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County Borough of Eastbourne.



ANNUAL REPORT

For 1925 on the

Health of Eastbourne,

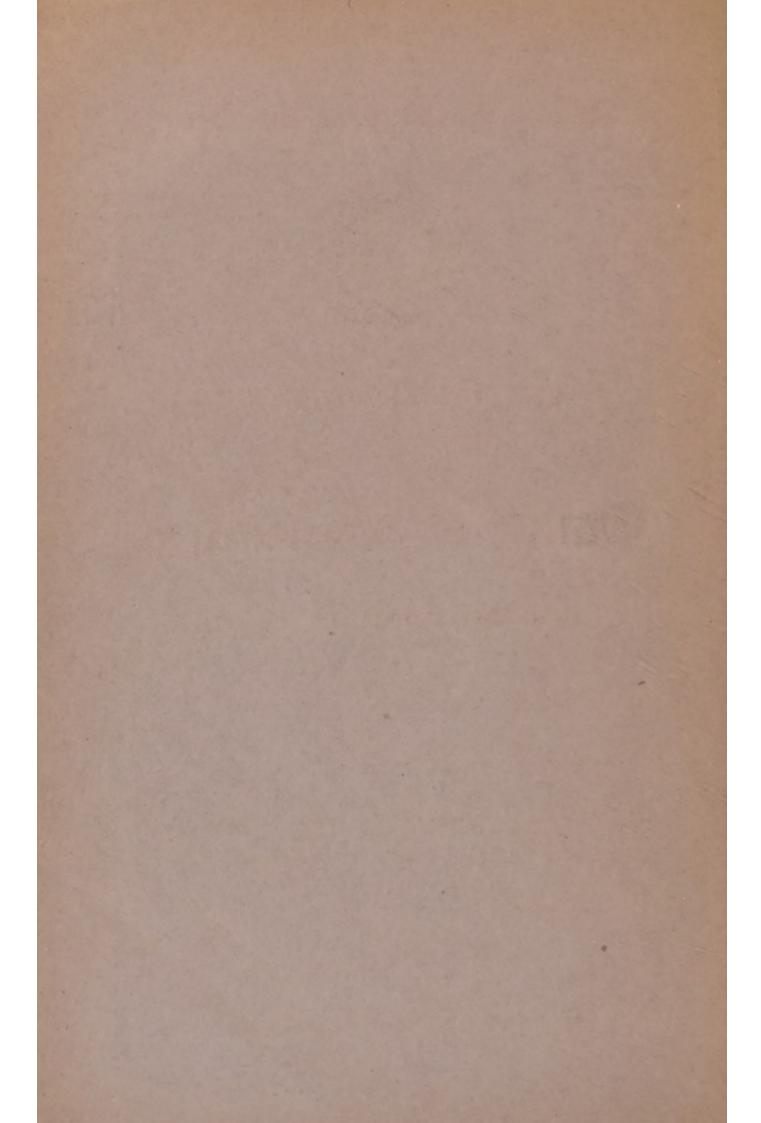
Vital Statistics, Sanitary Work, etc.

W. G. WILLOUGHBY, M.D., Lond.,

Major R.A.M.C., Ret.;
M.D. Lond, in State Medicine and in Medicine;
M.R.C.S. Eng.; L.R.C.P. Lond.;
Diplomate in Public Health of Cambridge University.

EASTBOURNE:

V. V. SUMFIELD, Printer, Station Street.



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Public Health Department, 1925.

Sanitary and Public Health Committee :

*Mr. Alderman Hollins, Chairman.

*Mr. Alderman THORNTON, Deputy-Chairman.

The Mayor (Alderman Sir Charles O'Brien Harding, J.P.).

Mr. Alderman ALCE.

Mr. Councillor Marshall.

*Mr. Alderman DUKE.

Mr. Councillor PACKHAM.

*Councillor Miss Chamberlain.

Councillor Miss THORNTON.

*Councillor Miss Hudson.

Mr. Councillor WEST.

Mr. Councillor Hodgson.

*Members of the Hospitals and Tuberculosis Sub-Committee.

MATERNITY AND CHILD WELFARE SUB-COMMITTEE. Councillor Miss Hudson (Chairman).

Councillor Miss Chamberlain (Deputy-Chairman).

The Mayor (Alderman Sir Charles O'Brien Harding, J.P.).

Mr. Alderman Hollins.

Councillor Miss THORNTON.

Mrs. Parriss. Mrs. Streatfeild.

Co-opted Members.

STAFF, 1925.

Medical Officer of Health:

W. G. WILLOUGHBY, M.D., Lond., D.P.H., M.R.C.S., etc. Assistant M.O.H.:

Miss E. H. B. Coghill, L.R.C.P., L.R.C.S., L.F.P.S.

Sanitary Inspectors:

E. G. SPEARS, Cert. S.I.

I. H. OLLETT, Cert. S.I., R.P.C.

S. R. HENDERSON, Cert. S.I.

Borough Analyst:

Dr. S. Allinson Woodhead, F.I.C., Lewes.

Health Visitors, etc.:

Miss R. Clark (1909)

Miss M. L. RICHNELL (1918). Cert. R.S.I.

Cert. R.S.I., Cert. C.M.B.

Mrs. L. Forward (1922).

Miss I. Simmons (1918). Cert. C.M.B.

· Cert. C.M.B.

Miss L. Curtis (1923) Cert. C.M.B.

Clerks:

H. T. HOUNSOM (Chief Clerk). R. E. C. GODDARD.

А. Н. НООКНАМ.

F. M. CHANDLER.

Miss M. G. BENEY.

Miss M. FRY.

Disinfecter, etc: C. PRODGER.

County Borough of Eastbourne, 1925.

- SITUATION.—Latitude, 50° 46' N.; Longitude, 0° 17' E.
- ELEVATION OF THE AREA BUILT OVER.—Varies from 140 feet above (at the West End) to 4 feet below high water mark (in East of the Borough).
- SLOPE.-From West to East. ASPECT.-South and South-East.
- AREA.—Of the Borough, 6833 acres, including foreshore 332 acres; of the part built over, about 2600 acres.
- Density of Population.—For the Borough, 8 persons per acre; for the part built over, about 28.
- Number of Inhabited Houses.—At census of 1891, 5,190; at Census of 1901, 7,088; at Census of 1911, 8,967; at Census of 1921, 10,083.
- POPULATION.—Census (1891), 34,960; Census (1901), 43,344; Census (1911), 52,542; Census (1921), 62,028.
- RATEABLE VALUE. -£540,221.
- GENERAL DISTRICT RATE, 4s. 5d. BOROUGH RATE, 5s. Total, 9s. 5d.
- BIRTH-RATE.—12.0 per 1,000. England and Wales, 18.3.
- DEATH-RATES.—Nett death-rate, 12.09 per 1,000. England and Wales, 12.2.

Nett Infantile Mortality, 45.3 per 1,000 births. England and Wales, 75.

MEAN ANNUAL TEMPERATURE. -50.6 degrees Fahr.

Hours of Bright Sunshine. -1,898.9 hours,

TOTAL RAINFALL. -35.53 inches.

To His Worship the Mayor and to the Aldermen and Councillors of the County Borough of Eastbourne.

MR. MAYOR, LADIES AND GENTLEMEN,

In submitting herewith my Annual Report for the year 1925 as Medical Officer of Health I would point out that by the instructions of the Ministry it should be a Survey Report, and it will be found to be on the lines of those instructions.

It is the thirty-second Annual Report I have submitted to you, and except during certain war years, when I was on foreign service, these reports have been full and comprehensive.

The instructions of the Ministry necessitate a statement as to progress or otherwise in the various matters pertaining to the Department during the preceding five years, and this is accordingly submitted. The Report is otherwise on the lines of those of recent years for convenience of comparison. The whole series of reports forms a continuous history of the progress of the Borough in Public Health matters.

The year 1925 showed no particular record features, with the exception of an almost complete absence of the disease Diphtheria among the Eastbourne population. Though not quite a record year, infectious disease was again at a very low ebb, except for Influenza.

Eastbourne's death rate, though 0.1 per 1,000 lower than that of the Country generally, was higher than it had been for some years. The cause of the increase was an Influenza epidemic and the extra deaths were largely those of persons of advanced age, 56% being in persons over 65 years of age.

Owing to the very low birth-rate the deaths exceeded the births by five. In some other similar towns the excess of deaths was much greater. It is the first year where this excess of deaths over births has had to be recorded in Eastbourne.

The total number of cases of Tuberculosis, especially Non-Pulmonary Tuberculosis, shews a marked decrease. Although improving, the chances of recovery are still so comparatively small that efforts must be directed mainly to prevention of this disease, which involves so much suffering among young and middle-aged persons and so much expense in treatment. The much advertised cures for the disease are still very much on their trial and have not yet approached the present results of early sanatorium treatment.

The Table of Causes of Deaths shews how large a proportion is due to Cancer in its various forms. The ages of those who died from this disease shew that one cause of the increased number, is the fact that life is now so much more prolonged than it was in the last century. The chances of cure of this disease seem more promising after the discoveries of 1925, but early attention is still the best practical proved chance so far.

For all disease the building up of resistance is the important factor which will contribute most, not only to prolonging life, but also to making it more useful and enjoyable while it lasts. All the amenities which lead to a better state of health are therefore important in the aggregate small though any particular one of them may seem. The aim of the Department is to secure conditions conducive to health, and improved as conditions are, the amount of sickness in the Country is unnecessarily large and there are far too many deaths at early ages.

The most serious adverse factor is the want of satisfactory housing, but the present activity of the Council in this respect is gradually leading to the elimination of our worst cases. In 1925 the number of houses built was the largest for many a year, and the promise of 1926 is better still in respect of small houses to let. In the section on Housing details will be found. The great want is small houses that can be let at small rents.

I much regret to again record the want of sympathy in room letting shewn to young mothers and those about to become mothers by many private owners and occupiers of houses. The tragedy is only removed to some degree by the Municipal Housing Schemes, and must be having an adverse effect on ante-natal conditions of mother and child and on the birth-rate. The Municipal Houses and the rule as to letting them only to persons with children have been of the greatest value in this respect.

Of the matters specified in the Ministry Instructions the greatest progress has been made in Maternity and Child Welfare Schemes, particularly as regards the Maternity and Infants' Home, in Tuberculosis work, in provision for the combating of Venereal disease and in measures for the relief of the blind.

In Maternity and Child Welfare matters, the establishment of the Maternity Home and the increase in Antenatal work during the past five years are the most conspicuous advances. Whatever may be the experience elsewhere, I consider personal and individual work, especially in the homes, as vastly more important than mass lectures in Centres. The work of the Staff of Visiting Nurses is the backbone of the successful work and aided by the practical teaching in the Maternity Home, has brought up the standard of Maternity and Child Welfare to a much higher level of late years.

As regards Tuberculosis there is the gratifying fact to record that the total number of existing cases is diminishing and this is especially marked in the case of Non-Pulmonary Tuberculosis. The number of cases which, after careful examination, have been taken off the books as cured is hopeful of even more improvement. In the last five years, thanks to an efficient staff, the cases get more detailed following up. There are still too many cases under housing circumstances which are unsatisfactory. No improvement has been effected in obtaining suitable work and surroundings for ex-Sanatorium cases.

The Venereal Disease Clinic under its able and zealous Medical Officer is thoroughly up-to-date and improving each year. As in all such clinics patients are apt to get tired of the prolonged treatment necessary, but on the whole, thanks to the careful attention they get, most of the patients persevere now until they are formally discharged.

The measures for the relief of the Blind have shewn a great advance in recent years. The organisation is now so complete that one may say no blind person is neglected. The Voluntary Association is a very live one and works at one with the Statutory Committee.

Advance in food protection has been disappointing. Thanks to the new Orders, slaughtering can be more efficiently controlled, but the protection of meat and other food in shops is still where it was years ago and the new Orders have been of no practical help.

In the sections of the report comparisons with other years will be found, and there can be no slacking of effort if the present healthy conditions are to be maintained. There must be rather an increase of effort, for in almost every sub-division of the work it is necessary to obtain even better results.

Without the efficient support of my staff the work could have made little progress. The work is extremely varied as the report shews and it has been carried out by the members of the staff with great ability. Mr. H. T. Hounsom, as chief of the office staff, has been of particular assistance, especially in matters pertaining to Housing and in the preparation of this report.

I wish to call attention again to the inadequate accommodation for the Sanitary Inspectors and particularly for the Office Staff. With new additions to the work the already insufficient room has become almost impossible for justice to be done to the service. Callers have frequently to wait in the corridors.

I am indebted to the Members of the Medical Profession

for their invariable courtesy and co-operation and I thank most sincerely the members of the Council and particularly the Chairman and members of the Public Health Committee for their kindness and support.

I am, Ladies and Gentlemen,
Your obedient Servant,
W. G. WILLOUGHBY,
Medical Officer of Health.

NATURAL AND SOCIAL CONDITIONS OF THE DISTRICT.

PHYSICAL FEATURES.

THE Borough of Eastbourne, situated in Lat. 50° 46′ and Long. 0° 17′ E. was incorporated in June, 1883. On April 1st, 1911, Hampden Park was added and the Borough became a County Borough.

The acreage is 6,833; of this 19 acres are inland water and 332 acres foreshore.

Only about one-third of the acreage is built over, the remainder is mainly Downs and agricultural land.

The Borough is situate on and at the foot of the Eastern slope of the South Downs. The highest point is 590 feet above sea level on the Downs; the portion covered by houses varies from 150 feet above to 4 feet below sea level. The Downs shelter the town from the West and South-West.

The front of the town is open to the sea facing South and South-East, and this ensures a very large amount of sunshine, as is shown by the sunshine record.

One of the most satisfactory characteristics of Eastbourne is the large extent of the Borough compared with the number of houses and population. The large extent and number of open spaces and gardens conduce to its healthiness.

With the large extent of free and open sea front along the South and South-East and the Downs on the South-West and West free and open to the public, Eastbourne is well provided with open space around it.

It is proposed to buy part of the Downs to keep them free and open for the public.

GEOLOGY.

Geologically, there is much variation in the soil in the different parts of the Borough. Eastbourne is for the greater part on chalk, which is a very healthy sub-soil. There is a comparatively small amount of clay soil in the

central part of the town, and a strip of upper greensand, which is narrow along the Grand Parade and widens as it passes from West to East to about Bourne Street, where it narrows again until it ends about half-a-mile east of the Pier.

The remainder of Eastbourne in the East is on alluvium and on the beach.

Of the Wards, Meads and St. Mary's are entirely on chalk, and Upperton almost entirely so. The Central and Eastern districts are to a small extent on chalk and green-sand, but mainly on alluvium and shingle, with a little clay. Valley gravel covers the chalk and greensand in the valleys.

Hampden Park is on the alluvium just at the termination of the chalk.

METEOROLOGY AND CLIMATE.

Full details, and comparative tables, of the Meteorology of Eastbourne are given in the Annual Meteorological Report prepared by the observer, Mr. Hookham. Readings have to be taken every day throughout the year in all weathers, at 9 a.m., 5 p.m., and 9 p.m., Greenwich Mean Time, and this work is heavy, independently of the mathematical and clerical part of the duties. Eastbourne is a special Meteorological Station, and the department is kept in accord with the wishes of the Meteorological Office in London.

A daily telegram (including Sundays) at 5 p.m., conveys information to the Meteorological Office, and a similar telegram is also sent after the 9 a.m. observations on weekdays, during the time that Summer Time is in force.

The Instruments in use are: -

- 1. Sunshine Recorder and Electric and Indicating Cup Anemometers at the Grand Hotel.
- 2. Rain Gauge, Carlisle Road enclosure.
- 3. Barometer and Barograph at the Grand Parade Shelters.
- 4. Thermometers, Maximum, Minimum, Wet and dry Bulb, in Screen, Earth (1ft. and 4ft.), Grass Minimum, and Thermograph, Carlisle Road enclosure.
- 5. Sea Thermometer, the Pier.

The Barograph and Thermograph have been added during the year and make the station more interesting and complete.

We are obliged to the Grand Hotel and Eastbourne Pier Companies for kind permission to use their premises.

Summary for the year 1925 :-

Rainfall, 35.53 inches.

Number of days on which 0.01 inches or more rain fell, 155.

Highest recorded barometric reading, 30.751 inches (1041.3 millibars) on 19th January.

Lowest ditto, 28.470 inches (964.1 millibars) on 20th December.

Highest recorded temperature in the shade, 77 degrees on 7th June.

Lowest ditto, 22 degrees on 4th December.

Total amount of sunshine, 1898.9 hours.

Number of sunless days, 50.

Mean annual temperature, 50.6 degrees, Fahr.

The proximity of the sea and the peninsular position of the Borough ensure equability of climate.

RAINFALL.

The rainfall for the year was 35.53 inches. Rain fell on 155 days. The rainfall was 4.79 inches above the average.

Rainfall, 192	5				35.53	inches.
Year of lowes	st fall			1921,	15.79	,,
Year of previ	ous lowest	fall		1901,	20.19	,,
Year of highe	est fall			1894,	38.54	,,
Average rains	fall, five yea	ars, 188	31-188	35	31.05	,,
,,	,,	188	86-189	0	29.22	,,
,,	,,	189	91-189	5	32.27	,,
,,	,,	189	96-190	00	29.48	,,
,,	,,	190	1-190	5	27.20	,,
,,	,,	190	06-191	0	30.86	,,
"	,,	191	1-191	5	34.59	,,
,,	,,	191	6-192	20	32.26	,,
,,	"	192	21-192	25	29.60	,,

Average rainfall, ten years,	1881-1890 30.14 inches
,, ,,	1891-1900 30.87 ,,
,, ,,	1901-1910 29.04 ,,
,, ,,	1911-1920 33.42 ,,
Average rainfall, 20 years,	1881-1900 30.50 ,,
,, ,,	1901-1920 31.23 ,,
Average rainfall, 30 years,	1881-1910 30.01 ,,
,,	1892-1921 30.53 ,,
Average rainfall, 33 years	1892-1924 30.68 ,,
Average rainfall, 35 years,	1876-1910 30.92 ,,
,,	1881-1915 30.74 ,,
,,	1888-1922 30.49 ,,
Average rainfall, 37 years,	1888-1924 30.69 ,,
Average rainfall, 40 years,	1881-1920 30.87 ,,
Average rainfall, 45 years,	1881-1925 30.72 ,,

TEMPERATURE.

