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County Council of York, East Riding.

ANNUAL REPORT

OF THE

Medical Officer of Health For the Year 1935.

Beberley :

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Administrative County of York, East Riding.

Medical Officers of Health of the several Local Authorities as constituted at the 31st December, 1935.

Local Authority.

Name of Medical Officer.

MUNICIPAL BOROUGHS.

Beverley H. L. Munro, M.D.

Bridlington E. T. Colville, M.D., D.P.H.

Hedon J. S. Soutter, M.B., B.S.

URBAN DISTRICTS.

Driffield J. W. Thomas, M.R.C.S., L.R.C.P.

Filey E. W. Vincent, M.B., Ch.B.

Haltemprice J. M. Hermon, M.D.

Hornsea H. D. Johns, M.D.

Norton J. Y. Woodhouse, M.B.

Withernsea F. R. Cripps, M.B., Ch.B., D.P.H.

RURAL DISTRICTS.

Beverley F. G. Dobson, D.S.O., M.B.

Bridlington P. D. H. Chapman, M.B.

Derwent W. B. Hill, M.D., D.P.H.

Driffield A. Milner, M.B., Ch.B.

Holderness F. R. Cripps, M.B., Ch.B., D.P.H.

Howden F. Wigglesworth, M.B., Ch.B.

Norton L. C. Walker, M.R.C.S., L.R.C.P.

Pocklington A. F. A. Fairweather, M.D.

All the above District Medical Officers hold part-time appointments except in the case of the Borough of Bridlington and the Derwent Rural District, where the officers concerned are restricted from engaging in private practice.

The Scheme under Section 111 of the Local Government Act, 1933, by which only whole-time Medical Officers will be employed, has not yet been formulated, but is at the present time under consideration.

To the Chairman and Members of the Public Health and Housing Committee.

LADIES AND GENTLEMEN,

I have the honour to submit to you the Annual Report on the Health and Sanitary Administration of

the County for the year 1935.

Circular 1492 of the Ministry of Health directs that the Report shall be an Ordinary Report and not a Survey Report, but as the last five yearly Survey was made in 1930, I propose to enlarge slightly the scope of this Report.

The birth rate for the past year is 14'3 per 1,000

of the population, and the death rate 12.0.

The infantile mortality rate is 52.1 and shows a slight increase on the figure for the previous year. It compares favourably with the rate of 57 for the whole

of England and Wales.

By the recent revision of County Districts, the acreage of the County has been reduced by 1,041, and the Administrative County therefore now covers an area of 736,024 acres (or 1,150 square miles).

The estimated population for the year is given by

the Registrar General as 173,600.

The incidence of infectious disease generally showed an improvement on the previous year, and cases of typhoid fever have been conspicuous by their absence. Only one case was reported. The County has also been free from small-pox.

The outstanding feature of the year has been the excellent progress made throughout the County by the Local Sanitary Authorities in the provision of water supplies, aided by substantial grants from the Ministry

and the County Council.

The section of this Report relating to tuberculosis has been prepared by the Tuberculosis Officer, to whom

my thanks are due for his help.

I wish to express my thanks to the members of the Committee for their continued support throughout the year. I am also indebted to the District Medical Officers for their co-operation, and especially to my staff for their constantly loyal help.

I have the honour to be, Your obedient Servant,

R. L. THORNLEY.

County Hall, Beverley, May, 1936. The following Orders, Circulars and Memoranda were received from the Ministry of Health during the year:—

Date. Subject. Costing Returns (Part I.) for 1933-34. 28th January List of Sanatoria, &c., approved for the February treatment of Tuberculosis. 18th February Report issued by the British Medical Association on the treatment of Fractures. March Costing Returns (Part III.) for 1933-34. 4th March Burrow Hill Sanatorium Colony. Prevention and Treatment of Venereal 9th April Diseases—Congenital Syphilis. May Supplemental list of Approved Arsenobenzene Compounds. June Memorandum on steps to be taken in suspected food poisoning cases. 14th June International Agreement for the treatment of Seamen suffering from Venereal Diseases. 17th June Scale of fees for Doctors called in by Midwives. 8th August Housing Act, 1935. 17th September Fumigations with Hydrogen Cyanide. Memorandum on Pneumonia. 7th October 18th October Annual Reports of Medical Officers of Health for 1935. 21st October Diagnosis and treatment of Venereal Diseases. 22nd October. Memoranda on the Housing Act, 1935. 21st November Sanitary Officers (outside London) Regulations, 1935. 25th November Health Services-Annual Returns. 30th December Medical Attention and Treatment of Casuals. 30th December National Health and Contributory Pensions Act, 1935. 31st December Notification of Infectious Diseases— Weekly Return. 31st December Precautions against Anæsthetic Explo-

MINISTRY OF HEALTH INQUIRIES.

sions in Operating Theatres.

The following Ministry of Health Inquiries were held during the year 1935, viz.:—

Date. Subject. 29th January Application by the Pocklington Rural District Council for sanction to borrow £30,000 for works of water supply for 33 parishes in the Rural District. 4th June Application by the Bridlington Rural District Council for sanction to borrow £31,928 for works of water supply for 26 parishes in the Rural District. 9th July Application by the Beverley Rural District Council for sanction to borrow £4,250 for works of water supply and £2,950 for sewerage and sewage disposal in the contributory place of Walkington. 18th July Joint application by the Malton and

Norton Urban District Councils for sanction to borrow the sums of £30,800 and £29,500 respectively, for works of sewerage and sewage disposal in the Urban Districts of Malton and Norton, and in the contributory place of Huttons Ambo in the Rural District of Malton.

27th NovemberApplication by the Derwent Rural District Council for sanction to borrow £8,670 for works of sewerage for the contributory place of Barlby.

PHYSICAL FEATURES AND GENERAL CHARACTER OF THE COUNTY.

The Administrative County covers an area of 736,024 acres (approximately 1,150 square miles) inclusive of inland water although this is almost a negligible proportion. It is now divided into 17 Sanitary Districts consisting of 3 Boroughs, 6 Urban Districts and 8 Rural Districts. The County is purely agricultural, and has no uncultivated areas. The largest town is Bridlington, with an estimated population of 21,010. The seaside resorts on the East Coast are much favoured by the industrial districts of the West Riding during the summer season, and consequently have greatly increased populations during that period.

The rateable value of the County is £846,820, and the estimated product of a penny rate is £3,261, compared with £734,383 and £2,719 respectively in 1930.

Vital Statistics.

POPULATION.

The estimated population for the year according to the Registrar-General is 173,600, a decrease on the the figure for the previous year of 750, but 4,208 more than the population as revealed by the last Census in 1931.

	Census,	Estimated.						
Districts.	1931.	1934.	1935.					
Administrative County	169,392	174,850	173,600					
Urban Districts	72,750	75,850	79,226					
Rural Districts	96,642	98,500	94,374					

Details of the population of the several Sanitary Districts in the County will be found in Table VIII.

BIRTHS AND BIRTH RATES (per 1000 Total Population).

The number of live births registered in the County in 1935 was 2,475, compared with 2,558 in the previous year, a reduction of 83. Births in the Urban Districts numbered 1,083 (giving a rate of 13.7) and in the Rural Districts 1,392 (giving a rate of 14.6). The birth rate for the County was 14.3.

Districts.	Average rate for the ten years 1921—1930	1929	1930	1931	1932	1933	1934	1935
Administrative County	17:9	16.0	15.7	15.7	14.9	14.5	14.7	14.3
Urban Districts	16.6	14.8	15.0	14.2	13.9	13.4	14.6	13.7
Rural Districts	18.8	16.9	16.1	16.7	15.6	15.4	14.7	14.6

In 1934 was recorded the first increase in the birth rate which had taken place since 1919, and it was hoped that this marked the end of the steady decline which had continued over a number of years. The rate for the past year, however, shows a further decrease, and is in fact the lowest figure ever recorded for the County.

The birth rate for the whole of England and Wales was 14.7, compared with 14.8 in the previous year.

The rate in 1930 was 16.3.

ILLEGITIMATE BIRTHS.

Districts.	1928	1929	1930	1931	1932	1933	1934	1935
Administrative County	209	184	174	179	182	195	153	151
Urban Districts	98	77	74	68	63	56	60	55
Rural Districts	111	107	100	111	119	109	93	96

The number of illegitimate births was 151, a reduction of 2 compared with the figure for the previous year. Fifty-five of the births occurred in the Urban Districts and 96 in the Rural Districts.

The proportion of illegitimate births to legitimate was 1 to 15, and the illegitimate birth rate for the whole County was '87 per 1,000 of the population, or practically the same as in the previous year.

DEATH RATES FROM ALL CAUSES (ALL AGES) (per 1000 of the Population).

Districts.	Average rate for the ten years 1921—1930	1929	1930	1931	1932	1933	1934	1935
Administrative County	12.2	12.9	11.7	13.0	12:3	12.4	11.8	12.0
Urban Districts	13.2	13.6	12.5	14.0	13.0	13.7	12.7	12.4
Rural Districts	11.6	12.4	11.2	12.2	11.7	11.2	11.1	11:7

The total number of deaths registered in the East Riding in 1935 was 2,090 (1,074 males and 1,016 females) compared with 2,058 in the previous year, an increase of 32. The deaths in the Urban Districts numbered 975 (485 males and 490 females) giving a death rate of 12.4 per 1,000 of the population, and in the Rural Districts 1,115 (589 males and 526 females) giving a death rate of 11.7.

The death rate for the whole County was 12.0, an increase of '4 compared with the previous year. The lowest rate was recorded in 1923 and again in 1925 when the figure was 11.5.

The death rate for the whole of England and Wales was 11.7, compared with 11.8 in the previous year.

The causes to which the largest number of deaths were attributable were as follows:—Heart Disease, 482; Cancer, 304; Cerebral Hæmorrhage, 145; other circulatory diseases, 147; Senility, 114. The deaths under the first three heads represented 45% of the total deaths recorded.

DEATHS AMONGST CHILDREN UNDER ONE YEAR.

Death rate amongst Infants per 1,000 Live Births.

Districts.	Average rate for the ten years 1921—1930	1929	1930	1931	1932	1933	1934	1935
Administrative County	61	58	53	60	58	57	51	52
Urban Districts	59	54	44	58	60	52	50	44
Rural Districts	63	61	59	62	57	60	52	58

The infantile mortality rate of 52.1 though slightly higher does not compare unfavourably with the figure of 51.2 for the previous year.

There were 129 deaths of infants under one year of age, compared with 131 in 1934. Infantile deaths in the Urban Districts numbered 48 (giving a rate of 44.3), and in the Rural District 81 (giving a rate of 58.2.

The infantile mortality rate for the whole of England and Wales was 57, compared with 59 in 1934.

NOTIFICATION OF BIRTHS ACTS, 1907 and 1915.

The number of live births registered in the County during 1935 was 2,475, compared with 2,558 in the previous year. Of this number 510 occurred in the Boroughs of Beverley and Bridlington (which are independent Maternity and Child Welfare Authorities), leaving a total of 1,965 which occurred in the Sanitary Districts for which the County Council are responsible.

One thousand seven hundred and fifty-two notifications of births were received by the County Council from practitioners, midwives, parents, etc. The percentage of births notified was therefore 89, the same as in 1934.

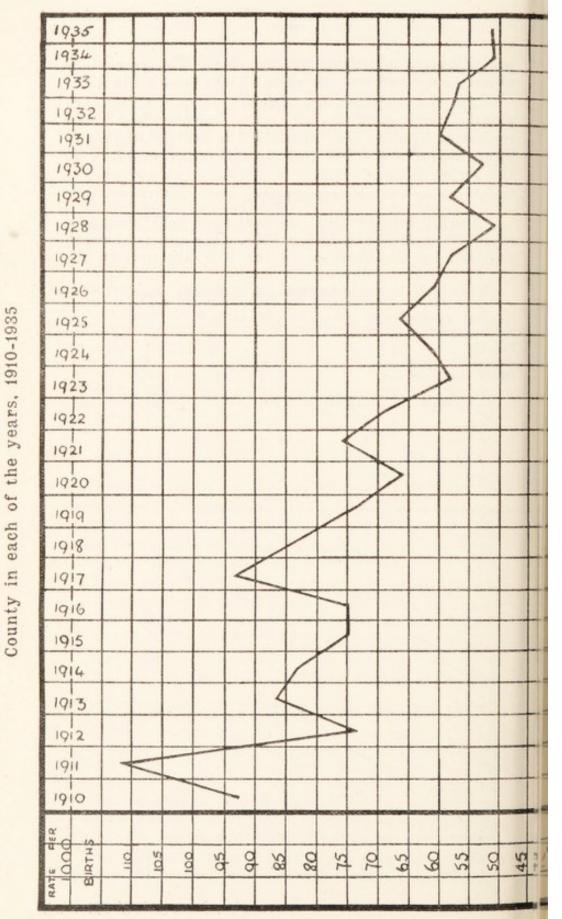
The local Registrars forward to my office each month particulars of all births which have been registered by them but not notified to me, and the above figure includes 182 live births which came to notice in this way.

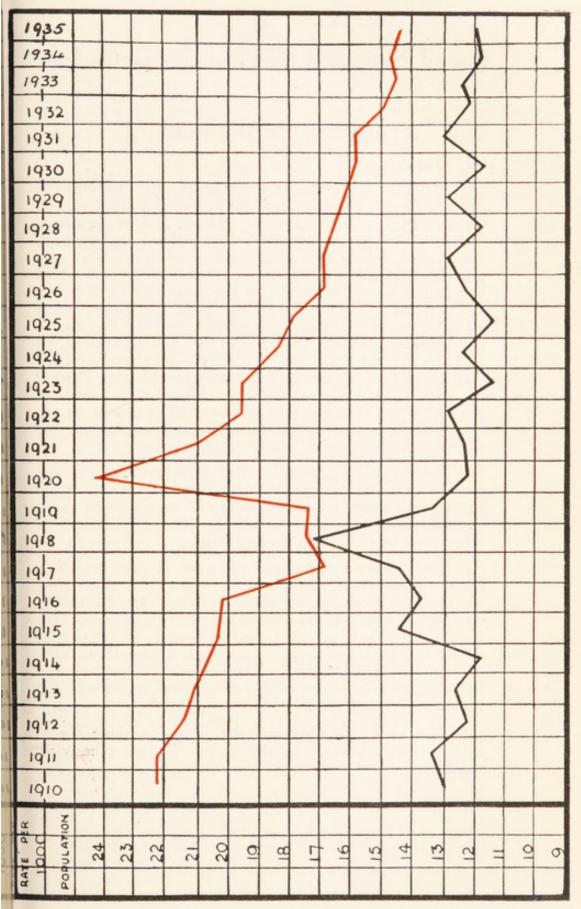
INQUESTS.

