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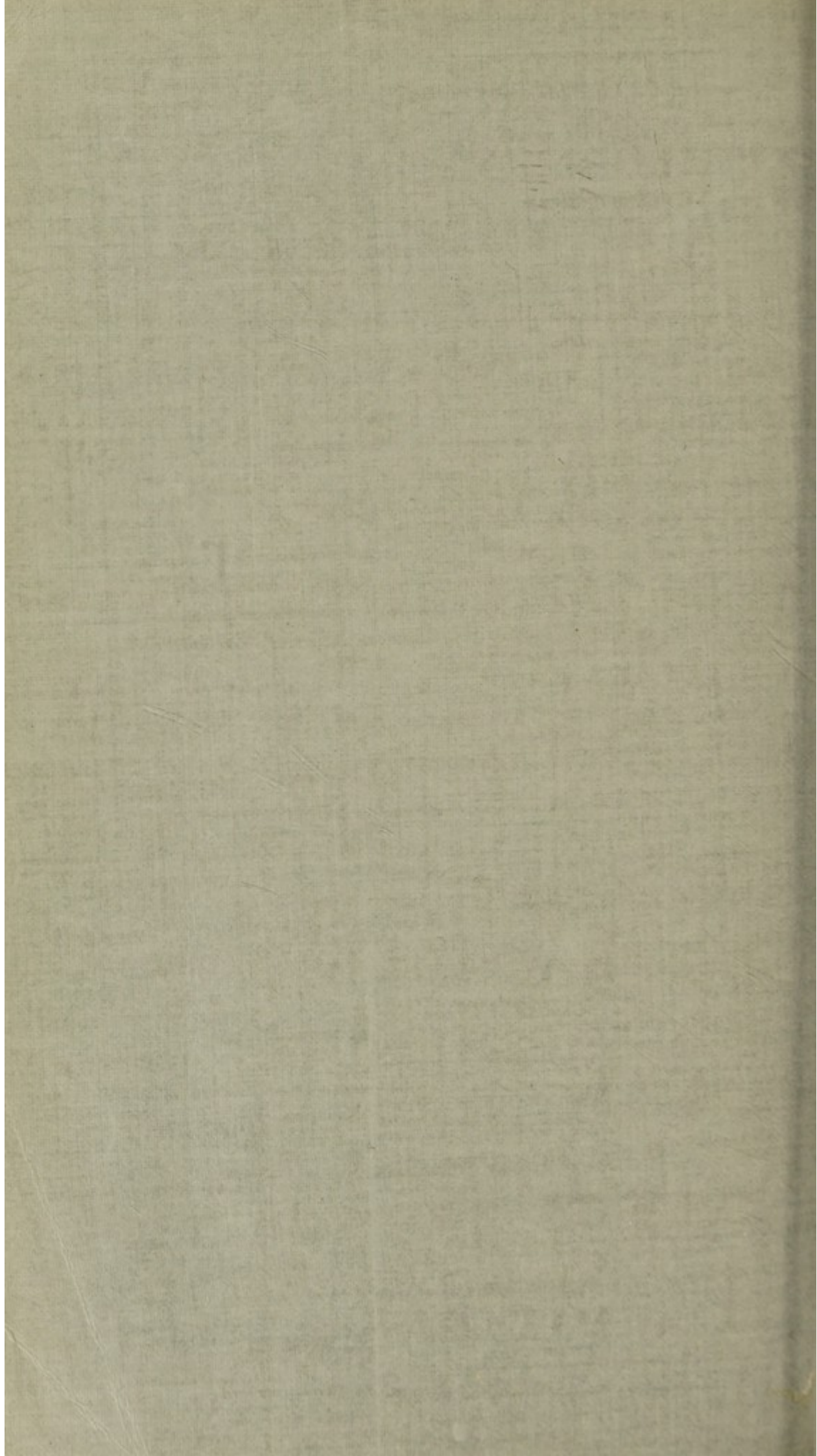
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ANNUAL REPORTS
ON THE
HEALTH
OF THE
COUNTY BOROUGH OF DARLINGTON,
FOR THE YEAR 1929,

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1930.



County Borough of Darlington.



Annual Reports

UPON THE
HEALTH OF DARLINGTON,
For the Year 1929.

G. A. DAWSON, M.D., D.P.H.,

Medical Officer of Health,

Medical Superintendent of the Borough Isolation Hospitals,

School Medical Officer,

Medical Certifier under M.D. Acts.

1930.

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COUNTY BOROUGH OF DARLINGTON.

HEALTH OFFICE,

FEETHAMS,

DARLINGTON.

*To the Chairman and Members of the
Health Committee.*

Gentlemen,

I have the honour to submit my Annual Report for the year ending 31st December, 1929.

Our good name amongst the large towns of the North-East has been maintained by reason of the lowest death rate, lowest infantile mortality, death rate from diarrhoea and infectious diseases, associated with the lowest birth rate. Our still-birth rate and maternal mortality are, however, comparatively high, pointing to the necessity for increased ante-natal facilities and investigations of social and medical questions involved. Our five maternity and child welfare centres are not suited or adequate for the proper detailed examinations of our expectant mothers.

Considerable improvement has been noted in our milk supply now safeguarded bacteriologically as well as chemically. The conversions from the privy ashpit to the water carriage system are being made at the rate of about 1,500 per annum with not only enhanced amenities in the districts but appreciable economy in our scavenging services.

Items still requiring urgent attention include the provision of a modern central slaughter house and meat store, housing accommodation at about 6/- per week for at least 200 families living in dark court or back to back dwellings, an up to date swimming bath with continuous filtration and chlorination.

I am sorry to lose the valued assistance of Dr. T. Ferguson, who left the service at the end of the year, on his promotion to be Medical Officer on the Silicosis Board of the Home Office.

May I express my gratitude to the Chairman and Committee, the officials of other departments and my colleagues who have so loyally played their part during the year.

I have the honour to be,

Your obedient Servant,

GEORGE A. DAWSON.

SECTION I.

PUBLIC HEALTH STAFF.

G. A. DAWSON, M.D., M.B., B.Ch., B.A.O., D.P.H., Medical Officer of Health, Medical Superintendent of the Borough Isolation Hospitals, School Medical Officer, Medical Certifier under the Mental Deficiency Acts, and Medical Examiner of Corporation Employees.

*T. FERGUSON, M.D., F.R.C.P. (Ed.), D.P.H., Deputy Medical Officer of Health and Venereal Diseases Medical Officer. (Resigned 31st December, 1929).

*CONSTANCE CHARLOTTE ROBERTSON, M.B., B.S., (part time), Maternity and Child Welfare Medical Officer, Inspector of Midwives.

*J. R. COPPING, A.R.San.Inst., Certificated Meat Inspector, Chief Sanitary Inspector, Inspector of Meat and other Foods, Inspector of Common Lodging Houses, and under the Shops Act, Food and Drugs Act, Rag Flock Act, Rat Officer, Inspector under the Milk and Dairies Act, Inspector and Official Sampler under the Fertilisers and Feeding Stuffs Act, 1926, Officer under the Agricultural Produce (Grading and Marking) Act, 1928, and the Merchandise Marks Act, 1926. (Died 28th February, 1929).

Assistant Inspectors :—*A. E. Wade, C.R.San.Inst., and Certificated Meat Inspector; Appointed Senior Sanitary Inspector on 21st March, 1929; G. Latimer, C.R.San.Inst. and Certificated Meat Inspector; G. H. Watmough, C.R.San.Inst.

Matron of Isolation Hospital :—Miss Flora Kinnear, State Registered Nurse; General and Fever Training Certificate.

J. L. LIDDELL, L.D.S., (part time), Maternity and Child Welfare Dental Officer.

Health Visitors :—*Miss K. Bishop, Certificates of the C.M.B. and of the R.San.Inst. for Health Visitors and School Nurses, for Maternity and Child Welfare, and for Sanitary Inspectors; *Miss L. G. R. Crawford, Certificate of C.M.B., State Registered Nurse. *Miss J. L. Bailey, New Health Visitors' Certificate of the Royal San. Inst., Certificate of C.M.B., State Registered Nurse, Fever and General Trained.

PUBLIC HEALTH STAFF—(Continued).

Clerical and Office Staff :—E. C. Stainsby, Miss F. E. Gibbon,
Miss E. Stephenson, F. Ward, G. V. Penn, I. Burnley.

Borough Analyst (part time) :—C. J. H. Stock, B.Sc., F.I.C.

Venereal Disease Orderly :—*T. Litton.

Disinfector (part time) :—R. Johnson.

Rat Catcher (part time) :—R. Burnside.

M. & C. W. Home Helps :—*Mrs. B. Bointon ; Also Rota of
Temporary Home Helps (approved by Ministry on 12th July,
1927).

* Contributions to salaries under Public Health Acts or
by Exchequer Grants.

SECTION II.

GENERAL FEATURES AND STATISTICS.

The County Borough of Darlington is situated on low-lying land in the valley of the Skerne a tributary of the Tees. The subsoil consists of beds of glaciated clay with veins of sand and magnesian limestone. The height above sea level ranges from 120 to 240 feet so that its situation is somewhat like that of the centre of a saucer on account of the hills on all sides. By reason of this protected position, the climate is mild and somewhat relaxing, conducing to a profusion of vegetation, some of it, tropical in nature, to be found in the public parks of which there is ample provision to the extent of 200 acres.

While it is the natural centre of the neighbouring agricultural districts of Durham and the North Riding with an excellent market once a week its inhabitants are principally occupied in trades connected with railway and engineering work of world wide repute, with old established wool spinning and more recently the chemical industry at Billingham and Cockerton.

Area of the Borough.—4,614 acres.

Population.—1921 Census 65,842

Estimated, mid-year 1929 71,790

The natural increase of the population, as calculated from the difference between the birth rate and death rate amounts to 3.7 per thousand, reduced by the outbreak of influenza in March yet higher than that (2.9) for England and Wales.

Census Statistics, 1921.—

Average Rooms per Dwelling	....	....	4.41
Families per Dwelling	....	....	1.06
Persons per Family	....	....	4.39
Rooms per Person	....	....	0.94
Number of Private Families	....	....	14,483
Structurally separate Dwellings occupied			13,634
Population living more than 2 persons to one Room	....	....	10,912
Number of Families sharing a separate Dwelling	....	....	849

This latter figure represents 5.8 per cent. of the total families and compares with 10 per cent. for England and Wales as a whole.

Number of Inhabited Houses.—On the 1st April, 1930, the Rate Books showed Assessments as follows :—

Self-contained Dwelling-houses	....	....	16,035
Dwelling-houses and Shops combined	....	....	703
Tenements	....	....	489
			17,227
Lock-up Shops	....	....	482
Hotels, Public Houses and Clubs	....	....	84
Schools, Institutes and Halls	....	....	64
Offices	....	....	198
Warehouses, Stables, Garages and Workshops			662
Parcels of Agricultural Land and Allotments			168
Miscellaneous	....	....	293
Total	....		19,178

General Rate—10/6 in the £.

Rateable Value.—£431,414.

Sum Represented by a Penny Rate :—

General Rate—£1,725.

VITAL STATISTICS FOR THE YEAR 1929.

BIRTHS DURING 1929.

		Births Registered	Inward Transfers	Outward Transfers
Total Births (Legitimate and Illegitimate)	{ Males	 638	 6	 38
	{ Females	 620	 10	 31
Births Illegitimate	{ Males	 25	 4	 4
	{ Females	 36	 3	 3

(CORRECTED FIGURES).

		Total.	Males.	Females
Live Births.—Legitimate	....	1,144	 581	 563
Illegitimate	....	61	 25	 36

Live Birth-rate, 16.8.

		Births Registered	Inward Transfers	Outward Transfers
Total Still-Births (Legitimate & Illegitimate)	{ Males	 32	 2	 2
	{ Females	 37	 —	 3
Still-Births Illegitimate	{ Males	 1	 —	 —
	{ Females	 1	 —	 —

(CORRECTED FIGURES).

		<i>Total.</i>		<i>Males.</i>		<i>Females.</i>
Still-Births. —	Legitimate	 64	....	31	....	33
	Illegitimate	 2	....	1	....	1

Still Birth-rate, 0.92.**DEATHS IN 1929.**

					<i>Males</i>	<i>Females.</i>
Registered	....	....	....	....	522	463
Outward Transfers	....	....	....	....	52	34
						470
Inward Transfers	....	....	....	....	23	21
Net Deaths belonging to Darlington....					493	450

Death-rate, 13.1.

For 1928 the birth-rate was 15.9 and the death-rate 10.4 per 1,000 of the population.

Number of Women Dying in, or in consequence of Child-birth.—From sepsis 4, from other causes 4.

Deaths of Infants under one year :—

					<i>Males</i>	<i>Females</i>	<i>Rate per</i> <i>1,000 births</i>
Legitimate	....	....	47	....	44	....	79
Illegitimate	....	....	4	....	3	....	115
Total	....	....	51	....	47	....	81

Deaths from Measles (all ages)	....	....	....	4
„ „ Whooping Cough (all ages)	....	....	....	11
„ „ Diarrhoea (under 2 years of age)	....	....	....	6

Comparative Table of Vital Statistics, 1920—1929.

		Birth-Rate		Death-Rate		Infant Mortality	
Year	Estimated Population	Darlington	England & Wales	Darlington	England & Wales	Darlington	England & Wales
1920	66,610	25.8	25.4	12.4	12.4	92	80
1921	66,400	23.9	22.4	12.3	12.1	98	83
1922	66,710	22.6	20.6	14.1	12.9	98	77
1923	67,390	21.5	19.7	11.9	11.6	67	69
1924	68,690	20.2	18.8	12.7	12.2	94	75
1925	69,130	18.6	18.3	12.7	12.2	106	75
1926	70,700	17.9	17.8	11.9	11.6	91	70
1927	71,430	16.1	16.7	11.6	12.3	67	69
1928	71,560	15.9	16.7	10.4	11.7	59	65
1929	71,790	16.8	16.3	13.1	13.4	81	74

With a low death rate of 13.1 per 1,000 there is no particular disease worthy of comment, and no particular occupation or environment which appears to have a prejudicial effect on the public health. As our birth rate falls there will be an increased tendency towards a higher death rate owing to a larger proportion of the population in the older age groups.

DISEASES OF THE HEART AND BLOOD VESSELS.

This group of diseases holds first place in the list. Including the deaths attributed to cerebral haemorrhage, which is so closely allied, we have to record the formidable total of 237, one fourth of the mortality from all causes. It must be understood however that a man is as old as his arteries and that this classification is a label designating the worn-out units no longer fit to stand the strain of life.

CHEST DISEASES.

Of a total of 943 deaths assignable to Darlington, Bronchitis and Pneumonia accounted for 158 or 16.8 per cent. This represents a mortality of 2.2 per 1,000 living, largely due to Influenza during the first quarter of the year.

CANCER.

The study of Cancer has led to the establishment in several parts of the country of Cancer Research Committees. Leeds, Manchester, County Durham, Newcastle and Darlington have these Committees already in operation disseminating knowledge of the early signs of the dread disease and exhorting early consultation.

The mortality in Darlington is 1.16 per 1,000 population, comparing favourably with England and Wales. At the end of the Report a table is appended showing the organs and the age groups most affected. The variation during the past nine years is shown in the following table. :—

	<i>Deaths in Darlington</i>	<i>Death Rate per 1,000 population</i>	<i>England & Wales Death Rate</i>
1921	60	0.90	1.21
1922	67	1.00	1.22
1923	65	0.96	1.26
1924	60	0.87	1.29
1925	72	1.04	1.34
1926	81	1.05	1.36
1927	96	1.34	1.38
1928	77	1.07	1.43
1929	83	1.16	Not yet known.

CORONER'S INQUESTS.

Thirty-one Inquests were held in the Borough and four outside the Borough in connection with deaths assignable to Darlington, a proportion of 3.7 per cent. of the total deaths. There were also nineteen inquests held in Darlington in the case of transferable deaths.

UNCERTIFIED DEATHS.

During 1929 there were 33 deaths, the causes of which were not certified by medical practitioners or the coroner, equivalent to 3.5 per cent. of the total deaths. Five of these were of children under one year of age.

ACCIDENTS AND VIOLENT DEATHS.

Thirty-two deaths, 5 to suicide, 13 to street accidents and 14 others.

DEATHS IN INSTITUTIONS.

Feetham Poor Law Institution	92
General Hospital	138
Borough Isolation Hospitals	22
Nursing Homes	16
Total in Darlington Institutions	268
Deaths in other Institutions, Asylums, &c.	44

SECTION III.

SOCIAL CONDITIONS.

Poor Law Relief, Unemployment and National Health Insurance.—Much useful information regarding social and economic conditions having a bearing on the health of the town is furnished in data kindly supplied by the Clerk to the Darlington Board of Guardians, the Manager of the Employment Exchange, and the Clerk to the National Health Insurance Committee.

Poor Law Relief.—The number of persons in receipt of relief on 1st January for each of the past nine years was as follows :—

	Institutions			Outdoor Relief		
	Poor Law	Asylums	Total	Widows, Sick & Disabled etc.	Unemployed	Total
1st Jan., 1922	273	94	367	396	192	588
" 1923	299	104	403	570	1,538	2,108
" 1924	316	119	435	709	1,793	2,502
" 1925	305	124	429	706	668	1,374
" 1926	318	128	446	752	966	1,718
" 1927	327	131	458	679	1,205	1,884
" 1928	322	132	454	487	1,175	1,662
" 1929	293	140	433	522	876	1,398
" 1930	277	133	410	521	731	1,252

The number of assisted unemployed persons shown above is small on account of the relief work which was provided for the able-bodied men of the district.

Moreover, the Poor Law Administrative Area is not co-terminous with the County Borough and hence a few of the above persons may come from outside the Darlington Borough.

Unemployment.—The number of unemployed persons on the Live Register of the Exchange at the end of the year was :—men 2,658 ; women 244, compared with men, 2,217 ; women, 240 at the 1st January. The average number of unemployed during 1929 has been 2,344 compared with 2,052 for 1928.

National Health Insurance.—The total number of insured persons in the Borough was 27,362 of whom 26,137 are already on Doctor's lists. The number of prescriptions issued was 85,400 and the total cost of drugs and appliances, £2,812 11s. 3d.

SECTION IV.

PREVALENCE OF NOTIFIABLE DISEASES.

Zymotic Diseases.—During the year there were 32 deaths compared with 21 last year, from the seven principal zymotic diseases, which are Smallpox, Measles, Whooping Cough, Diphtheria, Scarlet Fever, Diarrhoea and Fever (including Typhoid, Enteric and Typhus).

Smallpox.—It is gratifying to report that no cases of Smallpox occurred during the year and no necessity for vaccinations by the Medical Officer of Health arose during the year, under the Public Health (Smallpox Prevention) Regulations 1917. Owing to the proximity of Smallpox in County Durham our vigilance could not be relaxed.

As a precaution, Chickenpox has been notifiable since 1923. Two hundred and seventy-nine cases were visited and the diagnosis confirmed by a member of the Public Health staff. Sanitary Inspectors, Health Visitors, School Nurses, School Teachers, and Attendance Officers all co-operated in bringing to the attention of the Medical Officer of Health suspicious cases. Publicity was given by posters, lectures to influential bodies, school propaganda, and the Press, which afforded excellent opportunities in making known the suspicious symptoms of the disease.

VACCINATION.

I have ascertained, with the kind assistance of Mr. Tomlin, the Vaccination Officer, the following statistics for the past seven years. Darlington is a very poorly vaccinated population as far as its children are concerned, 67 per cent. of the parents having expressed their conscientious objection. The absence of smallpox and the press reports of alleged harmful effects of vaccinations are responsible for the drop.

Vaccination Statistics.

	1922	1923	1924	1925	1926	1927	1928
Births Registered (un corrected for transfers)	1518	1461	1423	1318	1319	1167	1174
Successfully Vaccinated	263	377	314	277	301	293	256
Conscientious Objectors	1116	954	959	929	862	761	783
Died unvaccinated, and others	129	130	160	112	156	113	135
% Births vaccinated	17%	25%	22%	21%	23%	25%	22%

Scarlet Fever.—Of the 158 cases notified, 153 or 96.7% were treated in the Hospital. Diagnosis was revised in 10 cases. There were no deaths. The disease was more severe than the mild form which has been so prevalent in recent years. The use of the new treatment with anti-scarlatinal streptococcal serum in the early severe cases has reduced not only the incidence of the many complications, but also the duration of stay in Hospital. The apparent expense of the serum is therefore more than balanced by the reduction in mortality and maintenance costs. The serum is also a definite protective for contacts for at least four weeks after injection.

The chief complications noted among the 143 correct diagnoses were :—Otorrhoea 18 ; Endocarditis 19 ; Adenitis 16 ; Albuminuria 8.

Diphtheria.—Of the 138 notified cases 134 were treated in Hospital. There were 7 deaths in Hospital, and 1 at home. The disease was of a somewhat less severe type than last year when there were ten deaths. The operation of tracheotomy was performed in three instances for laryngeal obstruction as a surgical emergency. Paralysis was evident in 18 cases.

Diphtheria anti-toxin is supplied to general practitioners for their use in urgent cases, or while awaiting the result of bacteriological examinations. Twelve doses were provided, totalling 60,000 units.

The Dick and Schick tests for susceptibility to Scarlet Fever and Diphtheria respectively were not brought into use, though in the event of increased virulence or incidence of either of these diseases I would strongly recommend their application, with the subsequent immunization of those persons who were found to be susceptible. In any case every sensible parent should see that this reasonable protection is put into service by their private medical attendant when so advised.

Measles and German Measles.—These diseases exhibit a peculiarly regular wave of periodicity in alternate years, with a larger wave super-imposed about once in every seven years. Last year Darlington had 1,109 notified cases with only four deaths, a surprisingly and most satisfactory low figure in comparison with neighbouring towns. Each case is visited and supervised for at least a fortnight by one of our Health Visitors as only the first case occurring in a household within two months is notified. Two cases were treated in the Isolation Hospital.

Enteric Fever.—Six cases were notified and removed to the Isolation Hospital. Two deaths occurred among these patients at the Isolation Hospital, one being certified as due to Tubercular Meningitis.

Pneumonia.—Of the 195 cases of primary and influenzal pneumonia notified 24 severe cases were admitted to the Fever Hospital from homes which were considered unsuitable for proper nursing. Seven of these twenty-four cases died, a mortality of 29 per cent., while of the 171 cases nursed at home 102 died, a mortality of 60% as far as one can judge from notification.

Influenza was prevalent during the early part of the year and swelled our death rate considerably, though not to such an extent as in neighbouring towns. A Home Nursing Service was arranged through the Queen's Nurses' Association which did excellent work.

Whooping Cough.—One hundred and forty-six cases were notified and eleven deaths occurred, compared with 38 and one in 1928. The notification of this disease, first cases under five years of age within two months, informs us of infected houses and serves to impress on the public the seriousness of the complications involved, and should in future lead to reduction in mortality from what is too often considered a trivial ailment from which all children must suffer.

The Queen's Nurses paid 22 visits to two cases with complications.

Puerperal Fever and Puerperal Pyrexia.—One case of Puerperal Fever and fifteen cases of Puerperal Pyrexia were notified involving four deaths. It is interesting to report that half of our severe puerperal infections arise as the result of abortion or miscarriage.

On the 18th October, 1927 the Minister of Health approved of the following scheme for the nursing of Puerperal Fever and Puerperal Pyrexia :—

- (a) Home nursing by the Darlington Queen's Nurses' Association at a fee of 1/- per visit.
- (b) Arrangements with the University of Durham College of Medicine, Newcastle-upon-Tyne, for bacteriological examinations at 10s. 6d. each.
- (c) Consultations with the Medical Officer of Health as required by the general practitioners.

- (d) The admission of patients to the Fever Hospital at a fee of 10s. 0d. per day, chargeable to the Maternity and Child Welfare account.
- (e) The provision of the services of a Surgeon Specialist for operative assistance where found necessary at a suitable fee.

Four cases of Puerperal Pyrexia were received into the Borough Isolation Hospital for a total of 182 in-patient days.

Four cases of Puerperal Pyrexia were treated in the Feetham Infirmary.

Under their agreement with the Health Committee the Queen's Nurses' Association paid 13 visits to one case of Puerperal Fever, and 268 visits to 9 cases of Puerperal Pyrexia nursed at home.

Ophthalmia Neonatorum.—As shewn in the following Table twelve cases were notified. Two cots are reserved at the General Hospital for the treatment of these cases at £3 : 3 : per week chargeable to the Corporation while in use :—

CASES.			Vision Unim- paired	Vision Impaired	Total Blindness	Deaths
Notified	Treated					
	At home	In hospital				
12	8	4	11	1	0	1

The Queen's Nurses paid 93 visits for home treatment of cases.

Special instruction in prophylaxis was given to the midwives in the use of silver nitrate solution in the eyes of the new born child.

Pemphigus Neonatorum.—This is an intensely infectious skin condition in the new born child. The Queen's Nurses, paid twenty-three visits to two cases during the year. The outbreak was fortunately promptly checked by the disinfection of the uniform and instruments of the midwife in attendance.

Diarrhoea Under 2 years of age.—This disease, attributable usually to dirty feeding bottles or infected milk, particularly during hot weather, accounted for six deaths, representing a death-rate of about one half that for England and Wales. It is a tribute to the commonsense of Darlington mothers that this figure is so low particularly during such a dry hot summer.

No cases of Acute Anterior-Poliomyelitis, Cerebro-Spinal Fever, Acute Polio-Encephalitis, Malaria, Dysentery, Rabies or Anthrax were notified.

Encephalitis Lethargica.—This distressing disease was responsible for only one notification. This case was removed to the Isolation Hospital and died there. One case notified during 1928 also died in the Isolation Hospital during the year.

Prevention and Treatment of Blindness.—The Darlington Society for the Blind acting under the Committee for the Welfare of Afflicted persons supervises the welfare of approximately 124 blind persons in the Borough.

SECTION V.

GENERAL PROVISION OF HEALTH SERVICES.

Summary for Reference.

Professional Nursing in the Home.

- (a) The Queen's Nurses' Association receive a grant from the Council—for home nursing in which 10 nurses are employed.
- (b) Midwives—18 in practice, not subsidized.

Hospitals.

- (a) *Borough Fever Hospital* for Infectious Cases. 105 beds.
- (b) *Smallpox Hospital*. 50 beds.
- (c) *Tuberculosis*. No Hospital is provided by the Authority but the Durham County Council make arrangements for the admission of Borough cases to their own Sanatoria, to the General Hospital, Darlington, and Feetham Poor Law Institution where there are 15 beds and 3 shelters.
- (d) *Maternity Ward*, General Hospital, Darlington. 12 beds.
- (e) *Children*. Ward at General Hospital. 25 beds.
Feetham Poor Law Institution. 40 beds.

General medical and surgical cases are received in four large Private Nursing Homes, the General Hospital with 119 beds, and Feetham Poor Law Institution with 172 beds, both of the latter including beds for children.

Institutional provision for unmarried mothers and illegitimate infants and homeless children is afforded only by the Poor Law Guardians in their Institution and Cottage Homes.

Ambulance Facilities.—Infectious cases are removed to Hospital in the Motor Ambulance belonging to the Authority and kept at the Fever Hospital. Non-infectious and accident cases are dealt with by two Motor Ambulances kept at the Fire Station and driven by members of the Fire Brigade. They are available for calls within 15 miles of the town.

Clinics and Treatment Centres.—See under various headings.

Day Nurseries.—The Dent Memorial Nursery Day School has accommodation for about 60 children of the pre-school age. This school is visited weekly by the Assistant School Medical Officer, and any necessary treatment is carried out by the School Staff or at the School Clinic.