The mean of the maximum temperature for the year was 55.7 degrees and the mean of the minimum temperature was 45.6 degrees, giving a mean annual temperature of 50.6 degrees.

The mean daily maximum temperature for the six Winter months was 48.8 degrees and of the minimum temperature 40.3 degrees with a mean daily temperature for these months of 44.5 degrees.

Average temperature—

8-1-1	Mean		
	Max.	Min.	Max. & Min. combined.
32 years, 1892-1923	 55.8	45.4	50.6
35 years, 1876-1910	 55.5	44.4	50.0
35 years, 1881–1915	 55.8	45.0	50.4
37 years, 1888-1924	 55.6	45.3	50.5

Sunshine, 1925.

The amount of sunshine was 1898.9 hours and was the seventh highest recorded for the United Kingdom; the average per day throughout the year was 5.20 hours or 0.32 hours above the daily average. The daily average varied from 10.11 hours in June to 2.20 hours in January.

Average sunshine-

	Average						
				Per cent.			
		hours.	hours.	of possible.			
25 years, 1886–1910		4.89	1786	40			
33 years, 1892-1923		4.99	1821.0	41			
35 years, 1881-1915		4.88	-	40			
38 years, 1887-1924		4.92	1800.4	40			

WINDS.

Of the 1,095 total observations the prevailing winds during the year came from the West, with a total of 315 observations or 28.77 per cent.

The observations from the East only totalled 57 or 5.20 per cent.

SEA TEMPERATURE, 1925.

The monthly average sea temperature at the Pier Head was as follows:—

		1925.	Average, 1888–1924.			1925.	Average, 1888–1924.
Jan.		45.3	42.2	July		63.3	62.3
Feb.		45.0	41.1	Aug.		64.0	63.5
Mar.	٠.	43.4	42.7	Sept.		58.6	60.8
April		46.6	46.5	Oct.		55.4	55.8
May		52.9	52.9	Nov.		48.1	49.5
June		59.7	58.4	Dec.		40.9	45.3
	Year	r		025.	•••	Ave 1888 51	rage, -1924.

POPULATION.

As time advances from the last census enumeration it becomes more difficult to obtain an accurate estimate as to the number of the population at present.

The enumerated population on the night 19th-20th June, 1921, was 62,028: Males, 24,864; Females, 37,164.

The increase from the enumeration of 1911 was 8,968.

Unfortunately the Census of 1921 was not taken until June when visitors are more numerous than in April and the Registrar-General's Office considered that for statistical purposes in connection with Vital Statistics 13.6% of our population should be considered as non-residential.

The Registrar-General's estimate of Eastbourne's resident population as at June 30th, 1925, is 55,060, and death and other vital statistic rates are therefore shewn as calculated on this figure.

I think this figure a low one and would place it at nearly 60.000. This calculation is based partly on the housing of the people. Calculating from the additional houses built from the Census period to the end of 1925, namely, 594, and taking the number of persons per house as six (slightly lower than the census figure), the population at the end of 1925 on the June Census basis would be 64,042.

In my last two reports I have given full details of the Census figures. I do not therefore repeat them here but call attention again to the fact that the population is now a much older one than formerly as the following figures shew:—

		Age Constitution of the Eastbourne Population by Percentages.				
Age Gro	up.	1891.		1921.		
Under 5		 10.02		5.79		
5-14		 21.19		16.40		
15-24		 22.90		16.84		
25-64		 41.65		52.91		
65 and o	ver	 4.24		8.04		

The Registrar-General's figure of 55,060 shews an increase for the year of 230 persons and this would be all by excess of immigration over emigration.

In the 1911–1921 intercensal period the increase of nearly 9,000 persons was for about 75% by immigration, and 25% excess of births over deaths. The latter source of increase is a gradually diminishing factor.

The number of inhabited houses at the Census of 1921 was 10,083 and the number of families or separate occupiers, 11,626. Comparative figures at the Census of 1911 were 8,967 and 10,846 respectively.

The rateable value of the Borough in 1925 was £540,221, and the sum represented by a penny rate, £2,100.

The chief occupations of the inhabitants were, at the Census of 1921, in order:—For Males: Commercial, Transport, Personal Service, Clerks, Metal Workers, Professional, Wood Workers, Agricultural and Building. For Females: Personal Service, Professional, Commercial, Clerks and Makers of Textiles.

No one occupation had apparently any particular influence on the Public Health.

VITAL STATISTICS.

MARRIAGES.

There were 414 marriages registered in 1925. This is a marriage rate of 15.0 per 1,000. In 1924 there were 366 marriages and 381 in 1923.

The average pre-war rate was 13.1 per 1,000. The highest recorded rate was 21.2 in the year 1915, and the lowest 11.32 in 1895.

BIRTHS.

The births registered in Eastbourne in 1925 numbered 689, males 354, and females 335. To these must be added 13 births where the mothers were temporarily out of Eastbourne at the time of birth, and on the other hand 41 must be deducted of cases where the mothers were temporary residents only. Twenty-eight births have therefore to be deducted from the total of 689, leaving 661 as the nett number of births, or a drop of five as compared with the previous year, and of 58 as compared with the year 1923.

The births in recent years have been as follows: --

Ten yea	ars, 189	5-1904	 ave	rage	916
Ten years, 1905–1914			 ave	rage	879
Four ye	ears, 19	15-1919	 ave	rage	704
1920			 		993
1921			 		796
1922			 		733
1923			 		719
1924			 		666

There were five more deaths than births in 1925.

The excess of the number of births over that of deaths in 1924 was 69; in 1923, 196; in 1922, 146; in 1921, 158; in 1920, 456; in 1919, 106; and in 1918, only 25 (not including deaths of those on service).

The birth-rate calculated on the Registrar-General's Office estimate of the population was 12.0 per 1,000.

In recent years the highest birth-rate was 21.8, in 1915, and the lowest 12.1, in 1918 and 1919.

The England and Wales birth-rate for 1925 was 18.3 per 1,000.

It will be noticed that the birth-rate is the lowest recorded. For the first time the deaths of the year exceed in number the births.

Of the 661 births, 43 were illegitimate, or 1 in 15.3. Twenty-three of these infants were males and 20 females. The highest proportion was in 1918, when 1 in 7.8 were illegitimate.

The birth-rate is affected by the inability of young couples to obtain proper housing accommodation.

NOTIFICATION OF BIRTHS ACT.

Of the total births registered during 1925 all except 16 or 98% of the total were at once notified to the Medical Officer of Health; the omissions were accidental in all cases.

Six hundred and ninety-nine births were notified during the year, 381 being notified by midwives and 318 by parents and doctors; 9 still births were notified.

DEATHS.

There were 691 deaths registered in Eastbourne in 1925. Of these, 78 were deaths of non-residents. Eastbourne residents to the number of 53 died elsewhere during the year. Including the latter and excluding deaths of non-residents, the nett deaths were as follows:—Males, 292; females, 374; total, 666. These figures have been verified by the Registrar-General's Office.

The death-rate for 1925 was 12.09 per 1,000 on the Registrar-General's Office estimate of 55,060 population.

The death-rates of previous years were :--

		~			
1895-1904			average	11.74	per 1000
1905-1914			average	10.58	per 1000
1915-1918	(War year	s)	average	12.56	per 1000
1919				11.62	per 1000
1920				10.5	per 1000
1921				10.28	per 1000
1922			٠	10.9	per 1000
1923				9.7	per 1000
1924				10.88	per 1000

The total death-rate for England and Wales in 1925 was 12.2 per 1000.

The death-rate of 1925 was a high one, mainly due to the mortality of old persons. It is made to appear higher than I think it really was, by the use of the Registrar-General's population figure which is low, compared with the population figure calculated according to the houses built.

SEX MORTALITY.

The 666 deaths of 1925 were divided as follows:-

		Deaths.	Death-rate.
Males	 	292	13.3 per 1,000
Females	 	374	11.3 per 1,000

The deaths of males were in excess in Tuberculosis, Prematurity, and in Gastric and Urinary Diseases. Cancer caused more deaths in females.

AGE MORTALITY.

The deaths in the various age groups were as follows. The death-rates are only approximate:—

		Persons.	Rate.
Under 1	 	30	34.8 per 1,000
1-5	 	11	4.7 per 1,000
5—15	 	10	1.1 per 1,000
15-25	 	16	1.7 per 1,000
25-65	 	224	7.6 per 1,000
Over 65	 	375	84.0 per 1,000

DEATHS OF NON-RESIDENTS.

These numbered 78; males, 41; females, 37. The principal causes of death were:—

Consumpt	 	4	
Cancer		 	9
Suicide		 	6
Heart Dis	eases	 	6
Apoplexy		 	10

DEATHS IN INSTITUTIONS.

			Non-		
	Re		Resident	s. T	
Isolation Hospital		9	1		10
Princess Alice Memorial Hospital		49	15		64
Guardians' Institution		88	11		99
Leaf Hospital		9	1		10
Gildredge Hospital (Tuberculosis)		16	1		17
All Saints' Convalescent Hospital		2	1		3
9 Upperton Road (Infants' Home)		4	_		4
Queen Alexandra's Cottage Homes		1			1
Total		178	30		208
DEATHS OF EASTBOURNE PERS	CONT	IN THE	TITLITIC	MIC	
OUTSIDE THE BO			51110110	INS	
		GH.			
Brighton C.B. Mental Hospital					20
					7
City of London Mental Hospital					1
Metropolitan Asylum , Caterham					1
Fountain Temporary Mental Hosp	oital	, Wand	sworth		1
St. Vincent's Orthopaedic Hospital	l, E	astcote			1
Guys Hospital, London					1
St. Thomas's Hospital, London					1
Ladywell Institution, Lewisham					1
St. John's Home, Wimbledon					1
Star and Garter Home, Richmond					1
National Sanatorium, Benenden					1
Total					37

THE CAUSES OF DEATH IN EASTBOURNE IN 1925.

A table in this section shows the principal causes of death in 1925 at various ages. Those diseases, etc., causing most deaths were as follows:—

	Number.	Net Death-rate.
Heart Disease	124	2.2 per 1,000
Apoplexy .:	68	1.2 per 1,000
Cancer	94	1.7 per 1,000
Males	33	1.2 per 1,000
Females	61	1.9 per 1,000
Tuberculosis (all forms	48	0.87 per 1,000
Pulmonary	44	0.8 per 1,000
Non-Pulmonary	4	0.07 per 1,000
Respiratory Diseases	86	1.5 per 1,000
Bronchitis	47	0.9 per 1,000
Pneumonia (all form	s) 32	0.6 per 1,000
Urinary Diseases	31	0.6 per 1,000
Violence	14	0.25 per 1,000
Males	7	0.3 per 1,000
Females	7	0.2 per 1,000

Of the 666 deaths, Heart Diseases caused about 1 in every 5.3; Cancer, 1 in 7; Respiratory Diseases, 1 in 8; Tuberculosis, 1 in 14. Of the 14 deaths from Violence, 11 were from accidents and 3 were suicidal. Heart Disease is a frequent registered cause of death in old persons.

The deaths from Cancer were of persons over 55 years of age, except in 25 cases. Two occurred at an earlier age than 25, and the largest age group of these deaths was that from 65 to 75 years.

DEATHS FROM ZYMOTIC DISEASES.

These diseases caused 7.7 per cent. of the total deaths. The 2.8 per cent. of 1923 was the lowest recorded. In 1899 the percentage was as high as 24.0.

The 53 deaths were caused by the following diseases:—
Influenza . . . 32 Cerebro Spinal fever 1
Whooping Cough 3 Syphilis 1
Diarrhoea . . 1 Other septic diseases 15

The absence of deaths from Puerperal Fever, Scarlet Fever, Measles and other Zymotics is noticeable.

INQUESTS.

Coroners' inquests were held on 40 deaths.

INFANTILE MORTALITY.

The nett number of deaths of infants, that is of children under one year of age, was 30 (males, 25; females, 5).

Infantile mortality is calculated on the number of births in the same period, and for 1925 was at the rate of 45.38 per 1,000 births. This is satisfactory but not so good as the rate of 1923 which was but 39 per 1,000 births.

Nineteen of the deaths were from Prematurity and allied causes, and eighteen within 4 weeks of birth.

The following table compares this mortality with those of the previous ten years:—

Year.		Deaths.	M	ortality Rat	e.
1915		76		98	
1916		72		89	
1917		54		88	
1918		50		74	
1919		39		57	
1920		59		59.8	
1921	٠	60		75.4	
1922		33		44.9	
1923		28		38.94	
1924		39		58.5	
Average of 10 years		51.0		68.4	

In the closing years of the last Century, 1898, 1899 and 1900, the mortality rates were 139, 145 and 121 respectively.

The subjoined table shows the causes of death and the ages at death of the infants who died. The reduction in mortality of infants in recent years has been mainly of those in the later months of the first year. Ante-natal work is very important to stop the deaths in the first few days of life, and this work has been considerably extended in 1925.

There were four deaths of illegitimate children. The comparative mortality rates of these and of legitimate children are as follows:—

Legitimate infants mortality rate, 42 per 1,000 births. Illegitimate infants mortality rate, 93 per 1,000 births.

The figures are too small for reliance to be placed on comparative death-rates. In recent years the illegitimate Infantile Mortality has been low..

Throughout England and Wales the illegitimate rate is about double the legitimate, but until this year the difference has not been so marked in Eastbourne, in spite of the low total rate. Any difference is really due to neglect of either mother or child.

The infant mortality rate for England and Wales in 1925 was 75 per 1,000 births, or 30 per 1,000 births more than that of Eastbourne.

The steps taken to prevent Infant Mortality are detailed in the Maternity and Child Welfare Section of this report.

I have included in this Report a Table shewing the causes of deaths of infants for the past 32 years. The table is arranged in 10-year periods to shew the directions in which reduction in infantile mortality has occurred. The most startling reduction is in Diarrhœal diseases.

INFANTILE DEATHS, 1894-1925.

