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PEMBROKESHIRE COUNTY COUNCIL

**ANNUAL
REPORT**

of the

County

WELSH BOARD OF HEALTH.
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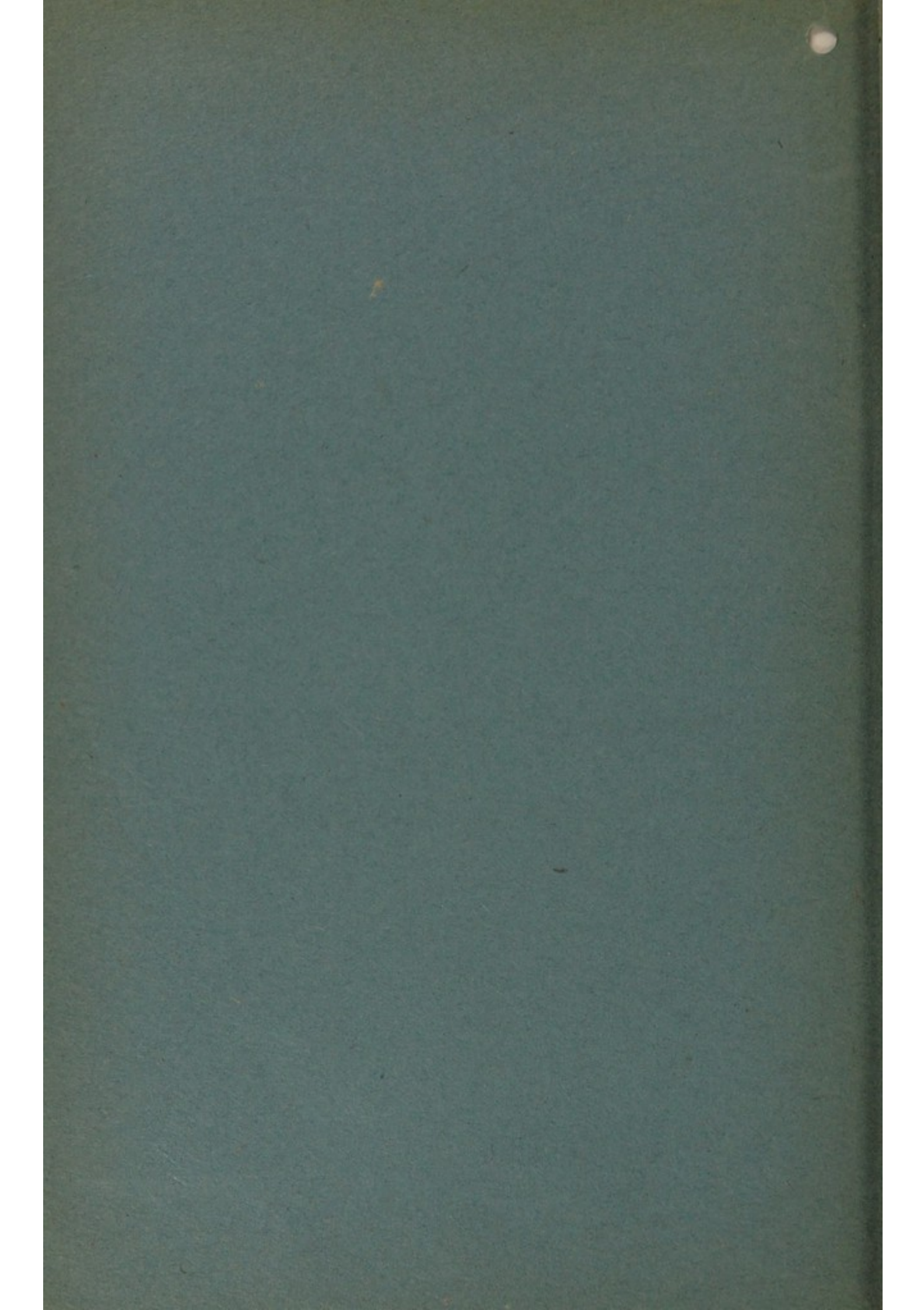
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Medical Officer of Health

for Pembrokeshire

1952

H. G. Walters (Publishers) Ltd., Narberth, Tenby and Whitland.



PEMBROKESHIRE COUNTY COUNCIL

A N N U A L R E P O R T

of the

County

Medical Officer of Health

for Pembrokeshire

1952

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TO THE CHAIRMAN AND MEMBERS OF THE
HEALTH COMMITTEE OF THE

Pembrokeshire County Council

Mr. CHAIRMAN, LADIES & GENTLEMEN,

I beg to present my Annual Report as County Medical Officer of Health for the year 1952.

As the statistics will show, the health of the County was satisfactory. No exceptional outbreak of infectious disease occurred and all services continued to work smoothly and efficiently.

The Registrar General estimated that the mid-population of the County for 1952 was 91,040. This represents an increase of 300 compared with the estimated population for 1951.

The Birth Rate for 1952 was 16.4 compared with 17.08 for 1951. The figure for the whole of England and Wales was 15.3.

There were 39 deaths of children under one year of age, making a death rate of 36.65 per thousand deaths compared with a rate of 32.2 for the previous year.

The maternal mortality rate of 1.28 per thousand births, was higher than the corresponding figure of 0.6 for 1951.

During the year a scheme of B.C.G. (Bacillus Calmette-Guerin) vaccination against Tuberculosis was introduced and is being carried out by the Chest Physician in selected cases.

Extensive building, water and drainage schemes have been completed and many others are in progress.

As this is my last Report after nearly 32 years service as County Medical Officer of Health, I should like to take this opportunity of thanking the members of the Committee who, over these years, have worked so amicably with me. I wish also to express my grateful thanks to the Chairman for his help and co-operation at all times, and to the Staffs at the County Council and County Health Department.

I have the honour to be,

Your obedient Servant,

H. MIDDLETON,

County Medical Officer.

County Health Department,
Haverfordwest.
June, 1953.

COUNTY OF PEMBROKE

HEALTH COMMITTEE

Mr. E. Anthony	Mr. J. A. Lewis
Mr. E. B. Davies	Mr. W. J. Llewellyn
Mr. M. Davies	Mr. L. J. Meyler (Chairman)
Mr. T. R. Davies	Mrs. A. Norman
Mr. D. W. Evans (Vice- Chairman)	Mr. H. E. G. Sackville Owen
Mr. D. H. George	Mr. F. Phillips
Mr. B. G. Howells	Mr. J. M. James
Mr. J. John	Rev. John Thomas
Mr. W. C. John	Miss N. Thomas (co-opted)
Mr. T. R. Joseph	Mr. J. O. Vaughan
Mr. J. W. Jones	Mr. J. Walters
Mr. C. G. Lewis	Mr. C. Hayden Williams
Mr. D. Hughes Lewis	Mr. W. L. Williams

LOCAL MEDICAL COMMITTEE REPRESENTATIVES :

Dr. J. A. K. Douglas
Dr. P. R. E. Williams
Dr. C. M. McGeogh

COUNTY NURSING ASSOCIATION REPRESENTATIVES :

Mrs. H. Higgon
Miss Nancy Thomas, J.P.

WEST WALES HOSPITAL MANAGEMENT COMMITTEE REPRESENTATIVES :

Mr. J. T. Griffiths
Dr. Laura G. Rees
Rev. W. H. Williams

COUNTY FEDERATION OF WOMEN'S INSTITUTES REPRESENTATIVES :

Mrs. S. M. G. Bland
Mrs. B. Ramsden

COUNTY HEALTH OFFICES STAFF :

County Medical Officer of Health : H. Middleton, M.C., M.B., Ch.B.,
D.P.H.