School Clinic.—The School Clinic at 156 Northgate has provided more suitable accommodation for the growing demands of the services provided. The building is modernly equipped with a treatment centre, consultation rooms, dental department, eye department and an X-ray apparatus for the treatment of ringworm.

The staff includes two Assistant School Medical Officers, one of whom attends every afternoon for consultations, one full-time Dentist, a part-time Ophthalmic Specialist, three school Nurses, and three Clerks.

Special Schools.—An open-air school for 120 delicate children, and the Barnard School for 100 backward scholars were opened during the year (*See School Report*).

Tuberculosis Dispensary.—*Feethams House.* The Tuberculosis Officer and a Nurse attend the Dispensary Tuesdays and Fridays for consultations. The scheme is administered by Durham County Council. See also under Tuberculosis.

Venereal Diseases.—Diagnosis and Treatment Clinics are held at the General Hospital, Darlington, by the Venereal Diseases Medical Officer :—

Mondays, 2—5 p.m., women and children.

Tuesdays, 10 a.m.—12 noon, 2—4-30 p.m., women ;
5-30—7-30 p.m., men.

Fridays, 2—4-30 p.m., women ; 5-30—7-30 p.m., men.

The irrigation room is open every day for intermediate treatment, which is supervised by a full time orderly.

THE INFECTIOUS DISEASES HOSPITALS.

The Borough Fever Hospital situated in Hundens Lane on the eastern side of the town is a well-built brick building, with the addition of a wooden temporary wing used for scarlet fever cases. It is built on the enclosed corridor plan, with excellent opportunities for the isolation of different diseases in four wings, with two large wards and several small wards in each wing. The administrative block with kitchens and staff dining room is centrally situated, giving easy access to all the wards. Several structural improvements have been made, leading to economy in service. In case of fire, the wooden buildings and enclosed corridor would prove to be easy victims, with I am afraid, very serious risk to all in the premises.

Calculating at the rate of 2,000 cubic feet per bed, the Hospital would contain 105 beds. The diseases treated are principally Scarlet Fever, Diphtheria, Typhoid Fever, Acute Encephalitis Lethargica, Cerebro-Spinal Meningitis, Pneumonia, and such other diseases of an infectious nature which the Medical Officer of Health, who is also the Medical Superintendent, considers of serious import.

The Hospital has been recognised by the General Nursing Council and the Ministry of Health as a Training School for Probationer Nurses desiring to obtain the Fever Nurses' Certificate for State Registration. It is quite evident that great difficulty would have been experienced in finding Probationer Nurses, whereas now numerous applications for opportunities of training are being received. Had the claim for recognition not been successful we would have been obliged to employ an all trained Nursing Staff.

The staff consists of Matron, four Sisters, four Staff Nurses and eight Probationers, with a domestic staff of Maids as required.

A Laundry, Steam Disinfector and Motor Ambulance are provided on the premises.

The equipment was supplemented by the installation of a Jesionek Artificial Sunlight Mercury Vapour Lamp for use chiefly on convalescent debilitated scarlet fever patients. The usual full treatment consists of at least five doses given at the rate of two per week, starting with a complete bodily exposure of two minutes and finishing with the patient developing a slight bronzing with 30 minutes duration. The good results were commented upon by the grateful parents. One outstanding feature was the general feeling of high spirits amongst the patients whilst undergoing the course, and often a refractory troublesome child underwent a perfect transformation as a result. It has been an excellent investment not only in reducing the usual period of convalescence and the severity of complications even of mild scarlet fever but also in turning out contented patients to more contented parents.

Summary of the Work.

	Cases.	Patient Days.	Deaths.
Borough	337	12,145	19
Rural and others	112	4,956	2
Total	449	17,101	21
Average staff during year :—			
Nursing		16	
Domestic		17	

A total of 81 days of illness of staff was chiefly made up by two nurses contracting mild scarlet fever and by one of the maids having to undergo an operation through swallowing a pin.

In May 1928 the Ministry of Health approved arrangements made by the Local Authority to treat in the Borough Isolation Hospital cases of Acute Anterior Poliomyelitis, Pneumonia and complicated cases of Whooping Cough and Measles in children under 5 years of age, at a charge of 8/- per day to the Maternity and Child Welfare account. During 1929 the following cases were nursed under this arrangement :—

	Cases	No. of In-patient days.
Acute Anterior Poliomyelitis (children under 5)	—	—
Pneumonia (Children under 5)	6	60
Whooping Cough (under 5 years of age)	1	7
Measles (under 5 years of age)	—	—

Of the town admissions revised diagnoses were made in ten cases of Scarlet Fever, eight cases of Diphtheria, two cases of Typhoid, and 1 case of Pneumonia.

In the Rural cases the diagnosis was revised in two cases of Scarlet Fever and one case of Erysipelas.

Eleven operations were performed, 3 for tracheotomy, and eight for incision of abscesses.

Artificial Sunlight.—Eight-five patients received a full course of Ultra Violet Ray Therapy.

Lectures to Nurses.—Being recognised as a Training School the obligation rests with us of training approximately four Provisioner Nurses each year for the examinations qualifying for State Registration. The Medical Officer of Health and the Sister Tutor gave in all 43 lectures and demonstrations in Anatomy, Physiology, Hygiene and Nursing.

The following Authorities have agreements for the use of our Isolation Hospitals :—

Darlington Rural District Council.

Durham County Council in respect of inmates of Dinsdale Park School.

Richmond Rural District Council.

Richmond Barracks and Catterick Camp.

Richmond Borough Corporation.

Croft Rural District Council.

Aysgarth Rural District Council.

Leyburn Rural District Council.

Royal Air Force in respect of Catterick Camp.

Darlington Queen's Nurses' Association.—Home nursing is provided by the Queen's Nurses' Association, who are supported by voluntary subscriptions and by contributions from the Durham County Council and County Borough Councils and Friendly Societies. By agreement with the Borough Council they undertake the home nursing of expectant mothers, maternity cases, cases of Puerperal infection, Measles, Whooping Cough, Epidemic Diarrhoea and Ophthalmia Neonatorum, at a retaining fee of £10, plus 1s. 4d. a visit, with a minimum total of £30 per annum.

In September 1920, the Council agreed in connection with their joint scheme with the Durham County Council for the treatment of Tuberculosis, to pay the sum of ten-pence per visit for tuberculous cases with open wounds nursed at home at the request of the Tuberculosis Medical Officer.

Midwifery cases are undertaken, but only at the expense of the Local Authority in so far as complications lead to additional attendances.

General Hospital, Darlington.—This is almost purely a Surgical Hospital at present, as the accommodation is not sufficient for all the medical and surgical needs of the town. A new Hospital is under construction on a neighbouring site of 17 acres. It is suggested that this new War Memorial Hospital should be built as speedily as possible, if necessary with the present promised municipal help of £47,000 or more, with a relevant measure of corporation control.

The increasing demands made on the accommodation are revealed by the figures for the past eight years :—

				In-patients		Out-patients' attendances
1921	....	....	....	1,066	....	40,421
1922	....	....	....	1,346	....	43,027
1923	....	....	....	1,519	....	46,134
1924	....	....	....	1,563	....	45,638
1925	....	....	....	1,600	....	46,428
1926	....	....	....	1,746	....	48,679
1927	....	....	....	2,155	....	51,575
1928	....	....	....	2,290	....	59,262
1929	....	....	....	2,324	....	58,906

SECTION VI.

CHEMICAL AND BACTERIOLOGICAL WORK.

Chemical examination of water supplies, milk samples, food and drugs are carried out by agreement with Mr. Cyril J. H. Stock, appointed as part-time Analyst, who has kindly written the following report :—

ANNUAL REPORT OF THE BOROUGH ANALYST.

1. During the year ended the 31st December, 1929, 214 samples of Food have been submitted for analysis and report under the provisions of the Food and Drugs (Adulteration) Act, 1928, and the various Regulations which the Minister of Health is empowered to make.

2. I have certified 171 samples to be of genuine quality and 24 samples to be adulterated or below standard, while 11 samples of Milk, taken in course of delivery as reference samples, and 8 samples of Milk taken on appeal to the cow, have also been reported upon.

3. Excluding reference and appeal samples, the percentage of adulteration for the year was 12.30 as compared with 11.91 for the 12 months ended the 31st December, 1928.

4. During the ordinary course of inspection 127 samples of Milk were taken of which 24 were found to be adulterated or below standard, giving a figure of 18.90 for the percentage of adulteration for Milk for the period under review. In this figure are included all samples either adulterated or below standard, but reference and appeal samples are not included.

The figure for the previous year was 21.05 per cent.

Of the 24 samples reported against 5 were deficient in both Non-fatty Solids and in Fat, 10 were deficient in Non-fatty Solids only and 9 were deficient in Fat.

The average composition of the genuine samples showed that the general quality of the Milk vended in the town was satisfactory :—

Non-fatty Solids	....	....	8.77%
Fat	....	....	3.60%

For the year 1928 the figures were :—

Non-fatty Solids	....	....	8.61%
Fat	....	....	3.77%

5. The commodities other than Milk which were sampled comprised Ground Almonds, Butter, Cheese, Cocoa, Coffee, Custard Powder, Flour and Bread Meal, Bun Flour, Dried Figs, Ice Cream, Lard, Oat Meal, Spices, Syrup and Treacle, and Sausage Skins, all of which were found to be of genuine quality and in wholesome condition.

6. All samples of a perishable nature and such as experience has shown to be likely to contain preservatives were specially examined for such additions but none were detected.

7. Of 7 samples of Ice Cream which were reported upon 2 contained a satisfactory proportion of Milk Solids but the remainder were not of such high quality although none of the samples contained any deleterious ingredient.

8. Generally speaking the work of the past year shows that the quality of the food supplied to the inhabitants of Darlington is satisfactory, and the only article concerning which complaints have arisen is Milk, indicating the necessity for continual activity in the supervision of this important article of diet.

(Signed) CYRIL J. H. STOCK, Borough Analyst.

Bacteriological work was carried out for the Venereal Diseases Department by the Medical Officer, Dr. Ferguson, and at the Armstrong College Laboratory. The examination of sputum and the bacteriological work carried out in connection with infectious diseases generally are also undertaken at the Armstrong College Laboratory, Newcastle-upon-Tyne.

	No. of Specimens	Results	
		Positive	Negative
Tuberculosis	216	57	159
Diphtheria	123	26	97
Enteric Fever	14	5	9
Venereal Diseases (Blood Tests)	214	—	—

In addition 477 specimens were examined at the Venereal Diseases Clinic mainly as smears.

SECTION VII.

PUBLIC HEALTH EDUCATION.

Formal public health education is the latest departmental activity, and its conduct has received State endorsement in the Public Health Act of 1925, which empowers Local Authorities to arrange for publication of information on questions relating to health or disease, and for the delivery of lectures and display of pictures. Such public health instruction can be given individually or en masse. The Health Visitors and School Nurses have been assiduous in making use of the opportunities afforded when visiting in the homes, of imparting information on the particular problem of the moment, whether it be the feeding of the infant, its clothing, its nursing in minor infectious disease, the safeguarding of the family from infection with tuberculosis, or the guidance of the mother on her own health during pregnancy.

Addresses on health topics were delivered by the Medical Officer of Health at a number of ordinary meetings of various social, religious and educational organizations.

In addition to many others who have willingly lent their support, I mention particularly the following —

The Press, Cinema Proprietors (especially those of the Empire Central and Scala), The Hippodrome (Darlington) Ltd., Clergy, Adult Schools, Sunday Schools, School Teachers, the various Corporation Departments, Works, Shops and other places of business in the town, the Wesleyan and General Assurance Society (Health Service Bureau), The British Social Hygiene Council, the National Association for the Prevention of Tuberculosis, The British Empire Cancer Campaign, The Central Council for Health Education, The Motor Bus Companies, The National Association for Mental Welfare, the Health and Cleanliness Council, the National Baby Week Council, the Health Week Committee appointed by the Royal Sanitary Institute, and the Dental Board of the United Kingdom.

Films, Lantern slides, with much of the literature, were obtained from the Health and Cleanliness Council, the National Baby Week Council, the Dental Board of the United Kingdom, and the Health Week Committee appointed by the Royal Sanitary Institute.

The following is a brief account of what was done during the year :—

Tuberculosis.—At the Annual Meeting of the Tuberculosis Care Committee, held in May, 1929, Dr. J. Holroyd, Assistant Medical Commissioner of the National Association for the Prevention of Tuberculosis, gave a Lecture to the Members present and exhibited the following very interesting Films :—

“ A Day in a Sanatorium ”

“ A pure Milk supply ”

“ Delay is Dangerous.”

Dr. Holroyd also lectured to 900 children at the Scala Picture House, the Management of which kindly lent the Building for the occasion, and displayed three Films.

On the 24th November, 1929, the Tuberculosis Care Committee held a Film Display and Concert at the Darlington Hippodrome, Dr. William Brand, Medical Commissioner of the National Association for the Prevention of Tuberculosis, London, came down specially to address the audience and his remarks were greatly appreciated. Two Films, “ A Stitch in Time ” and “ Delay is Dangerous,” kindly lent by the Association, were exhibited. The proceedings were a great success, about 900 attending, and incidentally adding over £55 to the funds of our Tuberculosis Care Committee.

Venereal Diseases.—A Film “ Health and Economy ” was shewn to Members of the Town Council, Members of the Local Branch Council of the British Social Hygiene Council, Education Authorities, Teachers, and others, in the Council Chamber on the 16th May, 1929, and literature was distributed. This Film was shewn by the British Social Hygiene Council. Discussion took place between the Health Committee and Mrs. C. Neville Rolfe, O.B.E., Secretary-General of the British Social Hygiene Council, as to the type of Propaganda most appropriate for Darlington.

Lectures have also been given by your Medical Officer of Health to Toc H. Darlington Branch and other organizations, on “ Problems of Venereal Diseases ” and kindred subjects during the year.

Two parents' conferences were held in the Lecture Hall of the Technical College on 26th and 27th November, when the educational film the "Gift of Life" was exhibited and discussed by the lecturer Dr. Marjorie Smith-Wilson and an interested audience totalling over 400. The teachers in the schools had been previously invited to a preliminary showing of the film and were responsible for the good attendance of parents.

Health Sunday.—As a "Health Week" was held the preceding year, during which there was intensive propaganda it was felt that it was not necessary to hold one in 1929, but a "Health Sunday" was held on 6th October. The Clergy in the Town and the various Sunday Schools, were supplied with special Sermons prepared by the Health and Cleanliness Council and the Health Week Committee of the Royal Sanitary Institute, and they were asked to give special prominence to health matters in their religious functions on that particular day.

Appropriate posters of various sizes, were displayed at the Maternity Centres, School Clinic, Health Office, Borough Accountant's Office, other Corporation Departments, Factories and Works bearing upon health questions throughout the year.

SECTION VIII.

MEDICAL EXAMINATION OF CORPORATION EMPLOYEES.

Medical examinations of members of the staff and of applicants for posts in the following Corporation Departments were made during the year by the Medical Officer of Health :—

Tramways and Transport Department	....	10
Electricity Department	....	5
Education Department	....	11
Borough Accountant's Department	....	5
Health Department	....	4
Town Clerk's Department	....	—
Borough Fever Hospitals	....	4
Borough Surveyor's Department	....	16
Fire Brigade Department	....	3
Cemeteries Department	....	—
Gas Works Department	....	15
Public Library	....	—
Total	....	73

SECTION IX.

MATERNITY AND CHILD WELFARE.**CLINICAL WORK.**

The Clinical side of the work has been continued as in previous years by Dr. Constance Robertson in a most capable manner. Though a part-time general practitioner in the service, her skill and enthusiasm are given wholeheartedly as Medical Officer at the Clinics and as Inspector of Midwives with excellent results as our figures show in reduction of infantile mortality, and in increased appreciation of the mothers as revealed by attendances.

Midwives' Acts, 1902-1918.—The number of Midwives practising in Darlington during 1929 was 20 of whom 18 were fully trained, including the Sister-in-Charge of the Maternity Ward at the General Hospital and the Superintendent Nurse at the Feetham Infirmary. These Midwives are inspected periodically by Dr. Constance Robertson, who made 248 visits; of these 194 were routine visits, 5 were on account of cases of Ophthalmia Neonatorum, 26 for the death of the child, 3 on account of rise of temperature of mother, 6 for Pemphigus and 14 for other reasons. There were no deaths of mothers in any Midwife's practice where a Doctor had not been in attendance.

During the year Midwives attended 942 births alone, and 249 under the superintendence of medical practitioners. Medical assistance was summoned on 184 occasions, including 46 cases where the Maternity Ward Sister at the General Hospital called in a Staff Doctor. The Local Supervising Authority is responsible for the payment of fees to doctors called in by Midwives, and with the continuance of trade depression and unemployment the number of such accounts received remains high. All or part of the fee is recoverable according to the financial circumstances of the patient. Medical practitioners were paid £141, of which a sum of £82 was recovered from patients. No Midwives are employed or subsidized by the Local Authority.

Milk Assistance Scheme.—Milk is granted free on the Clinical Medical Officer's recommendations to infants and to expectant and nursing mothers in necessitous cases falling within a certain income scale. During 1929—1,415 pounds of dried milk were sold at cost price, 329 were given free, and 33,100 pints of fresh milk were given free at a total cost to the Health Committee of £323. The income in all cases is verified by reference to employers and others.

Ante-Natal Clinics.—The very gratifying progress recorded in 1928, has been more than maintained during the year under review, 366 attendances being recorded compared with 356 in 1928. The importance of this work is so great that every effort is being made to increase the attendances.

Nearly one-half of our infantile mortality occurred during the first four weeks of life, owing in great part to antecedent preventable conditions in the mothers. All women in their first pregnancy, all who have had previous miscarriages or difficult labours, and expectant mothers suffering from any abnormality during pregnancy should seek skilled medical advice with a view to appropriate treatment being obtained before an emergency has arisen.

Ante-Natal examination and keeping of records is now part of a Midwife's routine practice. 341 visits were paid by Queen's Nurses to 211 expectant mothers, and 111 post-natal visits to 76 cases in the ordinary course of their duties.

Dental Treatment for mothers and children attending the Centres was continued at the School Clinic on Saturday mornings and Mr. J. L. Liddell, School Dental Surgeon, who is carrying out the work with the approval of the Board of Education and the Ministry of Health, has kindly presented the following report :—

No. of mothers attending	....	....	61
No. of children under 5 years of age	....	....	14
		Total	 75
Attendances	....	....	107
Permanent teeth extracted	....	....	261
Temporary teeth extracted	....	....	29
		Total	 290
Treatment of sockets after extraction	....	....	7
Scalings	....	....	3

One operation was performed for the removal of a piece of bone.

In one case the patient refused treatment.

I am pleased to be able to report that this year there has been an increase of 50% both in the number of patients presenting themselves for treatment, and in the amount of work done. This increase is largely due to satisfied patients telling others of their experiences at the Dental Clinic.

Thirty cases were for multiple extractions and three or four of these attended four or five times.

It has been ascertained that two thirds of those to whom treatment was recommended, attended at the School Clinic for that treatment.

Maternity and Child Welfare Centres.—Five centres are in operation :—

Address	Day	Time	Average Attendance of Mothers with Babies
Hopetown Hall, Whessoe			
Lane	Monday	2-30 p.m.	32
Albert Road School- house	Tuesday	10-0 a.m. ; 2-30 p.m.	95
East Road Wesleyan Sunday School	Wednesday	2-30 p.m.	59
Paradise Sunday School	Thursday	10-30 a.m. ; 2-30 p.m.	87
Cockerton Wesleyan Sun- day School	Friday	2-30 p.m.	28

The Ante-Natal Clinics are held in Albert Road Schoolhouse on the second and the last Thursdays of each month from 1-30 p.m. Average Attendance, 15.

The Centres have been open 247 times ; 14,887 attendances have been made by mothers with babies, the average attendance being 60.

Two hundred and fifty three attendances were made at our Maternity and Child Welfare Centres by 71 mothers who reside just outside the Borough. In the cases of these mothers the extra nourishment is supplied by the Durham County Council.

Average attendances of Mothers with babies at Maternity Centres during the last nine years :—

Year	Albert Road	East Road	Paradise	Hope-town	Cocker-ton
1921	69.0	35.3	58.3	25.1	—
1922	73.8	30.0	53.4	35.5	—
1923	78.9	25.1	49.1	33.0	—
1924	66.8	34.3	53.1	31.9	18.5
1925	64.9	30.2	59.4	26.9	25.0
1926	82.7	41.1	85.5	42.3	27.8
1927	85.6	38.8	82.7	28.1	22.0
1928	84.6	50.0	81.7	39.4	25.6
1929	95.3	58.8	86.6	32.2	27.8

Total attendances of Expectant Mothers at the Maternity Centres and Ante-Natal Clinic during the last nine years :—

Year	At Maternity Centres	At Ante-Natal Clinic
1921	91	58
1922	233	73
1923	187	72
1924	190	61
1925	171	117
1926	194	244
1927	208	245
1928	149	356
1929	211	366

Home Help.—One permanent home help and a rota of part-time home helps carried out this work while the mother was incapacitated. Charges are made according to financial conditions. Sixty-nine applications were made for their services ; attendance was provided in 58 cases, at which service was given for 1,007 days.

The daily charges for the services of the Maternity Home Helps are as follows :—

Where the income of a family exceeds 15/- per head per week the charge to be 3/- per day.
 exceeds 12/- and not 15/- per head per week the charge to be 2/3 per day.
 exceeds 9/- and not 12/- per head per week the charge to be 1/6 per day.

Where the income is less than 9/- per head per week the charge to be 9d. per day.

Cases of extreme poverty are considered by the Special Sub-Committee.

In all the above cases the income is understood to be the average weekly income of the family, after deducting rent and rates, for the four weeks previous to the application.

Maternity Bags.—These bags, containing all the linen and other necessities to assist in an aseptic confinement, were applied for and lent in 19 cases. In 17 cases the bags were returned in good condition but in the other two cases the usual deposit of 2/6 was not refunded, one of the bags having been retained over the period for which it was lent, and when returned, some of the articles were missing. In the other case the woman has removed and cannot be found. One bag was lent without a deposit being demanded.

Baby Day Celebrations.—As in previous years, and through the kindness of Mrs. Baynes, these celebrations, organized by the Voluntary Committee, were held in Polam Hall grounds, on 31st July, and 1 August. Although the weather was unfavourable over 300 mothers with their children attended, and were entertained to tea.

Talks on Health, Hygiene, Ante-Natal work, choice of Food and Cleanliness in the Home were given by Dr. Constance Robertson's Locum (Dr. Nicholson), Mr. A. E. Wade, Senior Sanitary Inspector, Mr. G. Latimer, Assistant Sanitary Inspector and the Medical Officer of Health Dr. G. A. Dawson. Work was exhibited in connexion with the Mothercraft and Fathercraft Competitions and prizes were given. A number of prizes were also obtained by Darlington residents, who entered, through the Borough Maternity Centres, the Competition promoted by the "Evening World" at the North East Coast Exhibition, recently held at Newcastle. Stalls were arranged at the Baby Day Celebrations for the sale of garments, etc., made at the Sewing Classes held in connection with the Maternity Centres. These outings are much appreciated and assist markedly in the Maternity and Child Welfare enthusiasm.

Sewing Classes.—A weekly Sewing Class, conducted by the members of the Voluntary Committee was successfully carried on at the Albert Road Centre and is now an established feature of the Centre.

Maternal Mortality.—On the receipt of notice of a maternal death, either through the local registrar or other means, an investigation and report is completed on the lines suggested by the Special Committee set up at the suggestion of the Ministry of

Health, and the British Medical Association. These detailed particulars in the eight cases of maternal deaths were prepared by the Medical Officer of Health in consultation with the Doctor or Midwife in charge of the case, and then forwarded to the Ministry as directed.

In 3 of the cases abortions were the determining agents leading to the train of symptoms which ended fatally. It is difficult to be always certain in our knowledge as to why these occurred.

Eclampsia or poisoning due to inefficiency of the kidneys in throwing out the waste products accounted for 2 deaths. Ante-Natal examinations and reasonable care would have prevented these deaths.

Puerperal Septicaemia or Fever following full-time confinements, always tragic but only sometimes culpable accounted for 2 deaths, and inquiry showed that both these patients were of very delicate constitution, and had received every reasonable care.

The remaining death was one of those unfortunate accidents which cannot be foreseen or even prevented—Embolism, or clot.

Deaths under one month.—Though the death-rates of children under one year have fallen during the last 50 years from 160 to 81 per 1,000 births, no appreciable reduction has taken place in the case of babies under four weeks.

NEO-NATAL DEATH RATE PER 1,000 BIRTHS.

	1929	1928	1927	1926	1925	1924	1923	1922
Births	1205	1140	1148	1269	1288	1389	1446	1505
Death Rate	36·51	39·50	30·49	44·13	41·15	37·44	29·05	33·22
Actual Deaths	44	45	35	56	53	52	42	50

Average 1922-28 :

Rate	36·25
Actual Deaths	47·57

There is therefore a slight relative increase during 1929 in the death-rate of children under four weeks, compared with the average death-rate during the previous seven years, all pointing to the necessity for further diligence in the care of the expectant mother.

Maternity Ward, General Hospital.—This department, containing 12 beds, 2 of which are for isolation purposes, for the provision and maintenance of which the Borough Council are financially responsible, was opened in 1921. The patients are expected to contribute according to their means towards their maintenance and treatment. The number of admissions is increasing gradually, though there is still much unwillingness on the part of expectant mothers to enter a hospital for their confinement.

During the year there were 166 patients admitted with two still in the ward from the previous year. The average duration of stay was 12.8 days. The midwives delivered 129, and in 37 cases the assistance of a doctor was necessary. There was no case of Ophthalmia Neonatorum. All the infants were breast-fed except four.

There were two maternal deaths from Eclampsia, one from Embolism, fifteen still births and four deaths from prematurity or Congenital deformity.

Dried and Fresh Milk Supplied through Maternity Centres during the last eight years :—

Year	Dried Milk sold to Mothers lbs.	Dried Milk given free to mothers. lbs.	Fresh Milk given free to mothers. pints	Net Cost of Fresh & Dried Milk Supplied.
1921	7,264	2,200	5,432	£316
1922	4,286	1,844	27,110	£399
1923	4,332	896	23,129	£282
1924	4,831	959	15,195	£170
1925	3,486	736	20,615	£248
1926	4,719	1,537	40,009	£529
1927	2,248	611	36,284	£417
1928	1,134	367	33,950	£347
1929	1,415	329	33,100	£323

There are no **Day Nurseries** in Darlington. A description of the work done at the Nursery School and the School Clinic will be found in the Report of the School Medical Officer.

WORK OF THE HEALTH VISITORS.

During the year the Health Visitors paid the following visits:—

First visits to Infants under one year	....	1,096
Re-visits to Infants under one year	....	1,545
Children one to five years	....	2,786
Cases of Measles, one to five years	....	272
" " over five years	....	409
" Chickenpox	....	245
" Whooping Cough	....	256
" Ophthalmia Neonatorum	....	19
" Infant Deaths	....	64
" Still-births	....	51
" Diarrhœa	....	2
" Puerperal Fever	....	—
" Puerperal Pyrexia	....	—
Expectant Mothers, first visits	....	185
" " re-visits	....	121
Maternal Deaths	....	1
Cases of Mental Deficiency	....	3
Miscellaneous Visits	....	274

Unnotified Births.—Births unnotified within thirty-six hours of birth numbered 70 compared with 46 in 1928. Early notification has always been essential in putting our Health Visitors in timely touch often to prevent a premature weaning or other improper action on the part of an ignorant or careless mother.