	457				Years	5.				Av. for	4	H		У	Years.			45	45	Av. for	4				Ye	ears.	-	47	47	100		Y	ears
Diseases.	1894	1895	1896	1897	1898	1899	1901	1902	1903 Y	Ten Years	1904	1905	1906	1907	1908	1910	1911	1912		Ten Years	4	1915	1916	1917	8161	1919	1920	1921	1922		200	-	1925
Measles		2	6		4	AV	A	8	10/	2.0			3	AV	_ 2				4	0.9		1	1						1.		-	H	F
Whooping Cough	1	5	A ST	2	1 14	14 3	3			4.3	2	6	4	3 2	2 -	6	A STATE OF THE PARTY	1	A STATE OF THE PARTY OF THE PAR	2.0	2	R	9	2	1 2	10		1	1	- 0.4		6	
Chicken Pox	4	13	1		2 2			107	100		-	A	1	ANT	1	1	1	Alley .	A STATE OF THE PARTY	0.2		0	48	2	1	457	100	1	3	- 2.0	.0	1	1
Diarrhœa—Enteritis and Gastro Enteritis	9 1	31	22	24 4	43 50	50 22	30	8	8 2	24.7		3 1	13 9	9 17	7 4	9	39	1	G	11.2	9	10	10	9	457	4	1	1	1	4	Ally	-	10
Premature Birth					21 14					19.2	9 2	25	17 2	1 2	2 13	17	15		15				12		4.0	1	2	4	3	1 5.0			1
	. 4		2	4		1 3		2		2.8	4	1 7	12 7	4 7	5 7	3	5	7	10	5.0	10	11	13	11	16	6	16	17	7	8 11.8		20	9
			14		8 13			8		8.8	4	13	5 9	9 10	0 13		7	5	6		1	3	4	2	3	1	3	4	2	4 2.9	.9	4	2
Fubercular Meningitis		3 2		4		3 1	3			1.8	4	-	0 7	4	1 2		1	1	D	7.8	6		13	10	7.7	7	11	9	4	4 8.0	.0	2	8
Mesenterica—Tubercle		10		6	9 2	0	2	467		4.5	4 5	4	7	4 7	1 2		1	1		1.0	2	-	1	1	4	1	2		1	- 0.6		-	4
D1 1 1 10 10 10 10 10		10	4	1	3	1	1	0		0.5	13	4	1	4	0	9				2.0	2		2	2	41	2	A STATE	1	4	- 0.9		4	
		12	4	7 1	10 5	- 7	4	44		6.2	1	411	27	417	ALT.	0	THE PERSON NAMED IN	1	437				1	2	1	1	A ST	A	1	- 0.5		-	
				G	11	. 0	6	8 1			1	4	2 1	417	1	3	1	5	1	1.8	A ST		4	E	2	1	3	5	3	- 1.8		1	1
				0	1 7	# B	0			8.9	5 3		3 9	9 5		4	7	6	4	5.3	2	4		3	8	2	3	3	2 /	2 2.9		1	1
Broncho-Pneumonia—Other Respiratory Diseases	0	9	4	2	2 0	1 0	2				12 9	9	5 10	0 10	1	3	2	5	7	6.4	5	5	9	3	4	6	3	1	3	4 4.3		4	3
Pericarditis—Heart Diseases	2	-	1	1	2 7	A	4			1.1	AE V	417	417	47	ALL		ALC:	ALL Y		A POPULATION OF THE PARTY OF TH							個》	4	4	- 0.1		4	3
Gastritis—Stomach Diseases, etc	2	8	2	2	5 2	2 1	5	6		3.9	4	3	417	417	2	AEJ/		1		0.6	4			1	3	1	3	5	A	- 1.3		4	
Accidental	4	1	5	3	1 1	4 7	1	411		1.4	2	4	- 7	4	Alley					0.2				4	All y	4	All y	4	4	1 0.2		1	4
Venereal Diseases	1	45	45	1	1 3	3 3	1	1		1.1	2	47	4 7	47	1	1	1	1	4	0.6			2			3	4	2	4	- 0.2			-
Cellulitis	457	45	-	4	= 7	4 (-7	-	457	- 7	-	4	417	417	47	45	15					4		450		4	A STATE OF THE PARTY OF THE PAR	A COLUMN	1	417			-	1
njury at Birth	45	45	43	4	= 7	4		457	- 7	-01	-	1	- 7	47	4		A ST			0.1	1	1			1	AND Y	All	4	417	- 0.1		41	-
Heat Stroke	AST	15	1	4	417	Alley	ALT.	4	4	-	1	417	417	47	411	All y	A STATE OF THE PARTY OF THE PAR	1	4		407	4			4	4	4	41	4	1 0.5		-	
ntussusception		1	1	4	4	4137	All I	4	417	_	1	47	417	4		ALL Y	AL.		4	A CONTRACTOR				4	4		E V	4	417	- 0.1	0	-	
Eczema	4		457	4	417	4	1	4			4	47	417	All	1	A POPULATION OF THE PARTY OF TH	A STATE OF	100	A 1		4	A	4	4		4	A I	2	417	- 0.2		-	-
Suffocation	4	1	3	4	1 1	4	3	1		1.0	407	4	1 1	1	4107	9	A STATE OF THE PARTY OF THE PAR	1007	Ally	0.5	407		4	I	4	4	(E)	1	417	- 0.2		47	-
Death during Operation	4	407	1	1	Alle	4	/E)	100	All V	1	4	417	Alle	417	ALLY	4	Ally	417	All	0.5			4	2	4	4	1	2	417	- 0.5		4	4
nfluenza	4	1	4	1	- 2	3	1	5	9 1	1.4	1	417	Ally	417	Allegy	Ally	Aligy	437	417	2.1	401		4	41	4	4	13/17	1	417	- 0.1		-	4
Atelectasis	4	4	107	i	1 2	2 1	2	3		1.0	1	47	All	417	Allegy	401	A STATE OF THE PARTY	4	4	0.1	1	4	4	1	1	1	1	41	417	- 0.4		-	4
Meningitis—Inflammation of Brain	1	2	100	3 6	6 6	1	1	3 -		2.3	4	4117	4 7	407	411	A TOP	All y	4	2	0.3	2	1	2	1	4	2	5	47	417	- 1.3	3 2	2	4
Other Diseases—Nervous System	400	4697	9		2 -	All Div	4	1		0.7	407	All P	A	40	4	All V	A SI	1	1	1.3	A	47	41		4	4	1	47	417	- 0.1	1 -	-	4
ntestinal Obstruction	4	400	467	4	4	Aller	4	1			417	417	All	417	Allegy	4	ALIV	4	417	-	4	47	4	4	A	4	1	4	417	- 0.1			
Diseases of Lymphatic System	4	4697	4	417	Ally	4	All y	4	417	-	417	417	417	47	ALT.	All	E	4	417	-	4	47	4	4	2	4	1	47	417	- 0.3			4
ll Defined—Not Certified	0	4	1	4	1 2	4	0	401	40 7	440	417	4117	417	417	ALSO!	437	4	4	417		4	-				4	1	417	417	- 0.1			
: D:	4617	1	1	1	417	4	2	4 :		1.7	4	A	A	47	1	3	1	1	417	0.7	4	3 :	2	1	- 1	1	2	47	- 2	2 1.1			2
110	497	407	4	47	All	Aller	ANY	4	All	-	417	417	417	47	A BY	4	4	A 17	417	-	4	47	4	41	47	2	4	47	417	- 0.2		AT	
Discourse Discou	47	4	4	47	Ally		A	4	Ally	AL IV	47	47	417	47		1	-	= 7	417	-01	4	47	47	47	47	2	417	47	47	- 0.2		AT	4
The Party Party	4	407	4	47	417	457	41	417			4	47	4	45	AE)	A	EIV	A 17	417	-31	47	47	47	47	47	1	417	417	417	- 0.1		47	4
	4	1	4	All	-	1	1	I	1 0	0.5	417	417	4 7	45	AE)	All	43/	47	417		4	47	47	47	47	4	417	417	All	V.		47	4
Abscesses	427	45	4	417	417	4		67	4 7	AND	47	47	4 3	45	457	-	4	47	41	- 1	47	47	47	1	41	4	417	47	47	0.1	Aller	47	
Purpura	1	1	4517	4 7	- 1			4517		0.3	47	417	Als	45	45	41	1	417	47	4	4	47	47	4	41	41	41	41	47	- 0.1		47	4
Temorrhage from Bowels	457	1	1	47	417	4 = 7	-	EV		0.1	4 7	47	AF	45	451	4	A V	4	4	4	47	47	4	1	47	41	AIV	47	47	- 0.1		47	4
furder	457	EV	4	A 7	1	4	=0	-		_	47	417	Als	40	4 - 7	4	A V	AIV	41	4	4	47	47	1 -	417	437	All	47	47			47	4
Crysipelas	E	1	4	1	1 -	4137		47		0.180	- 3	3 -	- 1	4	Alg Y	4	AND Y	4	1	0.5	4		417	4	417	47	Ally	47	47	0.1		417	4
Vant of Breast Milk—Starvation	4517	(E)	4	417	415	45	A V	1		_ .		4 7	4	1	4 2	3	4	417		0.5	4		417	47	47	47	Ally	417	4	0.1	4	417	4
aryngitis	E	-	4	1	415	Ale Y	1	4	- 0.	0.2		417	1	4	Alay r	4	4917	4		0.1	41	47	47	47	47	417	All	417	47		4	40	4
other Septic Diseases	497	4	4	All	411	Ale	A	4			1 -	417	4	400	Alley V	497	4	417		0.1	417	47	47	47	41	47	All	47	417	4	-	417	4
Rickets	1		1	2 -	- 1	1	A V	4			1 1	417	4	400	Alley V	417	41			0.1	47	47	417	47	417	41	4117	417	417	4	U	A	1
ther Constitutional Diseases	1	4			- î	1	1	2 -							131	All				_	47	47	47	47	417	417	417	417	417		417	47	4
	1 -	-	A		- i	Aley		- 20			38 8		1 10		13 1	14					5 18	18 5	5 -	47	417	47	417	47	417	26	415	47	4
Total Deaths	95 1	122	105 9	98 1					96 108.				9 92				88 63				1000			4	52 39	10 1	0 6	2 3	2 28	2.8			1
				-			EX. 17	1000	108 118.			_	8 105					1900							74 56	30	1000						
		-	-					200	900 917.			_	_			-																.5 45.	4
Total Bridge	JAN DO	dies	ALDIO-	0000	34 900	3 8327	AU1 30	107 50	00 917	.3 9	63 85	3389F	92 871	4 95T	18765	379 ×	8698	485 87	74 89	11.3 8	37 7	69.87	036	126"	748	690	96 75	46.7"	43 71	9 759.8	gg/	66 66	di



AGES AT DEATH OF INFANTS.

Causes of Death.	Total.	1. Under 1 wk.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Under 1 mth.	1-3 mths.	3-5 mths.	6-8 mths.	9-11 mths.
		1]						-	
	6	œ	1		1	o	-		•	
ts		1	1	. 1	1)	, 27	1	1	1
Debility from Birth	· · ·	4	-	1	.1	ıc	1	61	. 1	1
Congenital Syphilis		1	-	1	1	-	1	1	1	1
:		1	1	1	1	1	1	1	1	1
Broncho Pneumonia	:	1	1	1	1	1	1	1	1	2
:	1	1	1	1	1	-	- 1	1	1	1
Acute Cystitis		1	1	1	1	-	1	_1	1	- 1
:	:	1	1	1	1	-	1	1	1	1
III Defined—Not Specified	: 2	1	1	1	i	1	1	1	1	- 1
Total	30	13	3	1	1	18	5	3	2	2

CAUSES OF AND AGES AT DEATH DURING YEAR 1925 (Nett Deaths).

	Deatl	is at the si	abjoined ag in or be	Deaths at the subjoined ages of "Residents," whether occurring in or beyond the district.	idents," wl	nether occu	rring
Causes of Death.	All ages.	Under 1 year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards.
Cerebro Spinal Fever Scarlet Fever Measles Whooping Cough Epidemic Influenza Diarrhœa and Enteritis Diphtheria Enteric Fever Puerperal Fever Puerperal Fever Phthisis (Pulmonary Tuberculosis) Other Tubercular Disease Cancer, Malignant Disease Bronchitis Pneumonia Alcoholism, Cirrhosis of Liver Premature Birth Accidents Suicides	- 82	11111-1111-0011=11	%			9 8 8 8 8 8	25
Tot	288	16	8 8	3	10	112	139
All causes	999	30	11	10	16	224	375

Overcrowding and poor housing have been dealt with elsewhere in this report. Otherwise occupation and environment have not apparently been concerned in any prejudicial effect on health.

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

HOSPITALS PROVIDED BY THE AUTHORITY.

- 1. Tuberculosis.—The Gildredge Hospital situated within the Borough and at the foot of the Downs, supported by the Council with the aid of Government Grant. There are 24 beds in bungalows of two beds each; 12 are for men and 12 for women.
- 2. Maternity.—The Municipal Maternity Home of 10 beds is situated at 9 Upperton Road, in the middle of the Borough. It is supported by the Council with the aid of Fees and Government Grant.
- 3. CHILDREN.—At the same Institution at 9 Upperton Road, there are 16 beds for infants. Supported in the same way.
- 4. Fever.—The Municipal Fever Hospital situated at the West end of the Borough in East Dean Road, at the end of the slope of the Downs has 62 beds in seven blocks. It is supported mainly by the Council, but there are Fees to the extent of about one-eighth of the expense.
- 5. SMALL Pox.—The Small Pox Hospital of 18 beds in three wards is situated on the Crumbles near the sea and just outside the Borough in the Parish of Westham. It is supported entirely by the Council, except for a small retaining fee of five guineas annually for the right to send patients there by the Eastbourne Rural District Council.

The Council pays the Ear and Throat Hospital for children operated on for Tonsils and Adenoids, and occasionally for similar cases at the Leaf Homeopathic Hospital.

A grant of *£60 per annum is paid to the General Hospital, viz., The Princess Alice Memorial Hospital.

There is an excellent Institution for Unmarried Mothers and illegitimate infants. The Council provides part payment for some of the inmates from the district.

^{*} Grant from Chair Collection, Hospital Sunday.

Ambulance Facilities.—For infectious cases a Motor Ambulance is provided. For other cases there are two Motor Ambulances managed by the Police.

CLINICS AND TREATMENT CENTRES.

- 1. Maternity and Child Welfare-
 - (a) Town Hall.—Doctor's, Nurses and Waiting Rooms.
 - (b) Acacia Villa, Seaside.—Doctor's and Waiting Rooms.
 - (c) Maternity Home.—Doctor's, Nurses, Changing and Waiting Rooms.
- 2. Day Nurseries—

The only Day Nursery is being permanently closed after March, 1926.

- School Clinics.—General, Ophthalmic, Ear, Minor Ailments, Dental—
 - (a) Town Hall.
 - (b) Acacia Villa.

The same rooms are used as for Maternity and Child Welfare at different times.

- (c) Ear, Nose and Throat Hospital.—Tonsil and Adenoid Operations.
- 4. Tuberculosis Clinics—

At the Town Hall.—Doctor's, Changing and Waiting Rooms.

5. Venereal Diseases Clinics—

A building for this purpose only at the Town Hall.— Doctor's, Nurses, Changing, Waiting and Irrigation Rooms.

All these Clinics are provided by the Local Authority except the accommodation for Tonsil and Adenoid Operations which are paid for by the Authority. The Day Nursery was subsidised by the Authority up to £300 per annum, but has now ceased to be used sufficiently to justify its retention.

PUBLIC HEALTH OFFICERS OF THE LOCAL AUTHORITY.

All the Officers are whole-time Officers except certain specialists in the School Medical Service, Dr. Muir Smith, who, clinically only, attends the patients at the Tuberculosis Hospital and the Women's Tuberculosis Clinic, and Dr. A. G. Shera, who attends the V.D. Clinic.

Contribution under the Public Health Acts or by Exchequer Grants is made in the case of the Medical Officer of Health and one Sanitary Inspector.

The Medical Officers and the Nurses are also Officers of the School Medical Service, otherwise full-time Officers.

The names and qualifications are given on page iv.

The nominal appointment, unpaid, of an Assistant Sanitary Inspector, made in August, 1923, to enable the local Inspector of the R.S.P.C.A. to enter slaughter houses to see the methods of killing used, continues.

The Local Authority has five female Health Visitors whose duties are as follows:—One Superintendent who is Inspector of Midwives and attends at Clinics; three have a district each for Maternity and Child Welfare Work, and for School Medical Work and also assist at Clinics. The fifth is especially a Tuberculosis Visitor and attends the Tuberculosis Clinics, her remaining time being spent at School Medical Work.

The Municipal Midwife is attached to and resident at the Maternity Home.

Home nursing is carried out by Voluntary Associations, particularly the Nurses of the Parish Churches. No payment is made to these by the Local Authority, with the exception of the Hampden Park District Nursing Association, to which a contribution of ten guineas annually is paid.

The local Associations kindly co-operate with the Staff of the Authority when necessary.

PROFESSIONAL NURSING IN THE HOME.

- (a) GENERAL.—The only Nursing in the Home is provided by the Churches. The co-ordination with the Authority is only that of friendly exchange of information if occasion arises.
- (b) Infectious Diseases.—The Fever Hospital takes cases of all Infectious Disease when necessity arises.

No causes of sickness or invalidity have been specially

noteworthy during the year, except an Influenza epidemic, causing 32 deaths.

MIDWIVES.—The number of practising Midwives is 11. The Local Authority employs 4 in the Maternity Home and one in external practice.

CHEMICAL WORK.—The Public Analyst carries out this work, except for a weekly partial analysis of water by the Medical Officer of Health. Details are given on page 56.

MUNICIPAL CLEANSING STATION.

One bath and disinfector is provided. It was used for 35 persons during 1925, mainly verminous children.

THE LOCAL ACTS AND ADOPTIVE ACTS

in force in the district are as follows :-

Eastbourne Improvement Acts, 1879 and 1885. Eastbourne Corporation Acts, 1902 and 1911.

ADOPTED ACTS.

Baths and Wash-houses Acts, 1846 to 1889.

Infectious Disease (Notification) Act, 1889.

Infectious Disease (Prevention) Act, 1890, sections 1 to 4, 6, 7, 9, 12 to 16, and 18 to 24.

Public Health Acts Amendment Act, 1890, Parts I.,. II., III., IV. and V.

Public Libraries Act, 1892.

Notification of Births Act, 1907.

*Public Health Acts Amendment Act, 1907, sections 17, 21, 22, 27 (temporary buildings for territorial force excepted), 28 and 33 of Part II., sections 35 (subject to first provision to S. 92 of Public Health Act, 1875), 36, 37 and 46 of Part III., sections 52, 54, 55, 57, 58, 59 (except as to libraries outside the district), 60, 62, 63, 64, 65 and 66 of Part IV., Part V., Part VI., Part VII., sec. 81, 85 and 86, of Part IX., and sec. 92, 93, 94 and 95 of Part X.

^{*} The following provisions of the Eastbourne Improvement Act, 1885, are repealed by the Order applying this Act, viz.:—
Sect. 90 and Sect. 92 so far as the latter relates to any purpose of the Public Health Acts Amendment Act, 1907.

The Health Resorts and Watering Places Act, 1921.

These are for the most part administered by the Sanitary Authority through the Public Health Department.

The National Health Insurance provides a fixed sum for Institutional Treatment of Insured persons suffering from Tuberculosis. The sum expended by the Council on these patients far exceeds the amount received.

The Guardians have a representative on the Blind Persons Act Committee.

The amount of Poor Law Relief expended by the Guardians from January 1st to December 31st, 1925, was, I am informed, £11,243 13s. 6d.

The arrangements made by the Guardians for hospital and other forms of gratuitous medical relief are adequate and carried out in a generous manner. The Infirmary is considered to be inadequate owing to the growth of the Borough and a scheme for reconstruction is in hand. There has been no exceptional demand for these services during 1925.

SANITARY CIRCUMSTANCES OF THE DISTRICT.

WATER SUPPLY.

The Eastbourne water is supplied by the Eastbourne Water Works Company. Mr. A. Wilkins, the General Manager, has kindly given me the figures relating to the quantity used.

The water is obtained from a deep well with a long heading in the chalk at Friston. The well, heading, and pumping station are four miles from Eastbourne and situated in a gathering ground, which is very suitable for the purpose and the object of continuous care.

The heading connected to the pumping station is at a great depth, being in no case less than about 100ft. from the surface. The water is pumped from Friston into distributing reservoirs in the immediate neighbourhood of Eastbourne, but it is not stored in any case for more than a day or two. The reservoirs are up-to-date and covered. The supply is constant and at full pressure all the year round, irrespective of rainfall.

There is a subsidiary source of supply at Holywell. As far as quantity is concerned, no water from any subsidiary source has been necessary. Owing to building operations at Wannock the water from that source has been abandoned for domestic purposes.

Access to the sources is freely permitted to the Medical Officer, and my visits have satisfied me that every care is taken to prevent any accidental pollution.

For water from wells in chalk, the Eastbourne water has a comparatively small hardness, viz., from 11.5 to 13.2 grains per gallon or "degrees Clark." The average permanent hardness is from 3.5 to 4.5 parts per 100,000.

Analyses of the water have been made constantly during 1925 with special full reports once monthly, alternately by the Borough Analyst and the Company's Analyst. Partial analyses are made weekly. These are, of course, important, but reliance is placed chiefly in keeping the sources unimpeachable. An example of the monthly report is as follows:—

FROM DR. S. ALLINSON WOODHEAD, F.I.C.,
THE PUBLIC ANALYST'S LABOR

THE PUBLIC ANALYST'S LABORATORY,
MOUNTFIELD HOUSE,

Lewes, Sussex.