During the year, 157 inquests were held, compared with 129 in 1934 and 149 in 1933. The causes of death returned by the Coroners of the four Districts in the County were as follows:—

		District.	Totals.
Natural Causes 20 2	2	4	28
Accidental Death 61 13	10	8	92
Suicide 17 3	3	1	24
Found Drowned 4 2		1	7
Other Verdicts 4 2	-	-	6
Totals 106 22	15	14	157

Diagram showing the Infantile Mortality-rate (per 1,000 births) in the Administrative





General Provision of Health Services for the Area.

NURSING IN THE HOME.

(a) General.

With the exception of those areas, viz., Elloughton and Welton, Ferriby and Swanland, Flamborough, Ganton, Hornsea, North Cave, Norton and Withernsea, which Local Nursing Associations have been established, the Administrative County is without any organised facilities for nursing except in those individual households which subscribe to the East Riding Nursing These subscribers have the benefit of a Association. resident nurse in times of sickness, but as the nurses employed are neither State Registered nor State Certified Midwives, their sphere of activity is very limited, and they cannot, of course, attend confinements except under the direct and personal supervision of a medical practitioner. If the new Midwives Bill is placed on the Statute Book, these nurses will presumably not be allowed to act even as maternity nurses.

From these remarks, it will be gathered that in the greater part of the County non-subscribers to the East Riding Nursing Association are dependent on such nursing assistance as is available from neighbours or other members of their households.

The County Council are prepared to give grants to Local Nursing Associations on condition that they employ a nurse-midwife who will carry out the health visiting of infants and also act as Infant Protection Visitor on behalf of the County Council in the area served by the Association. Four such Associations, viz., Elloughton and Welton, Flamborough, Ganton, and Norton, have been granted £50 per annum, while the Hornsea Nursing Association receives £25 per annum.

The work done during the year by these Local Nursing Associations is shown in the accompanying table.

	ughtor	n			
	nd elton	Flambor'gh	Ganton	Hornsea	Norton
First visits	42	27	24	22	29
Subsequent visits		31	78	29	50
To infants under 1 year:					
First visits	47	38	26	9	49
Subsequent visits	54	82	138	75	208
To children between 1 and					
5 years	212	163	201	26	191
To insanitary premises	-	2		-	
As Infant Protection Visitor		9	48	-	37
Confinements attended:					
(a) With a doctor	10	2	8	16	36
(b) Without a doctor	6	6	7	5	10
Totals	473	360	530	182	610
-	-		-	-	-

A grant of £200 is made annually to the East Riding Nursing Association towards the short training which the newly appointed nurses receive, and a grant of £50 is also made to the Hessle Nursing Association.

The Public Assistance Committee also make the following grants:—

Beverley Town Nursing Association 10 10 0 Elloughton and Welton Nursing Association 5 5 0 Ferriby and Swanland Nursing Association 5 5 0

The Boroughs of Beverley and Bridlington, which are independent Maternity and Child Welfare Authorities, have their own local Voluntary Nursing Associations.

(b) Infectious Diseases.

There is no home nursing of infectious diseases anywhere in the Administrative County. On the other hand there is Isolation Hospital accommodation available for the treatment of all the principal notifiable diseases.

INFANT LIFE PROTECTION.

Visitation under the Children and Young Persons Acts is carried out by the Health Visitors employed by the County Council, and, in the areas of the District Nursing Associations which receive grants from the County Council, by the nurse-midwives employed by those Associations.

At the end of the year there were 74 children registered in 65 homes. This compares with 68 children in 59 homes in 1934. Visits are usually paid at intervals of from four to six weeks according to the circumstances of the home.

It was not found necessary to take action to remove any infant from the care of the foster parent on account of unsatisfactory circumstances.

No. of cases on the Register at 1st January, 1935:—	
(a) Children	68
(b) Foster-mothers	59
No. of children who were registered during the year	36
	2
No. of children who attained the age of 9 years	4
No. of children who were removed to the care of relatives	14
No. of children who left the County	5
No. of children who were transferred to other foster-mothers	
in the County	4
No. of children who were transferred to Public Assistance	
Institutions	1
No. of cases under supervision at 31st December, 1935:—	
(a) Children	74
(b) Foster-mothers	65
	200

The Boroughs of Beverley and Bridlington carry out the duties under the Act in their respective areas.

MIDWIVES.

Seventy-two midwives notified their intention to practise during the year, and the Inspector of Midwives paid 156 visits in the course of her inspections. Two of the women at present in practice are uncertificated, although on the Central Midwives Board Register. Neither of them, however, took more than one midwifery case during the year.

The number of midwives who have given notice of their intention to practise during the past five years is as follows:—

1931										v				53
1932														58
1933														62
1934														60
1935				ĺ							ĺ			72

The figures are however somewhat misleading, as in actual practice only a very small proportion of the Riding has a midwifery service. Broadly speaking, it may be said that midwives are available only in those areas which have local Nursing Associations and in the districts adjacent to the County Boroughs of Hull and York.

Of the 72 midwives from whom notifications of practice were received during the past year, 45 were resident in the County and 21 in adjoining areas, the remaining six being the Health Visitors employed by the Council.

With regard to the 45 women resident in the County, 13 were employed in Maternity Homes, Nursing Homes and Public Assistance Institutions, etc., and 8 by the Local Nursing Associations, leaving a total of 24 actually in private practice.

The following table, which excludes Health Visitors and those midwives who have left the area, shows the number of cases attended in 1935 by 62 midwives from whom returns were received. The figures include both cases attended as midwives and maternity nurses.

No. of cases attended		Midwives residing in County		Midwives residing side Cou		In Institutions	Employed by Nursing Associations	Total Midwives
_		3		6		1	 _	 10
1-4		9		10		2	 -	 21
5-9		4		2		. 5	 1	 12
10-19		3				2	 2	 7
20-39		2	0.00	-	22.0	1	 2	 5
40-59						-	 3	 3
70-89		1		-		2	 -	 3
Over 10	00	1		-		_	 -	 1

The percentage of births in 1935 attended by midwives without a doctor in attendance was 20, compared with 18% in the previous year.

Statutory notices under the rules of the Central Midwives Board were received from 29 practising midwives as follows:—

Sending for medical help	81
Notification of death	11
Notification of stillbirth	13
Laying out a dead body	10
Liability to be a source of infection	9
Artificial feeding	8

The number of medical help forms received from midwives was equivalent to 16% of the cases attended.

During the year fees amounting to £61 5s. 0d. were paid in respect of medical assistance by practitioners called in by midwives under Section 14 of the Midwives Act, 1918. In the same period £8 13s. 0d. was recovered from patients. No scale is in operation in connection with the recovery of fees, but the amount (if any) to be paid by the patient is assessed by the County Medical Officer of Health and reported to the Public Health Committee.

The County Council do not subsidise any of the practising midwives in the Riding.

A certified midwife, who came into the County from the West Riding for holiday duty, did not notify her intention to practice in the Riding, and also failed to comply with certain of the rules of the Central Midwives Board. She was reported to the Board who, after hearing the charges, struck her name off the Midwives' Roll, and cancelled her certificate, and also made an order prohibiting her from attending women in child-birth in any other capacity.

LABORATORY FACILITIES.

The County Council do not maintain a Laboratory of their own, but they have made arrangements with three private laboratories who carry out bacteriological and pathological work on their behalf.

By agreement with all the Sanitary Authorities in the County, half the cost of the examination of specimens is paid by the County Council and half by the District Council concerned.

The Sanitary Authorities in the northern part of the County make use of the North Riding Laboratory at Scarborough, whilst those in the southern part mainly use the Laboratory at the Hull Royal Infirmary. A few examinations are also carried out by the Clinical Research Association in London, but the time occupied in sending specimens to this laboratory and the lack of postal facilities during the week-end, make the use of the local laboratories more convenient.

Certain water analyses are carried out by an analyst in Hull, who, under the Food & Drugs (Adulteration) Act, 1928, is also responsible for the examination of milk and other foods.

Altogether 2,451 specimens were submitted for bacteriological examination during the year at a total cost of £868 7s. 7d. During 1934, 2,906 examinations were made at a cost of £733 17s. 0d.

Details of the work carried out at the laboratories during the year are given in Tables I. and II.

HOSPITALS.

The number of Institutions for the sick and infirm within the County is 21. They may be divided into three classes: (1) Hospitals (general, special and isolation), (2) Public Assistance Institutions, and (3) Convalescent Homes.

HOSPITALS.

(a) General Hospitals. Lloyd Hospital, Bridlington, 45 beds; Beverley Cottage Hospital, 18 beds; Alfred Bean Hospital, Driffield, 18 beds; Hornsea Cottage Hospital, 8 beds; Avenue Hospital, Bridlington, 43 beds.

The first four are Voluntary Hospitals, but the Avenue Hospital, Bridlington, is maintained by the County Council under the Public Health Act, 1875.

- (b) Special Hospitals. Raywell Sanatorium (joint York and East Riding), 68 beds; County Maternity Home, Driffield, 8 beds.
- (c) *Isolation Hospitals. County Isolation Hospital, Driffield, 62 beds; Bridlington Borough Sanatorium, 28 beds; Howden Isolation Hospital, 20 beds; County Small-pox Hospital, Shiptonthorpe, 16 beds.
 - * Bed accommodation on basis of 144 sq. ft. per bed.

PUBLIC ASSISTANCE INSTITUTIONS.

Testitudion		SICK V	WARDS		OTHER WARDS						
Institution	Men	Women		Childr'n under 3	Men	Women		Childr'n under 3	Tota		
Beverley	30	28	-	3	44	28		9	142		
Bridlington	10	22		-	36	24	-	8	100		
*Driffield	33	42	4	2	71	48	-	12	212		
Howden	14	12		2	24	18	2	1	73		
Patrington	10	16	-	2	22	22		1	73		
Poeklington	12	8	_		36	14	-	2	72		

^{*} The numbers given include accommodation for 21 male and 31 female mental defectives.

Children's Homes (Public Assistance).

		Ассоп	imoda
Beverley (2]	Homes)		41
Bridlington (3 Homes)		38
Cottingham ((2 Homes)		20
Driffield (4 1	Homes)		43

The six Public Assistance Institutions are all small, and without any special departments. The beds for the infirmary patients, although in separate wards, are not in detached buildings except at Beverley and Patrington. It was not found necessary to transfer any patient

under the care of the Public Assistance Committee to any out-County Institution owing to lack of accommodation in the County, but all major operative surgery and specialist treatment, e.g., X-ray, is carried out by transference of the patient to the nearest General Hospital.

Convalescent Homes.

Withernsea (Annexe of Royal Infirmary, Hull), Withernsea (Yorkshire Home for Mothers and Babies), Hornsea (Annexe of Children's Hospital, Hull), Bridlington (St. Anne's Convalescent Home).

The three latter Institutions are closed during the winter.

The total number of beds available for sick and chronic patients within the County would appear to be 804, made up as follows:—

Public	Assistance	Institutions	672
General	Hospitals		132

With an estimated population of 173,600, this would give a ratio of 4.6 beds per 1,000 of the population. In addition, a large number of persons in the Administrative County avail themselves of the neighbouring General Hospitals in Goole, Selby, Scarborough, York and Hull.

The question of Hospital accommodation in the County has recently been receiving consideration both as regards its adequacy and also in connection with a criticism that the existing accommodation provided at Howden, Patrington and Pocklington Public Assistance Institutions is not up to the standard of modern requirements. In an agricultural county such as the East Riding, the problem is a very difficult one to deal with, for while one would naturally like to have a well-equipped modern hospital under the control of a resident medical officer, the very scattered population (one person to four acres) and the distance involved in the transport of acute cases, so limits the area which could be served that the establishment of a large hospital is hardly justified. As an alternative, the question of building a smaller hospital under the Public Health Acts must be considered; otherwise the existing Public Assistance Institutions will have to be modernised, and this, of course, will entail considerable expenditure. The whole matter is still under review.

MATERNITY HOMES.

A small Maternity Home with accommodation for two or three patients was established by the County Council at Driffield in 1921. The accommodation now consists of 8 beds in two wards and the number of admissions has steadily increased each year. The following table gives the number of patients admitted over a period of five years:—

1931														79
1932											,			86
1933														105
1934														121
1935			-				-	-		0	-	-		132

The ground floor of the Home also provides accommodation for an Infant Welfare Centre, Orthopædic Clinic, and Dental Clinic.

There is a resident staff of two State Certified Midwives under the supervision of the Superintendent Health Visitor, who also lives on the premises.

(a) Number of cases delivered by midwives 11	8
(b) Number of cases delivered by doctors	2
(c) Number of cases transferred to other Institutions	4
(d) Number of cases admitted for ante-natal treatment and discharged before confinement, etc	
Average duration of stay	s.
Number of cases in which medical assistance was required:	
(a) Ante-natal	2
(b) Post-natal	25
Number of maternal deaths	1.

The sum of £377 13s. 0d. was received in fees from patients admitted to the Home, compared with £416 0s. 10d. in 1934 when there was 121 admissions.

In addition to the four cases mentioned above who were transferred from the Driffield Home to other Institutions (three to the Hull Municipal Maternity Home on account of puerperal pyrexia, contracted pelvis and white leg respectively, and one to the Driffield Isolation Hospital for puerperal pyrexia), thirty-three women were sent to the Hull Municipal Maternity Home, thirteen to the York Maternity Hospital, and three to the Lloyd Hospital, Bridlington. The reasons for admission were as follows:—

Albuminuria	7
Vaginal discharge	5
Cæsarean section	5
Ante-partum hæmorrhage	4
Previous obstetric history	3
Puerperal pyrexia	3
Fibroid	2
Abortion	2
Other reasons	18

Three of the patients died in hospital, the causes of death being certified as (1) puerperal peritonitis, (2) eclampsia, and (3) heart disease accelerated by confinement.