Assistant County Medical Officer of Health : F. J. Harrison, M.B., B.Ch.
Medical Officers for Eastern and Western Districts acting as Part-time

Assistant School Medical Officers :

Dorothy M. Griffiths, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.
W. J. Y. Speedy, M.B., B.Ch., L.R.C.P. & S., D.P.H.

County Nursing Officer : Miss C. Evans, S.R.N., S.C.M.

Home Help Organiser : Miss M. R. F. Collins.

County Health Visitors : Miss E. J. James, S.R.N., S.C.M.

Miss E. A. Morgan, S.R.N., S.C.M.

Miss P. Edwards, S.R.N., S.C.M.

Miss P. E. A. Porter, S.R.N., S.C.M.

Chief Clerk : W. J. Austin.

STATISTICS

Area (in Acres), including land and inland water	393,003
Population (estimated)	91,040

EXTRACT FROM VITAL STATISTICS**Live Births :**

	Total	Male	Female
Legitimate	1,497	794	703
Illegitimate	60	31	29
Total Births	1,557	825	732

BIRTH RATE.

For 1952 the Birth Rate was 16.4 compared with 17.08 for 1951 and 15.3 for the whole of England and Wales.

STILLBIRTHS. Total—53.

Rate per 1,000 total Births—34.03.

DEATHS—1,064. Total Death Rate—11.68.

Number of women who died in consequence of Child-birth—2.

Rate per 1,000 Births—1.28.

Deaths of Infants under one year of age—39.

Rate per 1,000 Births—25.04.

Deaths of Infants under four weeks of age—29.

Rate per 1,000 Births—18.6.

DEATHS

The deaths at all ages from all causes registered during the year 1952 numbered 1,064 — 598 males and 466 females, giving a Death Rate of 11.68 per 1,000 population. This was a decrease of 1.92 in the Death Rate compared with last year's figures.

The Death Rate per 1,000 population for England and Wales was 11.3.

INFANT MORTALITY

There were 39 deaths of children under one year of age, giving a Death Rate of 36.65 per 1,000 deaths compared with a rate of 32.2 for the previous year.

The actual causes of deaths under one year are set out below :—

Pneumonia	8
Congenital Malformation	6
All other causes	25

MATERNAL MORTALITY

The Maternal Mortality Rate of 1.28 per 1,000 births was higher than the corresponding figure of 0.6 for the year 1951. Both figures however, compare favourably with the average rate of 2.7 for the preceding 10 years.

Maternal Deaths were investigated by the County Medical Officer and the County Nursing Officer.

Birth-rates, Death-rates, Analysis of Mortality, Maternal Mortality and Case-rates for Certain Infectious Diseases in the Year 1952. Provisional figures based on Quarterly Returns.

	England and Wales	160 County Boroughs and Great Towns (including London)	160 Smaller Towns (Resident Population 25,000 - 50,000 at 1951 Census)	London Administrative County
Births				
Live Births ...	15.3	16.9	15.5	17.6
Still Births ...	(0.35	0.43	0.36	0.34
	(22.6 (a)	24.6 (a)	23.0 (a)	19.2 (a)
Deaths				
All Causes ...	11.3	12.1	11.2	12.6
Typhoid and Paratyphoid	0.00	0.00	0.00	—
Whooping Cough ...	0.00	0.00	0.00	0.00
Diphtheria ...	0.00	0.00	0.00	0.00
Tuberculosis ...	0.24	0.28	0.22	0.31
Influenza ...	0.04	0.04	0.04	0.05
Smallpox ...	0.00	—	—	—
Acute Poliomyelitis (including Polioencephalitis)	0.01	0.01	0.00	0.01
Pneumonia ...	0.47	0.52	0.43	0.58
Notifications (corrected)				
Typhoid Fever ...	0.00	0.00	0.00	0.00
Paratyphoid Fever ...	0.02	0.02	0.03	0.01
Meningococcal Infection	0.03	0.03	0.03	0.02
Scarlet Fever ...	1.53	1.75	1.58	1.56
Whooping Cough ...	2.61	2.74	2.57	1.66
Diphtheria ...	0.01	0.01	0.03	0.01

				Rates per 1,000 Live Births	
Deaths					
Erysipelas	...	...	0.14	0.15	0.12
Smallpox	...	...	0.00	0.00	0.00
Measles	...	...	8.86	10.11	8.49
Pneumonia	...	...	0.72	0.80	0.62
Acute poliomyelitis (including polioencephalitis)	...	...	...	...	...
Paralytic	...	...	0.06	0.06	0.06
Non-paralytic	...	...	0.03	0.03	0.03
Food poisoning	...	...	0.13	0.16	0.11
Puerperal pyrexia	...	...	17.87 (a)	23.94 (a)	10.22 (a)
All causes under 1 year of age				31.2	25.8
Enteritis and Diarrhoea under 2 years of age				1.3	0.5
					0.7

Rates per 1,000 Live Births

Maternal Mortality in England and Wales

Intermediate List No. and cause	Number of Deaths	Rates per 1,000 Total (Live and Still) Births	Rates per million Women aged 15-44
A115 Sepsis of Pregnancy, Childbirth and the Puerperium	61	0.09	1
A116 { Abortion with Toxaemia	13	0.02	
{ Other Toxaemias of Pregnancy and the Puerperium	147	0.21	
A117 Haemorrhage of Pregnancy and Childbirth	59	0.09	
A118 Abortion without mention of Sepsis or Toxaemia	31	0.04	3
A119 Abortion with Sepsis	47	0.07	5
A120 Other complications of Pregnancy, Childbirth and the Puerperium	138	0.20	

(a) Per 1,000 Total (Live and Still) Births.

(b) Per 1,000 related live births.

HOSPITALS

INFECTIOUS DISEASES HOSPITAL (other than Smallpox)

Since the closure of the Isolation Hospital at Pembroke Dock, cases of Infectious Diseases (except Smallpox) are sent to Tumble Isolation Hospital in Carmarthenshire.

Summary of cases admitted during the year :—

Disease	Cemaes R.D.	Fishguard and Goodwick U.D.	Haverfordwest R.D.	Haverfordwest U.D.	Milford Haven U.D.	Neyland U.D.	Pembroke U.D.	Pembroke R.D.	Tenby U.D.	Narberth U.D.	Narberth R.D.	TOTAL
Chicken Pox	—	1	—	—	—	—	—	—	—	—	—	1
Scarlet Fever	—	1	2	—	—	—	2	—	—	—	—	5
Anterior Polio-myelitis	3	—	2	—	—	—	1	1	1	—	1	9
Measles	1	—	2	—	—	—	1	—	—	—	—	4
Sonne Dysentery	—	—	1	—	—	—	—	—	—	—	—	1
Paratyphoid 'B'	4	10	2	—	—	—	—	1	—	—	—	17
Whooping Cough	—	—	—	—	—	—	1	—	—	—	—	1
Diphtheria	—	—	—	—	—	—	—	—	1	—	—	1
T.B. Meningitis	—	—	—	—	1	—	—	—	—	—	—	1
Totals	8	12	9	—	1	—	5	2	2	—	1	40

In addition 6 cases admitted as suspected infectious disease were later diagnosed as non-infectious.

SMALL POX

The Regional Hospital Board provides accommodation for Small Pox cases at Penrhys Hospital, Rhondda.

TUBERCULOSIS HOSPITALS

There are two Hospitals in the County—Sealyham Hospital, providing 30 beds—15 males and 15 females, and Kensington Hospital, mainly for surgical tuberculosis in children, with 100 beds.

GENERAL HOSPITALS

The Hospital Service is administered by the West Wales Hospital Management Committee on behalf of the Regional Hospital Board.