Breast Feeding.—Out of 765 children attending the centres, 506 were breast fed for three months and over, while 259 were breast fed during the first three months but not afterwards.

Midwives calls to Doctors.

Summary of the causes for sending for Medical help.

	1921	1922	1923	1924	1925	1926	1927	1928	1929
Mother :—									
Torn Perineum	9	8	16	19	20	18	32	15	1
Prolonged, Tedious or Difficult Labour	24	23	30	31	24	18	24	32	1
Faulty Presentations	—	—	—	—	—	7	10	7	—
Impactions	—	—	—	—	—	4	3	1	—
Hæmorrhages	4	2	1	8	4	4	10	17	—
Rise of Temperature	4	6	2	4	11	7	4	7	—
Adherent Placenta	1	5	8	4	8	8	1	5	—
Albuminuria	—	—	—	1	—	1	6	2	—
Phlebitis	—	—	—	—	—	1	1	2	—
Abortion	—	—	—	3	5	8	5	14	—
Contracted Pelvis	—	—	—	—	—	2	2	—	—
Eclampsia	—	—	1	—	—	3	—	—	—
Prolapse of Cord	—	—	—	—	—	2	—	1	—
Miscellaneous	—	2	1	9	5	11	10	12	—
Total	42	46	59	79	77	94	108	115	1
Child :—									
Discharging Eyes	17	10	5	5	6	8	13	8	—
Debility, Feebleness, etc.	1	4	2	3	6	2	1	5	—
Prematurity	5	13	13	3	5	5	10	4	—
Malformations	3	3	2	4	4	1	1	2	—
Convulsions and Fits	5	2	2	3	5	—	4	2	—
Suffocation	—	—	—	—	1	—	2	1	—
Miscellaneous	2	1	—	4	1	12	5	8	—
Total	33	33	24	22	28	28	36	30	—

The following Table shows how the charges for the above cases had been dealt with at the conclusion of each year since 1921 :—

	1921	1922	1923	1924	1925	1926	1927	1928	1929
No Account received by Health Committee from Doctor	47	43	39	45	47	43	40	43	—
Accounts sent in to Health Committee	28	36	44	56	58	79	104	102	—
Whole Fee refunded by Patient	5	7	16	13	14	17	21	10	—
Whole Fee remitted by Health Committee	4	6	8	6	16	24	21	37	—
Fee or part of Fee still owing	17	23	19	33	14	30	58	48	—
Part Fee remitted, remainder or part still owing	—	—	1	3	12	5	3	5	—
Part Fee remitted, remainder paid	2	—	—	1	2	3	1	2	—
	1921-22	1922-23	1923-24	1924-25	1925-26	1926-27	1927-28	1928-29	—
*Amount paid to Doctors	£47	£57	£69	£58	£73	£121	£143	£160	—
*Amount recovered from Patients	£20	£31	£48	£47	£38	£76	£105	£78	—
*Cost to Council	£27	£26	£21	£11	£35	£45	£38	£82	—

*These figures relate to financial years ending 31st March, the other figures in the table being for calendar year.

Registration of Nursing and Maternity Homes.—Under the Nursing Homes Registration Act, 1927. 7 applications for registration by private persons were received, and after inspection of the premises and the Staff by the Medical Officer of Health it was recommended that the necessary certificates be granted. All the applicants were persons well known, of good reputation, and six of them had carried on their homes successfully for several years, the other one being a new applicant, the widow of a local medical practitioner of a long standing good reputation in the Borough. No official application from unsuitable applicants was received, so that the question of an Order refusing registration did not arise. An application for exemption from registration was granted in the case of the General Hospital. The re-inspection of the homes during the year found all the obligations being complied with.

The M. & C.W. Voluntary Committee.—About 20 voluntary workers assist in the general routine of the clinics, distributing milk, organizing relief and giving advice to the mothers by holding Sewing Classes, Baby Days, and generally interesting themselves and the mothers in the future welfare of their homes and families.

LIST OF MIDWIVES PRACTISING IN THE COUNTY BOROUGH OF DARLINGTON.

No. on Roll.	Date of Enrolment.	Name.	Address.
72630	25 February, 1928	Clift, Hannah ...	Feetham Institution, 90, Yarm Road.
74475	13 October, 1929	Fleetham, Eliz. Howe	5, Garden Street.
43728	22 February, 1916	Gait, Sarah Ann ...	12, Thornton Street.
19855	27 April, 1905 ...	Geall, Florence Annie Adelaide	The Green, Cockerton.
67753	12 December, 1925	Goodfellow, Violet Jane	32 Leyburn Road.
42793	10 August 1915 ...	Hale, Alice ...	Queen's Nurses' Association Woodland Road.
55344	11 October 1921	Hancock, Ellen ...	29 Stanley Terrace.
46105	11 August, 1917 ...	Hoskins, Sarah ...	12, Hammer Street.
58912	13 December, 1922	Jenkin, Jane ...	40, Willow Road.
57442	10 June, 1922	Johnson, Bertha ...	Feetham Institution, 90, Yarm Road.
60455	11 June, 1923 ...	Kirby, Ethel Mary ...	116 Neasham Road.
20239	27 April, 1905 ...	Lunn, Tamar ...	21, Aldam Street.
64546	11 October, 1924	O'Donnell, Ann ...	Queen's Nurses' Association, Woodland Road.
73495	25 May, 1928 ...	Ogden, Alice ...	Queen's Nurses' Association, Woodland Road.
46944	9 February, 1918...	Oliver, Eleanor Purvis	Queen's Nurses' Association, Woodland Road.
64585	11 October, 1924	Redhead, Isabel ...	295 North Road.
60541	10 December, 1924	Rowell, Eva Trevor ...	Sister-in-Charge, Maternity Ward General Hospital.
63631	14 June, 1924 ...	Slater, Ellen ...	13, Hopetown Lane.
65529	9 February, 1925	Smith, Annie ...	87, Gurney Street.
17902	23 March, 1905 ...	Trinham, Louisa ...	Superintendent, Queen's Nurses' Association, Woodland Road.
72477	24 November, 1927	Walker, Jeannie ...	Feetham Institution, 90, Yarm Road.
65116	19 February, 1925	Watson, Ellen ...	22, Four Riggs.
72529	24 November, 1927	Younger, Ellen ...	Queen's Nurses' Association, Woodland Road.

REGISTER OF HOMES UNDER NURSING HOMES REGISTRATION ACT, 1927.

Miss Jane Jenkin, 40, Willow Rd., Darlington	2 beds available
Mrs. Isobel Lyle Yates, Argyll Nursing Home, 24 Cleveland Terrace	7 beds. ,,
Mrs. Sarah Ann Gait, 12, Thornton Street	1 bed. ,,
Miss Barbara Miller, Cleveland Nursing Home, 17 Cleveland Terrace....	6 beds. ,,
Miss Mary Potter, Coniscliffe Nursing Home, Coniscliffe Road ...	15 beds. ,,
Miss Ethel Lazenby, Greencroft Nursing Home	2 beds. ,,
Mrs. Frances Eleanor Mary Martin, Westbrook Nursing Home, 9, Westbrook Villas	5 beds. ,,

SECTION X.

TUBERCULOSIS.

There were 77 deaths from Tuberculosis during 1929, as follows :—

	<i>Males</i>	<i>Females</i>	<i>Total</i>
Tuberculosis of the Respiratory System	41	22	63
Other Tuberculous Diseases....	7	7	14

Under the Tuberculosis Regulations 156 cases were notified, 90 of males and 66 of females ; 3 under 1 year of age ; 1 between 1 and 2 ; 5 between 2 and 3 ; 3 between 3 and 4 ; 3 between 4 and 5 ; 19 between 5 and 10 ; 14 between 10 and 15 ; 20 between 15 and 20 ; 40 between 20 and 35 ; 15 between 35 and 45 ; 29 between 45 and 65 ; and 4 over 65 years of age. Of these 23 came from Harrowgate Hill Ward ; 21 from North Road Ward ; 20 from Eastbourne Ward ; 23 from Cockerton Ward ; 12 from Pierremont Ward ; 21 from Central Ward ; 18 from West Ward ; and 18 from South Ward.

New Cases and Mortality during 1929.

Age-Periods				New Cases.				Deaths.			
				Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
				M.	F.	M.	F.	M.	F.	M.	F.
0—	...	...	...	...	1	2	...	...	...	2	...
1—	...	...	...	1	1	8	2	...	...	2	2
5—	...	...	...	2	1	13	3	1	...	3	3
10—	...	...	...	2	1	5	6	...	...	...	...
15—	...	...	...	10	5	2	3	4	2	...	...
20—	...	...	...	8	10	3	...	10	7	...	1
25—	...	...	...	7	10	...	2	3	5	...	...
35—	...	...	...	6	6	...	3	5	2	...	...
45—	...	...	...	10	5	...	...	8	3	...	...
55—	...	...	...	6	6	1	1	5	3	...	1
65 and upwards	...	...	...	4	...	...	...	5	...	...	...
Totals ...	...	...	...	56	46	34	20	41	22	7	7

Of the above 77 deaths, 9 were cases which came to the knowledge of the Medical Officer of Health otherwise than by notification under the Regulations.

**PUBLIC HEALTH (Prevention of Tuberculosis) REGULATIONS,
1925, and PUBLIC HEALTH ACT, 1925 (Section 62).**

There has been no action taken under the above.

TUBERCULOSIS SCHEME.

Dispensary.—The Dispensary at Feethams is open for the examination of notified tuberculous patients, suspected cases and their contacts—Tuesdays at 10 a.m. for men; Fridays at 10 a.m. for women and children.

As in previous years the work was carried out by the Durham County Council, who provide a Medical Officer and Nurse for attendance.

The Residential Institutions available for patients are provided also by the Durham County Council.

Tables are appended shewing the treatment rendered to Borough Patients during the year.

During the year 145 first visits and 1,432 re-visits were paid to houses by the Tuberculosis Health Visitors.

Four shelters were erected for the use of patients residing in the Borough during the year and 7 shelters were actually in use by Borough patients on the 1st of January 1930.

There is co-operation between the Tuberculosis Medical Officer and the Staffs of the Health Office, the School Medical Service and the General Hospital. Quarterly reports are sent by General Practitioners providing domiciliary treatment, and patients receiving such treatment usually attend at the Dispensary once a quarter. Where the diagnosis is doubtful the patients are kept under observation by the Dispensary Staff. Home contacts are supervised and examined systematically by the Tuberculosis Medical Officer either at the Dispensary or at the homes. The Tuberculosis Health Visitors visit and give advice in the homes of every case notified.

Advanced cases or those with discharging wounds are nursed and dressed in their homes by Queen's Nurses. Tenpence per visit is paid for this service. 859 visits were paid to 39 patients.

The majority of the non-pulmonary cases of Tuberculosis are treated in the Darlington General Hospital, where there are facilities for X-ray examination, surgical operative assistance, and the provision of surgical apparatus.

Artificial light treatment is now provided at the General Hospital, thus saving the expense of sending patients to Newcastle Royal Victoria Infirmary.

The incidence is given in the following table and in tables on pages 63—68 of this report.

NOTIFICATIONS OF TUBERCULOSIS (Pulmonary and Non-Pulmonary) and DEATHS.

<i>Year</i>	<i>Pulmonary</i>		<i>Non-Pulmonary</i>	
	<i>Notified</i>	<i>Deaths</i>	<i>Notified</i>	<i>Deaths</i>
1920	151	61	55	22
1921	124	66	32	17
1922	111	71	47	20
1923	135	69	80	15
1924	119	62	65	21
1925	134	58	56	24
1926	111	59	76	16
1927	119	68	59	19
1928	103	58	61	27
1929	102	63	54	14

VOLUNTARY CARE COMMITTEE.

The excellent work of this Committee has been carried out as in previous years under the Honorary Secretaryship of the Medical Officer of Health. The Annual Report dealing with its work shews the manifold directions of its aims and achievements. Through the Care Committee, facilities are granted and arrangements made for the provision of nourishment, financial assistance, assistance in dental treatment, provision of footgear and clothing, boots and shoes, for domestic use and Sanatorium, provision of beds and bedding, travelling expenses, subsidies towards rent, loan of Invalid Chairs, Throat Sprays and such things., assisting and advising patients in obtaining better housing and suitable employment, giving friendly encouragement and advice to patients as to the mode of life, in fact the general supervision of the welfare of patients.

During the year ending 31st of March, 1930, 51 new applications were received and help was provided in 36 of these. Sixty cases helped in previous years continued to benefit. The total number of cases dealt with since the beginning of the work of the Care Committee in 1919 up to 31st March, 1930 is 468.

The Care Committee have, as before, rendered real assistance to deserving cases, and their work has been much appreciated by those who have been helped. The Tuberculosis Care Committee, far from being purely a charitable organisation to help stricken families, is a necessary link in the work being undertaken by Local Health Authorities, not merely by ameliorating the sufferings of the patients and their families, by assisting them materially and otherwise when and where necessary, but in reaching the ultimate aim of such Authorities **in seeking to eliminate this scourge from the community.**

Personally I am of the opinion that the work of our Maternity and Child Welfare and School Medical staff is of very much more value in checking early tuberculosis than our direct tuberculosis schemes.

SECTION XI.

VENEREAL DISEASES.

In 1920 a scheme was drawn up making certain improvements as required by the Ministry of Health for the treatment of Venereal Diseases, in connexion with the Skin Department at the General Hospital, Darlington. The work is now carried out by a part-time Medical Officer, a full-time Male Orderly, and a member of the Nursing Staff of the Hospital. Clinics are more frequent and intermediate treatment can be given.

Much progress has been made in the thoroughness of the treatment and in the facilities presented to the patients, though there is still much need of additional accommodation which cannot be provided in the present buildings.

Patients requiring intern Hospital treatment are admitted on the recommendation of the Medical Officer, two beds being provided.

The appointment of the Medical Officer as part-time Schools Medical Officer has been the means of detecting infected families, leading to the more complete eradication of the diseases and consequent protection of further offspring.

The Department is open for the following sessions :—

Males.—Tuesdays 10-0 a.m., 5-30 p.m.

Fridays 5-30 p.m. and by appointment with the Medical Officer.

Women and Children.—Mondays 2 p.m.

Women Only.—Tuesdays 2 p.m. Fridays 2 p.m.

For Irrigation.

Males.—Daily from 10 a.m. (full-time Orderly in attendance).

Women.—Daily by appointment with the Medical Officer.

Attendances of men, women and children are rapidly increasing, not only those from Darlington, but also those from the districts for 20 miles around. This does not mean that there is necessarily an increase in the incidence of venereal diseases, but rather that the diagnosis is now more readily made and that practitioners are realizing the assistance presented in a neighbouring clinic with a specialist officer at hand. A few Darlington residents have attended the neighbouring clinics at Stockton, Durham, Newcastle, etc.

Opportunities of instruction are given to medical practitioners at the Clinic, and those who are qualified receive free supplies of arsenobenzol compounds on application. During the year 45 doses of these were supplied to 3 practitioners.

No action has been taken under the Venereal Diseases Act of 1917.

There is a local branch of the British Social Hygiene Council, of which the Medical Officer of Health is the Honorary Secretary.

Laboratory work is carried out at the Clinic by the Medical Officer and at the College of Medicine, Newcastle-upon-Tyne.

Bacteriological Examinations for Darlington patients made at the Durham College of Medicine, Newcastle-upon-Tyne, during the year are set out as follows :—

			For detection of spirochetes	For detection of gonococci	For Wassermann reaction	C.S. Fluid for General Examination	C. S. Fluid for the Wassermann reaction
For Treatment Centre...	...	...	...	10	149	...	...
For Practitioners	...	...	...	5	47	...	3
Totals ...	...	...	...	15	196	...	3

Services at the Venereal Diseases Treatment Centre at the Darlington General Hospital, 1929.

Classified according to the areas in which the patients resided

				Darling- ton	Durham	North Riding of Yorks.	Total
Number of cases from each area dealt with during the year for the first time and found to be suffering from :—							
Syphilis ...	...	...	...	47	...	11	...
Soft Chancre ...	...	...	...	5	...	—	...
Gonorrhœa ...	...	...	...	98	...	41	...
Conditions other than Venereal	...	...	...	74	...	28	...
Total ...	...	...	...	224	...	80	...
Total number of attendances of all patients residing in each area ...							
...	...	...	...	12,774	...	3,271	...
...	...	...	...	...	...	800	...
Aggregate number of "In-patient days" of all patients residing in each area ...							
...	...	...	...	71	...	66	...
...	...	...	...	...	...	80	...
Number of doses of arsenobenzene compounds given to patients residing in each area :—							
1.—Out-patient Clinic	...	...	...	372	...	81	...
2.—In-patient Dept.	...	...	...	4	...	—	...

**Number of Darlington County Borough Out-patients attending
Clinic for first time.**

	Syphilis		Gonorrhœa		Soft Chancre		Other Cases		Total		Grand Total
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
1920	65	42	55	14	2	—	8	5	140	61	201
1921	47	22	24	5	—	—	9	—	80	32	112
1922	36	22	17	12	3	1	13	12	69	47	116
1923	16	22	36	19	—	5	18	12	70	58	128
1924	25	13	49	36	3	1	24	40	101	90	191
1925	32	26	54	30	3	2	24	26	113	84	197
1926	31	27	70	25	1	1	52	29	154	82	236
1927	24	30	78	39	1	—	26	15	129	84	213
1928	33	33	118	57	4	—	44	48	199	138	337
1929	27	20	67	31	5	—	32	42	131	93	224

Total Attendances of all Patients from Darlington Borough.

<i>Year</i>	<i>Males</i>	<i>Females</i>
1920	1,239	556
1921	881	353
1922	1,249	567
1923	2,977	1,311
1924	3,564	869
1925	3,448	759
1926	5,651	1,304
1927	6,449	1,407
1928	9,074	2,314
1929	10,089	2,685

SECTION XII.

MENTAL DEFICIENCY.

This work, which is administered and carried out by the Medical Officer of Health and the Deputy Medical Officer of Health, who are the certifying officers under the Mental Deficiency Acts, comes under the Committee for Promoting the Welfare of Afflicted Persons..

Two types of cases are dealt with :—

(a) **Statutory Cases**, consisting of mental defectives under 7 and over 16 years, known to require special care and supervision; ineducable mentally defective children between the ages of 7 and 16 years; and children referred to the Local Authority under the Mental Deficiency Act, as being either incapable of further education in a special school or of being incapable of such education without detriment to other children. All these cases are dealt with under the Mental Deficiency Act, being placed in Institutions, or under guardianship or supervision.

(b) **Education Cases**, consisting of mentally defective children between the ages of 7 and 16 years capable of education in the special school provided. These are dealt with by the Education Committee.

The Medical Officer of Health is also Schools Medical Officer, so that there is liason in the work.

Number of Mentally Defective.—The work of ascertainment of adult cases is progressing and is much more complete, as several cases only come to the notice of the Medical Officer of Health through such channels as the Health Visitors in their routine home visits in connection with Maternity and Child Welfare, through the Police Courts and other services.

The total number of mentally defective persons in the Borough known by medical examination is :—

	<i>Males</i>		<i>Females</i>	
(a) Statutory and Observa-				
tion Cases, all ages	87	....	73	
(b) Education Cases, 7-16 yrs.	44	....	36	
	—		—	
Total	131		109	—240

Distribution.

The 240 cases are distributed as follows :—

(a) Statutory Cases, &c.				
In Certified Institutions	5	....	6	
In Feethams Poor Law In-				
stitution	2	....	5	
On licence from Institution	2	....	1	
Under supervision at home				
Statutory	13	....	13	
Voluntary	65	....	48	
	—		—	
	87		73	—160

(b) Education Cases.

Attending Certified Schools	39	....	30	
Attending Elementary Schools	1	....	4	
At other Institutions	2	....	0	
Resident at home....	0	....	0	
	—		—	
	42	....	34	—76
(c) Transferred from care of Education Committee to Local Control Authority during 1929	2	....	2	—4
	—		—	—
Total	131		108	—240

There were removed from the General Register during the year 6 cases, four owing to death and two to removal to another district. In the latter event, the Medical Officer of Health of the District was communicated with, in order to ensure continued supervision.

The placing of these unfortunate cases in suitable institutions presents a great difficulty, firstly in discriminating which defectives should be removed, as the available institutional vacancies are very few, and secondly because the financial burdens are heavy. The Board of Control are therefore urging Local Authorities to press forward their arrangements for care other than institutional. Such arrangements include increased home supervision, appointment of guardians, and the establishment of occupation centres.

At present under the Education Committee Scheme the Special School for mentally defective children, of which Miss Clegg is in charge, is doing excellent work, but unfortunately most of the children on their discharge at 16 years of age find themselves obliged to join the ranks of the unemployed. They cannot hold their own in the labour market, and in their endeavour to be busy they find the wrong thing.

The subjects of instruction at occupation centres as distinct from schools are very elementary, inculcating ideas of cleanliness, neatness, discipline, muscle control and everyday things of life. For low grade children, drill, sense training, singing, polishing and easy household work, such as setting a table, sweeping up crumbs, provide opportunities for amusement, companionship and occupation in a way which is impossible in the homes from which these

cases usually come. The higher grade defectives receive instruction in plain sewing, hemstitching, raffia mats, basket work, and rug making.

The establishment of such a centre in Darlington took place last year, and Miss Homes a well experienced worker appointed as Secretary of the local Mental Welfare Association and Supervisor of the Occupation Centre, has already assisted materially in improving our ascertainment and control.

SECTION XIII.

SANITARY CIRCUMSTANCES OF THE AREA.

Particulars of Sanitary administration are also given in the Report of the Senior Sanitary Inspector printed herewith.

Water Supply.—The water supply of the Borough is obtained from the River Tees. The intake is situated near the western boundary of the Borough and the water is pumped in two stages: (a) from the River into large subsiding tanks, (b) from the subsiding tanks through the filters to the Reservoirs and town.

Pumping plant of ample capacity has been installed and alternative sources of power are available, viz., steam, suction, gas and electricity, to provide for all reasonable requirements.

The mechanical filtration plant installed in 1924-7 has now been in operation since June, 1927. This plant, which has superseded entirely the old system of slow sand filters, is working satisfactorily. The initial difficulties met with on the starting up of the plant have been overcome.

The peaty discolouration which is present in the River Tees water, especially in the autumn and after heavy rains, is removed by the addition of Alumina Ferrie, the quantity added varying from 1 grain to 6 grains per gallon.

Lime water is also added after filtration in order to correct any tendency towards plumbo-solvency.

Chlorine is injected under pressure into the filtered water main as it leaves the Waterworks. The amount of chlorine added varies from $\frac{1}{3}$ to $\frac{1}{2}$ part per million, according to bacteriological findings. Two million gallons per day are used by the 16,000 houses in the Borough and the 400 outside.

Analyses of the river, filtered and chlorinated water are made weekly by the Borough Analyst, whose reports during the past year have been consistently satisfactory.

Typical analyses are as follows :—

River Water.

Number of colonies on Nutrient Gelatin at 18°-20° C. after 72 hours.	600 per c.c.
Presumptive B. Coli Test after 72 hours	Positive in 0.1 c.c.

Filtered Water.

Number of colonies on Nutrient Gelatin at 18°-20° C. after 72 hours.	120 per c.c.
Presumptive B. Coli Test after 72 hours	Positive in 0.1 c.c.

Chlorinated Filtered Water.

Number of colonies on Nutrient Gelatin at 18°-20° C. after 72 hours	3 per 2 c.c.
Presumptive B Coli Test after 72 hours	Negative in 100 c.c

Rivers and Streams.—The River Skerne which flows through the town and was once regarded as an open sewer, is now provided with well built banks along most of its course. At times during very wet seasons, storm water may overflow into low lying waste land, in the vicinity of Valley Street, at present used as a tip, and by its retention there, with decomposing vegetable matter, there is risk of a serious nuisance. Attention to the weir on the river and the draining of the low lying land would improve the present eye sore immensely, for profitable development.

There was no necessity to take any action to check the pollution of rivers or streams in the area.

Complaints have been made of nuisances arising from the practice of allotment holders and others throwing their vegetable refuse into ditches and streams to decompose. These have been dealt with by the sanitary inspectors and the allotment committees involved.

Smoke Abatement.—As so much of the nuisance from this cause arises from domestic fires, one of the first steps towards a cleaner town is the production of cheap gas and electricity for the home. This has been the policy in Darlington for many years. At present, a determined effort is being made to urge those people who must use open fires to burn smokeless fuel, either the locally produced coke or the proprietary fuels, *e.g.*, Coalite, Ricoal or Kincole, now on the market. Many of the large works in the town have been under observation and are considering the use of modern furnaces which consume their own smoke, to the distinct advantage of the amenities and health of the neighbourhood.

Premises which can be controlled by Bye laws or Regulations. In spite of the totally inadequate inspectorate staff an attempt has been made during the year to ascertain the conditions under which certain people are living in the Borough in tents, vans, sheds, houses let in lodgings, and insanitary dwellings. Great difficulty has been experienced in dealing with the cases as there is no available satisfactory accommodation at a rental within the capacity of these unfortunate folk. Particulars are given in the Sanitary Inspector's Report appended.

Schools.—The sanitary condition and water supply of schools are discussed in the appropriate report included herewith.

Drainage, Sewerage and Closet Accommodation.—The town is sewered on the partially combined system, and storm overflows are provided discharging at convenient points, chiefly in the neighbourhood of the River Skerne. The sewage is conveyed to the Sewage Farm situated on the west bank of the Skerne about a mile to the south of the town. Treatment of the sewage is carried out by broad irrigation. An experimental activated sludge plant is shortly to be installed.

As there are still approximately 4,500 privy ashpits in use in the town, the question of additional means of sewage disposal has been considered, and an experimental plant is now installed on the activated sludge principle. It is estimated that the whole work will be completed in three years from now.

Scavenging.—The scavenging of the town has been very satisfactorily carried out. The refuse is disposed of principally by depositing on tips which are covered with soil or clean ashes. A small proportion of privy refuse is conveyed to farms for use on the land. The conversion of the privy ashpits will wipe away this problem to a great extent. In the work of conversions, special tipping bins are being installed so that collection of refuse will be more rapid and efficient.

Cemeteries.—Three large Cemeteries with recent extensions provide adequate room for disposal by earth burial for many years to come.

Crematorium.—Public opinion is now awaking to this sanitary method of disposal of our dead. The Darlington Crematorium situated in the West Cemetery was used during the year for the record number of 55 cremations. The Medical Officer of Health holds the appointment of Honorary Medical Referee for the authorizing of each cremation by the Darlington Cremation Society.

SECTION XIV.

LEGISLATION INTRODUCED DURING 1929.

Many new Orders and Regulations were issued by the Minister of Health during the year, affecting the Health Department, and it has proved quite a task keeping the practical work up to date with the legislation.

Food and Drugs (Adulteration) Act, 1928.

Agricultural Produce (Grading and Marking) Regulations made under Act of 1928.

Housing Acts (Revisions of Contributions) Order, 1928.
Vaccination Order 1929.

Local Government Act, 1929.

Merchandise Marks (Imported Goods) No. 4 Order, 1929.

Artificial Cream Act, 1929.

Adoptive Acts, etc.—The following Acts have been adopted in the Borough :—

Baths and Wash-houses Acts of 1846 and 1847.

Infectious Disease (Notification) Act, 1889.

Infectious Disease (Prevention) Act, 1890.

Public Health Acts Amendment Act, 1890.

Public Health Acts Amendment Act, 1907 (except Sections 48, 82, 83, 92 and 94).

Public Health Act, 1925, Sections 13-23 ; 25-30 ; 32 ; 33 ; 35-39 ; 41-55 ; all inclusive.

