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EAST SUSSEX COUNTY COUNCIL



ANNUAL REPORT

UPON THE

HEALTH AND SANITARY
CONDITION OF THE COUNTY

For the Year ended 31st December, 1937

BY

R. ASHLEIGH GLEGG, M.D., D.P.H.

County Medical Officer of Health

Chief Tuberculosis Officer and School Medical Officer



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1938

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TO THE CHAIRMAN AND MEMBERS OF THE EAST SUSSEX COUNTY COUNCIL.

MR. CHAIRMAN, MY LORD, LADIES AND GENTLEMEN,

I have the honour to submit my Tenth Annual Report, and the forty-third of the series, on the Health of the Administrative County of East Sussex in the calendar year 1937. The vital statistics relating to the year show, in so far as can be judged by the mortality rates, and by the incidence of infectious disease, that the general health of the community living in the area of the Administrative County was good throughout the year. Illness resulting in a fatal issue occurred more frequently after sixty-five years of age than under that age, so that although the general death-rate was slightly higher than in 1936, the small increase was chiefly amongst elderly people. There was less serious illness at earlier ages, than in former years, which indicates that preventive measures are operating effectively in youth and during the working years of life. In this connection it will be noted with satisfaction that maternal mortality was only 1.61 per 1,000 births, the lowest ever recorded in the County, and that infant mortality was only 37.42 per 1,000 births, as compared with 67.34 twenty years ago.

The Central Government, year by year, has been increasingly concerned with legislation affecting the health of the people and, in consequence, the work of the Health Department of the County Council has grown each year in diversity and complexity. The Council's arrangements commence with the care of the mother and her child. Domiciliary and institutional ante-natal and post-natal supervision and also infant health visiting are provided in this County by a system which co-ordinates the voluntary district nursing service with the maternity and child welfare and other public health services of the County Council. These services include, amongst others, provision, when necessary, for the nutrition of nursing and expectant mothers, and for their children, and treatment for such children as are debilitated or who suffer from other conditions, including defective vision, deafness, caries of the teeth, enlarged tonsils and adenoids, orthopædic defects, mental defects, and minor ailments, and also blindness, tuberculosis, and venereal diseases. Provision is made after school age, under Public Health Acts, for the treatment of sufferers from blindness, mental deficiency, tuberculosis, and venereal diseases. As the County Medical Officer of Health acts as Medical Officer of the Public Assistance Committee, and of the Education Committee, there is complete co-ordination in respect of all treatment provided by the County Council.

In the year 1937, the work of the Department was particularly heavy owing to the incidence of new health legislation, and to the necessity in connection therewith of reviewing and revising existing Schemes and providing new arrangements to meet the requirements of the Ministry of Health.

The Midwives Act, 1936, came fully into operation in 1937, and the Agreement with the County Nursing Federation and District Nursing Associations was ratified on 7th August of that year. Under the Agreement the Federation and the District Nursing Associations undertook to provide a midwifery service throughout the whole of the County, in consideration of the payment by the County Council of increased grants in aid of the work.

The Ministry of Health Circular 1622 of the 7th May, 1937, on Maternal Mortality, received full consideration during the year, and the resulting decisions of the County Council are set out in the body of this Report. A further circular of the Ministry of Health, No. 1519, dealt with Nutrition of Mothers and Infants. Following on the consideration of this Circular, the County Council increased their estimate for the supply of milk to nursing and expectant mothers and infants, from £700 to £1,000 for the financial year.

Other matters of importance which received special consideration in 1937 were:—

Public Health Act, 1936.

The Public Health Act, 1936, came into operation on the 1st October, 1937. This Act consolidated and amended a large number of enactments relating to Public Health including the Notification of Births Acts, the Maternity and Child Welfare Act, the Nursing Homes Registration Act, and parts of the Children and Young Persons Acts. Power has been given through this Act to County Councils to contribute, otherwise than under the Poor Law, towards the support of Associations providing for district nursing.

Maternity and Child Welfare.

Continuing the policy of the County Council to provide suitable premises for the holding of County Clinics for maternity and child welfare and school medical and dental treatment, it was decided to provide clinics at Burgess Hill and Uckfield. These were not completed at the end of the year, but clinic premises at Haywards Heath, Three Bridges and Newhaven, which had been commenced in the previous year were opened during 1937. Official openings, arranged for in all cases, were well attended.

An application received from the National Birth Control Association for the use of the clinic premises at Haywards Heath was sanctioned with the condition that the Medical Officer of the clinic should be approved by the County Medical Officer of Health, and that he should have power to inspect.

Tuberculosis.

In order to provide better arrangements for the treatment of persons suffering from pulmonary tuberculosis in its chronic and advanced stages, the County Council decided in 1937 to extend the accommodation at the County Sanatorium to provide for the reception of such cases when in need of hospital treatment. They also approved of arrangements being made for tuberculous patients to receive nursing attention in their own homes, and for them to be transferred to better houses when they were found to be living in insanitary dwellings.

Orthopædics.

The report of Dr. Murray Levick under this heading in the body of the Report shows that the Council's Scheme for the preventive treatment of crippling deformities would be more effective if treatment could be given with greater frequency at the out-patient clinics. Two of the clinics are held only once a week, whereas treatment should be given at least twice a week. One additional clinic is needed in the east, and one in the north-east of the County.

Veneral Diseases.

A new agreement with the Royal Sussex County Hospital was arranged for, under which the West Sussex County Council would become one of the Authorities participating in the Agreement with the East Sussex County Council and Brighton County Borough Council for the treatment of these diseases.

Prevention of Blindness and the Welfare of the Blind.

After considering the Ministry of Health Circular 1621, dated 6th August, 1937, on the subject of the prevention of blindness, the Council made a scheme embodying arrangements which included :

- (a) The voluntary notification by medical practitioners of persons threatened by blindness.
- (b) The systematic visiting of persons notified and the provision of hospital treatment for them if required.

The augmentation of Blind Home Workers' wages will be increased from 10s. to 15s. a week, as from 1st April, 1938, to encourage bona fide home workers to make a special effort to continue as such instead of increasing the number of unemployable blind.

Mental Treatment Clinics.

Clinics for the treatment of persons suffering from nervous disorders, which were established in 1931 by the Visiting Committee of the Mental Hospital, under the Mental Treatment Act, 1930, have proved of great benefit to patients requiring psycho-therapeutic treatment. It has been brought to my notice that there is need for an extension of the service whereby persons urgently requiring treatment, and who are unable or unwilling to attend the Clinic, may be visited in their homes by a psychiatrist, on the request of the medical practitioner in attendance on the patient.

County Health Inspector.

In my first Annual Report I stressed the importance of the appointment of a County Health Inspector to deal with the practical administration of duties devolving on the County Council under public health legislation, in respect of housing, milk supplies, sewerage and sewage disposal, water supplies, rivers pollution and general sanitation. This appointment, which was made in 1930, has been amply justified and the services of the chief officer and his staff have been taken advantage of by other departments for work in which technical knowledge of sanitary engineering and of general public health requirements has been necessary. The liaison, moreover, established with the officers of the local sanitary authorities has been of mutual benefit to the County and District Councils.

Milk (Special Designations) Order, 1936.

As a result of a Conference with representatives of the County Agricultural Committee, it was agreed that applications for licences should be forwarded by the Director of Agriculture to the County Medical Officer of Health for his observations as to the suitability of the premises prior to the consideration by the Agricultural Committee of the issue of licences. This arrangement has not been found to be entirely satisfactory and negotiations for a better arrangement are being continued.

Milk and Dairies Acts and Orders.

A circular letter from the Ministry of Agriculture was received in July, 1937, intimating that the functions of veterinary inspectors under the Milk and Dairies Acts and Orders would be transferred after 1st April, 1938, to veterinary inspectors appointed by the Ministry of Agriculture. This arrangement will not affect the duties of the County Medical Officer of Health and his staff.

Air Raid Precautions (Medical Services).

Particulars are given in this Report of the arrangements made for the provision of medical services in connection with Air Raid Precautions. The County Council have delegated to the District Councils the duty of preparing schemes for submission to the Home Office. Much preliminary work was undertaken by the County Medical Officer of Health and his staff during the year, in co-operation with Colonel Fooks, the County Air Raid Precautions Organiser, with a view to designating buildings as being suitable for use as First-Aid Posts and institutions for use as Casualty Clearing Hospitals. Arrangements were also made for training members of the County staff for duties in connection with decontamination and rescue work, nurses in connection with their special duties, and volunteers to provide the staff of first-aid posts.

National Health Campaign.

In October, 1937, the Government launched a campaign of health publicity to be undertaken by the Local Authorities, with a view to making the health services and all matters affecting the health of the individual as widely known as possible. The County Health Department arranged through the agency of the Sussex Rural Community Council for the display of special posters, for the distribution of a monthly Health Magazine, for health talks, and for the preparation of a Health Services Handbook.

Acknowledgments.

I am glad to have this opportunity of thanking the County Council, and especially the Chairmen and Members of all the Committees concerned with matters relating to the health of the community, for the sympathetic consideration and support given to reports and recommendations which were made by me in the year under review.

I would like to acknowledge also the valuable help given by members and officers of voluntary societies which have undertaken health work on behalf of the County Council. The County Nursing Federation, the Rural Community Council, and the County Associations for Mental Welfare and for the Welfare of the Blind, each in their own sphere of social work, have rendered notable service for the amelioration of the lot of the sick, and the disabled, and of those who are physically or mentally defective.

In conclusion, it is a pleasure to record the devotion to duty and the high standard of the work carried out by all members of the staff of the Department during a very strenuous year.

I have the honour to be,

Your obedient Servant,

R. ASHLEIGH GLEGG,
*County Medical Officer of Health and School
Medical Officer.*

PUBLIC HEALTH DEPARTMENT,
COUNTY HALL,
LEWES.

13th August, 1938.

MEMBERS OF COMMITTEES, 1937-1938.

THE PUBLIC HEALTH AND HOUSING COMMITTEE.

MR. H. C. ANDREWS.
 THE HON. RUTH BUCKLEY.
 MR. J. COOPER.
 CAPT. C. H. COTESWORTH (Chairman).
 COL. P. DEE.
 MR. J. W. GALLOWAY.
 CAPT. C. F. GARDNER.
 MR. C. HALES.
 MISS A. E. HALL.

MR. J. L. P. W. HEWISON.
 MISS A. HUDSON.
 MR. A. TURNER LAING.
 MR. H. W. LOOKER.
 MRS. C. I. MEADS, M.B.E.
 MR. F. H. NIAS.
 MR. H. F. PARKER.
 MR. B. SPRING RICE.
 MR. P. LENNOX WRIGHT.

Ex-officio: The Chairman of the County Council—Lt.-Col. R. V. Gwynne, D.S.O., and
 the Vice-Chairman of the County Council—Col. J. R. Warren, O.B.E., M.C.

THE MATERNITY AND CHILD WELFARE COMMITTEE.

Chairman—Mrs. C. I. MEADS, M.B.E.

The Members of the Public Health and Housing Committee with the addition of the following:—

MISS M. S. HOLGATE.

MRS. SHOESMITH (the late)

MRS. M. A. SHIRLEY.

MRS. R. L. THORNTON.

MR. A. W. GARDNER, M.R.C.S., L.R.C.P.

THE COMMITTEE FOR THE CARE OF THE MENTALLY DEFECTIVE.

MR. H. C. ANDREWS.
 MISS M. BEALE.
 MR. J. T. BRIDGER.
 COL. P. DEE.
 MR. J. M. FRASER.
 MISS A. E. HALL.
 MISS M. M. HAMPTON.
 MR. C. A. HAWES.
 MR. V. R. HUDSON.

MR. A. N. INNES (Chairman)
 MISS D. KNIGHT-BRUCE.
 MR. H. W. LOOKER.
 MRS. C. I. MEADS, M.B.E.
 MRS. M. H. OWEN.
 MR. W. E. PHILLIPS.
 MRS. C. M. M. SCOTT.
 MR. O. H. SWANN.

STAFF OF COUNTY PUBLIC HEALTH DEPARTMENT.

County Medical Officer of Health, School Medical Officer, and Chief Tuberculosis Officer.	R. Ashleigh Glegg, M.D., Ch.B., D.P.H.
Deputy County Medical Officer of Health, Deputy School Medical Officer and Chief Clinical Tuberculosis Officer.	Arthur Beeley, M.Sc., M.D., B.S., M.R.C.S., L.R.C.P., D.P.H.
Assistant School Medical Officer (part time) ..	Walter R. Dunstan, M.Sc., M.B., M.R.C.S., L.R.C.P., D.P.H.
.. .. .	William Gillitt, C.I.E., M.D., M.R.C.S., L.R.C.P., D.P.H.
.. .. .	William B. Stott, L.R.C.P. & S., D.P.H.
.. .. .	R. Sydney Davidson, M.R.C.S., L.R.C.P., D.P.H.
.. .. .	W. T. Donovan, M.B., Ch.B., D.P.H.
.. .. .	Rodie Parkhurst, M.B., C.M.
Assistant Clinical Tuberculosis Officer and Assistant School Medical Officer (part time)	N. E. Chadwick, M.A., M.D., M.B., B.Ch., M.R.C.S., D.P.H.
.. .. .	Sir Alan Hilary Moore, Bart., M.B., B.Ch., D.P.H.
Consultant for Physical Treatment (part time) ..	Surgeon-Commander G. Murray-Levick, R.N., M.R.C.S., L.R.C.P.
Orthopaedic Surgeon (part time)	V. C. Snell, M.B., B.S., F.R.C.S., M.R.C.S., L.R.C.P., (Resigned Nov. 1937).
.. .. .	E. E. Harris, M.R.C.S., L.R.C.P., (Commenced duty Dec. 1937).
Medical Superintendent of County Sanatorium for Tuberculosis, Robertsbridge.	John R. Dingley, M.B., B.S., M.R.C.S., L.R.C.P.
Assistant Medical Superintendent of County Sanatorium for Tuberculosis, Robertsbridge	Mrs. Ruth Dingley, M.A., M.D., M.R.C.S., L.R.C.P.
Consulting Throat Surgeon at Sanatorium ..	Gilbert Howells, F.R.C.S.
Consulting Orthopaedic Surgeon at Sanatorium	N. St. John J. G. D. Buxton, M.B., B.S., F.R.C.S., L.R.C.P.
Consulting Surgeon at Sanatorium ..	Derrick J. Martin, M.B., B.S., F.R.C.S., L.R.C.P.,

Medical Superintendent of Southlands Hospital and Assistant County Medical Officer (Institutions).	E. Bruce Low, M.B., Ch.B., D.P.H.
Senior Assistant Medical Officer, Southlands Hospital	E. K. McLean, M.B., Ch.B., F.R.C.S.
Assistant Medical Officer, Southlands Hospital	Isaac Finer, M.R.C.S., L.R.C.P. (resigned 15th January, 1937).
" " " " "	William Reid, M.B., Ch.B., (resigned 31st January, 1937).
" " " " "	J. S. Hogg, M.B., Ch.B., F.R.F.P.S., (appointed 24th January, 1937).
" " " " "	H. L. Connor, M.B., Ch.B., B.A.O., (appointed 1st April, 1937).
Consulting and Operating Surgeon,	J. R. Griffith, B.Ch., F.R.C.S., M.R.C.S., L.R.C.P.
Radiologist (part time)-	H. T. Cubbon, M.B., B.Ch., D.M.R.E., M.R.C.S., L.R.C.P.
Medical Officers of Venereal Diseases Centres (part-time)—	
Royal Sussex County Hospital, Brighton ..	F. H. Lawson, M.R.C.S., L.R.C.P.
Royal East Sussex Hospital, Hastings ..	P. Lazarus Barlow, M.D., M.B., B.Ch.
Kent and Sussex Hospital, Tunbridge Wells ..	G. L. M. McElligott, M.A., M.R.C.S., L.R.C.P.
County Dental Surgeon	Arnold Court, L.D.S., R.C.S.
" " " " " " ..	Wilfred Eddings, L.D.S., R.C.S.
" " " " " " ..	G. J. S. Rose, L.D.S., R.C.S.
" " " " " " ..	Miss A. W. M. Miller, L.R.C.P., & S., L.D.S., R.C.S.
Dental Surgeon at Sanatorium (part time) ..	K. F. Pedley, L.D.S., R.C.S.
County Health Inspector	H. Jessop, Cert. R.S.I., M.S.I.A.
Assistant County Health Inspector	Francis Hugh Leggat, Cert. R.S.I., M.R.San.I.
Chief Clerk	George F. Akehurst.
Inspector of Midwives and Superintendent of the East Sussex County Nursing Federation ..	Miss A. G. Mitchell, S.R.N., S.C.M.
District Nursing Superintendent	Miss D. M. Edginton, S.R.N., S.C.M.
" " " " " " ..	Miss C. M. McGregor, S.R.N., S.C.M.
" " " " " " ..	Miss E. M. Pinyon, S.R.N., S.C.M.
" " " " " " ..	Miss F. M. Smith, S.R.N., S.C.M.
Orthopaedic Nurse	Miss G. M. K. N. Lindop, C.S.M.M.G.
Home Visitor under Mental Deficiency Acts ..	A. S. Phillips.
Home Visitor under Mental Deficiency Acts to Feeble-minded Children } ..	Mrs. G. F. Ayshford Ayre.
Public Analyst under the Sale of Food and Drugs Acts	Samuel Allinson Woodhead, D.Sc., F.I.C.
Additional Public Analyst	R. F. Wright, B.Sc., A.R.C.S., F.I.C.
Inspectors of Weights and Measures—	
Lewes District, No. 215	William Chamberlain.
Rye District, No. 216	John J. Murphy.
Chief County Veterinary Inspector	W. P. Blount, F.R.C.V.S.
County Veterinary Inspector	J. King Shaw, M.R.C.V.S. (resigned 25th March, 1937).
" " " " " " ..	P. Baird, M.R.C.V.S.
" " " " " " ..	D. H. MacDonald, M.R.C.V.S. (commenced duty 1st April, 1937).
" " " " " " ..	J. W. R. Pearce, M.A., B.Sc., M.R.C.V.S. (commenced duty 1st April, 1937).
" " " " " " ..	John Edwardson, M.R.C.V.S. (commenced duty 1st June, 1937).

AREA AND POPULATION.

The Administrative County of East Sussex is 507,069 acres in extent (35,496 acres in Urban and 471,573 in Rural Districts). There are 143 civil parishes, of which seven are situated within the Boroughs. The rateable value for the whole of the Administrative County, as on the 1st April, 1937, was £2,973,802, and the product of a 1d. rate was estimated at £11,491. The County is bounded on the north by the Counties of Surrey and Kent, to the west lies the county of West Sussex, and the English Channel forms the southern boundary. The chalk range of the South Downs stretches roughly parallel with the coast for approximately 25 miles in the south-western portion, while the Forest Ridge of East Sussex occupies the northern part of the county. The Sussex Weald, where the soil is mainly clay, comprises all the central section of the county and a great part of the eastern districts. A small section in the extreme south-east consists of levels that have been reclaimed from the sea. The rivers are principally small streams, the only ones of note being the Rother which enters the sea at Rye, the Cuckmere which passes through the Downs and falls into the sea at Cuckmere Haven, and the Ouse which rises near Balcombe and flows to Newhaven.

There are three County Boroughs situated in the County, viz., Brighton, Eastbourne and Hastings, and four municipal boroughs.

Within the Administrative County there are also the two Port Sanitary Authorities of Newhaven and New Shoreham. Apart from agriculture the County has few industries and is mainly residential in character.

SANITARY DISTRICTS, 1937.

DISTRICT.	Census Population		Population Estimated by Registrar General 1937.	MEDICAL OFFICER OF HEALTH.
	1921.	1931.		
BOROUGHS—				
BEXHILL	20,363	21,229	23,100	Wm. T. Donovan, M.B., Ch.B., D.P.H.
HOVE	47,507	54,993	58,410	Norman E. Chadwick, M.A., M.D., M.B., B.Ch., M.R.C.S., D.P.H.
LEWES	10,946	10,993	11,920	Walter R. Dunstan, M.Sc., M.B., M.R.C.S., L.R.C.P., D.P.H.
RYE	4,033	4,058	4,060	Thomas Tomkinson Harratt, M.R.C.S., L.R.C.P.
URBAN DISTRICTS—				
BURGESS HILL ...	5,851	6,281	6,777	Wm. B. Stott, L.R.C.P. & S., D.P.H.
CUCKFIELD ...	10,334	11,298	13,320	Wm. B. Stott, L.R.C.P. & S., D.P.H.
EAST GRINSTEAD	8,106	8,728	9,519	R. S. Davidson, M.R.C.S., L.R.C.P., D.P.H.
NEWHAVEN ...	6,829	7,381	6,989	Rodie Parkhurst, M.B., C.M.
PORTSLADE-BY-SEA	8,219	9,527	11,680	Norman E. Chadwick, M.A., M.D., M.B., B.Ch., M.R.C.S., D.P.H.
SEAFORD	7,301	6,925	8,925	Walter R. Dunstan, M.Sc., M.B., M.R.C.S., L.R.C.P., D.P.H.
RURAL DISTRICTS—				
BATTLE	25,508	27,839	29,090	Sir Alan Moore, Bart., M.B., B.Ch., D.P.H.
CHAILEY ...	13,005	16,167	17,240	Walter R. Dunstan, M.Sc., M.B., M.R.C.S., L.R.C.P., D.P.H.
CUCKFIELD ...	21,710	22,822	24,220	Wm. B. Stott, L.R.C.P. & S., D.P.H.
HAILSHAM... ..	27,446	30,213	34,970	Wm. Gillitt, C.I.E., M.D., M.R.C.S., L.R.C.P., D.P.H.
UCKFIELD ...	39,133	38,341	38,480	R. S. Davidson, M.R.C.S., L.R.C.P., D.P.H.
PORT SANITARY AUTHORITIES—				
NEWHAVEN ...	—	—	—	Rodie Parkhurst, M.B., C.M.
NEW SHOREHAM	—	—	—	W. J. Butcher, M.R.C.S., L.R.C.P., D.P.H.

CHIEF VITAL STATISTICS FOR THE YEAR 1937.

TABLE I.

Group.	Population estimated by Registrar General 1937.	Live Births.		Deaths.		Infant Deaths (under 1 year).		Deaths from Heart Disease.		Deaths from Pulmonary Tuberculosis.		Deaths from other Tuberculous Diseases.		Deaths from Respiratory Diseases, not including Influenza.		Deaths from Cancer.	
		No.	Rate.	No.	Rate.	No.	Rate.	No.	Rate.	No.	Rate.	No.	Rate.	No.	Rate.	No.	Rate.
3 Large Towns ..	93,430	983	10.52	1489	15.94	34	34.59	444	4.75	45	.48	10	.11	111	1.19	231	2.47
7 other Urban Districts ..	61,270	805	13.14	689	11.25	30	37.27	198	3.23	27	.44	8	.13	51	.83	114	1.86
5 Rural Districts ..	144,000	1793	12.45	1782	12.38	70	39.04	504	3.50	52	.36	13	.09	121	.84	272	1.89
Whole County ..	298,700	3581	11.99	3960	13.26	134	37.42	1146	3.84	124	.42	31	.10	283	.95	617	2.07

† Rates calculated per 1,000 of the registered live births. * Rates calculated per 1,000 of the estimated population.

TABLE II.

District.	Area in statute acres (land and inland water), 1931.	Inhabited houses at census 1931.	Population estimated by Registrar General, 1937.	Density of Population per acre, 1931.	Live Births.			Stillbirths.			Deaths under 1 year of age.		Deaths at all ages belonging to the District.	Death Rate per 1,000 Population.
					Number.	Rate per 1,000 population.	Rate per 1,000 population.	Rate per 1,000 Total Births.	Number.	Rate per 1,000 live Births Registered.				
<i>Three Large Towns.</i>														
Bexhill	7993	4548	23100	2.7	255	11.04	6	.26	22.99	8	31.37	338	14.63	
Hove	3953	12358	58410	13.9	570	9.76	15	.26	25.64	19	33.33	990	16.95	
Lewes	1988	2890	11920	5.5	158	13.26	5	.42	30.67	7	44.30	161	13.51	
TOTALS ..	13934	19796	93430	6.3	983	10.52	26	.28	25.77	34	34.59	1489	15.94	
<i>Seven other Urban Districts.</i>														
Burgess Hill	2024	1631	6777	3.1	99	14.61	4	.59	38.83	1	10.10	78	11.51	
Cuckfield	3912	2484	13320	2.9	158	11.86	7	.53	42.42	8	50.63	140	10.51	
East Grinstead	6600	2111	9519	1.3	119	12.50	1	.11	8.33	2	16.81	126	13.24	
Newhaven	1772	1626	6989	4.2	106	15.17	6	.86	53.57	7	66.04	72	10.30	
Portslade-by-Sea ..	1953	2117	11680	4.9	176	15.07	2	.17	11.24	6	34.09	124	10.62	
Rye	1027	1131	4060	4.0	53	13.95	1	.25	18.52	3	50.60	62	15.27	
Seaford	4274	1539	8925	1.6	94	10.53	5	.56	50.51	3	31.91	87	9.75	
TOTALS ..	21562	12639	61270	2.5	805	13.14	26	.42	31.29	30	37.27	689	11.25	
<i>Five Rural Districts.</i>														
Battle	119966	7427	29090	.23	368	12.65	11	.38	20.02	17	46.20	360	12.38	
Chailey	66038	4109	17240	.24	219	12.70	7	.41	30.97	11	50.23	184	10.67	
Cuckfield	74335	5806	24220	.31	316	13.05	8	.33	24.69	11	34.81	307	12.68	
Hailsham	99138	7457	34970	.30	442	12.64	23	.66	49.46	16	36.20	412	11.78	
Uckfield	112096	9636	38480	.34	448	11.64	18	.47	38.63	15	33.48	519	13.49	
TOTALS ..	471573	34435	144000	.29	1793	12.45	67	.47	36.02	70	39.04	1782	12.38	
Totals for County ..	507069	66870	298700	.59	3581	11.99	119	.40	32.16	134	37.42	3960	13.26	

TABLE III.