Hospital.	Situation.	Beds.
County War Memorial Hospital.	Haverfordwest.	99 General. 7 Maternity. 10 Cots for Infants.
Withybush Hospital.	Haverfordwest.	58 General.
Meyrick Hospital.	Pembroke Dock.	10 General. 6 Cots.
District Cottage Hospital.	Pembroke.	10 General.
Cottage Hospital.	Tenby.	13 General. 3 Maternity.
"Riverside."	Pembroke.	20 General. 10 Maternity.
"Allensbank."	Narberth	27 General
Priory Hospital.	Haverfordwest.	63 General. 20 Maternity. 22 Cots for Infants.
South Pembrokeshire Hospital.	Pembroke Dock.	16 General.

The actual number of births which took place in these Hospitals was :—

County Hospital	160
Tenby Cottage	62
Riverside Hospital	10
Priory Hospital	378
Cardigan Hospital (Pembrokeshire Cases)	63
Births at Private (Registered) Nursing Homes	1
South Pembrokeshire Maternity Hospital	199

CHILD LIFE PROTECTION

Child life protection for children up to the ages specified in Section 35 and 36 of the Children's Act, 1948, is undertaken by the Children's Department, working in close association with the Health Department.

Arrangements have been made for the Medical Staff of the Health Department to carry out routine medical examinations of children in all County Council Children's Homes. Those requiring medical attention are seen by general practitioners under Part 14 of the National Health Service Act. Medical Officers of the Health Department have, during the year, undertaken a periodic examination of children who are boarded out and reports are submitted to the Children's Officer.

The Children's Department has, for the period 1st January, 1952, to 31st December, 1952, placed for adoption 4 children formerly in care under the Children's Act, 1948, or committed to the care of the County Council under the provisions of the Children and Young Persons Act, 1933, and have also undertaken Guardian ad Liem duties in respect of adoption placings during the year ended 31st December, 1952.

CHILDREN NEGLECTED OR ILL-TREATED IN THEIR OWN HOMES

Arrangements have been made whereby all cases brought to the notice of the County Health Department are reported to the Children's Officer, in his capacity as Designated Officer.

BOARDED-OUT CHILDREN

78 Boarded-out Children were supervised jointly by the Children's Officer and the Boarding-out Officer during the year ended 31st December, 1952.

NATIONAL HEALTH SERVICE ACT, 1946

Health Services provided by Local Health Authority under Part III of the Act.

COUNTY AMBULANCE SERVICE—Section 27.

The Ambulance Service has continued to operate under an agency agreement with the Welsh Home Service Ambulance Committee.

Six ambulances operated within the authorised area with a staff of four whole-time paid drivers and three whole-time attendants. In addition, volunteers from the St. John's Ambulance Brigade and the British Red Cross Society acted, when required, as attendants and emergency drivers, there is also an arrangement with Hire-car owners in the County to transport sitting-case patients to and from Hospitals.

The Tenby, Haverfordwest (No. 2) and Fishguard Stations operated under a "garage arrangement."

STATION.	Patients Str.	Conveyed Sit.	Total No. of Patients	No. of Journeys	Miles Travelled	Average miles per case
Haverfordwest No. 1	951	2,190	3,141	1,929	66,024	21.02
Haverfordwest No. 2	954	3,059	4,013	2,362	27,590	06.87
Milford Haven	402	1,408	1,810	1,021	42,606	23.55
Pembroke Dock	423	1,162	1,585	723	42,566	26.84
Tenby	452	545	997	479	21,111	21.17
Fishguard	213	790	1,003	407	20,387	20.32
Totals	3,395	9,154	12,549	6,921	220,284	17.55

In addition, Cardiganshire and Carmarthenshire Ambulances were used in connection with border cases. Under this arrangement 207 patients were conveyed and 7,464 miles covered as indicated below :

COUNTY.	Patients Str.	Conveyed Sit.	Total No. of Patients	No. of Journeys	Miles Travelled	Average miles per case
Cardiganshire	74	110	184	171	6,224	33.82
Carmarthenshire	12	11	23	23	1,240	53.91
Totals	86	121	207	194	7,464	36.06

CAR SERVICE FOR "SITTING CASES"

An aggregate of 2,608 patients were conveyed and 53,799 miles were covered.

TRANSPORT BY RAIL

The arrangements made by Railway Authorities in connection with patients travelling by rail continued to be satisfactory.

Patients are sent by rail whenever possible and it is expedient to do so. 20 cases involving long journeys were sent by rail during the year.

Demands on the Ambulance Service have continued to increase and the following table shows the upward trend in its use since July, 1948.

AMBULANCES

Year			Patients	Miles	Average Miles per case
1948	...	...	1625	37976	23.37
1949	...	...	7023	148261	21.11
1950	...	...	9516	186007	19.54
1951	...	...	12086	230361	19.06
1952	...	...	12539	220296	17.57

SITTING CASE CARS

Year			Journeys	Patients	Miles
1948	...	...	306	333	6811
1949	...	...	785	910	18720
1950	...	...	1256	1631	30016
1951	...	...	1671	2382	50799
1952	...	...	1863	2608	53799

Some of the increase in the number of patients carried is due to the inaccessibility of consultant clinics. Many of these are in Carmarthen and the attendance of patients involves considerable travel. Before 1950, there were Physiotherapy Clinics at Tenby and Pembroke Dock, but when these closed down patients were obliged to undertake longer journeys, when previously these distances were small. The result is shown in the tables given and explains to some extent the increase in mileage.

To avoid unnecessary use of the service, Hospital staffs, Doctors and Nursing Sisters have had the situation explained to them and have been asked to use the Service as economically as possible. Long distance removals are carefully scrutinised in advance and, where possible, rail services have been used for all or part of the journeys.

Difficulties have arisen with many patients who could use public transport but who live in inaccessible areas and so have to be conveyed by ambulance or sitting-case cars.

It is hoped that in the near future ambulances will be fitted with radio control which will enable the service to be run more efficiently and possibly more economically.

MIDWIFERY SERVICE—Section 23

Prior to 31st March, 1952, the Maternity Service was provided through the agency of the County Nursing Association. Since that date, this Association ceased to function and the service was taken over completely by the County Council, the Administrative and Clerical work being undertaken by the Staff of the Health Department.

The County employs 50 domiciliary Midwives who work under the supervision of the County Nursing Officer acting under the direction of the County Medical Officer. All private Midwives working in the County are also closely supervised.

Nearly all Midwives in the County are trained in the use of Gas and Air Analgesia and are provided with the necessary equipment. This equipment is serviced and maintained at regular intervals by the manufacturers. Midwives are also provided with Pethedrine, Ergometrin, Erbolin, and Potassium Bromide and Chloral Hydrate.

All cases recommended for admission to Hospital for their confinement are investigated by the Staff of the Health Department to ensure that the best possible use is made of the beds available. Where normal confinements are expected and home conditions satisfactory, everything is done to encourage mothers to have their babies at home. Home Helps are provided where necessary.

Provision is made for Midwives to attend refresher courses from time to time. No arrangements are made for the training of pupil Midwives. Of the 51 Nurse Midwives employed by the County Council, 12 have had Queen's District Training, 26 S.R.N., S.C.M., 1 S.R.N., 12 S.E.A.N., S.C.M.

25 Nurse Midwives have their own cars and 20 are provided with cars by the County Council. A Car-Hire Service is arranged in the remaining Districts.

During the year, 87 Midwives notified their intention to practise in the County. Eleven new appointments were made and there were five inter-county transfers. Four nurses resigned for Health reasons, two retired on reaching the retiring age, and three resigned and left the County.

740 Maternity and Midwifery domiciliary cases were undertaken during the year, of which 657 cases were attended by District Nurse Midwives and 83 by private midwives. No material deaths took place amongst cases attended by District Nurse Midwives.

