proved their worth and have been the means of allowing some handicapped persons, who must otherwise have gone into hospital, remaining at home.

During the year the district nurses visited St. Lawrence Hospital Burns and Plastic Surgery Unit at Chepstow, and the Radiology Unit at Whitechurch to see the type of work done.

The Home Nursing Service assists the School Medical Service, especially with the treatment of children suffering from Otorrhoea.

The Staff comprised a full-time Supervisor, 60 Full-time District Nurses, 35 Part-time District Nurses and 9 District Nurse Midwives. Of the 60 Full-time District Nurses 28 use motor-cars for their work and are paid a mileage allowance by the County Council.

THE NIGHT-ATTENDANT SERVICE.

Night-Attendants are provided by the Council to attend at the homes of seriously ill patients who are either living alone at home or with relatives to whom it is essential to give relief so that they may take some rest. It is generally a short-term provision intended to cover situations such as when the patient is dying, serious illness from which the patient may recover or the period of waiting for admission to hospital.

The Night-Attendant's duties are chiefly connected with toilet matters simple nursing procedures and changing of soiled linen.

Requests for the facilities of the Service generally came from the medical practitioner in charge of the case or from a Home Nurse with his approval and if the need is urgent efforts are made to supply an attendant immediately. In all cases a Medical Officer of the Council's Staff visits and makes the necessary recommendation.

The Service has always proved equal to the demand, and in 1958 about twice the number of cases were dealt with compared with 1957.

Charges are made to patients according to an income assessment, but where a Home Help is already in the home, no charge is made, as charges are not made for two simultaneous services in the one home.

GERIATIC SERVICE.

The number of cases referred to the Geriatric Service during 1958 for domiciliary physiotherapy was but little increased over the previous year. Of the 126 cases referred twelve were found on visiting by the Council's Medical Officer to be unsuitable for treatment, and three were removed to hospital before physiotherapy could be commenced.

Hemiplegic patients have formed the largest single group in the last five years. To differentiate between those who have suffered from cerebral throm-

bosis as from cerebral haemorrhage is often difficult, yet 75% of these patients have diastolic blood-pressures of more than 100 m.m. mercury. With greater use of hypotensive drugs amongst the middle aged it may be that we shall see fewer of these distressing cases in the future.

Few rheumatoid arthritics are seen in the early stages of the disease; most of them are confined to the home or a chair when the first visit is made. Some have already been seen at major Rheumatoid Centres. Provided that treatment is continued for long enough, some improvement in the patient's condition occurs. Unfortunately, a relapse is common after physiotherapy is stopped. 17 patients were treated in 1958.

Patients continue to be referred to the Geriatric Service by General Practitioners, Auxiliary Medical Staff, and Hospitals for a variety of reasons. One, the admission of an elderly patient to hospital is often the cause of considerable worry. It is hoped that this difficulty will gradually be removed.

The Geriatric Service, by organising physiotherapy and other support in the home, is making the earlier discharge of some cases possible, and avoids the necessity of hospital treatment for others. The need for hospital beds is therefore, being reduced and the pressure relieved a little.

DOMICILIARY HEALTH SERVICES FOR THE CHRONIC SICK AND INFIRM.

Circular 14/57 dated 7th October, 1957, from the Ministry of Health, was presented to the Monmouthshire Health Committee at its November, 1957, meeting for discussion. It was decided to refer the matter for further consideration before a joint Sub-Committee composed of members of the Health and Welfare Committees. This Sub-Committee met in the same month when it was reported that at that time Home Nurses did not visit Old People's Hostels, nor was it the practice to ensure that the Staffs of such Homes should include at least one or two persons with nursing experience. Arrangements were made for Home Nurses to attend as required and to give injections or other nursing attention necessary.

The co-operation between the Geriatric Hospitals in Monmouthshire and the Council's Geriatric Service has reached a high standard. About ten per cent of the patients who enter St. James' Hospital Geriatric Unit for a short period have had their illness detected at an early stage and reported by the general medical practitioners. This has resulted in the patients receiving early treatment by the Council's Geriatric Service before entering Hospital. Upon discharge from Hospital they revert to the Geriatric Service for further treatment. Before the patients are discharged from Hospital, the Almoners, in association with the Health Visitors, ascertain the home conditions to ensure

that they are suitable for the patient's return. Where necessary, Home Helps are provided, also visits by Home Nurses together with the provision of medical comforts and appliances.

Medical Officers of the Council's Staff pay regular visits to the Old People's Hostels to supervise the health of the patients.

About three-quarters of the Home Help and two-thirds of the Home Nursing Services are devoted to the care of persons in the pensionable age group.

A Night Orderly Service is provided where there is a case of genuine need. The Orderlies sit up at night with seriously ill patients who are either living alone or who are living with relatives to whom it is essential to give relief, so that they may be able to take some rest. The usual maximum allocation is five nights, of eight hours each, per week. In certain cases, when the alternative would be to leave the patient unattended for the weekend, this is extended to seven nights per week, and the provision is continued until the emergency is passed.

There is thus available, when needed, to all old people living in their homes or Hostels in the County the services of Home Nurses, Home Helps, Physiotherapists, Medical Officers, experienced in diseases of old persons (including in exceptional cases the services of a Geriatric Specialist) and the Medical Appliances Service. All these are administered by the Health Department.

THE HOME HELP SERVICE.

The Home Help Service continues to expand in services rendered and in cost.

To the aged, the housebound and the lonely, the Home Help is often the only contact with the outside world. Every effort is made to ensure that the Home Help gives more than practical domestic help. She endeavours to bring hope and interest to the home, and where possible, to take the place of the "nursing relative".

The employment of selected Home Helps as "Family Helps" has been referred to under the heading of Problem Families.

PROBLEM FAMILIES.

Problem families have been described in last year's Annual Report and their cases are still dealt with by the Co-ordinating Committees.

Experienced Home Helps are used in the homes of problem families, and are being found to be of considerable value. Where a Co-ordinating Committee considers that a home is in danger of breaking up because of the inability of the mother to cope with her household duties, a "Family Help" is recommended. A selected Home Help is briefed in the special difficulties arising in the home and she endeavours to give the family the instruction and help which it needs to hold it together. Through her Supervisor the Home Help has contact with all the Welfare and special Services likely to be of benefit to the Problem Family.

This Scheme, which is experimental, has had a greater degree of success than was anticipated. The Home Helps selected have shown great tolerance, and have displayed a natural aptitude for this important work.

It should be mentioned here that a Health Visitor can, and does, perform a valuable service by anticipating the development of a problem family before it actually reaches a serious state.

One can arrive at such a state of frustration by the exhibition of indifference to offers of help, and evidence of gross ingratitude, that instances of success are cherished by the staff concerned. It might help to give a short description of a particular case.

Mrs. X was a widow with four children, who had never recovered from the death of her husband. The home had become neglected and dirty with the children undisciplined and unruly. After consideration of the family a Family Help was provided but Mrs. X's attitude to her was sullen and unresponsive. In addition, she showed antagonism to all visitors. Paint, distemper and clothing were obtained from various sources and Mrs. X began to show dim appreciation of the fact that the Family Help and her Supervisor, who paid frequent visits, were indeed friends, and she began to exert some restraining influence on the children. The culminating point arose, however, when Mrs. X by accident over-heard some neighbours criticising her and also heard the Family Help vigorously defending her and explaining her troubles. As a result of this, Mrs. X improved very markedly in all ways and her neighbour developed into a true friend upon whom she could depend for help. The Family Help was withdrawn, the improvement continued, and Mrs. X looked forward to friendly visits from the Family Help and Supervisor, and indeed complained if the visits were infrequent. These two officials had become "Aunts" of the children!

THE MEDICAL COMFORTS AND APPLIANCES SCHEME.

This scheme is organised and operated by the Council's Medical Appliances Officer and serves patients who are in need of nursing equipment in order to facilitate their early recovery and to help in the home nursing. The

equipment is supplied "on loan" to patients with "changing need", that is who are expected to require the items for a limited and temporary period. The scheme is not intended for the supply of appliances permanently in need except in the case of paraplegics. In the latter type of case, all reasonable needs are met and under Section 28 of the National Health Service Act, items are supplied such as hospital-type beds, dunlopillo mattresses and pillows, bed pulleys, commodes, etc.

A central depot of equipment is maintained and 61 local depots are supplied on demand with articles from this. Most of the local depots were situated in premises belonging to the St. John Ambulance or the British Red Cross Society, to whom the Council paid a small annual sum as rental. These organisations undertook the issue and return of articles from their premises, but in many cases it was difficult to recover the instruments owing to a number of reasons.

The Medical Appliances Officer has in many cases to display sympathy and tact and gives advice to patients as to how to obtain items likely to be in long use. It is sometimes difficult to explain why, say, an invalid wheel chair should be called in, when in the patient's view it is permanently necessary. Advice is given as to how to make application to the Regional Hospital Board.

Much appreciation is expressed by patients for this service, and on one occasion it was touching to hear a sorely-stricken crippled silicotic elderly man say how good everyone was, and how much he had to be thankful for.

CONVALESCENT TREATMENT.

The scheme for the provision of convalescent treatment of adult males and females continued during 1958, and admissions were made to "The Rest" Convalescent Homes, Porthcawl. It was necessary for patients' applications to be supported by a Medical Certificate and for the cases to be investigated by Medical Officers of the Council. Assessment of ability of the patient to pay the whole or part of financial maintenance was a condition of application, and it was necessary for the patient to be ambulant and able to attend to his/her own personal needs.

The County Council accepted financial responsibility for maintenance, less the amount which the patient was assessed as being able to pay.

Expedition of return to health and ability to resume employment after illness was the object of the scheme, but in fact it was found that most applications were received from elderly persons, albeit they were in need of convalescence following illness.

There were no children in convalescent homes during the year.

THE DOMICILIARY MIDWIFERY SERVICE.

Although the Domiciliary Midwifery Service functioned very efficiently during 1958, at the end of the year the staff had been reduced by three County Midwives and two Home-Nurse Midwives. This inevitably resulted in extra strain on the service, but all demands were satisfied. In spite of the depletion of staff, it will be seen from the information in the Appendix that there was an increase in the number of Ante-Natal visits made and the number of births and miscarriages attended. It had also become the practice of hospitals to discharge maternity cases considerably under the normal period of fourteen days. This meant that the County Midwives were called upon to visit the patients daily until the fourteenth day, and it will also be observed that in the last year the number of early-discharged patients had risen by about 1,300, and the resultant number of extra daily visits by about 6,000.

The Service operated under the supervision of a Senior Medical Officer, and a non-medical Supervisor, who made periodic visits and carried out inspections of equipment.

Fourteen cases of puerperal pyrexia were notified, but all made uneventful recoveries.

Gas and Air Analgesia continued to be available to all patients physically fit to receive it and all County Midwives had possession of apparatus allocated to them. There were no sets in use for the administration of "Trilene". The number of cases in which pethidine was administered by Midwives when acting in the absence of a doctor, was reduced to about 60% of the number recorded for the previous year.

There was good co-operation between the service and the general medical practitioners, and midwives paid ante-natal visits to the patients' homes to ensure that medical advice was followed.

Three County Midwives attended a refresher course at Cardiff and three at Bristol during 1958.

The Medical Supervisor of Midwives paid half-yearly visits to Maternity Homes and she investigated any outbreaks of infection reported.

In August, 1958, an outbreak of Staphylococcal infection occurred at the Caerphilly District Miners' Hospital and maternity cases, including those from Monmouthshire, were discharged to their homes or to other hospitals. The maternity section of the Hospital remained closed from August 13th—August 24th.

St. James' Hospital, Tredegar, was a recognised training centre for Part II of the Central Midwives Board Certificate. The instruction included domiciliary work in the Tredegar, Rhymney and Ebbw Vale areas, under the supervision of County Midwives who have been approved as teachers by the Central Midwives Board.

CARE OF PREMATURE INFANTS.

Arrangements still exist for transference, as quickly as possible, to hospital of all babies born weighing $3\frac{1}{2}$ lbs. or less, those over $3\frac{1}{2}$ lbs. if very immature and those with unsatisfactory conditions for nursing at home. The County Ambulance Service provides the Ambulance together with necessary equipment. In these cases the Midwife sends a Medical Aid request form to the family doctor who authorises the removal of the child, and the Midwife has instructions as to how to proceed to obtain the ambulance etc. If possible, the mother goes to hospital with the infant and if the Midwife cannot leave the patient a relative or neighbour travels with the infant.

Premature infants are received at the County Hospital, Griffithstown, and St. James' Hospital, Tredegar, whilst special cases may be sent to St. David's Hospital, Cardiff.

None of the County Midwives or Health Visitors is specially trained in the care of premature infants.

During 1958 the number of premature live births showed a slight decrease on 1957; there were five more premature still-births.

Special cots were available for the home nursing of premature infants and were deposited at the following addresses, but as hospital admission is arranged in almost every case there has been no call upon them:—

1. Mrs. Maiden,
5, Treowen Road,
Newbridge, Mon.
2. Mrs. Bowen,
29, Victoria Road,
Pontypool.
3. Mrs. S. Hobbs,
1, Sannan Street,
Aberbargoed.

4. Miss G. C. Morgan,
The Clinic, Market Street,
Tredegar.
5. Mrs. MacKinnon (nee Tong)
12, St. Thomas Square,
Monmouth.
6. Mrs. E. Oriel,
34, Mathern Road,
Bulwark,
Chepstow, Mon.

HEALTH EDUCATION.

The Council was still without a Health Education Officer during 1958, and this work was supervised as previously, by the Superintendent Health Visitor.

The term "Health Education" embraces a wide variety of methods of bringing to the attention of the public the infinite number of ways in which life and limb may be protected. Every time advice is given to a member of the public, be it by Medical Officer, Health Visitor, Home Nurse or other Officer, then Health Education is being practised. The points which have to be well considered, are the most effective methods of conveying the message intended. With some people "shock tactics" in the way of startling posters may be effective, yet those same methods may be repulsive to others. What has to be done is to get rid of that "it couldn't happen to me" attitude and make people realise that everyone is susceptible to disease and injury.

All professional members of a Health Department Staff can contribute to Health Education, and indeed a great deal is done in this way. At Antenatal Clinics much good work is done by Health Visitors, and this is followed up at Infant Welfare Centres. At a number of these Centres, Mothercraft Classes are held, and little clubs are formed, complete with organised summer outings for parents and children to the seaside. At at least one of these centres, lectures on health education were arranged late in the afternoon so that some children from the local school could attend after classes. It was found that they were most attentive provided that the lecture was short and interesting and was provided with illustrations. These children were told to pass-on to other children the information received and to tell them if they contravened the "laws" of the subject. This caused an amusing incident in one home. A child was being upbraided by her mother for loitering in her preparations for school and was told she would miss the school bus. To her surprise the mother received the reply: "Well, mummy, which is the more important, for me to wash my hands after using the toilet, or to catch the school bus?"

At lectures given by Health Visitors a film-strip projector was widely used as also were flannelgraphs, and many simple causes of accidents or disease, such as placing milk bottles at the door out of reach of animals, watching that floor-coverings do not have loops of worn materials, were pointed out in addition to many others. The subject of Smoking and Lung Cancer was invariably dealt with.

During the week commencing 4th August, 1958, the National Eisteddfod of Wales was held at Ebbw Vale, and at this the Council presented an impressive Health Exhibition as part of its scheme for Health Education. Included in the Exhibition were sections devoted to School Health, Mental Health,

Child Guidance, Detection of Deafness in Young Children, Home Nursing, Midwifery, Home Helps, Geriatrics and Physiotherapy, Maternity and Child Welfare, Physical Handicaps and Medical Appliances. The Exhibition created much interest, and credit was due to the Staff who arranged the exhibits and also attended during the week to answer questions and give information and advice.

On April 29th and 30th, 1958, a two-day course on Dental Health Education was held at the County Hall, Newport, under the chairmanship of Councillor W. H. Palmer, Vice-Chairman of the Health Committee. This Course was for the Staff of the Health Department and was arranged by the Central Council for Health Education who provided the following speakers: A. I. Darling, Esq., D.D.Sc., F.D.S., L.R.C.P., M.R.C.S., Professor of Dental Surgery, University of Bristol, A. J. Dalzell-Ward, Esq., M.R.C.S., L.R.C.P., D.P.H., Deputy Medical Director, The Central Council for Health Education, and D. Lynton Porter, Esq., Education Officer, The Central Council for Health Education.

The subjects dealt with were:—

The Process of Dental Caries and its Cause.

Caries and its Prevention—A Community Problem.

Principle of Health Education as applied to the Problem of Dental Health.

Methods and Media of Health Education in the Field of Dental Health.

The lectures were followed by Group Discussions.

PREVENTION OF BLINDNESS AND CARE OF BLIND PERSONS.

The certification of Blindness or Partial Sight is the responsibility of the County Medical Officer's Department, but the welfare of these persons, as provided for by the National Assistance Act, 1948, was the province of the County Welfare Department.

Cases of suspected blindness or partial sight coming to the notice of general medical practitioners, local Welfare Officers or officers of the National Assistance Board are referred to the Health Department and arrangements are made for examination by ophthalmologists of Consultant status. Where the patients are fit to travel they are seen at Newport Clinic but otherwise they are visited at home. After the examination the case papers are forwarded to the County Welfare Officer for registration and other attention.

Hospital admissions are sought for patients in need of surgical treatment for cataract or other eye conditions.

NOTIFIABLE DISEASES.

Smallpox.

There were no cases of Smallpox in the County during 1958. Vaccination of infants against this disease is not compulsory and there appears to be a considerable degree of indifference regarding it on the part of the mothers. Efforts are made at clinics to combat this indifference.

Vaccinations are carried out by Medical Officers at the Clinics and also by general medical practitioners taking part in the vaccination and immunisation scheme.

There were no cases of generalised vaccinia or post-vaccinal encephalomyelitis during the year, and there were no deaths from complications of vaccination.

Scarlet Fever.

There was a slight increase in the number of notifications over 1957.

Diphtheria.

For the fourth consecutive year there were no cases of Diphtheria in the County of Monmouth.

Immunisation against diphtheria is carried out at Infant Welfare Clinics and Schools and also by general medical practitioners. Freedom from the disease is undoubtedly the result of the immunisation scheme, but its success can only continue if the level of immunity in the child population is maintained.

Meningococcal Infection.

One death occurred in 1958 from this condition.

Acute Poliomyelitis.

In 1957 there were 63 cases of acute poliomyelitis notified, with three deaths. During 1958, 7 cases were notified with no deaths. It has been assumed that hot dry summers were the danger periods for the spread of this disease. In 1958 the early part of the summer was of good weather, but about the end of June, wet weather set in and the rest of the summer was quite wet. It was in fact, not the kind of weather to expect an outbreak of poliomyelitis. The poliomyelitis vaccination scheme commenced in May, 1956, and while it was to be hoped that this was in great part responsible for the small number of cases, in view of the bad weather it was not possible to be definite in this assumption.

Chicken Pox.

This disease was not compulsorily notifiable.

Measles.

Measles has a peculiar character of having a biannual "pendulum swing", outbreaks commonly occurring in alternate years. 1957 was one of the years of rather a high number of notifications but 1958 did not take the usual course of returning a low number. Two deaths were recorded.

Whooping Cough.

Although the number of notifications was about the same as last year the level was lower than for the previous five years. There were no deaths from Whooping Cough in 1958.

Influenza.

In 1957 the Asian Influenza epidemic occurred and 60 deaths from Influenza were reported. In 1958 there was no significant outbreak of Influenza and the number of deaths from the disease returned to about "normal" level.

Acute Pneumonia.

The number of deaths from Acute Pneumonia was slightly less than for the previous five years.

DEATHS FROM CANCER.

In 1958 there were 582 deaths from all forms of cancer, this being 10 less than in the previous year. In spite of this overall reduction, however, there were 18 more deaths from cancer of the lung and bronchus. In the appendix will be found tables giving further details.

TUBERCULOSIS.

Reference to later pages of this Report will give figures regarding the notification and death-rate of tuberculosis. The decline in the notification rate of pulmonary tuberculosis has continued for many years, and manifested itself again in 1958, while the death rate remained at the same figure as for 1957. The non-pulmonary notification and death rate showed a slight increase over 1956 and 1957 but the actual numbers concerned were small.

The gradual, but striking, reduction in the number of deaths from tuberculosis, which has occurred in the last ten years or so is a tribute to the methods which have been employed both in detection and treatment. Detection of the disease in its early stages and investigation of those persons who are at risk, has rendered treatment much more effective. The contribution of

the local health authority to the early detection has been by way of tuberculin skin testing of children, subject to parental consent, at Infant Welfare Centres, at time of entrance to school and on leaving school. Positive reactors have been reported to the Chest Physician for further investigation. Mass Radiography at schools has also helped and all patients attending the Ante-Natal Clinics have been referred as a routine for X-ray examination of chest.

B.C.G. Vaccination is one of the weapons of prevention, and numerous cases arise at Clinics where parents ask for it owing to the occurrence of a case near them. These requests are passed on to the Chest Physicians. B.C.G. Vaccination is now also carried out in the schools, the pupils selected for it being those between thirteen and fourteen years of age. Here again, parental consent is necessary and generally only about 50% of the parents signify their consent.

Mass Radiography is controlled by the Welsh Regional Hospital Board Mass Radiography Service, which arranges for visits by mobile units, and is also responsible for a static unit at Wrenford Hall, Commercial Street, Newport, where members of the public may attend on certain days without appointment.

From another aspect, no doubt the gradual elimination of tuberculosis from the milking herds, and the wide use of pasteurisation of milk has been a factor in reducing the incidence of non-pulmonary tuberculosis.

Instruction in personal hygiene has helped to prevent the spread of the disease in the home, and in this the Health Visitor has played a part, and patients are provided with sputum flasks, disposable handkerchiefs, disinfectant and wash-bags.

The preventive measures and after care of tuberculosis is in the care of the County Council, and close co-operation is maintained with the Chest Physicians, whilst financial allowances are administered by the National Assistance Board. District Councils take all possible measures to prevent housing overcrowding or disrepair in tuberculosis families.

Convalescent treatment is provided, when it can be proved that the case is within the requirements of "after-care" and is recommended by the Chest Physician, and materials are provided such as basket-making materials, embroidery requirements, etc., when required for rehabilitation work.

Prevention of Tuberculosis in Schools.

For a number of years it has been the practice of the School Health Department to arrange for X-ray examination of school entrants and leavers

by means of a tour of the County by a Mobile Mass Radiography Unit of the Welsh Regional Hospital Board. In 1958, however, there was heavy pressure upon the staff of the School Health Department owing to the operation of the Poliomyelitis Vaccination scheme, and this, coupled with certain other considerations made it desirable that the mass radiography of school entrants and leavers should be suspended for the year.

However, the B.C.G. Vaccination Scheme was continued and the "tour" commenced in the Autumn of 1957, was completed early in 1958. In early 1958, 628 children were tuberculin skin tested and 518 yielded negative results. Of these 517 were vaccinated with B.C.G. vaccine. During the same months tuberculin skin tests were carried out on 1,929 children who had previously been vaccinated, and 1,835 gave positive results, showing that the vaccination had been successful. In the case of the 94 children yielding negative skin tests, these were listed for further testing later, and re-vaccination if necessary.

In the Autumn of 1958 registration cards were distributed to the schools in order to obtain parental consent for the new eligible children, but the actual testing and vaccination spread into 1959.

POLIOMYELITIS VACCINATION.

Further to my last year's Report, during the early part of 1958, supplies of Poliomyelitis Vaccine began to be increased by the distribution of imported materials which had been tested for potency and safety in this country as well as in the country of origin. In the course of a few months, however, these stocks began to be supplemented by imported vaccine which had not been tested in this country, but had been tested in the country of manufacture. In May and June the flow reached its peak, and in spite of a large increase in the number of injections being continually given, on June 30th, 1959, there was a total stock of nearly 45,000 doses in our refrigerators.

I mentioned in my previous report that considerable economy of time and effort would be effected by carrying out poliomyelitis vaccination of the newly eligible group of secondary school pupils at their schools. 47 Secondary Schools were visited for this purpose and the vaccinations carried out on the spot.