Number of deaths at different periods of life in the Administrative County during the year 1937.

Sex.	Urban Districts.												Rural Districts.											
	All ages.	Under 1 yr.	1-2	2-5	5-15	15-25	25-35	35-45	45-55	55-65	65-75	Over 75	All ages.	Under 1 yr.	1-2	2-5	5-15	15-25	25-35	35-45	45-55	55-65	65-75	Over 75
Males	953	37	5	7	14	18	25	52	61	165	262	307	907	39	4	7	12	18	32	33	65	159	249	289
Females	1225	27	1	7	10	12	29	31	90	167	326	525	875	31	6	4	5	8	26	36	72	132	208	347
Totals	2178	64	6	14	24	30	54	83	151	332	588	832	1782	70	10	11	17	26	58	69	137	291	457	636

TABLE IV (b).
Causes of and Ages at Death during the year 1937 in the Rural Districts.

CAUSES OF DEATH.	Deaths in or belonging to Districts, at subjoined ages.											Deaths in or belonging to each District, at all ages.					
	All Ages.	Under 1 year.	1 and 2.	2 and 5.	5 and 15.	15 and 25.	25 and 35.	35 and 45.	45 and 55.	55 and 65.	65 and 75.	75 and upwards.	Battle.	Chalvey.	Cuckfield.	Hastham.	Uckfield.
1. Typhoid and Paratyphoid Fevers	1								1								
2. Measles	0																
3. Scarlet Fever	1				1												1
4. Whooping Cough	3	1		2													1
5. Diphtheria	2		2														2
6. Influenza	79		2	1		2	4	5	15	23	27			13	14	11	28
7. Encephalitis Lethargica	2																
8. Cerebro-Spinal Fever	2	2															
9. Tuberculosis of the Respiratory System	52				6	19	5	7	8	4	2		8	10	9	9	16
10. Other Tuberculous Diseases	13		1	5	1		2		2	1	1		5	2	1	2	5
11. Syphilis	3						1		1	1							
12. General Paralysis of the Insane, Tabes Dorsalis	2																
13. Cancer, Malignant Disease	272			1		4	8	31	62	93	73		57	34	38	54	89
14. Diabetes	24					1	2	2	3	10	6		5	1	2	6	10
15. Cerebral Haemorrhage, etc.	106					2	5	24	31	44			27	5	21	29	24
16. Heart Disease	504				1	3	4	25	61	156	254		109	53	83	124	135
17. Aneurysm	4																
18. Other Circulatory Diseases	103						1	2	13	23	64		13	7	36	19	28
19. Bronchitis	32	1											1	6	3	5	10
20. Pneumonia (all forms)	74	12	5		3	4	8	12	13	14			10	5	13	20	26
21. Other Respiratory Diseases	15				2	1	3	1	5	3			2	1	5		7
22. Peptic Ulcer	14						2						2	3	4		5
23. Diarrhoea, etc. (under 2 years)	5	4	1														
24. Appendicitis	6																
25. Cirrhosis of Liver	6																
26. Other Diseases of Liver, etc.	8																
27. Other Digestive Diseases	38	5					3	3	10	9	5		5	7	7	12	7
28. Acute and Chronic Nephritis	61			1	2	1	2	7	6	15	13		12	1	12	19	17
29. Puerperal Sepsis	0																
30. Other Puerperal Causes	4																
31. Congenital Debility, Premature Birth, Malformations, etc.	36	36															
32. Senility	54																
33. Suicide	20																
34. Other Violence	65	2		1	4	9	5	8	11	6	10	9	20	6	5	17	17
35. Other Defined Diseases	168	6	1		3	6	10	8	23	30	38	43	40	14	25	36	53
36. Causes ill-defined or unknown	3																
All Causes	1782	70	10	11	17	26	58	69	137	291	457	636	360	184	307	414	519

Deaths of Infants under 1 year { Total 70
Illegitimate 6

BIRTH-RATE.

The total number of live births registered in the Administrative County during the year was 3,581, or 60 more than in 1936. Of the live births, 169 were illegitimate, giving a percentage of 4.72. In addition to the live births, 119 stillbirths, of which 5 were illegitimate, were registered. The birth rate for the County was **11.99** live births per 1,000 of the population, a rate which was .08 per 1,000 above that for the year 1936. The number of live births registered was lower by 379 than the registered deaths. The rate for England and Wales was 14.9 per 1,000.

DEATH-RATES.**General Death-Rate.**

The general death-rate for the Administrative County was **13.26** per 1,000 of the population as compared with a rate of 12.91 in 1936. The rate for England and Wales was 12.4 per 1,000.

The Registrar-General has supplied comparability factors for each Urban and Rural District and for the Administrative County as a whole for the purpose of adjusting the local death-rates to compare these with the crude death-rate for England and Wales, or with the mortality of any other local area the crude death-rate of which has been similarly modified with its own factor for the purpose. If the populations of all areas were similarly constituted as regards the proportions of their sex and age group components, their crude death-rates (per 1,000 population) could be accepted as valid comparative measures of the mortalities experienced by the several populations. In practice, however, the populations are not thus constituted. Therefore, it is necessary to use the factor which has been supplied for purposes of comparison. The factor for the Administrative County is .79 and when the crude death-rate of 13.26 is multiplied by this figure the adjusted death-rate for the County is shown as **10.48** compared with 12.4 for England and Wales.

The number of registered deaths from all causes in the County for the year was 3,960 as against 3,816 for the previous year—an increase of 144. On comparison with the figures for 1936 deaths from 18 causes show an increase, the chief of these being:—

Heart Disease	from 1082 to 1146	Cerebral Haemorrhage	from 237 to 255
Cancer	.. 611 .. 617	Other Circulatory Diseases	.. 206 .. 215
Other Tuberculous Diseases	.. 19 .. 31	Influenza	.. 29 .. 139

Special reference is made below, under the appropriate headings, to infant mortality, maternal mortality and to deaths from tuberculosis, diseases of the respiratory organs, heart disease and cancer.

Infant Mortality.

There were 134 deaths of infants under one year of age in the year 1937, giving a rate of **37.42** per 1,000 live births, as compared with 131 deaths and a rate of 37.21 in 1936. The rate for 1936 was the lowest ever recorded for the Administrative County as a whole, and although there was a slight increase in 1937 it will be seen that the rate continues to be low as compared with former years. In 1915, the year in which the Maternity and Child Welfare Scheme in this County was commenced the infantile mortality rate was 86.07 per 1,000 births. In that year only 914 infants out of every 1,000 survived the first year of life whereas in 1937, 963 infants out of every 1,000 survived the first year. This improvement is, no doubt, due largely to better child nurture resulting from health education generally and in particular to the instruction given by health visitors, combined with the increased facilities provided by the County Council for the care of mothers and infants. Of the 134 deaths, 11 were of illegitimate infants. The infant mortality rate of illegitimate infants was 65.09 per 1,000 illegitimate live births. It is satisfactory to note that the illegitimate death rate shews a practically continuous decline in recent years. In 1932 it was 96.7 per 1,000 births.

Of 115 deaths of infants, including inward transfers, notified by the Registrars of Births and Deaths in the Administrative County (excluding Hove) during the year 1937, seventy-seven (66.96 per cent.) died during the first month of life (twenty-eight of these were due to prematurity), 13 between one and three months, 12 between three and six months, and 13 between six and twelve months. The causes of death during the first year of life were mainly from congenital debility, premature birth, malformation, pneumonia, diarrhoea and other injurious conditions before and at the time of birth.

The following statement shews the average death-rates of infants under one year per 1,000 births for five-year periods from 1906 to 1935 and for the years 1936 and 1937.

TABLE V.*Deaths at ages under one year per 1,000 births. Average rates.*

Period.	East Sussex.	England and Wales.
1906 to 1910	79.8	116.8
1911 to 1915	73.4	109.6
1916 to 1920	63.1	90.6
1921 to 1925	48.0	75.8
1926 to 1930	44.7	67.8
1931 to 1935	42.87	62.2
1936 and 1937	37.32	58.5

Maternal Mortality.

It is recorded in connection with the 3,700 live and stillbirths that 6 women lost their lives from causes directly due to child bearing, representing a Maternal Mortality rate for the Administrative County (including the Borough of Hove) of only **1.62** per 1,000 live and stillbirths, as compared with a rate of 3.01 in 1936. One of the six women died from puerperal sepsis, representing a rate of .27 per 1,000; the remaining 5 died from other causes, representing a rate of 1.35 per 1,000. One of the 6 deaths occurred within the area of the Borough of Hove which is a Local Authority for maternity and child welfare. This death was due to puerperal sepsis. There were, therefore, only 5 deaths in the maternity and child welfare area of the Administrative County of East Sussex, giving a death-rate of **1.61** per 1,000. The rate for the whole of England and Wales was 3.23 per 1,000 (.97 from sepsis and 3.26 from other causes). Of the 5 deaths referred to above, 4 occurred amongst residents of the County area who were at the time of death in hospitals outside the County. The registered causes of death were as follows:

- | | | |
|--|---|--|
| 1. Cardiac failure.
Post partum hæmorrhage.
Uterine inertia. | 2. Secondary anæmia.
Post partum hæmorrhage.
Retained products.
Sub-acute nephritis. | 3. Placenta prævia.
Ante-partum hæmorrhage. |
| 4. Obstetric shock and post partum hæmorrhage.
Obstructed labour.
Hydrocephalus. | 5. Eclampsia (intrapartum). | |

Each maternal death occurring in the Administrative County was the subject of a special enquiry, and full information was supplied to the Special Committee of the Ministry of Health on Maternal Mortality.

The following Table sets out the Maternal Mortality Rate for each year during the last eleven years:—

TABLE VI.

Year.	England and Wales.	Administrative County of East Sussex (including the Borough of Hove).	East Sussex Maternity and Child Welfare Area (i.e., excluding the Borough of Hove).
1927	4.11	5.02	4.6
1928	4.42	4.39	3.22
1929	4.33	2.9	2.57
1930	4.4	4.5	4.7
*1931	3.94	2.59	2.38
*1932	4.00	5.28	4.64
*1933	4.23	2.64	2.42
*1934	4.41	4.45	3.99
*1935	4.1	3.14	3.05
*1936	3.65	3.01	2.92
*1937	3.23	1.62	1.61

* Per 1,000 births, including stillbirths. The rate in previous years was calculated on live births only.

Maternal mortality might be still further reduced in this County if the facilities for safeguarding mothers in confinement, so fully provided by the County Council, were always taken advantage of. Unfortunately, it is not possible to ensure that all mothers will co-operate with doctors and nurses, and those mothers who do not co-operate run unnecessary risk.

Death-Rate from Tuberculosis.

In East Sussex, in 1937, pulmonary tuberculosis was responsible for 124 deaths, the same as in the previous year, and for 31 deaths from other forms of tuberculosis, as compared with 19 in 1936. The death-rate from pulmonary tuberculosis was .42 per 1,000 of the population, and from other tuberculous diseases .1 per 1,000 in 1937 as compared with .42 and .06 respectively in 1936. The rates for England and Wales for 1937 were: pulmonary tuberculosis .58 per 1,000 and non-pulmonary .11 per 1,000.

The trend of the death-rate from pulmonary tuberculosis continues to be downward. Although the reduction in the rate from year to year is small, yet it has been reduced to nearly half the rate for 1913. Pulmonary tuberculosis has its highest incidence at an age when the lives of those attacked are of most value to the community. Reference to Tables IV (a) and (b) will show that the majority of the deaths from pulmonary tuberculosis occur between the ages of 25 and 55. The figures given below show the average death-rates from pulmonary tuberculosis for England and Wales and for East Sussex for the five-year periods 1909 to 1933 and for the four years 1934 to 1937.

TABLE VII.

Deaths from pulmonary tuberculosis. Average rates per 1,000 of the population.

Period.	East Sussex.	England and Wales.
1909 to 1913	.79	1.02
1914 to 1918	.85	1.17
1919 to 1923	.68	.89
1924 to 1928	.59	.8
1929 to 1933	.49	.69
1934 to 1937	.45	.60

Death-Rate from Diseases of the Respiratory Organs.

The number of deaths in 1937 from non-tuberculous diseases of the respiratory organs, including pneumonia, but excluding influenza, was 283, or about one-fourteenth of all the deaths. The deaths from these diseases were 9 less than in 1936. They are amongst the chief causes of death at the beginning and end of life and should, at any rate in infancy, be in a large measure preventable. The death-rate in 1937 from these diseases was .95 per 1,000 of the population as against .99 in 1936.

Death-Rate from Heart Disease.

There were 1146 deaths registered from this cause, mainly in the later years of life. The rate of 3.84 per 1,000 of the population in 1937 is to be compared with 3.66 per 1,000 in 1936. Heart disease was responsible for over one-fourth of all the deaths in the Administrative County. Preventive measures should be directed to the prevention and treatment of rheumatism and other diseases resulting from streptococcal infection. Periodical medical examination after the age of 40 years would bring these diseases under earlier treatment and would reduce the incidence of heart disease.

Death-Rate from Cancer.

Six hundred and seventeen deaths from this disease were registered, as against 611 in 1936. The rate of 2.07 per 1,000 of the population in 1937 is the same as the rate for 1936. The rate for England and Wales for 1937 was 1.63 per 1,000. It will be seen from Tables IV (a) and IV (b) that most of the deaths occur after the age of 45. If the disease is diagnosed in an early stage there is evidence that life can be prolonged by suitable treatment.

There is no definite County Scheme providing for the diagnosis and treatment of Cancer, but facilities for the treatment of this disease are available at the Council's Hospital (Southlands Hospital, Shoreham-by-Sea) where cases receive operative treatment and treatment by radium which is hired from the Royal Sussex County Hospital, Brighton, or from The London Hospital. Occasional cases are sent by the County Council under the Poor Law to The Marie Curie Hospital, Hampstead, London, to the Royal (Free) Cancer Hospital, London, or to The Royal Sussex County Hospital, Brighton, which Hospitals have special facilities for the diagnosis and treatment of Cancer. Lectures under the auspices of the British Empire Cancer Campaign were given to the Etchingham Women's Institute and Hurstpierpoint Toc H Group during the year.

It is hoped that with the increased publicity created throughout the country generally by the British Empire Cancer Campaign, many more persons will seek medical advice for conditions that may possibly be early manifestations of Cancer.

In spite of the strenuous efforts of this Campaign, much remains to be done before the provision of specialised treatment for this disease can be said to be adequate. It is recommended that arrangements should be made by the Authority, whereby, medical practitioners may refer cases to a recognised Radium and X-ray Centre for treatment otherwise than under the Poor Law. Such an arrangement should include payment to the Hospital to cover the cost of treatment and payment of the travelling expenses of necessitous persons in connection with such treatment.

The following table gives the number of patients suffering from Cancer under care during the year 1937 at Southlands Hospital, Shoreham, and at the Public Assistance Infirmaries in the County:—

	<i>No. of Patients.</i>		<i>No. of Patients.</i>
Southlands Hospital, Shoreham	.. 99	Newhaven Infirmary	.. .. 9
Battle Infirmary .. ..	.. 3	Rye Infirmary .. ..	.. .. 3
Chailey Infirmary .. ..	.. 9	Ticehurst Infirmary .. ..	.. .. 0
Cuckfield Infirmary .. ..	.. 13	Uckfield Infirmary .. ..	.. .. 11
East Grinstead Infirmary .. ..	.. 8		

Inquests.

A table is given, in an appendix to this Report, of a return of Inquests held in 1937, together with a Report by Dr. E. F. Hoare on Inquests held for the Lewes Coroner's District during the year.

PREVALENCE OF EPIDEMIC AND OTHER INFECTIOUS DISEASES.

Smallpox.

Smallpox did not occur in the Administrative County during the year.

Diphtheria.

There was a marked decrease in the incidence of diphtheria during 1937, only 89 cases being notified compared with 157 for the previous year. Six deaths occurred among the 89 cases, giving a case mortality of 6.7 per cent., as compared with that of 6.3. per cent. for the previous year.

In the last Annual Report, special reference was made to the preventive measures adopted in the Cuckfield Urban and Rural Districts and in the East Grinstead Urban and Uckfield Rural Districts.

In respect of the Cuckfield Rural District it was stated that 90 per cent. of the children attending the Elementary Schools had been immunised against diphtheria. The Medical Officer of Health now reports that the children who received the injections were Schick-tested during 1937 and it was found that 98.2 per cent. were negative, that is to say, were protected. Those who were found to be still positive received a further injection in order to confer the necessary immunity. It is proposed to offer every year free facilities in the case of those children not immunised, in order to keep up, or even increase, the percentage of children protected.

In the Cuckfield Urban District 84 per cent. of the children attending the Elementary Schools and a number of children under school age had been immunised and it was found by the Schick test that 98 per cent. had been rendered immune by the three injections. Those still susceptible received a further injection. During the year only two cases of diphtheria were notified in this area and these had not been immunised.

From the Annual Reports received, immunisation for diphtheria has not proceeded very far in other districts. In Hove, Portslade, and East Grinstead, and in the Rural District of Uckfield, the Medical Officers of Health have undertaken to immunise children with material provided at the expense of the Local Sanitary Authorities, and elsewhere in the County, the Local Sanitary Authorities have offered to provide toxin-antitoxin mixture free of cost to local doctors whose fee is to be paid by the parents.

Dr. Chadwick reports that at the "Toddlers' " Clinic established at Hove in April, 1937, 68 out of 100 children received the full three protective doses. In Portslade no applications have been made for immunisation. In the Uckfield Rural District 504 children were immunised by Dr. Davidson, the Medical Officer of Health, in 1937. None were immunised by him in East Grinstead.

There is no information as to the number of persons who were immunised elsewhere in the County, but it is understood that very few applications were received from medical practitioners for a free issue of immunising material.

The only scheme that is likely to give a satisfactory result is the one under which, in addition to a free supply of toxin-antitoxin mixture, a fee is paid to medical practitioners for immunisation.

Local Sanitary Authorities would be well advised to consider whether all possible steps should not be taken to establish immunity from diphtheria in the child population. It is evident that the offer of free immunising material only will not bring about that desirable result.

Scarlet Fever.

The number of cases of scarlet fever notified in the County during 1937 was 348, as compared with 365 during the previous year. Two deaths from this disease were reported, giving a case mortality of .57 per cent.

Typhoid and Paratyphoid Fever.

Two cases of typhoid fever and six of paratyphoid were notified during the year under review. One death was certified as being attributable to typhoid fever.

Puerperal Pyrexia.

During the year 1937, 9 notifications were received of puerperal sepsis and 28 cases of puerperal pyrexia. One death occurred from puerperal sepsis.

The term "puerperal sepsis" has been omitted from the definition of "notifiable disease" in Section 343 of the Public Health Act, 1936. The effect is that as from the 1st October, 1937, notifications of puerperal sepsis are included under the heading of puerperal pyrexia.

Medical practitioners are in all cases informed of the facilities available for treatment under the County Council's Maternity and Child Welfare Scheme. Details concerning these facilities, and the results of treatment, are given under the section of the Report relating to Maternity and Child Welfare.

Encephalitis Lethargica.

Only one case of encephalitis lethargica was notified in the County during the period, but 8 deaths from this disease amongst residents of the County are shown in the Return of the Registrar-General for 1937.

Pneumonia.

Two hundred and forty-one cases of pneumonia were notified, an increase of 82 over the figure for the previous year. Acute primary pneumonia and acute influenzal pneumonia are the only varieties notifiable.

Ophthalmia Neonatorum.

Thirteen cases of this disease were reported, two more than in 1936 (see Section dealing with Maternity and Child Welfare).

Acute Poliomyelitis.

During 1937, eight cases of acute poliomyelitis (infantile paralysis) were notified in the County, as compared with three during the previous year. One death was recorded. Medical practitioners reporting this disease are immediately supplied with full details concerning facilities provided by the County Council for treatment. Dr. Murray-Levick, Consultant for Physical Treatment, is available to visit the home of any patient suffering from the disease and to consult with the medical practitioner in charge of the case.

The Non-Notifiable Infectious Diseases.

The most important of these are influenza, whooping cough, measles, and infantile diarrhoea. The following statement shows the number of deaths registered from these diseases during the year :-

Influenza	139	Whooping Cough	6
Measles	3	Diarrhoea (under 2 years)	12

ISOLATION HOSPITAL ACCOMMODATION.

Smallpox.

Accommodation for cases of smallpox in East Sussex is provided in the Sedgebrook Hospital at Plumpton which has ten beds on a basis of 144 square feet per bed. The Hospital serves five urban and three rural districts. Arrangements have also been made for the reception of cases from the remaining districts of the County in the Brighton and Hastings Smallpox Hospitals, five beds having been allocated to the County area in the Brighton Smallpox Hospital and eight in the Hastings Hospital.

Other Infectious Diseases.

The following Isolation Hospitals were maintained in the Administrative County at the end of the year 1937. The number of beds shown against each Hospital is the accommodation provided on a basis of 144 square feet per bed, which is the standard recognised by the Ministry of Health.

Isolation Hospital.	Maintained by	Beds.
Bexhill, Clinch Green	Bexhill Municipal Borough Council	10
Chailey	Chailey Rural District Council	18
Hurstpierpoint, Deans Farm	Mid-Sussex Joint Hospital Board	28
East Grinstead, High Grove	{ East Grinstead Urban District Council	18
	{ Uckfield Rural District Council	
Hove	Hove Municipal Borough Council	50
Lewes	Lewes Municipal Borough Council	12
Newhaven	Newhaven Urban District Council	12

The Hastings County Borough Isolation Hospital, pending an agreement between the Councils concerned, provides twelve beds for the Battle Rural District Council and three beds for the Borough Council of Rye. In the Tunbridge Wells Isolation Hospital five beds are reserved for cases from the Battle Rural District.

Ambulances.

Particulars of the ambulances available for the transport of cases of infectious disease are given on page 49.

Scheme under Section 63 of the Local Government Act, 1929.

Particulars of this scheme, which was approved by the Minister of Health on the 31st August, 1936, were given in my last report. The provisions of the scheme have been put into operation in certain areas but in other areas the arrangements for the provision of the minimum accommodation required have not yet been completed and the accommodation is, therefore, provided for the time being under arrangements in operation prior to the approval of the scheme. The requirements of the scheme are shown hereunder with a note of the position concerning each area on the 31st December, 1937.

Diseases Other than Smallpox.

Area No. 1.—Borough of Rye. (Minimum number of beds required, 3.) Negotiations are proceeding for the provision of accommodation in the Hastings County Borough Sanatorium.

Area No. 2.—Rural District of Battle. (Minimum number of beds required, 14.) Negotiations are proceedings for the provision of this accommodation in the Hastings County Borough Sanatorium, and in the Tunbridge Wells Isolation Hospital.

Area No. 3.—Borough of Bexhill. (Minimum number of beds required, 15.) Negotiations are proceeding for the provision of accommodation in the Hastings County Borough Sanatorium.

Area No. 4.—Rural District of Hailsham. (Minimum number of beds required, 15.) Arrangements have been made for the provision of the prescribed accommodation in the Eastbourne County Borough Isolation Hospital.

Area No. 5.—Borough of Lewes and the Urban Districts of Newhaven and Seaford. (Minimum number of beds required, 18.) Application has been made to the Ministry of Health for approval of the formation of a Joint Hospital Board to administer the Newhaven Isolation Hospital, in which the necessary accommodation will be provided.