MIDWIVES' ACT, 1902-1936

RETURN OF LOCAL SUPERVISING AUTHORITY

MATERNITY CASES ATTENDED

Number of maternity cases in the area of the local Supervising Authority attended by Midwives during the year ended 31st December, 1952.						
Domiciliary Cases.		Cases in Institutions		Total		
As Mid-wives.	As Mater-nity Nurses.	As Mid-wives.	As Mater-nity Nurses.	As Mid-wives.	As Mater-nity Nurses.	
(1)	(2)	(3)	(4)	(5)	(6)	
(1) Midwives employed by the Authority						
549	108	—	—	549	108	
(2) Midwives employed by Voluntary Organisations :—						
(a) Under arrangements with the Local Health Authority in pursuance of Section 23 of the National Health Service Act, 1946						
—	—	—	—	—	—	
(b) Otherwise (including Hospitals not transferred to the National Health Service Act						
—	—	—	—	—	—	
(3) Midwives employed by Hospital Management Committee or Boards of Governors under the National Health Service Act, 1946 ...						
—	—	823	8	823	8	
(4) Midwives in Private Practice (including Midwives employed in Nursing Homes)						
59	24	—	—	59	24	
Totals						
608	132	823	8	1,431	140	

TRAINING IN GAS AND AIR ANALGESIA

There are now 41 midwives trained in the administration of Gas and Air Analgesia. Each midwife is supplied with Gas and Air apparatus after training and these machines are serviced once every three months by the manufacturers, for which the County pays a rate of £2 10s. 0d. per annum per machine.

Gas and Air Analgesia was administered to 368 cases during the year.

HOME NURSING—Section 25.

Home Nursing is included in the duties of district nurse/midwives. 51 Nurses are directly employed by the County Council and give twenty-five per cent of their time to Home Nursing. They are provided with all the necessary equipment they need to carry out their work. General Practitioners get in touch with the nurses direct or leave instructions in the patient's home on a special message form provided. Some hospitals send instructions to the nurses about any treatment patients may require on discharge.

Cases attended	6,067
Visits made	71,259

NIGHT SERVICE

Should any patient require night nursing which cannot be given by relatives, the County Nursing Officer arranges to supply assistant nurses who are employed on a part-time basis.

General classification of cases treated by these nurses are :—
Old People.

Cases discharged from hospital and still requiring some treatment.

Tuberculosis Patients.

All District Nurses are given permission to attend refresher courses and arrangements are made for suitable nurses to be given district training.

VACCINATION AND IMMUNISATION—Section 26.

VACCINATION

Arrangements for vaccination and Immunisation are undertaken by the District Medical Officers of Health. The work is carried out by general practitioners at Clinics and in their own Surgeries.

When notifications of Births have been received, the parents are informed of the facilities existing for Vaccination and are invited to have this done through the County Scheme or privately with their own Doctor.

IMMUNISATION

Immunisation against Diphtheria, they are again circularised before the child's first birthday. The Health Visitors also inform the parents of these facilities and make arrangements for the children to attend the clinics or the doctors' surgeries. Health Visitors keep records and visit the parents of children who have not been immunised.

Arrangements for Booster injections are made through the School Nurses and Health Visitors. No special arrangements have been made for Whooping Cough immunisations, although parents who wish to have this done can do so through their own Doctor.

VACCINATION

491 successful vaccinations were carried out during the year, comparing with 515 in 1951. In addition 87 were re-vaccinated.

DIPHTHERIA IMMUNISATION

Number of children immunised during the year :—

Under 5	5—15	Total	Reinforcing
779	126	905	300

CARE OF MOTHERS AND YOUNG CHILDREN—Section 22.

The Administrative arrangements are undertaken by the Staff of the County Health Department under the direction of the County Medical Officer.

WELFARE CENTRES

The Welfare Centres are situated at :—

Haverfordwest
Milford Haven
Narberth
Tenby
Pembroke Dock
Fishguard
Goodwick
Neyland.

ATTENDANCES AT WELFARE CENTRES :

No. of Children who attended Centres during the year.	Total number of attendances made by children during the year.
813	5,540

Ante-natal Clinics are held at Tenby, Pembroke, Pembroke Dock, Milford Haven and Saundersfoot for the convenience of Mothers and Nurses.

All Expectant Mothers referred by Nurses to their own Doctor, who carries out 3 examinations at regular intervals. The nurse meanwhile keeps the patients under observation and can refer for additional examinations if required; this includes blood examinations of all kinds.

FIRST Examination : When the patient books a midwife.

SECOND Examination : Between the 28th and 32nd week of Pregnancy.

THIRD Examination : Post-natal examination about 6 weeks after the birth of child.

This scheme is proposed only for Expectant Mothers who book Midwives, thus eliminating all Maternity and Hospital cases—these would have medical care.

Nurses continue to use medical aid forms, when doctors are required at confinements for abnormalities.

Special cases are referred to Obstetricians and Gynaecologists provided by the Regional Hospital Board and examined by these specialists in the nearest hospital or clinic, and, if necessary, in the home.

CARE OF PREMATURE INFANTS

Special visits are paid by district nurse/midwives to all premature infants. Draught-proof cots, bedding, hot water bottles and thermometers are available when required. When the home conditions are not satisfactory arrangements are made for these children to be admitted to Hospital.

The services of a Paediatrician are available and arrangements for admission of premature infants to Hospitals are made where necessary.

Eighty-four premature births were notified during the year as having a birth weight of 5½lbs. or less. Thirty were born at home and fifty-four in Hospital.

Seven died during the first 24 hours and 4 later.

DENTAL CARE

Owing to lack of Dental Staff it has not been possible to put the Authority's Scheme for dental treatment of Expectant and Nursing Mothers and young children into operation.

The Council is negotiating with local Dental Surgeons to give priority Dental Treatment at the Council's Clinics to Expectant and Nursing Mothers.

SUPPLY OF DRIED MILKS ETC.

Supplies of Cod Liver Oil and Orange Juice distributed by the Ministry of Food are available at all Welfare Centres in the County.

Infant foods at wholesale rates are sold in all Infant and Child Welfare Centres and also by District Nurses in some Rural Areas of the County.

PROVISION OF MATERNITY OUTFITS

Each Midwife has a stock of Maternity Outfits and one is provided to every mother who is confined at home and are supplied free.

During the year 607 outfits were supplied to Midwives for patients requiring them.

OTHER PROVISIONS

No other provisions are made except that the particulars of problem families are referred to the Children's Officer and Welfare Officer from time to time as they arise.

CARE OF UNMARRIED MOTHERS AND THEIR CHILDREN

The St. Davids Diocesan Moral Welfare Committee undertakes Welfare Work for the unmarried mother and her baby in conjunction with the Staff of the County Health Department.

All known cases of unmarried mothers are referred to the Secretary of the above Welfare Committee and those requiring residential care are sent to Plasnewydd Mothercraft Hostel where three beds (two pre-natal and one post natal) are reserved for Pembrokeshire cases.

REPORT BY THE ORGANISING SECRETARY OF THE ST. DAVID'S DIOCESAN MORAL WELFARE COMMITTEE

131 cases were dealt with during the 12 months ended 31st December, 1952, as compared with 151 for the previous year. Of these 67 were unmarried mothers :—

They were reported by :—

County Medical Officer of Health	42
National Council for Unmarried Mothers	4
Doctors	3
Social Welfare	1
Nurses	4
Clergy	3
W.R.E.N.	2
Solicitor	1
Other Workers	4
Probation Officer	1
Own Accord	2

They were dealt with as follows :—

Plasnewydd Mothercraft Hostel	13
Cwmdonkin Shelter, Swansea	1
Local Hospitals	32
Transferred to workers in other areas	5
Looked after in their own homes	16

6 children were placed out for legal adoption. Twin girls were placed in Nazareth House, Swansea and 1 in the Church of England Nursery in Salisbury, 1 was taken by a relative and 1 placed with a Foster Mother, and 5 to local nurseries.

References were taken up in the cases of all prospective adopters and reports on home conditions were received from the Children's Officer.