January 11th, 1926.

Report upon a sample of water forwarded by Dr. Willoughby, Medical Officer of Health, Town Hall, Eastbourne, on January 6th, 1926:—

Sample labelled:—"Eastbourne Water from Mains, January 5th, 1926.

The water on arrival had the following characteristics:-

Colour.—None. Smell.—None. Sediment.—None.

				Grains I per Gallon.	
Chemical Analysis afforde	ed the foll	owing :-	-	*	
Total solids (dried at 1	00 C.)			21.2	
Solids (after ignition)				10.4	
Chlorine				2.45	
Ammonia (free)					.018
Ammonia (albuminoid)					.048
Oxygen taken from peri	manganat	e in hr.		Nil.	
Oxygen taken from peri	manganat	e in 4hrs.		Nil.	
Nitrogen as Nitrates ar	nd Nitrite	S		.17	
Nitrites				Nil.	
Hardness (total)				11.9	
Hardness (after boiling)			4.0	
Phosphates				Nil.	
Metallic Impurity				Trace of Iron	

BACTERIOLOGICAL EXAMINATION.

The organisms per cc. which grew on Nutrient Gelatine in three days at room temperature, under aerobic conditions, and were then visible to the naked eye as colonies, numbered 1.

On Agar at blood temperature, and under aerobic conditions, 1

colony was noticed after 2 days incubation.

Examination for organisms of the Coli group gave negative results.

REPORT.

The water maintains its very high degree of purity and is perfectly safe for drinking purposes and domestic use.

(Signed) S. ALLINSON WOODHEAD.

The amount of water pumped into Eastbourne for consumption varied from $19\frac{3}{4}$ million gallons per week to $13\frac{3}{4}$ million gallons per week, the average amount being $15\frac{1}{2}$ million gallons per week. This is approximately 30 gallons daily per person.

The quantity and quality of the water remain practically the same year by year. It is very satisfactory to have a source so comparatively independent of variations in the amount of rainfall.

SEWERAGE AND DRAINAGE.

The Sewerage of Eastbourne is in the Department of the Borough Engineer.

The whole of the sewage, except some of that of the Infectious Diseases Hospital, and also some of the surface water, passes into the sea at Langney Point, some distance to the East of the Borough. Owing to the levels of a portion of the Borough, the fall is only natural at low tide; at high tide some of the sewage has to be lifted by the aid of Shone's Pneumatic Ejectors.

In two parts of the town the local sewage has to be raised to the level of the main sewers by pneumatic ejectors—viz., in Compton Street and Bourne Street. The system works very well.

The dangerous part of the Infectious Diseases Hospital sewage is cremated at the Hospital.

The water-carriage system is practically universal in Eastbourne, the few exceptions being in connection with agricultural buildings in outlying districts.

The sewer ventilation is by high upcast shafts; all road level ventilators have been closed.

The system of intercepting traps between the house drains and the sewers is universal.

There are outfalls on the sea front for surface water.

Many houses are drained by means of iron drains in place of stone-ware.

The surface water system is in many parts separate from the ordinary sewer system, so that rain water shall not cause the lower parts of the Borough to be flooded in sudden storms.

At the outfall, screening has been adopted for removal of solid matter.

SCAVENGING.

House refuse is collected by the Corporation and, except that of the Hampden Park District, is then burnt at the Destructor. The arrangements are made by the Borough Engineer. Motor dust-vans are in general use.

In nearly all houses moveable covered ashbins are the receptacles used.

Fish offal and garden refuse are not now specially regularly removed by the Corporation owing to the expense. Garden refuse can be removed on payment.

The cost of removal of house refuse during the past year was £10,716.

The collection is made once weekly all through the year with a second weekly partial collection during the summer months. Many larger premises have a more frequent periodical removal.

It is more important from a health point of view to have a second collection in the hot weather in small property than in large houses.

SANITARY INSPECTION OF DISTRICT.

The following table shows the number and nature of the Sanitary Inspections during 1925. Many other casual visits were also made:—

Visits of Inspection of:		East.	West.	Hamp- den Pk. and Uppert'n
Dwelling houses		 1378	704	241
Schools		 22	74	8
Stables and other Premise	s	 344	810	805
Cowsheds		 24	157	83
Piggeries		 108	101	135
Slaughter-houses		 856	715	48
Milk Shops and Dairies		 247	223	126
Fruiterers' Shops		 422 .	321	117
Fish Shops		 1242	325	108
Butchers' Shops		 1249	534	233
Other Food Stores		 731	330	83
Bakehouses		 82	57	8
Factories and Workshops		 189	233	65
Work Places		 101	490	769
Re-Inspections		 1381	517	671
Complaints		 331	59	67
Notification Visits		 505	65	42
Houses disinfected		 286	86	31
Bedding disinfected		 224	89	33
Drains Tested		 128	157	124
Soil Pipes Tested		 30	79	45
Drains re-laid		 46	-	67
Drains Ventilated		 19	-	72
Total		 9945	6126	3981

The statutory notices served during the year were as shown below with the results. These notices were only

served after verbal notice failed, hence only a small proportion of the total work is included.

	No. Issued.		or can-	No. out- standing.
& Public Health Act, 1875— Section 91 b Public Health Act, 1875—	118	113	_	5
Section 36	24	24	_	_
c Public Health Act, 1875— Section 46	3	3	_	-
Section 49	4	4	_	-
e Public Health Act, 1875— Section 41	22	22	_	_
Factory and Workshops Acts	-	_	_	_
Housing Acts, 1890 to 1923 and 1925	121	100	-	21
Totals	292	266	_	26

- a To abate nuisances of various descriptions, including overcrowding.
- b To provide proper closets, dustbins, etc.
- c To cleanse, disinfect, etc., houses.
- d To remove offensive accumulations.
- e To relay drains.

COMMON LODGING HOUSES.—There are 2 registered Common Lodging Houses in the Borough as follows:--

Languey Road, for men.

Latimer Road, for women.

The Langney Road House is so much improved and so well kept as to be practically removed from this category.

SLAUGHTER HOUSES.—The three licensed Slaughter Houses are as follows:—The Crumbles Slaughter House, Upwick Slaughter House and Latimer Road Slaughter

House. The last one is rarely used, owing to the fact that much of the meat consumed in Eastbourne is slaughtered just over the Borough Boundary at Langney. Arrangements have been made by which Messrs. Spears and Ollett inspect there also, nominally on behalf of the Rural District Council. Most of the unsound meat during 1925 was surrendered in connection with this outside inspection.

The following shews the position as regards licensed Slaughter Houses in the borough:—

	I	n 1920.	In Jan., 1925.	In Dec., 1925.
Registered	 	-	_	-
Licensed	 	4	3	3
			-	_
Total	 	4	3	- 6
		Parks.	and the same	-

There are some premises also used for the slaughtering of pigs only. These have been regularly inspected but are not yet definitely licensed.

Houses let in Lodgings.—A very large proportion of the houses in Eastbourne come under this heading at some part of the year.

Underground Sleeping Rooms.—Regulations in connection with the Housing and Town Planning Acts have been made as regards these, and action has been taken in various cases. Owing to overcrowding and so much sub-letting, the conditions are not altogether satisfactory in this respect.

Schools.—The various Elementary Schools have been inspected from time to time. There are 15 of these Schools with 27 departments. Particulars as to Sanitation and Infectious Disease in the Schools are to be found in my Report, as School Medical Officer, where an account of the Hygiene of the Schools is given.

THEATRES AND OTHER PLACES OF PUBLIC ENTERTAIN-MENT.—A quarterly examination as to the sanitation of these premises has been carried out in 1925.

Bake-houses.—There are 32 bake-houses in the Borough, of which 7 are underground.

PREMISES RECEIVING CONSTANT INSPECTION AND ATTENTION DURING THE YEAR. Number of Cowsheds Number of Farm Yards 14 Number of Dairies and Milkshops 89 Number of Private Stables ... Number of Livery Stables... Number of Piggeries ... 55 ... Number of Common Lodging Houses 2 Number of Slaughter Houses ... Number of Offensive Trades MILK SUPPLY. Number of Wholesale Traders and Producers on Register 9 Number of Retail Purveyors on Register Infectious Diseases among Employees 1 Infectious Diseases on Premises ... 1 Notice to Abate Nuisance RETURN AS TO STRUCTURAL ALTERATIONS. Drains examined and tested .. 198 Drains re-laid and amended .. 132 Interceptors fixed 33 .. 45 Drain ventilation improved 225 New W.C. apparatus provided 150 W.C. flushing power improved 140 D-traps removed 75 New soil pipes fixed 9 Soil pipe ventilators enlarged New main taps provided ... 66 79 Waste pipes trapped .. 241 Sanitary dustbins provided 63 Back yards paved or repaired 79 Sinks renewed or repaired 131 New sink wastes Safes provided under W.C. . . W.C. Cisterns fixed..

Cleansing of premises

.. 155

In addition to the tabulated amendments above, considerable attention has been given to general improvement of structural conditions, especially with a view to preventing dampness. In 187 cases general repairs were carried out. Roofs, windows and damp courses received special attention.

FACTORIES, WORKSHOPS, LAUNDRIES, WORKPLACES, AND HOMEWORK.
I.—INSPECTION.

		Number o	of
Premises.	Inspec- tions.	Written Notices.	Prosecu-
Factories	112	2	-
(including Factory Laundries). Workshops	375	4	_
(including Workshop Laundries). Workplaces	1360	6	_
Total	1847	12	_

II.—DEFECTS FOUND.

II.—DEFECIS FOUND.						
		Number	of Defects			
Particulars.	Found.	Reme- died.	Referred to H.M. Inspector	Prosecu-		
Nuisances under the Public Health Acts:—						
Want of cleanliness	15	15	-	-		
Want of ventilation	3	3	-	-		
Overcrowding	-	-	-	-		
Want of drainage of floors	3	3	_	-		
Other nuisances	23	23	-	-		
Sanitary accommodation insufficient.	10	10	-	-		
Sanitary accommodation unsuitable or defective	28	28	-	_		
Sanitary accommodation not separated for sexes.	2	2	-	-		
Offences under the Fac- tory & Workshop Act,	_	-	-	-		
excluding outwork. Total	84	84		_		

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III.—OTHER MATTERS.

Class.			Number.		
Underground Bake-houses (Sec. 101):— In use during 1925			7		
			No. of Workers.		
Homework:— List of Outworkers received		5	7		
Workshops on the Register at end of 1925		5(38		
Bake-houses on the Register at end of 1925			32		
Total number of Workshops on Register		60	00		

The outworkers lists are not regularly sent in, but in cases of disease outworkers receive special attention.

BATHS.

SEASIDE BATHS.

These were opened in 1903. They have been closed for re-construction for some time in 1925, hence the smallness of the numbers using them in the past year. The accommodation has been doubled and the baths made much more attractive. The accommodation now comprises 15 slipper baths for men and 15 for women, with the addition of a shower and needle bath for each sex.

The numbers using them in 1925 were: men, 8,637; women, 6,143; children, 184; total, 14,964; a decrease of 14,255 on the 1924 figures.

The largest number using the baths in one year was 34,600 in 1918. This number included many service men and women. The largest pre-war number was 18,982 in 1913.

OLD TOWN BATHS.

These were opened in 1905. There are 12 baths for men and 3 for women.

The swimming bath is 60ft. long by 20ft. wide, and varies in depth from 3ft. 6in. to 6ft. 6in.

It has been arranged to allow mixed bathing, suitable undressing and dressing accommodation having been provided.

Number of swimming bathers :-

Men. Women. Boys. Girls. Total. 12883 2679 6912 5121 27595

The largest number was 29,107 in 1923.

Number of ordinary bathers :-

Men. Women. Children. Total. 14905 7183 667 22755

The largest number previously was 20,863 in 1923.

During 1925, 110 boys and 86 girls of the Elementary Schools who had learned to swim during the year received Certificates. These figures are the highest recorded. The increase in the use of the swimming bath by School children has continued.

The cost of the baths was as follows for the year ending 31st March, 1926:—

	Income.	Expenditure.	Deficit.	Capital Charges (in addition).
Seaside	£270	£861	£591	£293
Old Town	£884	£1247	£363	£279

DEVONSHIRE BATHS.

These Private Baths and two large swimming baths have been purchased by the Local Authority. Private Schools use the swimming baths considerably. No arrangements have yet been made for their use by other Schools. The Baths were managed by the Council from 21st November, 1924.

CHEMICAL AND BACTERIOLOGICAL WORK.

The tables on page 56 show the work done in 1925. Chemical and Bacteriological examinations of water were made by the Borough Analyst, and alternately by the Water Company's Analyst, Mr. Burgess.

Ordinary Diphtheria and Tuberculosis Bacteriology is carried out by the Medical Officer of Health. Other Bacteriology is sent to Dr. Shera.

Wassermann Examinations were made at the Pathological Department, Princess Alice Hospital, Eastbourne, by Dr. A. G. Shera, the Medical Attendant of the Venereal Diseases Clinic, who was appointed to carry out this work on 1st May, 1922.

RATS AND MICE (DESTRUCTION) ACT, 1919.

Special Officer: Mr. E. G. Spears, Sanitary Inspector.

Seventy-four infested premises, in addition to small holdings, allotments, etc., were dealt with during the year, entailing a large number of visits.

Poisoning, especially by Phosphorous or Arsenic has been found to be the most satisfactory method of extermination, and the majority of the premises have been cleared.

The arrangement still remains in force whereby the sewermen devote a day each month to the laying of poison bait in the sewers. Other Corporation premises are also dealt with periodically.

The public continue to avail themselves of the advice and assistance which is readily given by the responsible Officer.

In connection with the National Rat Week, the usual arrangements were made.

No prosecutions took place under the Rats and Mice (Destruction) Act.

HOUSING.

The shortage of houses in Eastbourne, as in nearly every part of the Country, is only too certain, but it is not easy to arrive at a definite figure shewing the exact requirements of the district as regards new houses.

I submit herewith a statement of the applications received by the Department on behalf of the Council for houses. It must be remembered that on the one hand persons with no family know it is of no use to apply, and on the other hand there are applications from persons who already have the necessary accommodation, or have no claim on Eastbourne. The figures, however, give a fairly good indication of the needs of the population.

Housing Applications on Register at end of 1925.

Nimm	how of Doc	Number of Children.						Trade 1		
Num	Number of Rooms.		0	1	2	3	4	5	6	Total.
1			62	104	61	13	7	3	1	251
2			27	94	81	19	9	4	-	234
3			6	18	23	14	7	4	8	80
4			3	10	13	8	8	6	6	54
5			1	6	3	4	3	2	4	23
6 aı	nd over		1	9	18	17	3	7	6	61
	Total		100	241	199	75	37	26	25	703

For some years no small houses have been built to let by anyone but the Borough Council. Those built and sold at £700 have lightened the congestion to some extent, but the housing difficulty among those with small incomes is only being solved practically by the Municipal building schemes.

Many more houses were built in 1925 than in any

previous year since before the war years, as is shewn by the following table:—

1914		 	92
1915		 	43
1916		 	24
1917		 	1
1918		 	8
1919		 	0
1920		 	22
1921		 	147
1922		 	44
1923		 	102
1924	6.	 	150
1925		 	224

State assisted Municipal Houses included in 1925 total, 52.

Municipal houses in course of construction and not yet occupied are as follows:—

Brick Houses (Rent 21/8 weekly)	28
Parlour Concrete Houses (Rent 17/8 weekly) .	100
Non-Parlour Concrete Houses (Rent 15/1 weekly)	100
Steel Houses	2

In addition Schemes for 44 small houses at Hampden Park, and 66 small houses at Seaside, have passed the Council. The rents of some of the Concrete Houses may be higher. Rates are included.

In my report for 1923 I described fully the position as regards Housing as set forth in the Census reports for 1921 and 1911. In the latter Census year four per cent. of the houses were empty and yet there were many instances of overcrowding and cases of families in one or two rooms only. This shews that owing generally to financial conditions the then vacant houses could not be rented. Corresponding financial conditions make it impossible for many persons to occupy houses at even the smallest rents of those now being built. The larger the family the greater the difficulty. The Housing problem will not be solved until cheaper houses are built. In the Municipal houses already built sub-letting

is constant, overcrowding occurs and rents are overdue in many cases.

The number of persons per occupied house at the Census of 1921 was 6.3; in 1911, 5.8.

The housing measures taken by the Authority were temporary and permanent.

(a) TEMPORARY.

A vacated Army Camp at Victoria Drive was acquired and the huts divided and converted into temporary dwellings. The first of these converted huts was occupied on May 26th, 1919. The tenements consisted of two, three or four rooms each, and were 188 in number.

These have served a very useful temporary and emergency purpose, but with age have deteriorated, and are impossible as permanent dwellings. The Council has decided not to re-let them, especially as the site is required for permanent houses.

At the end of the year there were 87 tenements still occupied.

Those hut tenants who can afford the new houses are being given the opportunity of taking them. The residue will be a source of difficulty in dealing with.

(b) PERMANENT.

The first part of the Municipal Housing Scheme provided 178 houses, 110 at the Archery and 68 at Victoria Drive. The first house was occupied on 9th August, 1920, and the last of these 178 on August 15th, 1921. The rents were 18/4 and 14/8 weekly for parlour and non-parlour houses respectively. These were not "economic" rents.

The second part provided 33 houses at Victoria Drive at the same rents. The first was occupied on December 25th, 1922, and the last on 14th May, 1923.

The third part provided for another 100 houses at Victoria Drive. Commenced on August 21st, 1923, and delayed by default of the Contractor, at the end of 1925, 72 only were completed.

The fourth Scheme for 200 Concrete houses at Victoria Drive was commenced in June, 1925, but none were ready for occupation at the end of 1925. Rents 17/8 and 15/1 as at present arranged.

