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REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1935

BIRMINGHAM: TEMPLAR PRINTING WORKS, EDMUND STREET. 1936



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City of Birmingham

REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1935

BIRMINGHAM: TEMPLAR PRINTING WORKS, EDMUND STREET. 1936



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PUBLIC HEALTH DEPARTMENT, THE COUNCIL HOUSE,

BIRMINGHAM.

TO THE CHAIRMAN AND MEMBERS, PUBLIC HEALTH AND MATERNITY AND CHILD WELFARE COMMITTEE.

The following pages will indicate that in a number of directions the City has shown direct evidence during 1935 of a growth in health, and that along many channels there has been progress made in the development of services making for social health.

The general death-rate, the infant mortality, and the maternal mortality have all been lowered, while the slight increase in the birth-rate of 1934 has been repeated in 1935. The tuberculosis death-rate is equal to that for 1934, which reached the lowest figure recorded in the City,

Among the infectious diseases, scarlet fever showed a considerable prevalence, substantially greater than in 1934, and in fact higher than for a number of years past, but the type of disease continued in general to be very mild. Diphtheria showed again the increased prevalence noted in Birmingham and in many other parts of the country in 1934, and continued generally to be of the graver type recently experienced. The effect of immunisation was demonstrated in the fact that the death-roll from diphtheria again did not include a single person who had undergone the course of immunisation.

A wave of measles was experienced during the year, with a considerable mortality. The treatment of a larger number of mild scarlet fever cases in their homes, and the opening of new ward blocks at Little Bromwich Hospital allowed of the admission of considerable numbers of the more severe cases of measles and whooping cough for treatment under good hospital conditions.

The sound progress of the scheme for the control of venereal diseases is suggested by the figures which show diminishing numbers of cases of venereal infection, combined with a rising attendance, for diagnosis, of persons found on examination not to be thus infected, and a greatly increased attendance of infected patients for systematic treatment. All these features are encouraging.

Housing continued to be a centre of attention throughout the year, including as it did the representation of fifty-two Clearance Areas comprising 1,242 houses. The grand total of houses represented for demolition since the commencement of the five-year programme amounted, by the end of 1935, to 2,965 in 101 areas and 2,245 individual houses, or a total of 5,210 houses. Since the end of the year difficulties in re-housing, arising from shortage of labour in the building trade, have involved a temporary suspension of representations of further clearance areas and of all except the most urgent representations of individual houses. Further details of this must be postponed till the next report, by which time it may be hoped that progress in slum clearance may have been resumed. Meanwhile the Department has continued systematically to collect details of areas due for representation, with a view to prompt action when practicable.

The City Hospitals have been heavily pressed during the year, and your Committee have had under anxious consideration the need for additional accommodation at Selly Oak Hospital. Proposals in regard to this are likely to come before the City Council during the coming autumn.

The maternity and child welfare services of the City have continued to expand. Attention is drawn to a review of the antenatal and neonatal death-rate set out in the body of the report. During the year the new combined child welfare centre and venereal diseases clinic in Lancaster Street, replacing worn-out premises in Aston Street, was opened by the late Mrs. J. B. Burman, whose death, so deeply deplored by all, meant to us the grave loss of a most gracious personality, a pioneer and leader among the many voluntary workers who play so fine a part in the City service.

I am happy again to record the uniformly keen and helpful spirit which has continued to permeate the Department; and glad also to have the opportunity to acknowledge the consideration and support so consistently given by yourself, Mr. Chairman, and by each and every member of the Committee.

I am,

Your obedient Servant,

H. P. NEWSHOLME, Medical Officer of Health.

July, 1936.



CITY OF BIRMINGHAM.

REPORT OF THE MEDICAL OFFICER OF HEALTH For the year 1935.

SUMMARY OF STATISTICS.

Area (in acres), 51,147. Population (Census, 1931), 1,002,603. Estimated by Medical Officer, 1935, 1,033,000. Estimated by Registrar-General, 1935, 1,013,700. Total number of houses at April 1st, 1935, according to rate books, 261,093. Rateable value, £6,756,520 (April 1st, 1935). Sum represented by a penny rate, £25,838. Extracts from vital statistics of the year 1935 :---Births-Males: 8,059 Legitimate, 15,381 Birth Rate, 15.4. Females : 7,852 J Illegitimate, 530 Stillbirths, 548. Rate per 1,000 total live and stillbirths, 33. Deaths, 11,283. Crude Death-rate 10.9. Standardised Death-rate 12.0. Percentage of deaths occurring in public institutions-51 per cent. Number of women dying in, or in consequence of childbirth-

			Deaths,	live and still births.
From sepsis	 	 	23	1.40
From other causes		 	33	2.00
			-	
		1	fotal 56	3.40

Deaths of Infants under one year of age per 1,000 live births :---

Legitimate, 63. Illegitimate, 91. Total, 64.

Deaths from Measles (all ages), 52.

Deaths from Whooping Cough (all ages), 66.

Deaths from Diarrhoea (under two years of age), 123.

1. POPULATION AND MORTALITY STATISTICS.

POPULATION.

The Registrar General estimated the population of Birmingham at 1,013,700 on June 30th, 1935. The local estimate, based on the natural increase due to excess of births over deaths, with an allowance for migration, was 1,033,000.

BIRTHS.

(See page 108).

DEATHS.

The deaths belonging to Birmingham numbered 11,233 as compared with 11,347 in 1934 and 11,295 in 1933. Of these deaths 5,815 were of males and 5,418 of females.

The death-rate for 1985 was 10.9. This comes near to the lowest rate yet attained in Birmingham, viz.: 10.8 in 1980, a year which both locally and nationally established a record in this respect. The corresponding rate in 1984 was 11.0. The average for the ten years prior to 1985 was 11.5.

The fluctuations in the death-rate during the past 24 years are shown on the diagram below, which also shows the rates in the Central and Outer groups of wards.



The progress in reduction of the death-rate in England and Wales and in Birmingham during the past 65 years can be seen from the figures below :----

	T	Birminghan		Engl	and and 1	Vala
1071 1075 (Old City)	L		m	Engi	and and V	wates
1871-1875 (Old City)		25.2	***		22.0	
1876-1880 ,,		22.8			20.8	
1881-1885 ,,		20.7			19.4	
1886-1890 ,,		20.2			18.9	
1891-1895 ,,		20.3			18.7	
1896-1900 ,,		20.5			17.7	
1901-1905 (Present Area)		16.5			16.0	
1906-1910 ,,		15.0			14.7	
1011 1015		14.6			14.3	
1016 1000		13.4			14.4	
1091 1095		11.5			12.2	
1008 1090		11.6			12.1	
			***	***		
1931-1935 ,,		11.2			12.0	
1926		11.3			11.6	
1097		11.6			12.3	
1099		10.9			11.7	
1929 ,, ,, ,,		13.5		••••	13.4	
1930 ,,		10.8			11.4	
1931 ,,		11.7			12.3	
1932 ,,		11.3			12.0	
1933 ,,		11.0			12.3	
1934 ,,		11.0			11.8	
1935 ,,		10.9			11.7	

DEATH-RATES IN BIRMINGHAM AND ENGLAND AND WALES.

Up to 1915 the mortality in Birmingham was above that of England and Wales. During the 20 years since that date, with one exception, it has been below the rate for the country as a whole.

The following table sets out the death-rate in 1985 for the eleven largest towns, and indicates that, despite its size, Birmingham occupies a favourable position :---

COMPARATIVE DEATH RATES IN ELEVEN LARGEST TOWNS.

				11.4 per 1,000
 		 	 	13.8
 		 	 	10.9
 		 	 	13.2
 		 ***	 	12.9
 		 	 	11.9
 		 	 	18.2
 		 	 	13.3
 		 	 	10.8
				14.3
 		 	 	12.2
···· ··· ···	···· ··· ··· ··· ··· ··· ··· ··· ··· ·		 	

MORTALITY BY AGE AND SEX.

The deaths at different age periods were as follows :---

		Males.	Females.	Persons.
Under 1 year	 	 571	453	1,024
1 and under 2	 	 73	60	133
2 and under 5	 	 83	85	168
5 and under 15	 	 138	130	268
15 and under 25	 	 195	183	378
25 and under 45	 	 637	577	1,214
45 and under 65	 	 1,831	1,308	3,139
65 and under 75	 	 1,306	1,241	2,547
75 and upwards	 	 981	1,381	2,362

The deaths at ages over 65 years are largely to be regarded as in the natural order of things and to that extent as inevitable. They number 4,909 out of a total of 11,233.

The deaths at ages below 65 years contain large groups capable of marked reduction under healthy conditions of life and granted the whole-hearted co-operation of the public in living the healthy life. In 1985 such largely preventable deaths numbered 6,324, or 56 per cent. of the total.

Included among these are 1,024 deaths under 1 year of age, and a further 301 deaths between 1 and 5 years. The causes of mortality in these groups are set out in detail in the section of this report on Maternity and Child Welfare (Section VII).

Among school children (5 to 15 years), the largest individual cause of death was diphtheria with 54 deaths, while accident (38), rheumatic fever (21), nervous diseases (25), and tuberculosis (39), were responsible for a not inconsiderable mortality at this age.

Among young people between 15 and 25 years, there were 378 deaths (7 per week on an average) of which 152 were due to tuberculosis.

In early adult life (25 to 45 years), 1,214 deaths occurred. At this age period also tuberculosis heads the list of discases with 310 deaths.

In later adult life (45 to 65 years), the largest number of deaths was caused by heart and circulatory diseases (865), cancer being second (701 deaths), respiratory diseases third (320), and tuberculosis fourth with 233.

Fuller details as to the causes of death at different age periods and in the two sexes are given in Table II at the end of this report.

INFANT MORTALITY. (See page 110).

DEATH-RATES IN WARDS.

In 1935 the death-rates in the different wards were as set out below. As in previous years there continue to be marked differences in the death-rates in the various wards of the City :---

	Dunn			Time of	1935.	
(St. Paul's				 12.6	
PARADICI DALA METERIA	St. Mary's				 13.3	
	Duddeston and N	echells			 11.4	
Central Wards	St. Bartholomew's				 12.8	Average 12.9
	St. Martin's and		nd		 13.3	
	Market Hall				 13.2	
and the second se	Ladywood				 13.5	
;	Lozells				 12.5	
	Aston				 11.8	
	Washwood Heath				 9.4	
	Saltley				 9.7	
	Small Heath				10.0	
Middle Ring {	Sparkbrook				 13.4	Average 11.6
	Balsall Heath				12.8	
	Edgbaston				 12.1	
	Rotton Park				 12.2	
	All Saints'				 12.1	
	An Danis					
(Soho				 18.1	
	Sandwell				 10.3	
	Handsworth				 13.7	
	Perry Barr			***	 5.2	
- Antonio a	Erdington				 8.7	
1002.0	Gravelly Hill				 8.1	
CALL TRANSPORT	Bromford				 9.0	
Outer Ring	Stechford			***	 8.5	
Outer King	Yardley				 8.7)	Average 9.5
	Acocks Green				 9.0	
PLU, C. J. M.	Hall Green	***			 6.9	
001.0	Sparkhill				 11.8	
TROAT	Moseley and King'	s Heat	h		 11.5	
CHRAS	Selly Óak				 11.0	
and the bar and the second	King's Norton				 10.8	
	Northfield				 7.1	
					8.5	

DEATH-RATES IN WARDS.

In November 1934 many alterations were made in the boundaries of the Wards of the City, making it impossible to compare rates for individual Wards in 1935 with those in previous years. It is, however, roughly correct to compare the total figures for the Central, Middle Ring and Outer Ring of Wards with those for previous years and the mean death-rates for the three groups are given in the next table :--

		Central Wards	Middle Ring	Outer Ring
1930	 	13.3	10.8	8.9
1931	 	14.5	12.3	9.5
1932	 	18.6	11.7	9.8
1933	 	13.3	11.4	9.7
1934	 	12.9	12.0	9.6
1935	 	12.9	11.6	9.5

The diagram on page 8 shows the death-rate during the past 24 years in the City as a whole contrasted with that of the Central Wards and of the Outer Ring. It will be noted that the mortality in the Central Wards is much nearer to that of the whole City than it was 24 years ago. Nevertheless the difference between the Central and the Outer Wards is still great. In 1935 there were 2,829 deaths in the Central Wards. If the death-rate in them had been as low as it was in the Outer Ring 735 of these deaths would have been avoided.

In the next table the mortality from some of the more prominent causes of death is shown for the three groups of Wards.

	Central Wards	Middle Ring	Outer Ring	City
Measles	.11	.03	.04	.05
Whooping Cough	.16	.05	.03	.06
Diphtheria	.12	.04	.09	.08
Influenza	.14	.19	.13	.15
Tuberculosis of Respiratory System	.92	.72	.60	.71
Other forms of Tuberculosis	.11	.07	.08	.08
Cancer, Malignant Disease	1.59	1.72	1.34	1.52
Diseases of Nervous System and Sense				
Organs	.92	.81	.57	.72
Diseases of Heart	3.02	3.06	1.94	2,55
Other Diseases of Circulatory System	.58	.62	.57	.59
Bronchitis	.35	.25	.22	.26
Pneumonia (all forms)	1.03	.65	.61	.72
Other Diseases of Respiratory System	.10	11	.11	.11
Diarrhoea and Enteritis	.30	.16	.11	.17
Other Diseases of Digestive System	.49	.48	.42	.46
Non-Venereal Disease of Genito-urinary				
System	.42	.53	.43	.46
Premature Birth and Diseases of Early				
Infancy	.70	.49	.55	.57
Old Age	.21	.16	.17	.18
Violence (all forms)	.62	.54	.49	.54
Other Causes	.94	.90	.85	.89

DEATH-RATES IN GROUPS OF WARDS, 1935.

In almost every instance the mortality is higher in the Central Wards than in the Outer Ring. This excessive mortality is very noticeable in the case of pneumonia, tuberculosis and heart diseases. In the case of pneumonia, the deaths last year in the Central Wards numbered 227. If the mortality had been no higher than in the Outer Ring they would have numbered 134, a saving of 98 lives.

PRINCIPAL CAUSES OF DEATH.

Particulars of the deaths from individual causes at different age periods and in the two sexes are set out in Table II at the end of this Report. The relative mortality attributable last year to some of the more important of these causes is shown in the diagram below.



The statistics relating to infectious diseases (including tuberculosis) are dealt with in detail in Section VI of this Report, and those relating to diarrhoea, prematurity and other infantile complaints in Section VII.

CANCER.

The deaths from cancer numbered 1,571 as compared with 1,469 in 1934. The part of the body primarily affected was as follows :---

								1935	1934
Lip, tongu	a nalat	a inm	and al	harway				85	87
						 		438	414
Oesophagu				increas		 	 	366	361
Peritoneum	A				***	 11.0	 		
Female org	gans of	reprod	uction			 ***	 	148	134
Breast						 	 	199	174
Skin						 	 	14	7
Other part						 	 	321	292

The death-rate in Birmingham and in England and Wales is shown in the table below :---

	DEATH-	RATE	PER 1	,000 FROM	CANCER
--	--------	------	-------	-----------	--------

			Birmingham.	England and Wales.
1926		 	 1.26	1.36
1927		 	 1.36	1.38
1928		 	 1.35	1.42
1929		 	 1.34	1.44
1930		 	 1.43	1.45
1931	1	 	 1.46	1.48
1932		 	 1.45	1.51
1933		 	 1.43	1.53
1934		 	 1.43	1.56
1935		 	 1.52	

CANCER DEATH-RATES IN WARDS.

	Ward,		Dea	th-rate 1935.
	St. Paul's		 	1.67
	St. Mary's		 	1.48
	Duddeston and Necl	iells	 	1.24
Central Wards	St. Bartholomew's		 	1.69 Average 1.60
	St. Martin's and Der	itend	 	1.62
	Market Hall		 	1.69
	Ladywood		 	1.84
	Lozells		 	2.08
Middle Ring	Aston		 	1.75
	Washwood Heath		 	1.48
	Saltley		 	1.81
	Small Heath		 	1.19 Average 1.72
	Sparkbrook		 	2.07 [
	Balsall Heath		 	1.98
	Edgbaston		 	1.78
	Rotton Park		 	1.87
	All Saints		 	1.77 J
	۲ Soho		 	2.16
	Sandwell		 	1.42
	Handsworth		 	2.13
	Perry Barr		 	0.60
	Erdington		 ***	1.74
	Gravelly Hill		 	1.02
	Bromford		 	1.18
	Stechford		 	0.81 Average 1.37
Outer Ping	Yardley		 	1.01
Outer Ring			 	1.26
	Hall Green		 	0.91
	Sparkhill		 	1.65
	Moseley and King's	Heath	 ***	1.53
	Selly Oak		 	1.69
	King's Norton		 	1.87
	Northfield		 	0.71
	L Harborne		 	1.59 J

In some of the newer parts of the town, such as Perry Barr and Northfield, the favourable death-rate in respect of cancer is no doubt attributable to the small number of people there who are at an age when they are likely to suffer from the disease. The number of deaths in individual wards is, however, so low as to make comparison between wards unjustifiable.

The Public Health Committee continue to pay an annual contribution of £250 to the Birmingham Branch of the British Empire Cancer Campaign in support of their work on cancer research.

In 1934 a legacy of £1,000 was left to the City Council by the late J. R. Turner for cancer research work. It was decided to pay the legacy to the British Empire Cancer Campaign (Birmingham Branch) over a period of three years for research work in connection with cancer of the lungs.

-

DISEASES OF THE HEART AND BLOOD VESSELS.

There were 3,242 deaths from these diseases as compared with 3,126 in 1934. The death-rates during the past ten years have been as follows :----

			Birmingham.	England and Wales.
1926	 	 	2.12	2.21
1927	 	 	2.28	2.52
1928	 	 	2.41	2.69
1929	 	 	2.76	3.06
1930	 	 	2.57	2.83
1931	 	 	2.90	3.14
1932	 	 	2.73	3.18
1933	 	 	2.94	3.30
1984	 	 	3.04	3.33
1935	 	 	3.14	

The death-rates in Birmingham are somewhat below those in England and Wales.

The age distribution of the deaths in 1935 was as follows :---

Under 1 weer				9	0.90/
Under 1 year	4.2.8		 1.1.1	U	0.3%
1 and under 2			 	1	0.0%
2 ,, 5			 	3	0.1%
5 ,, 15			 	8	0.1%
15 ,, 25			 	24	0.7%
$\begin{array}{cccccccccccccccccccccccccccccccccccc$			 	119	8.7%
45 ,, 65		***	 	865	26.7%
65 ,, 75			 	1,059	32.7%
75 and over			 	1,159	35.7%

DEATH-RATES FROM DISEASES OF HEART AND BLOOD VESSELS.

	Ward.				Death-rate. 1935.
	St. Paul's				3.49
	St. Mary's				3.63
	Duddeston and Neche	11.0			2.83
Central Wards	✓ St. Bartholomew's	115			3.62 Average 3.62
Central Warus	St. Martin's and Der	itend			4.13
	Market Hall				4.11
	Ladywood				3.55
					8.72
	Lozells				100 - 200 - 1
Middle Ring	Aston Washwood Heath				4.08
					2.53 3.17
	Saltley Small Heath				3.46
	1				
	Sparkbrook Balsall Heath	***			Trart
					3.80 3.84
	Edgbaston Deutee Bask				- 3.98
	Rotton Park All Saints	***			3.87
		***	***		
	(Soho	***	***		8.14
	Sandwell				8.43
	Handsworth				4.07
	Perry Barr				0.95
	Erdington	••			2.42
	Gravelly Hill	***			2.88
	Bromford				2.10
Outer Ring	Stechford		***		1.96 2.25 Average 2.56
	{ Yardley				m.m. h
	Acocks Green				2.04
	Hall Green				1.63
	Sparkhill				3.52
	Moseley and King's H	leath			3.85
	Selly Oak		***	***	3.00
	King's Norton				2.90
	Northfield			***	1.42
	L Harborne	***			1.95 J

BRONCHITIS, PNEUMONIA AND OTHER RESPIRATORY DISEASES.

The mortality from these diseases varies greatly from year to year, being influenced markedly by weather conditions and by the prevalence of such diseases as influenza, measles or whooping-cough. In 1935 the mortality was comparatively low.

The mortality in recent years has been as follows :---

		Birmingham.	England and Wales.
1926	 	 1.88	1.74
1927	 	 1.89	1.93
1928	 	 1.56	1.51
1929	 	 2.26	2.10
1930	 	 1.32	1.30
1931	 	 1.61	1.60
1932	 	 1.47	1.36
1933	 	 1.32	1.39
1934	 	 1.26	1.24
1935	 	 1.09	

Unlike heart disease, respiratory diseases generally cause a somewhat higher mortality in Birmingham than in England and Wales as a whole. A considerable part of the mortality occurs in early life, the deaths last year being distributed as follows :--

Ur	nder 1 year			 	148	or	13.2%
	and under 2	years		 	40	,,	3.6%
2	,, 5			 	22	,,	2.0%
5	,, 15			 	15	,,	1.3%
$ \begin{array}{r} 15 \\ 25 \\ 45 \end{array} $,, 25			 	24	,,	2.1%
25	,, 45			 	126	,,	11.2%
45	,, 65		•••	 	320	,,	28.4%
65	,,, 75	<u>!</u>	••••	 ***	215	,,	19.1%
75	and over			 •••	215	**	19.1%
7411	Ages			 	1,125		

DEATH-RATE PER 1,000 FROM RESPIRATORY DISEASES.

					I	Death-rate
	Ward.					1935.
	St. Paul's					1.87
	St. Mary's					1.52
	Duddeston and	Nechells				1.48
Central Wards		v's				1.66 \Average 1.48
	St. Martin's &	Deriter	b			1.43
	Market Hall					1.28
	Ladywood					1.60
	Lozells					0.78 5
	Aston					1.04
	Washwood Hea	th		***		0.72
	Saltley			***		0.78
Middle Ring	Small Heath					1.08 Average 1.01
	Sparkbrook					1.66
	Balsall Heath	***			***	1.06
	Edgbaston		***		***	0.92
	Rotton Park			***		1.15
	CAll Saints'	***	***	***		1.35 J

	Ward.				Death-rate 1935.
	(Soho			 	1.51
	Sandwell			 	0.69
	Handsworth			 	1.51
	Perry Barr			 	0.74
	Erdington			 	0.85
	Gravelly Hill			 	0.79
	Bromford			 	1.07
	Stechford			 	0.98
Outer Ring	↓ Yardley			 	0.81 Average 0.96
	Acocks Green			 	1.06
	Hall Green			 	0.69
	Sparkhill			 	1.07
	Moseley and Kin	g's H	eath		0.95
	Selly Oak			 	1.07
	King's Norton			 	1.00
	Northfield			 	0.68
	L Harborne			 	0.88 J

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It will be seen that respiratory diseases are much more common as a cause of death in the Central Wards than elsewhere.

The highest death-rate was 1.66 per 1,000 in St. Bartholomew's ward; the lowest, 0.68 in Northfield.

II. GENERAL PROVISION OF HEALTH SERVICES.

PUBLIC HEALTH OFFICERS.

General.				
Medical Officer of Health				1
Secretary				ĩ
Medical Staff, whole-time, for general purpose				2
General Clerical and Financial Staff				50
Sanitary Department.				-
Staff of Sanitary Inspectors				76
Disinfectors, etc				10
Cleansing Staff	111			6
Clerical Staff			***	10
Maternity and Child Welfare Department.				
Medical Staff (whole-time)				16
Medical Staff (part-time)				20
Health Visitors, etc				108
Instructors				5
Caretakers and Cleaners				36
Porters and Gardeners		· · · ·		14
Nursing Staff (Hospitals & Homes)				105
Domestic and Laundry Staff				64
Clerical Staff				8
Others				5
Tuberculosis Department.				0
Medical Staff			***	9
Nursing Staff (Sanatoria)	***		••••	117
Domestic Staff	***		***	71
Porters, Gardeners, Stokers, Drivers			***	53
Tuberculosis Visitors and Dispensary Nurses		***	***	19
Clerical Staff		***	***	15 9
Others		***		U
Infectious Diseases Hospital				
Medical Staff				6
Nursing Staff				169
Domestic Staff				65
Porters, Gardeners, Stokers, Drivers				58
Others				13
General Hospitals and Convalescent Homes.				
Medical Staff				36
Number Stoff				808
Demant's Ctoff	***			345
Portars Casdonars Stalions Drivers		***	***	173
Clarical Staff	***			46
Workman				58
Others				48
			***	10
Works Department.				
Manager, Workmen and Clerks				70
Bacteriological Department.				
Madical Staff				2
Assistants and Staff	***			14
Analytical Department.				1
City Analyst and Deputy				2
Assistants and Staff				4
Public Vaccination.				
Public Vaccinators (part-time)				21
Vaccination Officers (whole-time)				6
(more time) in	1020		1000	

Inspection of Cowsheds and Dairies and of meat and other foods is carried out by the Veterinary Department on behalf of the Public Health Committee.

CONSULTATION WITH VOLUNTARY HOSPITALS.

There has not been occasion during the year for formal consultation with the representatives of the Voluntary Hospitals under the terms of the Local Government Act, 1929. On a number of occasions the appropriate officers of Voluntary Hospitals have been consulted on matters of mutual interest or concern.

POOR LAW MEDICAL OUT-RELIEF.

The Public Assistance Committee in March, 1984, decided that, having regard to the changed conditions in the outskirts of the City, there was a great need for a revision of the Medical Relief Districts, and that when the Out Relief Districts were also revised, an opportunity should be taken to deal with the matter on the basis of Municipal Ward boundaries.

A scheme was presented to the Public Assistance Committee in December, 1985, recommending that the 17 Medical Relief Districts, which bore no relation to the Municipal Wards or the Out Relief districts, should be altered so that the boundaries of the Out Relief districts and Medical Relief districts should as far as possible be co-terminous with the Municipal Ward boundaries. It was found that the large Municipal Housing Estates developed in various parts of the City, together with the area in the Castle Bromwich and Sheldon localities (which were added to the City by the operation of the Birmingham-Sutton Coldfield Order) had had the effect of considerably increasing the population of what were at one time sparsely populated districts. The Committee therefore decided to revise the districts on a Municipal Ward basis, and to allocate one or more of the wards as nearly as possible to the present area in order that the services of the Present District Medical Officers could be conveniently utilised. It was found that the 34 wards of the City being responsible for 14 of the wards. Five districts were composed of two wards, and 10 districts of one ward only.

INSTITUTIONAL PROVISION FOR THE CARE OF MENTAL DEFECTIVES.

No new accommodation was provided during the year.

NURSING IN THE HOME.

The following cases were nursed at home during the year by the District Nursing Societies on behalf of the Public Health Department :---

Measles			 	 	 69
Measles with Pneu	monia		 	 	 25
Whooping Cough			 	 	 7
Whooping Cough			 	 	 9
Whooping Cough	with Me	asles	 	 	 1
Chickenpox			 ***	 	 1
Pneumonia			 	 	 787
Puerperal Pyrexia			 	 	 12
					911

The amount paid to the Societies on account of this work was £911.

Cases of Ophthalmia Neonatorum and other forms of ophthalmia are visited in their homes, as far as necessary, by nurses from the Eye Hospital, a grant of £400 per annum being paid to the hospital in respect of this service, together with travelling expenses.

MIDWIVES. (See page 145).

BACTERIOLOGICAL LABORATORY.

The work done at the City Bacteriological Laboratory is set out in the statement below :---

Diphtheria Swabs-				
(a) For Practitioners		 	 	 5,910
(b) For Fever Hospitals		 	 	 9,933
(c) For virulence test		 	 	 2,659
Fæces		 	 	 969
Haemolytic Tests		 	 	 2,313
Milk		 	 	 572
Milk for Tuberculosis		 	 	 1,873
Shell Fish		 	 	 101
Sputum for Tuberculosis		 	 	 2,427
Vaccines		 	 	 14
Venereal Diseases-				
Blood for Wassermann Rea	ction	 	 	 13,197
Cerebro-Spinal Fluid-				
(a) For Wassermann Re	action	 	 	 563
(b) For Cell Count		 	 	 102
Films for Gonorrhœa		 	 	 10,678
Gonococcal Fixation Test		 	 	 3,684
Serum for Spirochætes		 	 	 8
Urine Examinations-				
(a) Microscopic		 	 	 16
(b) Chemical		 	 	 584
Cultures prepared		 	 	 9,616
Vaccines prepared		 	 	 347
Van den Bergh's Test		 	 	 3,769
Water samples		 	 	 699
Widal's Reaction		 	 	 1,120
Sigma reaction		 	 	 150
Miscellaneous		 	 	 6,371
				Total 77 675

Total 77,675

ANALYTICAL LABORATORY.

The following statement indicates the samples analysed in the City Analyst's Department :---

					1934.	1935.
Food and drug samples				 	5,383	5,464
Soot gauge samples				 	24	24
Fertilisers and feeding stu	iffs			 	23	22
Miscellaneous samples				 	985	731
					6,415	6,241
Food and Drugs Acts- Samples adulterated with	prese	rvative:	s only	 	2	4
Samples adulterated in oth			····		264	218
Unmarked or improperly i				 	2	
False labels		17. SOUTH 7		 	18	12
Number of vendors of inco		samale		 	175	151
Number of prosecutions	Arece			 	15	15
Number of fines				 	15	9
Amount of fines and costs				 		£43/11/3
Number of cautions				 	150	163

Particulars relating to this work are given in the Report of the City Analyst.

NEW LEGISLATION IN FORCE.

The following Acts of Parliament came into force during the year, and were delegated by the City Council to the Public Health and Maternity and Child Welfare Committee :---

Birmingham Corporation Act, 1935.

Sections 39 and 41.

Part VI (except sections 52 and 53).

Section 105 (jointly with other committees of the Council).

Housing Act, 1935.

Sections 1, 2 and 4 (jointly with Estates and Public Works and Town Planning Committees). Sections 3, 5, 6 and 10. Section 55. Section 68. Section 82 (in conjunction with Estates Committee).

HOSPITALS.

No material alteration took place during the year in the amount and character of the hospital accommodation available.

The part which the hospitals—voluntary and municipal—play in the treatment of sickness may be inferred in some degree from the fact that last year 5,733 deaths out of a total 11,233 occurred in hospitals and kindred institutions. Details of these deaths are as follows :—

Dudley Road Hospital							 1,066
Selly Oak Hospital						***	 611
Selly Oak Infirmary							 629
General Hospital							 409
Queen's Hospital							 246
Children's Hospital							 199
Women's Hospital and	Taylor	Home					 78
Maternity Hospital							 87
City Fever Hospitals, B	abies H	lospital	and I	Matern	ity Ho	mes	 330
City Mental Hospitals							 178
City Sanatoria							 259
Western House							 775
Erdington House							 374
Private Hospitals							 198
Institutions outside the	City						 294

The extent to which hospitals are used for particular diseases can in some degree be estimated from the statement below :---

						1	vo, of Deaths,	Percentage of Total Deaths from this cause
Measles							41	79%
Whooping Cough							43	65%
Diphtheria							75	89%
Influenza							15	10%
Tuberculosis of Re	espirat	tory S	ystem				850	48%
Other forms of Tr							63	74%
Cancer					***		710	45%
Diseases of Nervo	us Sys	stem, e	etc.,				394	53%
Diseases of Heart :				stem			1,317	41%
Bronchitis							71	26%
Pneumonia							456	62%
Other Respiratory	Disea	ses					53	45%
Diseases of Diges	tive S	ystem					491	76%
Genito-urinary Sys							280	59%
Premature Birth,							414	71%
Old Age							55	29%
Violence							319	57%
Other causes							586 .	63 %
						-		

Total 5,733

51%

CO-OPERATION WITH VOLUNTARY HOSPITALS.

There is a large degree of co-operation between the Public Health Department and the Voluntary Hospitals, and grants are paid by the Public Health and Maternity and Child Welfare Committee to certain hospitals in respect of the activities named below :---

(1) Under the Venereal Diseases Scheme patients are treated at special clinics at the General Hospital and the Children's Hospital.

(2) Cases of Bone Tuberculosis are treated at the Royal Cripples' Hospital and to a smaller extent at a number of other institutions.

(3) Puerperal Fever cases are admitted to the Women's Hospital and difficult cases of confinement to the Maternity Hospital.

(4) For Out-patient Orthopaedic cases under 5 years of age the Royal Cripples' Hospital receives a per capita fee.

(5) Cases of tonsils and adenoids and of eye and ear defects discovered at the Maternity and Child Welfare Centres are referred to the Children's Hospital for operation or treatment.

(6) Cases of ophthalmia neonatorum are sent to the Eye Hospital, for out-patient or inpatient treatment as may be appropriate, while home visiting of cases is carried out by nurses on the Hospital staff.

CITY GENERAL HOSPITALS.

The statistics relating to the work of Dudley Road and Selly Oak Hospitals and Selly Oak Infirmary are given below :--

(a) IN-PATIENTS.

		Dudley Road Hospital	Selly Oak Hospital	Selly Oak Infirmary
Total number of admissions (including infants born in hospita	1)	13,901	9,940	2,828
Number of women confined in hospital		1,085	671	-
Number of live births		1,030	644	-
Number of stillbirths		58	40	-
Number of deaths among the newly born (under 4 weeks)		60	35	-
Number of maternal deaths (confined in hospital)		7	6	
Total number of deaths		1,173	624	658
Total number of discharges (including infants born in hospital)	12,723	9,321	2,136

(b) OUT-PATIENTS.

Number of persons seen in out-patient department	 	34,895		Run in con-
Total number of attendances	 	139,709	76,242	junction with
Number of women seen at ante-natal clinic	 	861		Selly Oak
Total attendances	 	2,497	2,527	Hospital

(c) CLASSIFIC	ATION OF IN	-PATIENTS I	DISCHARGED	OR D	IED.
---------------	-------------	-------------	------------	------	------

					Dudley Road Hospital	Selly Oak Hospital	Selly Oak Infirmary
(<i>a</i>)	Acute infectious diseases				277	19	11
(b)	Influenza				85	21	0
(c)	Tuberculosis :						
	Pulmonary			*****	103	35	7
	Non-pulmonary				56	31	15
(<i>d</i>)	Malignant disease				436	201	188
(e)	Rheumatism :						
	(1) Acute rheumatism (rheumatic fever)	, toge	ther v	with			
	sub-acute rheumatism and chorea				496	163	27
	(2) Non-articular manifestations of so-ca	lled '	' rheu	ma-			
	tism " (muscular rheumatism, fibro	sitis,	lumb	ago,			
	and sciatica)		*****		59	22	7
	(3) Chronic arthritis			****	48	60	40
()	Venereal disease				39	4	5
(g)	Puerperal pyrexia			*****	25	11	-
(h)	Puerperal fever				21	4	_
<i>(i)</i>	Other diseases and accidents connected wi	th chi	ld-bea	ring	843	408	_
(j)	Mental diseases				46	2	12
(k)	Senile decay				7	11	59
(1)	Violence		*****		1,717	1,110	90
respe	ct of cases not included above :						
(m)	Diseases of the nervous system and sense	e orga	ns		290	271	261
(n)	,, ,, respiratory system				1,696	821	532
(0)	,, ,, circulatory ,,		*****		556	468	301
(<i>p</i>)	,, ,, digestive ,,				2,920	2,825	504
(q)	,, ,, genito-urinary				971	790	86
(r)	chin				518	403	121
(5)	Other diseases				589	928	403
(1)	Maternity sees (methers and habies)				2,098	1,308	66
(11)	Any persons not falling under above head				_	29	59

DUDLEY ROAD HOSPITAL.

In

Report by the Medical Superintendent, DR. F. W. ELLIS.

During the past year the number of occupied beds in the Hospital has shewn the usual wide oscillations at frequent intervals, a characteristic which is very largely independent of the time of the year and which is the most marked feature of the admission chart.

Owing to the withdrawal of cases from Smethwick which began in the Summer with the provision of St. Chad's Hospital for the Sick Poor of that town, there was an unusual fall in the numbers in July which on the 27th fell to 657, a number lower than any recorded for a number of years.

The numbers remained below 700 until September 11th, a period of "low pressure" which has not been equalled for many years.

During the last quarter of the year, however, cases from Handsworth area, which had been treated at Hallam Hospital, West Bromwich, were admitted to Dudley Road Hospital and the numbers quickly resumed their usual level, the cases from Handsworth approximately balancing those from Smethwick.

The reduction in the admissions from Smethwick, however, which took place before the last quarter of the year, was instrumental in reducing the number of admissions during the year, which were 13,901 as against 14,479 in 1934 and 13,520 in 1933.

The highest number of occupied beds was 899 on April 19th, that month being notable all through for the very high percentage of occupied beds, maintained only by a large number of extras in all wards.

The month with the greatest number of admissions was March with 1,419.

In spite of a lesser number of admissions there has been a definite increase in many of the Departments, thus in the Radiographic Department the number of individual cases was 8,955 as against 8,257 last year, while the number of radiographs taken rose to 19,379 as against 17,405. The Deep Therapy Department showed an advance in the number of cases, 491 as against 272 and the number of irradiations 2,114 as against 1,845. The number of examinations in the Pathological Department, 13,093, showed a slight fall. The Bio-chemical Department, however, with an examination of 11,649 specimens showed a slight increase.

One of the most serious difficulties in the administration of the Hospital during the year has been the inability to find accommodation for the Chronic Sick in the Birmingham Infirmary. The work in the Infirmary became very heavy in the latter part of the year, more especially on the female side, where the number of beds available were inadequate to cope with all the cases requiring admission from outside and transfer from the Hospital, and the number of cases suitable for transfer but for whom no bed could be found became greater than in any previous year. For some years now, the number of such transfers has become less and less, but this year the difficulties were very definitely greater than ever before and there can be no doubt that the overcrowding in the wards, which was considerable at times, would have lessened in the winter months if all the Infirmary cases could have been removed.

The temporary appointment of Physician which had become imperative the previous year was made permanent and W. F. Gaisford, M.D., M.R.C.P., was appointed to the office, taking up his duties on April 1st, 1935.

During the year the work in some of the wards was interrupted by falls of the ceilings and wards B.9, C.4, and A.5 were evacuated while the ceilings were taken down and remade.

Ward B.9, which was intended to be reserved for part of the temporary Maternity accommodation during the building of the new Maternity Block, had to be re-occupied by general cases on account of the pressure on the general accommodation caused by the faulty wards being occupied by builders.

The enlargement of the Nurses Home by an extension of the two North wings for Nurses and on the South aspect for Sisters was begun on November 11th.

SELLY OAK HOSPITAL.

Report of the Medical Superintendent, MR. R. P. STANLEY KELMAN, F.R.C.S.

The year 1935 has been an anxious one, owing to the steady increase in the degree of overcrowding with consequent ward infection. A position has now been reached where, with the existing facilities, it is impossible to cope both with the incoming admissions and the ever growing out-patient waiting lists. The finding of beds for new admissions has been a continuous anxiety leading to constant re-arrangement of patients with, unfortunately, inconvenience to them. Without the co-operation and team work of the Medical and Nursing Staffs the difficulties would have been much greater. I must repeat that ward overcrowding means inability for treatments prescribed to be carried out completely, cross infection, and undue strain and worry to the Medical and Nursing Staffs. Fortunately there have been no unusual epidemics throughout the year. The average duration of stay of patients has been reduced still further to 17.88 days. The total annual admissions were 9,940 and everything points to this figure being still higher for 1936, which will mean a still further reduction in the average duration of stay. This will be in my opinion detrimental to the patients. There is now no margin whatever in the existing accommodation to cope with any unforeseen epidemics. The absence of proper barrier wards and the impossibility of segregating the ear, nose and throat cases, which are frequently of a dangerously infectious nature, have been the greatest causes of ward infection. Ward infection means not only increased risk to the patients, but also a loss in the number of effective beds available at the time. As with last year, owing to the impossibility of releasing a ward, no ward decorations have been carried out.

During the year the usual clinical meetings have been held by the Medical Staff and have led to many interesting and valuable discussions. The Pathological and Clinical Section of the British Medical Association Meeting held at Selly Oak Hospital was well attended. The following figures show briefly the work of some of the special departments :---

Pathological Departm	ient.				
	Examinations		 		15,369
	Autopsies		 		478
	Biological examina	tions	 *****		357
Biochemical Departm	ient.				
	Examinations	*****	 		5,365
Radiological Departm	ient.				
	Cases screened		 		1,502
	Cases radiographed		 	*****	15,650
Massage and Electro	Therapeutic Departn	ient.			
	Cases		 		5,208
Dental Department.					
	Attendances	*****	 		1,940

The classification of the wards remains as follows, but, owing to the pressure on the accommodation, has not been strictly adhered to :---

> General Medical Wards. General Surgical Wards. General Children's Wards. Male Urological Ward. Fracture Wards. Gynaecological Ward. Ear, Nose and Throat Wards. Maternity Department. Staff Sick Bay.

SELLY OAK INFIRMARY.

Report of the Medical Superintendent, MR. R. P. STANLEY KELMAN, F.R.C.S.

The Infirmary has worked steadily throughout the year and the following figures show briefly the work done :—

Total admissions	 *****		2,828 (a record figure)
Average daily occupied beds	 		659
Highest number of occupied beds in any one day	 		708
Lowest number of occupied beds in any one day	 	*****	610

The complete co-operation existing between the Hospital and the Infirmary has been the only way in which beds have been made available to deal with peak periods during the year. The main difficulties that have arisen in the Infirmary during the year have been in connection with maintaining the Nursing Staff always at full strength owing to the fact that the majority of the nursing staff are still non-resident.

GENERAL CONVALESCENT HOMES.

Wassell Grove Convalescent Home for Women and Children.

The Home has been open during the whole of the year, the number of admissions being approximately the same as last year. The actual numbers were 677 of which number 144 were Out Relief cases. From Dudley Road Hospital there were 263 women and children, and from Selly Oak Hospital 239; 4 cases were referred back to their Hospital for further treatment. The remainder were discharged improved or fit for work. The daily average number during the year was 33, the lowest daily average being 23 for the month of December.

Tower House Convalescent Home for Nurses.

The interest of the Nurses in this institution has been well maintained during this year and the number who have convalesced and who have taken advantage of its amenities for week-ends, etc., has been very satisfactory.

"Oaklands" Convalescent Home for Men and Boys.

The admission of men and boys for the year totalled 589. The main diseases for which treatment was continued at the Home were as follows :----

Pneumonia				 149
Rheumatic condition	s		***	 103
Debility, general				 92
Debility, post operat	live			 16
Gastric and Duodena	al ulce	rs		 71
Bronchitis				 51
Cardiac conditions				 24
Empyema				 23
Appendicectomy				 23
Neurasthenia				 17
Lumbago				 12
Sciatica				 8

MATERNITY AND NURSING HOMES.

(See pages 137, 147).

UNMARRIED MOTHERS AND ILLEGITIMATE CHILDREN.

(See page 143).

MATERNAL MORTALITY.

(See page 118).

HEALTH VISITING.

(See page 123).

CHILDREN ACT, 1908, CHILDREN AND YOUNG PERSONS ACTS 1932 AND 1933.

(See page 144).

BLIND PERSONS ACT, 1920.

The City Council are responsible for the administration of the Blind Persons Act, 1920, and have made arrangements with the Birmingham Royal Institution for the Blind for the following services to be provided on their behalf:

(1) Workshop employees.

At the end of the year under review there were 187 workshop employees registered. The trades practised are, for men—basket making, brush making, bedding, cane furniture, chair seating, etc. For women—hand knitting, round and flat machine knitting, chair seating, etc. Although the weekly pay of these employees is at the Trade Union or other standard rate customary in the particular class of work on which the blind person is employed, the handicap of blindness prevents most blind persons from earning a livelihood if they are paid only what they earn on a strictly commercial basis. It is necessary, therefore, to augment their earnings and during 1935-6 the City Council paid £11,083 for that purpose.

(2) Home Workers.

There are 23 of these workers registered. Their ages vary from about 20 to 70 years, and the occupations carried out are similar to those of the workshop employees, plus such work as wood-chopping, piano tuning and repairing, music teaching, netting, boot repairing, etc.