Three children were detained in the Infants' Hospital at the Hull Municipal Maternity Home after the termination of their mothers' treatment for the following reasons:—(a) marasmus, (b) gastro-enteritis, (c) mother's death in the Home.

Accommodation for maternity patients is also provided in the Public Assistance Institutions at Beverley, Driffield, Howden, Patrington and Pocklington. During the year, twenty confinements took place in the Maternity Wards at these Institutions.

At the Avenue Hospital, Bridlington, where there are seven beds set aside for maternity cases, there were 73 confinements in 1935. This high figure is to be explained by the fact that the local population from which patients are admitted is now approximately 21,000, apart from any admissions from the adjoining rural districts, and also because the supposed stigma of Poor Law assistance is obviated by the Hospital being established under the Public Health Acts.

INFANT WELFARE CENTRES.

Infant Welfare Centres have been established in eleven places. Eight of the centres are under the control of the County Council and the remaining three (at Ganton, Hornsea and Long Riston respectively) are maintained by voluntary bodies. The centres established by the County Council are attended by one of the Council's School Medical Officers, whilst the voluntary centres are visited by a medical practitioner living in the district.

The equipment for all the centres is provided by the County Council.

Since the end of the year under review suitable rooms have been obtained and centres opened in Filey and Willerby (near Hull).

The premises at which the Barlby and Driffield centres are held are the property of the County Council. All the other centres are held in rented premises, and a small charge is paid to meet the cost of heating, lighting, etc. Meetings are held every four weeks at Ganton, Hornsea, Long Riston, Market Weighton, Pocklington and Preston, and fortnightly at the remaining centres. All sessions are held in the afternoon.

Particulars of the attendances are given in the following table:—

8	No. who	attended for	first time.	ATTEN	DANCES.
CENTRE,	Children under 1.	Children between 1 and 5.	Expectant Mothers.		Average per Session.
Barlby	20	4	2	223	10
Cottingham		16	-	1357	54
Driffield	60	6	_	593	24
Ganton	19	12	-	355	27
Hessle	54	17	_	889	36
Hornsea		3	5	341	28
Long Riston		4	_	178	15
Market Weighton		6	2 -	269	21
Pocklington		4	7	332	28
Preston		- 6	_	440	34
Withernsea		8	_	491	20
			_		_
All Centres	387	86	16	5468	28
			_		

It is gratifying to note that the total attendances have steadily increased from 4,381 in 1930 when there were ten centres, to 5,468 in the past year.

ORTHOPAEDIC TREATMENT.

The facilities available in the County for the orthopædic treatment of children under the age of 12 years have proved quite satisfactory. Beds are secured for any child under this age at the Yorkshire Children's Orthopædic Hospital at Kirbymoorside, whether the

crippling is due to tuberculosis or any other cause, and there were 20 admissions during the year. Fourteen cases were sent in by the Education Authority, 3 by the Maternity and Child Welfare Committee, and 3 patients were admitted on account of tuberculosis of bones and joints.

After-care supervision and treatment is available at clinics at Driffield, Malton, Scarborough and York, which are held monthly. Each of these clinics is visited by an Orthopædic Surgeon who is also the Medical Superintendent at the Orthopædic Hospital at Kirbymoorside. In addition to the children who attend the clinics, adult patients are also seen, generally at the request of the practitioner in charge of the case. A total of 342 visits to these four clinics was paid by 98 children during the year. The travelling expenses incurred in attending the clinics by patients in necessitous circumstances are refunded on the recommendation of the County Medical Officer of Health.

In the case of crippled adult patients, the position as regards in-patient treatment is not quite so satisfactory, for although cases of crippling due to tuberculosis are dealt with by admission to the Orthopædic Hospital at Oswestry or elsewhere, other cases of adult crippling have to be dealt with through the Public Assistance Committee. If training is desired, the Committee responsible for secondary education are prepared to assist suitable cases, but very few applications are received. There were 14 admissions of adult patients to hospitals under the Tuberculosis Scheme during the year.

HEALTH VISITORS.

Maternity and Child Welfare work is carried out by the Superintendent Health Visitor and a staff of five assistants, an increase of one since the last Survey Report. The additional appointment was made as a result of a criticism by the Ministry of Health following their survey of the Health services of the County that this branch of the Council's activities was under-staffed.

Each Health Visitor works in a specified area in the County, and besides the supervision of young children is responsible for the Infant Welfare Centres in her district. To facilitate transport small motor cars have been provided.

The total number of live births registered in the area for which the County Council is responsible was 1,965. Each notified birth is visited at the first

opportunity, and the child kept under supervision until it attains the age of five years. The record cards are then transferred to the Education Authority, who are responsible for future supervision. Health visiting in the areas served by the local Nursing Associations which receive grants from the County Council, is carried out by the nurse-midwives employed by them so as to avoid overlapping. Inclusive of cases supervised by the district nurses, a total of 775 visits was paid during the year to expectant mothers, and 16,873 to children.

The following table shows the work done by the whole-time Health Visitors:—

To expectant me		
First visits		
Subsequent	visits	

Daniel trains	***
To infants under 1 year of age:	
First visits	2,296
Subsequent visits	
To children between 1 and 5 years	9,121
To insanitary premises	11
As Infant Protection Visitor	391

Total16,097

224

117

Details of the work carried out by the nursemidwives mentioned above will be found under the heading "Nursing in the Home."

In the Boroughs of Beverley and Bridlington maternity and child welfare work is carried out by the local Councils as these Authorities have established Maternity and Child Welfare Committees.

During the year, arrangements were made for two members of the Health Visiting staff to attend a postgraduate course which was held locally.

SUPPLY OF MILK.

Under the provisions of the Maternity and Child Welfare Act, 1918, milk is supplied free of cost to nursing and expectant mothers and to infants under the age of 5 years. Recommendations for a free supply are made by the Health Visitors and Nurse-midwives, and the usual allowance is one pint per day. Orders normally cover a period of one month. The milk is obtained from the tradesman who usually supplies the householder concerned. The expenditure on milk

supplied during the year was £221 6s. 7d. One hundred and thirty-four new applications were received, all of which were granted. Applications for a renewal of the allowance numbered 251.

No orders for dried milk or patent foods are issued, but cod liver oil emulsion, etc., can be purchased at the Infant Welfare Centres at cheap rates from supplies which have been obtained at wholesale prices.

NURSING HOMES REGISTRATION ACT, 1927.

One certificate of registration was surrendered during the year as the holder obtained more suitable premises and an application for the registration of the new premises was granted.

A midwife resident in the County applied for the registration of her premises as a Maternity Home during the year. The premises concerned, however, were not considered suitable for the purpose, and the applicant was advised accordingly and decided to make enquiries as to more suitable premises.

There are five registered Nursing Homes in the County exclusive of those in the Borough of Bridlington, where the County Council have delegated their powers and duties under the Act to the local Council. All the Homes, which are very small, were inspected by the Superintendent Health Visitor, who found no cause for adverse comment during the year.

Bye-laws have not been adopted.

Exemption under Section 6 (1) of the Act has been granted to the four local Voluntary Institutions which are not carried on for profit.

MATERNAL MORTALITY.

According to the statistics issued by the Registrar General, the number of maternal deaths which occurred in the County during the year was 14. Three of the deaths were due to sepsis, and the remaining 11 to other puerperal causes.

There was one death of a mother for every 177 births, giving a mortality rate of 5.66 per 1,000 births. As in former years, I append a table showing the rates over a series of years.

	Puerper	al Sepsis.	Otl Paerper	ier al causes	All C	auses.	No. of	
Year. Deaths		Rate per 1000 births.	Deaths.	Rate per 1000 births.	Total Deaths.	Rate per 1000 births.	live births.	
1920	2	.52	10	2.59	12	3.11	3861	
1921	3	-87	10	2.90	13	3.77	2445	
1922	2	.62	13	4.03	15	4.65	3229	
1923	5	1.54	12	3.70	17	5.24	3244	
1924	8	2.61	9	2.93	17	5.24	3067	
1925	3	1.00	8	2.66	11	3.66	3004	
1926	4	1.40	4	1.40	8	2.80	2858	
1927	3	1.04	5	1.73	8	2.77	2888	
1928	3	1.04	10	3.49	13	4.53	2864	
1929	5	1.76	11	3.89	16	5.65	2830	
1930	2	.74	7	2.61	9	3.35	2679	
1931	5	1.90	-11	4.17	16	6.07	2635	
1932	1	.39	3	1.18	4	1.58	2537	
1933	2	.80	9	3.62	11	4.42	2489	
1934	7	2.74	11	4.30	18	7.04	2558	
1935	3	1.21	11	4.44	14	5.66	2475	

The rate of 5.66 for the year under review shows an improvement on that of 7.04 for the previous year.

The rate for the whole of England and Wales is 4.10.

During the last ten years, the average rate in the County works out at 4.4, which compares favourably with the figure of 4.3 for the whole of England and Wales.

From the table it will be seen how very much the rate has varied from year to year, and for this no satisfactory explanation is forthcoming.

In this connection it might be of assistance to recapitulate briefly the maternity services provided by the County Council. Facilities exist for the admission of urgent and difficult cases to Maternity Hospitals in Hull and York. Normal cases can be admitted to the Maternity Home at Driffield, the Avenue Hospital at Bridlington, or to one of the Public Assistance Institutions.

During the year arrangements were made for all uninsured women who have engaged a midwife to attend them in their confinements, to receive two ante-natal examinations. The examinations, which are made early in pregnancy and again at about the 36th week, are to be carried out by the practitioner who would be called in by the midwife if medical assistance was found necessary during the confinement. On account of the scarcity of midwives in the County, it is not expected that many patients will be able to take advantage of the scheme, and although the practising midwives were advised of the facilities provided by the scheme in November, only four patients were sent for examination up to the end of the year.

An ambulance is available for transport, and arrangements have been made for the examination of pathological material at one or other of the laboratories with which the Council have agreements.

On the other hand, the County has a very poor midwifery service, for, generally speaking, except in the vicinity of the neighbouring County Boroughs of Hull and York, and in those areas in which local Nursing Associations have been established, there are practically no midwives. If, as a result of the Midwives Bill now before Parliament, the supply of midwives is considerably augmented, then I think it can be said that the Council have gone a long way towards providing the maternity services which were outlined as essential in the Interim Report of the Departmental Committee of the Ministry of Health on Maternal Mortality.

These services were as follows: -

 The provision in every case of the services of a qualified midwife to act either as midwife or maternity nurse.

(2) The provision of a doctor to carry out ante-natal and post-natal examinations in every case, and to attend during pregnancy, labour and the puerperium, as may prove necessary, all cases showing any abnormality.

(3) The provision of a consultant, when desired by the doctor in attendance, during pregnancy, labour

and the puerperium.

- (4) The provision of hospital beds for such cases as need institutional care.
- (5) The provision of certain ancillary services (e.g., transport, sterilised equipment, laboratory facilities).

As in former years, maternal deaths which occurred in the Administrative County (excluding the Borough of Bridlington) were investigated on behalf of the Ministry of Health.

A short summary of eleven of these deaths is given below:—

- (1) Patient, aged 43, had had five previous pregnancies. Confined to bed with albuminuria and cedema for seven weeks before removal to Hospital, where she became comatose and died (undelivered) from eclampsia the following day.
- (2) First confinement. Patient aged 28. Under the care of practitioner for pyelitis and severe heart disease with failing compensation. Removed to Hospital. Child born naturally, but patient died one month later from heart disease.
- (3) Patient, aged 41, had had several previous confinements. Sent to Hospital when first seen by practitioner on account of incomplete abortion. Death from septicæmia (inquest).
- (4) Patient aged 29. Fifth pregnancy. No ante-natal care or hæmorrhage. Practitioner sent for by handywoman. Placenta prævia diagnosed. Second practitioner called in instrumental delivery under chloroform. Patient collapsed and died soon after delivery.
- (5) First pregnancy. Patient aged 27. Delivery by forceps. On the following day, patient found to be blanched due to hæmorrhage in the night. Seen by practitioner, who was again sent for the same afternoon. Removed to Hospital for blood transfusion, but died shortly after admission.
- (6) Patient, aged 41, had had nine previous pregnancies, all of which had been normal. Attended by midwife. Stillborn baby. No hæmorrhage but retained placenta, then severe hæmorrhage. Practitioner sent for, but placenta could not be expressed. Patient died before she could be removed to Hospital.
- (7) Patient aged 28. Second pregnancy. Under ante-natal supervision. Confinement normal. Child born before arrival of practitioner, who saw patient at 3 a.m. Stayed one hour, but was sent for again at 6-30 a.m. On arrival, found patient had died suddenly. Certificate—coronary embolism.
- (8) Patient, aged 32, had had two previous confinements. Under care of midwife. Normal confinement on 9th August. On the third day rise of temperature occurred. Admitted to Hospital on 14th August, but death took place five days later from puerperal peritonitis.

- (9) First pregnancy. Patient, aged 26, was under ante-natal supervision. Had mitral stenosis. Forceps delivery torn perineum. On eighth day, severe hæmorrhage. Sent to Hospital for blood transfusion, but died on the day of admission.
- (10) First pregnancy. Patient aged 32. Practitioner called in on account of hemorrhage. Placenta pravia. Very severe hemorrhage. Ambulance sent for to remove patient to Hospital, but owing to delay practitioner gave chloroform and delivered child. Death took place suddenly shortly afterwards.
- (11) First pregnancy. Patient aged 25. Under careful antenatal supervision. On 2nd December urine showed slight trace of albumin. Patient left district on 8th December, and although requested to do so immediately, did not place herself under medical care. On 27th December a practitioner was called in and diagnosed ante-partum eclampsia. Patient immediately sent to Hospital, but died on the day of admission (undelivered).

A review of the above particulars shows that certain deaths, e.g., those due to heart disease complicating pregnancy, and to eclampsia, are unavoidable.

INSTITUTIONAL PROVISION FOR UN-MARRIED MOTHERS, ILLEGITIMATE INFANTS AND HOMELESS CHILDREN.