Plans have been passed for 44 houses at Hampden Park and 66 houses at the East of the Borough.

Two steel houses have been erected but are not yet occupied.

Four houses have been erected in connection with Small Holdings.

Seven Police Cottages have been completed and occupied.

Three houses at Corporation undertakings have been completed and occupied.

There are thus 297 Municipal houses occupied, 230 others in course of construction, and 110 others passed for erection. A total of 637.

There is reason to believe the population is not increasing at the rate it did at the last intercensal period, but the Schemes above will not do more than, if as much as, overtake the present shortage and therefore building for yearly needs must go on and particularly for those who cannot afford the above rents.

OVER-CROWDING.

The provision of huts enabled the Department to deal with the worst cases of over-crowding. Others exist which cannot yet be dealt with. There were cases so bad that steps had to be taken by the Authority, but no legal proceedings were taken, although in one case they were started. The Council's Schemes will this year lighten the overcrowding.

FITNESS OF HOUSES.

The general standard of housing is good, structurally. Materials and labour having been available, repairs are going on and houses kept up to a habitable condition.

The general character of defects was want of repair, causing dampness, and want of painting and decoration mainly. The Inspectors have managed to get serious nuisances remedied for the most part. A serious condition is

the dampness of many houses in the "Marsh" district due to the proximity of the floors to the ground water.

The list of notices issued indicates the extent of the housing work of the Sanitary Staff.

Tenants as well as landlords have required to be brought to a sense of their responsibilities.

UNHEALTHY AREA.

Action must be taken as regards this area of 12 houses. The approximate population is 43. The area includes Nos. 1 to 8 Southwark Cottages and 244 to 250 Seaside. The conditions are too bad to be left.

In addition the following 13 houses are unfit for habitation and irrepairable: Sidley Mews, Two tenements; 1 and 2 Victoria Garage, Seven tenements: Cavendish Place Garage, Three tenements; 60 Meads Street; and the 12 Hutments at St. Anthony's Hill.

BYE-LAWS.

There has been no difficulty with regard to these.

The Sanitary Inspectors carry out the housing duties in regard to existing houses, under the Medical Officer of Health, and the Sanitary and Public Health Committee.

- 1. Unfit dwelling houses.

 - (3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ... 25
 - (4) Number of dwelling houses (exclusive of those referred to under the preceding sub-head)

found not to be in all respects reasonably fit for human habitation	292
2. Remedy of Defects without service of formal Notices.	
Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their Officers	124
 Action under Statutory Powers. (a) Proceedings under Section 3 of the Housing Act, 1925:— 	
(1) Number of dwelling houses in respect of which notices were served requiring repairs	121
rendered fit:—	99
of owners	1
 (b) Proceedings under Public Health Acts:— (1) Number of dwelling houses in respect of which notices were served requiring 	
defects to be remedied	167
(a) By owners	162
(c) Porceedings under Sections 11, 14 and 15 of the Housing Act, 1925:—	
(1) Number of representations made with a view to the making of Closing Orders(2) Number of dwelling houses in respect	-
of which Closing Orders were made	_

- (3) Number of dwelling houses in respect of which Closing Orders were determined, the dwelling houses having been rendered fit
- (4) Number of dwelling houses in respect
 of which Demolition Orders were made
- (5) Number of dwelling houses demolished in pursuance of Demolition Orders ... —

FOOD.

(a) MILK SUPPLY.

In 1925 the milk was as usual of good quality and shews that there should be no real difficulty in keeping all milk up to the standard. The following table shews the percentage of fats and solids in the formal samples taken for analysis in 1925 the presumptive standards for genuine milk being 3% for fat and 8.5% for solids respectively.

		Samples.	Average Fat.	Average Solids.
January .		 _		_
February .		 _	_	
March .		 14	3.37	8.77
April .		 2	3.5	8.87
May .		 2	3.03	9.44
June .		 15	3.5	8.88
July .		 10	3.32	8.84
August .		 _	_	_
September		 11	3.43	8.91
October .		 13	3.21	8.66
November		 2	4.0	9.35
December		 2	2.63	8.69
Total		 71	3.36	8.84

There were 11 samples not up to the presumptive fat standard, of which particulars will be found later on.

There was again no case of preservative or colouring matter in milk. This shews that if the law is definite there is no real difficulty in dealing with abuses of the supply. If the "presumptive" standards mentioned above were definite legal standards, weak milk would be a thing of the past just as are preservatives and colouring matter in milk.

The Tuberculosis Order of 1925 marks an improvement in our chances of getting less tuberculous milk. Under this Order which came into force in September, 1925, one tuberculous cow was destroyed and the owner compensated.

CERTIFIED MILK.

Towards the end of 1922 the Milk and Dairies

(Amendment) Act, 1922, was passed, of which the principal feature is that the Local Authority may issue licences for the production and distribution of milk of four designations, viz.:—

- (i.) Licence to Producers of "Grade A" milk.
- (ii.) Licence to Distributors of "Certified" milk.
- (iii.) Licence to Distributors of "Grade A" milk tuberculin tested and "Grade A" milk pasteurised.
- (iv.) Licence to Distributors of Pasteurised milk.

The special designations under which milk may be sold are Certified," "Grade A (Tuberculin tested)," "Grade A" and "Pasteurised."

Licences to sell Certified Milk were granted during the year to five Purveyors of Milk in respect of 12 premises.

Nineteen samples were taken during the year from two Producers of Certified Milk, and forwarded to the Public Analyst for examination as prescribed by the Ministry of Health. Copies of the Analyst's reports are sent direct to the Ministry of Health, who certify the producers, both of whom are outside the Borough. On six occasions the milk from one producer failed to satisfy the Ministry's standard. The Ministry has dealt with the case.

BACTERIOLOGICAL EXAMINATION OF MILK.

Besides the 19 examinations of Certified Milk there were four examinations of Milk in connection with illness in the Infants' Home as referred to in the Maternity and Child Welfare Section of the Report.

Public Health (Milk and Cream) Regulations, 1912.

(1) MILK AND CREAM NOT SOLD AS PRESERVED CREAM.

	Number of samples examined for the presence of a preservative.	Number in which a preservative was reported to be present.
Milk	 71	Nil.
Cream	4	1

(2) CREAM SOLD AS PRESERVED CREAM.
(a) Instances in which samples have been submitted
for analysis to ascertain if the statement on the
label as to preservatives was correct :-
(i.) Correct statements made 1
(ii.) Statements incorrect
(iii.) Percentage of preservative found in each
sample
Percentage stated on statutory label—
Not exceeding 0.4%
2100 caccounts 0.176
Total 1
(b) Determinations made of milk fat in cream sold as
preserved cream :—
(i.) Above 35% 1
(ii.) Below 35%
(11.) Deter 50 /6
Total 1
(c) Instances where (apart from analysis) the requirements as to labelling or declaration of preserved cream in Article V. (1) and the proviso in Article 5 (2) of the Regulations have not been observed Nil
(d) Particulars of each case in which the Regulations have not been complied with, and action taken.
One sample of cream, sold as pure cream, was found to contain 0.05% preservative. The vendor was cautioned to exercise more care in future.
(3) THICKENING SUBSTANCES.
Any evidence of their addition to cream or to preserved
cream Nil
(4) Other Observations. Nil.
MILK (MATERNITY AND CHILD WELFARE ACT, 1918).
A review of the action taken will be found in the
Maternity and Child Welfare Section of this report.

MILK (TUBERCULOSIS CASES).

Milk is the principal extra food given gratuitously to certain patients as set forth in the Tuberculosis section.

(b) OTHER FOODS.

No other food calls for special remark. The quantity affected by Tuberculosis in 1925 was about the same as usual, though slightly more than in 1924.

The surrenders of unsound food during the year were as follows:—

394lbs. Beef.

1 Forequarter of Beef.

129 Bullocks' Livers.

3 Bullocks' Lungs.

6 Bullocks' Heads.

2 Bullocks' Hearts.

3 Bullocks' Tongues.

1 Bullocks' Kidney.

5 Carcases of Pigs.

18 Pigs' Livers.

2 Pigs Heads.

4 Pigs' Plucks.

1 Carcase of Sheep.

1 Sheep's Leg.

99 Sheep's Livers.

1 Sheep's Lungs.

1 Sheep's Heart.

2 Sheep's Plucks.

1 Shoulder of Lamb.

5 Lambs' Livers.

12lbs. Suet.

2 Chickens.

23 stones Herrings.

48 stones Haddocks.

140lbs. Dabs.

12½ gallons Shrimps.

18 stones Plaice.

8 stones Catfish.

5 stones Codling.

16 stones Skate.

120lbs. Grapes.

560lbs. Tomatoes.

20 doz. Cauliflowers.

30 doz. Cabbages.

12 tins Corned Beef.

1 tin Tongue.

2 tins Evaporated Milk.

The following Imported Meat was also surrendered:— 585lbs. Beef.

4 Bullocks' Livers.

2 Bullocks' Kidneys.

SEIZED EXPOSED FOR SALE.

The following articles of food were seized whilst exposed for sale:—

1 Side of Pork, weighing 86lbs.

Following condemnation by Magistrates, the Vendors were prosecuted, but the case was dismissed.

This was an extraordinary case. The presence of a tuberculous gland that should have been evident with a most casual inspection was not denied. The Medical Officer of Health and Sanitary Inspector of a neighbouring Authority gave evidence for the defendant, who came from their district. Mr. Ollett is to be praised for detecting the case and the dismissal is not encouraging to those engaged in looking after the healthiness of the food of the district.

MEAT, ETC., AFFECTED BY TUBERCULOSIS.

- 1 Carcase of Bullock.
- 5 Carcases of Cows.
- 6 Bullocks' Heads.
- 2 Bullock's Tongues.
- 17 Bullocks Livers.
- 30 Bullocks Lungs.
 - 4 Forequarters of Beef.
 - 1 Side of Beef.

120lbs. Beef.

3 Pigs' Carcases.

1 Pigs' Liver.

1 Pig's Lungs.

1 Pig's Heart.

1 Pig's Head.

The Meat Regulations relating to hours of slaughtering and the giving of due notice have enabled the Staff to see more of the slaughtering and to have a better chance of examining the meat early. As far as the Regulations relate to protection of meat the restrictions involved make the practical effect of the same almost "nil." Verbal remonstrances with managers of various shops were occasionally made, but the majority of meat vendors object to the sheltering of meat behind closed windows.

Bake-houses have received constant attention and except as above existing powers have been found adequate for dealing with sanitary conditions in shops and stores.

No action has been taken under the Condensed and Dried Milk Regulations, 1923.

SALE OF FOOD AND DRUGS ACTS.

The number of samples taken for analysis and the results are shown in the following table. The percentage returned as adulterated was 10.6%.

48

FORMAL SAMPLES.

		Retur	ned as	
Foodstuffs.	Sam- ples taken	Genu- ine.	Adul- tera- ted.	
Balsam of Aniseed	 1	1	_	
Butter	 18	18	-	
Cheese	 4	. 4	-	
Cocoa	 1	1	-	
Coffee	 2	2	-	
Coffee and Chicory		1	-	
Cream	 4	3	1	
Cream, Preserved	 1	1	-	
Ground Ginger	 2 5 2 6	2 5	-	
Jam	 5	5	_	
Honey	 2	2 6	-	
Lard Lemon Squash		6		
Lemon Squash	 2	-	2	
Lime Juice Cordial	 1	-	1	
Marmalade	 1	1		
Margarine	 6	6	-	
Milk, New	 71	60	11	
Milk, Skimmed	 1	1	-	
Mustard	 3	3	-	
Olive Oil	 1	1	-	
Pepper	 5.	5	-	
Rum and Coffee Extract		1		
Vinegar	 2	2	-	
Total	 141	126	15	

INFORMAL SAMPLES.

				Return	ned as	
	Foodstuf	fs.	Sam- ples taken	Genu- ine.	Adulterated.	
Apples			 1	_	1	
			 1	1		
Calcined	Magnesia	1	 3	2	1	
	Total		 5	3	2	

The following table shews in what respect the samples returned as adulterated were not genuine, and the proceedings taken in respect of the same:—

49

FORMAL SAMPLES.

Sam- ple No.	Nature of Sample.	In what respect not genuine.	Action taken.
110.	Sample.	not genuine.	Tretton taken.
11	New Milk	Deficient in fat 6.3%	Vendor prosecuted. Fined £1.
14	New Milk	Deficient in fat 2%	Vendor cautioned.
16	New Milk	Deficient in fat 1.6%	Vendor cautioned.
35	New Milk	Deficient in fat 11.6%	Vendor prosecuted,
37	New Milk	Deficient in fat 12.6%	ffned £10
105	New Milk	Deficient in fat 6% and solids not fat 4.7%	Vendor and carrier pro- secuted. Fined £2 and 10/- respectively
125	New Milk	Deficient in solids not fat 2.3%	Vendor cautioned.
126	New Milk	Deficient in solids not fat 2.1%	Vendor cautioned.
131	New Milk	Deficient in solids not fat .23%	Vendor cautioned.
216	New Milk	Deficient in fat 15% and in solids not fat	Two defendants each fined £5.
221	New Milk		Vendor cautioned.
228	Lime Juice Cordial	Contained 1.5% per pint of salicylic acid	No action taken.
43	Lemon Squash	Contained .6 gr. per pint of salicylic acid	No action taken.
229	Lemon Squash	Contained .55 gr. per pint of salicylic acid	No action taken.
201	Cream	Contained .019% boric acid.	Vendor cautioned.

INFORMAL SAMPLES.

Sam- ple No.	Nature of Sample.	In what respect not genuine.	Action taken.
7	Apples	0.6 gr. per lb. of copper sulphate present	Attention of Ministry of Health drawn to these apples, which were imported apples.
236	Calcined Magnesia	Deficient in Calcined Magnesia at least 7%	Attention of Vendor

LEGAL PROCEEDINGS, 1925.

No.	Offence.	Date of Hearing.	Result.
		1925.	
1	Unsound meat deposited for sale	Jan. 30	Dismissed.
2	Selling milk deficient in fat	May 18	Fined £2
3	Aiding and abetting No. 2	May 18	Fined 10/
4	Selling milk deficient in fat	July 24	Fined £1.
5	Selling milk deficient in fat and solids not fat	Oct. 12	Fined £5.
6	Aiding and abetting No. 5	Oct. 12	Fined £5.

FERTILIZERS AND FEEDING STUFFS ACT, 1906.

The duty of taking samples under this Act devolved on the Sanitary Inspectors in 1922. The Borough Analyst was appointed Analyst under the Act.

No samples were taken during 1925.

INFECTIOUS DISEASES.

The following diseases were notifiable in 1925:— Under the Original Notification Act, 1889:

Small Pox. Cholera. Enteric Fever. Erysipelas. Diphtheria. Scarlet Fever. Plague. Typhus. Continued Fever.

Relapsing Fever. Puerperal Fever.

By Orders since:

Influenza Pneumonia. Tuberculosis (all forms).

Ophthalmia Neonatorum. Malaria. Cerebro Spinal Fever. Dysentery. Trench Fever. Acute Poliomyelitis.

Encephalitis Lethargica. Acute Pneumonia.

NOTIFICATIONS OF INFECTIOUS DISEASES, 1925.

	Males.	Fe- males.	Total.	No. Isolated.	Deaths of notified Cases.
Scarlet Fever	38	50	*88	86	_
Diphtheria	9	13	†22	22	- 1
Enteric Fever	-	1	1	_	_
Acute Influenzal Pneu-	7	9	16	4	4
monia Acute Primary Pneu-	9	14	23	3	10
monia Erysipelas	8	‡11	‡19	4	1
Ophthalmia Neona-	1	3	4	-	-
torum Malaria	1	-	1	-	_
Dysentery	1	_	1	-	_
Encephalitis Lethargica	1	2	3	-	3
Totals	75	103	178	119	19

The notifications of Tuberculosis are dealt with separately under that heading later in this report.

No case of Small Pox was notified, but occasionally

^{*} Diagnosis not confirmed in 3 cases (females).
† Diagnosis not confirmed in 2 cases (males).
‡ Includes a duplicate notification (1 case notified twice).

I was asked to assist in diagnosis in what seemed to be suspicious cases, especially of Chicken Pox. Ship passengers who had been in contact with Small Pox and other diseases were notified to the Department from the various Ports of the Kingdom, and were kept under observation until the close of the respective incubation periods.

No vaccinations or re-vaccinations were performed by the Medical Officer of Health under the 1917 regulations.

ASES.	Encepha- litis Le- thargica	1	1	1	1	4	1	1	1	1	l	1	-	8	-
DISE	Malaria.	1	1	1	1	1	1	1	1	-	1	Í	1	1	1
TIOUS	Ophth. Neon.	1		1	1	-	1	1	1	1	1	1	1	4	
INFEC	Ery- sipelas.	1	-	8	1	1	2	1	1	4	2‡	2	3	19	
NS OF	Pneu- monia.	1	4	2	4	-	61	1	1	1	3	1	3	23	
CATIO	Inf. Pneu- monia.	1	5	5	1	8	1	1	1	1	1	1	-	16	
OTIFIC	Dysen- tery.	1	1	1	1	1	1	1	1	1	1	1	1	1	
Y OF N	Enteric Fever.	1	1	1	1	-	1	1	1	1	1	1	1	1	-
MMAR	Diph- theria.	4	-	1	-	2+	-	1	3	4	1	4	2	22	
Y SUI	Scarlet Fever.	3	9	9	13	17*	2	7	9	9	3	4	15	88	
MONTHLY SUMMARY OF NOTIFICATIONS OF INFECTIOUS DISEASES.	Month.	January	February	March	April	May	June	July	August	September	October	November	December	Total	

* Diagnosis not confirmed in 3 cases.

† Diagnosis not confirmed in 2 cases.

‡ This figure includes a duplicate notification.

INFECTIOUS DISEASES—TEN YEARS' AVERAGES.

NOTIFICATIONS AND DEATHS.