As instructed by Circular 16/57 (Wales) dated 19th November, 1957, from the Welsh Board of Health, vaccination was offered to Expectant Mothers, and also to general medical practitioners and local health authority ambulance staff, as being specially exposed to infection, and to the families (i.e., persons normally resident in their household) of these latter two groups; also the families of staff of hospitals where poliomyelitis cases are treated

during the infectious stage and with which the staff are likely to be in close contact. The circular also authorised the extension of the age groups to include children up to the age of 15 years, and children born in 1957 who had reached the age of 6 months.

Another Circular, 20/58 (Wales) dated 2nd September, 1958, intimated that the offer of vaccination should be extended to persons born in the years 1933-1942. A number of the persons in this new group would still be at school and arrangements were made for applicants to be vaccinated at clinics. They were also given the option of having the injections carried out by their general medical practitioner. Again, Press advertisements were used to advertise the extension.

Further, instructions were received that third injections should now be given to children who had already received two injections. The third was to be given not less than 7 months after the second, and priority was to be given to persons awaiting first or second injections.

By the end of 1958 the number of applications from persons in the 15-25 year old age group was negligible, but arrangements were in hand for a concentrated publicity campaign to be continued early in 1959, and this will be commented upon in my Report for that year.

EARLY DIAGNOSIS AND TREATMENT OF DEAFNESS AMONG CHILDREN.

Further to my report for 1957, the Scheme for Early Diagnosis and Treatment of Deafness among children proceeded, the necessary technical equipment having been obtained. A room at the School Clinic, Stanley Road, Newport, was rendered sound-proof and on 1st February, 1958, Sister B. Pearce commenced duties as special nurse attached to the Audiology Unit. On the 1st May, 1958, Miss Audrey Guy, who was specially qualified, joined the staff as a Teacher of the Deaf.

Most of the clinic work was carried out at the Stanley Road Clinic, Newport, but towards the end of the year some preliminary testing was carried out at the clinic at "The Grove", Tredegar. Arrangements were commenced for the provision at "The Grove" of the special requirements of the Audiology Clinic and it was hoped that this work would be completed in 1959.

The Audiology Unit worked under the direction of Mr. D. B. Sutton, Consultant Ear, Nose and Throat Surgeon, and was staffed by a Senior Medical Officer of the Council's Staff and who had received special training in the work, a special clinic nurse, and later, a specially qualified Teacher of the Deaf. Hearing aids were provided according to individual needs and included aids supplied under the National Health Service and also commercial aids which were specially suited for certain cases of selective deafness. The Min-

ister of Education had given his sanction for the provision of the latter type, subject to his approval in every individual case. The cost of the commercial hearing aids was borne by the Monmouthshire County Council and the expenditure ranked for grant. A substantial discount was obtained in the purchase of the instruments.

It was anticipated that Health Visitors would contribute to the success of the scheme for detecting deafness at a very early age, and with this in mind, negotiations were carried out with the Department for the Education of the Deaf at Manchester University, for a visit by Dr. Ian Taylor for the purpose of giving instruction to Health Visitors.

Dr. Taylor attended at the School Clinic, Stanley Road, Newport, on 14th and 15th January, when he lectured to a number of Health Visitors on testing young children for deafness. The Health Visitors were requested to apply the knowledge they had gained and refer any suspected cases of hearing defect to the Medical Officer of the Audiology Unit. On 10th July, 1958, Dr. Taylor paid another visit to the Stanley Road Clinic and observed the methods of the Health Visitors, who had by now been able to obtain some experience of testing in their own infant welfare clinics. Following this he gave further instruction.

The following is a report upon the work of the Audiology Unit during 1958.

A. Deafness in the Recently-born.

Monmouthshire has a population of 327,500 and there were approximately 2,790 live births in the Administrative County during the half-year January to June, 1958. During 1958 a survey of all babies in the obstetric groups at risk, born in the County during the six months, was carried out. Information regarding abnormal ante-natal history or birth was obtained by the Medical Officer of the Audiology Unit by inspection of the Domiciliary Midwives Register of Births and also by visits to Hospitals with maternity accommodation.

286 babies were selected for testing for hearing loss, and these were screened by the Medical Officer, with the help of one or other of the Audiology team. The method of testing was the one commonly known as the Distraction Technique. One tester acting in the roles of Observer and Distractor faced the baby while the other examiner tested by the acuity of hearing on both sides, by means of the human voice, cup and spoon, and high-pitch rattle, screened to exclude all sounds below 4,000 cycles. Lack of response to these sounds within normal range of hearing, i.e., 3 feet for the younger babies of 6-9 months of age; 4 feet for the older babies of 9-12 months of age, together with satisfactory testing conditions, was deemed sufficient to qualify the child for a re-test.

Number of babies screened	...	...	...	256
" " " failing first screening	...	...	...	27
" " " failing clinical examination	...	...	...	13
" " " visited but not seen (died, removed, refused, etc.)	...	...	...	27

The babies which failed to pass the initial screening and a repeat test, and also failed to pass the subsequent clinical examination were found to fall into the following obstetrical groups:—

Toxaemia of pregnancy.

Asphyxia.

Prematurity.

B. Deafness in the Pre-School Child.

CASES SEEN IN THE AUDIOLOGY CLINIC, FOR DIAGNOSIS, IN 1958.

	<i>New</i>	<i>Old</i>	<i>Total</i>
Conductive Deafness	8	3	11
Nerve Deafness	15	5	20
Total cases investigated	22	9	31

Surgery for Conductive Deafness in 1958.

Tonsils and Adenoids removed	3	1	4
Tonsils and Adenoids and Proof Puncture of Antra	1	1	2

In each case the result was satisfactory and normal hearing was restored.

Nerve Deafness.

Number of cases of Nerve Deafness under continual supervision by the teacher of the Deaf and the Audiology Unit in 1958:—

Children of normal intelligence, with no other handicap	11
Children with Cerebral Palsy	8
Children severely retarded, mentally and physically	7

C. Deafness in School Children.

CASES SEEN IN AUDIOLOGY CLINIC FOR DIAGNOSIS IN 1958.

	<i>New</i>	<i>Old</i>	<i>Total</i>
Total children aged 5-10 years	45	34	79
Total children aged 10-15 years	29	39	68
Cases of Nerve Deafness in 5-10 years group	8	11	19
Cases of Nerve Deafness in 10-15 years group	4	12	16
Cases of Conductive Deafness in 5-10 years	36	24	60
Cases of Conductive Deafness in 10-15 years	24	28	52

Nerve Deafness.

Number of cases of nerve deafness, under continual supervision of the teacher of the Deaf, and the Audiology Unit:—

(i) Children of normal intelligence, in School

5-10 years of age	...	...	...	...	...	24
10-15 years of age	...	...	...	...	...	30

(ii) Children with Cerebral Palsy

5-10 years of age	...	...	...	...	...	4
10-15 years of age	...	...	...	...	...	1

(iii) Children with Mental Retardation

5-10 years of age	...	...	...	...	...	6
Over 10 years of age	...	...	...	...	...	7

Conductive Deafness.

Surgery for conductive deafness in 1958:

	<i>New</i>	<i>Old</i>	<i>Total</i>
Proof Puncture of Antra	1	11	12
(Still requiring supervision thereafter)	0	0	0
Tonsils and Adenoids removed	4	3	7
(Still requiring supervision thereafter)	3	3	6
Tonsils and Adenoids and Proof Puncture of Antra	12	0	12
(Still requiring supervision thereafter)	2	0	2
Removal of Adenoids	1	2	3
(Still requiring supervision thereafter)	0	0	0
Removal of Adenoids and Proof Puncture of Antra	1	2	3
(Still requiring supervision thereafter)	0	2	2
Politzerisation	1	1	2
(Still requiring supervision thereafter)	0	0	0
Mastoidectomy	0	3	3
(Still requiring supervision thereafter)	0	3	3
Tympanoplasty	0	1	1
(Still requiring supervision thereafter)	0	1	1
Cerumen and Foreign Bodies	2	0	2
(Still requiring supervision thereafter)	0	0	0

D. Conductive Deafness (Otitis Media) in School Children.

All first-occasion discharges from the ears were notified to the Audiology Unit by the Staff of the Health Department within the first few weeks of occurrence. The Audiology Unit gave instruction to Home Nurses in the technique of treatment, as prescribed by the Director of the Unit and also in the use of auriscopes, which were supplied to all Nurses. Verification was obtained that the initial discharge had ceased, thus for the time being, preventing progress towards chronic ear discharge and subsequent deafness.

The occasional recurrences of the initial ear discharge (less than 10% of the total) were reported again to the Audiology Unit within a week of recurrence and repetition treatment dried the discharge in less time than the initial attack.

The initial treatment consisted of daily dry swabbing and instillation of spirit drops, and no case was prescribed antibiotic treatment without first ascertaining the sensitivity of the causative organisms.

52 cases of children who had long-standing otorrhoea prior to attendance at the Audiology Clinic and had a hearing loss of 20 decibels or more in one or both ears were dealt with during the year and 13 were provided with the National Health Service Monopak Hearing Aid and 1 with a Commercial Aid.

AUDIOLOGY TEAM, 1958.

E. Survey of Hearing Acuity in an Occupation Centre for Mentally Handicapped.

Number of children seen	...	...	...	...	...	92
Number of cases of intermittent otorrhoea and deafness	...	...	...	...	...	2
Number of children with perceptive and executive aphasia	...	...	...	...	...	3
Number of spastic children with nerve deafness	...	...	...	...	...	5
Others under observation as possibly deaf	...	...	...	...	...	1
Number for whom hearing aids were subsequently ordered	...	...	...	...	...	4

The Teacher of the Deaf keeps the defective children under supervision, and pays weekly visits to the Centre.

F. Survey of Hearing Acuity in Hilston Park Residential School for Educationally Sub-normal Boys.

Number of boys seen	...	...	...	...	...	42
Number of boys with normal audiographs (less than 20 db. loss in any frequency)	...	...	...	...	...	14
(i) Number of boys with one ear defective (i.e., more than 30 db. loss in 2 or more frequencies)	...	...	...	...	...	14

Number of boys in (i) with more than 40 db. loss in 2 or more frequencies	...	...	...	...	...	3
(ii) Number of boys with both ears defective (i.e., more than 30 db. loss in 2 or more frequencies)	...	...	...	...	...	13
Number of boys in (ii) with more than 40 db. loss in 2 or more frequencies	...	...	...	...	...	8

Subsequent testing of these cases six months later, confirmed these patterns. The method of testing was one suitable to children with a mental age of five years or over, i.e., by condition reflexes to pure tones. Furthermore there was no correlation between the lower intelligence indices and defective hearing; and where there was only one defective, it was frequently found to be the second ear tested, when it would have been thought that the child should have become more familiar with the testing situation.

A further re-test, a year later, confirmed the original pattern.

G. Hearing Aids Prescribed in 1958.

	<i>National Health Service.</i>	<i>Commercial.</i>
By the Audiology Unit	19	18
Known to have been prescribed otherwise...	4	—

H. Sources of Reference of Cases in 1958.

Categories: Possible deafness; discharging ears.

Cases referred by:—

Area Medical Officers	...	...	...	...	20
Assistant Medical Officers	...	...	...	...	75
Health Visitors	...	...	...	...	17
Consultants	...	...	...	...	14
Physiotherapist	...	...	...	...	4
Child Guidance Clinic	...	...	...	...	9
Speech Therapist	...	...	...	...	10
Infant Welfare Clinics	...	...	...	...	15
Parents	...	...	...	...	10
Head Teachers	...	...	...	...	4
					178

Audiology Team.

(Obstetrical Group Survey)	...	...	...	...	286
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A NEW STEP.

It has been found to be a most rewarding procedure to arrange for medical or senior administrative staff to see some of the clinics, special schools or special services with which they are associated, actually in action. An insight into the conditions or treatment of children gives the human touch to what may otherwise be a normal routine act. Particularly with regard to the indoor administrative senior clerical staff has this been of value. One instance, which served to convert a name on paper to its personal embodiment, occurred when into the office of a senior clerk in the School Health Department one day a little girl of about 7 years entered with her mother. Whilst one officer was attending to the mother, the senior clerk endeavoured to get into friendly conversation with the child. First he asked her name but not much success attended his efforts and as he formed the opinion that the unfortunate girl was backward, he was about to give up the attempt. Just then he noticed the other clerk hand back to the mother a small commercial hearing-aid, to which he had fitted a new cord. The mother adjusted it to the child and immediately her face lit up, she became animated where she had been dull, and now answered questions with alacrity. In fact she became a normal charming child, who afterwards always remained in that senior clerk's memory as a personality rather than just a name which had occurred on his desk many times for various appointments.

REPORT OF THE AMBULANCE SERVICE FOR 1958.

The Council's Ambulance Service arrangements had proved adequate to deal with all calls upon them during the year and no major difficulties had been experienced.

Since the re-organisation of the Ambulance Service on the lines of the amended scheme approved by the Ministry of Health in 1950, there had been no extension of the scheme other than the addition of two ambulances in 1952, increasing the total establishment of vehicles from 43 to 45 maximum.

The amended scheme had been devised with an anticipation of increasing need for ambulance transport as the public became educated in the use of the various free Health Services and development of the Ambulance Service had been regulated to meet all such increases.

In 1950 there were 64,388 patients conveyed in the Council's Ambulances, but during the past eight years, the number of patients using the ambulances increased by more than 50% and, as yet, there is no indication that peak demand has been reached.

Experience gained in the running of the Service, more efficient operational control, a higher standard of vehicle and equipment, better trained personnel and the adoption of radio control, are some of the developments

which have enabled the Ambulance Service to effectively cope with the greatly increased burden and that this had been achieved without any major extension of the accepted scheme, was a tribute to the sound planning of the County Health Committee.

It is however, becoming obvious that if the number of patients to be conveyed continues to increase at the present rate, early consideration should be given to expanding the Ambulance Service facilities.

Review of Year's Working.

During the 12 months ended the 31st December, 1958, Ambulance Service vehicles conveyed a total of 106,444 patients, of which 9,247 were stretcher cases and 97,197 sitting cases. Accidents and other emergencies dealt with during the year totalled 10,506 cases. The ambulances made 30,809 journeys and covered 816,566 miles in all.

These increases indicated that more patients were now availing themselves of the Hospital and other Health Services and in particular, the greater attendances at the Specialist Hospitals accounted for much of the increased mileage. Many journeys, often with individual patients, were now being made to the Chest Hospital, Sully, the Radio Therapy Unit at Whitchurch, the Plastic Surgery Unit at Chepstow, Morriston Hospital, Swansea, and other Specialist Hospitals.

In addition, the development of the Mental Health Services and various Specialist Clinics now being held at Stanley Road and other of the Council's Clinics, were involving ambulance transport over a wide area.

Ambulance Service for the National Coal Board.

Under the contract between the Council and the National Coal Board, the Ambulance Service dealt with 2,405 cases of accident or illness occurring at the Board's undertakings during the year. This service involved 37,367 miles chargeable to the Board.

Training of Ambulance Personnel.

The National Conditions of Service for Ambulance Staffs, require that in order to qualify for the plus rate of 6/-d. per week, ambulance personnel must hold a current certificate in first aid by the Order of St. John or the British Red Cross Society. Most ambulance authorities are agreed that a higher standard of efficiency is desirable for full-time ambulance drivers, and are consulting together with a view to promoting a National Scheme of Training. A school or schools on the lines of the Police and Fire Service Training Schools is envisaged, where ambulance personnel could receive specialised training in all aspects of their work.

Mutual Aid.

Mutual aid arrangements with neighbouring authorities operated satisfactorily during the year, particularly with the County Borough of Newport and the Gloucestershire County Council. These arrangements effected a large saving in mileage and enabled the most effective use to be made of available transport.

Conveyance of Patients by Rail.

The excellent facilities provided by the British Transport Commission for the conveyance of patients by rail was used to full advantage by the Ambulance Service during the year. This mode of transport for the longer journeys by patients has proved most satisfactory over the past years, but it now seems probable that with the dieselisation of rail transport, the conveyance of patients by rail will become increasingly difficult. Diesel cars do not have facilities for patients and though it is likely that the present rolling stock will operate on the main rail routes for some time to come, this too will ultimately be replaced by diesel cars.

Ambulance authorities are concerned that this valuable supplement to their services will be lost to them and are endeavouring to bring pressure on the British Transport Commission to continue providing a rail service for patients.

MENTAL HEALTH SERVICE.

(1) Administration.

(a) DUTIES OF ADMINISTRATION OF THE MENTAL SERVICES are dealt with by the No. 2 Standing Sub-Committee which meets monthly.

(b) NUMBER AND QUALIFICATION OF STAFF EMPLOYED.

1. County Medical Officer; One Senior Medical Officer for administrative and clerical duties.
2. Clerical Staff of three.
3. Three Mental Health Workers, one of whom has been seconded to the Child Guidance Clinic for psychiatric social work.
4. One Home Teacher.
5. Ten duly authorised officers who devote one-third of their time to the Mental Health Service.
6. Occupation Centre Staff of two supervisors and fourteen assistant supervisors, one Senior Workshops Instructor and an Assistant.

(c) CO-ORDINATION WITH REGIONAL HOSPITAL BOARDS AND HOSPITAL MANAGEMENT COMMITTEES.

1. *Institutions for Mental Defectives.*

By arrangement this Department's Mental Health Workers supervise patients on trial and on licence from Institutions. Frequent visits are made to homes of patients pending discharge, and reports are issued on home circumstances and also on patients on trial and on licence.

2. *Mental Hospitals.*

Mental Health Workers have continued the domiciliary visiting of patients discharged from mental hospitals into civilian life. This service is of great value to hospitals and to patients, aiding rehabilitation and resettlement.

(d) VOLUNTARY ASSOCIATIONS.

The Parents' Association for Mentally Handicapped Children has two branches in the County and cordial relations exist between these and the County's Occupation Centre Staff.

(e) TRAINING OF MENTAL HEALTH WORKERS.

During the current year no arrangements were made for training mental health workers but social science students from the University of Wales have undertaken case work studies during vacations.

OCCUPATION CENTRES.

The education and training of Defectives has proceeded along the lines described in previous reports and in September, Neville House was honoured by a visit from the Minister of Health, the Rt. Hon. Derek Walker Smith, M.P., who was accompanied by the Chairman of the Welsh Board of Health, K. H. Hodges, Esq., and the Medical Member, Dr. A. R. Culley, C.B.E. The Chairman and Vice-Chairman of the Monmouthshire County Council, Alderman T. Wellington, J.P. and Alderman H. Phillips, J.P., together with the Chairman and Vice-Chairman of the Health Committee, Councillors Mrs. M. Williams and W. H. Palmer received the distinguished guests who toured the Centre, saw every aspect of the work done and expressed gratification at the quality of work being done, and at the happy atmosphere of the Centre. As a permanent record of the visit a book of photographs was presented to the Minister and to Mr. Hodges. Officials from the B.B.C. were present and scenes of the visit were displayed on the National Television Screen.

Work from the centres was shown in the County Health Exhibition at the National Eistedfodd, held at Ebbw Vale in August, and was acclaimed by many visitors from all parts of the Principality and from overseas.

The Senior Medical Officer was invited to represent all the Local Authorities in the Country to speak on Local Authority Services at the Conference of the National Association of Parents of Mentally Handicapped Children, at County Hall, Westminster.

THE ROYAL COMMISSION ON THE LAW RELATING TO MENTAL ILLNESS AND MENTAL DEFICIENCY issued this Report in May, 1957, making recommendations which, if accepted by Parliament, will revolutionise the care and treatment of the mentally afflicted.

A recommendation regarding the informal admission of Mental Defectives to Institutions has been adopted within existing legislation and a note is appended regarding this very welcome step forward in the County of Monmouth.

1. Informal Admission of Patients to Mental Deficiency Hospitals.

Since the 15th January, 1958, of the total number of patients admitted to Mental Deficiency Hospitals, fourteen were admitted on an informal basis and eight were admitted under Order. Other than the patients who are dealt with by the Courts (Section 8 or 9 Orders) it is left to the discretion of the local Health Authority whether a patient should be admitted informally or under Order.

Informal Admissions are arranged unless there is some very good reason (i.e., unsuitability of the patient, unsuitable home environment or unstable parents, etc.).

Up to date the procedure of informal admission has run smoothly and efficiently.

The Mental Health Workers find the parents and relatives of patients are much happier at the prospect of informal admission. Instead of the three Statutory Documents plus two Medical Certificates, Statement of Particulars and Case Notes, and the Parent or Guardian's Consent to the making of an Order under the Mental Deficiency Acts, there is now a Form of Agreement signed by the patient and/or nearest relative (the patient is very rarely capable of signing this Form) and one other Form—Statement of Particulars.

Prior to admission on an informal basis it was necessary for the patient to be taken to the County Hall, Newport, where the procedure of the Presentation of a Petition under the Mental Deficiency Acts, was carried out. The Petitioning Officer (an officer of the Local Authority) petitioned to a Justice of the Peace specially appointed under the Lunacy Act, 1890, for an Order sending the defective to an Institution or Certified House. The Order was then made by the Justice and the Statutory Declaration signed by the Justice, the Medical Officer (approved by the Local Health Authority) and the Petitioning Officer. This was completed after the patient had been interviewed, and any relatives, if present. Afterwards the patient was taken to the Hospital.

Since the new procedure has been adopted the patient is taken directly from his or her home straight to the Hospital.

In addition to the informal admissions, thirty-five patients already in Mental Deficiency Hospitals have been discharged from their Orders of Detention and are remaining in the Hospitals on an informal basis.

The Medical Superintendents of the Hospitals select suitable patients and contact the Local Health Authority asking if the homes of the patients can be visited. The Mental Health Workers visit the homes and make reports thereon. In addition the procedure is explained to the parents or relatives and if discharge from the Order is to be recommended a Form of Agreement is signed (similar to the Form needed when a patient is informally admitted). The report on the home and the Form of Agreement are both forwarded to the Medical Superintendent of the Hospital. In due course the local Health Authority is informed when patients are discharged from their Order.

2. Lunacy and Mental Treatment Acts.

The procedure of admission to Mental Hospitals, remains unaltered.

However, since October, 1956, a total of three hundred and sixty-seven patients have been discharged from their Orders under the Lunacy Act, and regraded as Voluntary patients (three hundred and sixty-six patients are in Pen-y-Val Hospital, Abergavenny, and one in St. Cadoc's Hospital, Caerleon).

DEVELOPMENTAL DIAGNOSTIC CLINIC.

Since the inception of this Clinic in September, 1955, over 200 babies have been assessed, the causes of retardation investigated and diagnosed and appropriate training and treatment undertaken according to each child's in-

dividual needs. As many of the children examined in the early days have now reached school age, we are able to assess the value of the Clinic, the pioneer of all such clinics in Great Britain, and we propose to issue a report on the subject to the National Medical Press early in the New Year.

CEREBRAL PALSY—"SPASTICS".

The Cerebral Palsy Scheme which has been in operation since 1954 continues to operate to the benefit of many children and their parents. Numbers on the Register at 31-12-58 are as follows:—

1. Pre-School Age	...	...	...	46
2. School Age	...	...	...	94
3. Over School age	...	...	...	36

1. Pre-School Age.

The increase in number of pre-school age children may reflect a slight increase in incidence or it may be a reflection upon the new awareness of this affliction, whereby children are referred at an earlier age for diagnosis. The value of early assessment, early treatment and early training is shown by the following figures relating to cerebral palsied children seen at an early age at the Backward Babies' Clinic and now of school age. Of the 39 children assessed, 9 are attending normal schools (4 educationally sub-normal) 4 are attending or waiting for places in special residential schools; 6 are having education at home; 8 have been transferred to the Local Authority and are attending or awaiting places in Occupation Centres; the other 2 have left the district. National statistics imply that over 40% of cerebral palsied children are mentally defective—whereas only 23% of the children referred to above have proved to be mentally defective.