22 Putative fathers were written to or interviewed. 3 cases were taken into court and 8 are supporting their children under Private Agreement. 6 married the mothers of their children.

HEALTH VISITING

The Health Visiting Staff consists of a County Nursing Officer, three whole-time Health Visitors, one part-time visitor and 37 District nurse/midwives who undertake part-time Health-Visiting. The full-time Health Visitors are employed on full-time duties in Urban areas, and are responsible for all visiting duties in their areas, including the attendance at Clinics and Welfare Centres. Special visits are made to the homes of Tuberculous patients and reports are furnished to the Health Department on their housing conditions.

The future aim of the Council is to employ District Nurse/midwives with Health Visiting qualifications and with this in view Scholarships are offered for the training of present District nurses as qualified Health Visitors. Scholarships are also offered to suitable Student Health Visitors on the understanding that they work for two years for the Authority when fully trained.

Refresher courses are arranged for Health Visitors from time to time.

The establishment provides for the appointment of five full-time qualified Health Visitors to work in the larger Urban Districts and the employment of 56 district nurse/midwives, 43 of whom will devote 15 per cent. of their time to Health Visiting. This in terms of full-time Health Visitors is equivalent to employing $6\frac{1}{2}$ full-time Health Visitors, thus the County will be covered by the equivalent of $11\frac{1}{2}$ Health Visitors.

Visits paid by Health Visitors during the year under review are :—

	Children under 1 year of age.		Children between the ages of 1 & 5.		Other Classes	
	First Visits	Total Visits	First Visits	Total Visits	First Visits	Total Visits
Whole-time Health Visitors	504	2,681	67	4,462	13	128
District Nurse/Midwives	885	7,798	403	12,076	46	177
Total	1,389	10,479	470	16,538	59	305

PREVENTION, CARE AND AFTER CARE

A. TUBERCULOSIS

Close co-operation exists between the Health Department and the Chest Physician. Notifications are received of all cases diagnosed as Tuberculous and the homes are visited by the District Medical Officers of Health and Health Visitors. Contacts are investigated and B.C.G. inoculations are given when recommended by the Chest Physician. Reports are made of the home conditions and the Housing Authorities informed when re-housing or repairs are required.

All doubtful cases found in Welfare Clinics and Schools are referred to the Chest Physician for full investigation.

Notifications of discharges from Tuberculosis Hospitals are received and arrangements made for Health Visitors to make regular visits.

The Mass Radiography Unit visits the County at regular intervals and holds sessions at suitable centres. Every effort is made by Propaganda, Posters, Press advertisement, etc., to inform the general public of the desirability of having X-rays taken periodically.

Chalets are provided, where practicable, for the use of patients, where there is overcrowding and risk of infection.

Extra nourishment is given to all patients recommended by the Chest Physician.

WAITING LIST

As stated in previous reports, there is still a lack of Hospital Accommodation and many Hospital Cases have to wait for many months before being admitted.

Shelters or Chalets are available for use by patients living in overcrowded conditions as a means of segregation and improved sleeping accommodation.

Seven shelters were in use during 1952.

Details of the new cases of Tuberculosis coming to the notice of the County Health Department during the year 1952, also of deaths from this disease were as follows :—

Age Groups	New Notifications (including supplementary return)				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M	F	M	F	M	F	M	F
0	—	—	—	—	—	—	—	—
1	—	—	—	—	—	—	—	1
2	—	—	—	2	—	—	—	—
5	—	—	1	—	—	1	—	—
10	1	—	—	1	—	—	—	—
15	2	6	—	—	1	1	—	—
20	7	6	—	—	—	—	—	—
25	6	2	—	—	7	3	—	—
35	6	3	—	—	—	—	—	—
45	4	3	—	1	7	2	—	—
55	4	—	—	—	—	—	—	—
65	—	1	—	—	2	—	—	—
75	—	—	—	—	—	—	—	—
Totals	30	21	1	4	17	7	—	1

B.C.G. VACCINATION

B.C.G. Vaccination was introduced this year as part of the Health Authority's arrangements for the prevention of tuberculosis ; 130 selected Tuberculosis contacts were vaccinated by the Chest Physician.

TUBERCULOSIS HEALTH VISITING

Health Visitors visited the homes of Tuberculous patients. They advised the patients and relatives and reported to the County Health Department any unfavourable home conditions. In many cases information sent to Housing Authorities resulted in re-housing or improvements of defective premises.

RETURN SHOWING THE WORK OF THE CHEST CLINICS DURING THE YEAR 1952.

	Respiratory				Non-Respiratory				Total				Grand Total
	Adults M	Adults F	Children M	Children F	Adults M	Adults F	Children M	Children F	Adults M	Adults F	Children M	Children F	
I. (1) Number of definite cases of Tuberculosis on the Dispensary Register at the beginning of the year	263	157	26	30	23	37	43	45	286	194	69	75	624
(2) Transfers from other Authorities during the year	—	2	—	—	1	—	—	—	—	—	—	—	3
II. Number of NEW CASES diagnosed as Tuberculous during the year:													
(1) Class A (T.B. Minus)	13	10	1	1	1	2	1	1	14	12	2	2	30
(2) Class B (T.B. Plus)	15	11	—	—	—	—	—	1	15	11	—	1	27
III. Number of cases included in I and II written off the Dispensary Register during the year as:													
(1) Recovered	3	3	—	—	—	1	1	—	3	4	1	—	8
(2) Dead (all causes)	13	4	—	—	—	—	—	1	13	4	—	1	18
(3) Removed to other areas ...	3	—	—	—	—	—	—	—	3	—	—	—	3
(4) For other reasons	1	—	—	—	—	—	—	—	1	—	—	—	1
IV. Number of definite cases of Tuberculosis on the Dispensary Register at the end of the year	271	173	27	31	25	38	43	46	296	211	70	77	654

- (1) Number of consultations with Medical Practitioners: (4) Specimens of sputum, etc., examined—943.
 (a) Personal, 180; (b) Other, 1,394.
 (2) Visits by Tuberculosis Officer to homes (including personal consultations), 734. (5) X-ray examinations made in connection with Dispensary work:—Films 4,303; Screenings 278.
 (3) Visits by Nurses or Health Visitors to homes for Dispensary purposes, 934. (6) Pneumothorax: No. of refills, 349.
 (7) Attendances at Dispensaries and Visiting Stations, 3,617.

TABLE OF DIAGNOSIS OF NEW CASES SEEN DURING THE YEAR

RESPIRATORY CASES			Adults and Children		
(1)	(2)	(3)	(4)	(5)	
	Total No. of new cases examined.	Definitely tuberculous.	Diagnosis doubtful (Observation).	Definitely (a) Other Diagnosis made.	non-tuberculous (b) Other Diagnosis not made.
Men	531	28	227	69	207
Women	473	21	230	40	182
Boys	188	1	132	6	48
Girls	178	1	127	6	43
Total	1,370	51	716	121	480

NON-RESPIRATORY CASES			Adults and Children		
(1)	(2)	(3)	(4)	(5)	
	Total No. of new cases examined.	Definitely tuberculous.	Diagnosis doubtful (Observation).	Definitely (a) Other Diagnosis made.	non-tuberculous (b) Other Diagnosis not made.
Men	3	1	2	—	—
Women	3	2	1	—	—
Boys	13	1	8	4	—
Girls	2	2	—	—	—
Total	21	6	11	4	—

TUBERCULOSIS CLINICS

PERSONNEL :

Chest Physician : Dr. D. Llewelyn Davies. Private Tel. No. H-west 279.
Official Tel. No. H-west 298.

Assistant Chest Physician : Dr. K. Z. Nowak.

Clinic Sister : 1.

MAIN CLINIC :

County Hospital Annexe, Haverfordwest. Tel. No. Haverfordwest 298.