Each home worker is provided with the requisite tools and equipment for his particular trade, and where necessary worksheds are provided. Raw materials are supplied at cost price, and every assistance is given in helping him to dispose of his goods. Augmentation of earnings is provided for the home worker, and the amount paid by the City Council for this purpose was £1,186.

(3) Unemployables.

These constitute the largest category of the blind, and 1,124 were registered in 1935. The needs of these persons are two-fold—financial and social. Financial assistance is provided by the Local Authority making up their income to 25/- per week. The cost to the Corporation of this service was £19,890. As regards social assistance, the pivot of this service is the Home Teacher, whose duties include the teaching of Braille and Moon type, pastime occupation, home visiting and welfare work. The aim of the service is to secure that systematic home visiting should be provided for all blind persons needing it.

Cowley Home.

This Home provides accommodation for some 12 homeless blind women. The contribution to the cost by the Local Authority for 1935-6 was $\pounds 470$.

Other responsibilities in relation to the welfare of the blind undertaken by the City Council include such matters as the maintenance of blind children at Sunshine Home. The contribution to the cost by the Local Authority for 1935-6 was £128.

The total contribution for all the blind services for 1935-36 was £36,554.

The following table gives particulars relating to *all* blind persons resident in Birmingham, including those mentioned above as coming within the scope of the Public Health Committee's responsibilities.

					Males.	Females.	Total.
Babies in Sunshine Home					 4	1	5
Babies at home					 4		4
Babies in Public Assistance Instit	tutions				 4	1	5
Children at School-Resident					 9	12	21
Children at School-Day					 6	9	15
Children of school age at home					 2	3	5
Children of school age in Public .					 6	3	9
Children of school age in Public	Health	Depar	tment	Hospit	1	1	2
Adults in training-Resident					 7	5	12
Adults in training—Day					 12	7	19
Adults awaiting training					 5		5
Workshop workers recognised					129	58	187
Out the transferrer					 13	8	21
m 1 1 1					 15	8	23
					 419	571	990
Unemployables at home	an Inest	tutione.			 36	53	89
Unemployables in Public Assistant				ale	 9	22	31
Unemployables in Public Health			riospin		 9	12	12
Unemployables in Cowley Home					 2	12	2
Unemployables in Men's Hostel				***	 2		2
					683	774	1,457

REMOVAL OF INFIRM AND AGED PERSONS.

During 1935, 25 cases were investigated under Section 38 of the Birmingham Corporation (General Powers) Act, 1929, as compared with 33 and 38 in 1934 and 1933 respectively. The majority of the cases were admitted to an institution, while of the remainder some were found unsuitable for removal and others failed to fulfil the required conditions. In no case was an application to the Magistrates for an order for removal found necessary during the year.

Additional powers for dealing with cases of this nature have been given by Section 48 of the Birmingham Corporation Act, 1935, but no appropriate case arose during the year.

III. SANITARY CIRCUMSTANCES.

WATER SUPPLY.

I am informed by Mr. Broadley, Secretary to the Water Department that the extension of the third line of 60in. pipes on the Elan Aqueduct has been carried on steadily throughout the year.

The flow of water into Bartley and Frankley Reservoirs from the Elan Aqueduct has been maintained at a quantity equal to a little more than the average rate of demand.

New electrical pumping plant has been installed at Longbridge and Short Heath Stations, and these two standby sources of supply are available for use when required. There has been very little need for the utilisation of the local well supplies, but Longbridge, Aston and Short Heath have been used on a few occasions during the year when special circumstances arose in connection with the distribution of water in the areas concerned.

At the Whitacre Pumping Station, where a regular bulk supply of 2 m.g.d. is afforded to Coventry, a triple expansion steam engine has been installed, together with a standby steam turbine and the necessary boiler equipment. This new plant is now in use for pumping the water to Coventry.

No particular difficulties in connection with the supply of water in the statutory area have been experienced. The quality of the water has been excellent and the supply ample for all purposes.

At the Whitacre Pumping Station chlorination of the water was adopted in the autumn on the suggestion of the Medical Officer of Health, consequent on the difficulty of maintaining the sand filters in a satisfactory condition in view of the abnormal algal growth in the Shustoke Reservoir and on the filters themselves. This trouble has now been overcome.

WELLS.

At the beginning of 1985 a survey was made of the whole of the City and a further 50 wells were charted, principally in that area of east Birmingham which has lately been annexed to the City.

During the year samples were taken from 75 shallow wells for bacteriological and chemical examination, and upon a number of these proving unsatisfactory the owners were approached, either informally or by invoking Section 62 of the Public Health Act, 1875, with the result that in most cases the dwellinghouses have now been provided with a supply of water from the Corporation mains, while in a few instances steps have been taken to cleanse and repair the wells with a view to improving the condition of the supply.

As a result, partly of action by this Department and partly of independent action by owners, some eighty houses previously supplied by shallow wells are now taking a supply of water from the mains. It is satisfactory to note that with the development of housing estates in the outer parts of the City it is becoming possible to afford a supply of Corporation water to an increasing number of hitherto isolated properties at a reasonable cost.

There now remain 355 dwellings obtaining their water supply from wells.

RIVERS AND STREAMS.

The annual report of the Tame Basin Joint Committee indicates that a number of important schemes of sewage disposal have been brought into effect, greatly improving the head waters of the River Tame.

Emphasis is laid on the analyses of oxygen saturation at Castle Bromwich where the River Tame has received all the drainage of the Upper Tame area and most of the drainage from Birmingham. The observations rather confirm the opinion that the condition of the River Tame generally is not due to the uncontrolled discharge of sewage and trade effluent, but to the decomposition of the material deposited in the channel of the stream by storm water.

SEWERAGE.

The City Engineer and Surveyor informs me that new sewers were constructed during the year 1935 with a total mileage of 64.05 miles.

The principal sewerage schemes completed during the year include the following :---

Handsworth Wood Sewerage, Section 2, undertaken to provide for house building development in the area, to abolish dumbwells and to relieve flooding in Handsworth Wood Road.

Kings Heath Sewerage. New foul and surface water sewers provided to relieve serious flooding in the area of Kings Heath adjoining Vicarage Road and All Saints Road.

Stechford Lane, Washwood Heath. New sewers provided to relieve flooding.

Perry Barr Sewerage, Section 4. This was an extension of valley sewers to provide for house building development in a further area of Perry Barr near Aldridge Road.

The following schemes were commenced in 1935 and are now in hand :---

Quinton Sewerage, Section I, Part 1. This scheme provides for the reconstruction of the main valley sewer and the provision of sewers in various roads to take the present building developments.

Sheldon Sewerage. This is a large scheme providing for the drainage of the Sheldon area and to do away with numerous dumbwells on existing property.

With regard to the work authorised by the Birmingham Corporation (Rivers Improvement) Act, 1929, the section of the River Rea between Lawley Street and Moseley Street is now being deepened and improved under Contract 3, River Rea Improvement.

The contract for the enlargement of the first section of the Rea Main Sewer from Lawley Street to MacDonald Street is well in hand.

			r, 1935.	F. W. Sewers. Lin. Yds.	S. W. Sewers, Lin Yds,
				9,390	4,816
				9,401	13,324
				4,709	800
prise	A.L.			31,024	36,926
, to dra	ain Mai	rston G	ireen	1,110	1,239
				55,634	57,105
	N	files		31.61	32.44
	N	files		64.05	The second
	prise , to dra	r prise , to drain Mai	r prise , to drain Marston G	r	Lin. Yds. 9,390 9,401 4,709 prise

CLOSET ACCOMMODATION AND SCAVENGING AND REFUSE DISPOSAL.

I am indebted to Mr. Codling, General Manager of the Salvage Department, for the following information.

PROVISION OF DUSTBINS.

The Corporation possesses legal powers to require the installation of dustbins at all properties throughout the city, for the temporary storage of refuse pending its removal.

With the exception of comparatively few old properties at which dry ashpits are in use, dustbins are used for refuse storage throughout the city.

The Salvage Department operates a voluntary dustbin hire scheme, introduced twelve years ago, and this scheme continues to receive the support of property owners. At December 31st,1935, 9,870 owners had entered the scheme, for the hire of 93,172 dustbins.

COLLECTION OF REFUSE.

Electrically propelled vehicles have proved themselves eminently suitable for the collection of house refuse in Birmingham, and the Salvage Department operates a fleet of 144 of these vehicles, which is the largest number of this type operated by any municipality in the country. During the year the Department purchased ten new electric vehicles.

Vehicles purchased for some years past have been provided with special bodies designed to prevent the dissemination of dust during loading operations, and in December of 1935 two rearloading vehicles, fitted with rubber moving floors, were put into operation. The use of these two vehicles will enable the Department to obtain experience in order to determine whether the moving floor vehicle possesses advantages, either from hygienic or economic standpoints, over the normal side loading type of tipping vehicle.

DISPOSAL OF REFUSE.

Practically the whole of the house and trade refuse produced in the city is now dealt with by means of separation and incineration at the five salvage and refuse disposal works of the Department.

The refuse from various city markets is also dealt with at the main works of the Department at Montague Street, where an efficient organic plant is installed for the purpose. The material dealt with at this plant includes condemned meat, fish, offal, vegetable refuse, etc., and the refuse treated is converted into fats, feeding meals, fertilisers, etc.

CESSPOOLS.

At December 31st, 1935, there were 631 cesspools in the city, serving 1,292 premises, receiving regular attention. During the year 44 cesspools were abolished, and 49, serving premises in the outlying districts, have been constructed. Practically all these cesspools are situated on the outskirts of the city, and schemes for the construction of sewers have been approved by the City Council, which when completed will result in a large reduction of the number of cesspools in use.

SANITARY PANS.

The Department is regularly emptying 487 sanitary pans, none of these being attached to premises in the populous areas of the city.

PRIVY MIDDENS.

There are 156 privy middens in the city receiving regular attention, and during the year six of these receptacles were demolished.

SWIMMING BATHS AND POOLS.

I am informed by Mr. R. Hoggins, Chief Engineer to the Baths Department, that the following baths are maintained by the emptying and refilling process:--

Open-air Baths.

Cannon Hill Park Victoria Park (Small Heath).

Covered Baths.

Northwood Street Monument Road Tiverton Road

With the above exceptions where the emptying and refilling process operates in conjunction with the use of chlorine, the water of the remaining swimming baths, totalling 20, is maintained by mechanical filtration and sterilised by chlorine or chloramine.

SANITARY INSPECTION.

The work of the general sanitary inspectors has been carried on steadily and vigorously throughout the year, and the following statement indicates the main headings under which visits were paid:---

For systematic house inspe	ction				 		39,902
For housing complaints				***	 	***	53,250
For infectious diseases					 		10,312
For inspection of courts					 		3,566
For inspection of manure re	ceptac	les			 		1,236
For inspection of drainage	(const	ruction	or rep	air)	 		4,420
For drain tests (smoke or w					 		688
To common lodging houses	5				 		256
To houses let in lodgings					 		4,511
To tents, vans and sheds					 		142
To offensive trade premises	5				 		398
To workshops and factories					 		8,494
Under the Rats Order					 		3,339
To ice cream vendors					 		3,115
For miscellaneous complain	ts				 		8,628
To see owners or agents					 		4,213
For other purposes					 		17,346
Unsuccessful visits					 		8,585
Total visits and re-visits							172,401

The total number of dwelling houses inspected was 12,971, of which 3,895 were examined in the course of the systematic house-to-house inspection of selected streets. The remaining houses inspected were largely those in respect of which a complaint had been received. Of the total of 12,971 examined, 11,055 were found to need repairs of some kind. During the year notices were served for the following work to be done :---

Houses to be disinfected								2,181
Repairs to houses								114,764
Houses to be cleansed by owner								3,622
Houses to be cleansed by tenant								49
Houses to have better ventilation								760
Houses to have separate water supply								793
Houses to be provided with damp con	urse							508
Water or filth to be removed from cell								167
								3,514
Water closets to be repaired or re-co								5,589
								1,675
Additional water closets to be provide								48
Weak houses or ashplases to be provide	red or lim					***	***	2,532
Wash houses or ashplaces to be repair		icwas.	neu	***			***	
Soilpipes to be repaired or removed	***				***			187
Defective drains				***			***	1,469
Additional drains needed			***	***	***			708
Sanitary sinks to be provided								863
Sink bend pipes to be repaired								664
Yards to be paved or repaired								1,740
Accumulations of rubbish, manure, et	tc., to be	remo	oved					311

Internal water supply has been provided to 679 houses and 6 wash houses which previously had to rely on a tap in the yard. This work has been carried out under the provisions of the Birmingham Corporation Act, 1929, under which the Corporation bears half the approved cost of the work. The amount expended in this way during 1935 was £1,988 11s. 11d.

Closely connected with an adequate water supply inside the house is the provision of a suitable and efficient sink. Last year 863 sanitary sinks were provided and 664 sinks were put in order. In 3,671 cases the notice related to the cleansing, in 1,280 to the painting, and in 760 to the improvement of ventilation of premises.

A large amount of work was done in improving yards and outbuildings. Notices were issued for 48 additional water closets to be provided, for 1,675 closets to be cleansed and made free from obstruction, and for 5,589 to be repaired. Repairs or additions to the drainage were required in 2,504 cases, and the improvement of wash houses or ashplaces in 2,532 instances.

A staff of 7 men is engaged in cleansing some of the worst courts in the City, together with the water closets and ashplaces situated in them, subject to an agreed charge being paid by the owners of the houses. The total number of cleansings effected during the year was 5,800, over 90 courts being dealt with weekly. In the course of this work a large number of water closets and drain traps were cleared of obstructions.

The total number of notices served during the year was 12,732, of which 8,620 were preliminary informal notices, and 4,112 were statutory notices.

The summonses taken out during the year were as follows :---

General Nuisances				25
Inside Water Supply				1
Houses let in lodgings				7
Excessive Smoke				14
Shops Acts				196
Rent Acts				3
Factory and Workshop	s Act (O	utwork	(ers)	1
Disobeying Magistrate				2
				249

RATS AND MICE.

Throughout the year the provisions of the Rats and Mice Destruction Act have been systematically administered, special attention being paid to the matter during National Rat Week which was observed from November 4th to November 9th.

Rat Week in Birmingham was observed by a general campaign against these pests. About 2,000 handbills were distributed at cafes, food stores, warehouses, corn stores and any other premises where rats were suspected, and the occupiers were requested to make a special effort to exterminate any rats, and to keep a record of their activities.

The following is a summary of the these reports, together with information gathered by the Sanitary Inspectors :---

Premises where Rat Catchers were employ	ed		 	 	 57
Premises where dogs and cats are used			 	 	 90
Premises where other constant action is bei	ing	taken	 	 	 10
Premises "Rat-proofed"			 	 	 43
Premises where drains repaired after test			 	 	 9
Rats known to have been destroyed			 	 	 1,596

In addition, special steps were taken by various large industrial undertakings and Corporation Departments. The London, Midland and Scottish Railway Co., who employ seven rat-catchers, using poison, traps and dogs, trapped 10 rats, killed 2 by dogs and found 20 dead; the Great Western Railway Co. laid 340 baits, of which 120 were taken, 13 dead rats being found. The Salvage Department laid seven different varieties of poison, these baits being taken in 3,781 cases; no count of dead rats was taken, but action is being continued weekly. The Markets and Fairs Department laid 790 baits; 53 rats were killed, 300 baits were taken and 6 rats found dead. The Public Works Department carry on a constant campaign; of the 13,159 baits laid during the year, 79 per cent. were taken and 30 dead rats found; in addition, 2,137 baits were laid during Rat Week. The Birmingham Canal Navigations also took constant action during the year and many baits were taken; no rats were found dead during Rat Week.
FACTORIES AND WORKSHOPS.

The visits paid under the Factory and Workshops Acts numbered 8,494. As a result of these visits notices were served as follows :---

Want of cleanliness					 	 	 474
Want of ventilation					 	 	 21
Overcrowding					 	 	 . 0
Want of drainage of floo	rs				 	 	 1
Other nuisances					 	 	 128
Insufficient sanitary acco	mmodati	on			 	 	 34
Unsuitable or defective s	anitary a	accon	nmoda	tion	 	 	 209
Sanitary accommodation r	not separa	ate fo	or the s	sexes	 	 	 31
Illegal occupation of unde	erground	bake	chouse		 	 	 0

Arrangements are in force co-ordinating the work of the Public Health Department in some directions with that of the office of H.M. Superintending Inspector of Factories for the Midland area. This has related chiefly to insufficient or defective sanitary accommodation, or to the investigation of nuisances arising in factories and affecting neighbouring premises. This form of co-operation has continued to prove of great value, preventing overlapping, duplication of action or on the other hand failure to take action, and at the same time removing risks of misunderstanding between two public departments engaged on closely allied work.

The number of workshops on the register is 2,865 and the visits for inspection paid to them numbered 2,817. In addition to these visits 2,134 were made to factories, 146 to workplaces, 2,577 to food preparation premises and 820 to out-workers premises.

SMOKE ABATEMENT.

The following particulars have been prepared by Mr. G. W. Farquharson, Senior Smoke Inspector :---

The geographical position of the city, the numerous manufacturing and trade processes carried on, and the adaptability of the legislation relating to smoke emissions, are three factors which stand in close relationship when the question of Smoke Abatement is considered.

The geographical position.

Birmingham is built on several hills with the corresponding valleys. The valleys tend to act as reservoirs, and it is here that the combination of domestic and industrial smoke haze is so persistent and regular.

The manufacturing and trade processes.

Known as the city of a thousand trades, Birmingham is essentially an industrial city. Most of the manufacturing and trade processes have some form of heat unit plants, such as boilers, metallurgical furnaces, kilns, ovens, etc., and use coal as fuel, with the result that nearly all of the industrial chimneys within the area are potential smoke producers.

The legislation governing smoke emissions.

The Birmingham Corporation Consolidation Act, 1883, Section 30, and the Birmingham Corporation Act, 1922, Section 79, together with the City of Birmingham Bye-law made under Section 2 of the Public Health (Smoke Abatement) Act, 1926, are the principal enactments used in dealing with excessive smoke emissions.

Industrial Smoke.

Continuous observations are always necessary with steam generators where load and conditions are of a variable nature. A boiler like any other machine is designed for a certain amount of useful work in the form of evaporation, but it must not be overloaded, otherwise considerable smoke nuisance is caused. Several boiler plants in the area have been found to be working under heavy and fluctuating loads. These boilers, when on peak loads, are being forced much beyond their working capacity and the only solution to these difficulties is to reduce the load or increase the boiler plant.

Metallurgical Furnaces.

A large amount of research work has been carried out in order to determine the best practical methods of obviating smoke nuisances caused by metallurgical furnaces without detriment to the material being manufactured, and credit must be given to some of the Birmingham manufacturers who have done pioneer work in this direction and have found a definite solution to the difficulty. Unfortunately there are still a number of these heat treatment furnaces working in the area which are so constructed that they offend every law of combustion, and in their present state, using coal as fuel, it is very difficult for the furnace operators to control the emissions of smoke.

Grit Emissions from Industrial Plants.

The demand for cheap power and the necessity of reducing fuel costs have caused engineers to study the combustion of low grade coal as fuel. To burn a low grade coal efficiently a high draught is necessary and unless certain measures are taken many of the particles of the low grade fuel are carried up the chimney by the velocity of the flue gases, and pass into the atmosphere in the form of grit and gritty particles.

Trade Refuse Burning.

Considerable nuisance has been observed from the indiscrimate burning of trade refuse. It is most essential in the efforts of health and cleanliness that refuse should be disposed of and not allowed to accumulate, but burning should not be carried out to the annoyance and discomfort of people in the immediate vicinity. If refuse must be disposed of by burning, proper and suitable facilities should be provided for the purpose.

The following table sets out particulars of observations on chimneys other than those of private dwelling houses.

	1935	1934	1933	1932	1931
Total number of observations	5,096	5,127	5,784	5,135	5,597
Reports to Public Health Committee o Excessive Smoke Emissions.	n				
From Boiler Plants	104	71	88	77	115
From Boilers and Furnaces	12	8	12	8	11
From Metallurgical Furnaces	28	22	24	29	29
Excessive Grit Emissions	3	[1	- 101	2	1
Total number of excessive emissions	147	102	124	116	156
Number of Prosecutions	14	4	4	6	18
Number of Convictions	14	4	4	6	18

Fourteen Preliminary Notices have been served under the Public Health Act, 1875, and the Public Health (Smoke Abatement) Act, 1926. In two cases it was necessary to serve Statutory Notices, and in one a magistrate's order was obtained before a nuisance of soot emissions from a metallurgical furnace was abated.

OFFENSIVE TRADES.

The offensive trades carried on in the City are as follows :---

Tripe boiler Rag and bone	dealer	 	 	34 21	
Blood boiler		 	 	1	
Bone boiler		 	 	1	
Fellmonger		 	 	2	
Tanner		 	 	1	
Soap boiler		 	 	2	
Fat extractor		 	 	1	•
Gut Scraper		 	 	3	

The number of visits paid to premises where offensive trades were carried on during the year was 398. Eleven preliminary notices and one statutory notice were served and three letters were sent during the year, while certain defects were also remedied on the verbal request of the Inspector. No prosecutions were found to be necessary and the businesses generally were conducted in a satisfactory manner.

Fifteen tripe boilers and three soap boilers ceased business during 1935, and two of the premises were subsequently re-registered for the trade of tripe boiling. One rag and bone dealer was added to the register, while two rag and bone premises, previously covered by separate registrations, underwent certain structural alterations which rendered one registration only necessary for the future.

COMMON LODGING HOUSES.

At the end of the year there were 26 registered Common Lodging Houses in the City, affording accommodation for 1,837 males and 71 females.

It is satisfactory to note that the unusually high standard of cleanliness and sanitation established in these premises in Birmingham continues to be maintained.

In no instances was it found necessary to resort to legal proceedings to remedy contraventions of the regulations governing the management of these houses.

No. of houses on register No. of houses on register				 	$\frac{24}{2}$
No. of lodgers allowed	 	 		 	1,908
No. of day visits	 	 	***	 	242 5
No. of night visits No. of Special Visits	 	 		 	57
Defects found	 	 		 	64
No. of summonses	 	 		 	-

HOUSES LET IN LODGINGS.

At the end of the year there were 319 houses let in lodgings on the Register, containing 2,048 rooms.

They were let as follows :---

No. of rooms let as single rooms			 	 	864
No. of lets of two or more rooms	tog	ether	 	 	497
Certified accommodation			 	 	4,539 persons

The visits and re-visits paid during the year numbered 4,511, an average of 14 per house.

Notices were served for the following matters :--

Repairs ordered						 	2,774
Overcrowding						 	14
Cleansing required						 	187
Provision for cooking						 	120
Provision for food stor	rage					 	231
Fire extinguishers need	ded					 	180
Lighting on stairs						 	118
Water supply						 	46
Other defects						 	172
Summonses issued for	non-co	mplian	ce with	Bye-l	aws	 	7

Despite the steady application of the bye-laws relating to houses let in lodgings, the standard of accommodation continues to be of very poor quality in a large number, and the evil of subletting by persons unable or unwilling to live up to their responsibilities as landlords continues to be a serious factor in the housing difficulties of this unfortunate section of the community.

TENTS, VANS, AND SHEDS.

The number of visits paid to these by the inspectors was 142. In a number of cases particulars were referred to the City Surveyor with a view to action under the Birmingham Corporation (General Powers) Act, 1929.

CANAL BOATS.

During the year 1935 the number of boats inspected on the canals within the City area was 1,107.

The 1,107 boats inspected were registered for the accommodation of 3,3321 persons, and when inspected were found to be carrying 1,376 men, 717 women, and 677 children, a total of 2,770 persons, represented in terms of adults as 2,431.5.

The following table shows the number of boats inspected during the last five years, giving the number of persons whom the boats were registered to accommodate and the actual number of occupants at the time of inspection :--

	No. of boats	Registered to carry	Actua	lly occupied	by:	Total	Equivalent
Year.	inspected.	(adults).	Men.	Women.	Children.	occupying	to adults.
1931	1,131	3,599	1,359	845	737	2,941	2,572.5
1932	1,147	3,558	1,498	766	655	2,919	2,591.5
1933	1,147	3,520	1,467	824	725	3,016	2,653.5
1934	1,143	3,448	1,410	817	711	2,938	2,582.5
1935	1,107	3,332.5	1,376	717	677	2,770	2,431.5

Of the 1,107 boats inspected during the year it was found that 1,004, or 90.7 per cent. were in good condition and conforming with the Acts and Regulations, while in 103, or 9.3 per cent. of the total various contraventions were found. These are classified thus :---

Boats with two contraventions each Boats with three contraventions each Boats with four contraventions each	1	8 making	total	contraventions contraventions contraventions	···· ···	 112 54 28
Т	otals 1	03				216

Totals 103

Complaint Notes were duly served on the owners in all cases, 103 Complaint Notes were issued during 1935, and 36 were brought forward from 1934. 116 Notices were complied with during the year, leaving an outstanding balance of 23.

During the year certificates were returned by owners signed by the various Canal Boat Inspectors, showing that 239 complaints had been remedied.

The following table shows the number and character of contraventions found and remedied during the year :---

Contravention referring to :-				Outstanding and brought forward from 1934.	Found during 1935.	Remedied during 1935,	Carried forward to 1936
Cabins requiring repai	rs	 		31	62	77	16
Cabins requiring paint		 		. 27	70	81	16
Cabins leaking		 		2	20	19	8
Requiring lettering		 		1	30	29	2
Registration		 		_	19	14	25
Not producing certific		 			4	4	
Dirty cabins		 		_		_	
Overcrowding		 		3	6	9	
Separation of sexes		 		1	3	4	
Water vessels		 		lasta no	2	2	
No Pumps		 			_		
Ventilation		 			_		
No certificate identify						_	
Cabins not habitable		 		NA STRUCT	_	-	-
an eligible provide the line			Totals	65	216	239	42

It has not been necessary during the year to take any Court proceedings under the above Acts or the Canal Boat Amendment Regulations, 1925.

INFECTIOUS DISEASE.

No cases of infectious disease have occurred during the year.

REGISTRATION OF BOATS.

There was a net increase of 22 boats registered at Birmingham during the year 1935, thus bringing the total up to 589.

The 589 boats on the register are classified as follows. It will be noticed that steam boats continue to remain at three :----

Ordinary boats			 	497
Motor boats			 	89
Steam boats	***	***	 	3
				589

SHOPS ACTS, 1912-34.

Four Inspectors are employed to carry out the work of inspection in relation to the above Acts, and below is a summary of their work for the year 1935:—

		A 18 3				
Numl	S 10.10 1	5 K.	LOIT	C 1	323 1 6 2	
1 Y UITH	Der I	91 V	1511		naru	

11,915
3,758
778
599
672
295
1,246
1,430
233
833

Total Visits 21,259

Offences Reported, etc.

Early Closing Notices not exhibited					 	1,505
Young Persons Notice not exhibited, F	form H.				 	1,328
Young Persons Notice not exhibited, I					 	8
Young Persons Notice not exhibited, F	form F.				 	1,322
Assistants' Half Holiday Notice not es	xhibited				 	1,319
Not providing seats for Shop Assistants	5				 	121
Not exhibiting Form K. (seating accon	nmodation)			 	1,158
No. of shops where overtime is carried	on, Form	G.			 	2
No. of shops where averaging of hours	is carried	on, I	form A.		 	0
Exempted Trade Notice not exhibited					 	639
Not Closing to time. Evenings					 	276
Not Closing to time. Half-day					 	32
Opening on Sundays. (Hairdressers)					 	7
To provide W.C. accommodation					 	95
To provide suitable ventilation					 	10
To provide suitable heating					 	13
	meals	1		1	 	73
To provide washing facilities		1			 	118
Mess rooms to be cleansed						83
Nuisances found					 	246
Summonses issued					 	195
Summonses withdrawn					 	1
Summonses dismissed					 	Ô
			1000	100		100

MORTUARY-SUMMER LANE.

In the early part of 1930, Mr. and Mrs. T. Sidney Walker indicated that they were proposing to build a mortuary with accommodation for three coffins at the corner of Summer Lane and Henrietta Street, together with a house for the caretaker, and that, if over a period of three years it was found to fulfil a useful purpose, they proposed to offer it to the City. In March, 1930, this proposal was considered by the General Purposes Committee, who expressed their appreciation of Mr, and Mrs. Walker's public-spirited proposal, and asked the Public Health Committee to co-operate in the scheme.

In March, 1934, three years had elapsed since the building was first opened, and experience had proved that the provision was appreciated, and that, with the passage of time, it would be increasingly used as a resting place to which the dead could be brought and remain until time for burial, instead of being kept in small houses with living relatives. The Public Health Committee, on behalf of the Council, therefore assumed responsibility for the future maintenance of the building on April 1st of that year. During the year 1955 the building was used for the temporary reception of the dead on 45 occasions.

IV. HOUSING.

NEW HOUSES.

Data received from the City Engineer and Surveyor show that 985 houses were built by the Municipality and 6,265 by private enterprise during 1935. The houses built by the Corporation are for the working class, while those built privately have generally been of a larger type. The houses built year by year since 1920 are shown in the subjoined statement.

				of houses erected private enterprise.	Corporation houses.	Total.
1920				244	553	797
1921				426	970	1,396
1922				382	810	1,192
1923				556	1,621	2,177
1924				1,201	1,992	3,193
1925				1,774	3,215	4,989
1926				1,775	5,159	6,934
1927				2,445	4,007	6,452
1928				1,487	3,505	4,992
1929				2,456	4,359	6,815
1930			*****	1,738	6,715	8,453
1931				1,983	3,919	5,902
1932				2,159	1,737	3,896
1933				3,028	2,029	5,057
1934				4,226	837	5,063
1935				6,265	985	7,250
	1	fotal		32,145	42,413	74,558
						-

The wards in which new houses have been built in 1935 are indicated below :---

]	Houses erected		
		Ward,				by private enterprise.	Corporation Houses.	Total.
	ſ	St. Paul's St. Mary's				-	- 1.01	-
		Duddeston and	Nach	lle		1	16	17
Central Wards.	J	St. Bartholome				-	26	26
central wards.	1	St. Martin's and		tond			20	20
		Market Hall						
		Ladywood	41111	#****				
	C	Ladywood		41111			_	-
		То	tal Cer	ntral	Wards	1	42	43
	~	x						
		Lozells		*****		-		
		Aston		****		007		010
		Washwood Hea	ath		*****	235	8	243
		Saltley		*****	*****	5		5
		Small Heath		*****				
Middle Ring.	3	Sparkbrook						
		Balsall Heath						
		Edgbaston			*****	55		55
		Rotton Park				12		12
	l	All Saints'	*****	*****		—	28	28
	Total			Ring		307		343
		Total M	fiddle	Ring		307	36	3

38

	Ward.				Houses erected by private enterprise,	Corporation Houses,	Total.
ſ	Soho						
gradually and which are	Sandwell				74		74
A REAL PROPERTY AND A REAL	Handsworth				134		134
	Perry Barr				1,805	81	1,886
	Erdington				47	79	126
	Gravelly Hill	milla.			201	52	253
	Bromford	*****			370	13	383
	Stechford			*****	290		
Outra Dian				*****		87	377
Outer Ring.	Yardley			*****	294	326	620
and the second s	Acock's Green				208		208
	Hall Green	*****		*****	194		194
the second s	Sparkhill	iina			54		54
	Moseley and K	ing's H	leath		273	Passa	273
	Selly Oak				377		377
	King's Norton				437	216	653
and the second	Northfield				687	40	727
l	Harborne				512	13	525
	Tota	l Outer	Ring	*****	5,957	907	6,864
	Gran	d Tota	1		6,265	985	7,250

The following statement shows the number of new houses built in the three groups of wards since 1920 :---

Groups of	Wan	de			Hou By private enterprise.	Total.	
Central War					 37	Corporation. 413	450
Middle Ring	:				 2,894	5,960	8,854
Outer Ring	*****	*****	*****	*****	 29,214	36,040	65,254
City		*****			 32,145	42,413	74,558
					The second se	And the second se	

No. OF EXISTING HOUSES.

From a return prepared by the Rates Department of the City Treasurer's Department, it appears that on April 1st, 1936, there were 247,713 dwelling houses and 18,243 shops with dwelling houses attached in the City. Some idea of the relative size of the dwelling houses may be gathered from the assessments for rating purposes which were as follows:---

Assessment.			No. o	f dwelling houses
Up to and including £5	 	 		4,641
Over £5 and up to £10	 	 		115,775
Over £10 and up to £15	 	 		56,236
Over £15 and up to £20	 	 		38,144
Over £20 and up to £50	 	 		29,510
Over £50 and up to £100	 	 		3,091
Over £100	 	 		316

ACTION IN RESPECT OF INDIVIDUAL DWELLING HOUSES.

For detailed information as to the nature of the defects disclosed by inspection, reference should be made to page 30. The statement below, set out in the form required by the Ministry of Health, is in respect of the number of houses dealt with under the different statutory provisions relating to dwelling houses.

1. INSPECTION OF DWELLING-HOUSES DURING THE YEAR :---(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) 12,971 103,208 (2) (a) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidation Regulations, 1925 3.895 (b) Number of inspections made for the purpose 39,902 (3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation 4,281 (4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation 11,055 2. REMEDY OF DEFECTS DURING THE YEAR WITHOUT SERVICE OF FORMAL NOTICES :---Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers _____ 7,519 3. ACTION UNDER STATUTORY POWERS DURING THE YEAR :---A .- Proceedings under sections 17, 18 and 23 of the Housing Act, 1930 : (1) Number of dwelling-houses in respect of which notices were served requiring repairs 1,134 (2) Number of dwelling-houses which were rendered fit after service of formal notices : (a) By owners ______ (b) By local authority in default of owners _______ (b) By local authority in default of owners _______ (b) By local authority in default of owners _______ (b) By local authority in default of owners _______ (b) By local authority in default of owners _______ (b) By local authority (b) By loc 1.182 (b) By local authority in default of owners 52 B .--- Proceedings under Public Health Acts :---(1) Number of dwelling-houses in respect of which notices were served requiring defects to 2.133 (2) Number of dwelling-houses in which defects were remedied after service of formal notices :---(a) By owners 1.769 (b) By local authority in default of owners 34 C .- Proceedings under sections 19 and 21 of the Housing Act, 1930 : Number of dwelling-houses in respect of which Demolition Orders were made 401 (2) Number of dwelling-houses demolished in pursuance of Demolition Orders 479 (3) Number of dwelling-houses in respect of which official Representations were made 758 (4) Number of dwelling-houses in respect of which undertakings under Sec. 19 (2) were accepted : (a) Not to use in future for human habitation ______ 43 (b) To carry out works to render fit for human habitation 11 (5) Number of dwelling-houses rendered fit for human habitation in pursuance of undertakings 8 D .- Proceedings under section 20 of the Housing Act, 1930 :--(1) Number of parts of building or underground rooms in respect of which Closing Orders 8 were made (2) Number of parts of buildings or underground rooms in respect of which Closing Orders were determined, the part of building or room having been rendered fit 1 (3) Number of parts of buildings or separate tenements in respect of which official Rep-17 resentations were made

The following table shows briefly, as at December 31st, 1935, the position with regard to Orders made in respect of Clearance Areas.

4/1/35		tion.	Area,	to be dispossessed
7 14 100 1	2/4/35	Confirma-	38	160
7/1/35	2/4/35	tion orders notreceived	14	63
7/1/35	5/9/35		19	42
				98
711 105	5/2/35	28/9/35	7	20
	5/2/35		26	122
8/1/35		CONCEPTOR		28
				36
0/1/05				105 35
		Contraction of the second s		79
0/1/05		28/9/35	12	49
011/02	5/2/35	28/9/35	13	55
		Confirma-	20	80
				52
the second se				43
				11 22
0.17.107				14
015105	4/6/35		11	22
0/5/05	4/6/35		29	84
	4/6/35	.,	40	149
	the second s	**		23
0.10.000	and the second se			68 74
		22		262
				25
11/2/02			30	108
	23/7/35		18	61
	23/7/35	"	36	129
00/5/05				291
		11		36 33
				43
DO IT IOT				543
23/5/35		10000	7	26
23/5/35	23/7/35		11	40
	23/7/35		46	226
				144
				144 21
12/11/35		.,		109
10111100	10/12/35		11	39
10/11/07	10/12/35		137	543
	10/12/35		10	39
12/11/35	Considered		18	68
28/11/35	during 1936			27
		"		28 31
			50	206
01/10/02		1000	38	164
01/10/05			9	45
			1,242	4,955 7,325
	7/1/35 8/1/35 8/1/35 8/1/35 8/1/35 8/1/35 8/1/35 9/5/35 9/5/35 9/5/35 9/5/35 9/5/35 9/5/35 9/5/35 9/5/35 9/5/35 9/5/35 9/5/35 9/5/35 9/5/35 9/5/35 9/5/35 9/5/35 20/2/35 20/2/2/35 20/2/2/35 20/2/2/35 20/2/2/35 20/2/2/35 20/	7/1/35 5/2/35 7/1/35 5/2/35 7/1/35 5/2/35 8/1/35 5/2/35 8/1/35 5/2/35 8/1/35 5/2/35 8/1/35 5/2/35 8/1/35 5/2/35 8/1/35 5/2/35 8/1/35 5/2/35 8/1/35 5/2/35 8/1/35 5/2/35 8/1/35 5/2/35 8/1/35 5/2/35 8/1/35 5/2/35 9/5/35 4/6/35 9/5/35 4/6/35 9/5/35 4/6/35 9/5/35 4/6/35 9/5/35 4/6/35 9/5/35 4/6/35 9/5/35 4/6/35 9/5/35 4/6/35 9/5/35 4/6/35 9/5/35 4/6/35 9/5/35 4/6/35 9/5/35 4/6/35 9/5/35 4/6/35 9/5/35 2/3/7/35 20/5/35 23/7/35 20/5/35 </td <td>7/1/35 5/2/35 28/9/35 7/1/35 5/2/35 28/9/35 8/1/35 5/2/35 28/9/35 9/5/35 4/6/35 Confirma- 9/5/35 4/6/35 tion orders 9/5/35 4/6/35 motreceived 9/5/35 4/6/35 9/5/35 4/6/35 20/5/35 23/7/35 20/5/35 23/7/35 21/1/35 10/12/35 22/5/35 23/7/35 23/5/35 23/7/35 23/5/35 23/7/35 23/5/35 23/7/35 23/5/35 23/7/35 23/5/35 23/7/35 21/2/11/35 10/12/35 21/2/11/35 10/12/35 22/1/2/35 21/12/35 3/3/3/3/3/3/3/3/3/3/3/3/3/3/3/3/3/3/</td> <td>$\begin{array}{c c c c c c c c c c c c c c c c c c c$</td>	7/1/35 5/2/35 28/9/35 7/1/35 5/2/35 28/9/35 8/1/35 5/2/35 28/9/35 9/5/35 4/6/35 Confirma- 9/5/35 4/6/35 tion orders 9/5/35 4/6/35 motreceived 9/5/35 4/6/35 9/5/35 4/6/35 20/5/35 23/7/35 20/5/35 23/7/35 21/1/35 10/12/35 22/5/35 23/7/35 23/5/35 23/7/35 23/5/35 23/7/35 23/5/35 23/7/35 23/5/35 23/7/35 23/5/35 23/7/35 21/2/11/35 10/12/35 21/2/11/35 10/12/35 22/1/2/35 21/12/35 3/3/3/3/3/3/3/3/3/3/3/3/3/3/3/3/3/3/	$\begin{array}{c c c c c c c c c c c c c c c c c c c $

GRAND TOTAL to December 31, 1935 101 Areas

2,965 12,280 As at the 31st December official representations in respect of 5,210 houses had been made since the passing of the Housing Act, 1930, 2,245 of these being in respect of individual houses or of blocks of houses not large enough to merit area action. Re-housing operations in respect of areas reported on in the annual report for 1934, have, in a number of cases, been completed. In others full completion is necessarily delayed by the need for individual consideration of every affected tenant, with a view to offering accommodation in a district likely to prove suitable so as to minimise as much as possible any hardship which might arise out of an enforced change of residence. One result of this is that in many cases the demolition of blocks of houses has to be held up on account of difficulty in re-housing individual families. Consequently the number of demolitions actually effected does not afford an accurate index to progress in connection with clearance. As soon as these difficult cases are re-housed, a Demolition Order will automatically follow and any apparent lag will be made up.

In general it has been deemed advisable to represent any considerable aggregation of unfit property as a Clearance Area under Section 1 of the Housing Act, but small groups or single houses have been represented individually under Section 19, parts of buildings being dealt with by Closing Orders under Section 20. No particular difficulties have been encountered under these latter Sections and in no case during the year has there been an appeal to the County Court. In a very few instances it was suggested that the houses subject to representation were fit for habitation, but in most cases the owners, on taking expert advice, accepted the contention that the houses themselves were unfit for habitation and either agreed to the making of orders or submitted schemes with the object of rendering fit for habitation some, if not all, of the houses affected.

No particular difficulties have been encountered in respect of areas affected by Clearance Orders. Even prior to the passing of the Housing Act, 1935, it was the practice in Birmingham to forward to objectors the main grounds upon which representations were based. This course of action has now become obligatory and, as no change of practice has resulted, no undue delay has arisen in consequence of the enactment of the 1935 Act.

Many schemes for the re-modelling and re-conditioning of small blocks of property within Clearance Areas were submitted by owners at the time of the various Public Local Inquiries, and in a small proportion of cases houses have been excluded from the Confirming Orders upon the understanding that action would follow immediately under Section 19 of the Housing Act, 1930. No house originally included within an officially represented Clearance Area has, as yet, been rendered fit for human habitation in pursuance of such a scheme. This does not mean that schemes were put forward frivolously but it does seem to imply that, on careful and exhaustive examination of their particular case, the owners concerned have been convinced that under the circumstances the proposals were unsound economically. In a few other cases houses were excluded from areas on undertakings by the owners not again to permit the houses to be used for human habitation.

Clearance operations generally have been in respect of properties situated in a ring from onehalf to one mile from the City centre, and have mostly comprised properties erected between the years 1800 and 1840, during which period a large number of badly arranged back to back houses were built, in many cases at a density of over 100 houses to the acre.

The Housing Act, 1935, received the Royal assent on the 2nd August, 1935, and was immediately put into operation. The steps taken in connection with Sections 1-11 relating to overcrowding are set out below. An important provision of this Act is the power now given to Local Authorities to proceed with the re-development of overcrowded areas of substantial size, where these areas comprise working-class houses of a type well below standard, and where it is proposed to carry out re-housing operations on the site. The Authority are at the present time examining this point and hope to be able to submit proposals during 1936.

Two important amendments relate to alterations in the basis of compensation. In cases where land is acquired by the Authority under Compulsory Purchase Orders made in respect of Clearance Areas, the compensation is now based on full site value, unaffected by any reduction factor such as operated before the passing of this Act. Provision is further made for a payment in respect of houses which, although falling within Clearance Areas, are found to have been well maintained.

In cases where owners may not wish to incur expenditure on account of the suspected imminence of schemes leading to demolition, provision is made in Section 55 of the Act for a Certificate of Indemnity, provided that an agreed scheme of works or reconstruction and improvement is carried out to the satisfaction of the Authority. As the cost of such works in houses which are obviously likely to fall within the scope of slum clearance operations is necessarily high, it is possible that there may not be any great number of applications under this Section. Before the passing of the 1985 Act, Local Authorities were not allowed to deal with properties owned by them by means of Clearance Orders. This prohibition has now been removed except in those cases where the Authority has purchased land with an obligation to rehouse.

It appears that it will now be possible, in a certain number of cases, to deal with Caravan Encampments of long standing, as the 1935 Act permits caravans which have remained stationary for two years or more to be treated in the same way as dwellings so far as action in respect of clearance areas is concerned. It will, however, only be possible to exercise this new power in a limited number of cases; and many of the most undesirable conditions relate to caravans in encampments where constant change is taking place.

During the year, it became evident that, owing to difficulties concerning the supply of labour in building operations, progress in connection with the provision of houses to replace those destroyed in consequence of clearance operations would fall below expectations. In order to meet the situation, it was decided that a Standing Joint Housing Conference should be constituted, under the Chairmanship of the Lord Mayor, for the purpose of facilitating and expediting efforts in connection with housing matters, the Conference comprising members of the Committees mainly concerned, viz., the Finance Committee, Public Works and Town Planning Committee, Estates Committee and the Public Health Committee. This conference has carried out extensive investigations and reported early in 1936. Any appropriate references to this will be made in my next report.