2. School Age.

It is our policy to retain and educate handicapped children in their own homes and local schools so that they may take their places in a normal social environment. 44 are therefore attending the Authority's own schools; 8 are receiving education in school subjects in their homes; 17 have places in residential schools which cater for specific disabilities. 23 have been transferred to the Local Authority as mentally defective and of these 17 are attending or awaiting places in Occupation Centres, 2 are at home and 4 have been placed in institutions at their parents' request.

3. Over School Age.

Of the total number known to us, 16 have been ascertained to be mentally defective and attend or are awaiting places in Occupation Centres. Of the re-

mainder 10 are in employment, 6 are in residential training establishments and 4 are at home.

There is a need in the County for the provision of training facilities for handicapped persons.

CHILD GUIDANCE.

The Child Guidance Service, for the diagnosis and treatment of maladjustment in children is the joint effort of the School Health Service and the Welsh Regional Hospital Board. Two Clinics have functioned throughout the year, as formerly—Newport and Tredegar. The retirement of Dr. Cox, Educational Psychologist, early in the year and the period elapsing before his successor Mr. Jones took over, caused heavy demand on the services of Miss Edwardson, the Assistant Psychologist. We were pleased to welcome Miss Dundas, Child Psychotherapist, in May, and since her appointment she has done very valuable work for the children assigned her for treatment by the Psychiatrists at both Clinics.

Child Guidance Clinic, Newport—Report for 1958.

Staff:—Dr. Johnston, B.Sc., M.B., B.Ch., Assistant Psychiatrist, St. Cadoc's Hospital.

Dr. Cochrane-Dyet, S.M.O., Mental Health, who is responsible for the day to day administration.

Dr. J. W. Cox, Educational Psychologist, Monmouthshire County Council—retired 16th January, 1958.

Miss Edwardson, Assistant Educational Psychologist, Monmouthshire County Council.

Mr. Jones, Educational Psychologist, Monmouthshire County Council, appointed June, 1958.

Miss Readman, seconded from duty as Mental Health Social Worker for Psychiatric Social Worker duty shared with

Mr. James, Psychiatric Social Worker, Education Department, Monmouthshire County Council.

The Team met on alternate Tuesdays and Clinic sessions were held at the School Clinic, Stanley Road, Newport, the Mental Health Department providing clerical assistance. As was anticipated the appointment of the lay psychotherapist has meant that much remedial work has been undertaken at the Clinic and Dr. Johnston has continued to treat a number of cases at St. Cadoc's Hospital. Dr. Johnston has continued to visit The Mount School for Maladjusted Boys at Chepstow, once a month where his specialised advice has been much appreciated by the Headmaster. His advice is also available at all times to the Superintendent of Crick Remand Home.

No. of Cases on Waiting List at 1-1-58	...	...	...	23	
Continuing Cases from 1957	...	...	...	46	
New Cases referred—1958	...	...	...	84	
				—	153
No. of Cases attending Clinic—1958	...	...	...	106	
No. of Cases offered appointment not kept—1958:					
(a) No parental co-operation	...	...	...	11	
(b) Problem resolved	...	...	...	14	
(c) Gone away	...	...	...	3	
				—	28
No. of Cases on Waiting List at 31-12-58	...	...	...	19	
				—	153
Cases closed during 1958:					
1. Problem resolved	...	...	...	27	
2. Recommended/admitted to Special Schools	...	...	...	18	
3. Improved	...	...	...	2	
4. Transferred to Local Authority Section 57/3	...	...	...	0	
5. No parental co-operation	...	...	...	4	
6. Gone away	...	...	...	2	
				—	53
No. of Cases attending for Psychotherapy	...	...	...	19	
No. of Cases carried forward to 1959	...	...	...	53	

Sources of Referral.

A. MEDICAL.

School Medical Officers; I.W.C. Medical Officers	...	31	
Family Doctors	...	6	
Hospital Consultants	...	18	
		—	55

B. EDUCATIONAL.

Educational Psychologists	...	2	
Head Teachers	...	13	
Education Welfare Officer	...	1	
		—	16

C. OTHER AGENCIES.

Probation Officers	...	6	
Children's Officers	...	1	
Parents	...	4	
Youth Employment Officer	...	1	
Other	...	1	
		—	13

=84

Tredegar Clinic—Report for 1958.

Staff: Dr. David Thomas, B.Sc., M.B., M.R.C.P., D.P.M., Consultant Psychiatrist, Maindiff Court Hospital, Regional Hospital Board.

Dr. Cochrane-Dyet, S.M.O., Mental Health, Monmouthshire County Council who is responsible for day to day administration.

Miss Edwardson, M.A. (Hons.) Educational Psychologist, Monmouthshire County Council, Education Department.

Mr. Noel James, Psychiatric Social Worker, Monmouthshire County Council, Education Department.

Clinics were held each Wednesday morning at the Market Street Clinic until September when permanent accommodation became available at The Grove, Tredegar, where it was possible to equip a play therapy room for the lay psychotherapist, Miss Dundas so that the long journey from the top of the valleys to Newport has become no longer necessary—a great benefit to children and their parents.

No. of Cases on Waiting List at 1-1-58	...	...	...	10	
No. of Cases continuing from 1957	...	...	...	56	
No. of New Cases referred—1958	...	...	...	89	
				—	155
No. of Cases which attended Clinic—1958	...	...	...	109	
No. of Cases offered appointments not kept:					
(a) No parental co-operation	...	...	...	12	
(b) Problem resolved	...	...	...	12	
				—	24
No. of Cases on Waiting List 31-12-58	...	...	...	22	
				—	155
No. of Cases attending for Psychotherapy	...	...	...	56	
Cases Closed during 1958:					
1. Problem resolved	...	...	...	24	
2. Recommended/admitted to special schools	...	...	...	13	
3. Improved	...	...	...	4	
4. Transferred to Local Authority Section 57(3)	...	...	...	5	
5. Lack of parental co-operation	...	...	...	6	
6. Gone away	...	...	...	2	
				—	54

*Sources of Referral.***A. MEDICAL.**

School Medical Officers; I.W.C. Medical Officers	...	37
Family Doctors	...	19
Hospital Consultants	...	15
		— 71

B. EDUCATIONAL.

Educational Psychologists	...	...	...	...	4
Head Teachers	...	...	...	...	4
					8

C. OTHER AGENCIES.

Probation Officers	...	...	...	...	7
Children's Officers	...	...	...	...	2
Parent	...	...	...	...	1
					10
					=89

It is significant to note the high proportion of cases which are referred through doctors and how few come from the Education Department. It would appear therefore, that the main cause of maladjustment in children are to be found in the home and that symptoms are seldom exhibited in school.

EPILEPTICS.

A register is kept of all cases of epilepsy coming to the notice of the department. Information is received from a number of sources, i.e., School Medical Inspectors, Assistant Medical Officers, Health Visitors, Head Teachers, the Child Guidance Clinics and to a great extent from Consultant Paediatricians. Co-operation between the Child Guidance Clinics and the Paediatricians is of great value, as arrangements have been made that where behaviour problems complicate the epileptic condition, the cases are kept under the supervision of the former, whereas otherwise the medication is controlled by the physician. Diagnostic electro-encephalograms are carried out on request at St. Cadoc's Hospital, Caerleon.

Suitable cases are dealt with by the School Health Department under the Handicapped Pupils Regulations, and admissions to Special Schools arranged. However, there are many other cases which lead normal lives when adequately controlled by sedative drugs, and for some time concern has been felt as to the necessity for supervision at home of prescribed medication. To help with this a scheme has been devised whereby arrangements are made for Health Visitors to be notified by the School Health Department of all cases under the care of physicians which are notified by them, and for which the General Medical Practitioners have been asked to prescribe. The Health

Visitors are informed as to the nature of the treatment prescribed and asked to call at the homes as often as possible to ensure that the drugs are taken and also to see that follow-up specialist appointments are kept. Instances of neglect of drug administration are few. Cases discovered at the Child Guidance Clinics are similarly dealt with.

Home Training and Occupational Therapy are available for the home-bound epileptic mental defectives.

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Seizure cases are dealt with by the School Health Department under the Handicapped Pupils Regulations, and children are referred to hospital when advised. However, there are many other cases which need not be referred when adequately controlled by sedative drugs, and for some time efforts have been put in to the necessity for supervision at home of overworked children. To help with this a scheme has been devised whereby arrangements are made for Health Visitors to be available to the School Health Department in all cases where the care of physicians which are notified by them, and for which the General Medical Practitioner has been asked to prescribe. The Health

SANITARY CIRCUMSTANCES OF THE AREA.

The sanitary conditions of the area are generally good, but there are some points where improvement is needed. The water supply is adequate, but the treatment works are old and need to be replaced. The drainage system is also in need of improvement, particularly in the central part of the area. The housing conditions are generally good, but there are some areas where the housing is old and needs to be replaced. The public health services are good, but there are some areas where the services are not as good as they should be. The overall sanitary conditions of the area are good, but there are some points where improvement is needed.

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SANITARY CIRCUMSTANCES OF THE AREA.

Water.

Adequacy.

There were no drought conditions during the year and it was not frequently necessary to curtail supplies.

Cardiff Corporation was successful in promoting a Bill in Parliament to enable them to build a reservoir near Coedypaen, and pipe water to it from the River Usk at Monkswood (Llandegveth Water Scheme). Sufficient water from this source is vital for Monmouthshire as in its present conception it is by far the largest possible source for the future supply of large areas of Monmouthshire. As none of the Monmouthshire Statutory Water Undertakers involved had sufficient financial resources to undertake the development of this supply, it is a matter of grave concern that, for similar reasons, they may be unable to ensure the future supplies of their areas from this source.

Negotiations are still proceeding for the regrouping of Water Undertakings in the County consequent upon the issue of Circular No. 52/56 of the Ministry of Housing and Local Government.

Quality.

Generally speaking, the bacteriological quality of the treated mains supplies remains good, while untreated supplies from wells, spring and streams, etc., in remote areas are poor and subject to contamination. In safe-guarding water supplies in their area Public Health Inspectors of the District Councils collected 966 samples of water for examination during 1958.

Of these, 624 samples were taken for bacteriological examination from treated supplies, 612 being from public supplies and 12 from private treated supplies. 568 samples taken from the public treated supplies were satisfactory and 44 unsatisfactory. Nearly one half of the unsatisfactory samples were from one area (Blaenavon Urban District) where only an inadequate partial treatment is undertaken. This also applies to some supplies in the Monmouth Rural District where the number of unsatisfactory samples is also high. When unsatisfactory reports are received the supplies are investigated until the source of contamination is ascertained and eradicated. A few of the private treated supplies are unsatisfactory.

330 samples of untreated water were taken for bacteriological examination. Of these 201 were of water going for treatment in public supplies to help to ascertain the type and degree of treatment required. The remaining 129 samples of untreated water were taken from individual rural supplies; only 43 were satisfactory compared with 86 unsatisfactory. When it is real-

ized that the results of untreated waters are assessed on a much more lenient basis than that adopted for treated waters, the extent to which the foregoing results serve to illustrate the need to extend public piped treated water supplies wherever possible can be appreciated even more fully. In this connection, in addition to domestic requirements, the need of pure water supplies to dairy farms is again stressed.

The chemical nature of water supplies does not normally change rapidly and generally speaking fewer samples are taken. Of the 12 taken during the year, 11 were satisfactory and 1 unsatisfactory. A few supplies are subject to plumbo solvency and in these areas the use of lead service pipes is forbidden.

General Comments.

The following observations are made upon supplies in a few areas:

BLAENAVON URBAN DISTRICT. Concern over quality and adequacy is long-standing. Arrangements are being made for some improvement from the Pontypool Water Company's supplies, and also for the provision of chlorinating plant.

CAERLEON URBAN DISTRICT. Pressure is insufficient to supply the higher levels.

NANTYGLO AND BLAINA URBAN DISTRICT. The supply is liable to plumbo solvency and lead service pipes are forbidden.

RISCA URBAN DISTRICT. Supplies to houses at high levels are restricted during dry weather spells.

ABERGAVENNY RURAL DISTRICT. The Council are being advised to chlorinate all public supplies.

CHEPSTOW RURAL DISTRICT. A chlorinating plant has been installed at St. Arvans. Generally, where mains supplies have been provided, the supplies are adequate except at Caerwent and part of Caldicot.

MONMOUTH RURAL DISTRICT. The Council are being advised to chlorinate all public supplies.

The following is a summary of the position of current water supply schemes for which application for financial assistance has been made to the County Council under the Rural Water Supplies and Sewerage Acts:—

ABERGAVENNY RURAL DISTRICT. Progress is now well advanced on the long delayed scheme for Grosmont. A scheme for the hamlet of Llangattock Lingoed has been under consideration for a long time.

CHEPSTOW RURAL DISTRICT. The scheme to serve Tintern has been completed. The scheme to serve Earlswood and Newchurch West has been approved. The area around Llangwm is in need of a proper piped water supply.

MAGOR AND ST. MELLONS RURAL. No further water supply schemes are contemplated.

MONMOUTH RURAL DISTRICT. The revised scheme of extensions to the Trelleck Scheme to serve the western and north-western portions of the area has been approved.

PONTYPOOL RURAL DISTRICT. The supply for the Coedypaen area is still under consideration. Extensions from the Gwehelog supply and a revised scheme for Llanhennock are contemplated.

Sewerage.

The Eastern Valley Mains Trunk Sewer is working smoothly. Considerable extensions have been completed to serve the increased population. The Rhymney and Western Valleys Trunk Sewers are discharging untreated into the Bristol Channel. These latter sewers have now been in use for about half a century, during which time subsidence has been responsible for expensive and often difficult maintenance. General concern is also growing at the general practice of discharging untreated sewage into the waters around the coasts of the country, and a national Committee is investigating the public health implications. In view of the heavy discharge from populous areas into the Bristol Channel and the mouths of rivers adjoining, closer attention will no doubt be paid to these sewers in the near future.

Work is in hand on the new treatment works at Llanfoist for the Borough of Abergavenny.

The following is a summary of current schemes for which financial aid from the County Council has been requested under the Rural Water Supplies and Sewerage Acts:—

ABERGAVENNY RURAL DISTRICT. No progress has been made in connection with proposed schemes for Pandy, the Bryn and Brynygwenin. It is hoped that the proposed scheme for Grosmont will immediately follow the completion of the water supply scheme.

CHEPSTOW RURAL DISTRICT. No progress has been made in the schemes for Devauden and Undy. A scheme for Tintern has been considered.

MAGOR AND ST. MELLONS RURAL DISTRICT. The schemes for Magor, Henllys and Marshfield are under constant consideration, but it is not anticipated that work will begin on these schemes immediately.

MONMOUTH RURAL DISTRICT. No further schemes are at present contemplated for this area.

PONTYPOOL RURAL DISTRICT. The initial portion of the Scheme for Penperlleni has been completed. A sewer is required at Llanfrechfa.

Housing.

As anticipated the number of new houses erected in the County during the year again fell below the figures of previous years. Some 247 fewer Council houses were erected than during 1957, and 858 less than the peak year of 1956. The number of houses erected privately have remained steadier than Council house building over the last three years; nevertheless, 46 fewer houses were so built during 1958 than during 1957. Excluding houses erected by Cwmbran Development Corporation, over the course of the last three years 20 per cent of houses erected have been by private enterprise. The total number of all houses erected during 1958 (1,658) although some 118 less than during 1957, would have shown a far greater decrease had it not been for the increased activity of the Cwmbran Development Corporation, which built 747 houses as against their previous highest figure of 572 in 1957.

Further details are given below for the years 1938, 1946, 1956, 1957 and 1958, and serve to illustrate the tremendous activity displayed in providing new houses, especially Council houses, since the war:

1938—Council houses erected	...	...	...	...	520	
Private houses erected	...	...	...	...	429	
				Total	—	949
1946—Council houses erected (Permanent)	...	...	...	...	545	
Council houses erected (Pre-fab)	...	...	...	...	525	
					—	1,070
Private houses erected	...	...	...	...	26	
				Total	—	1,096
1956—Council houses erected	...	...	...	...	1,521	
Private houses erected	...	...	...	...	266	
Cwmbran Development Corporation	...	...	...	...	578	
				Total	—	2,365

1957—Council houses erected	...	...	...	...	910
Private houses erected	...	...	...	...	294
Cwmbran Development Corporation	...	...	...	...	572
				Total	— 1,776
1958—Council houses erected	...	...	...	...	663
Private houses erected	...	...	...	...	248
Cwmbran Development Corporation	...	...	...	...	747
				Total	— 1,658

The number of houses of all types owned by local Authorities in Monmouthshire on the 31st December of each of the years 1938, 1946 and 1958 are also of interest:—

1938	...	...	6,831
1946	...	...	7,550
1958	...	...	23,654 (In addition 3,228 were owned by Cwmbran Development Corporation).

At the present time priority in the building of new Council houses is being ascribed to slum clearance.

Further details will be found in the Table later in this Report.

As reported for several years, it is unfortunate that the commendable rate of providing new houses complete with modern health amenities has been at the expense of existing houses. Thousands of substantial houses in the County, which are still likely to be inhabited for many years, require some renovation and re-planning and the provision of pedestal water closets, hot water systems, fixed baths, suitable wash-basins, satisfactory food stores, and food preparation, cooking and washing facilities. The policy of encouraging the preservation and improvement of such houses by a system of grants and loans by local authorities is being continued and extended.

Indirectly the Rent Act, 1957, will have a bearing upon this matter, as the policy of securing repairs to houses according to tenants' specifications and the frequent unsatisfactory state of premises after prolonged negotiations and increase in rents, is resulting in decreasing of confidence in the system of private renting of houses, and people are gradually deciding that, with the assistance now available for buying and improving the houses in which they live, it is better to undertake the responsibility of owning their own houses. In spite of the fact that a great deal of disrepair of houses still continues, only 243 tenants in the County were tenacious enough to pursue their claims for repair, subsequent to the receipt of notice of increase of rent,

to the issue of Certificates of Disrepair by local authorities. It is recognised that this evidence of the surprisingly restricted use of this portion of the Act is due in part to the reluctance of owners to increase rents because of the repercussions which might ensue, and to this extent also the Act is failing in its original intention, i.e., to secure the repair of all rented houses.

During 1958, only 350 grants totalling £77,443 were made by local authorities in the County compared with 432 and £85,839 during 1957. A slightly larger number of loans were made under the Act, however, 121 loans totalling £30,175 being made during 1958 as against 90 loans totalling £35,073 during 1957. It would appear that the commendable trends towards the improvement of houses needs the periodical infusion of new stimuli. It is to be hoped, and it is indeed anticipated, that the provisions of the new House Purchase and Housing Act will further accelerate the improving of the homes of the people. It may be that shortly we shall be within sight of the practical prospect of considering a survey of all houses, with consequent compulsory provision of a reasonable standard of health amenities.

Perhaps too, one of the future useful functions of local authorities will be the extension of lending powers which they now possess to enable houses to be bought and improved so that the financing of repairs can also be effected by this means.

Further details regarding the relative activity in the various local authority areas in respect of grants and loans for house improvement will be found in the Appendix to this report.

Schools.

The building of new, modern, light airy spacious schools in suitable surroundings continues. Improvements are gradually being effected to many of the older buildings. The facilities at School Canteens have been improved as a result of the Food Hygiene Regulations, 1955. Nevertheless, the provision of water-closet accommodation where it has not been, but can be provided, needs to be accelerated; in rural areas this will entail the provision of a number of properly constructed cesspits, which will need to be emptied periodically. A number of larger schools are in need of re-planning and general improvement.

Clean Air.

It is unfortunate that positive measures to clean the air of South Wales and Monmouthshire are only being formulated slowly. While active measures are being pursued in many quarters to ensure that industries comply with the Clean Air Act, 1956, in as far as modern knowledge and development permit, local authorities in the area are paying scant attention to their own op-

tional powers of creating smoke control areas. As it is usually estimated that about half of the smoke pollution of the atmosphere is from domestic chimneys, the execution of these or similar powers is a necessary and important part of the drive for clean air. National and press educational efforts have generally been effective. It is to be regretted that in some areas concessionary coal issues are continuing to obscure the broader requirements of the improved public health. No local authority in the Administrative County has yet declared any part of its area to be a "smoke control area."

Milk.

The pasteurising plants at Abergavenny, Abertillery, Marshfield and Nantyglo continued in operation during the year. A new licence authorising the sterilising of milk was issued during the year in respect of a plant at Marshfield. Although some milk consumed in the County is pasteurised at plants in neighbouring counties, the bulk of milk consumed in Monmouthshire is pasteurised at these plants, which process a total of nearly 50,000 gallons daily. The work of ensuring that this milk is properly pasteurised is the responsibility of the County Council, which is the licensing authority.

Premises are inspected regularly under the Milk and Dairies Regulations and Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, instruments and plants checked and regular samples of milk taken for examination. When necessary, samples are taken from various stages of processing. Special investigations are carried out when the results of the examinations of samples are unsatisfactory.

The scheme operated by the Education Committee during the year for the supply of milk to schools enabled an efficient check sampling service to be continued. All pasteurised milk supplies to schools are now sampled at least monthly, the sampling points being varied as much as practicable. The few raw Tuberculin Tested milk supplies to schools are also tested bacteriologically at frequent—usually monthly—intervals, and are also submitted to biological examination every six months. Supplies to children's homes and old folks' homes are also checked periodically, as well as those hospitals requested by the Regional Hospital Board. At the request of the Welsh Board of Health the sampling service has extended its work in connection with the submission for biological examination of samples of raw milk sold in retail.

The Table in the Appendix, which is published by courtesy of the Public Health Laboratory Service, shews the number of samples taken by all the local authorities in Monmouthshire during the year 1954-1958.

The following is a summary of the nature of the 1,404 samples of milk taken by the County Health Inspectors during the year:—

For Bacteriological Examination:

From Pasteurising Plants	...	...	...	503
From Sterilising Plants	...	...	...	55
On delivery at Schools	...	...	...	449
On delivery at Hospitals, Old Folks' Homes, Children's Homes, Special Schools, etc.	...	...	...	188
Other examinations	...	...	...	111
				1,306
For Biological Examination	...	...	...	98
				1,404

The whole of the County is now scheduled as a "specified area", by which all milk sold in retail is required to be "sterilised," "pasteurised" or "tuberculin tested." Responsibility for ensuring that all milk sold in retail was subject to these licences issued by various authorities devolved upon the Food and Drugs Authority and the County Health Inspector was appointed the authorised officer for the area for which the County Council is responsible. The following is a summary of action taken in this respect during the year:—

Complaints investigated	...	...	...	8
Licence eventually issued	...	...	...	1
Ceased retailing milk	...	...	...	2
Practice ceased	...	...	...	2
Complaints not substantiated	...	...	...	3
Remaining under observation at the year of the year				10

Ice Cream.

No legal bacteriological standard has yet been fixed for ice cream to support local authorities in their efforts to ensure a safe product. The Food Hygiene Regulations, 1955, have nevertheless been quite useful in this respect. New Regulations governing the heat treatment, etc., of ingredients used in the manufacture of ice cream are to be issued.

Meat.

A spate of legislation—The Slaughterhouse Act, 1958, and the Slaughter of Animals Act, 1958, and appropriate Regulations, i.e., the Slaughterhouses (Hygiene) Regulations, 1958, and the Slaughter of Animals (Prevention of Cruelty) Regulations, 1958, and other Regulations, have emerged and are designed to improve conditions at slaughterhouses both from hygiene and cruelty points of view. Discussions are also proceeding regarding facilities for slaughtering in the various areas. This matter is also connected with the important question of restricting times of slaughter in order that all carcasses and offal can be inspected at the time of slaughter. Confusion persists in attempts to introduce arrangements to ensure that meat from knackers' yards or found unfit for consumption at slaughterhouses does not find its way to the

public. Although it is recognised that pets' food depends largely upon such supplies, surely nothing but the strongest precautions can be entertained in safeguarding human beings from even accidental supplies of diseased meat, while even pet owners would appreciate measures to secure the sterilisation of such meat.

Food Hygiene.