TIME TABLE

Clinics :	Days and Times :	Session :
Haverfordwest :		
County Hospital Annexe.	Tuesday, 2.0 p.m.	U.V.L. Therapy
	Wednesday, 9.0 - 12 noon	General Clinic
	Wednesday, 2.15 p.m.	Refills only
	4th Saturday, 9.30 a.m.	B.C.G. Clinic (By appointment)
	Saturday, 9.30 a.m.	U.V.L. Therapy
Cardigan :		
Memorial Hospital.	1st & 3rd Thursdays, 11.0 a.m.	New and Old Patients
	1st & 3rd Thursdays, 2.0 p.m.	Refills only
Narberth, Whitland, St. Davids, and Fishguard Areas	)))) 2nd & 4th Thursdays.	Domiciliary visits and consultations
Pembroke Dock :		
Meyrick Hospital.	Friday, 10.15 a.m.	Clinic and A.P. Re- fills. (New cases by appointment).
Tenby :		
Cottage Hospital.	1st & 3rd Fridays, 2.0 p.m.	New and old patients
Milford Haven :		
Nurses' Home.	2nd & 4th Fridays, 2.0 p.m.	New and old patients.

Domiciliary visits are made to patients in the Narberth and Whitland areas on the 2nd Thursday of each month, and to patients in the St. Davids and Fishguard areas on the 4th Thursday of each month.

B. MENTAL ILLNESS OR DEFECTIVENESS

The general supervision is under the direction of the County Medical Officer and the Medical Staff of the Health Department.

C. OTHER TYPES OF ILLNESS

Hospitals notify the County Health Department of impending discharges of patients requiring home nursing or care of any description. This information is passed on to the local District Nurse or Health Visitor who undertake any treatment recommended by Patient's own Doctor.

D. VENEREAL DISEASE

Treatment of persons suffering from Venereal Disease is undertaken by approved local medical practitioners. This general practitioner Service provides patients with treatment facilities within a reasonable distance of their homes under conditions of complete privacy.

A visiting Venereologist supervises the work and acts as Consultant when required.

E. PROVISION OF NURSING EQUIPMENT AND APPARATUS

The arrangements made with the British Red Cross Society and the Order of St. John for the supply of nursing equipment, etc., on loan, continue to work satisfactorily. Medical Comforts Depots are at :—

Haverfordwest
 Milford Haven
 Pembroke Dock
 Letterston
 Fishguard
 Narberth
 Newport
 Tenby
 Pembroke.

The Council pay £10 per annum to each Depot to cover general working expenses and, in addition, pay rents, cost of lighting, heating and insurance.

Replacements of worn or damaged articles are provided at the expense of the County Council.

Invalid chairs, crutches, etc., are provided by the Depots if required for short periods, but if required indefinitely, the onus is on the Regional Hospital Board.

DOMESTIC HELP

The Home Help Service in the County is administered and supervised by one whole-time organiser. Every case is investigated before the Help is allocated and periodic visits paid to ensure that there is no abuse of the service, and that the Help is not retained for an unnecessarily long period. There was a substantial increase in the cost of the service in 1951, due, primarily, to a greater demand for assistance from old people living alone—who, whilst not capable of conducting unaided, their domestic affairs, were for various reasons not infirm enough for Hospital admission. Certain steps were taken to reduce the expenditure without destroying the fabric of the Service, by thorough investigation of incomes and closer co-operation with the National Assistance Board and other welfare organisations. This has resulted in a marked improvement in the efficiency and the economy of the Service.

All cases, when domestic helps are employed are under the constant supervision of the Home Help Organiser—and long term cases are reviewed by the appropriate Committee every 3 months.

The Authority dispensed with the services of full time Helps as it became increasingly difficult to employ them for a 48 hour week, due to the scattered and thinly populated rural areas of the County and poor transport facilities. It has proved more satisfactory and economical to enrol occasional Helps and pay them an hourly rate. Eighty one occasional workers were employed during 1952 and due to the irregular nature of their employment and the impossibility of transporting them to a given centre, no arrangements have been made for training facilities.

81 occasional Home Helps were employed during the year and 78 households received Domestic Assistance—19 maternity, 6 Tuberculous and 53 medical.

MENTAL HEALTH SERVICE—Section 51

Administration

The Health Committee has set up a special Sub-Committee to study all aspects of Mental Health and Mental Deficiency and promote any scheme which may be helpful.

The County Medical Officer and Assistant County Medical Officers undertake the ascertainment of Mental Defectives in the community.

The County Medical Officer and one Assistant County Medical Officer are approved for the purpose of examination and ascertainment of Mental Defectives. Two Assistant County Medical Officers have attended courses.

Seven part-time Duly Authorised Officers have been appointed. These officers will, at an early date, attend special courses on Mental Health arranged by the National Association for Mental Health.

Close co-operation exists between the psychiatrists of the Regional Hospital Board with regard to placing cases of mental illness and mental defectiveness. Persons suffering from mental ill-health are usually referred to the out-patient department of the County Hospital where a Psychiatrist holds a weekly out-patient session. Supervision of patients on trial or on licence from institutions is carried out by the Medical Staff and Duly Authorised Officers.

No duties have been delegated to voluntary organisations, but use in the past has been made of the National Association for Mental Health.

ACCOUNT OF WORK UNDERTAKEN IN THE COMMUNITY

A complete list of all ascertained Mental patients is kept in the office of the Health Department. This list is reviewed from time to time and steps are taken to see that all persons suffering from Mental illness or mental defectiveness are kept under the constant supervision of nurses and Health Visitors who have been instructed to report on anything unusual to the Health Department.

Patients discharged from Mental Hospitals are visited and any action necessary is taken by the Medical Personnel and Duly Authorised Officers.

Cases of low mentality reported by Duly Authorised Officers, Police and others are investigated by the Medical Staff of the Health Department. Supervision is carried out by Medical Staff, Duly Authorised Officers and Health Visitors.

Patients requiring Mental Treatment are advised and encouraged to seek such treatment at the earliest possible opportunity.

Defectives capable of doing any work are employed in agriculture and simple duties and little is required in the way of training. They are kept under supervision.

Defectives under Guardianship are supervised by the Medical and Nursing Staff of the Department.

It is the Authority's present policy that training of defectives be undertaken at Institutions and not to attempt training in the homes.

LUNACY AND MENTAL TREATMENT ACTS

Accommodation for mental health patients is provided by the Regional Hospital Board at St. David's Hospital, Carmarthen. The table below gives particulars of patients admitted and discharged during the year.

Admissions :	Voluntary	Certified	Total
Males	28	17	45
Females	45	22	69
Discharges :			
Males	22	9	31
Females	43	10	53
Deaths :			
Males	3	6	9
Females	1	9	10

MENTAL DEFICIENCY ACTS, 1913 - 1938

The following are the particulars of Mental Defectives in the County at the end of the year :

Number of Cases "subject to be dealt with"	Males.	Females	Total
(a) Under Guardianship	1	—	1
(b) In "Places of Safety"	1	—	1
(c) Under Statutory Supervision	28	11	39
(d) In Institutions or on Licence	22	49	71
(e) Action not yet taken under any of the above headings	14	12	26
Number of cases "not at present subject to be dealt with."			
(f) Placed under Voluntary Supervision	50	47	97
(g) No. of cases included in (a), (b), (c), and (e) awaiting removal to an Institution	32	7	39

The provision of institutional accommodation for mental defectives is the responsibility of the Regional Hospital Board. The number of places available for mental defectives below the age of 16 years remains inadequate, but the situation is improving and more vacancies for patients were available than in 1951.

CANCER

Treatment of patients suffering from Cancer is now provided by the Regional Hospital Board.

Death Returns show that 152 inhabitants of the County were certified as having died as a result of various forms of Cancer. The figure for 1951 was 186.