The County Council have made no special provision for the accommodation of un-married mothers, but cases may be admitted to any of the Public Assistance Institutions in the County which have maternity wards available. The East Riding Association for Purity and Social Welfare, however, maintain a small Home in Driffield, to which un-married mothers may be admitted irrespective of their religious denomination. Patients are also occasionally admitted to the Council's Maternity Home at Driffield.

INSTITUTIONAL PROVISION FOR THE CARE OF MENTAL DEFECTIVES.

At the time of the last Survey Report in 1930, the County Council, in conjunction with the City of York, had just purchased the estate known as Brandesburton Hall for the purpose of a Mental Defective Colony.

Progress has since been made with the scheme of adaptation. Building operations are now in progress for the erection of three pavilions for the accommodation of male patients, both under and over 16 years of age. When these are completed, the accommodation available

will be for 160 male and 100 female patients. In addition, the erection of a central workshop, houses for male staff, and a lodge, is now to be proceeded with.

The estate is pleasantly situated near the village of Brandesburton, off the main Beverley—Bridlington road. It occupies a site of 98 acres. It is lighted by electricity from the public supply, and supplied with water from

the City of Hull Waterworks.

The Board of Control have also certified a part of the Driffield Public Assistance Institution for the reception of 31 female and 21 male adult patients, but with this exception there is no other certified accommoda-

tion in the Administrative County.

Twenty-four defectives are also maintained by the County Council in ten Institutions in various parts of the Country, but they will be transferred to Brandesburton at the first opportunity. The largest number, namely, 6, is under care at the Royal Albert Institution, Lancaster.

AMBULANCE FACILITIES.

(a) Infectious Cases.

Motor ambulances are maintained at the Smallpox Hospital at Shiptonthorpe and at the three Isolation Hospitals in the County. A reserve ambulance has also recently been purchased for the County Isolation Hospital at Driffield to obviate any delay in the prompt removal of patients.

(b) Non-Infectious and Accident Cases.

The Red Cross Society have one ambulance stationed

in Bridlington.

The Standing Joint Committee maintain an ambulance in Beverley which is primarily for police use, but is also available to the general public. A charge of 9d. per mile is made, but in necessitous cases this charge is reduced or remitted according to the circumstances of the patient. Journeys made during the year numbered 234, with a total mileage of 5,887. The sum of £214 11s. 5d. was received in fees.

There is no guaranteed night service, and patients must be accompanied by a friend or relative, as no attendant is carried.

PUBLIC HEALTH (VENEREAL DISEASES) REGULATIONS, 1916.

Clinics for the out-patient treatment of East Riding residents suffering from Venereal Disease are available at Hull, Leeds, Scarborough and York. The number of new patients treated during the year was 94, compared with 75 in 1934 and 90 in 1933.

No irrigation centres apart from the Clinics have been established in the County, nor has the need for them yet arisen.

Patients in necessitous circumstances are assisted with the payment of their travelling expenses to enable them to attend the Clinics regularly for treatment. During the year, 15 persons, who paid 252 attendances, were assisted at a cost of £26 14s. 6d.

Material for pathological examination is sent by practitioners to the Pathological Department of the Hull Royal Infirmary. Specimens taken in the four Clinics are, of course, examined in the Clinic laboratories.

Practitioners who require supplies of arsenobenzene compounds, and who possess the necessary qualifications laid down by the Regulations to make use of them for the domiciliary treatment of patients, are referred to the nearest Clinic, where stocks of the drug are kept.

Propaganda work is carried out by the British Social Hygiene Council, to whom a grant at the rate of 3s. 0d. per 1,000 of the population is paid.

The following table gives particulars of the East Riding patients who were treated at the Treatment Centres in 1935: —

Hull.	York.	Leeds.	Scarborough.	Total 1935	Total 1934
13	3	-	1	17	15
	-	-	-	2	3
30	8	-	9	47	37
13	9		6	28	20
58	20	-	16	94	75
901	645	15	503	2064	1370
63	112	9	47	231	199
63	64	-	-	127	93
	13 2 30 13 58 901	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$

Sanitary Circumstances of the Area.

WATER SUPPLIES.

Speaking generally, it could be said of the rural districts of the County that they were until recently very inadequately provided with public water supplies. In fairness, however, to the various Sanitary Authorities concerned, it has to be admitted that in thinly populated agricultural areas the initial capital expenditure which would have had to be incurred to provide adequate supplies was an insuperable obstacle, and private enterprise is not sufficiently philanthropic to incur big expenditure on schemes which would show very little, if any, return on their capital outlay. Early in 1930 the Finance Committee of the County Council having regard to the duties imposed on the Council by the Local Government Act, 1929, appointed the late Mr. Lapworth, D.Sc., F.G.S., M.Inst.C.E., to make a report. The terms of reference were: -

- (1) To report upon the possible sources of water supply for the East Riding.
- (2) To report upon the best means of conserving such supplies; and
- (3) To report upon the use of these supplies for suitable areas.

When the report was received, four Water Supply Schemes were proposed, covering separate areas of the County, also combinations of these Schemes, and in addition a complete Scheme, which was the most comprehensive in as much as it covered the whole of the County and would conveniently link up with all the existing sources of supply. The cost, however, was estimated at £722,000, and there the matter rested. Some time later, in the hope that local sanitary authorities would take advantage of the offer of grants from the Ministry of Health towards water supply schemes, the County Council adopted a basis on which they were prepared to give financial assistance towards approved schemes in cases where the cost would otherwise be more than the locality could reasonably be expected to bear.

In 1933, the County Council were approached by the Norton Rural District Council under Section 57 of the Local Government Act, 1929, for a grant towards two regional water supply schemes for their district. Grants amounting to £3,050 were made, and, in addition, they also obtained a Government grant of a similar amount, with the result that practically every village in that area now has a piped water supply. This application was followed by others from the Rural Districts of Bridlington, Pocklington, Driffield, Howden and Riccall for grants towards regional schemes, all of which have been granted. As a result, there are now, or shortly will be, very few villages in the County without a proper water supply. This happy state of affairs has, of course, been helped by the fact that the area of supply of the City of Hull, which includes Hornsea and Withernsea, takes in practically the whole of the Holderness Rural District as well as part of the Rural District of Beverley. The town of Howden and the neighbouring villages of Asselby and Barmby Marsh were supplied with water from the Borough of Goole.

Grants amounting to £70,556 have been promised by the County Council under Section 57 of the Act towards water supply schemes estimated to cost £305,876. The amount allocated to the County by the Ministry of Health under the Rural Water Supplies Act, 1934, to date is £48,800.

The County Council have also made grants amounting to £6,372 towards the cost of sewage schemes involving an expenditure of £45,701.

Housing.

By the Housing Act, 1935, the period of operation of the Housing (Rural Workers) Acts, 1926 and 1931, has been extended from the 1st October, 1936, to the 24th June, 1938. Certain minor amendments of the Acts are also made.

Five applications for grants under the Council's scheme were received during the year. In three cases assistance was refused, while in the remaining cases grants of £250 and £60 respectively were made. The larger grant was given in respect of improvements to four cottages at West Heslerton, and the other for the conversion into one dwelling house of two cottages at Hemingbrough.

Assistance has now been given by the County Council to six applicants in respect of twenty-four dwellings, the total amount of the grants being £1,452.

During the year the Bridlington Rural District Council intimated that they desired to make application to the Minister of Health for the administration of the Housing (Rural Workers) Acts to be transferred to them so far as the Rural District was concerned. The County Council decided to raise no objection to the District Council's application, which was subsequently granted by the Minister.

Under Section 32 of the Housing Act, 1930, the County Council are required from time to time to consider the position in the Rural Districts as regards housing conditions of the working classes. The several Rural District Councils in the Riding have accordingly been requested to furnish information as to the position in their respective areas, and the following is a

summary of the replies received :-

	No. of houses at 31st December, 1935, known to be unfit for human habitation or otherwise requiring to be demolished.	No. of houses erected by the Rural District Council during the year ended 31st December, 1935.	No. of houses contemplated for erection by the Rural District Council in the year ended 31st December, 1936.
Beverley R.D.C	Information not available pending Sur- vey of District	5	Information not available pending com- pletion of Survey
Bridlington R.D.C	22	Nil.	16
Derwent R.D.C		16	26
Driffield R.D.C	106	(including 32 houses nearing completion)	35
Howden R.D.C	70	26	22
Holderness R.D.C	31	Nil.	36
Pocklington R.D.C	4.0	(including 16 houses commenced)	28
Norton R.D.C	56	Nil.	38

The Surveys which are being undertaken by the District Councils under the provisions of the Housing Act, 1935, will furnish useful information as to housing

conditions in the various areas.

Applications under Section 34 of the Housing Act, 1930, for the payment of contributions at the rate of £1 per house for 40 years were made during the year by three Councils, the number of houses concerned being 38. The number of houses approved by the County Council under this Section of the Act now totals 190. The grants are, of course, payable only in respect of houses provided for members of the agricultural population.

Inspection and Supervision of Food.

MILK (SPECIAL DESIGNATIONS) ORDER, 1923.

During the year the Ministry of Health granted a licence for the production of "Grade A (Tuberculin Tested)" Milk to a producer in Hunmanby. One licence for this grade of milk was surrendered, and the producer was subsequently granted a "Grade A" licence by the County Council. At the end of the year 10 licences for "Certified" and one for "Grade A Tuberculin Tested)" milk were in force.

Nineteen new licences for the production of "Grade A" milk were granted by the County Council during the year. One producer who had held a licence for some years surrendered it on removal to another farm which is not licensed for the production of graded milk. At the 31st December, 1935, there were therefore 27 "Grade A" licences in force in the County. Twelve of the producers bottle the milk on the premises. The increase in the number of licences issued as compared with former years is due, of course, to the introduction of the accredited milk scheme.

In March, 1935, the Public Health Committee decided, in view of the operation of this scheme, to review the procedure for the issue of licences for "Grade A" milk and the arrangements for the supervision of licensed premises and herds. With a view to encouraging milk producers to obtain licences for the production of this grade of milk, the following arrangements were adopted:—

(a) On first application for a licence.

(1) The clinical examination of the milch cows in the herd which is required to be made under the Order shall be carried out by the County Veterinary Inspector, and a fee of 1s. 0d. per cow with a minimum of £1 1s. 0d. per herd shall be paid by the applicant in respect of such examination.

(2) The applicant shall satisfy the Sampling Officer that his arrangements for the production, storage, treatment and distribution

of the milk are satisfactory.

(3) A sample of milk produced by the herd shall be taken by the Sampling Officer for examination for bacterial content, the cost of such examination to be borne by the applicant.

- (b) During the currency of a licence.
 - (1) The clinical examination of the milch cows in the herd, which is to be made once in every three months, shall be carried out by the County Veterinary Inspector free of cost to the licensee.
 - (2) The Sampling Officer to take such action as may be necessary from time to time to ensure that the arrangements for the production, storage, treatment and distribution of the milk continue to be satisfactory.

A scale of fees at a reduced rate was also adopted for licences to sell "Grade A" milk issued after the 31st March in any year.

Samples of graded milk examined for bacterial content gave the following results:—

"CERTIFIED" MILK.

Bacteria per 1 c.c.

Total	Samples.	Under 1,000.	1,000 to 5,000.	5,000 to 30,000.	Over 30,000.
	76	11	47	13	5

Bacillus Coli was present in 1/10th c.c. on 12 occasions.

The permissible limit for this grade of milk is 30,000 bacteria per 1 c.c. and Bacillus Coli must not be present in 1/10th c.c.

"GRADE A" MILK. BACTERIA PER 1 C.C.

Total Samples.	Under 1,000.	1,000 to 5,000.	5,000 to 30,000.	30,000 to 200,000.	Over 200,000.
122	3	52	62	5	_

Bacillus Coli was present in 1/100th c.c. on 2 occasions.

The permissible limit for this grade of milk is 200,000 bacteria per 1 c.c. and Bacillus Coli must not be present in 1/100th c.c.

It has not been necessary to proceed against any of the holders of "Grade A" licences for contravention of the regulations, but their attention is always drawn to unsatisfactory samples. Complaints have, however, arisen in connection with the quarterly inspections made by the County Veterinary Surgeon owing to the fact that in many instances the beasts have not been clearly marked by branding on the horn or hoof, nor has the herd book always been kept strictly up to date. Warnings

on these points have been given to the producers concerned, and it is hoped that this action will result in future in producers complying with the conditions laid down, but if further infringements come to light the question of taking further action against the offenders will have to receive consideration.

Information was received during the year that a milk dealer in the County who did not hold a licence was using the designation "Grade A" in connection with the sale of milk. Proceedings were instituted and a fine of £3 was imposed. The dealer in question was subsequently granted a licence to sell "Grade A" milk.

TUBERCULOSIS ORDER, 1925.

Under the above Order the County Council have power to slaughter any beast which is suspected to be tubercular, and to pay compensation.

The following are details of the work done during the year:

No. of animals slaughtered	46
Tuberculosis of the Udder	17
Tuberculous emaciation	22
Chronic cough and showing definite clinical	~
signs of tuberculosis	
Advanced cases	
Not advanced	6
Not advanced	
Cows not in milk	13
Other bovine animals	5

The figures given above include the animals detected as a result of the administration of the Milk and Dairies (Consolidation) Act, 1915 (vide infra). During the past five years the number of animals slaughtered has been as follows:—

1931	+			,		+		¥		4		,	'n	-		h		,	,			50	
1932							,								*					+		57	
1933			,																			43	
1934					,												,			,		46	
1935																						46	

MILK AND DAIRIES (CONSOLIDATION) ACT, 1915, and

MILK AND DAIRIES ORDER, 1926.

There is no systematic inspection of milch cows by whole or part-time Veterinary Surgeons (except in the Borough of Beverley where an arrangement has been entered into with the Town Council). Samples of milk are, however, taken regularly in the rest of the County for the detection of tubercle bacilli by biological methods. The examinations are carried out at the North Riding Laboratory at Scarborough. When a sample is found to be positive the herd or herds concerned are clinically examined by the County Veterinary Officer, and further samples of milk taken if the examination fails to reveal any diseased beast. These samples are usually taken from groups of not more than four animals, but in any case where a beast is suspected to be suffering from tuberculosis, an individual sample is taken.