Darlington (Water Supply) Order 1928.

The most important local Act dealing with Public Health matters is the Darlington Extension and Improvement Act, 1872. This Act conferred on the Darlington Council powers with regard to closing property unfit for human habitation of the same character as those contained in the most recent Acts.

Section 92 of the Darlington Extension and Improvement Act, 1872, requires that all private slaughter-houses in the Borough should be licensed.

On May 30th, 1911, an Order was obtained from the Local Government Board, under Section 50 of the Public Health Acts Amendment Act, 1907, declaring the trades of fat melter or fat extractor, fish fryer, gut scraper, rag and bone dealer, and candle maker within the Borough to be offensive trades.

Under the City of Leeds, etc. (Measles and German Measles) Regulations, 1920, Measles and German Measles are notifiable in Darlington.

Chickenpox was made notifiable in the Borough on 23rd December, 1923.

Under the Borough of Darlington (Whooping Cough) Regulations, 1926, first cases of Whooping Cough occurring in children under five years of age, are notifiable in Darlington.

SECTION XV.

HOUSING.

From the Census Statistics it is estimated that 5.8 per cent. of our families are sharing a house compared with 10.0 per cent. for the neighbouring County Boroughs in Durham. In our poorest quarters several families are living under terrible conditions of overcrowding.

By reason of the economic conditions even the weekly rent of 7/6 now being charged for the new Corporation kitchen houses is a barrier to many hoping to improve their environment. The effect of all this is that the worst class of housing, chiefly in the Park Street area, is the most crowded. Potential movers are deterred by the steepness in the ladder of rents from transferring from one class of property to another. Our worst areas therefore are crowded with people who are in addition to the habitual slum dwellers, because of the stoppage of the normal movement from poor to better houses.

During the last twelve years a total of 3,189 houses have been built in the town.

This figure would compare very favourably with that of any other town of Darlington's size.

From the passing of the Housing Act, 1923 up to the 30th September, 1929, 2,019 subsidy certificates were issued. Of these 1,891 were paid, the houses having been finished by the 30th September. Since that date, of course, no subsidies have been paid, as payment under the 1923 Act ceased at that date.

The following figures show the progress made in house building since 1918 :—

	Private Enterprise.		By Corporation.		Total.
	Without Subsidy.	With Subsidy.			
1918	2	—	—	—	2
1919	6	—	—	—	6
1920	17	—	—	—	17
1921	9	—	86	—	95
1922	187	—	152	—	339
1923	264	1	35	—	300
1924	103	208	18	—	329
1925	96	399	15	—	510
1926	81	256	56	—	387
1927	56	334	—	—	390
1928	58	274	—	—	332
1929	63	419	—	—	482
Total	942	1891	356	—	3189
Huts	—	—	10	—	10
Council Houses outside Borough	—	—	35	—	35

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It will be noted that since 1921 the Corporation have built 391 houses, and also let ten huts, which are situated off Haughton Road.

Housing Statistics for the year 1929.

Number of new houses erected during the year :—

(a) Total (including numbers given separately under (b) and (c)	483
(b) With State assistance under the Housing Acts—	
(i) By the Local Authority	0
(ii) By other bodies or persons	419
(c) By private enterprise	63

1.—Unfit Dwelling-houses—

Inspection—

(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	959
(2) Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910, or the Housing Consolidation Regulations, 1925	231
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	190
(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	223

2.—Remedy of defects without service of Formal Notices : Number of defective dwelling-houses rendered fit in consequence of informal action taken by the Local Authority or their officers	521
--	-----

3.—Action under Statutory Powers :—

(a) Proceedings under Section 3 of the Housing Act, 1925	
(1) Number of dwelling-houses in respect of which notices were served requiring repairs	10
(2) Number of dwelling-houses which were rendered fit after service of formal notices :—	
(a) By Owners	6
(b) By Local Authority in default of owners	0
(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close	0

(b) Proceedings under Public Health Acts—

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	255
(2) Number of dwelling-houses in which defects were remedied after service of formal notices :—	
(a) By Owners	142
(b) By Local Authority in default of owners	0

(c) Proceedings under Sections 11, 14 and 15 of the Housing Acts, 1925 :—

(1) Number of representations made with a view to the making of Closing Orders	1
(2) Number of dwelling-houses in respect of which Closing Orders were made	1
(3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit	1
(4) Number of dwelling-houses in respect of which Demolition Orders were made	0
(5) Number of dwelling-houses demolished in pursuance of Demolition Orders	0

SECTION XVI.—STATISTICAL TABLES.

BIRTH-RATE, DEATH-RATE and ANALYSIS of MORTALITY during the Year 1929.

Registrar-General's Provisional figures for 52 weeks ending 28th December, 1929.

	RATE per 1000		ANNUAL DEATH-RATE PER 1,000 POPULATION.										RATE PER 1,000 LIVE BIRTHS		PERCENTAGE OF TOTAL DEATHS			
	Total Popu-lation	Still Births	All Causes	Enteric Fever	Smallpox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Violence	Diarrhoea and Enteritis (under 2 years)	Total Deaths under One Year	Certified by Registered Medical Practitioner	Inquest Cases	Certified by Coroner after P. M.	No Inquest	Uncertified Causes of Death
England and Wales	16.3	0.68	13.4	0.01	0.00	0.08	0.02	0.15	0.08	0.74	0.55	8.1	74	91.5	6.1	1.5		0.9
107 County Boroughs & Great Towns including London	16.6	0.69	13.7	0.01	0.00	0.12	0.02	0.19	0.09	0.76	0.50	10.9	79	91.8	5.8	1.9		0.5
157 Smaller Towns (1921 Adjusted Populations 20,000—50,000) ..	16.0	0.71	12.3	0.01	0.00	0.06	0.02	0.15	0.07	0.71	0.45	5.9	69	92.6	5.4	1.0		1.0
London	15.7	0.53	13.8	0.01	0.00	0.04	0.02	0.26	0.08	0.69	0.56	10.7	70	89.5	6.8	3.7		0.0
Durham County	20.2	0.87	12.9	0.01	0.00	0.23	0.01	0.18	0.08	0.52	0.49*	11.7	94	96.6			3.4	
DARLINGTON	15.8	0.89	12.6	0.01	0.00	0.06	0.00	0.15	0.1	0.41	0.4	5.8	79	92.8	3.7	—		3.5

* Excluding Suicide.

REGISTRAR GENERAL'S COMPARATIVE MORTALITY FIGURES N.E. TOWNS, 1929.

TOWNS.	Estimated Population mid. 1928.	Live Births	Stillbirths	Deaths (excluding Stillbirths).	Deaths of Infants under 1 yr of age	Deaths from								Rate per 1,000 Living.		Death-rate per 1,000 Living.						Death-rate per 1,000 Live Births	
						Enteric Fever	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Diarrhoea & Enteritis under 2 yrs.	TOTAL.	Live Births	Deaths (Civilians)	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza.	TOTAL.	Diarrhoea & Enteritis under 2 yrs.	Infants under 1 year.
Middlesbrough C.B.	... 132,000	3,115	134	2,209	306	—	42	3	24	3	154	63	289	23.6	16.7	0.32	0.02	0.18	0.02	1.17	1.71	20.2	98
Stockton-on-Tees ...	... 67,200	1,376	62	992	140	—	10	1	38	4	64	16	133	20.5	14.8	0.15	0.01	0.57	0.06	0.95	1.74	11.6	102
West Hartlepool C.B.	... 69,800	1,455	52	1,078	166	8	26	1	40	13	33	16	137	20.6	15.4	0.37	0.01	0.57	0.19	0.47	1.61	11.0	114
Sunderland C.B. ...	... 184,700	4,111	165	3,054	444	3	152	1	45	10	178	94	483	22.3	16.5	0.82	0.01	0.24	0.05	0.96	2.08	22.9	108
South Shields C.B.	... 121,800	2,355	110	1,775	286	—	23	1	26	3	90	35	178	19.3	14.6	0.19	0.01	0.21	0.02	0.74	1.17	14.9	127
Gateshead C.B. ...	... 123,100	2,505	108	1,766	265	1	38	—	9	7	61	44	160	20.3	14.3	0.31	—	0.07	0.06	0.50	0.94	17.6	106
Newcastle-upon-Tyne C.B.	281,500	5,126	241	3,750	425	4	71	4	25	12	126	47	289	18.2	13.3	0.25	0.01	0.09	0.04	0.45	0.84	9.2	83
Tynemouth C.B. ...	... 66,030	1,241	44	829	110	1	19	2	2	12	37	11	84	18.8	12.6	0.29	0.03	0.03	0.18	0.56	1.09	8.9	89
Carlisle C.B. ...	... 56,170	1,011	53	780	82	—	13	1	24	10	47	6	101	17.9	13.9	0.23	0.02	0.43	0.18	0.84	1.70	5.9	81
DARLINGTON C.B. ...	... 71,560	1,205	64	902	95	1	4	—	11	7	29	7	59	16.8	12.6	0.06	—	0.15	0.10	0.41	0.72	5.8	79

Darlington, 1929. Lowest Birth-Rate, 16.8 per 1,000 population.

Equal Lowest Death-rate, 12.6 per 1,000 population.

Lowest Death-rate from Infectious Diseases, .72 per 1,000 population.

Lowest Death-rate from Measles, .06 per 1,000 no Deaths from Scarlet Fever; lowest (0.41) from Influenza.

Lowest Death-rate from Diarrhoea & Enteritis under 2 years, 5.8 per 1,000 births.

Lowest Infantile mortality, 79 per 1,000 births.

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE IN DARLINGTON,
1929. (Figures supplied by the Registrar General).

CAUSES OF DEATH		Sex	All Ages	0—	1—	2—	5—	15—	25—	45—	65—	75—	Deaths of Residents and Non-Residents in Darlington Institutions	Deaths of Residents in other Institutions
All causes	...	M. ... F. ...	493 450	51 47	13 13	10 10	21 14	25 22	60 50	141 112	94 85	78 97		
Uncertified	...	M. ... F. ...	16 17	2 3	...	...	1 ...	...	4 4	4 5	2 2	3 3		
1. Enteric Fever	...	M. ... F. ...	1	...	...	...	...	...	1	...	...	...	1	...
2. Small-pox	...	M. ... F. ...	...	...	...	...	...	...	...	...	...	...	...	...
3. Measles	...	M. ... F. ...	2 2	...	1 2	...	1 ...	...	...	...	...	...	1 1	...
4. Scarlet Fever	...	M. ... F. ...	...	...	...	...	...	...	...	...	...	...	...	...
5. Whooping Cough	...	M. ... F. ...	6 5	2 1	4 2	...	...	...	...	...	...	...	...	...
6. Diphtheria	...	M. ... F. ...	4 4	...	...	2 1	3 2	...	...	1	...	...	1 5	...
7. Influenza	...	M. ... F. ...	17 12	1 1	1 ...	1 ...	...	1	5 2	5 4	1 2	3 2	1 2	...
8. Encephalitis Lethargica	...	M. ... F. ...	2	...	...	...	1	...	...	...	...	...	...	...
9. Meningococcal Meningitis	...	M. ... F. ...	...	...	...	...	...	...	...	...	...	...	...	...
10. Tuberculosis of Respiratory System	...	M. ... F. ...	44 21	...	...	...	2 ...	14 9	9 7	14 5	5 ...	...	10 2	...
11. Other Tuberculous Diseases	...	M. ... F. ...	7 7	2 ...	1 ...	...	3 1	...	...	...	...	...	3 1	...
12. Cancer, Malignant Disease	...	M. ... F. ...	37 46	...	...	...	...	...	2 4	20 24	11 12	4 6	25 12	...
13. Rheumatic Fever	...	M. ... F. ...	6	...	...	1	2	...	1	2	...	...	1	...
14. Diabetes	...	M. ... F. ...	3	...	...	...	...	...	...	...	...	...	...	...
15. Cerebral Haemorrhage, etc.	...	M. ... F. ...	11 17	...	...	...	...	...	2 2	4 9	3 3	2 3	3 2	...
			18	...	...	...	...	...	1	9	4	4	1	...

CAUSES OF DEATH		Sex	All Ages	0—	1—	2—	5—	15—	25—	45—	65—	75—	Deaths of Residents & Non-Residents in Darlington Institutions	Deaths of Residents in other Institutions
17.	Arterio-sclerosis ...	M.	37	...	...	...	...	...	...	6	15	16	2	2
18.	Bronchitis ...	F.	12	...	...	...	...	1	...	3	4	4	3	1
19.	Pneumonia (all forms) ...	M.	18	5	1	...	1	1	...	4	1	5	5	...
20.	Other Respiratory Diseases ...	F.	22	3	1	...	...	...	...	2	8	8	3	...
21.	Ulcer of Stomach or Duodenum	M.	70	11	6	5	...	3	15	22	4	4	13	4
22.	Diarrhea, etc. ...	F.	48	9	3	4	2	...	5	8	9	8	11	1
23.	Appendicitis and Typhilitis	M.	4	...	...	...	1	...	1	1	1	...	1	2
24.	Cirrhosis of Liver ...	F.	3	...	...	...	...	...	2	1	...	...	1	1
25.	Acute and Chronic Nephritis	M.	4	...	...	...	...	...	...	3	1	...	5	1
26.	Puerperal Sepsis ...	F.	...	2	...	...	...	...	...	...	...	...	1	...
27.	Other Accidents and Diseases of Pregnancy and Parturition	M.	6	4	...	...	...	...	...	1	...	1	...	...
28.	Congenital Debility and Malformation, Premature Birth ...	F.	...	...	...	...	...	1	...	...	...	...	...	...
29.	Suicide ...	M.	2	...	...	...	...	...	...	...	...	...	...	...
30.	Other Deaths from Violence	F.	4	...	...	...	...	...	4	...	...	...	1	...
31.	Other defined diseases ...	M.	19	1	...	...	2	4	6	1	...	1	...	4
32.	Causes ill-defined or unknown...	F.	7	2	...	1	1	1	...	...	...	...	7	...
		M.	79	8	...	1	4	2	...	19	14	26	33	3
		F.	87	9	1	2	5	4	7	13	15	31	30	4
		M.	6	...	...	...	...	...	4	2	...	...	...	...
		F.	3	...	...	...	...	...	1	1	...	...	...	...

INFANT MORTALITY.

1929. NET DEATHS FROM STATED CAUSES AT VARIOUS AGES UNDER ONE YEAR OF AGE.

CAUSES OF DEATH				Under 1 Week	1-2 Weeks	2-3 Weeks	3-4 Weeks	Total under 4 weeks	4 Weeks—3 Months	3-6 Months	6-9 Months	9-12 Months	Total Deaths under 1 Year
All causes	Certified	...	...	27	8	2	5	42	10	14	12	15	93
	Uncertified	...	...	2	...	...	...	2	2	...	1	...	5
Smallpox				...	...	...	...	...	...	...	...	...	...
Chickenpox				...	...	...	...	...	...	...	...	...	...
Measles				...	...	...	...	...	...	...	...	...	...
Scarlet Fever				...	...	...	...	...	...	...	...	...	...
Whooping Cough				...	...	...	...	...	...	1	2	...	3
Diphtheria and Croup				...	...	...	...	...	...	...	...	...	...
Erysipelas				...	...	...	...	...	...	...	...	...	...
Influenza				...	...	...	...	...	...	...	...	1	1
Tuberculous Meningitis				...	...	...	...	...	...	...	1	...	1
Abdominal Tuberculosis				...	...	...	...	...	...	...	...	1	1
Other Tuberculous Diseases				...	...	...	...	...	...	...	...	...	...
Meningitis (<i>not Tuberculous</i>)				...	...	...	...	...	1	...	...	...	1
Convulsions				...	2	...	...	2	2	...	1	2	7
Laryngitis				...	...	...	...	...	...	...	...	...	...
Bronchitis				...	1	...	...	1	2	2	1	2	8
Pneumonia (all forms)				...	...	...	...	...	1	3	5	8	17
Diarrhoea				...	...	...	1	1	...	1	...	...	2
Enteritis				...	...	...	...	...	...	2	...	...	2
Gastritis				...	...	...	...	...	1	1	...	...	2
Gastro-enteritis				...	...	...	...	...	...	1	3	...	4
Syphilis				...	1	...	...	1	...	1	...	...	2
Rickets				...	...	...	...	...	...	...	...	...	...
Suffocation, overlying				...	...	1	...	1	...	...	...	...	1
Injury at birth				4	1	...	...	5	...	...	...	...	5
Atelectasis				2	1	...	...	3	...	...	...	...	3
Congenital Malformations				3	1	1	...	5	1	...	...	...	6
Premature Birth				15	...	...	3	18	...	...	...	...	18
Atrophy, Debility and Marasmus				4	...	...	1	5	4	2	...	...	11
Other causes				1	1	...	...	2	...	...	...	1	3
Totals				29	8	2	5	44	12	14	13	15	98

Net Births in the year—Legitimate, 1,144 ; illegitimate, 61.

Net Deaths in the year—Legitimate infants, 91 ; males, 47 ; females, 44.

Illegitimate infants, 7 ; males, 4 ; females, 3.

CANCER DEATHS—PARTS OF BODY AFFECTED.

PARTS AFFECTED	Under 35		35-45		45-55		55-65		65-75		75 & over		Total	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Peritoneum, Intes- tines and Rectum	...	...	...	1	3	...	3	2	3	3	1	1	10	7
Stomach and Liver	...	1	1	1	4	2	5	5	3	4	1	3	14	16
Reproductive Organs	...	...	...	...	...	2	...	4	...	2	...	1	...	9
Breast	...	...	...	1	...	4	...	2	...	...	...	...	...	7
Other Glands	...	...	...	...	...	...	2	...	...	...	1	...	3	...
Mouth and Throat	...	...	...	...	...	...	2	...	1	1	...	...	3	1
Bones	...	...	...	1	...	...	...	1	...	...	...	...	1	1
Other Parts	...	...	...	...	...	1	...	2	4	2	1	1	5	6
Totals	...	1	2	3	7	9	12	16	11	12	4	6	36	47

INFECTIOUS DISEASES IN WARDS.—1929.

Disease	Harrowgate Hill	North Road	Eastbourne	Cockerton	Pierremont	Central	West	South	Total
Smallpox	—	—	—	—	—	—	—	—	—
Scarlet Fever	23	15	28	41	10	18	8	15	158
Diphtheria	36	31	16	16	7	10	14	8	138
Enteric Fever	—	—	1	2	—	2	1	—	6
Pulmonary Tuberculosis	13	15	14	15	10	12	10	13	102
Other forms of Tuberculosis	10	6	6	8	2	9	8	5	54
Puerperal Fever	—	—	1	—	—	—	—	—	1
Puerperal Pyrexia	1	—	3	3	—	3	3	2	15
Erysipelas	2	3	6	4	4	2	3	3	27
Ophthalmia Neonatorum	6	1	2	—	—	2	—	1	12
Acute Anterior Poliomyelitis	—	—	—	—	—	—	—	—	—
Acute Encephalitis Lethargica	—	—	—	—	—	1	—	—	1
Acute Pneumonia	34	29	33	16	14	27	22	20	195
Malaria	—	—	—	—	—	—	—	—	—
Chicken-pox	61	16	20	52	21	47	44	18	279
Measles and German Measles	237	187	177	134	82	94	91	107	1109
Whooping Cough	21	23	30	19	8	16	11	18	146
Total	444	326	337	310	158	243	215	210	2243

NOTIFIABLE DISEASES DURING 1929.

DISEASE.	Under 1	1—	2—	3—	4—	5—	10—	15—	20—	35—	45—	65—	Total Cases Notified	Total Deaths	Cases Admitted to Isolation Hospital	Deaths in Isolation Hospital
Small-pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Scarlet Fever	...	3	4	14	14	63	30	8	15	4	3	...	158	...	153	...
Diphtheria	...	1	6 (1)	7 (1)	11	62 (4)	28 (1)	11	8	2	1 (1)	...	138	8	134	7
Enteric Fever	...	...	...	...	...	1 (1)	2	1	1	1 (1)	...	...	6	2*	6	2*
Puerperal Fever	...	...	...	...	...	...	...	...	...	1 (1)	...	...	1	1	...	...
Puerperal Pyrexia	...	...	...	...	...	...	...	1	12 (2)	2	...	...	15	2	4	...
Pneumonia	...	16 (17)	7 (7)	11 (7)	13	8	28 (3)	7	13	25 (13)	28 (27)	14 (25)	195	109	24	7
Ophthalmia Neonatorum	12	...	...	...	...	...	...	...	...	...	...	...	12	...	...	...
Erysipelas	...	1	1	...	...	1 (1)	1	...	6	3	10	4	27	1	5	1
Encephalitis Lethargica	...	...	...	...	...	...	...	...	...	1 (1)	...	...	1	2†	1	1
Measles and German Measles	...	20	49 (3)	41	85	89	623 (1)	90	48	8	3	...	1109	4	2	1
Malaria	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Chicken-pox	...	11	14	16	20	26	161	25	3	...	...	...	279	...	...	...
Acute Anterior Poliomy- elitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough	...	17 (3)	30 (6)	37 (2)	24	38	...	...	...	...	...	...	146	11	...	...

Numbers in brackets signify deaths. * 1 Death certified as Tubercular Meningitis. † 1 Death of patient notified during 1928.

INFECTIOUS DISEASES.

The following table shows the number of cases of **Infectious Disease** notified each month during 1929

	Smallpox	Scarlet Fever	Diphtheria and Membranous Croup	Enteric Fever	Pulmonary Tuberculosis	Other forms of Tuberculosis	Puerperal Fever	Puerperal Pyrexia	Erysipelas	Ophthalmia Neonatorum	Measles and German Measles	Acute Anterior Poliomyelitis	Acute Encephalitis Lethargica	Acute Pneumonia	Malaria	Chicken-pox	Whooping Cough	Totals
January	...	18	13	...	7	2	...	...	2	1	20	...	1	19	...	27	4	114
February	...	10	14	...	9	7	...	3	4	1	54	...	...	22	...	18	20	162
March	...	18	7	...	15	3	1	3	1	1	215	...	...	44	...	6	26	340
April	...	4	6	...	10	9	...	1	2	1	251	...	...	12	...	13	38	347
May	...	3	12	2	6	13	...	1	2	1	136	...	...	15	...	19	28	238
June	...	6	7	...	12	3	...	1	2	...	149	...	...	17	...	23	8	228
July	...	24	9	...	5	3	...	...	1	2	156	...	...	14	...	40	10	264
August	...	10	4	...	7	1	...	2	1	...	78	...	...	6	...	19	6	134
September	...	20	16	1	6	2	...	1	6	...	30	...	...	8	...	24	3	119
October	...	17	11	3	10	3	...	2	3	2	12	...	...	13	...	26	3	104
November	...	16	10	...	7	5	...	...	1	1	4	...	...	14	...	24	...	82
December	...	12	29	...	8	3	...	1	2	1	4	...	...	11	...	40	...	111
Totals for 1929	...	158	138	6	102	54	1	15	27	12	1109	...	1	195	...	279	146	2243
Totals for 1928	85	326	157	4	101	63	4	6	26	15	161	...	1	140	...	651	38	1778

TUBERCULOSIS SCHEME.

OF THE DARLINGTON COUNTY BOROUGH COUNCIL.

Return showing the work of the Dispensary during the year 1929.

DIAGNOSIS.	Pulmonary.				Non-Pulmonary.				TOTAL.		
	Adults.		Child- dren.		Adults.		Children.		Adults.		Ch
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.
A.—New Cases examined during the year (excluding contacts)											
(a) Definitely tuberculous	21	20	2	3	6	9	19	4	27	29	22
(b) Doubtfully tuberculous	—	—	—	—	—	—	—	—	4	2	1
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	13	12	20
B.—Contacts examined during the year:—											
(a) Definitely tuberculous	2	2	—	—	—	—	—	—	2	2	—
(b) Doubtfully tuberculous	—	—	—	—	—	—	—	—	—	3	—
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	11	22	11
C.—Cases written off the Dispensary Register as											
(a) Cured	2	—	—	—	2	1	1	—	4	1	—
(b) Diagnosis not confirmed or non-tuberculous (including cancellation of cases notified in error)	—	—	—	—	—	—	—	—	35	39	4
D.—Number of Persons on Dispensary Register on December 31st:—											
(a) Diagnosis completed ...	83	76	34	21	36	37	48	42	119	113	8
(b) Diagnosis not completed	—	—	—	—	—	—	—	—	—	—	—

1. Number of persons on Dispensary Register on January 1st ...	411	9. Number of patients to whom Dental Treatment was given, at or in connection with the Dispensary	
2. Number of patients transferred from other areas and of "lost sight of" cases returned ...	27	10. Number of consultations with medical practitioners:—	
3. Number of patients transferred to other areas and cases "lost sight of" ...	91	(a) At Homes of Applicants ...	
4. Died during the year ...	44	(b) Otherwise ...	
5. Number of observation cases under A (b) and B (b) above in which period of observation exceeded 2 months ...	1	11. Number of other visits by Tuberculosis Officers to Homes ...	
6. Number of attendances at the Dispensary (including Contacts) ...	2325	12. Number of visits by Nurses or Health Visitors to Homes for Dispensary purposes ...	
7. Number of attendances of non-pulmonary cases at Orthopaedic Out-stations for treatment or supervision ...	—	13. Number of	
8. Number of attendances, at General Hospitals or other Institutions approved for the purpose, of patients for		(a) Specimens of sputum, &c., examined, ...	
(a) "Light" treatment ...	313	(b) X-ray examinations made, ...	
(b) Other special forms of treatment	—	in connection with Dispensary work	
		14. Number of Insured Persons on Dispensary Register on the 31st December ...	
		15. Number of Insured Persons under Domiciliary Treatment on the 31st December ...	
		16. Number of reports received during the year in respect of Insured Persons:—	
		(a) Form G.P. 17 ...	
		(b) Form G.P. 36 ...	

Number of New Cases included under Head A of whose names were removed from Dispensary Register in a previous year as "Cured"Nil.

RESIDENTIAL INSTITUTIONS.

(A) AVERAGE NUMBER OF BEDS AVAILABLE FOR PATIENTS
DURING THE YEAR 1929.

—	Observation	Pulmonary Tuberculosis		Non-Pulmonary Tuberculosis		Total.
		"Sanatorium" Beds.	"Hospital" Beds.	Disease of Bones and Joints.	Other Conditions	
Adult Males ...	—	7	1	2	—	10
Adult Females ...	—	6	2	5	—	13
Children under 15	—	9	—	3	2	14
Total ...	—	22	3	10	2	37

(B) RETURN SHOWING THE EXTENT OF RESIDENTIAL
TREATMENT DURING THE YEAR 1929.