		Scarlet	Fever.	Diph	theria.	Enteric Fever.			
		Notifi- cations.	Deaths.	Notifi- cations.	Deaths.	Notifi- cations.	Deaths		
1924		24	-	14	_	11	-		
1923		30	_	33	1	2	_		
1922		64	1	25	1	4	2		
1921		74	1	118	4	4	1		
1920		113	2	78	3	3	-		
1919		179	2	61	2	2	_		
1918		34	1	37	2	-	_		
1917		46	-	76	1	4	2		
1916		142	1	118	6	6	1		
1915		169	1	135	12	4	-		
Tot	als	875	9	695	32	40	6		

 Average for 10

 years
 ...
 87.5
 0.9
 69.5
 3.2
 4.0
 0.6

 1925
 ...
 85
 —
 20
 1
 1
 —

SCARLET FEVER.

The 85 cases were of a mild type and the patients recovered without ill effects. The number is very nearly the same as the average for the previous ten years.

There were again no deaths from the disease and all but two of the cases were removed to the Borough Isolation Hospital.

These two were adults and not notified until late in the illness when other cases had occurred which drew attention to them.

No School and no milk supply was associated specially with the cases.

As usual some of the patients were visitors who brought the disease with them. There were three instances of more than one case in a house, but nearly all were each the only case in the house.

There were no return cases.

The mildness of many of the cases made diagnosis difficult and three patients were admitted to hospital for observation.

I do not consider that the Dick and other injection tests for Scarlet Fever are sufficiently useful and certain, or free from objection yet, for their adoption here, and the same applies to treatment by Scarlet Fever Serum.

DIPHTHERIA.

There were 20 cases with one death, and this patient did not get Anti-toxin treatment until late. All the others had Anti-toxin early. The average of the previous ten years was 69.5. The mortality was 5 per cent.

Of the 20 cases, 12 were non-residents from All Saints' Convalescent Home, including the fatal case. There were thus eight Eastbourne patients only, and three of these were from one house.

Two other patients were sent to Hospital for observation and proved not to be Diphtheria. Quick treatment is vitally important in Diptheria. Our experience is that patients always recover if Anti-toxin is administered on the first day of the disease.

With so few cases I consider the Schick test and toxin anti-toxin treatment of healthy children are not at present necessary.

ENTERIC FEVER.

One case of Paratyphoid B. was notified and not removed to Hospital. The cause was not traced. The patient recovered.

In a case notified from the General Hospital and temporarily isolated at the Sanatorium the notification and patient were transferred to the district from whence he came.

ENCEPHALITIS LETHARGICA.

Three cases were notified and all were fatal. I saw other cases where the diagnosis was doubtful.

In January a man, aged 69, was notified after death.

In February, a woman of 59 died at a Nursing Home and the disease was considered to be Encephalitis.

In December, a child of 2 died of symptoms that were certainly meningitic and probably the cause was Encephalitis.

PUERPERAL FEVER.

These were no notifications of this disease.

ACUTE ANTERIOR POLIO-MYELITIS.

No notifications.

MALARIA.

One notification was received, a case of a child of six years of age who came from India.

DYSENTERY.

A man of 39 had acute Amœbic Dysentery, a recurrence of illness primarily suffered in India. It is of interest as shewing how long infection can be retained. The patient served in India during the War and had not been there since.

CEREBRO SPINAL MENINGITIS.

There were no notifications received.

OPHTHALMIA NEONATORUM.

Four cases occurred as follows, one being in a Midwife's practice:—

Age Group.	No. of	Tre	ated.	Vision	Vision	Total	
	Cases	At Home.	In Hospital.	Unim-	Im-	Total Blind- ness.	Deaths.
Under 1 vear.	4	2	2	4	_	_	_

THE NON-NOTIFIABLE INFECTIOUS DISEASES.

The most important of these are Measles, Whooping Cough, and Infantile Diarrhæa.

There was a mild epidemic of whooping cough, the deaths registered were as follows:—

Measles	 	 0
Whooping Cough	 	 0
Diarrhœa	 	 1

There has been this one only death from Diarrhaa in two years.

There were some case of Mumps and many of Chicken Pox amongst school children. There were 13 cases of Ringworm reported in 9 families.

INFLUENZA.

This disease caused 32 deaths, 25 of which were of persons aged 65 or over. No special action was taken but cases of Influenzal-Pneumonia are received into the Infectious Diseases Hospital if necessary.

LABORATORY WORK.

WATER.

Analyses by Borough Analyst	in	cluding I	Bacteriolog	ical 6
Ditto by Company's Analyst				5
Weekly by Medical Officer of	Hea	alth (par	tial only)	52
Bacteriological				
		Positive.	Negative.	Total.
Diphtheria for Practitioners		13	450	463
Diphtheria for Sanatorium		18	33	51
****		_		_
		31	483	514
		_		
Tuberculosis for Practitioners		31	112	143
Tuberculosis in Pensions Cases	s	3	29	32
Tuberculosis for Hospital		48	8	56
		82	149	231
		_	-	_
Others		-	1	1
Total Bacteriologic	al l	Examina	tions, 746.	

SCHOOL CLOSURE.

Pathological Examinations in Venereal Disease are

No schools were closed on account of infectious illness during 1925.

set forth in that section of this Report.

ISOLATION HOSPITAL.

MEDICAL ATTENDANT.—DR. W. G. WILLOUGHBY.

MATRON.—Miss M. G. BAILEY.

Table of Admissions, 1925.

Disease.	In Hos- pital Jan. 1, 1925	Ad- mitted.	Dis- charged.	Died.	In Hos- pital Dec. 31, 1925
Scarlet Fever	4	89*	78	-	15
Diphtheria	4	20	19	1	4
Enteric Fever	_	1	1	_	_
Diphtheria Carriers	2	3	4	_	1
Influenzal Pneumonia	_	4	2	2	-
Chicken Pox	_	6	4	-	2
Measles	-	3	3	-	-
Pneumonia	-	7	. 4	3	-
Nil (Observation, etc.)	2	20	19	-	3
Septic Throat	_	1	_	1†	-
Influenza	-	2	2	-	_
Septic Pneumonia	-	1		1	_
German Measles	-	6	6	_	_
Scabies	-	1	1	-	-
Erysipelas	-	5‡	5	-	-
Meningitis	-	1	-	1	-
Mumps	-	18	16	-	2
Cerebral Hæmorrhage	-	1	-	1	-
Total	12	189	164	10	27

^{*} Six cases of Scarlet Fever admitted from a Seaford School.

[†] Died Generalised Septicæmia and Pericarditis.

[‡] One of these cases was a re-admission.

There are 62 beds in 7 separate blocks. Fourteen is the largest number of beds in any one block.

Altogether 188 persons were admitted, 64 males and 124 females.

The following table shows the number of admissions tor each month of the year:—

								_	_				-
T'otal.	15	17	14	23	26	6	6	15	18	9	11	26	681
Cerebral Hæmorrhage.	1	1	-	1	1	-	1	1	1	1	1	1	-
Eczems.	1	1	1	1	1	1	1.	1	1	1	1	1	1
Diabetes.	1	1	1	1	1	1	1	1	1	1	1	1	1
Puerperal Fever.	1	1	1	1	1	1	1	1	1	1	1	1	1
Meningitis.	1	1	1	1	-	1	1	1	1	1	1	1	-
Chicken Pox.	1	1	00	1	1	1	1	1	1	-	1	2	9
Diphtheria Carriers.	1	1	1	1	1	1	1	2	1	1	1	-	8
German Measles,	1	1	1	2	2	-	1	1	-	1	1	1	9
Enteric Fever.	1	1	1	1	1	-	1	1	1	1	1	1	-
Septic Pneumonia,	1	1	1	1	1	1	1	1	1	1	1	1	-
Septic Throat.	1	1	1	1	1	1	1	1	-	1	1	1	-
Erysipelas.	1	1	1	1	1	1	1	1	2	-	2	1	10
Pneumonia.	2	2	1	1	1	1	61	1	1	1	1	1	7
Scabies,	1	1	1	-	1	1	1	1	1	1	1-	1	-
Influenza.	1	-	1	-	1	1	1	1	1	1	1	1	2
Nil (observa- tion) etc.	5	-	1	1	7	-	1	2	1	1	-	3	20
.sdmuM	1	1	1	3	7	27	1	2	5	-	1	3	18
Influenzal Pneumonia.	1	-	3	1	1	1	1	1	1	1	1	1	4
Measles.	l	1	-	-	1	-	-	1	1	1	1	1	3
Diphtheria.	4	-	1	-	1	-	.	3	4	1	4	2	20
Scarlet Fever.	4	11	9	13	14	2	9	9	3	8	4	15	68
	:	:	:	:	:	:	:	:	:	:	:	:	:
Month.	January	February	March	April	May	June	July	August	September	October	November	December	Total

All cases of Diphtheria, and all cases of Scarlet Fever but two, which occurred in the Borough were admitted to the Hospital.

The average time the recovered patients who completed their stay in Hospital in 1925 remained in the Hospital, was as follows:—

				1	Days.	
Scarlet Fever					44	
Diphtheria					37	
Enteric Fever	r				42	
Diphtheria Ca	arriers				15	
Chicken Pox					23	
Measles			* *		12	
Pneumonia					22	
Observation					25	
Influenza					9	
Scabies					7	
Erysipelas					12	
Influenza Pne	eumonia	1			19	
German Meas	les				12	
Mumps					22	
C			. T.	mxmxxa	DTO NO	Erro
SUMMARY OF CASES A	ADMITTI	ED FRO	M INS	THU	IONS,	EIC.,
SUMMARY OF CASES A GUARDIANS' INSTIT						
Guardians' Instit	UTION .	AND CH	IILDRE	n's H	IOMES.	
Guardians' Instit Mumps	UTION .	AND CH	IILDRE	n's H	IOMES.	
Guardians' Instit Mumps Chicken Pox	UTION .	AND CH	IILDRE	n's H 	15 2	
Guardians' Instit Mumps Chicken Pox Septic Pneum	UTION .	AND CH	IILDRE	n's H	15 2 1	
Guardians' Institution Mumps Chicken Pox Septic Pneum Observation	OUTION .	AND CH	ILDRE	n's H	15 2	
Guardians' Institution Mumps Chicken Pox Septic Pneum Observation PRINCESS ALICE M	UTION A	AND CH	HILDRE	n's H	15 2 1 1	
Guardians' Institution Mumps Chicken Pox Septic Pneum Observation Princess Alice M Septic Throat	UTION conia IEMORIA	AND CH	HILDRE	n's H	15 2 1 1	
Guardians' Institution Mumps Chicken Pox Septic Pneum Observation Princess Alice M Septic Throat Erysipelas	onia IEMORIA	AND CH	HILDRE	n's H	15 2 1 1	
Mumps Chicken Pox Septic Pneum Observation PRINCESS ALICE M Septic Throat Erysipelas German Meas	onia IEMORIA	AND CH	HILDRE	n's H	15 2 1 1 1 1 2	
Mumps Chicken Pox Septic Pneum Observation PRINCESS ALICE M Septic Throat Erysipelas German Meas Enteric	onia IEMORIA les	AND CH	PITAL.	n's H	15 2 1 1	
Mumps Chicken Pox Septic Pneum Observation PRINCESS ALICE M Septic Throat Erysipelas German Meas	onia IEMORIA les	AND CH	PITAL.	n's H	15 2 1 1 1 1 2	
Mumps Chicken Pox Septic Pneum Observation PRINCESS ALICE M Septic Throat Erysipelas German Meas Enteric	UTION conia IEMORIA les	AL HOS	PITAL.	n's H	15 2 1 1 1 1 2 1	
Mumps Chicken Pox Septic Pneum Observation PRINCESS ALICE M Septic Throat Erysipelas German Meas Enteric ALL SAINTS' CONV Scarlet Fever Diphtheria	UTION conia lemoria les	AND CH	PITAL.	n's H	15 2 1 1 1 1 2 1 4 12	
Mumps Chicken Pox Septic Pneum Observation PRINCESS ALICE M Septic Throat Erysipelas German Meas Enteric ALL SAINTS' CONV Scarlet Fever	UTION conia lemoria les	AND CH	PITAL.	n's H	15 2 1 1 1 1 2 1	

PRIVATE SCHOOLS	3.—					
Chicken Pox		4	Influenza	Pneu	monia	1
Scarlet Fever		1	Mumps			1
Observation		1				
PRIVATE SCHOOL	SEAF	ORD	_			

Scarlet Fever 6

LANGNEY HOSPITAL.

Medical Officer.—Dr. W. G. Willoughby.

This Small Pox Hospital of 18 beds was kept in readiness, but not used, during the year. It was in the year 1902 that the last Small Pox case occurred. Encroachment by the sea destroyed part of the approach road during 1925 and necessitated remaking of the approach.

ACACIA VILLA.

This Isolation Cottage with accommodation for persons whose houses were being disinfected was used by 2 persons during 1925.

COST OF THE INFECTIOUS DISEASES HOSPITALS.

THE SANATORIUM.

From April 1st, 1925, to March 31st, 1926, there were 5,961 patient days. Each patient cost £6 11s. 7d. per week. Deducting the income from patients the cost was £5 17s. 4d.

The above includes capital charges; omitting these and deducting the income, the cost was £4 18s. 6d. per head per week.

The cost of foods for patients and staff amounted to 10/6 per head per week.

LANGNEY HOSPITAL.—Nett cost, £159.

This Hospital was thoroughly repaired and put in order during 1924.

ACACIA VILLA.—Net cost, £60.

The total nett cost on the rates for these Hospitals was £5,823.

NOTE.—These estimated costs are calculated on actual expenditure up to near the end of the period and the Borough Treasurer's estimates for the remainder.

DISINFECTION.

The methods of disinfection employed are the same as in previous years.

For clothing, bedding, etc., superheated steam (Temp. 260° F.) in a Washington Lyon Disinfecting Machine is used.

For articles such as furs, boots, etc., that will not stand superheated steam, washing with Formalin or other disinfectant solution is employed.

For rooms and houses, fumigation with formalin gas by means of various lamps is sometimes used, but more often, and especially in Tuberculosis, a sprayer is used for Formalin or other solution, such as Izal, McDougall's, or Lawes' Fluid.

Re-papering, re-painting, lime-washing, and much soap and water cleansing after the spraying or fumigation by the disinfectant gas are the methods chiefly relied on.

After Consumption, the usual form of disinfection carried out or suggested has been wet dusting by dusters wrung out of strong disinfectant, especially Formalin, Izal, etc., but general disinfection is done also. Disinfection after Cancer is also done on request being made, in the hope that it may be of some use in preventing spread.

The disinfection of infected houses or rooms is always done by one particular man in the Sanitary Department under immediate instructions of the Sanitary Inspectors.

The schools have been disinfected by spraying from time to time.

The Steam Disinfector is situated in the Infectious Diseases Hospital grounds.

There is a second small disinfector for verminous clothing at the Children's Cleansing Station, Seaside; this was used for 35 children in 1925 and could be used for adults, but is seldom required for the purpose.

Disinfection of rooms and of articles is carried out on application in various cases. A charge is made to cover the cost, unless the disinfection is in connection with notifiable Infectious Disease, and then it is free of charge.

At the Guardians Institution there are arrangements for dealing with vermin infested persons and their clothing, etc.

Domestic overcrowding has not been identified as having any causal connection with Infectious illness in 1925.

VACCINATION RETURN FOR EASTBOURNE DISTRICT, including Returns due to Ministry of Health February, 1926.

G. E. HODGES, Vaccination Officer.

Total number of Certificates of Successful Primary Vaccinatio's at all ages received during each of last	*13	ien- the hich sz.	M	01	na	IDI	TU	9 9	u1	10	U	110	1 10	Si	210	D
To Certificial Print at al duri	*12	236	219	589	178	179	198	190	192	250	236	226	252	260	204	152
Un- accounted for.	*11	28	27	41	11	23	40	1	41	IO	50	34	83	525	50	1.
Cases of Prosecu- tion under Sec. 31.		. 00	-	-	1	1	1	1	1	-	1	1	1	1	1	1
Removed cut of town and gone, no address.	*9 & 10.	IOI	123	6oI	130	93	888	83	142	88	59	74	84	30	26	1
Postponed by Medical Certificate.	80 *	24	25	12	20	1.5	20	IO	15	00	6	4	C4	9	4	1
Deaths under one year old.	4.7	69	09	20	59	71	80	19	55	35	20	19	22	24	31	1
Certificates of Exemption Registered.	9*	449	556	548	533	465	481	387	356	337	650	466	466	457	463	1
Had Small Pox.	* 5	1	1	1	1	1	1	1	1	1	!	1	1	1	1	!
Certificates of Insuscep- tibility Registered.	*4	1	1	1	I	1	1	1	61	1	I	1	1	+	I	1
Successful Certificates Registered.	*3	169	163	691	173	165	186	162	961	172	195	172	123	1/1	130	1
Births.	*	846	096	930	927	832	895	703	807	750	993	811	744	740	684	1
Year.	*	1161	1912	1913	1914	1915	9161	7191	1918	6161	1920	1921	1922	1923	1924	1925

No primary or re-vaccinations were performed by the Medical Officer of Health in 1924 under the P. H. (Small Pox Prevention) Regulations, 1917. The numbers marked thus (*) refer to columns in Official Returns to Local Government Board and Ministry of Health.

TUBERCULOSIS.

An account of this disease as it exists in Eastbourne is given in detail. It is one of the conditions which shew the state of the Public Health of a district to an important degree, though in a Health Resort the presence of tuberculous visitors complicates the deductions one may draw.

As I shewed last year housing conditions are an adverse factor. There are tuberculosis cases in overcrowded rooms.

The more one studies this disease the more the relative importance of prevention stands out.

The figures given as to the ultimate end of the known cases for many years past, shew that our great hope must be in prevention rather than cure.

The actual number of notifications yearly is no guide to the real occurrence of new cases for all are not notified even yet; there were 28 fewer cases notified in 1925 than in 1924.