Area No. 6.—Rural District of Chailey. (Minimum number of beds required, 8.) The Chailey Rural District Council wish to retain their own hospital for the accommodation of certain cases of infectious disease, and are negotiating with the Hove Borough Council for the provision of accommodation in the Hove Borough Sanatorium for other cases.

Area No. 7.—Urban District of East Grinstead and Rural District of Uckfield. (Minimum number of beds required, 26.) The Uckfield Rural District Council wish to send their cases to the Tunbridge Wells Isolation Hospital instead of to the East Grinstead Isolation Hospital and the matter is receiving the consideration of the Authorities concerned. In the meantime, the joint arrangement for the use of the East Grinstead Isolation Hospital is being continued.

Area No. 8.—The Urban Districts of Burgess Hill and Cuckfield and the Rural District of Cuckfield. (Minimum number of beds required, 28.) A Joint Board has been established for the provision at the Deans Farm Isolation Hospital, Hurstpierpoint, of the accommodation prescribed by the scheme. The Hospital now contains 32 beds, a new cubicle block having been opened in June, 1938.

Area No. 9.—Borough of Hove and the Urban District of Portslade-by-Sea. (Minimum number of beds required, 40.) The Hove Borough Sanatorium provides the 40 beds prescribed by the scheme. Six of these beds have been allocated to Portslade-by-Sea.

Smallpox.

Area No. 1.—The Rural Districts of Chailey, Cuckfield, and Uckfield and the Urban Districts of Cuckfield, East Grinstead, Burgess Hill, Newhaven, and Seaford. (Minimum number of beds required, 10.) These authorities constitute the East Sussex Western Smallpox Hospital District Committee, which is providing the number of beds prescribed by the scheme. The District Committee is, in consequence of Section 6 of the Public Health Act, 1936, to be abolished and reconstituted as a Joint Hospital Board.

Area No. 2.—Boroughs of Hove and Lewes, and the Urban District of Portslade-by-Sea. (Minimum number of beds required, 5.) Arrangements are being made for the provision of the required accommodation in the Brighton County Borough Smallpox Hospital.

Area No. 3.—Boroughs of Bexhill and Rye, and the Rural Districts of Battle and Hailsham. (Minimum number of beds required, 8.) Negotiations are proceeding for the provision of the necessary accommodation in the Hastings Smallpox Hospital.

TABLE VIII.
Cases of Notifiable Diseases occurring during the year 1937.

	TOTAL NUMBERS OF NOTIFIABLE DISEASES IN EACH DISTRICT.																	
	Boroughs.				Urban Districts.					Rural Districts.								
	Hove.	Bexhill.	Lewes.	Rye.	Totals.	Burgess Hill.	Cuckfield.	East Grinstead.	Newhaven.	Portsmouth-by-Sea.	Seaford.	Totals.	Battle.	Chailley.	Cuckfield.	Hailsham.	Uckfield.	Totals.
*Small-Pox ...	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Cholera ...	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
*Diphtheria (including Membranous Croup) ...	0	18	7	0	39	2	8	0	2	4	18	5	2	4	6	15	32	0
*Erysipelas ...	64	4	7	0	22	2	6	2	7	1	33	5	2	5	2	5	19	0
*Scarlet Fever ...	348	34	9	1	97	1	8	4	8	3	29	45	11	35	45	86	222	0
Typhus Fever ...	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
*Typhoid and Paratyphoid Fevers ...	8	2	0	0	2	0	2	2	0	1	6	0	0	0	0	0	0	0
Relapsing Fever ...	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Continued Fever ...	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
*Puerperal Pyrexia ...	28	4	3	0	8	0	2	0	2	1	6	3	1	0	6	4	14	0
*Puerperal Fever ...	9	1	3	0	5	0	1	0	0	0	1	1	0	0	1	1	3	0
Plague ...	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Cerebro-spinal Fever ...	2	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0
Acute Poliomyelitis ...	8	1	1	0	2	1	2	0	0	1	4	0	0	1	1	0	2	0
Ophthalmia Neonatorum ...	13	1	4	0	8	0	1	0	0	0	1	0	0	0	4	0	4	0
Acute Polioencephalitis ...	3	1	0	0	1	2	0	0	0	0	2	0	0	0	0	0	0	0
Encephalitis Lethargica ...	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Malaria ...	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Dysentery ...	27	0	0	0	0	0	1	13	0	0	14	0	0	0	13	0	13	0
*Pneumonia ...	241	35	6	3	45	12	2	13	8	16	54	15	4	22	58	43	142	0
Trench Fever ...	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total for County Administration	842	127	68	33	3 231	20	21	51	17	35	14	158	74	21	80	123	155	453

*These figures are taken from the Annual Return made to the County Medical Officer by the Registrar General. In the case of other diseases the figures are extracted from the Weekly Returns made by the District Medical Officers of Health.

PUBLIC HEALTH ACTIVITIES OF THE COUNTY COUNCIL.

Details of the public health work of the County Council are given below under appropriate headings.

MATERNITY AND CHILD WELFARE.

Provision of Midwives.

The County Council are the Local Supervising Authority under the Midwives Acts for the Administrative County with the exception of the Borough of Hove.

The proposals of the County Council under the Midwives Act, 1936, for the improvement of the midwifery service in this County were put into operation on the 1st April, 1937, and as from that date increased grants, as detailed in my report of last year, became payable to the District Nursing Associations.

An adequate midwifery service has been provided in the County by agreement with the East Sussex County Nursing Federation and with the District Nursing Associations, which cover the whole of the County area. The service is satisfactory generally, particularly so in those districts in which the District Nursing Associations have appointed fully-trained Nurses with the Health Visitor's Certificate. Supervision under the direction of the County Medical Officer of Health is exercised by the County Nursing Superintendent, who is also Supervisor of Midwives, assisted by four District Nursing Superintendents appointed by the County Council, who give approximately one-fourth of their time to the work of the Federation in connection with the supervision of general nursing work, thus avoiding the dual inspection of Nurses.

The maximum annual grants allowed to District Nursing Associations in aid of midwifery and maternity nursing services and infant health visiting in respect of the financial year 1937-38 amounted to £13,260 3s. 11d., as compared with £10,232 in 1936-37. From this amount midwifery and maternity nursing fees received by the Associations were deducted, leaving a total net grant of £10,681 19s. 5d., as against £7,933 in 1936-37.

In addition to these grants a sum of £581 was paid to the East Sussex County Nursing Federation towards the expenses of the Federation attributable to midwifery, a sum of £360 in respect of the training of midwives, and a grant of £53 17s. 6d. being one-half of the net cost of the employment of three emergency nurse-midwives.

Amalgamation of adjacent District Nursing Associations in areas which could be nursed efficiently by a reduced nursing staff with motor transport was continued during the year, a complete survey of the County area being made for this purpose. Eight Associations were amalgamated in the year 1937, making a total of 48 Associations since the policy of amalgamation was commenced in the year 1928. The area of one Association was extended to include (for the purpose of midwifery, health visiting, and school nursing work) the area of another Association which had disaffiliated. In the year 1928, there were 92 Associations which by the end of the year 1937 had been reduced, by amalgamations, to 67.

Supervision of Midwives.

The number of certified midwives who, during the year 1937, notified their intention to practise either temporarily or permanently in the area for which the County Council are responsible, was 227. In January, 1937, there were 164 certified midwives on the Register, of whom 162 were trained and 2 untrained. At the end of the year there were 169 on the Register, of whom 168 were trained and 1 untrained.

The following Table shows the number of midwifery and maternity patients attended by midwives practising in the County Area, excluding Hove, during the year. It will be seen that the midwives attended 2,444 confinements, in 1,450 of which they were engaged as midwives and in 994 as maternity nurses. The total number of births, including still births, in the area was 3,115. The number of confinements at which certified midwives were engaged as such, together with those in which they, although engaged as maternity nurses, actually delivered the women, was 1,570, representing 50.4 per cent. of the total births. The number of confinements at which they acted either as midwives or maternity nurses represented 78.46 per cent. of the total births.

It is to be noted that the 169 midwives referred to in the Table were those practising only at the end of the year, and that the 2,444 confinements were attended by all midwives practising during the year.

TABLE IX.

	Number of Midwives practising on 31st Dec., 1937.	Number of Confinements attended by Midwives practising during year.	Engaged as Midwife.	Engaged as Maternity Nurse.		
				Medical Practitioner absent.	Medical Practitioner present.	Total.
<i>Trained Midwives :</i>						
Working for Associations affiliated to East Sussex County Nursing Federation ..	93	1964	1229	115	620	735
Working independently or in Institutions ..	75	478	219	5	254	259
<i>Bona fide Midwives :</i>						
Working independently	1	2	2	0	0	0
Totals	169	2444	1450	120	874	994

Notifications under the Midwives Acts received from certified midwives during the year were as follows:—

(a) Medical assistance required—		(c) Stillbirths—	
(i) for mother	601	(i) male	10
(ii) for infant	111	(ii) female	4
(b) Deaths—		(d) Engaged in laying out the dead ..	19
(i) of mother	1	(e) Liability to be a source of infection ..	119
(ii) of infant	7	(f) Substitution of artificial feeding for breast feeding	49

Administration of Anæsthetics by Midwives.

The County Council decided to provide, during the year, apparatus for the use of District Nurse-Midwives for the administration of gas and air to women during labour. The Rules of the Central Midwives' Board at present require that a state-certified midwife, or a state-registered nurse, or a senior medical student, or a pupil midwife must be present at the time of administration, in addition to the midwife in charge of the case. The patient must also have been examined by a registered medical practitioner one month before her confinement, and found to be in a fit condition for gas and air administration. Three outfits have already been provided, and it is proposed to put these into use during the year 1938.

Post-Certificate Instruction of Midwives.

Under the Midwives Act, 1936, the County Council have arranged to pay fees for midwives to attend approved courses of post-certificate instruction and to extend their previous arrangement for the provision of substitute nurses to take the place of regular midwives when attending such courses. During the year 1937, 7 midwives received post-certificate instruction as compared with 4 in 1936.

Inspection of Midwives—Report by Miss A. G. Mitchell, Inspector of Midwives.

"On the 31st December, 1937, there were 169 certified midwives practising in the Administrative County of East Sussex, of whom 93 were working in districts affiliated to the East Sussex County Nursing Federation.

"During the year 411 routine inspections were paid by the County Superintendent and by the four District Superintendents, of which 84 were inspections of midwives in independent practice, in Institutions, or in Nursing Homes.

"The number of notifications requiring special enquiry was 98, 49 of which were due to puerperal pyrexia, 49 to discharging eyes, 6 to contact with infection, and 3 on account of an unsatisfactory condition of the mother. Eighty-five special visits were paid in respect of these. Three visits were also paid in connection with maternal deaths. Of the 49 cases of eye discharge 12 were notified as ophthalmia neonatorum.

"Four deaths occurred amongst women attended in their confinements by midwives. The registered causes of three of these are set out in the table on page 17 (Numbers 1, 2 and 4). The cause of death in the fourth case was given as acute peritonitis, and it has not been classified by the Registrar General as a maternal death.

"The midwives maintain a high standard of efficiency in their practice, and show keenness in their work.

"The East Sussex Midwives' Association has a membership of 138. This Branch has had a very interesting year. Twelve members were sent to the Midwives' Conference in London, their expenses being paid by the Branch funds. Our grateful thanks are due to the County Medical Officer of Health, and to all others who have helped us during the year."

Compensation of Midwives.

During the year 9 midwives surrendered their certificates of the Central Midwives' Board (6 voluntarily and 3 compulsorily). The total amount of compensation paid to these 9 midwives was £1,689 2s. 5d.

Since the commencement of the operation of the Midwives' Act, 1936, and until the 31st December, 1937, 12 midwives have surrendered their certificates (9 voluntarily and 3 compulsorily), the total compensation paid to these being £2,105 17s. 1d.

Measures to Reduce Maternal Mortality.

The County Council had under consideration, during the year, Circular 1622, dated the 7th May, 1937, from the Ministry of Health, with reference to maternal mortality. In this Circular, the Ministry made suggestions for the improvement or extension of maternity services by such measures as better provision for obstetric consultations, the provision of " emergency units " for the domiciliary treatment of maternity patients in grave emergencies, the provision of adequate maternity hospital accommodation, the provision of ante-natal clinics and of adequate arrangements for domiciliary visiting of expectant mothers, the development of the post-natal services, the provision of home-helps and of extra nourishment in necessitous cases. The County Medical Officer submitted a full report on the recommendations contained in this Circular, which was considered by the Maternity and Child Welfare Committee. The report showed that the existing maternity and child welfare scheme of the County Council provided an adequate service with the exception that arrangements did not exist for " emergency units " to undertake domiciliary service, that more suitable maternity hospital accommodation was necessary in the area served by the Battle Infirmary; that, in the north-eastern part of the County, hospital beds were required for the reception of cases of puerperal pyrexia, and that sufficient use was not made of the facilities provided for post-natal care.

It was decided that the larger maternity hospitals should be approached with a view to arrangements being made whereby obstetric consultants would be available in urgent domiciliary cases, that an endeavour should be made to obtain hospital accommodation in the north-eastern part of the County for cases of puerperal pyrexia, and that doctors and midwives should be recommended to make greater use of the facilities provided for post-natal hospital care and treatment.

It has been ascertained that the obstetric specialists on the County Council list are prepared to undertake, and have, in fact, in certain cases, already undertaken, deliveries in the patients' homes and their services in this respect will continue to be available.

With regard to the accommodation for the reception of cases of puerperal pyrexia in the north-eastern part of the County, a temporary arrangement has been made with the Borough of Royal Tunbridge Wells for the reception of patients in their Isolation Hospital.

It has also been decided to make a grant to the Bexhill Hospital towards the capital cost of the provision of a maternity block, in which the County Council would reserve four beds.

Contraception.

In accordance with the recommendations of the Ministry of Health, the County Council have made arrangements whereby contraceptive advice is given to married women suffering from forms of sickness, physical or mental, which are detrimental to them as mothers. Forty-one women received instruction during the year as compared with 38 in 1936.

Permission has been given to the local Branch of the National Birth Control Council to hold contraceptive clinics for married women in the County Clinic premises at Haywards Heath.

Contraceptive advice is given in the western part of the County by Dr. Lilius Jeffries, at the Clinic established by the Brighton Corporation, and at the County Clinic, Haywards Heath, and, in the eastern part of the County, by Dr. Ruth Dingley at the County Clinic, Bexhill, and elsewhere.

Dr. Jeffries has reported on her cases from the County as follows :—

" Under the arrangement whereby East Sussex mothers can be sent by the Council to the Brighton Municipal Contraceptive Clinic, I have been glad to see a good many of these patients. They come from remote villages, and the effort made to attend is evidence of their need for help. Unfortunately, it is often very difficult for them to come a second time or at intervals later, so that one sometimes feels uncertain whether they have thoroughly understood and remembered what we teach them. We do our best to see that all patients have grasped the technique of the methods taught, but it is always a help if they can be checked over later.

" One great benefit of visits to the Clinic is that women with minor gynaecological troubles are brought under medical examination, with the result that they can be referred to the nearest doctor or Hospital for proper care. Many women just put up with discomforts, believing them to be part of the burden of their patient lives, and are both surprised and grateful when relief is offered to them. This is quite apart from the benefit of contraceptive advice, which protects them from a pregnancy that might ruin their health.

" Under the present regulations of the Ministry, we are not allowed to teach mothers how to space their families or merely delay a further pregnancy, unless such a pregnancy would be definitely prejudicial to the mother's own health. This limits our usefulness, both to the mother and the children, not to mention fathers. Most of the East Sussex patients already have such large families as to be worn out; better spacing of the pregnancies would have preserved the mother's health and vigour for the benefit of her family. Other mothers have such illness as tubercle, or Bright's, or heart disease, and could not safely face a confinement. They are sent by the Council's Medical Officer or their local doctor. They often first hear of the Clinic from the nurses, who know the needy cases better than any one else and the conditions of life in remote cottages.

" Though we feel our work to be useful, we also feel its limitations, and hope for the day when public opinion will express itself more fully on the value of contraceptive methods as a preventive of poor health rather than treatment of already developed disability."

Dr. Ruth Dingley has submitted the following report on her work :—

" In December, 1934, the County Medical Officer of Health made arrangements for contraceptive advice to be given to women requiring it on medical grounds. Since then 79 women have been given advice and 76 have attended to receive instruction. In most cases this has been given at Darvell Hall Sanatorium or the Bexhill Clinic, and occasionally in patients' own homes. It has rarely been feasible to give this instruction at Welfare Centres, though it has been possible to keep in touch with a good many women in this way. There has been some difficulty in getting women to attend when required. Transport is often inconvenient, and there are usually young children whom it is not easy to leave. It has now been decided to hold a clinic regularly at 2.30 p.m. on the second Monday of each month, at Bexhill, in the hope that this may prove more convenient both for first visits and for following up. No charge is made to the women for the instruction given, but they are asked to pay something for their appliances when possible. Below is an attempt to assess results. Women seen since November, 1937, are not included :—

Satisfactory	40	Known to have become pregnant after	
Already pregnant when first		receiving advice	12
seen	3	Sterilized	1
Dead (pulmonary tuberculosis)	2	Not known	6
Husband dead	1		

" With regard to failures, it is noticeable that the average number of children to the family is already considerably higher than in the successes. In a few of these cases it is known that instructions were not followed; one discontinued the method on hearing it had failed with someone else, and subsequently became pregnant herself. Unfortunately, in most of the cases the mother is chronically anaemic and below par, and the children under-nourished, thus representing the class where limitation of family would be most beneficial."

Ante-Natal Supervision.

The County Council have established, or have assisted to establish ante-natal clinics at Bexhill, East Grinstead, Hailsham, Newhaven, Portslade, Robertsbridge, and Seaford separately from the Infant Welfare Centres. In addition, ante-natal consultations are held at 32 Infant Welfare Centres at the same session as the infant welfare work. In areas not provided with a Centre or in cases in which uninsured women find it impossible to visit a Centre, arrangements have been made whereby medical practitioners undertake ante-natal examinations and during the year 46 necessitous mothers were examined by medical practitioners at a cost to the County Council of five shillings per examination. The district nurse-midwives made 11,120 ante-natal visits during the year to 1,871 expectant mothers. In the event of abnormality or disease being found at the examinations, reports are submitted and institutional or other treatment is provided. As stated below, 133 ante-natal cases received hospital treatment.

Provision of Consultants.

The Local Authority have arranged for a Consultant to be available for any medical practitioner who needs such assistance in difficulties or in complications arising during pregnancy, or at or after confinement. Consultants were provided during the year in 11 cases, 3 of which were in respect of women suffering from puerperal pyrexia.

Hospital Treatment, apart from Treatment for Puerperal Pyrexia.

During the year, 383 women, as set out in the following tabular statement, were provided with hospital treatment at maternity hospitals. Of these, 141 were admitted because of difficulties arising directly in connection with labour, and 133 were cases in which ante-natal observation had detected disease or deformity which necessitated hospital treatment. In the remaining 109 cases, the home conditions were unfavourable. Patients admitted with puerperal pyrexia are referred to under the appropriate heading, and are excluded from Table X.

TABLE X.

Hospitals and Maternity Homes.	Emergencies arising directly in connection with labour.	Induction of premature labour.	Pregnancy complicated by albuminuria.	Various conditions.	Unfavourable home conditions.	Totals.
Brighton : Sussex Maternity and Women's Hospital ..	26	12	6	3	1	48
Hastings : Fernbank Maternity Home	0	0	0	2	1	3
Tunbridge Wells Maternity Home	3	0	1	3	2	9
Battle Institution	1	1	1	5	23	31
Shoreham : Southlands Hospital ..	60	7	12	32	16	127
Cuckfield : West Hylands Institution	15	2	2	12	31	62
Eastbourne St. Mary's Hospital	17	2	5	8	9	41
Hastings Municipal Hospital	11	0	5	4	13	33
Crowborough : War Memorial Hospital	2	0	1	3	3	9
Newhaven Institution ..	4	0	1	3	10	18
Hastings : Royal East Sussex Hospital	1	0	0	0	0	1
Royal Victoria Hospital Folkestone	1	0	0	0	0	1
Totals	141	24	34	75	109	383

Puerperal Pyrexia.

Facilities are available for obtaining the services of Obstetric Consultants, for the employment of emergency nurses and for bacteriological examinations when necessary in cases of puerperal pyrexia.

During 1937, three women suffering from puerperal pyrexia were, as stated above, seen by Obstetric Consultants at the request of medical practitioners. Of 34 women who were notified as suffering from puerperal pyrexia in the County Administrative Area other than the Borough of Hove, 25 received hospital treatment under the County Council's scheme, all of whom recovered. Six women who were treated in their own homes also recovered.

Treatment in Convalescent Homes.

During the year three women received convalescent treatment after confinement under the County Scheme.

The Association of Maternity and Child Welfare Centres have established a Convalescent Home for Mothers and Babies at Mayfield, and the County Council have undertaken to reserve one bed at this Home for East Sussex patients.

Provision for Unmarried Mothers and their Infants.

Fourteen unmarried mothers were admitted to Hostels during the year: 9 to the Bell Hostel, Eastbourne, and 5 to other Hostels. The young women are usually admitted within three months of the expected date of confinement and remain for a period of twelve months. This provision is of special value in view of the high mortality in infants born out of wedlock.

In exceptional cases infants have been cared for at the Bell Hostel for a longer period than twelve months when special circumstances have necessitated this.

Notification of Births and Infant Visiting.

The following Table shows the total number of births notified as occurring in the Administrative County (excluding the Borough of Hove) during the year 1937:—

	Males.	Females.	Totals.
Living	1209	1214	2423
Stillbirths	38	23	61
Totals	1247	1237	2484

Amongst the births notified are included 24 cases of twins (31 male and 17 female).

Details as to births not notified to the County Medical Officer of Health were supplied by the District Registrars of Births and Deaths. Particulars of the births notified and of those whose names are supplied by the Registrars are sent to the district nurses who, in this County, act as infant health visitors, supervised by four specially qualified District Nursing Superintendents. The County Council's Scheme for Infant Visiting provides for the whole of the Administrative County, except the Borough of Hove. During the year 1937, 46,844 visits were paid by the Infant Health Visitors, of which 20,831 were paid to infants under one year of age, as compared with 43,153 and 19,448 respectively in 1936. Visits are continued until the infants reach the age of five years, after which the children are supervised by the same nurses acting as school nurses under the Education Committee's Scheme for the medical inspection of school children.

Public Health (Ophthalmia Neonatorum) Regulations, 1926 to 1937.

Notifications of 12 cases of Ophthalmia Neonatorum were received during the year (excluding one in the Borough of Hove), five of which were treated in hospital. The following Table gives details as to these 12 cases.

TABLE XI

Cases Notified.	Cases Treated.		Vision Unimpaired.	Vision Impaired.	Total Blindness.
	At Home.	In Hospital.			
12*	7	5	11	0	0

* One case was removed from the County before completion of treatment.

All cases of Ophthalmia Neonatorum receive immediate attention; either the medical practitioner in attendance is communicated with by telephone, or a special visit is paid by one of the District Nursing Superintendents. Hospital treatment is arranged for, either with or without the mother, at the Royal East Sussex Hospital, Hastings, at the Southlands Hospital, Shoreham, or at one or other of the County Infirmarys. Infants treated in their own homes are attended by the district nurses when these nurses are not in attendance on midwifery cases. When it is not possible for the infant to be attended by the district nurse, or the parents cannot be persuaded to accept hospital treatment for the infant, arrangements are made for the attendance of special nurses. No special nurses were required in 1937.

The Public Health (Ophthalmia Neonatorum) Amendment Regulations, 1937, came into force on the 1st April, 1937. Under these Regulations, cases of Ophthalmia Neonatorum are required to be notified to the County Medical Officer of Health, and not to the District Medical Officer of Health, as was formerly the case. The County Medical Officer of Health is required to forward a copy of each notification to the District Medical Officer of Health concerned.

Maternity and Child Welfare Centres.

There are 55 Maternity and Child Welfare Centres in the County, of which 5 are provided wholly by the County Council. The remainder have been established by local voluntary committees. The County Council have made provision in recent years for the erection of special premises for maternity and child welfare work at Bexhill, Newhaven, Three Bridges, and Haywards Heath. The Bexhill Centre was opened in 1935, and those at Newhaven, Three Bridges, and Haywards Heath in 1937. Early in 1938 another building for this work was opened at Burgess Hill. It is also proposed in 1938 to provide special premises at East Grinstead and Uckfield, and it is hoped that others will be provided at Seaford, Lewes, Hailsham, Crowborough, and Rye during the next few years.

Grants totalling £535 17s. 11d. were given in aid of the expenditure of the local voluntary associations towards the cost of maintenance of these Centres.

Rules are in force for the administration of Maternity and Child Welfare Centres which receive grants. These Rules provide for the keeping of proper records and for adopting a uniform procedure at all the Centres throughout the County including arrangements for instruction in mothercraft being given systematically.