OVERCROWDING.

Of the total number of cases of overcrowding reported by the Health Visitors, Tuberculosis Visitors and Sanitary Inspectors (1,117), 567 were referred to the Estates Department, as compared with 646 and 725 in 1934 and 1933 respectively.

Of the 567 cases thus referred, 296 received assistance as follows from the Estates Department :

Cases assisted, 296 :---

(1)	Corporation house or flat allocated or to be allocated	ed wh	en the	e accor	nmoda	ation	
	is available						104
(2)	Pre-war accommodation provided or to be provided						52
(3)	Privately owned occupation do						27
(4)	Exchange house arranged, or being arranged .						104
(5)	Alternative accommodation being provided						9

In 252 cases the conditions were not such as to allow of assistance, while 19 were still under review at the end of the year.

A detailed analysis of the accommodation occupied by the 1,117 cases of overcrowding reported during the year is given in the following table :---

SLEEPING ACCOMMODATION OF CASES REPORTED.

1935.

	Combined			These
No. of	bedroom and	One	Two bedrooms,	Three bedrooms
occupants.	living room.	bedroom.	Bedrooms,	Deurooms
	9	18	1	1
3	42	66	20	5
4	30	108	49	6
5	15	76	77	6
6	6	53	86	7
7	2	41	77	11
8		19	89	11
9			85	8
10			29	13
11			27	2
12			13	1
13			—	2
14	-	-	-	
	104	381	559	73

In the case of one-bedroomed houses, in 189 instances there were 5-8 persons sleeping in that bedroom.

In the two-bedroomed houses there were 69 houses in which there was an average of five or more persons occupying each bedroom.

A number of the tuberculosis cases were referred to the Estates Department on account of the patient's ill-health and were not necessarily living in overcrowded conditions.

OVERCROWDING SURVEY.

The overcrowding survey of the City required under Section I (1) of the Housing Act, 1985, was carried out within a period of three months, viz., between December 9th, 1935 and March 7th, 1936.

For that purpose a temporary staff of sixty enumerators, 10 (later 14) women clerks, ten boys to assist the clerks and 10 boys to act as measuring assistants to inspectors, was appointed; one senior clerk and 10 assistant sanitary inspectors (for $7\frac{1}{2}$ weeks increased to 20) were also transferred from the permanent staff of the Department.

The procedure outlined by the Ministry of Health was followed. This consisted of a preliminary visit by enumerators, and a second visit by an inspector where there was *prima facie* evidence of overcrowding collected by the enumerator. A total of 214,157 dwelling-houses, containing 222,647 families, were visited in relation to the survey, and the opportunity was taken of determining certain other particulars: the number of back-to-back houses, the number of houses without an internal water supply, and the number without a separate water closet.

A comprehensive report has been prepared and submitted to the several Committees concerned, with a view to the preparation by them, and their joint submission to the City Council and the Ministry of Health of a programme of proposals for remedying the overcrowding revealed by the survey. As the report is still with the Committees concerned pending the submission of such report, it will not be appropriate to include particulars in the present annual report. They will therefore be detailed in the annual report for 1936, as is in fact appropriate to the period covered by the greater part of the survey.

V. INSPECTION AND SUPERVISION OF FOOD.

FOOD PREMISES.

Periodical inspections of the smaller retail food premises are carried out by the Sanitary Inspectors of the Public Health Department, while the larger wholesale premises are under the supervision of the Veterinary Department. Reference to the latter group will be found elsewhere in the report.

The smaller premises and food shops are reviewed in the light of Section 72 of the Public Health Act, 1925, and particular attention is paid to general cleanliness and to the immediate removal of refuse.

The survey of eating houses in the centre of the City, commenced in 1984, was brought to completion in 1985, a total of 120 such premises having been inspected. The survey related to the conditions prevailing in the kitchens of these premises, with particular reference to the maintenance of a reasonably low temperature, provision for the storage of food stuffs under cover, of means for the efficient cleansing and sterilising of utensils and of facilities for personal ablutions for the kitchen staffs. Although the general standard was found to be satisfactory a number of requirements was noted and no difficulty was experienced in having these carried into effect by the persons responsible.

The Birmingham Corporation Act, 1935, received the Royal Assent this year but Section 54, which provides for the registration as "eating houses" of premises used mainly or substantially for the provision of food to members of the public for consumption on the premises, did not become operative until 1st January, 1936.

ICE CREAM.

In the early summer of each year a special tour of inspection is made to all known ice-cream premises,

The practice of installing a conservatoire, often supplied by one of the large ice-cream manufacturers, and of retailing wrapped ice-cream manufactured in up-to-date plant under hygienic conditions is happily on the increase among small shopkeepers.

The registration of premises used for the manufacture or sale of ice-cream, and of persons trading as manufacturers or vendors of, or merchants or dealers in ice-cream is required by Section 54 of the Birmingham Corporation Act, 1935, but this Section, as stated previously, did not become operative until 1st January, 1936.

MILK SUPPLY.

The bulk of the City milk supply comes from within a radius of 50 miles of Birmingham, but in times of winter shortage accommodation milk may come from as far afield as Scotland and Ireland. The quantity of milk produced within the City boundary continues to diminish.

MILK (Special Designations) ORDER 1923.

The number of dealers in the City licensed to sell designated milks is shown in the following table,

The number of samples of "Certified", "Grade A (Tuberculin Tested)" and "Grade A" milks taken during the year, including samples for the Ministry of Health, amounted to 263 and the percentage of these found to be below the required bacteriological standard was 24.5, 26.1 and 21.7 respectively. The bulk of this milk is produced outside the City area.

NUMBERS OF LICENCES ISSUED.

				1934	1935
Producers of Certified Milk	٤		 	 1	1
Dealers in Certified Milk			 ***	 13	14
Dealers in Grade A. (T.T.)	Milk		 	 37	28
Producers of Grade A. Milk			 	 10	17*
Dealers in Grade A. Milk			 	 95	81
Producers of Grade A. Pas	teurised	Milk	 	 8	2**
Dealers in Grade A. Paster	irised Mi	lk	 	 8	7
Producers of Pasteurised M	ilk .		 	 21	22
Dealers in Pasteurised Milk	c .		 	 113	141
Supplementary licences-					
Certified			 	 4	3
Grade A. (T.T.)			 	 1	3 5
Grade A.			 	 14	14
Pasteurised			 	 7	7
				 327	342
					and the second se

* The Milk Marketing Board's Accredited Milk Scheme, which came into operation on 1st January, 1935, resulted in a small increase only in the number of applicants for licences to produce "Grade A" milk.

** The holder of one of the licences to produce "Grade A Pasteurised" milk relinquished this during the year in favour of a licence to bottle unheated "Grade A" milk.

It will be remembered that some years ago an arrangement was made with the Worcestershire County Council for the periodical sampling of "Grade A" milk from some half dozen producers who were supplying dairymen in Birmingham. Shortly after the commencement of the Accredited Milk Scheme the Public Health Committee was approached by the Worcestershire County Council with an enquiry as to whether this scheme could be extended to allow of the sampling of "Grade A" milk from 42 producers making consignments to 12 dairy firms in the City. It was found that this additional sampling would necessitate the services of one of the assistant sanitary inspectors for one half day in each week, and would also result in increased laboratory work to the extent of 200 samples per annum. An agreement for the carrying out of this sampling was made upon a suitable financial basis for an experimental period of 12 months.

About 80 per cent. of the City milk supply is subjected to some form of heat treatment. Although there is still a large sale for sterilized milk the number of licensed "positive holder" or "batch" pasteurising plants remains the same, and the demand for pasteurised milk continues steadily to increase, such increasing demand being reflected in the number of dealers' licences for this type of milk issued in 1985 as against 1984. These pasteurising plants are now under weekly supervision by the dairy inspectors, and this has ensured a continuance of the satisfactory operation of the plants while doing away with the necessity for numerous "run-through" samples, as hitherto.

The total number of samples taken for bacteriological examination during the year was 577, including 47 samples for the Ministry of Health.

24 samples of raw undesignated milk were taken during 1935, and of these 2 contained over 200,000 bacteria per c.c. and one contained over 100,000 per c.c.

266 samples were taken of milk which had been pasteurised by the holder process and 7 of these had a count of over 100,000 bacteria per c.c., while a further 17 had a count of over 30,000 bacteria per c.c. These results show a general improvement on those of 1934.

MILK AND DAIRIES ORDER, 1926.

All matters pertaining to dairies come within the control of the Public Health Committee; matters relating to cows and cowsheds come under the Markets and Fairs Committee acting through the City Veterinary Department. In December, 1934 two Dairy Inspectors were appointed specifically to undertake the supervision of dairy premises and plant throughout the City.

The whole of the dairy premises in the City have been systematically inspected, and conditions in a number of these have been substantially improved, particularly among the smaller dairymen. The following table shows the alterations in the register of purveyors of milk during 1935 and a summary of the work done by the inspectors during the year :---

					193	34		1935	
Number of wh	holesale p	urveyors		 	 1	23		125	
Number of re-				 	 1,0	76		1,007	
Number of mi				 	 3,4	13		3,354	
Number of bo		kshops		 	 2,3	85		2,875	
Number of bo			ors	 		48		40	
Total number					 3	62		349	
Total number					 4	25		341	
Total number				 		64		324	
Number of Visits 1	Paid.								
Milkshops				 	 			4,568	
Wholesale put				 	 			233	
Retail purvey				 	 			800	
To Pasteurisi				 	 			480	
Other visits	-							31	
Unsuccessful	moito			 	 			190	
Interviews				 	 			1	
Interviews				 	 				
Defects Found.									
Limewashing	milkshop	or store	required	 	 			12	
Sanitary defe				 	 		1000	139	
Other defects				 	 			153	
Notices sent			-	 	 *****			9	
Letters sent				 	 	-		147	

L

The demand for bottled milk in preference to loose milk continues to be reflected in the decrease in the number of loose milk shop registrations and the increase in the number of bottled milk shop registrations.

THE INSPECTION OF COWS AND COWSHEDS WITHIN THE CITY AREA.

(Summary of Report by Mr. BRENNAN DE VINE, Chief Veterinary Officer).

At the end of 1935 there were 103 dairy farms housing 1,438 milch cows, in 210 registered sheds, and 46 milch cows in 6 sheds pending registration, etc.

For the purposes of the Milk and Dairies Order, 1926, the cows and cowsheds in City dairies are subject to regular veterinary inspection and each cowshed has been visited at least once a month, and during the year 2,719 visits were made. The health and cleanliness of the cows were generally good and constant attention has also been paid to the sanitary condition of the cowsheds.

Mastitis.—There were 53 cases of cows affected with acute catarrhal mastitis. In all these cases the affected cows were kept isolated and their milk was prohibited from sale for human consumption.

Tuberculosis.—19 cases of tuberculosis in City dairy herds were dealt with under the Tuberculosis Order, and on post-mortem examination all were found to be affected.

Milk (Special Designations) Order, 1923.—At the end of the year there were seventeen producers in the City holding licences to produce Grade "A" milk and one to produce "Certified" milk. One of the conditions under which the licence to produce Grade "A" milk is granted by the local authority for the sale of same is :—

(ii) An examination of the herd must be made once in every three months by a Veterinary Surgeon nominated by the Licensing Authority. Any animal certified as showing evidence of any disease which may injuriously affect the milk must be immediately removed from the herd and information as to its disposal given to the Licensing Authority.

At the 31st December seventeen farms within the City were producing Grade "A" Milk and special veterinary examination has been made of every milch cow in these herds and the usual threemonthly certificates issued.

One farm within the City was producing "Certified" milk.

In this case all the cows in the herd are submitted to the tuberculin test twice a year and the licence is granted by the Ministry of Health.

Cowsheds.—It was necessary in three cases to draw the attention of the owners to the want of cleanliness in the cowsheds, and in nine cases the owners were requested to keep their cows in a cleaner condition, particularly the flanks. In six other cases notice was given in respect of repairs and removal of manure.

Ten sheds (including the seven pending registration December, 1934) have been altered to comply with our requirements and added to the register, attention being paid to the internal construction as well as to lighting, drainage and ventilation.

In addition there are four sheds pending registration, and when the necessary alterations are completed, these will also be added to the register.

In one case special temporary permission was given, permitting the owner to keep eight cows in two unregistered sheds, as the farm buildings are to be demolished.

Thirty-one sheds have been discontinued, the owners having given up keeping cows in these sheds for the sale of milk. In six cases the farm buildings, which included nineteen registered sheds, were taken over for building purposes.

Two registered sheds have been burnt out, but arrangements are being made to have them re-built.

Five changes of occupancy have occurred and the register has been amended accordingly.

Detection of Tuberculosis in Milk Produced in City Dairies.—Bulk samples of milk are taken from each City dairy herd during the year as a check on the clinical examination of the dairy cows, and in addition individual samples are taken in suspected cases. 204 samples, of which 12 were infected, were taken as follows:—

			Infected.
Mixed samples	 	144	8
Individual samples		60	4
		204	12

Nineteen cows, affected with tuberculosis, were removed from City dairy herds during the year, six of which were found, on post-mortem examination, to be affected with tuberculosis of the udder. The other thirteen cows all showed clinical evidence of tuberculosis.

EXAMINATION OF MILK COMING INTO THE CITY FROM OUTSIDE SOURCES FOR THE PRESENCE OF TUBERCLE BACILLI.

1,668 samples of mixed milk were taken at various City depots from churns, etc., sent in from outside sources :---

		Bulk	Result o	f Exam.	Pecentage
		Samples.	Free.	Infected.	Infected
 		 1	1	-	
		 7	4	3	42.8
		24	23	1	4.1
			45	3	6.2
			16	8	33.3
		1	1		
		1	1		
		147	136	11	7.5
			503	46	8.4
			634	52	7.6
			163	10	5.8
 		 1	1	-	-
		1.662	1,528	134	
 		 6	6	-	- 11
	TOTAL	 1,668	1,534	134	8.0
···· ··· ···	···· ··· ··· ··· ··· ··· ··· ··· ··· ·	··· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ··	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$

Note.—The 6 samples of pasteurised milk were taken for the purpose of checking the efficient working of the pasteurisation plant at various depots.

Milk and Dairies (Consolidation) Act, 1915.—It is an obligation under Section 4 of the above Act for the County Medical Officer to arrange for the inspection of cattle in dairies in respect of which notice is given that milk supplied therefrom has been found to contain tubercle bacilli.

In connection with the 134 infected samples of mixed milk which had come into the City from outside sources, notification under the Milk and Dairies (Consolidation) Act, 1915, was sent in each case to the Medical Officer of Health of the County in which the cows from which the milk was obtained were kept, and a veterinary inspector from this department attended at the time the inspection of each of the herds was made by the local authority concerned.

The 134 infected bulk samples were taken from milk supplied from 132 farms. These farms were visited and 4,073 cows were examined and further milk samples (mixed and individual) taken from each herd by the local authority concerned.

During the year reports have been received in 105 cases showing that at the farms visited 154 cows were discovered to be affected with tuberculosis and giving milk containing living tubercle bacilli; these cows were subsequently slaughtered.

In 29 cases animals responsible for the infection in the milk were not traced, but in 13 of these cases it was ascertained that cows had either been sold out for slaughter or had gone "dry" prior to the visit to the farm by the veterinary inspector.

Notifications received from other Local Authorities .--

Notifications from Smethwich C. B.:

1.—That Grade "A (T.T.)" milk, sold in Smethwick, had been found to contain living tubercle bacilli. It was alleged that the milk had been bottled and sold by a Birmingham firm. On investigation it was ascertained that although the milk was bottled in Birmingham it was still the property of the Smethwick firm from whom it was received and afterwards returned to them bottled.

 That a sample of milk from a supply consigned to Smethwick from a Birmingham dealer, had been found to contain living tubercle bacilli. We accordingly took samples from the milk of all the suppliers to this particular dealer, but the result of the bacteriological examination showed all the samples to be negative.

3. That a sample of milk from a supply consigned to Smethwick had been found to be infected. As the milk was produced at a City dairy we specially inspected the herd of 26 cows and took 3 group samples and 2 individual samples from 2 suspected cows, which were affected with induration of the udder. All the samples taken proved to be free, but it was ascertained that 3 cows had been sold out since the original infected sample was taken in Smethwick.

4. That a sample of milk collected from the premises of a retail purveyor of milk had been found, on biological examination, to contain living tubercle bacilli. The milk was supplied by a City dairy. We examined the herd of 24 cows, 16 of which had been purchased since the infected sample was taken, to replace cows disposed of. The 2 individual and 1 group samples collected all proved to be free, but in this case it is possible that the cow or cows giving the infected milk were among those animals which were disposed of between the time the infected sample was taken and when we took our samples.

5. That a sample of milk, procured from a supply in Smethwick, had been found, on biological examination, to contain living tubercle bacilli. As in this case the consignment was from a City milk depot, we took samples from all supplies received, two of which proved to be positive and the respective Medical Officers of Health (Staffordshire and Shropshire) were advised and subsequently reported that 4 cows had been taken under the Tuberculosis Order.

Notification from Staffordshire County Council :---

1. Notification was received that a sample of milk from a supply consigned to Netherton by a Birmingham dairyman had been found to contain living tubercle bacilli. We visited the farm and took one individual sample and 3 bulk samples. The result received from the Bacteriological Laboratory showed that all these samples proved to be negative. It would seem, therefore, that the animal responsible for the infection was a red cow taken by us under the Tuberculosis Order subsequent to the infected sample taken by the Staffordshire authorities.

Comparative Return.-The following table shows the number of samples taken of milk sent in from outside sources during the past ten years and the percentage infected :---

Year.			Samples Taken.	Samples Infected.	Percentage Infected.
1926	 	 	 811	71	8.7
1927	 	 	 835	60	7.2
1928	 	 	 974	91	9.3
1929	 	 	 958	64	6.7
1930	 	 	 1,699	105	6.2
1931	 	 	 1,657	133	8.0
1982	 	 	 1,086	97	8.9
1933	 	 	 1,694	108	6.4
1934	 	 	 1,699	109	6.4
1935	 	 	 1,668	134	8.0

Summary of Samples of Milk (Nos. 52-1923) taken during 1935 .--

			No. Taken	No. Infected
From Outside Dairies	-			
Pasteurised			6	
Grade "A"			38	8
Grade "A (T.T.)"			6	
Non-designated			1,618	131
From City Dairies-				
Grade "A"			60	4
Non-designated			144	8
		Total	1,872	146

ERADICATION OF TUBERCULOSIS FROM DAIRY HERDS SUPPLYING MILK TO THE CITY.

Birmingham Corporation Scheme.—Under the Birmingham Corporation Scheme for the eradication of tuberculosis from herds supplying milk to the City, the necessary veterinary assistance and tuberculin are given free, subject to certain conditions being complied with. The primary object is that the milk supply of Birmingham shall be as free from infection of tuberculosis as possible.

The double intradermal test with synthetic tuberculin has been used for all herds tested by us during the year.

Seventeen herds, comprising 907 animals, were continuing in the scheme on the 31st December last. From twelve of these herds "Certified" or "Grade A (Tuberculin Tested)" milk is supplied to the City.

HERDS TESTED DURING 1935.

The testing of herds which come under the Scheme is carried out half-yearly and the following return gives the number of animals tested during the year :---

			Tested.	Passed,	Failed.	Date of entering Scheme.
1			 355	354	1	October 24th, 1907.
2			 120	115	5	October 3rd, 1908.
3			 74	72	2	September 23rd, 1913.
4			 15	15		May 26th, 1928.
5			 56	56		November 22nd, 1907.
6			 10	10		January 6th, 1908.
7			 211	210	1	October 3rd, 1908.
8			 78	78		October 4th, 1924.
9			 81	81		September 26th, 1928.
10			98	96	2	February 7th, 1929.
11		++	 81	77	4	September 12th, 1913.
12			 113	112	i	November 10th, 1931.
13	1000	*****	 83	79	Â	October 1st, 1932.
14	*****	*****	 23	20	3	May 8th, 1932.
15		*****	 175	175	0	November 10th, 1932.
16	*****	41118	 65	60	5	
	*****	*****				January 1st, 1934.
17		*****	 127	121	6	April 3rd, 1935.
18			 9	6	3	Discontinued.
			1,774	1,737	37	
				97.9%	2.1%	

In addition to the testing of the cows in the herds twice a year a certain number of cows were purchased subject to passing the test. These animals were tested at farmers' and dealers' premises before being added to the herds and of the 58 so tested 44 passed the test and were admitted to the herds and are included in the figures given above; 14 failed to pass the test.

Cows test	ed during 1934 :	
1,868	1,682	186
	90%	10%

The low percentage and small number of reactors for the year 1935 are due to the fact that in 1934 we had three herds which showed a very high percentage of reactors and which discontinued at the end of that year, not coming into account at all during 1935.

INSPECTION OF SLAUGHTERHOUSES, ETC.

During the year regular veterinary inspection of all animals received in the lairs was carried out at the public abattoir and, in addition, of all animals received in the private lairs connected with the public abattoir.

The staff of meat inspectors at the abattoir was found not sufficient to examine the carcases of all the animals slaughtered there, and the Committee decided, after due consideration, to increase the staff by one extra veterinary inspector and five qualified meat inspectors. These, posts have been advertised and the appointments will be made early in 1936. It is expected that when the new appointments have been made there will be sufficient staff to deal with the whole of the carcases submitted for sale in the meat market.

In connection with the slaughterhouse at Montague Street Market, regular inspection has been carried out of all the animals slaughtered there.

In addition to the public slaughterhouses, there were, at the 31st December, 90 private slaughterhouses in the City area, 49 of these being registered slaughterhouses and 41 annually licensed slaughterhouses. These private slaughter houses are regularly inspected by the district inspectors. In five cases alterations and improvements have been made during the year. Of the 90 private slaughterhouses in the City area, 27 are used for the slaughter of pigs only.

In addition to the above private slaughterhouses, there are 2 annually licensed knackeries in the City.

RETURN OF ANIMALS SLAUGHTERED.

Return of Animals slaughtered in the Public Slaughterhouses :

Public Abattoir, Sherlock Street	Beasts, 47,309	Calves, 96,344	Sheep and Lambs, 258,457	Figs. 97,267	Total. 499,377
Public Slaughterhouse, Montague Street	13	36	57	5,822	5,928
Return of Animals slaughtered in Private Slaughterhouses	7,714	3,796	58,036	278,536	348,082

IMPORTED MEAT.

The imported meat received into the City is stored principally in the refrigerators at the City Meat Market and the Lightfoot Refrigeration Co., Ltd., Digbeth.

Return showing the approximate amount and percentage of home killed and imported meat sold in the City during the year :---

Beef and Veal Mutton		Home	Killed tons. 18,025 5,935	Imported 12,4 12,0	544	Total tons. 30,569 17,962
			23,960	24,4	571 -	48,531
	Beef and Mutton	Veal		Percentage of Iome Killed. 	total : Imported. 41.0 67.0	
				49.4	50.6	

MONTAGUE STREET PIG MARKET.

This market is divided into an English side and an Imported side. During the year 98,063 pigs were passed through the English side and 39,791 pigs were passed through the Imported side, all these latter pigs being received from Ireland, as compared with 117,926 and 18,958 pigs respectively, during the year 1934. All these pigs were licensed from the market to various bacon factories and slaughterhouses.

In addition to those which passed through Montague Street Market, 19,814 pigs ex Ireland were received direct at various slaughterhouses and bacon factories in the City, as compared with 11,526 received in 1934.

WHOLESALE FRUIT, VEGETABLE, AND FISH MARKETS.

In connection with the fruit and vegetable markets there is a sorting room in Gloucester Street, to which all fruit, which has a percentage damaged amongst it, is sent for sorting. The fruit so passed through the sorting room is subject to inspection before being allowed to be offered for sale for human consumption. This fruit is mainly purchased by stall holders and hawkers who ply their trade principally in the streets in the neighbourhood of the markets.

BUTCHERS' SHOPS.

During the summer months of 1935 many of the butchers' shops were open on Sunday mornings. This made it necessary for us to employ extra inspectors on Sunday mornings to inspect the meat in those shops.

FISH MARKET.

Shell-fish .- 74 samples of mussels were collected from consignments ex :--

Aberdovey Annan Bagillt Barmouth Bodorgan Conway Ferry Side Holywell King's Lynn. Lytham Oranmore Parkgate Penclawdd. Portmadoc Towyn

and in 16 cases the bacteriological examination showed more than 100 B.Coli per c.c.

27 samples of oysters were collected from consignments ex :---

Brightlingsea Liverpool London Whitstable

and in 5 cases the bacteriological examination showed more than 100 B.Coli per c.c.

As a result of the bacteriological examination of samples taken from shell-fish ex Annan, Barmouth, Conway, Liverpool, London, Lytham, Malldraeth Bay Bodorgan, Parkgate, Penclawdd and Portmadoc, notice was given in each case under the Public Health (Shell-fish) Regulations, 1985, to the local authorities concerned.

Birmingham Corporation Act, 1935.—Since the passing of this Act, which gives power to prohibit the sale of any shell-fish likely to cause danger to public health, the Corporation now has power to prohibit the sale in the City of shell-fish which, on examination, are found to be badly contaminated.

Salmon and Freshwater Fisheries Acts.—In February "unclean" salmon consigned to the City in packages not marked as provided by the Acts were seized by one of our inspectors. The matter was reported to the Fishmongers' Company who took a prosecution in Birmingham. The defendant was fined £30 for being in possession of "unclean" salmon and £20 for consigning salmon not marked in accordance with the Acts.

REGISTRATION OF PREMISES USED FOR THE MANUFACTURE OF POTTED MEATS, ETC.

Food Preparation Premises and Shops .- On 31st December there were 196 food preparation premises on our register as follows :--

Cooked Meats, etc., Man Sausage and Pork Pie M		 $\frac{124}{70}$
Jam Manufacturers	 •••	 2
		196

The following shops in which food is sold were regularly visited :--

Beef and Pork	Butchers		 1,152
Grocers		 	 1,398
Green Grocers		 	 1,384
Hucksters		 	 5,023
Fish Friers		 	 650
Fishmongers		 	 661
			10,269

53

INSPECTIONS.

The following is the number of visits paid by the Inspectors :----

Slaughterhouses					8,458
Food Preparation Pr	remis	ses			7,552
Fish Friers					5,311
Beef and Pork Bute	hers				33,023
Grocers					4,268
Green Grocers and	Fish	monge	rs		21,865
Hucksters					2,260
Ham and Bacon Cu	irers				3,928
Street Hawkers					26,233
Horse Flesh					50
Cold Stores					21,771
				1	134,719

FISH FRIERS' PREMISES.

Birmingham Corporation Act, 1935.—Provision has been made in this Act for the making of bye-laws in respect of fried fish shops, to replace the bye-laws at present in force, which were made under a Declaratory Order of the Ministry of Health. It is expected that these new bye-laws will come into force early in 1936.

Registered fried fish shops in the City Area-650.

PROSECUTIONS.

Legal proceedings were taken in four cases under the Public Health Acts in respect of diseased and unfit meat exposed and deposited for sale.

	Pane.
Diseased bacon exposed for sale	10/-
Diseased ham deposited for sale	£1
Diseased meat deposited for sale	£5
Diseased bacon and rabbits deposited fo	r sale £3

FOOD POISONING.

Notifications of Food Poisoning.—Several notifications of suspected food poisoning were received from the Medical Officer of Health during the year. In each case the source of the suspected food was investigated.

PSITTACOSIS.

In addition the Ministry of Health reported a case of psittacosis, alleged to have been caused by parakeets purchased in Birmingham. All the parakeets at the shop concerned were inspected and three pairs of birds sent to the Ministry for examination: two of these birds were found to be affected with psittacosis.

MEAT AND OTHER FOODS CERTIFIED AS UNFIT FOR HUMAN CONSUMPTION.

Number of Surrenders,	Class of Foodstuff	s.		Tons.	Cwts.	Qrs.	Lbs.
12,473	Meat		 	548	11	1	23
750 -	Fish		 -	91	0	3	15
950	Poultry, Game, etc.		 	20	9	1	2
747	Fruit and Vegetable	s	 	345	7	0	22
131	Miscellaneous		 	3	8	1	10
15,051			-	1,008	17	0	16

The weather during December was very favourable for the handling of foodstuffs for the Christmas markets.

All the unfit meat, fish, poultry and other foodstuffs are sent to the Salvage Department, Montague Street Depot, for destruction.

Residual Value.—Compensation at the rate of 3/- per cwt. is paid to the owners of carcases and parts of carcases surrendered as unfit for human food, and also in respect of the carcases of pigs which died during transit.

During the year £1,199 17s. 0d. was paid in respect of the following carcases, etc. :--

Beef Veal Mutton Pork	 	 Tons. 169 10 19 199	Cwts. 10 18 14 17	Qrs. 0 0 0 0
TOTK		 399	19	

DISEASES OF ANIMALS ACTS.

The Veterinary Department deals with the whole of the work under these Acts, including the issuing of licences. All sales of horses, cattle, sheep and pigs are controlled under these Acts by the Department. During the year Montague Street Market has been visited twice daily and in addition to visiting the regular weekly sales of horses at Cave's Repository, Moseley Street, the inspectors attended the following sales of cattle, sheep and pigs :--

Cave's Repository, Moseley Street :---

January 23-Sale of Shorthorn Cattle.

Bingley Hall :--

November 5 and 6—Sale of Shorthorn Cattle. November 30 to December 5—Show and sale of fat cattle, sheep, pigs, etc.

Old Beech Farm, Northfield-

September 28-Farm Sale.

The following is a summary of the visits paid by inspectors :---

Railway Sidings		 		1,940
Cattle Yards		 		2,456
Markets		 		498
Pig Keepers' Pre	mises			1,015
Knacker Yards		 		67
Miscellaneous		 		39
			14	
				6,015

ANTHRAX.

During the year seven suspected cases of Anthrax were reported, but in six cases, on microscopic examination of the blood of the dead animals, the result was found to be negative. The other case, which was a bullock that died in the lairs at the City Meat Market, was reported to the Ministry of Agriculture and Fisheries, who confirmed the existence of the disease. The carcase was destroyed at Montague Street and the necessary disinfection carried out.

BOVINE TUBERCULOSIS.

Tuberculosis Order, 1925.—19 cases of Tuberculosis in cattle coming within the above Order were dealt with during the year. All the animals were slaughtered and compensation amounting to £68 2s. 10d. was paid to the owners. Of the 19 cases, 13 were affected with advanced Tuberculosis and 6 with Tuberculosis, not advanced; and of the total 6 were affected with Tuberculosis of the udder.

VI. PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASES.

GENERAL.

The mortality figures for 1935 are compared with the decennial averages in the statement below.

Disease.				Deaths in 1935,	Average 1925-1934.	Above or below the average.
Enteric Fever			 	2	4	- 2
Smallpox			 	0	0	
Measles			 	52	94	- 42
Scarlet Fever			 	12	12	
Whooping Coug	rh		 	66	118	- 52
Diphtheria			 	84	73	+ 11
Pulmonary Tub	erculos	is	 	782	872	- 140
Other Forms of				85	126	- 41
Influenza			 	156	362	- 206

The prevalence of the notifiable diseases is shown in the next table :---

Disease.			Cases in 1935.	Average 1925-1934.	Above or below the average.
Enteric Fever			28	42	- 14
Smallpox			0	6	- 6
Scarlet Fever			3591	2264	+1327
Diphtheria			1129	1333	- 204
Erysipelas			632	498	+ 134
Puerperal Fever			104	105	- 1
Puerperal Pyrexia			172	Only notifiable	since 1926.
Ophthalmia Neonatorum			658	446	+ 212
Pulmonary Tuberculosis			1023	1323	- 300
Other Forms of Tuberculo	sis		190	259	- 69
Acute Primary or Influenza	l Pneum	onia	2078	2628	- 550
Cerebro-Spinal Fever			17	18	- 1
Acute Poliomyelitis			9	12	- 3
Polioencephalitis			2	1	+ 1
Encephalitis Lethargica			28	39	- 11
Malaria			3	5	- 2
Dysentery			73	11	+ 62
Continued Fever			1	-	-

The scarlet fever cases exceeded the average by 1,327, those of diphtheria were below the average by 204. As indicated by the number of deaths in relation to this incidence scarlet fever was mild and diphtheria relatively severe in type.

The action taken with regard to puerperal fever, puerperal pyrexia and ophthalmia neonatorum is recorded in the Maternity and Child Welfare section of this Report. The increase in notifications of ophthalmia neonatorum is significant only of greater freedom in notifying many cases which are not severe and are not gonococcal in origin.

The following cases were reported through the Head Teachers of Elementary Schools and the Attendance Officers :---

			1935.	1934.	1933
Measles	 	 	 8,765	4,967	9,011
German Measles		 	 5,192	985	210
Whooping, Cough		 	 3,375	5,896	2,143
Chicken Pox		 	 5,584	5,437	5,181
Mumps	 	 	 1,945	861	6,763

The cases were all visited by the Health Visitors and steps taken to exclude contacts from school where necessary.

ENTERIC FEVER.

During the year there were 35 cases notified as Enteric Fever, but further investigation revealed the fact that 7 of these were not suffering from the disease. The 28 true cases are tabulated as follows:--

Typhoid Fever	 			17
Para-Typhoid A			***	0
Para-Typhoid B	 			11
Para-Typhoid C	***	***		0

There were 3 deaths due to bacillus typhosus, 2 of the cases having contracted their infection outside the City, the remaining case being a secondary one.

Of the remaining 14 cases of typhoid fever, 2 were contracted outside the City, 4 followed the consumption of prawns, 6 followed the consumption of lettuce, while 2 were of uncertain origin. Of the 11 cases of para-typhoid B. 6 were contracted outside the City, 1 followed the consumption of mussels, and 4 were of uncertain origin.

ENTERIC FEVER.

		Number of Cases.	Case rate per 1,000	Number of deaths registered	Death rate per 1,000
1901-5 (#	Average)	544	.70	91	.12
1906-10		242	.30	51	.06
1911-15		90	.11	22	.03
1916-20		22	.02	5	.01
1921-25		30	.03	4	.00
1926-30		-41	.04	5	.00
1931-35		42	.04	2	.00
1926		52	.05	3	.00
1927		40	.04	4	.00
1928		20	.02	3	.00
1929		31	.03	4	.00
1930		62	.06	9	.01
1931		54	.05	1	.00
1932		58	.06	2	.00
1933		30	.03	1	.00
1984		40	.04	6	.01
1935		28	.03	2	.00

UNDULANT FEVER.

One case of undulant fever came to the notice of this Department during the year, and on investigation it was found that the infection had been contracted outside the City. The authority for the area concerned was duly notified.

GLANDULAR FEVER.

No cases of this disease came to the notice of the Department during the year 1935.

SMALLPOX.

No cases of smallpox occurred in the City during the year. A few persons living in the City were contacts to known cases of smallpox in other areas. Accordingly they were visited, vaccination offered, and daily supervision of each was carried out for a period covering the interval of incubation of the disease.

VACCINATION.

Since April 1st, 1930, when the Local Government Act, 1929, came into force, the administration of the Vaccination Acts has been carried out by the Public Health Committee.

Below are tabulated statistics relating to this work for the current year, together with similar figures relating to each year since 1928. It will be seen that the percentage of successful vaccinations has fallen slightly, while the slight increase of conscientious objectors experienced during recent years continued in 1935. Coupled with this latter fact, however, it is to be remembered that only four cases of smallpox have occurred in the City since 1928; so that there has been no strong incentive to have vaccination performed where parents are otherwise hesitant.

sila linasalar buqah su		1935	1934	1933	1932	1931	1930	1929	1928
Births returned		16,340	15,703	17,063	17,832	17,866	17,590	17,786	17,954
Conscientious objectors	, per cent.	30.6	29.5	28.0	28.0	26.8	25.2	20.4	18.7
Died unvaccinated		856	823	830	958	841	\$00	939	1,020
Successful Vaccinations of s	s (per cent. survivors)	50.8	53.1	55.4	54.8	54.3	53.7	62.0	65.0
Insusceptible		0.4	0.5	0.9	1.0	1.1	1.2	0.5	0.7
Postponed by Medical Certificate		0.3	0.5	0.4	0.4	0.5	0.6	0.7	0.4
Removed		4.9	4.1	3.8	3.5	4.5	5.1	4.1	3.9
Lost sight of		2.6	2.6	2.6	2.7	2.3	-2.4	2.5	2.6
Still under notice		8.7	8.0	7.6	7.9	9.2	10.5	9.1	7.7
							and the second sec		

VACCINATION.

MEASLES.

All cases notified to the Department through the schools have been systematically visited by health visitors, and advice as to nursing and general hygiene given where required.

During the year 623 cases were admitted to Little Bromwich Hospital for treatment,

Since the third quarter of 1930 immunisation methods, even though on a restricted scale, have been applied to the attenuation of infection or the prevention of the disease. It is known that the blood serum of a person who has previously suffered from measles, when given intramuscularly to contacts in suitable amount and at a suitable stage in the incubation period, will either prevent the disease occurring, or so modify it as to make the attack a mild one.

It has happily been made possible to augment considerably the supply of serum by the very generous co-operation of the Birmingham Blood Transfusion Service, whose members have kindly come forward to act as donors.

This serum has been given to selected children under five years of age who had been in contact with measles and who were either also acutely ill with some other disease or were in a state of chronic ill-health. In most of the cases the aim was, not to prevent infection, but to attenuate it, thus obtaining life-long immunity without grave disturbance of health. Apart from cases referred by health visitors and general practitioners for such immunisation, some of the voluntary hospitals requested help with a view of *preventing* further cases occurring in their wards where there were children suffering from acute illnesses. Immunisation has been carried out on 413 children during the year with satisfactory results. The inoculations were for prevention in 275 cases and for attenuation in 138. There were 52 deaths registered from the disease during the year.

The number of cases in past years, together with the mortality rate, are set out in the following table.

	Number of Cases*	Number of Deaths.	Death rate per 1,000 of population.
1901-5 (Average)	?	279	.36
1906-10 ,,	?	294	.36
1911-15 ,,	6,027 (1912-	1915) 419	.48
1916-20 ,,	10,773	168	.18
1921-25 ,,	6,831	121	.13
1926-30 ,,	7,464	100	.10
1931-35 ,,	7,504	76	.08
1926	6,980	78	.08
1927	9,032	129	.13
1928	5,030	41	.04
1929	9,764	196	.20
1930	6,512	58	.06
1931	9,745	177	.18
1932	5,033	52	.05
1933	9,011	77	.08
1934	4,967	23	.02
1935	8,765	52	.05

*Partial notification only through schools, except for the years 1916-19.

From the following table it is evident that the death-rate from measles in the Central Wards is far in excess of that for the Middle or the Outer Ring of Wards, owing to the course of the disease and the liability to contract complications being directly influenced by overcrowding and insanitary conditions.

Measles death-rate per 1,000.

			1933,	1934.	1935.
Central Wards	 	 	 .14	.05	.11
Middle Ring	 	 	 .07	.02	.03
Outer Ring	 	 	 .05	.01	.04

The age-distribution of the fatal cases of measles was as follows :---

Under 1 year 1 and under 2 years 2 and under 5 years 5 years and over	 	 ··· ··· ···	 1933. 18 37 16 6	1934. 4 10 4 5	1935. 11 22 13 6
			77	23	52

SCARLET FEVER.

The total number of notifications received during the year for this disease was 3,677. Of these 1,552 were treated in hospital and the remainder, 2,125, were treated at home.

After revision of diagnosis in those cases admitted to hospital, the total number of true cases of scarlet fever treated in hospital was 1,474 and those at home 2,117. Several cases admitted as diphtheria proved to be suffering from scarlet fever.

In addition, there were 23 cases treated in the City Hospital on behalf of other Authorities.

The death-rate of .01 per 1,000 for 1935 is about the same as the average death-rate for this disease for the past 10 years.

	Number of Cases. 1	Case-rate per ,000 population	Number of Deaths	Death-rate per 1,000 population	
1901-05 (Averag	(e) 4,038	5.21	172	.22	4.26
1906-10 "	3,956	4.83	116	.14	2.93
1911-15 ,,	5,456	6.29	125	.14	2.29
1916-20 ,,	2,472	2.73	41	.04	1.66
1921-25 ,,	2,652	2.84	32	.03	1.21
1926-30 ,,	1,910	1.96	9	.01	0.47
1931-35 ,,	2,966	2.90	14	.01	0.47
1926	1,709	1.78	8	.01	0.47
1927	1,510	1.56	8	.01	0.53
1928	1,521	1.56	5	.01	0.33
1929	2,413	2.46	9	.01	0.37
1930	2,397	2.44	15	.02	0.63
1931	2,761	2.73	10	.01	0.36
1932	2,544	2.50	12	.01	0.47
1933	2,639	2.58	20	.02	0.76
1934	3,297	3.21	15	.01	0.45
1935	3,591	3.48	12	01	0.33

SCARLET FEVER CASES AND DEATHS.

The report on cases treated at the Infectious Diseases Hospital will be found on page 65.

WHOOPING COUGH.

Whooping cough caused 66 deaths during 1935. The following table gives the number of cases and deaths in previous years, and it will be seen that both the number of cases and the death-rate were at a higher level than in recent years.

Death-rate

	Number of Cases*	Number of Deaths	per 1,000 Population.
1901-5 (Average)	?	316	.41
1906-10 ,,	?	294	.36
1911-15 ,,	3,264 (191	2-1915) 213	.25
1916-20 ,,	3,592	206	.23
1921-25 ,,	4,463	180	.19
1926-30 ,,	4,443	119	.12
1931-35 ,,	4,130	87	.08
1926	4,895	128	.13
1927	2,496	69	.07
1928	6,463	163	.17
1929	8,847	123	.13
1930	5,012	110	.11
1931	3,990	89	.09
1932	5,248	131	.13
1933	2,143	35	.03
1934	5,896	115	.11
1935	3,375	66	.06
•Da	stial Notification thr	web Schools	

*Partial Notification through Scho

The ages at death were as follows :---

Under 1 year 1 and under 2 years 2 and under 5 years Over 5 years	 	1981. 37 35 13 4	1932. 60 41 23 7	1933. 14 13 6 2	1934. 52 37 24 2	1935. 26 14 24 2
	Totals	89	131	35	115	66
		-				-

Thus 40 out of the 66 deaths occurred among children under two years of age.

Every case of whooping cough reported to the Department is visited, and advice given on hygienic measures. Where appropriate the services of a district nurse are supplied under an arrangement made with the District Nursing Association.

DIPHTHERIA.

The total number of cases notified was 1,674. Of these 1,590 were removed to the City Fever Hospital, the remainder (84) being nursed at home.

Revision of diagnosis took place in 560 of the hospital cases and 1 home case, while 16 cases sent in as scarlet fever proved to be suffering from diphtheria.

After correction, the net number of cases of definite diphtheria belonging to the City was 1,129, of whom 1,046 were treated in hospital and 83 at home.

In addition, there were 206 cases treated in the City Hospital on behalf of other authorities.

DIPHTHERIA CASES AND DEATHS.

	Cases of Clinical Diphtheria.	Case-rate per 1,000 of Population.	Deaths	Death-rate per 1,000 of Population.	Case Mortality per cent.
1901-05 (A	verage) 991	1.28	159	.20	16.0
1906-10	1,210	1.48	149	.18	12.3
1911-15	1,125	1.30	155	.18	13.8
1916-20	1,065	1.19	143	.16	13.4
1921-25	1,651	1.76	109	.12	6.6
1926-30	1,642	1.69	84	.09	5.1
1931-35	871	0.85	60	.06	6.9
1926	1,804	1.88	116	.12	6.4
1927	1,543	1.60	61	.06	4.0
1928	1,552	1.59	70	.07	4.5
1929	1,611	1.64	86	.09	5.3
1930	1,701	1.73	88	.09	5.2
1931	1,171	1.16	62	.06	5.8
1932	620	0.61	35	.03	5.6
1933	417	0.41	33	.03	7.9
1934	1,019	0.99	84	.08	8.2
1935	1,129	1.09	84	.08	7.4

The distribution over the City is indicated in the table below. From this it will be seen that the cases were more numerous in the Central Wards than in the Middle and Outer Ring.