			In Institutions on Jan. 1	Admitted during the year	Discharged during the year	Died in the Institutions	In Institutions On Dec. 31
Number of Patients ...	Adults	M.	10	26	24	2	10
		F.	8	18	18	2	6
	Children	M.	9	6	7	1	7
		F.	5	8	4	—	9
Number of Observations ...	Adults	M.	—	1	1	—	—
		F.	—	1	1	—	—
	Children	M.	1	—	1	—	—
		F.	—	1	1	—	—
Total ...	...	...	33	61	57	5	32

Return showing the immediate results of treatment of patients and of observation of doubtful cases discharged from Residential Institutions during the year 1929

Classification on admission to the Institution.	Condition at time of discharge.	Duration of Residential Treatment in the Institution.											
		Under 3 months.			3—6 months.			6—12 months.			More than 12 months.		
		M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.
PULMONARY TUBERCULOSIS.	Class T.B. minus.	Quiescent	...	...	—	—	—	1	1	—	—	—	—
		Improved	...	...	—	—	1	—	—	—	—	—	2
		No material improvement			—	—	—	—	—	—	—	—	—
		Died in Institution	...	...	—	—	—	—	—	—	—	—	—
	Class T.B. plus. Group 1.	Quiescent	...	...	—	—	—	—	1	—	—	—	—
		Improved	...	...	—	—	—	1	1	—	—	1	1
		No material improvement			1	—	—	—	—	—	1	—	—
		Died in Institution	...	...	—	—	—	—	—	—	1	—	—
	Class T.B. plus. Group 2.	Quiescent	...	...	—	—	—	—	—	—	—	—	—
		Improved	...	...	2	—	—	2	4	—	—	1	—
		No material improvement			3	3	—	3	—	—	1	1	—
		Died in Institution	...	...	—	1	—	—	—	—	—	—	—
	Class T.B. plus. Group 3.	Quiescent	...	...	—	—	—	—	—	—	—	—	—
		Improved	...	...	—	—	—	1	—	—	—	—	—
		No material improvement			1	—	—	—	—	—	1	—	—
		Died in Institution	...	...	1	—	—	—	1	—	—	—	—
NON-PULMONARY TUBERCULOSIS.	Bones & Joints.	Quiescent or Arrested	...	...	1	1	1	1	—	—	—	1	1
		Improved	...	...	—	1	—	—	—	2	—	—	—
		No material improvement			—	—	—	1	—	—	—	—	—
		Died in Institution	...	...	—	—	—	—	1	—	—	—	—
	Abdominal.	Quiescent or Arrested	...	...	—	—	—	—	—	—	—	—	—
		Improved	...	...	—	—	—	—	—	—	—	—	—
		No material improvement			—	—	—	—	—	—	—	—	—
		Died in Institution	...	...	—	—	—	—	—	—	—	—	—
	Other Organs.	Quiescent or Arrested	...	...	—	—	—	—	—	—	—	—	—
		Improved	...	...	—	—	—	1	—	—	—	—	—
		No material improvement			—	—	1	—	—	—	—	—	—
		Died in Institution	...	...	—	—	—	—	—	—	—	—	—
	Peripheral Glands.	Quiescent or Arrested	...	...	—	—	1	—	—	1	—	—	—
		Improved	...	...	—	—	1	—	—	—	—	—	—
		No material improvement			—	—	—	—	—	—	—	—	—
		Died in Institution	...	...	—	—	—	—	—	—	—	—	—

Two Observation Cases proved Tuberculous and two Non-tuberculous.

Annual Returns showing in summary form the condition of all Patients whose case records are in the possession of the Dispensary at the end of 1929, arranged according to the years in which the patients first came under Public Medical Treatment for Pulmonary Tuberculosis or Non-Pulmonary Tuberculosis, and their classification as shown on Form A.

(a) **PULMONARY TUBERCULOSIS.**

Condition at the time of the last record made during the year to which the Return relates

Previous to 1926

1926

1927

1928

1929

Class (T.B. minus)

Class T.B. plus

Class T.B. minus

Class T.B. plus

Class T.B. minus

Class T.B. plus

Class T.B. minus

Class T.B. plus

Class T.B. minus

Class T.B. plus

Group 1

Group 2

Group 3

Total (Class T.B. plus)

Group 1

Group 2

Group 3

Total (Class T.B. plus)

Group 1

Group 2

Group 3

Total (Class T.B. plus)

Group 1

Group 2

Group 3

Total (Class T.B. plus)

Group 1

Group 2

Group 3

Total (Class T.B. plus)

Discharged as cured

Adults

Children

M.

F.

M.

F.

Disease arrested

Adults

Children

M.

F.

M.

F.

Disease not arrested

Adults

Children

M.

F.

M.

F.

Condition not ascertained during the year

Lost Sight of or otherwise removed from Dispensary Register

Dead

Adults

Children

M.

F.

M.

F.

TOTALS

...

...

136

7

7

2

16

18

5

6

—

11

26

3

10

1

14

23

3

17

3

23

13

4

30

7

41

(b) NON-PULMONARY TUBERCULOSIS.

Condition at the time of the last record made during the year to which the Return relates

Previous to 1926

1926

1927

1928

1929

Discharged as cured

Disease arrested

Disease not arrested

Transferred to Pulmonary

Condition not ascertained during the year

Lost Sight of or otherwise removed from Dispensary Register

Dead

TOTALS

...

...

31

3

16

41

91

8

3

4

9

24

10

2

1

16

29

9

3

1

11

24

15

4

2

18

39

(b) NON-PULMONARY

Date		Time		Temp		Pulse		Respiration		Blood Pressure		Sp. O ₂		Sputum		Chest Exam		Other	
10/1/50		10:00		98.6		72		16		120/80		95		None		Clear		None	
10/2/50		10:00		98.4		70		14		110/70		95		None		Clear		None	
10/3/50		10:00		98.2		68		12		100/60		95		None		Clear		None	
10/4/50		10:00		98.0		66		10		90/50		95		None		Clear		None	
10/5/50		10:00		97.8		64		8		80/40		95		None		Clear		None	
10/6/50		10:00		97.6		62		6		70/30		95		None		Clear		None	
10/7/50		10:00		97.4		60		4		60/20		95		None		Clear		None	
10/8/50		10:00		97.2		58		2		50/10		95		None		Clear		None	
10/9/50		10:00		97.0		56		1		40/0		95		None		Clear		None	
10/10/50		10:00		96.8		54		0		30/0		95		None		Clear		None	
10/11/50		10:00		96.6		52		0		20/0		95		None		Clear		None	
10/12/50		10:00		96.4		50		0		10/0		95		None		Clear		None	
10/13/50		10:00		96.2		48		0		0/0		95		None		Clear		None	
10/14/50		10:00		96.0		46		0		0/0		95		None		Clear		None	
10/15/50		10:00		95.8		44		0		0/0		95		None		Clear		None	
10/16/50		10:00		95.6		42		0		0/0		95		None		Clear		None	
10/17/50		10:00		95.4		40		0		0/0		95		None		Clear		None	
10/18/50		10:00		95.2		38		0		0/0		95		None		Clear		None	
10/19/50		10:00		95.0		36		0		0/0		95		None		Clear		None	
10/20/50		10:00		94.8		34		0		0/0		95		None		Clear		None	
10/21/50		10:00		94.6		32		0		0/0		95		None		Clear		None	
10/22/50		10:00		94.4		30		0		0/0		95		None		Clear		None	
10/23/50		10:00		94.2		28		0		0/0		95		None		Clear		None	
10/24/50		10:00		94.0		26		0		0/0		95		None		Clear		None	
10/25/50		10:00		93.8		24		0		0/0		95		None		Clear		None	
10/26/50		10:00		93.6		22		0		0/0		95		None		Clear		None	
10/27/50		10:00		93.4		20		0		0/0		95		None		Clear		None	
10/28/50		10:00		93.2		18		0		0/0		95		None		Clear		None	
10/29/50		10:00		93.0		16		0		0/0		95		None		Clear		None	
10/30/50		10:00		92.8		14		0		0/0		95		None		Clear		None	
10/31/50		10:00		92.6		12		0		0/0		95		None		Clear		None	
11/1/50		10:00		92.4		10		0		0/0		95		None		Clear		None	
11/2/50		10:00		92.2		8		0		0/0		95		None		Clear		None	
11/3/50		10:00		92.0		6		0		0/0		95		None		Clear		None	
11/4/50		10:00		91.8		4		0		0/0		95		None		Clear		None	
11/5/50		10:00		91.6		2		0		0/0		95		None		Clear		None	
11/6/50		10:00		91.4		0		0		0/0		95		None		Clear		None	
11/7/50		10:00		91.2		0		0		0/0		95		None		Clear		None	
11/8/50		10:00		91.0		0		0		0/0		95		None		Clear		None	
11/9/50		10:00		90.8		0		0		0/0		95		None		Clear		None	
11/10/50		10:00		90.6		0		0		0/0		95		None		Clear		None	
11/11/50		10:00		90.4		0		0		0/0		95		None		Clear		None	
11/12/50		10:00		90.2		0		0		0/0		95		None		Clear		None	
11/13/50		10:00		90.0		0		0		0/0		95		None		Clear		None	
11/14/50		10:00		89.8		0		0		0/0		95		None		Clear		None	
11/15/50		10:00		89.6		0		0		0/0		95		None		Clear		None	

Incidence of NOTIFIABLE DISEASES, DEATHS and ADMISSIONS TO ISOLATION HOSPITAL during the past eight years.

DISEASE	1922		1923		1924		1925		1926		1927		1928		1929	
	Notifica- tions	Deaths	Notifica- tions	Deaths	Admitted to Hospital	Notifica- tions	Deaths	Admitted to Hospital	Notifica- tions	Deaths	Admitted to Hospital	Notifica- tions	Deaths	Admitted to Hospital	Notifica- tions	Deaths
Smallpox ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Scarlet Fever ...	155	3	106	...	2	143	...	137	17	...	117	120	...	1	...	...
Diphtheria ...	60	2	47	3	3	40	3	37	123	...	32	186	...	1	316	158
Enteric (including Paratyphoid) ...	5	1	2	...	...	1	...	1	32	...	32	40	5	11	152	138
Puerperal Fever ...	6	1	3	1	...	3	6	...	18	1	17	25	1	1	3	6
†Puerperal Pyrexia ...	...	...	...	...	...	...	...	...	5	2	...	2	1	3	2	1
Pneumonia (all forms) ...	197	120	116	94	1	184	217	8	145	70	18	225	73	52	15	109
Malaria ...	1	...	...	...	...	...	...	...	1	...	...	1	...	...	...	...
Dysentery ...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Encephalitis Lethargica ...	...	...	2	2	...	8	7	5	...	5	...	7	1	...	...	2
Erysipelas ...	32	3	28	1	...	32	42	2	28	1	2	22	1	3	1	27
Measles and German Measles ...	377	4	1,526	51	...	367	1,202	2	60	...	...	2068	17	2	1	1109
*Chickenpox... ..	...	...	11	...	...	272	309	1	402	1	1	439	...	...	...	279
Ophthalmia Neonatorum ...	14	...	6	...	...	10	4	1	7	...	...	10	...	...	...	12
Cerebro-Spinal Fever ...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...
Acute Anterior Poliomyelitis ...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...
†Whooping Cough ...	...	...	...	...	...	1	...	...	...	...	...	3	...	1	...	...
	...	...	...	...	...	...	...	...	...	...	...	73	7	...	146	11

* Notifiable since 1923. † Notifiable since 1st October, 1926.
+ Cases of Whooping Cough in Children under 5 years of age became notifiable on 1st February, 1927.

SUMMARY OF METEOROLOGICAL OBSERVATIONS, 1929, TAKEN DAILY AT
THE SOUTH PARK, DARLINGTON.

Month	Barometer Reading (Inches)		Temperature Registered (Degrees Fahr.)		Total Rainfall (in inches)	Greatest Rainfall in any 24 hours. Depth (in inches)	Date of Greatest Fall	Number of days on which rain fell .01 inches or more
	Highest	Lowest	Highest	Lowest				
January ...	30.6	29.6	52	15	1.71	0.52	9	23
February ...	30.5	29.4	49	5	0.91	0.24	9	12
March ...	30.4	29.5	72	23	0.12	0.07	21	4
April ...	30.2	29.3	55	18	1.31	0.32	4 & 27	17
May ...	30.3	28.6	77	30	1.34	0.21	6	12
June ...	30.3	29.5	75	38	2.06	0.43	14	10
July ...	30.3	29.1	83	40	2.00	0.63	31	9
August ...	30.1	28.9	77	49	2.27	0.82	4	19
September ...	30.4	29.3	82	34	0.90	0.60	28	6
October ...	30.3	28.7	62	20	2.38	0.49	5	17
November ...	30.3	28.7	49	18	2.71	0.28	9	23
December ...	30.6	28.1	54	24	4.09	0.56	23	23
Totals ...	...	...	...	...	21.80	...	...	175
Averages...	...	...	...	...	1.82	...	...	14.6

REMARKS ON THE YEAR.

The average rainfall for the last 4 years is 29.23 inches.

Rain fell on 175 days in 1929 and 255 days in 1928.

The Rainfall for the first six months was 7.45 inches and the last six months 14.35 inches.

6th January, 1930.

T. J. MORRISON, Superintendent of Parks.

SANITARY INSPECTOR'S REPORT.

1929.

To Dr. G. A. Dawson, M.D., D.P.H.,
Medical Officer of Health,
County Borough of Darlington.

Dear Sir,

I herewith submit for your consideration my Annual Report for the year 1929. I commenced duties as Senior Sanitary Inspector on March 1st, 1929 and was appointed on April 4th following. You will see under the appropriate heading that I have concentrated upon the food supply—Meat and Milk, particularly the latter. I feel here that it is impossible to spend too much time, as it is imperative that consumers of all ages should be able to acquire clean milk. The daily consumption of Milk in the Borough is about 3,750 gallons. Of this, only 500 gallons are produced within the Borough. The Milk from Producers outside the Borough leaves much to be desired in many cases and I cannot help feeling that the provisions of the Milk and Dairies Order 1926 are being ignored by some Rural Authorities as well as by the Cow-keepers. Many Inspectors have from 200 to 500 cowsheds in their areas and it is impossible for one Inspector to inspect adequately and control the methods of milk production over so large an area, having regard to the fact that many of these Inspectors are Road Surveyors and Building Inspectors as well as being Sanitary Inspectors. Obviously the consumers have the right to ask for adequate inspection in the producing area. This also applies to the inspection of Meat. The same inadequacy exists all around us; this adversely affects us and considerably adds to the difficulties of Meat Inspection in the Borough. I wish to express my sincere appreciation to the Inspectors of the Croft and Darlington Rural District Councils for the assistance they have so willingly given me in connection with Milk coming to the Borough from their districts.

General Sanitary Work.—During the past year 2,459 Inspections and 6,168 Re-Inspections of houses were made under the Public Health Acts and the Housing and Town Planning Acts. 871 Informal Notices were served upon the owners of property in respect of 2,612 nuisances existing thereon, and in very many cases the nuisances were abated without further action being necessary. The remaining cases where the notices were not complied with, were included in the monthly reports submitted to you. Upon your instructions 255 Statutory Notices for the abatement of 1,225 nuisances were served during the year. The total number of nuisances abated in compliance with notices served during the year was 2,745.

On one occasion it was necessary to apply to the Magistrates under Section 102 of the Public Health Act 1875 for an order giving permission to enter and inspect certain premises where nuisances were known to exist, the occupier of the premises refusing permission to enter. The Order was granted, several inspections were made and nuisances abated after service of notices. The nuisances consisted of filthy conditions and animals improperly kept.

In one case it was necessary to take proceedings against an owner and occupier to compel the abatement of a nuisance caused by the keeping of fowls and a stopped drain. The Magistrates ordered the nuisance to be abated within 7 days and Defendant to pay costs.

The following is a summary of the various headings under which such notices were served :—

	Number of Nuisances dealt with by Informal Notices	Number of Nuisances dealt with by Formal Notices by Order of the Council	Number of Nuisances abated after Notice
Dwelling-houses and Schools—			
Foul Conditions	41	2	41
Structural Defects	1655	907	1776
Slaughter-houses	2	—	2
Lodging-houses	3	—	3
Bakehouses	7	—	7
Ashpits and Privies	157	48	169
Deposits of Refuse and Manure	17	—	17
Water Closets—			
Drains stopped up and Defective Fittings	179	75	198
Defective Yard Paving	75	34	69
House Drainage—			
Yard, Scullery, and Cellar Drains, and Down-pipes stopped up and Defective Drains and Traps	339	120	337
Water Supply to Houses & Defective Fittings	2	—	2
Water Supply to Water Closets	1	—	1
Animals and Poultry Improperly kept	4	1	5
Defective Sinks or Slopstones	21	8	29
No Slopstones	14	4	14
No Pantries	44	25	24
Stables—			
No Receptacle for Manure and Defective Paving & Drainage....	11	1	12
Living Vans, Contravention of Bye- laws	2	—	2
Cowsheds	13	—	12
Smoke Nuisances	3	—	3
Filthy Yards	18	—	18
Offensive Trades	4	—	4
Totals for 1929	2,612	1,225	2,745

Living Vans, Tents, and Sheds.—Notices were served in 22 cases in respect of contraventions of the Bye-Laws relating to the above, and were duly complied with.

At the commencement of the year there were 4 Colonies of these in the Borough. The Colonies in Archer Street and Valley Street North still exist. The owner of the sites has paved and drained the surface, laid on a water supply and provided water closets. We continue to receive complaints from residents in the vicinity, of noise and bad language at night time. This of course cannot be dealt with by us under the present state of the Law. A serious want is here felt as there is no doubt the presence of these people in any locality does depreciate the morals and respectability of any district wherein they may be.

The two Colonies at Lodge Street, and Rise Carr have now been cleared after much trouble and the threat of proceedings against the owners of the sites. The two existing sites are under constant supervision.

The Housing (Inspection of District) Regulations, 1910.—During the year 231 houses were inspected in accordance with the above Regulations. In 169 cases notices were served for the remedying of sanitary defects, and in 119 cases such notices were complied with.

Housing.—A survey of all the Back to Back and Tenement Dwellings has been made during the year. There are in the Borough of Darlington 647 back to back dwellings, housing 2,732 persons.

These have been classified as A. B. and C.

Those in A. are definitely back to back and possess a separate staircase to each dwelling. They mostly consist of one room on the ground floor and first floor respectively, very rarely a food store or scullery, whilst on the first floor there is no through ventilation. Common Yards and Water Closet Accommodation are an undesirable feature.

Class B. are also definitely back to back, they differ from Class A. in that a common staircase serves for front and rear tenements. This class can more easily be converted to a single house, Common Yards and Water Closet Accommodation, lack of sculleries and foodstores are the rule here also.

Class C. are semi-back to back, that is, each house has a separate front and back door, sometimes with a separate yard and water closet. On the first floor, however, no through ventilation is possible. Here conditions can be considerably improved by making all windows to open and where necessary air grates fixed in the walls.

Back to Back—Class A.

There are 316 separate houses in Class A.

Consisting of 431 separate tenements.

Comprised of 1,063 rooms.

Housing 491 separate families.

Consisting of 930 males, 932 females, Total 1,862.

Back to Back—Class B.

There are 108 separate houses in Class B.

Consisting of 156 separate tenements.

Comprised of 485 rooms.

Housing 226 separate families.

Consisting of 432 males, 438 females, Total 870.

Total for A. and B.

Houses 424, Tenements 587, Rooms 1,548, Families 717, Occupants 2,732.

Back to Back—Class C.

There are 223 houses in Class C.

Comprising 720 rooms.

Housing 237 families.

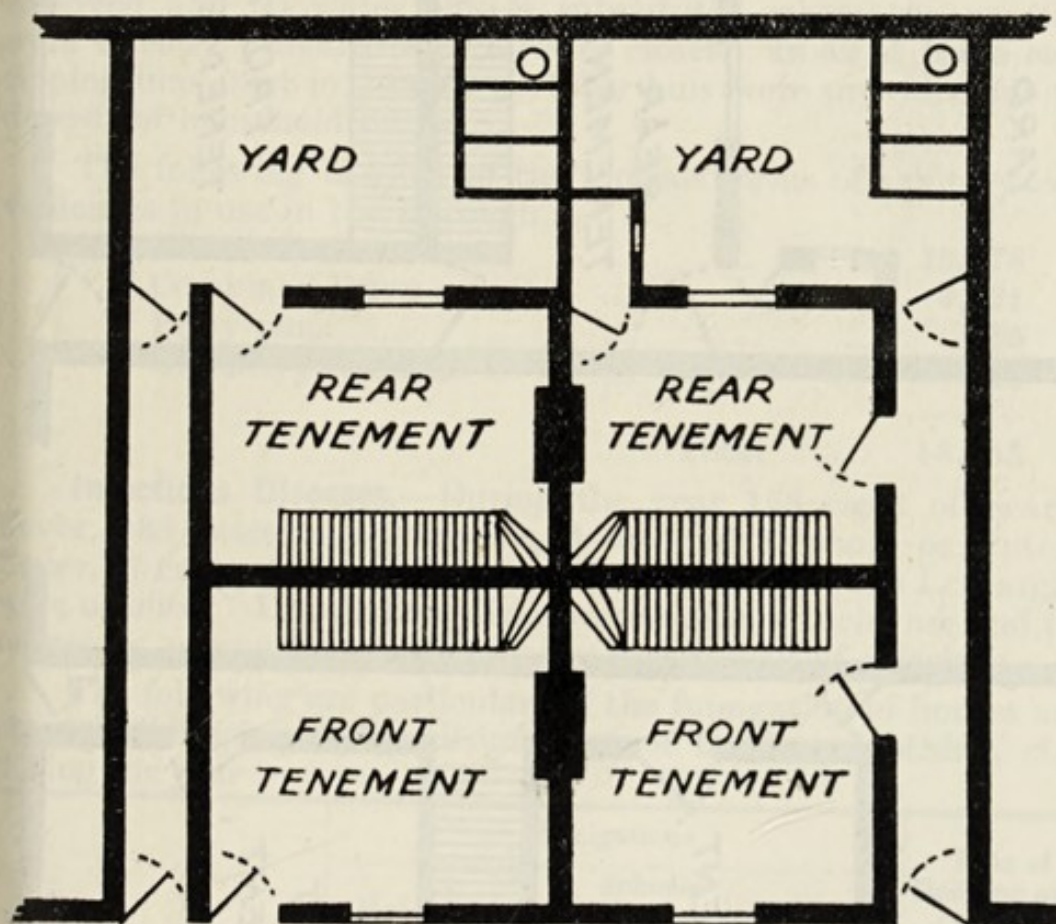
Consisting of 505 males and 513 females. Total 1,018 persons.

In this class, the first floor rooms are not "through ventilated" and all windows should be made to open, in exceptional cases airgrates should be fixed in the walls and foodstores and wash-houses should be provided where necessary.

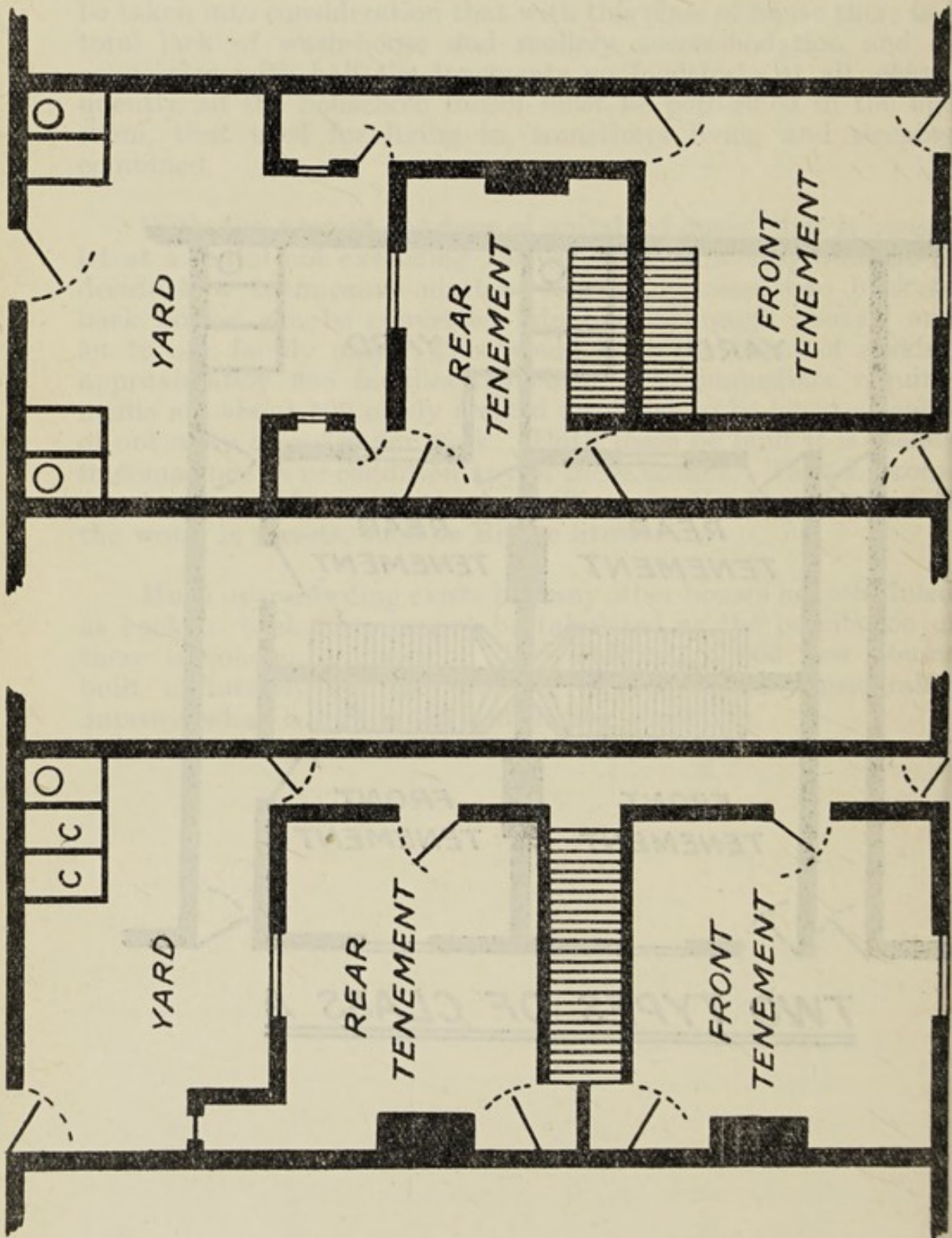
Although in Classes A. and B., the overcrowding does not appear to be bad, *i.e.*, 2,732 persons living in 1,548 rooms, it must be taken into consideration that with this class of house there is a total lack of wash-house and scullery accommodation and in connection with half the tenements no foodstores at all, consequently all the household duties must be performed in the one room, that used for living in, sometimes living and sleeping combined.

With the present shortage of suitable houses (that is houses let at a rental not exceeding 7/6 per week) it is very difficult to decide how to improve matters. In many cases two back to back houses can be converted into one "through house" and let to one family only. This would have the effect of making approximately 356 families homeless. The immediate requirements are about 500 newly erected dwellings to be let at a rental of not more than 7/6 per week. Until these be built it is useless to commence to re-condition any of these houses. Then I recommend commencing with those dwellings in Yards and some of the worst in streets, such as Bridge Street.

Much overcrowding exists in many other houses not scheduled as back to back, this cannot be tabulated as the population of these is constantly moving. The addition of 500 new houses built exclusively for the working classes would considerably improve what is now a very menacing condition.



TWO TYPES OF CLASS A



Increase of Rent and Mortgage Interest (Restrictions) Act, 1920.—During the year no applications were received for Certificates under Section 2 (2) of the above Act.

Sanitary Conveniences.—During the year there have been 1,478 water closets substituted for 1,478 privy-ashpits, and 20 water closets substituted for 20 privy pans. These substitutions were carried out under the conversion schemes.

Forty-nine privy-ashpits and one privy-midden have been removed and no water closets substituted where the premises were already provided with a water closet. In 42 of these cases tipping bins, and in 2 cases portable bins were provided for the deposit of household refuse.

The following is a list of the various forms of sanitary conveniences in use in the Borough :—

Water-closets	....	....	....	....	13,378
Combined Privy-ashpits	....	....	....	....	4,921
Privy-pans	....	....	....	....	145
Old Privy-middens	....	....	....	....	11
Total					18,455

Infectious Diseases.—During the year 158 cases of Scarlet Fever, 138 cases of Diphtheria, 6 cases of Typhoid or Enteric Fever, 27 cases of Erysipelas and 1 case of Encephalitis Lethargica were notified. Detailed enquiries were made in each case and the necessary precautions taken against the spread of infection.