The following Table gives certain particulars concerning each Centre :—

TABLE XII.

Name of Centre.	INFANT WELFARE WORK.				ANTE-NATAL WORK.			
	Total Attendances made by Children		Total number of Children who attended during the year and who at the end of the year were		Clinic on Separate Day or Hour.	Consultations during usual Session of Infant Welfare Centre.	Number of Expectant Mothers who attended during the year.	Total Number of Attendances
	Under 1 year.	1 to 5 years.	Under 1 year	Between 1 and 5 years				
Albourne	83	156	13	33	—	Yes	6	14
Aliriston	65	112	9	33	—	—	—	—
Balcombe	128	271	14	28	—	Yes	12	14
Barcombe	73	117	12	30	—	Yes	4	4
Battle	175	130	20	32	—	Yes	13	13
*Bexhill and Sidley	1897	2387	130	239	Yes	—	93	155
Bolney	53	150	11	38	—	Yes	7	10
Brede and Udimore	70	121	8	30	—	Yes	13	19
Burgess Hill ..	273	271	12	39	—	Yes	9	9
Chailey	42	138	6	23	—	—	—	—
Chiddingly	104	289	17	55	—	—	—	—
Copthorne	90	236	8	30	—	Yes	3	3
Crawley Down ..	194	356	20	26	—	Yes	11	20
Danehill and Horsted Keynes	395	381	19	42	—	Yes	7	7
East Grinstead ..	510	543	44	81	Yes	—	63	111
Etchingham	26	61	7	10	—	Yes	4	4
Fairwarp	78	132	5	83	—	—	—	—
Forest Row	276	380	20	55	—	Yes	13	23
Groombridge	23	53	8	32	—	Yes	1	1
†Guestling	27	52	6	23	—	—	—	—
Hailsham	262	841	15	55	Yes	—	33	72
Hamsey	79	435	3	25	—	Yes	3	4
Haywards Heath ..	644	508	54	83	—	—	—	—
Heathfield	183	279	25	59	—	—	—	—
Herstmonceux ..	173	359	9	59	—	Yes	7	13
Hurst Green	25	115	8	32	—	Yes	9	9
Icklesham	15	111	4	21	—	—	—	—
Iden and Playden	29	193	8	40	—	Yes	8	14
Lewes	799	825	71	150	—	Yes	59	80
Lindfield	144	324	10	4	—	—	—	—
Mayfield	75	278	13	41	—	—	—	—
*Newhaven	832	678	49	80	Yes	—	29	29
Newick	62	188	14	40	—	Yes	8	9
Northiam and Beckley	29	63	15	34	—	—	—	—
*Peacehaven	255	549	20	111	—	Yes	3	3
Pevensay	118	289	8	25	—	—	—	—
Plumpton	81	86	22	25	—	Yes	—	—
Polegate	179	153	9	35	—	Yes	16	23
*Portslade	2517	2189	115	319	Yes	—	125	396
Robertsbridge ..	154	256	18	32	Yes	—	12	14
*Rye	275	686	18	84	—	Yes	12	15
Scaynes Hill	183	292	15	26	—	Yes	—	—
Seaford	310	327	37	80	Yes	—	29	91
Sedlescombe	72	152	9	23	—	Yes	5	5
†Staplefield	29	150	3	31	—	—	—	—
Three Bridges and Worth	162	298	22	47	—	Yes	8	16
Turner's Hill	42	99	3	19	—	Yes	1	1
Uckfield	102	386	20	78	—	Yes	20	34
Wadhurst	232	340	15	63	—	Yes	18	20
†Waldron and Cross-in-Hand	185	310	10	50	—	—	—	—
Westfield	72	118	15	15	—	Yes	2	3
Westham	165	404	14	37	—	—	—	—
West Hoathly	63	159	6	24	—	Yes	3	4
Winchelsea	34	77	4	12	—	—	—	—
†Withyham	29	37	9	36	—	Yes	1	3
TOTALS	13192	18890	1070	2857	7	32	670	1265

* County Council Centres.

† Voluntary Centres which did not receive grants in aid from County Council.

At East Grinstead, Newhaven, and Portslade the work of the Centres, Infant Health Visiting and School Nursing are carried out by whole-time Health Visitors appointed by the District Nursing Associations. A grant was paid equivalent to the whole salary and allowances of each of these Health Visitors.

Vaccination.

During the twelve months ended 30th September, 1937, 1,072 successful primary vaccinations were carried out, of which 7 were performed in institutions. Of these, 940 were of infants under the age of one year and 132 of persons over that age. In addition, 115 successful re-vaccinations were carried out.

The following is a summary of Returns made to the Registrar-General by the Vaccination Officers in respect of children whose births were registered during the period from 1st January to 31st December, 1936, and accounted for in the Vaccination Registers up to 31st January, 1938:—

TABLE XIII.

Vaccination Officers' Districts.	Births.	Number of Certificates of "Successful Vaccinations."	Number living unvaccinated		Number died unvaccinated.	Percentage of living children vaccinated.
			Conscientious Objection.	Others.		
Battle	106	44	48	10	4	41.5
Bexhill	262	112	112	36	2	42.7
Burgess Hill	146	57	58	29	2	39.0
Crowborough	189	49	115	19	6	25.9
Cuckfield	251	121	102	21	7	48.2
East Grinstead	177	47	89	37	4	26.5
Hailsham, North	293	66	199	18	10	22.5
Hailsham, South	142	30	102	5	5	21.1
Hove	575	188	323	50	14	32.7
Lewes	253	82	151	10	10	32.4
Newhaven	127	13	104	8	2	10.2
Rye	118	63	48	2	5	53.4
Ticehurst	113	56	46	11	—	49.6
Uckfield	149	44	87	15	3	29.5
Worth	86	30	42	13	1	34.9
	2987	1002	1626	284	75	33.5

From the above Table it will be seen that only 33.5 per cent. of living children were vaccinated in 1937, which was 2 per cent. lower than in 1936. There has been no increase in the number of vaccinations for a number of years, and it is felt that equally good and probably better results would be achieved if the Vaccination Acts were repealed and compulsory vaccination superseded by voluntary arrangements made through the Child Welfare Services provided by the Maternity and Child Welfare Committees.

Marasmic Infants.

Treatment for 11 marasmic, or wasting infants was provided at the Chailey Heritage Hospital during the year. The discharge reports shewed that there was marked improvement in every case. A grant of £351 was made by the County Council towards the expenses of the Yarburgh Home for Infants, East Grinstead, under the Scheme made under the Local Government Act, 1929. This Home receives delicate children from London for treatment.

Care of Pre-School Children.

In consequence of the consideration of Circular 1550, dated 29th May, 1936, of the Ministry of Health, the County Council made arrangements, in 1937, for the treatment, at existing school clinics, of minor ailments amongst children under school age for whom the parents are unable otherwise to obtain the necessary treatment. The children are referred to the Clinics from Infant Welfare Centres and by infant health visitors. Hospital treatment for enlarged tonsils and adenoid growths, ear diseases, etc., is also provided for children under school age under the County Scheme.

Provision of Home Helps.

The County Council have provided in their Scheme, for home-helps during the period of confinement, when it is impossible to make other arrangements for the ordinary domestic duties usually undertaken by the mother. Seventeen applications were sanctioned during the year 1937 at a total cost to the County Council of £21 13s. 2d.

Arrangements have been made through the District Nursing Superintendents for the Committees of Infant Welfare Centres to keep a list of suitable women who would be willing to act as home helps when required. The main difficulty which is encountered in dealing with applications for home-helps is that, in cases in which such assistance is required, the houses do not provide sufficient accommodation for the residence of a home-help. Therefore, it is nearly always necessary for the home-help to be a resident of the village in which the patient lives. It is hoped, however, that with the assistance of the Committees of Infant Welfare Centres in preparing lists of women who would be willing to undertake the duties, a home-help will always be obtainable when required.

Supply of Milk.

The Maternity and Child Welfare Committee supply fresh milk to necessitous expectant and nursing mothers and to infants up to the age of five years when medically certified to require additional nourishment. Under the Local Government Act, 1929, the County Council have declared that this service shall be administered exclusively under the Maternity and Child Welfare Scheme and not under the Poor Law. During the year, milk was supplied to 370 applicants, as compared with 258 in 1936. Dried milk is also provided at cost price at most of the Infant Welfare Centres.

On the 1st April, 1937, the Ministry of Health, in Circular 1519, drew attention to the First Report of the Advisory Committee on Nutrition, in which Report particular emphasis was laid on the nutritional value of milk. The Minister stated that he was anxious that each Authority should review its arrangements for the supply of milk to expectant and nursing mothers, and children under school age.

This Circular was fully considered by the Maternity and Child Welfare Committee and it was decided that the supply of milk to expectant mothers in this County should not be limited, as hitherto, to women in the last three months of pregnancy, but that, provided the state of the woman's health appeared to require it and the application was approved by the Chairman of the Maternity and Child Welfare Committee, the supply should be granted at any time during pregnancy. The amount of money allowed for the supply of milk was increased from £700 to £1,000 for the financial year 1937-38.

Infant Life Protection.

The Committee have appointed the four District Nursing Superintendents and two Health Visitors employed by Nursing Associations as part-time Infant Protection Visitors. They make the first inspection of each child placed on the Register. Subsequent visits up to the age of five years are carried out by the District Nurses under the supervision of the Infant Protection Visitors. From the age of five to nine years, however, the Nursing Superintendents carry out the routine visits. The two whole-time Health Visitors carry out the routine visits throughout.

On 31st December, 1937, there were 334 children and 189 foster parents on the Register. Seven hundred and twenty-seven visits were made during the year by the Infant Protection Visitors and District Nurses.

During the year 24 Preparatory Schools were visited with a view to exemption from the requirements of the Public Health Act, 1936, relating to Child Life Protection. This was granted in 22 cases.

Public Health Act, 1936, Part VI (Registration of Nursing Homes).

During the year 1937, four applications for the registration of premises under the above Act were received and these were granted. One Home was closed voluntarily during the year. There were 62 Registered Nursing Homes on the County Register at the end of 1937. Five Certificates of Exemption under Section 192 of the Act were renewed. Eighty-five routine visits of inspection were made during the year by the District Nursing Superintendents.

The powers and duties in respect of the Registration of Nursing Homes in the Borough of Hove have been delegated to the Hove Corporation.

Dental Treatment of Expectant and Nursing Mothers and Infants.

The County Council's Scheme for the dental treatment of expectant and nursing mothers and infants under the age of five years is co-ordinated with the scheme for the dental treatment of children in the Public Elementary Schools. Treatment is carried out at the County Clinics, on hired premises, and occasionally at local Infant Welfare Centres. The District Nurses assist the Dental Surgeons at the Clinics. Four County Dental Surgeons give one-fourth of their time to work on behalf of the Maternity and Child Welfare Committee, and three-fourths to the dental treatment of school children. It has been decided to appoint a fifth Dental Surgeon in 1938.

Mr. A. Court, L.D.S., R.C.S., reports on the above scheme as follows :—

" The attendances at the clinics made by mothers and children under five years continue to be satisfactory, and many more expectant mothers now attend for advice and, if necessary, treatment, than in the past. This is the most encouraging part of the scheme, as early dental treatment for the expectant mother goes a long way towards the making of a healthy child. The permanent dental clinics throughout the County have been well equipped and it is now possible to carry out more efficient treatment than has been possible in the past, when one has been obliged to work in unsuitable parish halls or the like. Everything is now being done for the welfare of the expectant and nursing mother, and future generations must show the value of the work being carried out. Nurses are always most helpful and repeatedly put themselves to extra trouble to follow up cases which require it.

Mr. W. Eddings, L.D.S., R.C.S., reports as follows :—

" I have to record a decrease in the number of mothers and infants treated this year: 522 mothers and 83 infants against 612 and 109, respectively, last year. The decrease is not appreciable and the work covered exceeds certain years.

" Treatment figures show 531 extractions and 61 fillings, a poor ratio despite the facilities offered for conservation of teeth. It is a regrettable fact that the poorer mothers within the scheme are not dental-conscious until pain supervenes and the majority have definite reluctance to teeth being filled. I am unaware whether the advantage of conservation is brought to the notice of Approved Society (N.H.I.) Members. Certainly, I have noted very few fillings done before marriage, whether on account of apathy of members or not; the inevitable result is extractions and frequent clearances, and dentures before attaining 30 years of age with many mothers—a truly deplorable situation. There is one consolation, the mothers appreciate what is being done for them.

Mr. G. Rose, L.D.S., R.C.S., reports as follows :—

" The number of attendances of both mothers and infants at the clinics in this area for the year compares very favourably with that of last year, and it is evident that there is a general increasing appreciation of the service.

" The condition of the dentitions of many of the infants attending is still very poor, and one is forced to resort to extracting the temporary molars which should normally function until the child is at least ten or more years of age. Parents need to be made to realise that to avoid such an unsatisfactory state they must bring their infants early for treatment. So many parents, I find, still cling to the old idea that the "baby" teeth do not matter, and I am constantly trying to remove this false impression from their minds.

" I would point out that included in my figure of 529 Other Operations are a large number of temporary fillings of teeth of children under five which I do not deem it wise to include under the heading of Fillings, because they are only inserted to tide the child over a time through which it is often impossible to do really satisfactory preparation of the tooth for the more permanent work. When one has gained the real confidence of the infant better treatment can be given and I endeavour to see each infant at intervals of about three months.

" I feel I owe a great deal to the willing help and support I receive from all the nurses, and to them I should like to express my sincere thanks for making the clinics popular and successful."

Miss A. Winifred M. Miller, L.R.C.P., L.R.C.S., L.D.S., R.C.S., reports as follows :—

" I beg to submit my second Annual Report on the dental treatment of expectant and nursing mothers and infants under five years of age.

" As my previous report only covered eight months it is not possible to compare figures, but attendances at clinics have improved. In those areas where numbers permitted, I started regular fortnightly clinics and found that this worked much better than the previous arrangement, as the majority of patients had thus two weeks' notice instead of a few days. These women, who come time and again to have their treatment completed are to be congratulated, as it is not always easy for them to leave their small children at home under proper supervision.

" In most cases, it was possible to complete the extractions before the confinement, leaving the denture work to be done afterwards. I saw comparatively few mouths where conservative treatment was recommended, and of these very few could be persuaded to have fillings done.

"Attendances made by infants were very satisfactory. The number of fillings increased considerably, which is as it should be, because it is at this age that parents should be made to realise the value of fillings. Much trouble would then be saved when the child comes under the school scheme.

"I should like to thank the District Nurses for their hard work in persuading these patients to take advantage of the scheme."

		Mr. Court.	Mr. Eddings.	Mr. Rose.	Dr. Miller.	Totals.
No. of attendances at the Clinics	Mothers	738	522	505	514	2279
	Infants	156	83	179	194	612
No. of teeth extracted	Mothers	581	531	474	504	2150
	Infants	60	120	185	105	470
No. of teeth filled	Mothers	69	61	36	75	241
	Infants	91	8	34	268	401
No. of scalings		29	12	14	27	82
No. of other operations, including Impressions, Bites, Tries in, etc.		626	291	529	349	1795
No. of Artificial Dentures supplied		53	66	40	55	214

TREATMENT OF VENEREAL DISEASES.

The treatment of venereal diseases is one of the most important of the preventive health services provided by the County Council. The diseases have an important bearing on the morbidity statistics of mothers and infants and on infant mortality. Treatment Clinics were established in the County as a result of the Report of the Royal Commission on Venereal Diseases issued on the 2nd March, 1916, and of the Regulations issued by the then Local Government Board to give effect to its most important recommendations.

Clinics are held at hours convenient to patients of both sexes and under conditions of secrecy as far as is possible. The travelling expenses of necessitous patients are paid by the Council when certified by the Medical Officers. In 1937, 42 persons were assisted in this respect at a cost of £67 18s. 7d.

Dr. F. H. Lawson, Medical Officer of the Brighton Clinic, reports as follows:—

The total number of new patients attending from East Sussex was 202; 6 less than in 1936. These patients were diagnosed as follows:—

	Primary.		Secondary.		Congenital.		Tertiary, Neuro and Latent Syphilis.		Transfer Cases.		Total.
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Syphilis	2	—	3	—	1	1	11	6	8	8	40
								Male.		Female.	
Soft Chancre	..	..	..	..	..	..	..	1	—	—	1
Gonorrhœa	..	..	..	..	..	..	..	44	16	—	60
Not V.D.	..	..	..	..	..	..	..	60	41	—	101
											202

An analysis of all cases who attended during the year shows:—

	Still attending on 31st December, 1937.		Cured.	Completed Treatment.		Transfers.	Defaulters.
	M.	F.		No Final Test.			
Syphilis	17	6	14	9	
Gonorrhœa	36	5	8	8	
Soft Sore	—	—	1	—	
Not V.D.	6	101	2	—	
Totals	162	154	25	17	

The total attendances for 1937 were:—

Seen by Medical Officer	3974
Intermediate treatment by Orderly or Nurse	1678
	5652

The new treatment by sulphonamide gives every promise of considerably shortening the treatment for gonorrhœal cases.

Dr. P. Lazarus Barlow, Medical Officer of the Hastings Clinic, reports as follows:—

The total number of new cases attending the clinic during the year under review was 24, which is nearly a 50 per cent. drop on the previous year. The cases of syphilis were 4, the same as in 1936, and gonorrhœa 8, as compared with 11. Those cases, which, after examination, proved to be non-venereal, were 12, compared with 18 in 1936. Of these new cases, 6 were from Bexhill and 18 from other parts of the County. I cannot explain this large drop in the cases coming from Bexhill, only one of which proved to be venereal, but it seems that for some reason cases are not taking advantage of the facilities offered at the clinic. It is too good to be true that there was only a single case of venereal disease in the town during the year. This is the second year in succession that there has been a big drop. The total attendances dropped from 1,571 to 1,096, but the drop of 545 from Bexhill was offset somewhat by an increase of 70 from the rest of the County.

The number of "in-patient" days was practically the same as in 1936, one patient again accounting for the majority—a stubborn case of gonococcal arthritis.

Most of the patients attend as requested; as usual, a certain number had to be written off the books after efforts had been made to induce them to re-attend or because they could not be traced.

Dr. G. L. McElligott, Medical Officer of the Tunbridge Wells Clinic, reports as follows:—

The increase in the number of the total attendances of patients from the East Sussex area is largely due to the increase in the number of new cases of gonorrhœa and also to the fact that a higher proportion of these patients were able to afford the time to attend for intermediate treatment at the hospital.

At the latter end of 1937, after extensive trials in London, the Medical Officer of the clinic introduced the use of sulphonamide in the treatment of gonorrhœa. The results on the whole have been excellent and it is evident that in this drug we have a powerful and efficient addition to the present therapeutic armamentarium.

Serious efforts are now being made to deal with the important problem of defaulters from treatment. These defaulters, who often believe themselves cured, are often the cause of spreading infection, and it is only by constant written requests to attend that they can be persuaded to finish their treatment and to submit to tests of cure.

It is felt that there are still many cases of syphilis and gonorrhœa in the County who do not attend owing to ignorance or inability and it is suggested that practitioners be asked to urge their patients to attend the clinic, at all events for tests of cure, for the carrying out of which, many of them have neither the time nor the facilities.

In the opinion of the Medical Officer of the clinic the continuance of active propaganda work is most important and it is suggested that a leaflet giving the facts of the venereal diseases and the facilities for treatment might with advantage be distributed to parents at the time their children leave school. The ignorance of the majority of young people who attend the clinic is most striking, e.g., there is a widespread belief that birth control appliances will protect against infection.

The number of patients from East Sussex attending the three County Treatment Centres during the year is given below:—

TABLE XIV.

	Royal Sussex County Hospital, Brighton.	Royal East Sussex Hospital, Hastings.	Kent and Sussex Hospital, Tunbridge Wells.	Total.
OUT-PATIENTS.				
<i>Number of New Cases treated:—</i>				
(a) Syphilis	40	4	4	48
(b) Soft chancre	1	—	—	1
(c) Gonorrhœa	60	8	8	76
(d) Non-Venereal	101	12	5	118
Totals	202	24	17	243
Total attendances of all East Sussex patients ..	5652	1096	603	7351
IN-PATIENTS.				
Aggregate number of In-patient days	86	119	167	372

The total number of new patients presenting themselves for the treatment of venereal diseases or for diagnosis was 12 less than in 1936, and the number of attendances decreased by 929.

In addition to the patients attending the County Treatment Centres, I have received information that patients from East Sussex attended at the following centres maintained by other authorities:—

Treatment Centre.	Number of Patients dealt with for the first time.	Total Attendances.
Redhill	1	3
Dreadnought Hospital, Greenwich	1	3
South Shields	1	72
St. Bartholomew's Hospital, London	1	79

No legal action was taken during the year under the Venereal Diseases Act, 1917, in respect of unqualified persons giving treatment for venereal diseases.

Valuable educational work is undertaken on a national scale by the British Social Hygiene Council. The Rural Community Council act as the Sussex Branch of that Council and have arranged lectures and addresses in the County to parents and to leaders of youth movements. They received a grant from the County Council in aid of their expenditure.

Facilities for obtaining laboratory assistance in the diagnosis of venereal diseases are provided by the County Council for the Medical Officers in charge of the Treatment Centres, and for medical practitioners generally in the treatment of their private patients. The laboratories at which specimens are examined are the Stephen Ralli Memorial Laboratory, Brighton, the Hastings Borough Laboratory, the Kent and Sussex Hospital, Tunbridge Wells, the South London Hospital for Women, the West London Hospital and St. Thomas's Hospital, London. Altogether, 1,930 specimens were examined, 1,658 of which were sent by Medical Officers of Treatment Centres, and 272 by private medical practitioners. This shows a decrease of 14 in the number of specimens examined as compared with the previous year.

TREATMENT OF TUBERCULOSIS.

Notifications.

The total number of primary notifications received in 1937 was 324, namely, 229 of pulmonary tuberculosis, and 95 of other tuberculous diseases, as compared with 201 and 56 respectively in 1936.

Details of the notifications received, together with other new cases of tuberculosis which came to the knowledge of the County Medical Officer of Health, and deaths occurring in 1937, are shown in the following Table:—

TABLE XV.

Age Periods.	NEW CASES.				DEATHS.			
	Respiratory.		Non-Respiratory.		Respiratory.		Non-Respiratory.	
	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.
0 —	—	—	1	—	—	1	1	—
1 —	—	2	8	12	—	—	2	—
5 —	6	4	17	18	2	—	4	6
15 —	13	32	6	3	7	8	2	2
25 —	31	27	5	8	20	18	1	1
35 —	16	22	3	4	9	12	2	1
45 —	20	16	3	3	12	4	—	—
55 —	13	10	1	2	12	3	2	3
65 and upwards	6	11	—	1	10	6	2	2
Totals ..	105	124	44	51	72	52	16	15

On comparing the statutory notifications of tuberculosis with the number of deaths from the disease reported by the District Registrars during 1937, it is found that 3.08 per cent. of the deaths occurred without the disease having been notified in this County under the Regulations.

The following statement gives the numbers and percentages of deaths occurring during the year within three and twelve months of notification:—

Total Number of Primary Notifications.	Deaths within 3 months of notification.	%	Deaths between 3 and 12 months following notification.	%
324	23	7.09	24	7.4

The following is a summary of the Returns, received from District Medical Officers of Health, of the number of notified cases of tuberculosis on their Registers at the end of the year.

TABLE XVI.

Districts.	Number of notified cases on Register on 31st December, 1937.							Grand Total.
	Population 1937.	Pulmonary.			Non-Pulmonary.			
		Males.	Females.	Total.	Males.	Females.	Total.	
<i>Three Large Towns.</i>								
Hove	58410	131	139	270	44	57	101	371
Bexhill	23100	21	35	56	7	13	20	76
Lewes	11920	14	14	28	5	7	12	40
<i>Seven Smaller Urban Districts</i>	61270	126	120	246	49	53	102	348
<i>Five Rural Districts</i> ..	144000	230	269	499	122	134	256	755
Administrative County	298700	522	577	1099	227	264	491	1590

Tuberculosis Dispensaries.

Dispensaries for the examination and observation of cases of tuberculosis are provided by the County Authority at Lewes, Hove, Bexhill, and East Grinstead.

The following Table, prescribed by the Ministry of Health under Memorandum 37 T (Revised), shows the work carried out during the year at, or in connection with, these Dispensaries:—

TABLE XVII.