The following table shows the localities and comparable figures for the past five years :—

URBAN DISTRICTS	1948	1949	1950	1951	1952
Fishguard & Goodwick ...	13	13	13	8	8
Haverfordwest	15	13	16	13	14
Milford Haven	21	17	16	24	22
Narberth	3	1	2	—	1
Neyland	2	5	5	6	4
Pembroke	22	24	23	18	20
Tenby	14	8	10	12	4
RURAL DISTRICTS	1948	1949	1950	1951	1952
Haverfordwest	40	31	39	44	31
Narberth	23	25	20	23	18
Pembroke	11	12	8	18	7
Cemaes	20	18	17	20	23
URBAN DISTRICTS	90	81	85	81	73
RURAL DISTRICTS	94	86	84	105	79
ADMINISTRATIVE COUNTY	184	167	169	186	152

Cases of Infectious Diseases notified to the County Medical Officer were :—

Disease	Cemaes R.D.	Fishguard and Goodwick U.D.	Haverfordwest U.D.	Haverfordwest R.D.	Milford Haven U.D.	Neyland U.D.	Pembroke U.D.	Pembroke R.D.	Tenby U.D.	Narberth Urban	Narberth Rural	TOTALS.
Whooping Cough ...	3	5	11	60	9	—	10	9	—	—	4	111
Scarlet Fever ...	2	12	3	14	1	5	19	6	1	—	2	65
Measles ...	128	6	1	108	3	—	47	7	—	—	7	307
Diphtheria including Membranous Group) ...	—	—	—	—	—	—	—	—	1	—	—	1
Enteric Fever (Typhoid & Para-typh. ...	4	14	—	4	—	—	—	—	—	—	—	22
Pneumonia ...	2	3	1	16	9	—	21	5	—	—	1	58
Puerperal Pyrexia ...	—	—	1	—	—	—	—	—	—	—	—	1
Acute Poliomyelitis ...	2	—	—	2	—	—	—	1	1	—	1	7
Acute Poliо-encephalitis ...	1	—	—	—	—	—	—	—	—	—	—	1
Dysentery ...	—	—	5	20	—	—	—	—	—	—	—	25
Erysipelas ...	—	—	—	7	1	1	2	—	—	—	—	11
TOTALS ...	142	40	22	231	23	6	99	28	3	—	15	609

ORTHOPAEDIC WORK

The Orthopaedic Scheme provides treatment for children from birth up to 16 years of age and for pupils receiving higher education until they reach school leaving age.

Treatment of Orthopaedic Defects is undertaken by Mr. D. N. Rocyn Jones, F.R.C.S. He attends the Clinics held at the County Hospital, Haverfordwest, for minor operations and manipulations, giving advice and directions for the treatment and after-care of the children.

There were 402 children under five years on the Register at the end of the year. 136 of these were new cases.

18 were examined and 70 re-examined at the County Hospital by the Orthopaedic Specialist.

Three were admitted to Hospitals, six had minor operations and thirteen manipulations were carried out. Plasters, special appliances and remedial exercises, etc., were provided for others.

The Orthopaedic Nurse followed up all cases at the homes or at Clinics. She paid 139 first visits and 533 re-visits to the homes of children under five years of age.

NATIONAL ASSISTANCE ACT, 1948.

Under Section 29 of the Act, the Ministry of Health directed that the Welfare of the Blind should be undertaken by the Authority. The responsibility for making "monetary" allowances to unemployable blind persons passed from the County Council to the Assistance Board but the Council remained responsible for the augmentation of the earnings of blind persons employed in workshops for the blind or Home Workers Schemes.

PREVENTION OF BLINDNESS

139 persons with failing eyesight have been sent to Ophthalmic Surgeons for examination and report: 78 were certified and registered as Blind and 58 as partially sighted.

REGISTRATION :

Blind children under 5 years of age	1
Blind children receiving education at the Bridgend School for the Blind	2
Pupils at the Royal Normal College for the Blind	1
Ineducable blind children between 5 and 16 years	3
Home Workers under the supervision of the Birmingham Institution for the Blind	8
Workshop employees at the Swansea Institution for the Blind	2
Blind persons in employment in open industry	22
New Blind Cases added to the Register in 1952	78
Partially-sighted persons registered	58
New Cases examined and found to be neither blind nor partially sighted	3

BLIND AND PARTIALLY-SIGHTED PERSONS ON THE REGISTER
IN THE VARIOUS DISTRICTS AT 31st DECEMBER, 1952

	No. on County Register		
	Male	Female	Total
URBAN DISTRICTS :			
Fishguard & Goodwick	6	20	26
Haverfordwest	20	31	51
Milford Haven	27	27	54
Narberth	5	5	10
Neyland	12	8	20
Tenby	4	18	22
Pembroke	21	23	44
RURAL DISTRICTS :			
Cemaes	23	44	67
Haverfordwest	57	67	124
Pembroke	9	19	28
Narberth	26	52	78
Total in 1952	210	314	524
Total in 1951	180	299	479

FOOD AND DRUGS ACT, 1938.
SAMPLES TAKEN DURING THE YEAR 1952.

SAMPLES	No. of Samples taken Quarters					No. of Samples adulterated Quarters				
	Mar.	Jun.	Sep.	Dec.	Tot- als.	Mar.	Jun.	Sep.	Dec.	Tot- als.
Milk	49	62	53	55	219	1	17	6	5	29
Dried Milk	2	—	—	—	2	—	—	—	—	—
Tea	2	3	4	3	12	—	—	—	—	—
Sugar	3	3	4	2	12	—	—	—	—	—
Sago	1	1	—	—	2	—	—	—	—	—
Bacon	2	1	—	—	3	—	—	—	—	—
Lard	2	3	—	—	5	—	—	—	—	—
Raspberry Flavoured Cornflour	1	—	—	—	1	—	—	—	—	—
Rice	1	1	1	1	4	1	—	—	—	1
Semolina	1	—	1	—	2	—	—	—	—	—
Cooking Fat	1	—	1	1	3	—	—	—	—	—
Ice Cream	1	3	—	2	6	—	—	—	—	—
Horlicks	1	—	—	—	1	—	—	—	—	—
Ovaltine	1	—	—	—	1	—	—	—	—	—
Dried Peas	—	—	1	1	2	—	—	—	—	—
Desiccated Coconut	1	1	—	—	2	—	—	—	—	—
Margarine	1	2	3	3	9	—	—	—	—	—
Table Cream	1	—	—	—	1	—	—	—	—	—
Tapioca	1	—	—	—	1	—	—	—	—	—
Coffee	1	—	—	1	2	—	—	—	—	—
Corn Flour	1	—	—	—	1	—	—	—	—	—
Cheese	1	1	—	1	3	—	—	—	—	—
Self-Raising Flour ...	1	—	1	—	2	—	—	—	—	—
Cocoa	1	1	1	—	3	—	—	—	—	—
Blancmange Powder	1	—	—	—	1	—	—	—	—	—
Pork Luncheon Meat	1	—	1	—	2	—	—	—	—	—
Butter	5	3	4	3	15	—	—	—	—	—
Baking Powder	—	1	—	—	1	—	—	—	—	—
Gravy Powder	—	1	—	—	1	—	—	—	—	—
Sponge Pudding Mixt.	—	1	—	—	1	—	—	—	—	—
Lemonade	—	1	—	—	1	—	—	—	—	—
Epsom Salts	—	1	—	—	1	—	—	—	—	—
Processed Cheese ...	—	1	—	—	1	—	—	—	—	—
Nescafe	—	1	—	—	1	—	—	—	—	—
Sausage (Pork & Beef)	—	—	3	—	3	—	—	—	—	—
Sponge Flour Mixture	—	—	1	—	1	—	—	—	—	—
Flour	—	—	1	—	1	—	—	—	—	—
Macaroni	—	—	1	—	1	—	—	—	—	—
Pearl Barley	—	—	1	1	2	—	—	—	1	1
Sugar Confectionery	—	—	3	—	3	—	—	—	—	—
Pork Pie	—	—	1	—	1	—	—	—	—	—
Preserves	—	—	—	1	1	—	—	—	—	—
Ground Cinnamon ,...	—	—	—	1	1	—	—	—	—	—
Ale	—	—	—	2	2	—	—	—	—	—
Sugared Coconut	—	—	—	1	1	—	—	—	—	—
Cheese Straws	—	—	—	1	1	—	—	—	—	—
Vinegar ...	—	—	—	1	1	—	—	—	—	—
Ginger Beer	—	—	—	1	1	—	—	—	—	—
Cut Mixed Peel	—	—	—	1	1	—	—	—	—	—
Custard Powder	—	—	—	1	1	—	—	—	—	—

Causes of Death at Different Periods of Life in the Administrative County of Pembroke, 1952.