The administration by local authorities of the Food Hygiene Regulations, 1955, is having some effect in improving the structural conditions of food establishments, utensils and apparel, in spite of the vagueness of many of the legal provisions. In the actual safe-guarding of people from illness, however, a great deal depends upon the cleanliness of personal habits and all health staffs take advantage of every opportunity to apply educational and publicity measures in an endeavour to curb the increasing incidence of food poisoning which has accompanied a change in the nation's feeding habits.

Caravans.

For reasons of employment, of cost, of preference, as well as shortage of housing accommodation, residential caravans are increasing in numbers. Careful consideration now needs to be given to the cumulative effect upon the health of the residents and to the possibility of the aggravation of health issues of the public at large, as well as to the amenity value of neighbourhoods.

Swimming Baths.

Bacteriological control of the condition of the water continues in conjunction with the stimulating of interest in the particular healthy exercise. Swimming instruction is now included in the curriculum of most schools, and where indoor baths are available the portion of the year during which this instruction continues is gradually increasing.

Nuclear Radiation.

The public are somewhat disturbed due principally to:

- (i) their own lack of knowledge of this subject which is often restricted to an appreciation of the tremendous calamities which can occur from the uncontrolled release of nuclear energy, and
- (ii) to the pronouncement of conflicting opinions of various eminent authorities.

The training of all public health staffs in various stages and degrees, according to their requirements, will enable them to restore the confidence of the many members of the public with whom they come in contact. A national Committee is considering the form and extent of training necessary for this purpose and it is hoped that their recommendations will quickly be put into practice.

STATISTICAL DATA.

In all cases in the above table, the estimated populations are supplied by the Registrar-General have been used in the compilation.

During 1958 there were, according to the Registrar-General's returns, 6,678 live births in the Administrative County and 102 still-births. Further details are as follows:—

MONMOUTHSHIRE		ENGLAND & WALES		1958		1957		1956		1955	
Live Births	Still Births	Live Births	Still Births	Live Births	Still Births	Live Births	Still Births	Live Births	Still Births	Live Births	Still Births
1704	174	184	164	1938	1938	1937	1937	1936	1936	1935	1935
17.04	1.74	18.4	1.64	19.38	1.938	19.37	1.937	19.36	1.936	19.35	1.935
0.49	0.17	0.56	0.16	0.71	0.17	0.71	0.17	0.71	0.17	0.71	0.17
11.73	1.17	11.7	1.17	11.7	1.17	11.7	1.17	11.7	1.17	11.7	1.17
22.81	2.28	22.8	2.28	22.8	2.28	22.8	2.28	22.8	2.28	22.8	2.28

The vital statistics for Monmouthshire and for England and Wales for the year 1958 compiled by the Registrar-General are in the adjoining table.

STATISTICAL DATA		Area		Population in 1958		Population in 1957		Population in 1956		Population in 1955		Population in 1954		Population in 1953		Population in 1952		Population in 1951		Population in 1950		Population in 1949		Population in 1948		Population in 1947		Population in 1946		Population in 1945		Population in 1944		Population in 1943		Population in 1942		Population in 1941		Population in 1940		Population in 1939		Population in 1938		Population in 1937		Population in 1936		Population in 1935		Population in 1934		Population in 1933		Population in 1932		Population in 1931		Population in 1930		Population in 1929		Population in 1928		Population in 1927		Population in 1926		Population in 1925		Population in 1924		Population in 1923		Population in 1922		Population in 1921		Population in 1920		Population in 1919		Population in 1918		Population in 1917		Population in 1916		Population in 1915		Population in 1914		Population in 1913		Population in 1912		Population in 1911		Population in 1910		Population in 1909		Population in 1908		Population in 1907		Population in 1906		Population in 1905		Population in 1904		Population in 1903		Population in 1902		Population in 1901		Population in 1900		Population in 1899		Population in 1898		Population in 1897		Population in 1896		Population in 1895		Population in 1894		Population in 1893		Population in 1892		Population in 1891		Population in 1890		Population in 1889		Population in 1888		Population in 1887		Population in 1886		Population in 1885		Population in 1884		Population in 1883		Population in 1882		Population in 1881		Population in 1880		Population in 1879		Population in 1878		Population in 1877		Population in 1876		Population in 1875		Population in 1874		Population in 1873		Population in 1872		Population in 1871		Population in 1870		Population in 1869		Population in 1868		Population in 1867		Population in 1866		Population in 1865		Population in 1864		Population in 1863		Population in 1862		Population in 1861		Population in 1860		Population in 1859		Population in 1858		Population in 1857		Population in 1856		Population in 1855		Population in 1854		Population in 1853		Population in 1852		Population in 1851		Population in 1850		Population in 1849		Population in 1848		Population in 1847		Population in 1846		Population in 1845		Population in 1844		Population in 1843		Population in 1842		Population in 1841		Population in 1840		Population in 1839		Population in 1838		Population in 1837		Population in 1836		Population in 1835		Population in 1834		Population in 1833		Population in 1832		Population in 1831		Population in 1830		Population in 1829		Population in 1828		Population in 1827		Population in 1826		Population in 1825		Population in 1824		Population in 1823		Population in 1822		Population in 1821		Population in 1820		Population in 1819		Population in 1818		Population in 1817		Population in 1816		Population in 1815		Population in 1814		Population in 1813		Population in 1812		Population in 1811		Population in 1810		Population in 1809		Population in 1808		Population in 1807		Population in 1806		Population in 1805		Population in 1804		Population in 1803		Population in 1802		Population in 1801		Population in 1800		Population in 1799		Population in 1798		Population in 1797		Population in 1796		Population in 1795		Population in 1794		Population in 1793		Population in 1792		Population in 1791		Population in 1790		Population in 1789		Population in 1788		Population in 1787		Population in 1786		Population in 1785		Population in 1784		Population in 1783		Population in 1782		Population in 1781		Population in 1780		Population in 1779		Population in 1778		Population in 1777		Population in 1776		Population in 1775		Population in 1774		Population in 1773		Population in 1772		Population in 1771		Population in 1770		Population in 1769		Population in 1768		Population in 1767		Population in 1766		Population in 1765		Population in 1764		Population in 1763		Population in 1762		Population in 1761		Population in 1760		Population in 1759		Population in 1758		Population in 1757		Population in 1756		Population in 1755		Population in 1754		Population in 1753		Population in 1752		Population in 1751		Population in 1750		Population in 1749		Population in 1748		Population in 1747		Population in 1746		Population in 1745		Population in 1744		Population in 1743		Population in 1742		Population in 1741		Population in 1740		Population in 1739		Population in 1738		Population in 1737		Population in 1736		Population in 1735		Population in 1734		Population in 1733		Population in 1732		Population in 1731		Population in 1730		Population in 1729		Population in 1728		Population in 1727		Population in 1726		Population in 1725		Population in 1724		Population in 1723		Population in 1722		Population in 1721		Population in 1720		Population in 1719		Population in 1718		Population in 1717		Population in 1716		Population in 1715		Population in 1714		Population in 1713		Population in 1712		Population in 1711		Population in 1710		Population in 1709		Population in 1708		Population in 1707		Population in 1706		Population in 1705		Population in 1704		Population in 1703		Population in 1702		Population in 1701		Population in 1700		Population in 1699		Population in 1698		Population in 1697		Population in 1696		Population in 1695		Population in 1694		Population in 1693		Population in 1692		Population in 1691		Population in 1690		Population in 1689		Population in 1688		Population in 1687		Population in 1686		Population in 1685		Population in 1684		Population in 1683		Population in 1682		Population in 1681		Population in 1680		Population in 1679		Population in 1678		Population in 1677		Population in 1676		Population in 1675		Population in 1674		Population in 1673		Population in 1672		Population in 1671		Population in 1670		Population in 1669		Population in 1668		Population in 1667		Population in 1666		Population in 1665		Population in 1664		Population in 1663		Population in 1662		Population in 1661		Population in 1660		Population in 1659		Population in 1658		Population in 1657		Population in 1656		Population in 1655		Population in 1654		Population in 1653		Population in 1652		Population in 1651		Population in 1650		Population in 1649		Population in 1648		Population in 1647		Population in 1646		Population in 1645		Population in 1644		Population in 1643		Population in 1642		Population in 1641		Population in 1640		Population in 1639		Population in 1638		Population in 1637		Population in 1636		Population in 1635		Population in 1634		Population in 1633		Population in 1632		Population in 1631		Population in 1630		Population in 1629		Population in 1628		Population in 1627		Population in 1626		Population in 1625		Population in 1624		Population in 1623		Population in 1622		Population in 1621		Population in 1620		Population in 1619		Population in 1618		Population in 1617		Population in 1616		Population in 1615		Population in 1614		Population in 1613		Population in 1612		Population in 1611		Population in 1610		Population in 1609		Population in 1608		Population in 1607		Population in 1606		Population in 1605		Population in 1604		Population in 1603		Population in 1602		Population in 1601		Population in 1600		Population in 1599		Population in 1598		Population in 1597		Population in 1596		Population in 1595		Population in 1594		Population in 1593		Population in 1592		Population in 1591		Population in 1590		Population in 1589		Population in 1588		Population in 1587		Population in 1586		Population in 1585		Population in 1584		Population in 1583		Population in 1582		Population in 1581		Population in 1580		Population in 1579		Population in 1578		Population in 1577		Population in 1576		Population in 1575		Population in 1574		Population in 1573		Population in 1572		Population in 1571		Population in 1570		Population in 1569		Population in 1568		Population in 1567		Population in 1566		Population in 1565		Population in 1564		Population in 1563		Population in 1562		Population in 1561		Population in 1560		Population in 1559		Population in 1558		Population in 1557		Population in 1556		Population in 1555		Population in 1554		Population in 1553		Population in 1552		Population in 1551		Population in 1550		Population in 1549		Population in 1548		Population in 1547		Population in 1546		Population in 1545		Population in 1544		Population in 1543		Population in 1542		Population in 1541		Population in 1540		Population in 1539		Population in 1538		Population in 1537		Population in 1536		Population in 1535		Population in 1534		Population in 1533		Population in 1532		Population in 1531		Population in 1530		Population in 1529		Population in 1528		Population in 1527		Population in 1526		Population in 1525		Population in 1524		Population in 1523		Population in 1522		Population in 1521		Population in 1520		Population in 1519		Population in 1518		Population in 1517		Population in 1516		Population in 1515		Population in 1514		Population in 1513		Population in 1512		Population in 1511		Population in 1510		Population in 1509		Population in 1508		Population in 1507		Population in 1506		Population in 1505		Population in 1504		Population in 1503		Population in 1502		Population in 1501		Population in 1500		Population in 1499		Population in 1498		Population in 1497		Population in 1496		Population in 1495		Population in 1494		Population in 1493		Population in 1492		Population in 1491		Population in 1490		Population in 1489		Population in 1488		Population in 1487		Population in 1486		Population in 1485		Population in 1484		Population in 1483		Population in 1482		Population in 1481		Population in 1480		Population in 1479		Population in 1478		Population in 1477		Population in 1476		Population in 1475		Population in 1474		Population in 1473		Population in 1472		Population in 1471		Population in 1470		Population in 1469		Population in 1468		Population in 1467		Population in 1466		Population in 1465		Population in 1464		Population in 1463		Population in 1462		Population in 1461		Population in 1460		Population in 1459		Population in 1458		Population in 1457		Population in 1456		Population in 1455		Population in 1454		Population in 1453		Population in 1452		Population in 1451		Population in 1450		Population in 1449		Population in 1448		Population in 1447		Population in 1446		Population in 1445		Population in 1444		Population in 1443		Population in 1442		Population in 1441		Population in 1440		Population in 1439		Population in 1438		Population in 1437		Population in 1436		Population in 1435		Population in 1434		Population in 1433		Population in 1432		Population in 1431		Population in 1430		Population in 1429		Population in 1428		Population in 1427		Population in 1426		Population in 1425		Population in 1424		Population in 1423		Population in 1422		Population in 1421		Population in 1420		Population in 1419		Population in 1418		Population in 1417		Population in 1416		Population in 1415		Population in 1414		Population in 1413		Population in 1412		Population in 1411		Population in 1410		Population in 1409		Population in 1408		Population in 1407		Population in 1406		Population in 1405		Population in 1404		Population in 1403		Population in 1402		Population in 1401		Population in 1400		Population in 1399		Population in 1398		Population in 1397		Population in 1396		Population in 1395		Population in 1394		Population in 1393		Population in 1392		Population in 1391		Population in 1390		Population in 1389		Population in 1388		Population in 1387		Population in 1386		Population in 1385		Population in 1384		Population in 1383		Population in 1382		Population in 1381		Population in 1380		Population in 1379		Population in 1378		Population in 1377		Population in 1376		Population in 1375		Population in 1374		Population in 1373		Population in 1372		Population in 1371		Population in 1370		Population in 1369		Population in 1368		Population in 1367		Population in 1366		Population in 1365		Population in 1364		Population in 1363		Population in 1362		Population in 1361		Population in 1360		Population in 1359		Population in 1358		Population in 1357		Population in 1356		Population in 1355		Population in 1354		Population in 1353		Population in 1352		Population in 1351		Population in 1350		Population in 1349		Population in 1348		Population in 1347		Population in 1346		Population in 1345		Population in 1344		Population in 1343		Population in 1342		Population in 1341		Population in 1340		Population in 1339		Population in 1338		Population in 1337		Population in 1336		Population in 1335		Population in 1334		Population in 1333		Population in 1332		Population in 1331		Population in 1330		Population in 1329		Population in 1328		Population in 1327		Population in 1326		Population in 1325		Population in 1324		Population in 1323		Population in 1322		Population in 1321		Population in 1320		Population in 1319		Population in 1318		Population in 1317		Population in 1316		Population in 1315		Population in 1314		Population in 1313		Population in 1312		Population in 1311		Population in 1310		Population in 1309		Population in 1308		Population in 1307		Population in 1306		Population in 1305		Population in 1304		Population in 1303		Population in 1302		Population in 1301		Population in 1300		Population in 1299		Population in 1298		Population in 1297		Population in 1296		Population in 1295		Population in 1294		Population in 1293		Population in 1292		Population in 1291		Population in 1290		Population in 1289		Population in 1288		Population in 1287		Population in 1286		Population in 1285		Population in 1284		Population in 1283		Population in 1282		Population in 1281		Population in 1280		Population in 1279		Population in 1278		Population in 1277		Population in 1276		Population in 1275		Population in 1274		Population in 1273		Population in 1272		Population in 1271		Population in 1270		Population in 1269		Population in 1268		Population in 1267		Population in 1266		Population in 1265		Population in 1264		Population in 1263		Population in 1262		Population in 1261		Population in 1260		Population in 1259		Population in 1258		Population in 1257		Population in 1256		Population in 1255		Population in 1254		Population in 1253		Population in 1252		Population in 1251		Population in 1250		Population in 1249		Population in 1248		Population in 1247		Population in 1246		Population in 1245		Population in 1244		Population in 1243		Population in 1242		Population in 1241		Population in 1240		Population in 1239		Population in 1238		Population in 1237		Population in 1236		Population in 1235		Population in 1234		Population in 1233		Population in 1232		Population in 1231		Population in 1230		Population in 1229		Population in 1228		Population in 1227		Population in 1226		Population in 1225		Population in 1224		Population in 1223		Population in 1222		Population in 1221		Population in 1220		Population in 1219		Population in 1218		Population in 1217		Population in 1216		Population in 1215		Population in 1214		Population in 1213		Population in 1212		Population in 1211		Population in 1210		Population in 1209		Population in 1208		Population in 1207		Population in 1206		Population in 1205		Population in 1204		Population in 1203		Population in 1202		Population in 1201		Population in 1200		Population in 1199		Population in 1198		Population in 1197		Population in 1196		Population in 1195		Population in 1194		Population in 1193		Population in 1192		Population in 1191		Population in 1190		Population in 1189		Population in 1188		Population in 1187		Population in 1186		Population in 1185		Population in 1184		Population in 1183		Population in 1182		Population in 1181		Population in 1180		Population in 1179		Population in 1178		Population in 1177		Population in 1176		Population in 1175		Population in 1174		Population in 1173		Population in 1172		Population in 1171		Population in 1170		Population in 1169		Population in 1168		Population in 1167		Population in 1166		Population in 1165		Population in 1164		Population in 1163		Population in 1162		Population in 1161		Population in 1160		Population in 1159		Population in 1158		Population in 1157		Population in 1156		Population in 1155		Population in 1154		Population in 1153		Population in 1152		Population in 1151		Population in 1150		Population in 1149		Population in 1148		Population in 1147		Population in 1146		Population in 1145		Population in 1144		Population in 1143		Population in 1142		Population in 1141		Population in 1140		Population in 1139		Population in 1138		Population in 1137		Population in 1136		Population in 1135	
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STATISTICAL DATA.

Area	...	...	...	...	339,089 acres
Population in 1949	(Mid-year)	...	...	...	318,510
Population in 1950	do.	...	...	...	319,640
Population in 1951	do.	...	...	...	317,900
Population in 1952	do.	...	...	...	318,000
Population in 1953	do.	...	...	...	318,800
Population in 1954	do.	...	...	...	320,800
Population in 1955	do.	...	...	...	321,500
Population in 1956	do.	...	...	...	323,400
Population in 1957	do.	...	...	...	325,200
Population in 1958	do.	...	...	...	327,500
Rateable Value, 1958	...	...	...	...	£2,397,872
Sum represented by a penny rate, 1958					£9,096

The Vital Statistics for Monmouthshire and for England and Wales for the year 1958, compiled by the Registrar-General are as in the sub-joined table.

	Birth Rate per 1,000 of home population				Death Rate per 1,000 Home population		Deaths under one year of age per 1,000 births	
	Live Births	Live Births	Still Births	Still Births				
	1958	1957	1958	1957	1958	1957	1958	1957
ENGLAND & WALES ...	16.4	16.1	0.36	0.37	11.7	11.5	*22.6	23.1
MONMOUTHSHIRE ...	17.04	17.1	0.49	0.57	11.73	11.98	25.81	30.98

*Per 1,000 related live births.

In all cases in the above table, the estimated populations as supplied by the Registrar-General have been used in the compilation.

Births.

During 1958 there were, according to the Registrar-General's returns, 5,579 live births in the Administrative County and 162 still-births. Further details are as follows:—

	Legitimate		Illegitimate		Totals.	Comparability Factor.
	M.	F.	M.	F.		
URBAN DISTRICTS:						
Live Births ...	2,321	2,230	64	71	4,686	1.01
Still Births ...	75	57	3	6	141	
RURAL DISTRICTS:						
Live Births ...	430	440	15	8	893	1.00
Still Births ...	13	7	1	—	21	
Totals ...	2,839	2,734	83	85	5,741	1.00

The number of registered live births showed an increase of 27 compared with the year 1957, and it was 167 more than for 1956.

The crude live birth rate per 1,000 population for the year under review and for the preceding five years is as follows, comparative figures being given for England and Wales:—

	1958	1957	1956	1955	1954	1953	1952
Monmouthshire ...	17.04	17.1	16.8	15.3	16.3	16.8	17.2
England & Wales ...	16.4	16.1	15.6	15.0	15.2	15.5	15.3

The number of live births in the County during 1958 was 5,579, giving a rate of 17.04 per 1,000 population. As the comparability factor is 1.00, no adjustment is necessary, and the figure compares with 16.4 for England and Wales.

The number of still-births was 162, giving a crude and adjusted rate of 0.49 per 1,000 population. This is higher than the rate for England and Wales, which for 1958 was 0.36 per 1,000 civilian population. The number of registered still-births works out at 28.2 per 1,000 live and still-births and 29.0 per 1,000 live births.

Deaths.

The total number of deaths registered in the Administrative County, as shown by the Registrar-General returns, was 3,842. How this compares with previous years is shown:—

1958	1957	1956	1955	1954	1953	1952	1951	1950	1949
3,842	3,897	3,867	3,986	3,824	3,691	3,665	4,256	3,948	3,869

The crude general death rate calculated upon the estimate of population submitted by the Registrar-General, 327,500, was 11.73 per 1,000 living. The figure was higher than for England and Wales (11.7). After adjustment by the comparability factor the County figure was 13.1. The following is a comparison of the crude rate with previous years:—

1958	1957	1956	1955	1954	1953	1952	1951	1950	1949
11.73	11.98	11.96	12.4	11.9	11.6	11.5	13.4	12.4	12.15

The Infant Mortality rate per 1,000 related live births for Monmouthshire and also for England and Wales for the present and past six years are as follows:—

	1958	1957	1956	1955	1954	1953	1952
Monmouthshire ...	25.81	30.98	28.96	33.97	39.7	32.6	33.9
England & Wales ...	22.6	23.1	23.8	24.9	25.4	26.8	27.6

During 1958, 97 children died before reaching the age of 4 weeks. This represented a neo-natal mortality rate of 17.39 per 1,000 related live births. The figure for England and Wales was 16.2.

Maternal Mortality.

There was 1 death registered during the year from accidents and diseases of pregnancy and parturition, but none from puerperal sepsis. This is equal to a rate of 0.18 per 1,000 live births. Calculated upon total births (live and still-births) the figure is 0.17 per 1,000.

The rate for England and Wales was 0.43 per 1,000 total (live and still) births.

The County maternal mortality rates per 1,000 live and still-births for the present and previous years are shown:—

1958	...	...	...	6.17
1957	...	...	...	0.70
1956	...	...	...	1.07
1955	...	...	...	0.98
1954	...	...	...	1.49
1953	...	...	...	1.09
1952	...	...	...	0.71
1951	...	...	...	1.48
1950	...	...	...	1.73
1949	...	...	...	2.83
1948	...	...	...	1.92
1947	...	...	...	1.17

During the year 1958 there were 14 cases of puerperal pyrexia which were notifiable according to Public Health (Puerperal Fever and Puerperal Pyrexia) Regulations. In 1957 there were 19 notifications, in 1956 there were 8, and in 1955, 22.

PRINCIPAL VITAL STATISTICS RELATING TO MOTHERS AND INFANTS

(Set out as required by the Welsh Board of Health).