DIAGNOSIS.	PULMONARY.				NON-PULMONARY.				TOTAL.				All Persons.	
	Adults.		Children.		Adults.		Children.		Adults.		Children.			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
A.—NEW CASES examined during the year (excluding contacts)														
(a) Definitely tuberculous	68	63	4	6	10	14	22	14	78	77	26	20	201	
(b) Doubtfully tuberculous	—	—	—	—	—	—	—	—	3	3	1	1	8	
(c) Non-tuberculous	—	—	—	—	—	—	—	—	60	103	29	25	217	
B.—CONTACTS examined during the year:—														
(a) Definitely tuberculous	1	2	—	1	—	—	2	5	1	2	2	6	11	
(b) Doubtfully tuberculous	—	—	—	—	—	—	—	—	—	—	—	—	—	
(c) Non-tuberculous	—	—	—	—	—	—	—	—	12	13	31	23	79	
C.—CASES written off the Dispensary Register as														
(a) Cured	20	16	—	1	3	6	7	8	23	22	7	9	61	
(b) Diagnosis not confirmed or non-tuberculous	—	—	—	—	—	—	—	—	82	126	61	51	320	
D.—NUMBER OF PERSONS on Dispensary Register on 31st, December 1937														
(a) Diagnosis completed	349	316	11	16	41	62	78	75	390	378	89	91	948	
(b) Diagnosis not completed	—	—	—	—	—	—	—	—	3	3	1	1	8	
1. Number of persons on Dispensary Register on 1st January, 1937	963													
2. Number of patients transferred from other areas and of "lost sight of" cases returned	35													
3. Number of patients transferred to other areas and cases "lost sight of"	100													
4. Died during the year	77													
5. Number of attendances at the Dispensary (including contacts)	774													
6. Number of Insured Persons under Domiciliary Treatment on the 31st December, 1937	396													
7. Number of consultations with medical practitioners:—														
(a) Personal	111													
(b) Other	443													
8. Number of visits by Tuberculosis Officers to Homes (including personal consultations)													352	
9. Number of visits by Nurses or Health Visitors to Homes for Dispensary purposes													2127	
10. Number of														
(a) Specimens of sputum, &c., examined													589	
(b) X-ray examinations made													456	
11. Number of "Recovered" cases restored to Dispensary Register and included in A (a) and A (b) above													1	
12. Number of "T.B. plus" cases on Dispensary Register on 31st December, 1937													396	

The County Council have 58 shelters for the use of patients who are recommended by the Tuberculosis Officer as suitable cases. At the end of the year 39 of these shelters were on loan to patients who were suffering from tuberculosis. Regular inspection of shelters is carried out by the District Nursing Superintendents. Fourteen shelters were repaired during the year.

Report by the Clinical Tuberculosis Officer on the work carried out at, or in connection with, the Dispensaries during the Year 1937.

The year 1937 saw the completion of the first full twelve months working of the arrangement whereby Dr. Dingley, Medical Superintendent of the County Sanatorium, attends fortnightly at the Chest Clinic at Castlegate House, Lewes, to give artificial pneumothorax refills, with the aid of X-ray 'screening' examinations, to patients for whom the Lewes Clinic is more accessible than the County Sanatorium, Robertsbridge.

Thirty-eight patients attended during the year to be treated by Dr. Dingley. 333 screening examinations were made at the Clinic, 296 artificial pneumothorax refills given, and Dr. Dingley carried out 83 clinical examinations of patients' chests. Sixty blood sedimentation tests were made.

Greater use was made of the facilities available at Southlands Hospital, Shoreham-by-Sea, for X-ray examination of patients' chests as an aid to diagnosis, 21 patients having been referred there as out-patients during the year 1937 by Dr. Chadwick, Tuberculosis Officer of the Hove Dispensary. Fifty patients attended the Brighton Sanatorium during the year for similar examination, these having been referred there chiefly by Dr. Chadwick and the Clinical Tuberculosis Officer.

On account of small attendances, it was decided that, instead of holding a weekly session at the East Grinstead Chest Clinic, the Clinic should be opened at fortnightly intervals as from 1st March, 1937.

An arrangement was made whereby the County Council agreed to pay Nursing Associations for the services of a nurse when nursing attention was required by a patient suffering from advanced tuberculosis, and where such nursing care was recommended by the Tuberculosis Officer. The Council agreed to pay Nursing Associations at the rate of 1/- for each visit by the nurse, up to a maximum of 5/- a week. In this way, it is often possible for a patient with advanced tuberculosis to be cared for at home, when there are no young children in the household to run the risk of infection, whereas formerly it was often the case that a patient had to be removed to a Public Assistance Hospital merely to receive proper nursing care.

Report on the work of the Light Clinic at Castlegate House, Lewes, during the year 1937.

There was an increase in the number of attendances at the County Artificial Light Clinic at Lewes, during 1937. The following Table shows the conditions treated there, with details as to attendances, etc. In addition, two women suffering from lupus continued to attend the London Hospital for treatment by Finsen Light. Two women and three children received general Light treatment at the Royal East Sussex Hospital, Hastings, during the year.

	Adults.	Children.	Total.
Number of New Cases treated during year	—	35	35
Number of Attendances	185	1084	1269
Number of Patients on Light Clinic Register :—			
On 1st January, 1937—16. On 31st December, 1937—11. Average duration of treatment—13.5 weeks.			
SUMMARY OF NEW CASES :—			
Debility	18	Cervical Glands	8
Rheumatism	2	Lupus	1
		Rickets	6

During the year 1937, 35 new patients attended the Clinic for treatment. Twenty-three patients who had commenced treatment at an earlier date were already attending on the 1st January, 1937, so that altogether 58 children received treatment during 1937.

The cases were referred to the Clinic by the Clinical Tuberculosis Officer, the Assistant School Medical Officers, the Medical Officers of the Infant Welfare Centres, and general practitioners. The cases may be classed as follows :—

(a) General debility and impaired nutrition	26
(b) Glands of neck	16
(c) Rickets	8
(d) Rheumatism	4
(e) Tubercular peritonitis	1
(f) Spinal disease	1
(g) Sore throat	1
(h) Lupus	1

(a) *General debility and impaired nutrition.* Of the 26 cases, improvement was recorded in 20. Of the 6 cases which did not improve, 4 had been unsatisfactory in attendance and 2 were transferred to the Chailey Heritage Hospital for further treatment.

(b) *Glands of neck.* Nine cases showed definite improvement; 1 left the district; 1 returned to the Tuberculosis Clinic without any improvement; 2 were transferred to the Chailey Heritage Hospital; 1 was transferred to the Church Army Sanatorium; and 1 left to go to Hospital.

(c) *Rickets.* All the cases improved except 1 which failed to complete treatment, and 2 in which the home conditions were very unfavourable.

(d) *Rheumatism.* One case which had definite rheumatic nodules improved very considerably; 1 case of arthritis left the district after a short period of treatment; 1 case improved slightly; and 1 discontinued treatment.

(e) *Tubercular peritonitis.* This case did well with artificial light treatment.

(f) *Spinal Disease.* This case had received special treatment for the spinal condition for some years and was referred to the Clinic for temporary debility and improved.

(g) The case of recurrent *Sore Throat* improved.

(h) *Lupus*. This case was one occurring in an infant and after a short time was transferred to the Chailey Heritage Hospital for residential treatment.

ARTHUR BEELEY,

Clinical Tuberculosis Officer.

Sanatorium Treatment.

On the 1st January, 1937, there were 51 East Sussex patients in the County Sanatorium, of whom 48 (27 males and 21 females) were suffering from pulmonary tuberculosis and 3 suffering from non-pulmonary tuberculosis. During the year 161 patients (69 males and 92 females) with pulmonary tuberculosis and 18 patients (9 males and 9 females) with non-pulmonary tuberculosis were admitted. On the night of the 31st December, 1937, there were 66 East Sussex patients in the Sanatorium, 57 patients (26 males and 31 females) with pulmonary disease, and 9 patients (5 males and 4 females) with non-pulmonary tuberculosis. There were 13 deaths (7 males and 6 females) amongst patients in the Sanatorium in 1937.

The following Table shows the number of East Sussex patients provided with residential treatment during the year either at the Darvell Hall Sanatorium or at other Institutions.

TABLE XVIII.

		In Institutions on Jan. 1, 1937.	Admitted during the year.	Discharged during the year.	Died in the Institutions.	In Institutions on Dec. 31, 1937.	
Number of doubtfully tuberculous cases admitted for observation	Adult.	M.	1	14	14	—	1
		F.	5	21	26	—	—
	Children.	—	—	—	—	—	
	Total	6	35	40	—	1	
Number of patients suffering from pulmonary tuberculosis.	Adult.	M.	28	58	51	7	28
		F.	15	70	50	5	30
	Children.	10	10	9	1	10	
	Total	53	138	110	13	68	
Number of patients suffering from non-pulmonary tuberculosis.	Adult.	M.	2	9	6	—	5
		F.	1	9	6	—	4
	Children.	39	24	19	—	44	
	Total	42	42	31	—	53	
Grand Total		101	215	181	13	122	

Cases admitted for "observation" and subsequently found to be suffering from tuberculosis are included in both "observation" and "treatment" groups above.

Darvell Hall Sanatorium, Robertsbridge.

Medical Superintendent's Annual Report Year ending 31st December, 1937.

The year 1937 demonstrated one aspect of the variability of the tuberculosis problem. The demand for men's beds was excessive, and the general demand on hospital beds even more marked than in previous years. The cases sent for admission seem to have been of an increasingly advanced type. The result was to show the importance of being able to turn convalescent beds into hospital beds. In the Women's Hospital this is possible to a large extent, but on the men's side the shelters being unsuitable except for young and ambulant cases, this meant that, of the 23 convalescent beds, many had to be idle in the presence of a considerable waiting list. What was more serious was that cases requiring bed rest for treatment, but who were able to walk, had to be transferred to shelters, where rest is very imperfect, in order to make room for hopeless cases who were physically unable to walk.

General rest and artificial pneumothorax are still the most effective modes of treatment. In the past, much of the value of artificial pneumothorax treatment has been lost owing to the presence of adhesions between the lung and the chest wall. These cases have occasionally been sent to London to have the adhesions divided—a cumbrous, slow and expensive procedure. I am glad to report that arrangements have now been made for these operations to be performed at the sanatorium, as and when required, by Dr. Wollaston, of the Royal National Hospital, Ventnor.

The attendance at the sanatorium out-patient Artificial Pneumothorax Clinic has declined, as the majority now go to the much more accessible Lewes Clinic which I attend fortnightly. The number of cases sent up for diagnostic X-ray is still small, 58 during the year, and the number of contacts—three only—negligible. Radiography is the greatest advance in the diagnosis of pulmonary tuberculosis since the discovery of the tubercle bacillus, and yet it is still criminally neglected.

The work of the visiting Consultants is greatly appreciated. Mr. N. St. J. J. G. D. Buxton, F.R.C.S., the Orthopaedic Surgeon, has paid three visits. He made examinations of 45 in-patients and 15 out-patients, recommending eight for admission to King's College Hospital. Mr. Gilbert Howells, F.R.C.S. has visited six times, examining ear, nose and throat in 297 cases. Mr. Derrick Martin, F.R.C.S. has performed two minor operations at the sanatorium, and has held four sessions for phrenic evulsion, operating on 15 patients. Mr. K. F. Pedley, L.D.S. attended 25 times, giving 162 treatments. One patient was sent to the London Chest Hospital and three to University College Hospital for operative treatment.

The occupation of patients has always been considered to be of great importance, and a considerable amount of useful work, handicrafts apart, has been accomplished. Now, however, with the admission of more advanced cases, it is becoming increasingly difficult to get work of this nature done. This deficiency is aggravated by the steadily increasing difficulty in obtaining domestic labour. The scarcity of recruits for nursing and domestic work is producing a desperate condition, and unless this is overcome the Health Services will be crippled and a new and serious complication will be introduced by the employment of juveniles for adult work. Of the handicrafts, basket work still remains the most popular, though during the year individual patients have branched out into painting buttons, making models, tapestry belts, woollen toys, brooches and fancy articles.

The Coronation and its festivities, together with the Patients' Reunion on Whit Monday, provided a period of entertainment, including specially arranged char-a-banc drives to see the decorations in the neighbouring towns. The entertainment at the Reunion, which was attended by 70 old patients and 400 friends, was provided by Miss Purrott and her dancers and by the Rye Gymnastic Club.

Christmas leave was again arranged, and was much appreciated by patients and staff. All patients except those who were too ill or whose home conditions were unsuitable were away for five days. A skeleton staff remained to attend to the 26 remaining patients. This enables the staff to complete Xmas leave before the end of January, whereas previously it was rarely completed before the end of February. To-day, with the present scarcity of staff, it would be still more crippling. Staff gardens were again very well tended. At the request of the staff, a "Keep Fit" class has been arranged to begin in the New Year.

The installation of Aga cookers has revolutionised the kitchen, which it is now possible to keep clean. They are much appreciated by the staff and are most economical in running, £30 having been saved in fuel cost during the past year.

In conclusion, may I thank all those who have helped the patients and staff at the sanatorium, amongst whom are Mr. Spring Rice, who very kindly thought of sending his car to take patients for drives, Mrs. Burdett-Coutts, who gave us her annual concert, and Mrs. Lovelace, who gives such ungrudging personal service to the patients. I should also like to thank all the members of the staff, who have worked so well and so cheerfully, and my Committee, for all the time and thought they give to the welfare of Darvell Hall.

J. R. DINGLEY,
Medical Superintendent.

Tuberculosis (Prevention of Tuberculosis) Regulations, 1925.

There were not any persons suffering from pulmonary tuberculosis reported to be employed in milking cows during the year 1937.

Public Health Act, 1936, Section 172.

It was not found to be necessary in 1937 to take any action under this Section for the compulsory removal to Hospital of infectious cases of pulmonary tuberculosis.

REPORT BY THE HEALTH COMMITTEE, SUSSEX RURAL COMMUNITY COUNCIL. Tuberculosis Prevention and Care.

The Sussex Rural Community Council have continued to provide this voluntary service, through the medium of Area Committees covering the whole Administrative County. From a financial point of view the aim of the service may be described as one of reducing the "cost" of tuberculosis to the community by: (a) enabling patients to receive early treatment sooner than would be possible without assistance from voluntary sources; (b) eliminating risks of infection in the home during a period of awaiting treatment and after return from treatment; (c) ensuring that home difficulties do not result in a too-early return from treatment.

It will be clear that the cost of the treatment of tuberculosis to the community is much increased where a voluntary service does not exist. Further, the service aims at (d) preventing the unremunerative expense which follows where treatment has been given and a patient returns to home conditions which revive the trouble.

The County Council continued its previous contribution of £200 towards the cost of this work. The Rural Community Council itself raised £423 2s. 7d. for case needs through the East Sussex response to the National Christmas Seal Sale of 1938. A further £69 11s. 4d. for case needs was raised by Area Committees. During the year, £451 2s. 5d. was expended on case needs, and the accumulated balance was carried forward towards case needs of 1938-39.

The nature and extent of the help which is necessary may be summarised briefly as follows :—

(i) *During the period before treatment.* Transport is frequently required to enable attendance for examination. Other requirements include (according to the circumstances of each case), additional nourishment, fuel, help in the home, boarding out of children; occupation.

(ii) *During the period of treatment.* Additional nourishment and fuel, etc., for children and others when the income-earner is away; help in the home; boarding out; transport for relations visiting; holidays for a member of the family ill from nursing.

(iii) *After return from treatment.* Nourishment; help in the home; boarding out; beds, dressings, etc.; occasional transport for re-examination; occupation; employment.

The above represent the more usual or common-to-all needs, but each individual has his or her special needs and worries. These may be matters of business or of private troubles. All such are instances of help which can only be given by sympathetic, informed, and experienced visitors in touch, through the Rural Community Council or otherwise, with bodies and individuals willing and able to provide the individual need. There has been no case during the past year where the service has completely failed to meet a need.

“Child Care.”

This service, organised by the Rural Community Council, has continued to provide an additional contact between parents and schools, and an advisory service for parents. The aims of the service—for children of school age attending elementary schools throughout the Administrative County—remain much as previously. The service is established primarily for children whose parents' incomes do not exceed 7s. per head per week, in the family, after deduction of rent. This figure of “7s.” is the high-limit of income in the case of children who receive nourishment at school by grant aid from the County Council under the Rural Community Council's arrangements. Where parents' income slightly exceeds 7s.—and for all requirements other than nourishment as specified below—the need must be met as far as possible by the Community Council's Area Committees.

Some 1,200 children attending 125 schools were being assisted with County Council-provided nourishment at school at the end of the financial year 1937-38. These were all children of necessitous parents, and had been certified by the relative School Medical Officers to be under-nourished. In each case the necessary nourishment was prescribed by the School Medical Officer. In the great majority of cases one-third pints of milk were consequently provided. Canteen dinners were provided in some 200 cases. In others the nourishment was cod liver oil and malt, or alternative preparations.

“Poverty, ignorance, or cruelty,” are said to be the three principal causes of under-nourishment in children. It cannot be too strongly emphasised that poverty is the cause in the huge majority of the East Sussex cases. Of all the cases of under-nourishment reported by Medical Officers and investigated by the Community Council, there were not a dozen cases in which income exceeded the high limit. “Ignorance,” or bad management in the home, accounted for comparatively few of the East Sussex cases during the past year—and in any case, with a high limit of 7s. per head per week for all purposes (other than rent), the few cases of “ignorance” are hardly distinguishable from “poverty.” Cases of deliberate cruelty have not arisen. In the occasional case of neglect it has been possible for Area Committees to take useful action.

During the year, £680 19s. 8d. was expended by the Community Council on this service. The Area Committees of the Community Council collected £83 6s. 11d. towards the additional cost of nourishment during holidays, boots, clothing, and other needs in special cases—together with a large number of gifts in kind. A contribution of four dozen pairs of gum boots by the Rubber Gifts' Association was a notable instance of these.

The results of this service are very substantial. They encourage us to think that an expenditure which is in itself comparatively trifling per head (although infinitely difficult to regularise) will be repaid many times over by a later life history of improved health and consequent saving to the community. In the meantime, both parents and teachers (whose co-operation continues to be invaluable) are emphatic in their assertions of better health, better attendances, and better “teachability” of all these children.

Health Publicity.

Assisted by grant (County Council £194, East Sussex Insurance Committee £50), the Rural Community Council operated during the year a service of (i) "Better Health" distribution of 2,500 copies per month by hand in special areas and to selected bodies and individuals; (ii) Assistance towards "Health Weeks"; (iii) Cinema-illustrated Health Talks at 30 elementary schools; (iv) Sex Instruction Courses (of "Talks with Cinema") at secondary schools. In every instance those who have received the benefit of these services have been enthusiastic in their appreciation and in claiming that excellent results have followed.

TREATMENT OF ORTHOPÆDIC DEFECTS.

The Council's Scheme for the treatment of orthopædic defects has been described in my previous reports.

Orthopædic Clinics.

Five hundred and seven patients, including 226 new cases, were seen at the seven Clinics. Fifty of these new cases suffered from spinal curvature, four from old fractures, two from tuberculosis, and the remainder were cases of congenital and other deformities. Two hundred and five patients were given treatment by massage and electricity and remedial exercises, 70 were received for varying periods into the Chailey Heritage Hospital, and five at other hospitals.

The results of treatment of the 205 patients at the close of the year are thus summarised:—

27 completely cured.	17 have just commenced treatment.
134 improved.	8 have left County.
19 in statu quo.	

TABLE XIX.
OUT-PATIENTS.

Clinics at Lewes, Hallsham, East Grinstead, Crowborough, Burgess Hill, Portslade and Hastings.	Cases examined by Surgeon in 1937.			Cases Treated.		Total No. of attendances of all cases.	Nature of Deformities of New Cases.													Total.	
	New Cases.	Old Cases.	Total.	New Cases.	Old Cases.		Spinal Curvature.	Spastics.	Torticollis.	Rickets.	Bowed Legs.	Flatfoot.	Talipes.	Other Congenital Defects.	Valgus Ankles.	Knockknee.	Tuberculosis.	Old Fracture.	Osteomyelitis.		Other.
Children under 5 years of age	115	64	179	36	12	1336	—	1	3	30	9	11	11	10	7	17	—	1	—	15	115
School Children between 5 & 16	108	210	318	87	68	3438	50	1	4	1	—	13	3	—	1	3	2	3	1	26	108
Persons over 16	3	7	10	2	—	60	—	1	—	—	—	—	—	—	—	—	—	—	—	2	3
TOTALS ..	226	281	507	125	80	4834	50	3	7	31	9	24	14	10	8	20	2	4	1	43	226

The following treatments were given at the Clinics:—

Electrical treatment 706, Massage 842, Remedial exercises 2,417, Strapping, Plaster, and Splinting 203, General Supervision 83 (including 36 visits to patients at their homes). Total 4,251.

Surgical Appliances.

Surgical appliances have been supplied to 93 patients during the year, under the Orthopædic Scheme.

Hospital Treatment.

The total number of patients treated at the Heritage Hospital, Chailey, and at other Hospitals during 1937 is given below.

TABLE XX.
IN-PATIENTS.

Classification.	Nature of Deformities.													Results of treatment.						
	Rickets.	Tuberculosis.					Talipes.	Kypholordosis and Scoliosis.	Torticollis.	Other Congenital Defects.	Infantile Paralysis.	Osteomyelitis.	Spastics.	Scar and Keloid.	Other Deformities.	TOTAL.	Cured.	Improved.	In Statu Quo.	Died or left County
		Spine.	Hip.	Knee.	Ankle.	Abdominal Glands.														
Children under 5 years of age	22	—	1	—	—	4	—	—	2	1	—	1	—	4	35	6	27	1	1	
Children between 5 and 16 years of age	—	5	9	2	1	2	3	2	—	2	1	2	1	8	40	4	32	3	1	
TOTALS	22	5	10	2	1	2	7	2	2	3	1	3	1	12	75	10	59	4	2	

Of the 75 patients, 70 were treated at the Heritage Hospital, Chailey, 3 at the Royal East Sussex Hospital, Hastings, 1 at the St. Vincent's Orthopædic Hospital, Eastcote, and 1 at the Royal National Orthopædic Hospital.

Dr. G. Murray-Levick, the Council's Consultant for Physical Treatment, reports:—

" In submitting my report on the working of the Orthopædic Scheme for 1937, I would like to make the following observations about the out-patient clinics.

" The progress made in certain cases seems to be unduly slow, especially as regards spinal deformities. I think this is due to their getting less treatment than is desirable.

" In my opinion the treatment should be of longer duration and given not less frequently than twice a week. Twenty minutes is needed in many cases and two of the clinics only function once a week. I should like to make more use of Faradism in these and other cases than the time available by the masseuse at present permits.

" Additional clinics are needed north-east and east of Hailsham. A number of patients attending at Hailsham have to travel considerable distances, which makes it difficult to secure regular attendance for treatment. This would be obtained by the establishment of clinics at Wadhurst, Rye, and Robertsbridge, or at other centres as might be found to be convenient for the children.

" Portslade demands special attention at present. Most of the children come from street dwellings and there are a good many cases of bad posture from debility needing treatment. This clinic and the Hailsham Clinic at present only function once a week.

" If an extra clinic were to be started east of Hailsham, one additional orthopædic nurse would be needed.

" The total number of patients on the books of the Out-patient Clinics shows an increase of 61 on last year. The total number of attendances has risen from 4,483 in the preceding year to 4,834. The goodwill of the Head Teachers of the elementary schools in facilitating the attendance of their children at the clinics is of great assistance and is much appreciated.

" The increase in the incidence of rickets is notable and I would once more suggest the importance of preventive measures for the prenatal period. As I pointed out in my last year's report, the issue of concentrated Vitamin A and D at the Orthopædic Out-patient Clinics to children suffering from calcium deficiency, malnutrition, and lowered resistance is attended with success. It is inexpensive, when our stock solution of these vitamins is used. I believe that if it was issued to district nurses for regular distribution to prenatal and nursing mothers the incidence of rickets would fall and the physique and health of the infants would greatly improve, apart from the great benefit to the mothers.

" In all respects the working of the orthopædic scheme is smooth and to me it is satisfactory with the exceptions I have outlined."

BLIND PERSONS ACT, 1920.

The East Sussex Association for the Blind.

The County Council, in their Scheme for the Welfare of Blind Persons in the County, have entrusted the arrangements for their care to the East Sussex Association for the Blind.

The Association take an active interest in the welfare of all blind persons in the County. The needs of individual blind persons are dealt with by a General Case Committee, which meets fortnightly. Regular weekly grants were made in 1937 to 113 unemployable and necessitous blind persons whose incomes were inadequate, and single grants were made for a variety of individual needs. Six hundred and seventy-five applications for assistance were also dealt with.

The Staff of the Association in 1937 consisted of Miss Salisbury, Organising Secretary, assisted by two clerks. Miss Howlett, Miss Beaven and Miss Clarke were the Home Teachers and Mr. Pryor was Assistant Appeal Organiser.

Prevention and Treatment.