In the year under review, 173 bulk samples were examined, of which number 10 or 5.8 per cent. were reported to contain tubercle bacilli. In 1934, 8 positive results were obtained from 201 samples, and in 1933 the numbers were 3 and 191 respectively. Investigations were made in each of the ten positive cases with the following results:—

- (1) Herd of 11 cows examined. No diseased beast detected. One cow showed some induration of the udder but tubercle bacilli were not found on microscopical examination of its milk. Animal isolated and sample taken for biological examination. Result positive, animal slaughtered. Samples taken from the remainder of herd with negative results.
- (2) Herd of 16 cows examined. One cow showed evidence of tuberculosis of the udder. Diagnosis confirmed by microscopical examination of its milk. Animal slaughtered.
- (3) Herd of 34 cows examined. One animal found with indurated udder. Sample of milk taken for biological test with positive results. Animal slaughtered.
- (4) Herd of 12 cows examined. No diseased beast detected. Milk samples taken. One from group of four cows positive. Further clinical examination of these animals failed to reveal the diseased beast. Individual samples taken with negative results. A further bulk sample which was taken from the same source also proved negative.
- (5) Herd of 20 cows examined. One animal in milk detected with clinical evidence of tuberculosis of the udder. Animal slaughtered. Milk samples taken from remainder of herd one of which proved positive. Animal slaughtered.
- (6) Herd of 14 cows examined. No diseased beast detected. Milk samples taken with negative results.
- (7) Herd of 10 cows examined. No diseased beast detected. Since the positive sample had been taken one animal had been sold to a butcher and the head, tongue and lungs of this beast were condemned. Presumably this was the affected animal, as milk samples taken from the remainder of the herd proved negative.

- (8) Milk produced in the West Riding but sample taken from retailer in East Riding. Herd of 46 cows examined. One cow found to be suffering from tuberculosis of the udder. Animal slaughtered.
- (9) Two herds involved of 8 and 10 animals respectively. No diseased beast detected in either herd, and the milk samples which were taken all proved negative for tubercle bacilli.
- (10) Herd of 12 cows examined. One aged animal showed slight induration of the udder, but microscopical examination of its milk failed to reveal any acid fast bacilli. Milk samples taken from whole herd for biological examination, and the one from the aged beast proved positive. Animal slaughtered. Remaining samples negative.

Information was received from the Hull Authorities of 10 positive samples of milk produced at farms within the County and sold within the City of Hull. Positive samples were also notified by the Goole, Scarborough and West Riding Authorities.

The action taken to trace the affected animals resulted as follows:—

- (1) Herd of 58 cows examined. One cow detected with clinical evidence of tuberculosis. Animal slaughtered. Milk samples taken from the remainder of herd with negative results. It was deemed inadvisable to take proceedings against producer for failure to report diseased beast as animal was being attended by a Veterinary Surgeon.
- (2) Herd of 16 cows examined. No diseased beast detected. Milk samples taken with negative results. Since the positive sample had been taken, one cow in milk had been sent to a knackers to be slaughtered.
- (3) Herd of 23 cows examined. No diseased beast detected. Milk samples taken with negative results.
- (4) Herd of 16 cows examined. No diseased beast detected. Milk samples taken, one of which (from four cows) proved positive. On further clinical examination of these animals, an aged cow showed a suspicious induration of the udder. Tubercle bacilli found on microscopical examination of its milk. Animal slaughtered.
- (5) Herd of 15 cows examined. No diseased beast detected. Milk samples taken with negative results.
- (6) Herd of 23 cows examined. No diseased beast detected. Milk samples taken, and one (from four cows) proved positive. Individual samples taken from each of the four cows concerned, with negative results.
- (7) Herd of 20 cows examined. An aged red cow showed clinical evidence of tubercular mastitis. Animal slaughtered. Milk samples taken from remainder of herd with negative results.
- (8) Herd of 7 cows examined. No diseased beast detected. Milk samples taken with negative results. One cow in milk had, however, been sent to the fellmongers following a period of rapid wasting since the positive sample had been taken.

(9) Herd of 26 cows examined. No diseased beast detected. One animal in milk with a bad clinical history had been attended by a Veterinary Surgeon and sent to a knackers a fortnight after the positive sample was taken. Milk samples taken from remainder of herd with negative results.

(10) Herd of 15 cows examined. No diseased beast detected.

Milk samples taken with negative results.

(11) Herd of 13 cows examined. Before the result of the positive sample was received, the producer reported an aged cow which he suspected of having tuberculosis. Animal slaughtered and found to have tuberculosis of the udder. No diseased beast detected on clinical examination of remainder of herd.

(12) Herd of 11 cows examined. An aged cow showed slight induration of one quarter of the udder. A microscopical examination of milk from this quarter confirmed the suspicion of tuberculosis. Animal slaughtered. Milk samples taken from remainder of herd with negative results

(13) Herd of 38 cows examined. No diseased beast detected.

Milk samples taken with negative results.

It will be observed that in twelve of the 23 cases in which samples were reported to contain tubercle bacilli, the subsequent enquiries failed to reach a satisfactory conclusion in that no diseased beast could be detected either by clinical or biological methods. It is possible, of course, that in some instances changes in the herd after the original positive sample had been taken might account for this unsatisfactory state of affairs, but in cases where it is definitely stated that no such changes have taken place, the results must be looked upon as most unsatisfactory. There may, of course, be another explanation, namely, that the sample which is obtained from the retailer is from more than the one source divulged to the Sampling Officer.

As stated above, systematic clinical examination of herds is carried out in the Borough of Beverley, but no diseased beast was detected there during the year.

Prevalence of and Control over Infectious and other Diseases.

DEATHS FROM PRINCIPAL EPIDEMIC DISEASES.

The number of deaths due to the seven principal epidemic diseases, viz.:—small pox, measles, scarlet fever, diphtheria, whooping cough, fever (typhus, enteric and simple continued), and diarrhæa (under the age of two years), was 29, giving a death rate of '17 per 1,000 of the population. This compares with 40 deaths and a death rate of '23 in 1934.

SMALL POX.

No cases of this disease were reported during the year.

ENTERIC FEVER.

Only one case of this disease was reported, compared with 3 in 1934. The notification was received from the Borough of Bridlington, and the patient recovered.

This is the lowest figure ever recorded in the County, and can only be ascribed to the improvement which has taken place in water supplies and sanitation generally. The numbers in recent years show an extraordinary decline in the incidence of the disease.

	Cases.	Deaths.
1910	 37	4
1915	 20	5
1920	 31	7
1925	 21	2
1930	 9	2
1935	1	0

SCARLET FEVER.

Notifications numbered 340, and there was one death. One hundred and sixty-four cases occurred in the Urban and 176 in the Rural Districts. The disease generally has been of a mild type.

DIPHTHERIA.

There were 155 notifications (62 in the Urban and 93 in the Rural Districts) and 14 deaths, giving a case mortality of nine per cent., compared with seven per cent. in the two previous years. But for delay in the administration of antitoxin, due principally to hesitation in calling in medical advice, the death rate would probably be much smaller.

The provision made for combating this disease includes Hospital accommodation, which is available for the whole County, the free provision of antitoxin to medical practitioners by the local Sanitary Authorities, and the free bacteriological examination of suspected

material.

Some of the local Sanitary Authorities, including the Driffield and Hornsea Urban and the Norton and Pocklington Rural Districts, have introduced schemes for protective inoculation against the disease. The necessary material has been offered free of charge to practitioners for use in necessitous cases. Particulars as to the number of cases immunised are not yet available.

ISOLATION HOSPITALS.

There are four Isolation Hospitals in the County to which patients suffering from infectious disease may be admitted.

Smallpox.

County Smallpox Hospital, Shiptonthorpe (16 beds).

Other notifiable diseases.

County Isolation Hospital, Driffield (62 beds). Borough Sanatorium, Bridlington (28 beds). Isolation Hospital, Howden (20 beds). (Accommodation based on 144 sq. ft. per bed.)

The Smallpox Hospital and the Driffield Isolation Hospital are under the control of the County Council, but the other two hospitals are administered by the respective local Sanitary Authorities.

Following the alterations of County Districts, it was necessary to amend the existing Hospital Orders owing to the fact that in one or two instances the amalgamation of two areas had resulted in part of the new District sending cases to the Driffield Hospital and part to a hospital outside the County with whom an agreement had been made prior to the change in boundaries. All the Sanitary Authorities affected by the alterations were approached and enquiries made as to whether they wished to be included in the County Hospital areas. As a result of the alterations agreed upon, the Smallpox Hospital now serves 15 of the 17 Sanitary Authorities in the County, with an acreage of 726,537 and a population of 150,894, whilst the Driffield Isolation Hospital admits cases from 12 Districts, with an acreage of 583,757 and a population of 111,341.

Two Sanitary Authorities, viz., Hedon Municipal Borough and Haltemprice Urban District, have made arrangements with the Hull Corporation for the treatment of their cases of infectious disease, including small-pox.

The Borough Sanatorium at Bridlington provides accommodation for infectious cases occurring both in the Borough and in the Bridlington Rural District (total acreage, 72,833; population, 27,922).

The Howden Isolation Hospital serves the Howden Rural District, with an acreage of 69,947 and a population of 11,631.

By these arrangements, the whole County is provided with Isolation Hospital accommodation, and the requirements of Section 63 of the Local Government Act, 1929, have, therefore, been complied with.

The County Council have a reciprocal agreement with the respective Hospital Authorities at Bridlington and Howden, whereby in times of epidemics patients may be admitted to any of the three hospitals provided that accommodation is available.

Admissions from the County Hospital area to the Driffield Isolation Hospital during the year numbered 264, compared with 470 in 1934.

Two patients suffering from scarlet fever were also admitted to the hospital from the Scarborough Rural District at the request of the Medical Officer concerned.

Three patients were sent to the Howden Isolation Hospital for treatment, one to the York Isolation Hospital, and one to the Hull City Infectious Diseases Hospital.

The percentage of cases admitted to Hospital was again high. A total of 335 cases of scarlet fever and diphtheria were notified in the County Hospital area, of which 264, or 78'8 per cent., were admitted to hospital.

The following table gives particulars of the patients treated during the year:—

District.	Diphtheria.	Scarlet Fever.	Other Diseases.	Total.
Beverley M.B	14	44	***	58
Driffield U.D	***	8	3	11
Filey U.D	1	8		9
Haltemprice U.D	2	6		8
Hornsea U.D	13	1		14
Norton U.D	3	12		15
Withernsea U.D	1	1	***	2
Beverley R.D	8	10	1	19
Derwent R.D	1	3		4
Driffield R.D	5	11		16
Holderness R.D	10	10		20
Norton R.D	5	13		18
Pocklington R.D	32	38	1	71
Scarborough R.D		2	***	2
Joint Board (M.D.)		1	***	1
Public Assistance				
Committee		3	***	3
	95	171	5	271
	1	Transfer or the last of the la		- Container

PUERPERAL FEVER AND PYREXIA.

Under the provisions of the Regulations made in 1926, it is the duty of the County Council to provide hospital treatment for any patient reported to be suffering from either puerperal fever or pyrexia. Beds for patients resident in the County have in the past been obtained at the Hull Municipal Maternity Home, the York County Hospital, and the Lloyd Hospital, Bridlington, but in future it is hoped to treat cases at the Council's Infectious Diseases Hospital at Driffield whenever accommodation is available.

The Council have an arrangement with Consultants in Hull and York whose services are available free of cost on the request of any practitioner. It is, however, usually found that facilities are not available for home nursing in the rural parts of the County, and the patient is generally removed to the nearest hospital. Consequently, the services of the Consultants are very little utilized, as, in all cases in which efficient home nursing is impossible, prompt removal to hospital is necessary before the disease becomes well established.

Notifications were received of 4 cases of puerperal fever and 13 cases of puerperal pyrexia. Three cases of fever and four of pyrexia occurred in the Boroughs of Beverley and Bridlington, which are separate Maternity and Child Welfare Authorities. The fourth cases of fever was admitted to the Lloyd Hospital, Bridlington, for treatment. With regard to the nine remaining cases of pyrexia, four were admitted to the Hull Municipal Maternity Home, one to the Lloyd Hospital, Bridlington, one to the Driffield Isolation Hospital, and in three cases facilities were available for the home nursing of the patients concerned. In the latter cases, the Health Visitors make special reports on the progress of the patients.

Three deaths were ascribed to the County by the Registrar General as attributable to puerperal sepsis, one of which occurred in the Borough of Bridlington.

OPHTHALMIA NEONATORUM.

Notifications of 7 cases were received. One infant was sent for in-patient treatment to the Children's Pavilion at the Hull Municipal Maternity Home, and discharged without impairment of sight. In four cases, the children concerned were treated at home by the practitioners in attendance with satisfactory results, and the two remaining notifications were received from

Beverley and Bridlington respectively. These Authorities are responsible for dealing with any cases occurring in their areas. Children who are not admitted to hospital for treatment are visited regularly by the Health Visitors until all discharge from the eyes has ceased.

CANCER.

The County Council, in accordance with Circular 1276 of the Ministry of Health, have made arrangements with the Leeds General Infirmary for the treatment by radium of cancer patients for whom it is considered appropriate, but only one application for treatment was received during the year.

VACCINATION.

The number of public vaccinators in the County is 40 for the 55 vaccination districts.

The total number of successful primary vaccinations for the year ended 31st December, 1935, was 1,072, and 1,188 Statutory Declarations of Conscientious Objection were received.

Returns have been received from the Vaccination Officers showing the position as regards the 2,431 births which were registered in 1934. At the 31st January, 1936, these cases had been dealt with as follows:—

Successfully Vaccinated	1052
Insusceptible of Vaccination	15
Declarations of Conscientious Objection	1198
Died Unvaccinated	98
Postponement by Medical Certificate	13
Removal to other areas	13
Removal to places unknown	22
Not accounted for	20

The response to vaccination generally can only be described as unsatisfactory, as School Medical Inspection returns show that only 65% of the children are vaccinated. The entire absence of smallpox from the County does not bring the need for vaccination so forcibly to the notice of parents as would be the case if an outbreak of the disease, especially of the severe type, should occur.