Number of live births	...	...	...	...	...	...	5,579
Live birth-rate per 1,000 population, crude	...	...	...	...	...	...	17.04
Live birth-rate per 1,000 population, adjusted	...	...	...	...	...	...	17.04
Number of still-births	...	...	...	...	...	...	162
Still-birth rate per 1,000 live and still-births	...	...	...	...	...	...	28.2
Total number of live and still-births	...	...	...	...	...	...	5,741
Total number of infant deaths	...	...	...	...	...	...	144
Infant mortality rate per 1,000 total live births	...	...	...	...	...	...	25.81
Mortality rate of legitimate infants per 1,000 legitimate live births	...	...	...	...	...	...	25.4
Mortality rate of illegitimate infants per 1,000 illegitimate live births	...	...	...	...	...	...	37.9
Neo-natal mortality rate per 1,000 live births (first 4 weeks)	...	...	...	...	...	...	17.39
Illegitimate live births per cent. of total live births	...	...	...	...	...	...	2.8
Number of maternal deaths (including abortions)	...	...	...	...	...	...	1
Maternal mortality rate per 1,000 live and still-births	...	...	...	...	...	...	0.35

VITAL STATISTICS FOR THE YEAR 1938

CITY.	Year of age	Rate per 1,000 live births	AREA	DEATHS			Rate per 1,000 live births	District Medical Officer of Health	Year of 1938	TOTAL BIRTHS
				Male	Female	Total				
1	15-20	0.15	101	101	101	101	0.15	Dr. M. R. Harvey, M.B., B.S., D.P.H.	1938	101
2	21-25	0.20	102	102	102	102	0.20	Dr. M. R. Harvey, M.B., B.S., D.P.H.	1938	102
3	26-30	0.25	103	103	103	103	0.25	Dr. M. R. Harvey, M.B., B.S., D.P.H.	1938	103
4	31-35	0.30	104	104	104	104	0.30	Dr. M. R. Harvey, M.B., B.S., D.P.H.	1938	104
5	36-40	0.35	105	105	105	105	0.35	Dr. M. R. Harvey, M.B., B.S., D.P.H.	1938	105
6	41-45	0.40	106	106	106	106	0.40	Dr. M. R. Harvey, M.B., B.S., D.P.H.	1938	106
7	46-50	0.45	107	107	107	107	0.45	Dr. M. R. Harvey, M.B., B.S., D.P.H.	1938	107
8	51-55	0.50	108	108	108	108	0.50	Dr. M. R. Harvey, M.B., B.S., D.P.H.	1938	108
9	56-60	0.55	109	109	109	109	0.55	Dr. M. R. Harvey, M.B., B.S., D.P.H.	1938	109
10	61-65	0.60	110	110	110	110	0.60	Dr. M. R. Harvey, M.B., B.S., D.P.H.	1938	110
11	66-70	0.65	111	111	111	111	0.65	Dr. M. R. Harvey, M.B., B.S., D.P.H.	1938	111
12	71-75	0.70	112	112	112	112	0.70	Dr. M. R. Harvey, M.B., B.S., D.P.H.	1938	112
13	76-80	0.75	113	113	113	113	0.75	Dr. M. R. Harvey, M.B., B.S., D.P.H.	1938	113
14	81-85	0.80	114	114	114	114	0.80	Dr. M. R. Harvey, M.B., B.S., D.P.H.	1938	114
15	86-90	0.85	115	115	115	115	0.85	Dr. M. R. Harvey, M.B., B.S., D.P.H.	1938	115
16	91-95	0.90	116	116	116	116	0.90	Dr. M. R. Harvey, M.B., B.S., D.P.H.	1938	116
17	96-100	0.95	117	117	117	117	0.95	Dr. M. R. Harvey, M.B., B.S., D.P.H.	1938	117

VITAL STATISTICS FOR THE YEAR 1958

DISTRICT	ESTIMATED POPULATION	LIVE BIRTHS								STILL BIRTHS								DEATHS				INFANTILE MORTALITY.				AREA	District Medical Officer of Health at End of 1958																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
		LEGITIMATE				ILLEGITIMATE				TOTAL				GRAND TOTAL	Rate per 1000 of population	Male	Female	Total	Rate per 1000 of population	Deaths under 1 year of age.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
		Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Leg.	Illegitimate.							Total.	Rate per 1000 live births																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
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REGISTRAR-GENERAL'S RETURN OF BIRTHS AND INFANT DEATHS IN URBAN AND RURAL DISTRICTS IN 1958

District.	Estimated Mid-Year Popula- tion.	Live Births.			Still Births.			Deaths under 1 Year of Age.			Deaths under 4 Weeks of Age.			Comparability Factors.	
		Legit.		Illegit.	Legit.		Illegit.	Legit.		Illegit.	Legit.		Illegit.	Births.	Deaths.
		M.	F.		M.	F.		M.	F.		M.	F.			
Urban.															
Abercarn	18,620	150	154	4	5	—	—	2	2	—	2	1	—	0.99	1.22
Abergavenny	9,020	79	85	2	5	1	—	4	4	—	2	2	—	1.00	0.97
Abertillery	26,520	220	196	8	4	2	—	6	3	—	3	2	—	1.03	1.15
Bedwas & Machen	9,800	90	85	1	1	—	—	4	—	—	2	—	—	0.95	1.26
Bedwellty	28,080	244	243	5	8	1	2	4	8	1	4	6	—	1.01	1.34
Blaenavon	9,140	59	58	3	2	—	—	2	3	—	2	2	—	1.05	1.14
Caerleon	3,990	30	19	1	—	—	—	—	1	—	—	1	—	1.08	0.67
Chepstow	5,940	55	48	2	3	—	—	—	—	—	1	—	—	1.00	0.57
Cwmbran	19,740	228	227	5	6	—	—	5	2	1	4	3	—	0.82	1.40
Ebbw Vale	28,320	234	216	5	6	—	—	4	2	—	4	2	—	1.05	1.23
Monmouth	5,690	37	35	2	3	—	—	1	—	—	1	—	—	1.01	0.88
Mynyddislwyn	15,430	158	128	2	4	—	—	8	6	1	6	2	—	1.00	1.34
Nantyglo & Blaina	11,030	71	86	2	8	1	—	4	5	—	2	3	—	1.05	1.11
Pontypool	40,290	304	301	11	7	3	10	9	6	1	5	4	—	1.04	1.12
Rhymney	8,810	83	66	5	2	—	—	5	3	—	3	—	—	1.03	1.16
Risca	14,520	89	101	3	3	—	—	1	2	—	1	—	—	1.01	1.07
Tredeggar	20,180	179	166	3	4	—	—	—	7	—	—	7	—	1.00	1.16
Usk	1,680	11	16	—	—	—	—	—	—	—	—	—	—	1.09	1.02
Totals Urban Districts	276,800	2321	2230	64	71	3	6	60	57	4	42	36	1	1.01	1.16
Rural.															
Abergavenny	8,660	67	54	2	2	—	—	—	2	—	—	1	—	1.27	0.46
Chepstow	10,870	91	85	7	3	1	—	1	1	—	1	1	—	1.02	1.09
Magor & St Mellons	14,430	115	122	4	2	—	—	2	6	—	2	4	—	1.00	1.03
Monmouth	5,870	38	41	1	—	—	—	1	2	—	—	2	—	1.08	0.87
Pontypool	10,870	119	138	1	1	—	—	5	1	—	4	1	—	0.79	1.30
Total Rural Districts	50,700	430	440	15	8	1	—	9	12	—	7	9	—	1.00	0.90
Grand Totals ...	327,500	2751	2670	79	79	4	6	69	69	4	49	45	1	1.00	1.12

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CAUSES OF DEATH IN VARIOUS AGE GROUPS IN THE ADMINISTRATIVE COUNTY OF MORRIS, FOR THE YEAR 1951

Age Groups.	CAUSES OF DEATH																																					
	Tuberculosis, Respiratory	Tuberculosis, Other	Syphilis, Disease	Diphtheria	Whooping Cough	Meningococcal Infection	Acute Poliomyelitis	Measles	Other Infective and Parasitic Diseases	Malignant Neoplasm, Stomach	Malignant Neoplasm, Lung, Bronchus	Malignant Neoplasm, Breast	Malignant Neoplasm, Uterus	Other Malignant and Lymphatic Neoplasms	Leukemia, Alkalemia	Diabetes	Vascular Lesions of Nervous System	Concussive Diseases, Angina	Hypertension, with Heart Disease	Other Heart Disease	Other Circulatory Disease	Influenza	Pneumonia	Bronchitis	Other Diseases of Respiratory System	Ulcer of Stomach and Duodenum	Gastritis, Enteritis and Diarrhoea	Nephritis and Nephrosis	Hyperplasia of Prostate	Pregnancy, Childbirth, Abortion	Constitutional Malformations	Other Defined and Ill-defined Diseases	Motor Vehicle Accidents	All other Accidents	Suicide	Homicide and Operations of War	All Causes	
Urban Districts.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36		
Males	0-14	—	—	—	—	—	—	1	—	—	—	—	—	2	1	1	—	—	—	—	—	—	11	2	2	—	3	—	—	—	14	35	1	3	4	—	—	72
	15-24	—	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	2	1	1	—	—	—	—	2	3	4	4	—	—	18	
	25-44	—	—	—	—	—	—	—	—	—	2	—	—	—	5	5	13	—	—	9	1	—	2	6	63	20	6	—	6	1	—	2	7	5	17	—	—	21
	45-64	—	—	—	—	—	—	—	—	—	48	—	—	35	2	6	137	11	35	11	1	—	6	63	20	6	—	6	1	—	27	3	17	7	—	—	503	
	65-74	—	—	—	—	—	—	—	—	—	26	—	—	43	3	4	61	7	65	26	37	—	11	91	22	1	1	3	5	—	28	2	6	2	—	—	561	
	75+	—	—	—	—	—	—	—	—	—	8	—	—	42	1	5	91	85	21	163	37	—	25	69	5	1	1	7	17	1	36	1	4	—	—	—	634	
Total Males	...	18	1	3	—	—	—	1	4	55	84	—	—	127	9	11	189	359	39	272	75	6	55	226	50	9	5	20	23	—	21	138	23	57	11	—	1,891	
Females	0-14	—	—	—	—	—	—	1	—	—	—	—	—	2	—	1	—	—	—	—	—	—	10	3	1	1	—	2	—	—	—	11	2	4	—	2	—	59
	15-24	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	—	—	—	—	—	3	1	—	—	—	—	—	—	4	9	—	—	—	—	17	
	25-44	—	2	—	—	—	—	—	—	—	4	—	—	—	—	—	4	—	—	8	3	—	4	3	—	2	1	2	—	—	—	9	—	—	—	—	—	57
	45-64	—	3	—	—	—	—	—	—	11	3	17	14	34	1	5	45	36	8	24	8	—	4	14	4	1	1	—	—	—	30	1	2	10	—	—	277	
	65-74	—	1	—	—	—	—	—	—	17	1	8	7	32	—	8	105	65	17	157	38	—	13	35	4	—	4	5	—	—	54	1	14	1	—	—	585	
	75+	—	—	—	—	—	—	—	—	19	10	4	30	—	—	—	—	—	—	—	—	1	13	35	4	—	—	—	—	—	—	—	—	—	—	—	—	
Total Females	...	6	—	—	—	—	—	1	—	47	4	39	30	108	2	17	211	175	36	246	68	5	40	65	12	4	10	14	—	1	13	159	4	26	15	—	1,358	
Rural Districts.	0-14	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	2	4	—	—	—	—	—	9
Males	15-24	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	16
	25-44	—	—	—	—	—	—	—	—	4	10	—	—	—	2	—	12	23	1	3	—	—	1	4	1	—	—	—	—	—	2	3	3	1	—	—	—	83
	45-64	—	—	1	—	—	—	—	—	—	7	—	—	11	—	—	9	19	—	11	5	—	1	5	—	1	—	—	—	—	6	—	1	1	—	—	—	80
	65-74	—	2	—	—	—	—	—	—	2	—	—	—	13	—	—	18	23	1	31	9	—	1	12	1	2	—	—	1	3	—	5	1	3	—	—	124	
Total Males	...	3	—	1	—	—	—	—	—	7	17	—	—	33	1	—	39	69	3	46	17	1	6	18	3	3	1	1	4	—	2	20	6	6	5	—	312	
Females	0-14	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	4	1	—	1	2	—	—	—	—	—	—	—	1	9	—	—	—	12	
	15-24	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	—	—	—	—	1	2	3	2	—	—	—	—	—	—	—	—	—	—	—	16	
	25-44	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	8	3	2	—	—	2	3	2	—	—	—	—	—	—	1	4	—	—	—	48		
	45-64	—	—	—	—	—	—	—	—	3	1	4	—	—	—	—	18	9	2	16	1	2	2	2	—	—	—	—	—	—	7	1	2	—	—	69		
	65-74	—	—	—	—	—	—	—	—	2	1	1	1	4	—	—	23	15	—	51	15	2	2	7	—	—	—	—	—	—	8	—	4	—	—	136		
Total Females	...	2	—	—	—	—	1	—	—	6	2	5	1	17	—	1	52	27	4	77	19	6	8	10	2	—	—	—	1	—	2	28	1	7	2	—	281	
Grand Totals	...	29	1	4	—	—	1	2	4	115	107	44	31	285	12	29	491	630	82	641	179	18	109	319	67	16	16	36	27	1	38	345	34	96	33	—	3,842	

Year	1901	1902	1903	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935	1936	1937	1938	1939	1940	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968	1969	1970	1971	1972	1973	1974	1975	1976	1977	1978	1979	1980	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028	2029	2030
1901	1902	1903	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935	1936	1937	1938	1939	1940	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968	1969	1970	1971	1972	1973	1974	1975	1976	1977	1978	1979	1980	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028	2029	2030	

REGISTRAR GENERAL'S RETURN OF DEATHS FROM ALL CAUSES IN THE ADMINISTRATIVE COUNTY OF MONMOUTH FOR THE YEAR 1958

District.	Popula- tion.	Tuberculosis, Respiratory	Tuberculosis, Other	Syphilitic Diseases	Diphtheria	Whooping Cough	Meningococcal Infection	Acute Poliomyelitis	Measles	Other Infective and Parasitic Diseases	Malignant Neoplasm, Stomach	Malignant Neoplasm, Lung	Malignant Neoplasm, Breast	Malignant Neoplasm, Uterus	Other Malignant and Lymphatic Neoplasms	Leukaemia, ALC	Diabetes	Vascular Lesions of Nervous System	Coronary Diseases, Angina	Hypertension, with Heart Disease	Other Heart Diseases	Other Circulatory Disease	Influenza	Pneumonia	Bronchitis	Other Diseases of Respiratory System	Ulcer of Stomach and Duodenum	Gastritis, Enteritis and Diarrhoea	Nephritis and Nephrosis	Hyperplasia of Prostate	Pregnancy, Childbirth, Abortion	Constitutional Malformations	Other Defined and Ill-defined Diseases	Motor Vehicle Accidents	All other Accidents	Suicide	Homicide and Operations of War	All Causes
Urban Districts.		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	
Abercarn	18,620	—	—	—	—	—	—	—	—	—	13	6	2	3	12	—	4	37	27	—	44	11	—	7	24	3	—	—	1	—	—	16	3	8	1	—	227	
Abergavenny	9,020	—	—	—	—	—	—	—	—	—	4	3	1	11	—	—	—	13	27	6	27	10	—	3	3	3	—	—	1	—	—	15	—	4	—	119		
Abertillery	26,520	—	—	—	—	—	—	—	—	—	7	8	5	24	—	—	—	35	52	5	45	7	—	3	37	5	—	—	—	—	—	24	1	2	236			
Bedwas & Machen	9,800	—	—	—	—	—	—	—	—	—	6	1	3	1	5	—	—	11	18	6	6	—	—	3	3	—	—	—	—	—	13	—	1	—	119			
Bedwelty	28,080	—	—	—	—	—	—	—	—	—	8	7	1	2	15	—	—	32	39	4	41	14	—	11	38	12	—	—	—	—	27	4	9	2	—	72		
Blaenavon	9,140	—	—	—	—	—	—	—	—	—	5	4	3	—	6	—	—	18	14	1	15	4	—	1	5	17	—	—	—	—	13	1	2	1	—	120		
Caerleon	3,990	—	—	—	—	—	—	—	—	—	1	1	1	1	8	—	—	14	11	10	29	10	—	1	3	9	—	—	—	—	8	6	—	—	130			
Chepstow	5,940	—	—	—	—	—	—	—	—	—	1	1	1	1	8	—	—	18	14	1	15	7	—	1	3	6	1	—	—	—	14	3	—	—	130			
Cwmbran	19,740	—	—	—	—	—	—	—	—	—	6	9	—	1	15	—	—	31	24	4	41	1	—	3	6	1	—	—	—	—	47	3	10	—	345			
Ebbw Vale	28,320	—	—	—	—	—	—	—	—	—	9	5	7	2	31	—	—	40	61	7	23	18	—	5	12	33	2	—	—	—	14	3	—	—	169			
Monmouth	5,690	—	—	—	—	—	—	—	—	—	3	4	3	—	8	—	—	10	22	2	35	2	—	1	6	15	9	—	—	—	11	2	1	—	164			
Mynyddislwyn	15,430	—	—	—	—	—	—	—	—	—	5	2	2	—	13	—	—	34	5	37	2	—	—	2	2	14	—	—	—	—	6	3	—	—	164			
Nantyglo & Blaina	11,090	—	—	—	—	—	—	—	—	—	3	2	—	2	28	—	—	71	78	6	62	14	—	13	38	10	—	—	—	—	14	3	1	—	164			
Pontypool	40,290	—	—	—	—	—	—	—	—	—	19	22	6	8	4	—	—	11	22	2	20	18	—	4	15	4	—	—	—	—	10	3	1	—	170			
Rhymney	8,810	—	—	—	—	—	—	—	—	—	2	3	—	—	20	—	—	18	43	3	34	12	—	1	7	12	—	—	—	—	12	1	24	1	—	226		
Risca	14,520	—	—	—	—	—	—	—	—	—	9	4	2	4	12	—	—	24	34	2	43	15	—	1	5	17	5	—	—	—	—	1	1	1	—	18		
Tredegarr	20,180	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	—	2	2	2	1	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Unk	1,680	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Rural Districts.		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	
Abergavenny	8,660	—	—	—	—	—	—	—	—	—	3	1	1	—	15	—	—	22	21	1	51	9	—	3	7	6	1	—	—	—	—	8	—	—	4	1	—	158
Chepstow	10,870	—	—	—	—	—	—	—	—	—	3	5	1	—	7	—	—	19	17	1	14	7	—	1	1	6	1	—	—	—	—	9	1	4	1	—	163	
Magor & St. Mellons	14,430	—	—	—	—	—	—	—	—	—	4	7	2	—	15	—	—	27	34	4	26	12	—	5	8	—	—	—	—	—	—	1	9	1	1	—	168	
Monmouth	5,870	—	—	—	—	—	—	—	—	—	1	2	—	1	6	—	—	10	13	1	12	5	—	1	4	1	—	—	—	—	—	1	1	1	—	72		
Pontypool	10,870	—	—	—	—	—	—	—	—	—	2	4	1	—	7	—	—	13	11	—	20	3	—	3	—	4	2	—	—	—	—	2	11	4	2	—	92	
Total	327,500	29	1	4	—	—	1	—	2	4	115	107	44	31	285	12	29	491	630	82	641	179	18	109	319	67	16	16	36	27	1	38	345	34	96	33	—	3,842

Year	Month	Day	Hour	Minute	Second	Latitude	Longitude	Altitude	Temperature	Humidity	Wind	Clouds	Pressure	Visibility	Remarks
1880	Jan	1	10	15	30	42° 15'	71° 30'	1000	50° F	75%	SW 10	100	30.0	10	Clear
1880	Jan	2	11	20	45	42° 15'	71° 30'	1000	55° F	70%	SW 12	100	30.1	12	Clear
1880	Jan	3	12	25	00	42° 15'	71° 30'	1000	60° F	65%	SW 15	100	30.2	15	Clear
1880	Jan	4	13	30	15	42° 15'	71° 30'	1000	65° F	60%	SW 18	100	30.3	18	Clear
1880	Jan	5	14	35	30	42° 15'	71° 30'	1000	70° F	55%	SW 20	100	30.4	20	Clear
1880	Jan	6	15	40	45	42° 15'	71° 30'	1000	75° F	50%	SW 22	100	30.5	22	Clear
1880	Jan	7	16	45	00	42° 15'	71° 30'	1000	80° F	45%	SW 25	100	30.6	25	Clear
1880	Jan	8	17	50	15	42° 15'	71° 30'	1000	85° F	40%	SW 28	100	30.7	28	Clear
1880	Jan	9	18	55	30	42° 15'	71° 30'	1000	90° F	35%	SW 30	100	30.8	30	Clear
1880	Jan	10	19	00	45	42° 15'	71° 30'	1000	95° F	30%	SW 32	100	30.9	32	Clear
1880	Jan	11	20	05	00	42° 15'	71° 30'	1000	100° F	25%	SW 35	100	31.0	35	Clear
1880	Jan	12	21	10	15	42° 15'	71° 30'	1000	105° F	20%	SW 38	100	31.1	38	Clear
1880	Jan	13	22	15	30	42° 15'	71° 30'	1000	110° F	15%	SW 40	100	31.2	40	Clear
1880	Jan	14	23	20	45	42° 15'	71° 30'	1000	115° F	10%	SW 42	100	31.3	42	Clear
1880	Jan	15	24	25	00	42° 15'	71° 30'	1000	120° F	5%	SW 45	100	31.4	45	Clear
1880	Jan	16	25	30	15	42° 15'	71° 30'	1000	125° F	0%	SW 48	100	31.5	48	Clear
1880	Jan	17	26	35	30	42° 15'	71° 30'	1000	130° F	0%	SW 50	100	31.6	50	Clear
1880	Jan	18	27	40	45	42° 15'	71° 30'	1000	135° F	0%	SW 52	100	31.7	52	Clear
1880	Jan	19	28	45	00	42° 15'	71° 30'	1000	140° F	0%	SW 55	100	31.8	55	Clear
1880	Jan	20	29	50	15	42° 15'	71° 30'	1000	145° F	0%	SW 58	100	31.9	58	Clear
1880	Jan	21	30	55	30	42° 15'	71° 30'	1000	150° F	0%	SW 60	100	32.0	60	Clear
1880	Jan	22	31	00	45	42° 15'	71° 30'	1000	155° F	0%	SW 62	100	32.1	62	Clear
1880	Jan	23	32	05	00	42° 15'	71° 30'	1000	160° F	0%	SW 65	100	32.2	65	Clear
1880	Jan	24	33	10	15	42° 15'	71° 30'	1000	165° F	0%	SW 68	100	32.3	68	Clear
1880	Jan	25	34	15	30	42° 15'	71° 30'	1000	170° F	0%	SW 70	100	32.4	70	Clear
1880	Jan	26	35	20	45	42° 15'	71° 30'	1000	175° F	0%	SW 72	100	32.5	72	Clear
1880	Jan	27	36	25	00	42° 15'	71° 30'	1000	180° F	0%	SW 75	100	32.6	75	Clear
1880	Jan	28	37	30	15	42° 15'	71° 30'	1000	185° F	0%	SW 78	100	32.7	78	Clear
1880	Jan	29	38	35	30	42° 15'	71° 30'	1000	190° F	0%	SW 80	100	32.8	80	Clear
1880	Jan	30	39	40	45	42° 15'	71° 30'	1000	195° F	0%	SW 82	100	32.9	82	Clear
1880	Jan	31	40	45	00	42° 15'	71° 30'	1000	200° F	0%	SW 85	100	33.0	85	Clear

REGISTRAR GENERAL'S RETURN OF DEATHS FROM ALL CAUSES IN THE ADMINISTRATIVE COUNTY OF MONMOUTH FOR THE YEAR 1958

District.	Population.	Tuberculosis, Respiratory	Tuberculosis, Other	Syphilitic Diseases	Diphtheria	Whooping Cough	Meningococcal Infection	Acute Poliomyelitis	Measles	Other Infective and Parasitic Diseases	Malignant Neoplasm, Stomach	Malignant Neoplasm, Lung	Malignant Neoplasm, Breast	Malignant Neoplasm, Uterus	Other Malignant and Lymphatic Neoplasms	Leukaemia, Agranulocytosis	Diabetes	Vascular Lesions of Nervous System	Coronary Diseases, Angina	Hypertension, with Heart Disease	Other Heart Diseases	Other Circulatory Diseases	Influenza	Pneumonia	Brucellosis	Other Diseases of Respiratory System	Ulcer of Stomach and Duodenum	Gastritis, Enteritis and Diarrhoea	Nephritis and Nephrosis	Hyperplasia of Prostate	Pregnancy, Childbirth, Abortion	Constitutional Malformations	Other Defined and Undefined Diseases	Motor Vehicle Accidents	All other Accidents	Suicide	Homicide and Operations of War	All Causes	
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36		
Urban Districts.																																							
Abergarn	18,620	—	—	—	—	—	—	—	—	—	13	6	2	3	12	—	4	37	27	—	44	11	—	7	24	3	—	—	1	2	—	3	16	3	8	1	—	227	
Abergavenny	9,020	—	—	—	—	—	—	—	—	—	4	3	—	1	11	—	—	13	27	—	27	10	—	3	3	3	—	—	—	—	—	15	—	4	—	—	139		
Aberbillery	26,520	1	—	—	—	—	—	—	—	1	8	1	1	—	24	—	—	36	52	—	45	7	—	8	37	5	—	—	—	—	—	24	1	11	—	296			
Bedwas & Machen	9,800	2	—	—	—	—	—	—	—	—	6	1	—	—	5	—	—	11	18	—	6	—	—	3	5	1	—	—	—	—	—	24	—	—	—	—	5		
Bedwellty	28,080	9	—	—	—	—	—	—	—	—	8	3	1	—	15	—	—	32	39	—	41	14	—	11	38	12	—	—	—	—	—	13	1	4	9	—	28		
Blaenavon	9,140	—	—	—	—	—	—	—	—	—	5	4	3	—	8	—	—	18	14	—	1	—	—	11	17	2	—	—	—	—	—	13	1	1	2	—	112		
Caerleon	3,990	1	—	1	—	—	—	—	—	—	1	1	—	—	6	—	—	9	9	—	16	—	—	4	1	—	—	—	—	—	—	—	—	—	—	—	—		
Chepstow	5,940	1	—	—	—	—	—	—	—	—	1	1	—	—	1	—	—	14	11	—	10	10	—	1	1	2	—	—	—	—	—	—	8	1	1	—	72		
Cwmbran	19,740	—	—	—	—	—	—	—	—	—	6	9	—	—	15	—	—	31	24	—	41	1	—	3	9	6	—	—	—	—	—	2	—	4	—	129			
Ebbw Vale	28,320	4	—	1	—	—	—	—	—	—	9	5	—	—	31	—	—	40	61	—	23	18	—	5	12	33	2	—	—	—	—	14	3	1	7	—	169		
Monmouth	5,690	1	—	—	—	—	—	—	—	—	1	—	—	—	8	—	—	17	1	—	11	9	—	1	6	1	—	—	—	—	—	2	47	3	10	—	130		
Mynyddislwyn	15,430	1	1	—	—	—	—	—	—	—	3	4	—	—	14	—	—	10	22	—	37	2	—	2	14	2	—	—	—	—	—	—	11	2	1	—	73		
Nantyglo & Blaena	11,030	3	—	—	—	—	—	—	—	—	2	2	—	—	13	—	—	15	34	—	35	2	—	6	15	9	—	—	—	—	—	6	3	1	—	162			
Pontypool	40,290	—	—	—	—	—	—	—	—	—	19	22	—	—	28	—	—	20	34	—	18	2	—	2	14	10	—	—	—	—	—	—	11	2	1	—	164		
Rhymney	8,810	—	—	—	—	—	—	—	—	—	2	3	—	—	4	—	—	11	22	—	6	—	—	13	38	10	—	—	—	—	—	—	14	3	1	—	169		
Risca	14,520	1	—	—	—	—	—	—	—	—	1	5	—	—	20	—	—	18	43	—	30	15	—	4	15	4	—	—	—	—	—	10	3	3	—	170			
Tredegart	20,180	—	—	—	—	—	—	—	—	—	9	4	—	—	12	—	—	24	34	—	43	15	—	1	7	12	1	—	—	—	—	12	1	6	1	—	226		
Uk	1,680	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	—	2	2	—	1	—	—	—	—	—	—	—	—	—	—	1	1	1	—	18			
Rural Districts.																																							
Abergavenny	8,660	1	—	1	—	—	—	—	—	—	3	1	—	—	15	—	—	22	21	—	31	9	3	7	6	1	—	—	—	—	—	—	8	—	4	—	—	158	
Chepstow	10,670	1	—	—	—	—	—	—	—	—	3	5	—	—	7	—	—	19	17	—	14	7	1	6	1	1	—	—	—	—	—	9	1	4	—	—	103		
Magor & St. Mellons	14,430	1	—	—	—	—	—	—	—	—	4	7	—	—	15	—	—	27	34	—	26	12	—	5	8	1	—	—	—	—	—	—	11	1	2	1	—	168	
Monmouth	5,870	1	—	—	—	—	—	—	—	—	1	2	—	—	1	—	—	10	13	—	12	5	—	1	4	1	—	—	—	—	—	—	1	9	1	1	—	72	
Pontypool	10,870	1	—	—	—	—	—	—	—	—	2	4	—	—	7	—	—	13	11	—	30	3	3	—	4	2	—	—	—	—	—	—	2	11	4	2	—	92	
Total	327,500	29	1	4	—	—	1	—	2	4	115	107	44	31	285	12	29	491	630	82	641	179	18	109	319	67	16	16	36	27	1	38	345	34	96	33	—	3,842	

0 to 4 Weeks.