Causes of Death	Sex.	AGGREGATE OF URBAN DISTRICTS										AGGREGATE OF RURAL DISTRICTS									
		All Ages					75—					All Ages					75—				
		0—	1—	5—	15—	25—	45—	65—	75—	8—	15—	25—	45—	65—	75—	8—	15—	25—	45—	65—	75—
1. Tuberculosis Respiratory	M	9	—	—	—	2	6	1	—	—	—	—	—	—	—	—	—	—	—	—	—
2. Tuberculosis, other	F	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
3. Syphilitic Disease	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
4. Diphtheria	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
5. Whooping Cough	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
6. Meningococcal Infections	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
7. Acute Poliomyelitis	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
8. Measles	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
9. Other infective and parasitic diseases.	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
10. Malignant neoplasm, stomach	M	2	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
11. Malignant neoplasm, lung, Bronchus	M	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
12. Malignant neoplasm, breast	F	8	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
13. Malignant neoplasm, uterus	F	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
14. Other malignant and Lymphatic neoplasms	M	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
15. Leukaemia, aleukaemia	M	13	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
16. Diabetes	F	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
17. Vascular lesions of nervous system	M	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
18. Coronary disease, angina	F	34	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
19. Hypertension with heart disease	M	36	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
20. Other heart disease	F	39	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
21. Other circulatory disease	M	16	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
22. Influenza	F	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
23. Pneumonia	M	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
24. Bronchitis	F	11	2	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
25. Other diseases of respiratory system	M	9	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
26. Ulcer of stomach and duodenum	F	7	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
27. Gastritis, enteritis and diarrhoea	M	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
28. Nephritis and nephrosis	F	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
29. Hyperplasia of prostate	M	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
30. Pregnancy, childbirth, abortion	F	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
31. Congenital malformations	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
32. Other defined and ill-defined diseases	F	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
33. Motor Vehicle Accidents	M	31	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
34. All other Accidents	F	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
35. Suicide	M	7	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
36. Homicide and operations of war	F	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
ALL CAUSES	M	265	11	2	1	4	13	71	81	33	16	5	9	18	77	88	115	115	115	115	115
	F	227	5	3	1	2	6	51	56	103	7	—	1	2	9	45	68	107	107	107	107

Causes of Death.		Fishguard and Goodwick U.D.	Haverfordwest U.D.	Milford Haven U.D.	Narberth U.D.	Neyland U.D.	Pembroke U.D.	Tenby M.B.	Cemaes R.D.	Haverfordwest R.D.	Narberth R.D.	Pembroke R.D.
		M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.
1.	Tuberculosis, respiratory	—	—	3	1	—	1	5	—	1	—	—
2.	Tuberculosis, other	—	—	—	—	—	1	—	—	—	—	—
3.	Syphilitic disease	—	—	—	—	—	1	—	—	1	—	—
4.	Diphtheria	—	—	—	—	—	—	1	—	—	—	—
5.	Whooping Cough	—	—	—	—	—	—	—	—	—	—	—
6.	Meningococcal infections	—	—	—	—	—	—	—	—	—	—	—
7.	Acute poliomyelitis	—	—	—	—	—	—	—	—	—	—	—
8.	Measles	—	—	—	—	—	—	—	—	—	—	—
9.	Other infective and parasitic diseases ...	—	—	1	—	—	—	1	—	—	—	—
10.	Malignant neoplasm, stomach	2	—	3	—	—	1	—	2	1	5	2
11.	Malignant neoplasm, lung, bronchus ...	—	—	2	—	—	1	—	1	—	3	—
12.	Malignant neoplasm, breast	—	—	1	—	—	1	—	5	—	1	—
13.	Malignant neoplasm, uterus	—	—	—	1	—	—	—	—	—	2	—
14.	Other malignant and lymphatic neoplasms	3	3	6	2	8	1	1	—	10	4	—
15.	Leukaemia, aleukaemia	1	—	—	—	—	—	—	—	—	—	—
16.	Diabetes	—	—	3	1	1	—	1	—	1	1	—
17.	Vascular lesions of nervous system	5	5	5	9	7	5	2	1	1	3	9
18.	Coronary disease, angina	4	2	5	3	12	3	1	1	3	—	—
19.	Hypertension with heart disease	2	—	—	1	1	1	—	—	2	—	—
20.	Other heart disease	3	6	7	9	9	8	—	4	5	2	11
21.	Other circulatory disease	—	2	1	2	2	1	—	1	—	—	—
22.	Influenza	—	—	—	—	—	—	—	3	—	—	—
23.	Pneumonia	—	1	2	3	4	1	—	4	4	1	—
24.	Bronchitis	—	—	—	—	4	2	—	—	—	—	—
25.	Other diseases of the respiratory system	1	1	—	1	—	—	—	1	1	—	—
26.	Ulcer of the stomach and duodenum ...	—	—	1	1	1	—	—	1	—	—	—
27.	Gastritis, enteritis and diarrhoea	—	—	—	—	1	—	—	1	2	—	—
28.	Nephritis and nephrosis	—	—	—	3	—	1	—	—	3	—	—
29.	Hyperplasia of prostate	1	—	1	—	—	—	—	—	—	—	—
30.	Pregnancy, childbirth, abortion	—	—	—	—	—	—	—	2	—	—	—
31.	Congenital malformations	1	—	1	—	1	—	—	—	—	—	—
32.	Other defined and ill-defined diseases ...	4	4	2	6	5	4	—	2	3	1	—
33.	Motor vehicle accidents	—	—	1	—	1	1	—	—	—	—	—
34.	All other accidents	—	—	1	—	3	1	—	—	—	—	—
35.	Suicide	—	—	—	—	1	—	—	—	—	—	—
36.	Homicide and operations of war	—	—	—	—	—	—	—	—	—	—	—
Totals all Causes		27	24	38	45	69	40	8	9	17	10	83
Live Births		37	35	61	58	124	100	6	7	16	13	127
Legitimate		35	33	59	57	119	95	6	7	15	13	122
Illegitimate		2	2	2	1	5	5	—	—	1	—	5
Still Births		4	2	6	2	7	2	1	1	—	—	3
Legitimate		4	2	5	2	7	2	1	1	—	—	3
Illegitimate		—	—	1	—	—	—	—	—	—	—	—
Deaths of Infants under 1 year of age		1	—	1	2	4	2	—	—	—	—	5
Legitimate		1	—	1	1	4	2	—	—	—	—	5
Illegitimate		—	—	—	1	—	—	—	—	—	—	—
Deaths of Infants under 4 weeks of age		—	—	1	1	3	2	—	—	—	—	3
Legitimate		—	—	1	1	3	2	—	—	—	—	3
Illegitimate		—	—	—	—	—	—	—	—	—	—	—
RESIDENT POPULATION		4	879	7,284	11,700	1,040	2,224	12,650	4,393	9,075	21,500	10,060