Names are added to the Blind Register only after examination by Ophthalmic Surgeons, who give a full report on each applicant to the Association, on the nature and cause of loss of eyesight; on the need, or otherwise, for treatment; and on the prospects of recovery. Persons requiring treatment are sent to the Voluntary Hospitals at Brighton, Eastbourne, Hastings, and Tunbridge Wells, with which the County Council have arrangements for examination and treatment in their Eye Departments.

The Association have, at the present time, on their preventive register, 93 cases of deteriorating eyesight. As a result of following up and continuance of treatment, some of these persons have greatly improved, while others have had to be placed on the Blind Register.

Register.

There are now 471 names on the Register of blind persons, an increase of 23 during the year.

TABLE XXI.

NUMBER OF BLIND PERSONS ON REGISTER AS AT 31ST MARCH, 1937.		AGES AT WHICH BLINDNESS OCCURRED.		EMPLOYMENT, AGE PERIOD 16 AND UPWARDS.	
Age Period.	Number.	Age Period	Number.		Number.
0 to 1 year	0	0 to 1 year	35	Employed	62*
1 to 5 years	2	1 to 5 years	10	Trained but Unemployed	1
5 to 16 years	18	5 to 10 years	15	Under Training	4
16 to 21 years	9	10 to 20 years	34	No Training, but Trainable	3
21 to 40 years	30	20 to 30 years	42	Unemployable	381
40 to 50 years	40	30 to 40 years	29		
50 to 65 years	71	40 to 50 years	36		
65 to 70 years	93	50 to 60 years	71		
70 years and over	204	60 to 70 years	88		
Unknown	4	70 years and over	100		
		Unknown	11		
Total	471	Total	471	Total	451

*Including 17 Home Workers.

Training.

Industrial Training is provided by the County Council for all blind persons capable of profiting by training in Institutions. Three men and one woman were under training at the end of the year.

Blind Home-Workers.

Seventeen blind home-workers were on the Register at the end of the year, one of whom was a copyist, and another a proof-reader.

The wages of each blind home-worker approved by the County Public Health and Housing Committee were augmented in the financial year 1935-36 by the County Council to the extent of 10s. per week. It has been decided to increase the augmentation to 15s. per week as from 1st April, 1938. The Home Industries Department of the National Institute for the Blind provides the workers with materials and markets their finished articles when not sold locally.

In addition to the 17 home-workers in the Blind Home-Workers' Scheme, there were 45 employed blind persons in the County, 25 of whom are under St. Dunstan's auspices.

The following is a list of the occupations of all employed blind persons in the County :—

Basket Workers	5	Porters, etc.	1	Mat Makers	3
Boot Repairers	2	Dealers, Shopkeepers, etc. ..	6	Musicians	1
Braille Copyists, Proofreaders ..	2	Firewood Workers	3	Poultry Farmers	3
Brush Maker	1	Machine Knitters	6	Piano Tuners	6
Carpenters	4	School Teachers	1	Miscellaneous	9
Netting Makers	6	Masseurs	3		

Home Teaching.

The three Home Teachers systematically visit the blind in their homes and give lessons in Braille and Moon Type, and instruction in rug-making, pulp cane and raffia work, knitting, etc. General advice and help is also given as far as possible in any difficulty.

Four thousand four hundred and eighty-two visits for instructional purposes were paid during the year, and 461 lessons were given to 135 blind persons. Those who receive this instruction are capable of doing pastime work, which gives them an interest, and sometimes a small addition to their income.

Unemployable Blind and their Dependents.

The amounts distributed by the Association as domiciliary assistance to unemployable blind persons and to dependents during the financial year 1937-38 were :—

Blind Persons	£1,868	Dependents	£377
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The County Council contributed the sum of £2,050 towards these payments.

National Library.

A grant of £60 was made in 1937-38 to the National Library for the Blind for the loan of books to blind persons in the County. At the end of the year the Library was used by 60 blind readers on the County Register.

Wireless Certificates.

During the year the County Medical Officer of Health issued 35 certificates to blind persons, exempting them from payment for wireless receiving licences.

MENTAL DEFICIENCY ACTS, 1913 to 1927.

Ascertainment.

The ascertainment of mental defectives in this County is carried out by the County Council's Home Visitors. Cases are also ascertained through District Nursing Superintendents, Health Visitors, Medical Practitioners, Relieving Officers, and Voluntary Organisations. The Female Home Visitor is a part-time officer of the County Council and is also the Secretary of the East Sussex Association for Mental Welfare. The Male Home Visitor is a whole-time officer of the County Council. Both officers, in addition to their ascertainment work, act as Supervising Officers and Petitioning Officers. They also escort defectives for admission to Certified Institutions and Guardianship and convey them to and from their homes when granted leave of absence.

During the year, 69 new cases were reported to the Committee for the Care of the Mentally Defective. These were brought to the notice of the Local Authority in the following ways :—

(a) Notified by Local Education Authorities under Section 2 (2) of the Mental Deficiency Act, 1913, as amended by Section 2 of the Mental Deficiency Act, 1927	11
(b) Informal notification by Local Education Authorities	13
(c) Reported by East Sussex Association for Mental Welfare	21
(d) Reported by other Local Authorities	10
(e) Reported from other sources	14
	<hr/>
	69
	<hr/>

The cases notified were dealt with in accordance with their needs as follows :—

Admitted to Certified Institutions	6
Placed under Guardianship	6
Placed under Home Supervision	57
	<hr/>
	69
	<hr/>

Defectives on Register on 31st December, 1937.

On the 31st December, 1937, there were 704 cases on the Register (excluding 4 cases maintained by the State in Rampton State Institution, Retford, Nottingham) of whom 177 were being maintained in Certified Institutions; 38 were on licence from Institutions; 47 were maintained under Guardianship; 6 were on licence from Guardianship; 419, not dealt with by Order, were under Home Supervision (including 22 who were under supervision in Poor Law Institutions); 1 was being maintained in an approved Home and 16 cases were awaiting consideration by the Committee.

The following Table gives particulars of these defectives as reported to the Board of Control in the Annual Return for 1937.

TABLE XXII.

	Male.	Female.	TOTAL.
(a) (1) In Institutions	13	5	18
	64	95	159
(2) On Licence from Institutions ..	2	—	2
	14	22	36
(b) (1) Under Guardianship	1	7	8
	18	21	39
(2) On Licence from Guardianship ..	—	—	—
	2	4	6
(c) In "places of safety"	—	—	—
	—	—	—
(d) Under Home Supervision—(1) Statutory Supervision	187	135	322
	31	31	62
(2) Voluntary Supervision	—	1	1
(e) In Approved Home (permissive case)	—	—	—
(f) In receipt of Poor Relief:—			
(1) Institutional	3	19	22
(2) Domiciliary	4	9	13
(g) Action not yet taken under any of the above headings:—			
(1) Notified by Local Education Authorities	1	—	1
(2) Otherwise ascertained	6	9	15
TOTALS	346	358	704*

* Excluding 4 cases detained in Rampton State Institution.

During the year the following cases were removed from the Register:—

TABLE XXIII.

	Male	Female	Total
Deaths (i) In Institutions	1	3	4
(ii) Under Guardianship	1	1	2
(iii) Under Home Supervision	1	2	3
Transferred to County Mental Hospital	3	3	6
Left the County Administrative Area	8	3	11

Institutional Provision.

The Local Authority have not themselves provided any Certified Institutions for the care of mentally defective persons, but the County Public Assistance Institutions at Chailey and Cuckfield are approved under Section 37 of the Mental Deficiency Act, 1913, the first named being recognised for the accommodation of 58 male and 15 female patients and the second for 10 male and 20 female patients.

At the County Institution at Chailey the defectives are of low grade. They are given instruction in rug-making, gardening, etc. Their recreational activities include physical training, cricket, walks, indoor games, dancing, and cinematograph entertainments.

The Cuckfield County Institution accommodates defectives of medium grade. Members of the Brabazon Society give instruction in needlework, knitting, and crochet work to the female defectives once a week. The male defectives are employed in simple domestic duties in the Institution and in garden work. All are given opportunities for recreation by means of walks, indoor and outdoor games, and cinematograph entertainments.

The Guardianship Society administers two small institutions in the County area, viz., Dungates, Horam (7 beds), and Tubwell Farm, Jarvis Brook (7 beds). These Institutions receive medium and high-grade male defectives over 16 years of age. Many of the defectives admitted are afterwards placed out on licence with farmers for training in agricultural work.

The Hermitage Training Home, Fairwarp, near Uckfield, is maintained by a Voluntary Committee and is a Certified Institution for the accommodation of 19 high and medium-grade females. The Voluntary Committee have also established ancillary premises at Lark's Hill, Fairwarp, with accommodation for 9 patients, and at Wharf House, Lewes, with accommodation for 16 patients of the same grade as those admitted to the Training Home. All patients admitted must be over the age of 16 years unless with the previous consent of the Board of Control. The report of this Training Home for the year ending 31st March, 1938, states that there were 62 girls on the books during the year including those placed on licence in resident domestic service or under other care; 24 were placed out in daily service for varying periods and 18 were in resident domestic service. Of the 62 cases referred to above, 40 were maintained in the Home by the East Sussex Local Authority. Many of the girls were completely self-supporting, whilst others earned wages, part of which was applied towards the cost of their maintenance. Excellent training in domestic work and needlework is given, whilst recreation is provided in the form of country dancing, singing, and games of various kinds. A high standard in needlework is attained by some of the girls and they have been successful in Country Dancing Competitions.

The following Table shows the number of East Sussex defectives in Certified Institutions, Approved Public Assistance Institutions, an Approved Home, and in the Rampton State Institution, Retford, Nottingham, on the 31st December, 1937.

TABLE XXIV.

Name of Certified Institution.	Male.	Female.	TOTAL.
Barvin Park, Potter's Bar	1	—	1
Besford Court	2	—	2
Brentry Colony	4	—	4
Chailey Public Assistance Institution	37	11	48
Coldeast Colony	—	1	1
Cuckfield Public Assistance Institution	7	27	34
Dungates, Horam	5	—	5
Ethoe House, Leyton	—	4	4
Girls' Village Home, Barkingside	—	1	1
Handford Home, Ipswich	—	1	1
Hermitage Training Home, Fairwarp	—	40	40
Little Plumstead Hall, Norfolk	—	1	1
Mary Dendy Home, Sandlebridge	—	1	1
Mount Olivet Certified Institution, Farnham	1	—	1
Mount Tabor Certified Institution, Basingstoke	—	4	4
Pield Heath House, Hillingdon	—	1	1
Princess Christian's Farm Colony, Hildenborough	1	4	5
Rampton State Institution, Retford	2	2	4
Royal Earlswood Institution, Redhill	1	2	3
Royal Eastern Counties Institution, Colchester	1	—	1
Rock Hall House, Bath	11	4	15
St. Elizabeth's Home, Much Hadham	—	1	1
St. Joseph's Home, Sudbury	—	1	1
St. Mary's Home, Alton	—	2	2
St. Teresa's Home, Lewisham	—	1	1
Stoke Park Colony, Bristol	18	15	33
Tubwell Farm, Jarvis Brook	4	—	4
Alexander House Approved Home, Hildenborough	—	1	1
TOTALS	95	125	220*

* Including 38 on licence.

Defectives under Guardianship.

There were 53 defectives cared for under Guardianship Orders on the 31st December, 1937 (21 males and 32 females). Arrangements were made for 6 of these defectives to be placed on licence during the year, three of them in domestic service.

The supervision, visitation, and medical care of these defectives is provided through the Guardianship Society. Monthly reports on supervision visits, and quarterly medical reports are furnished by the Society. Where possible, arrangements are made for defectives under guardianship in Brighton and district to attend the Society's occupation centre, where instruction is given in carpentry, boot-repairing, cane-work, dressmaking, envelope-making and other handwork. Social Clubs for boys and girls are maintained by the Society. Some of the defectives are in wage-earning employment. The Council's officers visit the defectives when necessary and furnish special reports on their care, supervision, and progress.

Mental Defectives on Licence.

There were 44 cases on licence from Institutions and Guardianship on 31st December, 1937, particulars of which are given as follows:—

	(a) from Institutions		(b) from Guardianship		Total
	Male	Female	Male	Female	
On licence to care of parents	11	3	—	—	14
.. .. in situations	—	7	—	1	8
.. .. to care of foster-parents	3	5	2	1	11
.. .. in Hospital	—	1	—	1	2
.. .. in other Institutions	2	6	—	1	9
	16	22	2	4	44

The policy of placing these defectives on licence has proved successful in most cases. Many of the defectives are in full-time employment and others are in part-time employment. Some are incapable of wage-earning employment, and are occupied in simple domestic tasks. A few who live in Brighton and its neighbourhood attend the Occupation Centre of the Guardianship Society. Two defectives absconded from care on licence during the year. Both of these were returned through the agency of the Police after a short period. The Guardianship Society undertakes supervision, visitation, and medical care of defectives on licence on the same lines as for the cases under Guardianship referred to in the preceding paragraph.

Defectives under Supervision.

Supervision of mental defectives, not under Order, in their own homes is carried out by the Council's Home Visitors. Contact is maintained with the parents and, where a change in the home circumstances necessitates the transfer of a patient to Institutional care or Guardianship, the case is reported to the Local Authority and arrangements are made for the presentation of a petition for an Order under the Mental Deficiency Acts. Assistance is given for the provision of clothing, dental and medical treatment in cases in which the financial circumstances of the family render it necessary. Some of the defectives under supervision attend once a week a handwork class at Hove, which is conducted by Mrs. Ayshford-Ayre, the Secretary of the East Sussex Association for Mental Welfare.

East Sussex Association for Mental Welfare.

The services of this Association are of great value in establishing friendly contact with the parents and relatives of mental defectives, and the work of the Association's Officers and Voluntary Visitors is much appreciated. The Association keeps a Register of cases of mental instability and of persons of subnormal mentality and exercises friendly supervision over them through their Secretary and through voluntary workers. These cases are referred to the Local Authority as occasion arises for medical examination. The Secretary of the Association, as stated above, is employed by the County Council as Home Visitor and Supervising Officer for their ascertained cases of mental deficiency.

Reconsideration of Cases by Visitors and Petitions Dealt With.

During the year 1937 the Visitors interviewed 165 defectives in the discharge of their duties under Section 11 of the Mental Deficiency Act, 1913, and Justices of the Peace dealt with 21 Petitions, 11 Varying Orders and 8 Contribution Orders under the Acts.

PUBLIC ASSISTANCE.

Bed Accommodation.

The number of beds available (excluding beds for mental defectives and Lunacy Act patients) in the Public Assistance Hospital and Infirmaries and in the Hospitals maintained by the Eastbourne and Hastings County Borough Councils on the 31st December, 1937, is given hereunder :—

TABLE XXV.

	MEN.	WOMEN.	CHILDREN.	TOTAL.
Southlands Hospital, Shoreham (a)	104	200	—	304
Battle Infirmary	46	48	2	96
*Chailey Infirmary	34	52	—	86
*Cuckfield Infirmary	71	69	8	148
East Grinstead Infirmary	31	31	—	62
Newhaven Infirmary	36	28	2	66
Rye Infirmary	22	32	—	54
Ticehurst Infirmary	21	26	—	47
*Uckfield Infirmary	25	28	1	54
Beds reserved at Eastbourne, St. Mary's Hospital (b) ..	6	6	—	12
Beds reserved at Hastings Municipal Hospital (b) ..	12	13	—	25
Totals	408	533	†13	954

(a) Including beds reserved by the West Sussex County Council.

(b) Additional beds can be obtained when available.

* In addition, there are 23 beds in open-air shelters for tubercular patients, *viz.* :—Chailey, 16; Cuckfield, 5; Uckfield, 2.

† There is only one sick children's ward in the County Institutions, *viz.* :—at Cuckfield. The remaining children's beds are in adult wards.

Maternity patients and women suffering from Puerperal Pyrexia are received at the Southlands Hospital, Shoreham, from the Maternity and Child Welfare Committees of the East Sussex and West Sussex County Councils and of the Hove and Worthing Borough Councils. The Battle, Cuckfield, and Newhaven Institutions also receive Maternity patients, and a Nursery for the care of children is provided at each of these Institutions.

The Cuckfield and Chailey Institutions are Certified Institutions under Section 37 of the Mental Deficiency Act, 1913, providing accommodation for 10 male and 20 female defectives at Cuckfield, and 58 male and 15 female mental defectives at Chailey.

Southlands Hospital, Shoreham.

REPORT BY MEDICAL SUPERINTENDENT.

(The following Report is submitted with the authority of the Chairman of the Public Assistance Committee.)

The admissions for the year 1937 totalled 3,386, an increase of over 400; of these, 2,561 remained under a month. The operations carried out in the theatre, totalled 759, and this high figure has strained the resources of the theatre staff, for it has led on certain occasions to the theatre being in use day and night.

The continued rise in the number of cases admitted for operation is directly due to the inability of the voluntary hospitals to deal with the surgical needs of the increasing local population. In 1937, about 1,200 cases were received which formerly would have gone to voluntary hospitals. The deficiency of accommodation for children in the district is most marked and although at present there is no special ward for them in the hospital, 500 children were admitted. The obvious need for this type of accommodation is now realised and a scheme to provide 16 children's beds is in progress; this will help considerably, but it will only be able to deal, at full capacity, with 200 admissions annually—the others will still overflow into the adult wards.

Accident cases totalled 312, and there were 502 maternity cases.

The out-patient work is steadily growing and increasing the demands on the medical staff. The nursing staff in the theatre will have to be augmented in the near future.

Throughout the year there has been the usual difficulty in obtaining suitable nursing personnel and these difficulties are likely to be greater in the future, particularly owing to the demand for a 96 hours' working fortnight; this measure, if passed, will necessitate a staff increase of about 30 per cent. on our present numbers.

The Nurses' Home accommodation is barely sufficient to house the present staff and the need to extend it has frequently been pointed out. If the staff increase is made compulsory the Council will be left with the choice of employing non-resident nurses or finding capital to extend the Nurses' Home to allow of a greater number of probationers to be engaged for training. To alleviate this deficiency temporarily, in 1937, arrangements were made for the Ward Sisters to become non-resident and the number of male and female non-resident assistant nurses was increased.

The recently erected X-ray and Massage Department and the Ante-natal Clinic have proved their usefulness and their necessity.

The food of patients and staff has attained a more satisfactory standard than hitherto and the produce of the gardens has shown improvement in quality and variety.

In the State examinations the nurses attained the following satisfactory results :—

Final Examination—11 entered, 9 passed.
Preliminary Examination—9 entered, 8 passed.

Improvements at Southlands Hospital and Infirmaries.

The principal improvements carried out during the year were as follows :—

SOUTHLANDS HOSPITAL.

Erection of Entrance Lodge and gates.
Installation of fish fryer.
Erection of cycle shed for nurses.
Provision of additional accommodation for the reception of chronic sick cases of both sexes (this work is in progress and has not yet been completed).
Block "A," small ward—new flooring.
Improvements to roads and paths.

BATTLE INSTITUTION.

Calorifier to Infirmary.
Relaying wood block flooring in 8-bed ward of Infirmary.
External painting to Infirmary.

CHAILEY INSTITUTION.

Provision of ironing machine in laundry.
Provision of "Esse" cooking stove in kitchen.
Conversion of outbuildings into staff quarters.

CUCKFIELD INSTITUTION.

House and Infirmary blocks—redecorations.

NEWHAVEN INSTITUTION.

Erection of Nurses' Home.
Installation of new steam boiler.
Internal and external painting of Infirmary.

TICEHURST INSTITUTION.

Infirmary walls in yard distempered externally.
Laying wood block flooring in ground floor corridor of Infirmary.
New treads and nosings to steps of Infirmary staircases.

UCKFIELD INSTITUTION.

Additional bathroom and lavatory accommodation for infirm patients.

Subscriptions to Voluntary Hospitals and Associations.

Subscriptions to Voluntary Hospitals and Associations amounting to £395 18s. od. were authorised for the financial year 1937-38. This amount included subscriptions to 14 Voluntary Hospitals, 10 Associations, and a sum of £150 to the East Sussex County Nursing Federation for distribution to District Nursing Associations according to the services rendered in providing nursing for necessitous persons. The subscription to the Kent and Sussex Hospital was increased from £10 10s. od. to £15 15s. od.

Domiciliary Medical Relief.

As stated in my report for 1936, the scheme for the provision of a Poor Law Domiciliary Medical Service with "Free Choice of Doctor" was approved by the Minister of Health and brought into operation on the 1st April, 1937, for a trial period of one year.

The scheme has been very successful in the urban districts. There were no applications for domiciliary treatment under the Poor Law in the five rural parishes included in the scheme in 1937. A Panel of Medical Practitioners was formed and eleven Doctors agreed to serve on this Panel for the District comprising the Borough of Hove and the Urban District of Portslade and three Doctors on the District comprising the Parishes of Falmer, Stanmer, Kingston-near-Lewes, Hord, and Rodmell. A satisfactory medical service has been provided and no inconvenience to patients has been caused by the introduction of the Scheme.

Details are given below of the patients attended in the urban districts by the Medical Practitioners serving on the Panels and the number of attendances given during the period from the 1st April to the 31st December, 1937.

(a) Number of Doctors on Panel	11
(b) Number of Patients attended	180
(c) Number of attendances at homes of Patients	372
(d) Number of attendances at Surgeries	402
(e) Number of Medicines provided	412

With regard to the remainder of the County in which domiciliary medical attendance is given by District Medical Officers, particulars of the patients attended and attendances given are as follows :

(a) Number of District Medical Officers	48
(b) Number of Patients attended	1,202
(c) Number of attendances at homes of Patients	9,430
(d) Number of attendances at Surgeries	2,977
(e) Number of Medicines provided	5,444

County Ambulance Service.

The County Council early in 1938 increased their ambulance service, a new motor Ambulance having been purchased. Both ambulances are garaged at Southlands Hospital, Shoreham, and are used mainly for the conveyance of patients under domiciliary or institutional treatment provided by the County Council. Particulars of the ambulance services in the County provided by Sanitary Authorities, the Police, and Voluntary and Private Bodies are given in a later section of the report.

Pathological Examination of Specimens.

The arrangement made with the Visiting Committee of the County Mental Hospital for the pathological examination of specimens at their Laboratory has been of great assistance to Medical Officers of the Public Assistance Institutions and considerable use is made of this service. In the case of Southlands Hospital, an arrangement also exists whereby pathological examinations are undertaken at the Stephen Ralli Memorial Laboratory, Brighton, in cases in which results are urgently required.

Statistical Tables.

Statistics relating to the Poor Law Hospital and Infirmaries are given in the following three Tables :—

TABLE XXVI.

Accommodation in Public Assistance Hospital and Infirmaries for various types of cases (excluding mental cases) and the extent to which it was occupied on the 31st December, 1937.

Classification.	MEN.		WOMEN.		CHILDREN.		TOTALS.	
	Provided.	Occupied.	Provided.	Occupied.	Provided.	Occupied.	Provided.	Occupied.
Medical and Surgical	368	306	434	380	5	31	807	717
Children	—	—	—	—	8	8	8	8
Maternity	—	—	61	45	—	—	61	45
Tuberculosis	20	11	6	5	—	—	(a) 26	16
Isolation	2	—	13	11	—	1	15	12
	390	317	514	441	13	40	(b) 917	798

(a) Excluding beds in open-air shelters for tubercular patients.

(b) In addition, beds are reserved for East Sussex patients as follows :—

Eastbourne, St. Mary's Hospital : 12 beds, and additional beds if accommodation is available.
Hastings Municipal Hospital : 25 beds.

TABLE XXVII.
STATISTICS RELATING TO POOR LAW INSTITUTIONS FOR THE YEAR ENDED 31st DECEMBER, 1937.

Institution.	Total Admissions.	Maternity Cases Admitted.	Live Births.	Still Births.	Deaths among newly-born (under 4 weeks).	Total deaths among children under 1 year.	Maternal Deaths.	Total Deaths.	Patients discharged.	Beds occupied.		Surgical operations under anæsthetics.
										Highest occupied.	Lowest occupied.	
SOUTHLANDS HOSPITAL ...	3386	502	480	33	29	39	5	402	2969	308	245	470
BATTLE ...	133	27	26	1	2	2	0	50	91	88	71	0
CHAILEY ...	100	0	0	0	0	0	0	49	45	81	63	0
CUCKFIELD ...	480	62	59	3	1	4	0	87	370	139	102	5
EAST GRINSTEAD ...	162	0	0	0	0	0	0	50	73	51	38	1
NEWHAVEN ...	236	13	13	0	0	1	0	44	182	61	43	5
RYE ...	59	0	0	0	0	0	0	30	22	55	48	0
TICEHURST ...	55	0	0	0	0	0	0	26	20	90	84	0
UCKFIELD ...	135	0	0	0	0	0	0	49	61	52	39	0
TOTALS ...	4746	604	578	37	32	46	5	787	3833	925	733	481

TABLE XXVIII.
CLASSIFICATION OF IN-PATIENTS WHO WERE DISCHARGED FROM OR WHO DIED IN POOR LAW INSTITUTIONS DURING THE YEAR ENDED 31st DECEMBER, 1937.