	[St. Paul's 1.76]	
	St. Mary's 1.78	
	Duddeston and Nechells 1.79	
Central Wards		
	St. Martin's and Deritend 1.14	
	Market Hall 1.51	
	Ladywood 1.06	
Middle Ring	$ \left\{ \begin{array}{cccccccccccccccccccccccccccccccccccc$	
	All Saints' 1.13	

1	Soho					1.10
I	Sandwell					0.78
l	Handsworth					0.77
I	Perry Barr					0.76
	Erdington					
	Gravelly Hill					1.07
	Bromford					1.18
	Stechford			***		1.54
₹		•••				1.19 1.89 Average 0.99
1	Yardley Acceler C	***				1.04
ł	Acocks Green					0.75
ł	Hall Green				***	1.20
I	Sparkhill				***	0.21
I	Moseley and Kin	g's He	eath			0.61
ļ	Selly Oak					1.03
I	King's Norton					0.30
l	Northfield					1.85
l	Harborne					1.12
1						
	Whole City					1.09

A report on the cases treated at the Infectious Diseases Hospital will be found on page 65.

DIPHTHERIA ANTI-TOXIN.

Diphtheria anti-toxin is distributed free of charge to medical practitioners for the treatment of their patients and can be obtained from the Public Health Department, the Bacteriological Laboratory and 18 Police Stations.

IMMUNISATION AGAINST DIPHTHERIA.

The work of immunisation continues to make good progress, and 11,720 children were immunised through this department during 1935, together with 1,164 immunised by general practitioners.

There are now approximately 75,000 immunised children and adolescents in the City. The table below shows the various directions in which immunisation has been effected. In order to carry this out the Medical Officer concerned now spends eight sessions a week on diphtheria immunisation, concentrating on the children under eight years of age, since these are the most susceptible to the disease.

						CHILDREN IMMUNISED.		
					Number of Immunisation Centres,	Completely immunised,	Incompletely immunised.	
Council House					1	683	16	
Infant Welfare Cen	tres		******		42	4193	525	
Day Schools					89	5859	230	
Residential Institut	ions and F	Residential	1 Schoo	ols	20	794	-	
Special Schools					13	191	5	
	Totals	*****			165	11720	776	

Renewed proof of the value of immunisation has been afforded during the year. There has been a general increase throughout the country in the incidence of and mortality from diphtheria during 1934 and 1935; and it is significant that in Birmingham this rise has been confined to the unprotected portion of the population only—no death from diphtheria having occurred in an immunised person since the work was started in 1925.

In order to encourage early immunisation, to stimulate the interest of parents and to show that the protective treatment is simple and not painful, a film has been taken at Little Bromwich Fever Hospital, two schools and an Infant Welfare Centre in the City, demonstrating the technique of immunisation at actual clinics. This film has already been shown 126 times, and is available for any suitable meetings.

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Outer Ring

DYSENTERY.

Seventy-four cases of dysentery were notified during the year, most of them occurring in a particular outbreak in two of the residential institutions in the City, 59 being confirmed bacteriologically. Fifteen cases were due to Flexner's bacillus, 43 to B. Sonne, and 1 to B. Friedlander. There were 15 deaths.

FOOD POISONING.

There were 9 cases of food poisoning reported during 1935. Three cases were due to the consumption of a-la-mode beef, the organism involved being the bacillus aertryke. Five cases were due to the consumption of old steak, but bacteriological examination proved negative. The remaining case, a man of 75 years of age, died after the consumption of a pork pie two days old.

ACUTE ANTERIOR POLIOMYELITIS.

Nine cases of this disease were notified, no cases proving fatal. A review of the nine cases some six months after the onset showed that two had completely recovered while improvement was shown in a further five cases. Treatment is being continued in these five cases. The two remaining cases could not be traced as the families had left the district.

POLIOMYELITIS.

			Cases		Complete	Some
Year.			notified.	Died.	recovery.	paralysis,
1917	-		11	2	6	3
1918			4		2	2
1919			14	1	6	7
1920			1		_	
1921			11	4	1	6
1922			6	_	1	5
1923			33	3	1	29
1924			39	5	5	29
1925			11	3	5	3
1926			38	3	3	32
1927			15	ĩ	6	8*
1928			6	1	1	4
1929		*****	6	_	i	5
1930			9	1	3	5
1931			3		1	2
			17		1	
1932	*****	*****	17	6	2	9
1933			10	3	1	6
1934			5		3	2
1935			9†		2	5
1000		Charles March				0

* One died later of intercurrent disease. †Two left district.

POLIO-ENCEPHALITIS.

Two cases of this disease were notified during the year; one died and the other had much improved and is now attending school.

ENCEPHALITIS LETHARGICA.

During the year 28 true cases of this disease came to light in the City, 26 proving fatal. The dates of onset were as follows :----

1914		1
1917		2
1921		2
1922		1
1924		2
1925		4
1926		22
1927	*****	2
1929		2
1930	******	1
1931		1
1932		2
1934		1
1985		5

The cases notified and deaths recorded in previous years have been as follows :---

Year.	Cases.	Deaths.
1919	11	5
1920	18	7
1921	25	8
1922	12	4
1923	29	12
1924	282	44
1925	92	32
1926	89	36
1927	53	32
1928	41	22
1929	27	20
1930	10	7
1931	18	12
1932	23	19
1933	25	21
1934	12	9
1935	- 28	26

CEREBRO-SPINAL FEVER.

Eighteen cases were notified as cerebro-spinal meningitis during the year. Of these, 17 were confirmed bacteriologically. In one case the diagnosis was afterwards revised. Of the 17 actual cases 15 succumbed to the attack, giving a case mortality rate of 88 per cent., and two cases recovered.

Age distribution.			Cases,
Under 1 year		 	 6
1 — 2 years		 	 5
3 — 4 "		 	 3
5 — 9 "	•	 	 1
10 - 14 "		 	 1
15 - 19 ,,		 	 0
20 - 25 ,		 	 1

The cases and deaths in previous years have been as follows :---

Year.	Cases notified.	Deaths.
1920	25	18
1921	9	7
1922	18	16
1923	4	2
1924	11	8
1925	7	6
1926	10	9
1927	12	10
1928	12	9
1929	15	15
1930	14	14
1931	25	21
1932	81	22
1988	26	20
1934	24	20
1935	17	15

REPORT ON THE CITY INFECTIOUS DISEASES HOSPITALS FOR THE YEAR 1935.

(By Dr. JOHN MCGARRITY, Medical Superintendent).

PREFACE.

During the year, 4,410 patients were admitted to the wards compared with 4,506 during 1934; 3,595 during 1933 and 3,996 during 1932. The figure 4,410 includes 241 patients from outside the city, mostly diphtheria.

The following tables give the numbers of cases of the most important infectious diseases and miscellaneous cases notified during the year and admitted to the hospital, and also the numbers who were discharged or died, as well as the numbers remaining in hospital at the end of the year. The figures in these tables have not been corrected as regards their true diagnosis. The revised diagnosis will be found under the report of the different diseases later in the report.

It will be noted that there has been a slight increase in admissions of notified cases of diphtheria, a marked decrease in admissions of the notified cases of scarlet fever and a marked increase in admissions of the miscellaneous cases. The notified diphtheria admissions, 1,796 in all, as compared with 1,551 last year, include 190 patients from outside the city, of whom 133 were true cases of diphtheria; 11 deaths occurred among these 133 cases representing a case mortality of 8.27 per cent. as compared with the hospital mortality for all diphtheria cases of 6.80 per cent. These out-of-boundary diphtheria patients, mostly from Dudley, were on the whole more severe than the cases admitted from Birmingham.

The notified scarlet fever admissions, 1,575 in all, as compared with 2,266 last year, include 18 patients from outside the city. This decrease in the number of scarlet fever admissions was due to the fact that patients suffering from mild scarlet fever were constantly refused in order to admit not only the diphtheria cases but an increasing number of cases of measles and whooping cough.

The miscellaneous cases, 1,039 in all, as compared with 668 last year include 577 cases of measles and 201 cases of whooping cough.

During the year, from February to June, the majority of the new wards were opened for one reason or another, thereby giving relief to overcrowded wards and also allowing us to admit the measles and whooping cough cases: it was also made possible to clear some of the old wards for painting and cleaning. While the new wards have relieved the situation, the proposed new cubicles are more needed than ever in order to avoid cross-infections as far as it is possible to do so. The proposed new cubicle blocks will give us additional accommodation for 156 beds which will be used mainly for double and treble infections and for septic cases of various kinds.

STATISTICS.

(a) DIPHTHERIA. (Uncorrected for diagnosis).

		Little Bromwich.	Witton.	Total.
In hospital on December 31st	, 1934	290		290
Admitted during	1935	1,796		1,796
Discharged during	1935	1,692		1,692
Died during	1935	88		88
Remaining on December 31st	, 1935	306		306

(b) SCARLET FEVER. (Uncorrected for diagnosis).

		Little Bromwich.	Witton.	Total.
In hospital on December 31st,	1934	146	33	179
Admitted during	1935	1,575		1,575
Transfers during	1935	11	20	31
Discharged during	1935	1,552	42	1,594
Transfers during	1935	20	11	31
Died during	1935	11		11
Remaining on December 31st,	1935	149		149

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(c) MISCELLANEOUS. (Uncorrected for diagnosis).

		Little Bromwich,	Witton,	Total.
In hospital on December 3	1st, 1934	16		16
Admitted during	1935	1,039		1.039
Discharged during	1935	909	201 <u>20</u> 1)	909
Died during	1935	89		89
Remaining on December 3	lst, 1935	57		57

(d) MISCELLANEOUS (Uncorrected for diagnosis).

Chickenpox			 	24
Diarrhoea			 	4
Dysentery			 	20
Encephalitis Letha	argica		 	1
Enteric Fever			 	18
Erysipelas			 	119
Measles			 	577
Meningitis			 	5
Miscellaneous Obs	ervation	15	 	8
Mumps			 	12
Pemphigus			 	1
Pneumonia			 	2
Rubella			 	46
Vincent's Angina			 	1
Whooping Cough			 	201

Total 1,039

SCARLET FEVER.

1,575 patients were admitted during the year with a notified diagnosis of scarlet fever; of these, 137 were finally diagnosed as suffering from other complaints, as follows :---

No evidence of	f scar	let feve	r	 	49
Erythema				 	17
Tonsillitis				 	14
Measles				 	12
Rubella				 	21
Diphtheria				 	
Otorrhoea				 	4 4
Chickenpox				 	3
Dermatitis				 	2
Mastoiditis				 	2
Miscellaneous				 	3 2 2 9
				-	
				Total	137

The miscellaneous group consists of one case of each of nephritis, rhinitis, quinsy, adenitis, erysipelas, urticaria, stomatitis, laryngitis, and streptococcal carrier.

Actually 1,496 cases of true scarlet fever were treated in the wards, of whom 50 were notified as diphtheria, 7 as measles and 1 as rubella; 38 had concurrent infections, as follows :---

Scarlet	fever	and	concurrent	diphtheria		 13
Scarlet	fever	and	concurrent	chickenpox		 9
Scarlet	fever	and	concurrent	rubella		 6
Scarlet	fever	and	concurrent	whooping cough		 5
Scarlet	fever	and	concurrent	measles		 2
Scarlet	fever	and	concurrent	mumps		 2
Scarlet	fever,	con	current dipl	otheria and erysig	oelas	 1
						-

Total 38

The type of scarlet fever remains very mild but there were :---

		Total	15
Toxic cases Haemorrhagic cases	 	 	3
Sub-septic cases	 	 	3
Septic cases	 	 	8

The number of deaths attributed to scarlet fever was 11, giving a hospital mortality of 0.7 per cent.

Details of the fatal cases were as follows :---

	Age in years.	Cause of Death.
1.	24	Haemorrhagic scarlet fever.
2.	25	Simple scarlet fever ; mastoidectomy.
3.	13	Simple scarlet fever ; endocarditis.
4.	4	Septic scarlet fever.
5.	31	Simple scarlet fever ; broncho-pneumonia.
6.	31	Septic scarlet fever : broncho-pneumonia.
7.	41	Simple scarlet fever ; mastoidectomy ; streptococcal meningitis.
8.	11	Simple scarlet fever ; mastoidectomy ; septicaemia.
9.	17	Toxic scarlet fever.
10.	9 months	Simple scarlet fever ; broncho-pneumonia.
11.	8	Septic scarlet fever ; suppurative adenitis ; cerebellar abscess.

The principal complications are noted below in two groups-(1) serum treated and (2) non-serum treated.

					n treated 50		nm treated ,146
Principal complications.			Nos.	%	Nos.	%	
Arthritis				6	1.71	19	1.65
Nephritis				4	1.14	16	1.40
Otitis media				27	7.71	66	5.76
Mastoid				7	2.00	9	0.78
Late albuminuria				4	1.14	14	1.22
Late adenitis	***			49	14.00	90	7.85
Fonsillitis				6	1.71	13	1.13
Relapse				13	8.71	11	0.96
Rhinitis				17	4.86	21	1.83
Endocarditis				3	0.85	4	0.34
Myocarditis				5	1.43	4	0.34
Lobar pneumonia				$\frac{2}{2}$	0.57		
Broncho-pneumonia	1			2	0.57	3	0.26
Jaundice						2	0.17
Streptococcal meni	ngitis			1	0.28		-
Cerebellar abscess				1	0.28	-	
Erysipelas				1	0.28	1	0.08
			Totals	148		273	

It should be noted that those cases which received serum were, in the main, more severe on admission. The much higher percentage of relapses in the serum treated group is interesting.
Aį	te grouj	9	0—5	5—10	10-15	15-25	25-45	Over 45	Totals
RECOVERED. Males Females			159 162	272 284	138 216	62 102	25 58	$1 \\ 6$	657 828
DIED. Males Females			1 4		2	1 1		_	4
TOTALS			326	557	356	166	84	7	1496

Table showing age and sex of scarlet fever patients.

Hospital mortality 0.7 per cent.

DIPHTHERIA.

1,796 patients were admitted to the wards with a notified diagnosis of diphtheria. Of these, 628 required revision of diagnosis, and 26 were found to be suffering from diphtheria concurrently with another disease. Actually, 1,177 true cases of diphtheria were treated in the wards during the year, including four patients admitted with a notified diagnosis of scarlet fever, two as measles, one as mumps, one as whooping cough, and one as erysipelas.

Concurrent infections occurred as follows :----

Concurrent di				 14
Concurrent di				 4
		whooping coug	h	 3
Concurrent di				 2
Concurrent di				 1
Concurrent di				 1
Concurrent di	phtheria, sca	rlet fever and n	neasles	 1

Tot	26

Revised diagnosis of 628 patients notified as diphtheria :----

Tonsillitis						306
Carrier of viru	lent e	diphther	ia org	anism		89
No evidence o			0			55
Scarlet fever						50
Laryngitis						36
Quinsy						17
Rhinitis						16
Measles						9
Acute lobar pn	cumo	nia				6
Pharyngitis						6
Otorrhoea						5
Adenitis						4
Whooping cou	gh		111			3
Broncho-pneum	ionia					3
Bronchitis						3
Retro-pharynge	eal al					3
Stomatitis						3
Vincent's angin	na					3
Rubella						2
Chickenpox						
Common cold						22
Thrush						2
Erysipelas						1
Influenza						1
Enteritis						1
					-	

Total 628=35.02 per cent.

Death occurred in five of the above revised cases; two from broncho-pneumonia, one from lobar pneumonia, one from Vincent's angina with chronic myocarditis, and one from streptococcal meningitis following tonsillitis and acute middle ear disease. Table showing types of diphtheria and mortality.

			Total.	Died.	Mortality
			823	26	3.16%
			130	1	0.77%
		*****	139	45	32.37%
			46	5	10.87%
al			5	2	40. 0%
			28	1	3.57%
			2		_
			3		
-	*****	*****	1	—	-
	*****		1177	80	6.80%
	al	al	al	al 28 28 28 28 28 28 28 28 1	$\begin{array}{cccccccccccccccccccccccccccccccccccc$

The above table speaks for itself.

The case classified as having died from nasal diphtheria was suffering from concurrent erysipelas.

21 patients died within 48 hours of admission to hospital. Of these, 11 died within 24 hours of entering hospital. Altogether 80 patients died, representing a hospital mortality of 6.80 per cent.: this is a reduction from last year's figure of 8.04 per cent., and is almost the same as the figure of 6.72 per cent. for 1933.

Table showing case mortality in diphtheria according to the day of disease on which serum was first administered.

Da	y of dis	sease on	which s	erum wa	s given.		Total.	Died.	Mortality.
1st							29	_	-
	******				410.48		211	10	4.74%
2nd 3rd							225	16	4.11%
4th		1000					207	19	9.18%
5th							128	11	8.59%
	ay and						301	24	7.97%
		dose la					44		
No se							32		-
			I	otals	*****	*****	1177	80	6.80%
								and the second sec	

Analysis of the causes of death in the 80 patients in which diphtheria was either the cause of death or a contributory cause.

Circulatory collapse					63
Late respiratory paralysis					9
Laryngeal obstruction and cardiac failure		41110			3
Laryngeal diphtheria with concurrent measles and pneumon	nia			*****	1
Laryngeal diphtheria with broncho-pneumonia					1
Concurrent diphtheria and septic scarlet fever				*****	1
Nasal diphtheria with concurrent erysipelas and marasmus			41110		1
Diphtheria with gangrenous appendicitis and peritonitis		*****	*****		1
		To	tal	41174	80

Total

69

Post-diphtheritic paralysis occurred as follows :----

			Recovered.	Died.
Palatal	 		185	14
Oculo-motor			21	4
Ciliary	 		16	3
Facial	 		16	6
Pharyngeal			23	9
Ptosis	 		3	1
Lower limbs			44	1
Cervical	 		43	7
Diaphragmatic			3	9
		To	tals 354	54

The 354 paralyses noted above occurred in 221 patients, all of whom recovered, giving a paralysis rate of 20.15 per cent., as compared with 20.7 per cent. in 1934 and 20.5 per cent. in 1933.

The 54 paralyses occurred in 14 fatal cases.

LARYNGEAL DIPHTHERIA.

Eighty-one of the diphtheria patients had some laryngeal involvement, and 23 of these required interference for the relief of laryngeal obstruction; 12 were relieved by intubation alone, while 2 required subsequent tracheotomy. One of the cases in which intubation alone was successful died some weeks later from respiratory paralysis.

In four cases tracheotomy was performed without a previous intubation, with success, but one of these died from circulatory failure three weeks later.

The remaining 5 cases died: two of these obtained no relief from either intubation or tracheotomy; two were suffering from concurrent measles and diphtheria, and one had a diphtheritic broncho-pneumonia. One case of laryngitis associated with measles required tracheotomy, which was successful in relieving the condition.

One case of broncho-pneumonia with laryngeal obstruction was intubated and subsequently tracheotomied, but died of the pneumonia.

REACTIONS FOLLOWING SERUM.

Amount of serum adn	ninister	red				0—16,000 units I.M.	24,000 or more I.M.	I.V. or I.M. & I.V.	Totals,
Numbers					-	603	284	258	1145
Urticaria						57	80	108	245
Urticaria and pyrexia						1	1	3	5
Rigor and urticaria								4	4
Rigor			-				_	6	6
Morbilliform rash				*****		2	1	1	4
Urticaria and jaundie	ce	-				-	1	-	1
Tot	als					60	83	122	265
						9.95%	29.22%	47.29%	23.14%

Table showing age and sex of diphtheria patients.

TOTALS		 320	486	209	110	41	11	1177
Females		 16	20	2	2	-	-	40
DIED. Males		 9	24	4	3	_	_	40
Males Females		 178 117	209 233	83 120	32 73	10 31	4 7	516 581
'Age RECOVERED.	group.	0-5	510	10-15	15-25	2545	Over 45	Totals.

Hospital mortality 6.8 per cent.

It will be seen from the above table that 68 per cent. of the total cases and 86 per cent. of the deaths occurred in children under the age of 10 years.

MEASLES.

In all, 577 patients were admitted with a notified diagnosis of measles and of these, 65 required revision of diagnosis, as follows:—

Rubella									28
Rubella, nasal di	phtheria a	and w	hoopi	ng coug	h				1
Diphtheria									1
Scarlet fever and	nasal dip	hther	ia						1
Scarlet fever					*****	*****			7
Broncho-pneumo			ing co	ugh		11114			1
Primary broncho	-pneumon	nia	*****						5
Erythema			*****						3
Urticaria									3
Dermatitis			*****	*****					1
Parotid abscess	*****	*****		*****					1
Otorrhoea			*****	*****	*****	1p			5
Diarrhoea and vo			******			enne	-marcan		1
No evidence of in	ntectious o	lisease	е	21248					1
						Torus			65
						TOTAL		deserve.	05

Actually, 540 true cases of measles were treated in the wards including-

Notified	as	scarlet fever		 	12
Notified	as	diphtheria		 	9
Notified	as	rubella		 	4
Notified	as	whooping cough	1	 	8

Concurrent infections occurred as follows :---

Concurrent measles and whooping cough	1100	-	10.00	14
Concurrent measles and scarlet fever	*****			3
Concurrent measles, scarlet fever and diphtheria				2
Concurrent measles and diphtheria				5
Concurrent measles and carrier of virulent diphtheria	bacillu	15		2
Concurrent measles and dysentery				1
TOTAL			The second s	27

These 27 cases are included in the measles age-sex table.

The principal complications were as follows :---

Onse	ət.						Patients recovered	In Patients d. who died,
Broncho-pneum	ionia b	efore ad	miss	sion			101	31
Broncho-pneum	ionia a	fter adn	nissie	on			7	3
Otitis media be	fore ad	Imission					34	
Otitis media aft							42	1
Enteritis before							23	3
Enteritis after a				4	*****	41114	10	-
Bronchitis							24	
Laryngitis	*****							cluding one intubated).
		arres.		*****			5 (m	cluding one intubated).
Convulsions					*****		1	2
Encephalitis							1	1
Cerebral abscess	s							1
Septicaemia fro	m cell	ulitis						1
Endocarditis							1	
							(a	States of the second
				TOTALS			249	43

The 249 complications mentioned above occurred in 69 patients who recovered.

Of the 540 patients found to be suffering from measles 142 were complicated by pneumonia, and of these, 34 died. In 132 cases pneumonia was present on admission to hospital, and in 10 cases it developed after admission.

77 cases were complicated by otitis media and of these, one died. In 34 cases otorrhoea was present on admission to hospital, and in 43 cases it developed after admission.

37 deaths occurred among the measles patients, the cause of death being :---

Broncho-pneumonia and cone Broncho-pneumonia and cone Broncho-pneumonia and cone		whoop			ough ;	 con-	$25 \\ 2$
current measles	*****	*****	*****	-			1
Broncho-pneumonia and ente							3
Broncho-pneumonia and cone							1
Broncho-pneumonia ; cerebra	1 absco	ess ; sep	tic thr	ombosi	S		1
Broncho-pneumonia and cone	urrent	scarlet	fever	*****	*****	*****	1
Concurrent scarlet fever-une	ompli	cated					1
Encephalitis	-		-				1
Septicaemia from cellulitis		Polas					1
				Тот	AL		37

Table showing age and sex of measles patients.

TOTALS			 59	123	101	73	51	108	14	11	540
DIED. Males Female	 :S		 5 4	10 4	2 5	1		1 3	1	Ξ	20 17
RECOVEREI Males Female	-		 27 23	56 53	46 48	37 35	25 25	55 49	5 8	1 10	252 251
A	ge gr	oup.	0-1	1-2	2-3	3-4	45	5 - 10	10-20	Over 20	Totals.

Hospital mortality 6.8 per cent.

WHOOPING COUGH.

In all, 201 patients were admitted with a notified diagnosis of whooping cough and of these, 15 required revision of diagnosis as follows :---

	ce of whoop	ing c	ough			9
Broncho-pa Bronchitis	neumonia ; diarrhoea	and	vomiting	•••		1
Measles						3
Laryngeal	diphtheria		•••			1
				Т	otal	15
						_

Actually, 191 true cases of whooping cough were treated in the wards including-

		diphtheria	 	3
		measles	 ***	1
Notified	as	dysentery	 	1

Concurrent infections occurred as follows :---

Concurrent w Concurrent w			 x				4
Concurrent v bacillus				virulent	dipht	heria	1
				Тот	AL		6

These 6 cases are included in the whooping cough age-sex table.

The principal complications were as follows :---

	c	nset.				recovered.	In Patients who died.
Broncho-pneum	onia	before a	dmissio	n		 29	19
Broncho-pneum						 3	7
Lobar-pneumon	ia bet	fore adm	nission		#1110 F	 3	
Lobar-pneumon	ia aft	er admi	ssion		*****	 —	-
Convulsions					*****	 2	15
Enteritis before	admi	ission				 4	
Enteritis after a	dmis	sion				 .6	1
Otorrhoea before	e adn	nission			*****	 5	
Otorrhoea after	admi	ssion				 6	_
Tonsillitis	-		-			 9	
Bronchitis befor	e adr	nission				 18	_
Bronchitis after	admi	ission		*****		 4	
Albuminuria						 3	
Empyema						 	1
Gastritis			-			 -	1
						_	
			To	TALS		 92	44

The 92 complications mentioned above occurred in 63 patients who recovered. Of the 191 patients found to be suffering from whooping cough 61 were complicated by pneumonia and of these, 26 died. In 51 cases pneumonia was present on admission to hospital, and in 10 cases pneumonia developed whilst the patient was under treatment.

31 deaths occurred amongst whooping cough patients, the cause of death being :---

Broncho-pneum Broncho-pneum Broncho-pneum	onia	and emp			 			14 1 11
Convulsions	.	"enites			 *****		*****	4
Acute gastritis		-22.4	Anire.	*****	 	*****	*****	-
					TOTAL			31

Table showing age and sex of whooping cough patients.

Age RECOVERED.	group.	0—1	1-2	2-3	3-4	4-5	5—10	10-20	Over 20	Totals,
Males Females		 $\frac{24}{19}$	19 15	$\begin{array}{c} 12\\14\end{array}$	$\begin{array}{c} 10\\10\end{array}$	8 6	8 13	-2	Ξ	81 79
DIED. Males Females		 7 6	3 2	5 5	1		1	-	11	17 14
Totals		 56	39	36	21	15	22	2		191

Hospital mortality 16.2 per cent.

ERYSIPELAS.

In all, 119 patients were admitted with a notified diagnosis of erysipelas, and of these, 6 required revision of diagnosis as follows :----

			Total	6	
Naso-pharyngeal di	phtheria	***		1	
Radium erythema		 		1	
Impetigo		 		1	
Cellulitis		 		3	

Actually, 115 true cases of erysipelas were treated in the wards including-

Notified	as	scarlet fever	 	1
Notified	as	diphtheria	 	1

The site of erysipelas was as follows :---

			Т	otal	115
Generalised		 			2
Trunk	***	 		***	42
Face and limbs		 			1
Face and scalp		 			95
Limbs		 			13

The principal complications were as follows :----

Onset.				tients who covered.	In Patients who died.
Pneumonia				2	3
Pleural effusion				1	_
Laryngitis				1	-
Tonsillitis				1	_
Otorrhoea				4	—
Cervical adenitis				2	-
Suppurative parotiti	s				1
Abscesses				4	
Myocarditis					2
Relapse				4	
					_
		T	otals	19	6
				-	-

The 19 complications mentioned above occurred in 13 patients who recovered.

Two cases admitted with broncho-pneumonia and myocarditis, died. One case admitted with suppurative parotitis developed pneumonia, and died.

 $12\ {\rm deaths}\ {\rm occurred}\ {\rm among}\ {\rm the}\ {\rm erysipelas}\ {\rm patients}\ {\rm of}\ {\rm whom}\ 2\ {\rm had}\ {\rm recovered}\ {\rm from}\ {\rm erysipelas}\ {\rm before}\ {\rm death-}$

		1	FOTAL	 *****	12
Erysipelas healed	(Carcinoma of gall bladder) Buccal epithelioma			 	1
	Peritonitis-ruptured gall bladder			 	1
	Carcinoma of antrum and erysipela	s		 	1
	Broncho-pneumonia and suppurativ	e parot	titis	 	1
	Broncho-pneumonia and myocardit			 11111	2
	Uncomplicated erysipelas			 *****	6

Table showing age and sex of erysipelas patients.

RECOVERED.	Age	group	0—5	5-10	10—15	1525	25—45	Over 45	Totals,
Males Females			11 8	2 3	4	5 10	9 11	19 21	50 53
DIED.									
Males Females			3	=	Ξ	Ξ	$\frac{1}{2}$	2 4	6 6
TOTALS			22	5	4	15	23	46	115

Hospital mortality 10.4 per cent.]

RUBELLA.

46 cases were admitted with a notified diagnosis of rubella and of these, 6 required revision of diagnosis as follows :---

	Total	6
No evidence of infectious disease		1
Scarlet fever		1
Measles and concurrent whooping cough		1
Measles		3

93 cases were finally diagnosed as rubella.

This figure was made up as follows :---

Notified		 		40
	scarlet fever measles			21 29
	diphtheria	 		29
	miscellaneous	on		ĩ
			Total	93

All cases recovered without complications.

Concurrent infection occurred as follows :----

Concurrent rubella and whooping cough	 1
Concurrent rubella ; whooping cough and nasal diphtheria	
Concurrent rubella and measles	

These 3 cases are included in the 93 cases diagnosed as rubella.

CHICKENPOX.

24 cases were admitted with a notified diagnosis of chickenpox and of these, 3 required revision of diagnosis to septic spots: 26 cases were finally diagnosed as chickenpox. This figure was made up of 21 cases notified as chickenpox, 3 cases notified as scarlet fever and 2 notified as diphtheria.

One of the above 26 cases was a carrier of virulent diphtheria bacillus. One case was a fulminant case with very profuse rash and marked septicaemia and toxaemia, and died.

Hospital mortality (1 death) 3.8 per cent.

ENTERIC FEVER.

18 patients were admitted with a notified diagnosis of enteric fever and of these, 7 required revision of diagnosis as follows :----

				Total	7	
No evidence of a carrier	of B.	Typho	sum		1	
Diarrhoea					1	
Chronic appendicitis					1	
Acute tuberculosis					1	
Enteritis					3	

In the 11 cases diagnosed as enteric fever the causative organism was B. Typhosum in 5 cases, of which one died and B. Paratyphosum B. in 6 cases-all of which recovered.

Hospital mortality (1 death) 9.1 per cent.

DYSENTERY.

20 cases were admitted with a notified diagnosis of dysentery and of these, 10 required revision of diagnosis as follows :---

Gastro-enteritis and broncho-pneumonia ... 1 Enteritis 5 Enteritis and concurrent whooping cough ... 1 No evidence of infectious disease ... 3

Total 10

The case of enteritis and whooping cough has been included among the whooping cough cases. All 10 cases diagnosed as dysentery recovered.

DIARRHOEA.

4 cases of diarrhoea were notified and revision of diagnosis to "No evidence of diarrhoea" was required in one case; 6 cases were finally diagnosed as diarrhoea, 3 admitted as such, one notified as measles, one as whooping cough and one as enteric fever.

The causative organism was-

			Total	6	
B. Morgan Undetermined		 		1 3	
B. Sonné	 	 		2	

2 cases died—one of these complicated by bronchitis. Hospital mortality (2 deaths) 33.3 per cent,

MUMPS.

12 cases were notified as suffering from mumps and of these, 4 required revision of diagnosis as follows :----

Adenitis		 		3
Severe faucial	diphtheria			1
			Fota1	4

All the 8 cases finally diagnosed as mumps recovered without complications.

MENINGITIS.

5 cases were admitted with a notified diagnosis of meningitis and all required revision of diagnosis as follows :----

Retropharyngeal abscess. Ethmoiditis and infection of antra. Erythema. Double otitis media. No evidence of disease.

ENCEPHALITIS LETHARGICA.

I case was notified; this died and after a post-mortem the diagnosis was revised to septic lepto meningitis following pneumonia.

PNEUMONIA.

2 cases were notified as suffering from pneumonia and in both cases the diagnosis was confirmed and the patients' recovered. 8 cases were finally diagnosed as primary pneumonias—this figure was made up as follows:—

Notified	as	pneumonia measles whooping	cough	 ···· ···		$\frac{2}{5}$ 1
					Total	8

Hospital mortality (1death) 12.5 per cent.

PEMPHIGUS.

1 case was admitted with a notified diagnosis of pemphigus; the diagnosis was confirmed and the patient recovered. 2 cases were finally diagnosed as pemphigus—one being admitted for observation : both patients recovered.

VINCENT'S ANGINA.

1 case was notified, the diagnosis was confirmed and the patient recovered.

MISCELLANEOUS OBSERVATION.

8 cases were admitted for observation; 1 case died.

Diagnoses were made as follows :---

No evidence of infectious disease							2	
Rubella					*****		1	
Acute anterior poliomyelitis				*****			1	
Broncho-pneumonia; empyema	follow	ving	measles	and	concur	rrent		
whooping cough					and an	-	1	1000
			*****				1 (died).
Suppurative cervical adenitis	*****						1	
Pemphigus acutus				*****			1	
			Тота	L		-	8	

SUMMARY OF MISCELLANEOUS DISEASES.

Di	sease.	P	cases notified.	Diagnosis revised.	Notified as another disease.	Actual number of cases.	Die.1.	Case Mortality.
Measles		 	577	65	28	540	37	6.8%
Whooping (lough	 	201	15	5	191	31	16.2%
Erysipelas		 	119	6	2	115	12	10.4%
Rubella		 	46	6	53	93	-	-
Chickenpox		 	24	3	5	26	1	3.8%
Enteric Fey		 	18	7	_	11	1	9.1%
Dysentery		 	20	10	-	10		-
Diarrhoea		 	4	1	3	6	2	33.3%
Mumps		 	12	4		8		_
Meningitis		 	5	5	-		-	-
Encephalitis			1	1			-	-
Pneumonia		 	2	_	6	8	1	12.5%
Pemphigus		 	ī	_	_	2	-	
Vincent's an		 	i		-	1		
Miscellaneo	us cone		8	4		4	1	-

TOTAL

..... 1,039

OPERATIONS.

Natur	e of opera	tion.	Nu	mber.
Mastoidectomy			 	35
Incisions-Celluliti	s, etc.		 	14
Tonsillectomy and		ctomy		11
Laparotomy			 	9
Rib resection			 	1
Osteotomy			 	2
Miscellaneous			 	10
			Total	82

The miscellaneous cases include minor incisions, removal of nails, application of plasters, etc.

The surgeons made 53 visits to perform the above operations, and they also attended on several occasions when no operations were performed.

LABORATORY.

The following table contains a summary of the work conducted in the hospital Laboratory during 1935 :---

Examinations.					Number.
Specimens for B. diphtheriae (positive)					1,106
Specimens for B. diphtheriae (negative)					2,672
Specimens for Haemolytic streptococci (p	oositiv	e)		erns, *1	79
Specimens for Haemolytic streptococci (r	legativ	ve)			70
Bacteriological examination of faeces					58
Bacteriological examination of blood		41078	-		3
Cytological examination of blood					50
Widal tests on blood	-				3
Bacteriological examination of cerebro-sp	inal f	luid			9
Cytological examination of cerebro-spina	l fluid				9
Chemical examination of cerebro-spinal f	luid				3
Examination of urine qualitative					3,169
Examination of sputum for tubercle baci	lli (po	sitive)			1
Examination of sputum for tubercle baci	lli (ne	gative)			9
Miscellaneous examinations	41114	*****			62
		TOTAL			7,303

STAFF PROPHYLAXIS.

All new members of the nursing and domestic staff were Schick and Dick tested soon after entering the hospital.

Number Schick and Dick tested	 	 	93
Schick positive Acquired immunity after course of prophylactic Left hospital before acquiring immunity One did not acquire immunity after immunisation	 	 	42 34 7 1
Dick positive Acquired immunity after course of prophylactic Left hospital before acquiring immunity Developed scarlet fever before completion of immunisation		 	$35 \\ 25 \\ 4 \\ 6$

One nurse who developed scarlet fever after one dose of scarlet fever prophylactic again developed scarlet fever four weeks after negative Dick test-following full course of immunisation.

One member of the nursing staff developed mild nasal diphtheria after completion of immunisation. The Schick test was still positive after treatment with antitoxin but became negative after a further course of immunisation.

INCIDENCE OF SICKNESS AMONGST THE STAFF.

			Nursing Staff.	Domestic Staff,	Total
Diphtheria	 		1	distant - an <u>an</u> atari	1
Scarlet fever	 		6		6
Measles	 		2	nin	2
Rubella	 		5	and a state of the	5
Mumps	 		1		1
Shingles	 		1		1
Tonsillitis	 		23	3	26
Myocarditis	 		_	1	1
Influenza	 		2	_	2
Catarrhal jau			2	_	2
Pleurodynia	 		1	_	1
Nephritis	 		and a second	_	1
Appendicitis	 		1		1
Cellulitis	 		1	and the second second second	1
Suppurating a			3	1	4
Furunculosis	 		4	-	4
Eczema	 		4		4
Rheumatism	 		1	and the second second	1
Sciatica				1	1
Arthritis	 			2	2
Phlebitis	 *****	*****		1	1
Theorem	 			-	
TOTALS			59	9	68
TOTALS	 *****			9	1000

The health of the staff was, on the whole, very satisfactory. It will be noted that the tonsillitis rate continues to fall, being 23 among the members of the nursing staff during 1935 as compared with 36 during 1934; 37 during 1933, and 67 during 1932 the last year when the nurses were over-crowded in temporary quarters.

DISINFECTION.

The following table gives details of the work done during 1935.

Houses disinfected after smallpox				 	 0
Houses disinfected after scarlet fever				 	 65
Houses disinfected after diphtheria				 	 1,512
Houses disinfected after enteric fever				 	 11
Houses disinfected after tuberculosis				 	 1,582
Houses disinfected after cancer (on request)				 	 77
Houses disinfected after miscellaneous disease	s (or	reques	st)	 	 33
Beds disinfected				 	 2,488
Miscellaneous articles of clothing and bedding				 	 29,871
Library books disinfected				 	 1,783
Public conveyances disinfected				 	 16

REPORT ON TUBERCULOSIS FOR THE YEAR 1935.

(By Dr. G. B. DIXON, Chief Clinical Tuberculosis Officer).

INSTITUTIONS AND ACCOMMODATION PROVIDED.

The Birmingham Public Health Committee maintains a single Dispensary which serves the whole of the City, and in addition they provide 613 beds for the treatment of pulmonary and other forms of tuberculosis, and for the observation and investigation of suspected cases of tuberculosis.

The Anti-Tuberculosis Centre is centrally situated in the city and is open for five days during the week and on Saturdays for half the day. A small number of sessions during the week is reserved for patients attending for treatment, supervision and observation. Most of the sessions during the week are set apart for consultations and examinations. In addition, many consultations and examinations are undertaken at the homes of patients by members of the medical staff. The medical staff of the Dispensary, with one exception, is also responsible for the medical work of the various municipal sanatoria.

YARDLEY GREEN ROAD SANATORIUM :--

Adults : Mal	e: Observation	Beds 10	Total	Grand Total
Aduits . Mai	Treatment, intermediate and	10		
	advanced cases of all forms			
	of tuberculosis	156		
E	ale a Observation		166	
ren	ale: Observation	8		
	mediate cases of all forms			
	of tuberculosis	44		
C1 11 1	01		52	
Children :	Observation Treatment, all stages and for all	18		
	forms of tuberculosis	101		
			119	
				337
WEST HEATH SA				
Adults : Mal	: Advanced and intermediate cases			
For	of pulmonary tuberculosis ale : Ditto	24 96		
I CII	ale: Ditto	50		120
SALTERLEY GRAN	ge Sanatorium :			
Adults : Mal		NY Description of the		
Fam	ale : Ditto	38		
ren	ate: Ditto	30		68
ROMSLEY HILL SA	NATORIUM :			00
Adults : Male	: Early and intermediate cases of			
	pulmonary tuberculosis	57		
Fem	ale: Ditto	31		00
				88
				613

The treatment undertaken in the different sanatoria includes lung collapse by means of artificial pneumothorax, treatment by gold salts, vaccines, etc., etc. In suitable cases other forms of surgical treatment are advised.

At the Yardley Green Road Sanatorium, which is situated $3\frac{1}{2}$ miles from the centre of the city, the patients are housed in eight detached pavilions. The kitchens, domestic stores, nurses' home, and medical officers' apartments, are included in a large central building.

The cooking is undertaken in a central kitchen, and food is conveyed to the four dining halls by means of electric trolleys.

The sanatorium buildings include an administrative office block, in which there is a laboratory. In addition, there are occupational therapy shops, a schoolroom, and three recreation halls, a department for X-ray work, and a section for artificial light treatment, which is used both for inpatients and out-patients.

The clinical blocks at West Heath Sanatorium, which is situated 8 miles from the centre of the city, consist of one pavilion for male cases and four pavilions for female cases, two of which have recently been re-constructed and fitted with large verandahs. There is, in the process of construction, a rest room for female patients and there are two recreation rooms, one for males and one for females. In addition, there is a laboratory, and an occupational therapy shop.

Romsley Hill Sanatorium, which is situated 12 miles from the centre of the city, is a two storey building, and contains a number of cubicles for one, two, three, four and six beds. There are also several wards for ten and eleven beds. In addition, there are two detached pavilions, one containing eight beds and another containing four. There are two recreation rooms, one for men and one for women, and the sanatorium has two occupational therapy shops and a laboratory.

Salterley Grange Sanatorium, situated in the Cotswolds, 40 miles from the centre of the city, consists of a large administrative block containing residential quarters for the staff, and in addition, a kitchen, stores, and dining hall for the patients. There are two recreation rooms for patients, and a laboratory. The accommodation for patients includes forty single bed rooms, eleven rooms accommodating two beds, and two rooms which accommodate three patients.

In addition to the patients in the City Sanatoria, during the year there were 12 adult males, 10 adult females, and 113 children suffering from the non-pulmonary forms of tuberculosis, who were admitted to various hospitals, including the Royal Cripples' Hospitals, Moseley Hall, and the Children's Hospital, etc., for the treatment of non-pulmonary forms of tuberculosis. A grant towards the maintenance of these patients was made by the Public Health Committee.

During the year, the home visits made by the medical staff numbered 1,049. The personal consultations between members of the medical staff and practitioners in the city, during the year was 253, in addition there were 6,302 other consultations with medical practitioners during the year.

Many patients attended at the City Sanatorium, Yardley Green Road as out-patients, for artificial light treatment; during the year under review, the number of attendances for this purpose was 12,158.

Admissions to the Sanatoria are decided upon only after examination at the Centre or at the patients' homes, and the sanatorium to which the patients are sent depends on the condition of the disease, etc. On returning from Sanatoria, patients are re-examined at the Centre, and many old patients who discontinue treatment, are re-examined from time to time,

The Anti-Tuberculosis Scheme includes 36 beds at Yardley Green Road Sanatorium set apart for the purpose of observation and investigation :---

10 are reserved for boys.10 are for adult males.8 are for adult females.8 are for female children.

The provision of these beds facilitates a correct diagnosis, which would in some cases be difficult to arrive at without them.

The scheme is also fortunate in having a large number of beds set apart for the care and treatment of the "hospital" type of case, the male patients being admitted to Yardley Green Road Sanatorium, and the females to West Heath Sanatorium. These beds are essential upon humanitarian grounds, and in addition, are a prophylactic asset in connection with the public health work of the City. For this reason, it is desirable that as large a percentage as possible of the annual deaths occurring in the city from tuberculosis, should take place in beds controlled by the public health department.

During the period under review, there were 817 deaths in the city from all forms of tuberculosis, and of this number no less than 375 or 46 per cent. occurred in beds in the municipal sanatoria and hospitals controlled by the Public Health Committee. A small number of beds is reserved in one of the Municipal Hospitals for tuberculous patients who require obstetric care.

TUBERCULOSIS STATISTICS, 1935.