From the various figures submitted the most interesting deduction is this, that the total number of cases is steadily but slowly being reduced, this being especially the case in tuberculosis of bones and joints. There were 44 fewer cases at the end of 1925 than at the beginning.

NOTIFICATIONS DURING 1925.

Ninety-seven notifications were received on Forms A. and B., of which seven were duplicates, leaving 90 as the number of new cases notified.

Of these 90 persons, 69 had pulmonary consumption and 21 tuberculosis of glands, bones, etc.

The notifications included one new case by the Ministry of Pensions.

Seventeen of the notifications were of non-residents, for the most part temporary visitors.

Th	e notifications were	grou	ped as	follov	vs :-
	Form A.—Medical		-		
	Pulmonary T			75.	
	Males				34
	Females				41
	Non-Pulmon	ary, 2	0.		
	Males				11
	Females				9
I	Form B.—School M	edical	Officers	5.	
	Pulmonary T	`ubero	ulosis, ().	
	Males				
	Females				_
	Non-Pulmona	ary, 2			
	Males				-
	Females				2
F	orm CInstitutio	ns (A	dmission	ns).	
	Pulmonary T	uberc	ulosis, 5	55.	
	Males				27
	Females				28
	Non-Pulmona	ary, 1.			
	Males				-
	Females				.1
F	orm D.—Institutio	ns (D	ischarge	es).	
	Pulmonary T	uberc	ulosis, 4	3.	
-	Males				20
	Females				23
	Non-Pulmona	ry, 1.			
	Males				
	Females				1
					197

The table of deaths given later is a truer comparative index as to the prevalence of Tuberculosis than notification, for deaths of visitors are eliminated and deaths of residents dying elsewhere are added to form the true total. The fallacy still remains that persons suffering from Tuberculosis die of other maladies and may be omitted from Tuberculosis deaths.

The importance of notification is that we can take the necessary steps as to care of the patient and prevention of the spread of the disease. Delay in notification is bad for both patients and the public.

The duplicate notifications are those on :-

Form A	 	 	7
Form B	 	 	_
Form C	 	 	56
Form D	 	 	44
			107

Excluding the duplicates, the sexes and ages of the 90 new cases notified were as follows:—

(a) PULMONARY TUBERCULOSIS, 69.

		1					1
			MA	LES.	FEM.	ALES.	
Ages	s.		Fo	rm	Form		
			Α.	В.	A.	А. В.	
0			-	-	_	_	-
1—2			-	-	-	_	-
2—5			1	-	-	_	1
5—10			_	-		_	-
10—15				-	-	_	-
15—20			4	-	3	-	7
20—25			8	-	7	-	15
25—35			4	-	12	_	16
3545			7		9	-	16
45—55			6	1000	4	_	10
55—65			-	-	4	_	4
65 and over			-	-	-		-
			30	_	39	-	69

(b) Non-Pulmonary Tuberculosis, 21.

		Ma	LES.	FEM	ALES.	
Ages	3.	Fo	rm	Fo	Total.	
		Α.				
0		 _	-	-	-	-
1—2		 _	_	-	-	-
2—5		 1	_	4	1	6
5—10		 3	_	3	1	7
10—15		 1	-	1	-	2
15—20		 _	_	1	_	1
20—25		 1	_	_	_	1
25—35		 3	-	_	_	3
35—45		 _	_	_	_	-
45—55		 1	_	-	_	1
55—65		 _	-	-	-	-
65 and over		 _	_		-	-
		10	_	9	2	21

The number of notifications yearly is perhaps more accurate than in previous years, as to the number of new cases occurring, but from its nature, the disease is often very obscure in the early stages.

During 1923 a circular was issued by the Ministry of Health to Medical Practitioners asking for more complete notifications. In other years there were many deaths from Tuberculosis recorded where the cases had not been notified, during life. In 1925 there were but nine instances of this, four being deaths of visitors, and three of residents, in which the medical men omitted to notify. The other two were Eastbourne cases in institutions away from the Borough.

Non-Pulmonary Cases.

Localization of dis	sease:	_				
Males-						
R. Femural N	Neck			1 Age 4.		
Glands of Ch						
Abdomen				1 Age 5.		
Middle Ear						
				2 Ages 10, 24		
Bladder				1 Age 25.		
Prostate						
Knee						
Tb. Gland A:	killa			1 Age 49.		
				_		
Tota	al			10		
				_		
Females—						
Larynx						
				4 Ages $3\frac{1}{2}$, $3\frac{1}{2}$, 5, 8.	
Caries of Fift						
Glands right						
Cervical & A						
Hip and Spin				1 Age 9.		
T.B. Diathes						
				1 Age 10.		
Peritonieum				1 Age 18.		
				_		
Tota	il			11		
				_		
POSITION OF TH	E BOR	OUGH	AS RE	GARDS TUBER	CULOS	IS
	AT TH	HE ENI	OF	1925.		
Cases at end	of 192	4	200			383
Add—	01 102					
	ses pre	eviousl	v rem	loved from reg	ister.	
since ret					6	
				wn again	1	
					_	7
Notification	ns on I	Form "	A''		95	

Less						
Duplicates					7	
T-t-1t'6t'	£		T		-	
Total notifications o						00
"A" during 1925						
Notifications on Form						9
Non-notified cases			• •			9
						489
Deduct—						100
Deaths from Tubero	culosis	:-No	otified	cases-	-	
Residents					41	
Visitors					1	
Non-notified cases						
Doctors prior to						
Residents				3		
Visitors (2						
Institutions)				4		
				_	7	
Notified cases dyin	g in I	nstitu	tion a	way		
from Eastbourne					2	
Non-notified cases						
away from Eastb					2	
					53	
Deaths of tuberculo	us per	sons d	lying f	rom		
other causes than			-		4	
Ditto ditto (dyin	g aw	ay fr	om E	ast-		
bourne)					1	
Cases left the town					60	
Cases in which the					28	
Cases in which diag	nosis r	not con	nfirme	d	4	
					-	150
						-
Total cases at end of 1	1925					339

Of the 90 patients notified, 17 were temporary residents. There were six deaths of temporary residents.

The following is a summary of the above cases :---

		MALE	s.	FEM	ALES.	
	In- sured.	Non- in- sured.	Ex-ser. (Ad- mitted).	In- sured.	Non- in- sured.	Total.
Notified Cases—						
Pulmonary	48	30	75	62	69	284
Non-Pulmonary	6	15	2	8	24	55
Total	54	45	77	70	93	339
		176		10	33	
			339			

The number of cases at the end of 1925 was 44 less than the number at the end of 1924.

The following are particulars of cases which have left the town during 1925:—

		MALE	S.	FEM		
	In- sured.		Ex-ser. (Ad- mitted).	In- sured.	Non- in- sured.	Total.
Notified Cases—						
Pulmonary Non-	 7	3	10	16	13	49
Pulmonary	 3	3	1	3	1	11
Total	 10	6	11	19	14	60

The following is a summary of the 28 cases which have been removed from the register of notifications during 1925 as cases in which the disease has been arrested:—

		MALE	es.	FEMALES.	
	In- sured.	Non- in- sured.	Ex-ser. (Ad- mitted).	In- sured.	Non- in- sured.
Notified Cases:— Pulmonary	 7	4*	2	2*	4*
Non-Pulmonary	 3	4*		1	5

^{*} including one case notified in 1925 in which diagnosis not confirmed (Total 4).

Cases Notified during 1925.

	For	m "A."	Form "B."
Left the town	 	19	
Fatal	 	13	_
Duplicate Notifications	 	7	
Died of other diseases	 	2	_
Disease arrested	 	3	-
Diagnosis not confirmed	 	4	
Still on the register	 	47	2
		95	2
		_	_

RESULT TO DATE AS TO CASES NOTIFIED ON FORMS "A" AND "B" FROM THE 1ST JANUARY, 1912, TO THE 31ST DECEMBER, 1925.

	101 2010	CHARLE	, 1020		
			F	orm "A."	Form "B."
Left the town				517	18
*Fatal				647	7
Duplicate notifi	cations			82	10
Died of other d	iseases			25	
Disease arrested	1			159	46
Not traceable				69	1
Still on the regi	ster			319	20
					_
Total	notificati	ons.		1818	102

^{*} Note.—Some of the cases marked in the register as "Fatal" may have died from diseases other than Tuberculosis.

Deaths from Tuberculosis, 1925.

The following are particulars of tuberculous persons who have died during 1925:—

	*	MALI	es.	FEM	ALES.	
	In- sured.	Non- in- sured.	Ex-ser. (Ad- mitted).	In- sured.	Non- in- sured.	Total.
Notified Cases— Pulmonary Non-Pulmonary	11 1	5a 1c	4 <i>b</i>	4	17	41 3
Cases not Notified— Pulmonary Non-Pulmonary	3 <i>d</i>	3e	=	_	1f 2g	7 2
Total	15	9	4	4	21	53

Note.—The above figures include :-

- a 1 Eastbourne case died away from the town.
- b 1 Visitor.
- c 1 Eastbourne case died away from the town.
- d 1 Visitor and 1 Eastbourne case died away from the town
- e 1 Visitor and 1 Eastbourne case died away from the town.
- f 1 Visitor.
- g 1 Visitor.

The following are particulars of the sexes and ages of the above persons who died from tuberculosis during 1925, namely:—

	n : 1	Pulm	ionary.	Non-Pulmonary.		
Age	Period.	Males. Females.		Males.	Females	
0			-	-	-	
1-2		 -	-	-	-	
2-5		 -	-	-	2*	
5-10		 -	-	-	-	
10-15		 -		-	-	
15-20		 -		1	-	
20-25		 1	4	-	-	
25-35		 8*	7	-	-	

A on Do	mind.	Pulm	nonary.	Non:Pulmonary		
Age Pe	riod.	Males.	Females.	Males.	Females	
35-45		 5*	6*	-		
45-55		 9*	2	1	_	
55-65		 3	3	-	1	
65 and over		 -	-	-	-	
Totals		 26	22	2	3	

^{*} Note.—Each of these totals include 1 visitor.

In addition to the above deaths 3 males and 2 females, all residents, who were notified cases of pulmonary tuber-culosis, died from causes other than tuberculosis, namely:—

old, area from educed of	TICI (man eaberearosis, namely .
Nature of Case.		Cause of death.
Male—insured		Congestion of both Lungs.
Male—insured		(1) Gunshot wound 10 years (War) (2) Caries of Spine
Male—non-insured		Amylotrophic Lateral Sclerosis.
Female—insured		Pneumonia.
Female—non-insured		(1) Bronchitis (2) Morbus Cordis.

Five of the deaths in Eastbourne from tuberculosis were cases of visitors, four pulmonary and one non-pulmonary. Excluding these and including the deaths from tuberculosis of Eastbourne persons temporarily out of the Borough, there was a total of 48 deaths: Males, 25; Females, 23. The death rates were as follows:—

Pulmonary Tuberculosis .. 0.8 per 1,000. Non-Pulmonary Tuberculosis 0.07 per 1,000. All forms of Tuberculosis .. 0.87 per 1,000.

The male death-rate from "Consumption" was 1.1 per 1,000 and the female 0.7 per 1,000. The Ex-Service men's deaths numbered 4 (including one visitor).

In 1925 they were 44 deaths (23 males and 21 females) from Pulmonary Tuberculosis and 4 deaths (2 males and 2 females) from non-Pulmonary Tuberculosis.

74

The deaths in the previous ten years were as follows:-

	1924	1923	1922	1921	1920	1919	1918	1917	1916	1915
Pulmonary	 37	38	33	53	31	44	52	52	46	50
Other forms	 7	9	6	12	7	7	13	12	19	7
Total	 44	47	39	65	38	51	65	64	65	57

In accordance with Circular 648 of the Ministry of Health the following particulars of new cases of tuberculosis and of deaths from the disease in the area during 1925 are given, namely:—

	1	New Ca	ses 1925	5.	Deatl	ns, all n	otified	cases.
Age	Pulme	onary.	Non- Pulmonary.		Pulme	onary.	Non- Pulmonary.	
Period.	Males.	Fe- males.	Males.	Fe- males.	Males.	Fe- males.	Males.	Fe- males.
0-1	-	-	-	-	-	-	-	-
1-2	_	-	-	-	-	-	_	_
2-5	1	-	1	5	-	-	-	2
5-10	-	-	3	4	-	-	_	
10-15	-	-	1	1	-	-	-	_
15–20	4	3	-	1	-	-	1	-
20-25	8	7	1	_	1	4	-	
25-35	4	12	3	-	8	7	700	-
35–45	7	9	-	-	5	6	-	_
45-55	6	4	1	-	9	2	1	-
55-65	-	4	-	-	3	3	-	1
65 & over	_	_	_	_	-	-	-	_
Totals	30	39	10	11	26	22	2	3

BACTERIOLOGICAL WORK.

In the Laboratory 231 examinations of sputum were made:—

	Positive.	Negative.	Total.
For Practitioners .	. 31	112	143
For Ministry of Pensions	3	29	32
For Hospital	. 48	8	56

INSTITUTIONAL TREATMENT.

Owing to the possession by the Council of their own Hospital and the use of many other Institutions, there has been but a very small waiting list throughout the year. Occasionally, waiting for admission to any special Institution is unavoidable.

(a) GILDREDGE HOSPITAL. STATISTICS, 1925.

		MALE	is.	FEM.	ALES.		
	In- sured.	Non- in- sured.	Ex-ser. (Ad- mitted).	In- sured.	Non- in- sured.	Total.	
In Hospital at end of 1924	7	- 1	4	4	5	21	
Admitted 1925	13	3	5	9	17	47	
Died	6	1	2	1	7	17	
Discharged	7	2	3	7	11	30	
In Hospital at end of 1925	7	1	4	5	4	21	

Classification of patients in Gildredge Hospital at end of 1925, on admission, and at the end of discharge, viz.:—

		Cla	Classification on Discharge.	n Discharge.		
	Stationary. Improved.	Improved.	Greatly Improved.	Worse.	Fatal.	In Hospital at end of 1925.
MALES— Classification at end of 1924— Early (4) Intermediate (5) Advanced (3) Intermediate (7) Advanced (8) FEMALES— Classification at end of 1924— Early (2) Intermediate (5) Advanced (2) Classification on Admission during 1925— Early (7) Intermediate (5) Advanced (2) Classification on Admission during 1925— Early (7) Intermediate (14) Intermediate (5)	111 1-1 1-1 -11	64 646	-8- - 6161 -8			- 000 010 -

Return shewing the immediate results of treatment of patients and of observation of doubtful cases discharged from Residential Institutions during the year 1925.

Classification on admission o Institution.			-			of Residential Treatment in th									
Classification	to Institution.	Condition at time of Discharge.		Inder		1	3-6 Iontl	15.	2	6-12 Month			ore t Mon		Tot al.
C	tol		M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	all.
	Class 1.15. Minus	Quiescent	_		-	-	_	-	_	I	-	-	-	-	1
1	6. N	Improved	1	4	-	-	3	1	2	3	-	1	-	-	15
1	2 1.	No Material Improvem't	_	_	-	_	-	-	-	I	_	_	_	-	1
1	CIAS	Died in Institution	4	2	-	-	-	-	_	I	-	-	-	-	7
SIS.	SIL	Quiescent		_	_			_	_	_	_			_	_
JLOS	b. F	Improved	_	ı	_	_	I	-	1	1	-	_	-	-	4
RCL	Group 1.	No Material Improvem't	_	-	_	_	_	-	_	_	-	_	_	-	_
UBE	Cla	Died in Institution	_	1	_	_	-	_	1		-	_	_	-	2
TX	sn.	Quiescent													
NAR	5. FI	Improved	2		_	1	2			2	_	I	I		9
MOI.	Group 2.	No Material Improvem't	_	I	_	1	1	_	_	_	_	_	_	_	3
PULMONARY TUBERCULOSIS Class T.B. Plus Group 2 Group 2	Clas	Died in Institution	I	-	-	-	I	_	_	-	-	-	-	-	2
1	sn.	Quiescent						_							
100	Growp 3.	Improved							I			I		_	2
E	Group 3.	No Material Improvem't	_	_	_	_			_				_	_	_
Clar	Clas	Died in Institution	I	2	_	1	1	_	2	_	_	_	_	-	7
	ts.	Out													
	& Joints	Quiescent or Arrested					1								1
IRY SIS.		No Material Improvem't													-
ONA	Bones	Died in Institution					_		_		_	I	_		I
NON-PULMONARY TUBERCULOSIS,	1					_			_						
N-P UBE	lal.	Quiescent or Arrested	-	-	-	-	-	-	-	-	-	-	-	-	-
NOT	Abdominal.	Improved		1			-	-	-	-	-	-	-	-	1
	Abd	No Material Improvem't Died in Institution		-					_	-	_		-	_	-
-	-	Died in Institution		Unde		_	I-2		_	2-4	_	M	ore t		
				Wee			Week	s.		Week	s.		Wee		
on	10.00	Tuberculous	-	-	_	_	-	_	_	_	_	_	-	_	-
vatio	nosis	Non-Tuberculous	-	_	1	_	I	_	_	-	_	-	-	-	2
Observation	Diagnosis.	Doubtful	-	-	-	-	-	-	-	-	-	-	-	-	-

Of the 90 new cases notified, 43 received institutional treatment during the year. Twenty-five received treatment in the Council's own Tuberculosis Hospital, namely, the Gildredge Hospital and seven others were provided treatment by the Council in other institutions. The treatment for the remaining 11 cases was not made through the Council.

This Hospital is practically always full. It takes all varieties of cases, mostly advanced, and is strictly a Hospital and not a Sanatorium. Its accommodation is just equal to Eastbourne requirements; occasionally a bed is vacant, and occasionally there is a waiting case, generally the former.

From April 1st, 1925, to March 31st, 1926, there were 7,926 patient days. The Hospital cost £2 13s. 1d. per head per week; deducting capital charges, £2 5s. 6d. per week. The cost of food for patients and staff amounted to 11/10 each per week.