Institutions.	Acute Infectious Disease.	Influenza.	Tuberculosis.		Malignant Disease.	Rheumatism.			Venereal Diseases.	Puerperal Pyrexia.	Puerperal Fever.	Other Diseases of Pregnancy.	Violence.	Disease of the Nervous System.	Disease of the Respiratory System.	Disease of the Circulatory System.	Disease of the Digestive System.	Disease of the Genito-urinary System.	Disease of the Skin.	Other Diseases.	Women and Infants discharged after Confinement.	Totals.	
			Pulmonary.	Non-pulmonary.		Acute.	Other Types.	Chronic Arthritis.															
SOUTHLANDS HOSPITAL	92	19	41	14	102	15	29	13	31	94	7	357	71	0	312	125	204	444	210	105	123	704	3371
BATTLE ...	0	0	0	0	7	2	0	1	0	0	0	0	3	0	8	36	1	1	3	7	54	141	
CHAILEY ...	5	6	4	1	17	0	1	1	0	0	0	0	20	3	7	10	2	6	5	3	0	94	
CUCKFIELD ...	9	16	15	1	13	2	1	2	0	1	1	7	10	34	47	48	19	14	13	43	124	457	
EAST GRINSTEAD ...	0	11	3	0	8	1	2	1	0	0	0	3	8	13	20	3	3	12	20	0	0	123	
NEWHAVEN ...	4	11	1	0	9	1	2	0	2	0	0	5	16	17	20	7	0	6	12	43	31	226	
RYE ...	0	2	0	0	2	0	0	0	0	0	0	0	8	1	9	10	0	3	1	10	0	52	
TICEHURST ...	0	0	0	0	0	0	0	1	0	0	0	0	12	0	3	9	3	0	4	3	0	46	
UCKFIELD ...	0	8	2	0	10	1	2	1	0	0	0	0	6	4	18	26	4	5	2	8	0	110	
TOTALS ...	110	73	66	16	168	22	37	20	33	95	8	369	109	85	350	226	443	483	248	157	260	913	4620

Blood Transfusion.

The number of Blood Transfusions given at Southlands Hospital, Shoreham, during the year was 29. These were required in cases of puerperal septicaemia, puerperal pyrexia, secondary anaemia, hæmorrhage, gastric ulcer, hæmatemesis, and other conditions. Blood donors are provided by the British Red Cross Society for cases in which it is not possible to obtain a suitable donor from the relatives of the patients, and arrangements have been made for the Medical Officers of all Public Assistance Infirmaries to have the services of a specialist in cases in which transfusions are required. At Southlands Hospital, the actual transfusions were performed by the Hospital Staff, and of the 29 transfusions given there, 10 were from relatives of the patients and 19 from donors supplied from the British Red Cross Service.

HOSPITAL ACCOMMODATION IN THE COUNTY.

In the report for 1936, a general review was given of the principle of the classification of the County Institutions for the reception of different kinds of disability and of the recommendations made to the County Council for the provision of the accommodation considered to be required.

Progress has been made at the County Council's Hospital (Southlands Hospital, Shoreham), where an ante-natal clinic has been built and the accommodation for maternity cases has been increased. To meet the increasing demand for accommodation for cases of acute sickness, additional beds have been acquired by utilising accommodation in one of the blocks on the institution side. The additional ward thus obtained was redecorated and equipped for 32 female sick cases. Other accommodation in H and G ward blocks is being adapted to provide 90 beds for the reception of chronic sick cases.

There is a pressing need for the provision of accommodation for sick children who at present have to be treated in the adult wards, but this will be alleviated in the near future by the provision of 16 beds for these cases.

The pressure on the Council's Hospital is caused mainly by the shortage of accommodation for surgical cases in the voluntary hospitals in the south-western portion of the County.

A programme of improvements to the County Hospital and Institutions has been formulated, and will be carried out as estimates of the cost are prepared and approved by the County Council.

The voluntary hospitals in the Administrative County and in the County Boroughs of Brighton, Eastbourne, and Hastings and the Borough of Royal Tunbridge Wells are given hereunder, together with the number of beds provided in each hospital. Several of these hospitals have recently launched appeals for funds to enable them to extend their accommodation and improve their special departments and equipment.

Name of Voluntary Hospital.	Number of beds.
Royal Sussex County Hospital, Brighton	272
Hove General Hospital	53
Sussex Maternity and Women's Hospital, Brighton	52
Sussex Throat and Ear Hospital, Brighton	32
New Sussex Hospital for Women and Children, Brighton	60
Royal Alexandra Hospital for Sick Children, Brighton	100
Sussex Eye Hospital, Brighton	56
Lady Chichester Hospital for Nervous Disorders, Hove	60
Princess Alice Memorial Hospital, Eastbourne	120
Leaf Homœopathic Hospital, Eastbourne	31
Ear, Nose, and Throat Hospital, Eastbourne	20
Royal Eye Hospital, Eastbourne	14
Royal East Sussex Hospital, Hastings	143
Buchanan Hospital, St. Leonards-on-Sea	103
Eversfield Chest Hospital, St. Leonards-on-Sea	100
Kent and Sussex Hospital, Tunbridge Wells	210
Homœopathic Hospital, Tunbridge Wells	30
Bexhill Hospital	58
Crowborough War Memorial Hospital	30
Haywards Heath King Edward VII Eliot Memorial Hospital	50
Lewes Victoria Hospital	35
Rye, Winchelsea, and District Memorial Hospital	15
East Grinstead Queen Victoria Cottage Hospital	38
Uckfield Cottage Hospital	13

PHARMACY AND POISONS ACT, 1933 : POISON RULES, 1935.

The Pharmacy and Poisons Act, 1933, and the Poison Rules, 1935, made by the Secretary of State under the provisions of Section 23 of this Act came into operation on the 1st May, 1936. The Act and Rules replaced existing legislation dealing with the sale, storage, etc., of poisons. Paragraphs 26, 27 and 28 of the Rules contain special provisions with regard to the storage of poisons and dangerous drugs in Hospitals, Infirmaries, etc., and to the supply of medicines containing poisons to patients under treatment either as Out-Patients or In-Patients.

The County Medical Officer of Health and the Deputy County Medical Officer of Health were appointed to carry out the inspection of the arrangements for the storage of poisons at Darvell Hall Sanatorium, Robertsbridge, and the Public Assistance Infirmaries in accordance with paragraph 28 (4) of the Rules. Such alterations as were found to be necessary for the proper storage of poisons have been satisfactorily carried out. Visits of inspection are paid to the Institutions at three-monthly intervals in accordance with the requirements of the regulations.

The Medical Officers of the Institutions referred to have each been furnished with a copy of the Memorandum (Poisons No. 3 (Practitioners and Hospitals)) issued by the Home Office.

At Southlands Hospital, Shoreham, the dispenser was officially appointed to carry out the inspections, and the storage and issue system has proved to be efficient and safe.

AMBULANCE FACILITIES.

(a) For General Non-Infectious Cases.

The County Council maintain 2 motor ambulances which are garaged at Southlands Hospital, Shoreham.

Ambulances provided by the British Red Cross Society and the St. John Ambulance Brigade are stationed at Battle, Brighton, Crowborough, Eastbourne, East Grinstead, Hailsham, Hastings, Haywards Heath, Lewes, Newhaven, Rye and Uckfield. Other ambulances are provided by the Brighton Police, the Hove Police, Newhaven and District Nursing Association, Haywards Heath Cottage Hospital, Hill House Hospital Wadhurst, Lewes Borough Council, Seaford Urban District Council, Heathfield and Waldron Ambulance Committee and the Bexhill Ambulance Brigade. There are two private ambulances at Hove and one at Eastbourne.

(b) For Infectious Cases.

Ambulances are available for the transport of cases of infectious disease in connection with the following isolation hospitals—Brighton, Eastbourne, Hastings, Hove, Tunbridge Wells, East Grinstead, Hurstpierpoint, Lewes, and Newhaven.

AIR RAID PRECAUTIONS : MEDICAL SERVICES.

During the past year considerable progress was made in the formation and organisation of adequate medical services in connection with the Council's Scheme for Air Raid Precautions.

First-Aid Posts.

In co-operation with Officers of the Local Authorities, 27 buildings have been provisionally earmarked as First-Aid Posts and these are to be examined by the technical officers who will prepare plans and specifications of the alterations and additions that may be necessary to adapt the premises for use in time of emergency.

At the request of the Air Raid Precautions Department of the Home Office, enquiries were made of tradesmen in Lewes to ascertain what stocks of medical and non-medical equipment, such as would be required at a First-Aid Post, are normally maintained, and a comprehensive schedule was prepared and submitted.

Staff.

Courses of Lectures were given throughout the County for the instruction of volunteers in first-aid and anti-gas measures, by lecturers appointed by the British Red Cross Society and the St. John Ambulance Brigade.

In connection with the training of volunteers, enquiries have been made to ascertain what additional staff is likely to be required at County Institutions in the event of all available space, i.e., board-rooms, corridors, etc., being utilised for hospital purposes. A return has been prepared which indicates that 90 fully-trained nurses and 180 auxiliary nurses will be required.

Members of the staffs of County Institutions have attended local courses arranged for the general public, and having received instruction in air raid precautions and the treatment of gas casualties, a considerable number have been successful in passing a preliminary Air Raid Precautions examination.

During the year, two courses were specially arranged in the County for members of the medical profession, the lectures being given by one of the official Home Office Instructors. Doctors and nurses also attended lectures arranged by the British Medical Association in conjunction with the County Borough Authorities. Approximately 140 nurses in the County have received instruction.

The Assistant County Health Inspector attended the Civilian Anti-gas School at Falfield in July, and qualified as a first-class instructor. His services have been utilised to supplement those of the County Health Inspector in the training of members of the County Highway staff in decontamination measures, and these two officers fully trained 100 men, all of whom were afterwards given a practical test in a gas chamber.

Since the end of the year, special certificates have been granted by the Home Office to both the County Health Inspector and his Assistant.

Demonstration House.

An anti-gas Demonstration House was opened at Lewes in December, 1936, and has been available for inspection by the public since that date. Additional information and items of interest are frequently added. Up to the end of the year, 2,700 persons had visited the House.

School Premises.

The question of the utilisation of school premises in the event of an emergency, has been the subject of discussions with His Majesty's Inspector of Schools, and in the few cases where schools are to be utilised as First-Aid Posts reasonable alternative accommodation for the children has been ascertained to be available.

Ambulances.

At the request of the Home Office, a special fitment for increasing the carrying capacity of commercial vans as improvised ambulances was constructed and tried out in the County. The specification was sent by the late Major S. Blackmore, Chief Medical Officer of the Air Raid Precautions Department of the Home Office, and a report was subsequently transmitted to him. The trial demonstrated that an alteration in design was required before issuing a standard specification.

Laundry Facilities.

In co-operation with the Chief Constable, a list has been prepared of the Laundry firms throughout the County who would be prepared to accept clothing for decontamination. The laundries at the Public Assistance Institutions will also be utilised, as they are very suitable for this work.

Co-operation with other Authorities.

The Air Raid Precautions medical services are being organised in close co-operation with the Medical Officers of Health of the County Boroughs and adjoining County Councils, in order that the arrangements made by all Authorities may operate with the greatest advantage to all who may require assistance.

The duties of the County Medical Officer of Health and of the District Medical Officers of Health in connection with the Air Raid Precautions Medical Services have been defined in a memorandum sent to District Councils by the County Council after the close of the year.

Casualty Clearing Hospitals.

A survey has been made of the hospital accommodation available in County Institutions and in Voluntary Hospitals under present conditions, on the assumption that all available space could be made use of for the accommodation of patients. This information has been forwarded to the Home Office and to the Ministry of Health.

ADMINISTRATION OF THE MILK AND DAIRIES ACTS AND ORDERS.

Milk and Dairies (Consolidation) Act, 1915.

By Section 4 of the above Act where a Medical Officer of Health of any local authority has reason to suspect that tuberculosis is caused, or is likely to be caused, by the consumption of milk which is being sold or exposed for sale within the area of the local authority, he shall endeavour to ascertain the source or sources of supply and on ascertaining the facts shall forthwith give notice of them to the Medical Officer of Health of the County or County Borough concerned.

The information received during the year was forwarded to the Chief Veterinary Officer who arranged to conduct an investigation at the farms involved.

A total of 22 statutory notifications was received during the year in respect of actual or suspected tubercle infected milk supplies from the following authorities :—

County of London	5	County Borough of Croydon ..	4
County of Kent	6	Borough of Bexhill	1
County Borough of Brighton	3	Rural District of Uckfield ..	3

The following summary indicates the number of notifications received under the provisions of the Act since 1928.

Year.	1928	1929	1930	1931	1932	1933	1934	1935	1936	1937
No. of Notifications	17	19	24	26	22	32	12	17	14	22

The notifications received during the year involved supplies from 39 farms, and a consignment from a wholesale depot, to which 8 farms contributed.

Investigations were conducted in each case, and a total of 956 dairy cattle were examined. Fifty-four samples of milk from individual cows and 69 group samples involving 748 cows were submitted for examination. Fifteen group farm samples were also taken from consignments in course of delivery to wholesale collecting depots. As a result of these investigations, 11 cows were found to be diseased and were dealt with under the provisions of the Tuberculosis Order, 1925; 9 of these animals were giving tuberculous milk.

Milk and Dairies Order, 1926.

From returns furnished by the Medical Officers of Health of the Local Sanitary Authorities in the Administrative County area there are, registered under the provisions of the Milk and Dairies Order, 1926, approximately 2,113 cowkeepers with 3,179 cowsheds housing 30,753 cows. Inspections of premises during the year amounted to 3,633, and 1,255 samples of milk of all grades were obtained by the Local Sanitary Authorities for examination, 307 of which were also tested for the presence of tubercle bacilli.

The following table shews the work of inspection of dairy cattle by the County Authority under Part IV of the Order and also that undertaken in connection with the requirements and provisions of the Milk (Special Designations) Order, for the years 1935-37.

TABLE XXIX

	INSPECTION OF DAIRY CATTLE UNDER THE PROVISIONS OF :					
	Milk & Dairies Order, 1926.			Milk (S.D.) Orders, 1923-36.		
	1935	1936	1937	1935	1936	1937
No. of Farms visited	215	63	468	458	1,181	1,453
No. of Cattle examined :						
Cows in milk	3,504	891	7,070	12,543	30,260	36,074
Dried Off- and In-Calf Cows ..	344	76	818	2,606	4,131	4,827
Other Bovines	155	55	1,020	4	—	—

Inspections under Part IV of the Milk and Dairies Order, 1926, included 32 investigations respecting information received concerning cows and calves which, on slaughter, had been found to be diseased and suffering from tuberculosis. Enquiries made at the farms revealed the source of the calf infection in 9 cases and 9 animals were slaughtered, 7 of which were giving tuberculous milk. The investigations regarding the infected cows resulted in the slaughter of 3 other animals which were found to be diseased, 2 of which were giving tuberculous milk.

Fourteen notifications were also received concerning diseased pigs, and as the result of inspections one dairy cow was found to be diseased. Thirty-five reports concerning abnormalities in milk were notified and investigated, also 4 in connection with cases of undulant fever, and 2 respecting cases of cow pox.

The total number of animals examined under the Order is shown in the foregoing table, and in connection with this work 144 samples of milk were submitted for microscopical or biological examination.

During the year a total of 13 cows was found, under the Order, to be suffering from scheduled forms of tuberculosis, of which 9 were giving tuberculous milk.

In consequence of the routine examinations conducted under the Order, 48 samples of milk were obtained, and 38 animals were slaughtered under the provisions of the Tuberculosis Order, 11 of these were giving tuberculous milk.

In the following table is shown the total number of cows which have been slaughtered since the year 1926 under the provisions of the Tuberculosis Order, 1925. Of the cows slaughtered, 264 were discovered by procedure under the Milk and Dairies (Consolidation) Act, 1915, and the Milk and Dairies Order, 1926, 62 of these being dealt with during the year under review.

TABLE XXX

	Six Years 1926-31.	Year.						Total
		1932	1933	1934	1935	1936	1937	
Slaughtered	1883	204	207	370	342	468	433	3907
Found to be Tuberculous ..	1853	200	203	369	339	464	433	3861
With Lesions in the Udder ..	449	44	67	82	68	112	105	927

Milk (Special Designations) Order, 1936.

Under the provisions of the above Order, which operated from 1st June, 1936, all licences authorising the use of a special designation in connection with the production and bottling of milk at farms in the administrative area are now granted by the County Council.

At the end of the year the number of licences in operation was as follows:—

Designation.	Production only.	Production and Bottling.	Totals.
Tuberculin Tested	30	15	45
Accredited	343	30	379
	373	51	424

Milk in Schools Scheme.

The Scheme inaugurated by the Milk Marketing Board for the provision of milk in schools at a cost to the children of a half-penny per one-third pint bottle, was satisfactorily maintained during the year.

From returns submitted to the Board of Education by Head Teachers of the Elementary Schools, it was ascertained that 145 Departments, or 85.3 per cent. received a supply of liquid milk under the Scheme. The number of children participating in the Scheme at these schools was 8,915 or 50 per cent. of the total children on the registers of the Departments concerned. Of these children, 764 were provided with a free supply. Six of the schools had, in addition, schemes for supplying reconstituted milk foods, providing for 158 children. Of the remaining 25 schools, reconstituted milk was provided at 17, and 490 children were supplied. Forty-eight of these received a free supply.

The total number of children who received extra nourishment by way of liquid or reconstituted milk was 9,563, or 53.7 per cent. of the total children attending the schools.

Five of the 8 Secondary schools had supplies provided under the Scheme and 513 children participated. In the 3 remaining schools 85 children obtained reconstituted milk for payment through other arrangements.

The approximate daily consumption of liquid milk in both elementary and secondary schools, excluding canteens, was 393 gallons.

Supervision of milk supplies was periodically carried out and 101 samples were obtained for examination. In no case was any supply found to be tubercle infected. Where an unsatisfactory report was received, the attention of the supplier was drawn to the matter, and investigation made at the source of production.

HOUSING ACTS, 1925-36.**Provision of New Houses.**

The provision of new houses has been maintained during the year, 262 being erected by local authorities and 3,015 by private enterprise, the latter including 423 additional dwellings provided by the conversion and erection of new flats.

Inspection of Dwelling-houses under the Housing Consolidated Regulations, 1925-32.

The total number of dwelling-houses inspected during the year by Officers of the Local Sanitary Authorities for housing defects under the Public Health or Housing Acts was 5,190; of these 2,387 were inspected and recorded under the above Regulations.

The number of houses found to be unfit for human habitation was 223, and representations were made respecting 122 of these. In the case of 77 houses, undertakings were accepted in 46 instances from the owners to render them fit for habitation, and as regards the 31 others, to use them for purposes other than for human habitation. Demolition orders were made in respect of 61 houses, and in pursuance of such orders, 42 houses were demolished.

The total number of other houses found not to be in all respects reasonably fit for human habitation was 1,778. Of the defective dwelling-houses dealt with during the year, 1,609 were rendered fit in consequence of informal action, 91 in consequence of action under the provisions of the Housing Acts, and 59 following proceedings under the Public Health Acts, making a total of 1,759 repaired.

One Closing Order was also made under the provisions of the Act.

Housing Act, 1936.

During the year, as the result of a representation concerning the housing conditions in rural districts, the position in the parishes of Chiddingly, Heathfield, Herstmonceux, and Waldron in the Hailsham Rural District, and the parish of Mayfield in the Uckfield Rural District, was the subject of a survey and report by the staff of the Health Department.

The Rye Borough Council in 1936 submitted to the Minister of Health for confirmation, six Clearance Orders made by them under the Housing Acts ordering the vacation and demolition of the buildings described in the schedules to the Orders and which had reference to a total of 34 houses. Objections to the confirmation in respect of two of the Orders were made by the owners, and at the request of the Borough Authority an independent examination and report was made by the County Health Inspector with a view to assisting the Council in their submission that the only satisfactory method of dealing with the houses was to demolish the buildings described in the Schedules. The Orders were the subject of an Inquiry held by the Ministry of Health in January, 1937, and subsequently they were confirmed by the Minister.

Provision is made under Section 115 of the Act of 1936 that where a Rural District Council adopt proposals for the provision of houses, and where any they propose to provide in the district are required for the accommodation of the agricultural population, the County Council shall undertake to make a contribution of £1 per house for each of the forty years following the completion of such houses. An application was received in respect of one house during 1937. The number of houses in respect of which contributions of £1 per house per annum have been approved is three.

Housing (Rural Workers) Acts, 1926-31.

The County Council are the Authority for the administration of the scheme formulated under these Acts for the improvement of housing accommodation. Under the provisions of the Housing Act, 1935, the period of operation of the Acts was extended from the 1st October, 1936, until the 24th June, 1938.

The total number of dwellings in respect of which applications for assistance were received up to the end of 1937 was 172, of which 166 were in respect of grants and 6 by way of loans. Of the former, 30 were refused and 13 withdrawn. In the remaining 123 cases, the total grants promised amounted to £8,694 2s. 4d., of which £7,521 6s. 4d. has been paid.

Of the 6 applications for loans, 3 were refused in respect of conversion of buildings and 3 concerning improvements to dwellings approved, the total of the loans promised amounting to £140.

WATER SUPPLY.

Meteorological records set out in Table XXXIV give the rainfall for the year recorded at seven stations in the County. For the purpose of comparison the monthly records for 1936 are shown in italics.

The average for the seven stations recorded is 36.87 inches, whilst that for 1936 was 30.49 inches, an increase during 1937 of 6.38 inches. For the 5 years 1933-37 the average rainfall was 32.39 inches.

The rainfall is a factor of considerable importance by reason of the water supplies in the County being dependent mainly upon underground sources, and, unless the average annual rainfall is maintained, supplies may be adversely influenced, particularly in the case of shallow wells.

During the year, extension of mains and important improvements have been carried out by several of the Water Undertakers and proposals in some instances are under consideration.

The scheme for providing a public supply in the parish of Crowhurst, Battle Rural District, was completed in the early part of the year.

Several investigations have been undertaken by the Health Department in connection with individual supplies arising out of insufficiency or suspected impurity.

RIVERS POLLUTION PREVENTION ACTS, 1876-93.

Rivers Pollution—Sewerage and Sewage Disposal.

Constant observation of the rivers and streams continued during the year, and where necessary samples of stream waters and sewage effluents were taken and submitted for examination.

With the exception of the months of January and February, the rainfall had no abnormal effect on the flow in streams.

A complaint was received during the early part of the year regarding the pollution of the Hassocks stream, a tributary of the River Adur. On investigation it was found that during heavy and prolonged rains noxious liquors from gas works' premises were gaining admission to the highway surface water culvert discharging to this stream. Attention was drawn to the discharge of these polluting liquids and measures have been adopted to prevent a recurrence.

Progress continues to be made in many districts in connection with the provision, or improvement, of sewerage and sewage disposal, and several important schemes are under consideration.

The Bexhill Borough Council as part of a comprehensive scheme of sewerage based on the needs of the whole Borough, submitted proposals for providing a system of trunk sewers, soil, and surface water, for draining a considerable area in the north-western portion of the district. The scheme provided for discharging the foul water sewer into an existing pumping station, from which the sewerage would be lifted into the Little Common-Cooden sewer. The provision of the surface water sewers was considered essential by reason of localised flooding which occurs during times of storm. Consent to the undertaking of these works has not yet been given.

A scheme in the Borough of Hove for the construction of foul and surface water sewers providing for the drainage of the Hangleton Valley district was considered during the year with the intention of providing drainage facilities for land suitable for development, and to relieve certain existing sewers which are inadequate to meet requirements in times of storm. This scheme was approved and the works have been commenced.

In the Battle Rural District, the scheme for providing new sewers and improved works of sewage disposal in the parish of Westfield, in connection with housing development and drainage facilities for the Westfield School and other properties at Westfield Moor, was completed during the year.

The scheme for the provision of sewerage and sewage disposal in the parish of Salehurst, Battle Rural District, which was commenced in 1936 was nearing completion towards the end of the year.

Comprehensive schemes of sewerage and sewage disposal providing for two groups of contiguous parishes in the Ouse drainage area of the Chailey Rural District, were under consideration at the end of the year.

In the Cuckfield Rural District a scheme for the provision of sewerage for the Sayers Common district of Hurstpierpoint was commenced in November. The Local Authority also have a scheme for the provision of new sewers, reconstruction and repair of existing sewers and the construction of new disposal works at Hurstpierpoint. The existing outfall works which at times are overloaded and give rise to complaints from smell, will be abolished on completion of the new scheme.