The notified cases of tuberculosis showed a decrease during the year 1935, the number being 1,213 as compared with 1,398 in the year 1934.

			New Cases	Rate per 1,000	Deaths	Death-rate per 1,000
1901-1905	(Average)	1		-	1,384	1.78
1906-1910					1,235	1.51
1911-1915	12		-		1,307	1.51
1916-1920	,,		3,343	3.73	1,261	1.40
1921-1925			2,060	2.20	1,046	1.12
1926-1930			1,588	1.63	1,016	1.04
1931-1935			1,459	1.43	928	0.91
1922			1,961	2.12	1,049	1.13
1923			2,166	2.32	1,006	1.08
1924			2,129	2.22	1,055	1.10
1925			1,797	1.89	1,083	1.14
1926			1,704	1.78	1,024	1.06
1927			1,607	1.66	1,017	1.05
1928			1,606	1.64	965	0.99
1929			1,538	1.57	1,066	1.09
1930			1,483	1.51	1,008	1.03
1931			1,679	1.66	1,070	1.06
1932			1,517	1.49	954	0.93
1933			1,486	1.45	983	0.96
1934			1,398	1.36	814	0.79
1935			1,213	1.17	817	0.79

The case-rate per 1,000 of the population is the lowest yet recorded and the death-rate equals the lowest yet recorded, that for 1934.

The relative prevalence and mortality from pulmonary and other forms of tuberculosis shown separately is indicated in the two following tables :----

PULMONARY TUBERCULOSIS.

			New Cases	Rate per 1,000	Deaths.	Death-rate per 1,000
1901-1905	(Average	:)		-	1,039	1.84
1906-1910					947	1.16
1911-1915				_	1,057	1.22
1916-1920			2,936	3.27	1,062	1.18
1921-1925			1,739	1.86	903	.96
1926-1930			1,827	1.36	881	.91
1931-1935			1,225	1.20	824	.80
1919			2,704	2.92	1,019	1.10
1920			2,609	2.87	843	.93
1921			1,969	2.15	890	.97
- 1922			1,669	1.80	899	.97
1923			1,785	1.91	860	.92
1924			1,780	1.85	934	.97
1925			1,491	1.57	930	.98
1926			1,421	1.48	905	.94
1927			1,343	1.39	857	.89
1928			1,361	1.39	840	.86
1929			1,270	1.30	918	.94
1930			1,242	1.26	884	.90
1931			1,897	1.38	932	.92
1932			1,266	1.24	849	.83
1933			1,250	1.22	874	.85
1934			1,187	1.15	782	.71
1935			1,023	.99	732	.71

The case-rate per 1,000 of the population is the lowest yet recorded and the death-rate equals the lowest rate yet recorded, that for 1934.

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NON-PULMONARY TUBERCULOSIS.

		New Cases.	Rate per 1,000	Deaths	Death-rate per 1,000
1901-1905	(Average)		Tanta	345	.45
1906-1910		-	-	28)	.35
1911-1915				249	.29
1916-1920		407	.45	199	.22
1921-1925		321	.34	143	.15
1926-1930		260	.27	135	.13
1931-1935		234	.23	104	.10
1919		412	.45	169	.18
1920		365	.40	158	.17
1921		278	.30	145	.16
1922		292	.32	150	.16
1923		381	.41	146	.16
1924		349	.36	121	.13
1925		306	.32	153	.16
1926		283	.30	119	.12
1927		264	.27	160	.17
1928		245	.25	125	.13
1929		268	.27	148	.15
1930		241	.25	124	.13
1931		282	.28	138	.14
1932		251	.25	105	.10
1933		236	.23	109	.11
1934		211	.21	82	.08
1935		190	.18	85	.08

The number notified as suffering from non-pulmonary forms of tuberculosis is the lowest yet recorded and the death-rate equals the lowest rate yet recorded, that for 1934.

The cases notified in 1935 comprise the varieties shown in the next table, which also indicates the number of cases in which information was obtained from the death certificate alone without previous notifications.

The total number of deaths is also shown.

		New Cases Notified in 1935.	Cases not Notified before Death.	Total Deaths.
Pulmonary tuberculosis		1,023	36	732
Tubercular meningitis		17	16	36
Tubercle of the abdomen		26	8	8
Tubercle of the spinal column		25	1	4
Tubercle of the joints		36		3
Disseminated tuberculosis		8	9	24
Tubercle of the glands and othe	er pa	rts 78	4	10

In the following table are shown the numbers of cases of some forms of tuberculosis notified during the year, with the sex and age period at which they occurred.

1935.
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CLASSIFIED ACCORDING TO SEX AND AGE.

TOTALS.	578 445	80	14	29 68
75 up.	4 -	11	11	-11
65—74	18 6	11	11	01
55—64	74 23	11	- 1	- +
4554	97 41	11	- 12	44
3544	92 55	11	- 61	4 0
25—34	102 102	11	60 CA	13
20-24	76 106	11	<i>ლ ლ</i>	10 9
15—19	52 63	11	10 -	60 61
1014	16 12	1 60	1	6 13
5—9	24 23	- 61	- 01	11 18
2-4	17	4 CI	-	22 €
-	40	F3 🕂		eo ei
-0	c1 m	64	11	- 13
	Pulmonary tuberculosis M. F.	Tubercular meningitis M. F.	Tuberculosis of peritoneum M. and intestines F.	Other forms of tuberculosis M. F.

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In the subsequent table are shown the number of notifications and the number of deaths arranged for males and females according to the various age groups, relating to both pulmonary and non-pulmonary forms of tuberculosis :---

TUBERCULOSIS-1935.

				1	Male.	-		nale,
ULMONARY.				Cases,	1	Deaths,	Cases.	Deaths
0—				2		1	3	3
1—				4		3	3	
2_4				17		1	7	-
5-14				40		6	35	8
				128		65	169	83
				194		172	157	125
				171		161	64	60
		*****	*****	18		30	6 .	9
75 and upwa	rds			4		2	1	3
				578		441	445	291
on-Pulmonary.			Cases, Tota Deaths, Tot	l al		1,023 732		
						-	10- 1. B	
0	*****			4		5	4	3 4
0 4	*****		*****	16		10	7	5
5 14		*****		23		10	39	15
15 04				20		2	16	2
95 44				15		6	23	7
45-64				8		6	8	5 15 2 7 6
				-			2	2
75 and upwa	rds			-		1	= - 3	
			-	90		41	100	44
			Cases, Tota Deaths, Tot			190 85		
			Grand Tot	ALS,	Cases Death	1,213 s 817		

The tuberculosis case-rates and death-rates in other towns for all forms of tuberculosis, are given in the following tables :---

TUBERCULOSIS (All Forms).

Comparative Figures in 11 Largest Towns.

		Case-rate per 1,000.	Death-rate per 1,000.
London	 	1.5	0.8
Glasgow	 	2.2	1.1
Birmingham	 	1.2	0.8
Liverpool	 	2.5	1.1
Manchester	 	1.7	1.0
Sheffield	 	2.8	0.8
Leeds	 	1.5	0.9
Edinburgh	 	1.4	0.7
Bristol	 	1.4	0.8
Hull	 	1.5	0.9
Bradford	 	1.1	0.7

It will be seen that Birmingham compares favourably with other great towns.

TABLE VIII.

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CASES OF TUBERCULOSIS NOTIFIED DURING THE YEAR 1935, CLASSIFIED ACCORDING TO WARDS.

87										
CITY	1023	17	26	25	36	78	00			
Not located	10			1		-	1			
Lardley	14		1	-	-	1	1			
Heath Washwood	26		1	61	-	10	1			
Stechford	20	1	-		-	3	1			
Hiddrage	21	-	00	1		61				
Sparkbrook	36	-	1	4	1	63	1			
odo2	36			1		-	1			
faresH llam2	22	1	1	1	-	61	-			
Selly Oak	27	1	61	1	1	00	-			
Hawbne2	6	1	1	-	-	1				
Saltley	23		-	+	61	-	-			
St. Paul's	36	61	-	1		-				
St. Mary's	51	1	-	1	63	3	1			
St. Martin's bestited	57	-	-	1		0				
s'wemolodfrefl	54	1	1	-	00	4	-			
Rotton Park	36	1	1	-	-	4				
Perry Barr	38	1	-	-	-	61	1			
Northfield	21	1	01	1	00	4	1			
King's Heath	16	-	-	1		4	1			
Market Hall	18	-	1	1	-	-				
Lozella	28	-	1	1	1	61	1			
boowybaJ	34	-	-	1	63	-	1			
King's Vorton	28	-	-	1	1	10	1			
Harborne	18		61	1		60	1			
drawsbasH	22	1	1	-		61	1			
Hall Green	29	1	1		1	61	1			
СтатеЛу НіП	26	1	-	1	61	61	1			
notynibr.H	23	1	1	1	1	0	1			
Edgbaston	13	1	1	61	1	c1	1			
and Nechells Duddeston	60	-	1		00	9	-			
Bromford	29	1	1	1	-	1				
Balsall Heath	47	1	1		C3	I	-			
noteA	35	63	-		-	63	1			
'stains IIA	41	1	1	1	1	63	1			
Acock's Green	30	1	0	61	4	1	1			
DISEASE	Pulmonary tuberculosis	Tubercular meningitis	Tuberculosis of peritoneum and intestines	Tuberculosis of spinal column	Tuberculosis of joints	Tuberculosis of other organs	Disseminated tuberculosis			

TUBERCULOSIS IN THE CITY WARDS.

The distribution of cases of tuberculosis over the wards of the City is shown in the next table :

	DISTRIBUTION OF	TUBERC	ULOSIS.	
			e per 1,000 Non-	
		Pulmonary		
	St Paul's	1.07	0.15	1.22
	St. Mary's	1.72	0.27	1.99
	Duddeston and Nechells	1.65	0.30	1.95
Central Wards	St. Bartholomew's	1.66	0.28	1.94 Average 1.59
	St. Martin's & Deritend	1.54	0.14	1.68
	Market Hall	0.82	0.18	1.00
	Ladywood	1.16	0.17	1.33
	(Lozells	0.96	0.14	1.10)
	Aston	1.01	0.18	1.19
	Washwood Heath	0.86	0.20	1.06
	Saltley	0.78	0.31	1.09
	Small Heath	0.75	0.14	0.89
Middle Wards	Sparkbrook	1.18	0.30	1.48 Average 1.18
	Balsall Heath	1.43	0.15	1.58
	Edgbaston	0.48	0.22	0.70
	Rotton Park	1.15	0.19	1.84
	All Saints	1.32	0.06	1.38
	Soho	1.47	0.04	1.51
	Sandwell	0.44	0.10	0.54
	Handsworth	0.85	0.12	0.97
	Perry Barr	0.74	0.13	0.87
	Erdington	0.82	0.18	1.00
	Gravelly Hill	0.85	0.20	1.05
	Bromford	1.07	0.11	1.18
	Stechford	0.85	0.21	1.06
Outer Ding	✓ Yardley	0.54	0.12	0.66 Average 0.96
Outer Ring	Acocks Green	0.86	0.26	1.12
	Hall Green	0.77	0.08	0.85
	Sparkhill	0.64	0.18	0.82
	Moseley & King's Heath	0.42	0.16	0.58
	Selly Óak	0.93	0.24	1.17
	Kings' Norton	0.93	0.23	1.16
	Northfield	0.57	0.25	0.82
	Harborne	0.72	0.20	0.92

The average for the Central Wards shows a definite reduction compared with 1984 and there is also a reduction in the Middle and Outer Ring.

WORK OF THE TUBERCULOSIS VISITORS.

There are ten nurses engaged as tuberculosis visitors in the Department, each having charge of a definite part of the City. It is the duty of these visitors to make enquiry into every notified case of tuberculosis and afterwards to keep in touch by periodical visiting and carry out any aftercare, etc., that may be needed.

Primary visits (to new cases)	 	 1,405
Routine visits (to old and new cases)	 	 19,406
Special visits and re-visits	 	 8,137

At the first visit to new cases, it was found that 671 patients out of the 1,405 were sharing a bed with some other person; while 421 shared a bedroom but had a separate bed. Efforts are always made to get a separate bedroom or if this is out of the question at least a separate bed for every patient. Unfortunately owing to lack of accommodation or unwillingness on the part of the patient, this is not always possible.

It is the duty of these visitors to bring to the notice of the Department every case of overcrowding in relation to pulmonary tuberculosis for representation to the Estates Committee for special treatment if considered advisable by the medical staff.

ACTION UNDER LEGAL ENACTMENTS.

No action was necessary during the year under the Public Health (Prevention of Tuberculosis) Regulations, 1925, relating to Tuberculous employees in the milk trade, nor was section 62 of the Public Health Act, 1925, employed to remove any patient compulsorily to a sanatorium.

DISINFECTION.

The disinfection of 1,584 houses was undertaken during the year where some member of the family had suffered or died from tuberculosis, or changed his or her address.

CARE WORK.

The Anti-Tuberculosis Centre undertakes a considerable amount of care work.

During the year under survey, no less than 125 persons received beds and bedding from the Department either on loan or hire purchase. In addition to this, 28 sleeping chalets were loaned to patients whose garden accommodation and health were such that they could make use of them.

Through the representations of the Care Committee, we were able to obtain better housing accommodation for the families of 76 of our patients, and in 166 cases the Care Committee made grants of clothing and other necessities to our patients and their families.

In addition to this, quite a large number of recommendations on behalf of our patients, were made to the Public Assistance Department and to charitable organizations in the city.

The Care Department has been instrumental in assisting patients or their families to obtain Christmas dinners, suitable treatment for ailments other than tuberculosis, convalescent and dental treatments and grants of food were made to 106 patients.

The close intercommunication existing between the Tuberculosis Section and the School Medical Officer's Department and the Infant Welfare Medical Officer has provided opportunities for the Care Committee to function in a wider sphere than would have been possible otherwise.

ANTI-TUBERCULOSIS CENTRE.

ATTENDANCES AND EXAMINATIONS.

The total number of attendances at the Anti-Tuberculosis Centre during the year 1935, made by patients for the purpose of diagnosis, consultation, observation, advice and treatment, was 34,465.

This total is made up of 3,479 attendances for supervision, observation and advice; 8,714 attendances for examination; 8,000 attendances for X-ray examination; and 14,272 attendances in the artificial light department. The X-ray work included 5,912 screen examinations, and 2,088 films.

Attendances for supervision, observat Attendances for consultation and exa Attendances for light treatment		tment	 ··· ···	 	$^{3,479}_{8,714}$
Yardley Green Road Sanatori	um		 	 	12,158
151, Great Charles Street		 	 	 	2,114
X-Ray examinations (screen)		 	 	 ***	5,912
X-Ray examination (film)		 	 	 	2,088
					34,465

During the year 1935, some 1,023 new cases of pulmonary tuberculosis were notified to the Medical Officer of Health, and of this number 930 or 90.9 per cent. were examined at the Centre. There were also 190 cases of non-pulmonary tuberculosis notified during the year, of which 131 or 68.9 per cent. were examined at the Centre.

The number of patients on the Dispensary Register on 1st January was 5,262; the number of persons transferred to other areas during the year, and the cases "lost sight of" numbered 221, the number transferred to us from other areas and the "lost sight of" cases returned was 82.

At the end of the year 948 insured persons were receiving domiciliary treatment at the recommendation of the medical staff.

TREATMENT RECOMMENDED.

In the following table are set out treatments recommended to patients examined at the Anti-Tuberculosis Centre during the year.

		Fir	st Examinat	tions,	Re-examinations,		
		Newly notified.	Contacts.	Suspects.	Old Cases.	Suspects or Contacts.	
Sanatorium treatment	 	 518	77	242	407	10	
Dispensary treatment	 	 3	2	3	16		
Supervision	 	 13		7	979	5	
Out-patient light treatment		 8	1	1	20	1	
Domiciliary treatment	 	 120	8	50	1,512	-	
No treatment required	 	 219	1,073	1,290	407	670	
		881	1,161	1,593	3,341	686	

The table above shows that a large percentage of new cases notified during the year received a primary period of Sanatorium treatment. This is an advantage to the patient inasmuch as his physical condition is benefited, and he acquires practical experience of the treatment which it would be to his advantage to carry out in a modified form in his own home afterwards.

CLASSIFICATION OF PATIENTS ACCORDING TO GROUP OF DISEASE.

The following tables show the classification of the patients examined according to Group of disease; adults and children are shown separately.

ADULTS.

				First Examinations.			Re-examinations.		
				Newly notified.	Contacts.	Suspects.	Old Cases.	Suspects or Contacts.	
Group I			 	 59	12	61	557	2	
Group II			 	 236	28	109	1,499	1	
Group III			 	 234	7	80	535	-	
Group IV			 	 69	1	12	44		
No Treatmen	t require	ed	 	 175	367	933	168	179	
				778	415	1,195	2,803	182	

CHILDREN.

				Firs	t Examinat	ions.	Re-examinations.		
				Newly notified.	Contacts.	Suspects.	Old Cases.	Suspects or Contacts	
Group I			 	 11	56	12	271	9	
Group II			 	 7	5	6	82	1	
Group III			 	 3	8	1	11		
Group IV			 	 35	4	10	24	1	
No Treatment	t requi	red		 52	678	369	150	493	
				108	746	398	538	504	

In certain instances patients included in the various groups are suffering from other forms of tuberculosis in addition to pulmonary, but for convenience are classified as pulmonary cases when that type of the disease is present in association with other types.

In the succeeding tables are set out briefly some details of those who were referred to us as contacts and suspects. Amongst those classified here as suspects are many who had been living in contact with known cases of tuberculosis, and who were, therefore, possibly referred to us mainly for this reason only.

The contacts have been divided into various groups, and they have also been arranged to show the numbers in each group that came from homes where there had been contact with patients suffering from tuberculosis associated with a positive sputum.

SUSPECTS EXAMINED DURING THE YEAR 1935.

Total-1,593.

Definitely tuberculous	 	 	 291
No signs of tuberculosis	 	 	 1,302

CONTACTS EXAMINED DURING THE YEAR 1935.

Ages.	Found to be suffering from Tuberculosis.	Found <u>not to be</u> suffering from Tuberculosis.	Totals,
0 to 5 years. Contacts to patients with sputum containing			
tubersle basilli	16 or 8.2%	180 or 91.8%	196
Contacts to patients with negative sputum	7 or 8.0%	81 or 92%	88
6 to 10 years.			
Contacts to patients with sputum containing			
tubercle bacilli	13 or 7.8%	154 or 92.2%	167
Contacts to patients with negative sputum	6 or 6.6%	85 or 93.4%	91
11 to 15 years.	and the second second second	and and and a	
Contacts to patients with sputum containing tubercle bacilli	3 or 1.9%	162 or 98.1%	165
Contacts to patients with negative sputum	2 or 3.4%	56 or 96.6%	58
16 years and over.			
Contacts to patients with sputum containing		800	
tubercle bacilli	27 or 10.3%	234 or 89.7%	261
Contacts to patients with negative spulum	10 or 7.4%	125 or 92.6%	135
Grand Total	s 84 or 7.2%	1,077 or 92.8%	1,161
	And and the other design of the other design o	and the second data in the second data and the	

The Mantoux Test, an intra-dermal tuberculin test, has been largely used for some years past on most children of 10 years and under coming to the Centre for examination whether as "notified", "suspect" or "contact" cases. A positive result indicates that the patient has been infected with tuberculosis, but a negative result is of greater value, because, in the majority of instances it eliminates infection and therefore disease (tuberculosis). During the year under review 732 children were tested with tuberculin at the Centre of which 372 gave a positive result and 360 a negative result. This does not include children dealt with in the Sanatorium. "Contacts," "Suspects" and "Notified Cases."

In the graph below are shown the number of "contacts" and "suspects" and "notified cases" examined over a series of years.



The work of the Tuberculosis Department is greatly facilitated when patients in the General Hospitals (voluntary and municipal) who are suffering from tuberculosis, are advised to apply to us for further treatment, and for the examination of their families as "contacts".

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Unless the patient realises that he is suffering from tuberculosis when he leaves the hospital, he is sometimes disinclined to accept further treatment in a sanatorium, because he imagines the time spent in the hospital is all the treatment he is likely to require.

During the past year 279 notifications of tuberculosis were received from the Municipal and Public Assistance Hospitals, having an aggregate number of beds equivalent to 4,412. Of this number, 83 were acutely ill and could not be examined for a variety of reasons. 196 were examined and of this number 21 refused treatment, 143 were admitted to Sanatoria and 32 were recommended for treatment other than Sanatorium.

FAMILY HISTORY.

A survey of the family history has been made of 1,053 patients examined who were definitely tuberculous, and the results are shown in the following tables :---

ADULTS.

No family history of tube	culosis			Newly Notified. 502 or 81.7%	Suspects. 216 or 78.2%	Contacts with Definite Disease,
no mining mistory or cube	- curosis			002 01 01.7 /0	aro or 70.a /0	
Father suffering or suffered	d from	tubercu	alosis	21 or 18.8%	11 or 18.3%	5 or 12.9%
Mother ditto				8 or 7.1%	8 or 13.3%	4 or 10.2%
Brother or sister				32 or 28.5%	21 or 35%	8 or 20.5%
1 Relative other than ab	ove, sc	hool f:	llow			
or intimate friend				30 or 26.8%	11 or 18.3%	12 or 30.8%
Two or more relatives				21 or 18.8%	9 or 15%	10 or 25.6%
TOTAL				112	60	39

CHILDREN.

No family history of tuberc	ulosis			Newly Notified. 35 or 71.4%	Suspects. 19 or 65.5%	Contacts with Definite Disease.
Father suffering or suffered i	from t	tubercu	losis	2 or 14.3%	2 or 20%	23 or 50%
Mother ditto				3 or 21.5%	3 or 30%	10 or 21.7%
Brother or sister ditto				4 or 28.5%		6 or 13%
1 Relative other than above	ve, scl	hool fe	llow			10
or intimate friend				4 or 28.5%	1 or 10%	3 or 6.5%
Two or more relatives				1 or 7.1%	4 or 40%	4 or 8.7%
TOTAL				14	10	46

DENTAL TREATMENT.

CONDITION OF TEETH AND GUMS.

		eeth with chambers.		icatory power rs and bicuspi		4	state of Gun	ns.
None.	I to 4.	More than 4.	Six or More,	Less than 6	None.	Healthy	Gingivitis	Pyorrhoea.
2,465	2,222	272	3,626	846	723	4,071	483	405

LABORATORY WORK.

A very large number of sputum examinations is undertaken during the year on behalf of persons who are referred for an opinion. If the first examination gives a negative result, subsequent and repeated specimens are examined.

As soon as a patient is referred for examination, a sputum outfit, with instructions and a request for its early return, is posted. Amongst the new adult patients examined for the first time during the year, in whom a definite diagnosis of pulmonary tuberculosis was made, i.e., 826, there were 542 or 65.6 per cent. who presented tubercle bacilli in their sputum. Amongst the total number of children primarily examined in whom a definite diagnosis of pulmonary tuberculosis was made, i.e. 104, there were 9 or 8.6 per cent. who presented tubercle bacilli in their sputum.

The difficulty of obtaining sputum from children, even when it exists, is recognised, so all children, whether admitted to sanatorium for observation or treatment, have the faeces and a gastric lavage examined for acid fast bacilli, they are also submitted to a Mantoux tuberculin test. All adult patients who enter the observation pavilions have a blood sedimentation test undertaken and have the faeces examined for acid fast bacilli in addition, when sputum is persistently negative or cannot be procured.

At the Centre during the year 4,910 specimens of sputum were examined, and 62 other specimens were also examined. At Yardley Green Road Sanatorium 6,080 specimens of sputum were examined during the year. Romsley Hill Sanatorium records show that 1,075 specimens of sputum were examined during the year, and at West Heath Sanatorium 1,350 specimens of sputum were examined. Salterley Grange Sanatorium returns show that 850 specimens of sputum were examined during the year.

If sputum is not procurable, or if it is repeatedly negative for tubercle bacilli, faeces should be examined for acid and alcohol fast bacilli; the results obtained are often helpful.

In a series of 2,276 examinations of faeces for tubercle bacilli from patients in a sanatorium, some admitted for treatment, others for observation, either with no sputum, or a sputum that was repeatedly negative for tubercle bacilli, seventy-eight or 3.4 per cent. were found to contain acid and alcohol fast bacilli. In twenty-five of these cases no sputum was available whilst the patient remained in sanatorium, in four cases the sputum was persistently negative for tubercle bacilli, and in the remaining forty-nine patients tubercle bacilli were eventually found in the sputum, in every instance on dates subsequent to their discovery in the faeces, examinations of the sputum having been continued at weekly intervals for periods varying between one and ten weeks prior to their discovery. Of the seventy-eight patients quoted, twenty-five came to us as contact cases, twenty-four as suspects, and twenty-nine were grouped cases of pulmonary tuberculosis.

In no instance were faeces examined before the patient had been in residence for at least one week, during which the only milk consumed by the patient was pasteurised. In none of these patients were signs or symptoms present suggesting the presence of tuberculosis in the digestive tract.

In children under 10 years of age, who rarely expectorate, sputum for examination is difficult to obtain. To meet this, the contents of a stomach lavage, taken first thing in the morning from a fasting stomach, may be investigated for acid fast bacilli. Whether or not these are found on smear examination alone, some of the centrifuged deposit should be injected into a guinea-pig to confirm or refute that the organisms are tubercle bacilli. Tabulated below are the results of an examination for tubercle bacilli of five-hundred stomach washes from children of 0-10 years of age. Two-hundred-and-twenty-six of the children were contacts, one hundred and eighty-seven were suspects, and eighty-seven were referred to us as notified cases of tuberculosis.

STOMACH	WASHES	FROM 5	00 Сни	LDREN AGEI	0-10	YEARS.
Dost	TIVE DE	CULTE 1	EOP TI	INFRATE RA	CHILI	

		Notified Cases.	Suspect Cases.	Contact Cases.	TOTALS.
Ages 0 to 3 years	 	 2	3	5	10
Ages 4 to 6 years	 	 3	2	12	17
Ages 7 to 10 years	 	 1	3	7	11
		6	8	24	38

It will be seen that tubercle bacilli were found in thirty-eight or 7.6 per cent, and were absent in four-hundred-and-sixty-two or 92.4 per cent, of the washes. In three instances only were tubercle bacilli found after smear examination alone, subsequently confirmed by guinea-pig injection; in the remaining thirty-five washes tubercle bacilli were not found on smears examination, being demonstrated only after guinea-pig injection. Six of the children who gave a positive stomach wash were referred to us as notified cases, eight as suspects, and twenty-four were contacts to patients suffering from pulmonary tuberculosis.

In every instance these children gave a positive reaction to an intradermal tuberculin test.

These figures suggest the desirability of careful investigation for every child contact, and indicate the need for a higher standard of examination than has been generally undertaken in the past, if disease is not to go unrecognised.

They make one suspicious too that certain infants and young children suffering from the socalled benign forms of intra-thoracic tuberculosis may be foci of infection, requiring segregation if other children in the household are to be protected from infection.

COMPLETED CASES.

During the year, 2,087 patients completed a course of treatment, or supervision, etc., at the Centre, of whom 1,686 were adults and 401 were children.

In the next table the working capacity at the commencement and at the end of a completed period of treatment is given for those patients who were examined during the year. The Group of disease quoted was determined at the first examination.

WORKING CA	APACITY O	F PATIENTS	ATTENDING	CENTRE
------------	-----------	------------	-----------	--------

		OUP I.	GROU		GROU		GROU	
	Adults	. Children.	Adults	Children	Adults	Children	Adults	Child- ren.
Unimpaired working capacity becoming impaired	. 2	1		-	-		3	5
Impaired capacity for work becoming unimpaired	. 213	150	187	36	19	1	36	56
Impaired capacity becoming totally incapacitate	d 5	1	42	3	20	-	1	-
Impaired capacity for work persisting	. 151	52	485	16	128		34	32
Total incapacity becoming impaired	. 29	1	100	6	76	1	19	7
Total incapacity becoming unimpaired	. 15	5	38	5	13	3	13	14
Total incapacity persisting	. 4	1	19	2	29	3	5	-
	419	211	871	68	285	8	111	114

In the following tables are set out, as briefly as possible, the main points in connection with an investigation undertaken to ascertain the conditions of those past patients who received treatment at the Centre in the years 1913-1985 inclusive. PRESENT CONDITION OF PATIENTS TREATED IN PREVIOUS YEARS SHOWING CONDITION OF THOSE WHO WERE TREATED FOR PULMONARY TUBERCULOSIS.

1	plus	T.B. plus) T.B. plus)	12	4	-	64	4	1	125	01	-	1	36	330	214	=	284	219
	T.B. pl	Croup 3	1	-	1	00	2	1	16	1	1	1	00	148	106	8	268 5	284 7
1930	Class T.	Group 2	8	01	-	43	28	1	83	1	-	1	53	173	66	10	301 2	383 2
	Cle	I quorð	4	-	1	13	6	1	27	04	1	1	10	6		1	13	52 3
		Class T.B. minus.	24	26	26	4	25	26	121	00	4	-	45	44	47	-	159	330
	plus.	Total (Class T B. plus)	15	9	-	39	40	10	103	6	10	1	60	357	228	-	663	766
1929	B. pl	Group 3	-	-	1	00	3	1	10	1	-	1	00	168	107	s	289	299
19	Class T.	Group 2	0	C-8	-	25	30	1	57	63	3	1	41	168	106	-	321	378
	G	Group I	10	00	1	6	17	C1	36	4	-	1	=	21	15	-	53	88
101		Class T.B. minus.	20	13	29	16	30	27	135	26	00	29	46	49	34	00	200	335
EC.	plus	Total (Class T.B. plus)	9	9	1	31	31	~	76	4	-	-	4	349	218	10	633	709
89	m.	Group 3	1	1	1	61	C3	1	4	1	8	1	12	161	102	00	286	290
1928	Class T	Group 2	+	4	1	53	23	-	55	-	3	-	53	173	107	61	310	365
	5	Group 1	61	c1	1	9	9	-	11	8	-	1	6	15	6		37	54
		Class T.B. minus	10	80	16	23	16	21	94	13	14	19	55	47	30	8	184	278
	plus	Total (Class Total (Class	13	3	-	33	15	01	20	-	10	-	26	350	207	6	605	675
1927	B	Group 3	-	1	1	.00	-	1	10	-		1	01	177	118	8	304	309
19	Class T	Group 2	10	61	1	28	14	-	56	so.	3	1	16	160	84	01	270	326
	0	I quoið	61	-	1	10	1	-	6	-	61	-	00	13	10	-	31	4
		Class T.B. minus	80	10	33	10	14	28	103	19	15	38	45	46	59	6	231	334
	plus	Total (Class T.B. plus)	9	4		26	28	-	65	4	2	1	25	328	220	10	594	659
1926	T.B.	Group 3	-	1	1	0	-	1	13	1	-	-	-	186	123	2	324	337
19	Class '	Group 2	10	3	1	61	15	1	43	0	10	-	17	127	6	¢1	244	286
	0	T.B. minus Group I	1	-	-	01	8	-	10	-	-		-	15	-	-	58	36
_		Class	12	10	18	1 16	17	-	8	25	42	31	68	7 62	2 73	15	8 114	394
	sn	Total (Class T.B. plus)	68	27	+	127	79	10	310	527	338	74	641	2,397	1,112	69	5,15	5,46
1926	B. pl	Group 3	13	2	4	52	41	-	118	96	57	15	196	1,449	733	46	2,592	2,710
us to	Class T.B. plus	Group 2	39	14	1	64	31	*	152	257	164	24	268	786	318	21	1,829 2,592 5,158	1,981 2,710 5,465
Previous to 1926	0	I quord	16	9	1	11	7	1	0	174	117	35	177	162	61	11	737	177
-	-	Class TB, minus.	117	110	146	46	64	42	525	,642	1,802	2,004	,854	887	644	178	110%	1,536
			M.	ц.	g	M.	F.	e	ter	M.	H.	1	ise	M.	14 ·			:
-	-	r to	etiu	PV	Children	stin	PV	Children	Register	stiut	v	Children	otherwise Register	salu	PV	Children	Dispensary	:
		yea. ates.	-		-										-		Di	-
	1	n rel					+		an Dispensary at 31st December		SI		of, or o Dispensary				ten off Register	:
		uring retur		sted			Disease not		Dis 31st		Discharged as Recovered				pe		written Reg	:
		de de de		Disease			Disease no		at 3		Record		sight d from		Dead		WT	51
		tion at the time of the I made during the yes which the return relates.					H		Total		D		Lost sight removed from				Total	TOTA
	ALC: NOT	condution at the time of the last record made during the year to which the return relates.																GRAND TOTALS
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PRESENT CONDITION OF PATIENTS TREATED IN PREVIOUS YEARS SHOWING CONDITION OF THOSE WHO WERE TREATED FOR PULMONARY TUBERCULOSIS.

L	1	(suld .H.T	1.	1,	1.	1+	1.	10	1 -	1.	1.	1.	1	16	20	01	1 0	1 -
	plus	rotal (Class		1	1	214	9 170	-	168 /		11	1	-	1	-	01	3 160	0 551
0.00	B	E anos	1	11	11	77	49	-	127		11	1	-	72	42		123	250
1	Class T	Group 2		1	1	126	106	0	235			1	10	19	00		37	272
	0	Group 1	1	11	1	=	15	3	59		1	1	1	1	1	1	1	29
_		Class T.B. minus	1	1	1	132	106	84	322	1	1	1	15	18	21	3	57	379
	plus	Total (Class T.B. plus)	1	1	1	194	127	=	332		1	1	33	175	102	1-	317	649
	B	6 quord	1	1	1	48	35	1	83	J.	1	1	11	119	67	3	200	283
102	Class T	Group 2	1	1	1	123	76	-	200	1	1	1	18	55	32	-	601	309
	C	Group 1	1	1	1	23	16	10	49	1	1	1	. 4	-	3	1	00	57
		Class T.B. minus	1	1	1	011	93	86	588	1	1	1	36	24	29	10	16	383
	plus,	Total (Class T.B. plus)	1	3	1	150	108	5	266	1	1	1	37	246	150	11	444	710
	B. pl	Group 3	I	1	1	40	24	1	64	1	1	1	15	:62	83	-	256	320
0.0.0	Class T.	Group 2	1	01	1	95	11	1	168	1	1	1	53	83	59	1-	172	340
	Cla	Group I	1	-	1	15	13	10	34	1	1	1	1-	-	00	1	16	50
	T	Class T.B. minus	4	1	1	78	76	67	225	1	1	1	36	38	37	04	113	338
	plus	T.B. plus) T.B. plus)	01	10	0	112	73	4	661	1	1	1	44	274	206	12	536	735
	B. pl	Group 3	-	1	1	17	6	1	27	1	1	1	6	160	115	00	292	319
1020	3 H	Group 2	-	-	1	84	53	-	140	1	1	1	28	108	81	3	220	360
	Class	Group I	1	4	0	11	11	3	32	1	1	1	5	9	10	1	134	56
	T	Class T.B. minus	53	20	12	62	57	48	221	1	1	1	53	39	32	+	97	318
	1 00	T.B. plus) T.B. plus)	13	=	-	81	58	-12	168	1	1	1	47	331	223	6	610	778
	.B. plus	Croup 3	-	-	1	12	6	1	24	1	1	1	6	121	125	-	309	333
0.21	H	Croup 2	-	4	-	59	38	1	110	1	1	1	32	54 1	89	ŝ	280	390
	Class	Group 1	s	9	1	10	11	04	34	1	1	1	9	6	6	1	13	55 3
	T	Class T.B. minus	20	22	26	38	48	83	217	1	T	T	44	49	41	11	145	362
	-		Ti.	F.	en	M.	F.	n		M.	E.	en	9	M.	F.	en		:
		# 0	Carm		Children	cam	DUZ	Children	Register	Camp		Children	otherwise Register.	-	Inte	Children	Dispensary	
		be lar ear t es	stin	PV	0	stin	PV	0	Boer	stint	~	0	y Rep	stic	-pv	0	Dispe	:
		litton at the time of the ed made during the year which the return relates						-	n Dispensary at 31st December				or					:
		turn		00			not		st Do		d as		of, Dispe				6.6	:
		dur be re		Disease			Disease not arrested		a 1 it 31:		Discharged as Recovered		ht		Dead		written Re	
		made sch d		e e			Dis		Ŭ		Discl		sight ved fron					p
		condition at the time of the last record made during the year to which the return relates							Total				Lost sight of, or otherwis removed from Dispensary Register.				Total	LOTAL
		- 10 C	er.	qua	Dec	1sIE uo	uo	Tota		tuo	11919	1 1 (FP	exoura	t 10]	suos	rear	pue	GRAND TOTALS
1			I AI	esua	qeiQ	uo	20	inis	Rem	rote	Regi	An	esuədsi	Di Di	10 1	TOT	JoN	GRI

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PRESENT CONDITION OF PATIENTS TREATED IN PREVIOUS YEARS SHOWING CONDITION OF THOSE WHO WERE TREATED FOR NON-PULMONARY TUBERCULOSIS.

Pa	Condition at the time of the last record made during the year to which the return relates. Bones and Joints	ntts	F. 3	Children 2	atini M. 2	4 F. 6	Children 4	Dispensary Register	Transferred to Pulmonary 5	stiul	Discharged as $\overrightarrow{\leftarrow}$ F. 7	6	of, or otherwise Dispensary Register 8 1	ults M. 14	Ad F. 10	Children 7	en off Dispensary Register 66 4	GRAND TOTALS 83 5
revious	Other Organs		1	3	-	1	1	4	e0	8	64	61	11	01	61	1	49 2	53 3
Previous to 1926	Peripheral Glands		-	1	1	-	4	6 15	-	61	00	7 5	7 1	+	-	-	25 94	31 109
26	IntoT		1	7 12	1	1 8	5 13	5 42	6 15	4 23	8 20	59 94	17 43	1 21	3 16	2 17	4 234	9 276
	Bones and Joints	0	-		-	3	9 6	14		*	1	6 +	3 8	8	64	-	4 29	43
	IsnimobdA	1	1	1	1	1	-	00	-	-	1	01	3	01	1	01	10	13
1926	Other Organs	1	-	1	-	3	1	w.	-	1	1	1	-	1	-	1	3	00
	Peripheral Glands	1	-	01	-	1	-	- 00	3	-	3	33	6.1	1	1	-	29	37 1
	LetoT b	3	-+	04	03	2	II	96	w	9	3	34	14	00	3	0	12	101
	loints	1	01	1	+	3	10	14	6	9	3	4		5	-	1	22	36 2
19	LenimobdA	-	-	01		1		60	64	-	00	10	I	-	-	3	18	21
927	Other Organs	1	1	-	-		-	3	-	+	04	-	0	11	-		-	10 18
	Clands	1	01	2	1 6	5 10	3 9	31	1 7	. 6	- 13	6 16	9	9	-	3	7 54	85
	Bones and Joints	-	01	-	-	1	3	00	-	3	3	4	-	-	1	-	19	27
	InnimobdA	1	1	-	1	1	C4	0	-	64	1	-	60	-	1	-	12	15
1928	Other Organs	1	1	-	-	-	1	3	-	61	-	1	1	01	-	1	00	=
	Peripheral Clands	-	-	3	1	1	+	0	1	-	-	П	6	-	-	1	24	33
T	IstoT	01	00	9	01	-	6	53		00	w	21	14	=	08	61	63	86
	Bones and Joints	01	T	10	1	4	10	58	-	0	+	6	9	-	1	3	29	57
19	InnimobdA	1	1	01	1	1	0	10	01	01	61	10	3	01	04	0	19	24
929	Other Organs Peripheral	-		1	-	01	-		0		04	-		1	1	0	11 16	16 32
	Glands,		H	5 12	1	3	8 22	16 54	0		2 10	9 24	4 15	1	1	1 9	3 75	129
-	Bones and	0	1	-	00	6		4 16	00	10		4	-	8	4	1	5 18	34
	saniol InnimobdA	-	-	10	10	01	3	00	C4		64	3	3	-	-	-	-	10
19	Other Organs		1	1	61	3	0	00	1	0	-	-	01	-	-	-	101	a a
030	Peripheral Bands	1	3	6	65	1	3	18	~	01	01	2	-	1	1	0	51	30

PRESENT CONDITION OF PATIENTS TREATED IN PREVIOUS YEARS SHOWING CONDITION OF THOSE WHO WERE TREATED FOR NON-PULMONARY TUBERCULOSIS.

19	Condition at the time of the last record made during the year to which the return relates Joints Joints Other Organs		Disease da F. 2	Children 5 4 -	M. 11 -	Disease not A F. 7 3	Arrested Children 15 3	Dispensary Register 41 12	Transferred to Pulmonary 4 3	2 M 2 -	Discharged as A F 1	recovered Children I	Lost sight of, or otherwise 3 5 removed from Dispensary Register 3	Its N. 3	Dead Ad F. I 2 -	Children 5 2 -	written off Dispensary 15 10	GRAND TOTALS 56 22 1
168	Total Total	8	- 1 3	- 9 18	2 3 16	1 1 12	2 8 28	5 22 80	1	1	1 2	- 4	3 10 21	1 1	1	-	5 18 48	10 40 128
	Joints Joints	10	3	01	10	2 13	8 13	38	1 20	01	1	5 1	9	5 6	3 1	8 4	20	58
1932	Abdominal Other Organs	-	-	1 1	5 6	5 1	23	15 11	-	1	1	1	3 1	3 3	1 1	1	10	22 16
53	Peripheral Glands	1	-	01	4	10	6	21	-	1	1	1	61	1	-	-	4	25
	Total Bones and Joints	3 1	08	6 3	20 15	24 16	27 30	85 67	4	01	1	-	12 5	12 20	4	5 1	36 8	121 75
	IsnimobdA	1	1	1	1	10	-	17	1	1	1	1	1	1	-	1	-	18
1933	Peripheral Peripheral	1	1	1	3	9	4	13	61	1	1	1	69	-	c1	1	9	19
	Total Glands	-	1 3	10	5 23	9 41	14 55	31 128	3 10			-	2 10	3	- 3	-	2 17	33 145
	Bones and Joints	1	1	4	16	16	16	25	61	1	1	1	60	01	61	1	-	59
	InnimobdA	1	-	1	61	9	4	13	1	1	1	1	1	1	8	-	4	17
1934	Other Organs	1	1	1	12	+	3	19	-	1	1	1	-	-	01	-	10	5
-	Peripheral Glands	1	1	04	3 3	6	11 3	25 109	01	1	1	1	-	T	1	1	-	26 126
	Total Hones and	1	-	9	33 1	35 14	34 1	9 46	10	1	1	1	10	0	-	1	11	6 48
1.5	Joints International			1	13 7	+ 7	19 3	6 17			-	1	-		1 2		C1	8 19
19	Other Organs	1	1	1	10	12	9	28	1	1	1	1	-	1	1	-	01	30
935	Clands	1	1	1	10	6	20	34	1	1	1	1	1	1	1	1	1	ő

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SUMMARY.

- No less than 90.9 per cent. of the total number notified in the City as suffering from pulmonary tuberculosis were examined at the Centre.
- 2. 1,049 patients were visited and examined in their own homes by the Medical Staff.
- During the year 5,912 screen examinations were made in the radiological section, and films were taken in 2,088 cases.
- Amongst new patients suffering from pulmonary tuberculosis examined during the year 65.6 per cent. of the adults presented tubercle bacilli in their sputum, and 8.6 per cent. of the children.
- Of the 930 primary cases suffering from pulmonary tuberculosis examined during the year, 22.6 per cent. were classified as Group I., 42 per cent. were classified as Group II; and 35.3 per cent. as Group III.
- 6. Of the patients treated during the periods 1913-1935, some 12,419 presented tubercle bacilli in their sputum. Of this number 25 per cent. are known to be still alive; 67 per cent. are known to be dead and 8 per cent. have been lost sight of.
- During the same periods, 12,987 patients whose sputum contained no tubercle bacilli were treated. Of this number 62 per cent. are known to be alive; 20 per cent. are known to be dead and 18 per cent. have been lost sight of.
- During this period (1913-1935) 1,438 patients suffering from non-pulmonary tuberculosis were treated. Of this number 75 per cent, are known to be still alive; 14 per cent, are known to be dead, and 11 per cent, have been lost sight of.