BLIND PERSONS ACT, 1920.

The scheme approved by the Ministry of Health under this Act is administered by the Public Health Committee, who have an agreement with the Hull and East Riding Institute for the Blind, whereby a visitor, who is himself blind, visits all blind persons living in their own homes. The visitor supervises home workers, gives lessons in Braille, and reports on any cases of hardship which come to his notice.

The East Riding Institute have established workshops and have hostels for both male and female workers. At the present time there are 16 male and 4 female workers employed in the workshops, and the sum of £1,150 6s. 5d. was paid to these workers by way of augmentation of wages during the year.

Six blind persons are employed as home workers as follows:—Piano Tuners, 3; Newsagent, 1; Chair Reseater, 1; and Tea Agent and Chair Caner, 1.

There are 192 names (119 males and 73 females) on the blind register, of whom eight are under 16 years of age. The Public Health Committee provide domiciliary assistance to necessitous blind persons, and no sightless person receives relief from the Public Assistance Committee. The weekly grants are in varying amounts from 1/- to 25/6, and involve an expenditure of £1,445 per annum. The number of blind persons receiving grants is now 68.

The National Library for the Blind, which supplies blind persons in the County with Braille and Moon type literature, is given an annual grant of £30 by the County Council.

The County Council have agreed, with other Authorities within the area of the Northern Counties Association for the Blind, to adopt Form B.D. 8 in connection with the certification of all future cases of blindness, and arrangements are being made with the Hull City Council by which the necessary examinations will be made by ophthalmic surgeons carrying out similar work for the Corporation.

TUBERCULOSIS. NEW CASES AND MORTALITY.

During 1935, 173 new cases of tuberculosis (122 pulmonary and 51 non-pulmonary) were notified, whereas in the previous year the notifications numbered 146 (109 pulmonary and 37 non-pulmonary). In addition to the cases which were primarily notified, 18 cases were brought to notice otherwise than by formal notification. The increase is due to a large extent to the number of cases which are now notified in the earlier and curable

stage of the disease. In addition, all deaths from tuberculosis are reported to the County Medical Officer of Health by the Registrars of Births and Deaths, and in any case where a patient has not been notified under the Public Health (Tuberculosis) Regulations, 1930, the attention of the practitioner concerned is drawn to his obligations under the regulations, and an explanation as to the reason for non-notification is called for.

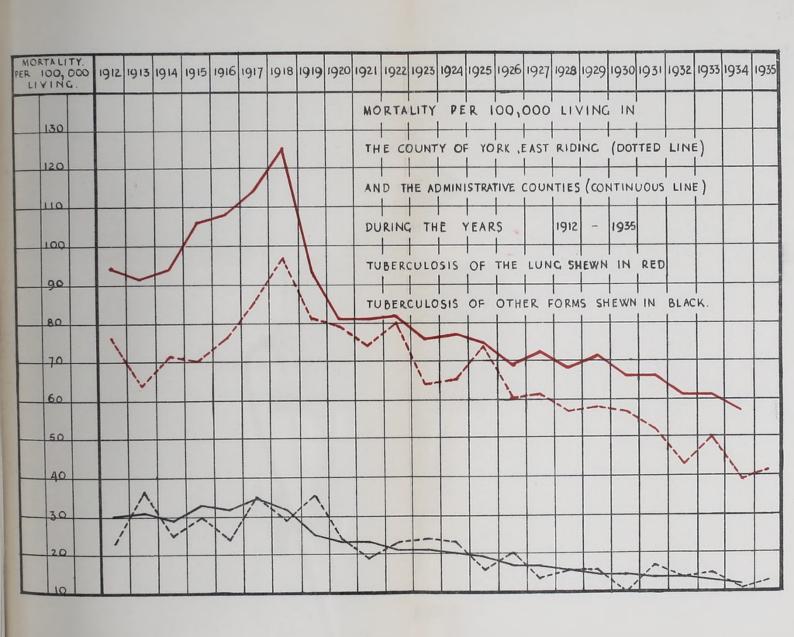
Of the 191 notifications received, 84, or 44 per cent., related to patients between the ages of 15 and 35.

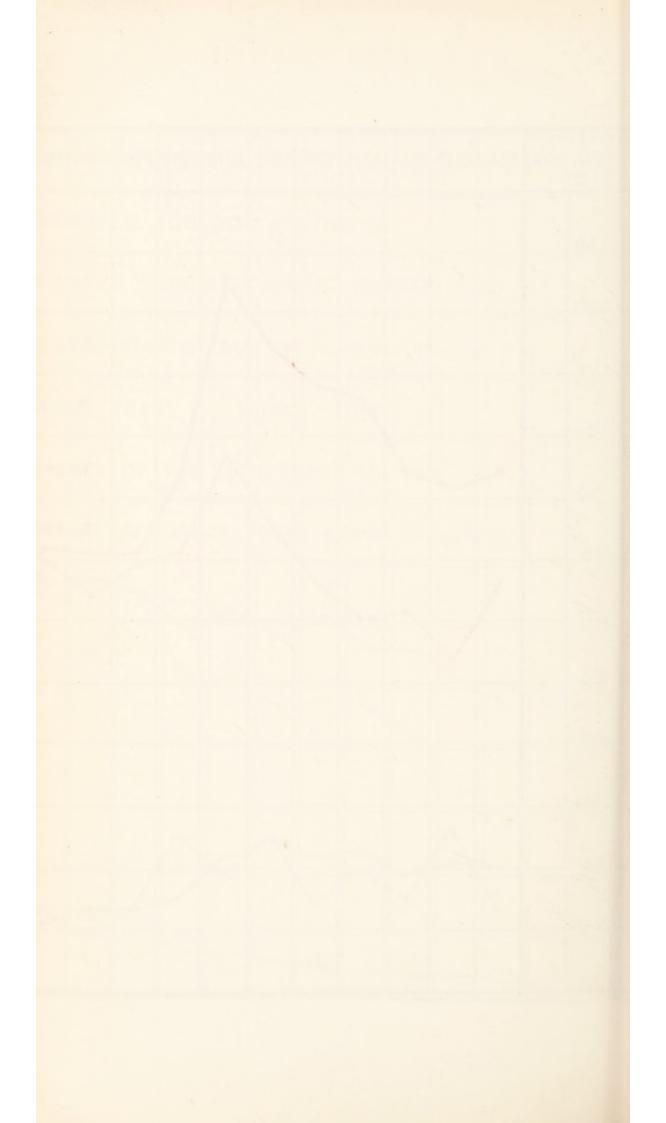
The quarterly tuberculosis statements furnished by the District Medical Officers of Health show that the number of notified cases of tuberculosis on their Registers at the end of the year was 688 (478 pulmonary and 210 non-pulmonary) compared with 889 at the 31st December, 1934. The decrease of 201 is principally due to the thorough revision which was carried out during the year by the individual District Medical Officers concerned. Of the 406 cases removed from the Registers, 117 patients were dead, 139 said to have recovered from the disease, and there were 7 withdrawals of the original notification. In the remaining 143 cases it was not possible to trace the persons concerned.

The returns from the local Registrars of Births and Deaths also permit of an up-to-date check being kept on the Notification Register. In the past this has not always been possible, as a few deaths have not come to light until the District Medical Officers have undertaken a complete revision of their Registers.

The following table (which includes 14 duplicate notifications) shows the position as regards additions to and removals from the Registers kept by the District Medical Officers of Health during the past year:—

	Pulmor	nary.	Non-Pt	ilmona	rv.
			M.		
Number of cases on the					
Registers at 31st Dec., 1934	. 319	307	136	127	889
Added to the Registers—					
 (a) Cases notified for the first time during the year (b) Un-notified cases brough 	. 80	55	26	26	187
to notice otherwise that by formal notification		9	1	1	18
Removed from the Registers of account of death, change of address, etc.	f	163	60	47	406
Number of cases on the Registers at 31st Dec., 1935	S	208	103	107	688





There were 71 deaths from pulmonary tuberculosis and 23 from the various non-pulmonary forms of the disease. The corresponding figures in the previous year were 68 and 19 respectively. Twenty-six per cent. of the total number of deaths of persons between the ages of 15 and 35 were due to pulmonary tuberculosis, compared with 24.6 per cent. in the previous year, and 32 per cent. in 1933.

The following table shows the new cases which came to notice by formal notification or otherwise, together with the deaths from tuberculosis as returned by the Registrar General:—

Trop router Cron	CTOCK							
		NEW	CASES.			DEAT	THS.	
Age	Pu	il.	Non	-Pul.	P	ul.	Non-I	Pul.
Periods.	M.	F.	M.	F.	M.	F.	M.	F.
0-1	1	-	1	-	-	_	1	-
1-5	1	-	5	4	1		4	-
5-15	13	8	13	6	1	_	1	4
15-25	21	15	4	8	8	10	2	1
25-45	29	24	3	7	12	14	3	4
45-65	14	9	_	1	6	14		1
65 and upwards	2	1	_	1	3	2	2	_
	-	-		-	-	-	_	Second .
Total	81	57	26	27	31	40	13	10
	-	-		-	-	-	-	_

The death rate from pulmonary tuberculosis for the year is '41 per 1,000 of the population, and from other forms of tuberculosis '13. This is only a very slight increase on the record low figures established last year, when the rates were '39 and '11 respectively.

The death rates per 1,000 of the population for a series of years are given below:

PULMONARY TUBERCULOSIS.

Districts.	Average rate for the ten years. 1921—1930	1928	1929	1930	1931	1932	1933	1934	1935
dministrative County	-65	0.57	0.58	0.57	0.52	0.43	0.50	0.39	0.41
rban Districts	.75	0.66	0.66	0.72	0.58	0.57	0.65	0.44	0.53
ural Districts.	.58	0.50	0.52	0.47	0.48	0.32	0.39	0.36	0.30

.18	0.16	0.16	0.10	0.17	0.14	0.15	0.11	0.13
-19	0.22	0.16	0.12	0.22	0.11	0.08	0.07	0.13
.17	0.12	0.16	0.08	0.12	0.16	0.19	0.14	0.14
	·19	19 0.22	19 0.22 0.16	19 0.22 0.16 0.12	19 0.22 0.16 0.12 0.22	19 0.22 0.16 0.12 0.22 0.11	19 0.22 0.16 0.12 0.22 0.11 0.08	·19 0·22 0·16 0·12 0·22 0·11 0·08 0·07

The accompanying chart compares the fall in the death rate from tuberculosis of the lungs in this County with the rate for the Administrative Counties of England and Wales for the years 1912—1935.

It shews very graphically the rise during the war years and the subsequent fall. It also shews very clearly the favourable position of the East Riding.

Since 1920, when the Raywell Sanatorium was opened, it will be seen that, whereas the death rate from pulmonary tuberculosis for the Administrative Counties of England and Wales has fallen by 29.6 per cent., the death rate for the East Riding has fallen by 48.1 per cent.

RAYWELL SANATORIUM.

The County Sanatorium is situated at Raywell,

about four miles from Cottingham.

It is under the joint control of the East Riding County Council and the City of York. There is accommodation for 68 patients, 48 beds being set aside for adults and 20 for children. Two-thirds of the accommodation is available for East Riding residents and the remaining one-third is at the disposal of the York Corporation. The sanatorium is under the control of a resident Medical Superintendent who also acts as Tuberculosis Officer for the County. The nursing staff consists of a Matron, one Sister and eight Nurses.

The buildings and grounds occupy a site of approximately 50 acres, and comprise an administration block, a hospital pavilion for both sexes, and pavilions for male and female ambulant cases. Sleeping accommodation for the children is provided in the administration block, but during the day use is made of their pavilion for education, meals and recreation. In this way, they are entirely segregated from the adult patients. Any child with a positive sputum, is of course, removed from the Children's Pavilion.

The water supply is obtained from one of the service reservoirs of the Hull Corporation, being softened by

an Electrolux water softener.

Electricity both for light and power is generated on the premises, and a fully equipped laundry is also

provided.

The usual routine Sanatorium treatment has been carried out during the year, with the addition of a certain amount of Gold Therapy. Cases requiring Artificial Pneumothorax treatment still have to be sent to other Institutions, as this work cannot be carried out at Raywell until an X-Ray plant is installed.

A visit was paid to the Sanatorium during the year by a Medical Officer of the Ministry of Health, and certain matters affecting administration, buildings, and equipment were referred to in the report which was subsequently received. An interview was held with officials of the Ministry of Health to deal with the points raised. Those matters relating to administration have since been fully dealt with, but the questions of buildings and equipment still remain in abeyance pending the conclusion of the negotiations now taking place with the York City Council, who have suggested that as they have sufficient accommodation at their own Sanatorium at Fairfield, the County Council should in future be responsible for the sole control of Raywell. As soon as this matter is settled to the mutual satisfaction of the two authorities, it is hoped that the suggested improvements will be carried out.

INSTITUTIONAL TREATMENT.

In addition to the accommodation provided by the County Council at the Raywell Sanatorium, beds in out-County institutions have been obtained when either accommodation is not available at Raywell or the location of the disease necessitates treatment in a surgical hospital.

One hundred and sixty-eight patients were admitted to the Raywell Sanatorium during the year, whilst admissions to other institutions were as follows:—

dmissions to other institutions were as follows:—	
County Hospital, York	6
Orthopædic Hospital, Oswestry	6
Fairfield Sanatorium, York	5
Yorkshire Children's Orthopædic Hospital,	
Kirbymoorside	3
Beverley Road Institution, Hull	
Royal Infirmary, Hull	1
Lloyd Hospital, Bridlington	
Avenue Hospital, Bridlington	1
Papworth Village Settlement, Cambridge	
Addenbrooke's Hospital, Cambridge	

Sixty-seven patients contributed towards their maintenance, and the total contributions received amounted to £277 16s. 8d. In the previous year the sum of £364 8s. 6d. was received from 95 patients.

Of the 195 patients admitted to the institutions for treatment, 46 were admitted for observation and in the remaining 149 cases a definite diagnosis had been reached before admission. In the previous year 178 patients were admitted for treatment.