The following are particulars of the fumigation of houses and other buildings, and the disinfection of bedding, clothing, etc., during the year :—

	Fumigations				Lots of Bedding and Clothing Disinfected
	Hos-pitals	Houses	Schools and other Buildings	Rooms	
Infectious Disease other than Tuberculosis, Cancer, etc.	3	304	—	307	301
Tuberculosis	—	40	7	50	25
Cancer	—	7	—	9	6
Measles, etc.	—	12	1	33	1
Totals	3	363	8	399	333

Factories, Workshops and Work-places.—The number of Workshops, including Bakehouses, on the Register at the 31st December, 1929, was 388, and the number of Factories, 175.

During the year 253 Inspections have been made and the following is a list of the defects found and dealt with :—

FACTORIES, WORKSHOPS AND WORKPLACES.

	Found	Re- medied
Want of cleanliness	20	20
Other nuisances	7	6
Sanitary Accommodation—		
Unsuitable or Defective	5	5
Want of cleanliness....	14	14
Not separate for sexes	1	1
Not provided with proper means of escape in case of fire	1	1
Total	48	47

Four notices of defects to be dealt with under Public Health Acts were received from the Factory Inspector, and in each case the premises were inspected, notices served where necessary, and the defects were remedied.

Outworkers.—5 lists containing the names of 6 Outworkers were received and 3 inspections of the premises of such Outworkers were made.

Food and Drugs.—During the year 206 samples were taken for Analysis as follows :—

New Milk	146
Provisions, etc.	53
Ice Cream	7
Total	206

Of the 146 samples of New Milk, 68 were from Purveyors of Milk carrying on business in the Borough and 78 from Purveyors of Milk carrying on business but not residing in the Borough—127 samples were morning samples and 19 were afternoon samples.

142 samples of New Milk, and 1 sample of Provisions were Formal Samples, the 52 samples of Provisions, &c., 7 samples of Ice Cream and 4 samples of Milk were Informal samples.

171 samples were of genuine quality and 35 were below standard.

Samples Nos. 15, 21, 28, 44, 46, 50, 99	No action taken.
„ „ 33, 34, 35, 52, 55, 180, 207	Appeal samples.
„ „ 18, 26, 51, 56, 64, 66, 68, 70, 86, 88, 177, 178	Further samples taken.
„ „ 47 and 54	Proceedings taken by County Inspector and Producer Fined 30/-.
Sample No. 97	Consistent with un- equal milking.
„ „ 188	Proceedings taken and Defendant to pay costs £1 15s. 6d. and to cease selling milk as “ Pud- ding Milk.”

Water.—Two samples of Well Water were taken during the year in case where such Well was the only course of water supply to the house and one was submitted for Chemical Analysis and the other for Bacteriological Examination. The Analyst reported that the water was unfit for human consumption and the owner has had the Town's supply laid on to the premises and the pump removed.

MILK (Special Designations) ORDER, 1923.

The Special Designations under which Milk may be sold in pursuance of this Order are :—“ Certified,” “ Grade A (Tuberculin Tested),” “ Grade A ” and “ Pasteurised.”

During the year 2 Licenses were granted for the Sale of Pasteurised Milk and they are the only 2 Licenses now in operation in the Borough under the above Order.

15 samples of Pasteurised Milk were taken for Bacteriological Examination, 13 of the samples were of genuine quality and 2 were not in compliance with the requirements of the above Order. In these 2 cases further samples were taken and found satisfactory.

MILK AND DAIRIES ORDER, 1926.

There were 21 Milk Producers and 156 Milk Retailers upon the Register at the 31st December, 1929, 7 Retailers having discontinued and 1 Producer and 12 Retailers were added to the Register.

There are 48 persons retailing milk in the Borough who reside outside the Borough Boundary, an increase of 2 as compared with the previous year.

There were 21 cowsheds on the register in the Borough. These were frequently inspected by the Sanitary Inspectors and have been conducted in a fairly satisfactory manner.

83 samples of Milk were tested for visible dirt, 36 from Producers within the Borough and 47 from Producers outside the Borough and who sell milk within the Borough.

Where the cleanliness of the milk was unsatisfactory, Letters of Warning were sent to the Producers, and Notification of this fact was sent to the Inspector of the District if the Producer did not reside within the Borough.

The Veterinary Inspector examined 18 herds consisting of 202 cows during the year, 17 herds were satisfactory while the remaining herd consisting of 9 cows was found to be very poor and old, but no clinical evidence of disease. The Inspector examined the herd 2 months afterwards and found the cows clean, healthy and very much improved.

Milk and Dairies (Consolidation) Act, 1915.—Eighteen samples of Milk were taken for Bacteriological Examination for the detection of Tubercle Bacilli during the year, one was found to be affected and this sample being from a Producer outside the Borough information was given to the Durham County Authority who caused a Veterinary Examination of the cows (from which the sample originated) to be made. A cow was found to be obviously affected with Tuberculosis of the udder and proceedings were taken by the Durham County Authority against the owner of the cow. A conviction was registered and the Defendant was fined £5.

During an inspection of the cowsheds in the Borough I suspected a cow to be suffering from Tuberculosis and accordingly reported to the Medical Officer of Health. A Veterinary Inspection was carried out and he agreed with my diagnosis. The cow was removed from the herd and slaughtered. It was found to be tuberculous and the carcass was destroyed.

Twelve samples of milk were procured from supplies consumed in the Borough and submitted for Bacterial Examination with the following results :—

Sample.	Total Number of Organisms per c.c.	Presence or Absence of Coliform Bacilli.	
		Positive in	Neg. in
1.	3,100	1/100th	1/1,000th
2.	3,000	1/10th	1/100th
3.	6,000	1/100th	1/1,000th
4.	72,100	1/10th	1/100th
5.	2,700	1/10th	1/100th
6.	1,360	1/10th	1/100th
7.	1,500	1/100th	1/1,000th
8.	12,300	1/10th	1/100th
9.	20,000	1/1,000th	1/10,000th
10.	6,000	1/100th	1/1,000
11.	39,000	1/1,000th	1/10,000th
12.	44,000	1/1,000th	1/10,000th

It will be noticed that samples Nos. 2, 4, 5, 6 and 8 are of exceptional cleanliness and that Samples Nos. 9, 11 and 12 are very badly contaminated with Coliform Bacilli. Letters were written to the producers in each case and to the Sanitary Authority of the district in which the milk was produced.

Artificial Cream Act, 1929.—The only persons in the Borough manufacturing or selling Artificial Cream are exempt from the provisions of Section 2 (1) of the above Act requiring registration.

Public Health (Preservatives in Food) Regulations 1927.—During the year 2 Informal samples of Sausage Casings, 6 Informal samples of Cream, and 7 Informal samples of Ice Cream were examined for Preservatives but in no case were any Preservatives found.

Inspection of Meat and other Foods.—The total number of beef and veal animals inspected at the time of slaughter or immediately afterwards was 6,469, which is about 90 per cent. of the total beef and veal animals slaughtered in the Borough.

There have been 150 cases of emergency slaughter, involving 61 cows, 8 bulls, 19 bullocks, 14 heifers, 8 calves, 14 sheep, 1 lamb and 19 pigs, notified for inspection, and as a result of these inspections the carcasses and all organs of 18 cows, 5 bullocks, 4 heifers, 4 calves, 10 sheep, 1 lamb and 3 pigs, and portions only of the carcasses of 16 cows, 5 bulls, 5 bullocks, 3 heifers, 1 sheep, 1 calf and 3 pigs were condemned and destroyed.

Of the above cases 60 animals were killed and dressed outside the Borough and 90 in Slaughter-houses in the Borough.

The total weight of food condemned and destroyed during the year was 17 tons, 11 cwts., 6 stone.

The whole of the food condemned was voluntarily surrendered by the owners and destroyed.

The following is a brief Summary of all Food condemned during the year :—

Details of Whole Carcasses Condemned and Destroyed.

		<i>Tons</i>	<i>Cwts.</i>	<i>St</i>	<i>Lbs.</i>
30 Cows	Generalized Tuberculosis	 7	14	0	0
1 Bullock	" "	 —	5	—	—
4 Heifers	" "	 1	—	—	—
1 Calf	" "	 —	1	2	—
5 Pigs	" "	 —	5	1	—
4 Cows	Tuberculosis with Emaciation	—	16	3	—
1 Heifer	" "	—	2	—	—
1 "	" " and Perforative Peritonitis	 —	5	2	—
1 Cow	Tuberculosis and Septic Metritis	 —	5	4	—
1 Calf	Tuberculosis and Osteo-myelitis	—	—	5	10
1 Cow	Moribund conditions....	 —	6	4	—
2 Calves	" "	 —	1	—	—
4 Sheep	" "	 —	2	1	—
1 Pig	" "	 —	2	2	—
3 Sheep	Natural Death	 —	1	4	2
1 Pig	" "	 —	1	—	—
1 Cow	Febrile Conditions	 —	5	—	—
1 Bullock	" "	 —	2	4	—
1 Sheep	" "	 —	—	5	—
2 Pigs	" "	 —	1	2	7
1 Bullock	Emaciation....	 —	1	6	—
2 Sheep	" "	 —	—	4	3
1 Cow	Septic Metritis and Peritonitis	—	4	4	—
1 Cow	Septic Pericarditis	 —	4	4	—
1 Bullock	Osteo-myelitis	 —	4	3	—
1 Heifer	" "	 —	1	7	—
1 Calf	Oedema	 —	—	4	8
1 Calf	Joint Ill	 —	—	3	7
1 Pig	Perforative Peritonitis	 —	—	4	7
1 Pig	Toxaemia	 —	—	5	—
1 Pig	Septic Pneumonia	 —	1	—	7
1 Sheep	Injuries	 —	—	4	—
1 Calf	Unsound	 —	1	2	—
1 Sheep	Haemorrhagic Disease	 —	—	4	—
3 Heifers	Quarter-ill	 —	9	4	—
1 Bullock	" "	 —	2	2	—
1 Calf	Immaturity	 —	—	5	7
36		13	14	4	2

Summary.

			<i>Tons</i>	<i>Cwts</i>	<i>St</i>	<i>Lbs.</i>
86	Carcasses and All Organs	....	....	13	14	4 2
8	Portions of Carcasses	....	....	—	3	4 10
138	Sets of Lungs	....	....	—	17	5 13
102	Livers	....	....	—	12	2 8
34	Heads, Tongues and Hearts	....	....	—	6	1 13
	Kidneys and Skirts	....	....	—	—	3 6
	Udders	....	....	—	2	2 —
	Mesenteries and Plucks	....	....	—	3	2 11½
	Tinned Foods, &c.	....	....	—	1	1 4
	Stomachs and Intestines	....	....	—	2	2 —
	Briskets	....	....	—	2	1 3
	Fruit and Vegetables	....	....	—	18	1 7
	Fish	....	....	—	7	4 6½
				17	11	6 —

Slaughter-Houses.—The number of licensed private slaughter-houses in use at 31st Dec., 1929, was 39. The whole of the slaughter-houses are held on License, 14 being for 12 months, 10 for 6 months, and 15 for 3 months, and during the year 6,859 inspections were made.

The question of concentrating the slaughtering in the Borough is still under consideration by the Special Sub-Committee, and it is hoped that the erection by the Corporation of a Slaughter-house at the Cattle Market to provide accommodation for the Butchers who would be dispossessed under the proposed scheme will soon be an accomplished fact.

PUBLIC HEALTH (Meat) REGULATIONS, 1924.

There have been breaches of these Regulations by 4 Butchers during the year, and warnings were given by letter in each case.

Offensive Trades.—During the year 4 applications were made for Fish Fryers' Licences, one was granted and the other three refused.

The number of premises now used for offensive trades and duly licensed is 37 as follows :—

- 1 Gut Scraper.
- 31 Fish Fryers.
- 1 Fellmonger.
- 1 Fat Rendering and Tripe Boiling.
- 2 Fat Rendering.
- 1 Rag and Bone Dealer.

There are also 28 Fried Fish Shops in the Borough not on the Register, having been established prior to the date of the Order under which they were Scheduled as Offensive Trades.

The whole of the premises are under supervision, and are kept in a fairly satisfactory condition.

Shops Acts, 1912-13, and Shops (Early Closing) Act, 1920-1928.

—There are still 2 Compulsory Orders in operation affecting respectively shops in which is carried on the Sale of Meat, and shops in which is carried on the Sale of Fruit, Vegetables and Flowers, and 3 Orders under the Shop Hours Act, 1904, affecting Chemists and Druggists, Hairdressers and Barbers, and Boot and Shoe Dealers.

During the year there have been several contraventions of the above Acts and Orders and written warnings were given in cases.

Proceedings were taken against 2 Hawkers for a contravention of the Closing Order relating to the Sale of Fruit, Vegetables and Flowers and the Defendants were ordered to pay costs amounting to 14/6 each.

Proceedings were taken against 9 Shopkeepers for contraventions of the Shops (Hours of Closing) Act, 1928 with the following results :—

- Case No. 1 Fined £1 and 10/6 costs.
- „ Nos. 2, 6, 7, Ordered to pay costs of 4/-.
- „ No. 3 Fined 10/- including costs
- „ „ 4 „ £5 and 10/6 costs.
- „ „ 8 Dismissed.
- „ „ 11 Fined £7 and £1 0s. 6d. costs.
- „ „ 12 „ 10/- and 12/6 costs.

Rag Flock Acts, 1911-28.—During the year 4 samples were taken for Analysis one of which did not comply with the requirements of the Acts. The Manufacturer was advised to install a hot water plant for the efficient washing of the flock. This was carried out and results of samples taken at the instigation of the manufacturer were submitted and they proved to be satisfactory.

Fertilizers and Feeding Stuff Act, 1926.

The above Act repeals the Fertilizers & Feeding Stuff Act, 1906, and came into operation on the 1st July, 1928.

I was appointed Inspector and Official Sampler under the Act, and Mr. C. J. H. Stock, Agricultural Analyst, and such appointments have been approved by the Ministry of Agriculture and Fisheries. It has not been found necessary to take any action under the above named act.

Rats and Mice (Destruction) Act, 1919.

The total number of rats actually killed by the Rat Catcher during the year was 1,281, but these figures do not include the rats that were poisoned.

The following are the principal places at which the rats have been destroyed :—

Snipe Tip	....	....	....	846
North Road Tip	....	....	....	153
Grange Road Tip	....	....	....	245
Sundry Premises	....	....	....	37

1,281

Six Informal and 2 Formal Notices were served and all complied with.

Common Lodging-Houses.—There are 4 Common Lodging-houses on the Register, with accommodation for 401 lodgers.

The whole of the lodging houses are regularly and frequently inspected, and the same are kept in a fair good condition and the Bye-Laws fairly well observed.

Three Informal notices were served during the year for the abatement of nuisances and all complied with.

I trust this report will be entirely satisfactory to you and in conclusion I wish to tender my sincere thanks to yourself for the help you have always so willingly given and to the whole of the staff of this Department, who have at all times given their best services willingly and conscientiously.

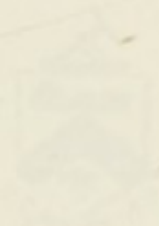
I am,

Yours respectfully,

ALBERT EDW. WADE,

Senior Sanitary Inspector.

County Borough of Darlington.



ANNUAL REPORT

OF THE

School Medical Officer,

G. A. DAVSON, M.D., D.P.H.

1929-1930

Year ending 31st December, 1929.

Printed by the Darlington County Borough Council, Darlington.

County Borough of Darlington.



ANNUAL REPORT

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School Medical Officer,

G. A. DAWSON, M.D., D.P.H.,

FOR THE

Year ending 31st December, 1929.

DARLINGTON :

THE SKERNE PRINTING COMPANY (1927) LTD., GARDEN STREET.

1930.

COUNTY BOROUGH OF DARLINGTON.

*To the Chairman and Members of the
Education Committee.*

Ladies and Gentlemen,

I have the honour to submit my Annual Report of the work of the School Medical Service for the year ending 31st December, 1929.

The full programme of three Routine Inspections of Elementary school children at five, eight and twelve years of age, the special inspection and re-inspection of these and other age groups was carried out, with the continued whole-hearted co-operation and support of the parents, head teachers and staff. It is noteworthy how the services of the staff are appreciated and sought by parents, who formerly looked askance at the facilities provided for the safeguarding and maintaining of the health of their children and in order that they derive the maximum benefit from their education.

The Barnard School and the Open Air School for both boys and girls are now accomplished facts in operation, with even already in their first year, excellent results and parental testimonials to their credit.

The recent decision of the Committee to consider immediate steps for the establishing of further Nursery Schools in the town, and their co-operation with the Maternity and Child Welfare Committee in further improving the physical condition of the pre-school child is true preventive medicine, and I trust will soon take shape in definite work, particularly by more close co-ordination of all our Medical Services as suggested in the Local Government Act. Defects in children before school age can be remedied at a fraction of the cost involved later.

I wish to record my continued appreciation of the work of my colleagues, and for their assistance in compiling this report.

I have the honour to be,

Your obedient Servant,

2nd April, 1930.

G. A. DAWSON.

STAFF OF SCHOOL MEDICAL SERVICE.

School Medical Officer—

G. A. DAWSON, M.D., M.B., B.Ch., B.A.O., D.P.H.

Assistant School Medical Officers—

ISOBEL C. BROWN, M.B., Ch.B., D.P.H.

THOMAS FERGUSON, M.D., F.R.C.P. (Ed.), D.P.H.
(part time).

Ophthalmic Surgeon—

A. T. PATERSON, M.D., F.R.C.S.E., D.P.H.

School Dental Officer—

J. L. LIDDELL, L.D.S.,

Nurses—

AGNES GARDNER (Senior Nurse).

CATHERINE GARDNER,

GLADYS M. WHITTAKER.

Clerks—

DORIS M. BURRELL.

ELIZABETH DENT,

MAY CHARLTON.

INTRODUCTION.

The health and well-being of the child is the primary foundation of its education. Physical health is not of course everything, but it is the first thing needful in our educational schemes. If we have it, many things are possible ; if we have it not, many things are impossible. It is this fact which brings Hygiene into the front rank of the subjects to be taught at school. In the introduction to my reports during the past five years I have emphasized the importance of using all our powers in the schools, not just for education in reading, writing and arithmetic, but mainly for the building up of a nation fit physically and mentally to take its stand as the pioneer of the world, to set a standard of manhood and womanhood the envy of our neighbouring countries. The establishing and preservation of healthy bodies and minds is our first concern, primarily in order that the child may receive the greatest benefit from the education provided, and ultimately leave school with a sound foundation supported by self-confidence and courage on which to build a future career of usefulness and service to others.

I record with pleasure the fact that only 14.9% of those children in the Code Groups inspected were found to require treatment, compared with the figure of approximately 30% of fifteen years ago. As years go on there is, moreover, a general tightening up of our standards of physical assessment, so that these figures are all the more remarkable. I do not suggest that our Medical Services should be given all the credit for this. Teachers and parents in their development of a health conscience have played a very large part.

During the past year the Teachers have wholeheartedly co-operated with us in seeing that remedial measures are carried out. They have also, however, realized why Hygiene should be taught as one of the most important subjects of knowledge in the preservation of health. All through our lives we have to contend with the enemies of health, and therefore the sooner we learn the laws of life, the greater our resources in the fight. It is the neglect of Hygiene which costs a nation dear in money and in life.

The Board of Education has produced several useful handbooks, *e.g.*, "The Hygiene of Food and Drink," "The Handbook of Suggestions on Health Education," which form an excellent basis for lessons to children of all ages. I recommend the constant daily use of these books by every Teacher. Care must be taken that the subject is not introduced as an irksome task. I would suggest that the child's active co-operation in all matters of health at school can be readily effected through a prefect or monitor system, where a considerable degree of responsibility can be placed on elder boys and girls in connexion with practical Hygiene and its application to school life. The true teacher of Hygiene in the schools can also, in association with the School Nurse, link up the school with the home, awaken the interest and responsibility of the parent, and cultivate all that lies behind the fruition of a health conscience.

NUMBER OF SCHOOLS AND SCHOLARS.

The following table shows how the school population is distributed throughout the Secondary, Elementary and Special Schools as on the 31st December, 1929.

Grammar School (Boys)	390
High School (Girls)	358
Central Secondary School (Boys and Girls)	306
Junior Technical School (Boys)	112
13 Council Elementary Schools, comprising 21 Departments (Boys and Girls)	7,473
8 Non-provided Elementary Schools, comprising 11 Departments (Boys and Girls)	2,743
Barnard School for Sub-normal Children (Boys and Girls)	69
Open Air School (Boys and Girls)	130
Total	11,581

The **Number of Children** in the elementary schools at mid-year, 1929, was divided up as follows :—

Boys' Departments	3,347	} Total 10,402
Girls' Departments	3,438	
Infants' (Mixed) Departments	3,617	

MEDICAL INSPECTION.

The number of children submitted to routine inspection in the Elementary Schools was 3,783; of these 3,200 were Code Groups, 160 were Odd Ages, 223 were Kendrew Street Central School, 130 Barnard School and 70 Open Air School. In addition to these, 3,051 children were examined for special reasons and 11,339 were re-examined. At the Secondary Schools 3 routine inspections of entrants, intermediates and leavers were held, and 1,137 pupils were examined. The Nursery School was visited weekly.

In addition to the routine inspections, 238 children were medically examined as candidates for Scholarships in the Secondary Schools. Routine inspections at the Elementary Schools were in general made only twice during the year so as to avoid the loss of time which often occurs when there is only a small number of children to be examined at a school.

Of the 3,200 children submitted to routine inspection in the Elementary Schools (see Table II.), 477 were found to be suffering from defects (other than uncleanness, defective clothing and footgear, and dental diseases) which required treatment; 1,256 had defects which necessitated their being kept under observation. Details of these defects are set out in the Tables at the end of this Report.

The percentage of children found at routine inspection to require treatment has fallen to the low figure of 14.9%

Weight of School Children.—The following table compares the weight of the school children examined in 1928 and 1929, with corresponding weights before the war, and also with average weights of Elementary School children in England and Wales, as given in "The Health and Physique of School Children," published by the Ratan Tata Foundation in 1913.

Heights and Weights.

		Age 5				Age 8				Age 12				
		Boys		Girls		Boys		Girls		Boys		Girls		
		ins.	lbs.	ins.	lbs.	ins.	lbs.	ins.	lbs.	ins.	lbs.	ins.	lbs.	
England & Wales	1913	...	38.5	...	37.6	...	52.2	...	49.8	...	73.0	...	73.9	
Bombay	1910	...	38.2	...	37.1	...	...	...	...	...	...	...	...	
	1914	...	39.3	...	38.0	...	...	...	...	...	71.0	...	70.7	
	1928	...	43.0	41.2	41.9	39.8	48.1	53.4	47.9	51.6	56.0	76.9	57.1	79.5
	1929	...	42.3	41.2	42.0	39.8	47.9	53.7	47.7	51.6	56.0	77.0	56.8	78.8

The general increase over pre-war figures is well marked.

Uncleanliness.—Routine medical inspection does not, for obvious reasons, afford a good measure of the prevalence of uncleanly conditions. The routine surprise surveys by the Nurses are a better guide to the actual state of affairs.

The School Nurses paid 238 visits to 22 schools, and made 338 home visits in connexion with the cleanliness of the children. For this purpose 18,475 examinations of children were made, and in 567 cases (3 per cent.) nits were found in the hair; verminous bodies were found in 2 cases. All these children were inspected at intervals of two or three weeks, and at the end of the terms nits were found in only 133 cases, all of which showed improvement.

With the provision of soap and clean towels now made in each school, we look for a general improvement in the condition of children. More prominence might be given to the training in personal hygiene in the educational system, the children taught to make proper use of the equipment provided, and every opportunity taken of inculcating into them habits of cleanliness.

Malnutrition.—There were altogether 26 cases classified as malnourished and of these three were referred for treatment. The condition may be due either to physical causes, improper diet or even starvation. In the first group, reference to the family practitioner or other medical agency is made, while in the other two, advice on suitable dietary, or in cases of neglect, the help of the N.S.P.C.C. is given. A definite standard of nutrition is difficult to define but the height-weight index for each age group gives quite a useful practical working guide within variations of 10% of the average height and weight index as found in previous years. The particular index is found by dividing weight in pounds by height in inches. For the five year old it is .95, for the eight, 1.12, and for the twelve 1.4.

Skin Disease.—As usual the greater proportion of these diseases was impetigo or scab. Ringworm of the scalp and body is disappearing as a cause of loss of school attendance, mainly owing to the greater cleanliness observed. Scabies or itch is seldom met in routine inspections, the cases being invariably in notorious families living in surroundings in which it would be difficult to escape this filth disease.

Tonsils and Adenoids.—Of the children examined during routine inspections 565 (17.6 per cent.) were found to have adenoids or unhealthy tonsils, or both. Operation was advised in 139 cases (4.3 per cent.), but in the less severe cases palliative measures were recommended and explained to the parents.

With regard to the surgical treatment of tonsils and adenoids it has always been our policy not to press for treatment to the point of prosecution. The conditions involved with regard to the whole question are rather complex and it is found that in the end education and persuasion is more likely to have its effect than more drastic measures. This year we have definite evidence to show that our theory has proved itself—to use a threatening spirit only destroys the trust of the parents and persuasion has brought success in the great majority of cases.

Defective Speech.—Stammering is the usual defect and accounted for 26 cases.

Tuberculosis.—Ten cases of definite pulmonary tuberculosis were found in the course of medical inspection. From this low figure it will be noted that pulmonary tuberculosis is a comparatively rare disease amongst children. Of non-pulmonary forms cervical glands were involved in 6 cases, and bones, joints, the skin and other organs in 6 cases. In so far as it is possible a register is kept of all children of infected families so that special observation may be exercised. In addition to these many of the cases returned under Bronchitis are being kept under careful observation. Children contacts from infected families are given the preference in the open air schools.

Vision.—The percentage of the 7-8 and 12-14 year old children found to have defective vision needing treatment, is shown in the following table:—

	7-8 Years			12-14 Years		
	No. examined	No. referred for treatment	Per- centage	No. examined	No. referred for treatment	Per- centage
Boys ...	633	43	6·8	315	26	8·2
Girls ...	653	41	6·4	443	42	9·5

Ear Disease and Deafness.—Forty (1.2 per cent.) children were found to be suffering from ear disease or deafness and were referred for treatment. Infectious diseases (especially measles) and adenoids are the exciting causes in nearly all cases. Discharging ears, once so common and so objectionable in class-room, are not nearly so numerous.

School Nurses, following up work and other duties.—The following up of defective children by the School Nurses is one of the most valuable and necessary branches of our work. To the end 1,906 home visits were paid during the year. Other duties falling upon the nurses are as follows :—

- (1) **In Schools.**—Attendance with Medical Officers at routine medical inspections. Systematic examination of all children with regard to conditions of uncleanness. Examination of any special cases brought forward to them by the teachers and following up of these special cases.
- (2) **At the School Clinic.**—Attendance with the Medical Officer in the Treatment Clinic. Treatment of minor ailments under the supervision of the Medical Officer. Preparation of records.
- (3) **Home visiting.**—Following up of children in whom defects have been found by the School Medical Officers at routine and special inspections. Following up of children concerning cleanliness, defective clothing and footwear. Visiting of children who are overdue in attendance at the School Clinic.

The value of the nurses' visit to the homes of the children becomes more apparent each year. Written communications are sent or given to the parents of children found to be suffering from defects at routine medical inspections and it is found that, by following up these cases some time later with nurses' visits, much better results are obtained. The object of these visits is to interview the parents and to urge the importance of the suggested treatment if this has not already been carried out. In this way many difficulties in the minds of the parents are removed particularly when the parent has been unable to attend the medical inspection.