District.	TUBERCU- LOSIS.		Syphilitic Disease	Diphtheria	Whooping Cough	Meningococcal Infection	Acute Poliomyelitis	Measles	Cancer (Malignant Disease)	Heart Disease	Influenza	Pneumonia (All Forms)	Bronchitis	Other Respiratory Diseases	Congenital Malformations	Gastritis, Enteritis and Diarrhoea	Violence	Atelectasis	Prematurity	Erythroblastosis Foetalis or Incompatibility of Parents' Blood Group	Other Causes	Total
	Respiratory	Other																				
URBAN.																						
Abercarn	...	...																	3		1	4
Abergavenny	...	...										1						1	1			4
Abertillery	...	...								1									1			5
Bedwas & Machen	...	...																			1	2
Bedwellty	...	...																	4			10
Blaenavon	...	...																	3		1	4
Caerleon	...	...																	1			1
Chepstow	...	...																				1
Cwmbran	...	...															2	2	1			8
Ebbw Vale	...	...																1	3		2	7
Monmouth	...	...																	1			1
Mynyddislwyn	...	...				1						2						1	3		1	8
Nantyglo & Blaina	...	...									2								2		2	6
Pontypool	...	...										2			2			2	2		1	9
Rhymney	...	...										1						1	1			3
Risca	...	...																1	1			2
Tredeggar	...	...																	6			7
Usk	...	...																				
Urban Totals	...	...				2				1	2	6			11		2	9	33	2	14	82
RURAL.																						
Abergavenny	...	...																	1			1
Chepstow	...	...																	1	1		2
Magor & S. Mellons	...	...																1	4			5
Monmouth	...	...																	1			1
Pontypool	...	...																1	1			4
Rural Totals	...	...													2			2	8	1		13
Grand Totals	...	...				2				1	2	6			13		2	11	41	3	14	95

Infant Deaths under One Year of Age, 1958 (Continued).

4 Weeks to 1 Year.

District.	TUBERCU- LOSIS.		Syphilitic Disease	Diphtheria	Whooping Cough	Meningococcal Infection	Acute Poliomyelitis	Measles	Cancer (Malignant Disease)	Heart Disease	Influenza	Pneumonia (All Forms)	Bronchitis	Other Respiratory Diseases	Congenital Malformations	Gastritis, Enteritis and Diarrhoea	Violence	Atelectasis	Prematurity	Erythroblastosis Foetalis or Incompatibility of Parents' Blood Group	Other Causes	Total
	Respiratory	Other																				
URBAN.																						
Abercarn ...	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	1	—	1	1
Abergavenny ...	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	—	1	—	—	4
Abertillery ...	—	—	—	—	—	1	—	—	—	—	—	1	—	—	—	—	1	—	—	—	—	4
Bedwas & Machen ...	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	1	2
Bedwellty ...	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1	3
Blaenavon ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Caerleon ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Chepstow ...	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	1	3
Cwmbran ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Ebbw Vale ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—
Monmouth ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Mynyddislwyn ...	—	—	—	—	—	2	—	—	—	1	—	1	—	—	—	2	—	—	—	—	—	7
Nantyglo & Blaina ...	—	—	—	—	—	—	—	—	—	—	—	3	—	—	—	—	—	—	—	—	2	2
Pontypool ...	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	2	—	—	—	—	1	7
Rhymney ...	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	1	4
Risca ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1
Tredeggar ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Usk ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Urban Totals ...	—	—	—	—	—	3	—	1	—	2	—	15	—	—	1	5	1	—	1	—	10	39
RURAL.																						
Abergavenny ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1
Chepstow ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Magor & S. Mellons ...	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	1	3
Monmouth ...	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1
Pontypool ...	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	2
Rural Totals ...	—	—	—	—	—	—	—	—	—	—	—	4	—	—	—	2	—	—	—	—	1	7
Grand Totals ...	—	—	—	—	—	3	—	1	—	2	—	19	—	—	1	7	1	—	1	—	11	46

Table compiled from M.O.H.'s Returns.

SUMMARY OF NOTIFICATIONS OF INFECTIOUS DISEASES FOR 1958.

DISTRICTS	Estimated Mid-1958 Population	Scarlet Fever	Whooping Cough	Acute Polio-myelitis		Measles (excluding Rubella)	Diphtheria	Acute Pneumonia	Dysentery	Smallpox	Acute Enceph- alitis		Enteric or Typhoid Fever	Paratyphoid Fever	Erysipelas	Meningococcal Infection	Food Poisoning	Puerperal Pyrexia	Ophthalmia Neonatorum	Respiratory	Tuber- culosis	
				Paralytic	Non- Paralytic						Infective	Post- Infectious									Meninges and CNS.	Other
URBAN.																						
Abercarn	18,620	10	4	...	...	130	...	1	...	...	...	...	...	...	...	...	2	...	...	12	...	...
Abergavenny	9,020	6	7	...	...	53	...	...	...	...	...	...	...	...	...	...	...	...	...	7	...	...
Abertillery	26,520	12	...	...	...	287	...	...	...	...	...	...	...	...	...	...	...	...	...	12	...	...
Bedwas and Machen	9,800	3	5	...	...	80	...	...	...	...	...	...	...	...	...	...	...	...	...	8	...	...
Bedwellty	28,080	4	18	...	...	93	...	...	...	...	...	...	...	...	...	...	...	...	...	35	...	...
Blaenavon	9,140	1	3	...	...	4	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...	...
Caerleon	3,990	2	5	...	...	34	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Chepstow	5,940	1	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cwmbran	19,740	11	7	...	...	360	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Ebbw Vale	28,320	73	43	...	...	281	...	44	6	...	...	...	1	...	4	2	1	...	...	15	...	...
Monmouth	5,690	2	1	...	...	99	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...
Mynyddislwyn	15,430	7	6	...	...	45	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Nantyglo and Blaina	11,030	...	13	...	...	20	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Pontypool	40,290	36	63	...	...	620	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Rhynney	8,810	4	6	...	...	251	...	...	...	...	...	...	...	1	...	...	...	...	...	18	...	...
Risca	14,520	2	1	...	...	36	...	...	...	...	...	...	...	...	...	...	...	...	...	13	...	...
Tredegear	20,180	...	7	...	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	9	...	...
Usk	1,680	...	...	...	...	37	...	...	...	...	...	...	...	...	...	...	...	...	...	14	...	...
Totals, Urban	276,800	174	189	5	1	2435	...	85	12	...	...	...	1	1	9	5	8	14	1	167	...	16
RURAL.																						
Abergavenny	8,660	3	2	...	...	62	...	5	8	...	...	...	1	...	...	...	...	...	...	9	...	1
Chepstow	10,870	1	1	...	...	6	...	...	...	...	...	...	...	...	...	...	...	...	...	6	...	1
Magor & St. Mellons	14,430	9	16	...	...	86	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...	2
Monmouth	5,870	2	2	...	...	115	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Pontypool	10,870	5	15	...	...	191	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals, Rural	50,700	20	36	1	...	460	...	14	8	...	...	...	1	...	2	...	...	...	...	23	...	4
Grand Totals	327,500	194	225	6	1	2895	...	99	20	...	...	...	2	1	11	5	8	14	1	190	...	20

NATURE OF DISEASE.	Under 1 Year			1 Year			2 Years			M.
	M.	F.	Total	M.	F.	Total	M.	F.	Total	
Scarlet Fever ...	—	1	1	3	1	4	2	3	5	6
Whooping Cough ...	8	12	20	12	13	25	17	11	28	13
Acute Poliomyelitis:										
Paralytic ...	—	1	1	—	—	—	1	—	1	—
Non-Paralytic ...	—	—	—	—	—	—	—	—	—	—
Measles (excluding Rubella) ...	45	42	87	125	113	238	156	153	309	182
Diphtheria ...	—	—	—	—	—	—	—	—	—	—
Dysentery ...	—	1	1	—	—	—	—	—	—	1
Meningococcal Infection	2	—	2	—	—	—	—	—	—	—

Acute Pneumonia ...	...	...	...	...	...	...	...	...	...	M
Smallpox ...	...	...	...	...	...	...	...	...	...	15
Acute Encephalitis:										
Infective ...	...	...	...	...	...	...	...	...	...	...
Post-Infectious ...	...	...	...	...	...	...	...	...	...	...
Enteric or Typhoid Fever ...	...	...	...	...	...	...	...	...	...	...
Paratyphoid Fevers ...	...	...	...	...	...	...	...	...	...	...
Erysipelas ..	...	...	...	...	...	...	...	...	...	...
Food Poisoning ...	...	...	...	...	...	...	...	...	...	...
Puerperal Pyrexia ...	...	...	...	...	...	...	...	...	...	...
Ophthalmia Neonatorum ...	...	...	...	...	...	...	...	...	...	...

NATURE OF DISEASE.			Under 5 Years.		
			M.	F.	Total
Tuberculosis	Respiratory ...	...	5	8	13
	Meninges and C.N.S.	...	—	—	—
	Other ...	...	—	1	1

ANALYSIS OF NOTIFICATIONS OF CASES OF INFECTIOUS DISEASES IN AGE GROUPS, 1958.

NATURE OF DISEASE.	Under 1 Year			1 Year			2 Years			3 Years			4 Years			5-9 Years			10-14 Years			15-24 Years			25 Years and Over			Age Unknown			Total (All Ages)		
	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total			
Scarlet Fever ...	—	1	1	3	1	4	2	3	5	6	10	16	7	14	21	45	60	105	13	14	27	8	2	10	1	3	4	—	1	1	85	109	194
Whooping Cough ...	8	12	20	12	13	25	17	11	28	13	15	28	19	15	34	43	39	82	2	—	2	—	1	1	—	3	3	—	2	2	114	111	225
Acute Poliomyelitis:																																	
Paralytic ...	—	1	1	—	—	—	1	—	1	—	—	—	—	—	—	2	1	3	—	—	—	—	—	—	1	—	1	—	—	—	4	2	6
Non-Paralytic ...	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	2
Measles (excluding Rubella) ...	45	42	87	125	113	238	156	153	309	182	172	354	174	178	352	709	657	1366	60	65	125	12	17	29	8	8	16	9	9	18	1480	1414	2894
Diphtheria ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery ...	—	1	1	—	—	—	—	—	—	1	—	1	—	—	—	3	1	4	—	—	—	2	—	2	8	4	12	—	—	—	14	6	20
Meningococcal Infection	2	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	2	2	—	—	—	—	—	—	—	1	1	—	—	—	2	3	5

NATURE OF DISEASE.		Under 5 Years			5-14 Years			15-44 Years			45-64 Years			65 Years and Over			Age Unknown			Total (All Ages)		
		M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total
Acute Pneumonia ...		12	4	16	2	7	9	9	14	23	15	6	21	15	15	30	—	—	—	53	46	99
Smallpox ...		—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Encephalitis:																						
Infective ...		—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Post-infectious ...		—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Enteric or Typhoid Fever ...		—	—	—	—	—	—	1	—	1	—	—	—	—	1	1	—	—	—	1	1	2
Paratyphoid Fevers ...		—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas ...		—	—	—	—	—	—	—	—	—	1	3	2	5	2	2	4	1	—	1	7	11
Food Poisoning ...		1	—	1	3	1	4	—	2	2	1	—	1	—	—	—	—	—	—	5	3	8
Puerperal Pyrexia ...		—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	14	14	—	14
Ophthalmia Neonatorum ...		—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	—	1	1	1

NATURE OF DISEASE.		Under 5 Years			5-14 Years			15-24 Years			25-44 Years			45-64 Years			65 Years and Over			Age Unknown			Total (All Ages)		
		M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total
Tuberculosis	Respiratory ...	5	8	13	6	7	13	23	23	46	25	27	52	38	13	51	13	2	15	—	—	—	110	80	190
	Meninges and C.N.S.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Other ...	—	1	1	1	2	3	3	—	3	3	5	8	4	1	5	—	—	—	—	—	—	11	9	20

Table compiled from District M.O.H.'s Returns.

NOTIFIABLE DISEASES.

Isolation Hospitals.

These are under the control of the Regional Hospital Board and are the responsibility of the Hospital Management Committee.

Smallpox.

No case of Smallpox was reported in the County during 1958.

Scarlet Fever.

The number of notifications of Scarlet Fever was 194. It was 165 in 1957.

Diphtheria.

During the year under review, there were no notifications of cases of Diphtheria.

	1958	1957	1956	1955	1954	1953	1952	1951	1950
No. of Notifications ..	Nil	Nil	Nil	Nil	2	Nil	8	10	9
No. of Deaths ...	Nil	Nil	Nil	Nil	Nil	Nil	2	Nil	Nil

Meningococcal Infection.

	1958	1957	1956	1955	1954	1953
No. of cases notified ...	5	6	2	3	3	4
No. of deaths ...	1	4	2	1	2	3

Acute Poliomyelitis.

	1958	1957	1956	1955	1954	1953
No. of cases notified ...	7	63	8	33	3	9
No. of deaths ...	Nil	3	Nil	2	3	1

Chicken Pox.

This disease was not compulsorily notifiable.

Measles.

	1958	1957	1956	1955	1954	1953
No. of cases notified ...	2,894	2,822	1,554	4,620	47	3,556
No. of deaths ...	2	1	1	Nil	Nil	3

Whooping Cough.

	1958	1957	1956	1955	1954	1953
No. of cases notified ...	225	276	437	399	839	556
No. of deaths ...	Nil	Nil	2	Nil	1	2

Influenza.

	1958	1957	1956	1955	1954	1953
No. of deaths ...	18	60	13	25	15	3

Acute Pneumonia.

	1958	1957	1956	1955	1954	1953
No. of cases notified ...	99	163	108	177	174	275
No. of deaths ...	109	118	123	140	134	127

DIPHTHERIA IMMUNISATION FOR THE YEAR 1958.

Number of children in the Local Health Authority area on 31st December, 1958, who have completed a course of diphtheria immunisation at any time between 1st January, 1944, and 31st December, 1958.

Age on 31-12-1958 (i.e., born in Year)	Under 1 1958	1 to 4 1954-57	5 to 9 1949-53	10 to 14 1944-48	Under 15 Total.
A. Number of children whose last course (primary or booster) was completed in the period 1954-1958.	1,095	11,016	12,550	11,337	35,998
B. Number of children whose last course (primary or booster) was completed in the period 1953 or earlier.	—	—	9,733	13,389	23,122
C. Estimated mid-year child population.	5,460	20,340	53,400		79,200
Immunity Index 100 A/C.	20.05	54.15	44.73		45.45

DIPHTHERIA IMMUNISATION FOR THE YEAR 1958.

	AGE at Date of Final Injection (as regards A) or of Reinforcing Injection (as regards B).			
	Under 1	1 to 4	5 to 14	Total
A. Number of children who completed a full course of primary immunisation in the Authority's Area (including temporary residents) during the 12 months ended 31st December, 1958.	1,494	1,666	159	3,319
B. Number of children who received a Secondary Injection (i.e., subsequently to Primary Immunisation at an earlier age) during the 12 months ended 31st December, 1958.	—	75	527	602

SMALLPOX VACCINATION.

(1) NUMBER OF PERSONS VACCINATED (or re-vaccinated) DURING 1958.

Age at Date of Vaccination	Under 1	1	2 to 4	5 to 14	15 or over	Total
Number Vaccinated ...	1,555	382	145	108	190	2,380
Number re-vaccinated ...	—	—	12	36	232	280

(2) NUMBER OF CASES SPECIALLY REPORTED DURING 1958. (Age Groups as above).

(a) Generalised Vaccinia	—	—	—	—	—	—
(b) Post-vaccinal Encephalomyelitis	—	—	—	—	—	—
(c) Death from complica- tions of vaccination other than (a) and (b)	—	—	—	—	—	—

WHOOPING COUGH IMMUNISATION.

Return for Year ended 31st December, 1958.

	AGE at date of final injection		
	0—4 Years	5—14 Years	Total
Number of children who have completed a primary course (normally 3 injections) of pertussis vaccine (singly or in combination) in the Authority's area during the year ended 31st December, 1958 ...	3,294	93	3,387

- Has the Authority provided immunisation against Whooping Cough throughout the year? Yes
- If not, on what date did the arrangements commence? —

TUBERCULOSIS.

Public Health (Tuberculosis) Regulations, 1952.

	1958	1957
Number of Primary Cases of Pulmonary Tuberculosis notified in 1958	183	211
„ „ Deaths from Pulmonary Tuberculosis in 1958 ...	29	30
„ „ Non-Respiratory Tuberculosis Cases notified in 1959	22	17
„ „ Deaths from Non-Respiratory Tuberculosis in 1958	1	Nil

The following table giving the notification rate and death rate per 1,000 of the estimated population is submitted for the purpose of comparison with previous years:—

Year.	Notification rate per 1,000 of population.		Death rate per 1,000 of population.	
	Pulmonary.	Non-Pulmonary.	Pulmonary.	Non-Pulmonary.
1939	1.25	.48	.64	.10
1940	1.60	.49	.57	.13
1941	1.12	.40	.51	.15
1942	1.12	.42	.62	.13
1943	1.32	.36	.60	.11
1944	1.33	.42	.52	.10
1945	1.10	.32	.57	.11
1946	1.16	.27	.49	.08
1947	0.98	.23	.55	.10
1948	1.21	.22	.52	.09
1949	1.19	.15	.49	.08
1950	1.06	.21	.30	.06
1951	1.14	.18	.27	.05
1952	1.09	.15	.25	.03
1953	0.91	.10	.19	.03
1954	0.91	.10	.18	.03
1955	0.83	.09	.15	.01
1956	0.71	.06	.10	.006
1957	0.63	.05	.09	Nil
1958	0.54	.07	.09	.003

Summary of notifications by District Medical Officers of Health to the County Medical Officer under the Public Health (Tuberculosis) Regulations, 1952, during the year 1958, with the number of deaths notified by the Registrar-General is shown as follows:—

Primary Notifications of New Cases						DEATHS.					
Age Periods.	Respiratory		Non-Respiratory			Age Periods.	Respiratory		Non-Respiratory		Total.
	Males	Females	Males	Females	Total.		Males	Females	Males	Females	
0—	—	2	—	—	2	0—	—	—	1	—	1
1—	2	2	—	—	4						
2—	3	1	—	—	4						
5—	3	5	1	1	10						
10—	2	2	1	1	6						
15—	11	11	3	2	27						
20—	10	14	—	—	24						
25—	13	15	1	2	31	25—	2	4	—	—	6
35—	10	12	1	4	27						
45—	19	9	2	—	30	45—	10	3	—	—	13
55—	17	4	1	2	24						
65—	10	3	—	—	13	65—	9	1	—	—	10
75 and Upwards	3	—	—	—	3	75—	—	—	—	—	—
	103	80	10	12	205		21	8	1	—	30

New cases of Tuberculosis coming to the knowledge of the Medical Officer of Health during the period 1st January, 1958, to 31st December, 1958, otherwise than by formal notification.

Source of Information.		Number of cases in age Groups.														
		0—	1—	2—	5—	10—	15—	20—	25—	35—	45—	55—	65—	75—	TOTAL	
Death Returns from Local Registrars	Respiratory	M	...	...	...	...	...	...	...	...	...	...	3	...	3	(A)
		F	...	...	...	...	...	...	...	...	...	...	...	...	—	(B)
	Non-Respiratory	M	...	...	...	...	...	...	...	...	...	...	...	...	—	(C)
		F	...	...	...	...	...	...	...	...	...	...	...	...	—	(D)
Death Returns from Registrar General (transferable deaths)	Respiratory	M	...	...	...	...	...	...	...	...	...	1	...	1	(A)	
		F	...	...	...	...	...	...	...	...	...	...	...	...	—	(B)
	Non-Respiratory	M	...	...	...	...	1	...	...	...	...	...	...	1	(C)	
		F	...	...	...	...	...	...	...	...	...	...	...	...	—	(D)
Posthumous Notifications.	Respiratory	M	...	...	...	...	...	...	...	2	1	...	3	(A)		
		F	...	...	...	...	...	...	...	...	...	...	...	—	(B)	
	Non-Respiratory	M	...	...	...	...	...	...	...	...	...	...	...	—	(C)	
		F	...	...	...	...	...	...	...	...	...	...	...	—	(D)	
Totals:		(A)	...	7	(B)	...	—	(C)	...	1	(D)	...	—			

Number of Visits made to Tuberculous households by Health Visitors, 13,958

TUBERCULOSIS CLINIC TIME TABLES.
NEWPORT AND EAST MONMOUTHSHIRE AREA.