The following table gives particulars of the cases dealt with during the year:—

	No	of l	Patients.	Obse		o. of tion Cases	Total.
	Adı	ılts	Children	Ad	alts	Children	T
	М.	F.		М.	F.		
In Institutions on 1/1/35	23	22	15	_	_	_	60
Admitted during the year	58	41	50	8	11	27	195
Discharged during the year	55	42	45	8	10	25	185
Died in Institutions	9	8	3		-	_	20
In Institutions on 31/12/35	17	13	17	_	1	2	50

One hundred and sixty-two patients who had been diagnosed as definitely suffering from tuberculosis were discharged from Sanatoria during the year, compared with 131 in the previous year. In 20 cases, the patients concerned took their discharge before the end of 28 days' treatment. The following table shows the condition of the patients at the time of their discharge:—

Classification on		Cone	lition	at ti	me c	of Di	schar	ge.	
Admission.	Qui	esce	nt.		Not esce	nt.	Inst	ied i ituti	
Pulmonary Tuberculosis	М.	F.	C.	М.	F.	С.	М.	F.	C.
Class T.B. minus	10	16	21	1	1	2	_	_	1
Class T.B. plus	13	5	_	15	9	1	7	8	1
Non-Pulmonary Tuberculosis	11	5	15	5	6	6	2	_	1
Totals	34	26	36	21	16	9	9	8	3

The following table shows the results of observation of the doubtfully tuberculous cases discharged during the year:—

Classification on		Cond	lition	at ti	me o	disc	charg	e.	
Admission.	Tub	ercul	lous		Non- ercul	ous	Do	ubti	al
Observation for purpose of diagnosis	M. 4	F. 5	C.	M. 4	F. 5	C. 5	М.	F.	C.

DISPENSARIES.

During the year three additional Dispensaries have been opened, at Selby, Norton and Patrington respectively, bringing the total number to five, which would appear to be adequate for the needs of the County. The days and hours of the various Dispensaries are set out below:—

Beverley Each Friday, 2 to 4 p.m.

Bridlington 1st Tuesday in each month, 2-30 to 4-30 p.m.

Selby 2nd Tuesday in each month, 2-30 to 4-30 p.m.

Norton 3rd Tuesday in each month, 11 a.m. to 12-30 p.m.

Patrington 4th Tuesday in each month, 2-30 to 4-30 p.m.

The premises in which the Beverley Dispensary is held are the property of the County Council, but the other four Dispensaries are rented.

As the County Council have no X-Ray apparatus, it has been necessary to make arrangements for patients to be X-rayed by a radiologist in Hull. During the year 159 patients were sent for X-Ray examination.

Extra nourishment consisting of milk, eggs, and cod liver oil is granted on the recommendation of the Tuberculosis Officer to any patient in necessitous circumstances. During the past year 14 new applications for milk and eggs were received and granted, and 76 patients were supplied with cod liver oil. Grants of milk and eggs are usually given for a period of three months when the allowance is again considered.

Nineteen shelters are provided by the Council and are loaned free of charge to any patient suffering from tuberculosis. It is customary for these shelters to be given only to patients who have had a positive sputum report, but this rule is, of course, not strictly adhered to. During 1935, 187 new cases and 58 contacts were examined by the Tuberculosis Officer at or in connection with the Dispensaries, compared with 170 new cases and 40 contacts in the previous year. The following table gives particulars of the work carried out during the past year:—

No. of attendances by patients at Dispensaries (including contacts)	494
No. of consultations with Medical Practitioners:—	
(a) Personal	53
(b) Other	229
No. of visits by nurses to homes for Dispensary purposes	2,158
No. of visits by Tuberculosis Officer to homes (including personal consultations)	
No. of specimens of sputum, etc., examined	196
No. of X-Ray examinations made	159
No. of persons receiving extra nourishment at the end of the year	44

It was not necessary to take any action under the Public Health (Prevention of Tuberculosis) Regulations, 1925, or under Section 62 of the Public Health Act, 1925.

TABLE I.

BACTERIOLOGICAL EXAMINATIONS, 1935.

-		Diph	theria	Pht	hisis.	Water	Milk.	Other
		Pos.	Neg.	Pos.	Neg.	water	MIIK.	Exami- nations.
	URBAN DISTRICTS.							
	Beverley	8	58	8	25			2
	Bridlington	9	83	12	61	1000	27	87
	Driffield		23	2	13			4
	Filey	1	17	3	11			4
	Haltemprice	12	61	7	23	2	4.4	18
	Hedon	1	2	***	3			
	Hornsea	15	85	1	10			1
	Norton	7	12	1	2	2		2
	Withernsea	2	9	1	1			9
	RURAL DISTRICTS.							
	Beverley	6	38	4	10			3
	Bridlington	1	19		9	8	1	13
	Derwent	10	30	1	4	114		***
	Driffield	4	27		13	3		3
	Holderness	14	58	10	22			10
	Howden	10	84	3	19	2	***	4
	Norton	6	15		3	16	1	4
	Pocklington	26	87	1	7			3
	E.R.C.C.							
	Public Health		2	6	21			6
	Isolation Hosp.	78	352		***			2
	J'nt Sanatorium	***	3	112	91			
	Pub. Assistance		2	1	8			1
	JointBoard(M.D.)		2			***		1
	Milk (Special Designations) Order						120	
	Milk & Dairies Order, 1926			***			150	
	Other Committees		5				9	6
	TOTALS	210	1074	173	356	147	308	183

TABLE II.

FOOD AND DRUGS (ADULTERATION) ACT, 1928.

Summary of Samples taken by the Sampling Officer and Analysed during the year ended 14th March, 1936.

Apple Jelly	during the year	onaca	14th march, 1000.
Apricots, Tinned	Apple Jelly	1	Malted Milk Cocoa with Eggs 1
Beef Suet, Flaked, with Flour 1	Apricots Tinned		
Beef Suet, Flaked, with Flour	Poof Suot	1	
Blackberries, Bottled	Poof Suot Elekad with Flour	1	Madicinal Liquid Paraffin
Boracle Powder			
Bourn-Vita	Danasia Dawdan	1	
Bramy			Mills if Contiford !!
Brawn			Milk, "Certified" 3
Breakfast Chocolate			
Butter 27			Milk, "Grade A" 20
Butter, Empire			Milk, "Grade A (T.T.)" 6
Camphorated Oil	Butter	27	Milk, Informal 1
Camphorated Oil			Milk, "Pasteurised" 3
Cheshire Cheese	Camphorated Oil	6	Mince Meat 2
Cocoanut	Chocolate Eclairs	1	Oil of Almonds and Syrup of
Cocoanut	Cheshire Cheese	1	Violets 1
Cocoanut	Cocoa	4	
Cooffee			
Condee			
Cookeen			
Cream 15 Pepper 6 Cream 1e Pepper, White 5 Cream 1 Poloney, Luncheon 1 Cream, Tinned 1 Potted Meat 5 Curd 1 Rice 1 Dessert Fruits 1 Rice, Flaked 1 Dripping 1 Rum 3 Epsom Salts 1 Sausage 16 Gin 1 Sausage 16 Gin 1 Sausage 16 Ginger Nuts 1 Sausage 16 Ginger Nuts 1 Sausage 16 Ground Almonds 9 Table Jelly 1 Ground Almonds 9 Table Jelly 1 Ground Ginger 3 Tarragona Wine 1 Ground Rice 1 Tincture of Iodine (Mit) 1 Honey 1 Tincture of Iodine (Mit) 1 Honey, Empire 1 Tomato Chutney 1 Honey and Sugar 1 Vinegar 11 Ice Cream 2 Whisky 10 Ice with Cream 1 Wine, Raisin Flavoured, Non			
Cream Iee		100	
Cream Puffs 1 Poloney, Luncheon 1 Cream, Tinned 1 Potted Meat 5 Curd 1 Rice 1 Dessert Fruits 1 Rice, Flaked 1 Dripping 1 Rum 3 Epsom Salts 1 Sausage 16 Gin 1 Sausage with Preservative 4 Ginger Nuts 1 Sausage with Preservative 4 Ginger Nuts 1 Scotch Whisky 4 Ginger Nuts 1 Scotch Whisky 4 Ginger Nuts 1 Scotch Whisky 4 Glycerine 2 Syrup of Figs 1 Ground Almonds 9 Table Jelly 1 Ground Almonds 9 Table Jelly 1 Ground Rice 1 Tea 4 Honey 1 Tincture of Iodine (Mit) 1 Honey 1 Tomato Chutney 1 Itele with Cream 1 Win			
Cream, Tinned			
Curd			
Dessert Fruits			
Dripping			Rice 1
Epsom Salts			
Gin	Dripping	1	
Ginger Nuts			
Glycerine			
Ground Almonds			
Ground Ginger		2	
Ground Rice			
Honey Empire 1 Tomato Chutney 1 Honey and Sugar 1 Vinegar 11 Ice Cream 2 Whisky 10 Ice with Cream 1 Wines, Fruit 2 Icing Sugar 2 Wine, Raisin Flavoured, Non-Jam 10 Alcoholic 1 Lard 18 Yeast 5 Lemon Cheese 1 Lemon Crystals 2 Lemon Curd 1 Total 519 Samples adulterated or below the presumptive limits of the Sale of Milk Regulations. Beef Suet 1 No Proceedings. Curd 1 No Proceedings. Milk, informal (taken in connection with 3 formal samples found to be adulterated included below) 1 Milk 37 6 Convictions. Milk, "Grade A" 1 Conviction.	Ground Ginger	3	Tarragona Wine 1
Honey, Empire	Ground Rice	1	Tea 4
Honey, Empire	Honey	1	Tincture of Iodine (Mit) 1
Honey and Sugar	Honey, Empire	1	
Company Comp			
Ice with Cream 1 Wines, Fruit 2 Wine, Raisin Flavoured, Non-Jam 10 Alcoholic 1 Lard 18 Yeast 5 Lemon Cheese 1 Lemon Crystals 2 Lemon Curd 1 Total 519 Samples adulterated or below the presumptive limits of the Sale of Milk Regulations. Beef Suet 1 No Proceedings. Curd 1 No Proceedings. Milk, informal (taken in connection with 3 formal samples found to be adulterated included below) 1 Milk 37 6 Convictions. 2 Dismissed. 29 No Proceedings. Milk, "Grade A" 1 Conviction.			
Icing Sugar 2 Jam 10 Lard 18 Lemon Cheese 1 Lemon Crystals 2 Lemon Curd 1 Lime Juice and Soda 1 Samples adulterated or below the presumptive limits of the Sale of Milk Regulations. Beef Suet 1 No Proceedings. Curd 1 No Proceedings. Milk, informal (taken in connection with 3 formal samples found to be adulterated included below) 1 Milk 37 6 Convictions. 2 Dismissed. 29 No Proceedings. Milk, "Grade A" 1 Conviction.			Wines, Fruit 2
Jam 10 Alcoholic 1 Lard 18 Yeast 5 Lemon Cheese 1 Lemon Crystals 2 Lemon Curd 1 Total 519 Lime Juice and Soda 1 Samples adulterated or below the presumptive limits of the Sale of Milk Regulations. Beef Suet 1 No Proceedings. Curd 1 No Proceedings. Milk, informal (taken in connection with 3 formal samples found to be adulterated included below) 1 Milk 37 6 Convictions. 2 Dismissed. 29 No Proceedings. Milk, "Grade A" 1 Conviction.			
Lard			Alcoholic 1
Lemon Crystals 2 Lemon Curd 1 Total 519 Lime Juice and Soda 1 Samples adulterated or below the presumptive limits of the Sale of Milk Regulations. Beef Suet 1 No Proceedings. Curd 1 No Proceedings. Milk, informal (taken in connection with 3 formal samples found to be adulterated included below) 1 Milk 37 6 Convictions. 2 Dismissed. 29 No Proceedings. Milk, "Grade A" 1 Conviction.	the second control of	180.00	Vonet 5
Lemon Crystals 2 Lemon Curd 1 Total 519 Lime Juice and Soda 1 Samples adulterated or below the presumptive limits of the Sale of Milk Regulations. Beef Suet 1 No Proceedings. Curd 1 No Proceedings. Milk, informal (taken in connection with 3 formal samples found to be adulterated included below) 1 Milk 37 6 Convictions. 2 Dismissed. 29 No Proceedings. Milk, "Grade A" 1 Conviction.			
Lemon Curd			
Samples adulterated or below the presumptive limits of the Sale of Milk Regulations. Beef Suet			(Dota) 510
Samples adulterated or below the presumptive limits of the Sale of Milk Regulations. Beef Suet			Total
Sale of Milk Regulations. Beef Suet	come Juice and Soda	1	
Sale of Milk Regulations. Beef Suet			
Beef Suet	Samples adulterated or b	elow th	ne presumptive limits of the
Beef Suet	Sale of	Milk R	egulations.
Curd			
Milk, informal (taken in connection with 3 formal samples found to be adulterated included below)			
tion with 3 formal samples found to be adulterated included below)	Mills 1-6 - 1 (1)	1	No Proceedings.
found to be adulterated included below)			
included below)	tion with 3 formal samples		
Milk 37 6 Convictions. 2 Dismissed. 29 No Proceedings. Milk, "Grade A" 1 Conviction.			
Milk 37 6 Convictions. 2 Dismissed. 29 No Proceedings. Milk, "Grade A" 1 Conviction.		1	
2 Dismissed. 29 No Proceedings. Milk, "Grade A"			6 Convictions.
Milk, "Grade A"			
Milk, "Grade A" 1 Conviction.			
	Milk, "Grade A"	1	
- Controlled			
	-		

TABLE III.

Cases of Infectious Disease Notified during the year 1935.

Notifiable Disease.	Urban Districts.	Rural Districts.	Adminis- trative County.
Small-Pox			
Scarlet Fever	164	176	340
Diphtheria (including Membranous Croup)	62	93	155
Enteric Fever	1	*	1
Paerperal Fever	4		4
Puerperal Pyrexia	8	5	13
Erysipelas	18	23	41
Ophthalmia Neonatorum	3	4	7
Encephalitis Lethargica	1		1
Acute Poliomyelitis		1	1
Acute Polio-Encephalitis			
Cerebro-Spinal Fever		1	1
Pulmonary Tuberculosis	87	64	151
Other forms of Tuberculosis	- 19	35	54
Pneumonia	51	40	91
Anthrax			
Malaria		***	
Dysentery		2	2
Totals	418	444	862

TABLE IV.