TOTAL NUMBERS TREATED IN SANATORIA AND DURATION OF STAY.

During the year 1935, there were 1,651 patients discharged from all the Sanatoria. Included in this number are 121 patients suffering from non-pulmonary tuberculosis who were treated in Institutions subsidised by the Health Department. Of the 1,651 patients, 800 were adult males, 552 were adult females, and 299 were children.

The average duration of stay, excluding those admitted for observation and who, proving negative, remained only for a short time, and excluding those "hospital" cases with advanced disease who died within a few days of their admission, was 119.7 days for adult males, 141.4 days for adult females, 211.4 days for male children, and 189.07 days for female children.

OCCUPATIONAL THERAPY IN SANATORIA.

In the Municipal Sanatoria attention is paid to the question of occupational therapy with the object of interesting and employing suitably a certain number of the patients whose condition admits of it. The fitness of the patient to engage in occupational therapy is always judged by the medical officer, who has the patient under constant supervision. The occupation to be followed and the number of hours to be devoted to it are both decided upon by the doctor after careful consideration. At Salterley Grange Sanatorium, the physical condition of the patients is usually so good, and their disease so early that temporary employment suitable to their needs can be found in the gardens, and upon the estate. At West Heath and Yardley Green Road Sanatoria, facilities for occupational therapy have existed for many years. At West Heath the patients are employed in basket making. Patients at Romsley Hill Sanatorium are instructed in basket and leather work.

At Yardley Green Road Sanatorium patients are instructed in basket making, leather work of different kinds, and in mat making, etc., and considerable development has taken place here during recent years.

It should be noted that the children attending the Sanatorium School at Yardley Green Road are taught various forms of handicraft work, including leather work, pewter work, raffia work, basket making, etc. Many children who are confined to bed are also taught handicrafts. Schooling at Yardley Green Road Sanatorium is also provided for suitable children who are ambulant or immobilised, three school teachers being employed on the staff.

	lassification on admission to the	Condition at time of discharge.	U mo ez	Inder Inder	3 but ing	Γ	ident 3—6 nonth	;		nent 6—1 nont		M	ore th	nan	т	otal	s.	Grand Totals
	Institution.	The second second	M.	F.	Ch.	М.	F.	Ch.	М.	F.	Ch.	М.	F.	Ch.	М	F.	Ch.	
-		Quiescent	11	10	3	5	9	1	4	1	3	-	2	2	20	22	9	51
	Class T.B.	Not quiescent	87	77	17	30	25	38	6	8	28	4	2	5	127	112	88	327
	minus.	Died in Institution	_	1	3	-	2	-	1	-	1	-	-	-	1	3	4	8
sis.	Class	Quiescent	-	-	-	-	1	-	-	1		1	-	-	1	2	-	3
CULO	T.B. plus,	Not quiescent	5	3	-	1	5	-	-	-	-	1	-	-	7	8	-	15
TUBERCULOSIS,	GROUP I.	Died in Institution	_	-	-	_	-	-	_	1	-	_	_	-	-	1	_	1
	Class	Quiescent	1	-	-	2	-	-	-	1	-	-	1	-	3	2	-	5
PULMONARY	T.B. plus.	Not quiescent	106	45	-	49	42	1	22	25	-	3	5	-	180	117	1	298
PUL	GROUP II.	Died in Institution	9	7	1	7	1	2	2	1	2	_	2	1	18	11	6	35
	Class	Quiescent	1	-	-	-	-	-	-	-	-	-	-	-	1		-	1
	T.B. plus.	Not quiescent	114	39	1	47	42	1	24	14	1	5	4	-	190	99	3	292
	GROUP III.	Died in Institution	42	16	1	20	11	-	5	10	_	9	5	1	76	42	2	120
_	TOTALS (Pul	monary)	376	198	26	161	138	43	64	62	35	23	21	9	624	419	113	1156
		Quiescent	1	-	3		2	4	2	-	2	2	2	7	5	4	16	25
	Bones &	Not quiescent	2	4	23	3	3	15	2	3	8	1	1	10	8	11	56	75
sis.	Joints.	Died in Institution	-	-	-	1	1	+	-	1	_	-	-	2	_	2	2	4
TUBERCULOSIS.	ABDOM-	Quiescent	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
BERG	INAL.	Not quiescent	-	-	1	1	1	3	-	-	-	-	-	1	1	1	5	7
	Telli seriesis	Died in Institution	-	-	_	-	-	-	-	_	-	_	-	-		-	-	_
VNOP	OTHER	Quiescent	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
PULN	ORGANS.	Not quiescent	2	2	-	-	1	-	-	-	-	2	-	-	4	3	-	7
NON-PULMONARY		Died in Institution	-	-	-	_	-	-	-	-	-	-	1	-	-	1	-	1
	PERIPH-	Quiescent		-	1	-	-	-	-	-	1	-	-	-	-	-	2	2
	ERAL GLANDS.	Not quiescent	1	2	2	1	2	3	-	-	-	-	-	1	2	4	6	12
	JEANDS.	Died in Institution	_	_	-	_	-	-	-	-	_	-	-	-	-	-	-	-
-	TOTALS (Non-	Pulmonary)	6	8	30	5	10	25	4	4	11	5	4	21	20	26	87	133

Results of Treatment of Patients Discharged from Residential Institutions During the Year 1935.

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Note—"Quiescent" cases are those which have no symptoms of tuberculosis, and no signs of tuberculous disease except such as are compatible with a completely healed lesion, and in which sputum, if present, is free from tubercle bacilli.

PATIENTS ADMITTED TO SANATORIA FOR OBSERVATION AND INVESTIGATION.

The beds utilised for the purpose of observation are at Yardley Green Road Sanatorium. Observation patients are those who, after careful and repeated examinations at the Centre, are found to be indefinite, either as to the absence or presence of tuberculosis or as to its activity or otherwise when present, and are usually admitted for a period varying from two to four weeks. Of the 1,530 patients discharged from the Sanatoria, 220 or 14.3 per cent. were admitted primarily for observation to Yardley Green Road Sanatorium. The medical findings are shown in the following table:—

Diagnosis on discharge from observation.		For Pulmonary Tuberculosis.					For Non-pulmonary Tuberculosis.					1				
		Stay under 4 weeks.		Stay over 4 weeks.		Stay under 4 weeks.		Stay over 4 weeks.		TOTALS.						
		М,	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	М.	F.	Ch.
Tuberculous		7	'13	14	7	6	32	_	1	1	1	3	1	15	23	48
Non-tuberculous		11	6	13	28	20	33	-	1	2	3	3	4	42	30	52
Doubtful		4	3	2	-	-	-	-	-	1	-	-	-	4	3	3
Totals		22	22	29	35	26	65	-	2	4	4	6	5	61	56	103

CLASSIFICATION OF PATIENTS' DISEASE.

In this table the patients are scheduled according to the classification of the Ministry of Health, as follows:----

Group I. Cases with slight constitutional disturbance, if any, e.g., there should not be marked acceleration of pulse nor elevation of temperature, except of very transient duration; gastro-intestinal disturbance or emaciation, if present, should not be excessive. The obvious physical signs should be of very limited extent, as follows:—Either present in one lobe only, and in the case of an apical lesion of one upper lobe not extending below the second rib in front and not exceeding an equivalent area in any one lobe; or where these physical signs are present in more than one lobe, they should be limited to the apices of the upper lobes and should not extend below the clavicle and the spine of the scapula.

No complication (tuberculous or otherwise) of prognostic gravity should be present. A small area of dry pleurisy should not exclude a case from this group.

- Group III. Cases with profound systemic disturbance or constitutional deterioration; with marked impairment of function either local or general, and with little or no prospect of recovery. All cases with grave complications whether tuberculous or not, should be classified in this Group, e.g., diabetes, tuberculosis of larynx or intestines, etc.,
- Group II. All cases which cannot be placed in Group I and III. Patients suffering from non-pulmonary tuberculosis are classified according to the site of the lesion and are placed under Group IV.

SPUTUM RESULTS AFTER SANATORIUM TREATMENT.

Of the 1,253 adult patients discharged from the Sanatoria suffering from pulmonary tuberculosis during the year, 879 or 70.1 per cent. presented tubercle bacilli in their sputum whilst in the Sanatoria.

Sanatoria	No sputum persisting	No sputum becoming T.B.—	No spatum becoming T.B.+		T.B becoming T.B.+	T.B'- becoming no sputum	T.B.+ persist- ing	T.B.+ becoming T.B	T.B.+ becoming no sputum
Yardley Green Road Sanatorium	68	6	-	107	1	16	343	5	11
Romsley Hill Sanatorium	13	1	-	26	1	12	169	18	12
Salterley Grang Sanatorium	e 45	-	-	11	-	14	53	8	20
West Heath Sanatorium	13	2	-	28	3	12	211	13	11
	139	9	_	172	5	54	776	44	54

OCCUPATIONS.

In the following table the occupation of both male and female patients are shown :---

				Males,	Female
Out-door occupation	s	 	 	70	
Domestic Occupation		 	 	13	229
Sedentary Occupation	ons	 	 	61	51
Commercial Occupat	tions		 	18	22
Engineering Occupa	tions		 	157	78
Metal Trades		 	 	148	50
Building Trade		 	 	47	
Other Trades		 	 	228	81
				742	511

GAIN OR LOSS IN WEIGHT.

Amongst a total of 1,396 patients discharged from Sanatoria after treatment, many of whom were advanced hospital cases admitted for the purpose of prophylaxis, 109 or 7.8 per cent. remained stationary, and 1,197 or 85.8 per cent. gained weight in amounts varying from 1 to 40 lbs.

WORKING CAPACITY.

The working capacity of patients is shown in the following tables :---

Impaired working capacity becoming unimpaired Impaired capacity for work persisting Impaired capacity for work becoming totally incapacitate Total incapacity for work becoming unimpaired Total incapacity for work persisting Died in Sanatoria	a 	Adult Males. 19 398 16 101 4 38 166	Adult Females, 26 242 22 79 4 43 95	Children. 38 72 2 9 4 4 14	Totals 83 712 40 189 12 85 275
		742	511	143	1,396
SUMMARY.

- The average duration of patients' stay for all the Sanatoria was 119.7 days for adult males; 141.4 days for adult females; 211.4 days for male children, and 189.07 for female children.
- Of the patients from all Sanatoria no less than 14.3 per cent, passed through the observation beds at Yardley Green Road Sanatorium.
- 39.6 per cent. of the patients were in Group III; 40.9 per cent, were in Group II; 15.1 per cent, were in Group I; and 4.4 per cent, were in Group IV.
- 4. There were 70.1 per cent, of all patients discharged from Sanatoria who presented tubercle bacilli in their sputum whilst in the Sanatorium.
- 1,197 or 85.8 per cent. of all patients discharged from Sanatoria gained weights in amounts varying from 1 to 40lbs.
- Some 375 or 46 per cent. of the deaths from tuberculosis occurred in "Hospital" beds in various Sanatoria and Hospitals controlled by the Public Health Committee.

TREATMENT IN THE LIGHT CLINIC.

PATIENTS COMPLETING TREATMENT DURING 1935.

The total number of patients completing a satisfactory course of treatment during the year 1935, was 57.

This number includes 19 adult males, 16 adult females, 11 male children, and 11 female children.

These completed cases consisted of :---

					Adult Males,	Adult Females.	Male Children.	Female Children
Tuberculous jo	ints a	nd bor	nes	 	6	4	2	4
Tuberculosis o	f abd	omen		 	1	5	1	2
Cervical adenit	is			 	2	5	5	5
Lupus				 	2	1	3	
Sinus				 	1	-	-	-
Other organs	***			 	.7	1	-	-
					19	16	11	11

PATIENTS CONTINUING TREATMENT.

On the 31st December, 1935, 170 were continuing treatment in the Light Clinics and many showed an improvement in their condition.

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VENEREAL DISEASES.

The City Council maintain three centres for the treatment of venereal diseases, one for men, women and children at the Birmingham General Hospital, one for children at the Children's Hospital, and one for mothers and young children in the same building as that occupied as a Maternity and Child Welfare Centre in Lancaster Street. In addition cases of venereal disease come under treatment at the Venereal Diseases Clinic maintained in connection with the Women's Venereal Diseases Ward in the Birmingham Infirmary.

The Lancaster Street Clinic, opened on July 1st, 1935, takes the place of the Aston Street clinic. The latter building was both unsatisfactory and structurally almost dangerous, so that the opening of the new and admirable clinic premises, consisting of a Maternity and Child Welfare Centre on the ground floor, and a Venereal Clinic on the first floor, has been a source of great relief from more than one standpoint.

At these centres 428 new cases of syphilis, 20 of soft chancre, 882 of gonorrhoea and 1,887 cases suffering from conditions other than venereal disease were seen in 1935, as follows :----

	New Cases,					
		Syphilis,	Soft Chancre.	Gonorrhoea.	Other Conditions.	
General Hospital	 	353	20	799	1,238	
Children's Hospital	 	14	_	4	23	
Aston Street Centre (now Lancaster St.)	 	26	_	36	615	
Birmingham Infirmary	 *****	35	-	43	11	
Total	 	428	20	882	1,887	

The new cases coming under treatment for the first time, and not having had previous treatment at other Centres, are indicated in the following table. It should be noted that cases who, attending our clinics for the first time, have been treated at clinics elsewhere, have been excluded for each year, thus giving substantial variation from the figures given in previous reports. The present figures are likely to give a truer picture of the changes in incidence within the City:---

	Syphilis,	Soft Chancre,	Gonorrhoea.	Other Conditions.
1926	537	2	848	729
1927	622	4	952	861
1928	592	10	1,146	920
1929	523	9	1,200	803
1930	541	14	1,257	1,076
1931	504	1	985	1,082
1932	512	10	1,066	1,109
1933	454	19	944	1,248
1934	411*	25*	998*	1,425*
1935	428	20	882	1,887

*These figures include those for the Birmingham Infirmary for the first time.

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The total attendances for the last eight years were :---

1928	78,261
1929	78,098
1930	88,589
1931	93,280
1932	100,313
1933	103,925
1934	110,716*
1935	121,788

*These figures include those from Birmingham Infirmary for the first time,

These figures indicate :---

- (a) That the clinics are being visited to a steadily increasing extent by patients who prove not to have venereal disease; that is to say, they are being used in a truly preventive sense by both medical practitioners and the general public.
- (b) That over a series of years there has been some tendency towards reduction in the number of cases of syphilis; over a period of three or four years, some tendency towards a like reduction in new cases of gonorrhoea.
- (c) That the patients needing treatment attend with a steadily improving persistence, and undergo a correspondingly thorough treatment, as indicated by the growth in attendances in successive years.

Further particulars of the work done at the Centres in 1935 are as follows :----

			Soft		Other
		Syphilis.	Chancre,	Gonorrhoea.	Conditions.
No. of cases under treatment, January 1st, 1935		1,179	10	691	100
New cases under treatment during year		428	20	882	1,887
Total attendances		32,249	193	77,271	12,075
Number discharged after completion of treatment				and second	
observation		137	- 11	552	1,729
Number transferred to other centres		64	1	153	4
Number who ceased to attend :					
Before completion of treatment		231	7	227	
After completion of treatment, but before		and I			
tests as to cure		50	1	139	
tests as to cure		00		100	
Number of cases of congenital syphilis treate	d				
runner of cases of congenital syphilis freate	u				
Under 1 year of age			18		
Aged 1-5 years					
			5		
Aged 5-15 years		***	28		
Aged 15 years and over			32		

Publicity and Educational Work.

A grant of £420 was paid by the Public Health Committee towards the expenses of the Birmingham Branch of the British Social Hygiene Council. The work of this Branch continues to be of the utmost value, both from the point of view of advice to the individual needing social help, and from that of the systematic instruction of the general public in the ideals and practice of social hygiene. Lectures and addresses are given to a public steadily enlarging in variety as well as in numbers.

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During the year addresses were given to approximately 30,000 persons, the talks including general addresses in factories and to social and religious organisations, and to large numbers of unemployed in the occupational centres for both men and women, together with special instructional lectures to a large variety of special bodies. A large amount of personal advice continues to be given by the officers of the Branch.

Four courses of publicly advertised lectures for men and women were provided by officers of the Birmingham Branch.

VII. MATERNITY AND CHILD WELFARE.

(Report by Dr. ETHEL CASSIE).

CHIEF STATISTICS, 1935.

Birth-Rate 15.4 per 1,000. (15,911 live births).
Illegitimate Birth-Rate 3.3 per cent. (530 illegitimate births).
Infant Mortality Rate 64 per 1,000 live births (1,024 deaths).
Stillbirths 33 per 1,000 live and stillbirths (548 stillbirths).
Neo-natal Mortality 33 per 1,000 births (532 deaths). (Infant deaths in the first four weeks of life).
Deaths from one to two years 9.1 per 1,000 of the age population (133 deaths).

Deaths from one to two years 9.1 per 1,000 of the age population (133 deaths). Deaths from two to five years 3.8 per 1,000 of the age population (168 deaths). Maternal Mortality in Childbirth 3.40 per 1,000 live and stillbirths (56 deaths). Child Population under five (estimated) 72,507.

GENERAL COMMENTS.

Births.

There has been a small rise in the birth-rate, the rise occurred in the central and outer ring of wards.

Infant and Child Mortality.

The infant mortality has fallen from 68 per 1,000 births in 1934 to 64 in 1935.

The fall represents a decrease of 37 deaths in a total of 1,024 deaths under the age of one year, as compared with the figure for 1934.

An excess of 21 deaths occurred during the "neo-natal" period, under the age of one month, while there was a decrease of 58 deaths between one and twelve months of age, as compared with the figures for 1934.

The *neo-natal death-rate* (33.4 per 1,000 live births) is actually higher than it has been since 1924, when it was 34.6 and the five years' average 1931 to 1935 is higher than in the preceding five years' period (see table, page 114).

The number of *stillbirths* has fallen slightly, but still is equivalent to 33 per 1,000 of the live and stillbirths. The total loss of life from stillbirths and neo-natal deaths amounts to 1,080 while the deaths of infants between the age of one month and twelve months total 492.

The stillbirth rate, neo-natal deaths and maternal mortality in childbirth have closely associated factors, and show no material reduction.

The death-rate among illegitimate infants is again lower than in the previous year.

Some further fall has occurred in the death-rate of children from one to two years. The rate from two to five years has also fallen.

Maternal Mortality in Childbirth.

The rate has fallen somewhat, both in Birmingham and in England and Wales as a whole. The rate in certain of the larger cities has fallen during 1935 more rapidly than here, so that Birmingham's position relative to the other large cities was not so notably satisfactory as in previous years.

Puerperal Sepsis and Pyrexia.

Detailed information has been obtained in all notified cases. There has been no definite spread of infection in the practice either of midwives or of institutions.

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BIRTHS.

During 1935 there were 15,911 live births (8,059 males and 7,852 females) belonging to Birmingham, and 548 stillbirths, making a total of 16,459. The live births number 230 more than in the previous year, and were equal to a birth-rate of 15.4 against one of 15.3 in 1934. The birthrates of the past 35 years are given in Table I in the Appendix. It will be seen that except for fluctuations during the war period, there was a steady decline in the rate from 31.4 in 1901 to 14.7 in 1933, but in 1934 and 1935 small increases were recorded.

The Birmingham birth-rate is among the higher rates in the list for the great towns, as will be seen from the figures below :---

BIRTH-RATES IN LARGEST TOWNS.

London	 	 	 13.3 per 1,000
Glasgow	 	 	 19.7 ,,
Birmingham		 	 15.4 ,,
Liverpool	 	 	 20.0 ,,
Manchester		 	 14.5 ,,
Sheffield	 	 	 14.7 ,,
Leeds	 	 	 14.8 ,,
Edinburgh		 	 15.3 ,,
Bristol	 	 	 13.8 ,,
Hull	 	 	 18.4 ,,
Bradford	 	 	 18.5 ,,

The birth-rate varied greatly in different parts of the City, as shown in the following table :----

		Birth	RATES	IN	WARDS.				
		Ward					Birth rate		
	ſ	St. Paul's					18.4		
Central Wards		St. Mary's Duddeston and Ne	chells				18.5 20.0	1005 1	
	1	St. Bartholomew's	ciiciio				19.2 >	1935 Average	
	1	St. Martin's and D	eritend	1			18.4	1984 Average	18.2
		Market Hall	••••				15.9		
	Ļ	Ladywood					18.4 J 14.8)		
	1	Lozells Aston	***				14.0		
		Washwood Heath					11.8		
		Saltley					13.7		
Middle Ding	1	Small Heath		***			$13.9 \\ 16.2 $	1935 Average	13.6
Middle Ring	1	Sparkbrook Balsall Heath					18.3	1934 Average	13.6
	i	Edgbaston		***			7.7		
	i	Rotton Park					14.4		
		All Saints					14.5 J		
	ſ	Soho					11.5		
		Sandwell Handsworth	10.				12.2		
		Perry Barr					20.9		
		Erdington					14.4		
		Gravelly Hill				•••	13.6 16.3		
	1	Bromford Stechford					19.1		
Outer Ring	4	Yardley					15.0 }	1935 Average	
		Acock's Green					14.5	1934 Average	14.1
	1	Hall Green	***				15.5 11.8		
	1	Sparkhill Moseley and King'	s Heat	h			12.3		
	-	Selly Oak	·				12.8		
	1	King's Norton					12.7		
		Northfield	•••			••••	16.9 12.0		
	2	Harborne					12.0		and a

The figures for individual Wards are not comparable with those in previous years owing to many alterations in ward boundaries in November, 1934, but the groups (central, middle and outer) are roughly comparable with those for previous years.

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The movements in the birth-rate in the three groups of wards are indicated in the diagram below.

BIRTH RATE IN GROUPS OF WARDS.



ILLEGITIMATE BIRTHS.

During 1935 there were 530 illegitimate births belonging to Birmingham. Of these 499 occurred in the City and 31 in other places. The illegitimate births were in the proportion of 33.3 per 1,000 of the total live births, as against 36.6 for 1934.

The figures for the past 10 years were as follows :---

		Plegitimate Births per 1,000 live births.				
1926	 	33.9				
1927	 	36.5				
1928	 	33.6				
1929	 	36.6				
1930	 	35.8				
1931	 	33.8				
1932	 	32.9				
1933	 	36.8				
1984	 	36.6				
1935	 	33.3				

The deaths of infants under one year of age numbered 1,024 and were equal to an infant mortality rate of 64 per 1,000 births.

The infant mortality rates for a number of years are shown in the table below :---

		INFA	NT MORT	ALITY RATE.	
				Birmingham,	England and Wales.
1901-05	 4			157	 138
1906-10	 			131	 117
1911-15	 ·			126	 110
1916-20	 			94	 90
1921-25	 			80	 76
1926-30	 			70	 68
1931-35	 			67	 62
1926	 			73	 70
1927	 			75	 70
1928	 			65	 65
1929	 			79	 74
1930	 			60	 60
1931	 			71	 66
1932	 			67	 65
1933	 			66	 64
1934	 			68	 59
1935	 			64	 57

The infant mortality rates in Birmingham and ten of the largest British towns for 1924 and

1934 and 1935 are shown in the sub-joined table :-

			Rate per 1,000 Live Births.		
			1924	1934	1935
London	 	 	69	67	58
Glasgow	 	 	119	98	98
Birmingham		 	83	68	64
Liverpool	 	 	103	81	83
Manchester	 	 	100	69	71
Sheffield	 	 	89	55	52
Leeds	 	 	108	71	64
Edinburgh	 	 	89	62	70
Bristol	 	 	71	46	43
Hull	 	 	87	63	72
Bradford	 	 	92	62	64

INFANT MORTALITY IN WARDS.

The appended table shows the infant mortality rate in each of the wards of the City in 1935. The average mortality in the groups of wards ten years ago is given for comparison.

	St. Paul's		 94	1
	St. Mary's		 98	Average :
	Duddeston and Nechells		 66	In 1935- 85
Central Wards:	St. Bartholomew's		 74	1 In 1934- 87
	St. Martin's and Deritene	đ	 100	In 1925-104
	Market Hall		 80	
	Ladywood		 84	J
	- Lozells		 72	2
	Aston		 59	
	Washwood Heath		 58	
	Saltley		 30	Average :
	Small Heath		 80	In 1935-59
Middle Ring:	√ Sparkbrook		 51	> In 1934- 69
	Balsall Heath	***	 50	In 1925— 74
	Edgbaston		 62	1
	Rotton Park		 64	
	L All Saints	***	 69)

. (Soho					85]	
	Sandwell				***	38	
	Handsworth					45	
	Perry Barr					55	
	Erdington					49	
	Gravelly Hill					60	
	Bromford					56	A
	Stechford		***			80	Average :
Outer Diama	Yardley					67	In 1935- 58
Outer Ring :	Acocks Green					81	In 1934— 58
and the second s	Hall Green					38	In 1925-50
	Sparkhill					47	
	Moseley and King's	Heath				69	
1.2.4	Selly Óak					38	
	King's Norton					63	
	Northfield					56	
	Harborne			+++		56 J	

The following diagram shows the fall in infantile mortality in each of the three groups of wards during the past 24 years. It will be noted that the decrease has been much more marked in the Central areas than in the other parts of the town, and that the range in the sectional rates last year was only from 58 to 85, whereas in 1913 it was from 74 to 181. The approximation of the rates in the middle and outer rings is, perhaps, associated with the fresh distribution arising from the re-housing operations of the City.



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INFANTILE MORTALITY DURING THE YEAR, 1985.

Total Total under Cause of Death. Weeks. Months. Deaths One under One Year 0--1-12-Month. 3-3-1-6---9-Measles 11 11 Scarlet Fever ... 1 ... Whooping Cough 1 7 1 2 6 7 26 -4 Diphtheria and Croup ----3 4 ----1 Influenza ----1 2 5 ____ -1 1 ____ -----**Tuberculous Meningitis** ------2 1 3 ... -----Abdominal Tuberculosis ... -_ ----_ -9 Other Tuberculous Diseases 5 _ 4 _ Rickets 1 1 1 3 -Syphilis 3 3 ... --.... Cerebro-Spinal Fever 2 3 1 6 ... ----------Meningitis (not Tuberculous) 6 3 2 ----------____ 1 Convulsions ... 2 2 -1 4 1 Bronchitis 1 9 1 1 4 2 1 ... 7 6 Pneumonia (all forms) 6 6 25 26 28 30 27 136 Gastritis -----.... 2 Diarrhoea, Enteritis, etc. 5 26 14 115 1 8 41 26 ... **Congenital Malformations** 8 9 6 22 114 44 67 13 3 9 ... Premature Birth 25 22 9 245 330 301 29 ------.... Atrophy, Debility and Marasmus ... 1 7 7 2 1 18 6 1 Atelectasis 37 1 38 39 1 ------Injury at Birth 4 4 2 2 1 56 43 53 _ _ Neglect (under 3 months) 1 -_ 1 -----1 Suffocation (overlying) 2 1 1 4 -----1 ... _ ____ 2 Other Causes ... 6 22 11 7 26 30 28 15 121 1024 All Causes 396 52 55 29 532 160 133 92 107 ... Rate per 1,000 live Births ... 24.9 3.3 3.4 1.8 33.4 10.1 8.4 5.8 6.7 64

Deaths from stated Causes in Weeks and Months under One Year of Age.

INFANTS' DEATHS FROM " OTHER CAUSES." (See preceding Table).

		1935.		19	34.	1933,		
		Under 1 Month.	Total.	Under 1 Month.	Total,	Under 1 Month.	Total.	
Acute otitis media		_	28	1	33	_	7	
,, mastoiditis			2		4	_	-	
" septic infections		4	22	12	36	5	21	
New growths			_		3	2	4	
Accidents		_	5	_	10	4	12	
Congenital diseases		13	18	10	19	1	9	
Other conditions	*****	9	46	20	43	8	32	
		26	121	43	148	20	85	

The next table shows the number of infant deaths from the more prominent causes of death during the last five years.

			1935,	1934.	1933.	1932.	1931.
Measles			11	4	18	9	45
Whooping cough		1	26	52	14	60	37
Influenza			5	6	8	11	16
Tuberculosis			12	7	14	8	23
Convulsions	T		4	4	10	17	7
Bronchitis			9	16	36	19	41
Pneumonia			136	144	185	195	218
Diarrhoea and enteritis			115	127	106	122	135
Suffocation (overlying)			4		• 3	4	12
Congenital malformation			114	97	113	96	98
Premature birth			330	310	295	323	353
Injury at birth	-		56	61	36	48	45
Atrophy, debility and ma	arasmu	15	18	20	20	30	56
Other causes	*****		184	213	140	178	131
TOTAL			1,024	1,061	998	1,120	1,217

INFANT DEATHS FROM DIFFERENT CAUSES.

INFANT MORTALITY AND ILLEGITIMACY.

The following figures show the relative mortality among legitimate and illegitimate infants for the past year :---

	No. of Births,	Deaths under 1 year.	Infant mortality per 1,000.
Legitimate	 15,381	976	63
Illegitimate	 530	48	91

The infant mortality rates during recent years were as follows :---

	In	fant Mori	tality Rates per 1,	000 Births.		
	Legitimate.	. Av	erage,	Illegitimate.		Average.
1921 1922 1923 1924 1925	81 82 69 81 76	} 7	8	135 178 151 142 139	}	149
1926 1927 1928 1929 1930	70 73 63 77 58	6	8	150 135 111 128 117	}	128
1931 1932 1933 1934 1935	70 65 64 66 63	6	6	$122 \\ 125 \\ 119 \\ 106 \\ 91$	}	113

The infant mortality among illegitimate children has therefore dropped for the first time to a figure below 100 per 1,000 illegitimate births.

NEO-NATAL MORTALITY.

During the last 24 years there has been a decline in the mortality rate amongst children under $4~\rm wceks$ of age, as will be seen from the table below.

	BIRMING	SHAM.	ENGLAND AND	WALES.
	Rate per 1,000 live births.	Average.	Rate per 1,000 live births.	Average
1912 1913	42.1 41.0		38 39	
1914 1915	42.3 37.0	\$ 40.6	39 38	38
1916 1917 1918	35.8 38.3		37 37	97
1918 1919 1920	35.7 37.1 34.4	36.3	$36 \\ 40 \\ 35 $	37
1921 1922 1923 1924 1925	35.0 34.4 31.1 34.6 32.2	33.5	$\left. \begin{array}{c} 35 \\ 34 \\ 32 \\ 33 \\ 32 \end{array} \right\}$	33
1926 1927 1928 1929 1930	31.1 33.3 29.7 32.3 28.7	31.0	$\left. \begin{array}{c} 32 \\ 32 \\ 31 \\ 33 \\ 31 \end{array} \right\}$	33
1931 1932 1933 1934 1935	32.2 32.7 30.8 32.6 33.4	32.3	$\left. \begin{array}{c} 32 \\ 32 \\ 32 \\ 31 \\ - \end{array} \right\}$	32

STILLBIRTHS.

The net number of stillbirths for the year was 548, equal to 33 per 1,000 of the live and stillbirths, as compared with the rate of 36 in 1934.

The fo	llowing	table	shows	the	number	of	stillbirths over	a	number	of	vears :
--------	---------	-------	-------	-----	--------	----	------------------	---	--------	----	---------

	Stillbirths,	Average	Percentage of total live births.	Average,
1912 1913 1914 1915	667 679 762 732	710	3.0 2.9 3.3 3.5	3.2
1916 1917 1918 1919 1920	729 580 590 744 911	711	3.5 3.3 3.5 3.8 3.6	3.5
1921 1922 1923 1924 1925	804 660 629 544 609	649	3.6 3.3 3.3 3.0 3.4	3.3
1926 1927 1928 1929 1930	585 521 595 590 688	596	3.3 3.0 3.5 3.5 4.0	3.5
1931 1932 1933 1934 1935	697 603 591 580 548	604	$\left.\begin{array}{c} 4.1\\ 3.6\\ 3.9\\ 3.7\\ 3.4\end{array}\right\}$	3.7

NEO-NATAL DEATHS AND STILLBIRTHS.

The loss of life from neo-natal deaths (i.e. deaths within 4 weeks from birth) and stillbirths continues unabated. A slight improvement in the number of stillbirths has been counter balanced by a slight rise in the neo-natal mortality rate.

Enquiries made in relation to all cases of still-births and to a proportion of the neo-natal deaths indicate that the place of occurrence of birth was as follows :---

Where Birth too	ok place.		Neo-natal deaths.	Stillbirths,
City Hospitals			 92	90
City Maternity Hon	nes		 27	33
Voluntary Hospitals	5		 82	105
Private Nursing Ho	mes		 1	27
			202	255
At Home			 269	293
No information			 22	
	То	TAL	 493	548

The percentage in which birth occurred in institutions is high, and is suggestive of abnormalities in these particular cases. In the case of neo-natal deaths the proportion born in institutions is 41 per cent., against 38 per cent. in all births and stillbirths; and among stillbirths 46 per cent., against 33 per cent. in all births and stillbirths.

Ante-natal Care at Child Welfare Centres.

Information was available in 493 cases where a neo-natal death occurred as to ante-natal attendance at a child welfare centre clinic. Only 163 of the 493 mothers had visited these clinics, i.e., 33 per cent. as against the attendance of 56 per cent. for all births and stillbirths. Similarly, with stillbirths only 200 of the 548 cases had attended the ante-natal clinics, or 36 per cent. as against 56 per cent. for all births and stillbirths. These figures are 'encouraging since they suggest that ante-natal care plays a part in diminishing intra-natal and neo-natal mortality.

Environment.

Central Wards	Births. 4,085	Stillbirths. 141 (3.3% of live and stillbirths).	Neo-natal deaths. 135 (3.3% of live births).
Middle Ring	4,190	133 (3.1% of live and stillbirths).	136 (3.2% of live births).
Outer Ring	7,339	273 (3.6% of live and stillbirths).	260 (3.5% of live births).

Proportionately, neo-natal deaths and stillbirths are unaffected by home conditions. The poorest districts show no preponderance and in fact, often show a slight advantage.

Neo-natal Deaths.

The following information was obtained in 525 cases :---

				Tom					505
Other conditions		*****		*****	*****	*****		*****	68
Prematurity					anda	*****	*****	*****	305
Congenital Defect						*****			65
Icterus Neonatoru	m		-			*****		*****	6
Haemorrhage	******	*****		*****			*****		43
Atelectasis				*****		*****	*****		24
Asphyxia					-				14
Causes of Death.									22

TOTAL

- 44	-4	50	
	-	45	
- 4		~	

$\begin{array}{cccccccccccccccccccccccccccccccccccc$						Tor	TAL	*****		525
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	2-3+ "	-			*****	 	•••••		Antra	35
2 hours	-2 weeks					 				51
hours 42						 				52
hours						 				14
hours						 				20
hours		-			-	 				14
hours				*****	*****	 	*****	*****		20
						 			*****	42
		-	*****			 				277

Stillbirths.

Age at Death

An investigation of stillbirths occurring in Birmingham in 1935 shows that though 213 in 548 (39 per cent.) were premature, in all but 22 a primary cause of death was found, accounting for failure to survive birth.

The following tables indicate the results of the enquiry :---

Ante-natal causes Intra-natal causes	 	 *****	*****	 	*****	*****		250 174
Foetal abnormaliti spina bifida, r				 11.22				91
Prematurity (with		cause o	f death)	 ***** *****				22
No information	 	 Annual .		 *****			*****	548

Further analysis of the first two groups gives the following figures :---

Ante-natal causes=250.

Ill-health of moth	her (car	diac di	sease, s	shock.	accident	ts. etc.)				
Various causes					Trace						
Insufficient inform											1
											-2
											2
-natal causes-17	7.4										
a-natal causes=17 Difficult labour (i		g force	ns deli	veries	cranioto	omies a	nd pro	longed	labour	()	
Difficult labour (i	ncludin		-				100				
Difficult labour (i Breech delivery	ncludin	g force	ps deli	veries,	cranioto 	omies a	nd pro	longed	labour	s)	
Difficult labour (i Breech delivery Prolapsed cord	ncludin		-				100				
Difficult labour (i Breech delivery	ncludin 								*****		

It was found that foetal abnormalities account for 91 or 17 per cent., and that ante-natal and intra-natal conditions of sufficient importance to account for the stillbirths were known to be present in 301 of the 548 cases (55 per cent).

There can be no doubt as to the close relationship between neo-natal deaths and stillbirths. The fact that out of the 525 neo-natal deaths investigated no less than 439 were dead within seven hours (84 per cent.) makes this clear. The causes, too, are similar, prematurity being present in 58 per cent. of neo-natal deaths, and in 39 per cent. of stillbirths. Congenital defects of the infant are more frequently associated with stillbirths, but in both play a relatively small part compared with prematurity. The investigation into the causes of stillbirth shows that prematurity is associated closely with ante-natal and intra-natal abnormalities.

The inevitable conclusion must be drawn that ante-natal and obstetric factors are mainly responsible for this enormous loss of life, and in so far as it can be reduced it can only be reduced by improved midwifery and improved neo-natal care. In the ante-natal period something much more than examinations to diagnose disproportion or imminent eclampsia, appears essential. The earlier detection and intensive care of mild toxaemia, much more prevalent than was once suspected, may do much. Toxaemia is undoubtedly an important factor in premature birth, though not the only factor. The care of the expectant mother suffering from heart disease, chronic kidney conditions, etc., is also of undoubted importance. Syphilis plays a comparatively minor part but must not be forgotten. We are still ignorant of the relation of nutritional factors; for instance, the nutritional anaemias may play an unsuspected part in all classes.

Better obstetrics must help to reduce a certain proportion of stillbirths and neo-natal deaths, while the proper instruction of midwives in modern methods of neo-natal care, resuscitation of the asphyxiated infant and the avoidance of early infection will be of great value.

It is necessary to emphasise that ordinary methods for child welfare can do little to improve the position, for the health visitor reaches the home too late to be of assistance.

While the importance of more intensive treatment of ill-health in the expectant mother has been emphasised, it must be remembered that this usually necessitates institutional treatment. The difficulty of procuring this at present is mainly due to three factors :---

(1) The dearth of ante-natal beds for mild toxaemias.

(2) The lack of resident nursery accommodation for the young children of multiparae. This cannot be met by the provision of home helps in many cases—even if the home help is provided free —owing to the husband working irregular hours, night shifts, etc.

(3) Lack of realisation on the part of doctors, midwives and patients of the importance of slight symptoms and signs in these cases.

A wider recognition of the scope of the problem will lead to an improvement.

DEATHS OF CHILDREN BETWEEN 1 AND 5 YEARS OLD.

These are set out in the table below, distinguishing those under 2 years from those over 2.

		1 to 2 yea	rs old,			2 to 5 years old,					
	1935.	1934.	1933.	1932.	1935.	1934.	1933.	1932.			
Measles	22	10	37	25	13	4	16	15			
Whooping cough	14	37	13	41	24	24	6	23			
Diphtheria	3	3	2	4	19	25	10	9			
Scarlet fever	0	4	1	2	5	5	3	2			
Influenza	2	2	5	5	1	3	6	4			
Tuberculosis	8	7	11	22	16	20	24	21			
Nervous diseases	13	14	10	8	12	12	7	10			
Bronchitis and pneumonia	38	53	66	71	20	32	27	22			
Diarrhoea and enteritis	8	10	12	6	5	6	6	5			
Other digestive diseases	4	7	6	3	10	12	13	10			
Accidental deaths	3	6	2	8	13	23	23	18			
All other causes	18	18	16	28	30	18	24	23			
Total	133	171	181	223	168	184	165	162			
	-				second convert						

					-2 years Average	2-5 years Average.		
				Deaths.	Death-rate per 1,000,	Deaths.	Death-rate per 1,000.	
1912 - 15		*****	 	821	45.9	697	12.2	
1916 - 20			 	579	32.2	568	9.9	
1921 - 25			 	451	23.7	323	5.8	
1926 - 30			 	309	19.3	233	4.9	
1931-35	*****		 	194	12.9	181	3.8	

The figures show that a great reduction has occurred in the mortality amongst toddlers during recent years, a reduction of 72 per cent, being recorded in the death-rate from one to two years and of 69 per cent, in that for the age period two to five years.

MATERNAL MORTALITY IN CHILDBIRTH.

The deaths of women classed to pregnancy and child-bearing in Birmingham during 1935 numbered 56. The number of live births was 15,911, giving a maternal mortality rate per 1,000 births of 3.52.

The maternal mortality in previous years is shown in the table below :---

		other Puerperal	Rate per 1,000 live	Births (total). England and
	Puerperal Fever.	Causes,	Birmingham.	Wales.
1911	36	48	3.82	3.87
1912	27	45	3.25	3.98
1913	44	48	3.86	3.96
1914	33	41	3.19	4.17
1915	35	38	3.44	4.18
1916	81	40	3.44	4.12
1917	26	20	2.60	3.89
1918	29	22	3.03	8.79
1919	23	28	2.64	4.37
1920	51	39	3.59	4.33
1921	26	.37	2.84	3.92
1922	25	85	3.02	3.81
1923	34	33	3.51	3.82
1924	37	35	3.91	8.90
1925	35	39	4.15	4.08
1926	41	33	4.13	4.12
1927	25	37	3.59	4.11
1928	32	34	3.83	4.42
1929	26	41	3.99	4.83
1930	27	32	3.39	4.40
1931	28	37	3.81	4.11
1932	28	34	3.73	4.21
1933	25	31	3.72	4.51
1934	29	31	3.83	4.60
1935	23	33	3.52	4.10

The rates calculated on live and still-births for 1985 were :---

Birmingham		 	 3.40
England and	Wales		 3.93

The causes of death as given on the death certificates may be classified as follows :---

1	Puerperal sepsis	(after c	onfinen	nent o	r abor	tion)		 	 	23
1	Puerperal haemo	orrhage						 	 ***	8
3	Albuminuria and	l convulsi	ions					 	 	7
1	Accidents of pro	egnancy	(abortio	on, ect	topic g	estation,	etc.)	 	 	0
	Embolism							 	 	5
1	Other causes							 	 	13

COMPARATIVE MATERNAL MORTALITY IN 11 LARGEST TOWNS.

	De	eaths per 1,0	000 live Birth Other	ns from :
	Puer	peral Sepsis,	Puerperal Ca	uses. Total,
London		1.17	1.43	2.60
Glasgow		3.66	3.12	6.78
Birmingham		1.45	2.07	3.52
Liverpool		1.67	1.73	3.40
Manchester		2.13	1.68	3.81
Sheffield		2.08	2.47	4.55
Leeds		1.11	2.22	3.33
Edinburgh		2.30	3.00	5.30
Bristol		0.87	1.75	2.62
Hull		1.01	1.69	2.70
Bradford		1.77	1.01	2.78

MATERNAL MORTALITY ENQUIRY.

At the request of the Ministry of Health a medical enquiry has been made in the case of every maternal death in childbirth during each year since 1929. The information obtained during 1935 has been tabulated below :---

Total deaths of women associated with pregnancy and child birth=69.

GROUPS.

I.	Deaths from in	tercurre	nt dis	ease			 			-	 14
II.	Deaths from ch	nild bear	ring				 				 55
	(a)	Deaths	from	aborti	on		 		7		
	(b)	,,	,,	sepsis			 		20		
	(c)			toxaen	nia		 		12		
	(d)			haemo	rrhage		 		6		
	(e)			other o	causes	*****	 	*****	10		

GROUP I. Deaths from intercurrent disease=Total 14.

Parity. Primipara 7. Multipara 7. Illegitimate 0.

Ages. Under 20=nil. 20-30=6. 30-40=8. Over 40=nil.

Cause of death.	Pneumonia			 mine		-	3
	Intestinal obstr	ruction	1	 	*****	*****	1
	Cavernous sinu	s thro	mbosis	 			1
	Phthisis		*****	 *****			3
	Heart disease			 			6

Treated in hospital=11 cases.

Ante-natal care. Nil=3. Some=1. Sufficient=10.

Home conditions. Good=4. Fair=9. Poor=1.

Period of Pregnancy. Full term=2. 36-40 weeks=4. 32-36 weeks=1. 28-32 weeks=2. 24-28 weeks=2. Under 24 weeks=3.