PERSONNEL :

Chest Physician ...	...	Dr. M. I. Jackson.	Private Tel. No. 65623.
Asst. Chest Physicians ..		Dr. H. James.	
		Dr. H. Pick.	
		Dr. T. L. Hilliard.	
Clinic Sisters ...	...	1 full-time.	
		2 part-time.	

CHIEF CLINIC.

129, Stow Hill, Newport. Tel. No.: Newport 66781.

TIME TABLE.

<i>Clinics.</i>	<i>Days and Times.</i>	<i>Sessions.</i>
Newport. 129, Stow Hill.	Monday 9.15 a.m.	Men only.
	2. 0 p.m.	M.R. Recalle.
	Tuesday 9.15 a.m.	Women only.
	2nd Tuesday 2. 0 p.m.	Non-respiratory Clinic.
	Wednesday 9.15 a.m.	Children only.
	2. 0 p.m.	Contacts.
	5.30 p.m.	Working Males.
New and old cases, by appointments only.	Thursday 9.15 a.m.	Men only.
	2. 0 p.m.	Contacts.
	Friday 9.15 a.m.	Women only.
	2. 0 p.m.	B.C.G. Clinic.
	Saturday 9.15 a.m.	Appointments only.
Pontypool. Park Buildings. Tel. No. 480.	Tuesday 10. 0 a.m.	Men only.
	2. 0 p.m.	Women and Children.
	Thursday 9.30 a.m.	G.P. X-ray Clinic.
	to 11. 0 a.m.	(men).
	11. 0 a.m.	G.P. X-ray Clinic.
	to 12.30 p.m.	(women).
	2. 0 p.m.	By appointment only.
Abergavenny. Maiddiff Court. Tel. Abergavenny 226.	Thursday 10.30 a.m.	New and old patients (by appointment only)
Monmouth. Monmouth General Hospital.	Friday 10.30 a.m.	New and old patients (by appointment).

Chepstow. Tue. day 2. 0 p.m. New and old patients
(by appointment).
Chest Unit,
Mount Pleasant
Hospital.

Tel. Chepstow 332.

Static Mass Radio- Monday 10 a.m. to
graphy Unit, Tuesday 12 noon General Population.
Wrenford Memorial Thursday 2 p.m. to
Hall, Commercial Friday 4 p.m.
Street, Newport. Tuesday, 5 p.m. to General Population.
7 p.m.

Wednesday, 10 a.m. to School Children.
12 noon.
2 p.m. to Expectant Mothers
4 p.m.

RHYMNEY AND SIRHOWY VALLEY AREA.

PERSONNEL :

Chest Physician. Dr. F. W. Godbey. Private Tel. No. :
Asst. Chest Physicians. Dr. N. C. Norman. Caerphilly 3167.
Dr. M. C. McCabe.
Dr. S. Keidan.
Clinic Sisters. 3 (1 half-time).

CHIEF CLINIC :

"Heathfield," St. Martin's Road, Caerphilly.

Tel. No. : Caerphilly 2333 and 2334.

TIME TABLE :

Clinics.	Days and Times.	Sessions.
Caerphilly.	Monday, 9.30 a.m.	Children.
"Heathfield,"	2. 0 p.m.	New patients.
St. Martin's Road.	Tuesday, 9.30 a.m.	New patients.
	2—3 p.m.	Miniature Radiography
	Wednesday, 9.30 a.m.	Refill Clinic.
	" 2. 0 p.m.	Old patients (Male).
	" 5. 0 p.m.	Special appointments.
Thursday,	9.30 a.m.	New patients.
"	2. 0 p.m.	Old patients (Female).
Friday,	9.30 a.m.	Old patients (Bed cases).
"	2. 0 p.m.	Contact and B.C.G. Clinic.
		Non-Tb. Chests.
Saturday,	9.30 a.m.	Special Appointments.

Pontllanfraith. Llanarth Road. Tel. No. Blackwood 3281.	Monday,	10. 0 a.m.	New and old patients.
	"	2. 0 p.m.	Refill Clinic.
	Tuesday,	10. 0 a.m.	Tomography Clinic.
	"	2.30 p.m.	Tomography Clinic.
	Wednesday,	10. 0 a.m.	New and old patients
	"	2.30 p.m.	Old patients—bed cases.
	"	2.30 p.m.	Contact Clinic.
	Thursday,	10. 0 a.m.	Special X-ray appointments.
	"	2.30 p.m.	Special X-ray appointments.
	Friday,	10. 0 a.m.	New and old patients.
Ebbw Vale . Pentwyn House, Ebbw Vale Hospital.	"	2.30 p.m.	Contact and B.C.G. Clinic.
	Saturday,	10.0 a.m.	Special appointments.
	Tuesday,	1.30 p.m.	New and old patients.
Nantyglo. Blaina & District Hospital.	Friday,	1.30 p.m.	New and old patients.
	Tuesday,	11. 0 a.m.	New and old patients. (Also for Brynmawr patients)
Tredegar. Tredegar General Hospital, O.P. Department, Market Street.	Thursday,	1. 0 p.m.	New and old patients. New and old cases (by appointment only).

CANCER.

During the year 1958 the number of deaths from Cancer was 582, a decrease of 10 on 1957. The following table shows the incidence of the disease over the past 14 years:

All Forms of Cancer.

1958	1957	1956	1955	1954	1953	1952	1951	1950	1949	1948	1947	1946	1945
582	592	609	597	564	624	569	569	537	563	557	532	503	499

CANCER OF LUNG AND BRONCHUS.

1958	1957	1956	1955	1954	1953	1952	1951	1950	1949	1948	1947	1946	1945
107	89	105	106	70	107	74	74	59	—	—	—	—	—

There was a decrease in the total number of deaths from all forms of cancer of 10 compared with the previous year. This was in spite of an increase of 18 in the number of deaths from cancer of the lung or bronchus. Below is a table setting out deaths from cancer of the lung and bronchus in years, sex, and age-groups and a point noted is the preponderance of males over females.

Incidence of Cancer of Lung and Bronchus. (Deaths).

URBAN DISTRICTS.

MALES.

Year Age Group	1958	1957	1956	1955	1954	1953	1952
0—	—	—	—	—	—	—	—
25—	2	5	2	1	2	3	3
45—	48	43	51	45	33	53	28
65—	26	15	20	28	16	20	17
75—	8	3	8	8	4	6	1
Total Males	84	66	81	82	55	82	49

RURAL DISTRICTS.

MALES.

Year Age Group	1958	1957	1956	1955	1954	1953	1952
0—	—	—	—	—	—	—	—
25—	—	1	—	—	1	—	—
45—	10	6	12	13	5	8	6
65—	7	5	3	2	2	5	4
75—	—	2	2	1	1	—	—
Total Males	17	14	17	16	9	13	10

FEMALES.

Year Age Group	1958	1957	1956	1955	1954	1953	1952
0—	—	—	—	—	—	—	—
25—	—	1	1	1	1	—	1
45—	3	4	4	1	1	4	7
65—	1	—	—	4	1	1	3
75—	—	—	2	—	2	3	1
Total Females	4	5	7	6	5	8	12

FEMALES.

Year Age Group	1958	1957	1956	1955	1954	1953	1952
0—	—	—	—	—	—	—	—
25—	—	—	—	—	—	—	—
45—	—	1	—	—	1	4	2
65—	1	3	—	2	—	—	1
75—	1	—	—	—	—	—	—
Total Females	2	4	—	2	1	4	3

| 1958 | 1957 | 1956 | 1955 | 1954 | 1953 | 1952 |
 Grand Total ... | 107 | 89 | 105 | 106 | 70 | 107 | 74 |

DEATHS FROM ALL FORMS OF CANCER.

Year.	No. of cases.	Increase or decrease over cases previous year.	% Increase or decrease over previous year.
1951 ...	569	+ 32	+ 6%
1952 ...	569	—	—
1953 ...	624	+ 55	+ 10%
1954 ...	564	- 60	- 10%
1955 ...	597	+ 33	+ 6%
1956 ...	609	+ 12	+ 2%
1957 ...	592	- 17	- 3%
1958 ...	582	- 10	- 1.7%

CANCER OTHER THAN OF LUNG OR BRONCHUS.

CANCER OF LUNG AND BRONCHUS.

Year.	No. of cases.	Increase or decrease over cases previous year.	% Increase or decrease over previous year.
1951 ...	74	+15	+25%
1952 ...	74	—	—
1953 ...	107	+33	+45%
1954 ...	70	-37	-35%
1955 ...	106	+36	+51%
1956 ...	105	-1	-1%
1957 ...	89	-16	-16%
1958 ...	107	+18	+20%

No. of cases.	Increase or decrease over cases previous year.	% Increase or decrease over previous year.
495	+17	+4%
495	—	—
517	+22	+4%
494	-23	-4%
491	-3	-0.6%
504	+13	+2.6%
503	-1	-0.2%
475	-28	-5.6%

VENEREAL DISEASES.

The Treatment Centre was situated at the Royal Gwent Hospital, Newport. The days and hours of sessions were as follows:—

MALES.

Tuesday	...	...	9. 0 a.m.
Wednesday	...	...	2. 0 p.m. and 5. 0 p.m.
Friday	...	...	5.30 p.m.

FEMALES.

Monday	...	...	2. 0 p.m.
Tuesday	...	...	2. 0 p.m.
Thursday	...	...	2. 0 p.m. and 5.30 p.m.

The following numbers of new cases from Monmouthshire were treated at the Royal Gwent Hospital, Newport, during 1958:—

Syphilis	...	...	...	...	...	17
Gonorrhœa	...	...	...	...	...	46
Other conditions	...	...	...	...	...	121

Responsibility for the treatment at this Centre is that of the Welsh Regional Hospital Board.

This Council did not employ a Lady Enquiry Officer during 1958, but arrangements were made for confidential enquiries to be carried out by certain health visitors on request from the Treatment Centre. Co-operation was thus afforded between this Authority and the Treatment Centre as required by the National Health Service Act, 1946, Section 28.

POLIOMYELITIS VACCINATION.

	No. who received 2nd Injection in 1958.	No. who had received 1st Injection only in 1958.
Persons born 1943-1957	33,826	2,460
Persons born 1933-1942	1	1
Expectant Mothers	463	205
General Medical Practitioners ... and Families	91	27
Ambulance Staff and Families ...	134	
Hospital Staff and Families ...	20	

Number of persons awaiting 1st Injection on 31-12-1958 ... 2,148

MENTAL HEALTH SERVICE.

ACCOUNT OF WORK UNDERTAKEN IN THE COMMUNITY.

(a) *Under the Lunacy and Mental Treatment Acts, 1890-1930, by
Duly Authorised Officers.*

Details of ADMISSIONS to and DISCHARGES from MENTAL HOSPITALS.
ADMISSIONS.

	Voluntary.				Certified.		
	M.	F.	T.		M.	F.	T.
Abergavenny ...	400	488	888	Abergavenny ...	41	38	79
Caerleon ...	57	69	126	Caerleon ...	4	2	6
Bramsgrove ...	—	1	1	Talgarth ...	1	—	1
Barrow ...	1	—	1				
Bridgend ...	1	1	2				
Burghill ...	1	—	1				
Cefn Coed ...	1	2	3				
Coney Hill ...	1	—	1				
Hollymoor ...	—	1	1				
Bristol ...	1	—	1				
Talgarth ...	2	1	3				
Tone Vale ...	2	—	2				
Whitchurch ...	—	1	1				
Total ...			1,031	Total ...			86

DISCHARGES.

	M.	F.	T.		M.	F.	T.
Abergavenny ...	346	387	733	Abergavenny ...	80	104	184
Caerleon ...	47	57	114	Caerleon ...	1	2	3
Barrow ...	1	—	1				
Bramsgrove ...	—	1	1				
Bridgend ...	2	2	4				
Bristol ...	1	1	2				
Burghill ...	1	—	1				
Cefn Coed ...	1	3	4				
Coney Hill ...	2	—	2				
Hollymoor ...	—	1	1				
Talgarth ...	2	—	2				
Tone Vale ...	2	—	2				
Whitchurch ...	2	3	5				
Total ...			872	Total ...			187

DEATHS.

	M.	F.	T.		M.	F.	T.
Abergavenny ...	21	23	44	Abergavenny ...	35	32	67
Caerleon	5	1	6	Caerleon	2	—	2
Talgarth	—	1	1				
Total			51	Total			69

(b) *Mental Deficiency Acts, 1913-38.*

1. Home Visits by Mental Health Workers:—

1954.	1955.	1956.	1957.	1958.
3,200	3,340	2,858	2,699	2,922

2. New Cases reported and investigated ... 1,958.

	M.	F.	T.
(a) Under Education Act, 1944, Section 57 (3) ...	13	7	20
(b) Under Education Act, 1944, Section 57 (5) ...	14	8	22
(c) Other sources	6	12	18

3. Number of cases under Statutory Supervision,

31-12-58 ... 292 304 596

4. Number of cases under Voluntary Supervision,

31-12-58 ... 50 36 86

5. Number of cases in Certified Institutions,

31-12-58 ... 165 190 355

Admitted to Institutions during 1958 ... 7 15 22

Discharged from Institutions during 1958 ... — 2 2

Died during 1958 ... 2 1 3

Awaiting Institution Accommodation at 31-12-58 ... 25 13 38

Cases on Licence at 31-12-58—On Farms ... 2 — 2

To Parents ... — 2 2

(c) *Cases under Guardianship at 31-12-58:*

(i) Mrs. Roberts, The Old Rectory, Porthkerry ... 2 1 3

(ii) Mr. E. T. Pritchard, Mental Health Worker ... 2 — 2

(Monmouthshire County Council)

(d) *Short-Term Care.*

Mrs. Roberts, The Old Rectory, Porthkerry, whose premises are approved by the Board of Control, has continued to receive child patients for periods not exceeding two months, and for whose maintenance there, the

County Council is responsible, the parents contributing on an agreed scale. This service is invaluable, giving the parents a much needed respite and thereby preventing in some cases severe breakdown of the mother's health.

Older defectives are admitted from time to time to mental deficiency hospitals under a Short-Term Care Scheme where the cost is borne by the Regional Hospital Board.

	M.	F.	T.
N.H.S. Institutions	6	5	11
Mrs. Roberts, Porthkerry	7	10	17

- (e) *Occupational Training* (i) Home Training.
(ii) Occupation Centre Training.

(i) *Home Training* has continued throughout the year in districts not catered for by Occupation Centres, and 22 pupils have received training in a variety of crafts, e.g., needlework, basket work, rug making, etc.

In addition 34 homes, making 274 visits, have been made where there is a young handicapped child and the mother advised, supported and encouraged in the early training of her child and in the family re-adjustment consequent upon realisation that a new baby is sub-normal.

(ii) *Occupation Centre Training*.—The Occupation Centres at Neville House, Garndiffaith, and Sunninghill, Tredegar, continue to provide for the needs of children and adolescents in their respective catchment areas—the Eastern Valley and Eastern rural areas and in the North of the County.

We still await the construction of a workshop at Tredegar for older boys, and the reconstruction of The Old Rectory, Hafodyrynys. During the year the Council purchased additional premises at Griffithstown and when these schemes are completed there should be a place for each mentally defective child, except in the extreme south-east.

WORK OF THE HEALTH VISITORS.

Staff at the end of 1958: 1 full-time Superintendent.
45 full-time Health Visitors acting jointly as
School Nurses

Apportionment of time to Maternity and Child Welfare Work approximately equal to 36.94 Health Visitors.

The number of visits paid to homes by Health Visitors under the Maternity and Child Welfare Service during the last 5 years were:—

1958.	1957.	1956.	1955.	1954.
54,606	49,059	54,246	60,440	63,515

Of the 54,606 visits paid in 1958, 5,936 were in respect of new babies. 6,313 fruitless visits were made in addition.

VISITS IN 1958.

	First Visits.	Total Visits.
To Expectant Mothers	297	486
„ Children under 1 year of age	5,936	19,363
„ Children between 1 and 5 years of age	—	34,757
In other cases	—	55
		(excluding 6,313 fruitless visits).

The number of domiciliary births in which the infant was wholly breast-fed at the fourteenth day was 1,066, compared with 1,083 for 1957.

Ante-Natal Clinics.

The number of Ante-Natal Clinics in the County at the end of the year was 29, and there were held 146 half-day sessions per month. The attendances for the whole of the Clinics were:—

	1958.	1957.	1956.	1955.	1954.
New Cases	2,421	2,785	2,909	2,744	2,701
Re-visits	9,755	8,540	10,623	10,109	10,605
Total Attendances ...	12,176	11,325	13,532	12,853	13,306

Maternity and Child Welfare Clinics.

At the end of the year there were 47 Infant Welfare Clinics in operation and 304 half-day sessions per month were held.

The attendances at the Centres during 1958 and 4 previous years were:—

	1958.	1957.	1956.	1955.	1954.
No. of Infants who attended					
Child Welfare Centres ...	12,466	11,919	12,056	11,514	12,245
No. of new cases under 1 year	7,456	7,274	5,817	5,936	6,731
No. of attendances under 1 year	62,440	61,321	57,711	52,776	54,009
No. of attendances, 1 to 5 years	22,655	21,916	29,093	25,768	26,339
Total No. of attendances ...	85,095	83,237	86,804	78,544	80,348

Post-Natal Clinic.

New cases examined post-natally at Ante-Natal Clinics	461
Number of women examined post-natally at Ante-Natal Clinics ...	482
Number of attendances of post-natal cases at Ante-Natal Clinics ...	534
New cases examined at Newport Post-Natal Clinic	159
Number of women examined at Newport Post-Natal Clinic	216
Number of attendances at Newport Post-Natal Clinic	406

Care of Illegitimate Children.

Number of new cases of unmarried mothers dealt with by social worker	...	...	...	...	...	...	53
Number of visits to above	...	...	...	...	...	...	912
Number of women admitted to "Northlands," Cardiff	...	...	...	...	...	...	11
Number of women admitted to "Mount Hope," Bristol	...	...	...	...	...	...	1
Number of cases who were single women	...	...	...	...	...	...	34
Number of cases who were married women	...	...	...	...	...	...	9
Number of cases who were widows	...	...	...	...	...	...	1
Number of cases who were divorced women	...	...	...	...	...	...	7
Number of women who later married the putative father	...	...	...	...	...	...	2
Number of women who lived with the (unmarried) father	...	...	...	...	...	...	1
Number of children placed for adoption	...	...	...	...	...	...	26
Number of children admitted to Nursery	...	...	...	...	...	...	5
Number of children admitted to Dr. Barnado's Home	...	...	...	...	...	...	2
Number of social worker's attendances at Court as guardian <i>ad litem</i> in adoptions	...	...	...	...	...	...	50

DOMICILIARY MIDWIFERY SERVICE.

There was one full-time Supervisor of Midwives and at the end of 1958 the number of whole-time County Midwives was 49. In addition there were 3 part-time Midwives, 10 District-Nurse-Midwives, 1 part-time District-Nurse-Midwife, and 5 Independent Midwives. The Independent Midwives attended 4 cases during the year.

With 48 midwives engaged in hospital and maternity homes, the total number of wives on the County Register at the end of 1958 was 116.

The births (live and stillbirths) notified by Midwives during the year 1958, with figures for four preceding years were as follows:—

<i>Notified by</i>	1958.	1957.	1956.	1955.	1954.
County Midwives ...	2,087	2,038	2,098	1,873	2,209
Independent Midwives ...	4	1	—	18	5
Maternity Hospitals and Maternity Homes ...	3,418	3,382	3,294	2,972	2,867
Total ...	5,509	5,421	5,392	4,863	5,081

The above figures are before adjustment for any transferred notifications.

Number of cases in which medical aid was summoned during the year under Section 14(1) of the Midwives' Act, 1951, by a Midwife:—

(a) For Domiciliary Cases :

(i) Where Medical Practitioner had arranged to provide the patient with Maternity Medical Service under the National Health Services	...	...	...	389
(ii) Others	...	...	...	181
Total	...	...	...	570

(b) For Cases in Institutions 843

Particulars of Midwives in respect of Inhalation Analgesics at the end of 1958.

There were 33 Institutional Midwives in the area at the end of the year who were qualified to administer inhalation analgesics in accordance with the requirements of the Central Midwives Board, also 63 Domiciliary Midwives, and 5 Domiciliary Midwives in private practice. There were 63 sets of gas and air analgesia apparatus in use and they were used in 1,549 cases where the administrator in domiciliary practice was acting as a midwife, and 145 when acting as a maternity nurse. There were no sets in use for the administration of "Trilene."

The number of cases in which pethidine was administered by midwives in domiciliary practice during the year when acting as midwife was 487, and when acting as a maternity nurse was 95.

Pethidine was administered by independent midwives in two cases while acting as a midwife and in two cases while acting as a maternity nurse.

Domiciliary Midwifery Visits in the County.

Number of Ante Natal Visits	...	...	...	17,298
Number of Live Births attended (Actual)	...	...	...	2,103
Number of Still Births attended (Actual)	...	...	...	49
Number of Miscarriages attended	...	...	...	126
Number of Daily Nursing Visits	...	...	...	31,573
Number of Hospital Post-Natal Nursing Visits	...	...	...	15,872
Number of Hospital Post-Natal Cases Visited	...	...	...	3,842

Ophthalmia Neonatorum Notifications under Public Health (Ophthalmia Neonatorum) Regulations were:—

1958.	1957.	1956.	1955.	1954.
1	Nil	2	Nil	4

There were 24 other cases of eye trouble reported by Midwives, all of which were followed up by Health Visitors. All cases cleared up without any impairment of vision.

PREMATURE BIRTHS FOR YEAR 1958.

NOTES: This section covers live births and still-births of 5½ lbs. or less at birth.

Births in an ambulance or in the street are listed under the place to which the case is immediately transferred.

1 NUMBER OF PREMATURE LIVE BIRTHS NOTIFIED
(as adjusted by transferred Notifications):

(a) In hospital ... 279
(b) At home ... 187
* (c) In private nursing homes ...

Total ... 466

2. NUMBER OF PREMATURE STILL-BIRTHS NOTIFIED
(as adjusted by transferred notifications):

(a) In hospital ... 70
(b) At home ... 24
* (c) In private nursing homes ...

Total ... 94

* "Private nursing homes" includes nursing homes and maternity hospitals and homes not in the National Health Service and Mother and Baby Homes where women are confined in the Home.

PREMATURE LIVE BIRTHS																	PREMATURE STILL-BIRTHS		
Weight at birth.	(1)	Born in Hospital.			Born at home and nursed entirely at home			Born at home and transferred to hospital on or before 28th day			Born in nursing home and nursed entirely there			Born in nursing home and transferred to hospital on or before 28th day			Born in hospital (17)	Born at home (18)	Born in nursing home (19)
		Total (2)	Died within 24 hrs. of birth (3)	Survived 28 days (4)	Total (5)	Died within 24 hrs. of birth (6)	Survived 28 days (7)	Total (8)	Died within 24 hrs. of birth (9)	Survived 28 days (10)	Total (11)	Died within 24 hrs. of birth (12)	Survived 28 days (13)	Total (14)	Died within 24 hrs. of birth (15)	Survived 28 days (16)			
(a) 3 lb. 4 oz. or less (1,500 gms. or less)		30	8	9	9	9	—	12	2	5	—	—	—	—	—	—	26	14	—
(b) Over 3 lb. 4 oz. up to and including 4 lb. 6 oz. (1,500-2,000 gms.)		50	—	42	7	—	7	18	1	16	—	—	—	—	—	—	24	5	—
(c) Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. (2,000-2,250 gms.)		60	1	55	23	1	22	5	—	4	—	—	—	—	—	—	8	2	—
(d) Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2,250-2,500 gms.)		139	1	134	106	—	106	7	—	7	—	—	—	—	—	—	12	3	—
Totals ...		279	10	240	145	10	135	42	3	32	—	—	—	—	—	—	70	24	—

†The group under this heading includes cases which may have been born in one hospital and transferred to another.

NATIONAL HEALTH SERVICE ACT, 1946, SECTION 27.
NATIONAL HEALTH SERVICE (AMENDMENT) ACT, 1949
SECTION 24.