1935.

Cases of Infectious Disease Notified. Urban Districts.

DISEASE.	Totals	Beverley	Bridlington	Driffield	Filey	Haltemprice	Hedon	Hornsea	Norton	Withernsea
		1	2	3	4	5	6	7	8	9
Small-Pox		l								
Scarlet Fever	164	51	35	12	8	36	2	1	10	9
Diphtheria	62	17	6		1	19	2	11	4	2
Enteric Fever	1		1							
Puerperal Fever	4	1	2		***	+14		***	1	
Puerperal Pyrexia	8	3	1	2	1			1	***	
Erysipelas	18	4	6	5	2	1	. 1.11			
Ophthalmia Neonatorum	3	1	1				1			
Encephalitis Lethargica	1							1	-	
Acute Poliomyelitis			***						222	
Acute Polio-Encephalitis						***				
Cerebro-Spinal Fever							***			
Pulmonary Tuberculosis	87	21	23	5	4	21	2	2	3	6
Other forms of Tuberculosis	19	6	4	2	3	1			1	2
Pneumonia	51	17	15	7	7	4	1			
Anthrax	***						***			
Malaria									***	
Dysentery				***						
Totals	418	121	94	33	26	82	8	16	19	19

TABLE V.

1935.

Cases of Infectious Disease Notified. Rural Districts.

	TO	TAL C.	ASES :	NOTIF	IED I	N EAG	CH DIS	STRIC	т.
DISEASE.	Totals	Beverley	Bridlington	Derwent	Driffield	Holderness	Howden	Norton	Pocklington
		1	2	3	4	5	6	7	8
Small-Pox									
Scarlet Fever	176	16	8	8	24	31	28	19	42
Diphtheria	93	8	1	16	6	15	10	4	33
Enteric Fever									
Puerperal Fever	12.0								
Puerperal Pyrexia	5		1		1		2		1
Erysipelas	23	2	3	4	3	2	5		4
Ophthalmia Neonatorum	4	1	1		1				1
Encephalitis Lethargica									
Acute Poliomyelitis	1			1					
Acute Polio-Encephalitis						4			
Cerebro-Spinal Fever	1		1000	191	200		***		1
Pulmonary Tuberculosis	64	7	5	16	1	19	6	5	5
Other forms of "	35	4	3	3	1	7	8	3	6
Pneumonia	40	4	5	5	6	9	9	1	1
Anthrax			111	114	400	4+4	***		
Malaria	410		1.54	2.65					
Dysentery	2	***	2				49.4		
Totals	444	42	29	53	43	83	68	32	94

TABLE VI.

COUNTY OF YORK, EAST RIDING.

Vital Statistics of Whole District during 1935, and previous Years.

		LIV		NET D	DISTR		THE
		Diki	11101	Under 1 y	ear of age.	At all	Ages.
YEAR.	Estimated Population.	Number.	Rate.	Number.	Rate per 1,000 Live Births.	Number.	Rate
1	2	3	4	5	6	7	8
1921	162,917	3445	21.1	263	76	2013	12.4
1922	164,094	3229	19.6	224	69	2127	12.9
1923	165,170	3244	19.6	188	58	1895	11.5
1924	166,120	3067	18.5	189	62	2070	12.5
1925	166,690	3004	18.0	200	67	1909	11.5
1926	168,820	2858	16.9	173	61	2072	12.3
1927	170,580	2888	16.9	167	58	2194	12.8
1928	174,460	2864	16.4	147	51	2057	11.8
1929	176,420	2830	16.0	165	58	2277	12.9
1930	168,400	2679	15.7	141	53	2004	11:7
1931	168,200	2635	15.7	159	60	2179	13.0
1932	170,250	2537	14.9	148	58	2086	12:3
1933	171,570	2489	14.5	142	57	2136	12.4
1934	174,350	2558	14.7	131	51	2058	11:1
1935	173,600	2475	14.3	129	52	2090	12.0

TABLE VII. Rainfall Returns, 1935.

Station. Height of Rain Gauge above Sea Level.	Observer.	Total Rain- fall.	Number of days on which one-tenth of an inch or more of rain fell.	Average rainfall over a series of years.
8 feet	Meteorological Office	26.06	159	25·42 for 12 years.
holme 11 ,,	Mr. F. J. Affleck	27:49	158	25.94 for 12 years.
Head 29 "	Meteorological Office	28.61	166	23:00 for 12 years.
ci Cave 35 "	Major W. H. Carver, M.P.	27.42	166	26.58 for 12 years.
angton 40 "	Mr. W. J. Algar	28.86	182	26.63 for 12 years.
phorpe 63 "	Mr. F. K. Hawes	26.61	168	26.51 for 12 years.
1 73 ,,	Mr. A. Alderman		167	26.38 for 12 years.
95 ,,	Rev. Canon Cooper Mr. J. R. Wiseman* .	28-53	178	26:37 for 12 years.
uoston 100 ,.	Mrs. St. Quintin	30.02	169	29·20 for 12 years.
mington 110 ,,	Miss E. Hildyard	30-33	197	28:16 for 12 years.
an Holme 150 ,,	Mr. J. P. Jobling	29.11	183	28.18 for 12 years.
e ley (E.R. Mal Hospital) 175 "	Medical Superintendent	30.11	163	27.00 for 12 years.
7)w 190 "	Rev. G. T. W. Purchas	27.04	177	26.66 for 8 years.
irall 304 "	Mr. James Anderson	30.58	156	30.75 for 12 years.
	*From 1st October, 1935.			

My thanks are due to the above named for their kindness in sending me the monthly returns.



TABLE VIII.

Birth and Death Rates for the Administrative County and for the several Urban and Rural Districts in the Riding during the year 1935.

		Population.		Live Births.	irths.	Deaths	ths.		eath Ra	10 of the	various Populat	Death Rates from various causes per 1000 of the Population,	-	Infant	Infants under
DISTRICTS.	Cenaus, 1931.	Estimated 1935 (mid-year).	Modified Population; Figure.	Number	Rate.	Number	Crude Death Rate.	Principal Epidemic Discases.	Pulmonary Tuberculosis.	Other Forms of Tuberculosis.	Respiratory Diseases.	Heart Disease.	Овпсег.	Number.	Rate per 1000 births.
Administrative County	169392	173600	174475	2475	14:3	2090	12.0	11.	.41	-13	.92	2.78	1.75	129	52.1
Municipal Boroughs and Urban Districts	72750	79226	78845	1083	13.7	975	12.4	18	.53	-13	11.	3.06	1.95	48	44.3
Borough of Beverley.	14012	14110	14110	225	16.0	172	12.5	.28	.78	.21	.64	3.19	1.42	9	40.0
" Bridlington	19705	21010	20885	285	13.7	317	15.2	-14	.57	.10	1.05	3.54	2.20	14	49.1
" Hedon	1091	1686	1651	31	18.8	18	10.9	1	.61	1	.61	4.85	.61	-	32.3
Urban Districts— Cottingham	6119	Nil	2480	40	16-1	13	5.5	18.	- 1	.40	.81	04.	1	60	75.0
Driffleld.	5915	5950	5927	80	13.5	89	11:5	11.	1	1	1.01	3.21	1.86	9	75.0
Filey	3733	4083	3995	48	12.3	54	13.5	1	1	.25	1.00	4.26	3.50	1	1
Haltemprice	16757	19800	14850	206	13.9	137	9.5	.13	01-	20.	.61	1.82	2 09	9	43.7
Hessle	6429	Nil	1698	18	9.01	119	11.2	1	69.	1	.59	1.18	2.36	61	1111-1
Hornsea	4450	4518	4518	35	7.7	20	11:11	-22	99.	-55	ì	3.35	1.55	1	28.6
Norton	3935	4107	4107	71	17.3	20	12.2	1	-97	1	-24	3.41	2.43	63	28.2
Pocklington	2640	Nil	199	75	1.9	14	21.2	1.51	1	1	1	1.51	1:51	1	1
Withernsea	4251	3963	3963	39	8.6	63	15.9	1	1.01	.52	1.51	4.54	2.27	1	25.6
Rural Districts	96642	94374	95630	1392	14.6	1115	11.7	-16	.30	-14	1.02	2.52	1-57	18	58.2
Beverley	12260	15880	14952	221	14.8	156	10-4	.13	.30	.27	.93	3.01	08.	12	54.3
Bridlington	7561	8060	8063	108	13.4	96	11.9	.25	.20	1	1.12	2.48	1.12	12	1111-1
Derwent	11822	11670	8752	115	13.1	74	8.5	!	1	1	08.	1.94	1.49	9	52.5
Driffeld	11050	9910	10113	151	14.9	109	8.01	.10	.10	1	69.	2.08	2.08	9	39-7
Escrick	5873	Nil	1500	=	7.3	16	10.7	1	1	1	49.	.67	1.33	1	6-06
Holderness	16108	16790	12593	179	14.2	152	12-1	1	.48	1	1.27	2.30	1.83	6	50.3
Howden	12377	11460	11635	178	15.3	155	13.3	.26	-54	.17	1.38	2.41	1.80	13	73.0
Norton	5229	7670	7031	100	14.2	92	13.1	.14	.57	-14	1:14	2.84	2.42	7	0.02
Patrington	7336	Nil	1885	24	12.7	24	12.7	1	1	1	.53	2.12	1.59	1	1
Pocklington	10631	12934	12403	193	15.6	170	13.7	.32	.32	.40	1.77	2.98	1.53	11	27.0
Riccall	5289	Nil	1267	21	9-91	12	9.2	62.	62.	1	1.58	2.37	1.58	-	47.6
Soulcoates	9487	Nil	2975	43	14-1	25	8.4	1	1	.34	19.	2.03	1.34	-	23.8
Sherburn	2209	Nil	529	6	17.0	00	15-1	1	1	1	1	7.56	1-90	1	1
Skirlaugh	7340	Nil	1932	40	20.7	56	13.5	.52	1.04	1	1.04	3-11	1.55	64	20.0

^{*}For calculation of birth rates and death rates in view of alterations of County Districts which took effect on 1st April, 1935.

10 00 10	38.6	100	43.7		22.0	10.0	8008	0.000	101	0.00		44.3	1,25.1		Back peri- toso births.	One hear. Potente ando.
191	71					69			II	3		4P	10		Number.	soo matgi
6.42	200	2.20		8:50	1,88		1.88		2-20	1881	0.00	90	16.12		Canifor.	
P CT	10 m		100	1-30	3541	OF STREET			100			3.06	20.0		Eogra Director	your bar
泰		03.	-6.1	1-00	1,0%	- 550	100	7	1.00			7	302		- Respiratory Diseases.	
	19.1	100	10	010		.40			. IO			- C2	143		Other Forms Tuberouteste.	6.8
707	007	658	00%				-	78.7				.03	750		- Pulmonary Tuberculosis.	To cool Ideas of
	10		113		177					H. F	000	07	317		Principal Epidemio Disease	
100	Pili	11.50			978	12.0	205	1000	19.0			12.4	1350		Baher Desemb	
000		196	1887		188		101		2178	100		975	0802		Number	Dear
CO		10.5	13.0	12.5		3	Ros		13.4	8-91	0.00	12.7	13463			Birthe
-1			300	0100	80	01/81		1000		E.	100	1083	2932			LAMP IN
1892		10008	1,1820			081	10001	1286	288802	11036		18845	134632			
1011	4013	9.KH4	19800	1085		988	1000	1808	31010	TATTO	9820	19236	133800		The Guild Feet, Table	Population
(100) (100) (100) (100)	9729	0218	16767	44.83	90.00	6779	5878	1801	18109	VARIATION IN	5222	12120	188392		183.7 Onesine	
Coulding ton concentration	HOLDBeg	Sura Library	Harteinhaloe	Alleh gron	Driffeeld	Cottingham	Escribe de gracon	Holidonius 8	" Bridingbon	porough or peacetiel	Serios	bna adpuesed lagramuth	Administrative County	Plant II	Section to	

in the Riding during the year 1935.

Causes of, and Ages at Death, during the Year 1935, in the URBAN Districts.

			-	V	T SUBJ	OINED	AT SUBJOINED AGES.										AL ADE AUES)				
CAUSES OF DEATH.	All Ages.	-1 year.	12	2-5	5-15	15-25	25- 45	45-65	65-75	75 and up- wards.	everley.	notgailbi	oredgalli	rimeld.	iley.	originalities T	ledon.	.eissle.	reasuroj	'morton.	ockilngt'n *
	61	00	4	10	9	7	00	9	10	11	1, в	185	2 Co	a 12	19 B	H.	18 H		30 E		
All Causes	97.6	48	4	14	=	36	75	233	240	324	172	317	13	89	54 1	137	18	119	20	20	14
1. Typhoid and Paratyphoid	:	:	:	:	:	:	1	;	1	:	1	1	-	:	:	:	1	-	;	-	:
2. Measles	70		-	4	:	:	:	:	:	1	00	-	1	-	-	:	-	-	:		:
	1	:	:	:	:	:	:	-	:	-	:	:	:	:	1	-	:	-		-	
	:	:	;	:	:	-	:	1	:	-	1	-		-	:	-	:	:	:		
5 Dishthania	9	:	:	64	v		:	-	:	:	-	1	1	1		-	1	:	1		
	6		:	-		-	1	61	-	4	1	10	1	-		-	-		63		-
							-	-	-			6						-	-	-	-
7. Encephalitis lethargica	99	:	:	:	:	:	-	-	-	:		1	:	:							
8. Cerebro-spinal fever	:	:	:	:	:	1	1			:	:	:	:	:	1	-	-		:		
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TABLE X.

All Causes OF DEATH. All Causes 1 1. Typhoid and Paratyphoid 2. Measles 3. Scarlet Fever. 4. Whooping Cough 5. Diphtheria 6. Diphtheria 7. Causes 7. Causes 7. Causes 7. Causes 7. Causes 8. Causes 7. Cause	DEA)	DEATHS IN OR BELONGING TO THE DISTRICTS AT SUBJOINED AGES.	B BELON	MOING	TO THE	DISTRIC	NA.				CAN AND	NI SI	OR RE	LONG	N 10		-		3/2		ı
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