In the Hailsham Rural District the works in connection with the provision of sewerage and sewage disposal in the parishes of Hellingly and Hailsham, which were in progress during the greater part of 1936, were completed in May, 1937. With the operation of this scheme the sewage disposal works serving the East Sussex County Mental Hospital, Hellingly, were abandoned and the main outfall connected to the new sewerage system. Small works providing for the group of houses at Amberstone were also abandoned.

Regarding the inadequacy of the Ocklye Outfall Works in the parish of Withyham, which was under consideration by the Uckfield Rural District Council and referred to in the Annual Report for 1936, a scheme was approved which provided for the abolition of the works at Ocklye and for gravitating the sewage to the St. John's Works, Withyham. Extensions and improvements were also provided for at the St. John's Works to deal with the increased volume of sewage, and additional sewers made it possible for a small outfall in London Road to be abandoned.

During the year the Portslade and Southwick Outfall Sewerage Board submitted a scheme to the Ministry for approval in connection with a proposed new pumping station at Southwick, new tank storage sewer, and a high level Western intercepting sewer, providing for the Board's drainage area within parts of the administrative counties of East and West Sussex.

The following table summarises the applications made to the Ministry of Health by various Authorities in connection with works of sewerage and sewage disposal, which were the subject of Local Inquiries, at which the County Council were represented.

TABLE XXXI

Date of Inquiry.	Authority.	Subject Matter of Inquiry.	Amount of Loan.
1937			£
5th February	Cuckfield Rural District ..	Sewerage (Sayers Common)	3,100
10th February	Battle Rural District ..	Purchase of land in connection with sewage disposal (Guestling)	—
1st June	Hove Borough	Foul and surface water sewers	66,000
1st July	Bexhill Borough	Sewerage	21,000
31st August	Uckfield Rural District ..	Sewerage and sewage disposal (Withyham) ..	6,000
22nd October	Cuckfield Rural District ..	Sewerage and sewage disposal (Hurstpierpoint)	14,100
25th November	Portslade and Southwick Outfall Sewerage Board	Sewerage and sewage disposal	36,700
22nd December	Battle Rural District ..	Sewerage and sewage disposal (Westfield) ..	875

LOCAL GOVERNMENT ACT, 1929—SECTION 57 (1), PUBLIC HEALTH ACT, 1936—SECTION 307.

Eight applications for financial assistance, under the specified Sections of the above Acts, were received during the year from several local authorities in connection with schemes for the provision of water supply or sewerage and sewage disposal, and in two instances contributions were approved. Since the Act came into force in 1930 contributions have been made or approved by the County Council in the following instances:—

Local Authority.	Parish or Area Concerned.	Scheme.
Portslade Urban District	Mile Oak	Sewerage.
Battle Rural District	Salehurst	Sewerage and sewage disposal.
"	Crowhurst	Water supply.
Chailey	Ditchling, Barcombe, and parishes intervening	Sewerage and sewage disposal.
"	Kingston, Iford, Rodmell, Peacehaven, and Telscombe	"
Cuckfield	West Hoathly	"
"	Hurstpierpoint (at Sayers Common) ..	"
"	Poynings	"
"	West Hoathly (at Birch Grove)	Water supply.
Hailsham	Hailsham and Hellingly	Sewerage and sewage disposal.
Uckfield	Rotherfield	"
"	Maresfield	Water supply.

FOOD AND DRUGS (ADULTERATION) ACT, 1928.

This Act is administered by the General Purposes Committee of the County Council, and not by the Public Health and Housing Committee.

The subjoined summary shows the number of samples taken for analysis under the Food and Drugs (Adulteration) Act, 1928, during the year 1937, together with the number of adulterated samples detected:—

TABLE XXXII

Article Analysed.	Total Number of Samples.	Report of Analysis.		Greatest Amount of Adulteration of any one sample.
		Number Genuine.	Number Adulterated.	
FORMAL SAMPLES.				
Baking Powder ..	1	1	—	
Butter ..	2	2	—	
Camphorated Oil ..	1	1	—	
Gin ..	1	1	—	
Milk ..	314	285	29 (a)	(a) One sample was deficient in fat 43.3% and one in solids not fat 36.9%.
Whisky ..	1	1	—	
INFORMAL SAMPLES.				
Ale ..	2	2	—	
Apples ..	3	3	—	
Aspirins ..	7	7	—	
Butter ..	5	5	—	
Cocoa ..	3	3	—	
Coffee ..	5	5	—	
Condensed Milk ..	4	4	—	
Cream ..	9	9	—	
Custard Powder ..	1	1	—	
Dripping ..	1	1	—	
Ground Almonds ..	6	5	1 (b)	(b) Contained .025% Boric acid.
Honey ..	2	2	—	
Lard ..	4	4	—	
Milk ..	45	—	45 (c)	(c) One sample was deficient in fat 46.6% and one in solids not fat 12.7%.
Mustard Sauce ..	1	1	—	
Sago ..	1	1	—	
Sodium Bisulphate ..	1	1	—	
Sugar ..	5	5	—	
Tapioca ..	1	1	—	
Tincture of Quinine ..	1	1	—	
Vinegar ..	1	1	—	
Whisky ..	2	2	—	
Formal Samples ..	320	291	29	
Informal Samples ..	110	64	46	
Totals ..	430	355	75	

PUBLIC HEALTH (PRESERVATIVES, IN FOOD) REGULATIONS, 1925.

Ninety-three samples were taken and examined under these Regulations during the year as follows:—

Apples, 6; Breakfast Roll, 1; Cheese, 3; Confectionery, 41; Cordials, 3; Crab, 1; Cream, 10; Dates, 1; Fat, 2; Fruit, 1; Honey, 1; Lemon Cheese, 1; Lobster, 1; Marmalade, 1; Meat Extract, 1; Preserved Fruits, 1; Salad Cream, 1; Sausages, 7; Sprouts, 4; Tinned Fruit, 1; Tinned Meat, 1; Vegetables, 4.

Apples. Five samples of apples contained traces of arsenic, and four of these also contained traces of boric acid. The amount of arsenic present in the first sample analysed was very small, considerably less than 1/100th grain per pound. It is generally accepted that food is not harmful when the arsenical content is below this figure. In order to ensure that this sample was representative of the bulk, further samples were submitted and the result showed the same amount of arsenic to be present. The amounts of boric acid found were far too small to have been used as a preservative. This substance is found to be present naturally in many fruits.

Confectionery. Eight samples of confectionery were found to contain sulphur dioxide, the amounts being within the limits allowed by the Regulations.

Cordials. An informal sample of a cordial was found to contain sulphur dioxide in excess of the standard, but a formal sample proved on examination to be satisfactory.

NOTES ON INQUESTS HELD IN THE LEWES CORONER'S DISTRICT DURING THE YEAR 1937.

By EDWARD FITZWILLIAM HOARE, M.D., CH.B., BARRISTER-AT-LAW.

The number of deaths reported to the Coroner during the year was 555, a decrease of 58 on the previous year. This includes 155 patients in mental institutions, 10 in other institutions, and 390 other persons—in all, 280 males and 275 females.

Of the 155 deaths in mental hospitals, 146 were accepted on medical certificates, 6 were investigated without inquest or post-mortem, 3 were subject to post-mortem examination, leaving no inquest held on any mental patient for the year.

For the last five years the total number of inquests on mental inmates is 9, and when one considers the population of two large institutions over that period and the desire and opportunity these patients possess of self injury or accident, the small figure is in itself a guarantee of the watchfulness and care perpetually exercised over these most difficult persons and it is of peculiar importance, as these last five years correspond, broadly, to a period when treatment has tended to be more and more by self-educative and occupational methods rather than by restraint and it must be a cause of comfort to relatives and a satisfaction to the staff, to feel that Mental Hospitals are rapidly losing their prison-like character, without exposing their inmates to the risks of violent or unnatural deaths. Of the remaining 400 deaths (10 in other institutions and 390 others), 241 were disposed of by enquiry, medical reports, and 36 post-mortem examinations. None presented unusual features, but the 10 listed as "other inmates of institutions" were mostly persons not permanently in the care of such institution but sent into Public Assistance hospitals on account of injuries or illness begun elsewhere.

It is indeed sometimes difficult to define "other inmates of institutions"—the test would appear to be in the continuance of the residence—a wealthy motorist taken in and detained for treatment in a Public Assistance infirmary is not an "other inmate," but a wage earning workman injured in an accident and remaining in permanently becomes an "other inmate," though not so if his accident terminates fatally in a month or so. Masters of public institutions can tell me when a person is an "inmate of the house," but they do not seem so clear as to precisely when a person in the infirmary becomes an "inmate."

The remaining number, 159, necessitated inquests, a decrease of 21 on the previous year. Only in 11 cases was post-mortem required—the other 39 post-mortems being in "non-inquest" enquiries, making a total of post-mortem examinations of 50 compared with 77 last year.

The provision of mortuary accommodation is still inadequate, due in some cases perhaps to the uncertainty of the recommendations of the Commission on the Coroners Act becoming law or not. A step forward has been made by the County Borough of Eastbourne in the provision of cold chambers to enable the body to be preserved and so offer a surer identification in cases of unknown persons held back for identification.

The number of inquests exceeds the number of verdicts returned by two "inquests adjourned" sent forward to the High Court, one on a charge of infanticide and one on manslaughter.

At Assize both were found not guilty. Another case returned as "Accident" in my list was subsequently committed to the Assize charged with manslaughter and at Assize was found "not guilty."

The verdicts returned were :—

(i) Murder and manslaughter, none ; (ii) Suicide, 53, Felo-de-se, 1, Total 54 ; (iii) Exposure, 1 ; (iv) Accident, 91 ; (v) Natural causes, 2 ; (vi) "Open verdicts," 9 ; Total, 157.

As to GROUP (ii).—The suicides were 31 males and 22 females being a similar number of females but two less males than the previous year. The average for the last five years is 48.6, so the figure is above the average, the highest figure recorded being 56, and the lowest 35.

The analysis of periods, causation, and methods is here set out and the Home Office return of ages. There emerges no monthly relationship, May and September having the highest figure, whereas January is almost the lowest, as compared with January being the highest last year.

Analysis of Suicides.

Monthly Prevalence Rate.

	Male.	Female.	Total.
January	—	2	2
February	1	—	1
March	2	3	5
April	5	—	5
May	5	3	8
June	2	1	3
July	3	1	4
August	3	2	5
September	4	5	9
October	2	1	3
November	4	2	6
December	1	2	3
	32	22	54

ANALYSIS.

Causation.	Males. Females. Total.			Methods.	Males. Females. Total.		
	Mental Instability ..	7	9		16	Gassing	9	6	15
Worry (finance, domestic, examinations) ..	9	5	14	Hanging	7	1	8
Disease (or dread of it)	11	2	13	Drowning	2	5	7
Grief	2	3	5	Shooting	5	1	6
Drink or drugs ..	1	1	2	Poison	1	5	6
Loneliness	1	—	1	Under trains	2	2	4
Insomnia	—	1	1	Cutting artery	3	—	3
Love	—	1	1	Height jumping	2	1	3
Felo-de-se	1	—	1	Cremation	1	1	2
	32	22	54		32	22	54

N.B.—Cause and method bear no relation to each other.

HOME OFFICE RETURN OF THE AGES OF SUICIDES.

Age Group.	Felo-de-se.		Others.		Total.
	Males.	Females.	Males.	Females.	
Under 21 years	—	—	—	—	—
21 and under 30 years ..	—	—	1	2	3
30 .. 40	1	—	3	4	8
40 .. 50	—	—	5	4	9
50 .. 60	—	—	6	4	10
60 and above	—	—	16	8	24
	1	—	31	22	54

The tables are self explanatory. As regards causation, mental instability and worry head the list as usual, followed closely by actual disease or the anticipation of it.

The methods follow the usual trends but with a lessening of cliff jumping, while the taking of poisons of a most painful nature remains peculiarly limited to females. There were also two horrible, and fortunately rare, instances of burning alive, one suggestive of self immolation, the other clearly an "auto-suggestion" from the first.

The age incidence shows a very definitely higher rate over 40 years and an increase above 60, that is extraordinary in view of the earlier pension schemes and the general amelioration offered to old age. It is noticeable that for four years the proportion between the sexes, for suicide in the over 60 year group is as 46 males to 17 females. Whether this means that elderly women settle down more placidly than males, it is hard to say, it may be that old women find it easier to "fit in" after the wage earning period, whereas the men feel the loss of regular work and wages more acutely; they feel, in fact, more "out of it," and not wanted.

As to Group (iii.) The exposure here was not due to want, but a wandering out of control of an already sick person, leading to a sudden and fatal termination.

ACCIDENT ANALYSIS FOR 1937.

Month.	ROAD AND VEHICULAR				OTHER ACCIDENTS											Total of all Accidents				
	Cars or Bus	Motor Cycles or Combination	Cycles (pedal)	Total	Falls	Drowning	Burns	Wounds	Guns	Suffocation	Crushing	Gas	Air	Train	Drugs		Sport	Total		
January	8	2	—	10	—	1	—	—	—	—	1	—	—	—	—	—	2	12		
February	1	1	1	3	1	—	—	—	—	1	—	—	—	1	—	1	riding	4	7	
March ..	3	—	2	5	3	—	—	—	—	1	—	—	—	—	—	—	—	4	9	
April ..	2	—	—	2	1	—	1	1	—	1	—	—	—	1	—	—	1	football	6	8
May ..	2	—	—	2	2	—	—	—	—	—	1	—	—	—	1	—	—	4	6	
June ..	—	—	—	—	1	—	—	1	—	—	—	—	—	1	—	—	—	3	3	
July ..	4	2	—	6	1	1	—	—	—	—	1	—	—	—	—	—	—	3	9	
August	4	1	—	5	2	—	—	—	—	—	—	—	—	—	—	—	—	3	8	
September	2	1	2	5	1	2	1	—	—	—	—	—	—	—	—	—	—	4	6	
October	2	—	3	5	1	—	—	—	1	—	—	1	—	—	—	—	—	3	8	
November	2	—	—	2	3	—	—	—	—	—	—	—	—	—	—	—	—	3	5	
December	—	1	2	3	1	—	—	—	—	1	—	—	—	1	—	—	—	4	7	
	30	8	10	48	17	4	3	2	1	4	3	1	—	4	2	—	2	43	91	

As to Group (iv.) This accidental group shows a decrease of 6 compared with last year and of 24 on the number in 1935. The lessening for the year is due to 15 less "other" accidents, but is counterbalanced by an increase of 9 vehicular traffic fatalities.

Motor cycle and pedal cycle fatalities compared with last year have remained the same—the figures merely being transposed, and the increase is therefore due to 9 more motor car and lorry accidents. None of them present any characteristic features, and in none did the jury feel justified in returning a verdict of manslaughter, though in several they found negligence not amounting to crime. Broadly speaking, this is the feeling one is left with after hearing all the evidence—one feels there has been carelessness, but not the intentional recklessness which amounts to manslaughter. The underlying factor would seem to be an increasing tendency to drive at a speed which is not controllable within the range of the driver's vision or his lights—it is the failure to anticipate rather than the neglect of immediate care that is the main fault—a lack of imagination rather than a lack of skill.

Pedal cycle accidents are increased by two on last year. Some involved with cars contributed nothing to their death by any neglect but those not so involved have in a number of cases been contributors to their own end by the neglect of lamps, brakes, and the carrying of unsuitable packets, and this neglect has led to the death and serious injury of other road users in two cases. Pedal cyclists have a duty to themselves and to others to see that their equipment and accessories are in proper order.

As to the "other accidents"—these are happily less. Falls from all causes have markedly lessened, being 8 less than last year and 10 and 14 less than the two previous years. Possibly, this decrease is due to the safety first education in home accidents—I trust so—but at any rate the decrease is there and especially in the falling of old people.

There is also a reduction in the deaths from suffocation—4 against 7; this is satisfactory, as such deaths are invariably of infants who are a greater potential loss than old persons. Only one was a case of "overlying"—the others seemed well nigh unavoidable.

Train fatalities remained about the same. Two only were employees, the other two trespassers.

Air disasters were none compared to 4 last year. Drownings also were less. So, though many of these fatalities were avoidable, the total of 43 is 15 less than in 1936, and 22 less than in 1935, and for the first time these "other" accidents are less than the motor ones.

As to Group (v.)—Natural Causes. One was a death in prison necessitating inquest, the other had the appearance of violence but on post-mortem and inquest was obviously from natural causes.

As to Group (vi.)—Open Verdicts. These were 9 this year. In all cases the actual cause of death was ascertainable, 8 being from drowning and 1 from injury. In the majority of cases there was no definite evidence of suicide, although the circumstances strongly suggested this as being the true cause. One was the instance of a well-known dramatist being lost overboard from a liner off Plymouth and drifting ashore in this area. The jury were convinced of the identity but after the most extensive enquiries could not with fairness or certainty arrive at any decision as to whether the act was suicidal or accidental. The case was used as a basis for an attack on Coroners' juries in general by a well-known peer who permitted himself to descend from the general to the particular in describing this jury as "Sussex yokels" on a mistaken presumption that they were empanelled from the local village where the body was washed ashore, whereas the body had been removed elsewhere for post-mortem and the jury happened to be peculiarly urban, rather than rural, in character. At any rate, they were sophisticated enough to hold a dinner and invite the peer to be their guest, which I am happy to say, he had the sense and good humour to accept, and the incident ended in a happier understanding of both sides of the question.

This concludes the comments on the verdicts, but there were two cases of particular interest on the matter of procedure and identification, which may be worth recording.

The first arose from the death of an unknown woman by drowning and a verdict of suicide.

After some five days the body was identified by the husband at Eastbourne, but two days later he re-appeared saying that he had met his wife alive on the day following the burial at sea of his presumed wife.

This left the identification still unsettled as his story was corroborated by the living wife herself. Some three weeks later a lady reading *The Empire News* in a remote corner of Wales, was struck by the description of certain articles and the general appearance given in the paper, came down here and positively described and identified numerous belongings of the deceased, who was undoubtedly her relation. This casts an interesting side-light on the alleged "ghoulish prying into private lives" of the Press, as here at any rate their interest does not seem to have been altogether without benefit to the public and to individuals.

The relatives were not altogether content with the suicide verdict and still less with the burial at sea by an entire stranger and I, feeling that perhaps the question of having relatives and friends might affect the verdict, forwarded the papers to the Attorney General and petitioned him to grant his fiat for the High Court to quash the inquest and order a fresh one. (This can now be done by the Coroner under Section 19 of the 1926 Act and not only by a complainant as under Section 6 of the 1887 Act.) However, the Attorney General after perusal of the evidence did not see that any fresh circumstances had arisen likely to affect the cause of death or verdict and he therefore "decided not to grant his fiat for an application to the High Court for the holding of a fresh inquest."

The second case is purely one of identity. A man swore to the identity of his wife, it later being proved that his true wife was alive and that the deceased was the widow of another.

The two indicate the difficulties of what seems an obvious matter. In one case a mistake was made, in the other deliberate perjury was committed. One has to accept statements on oath, but these cases leave one in some doubt as to whether the glib identification of persons not seen for some years is by any means correct.

The number of inquests with jury was 59, the remaining 100 being held without. This somewhat high proportion with juries is due to the increased vehicular fatalities, which automatically require a jury. Several suggestions were put forward in relation to traffic conditions and all have had, as usual, the consideration of the Authority concerned which, in various instances, has taken the action suggested by the jury's rider.

Expenses Incurred by the Coroner. These were £832 3s. 9d., being £100 less than the previous year, partly due to 20 less inquests, but especially to 27 less post-mortems. The raising of the amount available for "expenses considered absolutely necessary" from £5 to £20 now meets the difficulty of those costs which could not previously be sanctioned.

TABLE XXXIII.

Return of Inquests held in the Administrative County during 1937.

CORONER'S DISTRICT.	Sex.	Deaths by Wilful or Criminal Acts.				Deaths from Neglect, Exposure or Excess.		Disease aggravated by neglect.	Want of attention at birth.	Accidental causes.	Natural causes.	" Open " Verdict.				Stillborn.	Destroyed during birth.	Inquests but no verdicts returned.	Treasure Trove.	Total.	
		Murder and Manslaughter.	Suicide.	Felo-de-se.		Want, cold and exposure.	Excessive Drinking.					Injuries.	Drowning.	Other known causes.	Unascertainable causes.					Male.	Female.
CORONER'S DISTRICT.	Males ...	—	31	1	1	1	—	—	59	1	1	5	—	—	—	1	—	100	—		
	Females ...	—	22	—	—	—	—	—	32	1	—	3	—	—	—	1	—	—	59		
LEWES DISTRICT.	Males ...	—	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	3	—		
	Females ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
RYE DISTRICT.	Males ...	—	6	—	—	—	—	—	12	1	—	2	—	—	—	—	—	21	—		
	Females ...	—	1	—	—	—	—	—	5	—	—	—	1	—	—	—	—	—	8		
RAPE OF HASTINGS AND HUNDRED OF ROBERTSBRIDGE.	Males ...	—	38	1	1	1	—	—	72	2	1	7	1	—	—	1	—	124	—		
	Females ...	—	23	—	—	—	—	—	37	1	—	3	1	—	—	1	—	—	67		

TABLE XXXIV.
Meteorological Data, 1937.

RECORDING STATION.	DETAILS SUPPLIED BY	RAIN GAUGE. Diameter of funnel: height above ground; and above sea level.	RAINFALL IN INCHES.												Average rainfall for 5 years, 1933 to 1937.	
			January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.		Total rainfall in inches, 1937.
LEWES ...	J. T. P. Johnston, Esq.	8 inches. 15 inches. 11.34 feet.	6.31 *5.33	6.16 2.30	4.37 <i>1.56</i>	3.31 2.77	3.41 0.78	1.98 3.40	1.49 3.99	1.44 <i>1.38</i>	3.09 <i>1.82</i>	3.40 <i>1.89</i>	1.56 5.75	4.98 3.34	41.50 <i>34.31</i>	37.01
COXLOW, HORAM ...	Miss P. C. Harrison	5 inches. 12 inches. 260 feet.	5.65 *4.42	5.67 <i>1.98</i>	4.68 <i>1.44</i>	2.78 2.19	2.27 0.52	1.60 3.78	1.17 3.94	1.58 0.85	2.17 2.11	3.80 <i>1.48</i>	1.62 5.04	4.11 3.28	37.19 <i>31.03</i>	32.28
HIGH CROSS, FRAM- FIELD.	R. L. Thornton, Esq., C.B.E., D.L.	5 inches. 12 inches. 200 feet.	6.07 *4.48	4.54 <i>1.99</i>	3.81 <i>1.03</i>	2.74 2.43	2.81 0.36	1.39 2.89	0.95 3.79	1.24 0.57	2.13 2.23	3.48 <i>1.36</i>	1.70 5.23	3.86 3.32	34.72 <i>29.68</i>	31.54
SEAFORD ...	E. Sykes, Esq.	5 inches. 12 inches. 45 feet.	4.67 *3.86	4.85 <i>1.43</i>	3.19 <i>1.36</i>	2.56 <i>1.74</i>	2.69 0.15	1.42 2.74	1.33 3.36	1.62 0.18	2.14 <i>1.70</i>	2.89 <i>1.21</i>	1.68 4.55	4.14 2.64	33.18 <i>24.92</i>	27.51
BEXHILL ...	H. J. Sargent, Esq.	9 inches. 12 inches. 11.98 feet.	5.23 *4.44	4.83 2.36	4.03 <i>1.15</i>	2.58 <i>1.80</i>	2.19 0.33	1.96 2.66	1.08 4.01	1.73 <i>1.63</i>	2.62 <i>1.91</i>	3.79 <i>1.31</i>	1.27 4.07	4.21 2.24	35.52 <i>27.91</i>	29.51
SOUTH RIDGE, HEATHFIELD ...	P. Lennox Wright, Esq.	8 inches. 11 inches. 540 feet.	6.64 *5.47	5.86 2.74	4.17 2.10	3.11 2.73	2.77 0.41	2.21 3.46	1.08 4.04	1.87 0.79	2.03 2.56	4.59 2.00	1.84 6.32	4.84 2.82	41.01 <i>35.44</i>	37.38
DARVELL HALL SANATORIUM, ROBERTSBRIDGE	Dr. J. R. Dingley	5 inches. 3 feet. 100 feet.	6.23 *5.39	5.79 <i>1.77</i>	3.90 <i>1.08</i>	2.45 2.09	2.37 0.26	1.94 2.73	0.82 4.47	1.50 0.90	1.85 2.52	2.71 <i>1.63</i>	1.06 4.43	4.34 2.89	34.96 <i>30.16</i>	31.50

• The figures in italics are the records for 1936.