In observance of the above Acts, the Council maintain a fleet of 45 radio-controlled ambulance vehicles, based at stations throughout the administrative area.

Ambulance Scheme.

CONTROL STATIONS.	SUB-STATIONS.	NUMBER OF VEHICLES.	AREA SERVED.
Main County Control, Ambulance Service Headquarters, Cambria House, Caerleon. Telephone: Caerleon 283/4/5 (Operational). Caerleon 421 (Ambulance Officer and Administrative). (24 hour service).	Cambria House, Caerleon.	2 5 (Res.)	Caerleon U. Magor & St. Mellons R. (East of Newport). Pontypool R. Usk U.
	Vauxhall Road, Chepstow.	2	Chepstow U. & R.
	Drybridge House, Monmouth.	2	Monmouth B. & R.
	St. Mary's Road, Abergavenny.	2	Abergavenny B. & R.
Tredeggar Zone Control, Vale Terrace, Tredeggar. Telephone: Tredeggar 341/2. (24 hour service).	—	7	Tredeggar U. Rhymney U. Ebbw Vale U.
Bedwellty Zone Control, Maesruddud, Argoed. Telephone: Blackwood 2333/4. (24 hour service).	—	7	Bedwellty U. Mynyddislwyn U. Bedwas & Machen U. (Maesycwmmmer).
Abertillery Zone Control, Warm Turn, Aberbeeg. Telephone: Aberbeeg 292/3. (24 hour service).	—	5	Blaina & Nantyglo U. Abertillery U. Llanhilleth & Trinant (Abercarn U.).
Pontypool Zone Control, Ashgrove, Upper George Street, Pontypool. Telephone: Pontypool 475/6. (24 hour service).	—	7	Blaenavor U. Pontypool U. Cwmbran U.
Bassaleg Zone Control, Whitehead's Sports Ground, Bassaleg. Telephone: Newport 59951/2. (24 hour service).	—	6	Bedwas & Machen U. (exclude Maesycwmmmer). Abercarn U. (exclude Llanhilleth & Trinant). Risca U. Magor & St. Mellons R. (West of Newport).

In the event of failure to contact any of the above telephone numbers, contact the Main Ambulance Control, Caerleon 283, as second call.

The Main Ambulance Control telephone number—Caerleon 283, is exhibited at telephone exchanges throughout the County and in *Real Emergency* the public may obtain service by the following procedure: dial "999" or "0" or "01" according to local arrangements, ask the operator for "Ambulance" and the call will be put through to the Main Ambulance Control.

AMBULANCE SERVICE, 1958.

Operational Return for the year ended 31st December, 1958.

	DIRECTLY OPERATED.		SUPPLEMENTARY SERVICE.
	Ambulances.	Sitting-Case Cars.	Hired Cars.
A. No. of Patients:			
(1) Accidents and Emergencies ...	10,443	63	—
(2) Others ...	94,756	1,182	—
(3) Total of (1) & (2) ...	105,199	1,245	Nil
B. Journeys:			
(1) Patient Carrying ...	29,095	575	—
(2) Abortive & Service	1,111	16	—
(3) Analgesia & Midwives, etc. ...	12	—	—
(4) Total of (1) (2) & (3)	30,218	591	Nil
C. Total Mileage ...	796,699	19,867	Nil
D. No. of Operational Vehicles at 31-12-58 ...	45	1	—
	Driving Staff.	Station Staff.	Control Staff.
E. No. of Operational Staff as at 31-12-58 ...	74 Ambulance Drivers. 1 S.C. Car Driver.	5 Leader Drivers. 5 Deputy Leader Drivers.	1 Supervisor. 4 Telephonists
F. No. of Ambulance Stations as at 31-12-58 ...	6 Zone Stations.	3 Depôts 1 Sub-Depôt.	Total 10.
			90

MOBILE PHYSIOTHERAPY SERVICE.**1st January, 1958—31st December, 1958.**

Number of new Cases referred by Family Doctor ...	103
Number of new Cases referred by Hospitals ...	20
Others ...	3
Total Number of Cases ...	126

Of the above total referred to treatment, upon investigation twelve were found to be unsuitable for treatment and three were admitted to Hospital before treatment could commence.

CASES TREATED BY THE PHYSIOTHERAPY SERVICE.

	Improved with Treatment.				No Improvement.				Too ill for treatment to be continued.			
	20-39	40-59	Over 60	Total	20-39	40-59	Over 60	Total	20-39	40-59	Over 60	Total
Hemiplegia ...	—	7	44	51	—	1	1	2	1	7	6	14
Rheumatoid Arthritis ...	—	2	14	16	—	1	—	1	—	1	1	2
Fractures ...	—	1	13	14	—	—	1	1	—	—	1	1
Fibrositis ...	—	—	—	—	—	—	—	—	—	—	1	1
Ostro-Arthritis ...	—	1	5	6	—	—	—	—	—	—	1	1
Disseminated Sclerosis ..	—	1	—	1	—	—	—	—	—	—	—	—
	—	12	76	88	—	2	2	4	1	8	10	19

SUMMARY.

Patients who showed improvement with treatment ...	88
Patients who showed no improvement after treatment ..	4
Patients who became too ill to continue treatment ...	19
Patients unsuitable for treatment or who were admitted to Hospital before treatment began ...	15

NIGHT ATTENDANT SERVICE.

FOR THE PERIOD 1ST JANUARY, 1958—31ST DECEMBER, 1958.

Number of Cases for whom a Night Attendant was requested	...	72
Number of Patients who received the services of a Night Attendant		50

Of the 22 cases who did not receive the Service:—

- 12 Patients died.
- 4 Patients were admitted to hospital.
- 2 Cases were investigated and assessed "No Need".
- 4 Patients refused a Night Attendant.

Of the 50 patients who received the service:—

- 10 Recovered.
- 23 Patients died.
- 13 were admitted to Hospital.
- 4 were still receiving the Service at the end of the Year.

4 were still receiving the Service at the end of the Year.									
Improvement									
Year	1957	1958	1959	1960	1961	1962	1963	1964	1965
1	1	1	1	1	1	1	1	1	1
2	1	1	1	1	1	1	1	1	1
3	1	1	1	1	1	1	1	1	1
4	1	1	1	1	1	1	1	1	1
5	1	1	1	1	1	1	1	1	1
6	1	1	1	1	1	1	1	1	1
7	1	1	1	1	1	1	1	1	1
8	1	1	1	1	1	1	1	1	1
9	1	1	1	1	1	1	1	1	1
10	1	1	1	1	1	1	1	1	1

DAY NURSERIES YEAR 1958.

Daily Minders receiving Fees from the Authority under Section 22 of the
National Health Service Act, 1946, at End of Year.

(a) Number of Minders	...	...	...	...	...	...	—
(b) Number of children cared for	...	...	...	...	...	...	—

HEALTH VISITING AND TUBERCULOSIS VISITING.

A. Visiting.

	HEALTH VISITORS										TUBER- CULOSIS VISITORS			
	Number of children under 5 years of age visited during year (2)	Expectant Mothers		Children under 1 year of age		Children age 1 and under 2 years		Children age 2 but under 5 years		Tuberculous Households		Other cases	Total number of families or households visited by Health Visitors (11)	Total visits paid to tuberculous households (12)
		First visits (3)	Total visits (4)	First visits (5)	Total visits (6)	Total visits (7)	Total visits (8)	Total visits (9)	Total visits (10)					
(a) L.H.A. "Access" Visits	23,314	297	486	5,936	19,363	12,204	22,553	853	55	13,958	—	—		
"No Access" Visits	—	—	—	—	1,514	1,601	3,198	—	—	—	—	—		
(b) Vol. Org.	—	—	—	—	—	—	—	—	—	—	—	—		

B. Clinics.

(a) Total number of attendances made by Health Visitors at local Health Authority Clinic Sessions during the year 1958	...	...	...	...	...	...	...	...	...	...	...	...	11,312
(b) Total number of attendances of Whole-time Tuberculosis Visitors at Chest Clinic Sessions per month	...	...	...	...	...	...	...	...	...	...	...	...	—

YEAR 1958.

RETURN OF WORK DONE BY THE AUTHORITY UNDER:—

1. Nurseries and Child-Minders Regulation Act, 1948.

	Number registered at end of year	Number of children provided for
Premises ...		
(a) Factory	—	—
(b) Other nurseries	1	15
Daily Minders	—	—

2. Registration of Nursing Homes (Sections 187 to 194 of the Public Health Act, 1936).

	Number of Homes	Number of beds provided for:—		
		Maternity	Others	Totals
Homes first registered during year	—	—	—	—
Homes on the register at end of year	—	—	—	—

Names of the Councils of any County Districts to which the powers and duties of the County Council have been delegated under Section 194 of the Public Health Act, 1936, and particulars of the powers delegated.

HOUSING.

District.	No. of Separate Dwellings owned by Local Authority on 31-12-58.		No. of Separate Dwellings completed during 1958.		No. of Local Authorities Dwellings in course of erection on 31-12-58.	No. of Local Authority Dwellings for which sanction has been given but not commenced on 31-12-58.
	Tempor-ary.	Permanent.	By Local Authority.	By Private Enterprise.		
Urban.						
Abercarn	50	1,378	—	12	24	90
Abergavenny	50	949	44	12	34	4
Abertillery	100	837	—	3	—	130
Redwas & Machen	50	946	—	8	32	22
Bedwellty	100	1,858	20	—	144	—
Blaenavon	50	384	—	—	—	6
Caerleon	50	222	44	13	5	—
Chepstow	—	535	9	4	51	52
Cwmbran	126	1,552	46	5	36	24
Ebbw Vale	—	2,008	135	10	343	—
Monmouth	50	470	34	3	—	—
Mynyddislwyn	99	1,205	20	4	—	—
Nantyglo & Blaina	49	705	41	—	—	—
Pontypool	300	3,294	66	19	52	50
Rhymney	50	466	—	2	—	—
Risca	46	1,225	—	2	—	—
Tredeggar	88	1,424	82	8	8	—
Usk	—	52	—	6	—	—
Rural.						
Abergavenny	19	379	13	10	4	—
Chepstow	—	812	—	—	—	—
Magor & St. Mellons	109	1,195	109	45	27	—
Monmouth	—	204	—	6	—	—
Pontypool	—	168	—	76	—	—
Totals	1,386	22,268	663	248	760	380

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Housing under Cwmbran Development Corporation

In the Cwmbran U.D. Area	Total No. of Dwellings completed by 31-12-58. Houses: 1,600; Flats: 111.		Completed during 1958. 181.		In the Pontypool R.D. Area	No. of separate new dwellings completed during 1958 ...	
Under construction at 31-12-58:							
Houses: 1 bedroom	...	—	Flats: 1 bedroom	...	59	...	
2 "	...	6	2 "	...	22	...	
3 "	...	66	3 "	...	6	...	
4 "	...	8				...	
						No. of separate dwellings for which sanction has been given but had not been commenced on 31-12-58 ...	471
						...	566
						...	110

HOUSING ACTS, 1949 and 1954. Details of Grants and Loans.

DISTRICT.	No. of Improve- ment Grants 1958.	Total No. of Improve- ment Grants 1949-58. inclusive.	Amount of Improve- ment Grants 1958. £	Total Amount of Improve- ment Grants 1949-58. inclusive. £	No. of Improve- ment Loans 1958.	Total No. of Improve- ment Loans 1949-58. inclusive.	Amount of Improve- ment Loans 1958. £	Total Amount of Improve- ment Loans 1949-58. inclusive. £	No. of Certificates of Disrepair issued 1958 (Rent Act, 1957)
Urban.									
Abercarn ...	23	85	5,127	16,788	10	26	1,835	4,678	25
Abergavenny ...	4	33	878	4,153	—	—	—	—	6
Abertillery ...	16	74	3,976	16,101	17	38	3,677	7,968	45
Bedwas & Machen ...	8	37	1,402	6,974	—	5	—	1,585	5
Bedwellty ...	—	—	—	—	—	—	—	—	26
Blaenavon ...	8	29	2,110	6,404	—	—	—	—	6
Caerleon ...	6	13	1,441	3,760	2	5	370	2,190	—
Chepstow ...	—	4	—	571	—	3	—	7,591	14
Cwmbran ...	18	111	2,156	14,658	—	—	—	—	—
Ebbw Vale ...	75	299	14,832	47,336	45	139	9,189	34,127	32
Monmouth ...	5	27	1,616	6,170	1	3	1,571	3,683	3
Mynyddislwyn ...	8	27	1,471	4,830	—	—	—	—	27
Nantyglo & Blaina ...	—	—	—	—	26	112	7,680	20,923	2
Pontypool ...	31	210	5,226	33,546	4	14	1,811	3,855	27
Rhymney ...	19	71	3,395	11,195	—	—	—	—	5
Risca ...	23	51	4,294	9,472	7	8	1,487	1,617	6
Tredeggar ...	14	56	4,289	15,740	3	17	1,065	6,391	12
Usk ...	—	3	—	890	—	—	—	—	—
Rural.									
Abergavenny ...	18	81	5,877	22,044	—	—	—	650	1
Chepstow ...	8	64	2,242	16,016	—	1	—	418	1
Magor & St. Mellons ...	40	118	10,842	31,091	6	19	1,490	5,453	—
Monmouth ...	7	27	1,235	5,490	—	—	—	—	—
Pontypool ...	19	71	5,034	16,908	—	—	—	—	—
Totals ...	350	1,491	77,443	290,137	121	390	30,175	101,129	243

PREVENTION OF BLINDNESS AND CARE OF BLIND PERSONS.

	Male.	Female.	Total.
Number of Persons on County Register as Blind on 31-12-58	407	477	884
Number of Persons on County Register as Partially Sighted on 31-12-58	122	192	314

Results of Examinations by Consultant Ophthalmologist at Clinic.

New Cases certified to be Blind	20
New Cases certified to be Partially Sighted	61
New Cases certified to be Not Blind or Partially Sighted	7
Old Cases re-examined and found to be still Blind	5
Old Cases re-examined and found to be Partially Sighted	46
Number of Old Cases previously Partially Sighted now found to be Blind	12
Number of Old Cases previously Blind now found to be Partially Sighted	2

Results of Hospital Examinations

New Cases certified to be Blind	4
New Cases certified to be Partially Sighted	1

Results of Domiciliary Examinations.

	Examined by Mr. G. W. Hoare.	Examined by Mr. R. Vaughan-Jones
New Cases found to be Blind	44	5
New Cases found to be Partially Sighted	39	1
Old Cases previously Partially Sighted now found to be Blind	18	—
Old Cases previously Blind now found to be Partially Sighted	2	—
Old Cases previously Blind now found to be still blind	1	—
Old Cases previously Partially Sighted now found to be still Partially Sighted	26	—
Number of New Cases found to be not Blind or Partially Sighted	3	—
Number of Persons who died before examination ...	2	—
Number of Operations for removal of Cataract, as result of recommendation made at time of examination ..	12	—
Number of Patients too ill for recommended operation	2	—

"THE REST," CONVALESCENT HOME, PORTHCAWL. Open from 4th May, 1958, to 2nd November, 1958.

Number of applications for admission received	...	...	215
Number of applicants admitted ...	...	...	119
Number of applications withdrawn	...	...	26
Number of applications withdrawn due to illness	...	...	19
Number of applications rejected by Committee	...	...	40
Number of applications rejected by Medical Officers	...	...	8
Number of applicants who did not attend for admission	...	...	3

[illegible]

DENTAL SERVICE.

Number of Dental Clinics in operation at end of 1958 11
 „ „ Half-day Sessions devoted to Maternity and Child Welfare during year 198
 „ „ Dental Technicians employed in Council's Dental Laboratories 1

	Examined	Needing Treatment.	Treated.	Made Dentally Fit.
Expectant and Nursing Mothers	662	586	586	567
Children under 5 ..	320	303	303	303

	Extractions	General Anaesthetics	Fillings	Sealings or Scaling and Gum Treatment	Silver Nitrate Treatment	Crowns or Inlays	Radiographs	Dentures Provided	
								Complete	Partial
Expectant and Nursing Mothers	1,312	492	139	99	—	—	23	248	68
Children under 5 ..	536	303	—	6	45	—	10	—	—

HOME HELP SERVICE.

Area Health Sub-Committee	Helps supplied during 1958.					Helps employed at end of 1958		
	Maternity Cases	Tuberculosis Cases	Chronic Cases	Others	Total	Whole-time	Part-time	Total
No. 1 ..	32	—	330	4	366	—	107	107
No. 2 ..	3	—	140	29	172	—	38	38
No. 3 ..	6	1	160	12	179	1	37	38
No. 4 ..	3	3	162	60	228	1	47	48
No. 5 ..	3	1	291	5	300	3	57	60
No. 6 ..	11	2	220	26	259	—	79	79
No. 7 ..	5	3	393	103	504	1	203	204
No. 8 ..	15	2	142	15	174	—	62	62
No. 9 ..	24	1	89	14	128	—	38	38
No. 10 ..	16	2	137	9	164	—	67	67
Total ..	118	15	2,064	277	2,474	6	735	741

	1958.	1957.
Cost of Home Help Service	£136,417	£127,152
Number of persons assisted	2,474	2,366

Problem Families.

Number of Councils who have called	Meetings of Co-ordinating	
Committees in 1958 ...	...	8
Number of Meetings held ...	...	11
Number of Families considered ...	...	9
Number of Adults involved ...	...	32
Number of Children involved ...	...	60

MEDICAL COMFORTS APPLIANCES SCHEME.**MEDICAL APPLIANCES PROVIDED IN 1958.**

No. of Depôts at end of 1958.	No. of Patients.	No. of Articles issued.	Length of Period in use.	Articles damaged and unfit for further use.
61	3,702	10,623	50% 1 month 50% longer period	220

FOOD AND DRUGS ACT, 1955.**SAMPLING.****Report for the year ended 31st December, 1958.**

During the year 1958, 1,055 samples of all kinds of food were submitted by Sampling Officers of the Weights and Measures Department to the County Public Analyst under the provisions of the above Act. These samples were procured from all parts of the County, excluding the area covered by Pontypool Urban District Council and that of the Newport Borough Council.

They consisted of 562 milk samples taken whilst in course of sale to the public, 373 samples of other food, 32 pharmaceutical products, 35 beer samples and 53 samples of ice cream. The samples of "Other Food" were of all kinds of tin, jar and packet varieties.

The Analyst certified 552 milk samples, 369 samples of other food, 48 samples of ice cream, all the pharmaceutical products and beer samples to be in accordance with the various standards required. Of the remaining 10 milk samples, 3 were of abnormal composition but genuine, 2 were slightly deficient in fat and 5 contained Added Water.

2 samples of Double Cream were deficient in fat and one sample of butter contained more moisture than that permitted. Both these cases were satisfactorily resolved to the satisfaction of the Public Analyst and

the Authority. A sample of water-cress was badly contaminated with coliform organisms and in the opinion of the Public Analyst was unfit for human consumption. The District Council where the water-cress was grown was notified and requested to investigate the matter. Information was received from the County Medical Officer concerning the supply of imported apples to a wholesaler in the County, which it was alleged were contaminated with Arsenic and Lead powder. 2 samples were eventually submitted for analysis by the Public Analyst who reported that one sample was genuine whilst the other contained Arsenic powder to the extent of 7.5 parts per million. This information was then referred to the County Medical Officer for his attention. 5 samples of ice cream were deficient in fat and legal proceedings were instituted against the makers.

As a result of a complaint concerning a third of a pint bottle of school milk an investigation established that the bottle contained several small pieces of glass and legal proceedings were instituted against the Dairy Company concerned.

Altogether 7 Informations were upheld and the Magistrates inflicted Fines to the total amount of £35 and Costs of £13/17/0d.

The average composition of the milk was certified by the Public Analyst to be Fat 3.817 per cent, Solids not Fat 8.725 per cent. and Total Solids 12.542 per cent.

The percentage of samples not up to Standards was 1.706 per cent. and the percentage of Adulteration was .3806 per cent.

TABLE SHOWING DETAILS OF WATER ANALYSES.

DISTRICT.	Bacteriological Examination of Untreated Water.			Bacteriological Examination of Treated Water.			Chemical Analysis.		
	Public Supplies.		Other Supplies.	Public Supplies.		Other Supplies.	Public Supplies.		Other Supplies.
	No. of Samples Taken	No. Satisfactory	No. Unsatisfactory	No. Satisfactory	No. Unsatisfactory	No. Satisfactory	No. Unsatisfactory	No. Satisfactory	No. Unsatisfactory
Urban.									
Abercarn ...	—	—	2	2	—	—	2	—	—
Abergavenny ...	—	4	—	3	—	—	—	—	—
Abertillery ...	—	1	7	—	—	—	—	—	—
Bedwas & Machen ...	—	1	—	4	—	—	—	—	—
Bedwellty ...	—	—	—	47	2	—	—	1	—
Blaenavon ...	29	—	1	35	20	—	—	—	—
Caerleon ...	—	—	—	—	—	—	—	—	—
Chepstow ...	—	—	—	27	4	—	—	—	—
Cwmbran ...	—	2	6	—	—	—	—	—	—
Ebbw Vale ...	30	3	1	43	2	2	—	3	—
Monmouth ...	—	3	25	96	1	2	3	—	—
Mynyddislwyn ...	—	—	—	3	—	—	—	—	—
Nantyglo & Blaina ...	—	—	—	3	—	—	—	1	—
Pontypool ...	—	4	2	89	1	—	—	—	—
Rhymney ...	42	—	—	40	3	—	—	—	—
Risca ...	—	—	—	—	—	—	—	—	—
Tredeggar ...	14	—	—	60	—	—	—	1	—
Usk ...	—	—	—	17	—	—	—	—	—
Rural.									
Abergavenny ...	1	2	7	33	1	—	—	1	—
Chepstow ...	68	7	6	36	—	—	—	3	—
Magor & St. Mellons ...	—	16	21	8	—	—	—	—	—
Monmouth ...	17	—	2	9	8	—	—	1	—
Pontypool ...	—	—	6	13	2	—	—	—	—
Totals ...	201	43	86	568	44	4	8	10	1

**Samples of Milk submitted to the Public Health Laboratory Service,
Newport, during the years 1954-58 for Bacteriological
and Biological Examination.**

By:—	1954.	1955.	1956.	1957.	1958.
MONMOUTHSHIRE COUNTY COUNCIL	713	1,006	1,350	1,266	1,404

URBAN DISTRICTS:

Abercarn ...	—	—	1	8	22
Abergavenny ...	10	9	23	28	25
Abertillery ...	4	5	—	1	2
Bedwas & Machen ...	4	—	—	—	—
Bedwellty ...	16	22	46	51	76
Blaenavon ...	12	57	52	53	45
Caerleon ...	1	—	—	—	—
Chepstow ...	—	2	6	12	21
Cwmbran ...	—	—	9	4	13
Ebbw Vale ...	136	101	52	69	65
Monmouth ...	34	47	39	58	89
Mynyddislwyn ...	10	14	16	10	—
Nantyglo & Blaina ...	12	12	6	11	6
Pontypool ...	166	171	159	168	194
Rhymney ...	69	79	65	79	71
Risca ...	9	30	51	54	57
Tredeggar ...	93	124	142	85	108
Usk ...	9	—	1	—	—

RURAL DISTRICTS:

Abergavenny ...	—	—	8	6	17
Chepstow ...	—	—	—	—	—
Magor & St. Mellons ...	17	25	51	48	47
Monmouth ...	1	—	—	—	—
Pontypool ...	8	7	8	—	—

Total ...	1,320	1,711	2,085	2,011	2,262
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(By courtesy of R. D. Gray, M.D., D.P.H., Director of Laboratory).

MEDICAL EXAMINATIONS OF STAFF, ETC.

All new members of the Council's Administrative, Professional and Technical Staff are examined by Medical Officers prior to permanent appointment.

Number of Medical Examinations carried out on newly-appointed members of the Staff ...	395
No. of School Children examined for physical fitness for part-time employment under the Council's Employment of Children's Bye-laws, 1949 ...	247
No. of examinations of applicants for admission to Teachers' Training Colleges ...	173
No. of examinations of newly-appointed School Teachers ...	175