Medical Examination of Teachers and Caretakers.—Twenty-one teachers and four caretakers were medically examined during the year by the staff at the clinic, and nine teachers, two clerks and one caretaker, at the Health Office.

INFECTIOUS DISEASES.

Smallpox.—Though Smallpox was still prevalent during the early part of the year in the surrounding districts in Durham, none of our school children became infected.

Chickenpox was responsible for 186 cases.

Scarlet Fever.—Ninety-three cases were notified amongst children of school age without a death. The use of a new serum in the severe cases has wiped out the mortality which this disease used to inflict.

Diphtheria.—This disease is certainly one of the most treacherous of diseases amongst our school children. During the year there were 90 cases with 5 deaths. The onset is so insidious that the child may not complain or the parent be aware of the condition until profound collapse of the patient indicates something serious.

Modern medical science has provided us with a very efficient remedy when timely applied, in the shape of anti-toxic serum. I have no hesitation in saying that if these 5 fatal cases had had this treatment opportunely they need not have died. More recently excellent results are being achieved by the protection of the individual by means of the Schick Test and the subsequent immunization. This method is now used extensively in safeguarding the staffs of our Infectious Diseases Hospitals with 100% success.

Measles and German Measles.—A very mild form of Measles was prevalent during March to July accounting for 713 cases amongst children of school age with only 1 death.

Tuberculosis.—Six new cases of Pulmonary and 27 cases of Non-Pulmonary Tuberculosis were notified during the year, accounting for 1 death from Pulmonary and 6 deaths from Non-Pulmonary forms.

School Closure.—Mainly owing to Influenza in February, and Whooping Cough and Measles during the months of March and April, it was necessary in 8 cases to give the usual medical certificate for grant purposes as required under the Elementary Education Provisional Code 1922, when the attendances in any Department fall below 60% owing to Infectious Disease. I was not found necessary to advise the closing of any of the schools.

Notifications by Head Teachers. — In addition to those Infectious Diseases usually notifiable, Head Teachers sent in notices of 52 cases of Mumps, and 66 cases of Whooping Cough amongst children of school age.

HEALTH PROPAGANDA.

Health Sunday was celebrated on 10th November, and the opportunity was taken of inviting teachers to deal particularly with the subject of Health during the following week. Leaflets were prepared and circulated through the schools. Special shewings of the films "Dangers of Ignorance" and "The Gift of Life" were arranged for Teachers only, and were much appreciated.

Copies of the publications of the Board "Handbook of Suggestions on Health Education," "The Hygiene of Food and Drink," and those of voluntary associations interested in Health are in the hands of the head teachers to assist them in the preparation of schemes. The Dental Board, the Health and Cleanliness Council, Safety First, and the National Baby Week Council, generously provide posters and leaflets which are much appreciated.

SPECIAL REPORTS.

Dr. I. C. Brown has kindly prepared the following Special Reports :

(1) CONJUNCTIVITIS.

Within a week of the re-opening of the elementary schools on August 26th, an epidemic of Purulent Conjunctivitis occurred amongst the school children and a large number of cases reported at the School Clinic for treatment.

The disease occurred in children of all ages and was at most periods found to be more prevalent amongst boys than amongst girls.

Despite early recognition and treatment the number of cases continued to increase rapidly until by the third week in September 53 cases—18 of which were girls and 35 of which were boys—were in daily attendance at the School Clinic.

Thorough investigations were made to trace all possible and probable sources of infections—investigation of the conditions at the Public Swimming Baths, the School wash basins, towels, home visits by School Nurses—but no definite source could be traced.

Many of the cases, of course, spread from one member of a family to another and Head Teachers were asked to keep a close watch over all pupils so that cases could be detected early and excluded from school until medically examined.

Dr. Brown found on inquiry amongst early cases that some of the children had returned from their summer holidays at Redcar suffering from Conjunctivitis. There might be a possibility that the source of infection originated there.

On examination most cases were found to be Staphylococcal infections and of all degrees of severity. Very good results were obtained by daily treatment with Boric Lotion and Argyrol (2%) drops. Parents were advised to carry out home treatment with Boric Lotion night and morning and severe cases were treated at the clinic twice daily. Most of the cases were fit for school in from 7 to 12 days but some of the more severe cases were in attendance for 21-28 days.

The epidemic was practically over by the third week in October and by November the number of cases in attendance was down to normal.

(2) IMPETIGO.

A special inquiry on Impetigo was carried out at the School Clinic this year and observations were made on 100 cases and the findings recorded.

The cases on which the observations were made were not selected cases in any way, each case being recorded on admission irrespective of the age, sex or severity.

Of the cases examined it was found that 68% were boys and 32% girls, probably due to the greater rough and tumble of boy life. The age incidence in both sexes was very varied and no particular age group predominated. The majority of the children of course, in attendance at the Clinic, are between the ages of five and fourteen years and all these ages were represented.

With regard to the site of the disease, in 70% of the cases some part of the face was affected, *e.g.*, the nose and cheek; this excluded the cases of Impetigo of the scalp of which 22% of the cases showed infection. Of all the cases examined 62% of the children were dirty and untidy but in the case of scalp infection, with the exception of one case occurring in a tubercular girl of six years, every head examined was found to be in a particularly

dirty condition associated with nits, and, in 2 cases, pediculi were found. In all cases of scalp infection the cervical glands, particularly the occipital group, showed enlargement. Cervical glands were enlarged in 67.5% of cases of face infection. 42% of the face infections were associated with a definite catarrhal condition while 66% of the ear infections were associated with Otorrhoea in one or both ears.

Of all the cases examined 24% gave a history of the disease occurring in another member of the family at the time of attendance at the Clinic or shortly before attendance. In only 24% was a history of a recent attack of Measles given, 28% gave a definite history of a recent injury.

All cases recorded were treated with Gentian Violet and the results were particularly good. The crusts were removed only in severe cases—these were cases attending for treatment after a more or less prolonged period either of neglect or of ineffectual home treatment. A great deal of discharge and crusting was usually found to be present and these were the cases treated for two consecutive days with Olive Oil and Ung. Hydrarg. Ammon. Dil. after two days the crusts could be removed easily and the Gentian Violet applied to the affected parts. Cases undergoing treatment with Gentian Violet attended every second day and the condition was found to clear up in a surprisingly short time.

The following are the findings with regard to period of attendance and period of exclusion from school of 100 cases observed. :—

Average duration of illness (<i>i.e.</i> , period			
during which child actually attended			
Clinic for treatment)	....	....	....
			18.5 days
Average duration of absence from school			7 days

The one objection to the Gentian Violet treatment is that æsthetically, its blue appearance is often objected to by parents and children, and at the commencement of treatment at the Clinic both parent and children from time to time come with the request that the Drug should not be used in treatment as it did not look well and it soiled the clothing.

These objections, however, are now soon over-ruled as the parents observe both in their own children and others, the beneficial result obtained from the treatment. It also serves to indicate the infectious nature of the scab to other children.

(3) RHEUMATISM.

Although Juvenile Rheumatism is very prevalent, until recently, few observations were recorded and little research work carried out. The serious nature of the disease is fully recognised and efforts are being made to establish Rheumatism Clinics for the purpose of securing early recognition of cases, and advice regarding necessary care and supervision for a prolonged period.

In Darlington we are attempting to deal systematically with these cases and to this end a special register is kept by the Assistant School Medical Officers of all cases attending for examination at the School Clinic and they are examined at regular intervals during the year.

Children found at the Routine School Medical Inspections are either referred to their own Doctor or to the School Clinic as the case may be. All the cases are examined on each of the Medical Officer's visits to the School and advice given to the teacher with regard to the special care of such children.

During the year we have had on the Clinic Register 79 children suffering from Rheumatism in varying degrees from the mild subacute muscular type to the severe cases of Chorea and Carditis where the nervous system or heart becomes affected. For the more severe cases special provision is made, they are either excluded from school for lengthy periods, allowed to attend the special school for physically defective children, or to attend the ordinary elementary school for half-days.

The majority of the cases coming under observation at the clinic are naturally not children actually suffering from an acute attack of the disease, but children who are in danger of developing an attack or who are suffering from the after effects of an acute attack. The outlook as to the child's future health and the possibility of the disease returning depends largely on the amount of care that is taken of him during these periods.

The most difficult type we have to deal with in the School Medical Service is that of Chorea (St. Vitus' Dance). These are cases of Rheumatism of the nervous system, where the child is found to be in a highly irritable unstable condition and requires rest, nourishment and fresh air, preferably a change of air altogether. The illness is always of a prolonged nature and the prognosis or outlook depends almost entirely on environmental conditions.

If more institutional treatment had been readily available the majority of such cases attending the Clinic would have been recommended for it. Under the present economic conditions, it appears almost impossible for the parents of some of these unfortunate children to offer all that is necessary to hasten their recovery. Some of our cases have been sent to the Open Air School and good results have been observed but in others the strain of even a modified School curriculum has proved too much and the child has had to be withdrawn.

Certain children are predisposed to Rheumatism and a child who has once suffered from any form of Rheumatism is always in danger of having other forms. This danger can be greatly lessened by care and prompt action on the part of the parents and it is in such cases that the Teacher can help in drawing the attention of the Parent or the Medical Officer to the condition of the child during school hours—such conditions as tiredness, loss of colour, undue restlessness, twitchings—indefinite signs of ill health in any child in the class.

Once again, for many cases at present under the care of the School Clinic, the Medical Officer has to thank the child's teacher for having drawn attention to the condition.

Warm dry clothing and footgear is most essential for these children and it is gratifying to note that efforts are being made in the schools to improve the cloakroom accommodation and more facilities are being offered for the drying of the children's wet outdoor clothing.

Moreover, parents must realise that, no matter what the fashions may be, our Northern climate demands adequate heat-retaining garments especially for the lower limbs. Long stockings made entirely of wool should be worn by those children showing evidences of sub-acute Rheumatism.

RICKETS.

Of the 3,783 children examined at Routine Medical Inspection only ten boys and twelve girls were found to be suffering from rachitic deformity. All these cases were kept under observation both at the Clinic and in the schools and parents were advised as to general and dietetic treatment. The cases showing a marked degree of deformity were fortunately found to be rare, and of these four boys and five girls were referred to the excellently equipped Orthopædic Department, General Hospital, for further treatment.

These cases under the care of the Orthopædic Surgeon at Greenbank Hospital, with the help of Artificial Sunlight showed most excellent results and parents expressed their satisfaction in the great improvement.

It is most gratifying to note that the parents of the children found to be suffering from rickets show great interest in their progress and make every effort to carry out instructions given to them, only one case refusing treatment during the year.

PROVISION OF MEALS.

No provision has been made by the Authority for the provision of free meals this year. This is a matter for regret particularly during the period of distress and unemployment in the town.

The nutrition of the child is the fundamental index of its health and malnutrition is one of the most serious defects as it forms the basis of so many chronic conditions.

To secure good nutrition sufficient and suitable food is the first requirement—this can be provided by the great majority of parents and many have been advised by the Medical Officer as to a suitable dietary, but there are others where, owing to poor home conditions, a healthy dietary cannot be provided. These are the cases which will suffer from the closure of the centres and the Authority would do well in the interests of the health of the School Child to consider the re-opening of the centres or the distribution of milk in the schools at cost price during the coming winter. Milk vendors are now able to provide one-third pint bottles to be delivered to schools for the use of those scholars selected by the doctor as likely to benefit.

SANITARY CONDITION OF THE SCHOOLS.

On the teacher depends almost entirely the formation of good habits and modes of living and more can be done in the practical teaching of personal hygiene by teachers than by any member of the School Medical Staff. The school, therefore, should provide a healthy environment which should afford facilities for the practice of hygiene by the child.

Following upon the recommendation of the Sanitary Report drawn up in 1928 there is a general improvement with regard to the sanitary conditions found in the schools. Soap, sanitary

paper and drinking cups are now provided in all schools on the receipt of a requisition from the Head Teacher. Towels are re-placed more frequently although there is still room for improvement here.

It is important that routine daily inspections of towels, handbasins and offices should be made by the Head Teacher and the caretakers urged to do this work thoroughly. This is already done in certain schools and an inspection of the premises shows at once that supervision is being exercised. On the other hand there are schools where the condition of the offices, etc., receives scanty supervision and the results are accordingly unsatisfactory.

The suggestion made with regard to the provision of individual pens and pencils is being carried out. In some schools each child has a small bag attached to his seat in which are kept pens, pencils and books. In only a few are pens and pencils kept by teachers in a common box, as was formerly so commonly practised.

Head Teachers have been asked to arrange for every door, window and ventilator to be thrown open at least during the morning and afternoon interval, and, when the weather permits, to hold classes in the open air as far as practicable—approaching as near as possible the Open Air School idea. Unfortunately the ventilation of class rooms is still far from satisfactory. Although provision is made for thorough ventilation in nearly all schools it is quite a common occurrence, except in summer months, to become aware at once on entering a class room that the air is not adequate. The ideal solution would be to build all schools on the open air school principle, but until this type of school is universal, teachers are asked to do their utmost to ensure that their rooms are properly ventilated. The responsibility of this matter might with benefit be placed upon the older children appointed as Health Prefects. They should be taught to understand simple practical hygiene, the proper use of various types of window ventilator, and be made responsible for the opening of these during intervals. So often in the course of inspection the School Medical Officer finds the popular Tobin's Tube Ventilator used not as an air inlet but as a flower pot stand accommodating the school aspidistra.

MEDICAL TREATMENT.

The treatment of minor defects is carried out by the Assistant School Medical Officers and the Nursing Staff at the School Clinic, 45, Northgate. These premises, although commodious, have been taxed to their utmost and during the past year arrangements have had to be made for the provision of an additional waiting room where the overflow is dealt with, thus avoiding undue crowding of the General Waiting Room and Treatment Clinic.

The accommodation provided is as follows:—

Ground Floor.

Waiting room for 50 children and parents.
Treatment Clinic and store room.
Examination Room.
Medical Officer's room.

Upper Floor.

X-ray apparatus.
Dental Department.
Eye Department.
Clerical and Records room.

The number of separate attendances was 19,151, of which 15,244 were for treatment, and 3,907 for advice. For 1928 the respective figures were 19,027, 14,650 and 4,277.

From these numbers it will be seen that there is an increase both in the number of separate attendances and in the number of cases found to be requiring treatment. This does not indicate that the number of children found to be suffering from minor ailments is increasing, but that the parents are showing themselves more anxious in taking advantage of the facilities offered to them rather than relying entirely on home treatment.

Minor Ailments.—A Minor Ailment may, for practical purposes, be described as a defect usually considered trifling, easily relieved, yet in treatment neglected by the general public. It does not require in-patient treatment nor a high degree of surgical skill, though, in some cases, the condition is one full of risk to future fitness.

Impetigo or infectious scab again provided the majority of our cases, accounting for 850. There were 106 new cases of ringworm, compared with 113 in the previous year, and 18 cases still under treatment from 1928. Four cases were treated at home. Of the 105 cases treated at the Clinic, 55 were of the scalp. Ringworm of the body, which is very much more amenable to treatment, accounted for 50 cases; of the 105 cases, 94 were cured and re-admitted to school during the year, leaving 11 still under treatment.

Twenty-eight cases of scabies were treated, and precautionary instructions given on disinfestation.

The Children who received treatment on account of ear diseases numbered 152; the great majority of these were suffering from ear discharge. Such cases invariably arise from diseased conditions in the throat, and advice or appropriate treatment of the exciting cause is also given.

Tonsils and Adenoids.—The principal defect of the nose and throat in school children is that of enlarged tonsils and adenoids, caused by a combination of factors which include, heredity, faulty breathing, defective clothing or housing conditions, predisposing to catarrh and infection. During 1929 operations were performed on 212 cases of adenoid growth and enlarged tonsils in children of school age at the General Hospital, of these 150 were sent from the School Clinic, and the remainder from other sources in the town.

In the case of minor defects not requiring operation, and for those who have undergone the operation, advice in nasal hygiene and in remedial breathing exercises is given.

Eye Defects.—Spectacles are provided at contract prices, or free in necessitous cases. On the whole the objections of parents whose attention has been drawn to the fact of the necessity for the provision of spectacles and the ultimate benefit, are not as numerous as in previous years. The old objection that the wearing of glasses would deter the appointment of a scholar in after life is dying out as the result of education of Employers and others.

632 children were examined by the Oculist during the year.
The defects found were as follows :—

Squint	....	....	....	....	97
Myopia	....	....	....	....	118
Myopic Astigmatism	....	....	....	....	37
Mixed Astigmatism	....	....	....	....	12
Hypermetropia	....	....	....	....	93
Hypermetropic Astigmatism	....	....	....	....	71
Other Defects	....	....	....	....	162
Emmetropia	....	....	....	....	42
Total					632

Re-examinations 190

Glasses were prescribed for 509 children.

I am indebted to Dr. Arthur T. Paterson, Eye Specialist, for the following observation :—

During the past year an unusual number of children have been brought to the Clinic suffering from night-blindness. The visual acuity of most of these children in the daylight is found to be normal unless there was present some gross error of refraction. The explanation of these cases was that the children suffered from an ocular disorder known as Xerophthalmos. This disorder is characterized by a dryness of the conjunctiva where it covers the exposed portion of the sclerotic in the palpebral opening. It there becomes dry and dull and covered with a white foam and the chief subjective symptom is night blindness. This disorder is due primarily to a deficiency of Vitamin "A" in the food. The children who suffer are usually living on a pure carbo-hydrate or starch diet such as potatoes, white bread and rice, washed down with tea, and they invariably belong to families whose parents are earning poor wages or are out of work. A change of diet with a liberal supply of proteins (eggs, peas, beans, milk, &c.) makes a wonderful and quick change in the child's condition. Another method of combating the disorder is to allow the child to have a diet which frequently has boiled or stewed liver as one of its items. Liver too, unfortunately is rising in price as its great value in the treatment of various diseases and disorders of metabolism is being appreciated.

In conclusion I should like to express my appreciation for the great help I have received, in carrying out my work, from the School Nurses.

SCHOOL DENTAL OFFICER'S REPORT.

I am indebted to Mr. J. L. Liddell for the following :—

This year I am able to shew a general improvement in my report. The number of children inspected has increased by 581, and those treated by 94.

The mouths of the children are, on the whole, much more healthy, very few really bad conditions being noticed, as compared with those seen a few years ago. The fruits of previous years' work are now seen in the number of beautiful dentures of the senior scholars, the cleaning out of septic temporary teeth having paved the way for a sound, healthy permanent dentition.

330 cases were noted where treatment, which had been recommended the previous year, had been done by private practitioners. As many children, inspected last year, were not seen again this year, the number of these cases must be greater.

The percentage of children requiring treatment has fallen from 64.3 in the previous year to 55.7, and the percentage of those treated has risen from 48.5 to 54.1.

It is gratifying to note the increasing number who come back when treatment is again necessary. These cases number 677, or 243 more than last year.

In addition to the work for elementary school children shown in Group IV of Table IV, of appendix, inspection and treatment were carried out for children attending the Secondary, Technical, and Special Schools :—

Number of children examined	....	....	732
„ „ requiring treatment			339
„ „ treated	....	....	127

This brings the grand total to :—

Number of children examined	....	....	8,139
„ „ requiring treatment			4,537
„ „ treated	....	....	2,455

37 root cases were treated, 34 of them successfully, two did not attend for the completion of the treatment and 1 tooth which failed to react to treatment was extracted.

May I take this opportunity to thank the Medical Officers, Teaching Staffs, Nurses and Clinic Staff for their help and co-operation in my work throughout the year.

PHYSICAL TRAINING.

Physical training in the schools of the Borough continues to be carried out as in previous years, according to instructions contained in the Board of Education Syllabus, and special pamphlets issued.

Schools have been regularly visited, the work carefully supervised, and, where necessary, assistance and advice given. The high standard of efficiency attained in previous years has been maintained.

Provision has been made to instal physical training apparatus in the hall of the new North Road Senior Girls' Department, and, I understand similar provision will be made in other new schools. In addition to supplying the needs of these schools the halls will be useful for play centre work, and the training of teachers in advanced physical training. They might also be used for physical training classes in connection with the Technical College. Specifications and plans have also been prepared for the erection of a schools Gymnasium and Bath in the grounds of the School Clinic. This will fill a long felt want and meet the requirements of schools situated near the centre of the town. The Baths will be especially useful as they will be available all the week. The Public Bath is only available on some mornings per week.

It is a pleasure to note the interest taken in Organised Games by teachers and scholars. Regular games periods are allotted in all Senior and in several Junior Departments, and, considering the poor grounds some of them have to use, very satisfactory progress is being made. The playing field at the Alderman Leach School has been levelled and is now being used. Authority has also been received to level and mark out a small field in Salter's Lane, behind the new Open Air School, mainly for the use of the new North Road Senior Girls' Department. An area of ten acres of land at Hunden's Lane adjoining Hunden's Recreation Ground, lately acquired by the Corporation, has been allotted to the Education Committee for use as playing fields. This ground will, I understand, be provided with changing and lavatory accommodation for both sexes, and will afford facilities for several schools to play games at the same time, thus affording better opportunity for adequate supervision and control.

The various leagues and competitions in football, cricket, net-ball, athletic sports and swimming are very keenly contested.

The competitions and leagues are arranged by the Local Schools Athletic Association, and great credit is due to the Chairman, Secretary and members of the various committees for the manner in which the competitions are arranged and carried out.

The Swimming season has been a very successful one. The same teaching staff was employed as in the last few years, *i.e.*, two men and two women part time teachers, assisted by the teachers who accompany the class. The season was from 8th May to 30th September, this being, less holidays, rather less than four months. The scholars attend in groups of 60 once a week so that, if a full attendance is put in, each scholar receives about 14 or 15 lessons. It can safely be said that at least 75% of the scholars are taught to swim during the season. Certificates are awarded to those who swim one or five lengths of the baths ($33\frac{1}{3}$ or $166\frac{2}{3}$ yds.). Arrangements were made to deal with 610 boys and 600 girls per week.

The following is a summary of certificates issued :—

Boys	One length	170	Five lengths	....	49
Girls	„ „	123	„ „	....	48
					—
					293
					—
					97
					—

Last year's number :—

Boys	One length	167	Five lengths	....	91
Girls	„ „	97	„ „	....	45
					—
					264
					—
					136
					—

Swimming Club Certificates :—

Boys	$\frac{1}{4}$ mile	35	$\frac{1}{2}$ mile	23	1 mile	—
Girls	„	38	„	31	„	16
		—			—	—
		73			54	16
		—			—	—

Note.—Gentlemen's Swimming Club do not award mile certificates.

Last year's numbers :—

Boys	$\frac{1}{4}$ mile	44	$\frac{1}{2}$ mile	25	1 mile	—
Girls	„	27	„	11	„	9
		—			—	—
		71			36	9
		—			—	—

The work of Captain Robson, the organizer of Physical Training during the past 23 years with the Education Authority has been a most valuable asset to the School Medical Service, particularly in the maintaining the erect posture, square shoulders, well developed chest and sound limbs. His tact, keenness and enthusiasm in outdoor games gave the scholars just that encouragement which makes all the difference between a task and a pleasure.

His services will be long remembered by teachers, scholars and staff.

CO-OPERATION AND CO-ORDINATION.

The appointments of Medical Officer of Health and School Medical Officer are vested in one person so that Co-operation and Co-ordination of all the preventive health services are simplified.

The transfer of records from the Maternity and Child Welfare Section through the School Medical side of the work, up to the Employment Exchange is in process of development.

The Training College and School Clinic.—In order that future school teachers may have a more intimate knowledge of the school medical work, arrangements for a number of pupils of the Training College to attend the Clinic three days per week have been continued for the past year. The principal and staff of the College very much appreciate this opportunity for the pupils to acquire a first hand practical knowledge of school hygiene, of common diseases in their early form, and of simple points in the diagnosis and treatment of defects. The enthusiastic co-operation of the teaching profession with the school medical service is essential for the continued success of the welfare of the child, and all we can do in order to secure this is, in my opinion, an excellent service.

Co-operation of Parents.—Parents are invited to attend at routine inspections and at the School Clinic. Their presence is welcomed as it gives the Medical Officer the opportunity of giving personal help and advice, and helps to break down prejudice which in some areas still exists. Suggestions can thus be made,

both for the remedy of existing defects in the child, and also for the prevention of future ill-health by attention to what appear very trifling common-place weaknesses. During 1929, at the medical inspection of infants, parents were present in 74 per cent. of the cases, but with older children this percentage was 45 per cent. At the routine medical inspection of 3,200 elementary school children 1,794 parents attended, quite a satisfactory proportion.

CO-OPERATION OF SCHOOL ATTENDANCE OFFICERS.

- (a) **Medical Inspection generally.**—In the course of visitation by the Attendance Officers to homes of children where excuses are put forward of illness as the cause of absence from school, and if the circumstances warrant it, the parents are requested to present the children at the School Clinic.
- (b) **Following up of Children on the Clinic Lists.**—The Officers receive daily lists of children who have attended the Clinic, and reports as to their fitness, or otherwise, to attend school. In the case of those unfit the date of the next visit to the Clinic is given on the lists for information. Further, a daily list is also furnished of children, who should have attended the Clinic but have failed to do so. The parents of the latter are promptly visited and warned as to the consequences of failure to attend as ordered.

EMPLOYMENT OF CHILDREN AND YOUNG PERSONS.

The advice of the School Medical Officers is available for the Employment Officer, and at the final examination of a school child an effort is made to call the attention of the parents to any physical condition which should influence them in the choice of an occupation for the child.

The chief employment for boys in this area is in the Building, Distributive and Engineering Trades. Many boys seeking apprenticeships are compelled to find interim employment as errand boys and labourers on leaving school.

Girls are employed in Domestic Service, Wool Spinning, Shops, Offices and in the Tailoring and Dressmaking Trades.

The Juvenile Employment Bureau is in touch with the Employers in the district, and 339 children have through its agency been placed in employment. Suitable candidates are notified of vacancies in the Civil Service, Post Office, Army, Navy and Air Forces, the Railway and similar services.

Bye-laws governing the employment of children and young persons are in force, and the streets are patrolled by the School Attendance Officers.

SPECIAL SCHOOLS.

OPEN AIR SCHOOL, SALTERS LANE.

The old Open Air School at Dodmire had outlived its usefulness, so that the opening of the present new school was anticipated with many happy prospects which we can claim have been more than fulfilled. Girls are not now the only favoured scholars in this line, as the accommodation is equally provided for 120 boys and girls.

The site is ideal on the highest point of the town's elevation yet protected from the North winds and industrial smoke, and with an open Southern aspect getting the maximum of sunshine and yet close to the town's Trackless Bus Service. Four acres of open playground, partly asphalt, and partly lawn and garden, are enclosed by railings set off with various shrubs and evergreens. The permanent main administrative building consists of a central large dining and assembly hall and kitchen flanked on either side by staff rooms, store rooms, and cloak rooms. Provision is afforded for detailed medical inspection in the Head Teacher's room.

The most interesting feature is the spray bathroom fitted with a series of "roses" on arches over a recessed floor capable of being flooded with warm water to the depth of about four inches. Each child is provided with its own numbered peg, blanket, towel and toothbrush.

On the south side of this main building stand the four open-air class rooms, arranged two on either side in echelon. They are wooden on a brick and concrete foundation with open sides fitted with shutters. The heating is carried out by low pressure pipes beneath the floor.

The children selected have been in almost every case contacts of tuberculosis living in very poor home conditions. They are conveyed to the school by trolley buses, arrangements having been made for the free transport for all those coming a distance of more than half a mile.