Death was apparently inevitable in 11 cases. In 3 cases life might have been saved had the patient followed medical advice given to her.

	u	
	х	

GROUP II. Deaths from child bearing=Total 55.

(a) Deaths from abortion. Total=7.

Parity. Primipara=3. Multipara=4. Illegitimate=3. Ages. Under 20=nil. 20-30=4. 30-40=3. Over 40=0.

Cause of death in every case=sepsis.

Interference	*****		 *****	3
Probable interference			 +1-10	2
Delay in treatment	*****	*****	 	2 (In both cases due to the
				patient's fault).

Home conditions. Good=1. Fair=6. Poor=nil.

Period of Pregnancy. Under 12 weeks=4. 12-16 weeks=1. 16-20 weeks=1. 20-24 weeks=1.

(b), (c), (d). Deaths from Puerperal Sepsis, Toxaemia and Haemorrhage.

These are shown in a subsequent table.

(e) Deaths from other causes. Total=10 cases.

Causes of death.	Vomiting of pregnancy	r		 	 . 1
	Embolism			 	 3
	Rupture of uterus			 	 2
	Post anaesthetic pneur	nonia		 	 1
	Chorea of pregnancy			 	 1
	Shock (after difficult d	eliveri	es)	 	 2
D 11 D 1 1	A 11 11 1				

Parity. Primipara=6. Multipara=4.

In 2 cases better ante-natal care and in 1 case better management of labour might have prevented death.

Summary and Comparison with 1934.

		19	935.	19	934.
Abortions	 	 Primipara.	Multipara. 4	Primipara, 3	Multipara. 11
Obstetric causes Intercurrent condit		 30 7	18 7	20 4	22 14
		40	29	27	47

Thus in 1935 there were 69 maternal deaths, as compared with 74 in 1934.

Three of the 7 deaths from abortion in 1935 were certainly due, and 2 were probably due to artificially induced abortion.

In 17 of the 48 obstetric deaths better ante-natal care might have saved the patient. In 8 cases better conditions during labour and the puerperium might have prevented a fatal issue.

The 14 deaths from intercurrent disease have no real relation to child bearing, except the 6 heart cases, and 3 cases of phthisis, in which pregnancy was contra-indicated and was responsible for the patient's death.

Relative Mortality Figures for Cases Booking with Doctor, Midwife or Hospital.

Of 48 deaths from obstetric causes (i.e., omitting deaths from abortions and intercurrent disease) the bookings were as follows :--

		Sepsis	Toxaemia	Haemorrhage	Other causes	Total
Booked with doctor	 	8	3	2	3	16
,, ,, midwife	 	7	6	4	4	21
,, ,, hospital	 	3	3	0	2	8
Not booked	 *****	2	0	0	1	3
			1.	a share at a	and the	diana 25
			and the set of	ite fer site atta	Total	48

MAT	ERN	TAT.	DEA	THS

(b) From sepsis=	101 (0) 1101			nacinorinage=0	
the provide the part of the			aemia		
	Puerperal Sepsis.	Eclampsia with Convulsions.	No Convulsions.	Haemorrhage.	Total.
TOTAL	20	4	8	6	38
AGE GROUPS. Under 20 years	7				16
30—40 ,, Over 40 ,,	<u>13</u> —	-	3 1 	- -	21 1
PARITY.					
Primipara Multipara	12 8	4	4 4	4 2	24 14
HOME CONDITIONS.					
Good	10 5 4	3 1	6 2	3 2 1	13 16 8 1
Illegitimate	1	-		-	1
PERIOD OF PREGNANCY.					
36—40 weeks Less than 36 weeks	7 13	3 1	6 2	4 2	20 18
Ante-natal Care.					
By { Doctor	9 2 5	$\frac{2}{1}$	1 2 1	$\frac{4}{2}$	16 4 9
Hospital Nil	4	1	4	=	8
ATTENDANCE AT DELIVERY			and long lasts		10
Doctor	8 6	-	1	3 2	12 9 11
hospital Hospital Nil	1 3 2	3 —	- -	-	4 2
TREATED IN HOSPITAL	20	3	8	2	33

PUERPERAL SEPSIS.

There were 104 cases of puerperal fever and 172 cases of puerperal pyrexia during the year, 16 being cases of persons residing outside the City but removed for confinement to Birmingham institutions. The corresponding numbers in 1934 were: 113 cases of puerperal fever, 216 of puerperal pyrexia, and 16 out-City cases.

In 259 instances of Birmingham residents detailed information was obtained. One hundred and thirty-four cases were removed to hospital for treatment.

Women's Hospital					86
Dudley Road Hospital	là.				37
Selly Oak Hospital					6
Maternity Hospital (fe	or Ca	esarean	Secti	on)	1
Other Hospitals					4
					134

The number of cases in primiparae was 125; in multiparae 103. The parity was not known in 31 cases.

The period of pregnancy was as follows :---

Premature		 	 23
Full term	 	 	 188
Post mature		 	 7
Abortions	 	 	 40
No information		 	 1
			259

Out of 259 cases of puerperal fever or pyrexia where information was obtained, 21 died, 4 following abortion.

Under the scheme arranged by the Maternity and Child Welfare Committee, a consultant was called in at home by the medical attendant in 15 cases.

The ante-natal care in 200 cases where information was obtained was as follows :----

Doctor			 	 	48		
Doctor and midwi	ife		 	 	1		
Midwife			 	 	3		
Welfare Centre an	d Hospita	al	 	 	3)		
Midwife and Welf			 	 	16	63=31.5 per cer	at.
Doctor and Welfa	re Centre		 	 	6	o ono per cer	
Welfare Centre			 	 	53)		
Hospitals			 	 	56		
Nursing Homes			 	 	20		
No ante-natal Car	re		 	 	9		
					200		

The attendance at the ante-natal clinics at Child Welfare Centres was 56 per cent. of all maternity cases.

In 259 cases in which information was obtained, the following complications of labour were present. (Frequently more than one complication per case).

Vaginal and Perineal tears		 59
Instrumental delivery	 	 45
Abortion	 	 39
Post Partum haemorrhage		 30
Manual removal of placenta		 21
Retained products	 	 18
Induction	 	 15
Caesarian section	 	 11
Ante-partum haemorrhage		 7
Placenta praevia	 	 6
Breech presentation	 	 6

No complication of labour was noted in 76 of these 259 cases.

OPHTHALMIA NEONATORUM.

658 cases of discharging eyes were notified to the Department during 1935. The vast majority of these were not ophthalmia neonatorum due to the gonococcus, but were reactions following the use of prophylactic treatment, or mild catarrhs. 103 cases were considered sufficiently severe to admit to the Eye Hospital Ward, while 71 others were of moderate severity. In only one case was there any corneal damage, and this was a slight scar which will not impair vision.

The Health Visitors and Midwives Inspectors paid 1,977 effective visits to notified cases.

PEMPHIGUS NEONATORUM.

Ten cases of pemphigus neonatorum were reported during 1935. Two were removed to hospital. There was one death.

MATERNITY AND CHILD WELFARE SERVICE.

TRAINING COURSE FOR HEALTH VISITORS.

A course was commenced on 1st October, 1934 and was continued for six months ending March 31st, 1935. Twenty-four candidates entered for this course, nine coming from Birmingham, fifteen being independent students. Twenty-three sat for the Examination in April 1935 at Cardiff, seventeen gaining their certificates.

Another course was commenced in October, 1935, thirty students being accepted. Of these, nine came from Birmingham, two from the Sussex Queen's Nursing Association and nineteen were independent candidates from various parts of the country.

The work has been carried out on the same general lines as before. It is desirable to give students as full insight as possible into practical social work. To that end the Public Assistance Committee have kindly agreed to allow each student to be present for one morning with their Relieving Officers at interviews with applicants. The Almoner at the General Hospital also kindly takes each student for a morning's work in the Registration Department and in interviewing patients. In addition they are shown the work of the School After-Care and Juvenile Unemployment Committee.

MATERNITY AND CHILD WELFARE STAFF.

No. of health visitors-94

85 attached to child welfare centres.

9 special visitors, mainly visiting non-notifiable infectious disease.

Superintendent of Health Visitors-1

Assistant Superintendent of Health Visitors-1

Midwives' Inspectors-2

Tutor for Training Course-1

Dental Nurse—1 Immunisation Nurse—1

Special Workers-3 Foster Mother Scheme, Unmarried Mothers, Home Helps

Remedial Gymnast-1

Medical Officers-Whole-time, 14; Part-time, 21

Dentists-Whole-time, 1; Part-time, 1

Class Mistresses-Cookery, 5; Sewing, 12

HEALTH VISITING.

The Health Visitors undertake home visiting for children under the age of five, ante-natal home visiting, and also the visiting required for non-notifiable infectious disease, pneumonia and ophthalmia neonatorum. In order to cope with the outbreaks of infection in different localities, nine visitors are employed for specialised work in the latter connection, the general health visitors dealing with sporadic cases in their localities.

The Health Visitors carry out the Centre work in addition to home visiting.

Total visits to children under 5 years, 289,283; total visits to expectant mothers-18,276; other visits-33,111; all visits-340,670.

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CHILD WELFARE CENTRES.

- (a) Number of centres provided and maintained by the City Council—30 and 1 weighing centre (now closed).
- (b) Number of centres provided and maintained by a Voluntary Association—1 and 1 weighing centre.
- (c) Total number of attendances at ordinary consultations at all centres during the year:
 - (1) By children under 1 year of age-121,495
 - (2) By children between the ages of 1 and 5 years-74,662.
- (d) Total number of children who attended ordinary consultations at the centres for the first time during the year:
 - (1) Children under 1 year of age-11,089
 - (2) Children between the ages of 1 and 5 years-3,042.

Percentage of live births represented by the figures in (d) (1) is 69 per cent.

- (e) Total number of children who were in attendance at the centres throughout the year:
 - (1) Children under 1 year of age-9,895
 - (2) Children between the age of 1 and 5 years-24,563

Percentage of children between 1 and 5 years (total in City approximately 59,000) attending Child Welfare Centres (e) (2) 42 per cent.

Number of children attending special medical inspection clinics for children 2 to 5 years—5,410 with 17,289 attendances.

During 1935, two new centres were opened and one weighing centre was closed, while the old and unsatisfactory centre in Aston Street was replaced by the new building in Lancaster Street. The new centres were in Plowden Road, Glebe Farm, and in Walsall Road. Both are in temporary premises, the former in a municipal house, and the latter in part of a large private house. The Glebe Farm Centre was opened in February and serves a small municipal housing estate and part of Stechford. The district is growing rapidly. The Walsall Road Centre was opened in July after earnest request from local residents for the service. It is in close proximity to large new housing estates. A small weighing centre in a hut near the aerodrome at Bromford was closed in July owing to the removal of families from the hutments.

The premises at Lancaster Street were opened in July. The building includes new premises for the Venereal Disease Clinic for women and children on the first floor, and an excellent child welfare centre on the ground floor. The women attending the centre have freely expressed their appreciation of the improvement in the centre premises. The work of the health visitors and voluntary workers is less difficult and more fruitful in the new environment.

In 1935 the Carnegie Institute had the highest number of individual children registered as attending the children's consultation, viz: 2,397; followed by Sutton Street with 1,688, Acocks Green with 1,654, Monument Road Centre with 1,640, Kingstanding Centre with 1,632 and Wright Street Centre with 1,632, Bloomsbury Street Centre with 1,514 and Lancaster Street Centre with 1,504.

The voluntary workers at the child welfare centres now have an organising committee. Lectures and meetings are arranged, and efforts are made to enrol new workers as vacancies occur. There are now more than 400 workers assisting in child welfare work. Their help is most valuable and is deeply appreciated, they play a large part in ensuring the successful working of the Centres. A large number of the centres have active and efficient Mothers' Committees, and several centres have a Parents' League of Health, in which fathers and mothers combine to assist in the work for children.

The Kingstanding Child Welfare Centre gained a bronze medal in the National Mothercraft Competition, and the Hay Mills Centre gained the second prize for an essay in the National Parentcraft Competition. The toddlers' special classes continue to be popular, and are held at 24 centres. Several centres have physical improvement classes for mothers, which have proved helpful and interesting to the women.

The remedial exercise clinics for toddlers have done excellent work and could be extended with advantage. The numbers attending have steadily increased in the last three years.

The various clinics at the child welfare centres have been well attended and the educational work has reached a high standard. A table is given showing the increase in the centre work during the last fourteen years. The increase in attendances at the clinics is remarkable, particularly in relation to the work for expectant mothers. The work for "toddlers" has been greatly extended, and is shown in the special medical inspections. The increase in the educational work is notable. The actual number of births recorded is 4,000 less than in 1921, which was a "peak" year, following the War.

		•	1921.	1935.	
Number of centres			21	31	
Infants and Children :—					
Births (stillbirths) reported			19,360	15,374	
Primary visits		*****	18,718	15,400	
Re-visits (infants and childr			169,482	261,724	
Total visits and re-visits		*****	188,200	289,283	
Mothers :				(Different
Primary visits			3,291	1,970	method of
Re-visits			6,425	16,306	calculation
Total visits and re-visits		*****	9,716	18,276	now in force.
Children's Consultations :			0.010	0.470	
Number held			2,610	3,476	
Fresh children attending			14,988	14,131	
Total attendances			130,321	178,868	
Number seen by doctor		40.004	58,910	79,586	
Special Medical Inspections (11-	-5 years)	:			
Number held			Nil	1,095	
Total attendances		*****		17,289	
Mothers' Consultations :					
Manufact hald			824	2,157	
Each mothers attending			4,683	8,900	
Total attendances			10,380	32,571	
Attendance at :					
Combra dance			9,335	18,398	
Cookern alasses			1,645	3,277	
Health tallia			20,685	63,840	
meanth tarks		*****	10,000	00,010	

ATTENDANCES AT CHILD WELFARE CENTRES DURING 1921 AND 1935.

Infants & Children.				en.		others te-Nat		(dren's tations.		Special Medical Inspec- tions (1 ¹ / ₂ -5 yrs).		Con	other sultat	ions
Centres,	Births and Stillbirths reported.	Primary Visits,	Re-Visits	Total Visits.	Primary Visits.	Re-Visits	Total Visits.	Number held.	Fresh Children Attending.	Total Attendances,	Number seen by Doctor.	Number held	Total Attendance.	Number held	Fresh Mothers attending.	Total Attendances.
Acock's Green	$\begin{array}{c} 561\\ 355\\ 380\\ 740\\ 326\\ 1020\\ 531\\ 404\\ 207\\ 634\\ 246\\ 375\\ 541\\ 227\\ 521\\ 920\\ 382\\ 246\\ 375\\ 541\\ 227\\ 521\\ 920\\ 382\\ 291\\ 391\\ 463\\ 557\\ 681\\ 529\\ 111\\ 396\\ 286\\ 893\\ \end{array}$	119	6124 7193	$\begin{array}{c} 13185\\ 7365\\ 7954\\ 13401\\ 6844\\ 12422\\ 6205\\ 7817\\ 4732\\ 11763\\ 6616\\ 4028\\ 9820\\ 15501\\ 9191\\ 4817\\ 5482\\ 12926\\ 6861\\ 9394\\ 16338\\ 8367\\ 27596\\ 13352\\ 14909\\ 6451\\ 2611\\ 2611\\ 6852\\ 7807\\ 17759\end{array}$	$\begin{array}{c} 106\\ 98\\ 53\\ 51\\ 3\\ 1422\\ 96\\ 87\\ 63\\ 73\\ 3\\ 12\\ 13\\ 3\\ 101\\ 61\\ 68\\ 944\\ 944\\ 94\\ 37\\ 299\\ 55\\ 28\\ 180\\ 666\\ 50\\ 666\\ 51\\ \end{array}$	357 129	911 504 274 505 472 886 997 423 179 206 623		315 624 376 345 934 303 270 420 371 5626 796 494 206 288 241	10242 3938 4185 5104 4883 5974	2024 1636 2318 2160 2339 1615 2083 4595 1512 2240 4219 1929 2118 2234 2316 2042 4870 2423 560 2042 4870 2453 560 1877 1830	50 25 48 49 45 48 48 49 48 48 48 48	747 397 721 752 680 843 765 892 904 794 685	$\begin{array}{c} 978\\ 488\\ 144\\ 499\\ 211\\ 981\\ 499\\ 211\\ 984\\ 72\\ 200\\ 499\\ 677\\ 200\\ 499\\ 511\\ 1438\\ 500\\ 488\\ 488\\ 72\\ 1000\\ 988\\ 244\\ 750\\ 988\\ 750\\ 750\\ 750\\ 750\\ 750\\ 750\\ 750\\ 750$	$\begin{array}{r} 162\\ 581\\ 224\\ 586\\ 260\\ 251\\ 588\\ 388\\ 100\\ 218\\ 158\\ 100\\ 218\\ 166\\ 106\\ 209\\ 281\\ 165\\ 185\\ 185\\ 185\\ 188\\ 220\\ 158\\ 356\\ 591\\ 287\\ 566\\ 262\\ 190\\ \end{array}$	759 581 1292 1812 1260 199 859 671
Totals	15374	15400	261724	289283	1970	16306	18276	3476	14131	178868	79586	1095	17289	2157	\$900	32571

MATERNITY AND CHILD WELFARE CENTRES, 1935.

INDIVIDUAL CHILDREN ATTENDING CENTRES IN 1935.

morne	onin onin	LUIL		1 101110	ing obtilitie		1000.		
Acock's Green			1,654		Monument Ro	oad			1,640
Billesley			1,023		Northfield	Taxaa.			959
Bloomsbury Street	areas		1,514		Perry Commo	n			1,632
Bromford	*****		883		Plowden Road	d (Glebe	Farm)	*****	235
Carnegie Institute			2,397		Selly Oak				512
Erdington			1,181		Stechford				1,032
Floodgate Street			771		Stirchley			*****	796
Greet			1,233		Stratford Roa	d			1,253
Handsworth			812		Sutton Street		*****		1,688
Harborne	and a second		568		Trinity Road				1,387
Hay Mills			1,141		Walsall Road				227
Hope Street			1,393		Washwood H	eath			929
Irving Street			743		Weoley Castle				892
Kettlehouse			594		Wright Street				1,632
King's Heath		*****	656		-				
Lancaster Street			1,504						33,958
Lansdowne Street			1,077						
	Under 1	vear			9,395				
	Over 1 y	ear		-	24,563				

MEDICAL INSPECTION FOR PRE-SCHOOL CHILDREN ("TODDLERS").

As a continuation and extension of the work initiated in 1930, 1,095 medical inspection clinics were held in 1935, with an attendance of 17,289 children, giving an average attendance of sixteen. The number of children attending was 5,410.

Children between 2 and 5 years come by appointment and are recalled every three months.

THE HEALTH OF CHILDREN BORN 1931-1934.

At the end of 1935, the health visitors were asked to make returns showing the health of children born in 1931, 1932, 1933 and 1934. The number of children, regarding whom complete returns were available, was 50,618, and of these, 40,669 or 80 per cent. were well and healthy during the year, while 590 died.

The tables given below show the causes of death and the causes of acute illness, as well as the more chronic ailments from which these children had suffered during 1935. The importance of infectious diseases as a cause of ill-health is well illustrated, respiratory conditions of various kinds being only second in frequency.

On the whole, the figures given show that there is a considerable percentage of chronic illhealth, as well as acute sickness, among the toddlers, and that further efforts are required to raise the general health standard among them.

Total number of children of whom complete returns are available born in-

1931.	1932.	1933,	1934.	Total.
12,648	12,813	12,110	13,047	50,618

Number well and healthy during the whole of 1935-40,669 Number died during 1935-590

Causes :---

Respiratory conditions			 123
Infectious diseases			 108
Prematurity			 81
Disease of Alimentary tract	t		 75
Congenital defects			 39
Ear, nose and throat condi	tions		 82
Diseases of central nervous		em	 26
Tubercular conditions		***	 25
Accidents			 18
Kidney conditions			 10
Cardio-vascular conditions			 10
Septic conditions			 7
Blood diseases			 4
Orthopaedic conditions			 42
Other conditions			 30

590

Number acutely ill-4,742

Causes :---

Infectious diseases			 2,838	
Respiratory conditions			 998	
Disease of alimentary trac	t		 154	
Ear, nose and throat con	ditions		 161	
Septic conditions			 71	
Accidents			 51	
Kidney conditions			 25	
Blood diseases			 21	
Skin conditions			 21	
Diseases of central nervou	is syste	em	 20	
Tubercular condition			 10	
Cardio-vascular conditions			 6	
Orthopaedic conditions			 3	
Eye conditions			 1	
Venereal disease			 1	
Other conditions			 361	
			4,742	
			-	

Number suffering from :---

Orthopaedic defects				1	1,289
Otorrhoea (chronic)				***	286
Enlarged tonsils and	d ade	enoids			969
Other ear, nose and	thro	at cond	itions		229
Asthma					70
Lung conditions				***	342
Mental defects					156
Squint					511
Skin conditions					149
Infectious diseases					149
Respiratory conditio	ns				113
Blood diseases					92
Eye conditions					71
Congenital defects					75
Ear, nose and throa	at co	onditions	5		64
Orthopaedic condition	ons				45
Disease of alimentar	y tra	act			44
Diseases of central	nerve	ous syst	em		37
Septic conditions					31
Accidents					29
Tubercular condition	IS				21
Cardio-vascular con	ditio	ns			8
Kidney conditions					4
Venereal disease					2
Other conditions					896

5,682

ANTE-NATAL CLINICS AT CHILD WELFARE CENTRES.

The average number of ante-natal clinics held weekly is 43 and the average attendance is 15 per clinic. 60 per cent. of the women seen by Health Visitors in 1935 attended these clinics. This is an increase of 2 per cent. on the previous year. The midwives are co-operating excellently and the great majority make every effort to secure their patients' attendance.

Year.	No. of Sessions.	No. of fresh expectant mothers attending ante-natal clinics.	Total attendances.	Births and Still-births.	Births and Still-births visited.	Percentage of mothers visited attending ante-natal clinics.
1916	No record	561	No record	21,347	8,143	7
1917		538		18,286	9,143	6
1918		1,603	3,275	17,430	12,044	13
1919		2,940	6,250	20,079	15,154	19
1920	857	3,939	8,812	25,980	21,006	19
1921	824	4,683	10,380	22,938	18,718	25
1922	800	4,095	8,450	20,510	16,254	25
1923	890	4,386	9,391	19,698	16,193	27
1924	981	4,043	10,395	18,934	15,969	25
1925	1,034	4,346	11,135	18,445	15,647	28
1926	1,117	4,630	12,043	18,517	15,626	30
1927	1,188	4,615	12,252	17,773	16,217	28
1928	1,304	6,098	15,803	17.817	16,186	38
1929	1,522	7,308	19,751	17,393	16,522	44
1930	2,071	9,466	28,323	18,105	17,828	53
1931	2,090	8,616	27,608	17,740	16,937	51
1932	1,892	8,174	25,983	17,219	16,190	50
1933	1,905	8,290	26,538	15,645	14,975	55
1934	1,953	8,867	28,719	16,261	15,161	58
1935	2,203	9,200	32,871	16,459	15,400	60

Ante-natal Clinics are also held at Dudley Road and Selly Oak Hospitals, at the Maternity Hospital and at the City Maternity Homes at Heathfield Road, and Wake Green Road. In 1985 the number of mothers attending numbered 5,186—probably a large number of these attended child welfare centres also.

ULTRA VIOLET LIGHT CLINICS AT CHILD WELFARE CENTRES.

Condition.			Total No of Cases.	No. of New Cases.	No. of Attendances
1. Rickets, prophylacti	c ricket	ts and			
delayed dentition			 2,272	833	11,405
2. Catarrhal			 422	161	2,080
3. General debility			 1,045	394	5,111
4. Nervous irritability			 92	34	437
5. Chronic chest condit			541	198	2,674
6. Asthma			 49	12	263
7. Muscular weakness			 266	90	1,400
8. Malnutrition			 247	88	1,122
9. Skin conditions			 14	6	83
10. Anorexia			 94	35	378
11. Enlarged glands			 19	11	94
12. Other conditions			 453	176	2,619
			5,514	2,038	27,666

The clinics are situated at the following Centres :---

Bloomsbury Street, Carnegie Institute, Floodgate Street, Greet, Harborne, Hope Street, Kingstanding, Lancaster Street, Monument Road, Sutton Street, Selly Oak, Stirchley, Stratford Road, Wright Street.

REMEDIAL EXERCISE CLINICS FOR TODDLERS.

				Pre	No. of scribing linics held,	No. attending	No. of Remedial Clinics held.	No. of Attendances.
Carnegie Institute					7	51	48	802
Selly Öak					7	61	47	772
Kingstanding					6	123	46	962
Wright Street					7	111	46	1,110
Stratford Road					6	137	48	1,052
Lancaster Street					6	55	46	740
Monument Road (co	ommenci	ng Api	ril, 1933	5)	5	85	37	556
Bloomsbury Street (2	14	12	142
					46	637	330	6,136

Type of Def	formit	у.						No. of cases of defect,	Percentage of Totai cases of defect.
Knock knees								520	27.0%
Postural defects								452	23.5%
Flat feet							-	368	19.1%
Chest deformitie	es		*****					342	17.7%
Unnotonioitu								153	7 90/
Constinution						*****		25	1.3%
Postural defects	1		*****			*****		61	3.2%
			*****	B1215		*****			
		*****	*****				*****	2	.1 /0
		-	-					2	.1%
Infantile paraly		****					*****	2	.1%
Spastic diplegia								1	.05%
Spastic paraples	<u>ș</u> ia		-					1	.05%
1933							No,	attending. 564	No. of attendances. 4,997
	*****				*****	*****			
1934								417	5,857
1935								637	6,136

DENTAL TREATMENT.

- Andrew Contraction	Stratford Road.	Carnegie Institute.	Lancaster St. Opened Sept. 9th, 1935.	Selly Oak Opened Sept. 2nd, 1935.	Total.
Number of clinics held	236	296	48	11	591
Mothers attending	3,086	4,082	471	100	7,739
Children attending	1,537	2,064	485	139	4,225
Average attendance (Mothers)	13	14	10	9	
(Children)	7	7	10	12	
Local anaesthetics	62	101	17	2	182
Gas	2,399	3,108	617	222	6,346
Dentures supplied	306	424	46		776

Additional clinics were opened at Lancaster Street and at Selly Oak Centres in September, 1935.

Of these clinics 472 were taken by Mr. Payton, the whole-time Dental Surgeon of the Department, and 119 by part-time dentists, whose services were required to deal with accumulated waiting lists.

In addition, 4 inspection clinics were held at the child welfare centres, when the dentist examined 227 expectant or nursing mothers and children, and gave on each occasion a lecture on dental hygiene.

TREATMENT OF EAR, NOSE, THROAT AND EYE CONDITIONS.

Cases referred from Child Welfare Centres and examined during 1935 at the Children's Hospital for the treatment of the above conditions were as follows :----

Eyes, ear and throat cases	 	 	 	378
Tonsils and adenoids (operation required)	 	 	 	511
Tonsils and adenoids (examination only)	 	 	 	348

THE PROVISION OF FOOD FOR NECESSITOUS MOTHERS AND CHILDREN.

MUNICIPAL KITCHEN AND FEEDING CENTRES.

During 1935 the number of dinner centres increased from seven to thirteen and the attendances at all the centres were satisfactory and steady throughout the year.

The six new dinner centres were commenced in November and prior to this the necessary additional equipment had been installed at the central kitchen in Bacchus Road whence the cooked meals are transported daily to the welfare centres.

The re-planning of the kitchen has simplified the work for the staff and the provision of a refrigerator has been very helpful.

It has been found possible to arrange for the transport of extra dinners by employing daily two motor vans instead of one and the service has been found reliable.

One extra kitchen assistant was appointed in September and the staff of three (the cook and her two assistants) have proved capable of carrying out the work efficiently.

The meals provided are uniformly appreciated. The usual two course meal, consisting of meat two vegetables and pudding, is served for both mothers and toddlers and the latter are given a glass of milk and some fruit in addition.

Attendances.

				1935.	
	Newtown Row	 		11,191]	
	Hope Street	 		8,262	
	River Street	 		8,516	
	Bloomsbury Street	 		8,748	
	Carnegie Institute	 		7,384	
	Sutton Street	 TTALE.		8,367	
	Monument Road	 	*****	11,949	- 69,194
ſ	Lancaster Street	 		899	
Commenced	Handsworth	 		509	
16/11/35	Irving Street	 		1,085	
(6 weeks).	Kingstanding	 		845	
(O WEEKS).	Lansdowne Street	 		646	
	Wright Street	 		793	
Total Attendances	- Mothers			22,795	
1 out mitematinees	Toddlers	 		46,399	69,194

Numbers of individual mothers and children who received dinners at some period during 1935.

					Mothers,	Toddlets
Newtown Row	 		 		93	197
Hope Street			 		95	123
River Street	 		 		74	130
Bloomsbury Street					68	92
Carnegie Institute		treat	 		68	107
Sutton Street	 		 		60	96
Monument Road			 	Dist.	115	140
Lancaster Street			 		25	73
Handeworth	 		 		6	24
Inving Street	 		 		22	60
Kingetanding					9	35
Lansdowne Street			 	in the second se	9	26
Wright Street			 		9	27
0						
					653	1,130

Cost of food Cost of transport		 	 		 	989 131	s. 5 16	d. 10 6
cost of transport	*****	 	 	*****	 	151	10	0
Receipts from Cen	tres	 	 		 	1,121 230	2 9	4 6
						£890	12	10

Net cost per meal, excluding wages and overhead charges=3.09d. Approximate total cost per meal, including wages and overhead charges=6.05d.

TODDLERS' "BREAKFAST" MEALS.

At 17 Centres, half a pint of milk and bread and butter were served to toddlers at 9 a.m. on five days during the week, and half a pint of milk was taken home to be given to the children later in the day. At 4 Centres, these meals were continued throughout the summer.

No. of individual of	children	attending	 	 	 	 1,013
Total attendances	made		 	 	 	 64,281

CARNEGIE INFANT WELFARE INSTITUTE.

The attendance at the various clinics and consultations has been satisfactory.

The toddlers' class, held on four afternoons a week, is very much enjoyed by the children and appreciated by their parents.

The Parents' League of Health, which now has 112 members, has had a good year, with an average attendance of about 70 at the monthly evening meetings. The members of the affiliated branch of the League at Monument Road Centre attend the meetings at the Carnegie Institute.

The class, held once a week, of Restorative Exercises for women, particularly in the post-natal period, has been much enjoyed by its members, who derive great benefit from it.

During the week before the Christmas recess, an evening's entertainment was given by the Carnegie Dramatic Society, which produced three plays before a large and enthusiastic audience.

During the year, a special effort has been made to encourage breast-feeding in view of the too high proportion of bottle-fed babies in the City. Special propaganda is done at the ante-natal clinics, and at the weekly test-feeding clinic, as well as at the ordinary infant consultations.

The Parents' Guidance Clinic, started in 1984, has continued during 1985 to render encouragement and assistance to mothers troubled by behaviour problems on the part of pre-school children.

The attendances at the Carnegie Institute were as follows :---

						No. held.	Total attendas	nces,
General infant cons	ultations		erca.			244	13,562	
Medical inspections	(18 mont)	hs to a	5 years)			48	621	
Ante-natal clinics					-	147	1,937	
X-ray clinics					-	47	531	
Dental clinics (treat	ment)					296	(4,082	mothers
							2,064	children
Light clinics (treatr						98	3,325	
Remedial exercises	(prescribin	ng)				6	51	
Sewing classes						45	573	
Cookery classes			-	*****		40	359	
Mothercraft classes						23	251	
Health talks				*****		238	4,249	
Parents' Guidance	clinics			*****		47	313	

Cost.

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THE OBSERVATION WARD CARNEGIE INSTITUTE.

During the year 1985, 144 children were admitted to the ward and the average length of stay was 211 days.

Five mothers were also admitted because they were breast feeding ill children.

There was 1 case of re-admission and 4 deaths. Excluding 5 healthy children admitted for investigation prior to adoption, there were 139 ailing children. Of these :--

38 were discharged as cured.

89 were discharged as improved.

12 were discharged as in status quo.

During the year 21 children were transferred to Canwell Hall for further treatmentthe majority of these being chronic chest cases. Three were transferred to the Children's Hospital for operation. Six children were sent to Little Bromwich Hospital-3 with whooping-cough, one with measles and 2 with dysentery.

Three cases were transferred to Yardley Green Road Sanatorium. The 4 deaths were due to :---

- 1. Congenital heart disease-Broncho pneumonia.
- Congenital heart disease—Gastro-enteritis.
 Broncho-pneumonia.
- 4. Acute otitis media-Broncho-pneumonia.

As in previous years, the reason for admission to the ward was chiefly for the investigation of children in a debilitated condition, or of those failing to make normal progress-mentally or physically.

Amongst the toddlers, chest conditions again headed the list and nutritional anaemia came second, whilst among the babies feeding difficulties and gastro-intestinal symptoms were the chief factors.

THE PARENTS' GUIDANCE CLINIC,

The Parents' Guidance Clinic, opened in January, 1934 at the Carnegie Institue to assist parents in the management of difficult children, with Dr. J. Hammond, of Wolverhampton, as the medical psychologist, and Dr. Ursula Cox as his assistant, has proved a very helpful feature of the Child Welfare Scheme.

Altogether 116 children have attended with a total of 313 attendances.

The Medical Officers at the Child Welfare Centres recommend the mothers to attend and fill in an appropriate report form, which is supplemented by a report from the Superintendent of the Centre. The Clinic is held weekly. The reports from medical officers and health visitors show good results in a large proportion of cases.

The chief difficulties for which the mothers seek advice are fears of various kinds, e.g., night terrors, etc., unruly and agressive behaviour, jealousy, enuresis, anorexia, and so forth.

Many mothers have expressed their appreciation of the help which they have received at this clinic.

HOME HELPS.

Fifty Home Helps were employed during 1935. Owing to the high standard required it is difficult to increase the number, though more are needed.

The Home Helps attended 908 cases in 1935—i.e., 180 more than in the preceding year. Eighty-five were cases of non-infectious illness of mothers whose families included children under five years of age, and the remainder were maternity cases or illnesses directly attributable to a recent or an approaching confinement.

Their work has been carefully supervised, and they appear to have given great satisfaction. Numerous letters of thanks have been received from the women helped.

The Home Helps adapted themselves very well to each of the cases to which they were sent. The households attended have been very varied in type and have included :---

(1) Modern houses with up-to-date apparatus, and old houses with communal wash-house and steep stairs, up and down which the Home Help was expected to carry trays of food, coal, and the ex-baby.

(2) Small families where the house was well kept and much polishing expected, and large families where the Home Help's time was taken up with piles of washing, preparation of meals and washing up of crockery, as well as the care of toddlers.

(3) Relatively well-to-do households where carefully cooked meals were expected, and poor families where the Home Help's ingenuity had to be exercised in making nourishing dishes at the least possible expense, and where washing and cleaning utensils were very limited or had to be borrowed.

However different in circumstances they might be, the families appeared to have one point in common : an unwillingness to part with the Home Helps at the end of their period of service.

In some cases of illness, this period was very protracted, being sometimes as long as three or four months, but the usual time for a normal confinement has been from two to three weeks.

CITY BABIES' HOSPITAL.

CANWELL HALL (84 beds).

A full statement of the work of the hospital was given in the 1933 report. There has been no material alteration in its scope and character. The demand for beds has been as great as ever, and the children on the whole have benefited markedly from their stay. The long period of treatment available for non-pulmonary lung infection has proved of great value.

Rickets continues to diminish. There were 13 cases in 1935 as against 22 cases in 1984, and 47 in 1933, 91 in 1932, and 71 in 1931. At the same time, a very high proportion of the children show evidence of malnutrition (see table). It would appear that the centres are dealing satisfactorily with the prevention of severe rickets through the sale of cod-liver oil and the ultra-violet light clinics, but that malnutrition remains a major problem. Forty-three children admitted were found to be suffering from chronic pulmonary infections. There were 70 cases of well marked nutritional anaemia.

Infectious disease has been a source of anxiety during the year, and further steps have been taken to safeguard the children and nurses.

A hut has been placed near the laundry for sorting soiled linen, and no sluicing is now done in the house. It is hoped that diarrhoeal infections will be more easily controlled in these circumstances. The nurses are required to wear masks on duty during the winter and spring months to diminish the spread of respiratory infections.

Of the 481 children admitted during 1935, only 24 (5 per cent.) gave a positive Mantoux reaction, showing previous infection with tuberculosis. Of these, five were considered to require sanatorium treatment. In ten cases, there was a family history of tuberculosis and definite contact with infective cases. The chief outbreaks of infection were as follows :---

Measles.

During the summer of this year, there were 34 cases of measles in the Hospital, concurrently with an exceptionally severe epidemic in the City.

The earliest cases were in the babies' ward, starting on April 4th. Eight infants were affected, and also one nurse-on April 22nd. There were no cases in this ward after the end of May.

Among the older children the epidemic started early in June, arising almost simultaneously among children recently admitted and children who had been in the hospital for several weeks, the latter presumably contracting the infection from visitors. Thereafter, there were 25 cases in the toddlers' and admission wards, the last case occurring on July 29th.

The majority of the cases were transferred to the City Fever Hospital, but owing to the pressure on the accommodation there, some cases had to be nursed for the whole or part of the illness at the Babies' Hospital. There were two deaths due to measles in the Hospital, and many of the cases were seriously ill. Immunising serum was used when possible. The Hospital was closed to further admissions and visiting days were suspended for several weeks. In the latter half of July, cases were accepted for admission if known to have had measles already.

(2) Rubella (German Measles).

Thirty-nine cases of rubella occurred at the same time as the cases of measles. Ten children were transferred to Little Bromwich Fever Hospital; the remainder were nursed in the Babies' Hospital. Nine nurses and one ward maid also contracted rubella and were nursed in Little Bromwich Fever Hospital.

(3) Dysentery.

The incidence of infection was high in autumn and early winter. The first cases occurred in an admission ward on September 16th and September 29th. Both these children were admitted incubating the disease. Within the next fortnight thirteen children had clinical symptoms of dysentery, but only two of the children yielded positive cultures of bacilli dysenteriae. The nurses attending these children were swabbed and one nurse gave a positive culture.

At the same time there were seven cases of severe enteritis in the Baby Ward. Three babies died. The infection appeared to be due to Bacillus Morgani No. 1.

At the end of October, another outbreak occurred in the Toddlers' Wards. Nine children had clinical symptoms, apparently due to B. dysenteriae Sonne. The nurses were again swabbed. One nurse gave a positive growth but had no clinical symptoms.

In December, a third outbreak occurred. Four children were admitted and on examination gave positive growths of bacilli dysenteriae Sonne, but had no clinical symptoms. Seven children developed clinical symptoms; three gave positive growths, on examination, of B. dysenteriae Sonne, and four were negative. Since December, the infection has given no further trouble.

In order to limit spread of infection in the admission wards, a faecal swab is taken from every child on admission and bed isolation is strictly maintained till reports are received.

Staff.

The amount of illness among the staff was not above the average. There were three cases of catarrhal jaundice, an infectious condition not infrequently occurring among the staffs of children's hospitals. Precautions are taken to obviate spread. One case of diphtheria occurred among the nursing staff in a nurse who had not been immunised.

Admissions and Discharges.

Number of Admissions					Number	of Di	scharge	es.	
0—1 years 1—2 years 2—5 years	127 165 189			1	Well mproved m status			132 212 8	
	481							352	
Number of children taken home b									25
Number of children transferred to	o other	hospitals	and	home	:5				92
Number of deaths								***	22
Number in hospital at end of year									72
Average length of stay									51 days

136

70

23

43

5

10

7

15

70

5

8

10

2

6

7

13

12

21

327

The diagnosed cases discharged home were classified as follows :----1-2 yrs. 0-1 yrs 2-6 yrs. Total. 35 Anaemia 11 24 Acute chest conditions 8 6 9 Chronic chest conditions 4 15 24 Congenital heart disease 2 1 2 Ear conditions (acute) 3 3 4 Enteritis 4 3 12 Gastro-enteritis 2 1 General debility and malnutrition 7 24 39 Hostel babies 4 1 Hypertrophied and septic tonsils 5 3 2 3 Mismanaged 5 Mentally deficient 1 1 Nervous debility 6 4 3 Pink's disease Rickets 1 8 4 Urinary diseases 4 1 7 Other conditions 2 6 13 68 115 144 Cases transferred to Little Bromwich Fever Hospital :-Chickenpox 2 Diphtheria 1 Nasal diphtheria 5 ... Dysentery 10 Measles 24Rubella 10 ... Mumps 2 Enteritis 5 Whooping cough 4 Scarlet fever 4 67 Cases transferred to other hospitals :---To the Children's Hospital. Congenital heart disease and jaundice 1 (for blood transfusion). Empyema and otitis media 1 (for operation). Acute gastro-enteritis (for blood transfusion). 3 $\frac{2}{5}$ Mastoiditis (for operation) Acute otitis media To Yardley Road Sanatorium. Pulmonary tuberculosis 1 To Selly Oak Hospital. Otorrhoea and septic cervical adenitis... (for operation) Mastoiditis To Dudley Road Hospital. 1 (for operation). Empyema Causes of death. Broncho-pneumonia ... 10 Congenital heart disease 2 Dysentery 1 Gastro-enteritis 5 Measles and broncho-pneumonia 1 -----Measles and otitis media 1 Severe anaemia and pyelitis Congenital malformation of kidneys and pyelitis 1 22 Classification of ages at death. 0-2 months. 2-6 months. 2 8 1-5 years. 6-12 months. 8 4

THE CONVALESCENT HOME FOR MOTHERS.

PYPE HAVES HALL, CHESTER ROAD, ERDINGTON.

(Beds-Mothers 22; Babies-20).

 Total number of mothers admitted
 ... 394

 Of these 32 were ante-natal cases
 ... 375

 Total number of babies admitted
 ... 375

The Home admits expectant mothers and mothers with babies under six months who require rest and care. During 1935 Pype Hayes Hall was in full and regular use, to the great satisfaction of the mothers, several of whom returned for a second visit.

There were no cases of diarrhoea and vomiting among the infants during the summer months. In October, one baby was sent home with whooping cough, and also nine mothers and their babies who were contacts. However, all of these returned to finish their stay after the lapse of the incubation period. There were no further cases of infection.

Breast feeding cases showed a steady increase of breast milk, and breast feeding was re-established in many cases of babies who had been bottle-fed for some weeks.

The mothers were definitely refreshed mentally and physically by their stay, and their knowledge of mothercraft was extended in accordance with the needs of the individual mother.

1.2.1

Aunitss	IOHS,		
ofothers		 	394
Babies		 	375
Expectant mothers		 	32
Babies without mothers		 	15

Total 816

LORDSWOOD RESIDENT NURSERY.

(35 beds).

There were 123 admissions in 1935.

BEE

There were three outbreaks of infection during the year—whooping cough affecting nine children, scarlet fever affecting four children, and german measles affecting nine children. These infections again emphasised the need for isolation facilities. There was also a mild outbreak of enteritis in which 23 older children were affected. This was considered to be associated with a particular meal of fish, but unfortunately none of the fish remained for investigation.

On the whole, the children have done very well considering the type of child admitted.

One child died suddenly in the Home from congenital heart disease, and 25 were transferred to hospitals, other than Little Bromwich Hopsital, suffering from conditions including pneumonia, middle ear disease, tuberculosis and osteomyelitis. Eight of these children died in hospital.

The children are frequently in a poor state of health when first admitted. Thus, 16 of the 25 cases sent to hospital required to be sent within four weeks of admission to Lordswood Nursery; and six of those who died were in this group.

THE CITY MATERNITY HOMES.

THE WAKE GREEN ROAD MATERNITY HOME (SORRENTO).

There has been an increased demand for beds during 1985 and the number of patients admitted has been greater than in any previous year. This has been possible in the maternity wards because the length of stay has been reduced to 10 days from a fortnight. The change was considered desirable in the interest of the patients, with whom it has proved popular.

There was no case of puerperal septicaemia; two cases of mild sapraemia were notified, as well as four cases of mastitis, and one of tuberculosis. This gives seven cases of illness in 659 maternity cases. One maternal death occurred from intestinal obstruction from a Meckel's diverticulum (a congenital abnormality). The patient was operated on in the General Hospital, but did not survive.