The school opens at 9-30 a.m. Morning cocoa is provided, and in relays of 12 the school is detailed off for spray baths after having provided themselves with their numbered blankets in different classrooms. A large household bath was provided, but it is interesting to report that no occasion for its use has yet arisen, so quickly have the children developed a cleanliness conscience. In the spray room the great advantage lies in the fact that the children are not obliged to shiver under a shower, but can exercise gently while "following the leader" through the arches. A brisk mutual towelling produces a healthy glow and feeling of exhilaration.

A mid-day meal of varied menu consisting mainly of meat or fish, vegetables and potatoes, with pudding, is provided. The following menu shows the variety :—

- Monday—Lentil and bacon Roly Poly and gravy. Baked potatoes and rice pudding.
- Tuesday—Ox-head broth and wholemeal bread. Jam roll, treacle roll or fruit pie.
- Wednesday—Baked stuffed fish and sauce, mashed potatoes. Ground rice, stewed fruit.
- Thursday—Stewed meat and vegetables. Spiced sago and jam.
- Friday—Cottage pie or fish, and potatoes. Ginger pudding and sauce.

An hour's rest on small, easily portable stretcher beds is enforced, out in the open when fine, and in the shelters when inclement.

Objections by the parents scarcely exist and in fact requests are often made when a child is certified fit to return to an ordinary elementary school that the child may be retained. There are

of course, those parents who invariably object when asked to pay the trifling cost of 4d. for the mid-day meal. I am satisfied however, that such a nourishing meal could not be provided in the homes at double the cost. The girls take turn in the kitchen, preparing and serving and generally acting as "big sisters" to the children of their table. The boys do the heavier work involved in cleaning and such things.

Miss Watson, the Head Teacher, and her staff are most enthusiastic in their surroundings and are responsible entirely for the good name which the Institution bears as a Health Service in the town.

BARNARD SCHOOL FOR SUB-NORMAL CHILDREN.

With the erection of the new Special School in Barnard Street and its opening in 1928 a school of the very best type was provided for the education of the sub-normal child.

The school is of the open air type and ample provision is made for the development of that practical side of the curriculum which is of so much importance to the future of the children in attendance.

In addition to the ordinary teaching staff provision is made for the instruction of the children in domestic science, gardening and practical shoemaking and great interest is taken in these subjects by the boys and girls in attendance.

A hot mid-day meal at cost price of fourpence is provided daily for children who wish to take advantage of it and the children themselves—both boys and girls—do duty in turn, in the preparation and serving of this meal.

With the improvement of the standard of the accommodation available an effort has been made to raise the standard of children referred to the school, and it cannot be too strongly emphasized that admission is reserved strictly to children who, in the opinion of the School Medical Officer, are capable of deriving benefit from instruction in the school. Imbeciles are not admitted and every child taken into the school should have a fair prospect of obtaining some measure of economic success in later life.

The high standard of work under the guidance of the Head Mistress has been maintained throughout the year. The whole atmosphere of the school is bright, the children are happy and interested both in their work and in the general well being of the school and altogether the step taken in the provision of the new school and in the increased facilities offered has been fully justified. The establishment of an old boys' and an old girls' club mainly through the local Mental Welfare Association and Toc H, with Miss Holmes as Secretary Organizer, has done much to ensure the after care of these children on attaining the leaving age of 16 years.

THE GEORGE DENT NURSERY SCHOOL.

The George Dent Nursery School was visited weekly during the year and each child was subjected to at least one full routine examination.

There are 80 children at present on the Register of this school. The children are all between the ages of 2 and 5 years and have been admitted to school for one of two reasons :

- (1) Poor home conditions.
- (2) Malnutrition with or without some definite physical defect.

The waiting list continues to be a long one and the accommodation of the school taxed to its utmost throughout the year, but the present prospect with regard to the provision of accommodation is bright.

At the present time the Committee have under consideration plans for the extension of the existing building and the conversion of two of the ground floor rooms to the open air type. If this scheme materialises and there is every prospect of its doing so, accommodation will not only be substantially increased but provision will be made, by the use of the two open air rooms, for the children to take their mid-day rest—despite inclemency of the weather—under ideal conditions.

The school is situated in Woodland Road within easy distance of the centre of the town and on the main 'Bus route. The building is a two storey building of the dwelling house type with large airy rooms opening from a central hall. The house is situated in beautiful grounds and during the summer months the children live entirely out of doors from the time of arrival at school at 9-15 a.m., until they leave again at 3-45 p.m.

The problem of conveying the children to and from the school affords no difficulty under the present routine. As most of the children in attendance are drawn from the Eastbourne area of the town and inter-lying districts the School Authorities have arranged a central meeting place within easy reach of all parents and there the children are met daily by members of the School Staff and conveyed free of charge by special trolley bus to the gates of the school.

On arrival at school each child is given lunch—brown bread and butter with milk, and during the winter, Cod Liver Oil Emulsion. Twelve o'clock is dinner time—served indoors in winter and out of doors in the fine summer weather and after dinner every child has two hours rest, being provided with a camp bed and blanket.

At 3-45 p.m. they are conveyed back again under supervision to the central meeting place when they are met by their parents.

When one realises the wide field there is offered for preventive medical activity amongst children in attendance at a Nursery School it is encouraging to feel that under the new conditions the Committee of the George Dent Nursery School will be offering still greater facilities to an increased number of children.

In addition to the general survey of all children made periodically by the Medical Officer, 70 children were re-examined for defects and 37 as special cases.

A number of the children admitted were found to be suffering from rickets and two cases showing marked deformity have been attending at Greenbank Hospital for Artificial Sunlight treatment. Both cases have shown excellent results.

Three children received surgical treatment at Greenbank Hospital for enlarged tonsils and adenoids. Four children attended the School Clinic for Dental treatment.

The school has been free from serious infectious diseases during the year.

All minor ailments were treated at the school by the staff.

Impetigo	....	....	....	18
Septic Sores	....	....	....	16
Blepharitis	....	....	....	9
Otorrhœa	....	....	....	3
Conjunctivitis	....	....	....	3
Burns	....	....	....	5
Ringworm (excluded)	....	....	....	1

Blind, Deaf, Defective and Epileptic Children.—The arrangements for dealing with these children remain as in previous years. 19 children were examined for Forms 302 and 306 during the year, and the total number of mentally defective children on the books was 69 ; 4 were notified to the Local Authority under the Mental Deficiency Act.

These figures are summarised in Table III. of the Appendix.

RESIDENTIAL INSTITUTIONS.

The following Residential Institutions have at present Darlington children as shown in the numbers :—

Allerton Priory R.C. Special School (M.D.)	1
Prudhoe Hall Colony School (M.D.)	1
St. John's Institution for the Deaf and Dumb, Boston Spa	1
Royal Midland Institution for the Blind	2
Blenheim Walk Home for the Blind, Leeds	1
Yorkshire School for the Blind	2

Two children from Darlington attend Stockton School for the Deaf.

SECONDARY SCHOOLS.

THE GRAMMAR SCHOOL.

Routine medical inspections were carried out by Dr. Ferguson during the year covering 347 of the total 390 pupils at the school. More detailed investigations than are possible in the Elementary Schools are made as the strain of Secondary School Education in early adolescence demands supervision and stocktaking annually. Special medical examinations were made of those pupils showing strain or engaging more strenuously than the others in sports.

There were no epidemics of a serious nature during the year and the staff have continued to show their appreciation of the Services by their whole-hearted co-operation in seeing to the welfare of the scholars.

HIGH SCHOOL.

The High school for girls was visited three times during the year when Routine Inspections of the pupils in attendance were carried out by Dr. Isobel Brown.

As in former years the physical condition of the pupils was found to be excellent and it is gratifying to note that, despite the increasing strain and pressure of homework and of preparation for examinations, a progressive improvement in the physical condition and general health of the pupils among the higher forms was observed. This satisfactory condition is attributed almost entirely to the high standard of personal hygiene maintained in the school and to the efficiency with which the organized games and physical training are carried out.

In regard to re-inspections of pupils found to be suffering from one or more defects, it is found that a great deal has been done and the work shows even more satisfactory results than in the elementary schools, as the pupils, being older, are more interested and are able to appreciate the need for physical fitness and the relationship of any defect to their future careers.

A large proportion of cases of defects were found to be those of vision—which is, of course, accounted for by the fact that increased strain of secondary education brings such defects into greater prominence.

The Medical Officer is pleased to note the increase in attendance of parents at the inspections, and to find that both pupils and parents are now, in most cases, anxious to have any defect remedied without delay.

		<i>Pupils Attending</i>		<i>Pupils Examined</i>
Grammar School	....	390	....	347
Girls' High School	....	358	....	356
Junior Technical School		130	....	130
Central Secondary School		306	....	304
Total	....	1184	....	1137

At the ages specified by the Board of Education the examinations were as follows:—

Age ...	8	12	13	14	15	16	17	Total
Boys ...	25	157	135	120	70	30	7	544
Girls ...	16	119	100	81	72	38	18	444

In addition to these, special cases were examined at the following ages:—

Age	6	7	9	10	11	Total
Boys	4	5	4	30	45	88
Girls	4	1	2	9	45	61

Number of pupils in whom no defect was found, 578.

The inspections were carried out on much the same lines as in the Elementary Schools, with the addition of chest measurements.

The following table gives the average chest measurements in inches:—

	Age 8		Age 12		Age 13		Age 14	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
Inspiration	25·8	25·8	28·8	29·0	29·8	30·3	29·8	32·4
Expiration	23·7	24·8	26·3	26·5	27·0	27·8	27·1	29·6

	Age 15		Age 16		Age 17	
	Boys	Girls	Boys	Girls	Boys	Girls
Inspiration	31·0	33·9	32·7	34·4	33·3	34·8
Expiration	28·1	31·0	29·5	31·3	30·1	31·7

The following defects were found during the course of medical inspection:—

Disease or Defect	Age 8		Age 12		Age 13		Age 14		Age 15		Age 16		Age 17		Total
	B	G	B	G	B	G	B	G	B	G	B	G	B	G	
Carious Teeth (four or more)	-	-	1	1	3	-	4	1	2	-	-	-	-	-	12
Enlargement of Tonsils	-	1	8	-	4	-	5	1	7	1	1	-	-	-	28
Adenoids	1	1	2	4	1	2	2	3	-	1	-	1	-	-	18
Enlargement of Glands	1	-	14	1	18	4	11	1	6	1	3	-	-	-	60
Squint	-	-	-	2	1	-	1	-	-	-	-	-	-	-	4
External Eye Disease	-	-	2	-	-	-	-	-	1	-	-	-	-	-	3
Defective Vision	10	1	27	14	22	24	15	21	16	13	5	4	3	4	179
Ear Discharge	-	-	-	1	-	-	-	1	-	2	-	-	-	-	4
Deafness	-	-	-	1	-	1	1	-	-	3	-	-	-	-	6
Defective Speech	2	-	2	1	2	-	-	-	3	-	-	1	-	-	11
Other Diseases	3	1	13	9	7	19	7	13	6	9	1	5	-	2	95

Defects found and referred for treatment, or to be kept under observation :—

Defect or Disease	Routine Inspection				Re-examinations			
	Treat- ment		Observa- tion		Treat- ment		Observa- tion	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
Uncleanliness (Head) ...	—	—	—	—	—	—	—	—
Eye—								
Blepharitis ...	—	—	—	—	—	—	—	—
Corneal Ulcer ...	—	—	—	—	—	—	—	—
Defective Vision ...	19	15	4	6	9	16	4	5
Squint ...	—	2	—	—	—	2	—	2
Ear—								
Defective Hearing ...	—	3	—	4	—	3	—	3
Nose and Throat—								
Enlarged Tonsils ...	15	18	1	5	12	24	2	10
Adenoids ...	—	1	—	—	2	1	—	3
Enlarged Cervical Glands (non- Tuberculous) ...	—	1	1	1	—	3	1	2
Heart Disease—								
Organic ...	3	1	5	2	2	1	9	1
Functional... ..	—	—	6	—	—	—	10	—
Anæmia ...	2	9	1	4	—	3	—	7
Lungs ...	1	1	5	10	1	—	5	13
Other Non-Tuberculous Diseases ...	—	—	—	—	—	—	—	—
Tuberculosis—								
Pulmonary—Definite	1	—	—	—	—	—	1	—
Suspect.	—	—	—	—	—	—	—	—
Non-Pulmonary—								
Spine ...	—	—	—	—	—	—	—	—
Other forms ...	—	—	—	—	—	—	—	—
Deformities—								
Rickets ...	—	2	—	1	—	1	—	4
Dental Caries ...	9	10	9	3	6	13	2	5
Skin—								
Scabies ...	1	—	—	—	—	—	—	—
Other Defects or Diseases ...	3	11	9	23	—	12	—	16

No. of Re-examinations carried out to ascertain progress, 273

RETURN OF MEDICAL INSPECTIONS—1929.

TABLE 1.

A.—ROUTINE MEDICAL INSPECTIONS.

Number of Code Group Inspections—

Entrants ....	....	....	....	....	....	1,156
Intermediates ....	....	....	....	....	....	1,288
Leavers ....	....	....	....	....	....	756
Total	....	....	....	....	....	3,200

Number of other Routine Inspections 583

B.—OTHER INSPECTIONS.

Number of Special Inspections ....	....	....	....	....	3,051
Number of Re-Inspections ....	....	....	....	....	11,339
Total	....	....	....	....	14,390

TABLE II.—A. Return of Defects found by Medical Inspection in the Year ended 31st December, 1929.

DEFECT OR DISEASE	ROUTINE INSPECTIONS		SPECIAL INSPECTIONS	
	No. of Defects		No. of Defects	
	Requiring Treatment	Requiring to be kept under observation but not requiring Treatment	Requiring Treatment	Requiring to be kept under observation but not requiring Treatment
(1)	(2)	(3)	(4)	(5)
Malnutrition... ..	2	23	1	—
Uncleanliness (See Table IV., Group V.)	126	—	6	—
SKIN—				
Ringworm :				
Scalp	7	—	44	—
Body	9	—	46	—
Scabies	2	—	24	—
Impetigo	32	—	710	—
Other Diseases (Non-Tuberculous) ...	14	8	72	43
EYE—				
Blepharitis	19	—	61	—
Conjunctivitis	13	—	295	—
Keratitis	1	—	1	—
Corneal Opacities	5	—	6	1
Defective Vision (excluding Squint)	159	149	63	31
Squint	37	42	—	1
Other Conditions	8	5	60	4
EAR—				
Defective Hearing	11	12	20	9
Otitis Media	27	6	75	1
Other Ear Diseases	3	5	13	3
NOSE AND THROAT—				
Enlarged Tonsils only ...	90	358	33	26
Adenoids only	31	41	8	7
Enlarged Tonsils & Adenoids	41	63	14	5
Other Conditions	3	14	37	28
Enlarged Cervical Glands (Non-Tuberculous) ...	—	90	6	20
Defective Speech	—	18	2	6
Teeth—Dental Diseases ...	315	7	14	1
(See Table IV., Group IV.)				
HEART & CIRCULATION—				
Heart Disease :				
Organic	1	3	—	2
Functional	—	34	1	3
Anæmia	7	30	2	8
LUNGS—				
Bronchitis	9	546	2	42
Other Non-Tuberculous Diseases	—	1	1	—

TABLE II.—*continued.*

DEFECT OR DISEASE	ROUTINE INSPECTIONS		SPECIAL INSPECTIONS	
	No. of Defects		No. of Defects	
	Requiring Treatment	Requiring to be kept under observation but <i>not</i> requiring Treatment	Requiring Treatment	Requiring to be kept under observation but <i>not</i> requiring Treatment
(1)	(2)	(3)	(4)	(5)
UBERCULOSIS—				
Pulmonary :				
Definite	6	1	1	2
Suspected	—	—	—	1
Non-Pulmonary :				
Glands	3	3	—	2
Spine	1	—	—	1
Hip	—	—	—	1
Other Bones & Joints ...	1	1	—	—
Skin	1	—	—	—
Other Forms	—	1	—	2
NERVOUS SYSTEM—				
Epilepsy	1	1	1	1
Chorea	—	2	—	7
Other Conditions	—	14	—	5
DEFORMITIES—				
Rickets	2	30	—	2
Spinal Curvature	—	1	—	—
Other Forms	2	10	—	3
Other Defects & Diseases ...	37	155	580	319

B. Number of *individual children* found at *Routine Medical Inspection* to require treatment (excluding Uncleanliness and Dental Diseases).

GROUP	NUMBER OF CHILDREN		Percentage of Children found to require Treatment
	Inspected	Found to require Treatment	
(1)	(2)	(3)	(4)
CODE GROUPS :—			
Entrants	1,156	138	11·9
Intermediates	1,288	206	15·9
Leavers	756	133	17·5
Total (Code Groups)	3,200	477	14·9
Other Routine Inspections ...	583	33	5·6

TABLE III.—Return of all Exceptional Children in the Area.

	—	—	Boys	Girls	Total
Blind (including partially blind).	(i.) Suitable for training in a School or Class for the totally blind.	Attending Certified Schools or Classes for the Blind... Attending Public Elementary Schools... At other Institutions ... At no School or Institution ...	1 — — —	2 — — —	3 — — —
	(ii.) Suitable for training in a School or Class for the partially blind.	Attending Certified Schools or Classes for the Blind... Attending Public Elementary Schools... At other Institutions ... At no School or Institution ...	— 4 — —	— 1 — —	— 5 — —
	(i.) Suitable for training in a School or Class for the totally deaf or deaf and dumb.	Attending Certified Schools or Classes for the Deaf ... Attending Public Elementary Schools... At other Institutions ... At no School or Institution ...	— — — —	3 — — —	3 — — —
	(ii.) Suitable for training in a School or Class for the partially deaf.	Attending Certified Schools or Classes for the Deaf ... Attending Public Elementary Schools... At other Institutions ... At no School or Institution ...	2 — — —	— 1 — —	2 1 — —
Mentally Defective.	Feeble-minded (cases not notifiable to the Local Control Authority)	Attending Certified Schools for Mentally Defective Children... Attending Public Elementary Schools... At other Institutions ... At no School or Institution ...	39 1 2 —	30 4 — —	69 5 2 —
	Notified to the Local Control Authority during the year.	Feeble-minded ... Imbeciles ... Idiot ...	2 — —	2 — —	4 — —
	Suffering from severe epilepsy.	Attending Certified Special Schools for Epileptics ... In Institutions other than Certified Special Schools	— — —	— — —	— — —

Epileptics (continued).	Suffering from epilepsy which is not severe.	Attending Public Elementary Schools... At no School or Institution ...	Boys	Girls	Total
Physically Defective.	Infectious pulmonary and glandular tuberculosis.	At Sanatoria or Sanatorium Schools approved by the... Ministry of Health or the Board ... At other Institutions ... At no School or Institution ...	3 — — —	5 — 3 1	8 — 3 1
	Non-infectious but active pulmonary and glandular tuberculosis.	At Sanatoria or Sanatorium Schools approved by the... Ministry of Health or the Board ... At Certified Residential Open-Air Schools ... At Certified Day Open-Air Schools ... At Public Elementary Schools ... At other Institutions ... At no School or Institution ...	— — — 10 — — —	— — — 6 — — —	— — — 16 — — —
	Delicate children (e.g., pre or latent tuberculosis, malnutrition, debility, anaemia, etc.)	At Certified Residential Open-Air Schools ... At Certified Day Open-Air Schools ... At Public Elementary Schools ... At other Institutions ... At no School or Institution ...	— 72 3 — 1	— 58 — — —	— 130 3 — 1
	Active non-pulmonary tuberculosis.	At Sanatoria or Hospital Schools approved by the Ministry... of Health or the Board ... At Public Elementary Schools ... At other Institutions ... At no School or Institution ...	— 4 — —	1 3 1 2	1 7 1 2
	Crippled Children (other than those with active tuberculous disease), e.g., children suffering from paralysis, etc., and in- cluding those with severe heart disease.	At Certified Hospital Schools ... At Certified Residential Cripple Schools ... At Certified Day Cripple Schools ... At Public Elementary Schools ... At other Institutions ... At no School or Institution ...	— — — 31 — 1	— — — 31 — 1	— — — 62 — 2

TABLE IV.—Returns of Defects Treated during the Year ended 31st December, 1929.**TREATMENT TABLE.**

GROUP I.—MINOR AILMENTS (excluding Uncleanliness, for which see Group V.).

DISEASE OR DEFECT (1)	Number of Defects treated or under treatment during the year		
	Under the Authority's Scheme (2)	Otherwise (3)	Total (4)
SKIN—			
Ringworm—Scalp	53	6	59
Ringworm—Body	60	5	65
Scabies	26	2	28
Impetigo	850	5	855
Other Skin Disease	220	4	224
MINOR EYE DEFECTS (External and other, but excluding cases falling in Group II.).	444	2	446
MINOR EAR DEFECTS	148	4	152
MISCELLANEOUS (e.g., minor injuries, bruises, sores, chilblains, etc.).	617	11	628
Total	2,418	39	2,457

GROUP II.—DEFECTIVE VISION AND SQUINT (excluding Minor Eye Defects treated as Minor Ailments—Group I.).

DEFECT OR DISEASE (1)	No. of Defects dealt with			
	Under the Authority's Scheme (2)	Submitted to Refraction by private practitioner or at hospital, apart from Authority's Scheme (3)	Otherwise (4)	Total (5)
Errors of Refraction (including Squint)	615	1	18	634
Other Defect or Disease of the Eyes (excluding those recorded in Group I.).	17	—	—	17
Total	632	1	18	651

Total number of children for whom spectacles were prescribed—

(a) Under the Authority's Scheme, 509.

(b) Otherwise, 18

Total number of children who obtained or received spectacles—

(a) Under the Authority's Scheme, 462.

(b) Otherwise, 18

TABLE IV.—continued.

GROUP III.—TREATMENT OF DEFECTS OF NOSE AND THROAT.

NUMBER OF DEFECTS				
Received Operative Treatment			Received other forms of Treatment	Total number Treated
Under the Authority's Scheme, in Clinic or Hospital	By Private Practitioner or Hospital, apart from the Authority's Scheme	Total		
(1)	(2)	(3)	(4)	(5)
150	90	248	542	790

GROUP IV.—DENTAL DEFECTS.

- | | | | | | | | |
|---|--|--|-----------------|------|--------------------|------|--|
| <p>(1) Number of children who were :—</p> <p>(a) Inspected by the Dentist :
Aged :</p> <table border="0"> <tr> <td style="vertical-align: middle;">Routine Age Groups</td> <td style="vertical-align: middle;"> <div style="display: inline-block; vertical-align: middle;"> <div style="display: inline-block; vertical-align: middle;"> 5 ... 33
6 ... 582
7 ... 1127
8 ... 1078
9 ... 1285
10 ... 152
11 ... 593
12 ... 641
13 ... 771
14 ... 83 </div> <div style="display: inline-block; vertical-align: middle; font-size: 3em; line-height: 1;">}</div> </div> <div style="display: inline-block; vertical-align: middle; margin-left: 10px;">Total, 6345</div> </td> </tr> <tr> <td>Specials</td> <td>1062</td> </tr> <tr> <td>Grand Total</td> <td>7407</td> </tr> </table> <p>(b) Found to require treatment 4198</p> <p>(c) Actually treated 2328</p> <p>(d) Re-treated during the year as the result of periodical examination 677</p> | Routine Age Groups | <div style="display: inline-block; vertical-align: middle;"> <div style="display: inline-block; vertical-align: middle;"> 5 ... 33
6 ... 582
7 ... 1127
8 ... 1078
9 ... 1285
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14 ... 83 </div> <div style="display: inline-block; vertical-align: middle; font-size: 3em; line-height: 1;">}</div> </div> <div style="display: inline-block; vertical-align: middle; margin-left: 10px;">Total, 6345</div> | Specials | 1062 | Grand Total | 7407 | <p>(2) Half-days devoted to :—
Inspection, 64 ; Treatment, 326 ;
Total, 390.</p> <p>(3) Attendances made by children for treatment, 2778.</p> <p>(4) Fillings :—
Permanent Teeth, 511 ; Temporary Teeth, —
Total, 511</p> <p>(5) Extractions :—
Permanent Teeth, 655 ; Temporary Teeth, 3548 ;
Total, 4203</p> <p>(6) Administrations of general anæsthetics for extractions, 1.</p> <p>(7) Other operations :—
Permanent Teeth, 472 ; Temporary Teeth, 156 ;
Total 628.</p> |
| Routine Age Groups | <div style="display: inline-block; vertical-align: middle;"> <div style="display: inline-block; vertical-align: middle;"> 5 ... 33
6 ... 582
7 ... 1127
8 ... 1078
9 ... 1285
10 ... 152
11 ... 593
12 ... 641
13 ... 771
14 ... 83 </div> <div style="display: inline-block; vertical-align: middle; font-size: 3em; line-height: 1;">}</div> </div> <div style="display: inline-block; vertical-align: middle; margin-left: 10px;">Total, 6345</div> | | | | | | |
| Specials | 1062 | | | | | | |
| Grand Total | 7407 | | | | | | |

GROUP V.—UNCLEANLINESS AND VERMINOUS CONDITIONS.

- (i.) Average number of visits per school made during the year by the School Nurses, 11.
- (ii.) Total number of examinations of children in the Schools by School Nurses, 18,475.
- (iii.) Number of individual children found unclean, 569.
- (iv.) Number of children cleansed under arrangements made by the Local Education Authority, 436.
- (v.) Number of cases in which legal proceedings were taken :—
- (a) Under the Education Act, 1921, —.
- (b) Under School Attendance Bye-Laws, —.

TABLE V.—Dental Examinations.

SCHOOL	No. of Children examined			No. requiring treatment			No. of parents consenting to treatment	Per-centage
	Boys	Girls	Total	Boys	Girls	Total		
Albert Road ...	198	170	368	101	84	185	64	34·6
Alderman Leach ...	94	155	249	35	62	97	35	36·0
Arthur Pease ...	23	95	118	11	35	46	19	41·3
Beaumont Street	175	265	440	87	106	193	62	32·1
Bondgate ...	161	95	256	62	54	116	33	28·4
Borough Road ...	175	157	332	100	92	192	78	40·6
Cockerton ...	78	82	160	39	46	85	33	38·8
Corporation Road	195	484	679	108	281	389	164	42·2
Dodmire ...	191	223	414	114	111	225	92	40·8
Gurney Pease ...	49	62	111	24	37	61	8	13·1
Harrowgate Hill	310	340	650	149	204	353	143	40·5
Holy Trinity ...	57	74	131	26	35	61	19	31·1
Holy Family ...	37	27	64	27	18	45	7	15·5
North Road ...	166	182	348	92	106	198	76	38·3
Open-Air ...	59	49	108	24	22	46	19	41·3
Reid Street ...	438	146	584	211	79	290	113	38·9
Rise Carr ...	184	174	358	113	94	207	95	45·8
Barnard ...	30	24	54	12	4	16	11	68·7
St. Augustine's ...	206	237	443	112	115	227	93	40·9
St. Cuthbert's ...	50	46	96	31	24	55	19	34·5
St. John's ...	223	195	418	110	93	203	79	38·9
St. William's ...	64	62	126	46	47	93	34	36·5
Central Secondary	64	59	123	43	42	85	19	22·3
Junior Technical...	123	—	123	38	—	38	13	34·2
Grammar ...	136	—	136	77	—	77	33	42·8
High ...	—	56	56	—	25	25	13	52·0
Kendrew St. C. ...	132	—	132	52	—	52	19	36·5
Total ...	3618	3459	7077	1844	1816	3660	1393	38