One of the features to be noted is the low forceps rate, viz., 4.2 per cent. The number of complicated labours, in spite of intensive ante-natal care, is of considerable interest.

Patients are admitted to the Home on social rather than medical grounds, except when they have been admitted to the ante-natal ward for treatment. Only 20 of the total deliveries (unbooked cases) belonged to the latter group, 639 were booked cases, and of these, 342 were primiparae. This high proportion is accounted for by the number of young married persons living in lodgings.

Of the 639 booked cases, no less than 279 or 44 per cent. required admission to the antenatal ward, in every case for a medical reason. The importance of a sufficiency of ante-natal beds in a maternity institution is again emphasised.

Of the 665 babies born, 2.25 per cent. (15) were stillborn, and 2.1 per cent. (14) died during the first two weeks of life.

The premature Baby Ward has been well used. One hundred and ninety-nine babies were admitted. Investigations have been made into various conditions affecting the premature infant.

The figures for the year's work are given below :---

Maternity Wards. (21 beds).

(52%)No. of cases admitted-primiparae 342 multiparae 317

(48%)

Total 659

Booked cases-639

Unbooked cases admitted from ante-natal ward-20 No. of babies born-665 (including three sets of twins).

- 1. Complications of Pregnancy. See report of ante-natal ward.
- II. Complications of Labour.
 - (1)Twins. 3 cases.
 - Breech presentations. 17 cases. (2)
 - Transverse presentations. 2 cases. (3)
 - (4)
 - Placenta praevia. 1 case. Accidental haemorrhage. 1 case. (5)
 - Retained placenta. 2 cases. (6)
 - Post-partum haemorrhage. 13 cases. (7)
 - Perineal lacerations. 187=28.5% of cases. (8)
 - (9) Prolapse of cord. 1 case.

Obstretric operations performed

- External version at 36 weeks under anaesthetic. 3 cases.
- Operative induction of labour. 29 cases. (2)
- (3)Podalic version. 1 case.
- Forceps applied in 28 cases=4.25% of cases. (4)

III. Complications of the Puerperium.

- (1) Maternal Mortality. 1 case. Case of intestinal obstruction by Meckel's diverticulum during labour. Transferred to General Hospital and laparotomy performed, but died shortly after operation.
- (2) Maternal Morbidity. Cases of pyrexia notified 7. Cases of puerperal sepsis Nil-

Cases of Pyrexia :--

Mastitis	 	 	4
Mild sapraemia		 	2
Tuberculosis	 	 ***	1
			7

Babies.

Number born-665 Number stillborn-15 or 2.25 per cent. Died in first 2 weeks-14 or 2.1 per cent. No. born before 36 weeks-24 or 3.6 per cent.

Causes of Stillbirths.

Cord round neck			 3 cases	
Accidental ante-partum	haemor	rhage	 1 case	
Placenta praevia			 1 ,,	
Transverse presentation			 1 ,,	
Toxaemia				
Foetal abnormality			 	
Long labour			 2 ,,	
Cause unknown			 3 ,,	
			-	
			15	
			_	

Causes of deaths in the first two weeks.

Haemorrhagic di	sease			2 cases
Intra-cranial inju	iry			2 ,,
Toxaemia		 		4 ,,
Atelectasis		 		1 ,,
Prematurity		 		5 ,,
			-	-
			1	4

Other abnormalities in babies, included-

Ophthalmia neonatorum—2 cases notified Congenital heart disease Cleft palate Congenital obliteration of bile ducts Grave familial jaundice Oedema of newborn Depressed fracture of skull (operation successful) Pyloric stenosis, etc..

Investigation of methods of feeding of child at two months.

(1) Of those sent out fully breast-feeding at 10 days-

	(still fully breast feeding	ng in	 67 per cent.
at two months-	Breast and bottle in		 11 per cent.
	Bottle in		 22 per cent.

(2) Of those sent out breast and bottle at 10 days-

	Fully breast in	 	12 per cent.
at two months	Breast and bottle in	 	28 per cent.
	Bottle	 	60 per cent.

At discharge (10 days).

Breast-fed	 	 80	per	cent.
Breast and bottle		 8	per	cent.
Bottle	 	 12	per	cent.

Thus the percentage of figures for the total number of babies is as follows :----

			10 days.	2 months.
Breast f	ed		80%	55%
Breast a	and	bottle	8%	11%
Bottle			12%	44%
Ante-natal Ward.

	admitted-booked admitted-unbooked	279 59

338

Complications in booked cases.

No. of cases-279 or 42.5 per cent. of cases.

Reason for Admission.

Toxaemia					74
Pvelitis					20
Tuberculosis					1
To prevent prematu	re labo	111			8
Anaemia	ine moo				2
For induction of la	hour				55
		1		***	
Ante-partum haemo		(all	varieties)		28
To prevent abortio	n				8
Varicose veins					3
Chest conditions					2
Kidney case					1
Haematemesis					î
Vaginal discharge					6
Vomiting of pregna	ncy				3
Heart cases					9
Goitre					1
For external version	n				2
Shingles					1
In early labour					30
For observation					29
For observation				***	29
				-	
			Tot	al	279

Unbooked Cases. Total=59 cases.

A

Analysis of cause for admission and result :---

	Caus	e for a	dmission	12	N	o, of Cases,		sults.	
Heart	*****		•••••	*****		7	1 retained delivery		home.
Toxaemia	ı					16	12	4 .,	,,
Kidney d	lisease	*****				2	1 "	1 "	
Pyelitis						8	3 "	5 ,,	.,
To preve	nt pren	naturi	ity			3	1 ,,	2 ,,	
Chest			*****	maket.		1	-	1 ,,	,,
Anaemia				*****	-	2		2 ,,	
Vomiting						3		3 "	,,
Ante-par		emori	rhage			4		4 ,,	
Glycosuri	a					2		2 ,,	
Chorea	*****		*****			1	1 ,,		
Varicose					+	2		2 8	
Observat	ion	*****		******		8	—	8 "	**
						59	19	40	
nte-natal Cl	inics.					No held.	New Patients.	Total	ittendances
Doctors' (Clinics					157	729		,241
Midwives	' Clinic	s				51			765
						208	729	-4	,006

Post-natal Clinics.

No. of patients attending=452. (60%).

In 452 cases :

Everything normal in 434 cases.

Abnormality in 18 cases or 4% of cases examined.

Analysis of abnormalities.

(a) Mastitis (Total 6 cases)

1-which subsided 3-2-3 weeks after discharge. 1-5 weeks after discharge 1-6 weeks after discharge ...

- (b) Pyelitis. 1 case.
- Albumin in urine (2 cases of toxaemia). 2 cases. (c)
- Retroversion of uterus. 5 cases. Anal fissure. 3 cases. (d)

(e) (f) Deficient perineum (sent to hospital for perineorrhaphy). 1 case. Total=18 cases.

Premature Baby Ward.

No. of premature babies admitted=199. No. of weakly babies admitted=30. No. of mothers admitted with babies=86.

Weakly Infants. Total 30 cases.

Discharged well. 18 cases. Died. 12 cases.

Causes of death were :---

Pneumonia			3
Intra-cranial in	jury		3
Marasmus			1
Congenital hear	t		1
Diarrhoea and	vomiti	ng	1
Mongolism		-	1
Spina bifida			1
Toxaemia			1

Premature Babies.

Weight,		No.	Died.	Moribund on	Death Rate.	Net death rate (i.e., omitting
0 0 11				admission.		moribund).
0-2 lbs		9	9	9	100%	
2-3 lbs		28	21	15	75%	46%
3-4 lbs		74	53	24	71%	58%
4-5 lbs		58	27	11	47%	58% 34%
Over 5 lbs.	*****	30	. 2	2	6%	Nil
Totals		199	112	61	56%	37%

12

Causes of Death.

Chest conditions		 	 5
Diarrhoea and vomitin	g		 3
Congenital heart		 	 1
Intracranial injury		 	 4
Parotitis	***	 	 1
Haemorrhagic disease		 	 18
Oedema of newborn		 	 15
Jaundice		 	 2
Prematurity only		 	 68

112

CITY MATERNITY HOME,

HEATHFIELD ROAD, HANDSWORTH.

The Home has been fully booked up throughout the year. The work has reached a high standard, and the results have been uniformly good, except in relation to mastitis. The number of cases occurring in the Home was 19 in 488 deliveries.

The continuance of this unfortunate complication of the puerperium has caused the staff considerable anxiety. It has been found impossible, so far, to trace its source. Every precaution has been taken and full investigations carried out. Additional cases have been' reported after the patients returned to their homes, as is frequently the case with this condition. Mastitis is a fairly common event in the puerperium; it is seldom fatal, and fortunately none of these cases have had such a termination. The condition is fairly prevalent at present in the larger cities and a considerable number of maternity hospitals and homes have been faced with the same difficulties.

Maternity Wards. (17 beds).

Number of mothers delivered—488 Primiparae—288=59 per cent. Multiparae—200=41 per cent. Booked cases—476

Unbooked cases admitted from ante-natal ward-12.

Complications of Labour.

	Operative inductions				32 cases
	Placenta praevia				5 ,, .
	Accidental haemorrhag	ge			2 ,,
	Prolapsed cord				2 ,,
	Breech presentations				12 ,,
	Twins				6 ,,
	Instrumental deliverie	5			26 ,,
	Episiotomy, followed	by norr	nal la	bour	11 ,,
	Perineal lacerations				66 ,,
	Post-partum haemorrh exceeded 20 ozs.)	nage (lo			16 ,,
	Manual removal of pl				1 ,,
	Ol and the				1 ,,
Complications of Puerf	crium.				
	Notifiable pyrexia				4 ,,
	Mastitis				19 ,,
Infants.					
injunis.	Number of infants be	orn			494
	Number of prematur				14
	Number of stillbirths				19
Causes of stillbirths.					
	Inadequate placenta		arcts		4 cases
	Central placenta praev	ла		••••	1 ,,
		***			2 ,,
	Cord round neck				2 "
	True knot in cord				1 ,,
	Forceps delivery	Life de			1 ,,
	Hydrocephalus, spina				1 ,, 1
	Anencephalus	***			1 ,,
Number of infant	s dying in first two we	eks—11	L		
Causes.					
	Prematurity				5
	Congenital abnormali	ities			1
	Cranial injury				1 .
	Haemorrhagic disease	e			2
	Tetany				1
	Septicaemia				1
	of notified onlythalmia	0			

Number of cases of notified ophthalmia-2

	A	0	
1	4	o	2

			37	
A 991	le-nat	al	Vara	
23 740	6-70384		1 1011 10	

	Number of Total add	nission	8		admitted	227 260	
Reason for admission.	Number	of unbo	oked	cases		74 Booked.	Unbooked.
Toxaemia	1.0	-				42	25
Pyelitis					-	16	10
Cervicitis						14	12
Placenta praevia						6	1
Accidental haemori						2	
Hyperemesis						4	3
Angomio						2	0
Endleman		*****	*****			2	
Cardina disease		*****					3
Phlebitis and vario		*****	1001			6	0
Investigation of gl		*****				3	4
	buminuria					4	$2 \\ 2 \\ 3$
" " "			81114 ·			5	2
	odominal p	pam	*****		*****	5	3
Versions		*****	*****				3
Inductions					*****	14	
Prevention premat	ure labour	arres a	*****		*****	5	
Rest		*****	*****		#11+#	14	7
Observation		*****	*****	-11-14		9	-
						153	74

31.4 per cent. of booked cases admitted to ante-natal ward.

One death from cerebral haemorrhage occurred in ante-natal ward.

Ante-natal Clinics. Doctors' Clinics Midwives' Clinics	 	 	No. held. 126 51	New patients. 577	Total attendances. 2,400 312
	Total	 	177	577	2,712

Post-natal Clinics.

Number held. 50

Total attendances. 253

52 per cent. of patients attended for post-natal examination.

CARE OF THE UNMARRIED MOTHER.

The method of dealing with the unmarried mother, and with married women and widows with illegitimate children, has been detailed in previous annual reports. The same procedure has been followed throughout 1935. A total of 377 unmarried mothers and 41 married women with illegitimate children were dealt with in 1935.

Of the total cases, 308 were first cases of illegitimacy.

The cases were dealt with as follows-

Dealt with at			First cases.	Un-married Mothers. Multiple cases.	Married Women
Hope Lodge		 	50	_	-
The Hawthorns (Salvation Army)		 	19	9	2
Woodville (Catholic)		 	15	—	
Cleveland House (Venereal Disease	cases)	 	9	-	-
The Hostel (Post-natal only)		 	12	1	-
Birmingham Infirmary		 	4	18	4
Greenhill Hostel		 	3	-	
Own home, except for confinement		 41114	129	31	24
Own home entirely		 	67	10	11
			308	69	41

The number of cases with venereal disease was 27. All but two received systematic treatment.

The number of mentally defective women was 9 (first cases, 6; multiple cases, 3).

Of these, four have been certified and are in institutions. Three have been examined and are in an institution although not yet certified. The remainder have been reported to the appropriate department and remain under supervision at home.

The subsequent history of cases dealt with in previous years is given below :---

						ther pregn		
Cases	dealt	with,			2nd,	3rd,	4th a	nd 5th.
1934	-	418	 	 	5	2	1	
1933		451	 	 	14	5		
1932		318	 	 	13	4	1	2
1931		239	 *****	 	4	2		
1930	-	222	 	 	5	-	-	

INFANT LIFE PROTECTION.

The supervision of foster mothers and children, extended under the Children and Young Persons' Act, 1932, applies to children up to the age of nine, and includes all children received for reward or promise of reward apart from their parents, even for limited periods.

The department receives many applications for recommendations of foster mothers as well as applications for foster children, but the former being much more numerous, advertisements for suitable foster mothers have proved necessary.

The department frequently assists suitable persons wishing to adopt children.

The foster mothers on the whole co-operate in the most friendly way with the health department and when difficulties arise they frequently call on the staff to assist in their settlement. Care is taken to maintain the mother's relationship with, and responsibility for, her child placed with a foster mother.

At the end of 1935, 320 foster mothers were on the register and 337 foster children under supervision.

During the year :--

244 homes were registered

236 applications were received for foster mothers

165 applications were received for foster children

318 visits were paid to ascertain the suitability of homes offered

373 foster mothers were interviewed at the Council House for advice and instruction

THE FOSTER MOTHER SERVICE.

The foster mother service which came into effect early in 1935, has proved to be of great benefit, especially to unmarried mothers who for economic reasons would be unable to choose for their children a home of reasonably good standing. Full details of the scheme were given in the report for 1934.

The following figures relate to the period since the inception of the scheme :---

During the period February 28th-December 31st- 98 children have been placed with foster mothers registered under the scheme. Of these-

11 went back to parents
3 awaiting adoption
1 care of Dr. Barnardo's Homes
1 returned to Hawthorns
1 returned to Lordswood Nursery
1 transferred to Erdington
1 transferred to Summer Hill Homes
2 transferred to the Carnegie Observation Ward
2 died
8 removed to another foster mother

The remaining 67 have stayed with the foster mothers with whom they were originally placed.

The aim has been to select foster parents who are lovers of children, and are not taking them for monetary gain alone. Care has been taken to find homes where the income is of a reasonable standard, and where it is felt they would get good character training.

The majority of these special foster homes are in the suburbs where the children can benefit by better housing conditions and fresh air.

FOSTER MOTHERS ON REGISTER.

December, 1935	 	 All Foster Mothers, 820	Foster Mother's Service, 79	All Foster Children, 337	Foster Mother's Service. 82

SUPERVISION OF MIDWIVES.

During the year 1935, 215 midwives notified their intention to practise in the City. Of these 23 resided outside the City, and therefore do not come under routine inspections. Of the remainder, 7 were temporarily employed and 21 were attached to various institutions.

It is interesting to note that no less than 83 of the midwives have received recognised general training, in addition to their midwifery certificate, and that only 5 of the so-called bonafide midwives remain on the Roll, the rest having obtained their Central Midwives' Board Certificate.

During the year, 18 midwives gave up work owing to various reasons, such as old age, illhealth, or from having taken up work elsewhere.

There were 179 residing in the City and having private practices at the end of 1934 and 161 at the end of 1935.

The midwives sent for medical help in 2,607 cases, for the mother in 1,889 instances and for the child in 718.

Reasons for sending for medical help :---

For Mother-1,889.

For Child-718.

Delayed labour			 413
Laceration of perineum			 580
Haemorrhage			 179
Adherent placenta			 55
Abnormal presentation		***	 100
Abortion or miscarriage			 52
Rise of temperature		***	 107
Other causes	***	***	 403

Ophthalmia	 	 	440
Prematurity	4.4.4	 	78
Convulsions	 ***	 	5
Jaundice	 	 	12
Deformity	 	 	41
Skin eruptions	 	 	7
Other causes	 	 ***	135

Six midwives were suspended during the year; four with an infected throat, and two as scarlet fever contacts. There is a steady improvement in the work of practising midwives, and in only one instance was it found necessary to report a midwife to the Central Midwives' Board.

The following table shows the number of cases taken by individual midwives :

Midwives	taking	under		cases	per	annum	107
,,	,,,		50-100	,,	,,		46
,,	**		100-150	,,	,,	,,	16
"	**		150-200	**	,,	,,	9
	,,		over 200	,,,	,,	,,	6

The midwives attended 7,496 cases (46 per cent of the births and stillbirths), and in 2,513 cases they acted as maternity nurses (15 per cent. of the notified births); total, 61 per cent.

The following table is of interest :---

MIDWIVES' CASES-MEDICAL HELP CALLS.

	1926.	1927.	1928.	1929.	1930.	1931.	1932.	1933.	1934.	1935.
Total cases attended	12,534	10,921	10,655	10,934	9,398	9,894	9,205	7,933	7,555	7,496
Total medical help						and the second		1. C. 1999	100.000	Constant of the second
calls	2,305	2,518	3,236	3,026	3,360	3,065	2,706	2,256	2,479	2,607
Percentage of calls	18	23	30	28	36	31	29	28	33	35
Reasons :										
Delayed labour	575	628	902	806	913	758	592	432	500	413
Lacerated perineum	462	494	641	674	775	708	620	539	550	580
Haemorrhage	111	133	210	190	213	220	186	158	165	179
Adherent placenta	65	94	104	85	79	61	71	56	75	55
Abnormal										
presentation	103	83	91	102	131	114	106	141	93	100
Discharging eyes	287	313	374	380	461	427	379	318	354	440
Other causes	702	773	914	789	788	777	752	612	742	840

The following visits were paid during the year by the Midwives' Inspectors :---

Routine visits to midwives					 	357
Special visits to midwives					 	116
					 	431
Visits to ophthalmia neonatorum	cases				 	809
Visits to puerperal sepsis cases			***		 	189
					 	94
					 	49
				***	 	202
		***			 	425
The number of midwives intervie	wed w	as			 	396

ATTENDANCE AT CHILDBIRTH.

The births occurring in the City during the year were as follows :

		 17,090*
Stillbirths notified Failed to notify	 	 622 298
Births notified	 	 16,170

*This figure does not include Birmingham confinements occurring outside the City, but includes the confinements of a number of persons whose residence was outside the area.

Medical practitioners attended 22 per cent. in the patients' homes, medical students 1 per cent., and midwives 44 per cent., while 33 per cent. of births occurred in institutions. This is set out in detail as follows :---

Cases at home attended by midwives :

 (a) As midwives (b) As nurses * This figure includes 		 cases	 attend	ied by	Mater	*7,496—4 2,513—1 mity Hosp	5% J	10,009—59%
Midwives, and also 662 cases								
Cases at home by Queen's Hos	spital S	tudents						222-1%
Cases attended at home by de by relatives or handywom *As shown :	en	*****			*****	than midw midwives as		1,176 7%
Cases in Hospitals, Homes an	d Insti	itutions	:					
At Dudley Road Hospit						1,085	1	
At Selly Oak Hospital		*****				671		
At Wake Green Road H		*****				660		
At Heathfield Road Hor	ne	****				488		
At Maternity Hospital	*****					1,320		
						213		5,683-33%
At St. Chad's Hospital				-		210	6	
At Women's Hospital		*****			*****	35		
At General Hospital						34		
At Hope Lodge						26		
At other institutions		*****				5		
At private nursing home	25				*****	936 Total	1	17.090

District Midwifery.

MCC

Apart from admission to institutions, 11,407 women were delivered in private houses. The number of independent practising midwives is 174 and they attended 5,600 as midwives and 2,513 as nurses. There are also 10 midwives employed in 8 districts (2 acting as assistants and relief midwives) for the training of midwife pupils from the Maternity Hospital. These women attended 1,896 cases, out of which 310 were also attended by medical students. Under a special arrangement made by the Queen's Hospital medical students attended 222 cases at their homes. The balance of district midwifery (1,176 cases or 7 per cent.) was attended by doctors assisted by qualified monthly nurses, relatives or handywomen. In all private medical practitioners attended 4,351 confinements or 25 per cent. of the total.

The Public Health Committee pay the midwife's fee in certain cases of unemployment where the maternity benefit has lapsed, provided the home conditions are suitable for the confinement. The fee was paid in 62 cases during 1985.

NURSING HOMES.

There are now 44 nursing homes in Birmingham. One new home has been opened—a small maternity home. Three other homes have been given up; these were also small maternity homes, run by midwives in association with a district practice. Applications for registration of two further nursing homes are under consideration.

In the great majority of the Homes the standard of equipment and nursing is satisfactory.

Total number of Nursing Homes at the end of the year 1935-44.

Total number of beds in these homes					_	414
Number of Homes which are equipped for surgical work						15
Number of Homes which take chronic or senile cases only	y					10
Number of beds in these ten Homes				1004		110
			1001	*****		12
Number of beds in these twelve Homes						35
Number of Homes which keep some beds for maternity c	ases					22
Approximate number of beds available for maternity of	cases i	in the	se 22 H	omes		70
Approximate total maternity beds			*****			105
Number of Homes run by a midwife in conjunction with a	a distr	rict p	ractice	*****		3

BIRTH CONTROL CLINICS.

Birth Control Clinics were opened at Dudley Road Hospital in July and at Selly Oak Hospital in September, 1935, in accordance with the instructions of the City Council. The data up to the end of the year are necessarily of little value. The following figures, presented to the Public Health Committee in March, 1936, indicate the number of cases dealt with from the opening of these clinics up to March 2nd, 1936 :--

7	
21	
3	
28	
)) 3

3. Number in which birth control advice was given, but pregnancy resulted -----..... -

1 (Advice not (Uncertain whether pregnant before advice). followed).

2

IRTHS.	Other Accidents of Child Birth.	$\begin{array}{c} \textbf{22.01}\\ \textbf{22.01}\\ \textbf{22.01}\\ \textbf{22.01}\\ \textbf{22.01}\\ \textbf{22.01}\\ \textbf{22.02}\\ \textbf{22.01}\\ \textbf{22.01}\\$
1,000 E	Puerperal Fever	$\begin{array}{c} 1.47\\ 1.124\\ 1.124\\ 1.12\\ 1.1$
PER	Diarrhoea and Enteritis (under 2)	8.11 8.11 8.11 8.11 8.11 8.11 8.11 8.11 8.11 8.11 8.11 8.11 8.11 8.11 8.12
DEATH-RATES PER 1,000 BIRTHS	Congenital Debility. Premature Birth, Malformations, etc. (under I)	333.0 6 6 7 7 7 7 7 7 7 7 7 7
	Other Violence	**************************************
	Suicides	
	Direases of Genito- Urinary System	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	Diseases of Digestive System.	661 662 660 660 688 888 888 888 888 888 888 888
	System Respiratory Diseases of	3.50 3.50 3.50 3.50 3.50 3.50 3.50 3.50 3.50 3.50 3.50 3.50 3.50 3.50 3.50 3.50 3.50 3.50 3.50 3.50 3.50 3.50 3.50 3.50 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.10 5.105.10 5.105.105.105.105.105.105.105.105.105.105.105.105.105.105.
FROM :	Diseases of Circulatory System	23320222222222222222222222222222222222
	Diseases of Nervous System	.52 .73 .73 .74 .45 .74 .81 .74 .45 .74 .81 .74 .45 .74 .81 .74 .45 .74 .81 .74 .45 .74 .81 .74 .45 .74 .81 .74 .45 .74 .81 .81 .37 .83 .85 .74 .35 .85 .83 .82 .36 .82 .84 .74 .37 .89 .82 .84 .33 .82 .84 .74 .35 .84 .74 .83 .35 .84 .74 .83 .33 .82 .84 .74 .34 .02 1.37 .36 .33 .94 .93 1.36 .34 .02 .137 .36 .35 .04 .136 1.23 .35 .03 1.100 1.36 .16 1.17 1.00 1.36 .17 1.36 0.36 .18 1.36 0.95 .18 1.45 0.70*
POPULATION	Cancer	73 74 75 75 75 75 75 75 75 75 75 75
1,000 or F	Other Forms	7 7 7 7 7 7 7 7
PER 1,00	Respiratory duber Other Forms	228 238 238 238 238 238 238 238 238 238
	Influenza	
EATH-RATES	Diphtheria	* 06 * 06 * 06
D	Whooping Cough	000 11 11 11 11 11 11 11 11 11 11 11 11
	Scatlet Fever	1 1 1 1 1 1 1 1 1 1
	Measles	333 349 351 351 351 353 353 353 353 353 354 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 35 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355 355
	xoqlism2	1221821111181118111811811811811811811811
	Enteric Fever	8 .
	Bitths Bitths	176 177 178 179 179 171 175 175 176 177 178 179 171 171 175 175 175 175 175 175 175 175 175 176 177 178 179 171 171 171 171 171 171 171 171 173 174 175 175 176 177 178 179 170 171 172 173 174 175 176 177
	Death-rate	17.5 16.5 15.1 15.1 15.1 15.1 15.1 15.1 15
	Birth-rate	31.4 31.2 31.2 31.2 30.9 30.9 30.9 30.7 30.9 30.7 30.9 22 56.4 22 56.4 19.2 19.2 19.2 19.2 19.2 19.2 22 117.6 117.7 117.
	Population Estimated to middle of each year.	760,989 768,757 776,604 784,532 792,540 800,631 800,631 800,631 800,631 800,631 800,630 825,400 825,400 825,400 825,400 825,400 825,400 825,400 825,400 825,400 825,400 825,534 891,234 891,234 891,234 890,000 910,000 910,000 910,000 911,000 936,079 937,500 910,000 910,000 932,766 752 936,079 932,766 752 936,079 932,000 910,000 932,766 750 933,000 933,000 933,000 941,3000 941,3000 941,3000 941,3000 941,3000 941,3000 941,30000 94
	YEAR	1901 1903 1904 1905 1906 1907 1906 1907 1908 1909 1910 1911 1912 1913 1914 1915 1916 1917 1918 1919 1914 1915 1916 1917 1918 1919 1919 1919 1920 1921 1922 1923 1924 1925 1926 1927 1928 1929 1926 1927 1928 1929 1930 1933 1935 1935 1936 1937 1938 1935

TABLE I. VITAL STATISTICS DURING 1935 AND PREVIOUS YEARS.

			Ages at Death.						All			
No	Causes of Death.	Sex	0-	1-	2-	5-	15-	25-	45-	65-	75-	Ages.
1.	Typhoid and Para- typhoid Fevers	M. F.	-	11	-		1				Ξ	1
1a.	Small Pox	M. F.	-	-	_	_	=	-	_	=	=	-
· 2.	Measles	M. F.	7	14 8	5 8	33	=	-	-	-	-	29 23
3.	Scarlet Fever	M. F.	-	-	23	2	1	-	-	=	-	57
4.	Whooping Cough	M. F.	13 13	777	12 12	2	-	-	-	-	-	34 32
5.	Diphtheria	M. F.	3	1 2	7 12	27 27	22	=	=	-	-	40 44
6.	Influenza	M. F.	1 4	2		32	3	9 8	41 25	14 13	10 19	83 73
6a.	Poliomyelitis	М.	-	-	-	-	-	1	-	_		1
6b.	Polioencephalitis	F. M.	_	-		-	-	-	_	_	-	-
7.	Encephalitis Lethargica		-	_	1	_	_	5	5	- 4	-	1 14
8.	Cerebro-Spinal Fever	F. M.	5	2	- 1	-	1	5	6		-	11 9
9.	Tuberculosis of Respir.	F. M.	1	2 3	3	1 6	65	172	1 161	30	2	8 441
10a.	System Tubercular Meningitis	F. M.	3	-	- 8	8	83 1	125 1	60 1	9	3	291 16
10b.	Tuberculosis of the	F. M.	1	3	3	12	1	-	- 1	-	-	20 2
10c.	Abdomen Tuberculosis of Spinal	F. M.	-	-	2	-		3	1	-	-	6 2
10d.	Column Tuberculosis of Joints	F. M.	-		-	-	-	1	-	1	-	2
		F.	-	-	- 2	- 5	1.	2	1	-	-	2
10e.	Disseminated Tuberculosis	M. F.	22	1	-	3	-	1	2	1	-	10
10f.	Tuberculosis of Glands and other parts	M. F.	1	Ξ	1.1	1	-	1 2	22	Ξ	1	6 4
11.	Syphilis	M. F.	$1 \\ 2$	1	=	1	1	10 4	34 14	8 2	3	58 24
12.	Gen. Paralysis of Insand Tabes Dorsalis	e M. F.	=	-	-	E	1	43	12 2	3	1 _	20 7
13a.	Cancer of Buccal Cavity and Pharynx	M. F.	=	11	=	-	=	1 2	39 2	22 2	14 3	76 9
13b.	Esop., Stomach, Liver, Pancreas	M. F.	1	=	=	-	1	18 10	121 62	80 71	28 45	249 189
13c.	and the second sec	M. F.	10.00	-	-	=	1 2	18 14	82 57	74 53	25 40	200 166
13d.		M. F.	-	-	=	-	-		75			148
13e.	Breast	M. F.	and the second	-	-	=	-		106	1 37	1 29	2 197
13f.	Skin	M. F.	-	-	=	-	1	1	3	2	33	10
13g.	Other Organs	M.	-	-	1	-	2	18 12	122 32	74	32 11	249 72
14	Diabetes	F. M. F.		-	1	1		12	16 31	15 27 38	10 16	55 87

TABLE II. CAUSES OF DEATH AT DIFFERENT AGE PERIODS IN 1935.

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TABLE II.—continued.

CAUSES OF J	DEATH AT]	DIFFERENT A	AGE I	PERIODS IN	1935.

No.	Causes of Death.	Sex.	-	Ages at Death.					All			
NO.	Causes of Death.	Sex.	0-	1-	2-	5-	15-	25-	45-	65-	75-	Ages
14a.	Rheumatic Fever	M. F.			1 1	10 11	13 12	13 13	3 6	2 2	-	42 45
14b.	Chronic Rheumatism Osteo-Arthritis	M. F.	=	=	=	-	1	$\frac{2}{3}$	14 18	8 18	10 16	35 55
15.	Cerebral Haemorrhage, etc	M. F.	1	1 1	1		1 1	6 3	50 49	95 88	56 111	210 255
15a.	Other Nervous Diseases and Sense Organs	M. F.	26 17	6 5	6 5	11 13	12 5	21 22	$ \begin{array}{c} 34 \\ 22 \end{array} $	23 23	14 17	$ \begin{array}{r} 153 \\ 129 \end{array} $
16.	Heart Disease	M. F.	5 4	1	2 1	1	11 11	46 56	386 312	428 427	384 557	$ \begin{array}{r} 1263 \\ 1370 \end{array} $
17.	Aneurysm	M. F.	=	=	-	1	1	3 4	15 10	7	4	29 16
18.	Arterio-Sclerosis and other Circ. Diseases	M. F.	=	=	=	_	1	6 4	74 68	92 105	95 119	267 297
19.	Bronchitis	M. F.	5 4	1	1	-	1	6 3	35 17	37 27	55 76	$ \begin{array}{c} 141 \\ 128 \end{array} $
20.	Pneumonia (all forms)	M. F.	92 44	20 16	9 10	7 6	14 6	74 28	167 57	61 59	32 37	476 263
21.	Other Respir. Diseases	M. F.	$\frac{2}{1}$	1 1	2	1	$\frac{1}{2}$	$\frac{12}{3}$	29 15	17 14	6 9	69 48
22.	Peptic Ulcer	M. F.		-	Ξ	Ξ	$\frac{2}{2}$	18 4	50 12	8 13	4 4	82 36
23.	Diarrhoea and Enteritis	M. F.	68 47	4 4	$\frac{2}{3}$	Ξ		7 13	5 11	$\frac{2}{1}$	3	88 83
24.	Appendicitis	M. F.	_	=	5 4	6 5	4 4	8 5	12 10	7 6	$\frac{1}{3}$	43 37
25.	Cirrhosis of Liver	M. F.	_	=	=		=	1	13 7	8 4	1	23 11
26.	Other Dis. of Liver, etc.	M. F.	=	=	=	1		4 5	7 18	5 12	2 11	19 47
27.	Other Digestive Diseases	M. F.	$^{12}_{3}$	$\frac{2}{2}$	1	2 7	$\frac{2}{2}$	9 11	29 21	12 29	10 19	79 94
28.	Acute and Chronic Nephritis	M. F.		2	2	$^{2}_{1}$	5 4	$\begin{array}{c} 21\\ 21 \end{array}$	60 44	38 46	32 31	162 148
28a.	Other Genito-Urinary Diseases	M. F.	4 7		-	1	$\frac{2}{3}$	8 14	19 11	36 8	47 3	117 48
29.	Puerperal Sepsis	M. F.	_	Ξ	_		. 4	19	_	_	_	23
30.	Other Puerperal Causes	M. F.	_	-	-		5	28	-	-	-	33
31.	Congenital Debility, Premature Birth, Malformations, etc.	M. F.	297 280	2	$\frac{2}{2}$	1	Ξ	3	_	-	=	305 282
32.	Senility	M. F.	Ξ	=	-	=	=	=	1	6 21	50 113	57 134
33.	Suicide	M. F.	-	-		=		21 16	47 23	14 6	$\frac{2}{2}$	90 49
34.	Other Violence	M. F.	5 5	2 1	7 6	25 13	$\frac{24}{12}$	53 9	67 32	38 27	38 52	259 157
35.	Other Causes	M. F.	17 7	1 3	6 4 ·	16 10	15 8	31 43	72 66	23 33	8 18	189 192
	All Causes	M. F.	571 453	73 60	83 85	138 130	195 183	637 577	1831 1308	1306 1241	981 1381	5815 5418

			152
	Total of City	5815 5418	46 10 12 12 12 12 12 12 12 12 12 12 12 12 12
	Not Located	99	
	Yardley	112	
	Washwood	136	
	Stechford	103 97	- 00 - -
	Sparkhill	198	- ∞ ∞ ± 0 0
1935	Sparkbrook	222 184	+ 22
31st,	oqoş	161	
ber 3	Small Heath	165	
December	Selly Oak	181 139	~ ~ ~0 ~0 ~1 ~0 ~0 ~1 ~1 ~1 ~1 ~1 ~1 ~1 ~1 ~1 ~1 ~1 ~1 ~1
	Ilewhned	110	-
ending	Saitley	142	
	s'iun' .f2	228 194	01 00 - 10 00 4 00 01 0 00 - -
Year	St. Mary's	195	- ∞ 01 ∞ 4 01 4 - 60 0 01 - -
the	St. Martin's & Deritend	201	
during	St. St.	212 206	- - - - - - - - - - - - -
	Rotton Park	186	- + - ∞ / ∞ = = - -
Ward	Perry Barr	109 88	
each	Northfield	130	0 - - 0000- -1200 - - - -
to, e	Moseley and Moseley and	204	- - 0 - 400 - 50 - -
Sung	Market Hall	148 142	0 0 0 - ± 0 -
belonging	Lozells	180	
or b	роомбред	206 190	
111,	e'aniM Norion	144	
tered	Harborne	107	- ∞ ∞ - α ω ∞ - -
egisi	Handsworth	178	
hs R	Hall Green	133	
Deat	Gravelly Hill	132	
Births and Deaths Registered in, or	Erdington	117	
this o	Edgbaston Nechells	157	
Bir	Duddeston and	203	
III.	Bromford	133	
	Balsall Heath	5 212	
TABLE	Aston.	0 225 6 175	
TA	Green. All Saints'	3 210 9 166	
	Acock's	1. 153	
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	CAUSES OF DEATH.	ues	Typhoid & Para- typhoid Fever Measles Scarlet Fever Scarlet Fever Whooping Cough Diphtheria Influenza Poliomyelitis Encephalitis Faver Poliomyelitis Tuberculosis of Respiratory System Tuberculosis of System Tuberculosis of System Tuberculosis of Simal Column Tuberculosis of Joints
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TABLE VI. BIRTH-RATES IN WARDS.

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TABLE VII.

Cases of Infectious Disease notified during the Year 1935. Classified according to sex and ages.

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i i i i i i i i i i i i i i i i i i i		St. Martin's		.01 .42 .88 .88 .88 .88 .88 .88 .88 .88 .88 .8	2.52		s'nifrald .42	.54	ards fo
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i i i i i i i i i i i i i i i i i i i		St. Mary's	565.65 64.46 54.55 55.34 55.33 55.33 55.33 55.33 55.33 55.33 55.33 55.33 55.33 55.33 55.33 55.33 55.33 55.33 55.35 55.55	0 10 00 00 00 00		211.2		71.5	ares fo
i i i i i i i i i i i i i i i i i i i		St. Paul's					s'insq. 38.	1.0	-Fign
		гаял И алО	1916 1917 1918 1919 1920 Average	1921 1922 1923 1924 1925 Average	1926 1927 1928 1929 1930 Average	1931 1932 1933 1934 Average	2027 M M3N		

Wards (Central, Middle Ring, Outer Ring) may, however, be considered as roughly comparable.

TABLE X. Meteorology and Mortality in each week of the year 1935.

_	WEEK. DEATHS FROM TEMPERATURE															
No.	Ending.	Total Deaths.	Deaths under 1 year.	Measles.		Diarrhoea and Enteritis under 2.	Pulmonary Tuberculosis.	Other Forms of Tuberculosis.	Respiratory Diseases.	Highest in Shade.	f the A	ir. pue	of Ground	Horizontal Move- ment of Air in Miles.	Hours of Sunshine	Rainfall in Inche-
1	1935. Jan. 5	230	18	Me	I COL	En Dia Chi	11	_	32	53	36	46.6	48.3	2065	8.3	0.44
2 3 4	,, 12 ,, 19 ,, 26	226 254 226	14 28 13		22	1	14 17 15	1 1 1	24 23 29	46 49 50	29 34 33	35.1 41.6 40.8	48.4 47.0 46.9	1544 1449 2245	$ \begin{array}{r} 10.1 \\ 4.0 \\ 9.3 \end{array} $	0.39 0.17 0.40
5 6 7 8	Feb. 2 , 9 , 16 , 23	255 241 230 247	19 14 12 22		$\frac{1}{-}$	$\frac{4}{2}$	25 17 14 12	$ \begin{array}{c} 3 \\ 1 \\ 2 \\ 4 \end{array} $	28 21 19 32	54 53 55 52	27 30 34 33	39.2 39.1 45.5 43.7	$46.3 \\ 46.0 \\ 45.6 \\ 46.1$	2096 1735 2458 2362	$13.2 \\ 10.2 \\ 14.5 \\ 9.2$	$ \begin{array}{c} 0.12 \\ 0.80 \\ 0.15 \\ 0.80 \\ \end{array} $
9 10 11 12 13	Mar. 2 9 16 23 30	222 252 231 257 242	23 24 23 29 25	2 1	$\frac{2}{1}$		$ \begin{array}{r} 13 \\ 21 \\ 11 \\ 15 \\ 20 \end{array} $	$-\frac{3}{2}$	25 27 28 40 29	46 49 49 60 58	28 27 29 40 37	39.2 39.9 38.0 49.3 48.3	$\begin{array}{r} 46.0 \\ 45.0 \\ 44.8 \\ 45.2 \\ 46.0 \end{array}$	1550 1507 2013 1493 1614	$\begin{array}{c} 18.6 \\ 21.1 \\ 19.0 \\ 35.9 \\ 30.5 \end{array}$	$\begin{array}{c} 0.77 \\ 0.25 \\ 0.13 \\ 0.18 \\ 0.06 \end{array}$
14 15 16 17	April 6 ,, 13 ,, 20 ,, 27	216 274 255 246	20 32 21 23	2 1 3 5	1 1 1	$\begin{array}{c}1\\4\\1\\2\end{array}$	$ \begin{array}{r} 12 \\ 22 \\ 20 \\ 16 \end{array} $	222	32 37 30 27	54 58 58 59	32 37 35 37	41.4 47.4 47.2 48.6	46.2 45.7 46.2 46.7	2574 2224 1571 1610	$30.4 \\ 40.5 \\ 30.3 \\ 26.7$	$\begin{array}{c} 0.61 \\ 0.98 \\ 1.60 \\ 0.21 \end{array}$
18 19 20 21	May 4 ,, 11 ,, 18 ,, 25	230 211 175 226	28 20 15 11	2 5	2 4 1 1		12 16 16 15	$\frac{-3}{1}$	31 26 23 18	68 72 53 65	38 40 30 35	51.0 53.5 42.4 48.8	47.1 48.0 48.1 47.7	1298 1817 1834 2295	28.5 53.2 37.2 50.1	$ \begin{array}{r} 0.09 \\ 0.01 \\ 0.32 \\ 0.81 \end{array} $
22 23 24 25 26	June 1 , 8 , 15 , 22 , 29	200 225 188 190 189	19 23 16 25 24	3 7 2 3			11 14 17 11 19	$ \begin{array}{c} 1 \\ 2 \\ 3 \\ 4 \\ 2 \end{array} $	26 15 12 18 12	68 65 66 84 83		52.1 54.8 55.6 59.6 66.8	$\begin{array}{r} 48.4 \\ 49.2 \\ 50.0 \\ 50.8 \\ 52.8 \end{array}$	1639 1820 1803 1510 1434	29.9 37.2 45.3 35.7 65.1	$ \begin{array}{r} 0.69 \\ 0.72 \\ 0.54 \\ 0.58 \\ 0.43 \\ \end{array} $
27 28 29 30	July 6 ,, 13 ,, 20 ,, 27	187 193 182 187	11 21 19 17	4	1 1 —	$\frac{2}{3}$	8 11 15 9	2 1 2	12 9 12 11	77 86 79 76	54 50 50 48	64.0 67.0 62.6 63.9	53.5 54.8 55.7 55.6	1744 1122 1495 1349	47.5 73.9 38.6 42.7	$ \begin{array}{c} 0.08 \\ 0.00 \\ 0.33 \\ 0.00 \end{array} $
31 32 33 34 35	Aug. 3 , 10 , 17 , 24 , 31	153 178 184 191 152	20 20 21 16 10	1 2 	$2 \\ 2 \\ 2 \\ 3 \\ 4$	7 6 8 1 1	$ \begin{array}{c} 10 \\ 11 \\ 11 \\ 14 \\ 9 \end{array} $	$ \begin{array}{c} 2 \\ 1 \\ 1 \\ 3 \\ 1 \end{array} $	13 11 21 11 7	75 83 76 81 76	47 52 47 55 44	61.9 67.4 61.1 66.4 58.1	56.1 56.8 57.0 57.3 57.3	1518 1012 1225 1032 1155	51.5 72.8 25.0 54.9 28.1	$ \begin{array}{c} 0.00 \\ 0.34 \\ 0.07 \\ 0.56 \\ 1.18 \end{array} $
36 37 38 39	Sept 7 , 14 , 21 , 28	185 176 180 199	17 17 15 28	2 1 1 1	1 	5 6 1 6	$ \begin{array}{c} 11 \\ 15 \\ 12 \\ 10 \end{array} $	1 	9 11 11 14	68 67 66 69	45 44 47 41	57.4 57.8 55.9 54.4	56.4 55.8 55.3 54.9	1451 1375 2431 1701	$34.3 \\ 28.6 \\ 26.2 \\ 25.9$	$ \begin{array}{c} 0.33 \\ 0.11 \\ 1.77 \\ 1.46 \end{array} $
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