I submit a record of cases since the Hospital was opened.

GILDREDGE HOSPITAL.

Hospital opened	27th	July,	1914.
Date of admission of first patient	29th	July,	1914.
Number of admissions from the	29th		
July, 1914, to the 31st Decer	nber,		
1925		753	
Number of patients:—			
Males		272	
Females		313	
			585
Number of patients admitted once or	nly	466	
Number of patients admitted twice		82	
Number of patients admitted three t	imes	28	
Number of patients admitted four tir	nes	7	
Number of patients admitted five tin	nes	1	
Number of patients admitted six tim	es	1	
			585

HISTORY OF GILDREDGE HOSPITAL PATIENTS.

Died in the Hospital				 176
Died after discharge				 94
Still in the Hospital				 21
Left the Town				 130
Not traceable			* *	 9
Admitted for observation	only			 18
Children at School				 1
Children not at School				 2
Working or able to work				 70
Not working or not able t	o work			 40
Disease arrested (besides	those w	orking)		 23
In other Hospitals				 1
				-
				585

(b) Other Institutions. (Treatment Arranged by Local Authority). Statistics, 1925.

		MALES.		FEM	ALES.	
	In- sured.	Non- in- sured.	Ex-ser. (Ad- mitted).	In- sured.	Non- in- sured.	Total.
In Institutions at end of 1924	1	3	1	3	1	9
Admitted 1925	2	1	1	4	2	10
Died	_	2	-	_	_	2
Discharged	-	_	1	5	3	9
In Institutions at end of 1925	3	2	1	2	-	8

Institutions Receiving Eastbourne Patients during the Year, 1925.

			_				
Name of Institution.	In-patients at end of 1924.		Adm durin year	g the	Receiving treatment at end of 1925.		
	Males	Fe- males	Males	Fe- males	Males	Fe- males	
Gildredge Hospital Maltings Farm Sana-	12	9	21	26 1	12	9	
st. Vincent's Cripples'	1	-	-		-	_	
Home, Pinner Lord Mayor Treloar's Home, Alton	1	-	-	-	1	-	
King Edward VII. Sana- torium, Midhurst	-	-	-	1	-	1	
Guardians' Institution, Eastbourne	1	2	4	2	-	-	
Brompton Hospital, London	-	1	-	2	-	1	
Brompton Hospital Sana- torium, Frimley	1	-	-	-	-		
Princess Alice Hospital, Eastbourne	1	-	1	1	-	-	
National Sanatorium, Benenden	-	-	1	-	-	-	
Holy Cross Sanatorium, Haslemere	-	_	-	1	-	-	
Papworth Hall, Cambridge Fairlight Sanatorium,	_	_	1 1	_	1	_	
Hastings St. Peter's Memorial	-	1	_	1	-	1	
Home, Woking East Anglian Children's	_	1	-	_	_	_	
Sanatorium, Nayland National Sanatorium,	-	_	-	1	_	_	
Ventnor Grosvenor Sanatorium,	-	-	2	1	2	_	
Kent Royal Sea Bathing Hos-	1	1	-	1	1	1	
pital, Margate Children's Hospital for Treatment of Hip Disease, Sevenoaks	1	-	-	-	1	_	
Total	. 19	16	31	38	18	13	

TUBERCULOSIS DISPENSARY—Town Hall.

Males: Tuesdays, 11 a.m.; Medical Officer, Dr. W. G. Willoughby. Females: Thurs., 11.30 a.m. Special Evening, first Thurs., 6 p.m., Medical Officer, Dr. W. Muir-Smith.

RETURN SHOWING THE WORK OF THE DISPENSARY DURING THE YEAR 1925.

		Pulm	Pulmonary.		Non-Pu	Non-Pulmonary.	To	Total.
Diagnosis.	Tb. 1	Tb. Minus.	Tb.	Tb. Plus.				
	Adults.	Children.	Adults.	Children.	Adults.	Children.	Adults.	Children.
Number of Persons on Dispensary Register on 1st January, 1925	156	27	57		14	21	227	48
Cases previously removed from Register returned Cases transferred from other areas New cases during 1925	899	11-	662	111	11-	∞	9 8 8	6
Doduct	171	28	73	1	15	29	259	57
Cases removed from Dispensary Register for the following reasons— (a) Cured (b) Diagnosis not confirmed (c) Left the town (d) Fatal from Tuberculosis (e) Fatal from other diseases (f) Untraceable	0 8 7 61 61	8 8	4 4 1 1	111111	4 1	∞	10 21 2 4	I-6
Total cases taken off Register	39	9	19	1	5	6	63	15
Cases remaining on Dispensary Register, 31st December, 1925	132	22	54	1	10	20	196	42
Observation cases Contacts	11	11	11	11	11	11	14	28
I would be a second of the sec		-	-	-				

RETURN SHEWING THE WORK OF THE D	ISPENSA	RY
Number of Attendances at the Di-		
Number of Attendances at the Dispensar	У	
(including Contacts)— Adults	505	
	. 595	
School Children		
Children under School Age	. 3	000
Number of visits by Nurses or Health Visitor	rs	800
to Homes for Dispensary purposes		1066
Specimens of Sputum examined		231
Number of insured and non-insured persons o		201
Dispensary Register on the 31st December		
1925—	.,	
Insured	. 65	
Non-insured	. 94	
Ex-Service	. 01	
Insured	. 64	
N	. 15	
Tron-institute	. 10	238
Number of Insured Persons under domiciliar		200
treatment on 31st December, 1925		17
Number of reports received during the year i		11
respect of Insured Persons—		
(a) Form G.P. 17		22
(b) Form G.P. 36		18
	•	10
SPECIAL PENSIONS CASES.		
Medical Referee: Dr. W. G. WILLOU		-1
Cases referred by D.C.M.S., Brighton,	36, 111	cluding
4 Officers.		
Summary of Recommendation		005
Made in connection with examinations at		
Treatment under own Doctor		
Hospital or Sanatorium Treatment		
Dispensary Treatment		
New Cases of Extra Nourishment		
Renewal Cases of Extra Nourishment .		248
Total		994

The following are particulars of the certificates furnished to the D.C.M.S., Brighton (in addition to the usual report on M.P.X.9T.), and the Local War Pensions Committee, namely:—

Certificates furnished to D.C.M.S., Brighton-	
	mber.
Form M.S.D. 122.—Report of Tuberculosis	
Officer on a case of definite or suspected	
Tuberculosis	36
Certificates furnished to Local War Pensions Committee-	
Form M.S.D. 28 and 28 (a).—Treatment under	
own Doctor	51
Form M.P.A. 36 T.O.—Special pension report	12
Form M.S.D. 81.—Treatment under own Doctor	22
Form M.S.D. 80.—Discharge from Hospital or	
Sanatorium	4
Form M.S.D. 81.—Hospital or Sanatorium Treat-	
ment	6
Form M.S.D. 81.—Admission to Hospital or	
Sanatorium	9
Form M.S.D. 28.—Hospital or Sanatorium Treat-	
ment	1
Form M.S.D. 80.—Certificate of Death at Hospital	
or Sanatorium	4
Form M.S.D. 31.—Increase of Pension	1
	-
Total	146

EXTRA NOURISHMENT.

Council assistance:—

Five males and 10 females were receiving extra nourishment in the form of milk on the 31st December, 1924.

The amount of expenditure from 1st January to 31st December, 1925, has amounted to £99 11s. 1d., which is equivalent to £1 11s. 10d. per thousand of the population of the Borough per annum. The total number of persons assisted during this period was 39, and the total amount supplied was 7,374 pints. The amount of expenditure

permitted by the Ministry is £2 for every 1,000 of the population and this practically permits milk only.

Six males and twelve females were receiving extra nourishment at the end of 1925.

CHILDREN'S TUBERCULOSIS CLINIC.

Thursdays, 2.30 p.m.

MEDICAL OFFICER: Dr. E. H. B. COGHILL.

Of the school children examined, 13 were suffering from Pulmonary Tuberculosis or Consumption and 13 had Tuberculosis elsewhere, as follows:—

					1
					1
					1
					2
					3
Lupus	Legs.	Syn	ovitis	both	
171					1
domina	1 Gland	ds			1
					1
pine					1
d Abde	omen				1
					10
					13
	Lupus domina pine dd Abde	Lupus Legs. dominal Gland pine Abdomen	Lupus Legs. Syndominal Glands pine	Lupus Legs. Synovitis dominal Glands	Lupus Legs. Synovitis both dominal Glands pine dd Abdomen

The following is a summary of the above cases with particulars of the contacts and observation cases examined and the number of attendances:—

Nature of Ca	Cases ttending.	Number of Attendances.		
Pulmonary—				
New cases			 _	_
Old cases			 13	62
Non-Pulmonary	_			
`New cases			 7	23
Old cases			 6	17
Contacts—				
New cases			 5	14
Old cases			 3	11

Observation—			
New cases	 	 21	40
Old cases	 	 8	35
		_	
		63	202
		_	

In addition to the above cases, one child under school age (new case) suffering from Pulmonary Tuberculosis attended the Clinic on three occasions.

INSTITUTIONAL TREATMENT ARRANGED BY THE COUNCIL.

STITUTIONAL TREATMENT ARRANGED BY THE COUL	NCIL.
Children under 15 years of age.	
Males. Fem	ales.
Receiving treatment at the end of 1924 2 1	
Admissions during the year 2	
Discharges during the year 3	
Deaths in Institutions during the year	
Receiving treatment at the end of 1925 2 -	9
Institutions treating cases during 1925 :—	
East Anglian Children's Sanatorium, Nayland-	
Females 1	
Children's Hospital for treatment of Hip Dis	ease,
Sevenoaks—	
Males 1	
Lord Mayor Treloar's Home, Alton-	
Males 1	
St. Peter's Home, Woking—	
Females 1	
Gildredge Hospital, Eastbourne	
Female (Observation case) 1	
Nature of cases treated :—	
Pulmonary—	
Males	
Females 1	
Non-Pulmonary—	
Males 2	
Females 1	
Observation—	
Females 1	
Number of in-patient days, 1,011.	
A CONTRACTOR OF THE PARTY OF TH	

EXTRA NOURISHMENT.

Seven cases (four males and three females) received 1,738 pints of milk during the year.

Note.—The particulars relating to the above cases of children are also included in the general tables referred to above.

NURSES' VISITS.

Visits to Domiciliary cases, 1,066.

GENERAL PARTICULARS.

The Chief Tuberculosis Officer is the Medical Officer of Health, Dr. Muir Smith is Joint Officer for Clinical work at the Hospital and for the Women's Dispensary, and Dr. E. H. B. Coghill acts as Deputy for the Medical Officer of Health.

Nurse Richnell acts as Tuberculosis Nurse.

The work is carried on in close co-operation with the other Hospitals and with the Clinics.

The Dispensary at the Town Hall is the centre from which the work is carried on. Examinations of children only have also been made at Acacia Villa, Seaside, on Tuesday afternoons.

The following up of doubtful cases is done by the Medical Officers and the Nurse, and contacts are examined at the Dispensary and in the Clinics.

Diagnosis was aided in some cases by the X-Rays. Dr. Donnellan assists occasionally in difficult throat cases.

Dr. Muir Smith has continued to use Tuberculin treatment in selected cases, and is well satisfied with his results.

The local Surgical Aid Society has been of assistance in helping to provide surgical apparatus. There has been no difficulty in this respect.

The want of suitable occupation for cases after leaving Sanatoria is badly felt locally. The general imperfection in respect of after-care schemes of the Country generally is reflected in Eastbourne. No home shelters have been applied for. No special occupation locally is concerned with the incidence of Tuberculosis. No definite arrangements exist for provision of employment.

The Open-Air School is acting as a useful preventive of Tuberculosis. The number of children taken there is 75. No case of actual Pulmonary Tuberculosis is taken.

The co-operation between Medical Practitioners and the Tuberculosis Officers is cordial. The instructions in the Ministry Orders are closely followed and no other special arrangement is made.

The Nurse follows up doubtful cases, and contacts, especially children, are re-examined to some extent. Home contacts are difficult to supervise.

No special methods of diagnosis and treatment are employed.

Dental treatment at the Hospital is kindly carried out by Mr. Turner. Both there and in the Dispensary patients pay as much as they can and individuals and societies kindly make up the balance.

The special difficulties encountered are the want of satisfactory housing accommodation in some of the cases, the want of hospital accommodation for surgical tuberculosis, and the want of suitable employment for tuberculous persons who could do a little work.

Special nursing in the homes was not provided by the Council during 1925. The Hospital deals with the worst cases and arrangements are made for the particular help required by each tuberculous person. Some cases have been admitted to the Infirmary pending transfer to the Gildredge Hospital if a bed has not been immediately vacant.

I am particularly indebted to Mr. A. H. Hookham, of my staff, for his special work *re* Tuberculosis. The tabular records are his work and enable me to give such a complete account of this disease as it exists in the Borough.

VENEREAL DISEASES.

There is one Centre only, viz., a building erected for the purpose at the rear of the Town Hall with Doctor's Room, Operation Room, Waiting and Changing Rooms and Irrigation Room. The premises are adequate and the Medical Officer has fully developed the Clinic. The Medical Profession co-operates freely. Patients are ready to avail themselves of the facilities which are made known by advertisement in the lavatories and spread of knowledge through social agencies.

CLINIC: At the rear of the Town Hall. Opened 24th September, 1919.

Medical Officer: A. Geoffrey Shera, M.A., M.D., B.Ch., Camb., M.R.C.S., Eng., L.R.C.P., Lond.

Clinic Hours: Men, 5 p.m., Wednesdays; Women, 5 p.m., Mondays. Special times by arrangement.

The following table shows the number of cases treated during 1925, the figures in brackets being those for 1924. Fewer cases were referred for diagnosis, but an increase in attendance of male gonorrhaa cases is noticeable. This is almost solely due to the increased irrigation facilities, the excellent results therefrom, and to an appreciation thereof, rather than to an increased prevalence of this disease.

	Ma	Males.	Fen	Females.	To	Total.	Canal Total
	Old Cases.	New Cases.	Old Cases	New Cases.	Males.	Females.	Gland 10tal.
Syphilis	14 (15)	(6) 71	(61) 61	6 (14)	31 (24)	25 (33)	56 (57)
Gonorrhæa	(9) 6	23 (22)	3 (1)	5 (4)	32 (28)	8 (5)	40 (33)
Soft Chancre	1		1	1	ŀ	1	1
Other conditions	1	23 (27)	1	12 (29)	23 (27)	12 (29)	35 (56)
Total	23 (21)	63 (58)	22 (20)	23 (47)	(62) 98	45 (67)	131 (146)

Total attendances, 2,132 (1,507). Males, 1,602 (1,017); Females, 530 (490).

In-patients.— One man was sent to the Lock Hospital, London. Aggregate in-patient days, 28 (82).

Pathological Work.—This was carried out at the Pathological Department, Princess Alice Hospital, by Dr. Shera. The following examinations were made:—

Nature of Test.		Number of Tests.
For Detection of Spirochetes—	100	
For Treatment Centre		 1
For Practitioners		 1
For Detection of Gonococci—		
For Treatment Centre		 - 54
For Practitioners		 28
For Wassermann Reaction—		
For Treatment Centre		 67
For Practitioners		 49
Other Examinations—		
For Treatment Centre		 _
For Practitioners		 _
Total		 200

The arsenobenzol compounds used in the treatment of syphilis were Novarsenobillon (N.A.B.), Stabilarsan, Sulfarsenol (chiefly for children) and Silversalvarsan. The dosage was usually as follows:—N.A.B. and Stabilarsan, 0.15 to 0.75 grammes; Sulfarsenol, 2.5 to 40 centigrammes; Silversalvarsan (for neurosyphilis), 0.12 to 0.2 grammes. In primary and secondary cases, two full courses of 6.3 grammes N.A.B. and 2.7 grammes Bismuth were given consecutively or with three weeks' iodides between. In tertiary cases two full courses and, if necessary, short courses of six N.A.B., etc., were given at three months' intervals with iodides.

Facilities for the intraspinal treatment of tabes dorsalis were utilised. The case so treated has benefited greatly and is at full work. The tests applied before the discharge of patients were as follows:—In Syphilis cases, three monthly Wasserman tests for two years after the second course with a provocative dose at the end of the first and second year.

In Gonorrhæa (1) Normal diet and alcohol; (2) Bougies and Urethroscopy; (3) Injection of Gonococcus Vaccine (150 millions per c.c.) 1 c.c. If there is no discharge and no threads, after all tests, the case is provisionally discharged, but not otherwise. If clear at the end of one month and six months, the case is finally discharged.

Detoxicated Vaccines were not found to be effective for curative purposes.

During the year arrangements have been made for irrigation when required, and additional facilities have been provided and have proved invaluable (see attendances).

Notices as to free treatment are posted in the various public lavatories, etc.

A chronic case of secondary urethritis was treated with Antivirus (Autogenous) with success.

No medical practitioners have applied for free Salvarsan or substitutes, so that the question of qualification has not arisen, nor have these drugs been supplied. The Pathological examinations have been chiefly through the Council's Medical Officer, but in 78 instances at the request of private practitioners.

No action has been taken under the Venereal Disease Act, 1917.

The Department now dispenses its own medicines, instead of sending out prescriptions.

Dr. Shera, whose report this is as regards the Clinic, praises the work of the Nurse (Miss R. Clark) and that of the Male Attendant (Mr. Tompsett).

The success of the Clinic is due to Dr. Shera's interest and careful attention.

MATERNITY AND CHILD WELFARE.

The Statutory Committee is a Sub-Committee of the Sanitary and Public Health Committee, and is composed of members of that Committee and two co-opted ladies, one of whom was nominated by the Trades and Labour Council.

The Centre at which the work is co-ordinated is at the Town Hall.

(a) A MOTHER'S AND INFANTS' CLINIC is held at the Town Hall at 2 p.m. on Wednesdays and at Acacia Villa, Seaside, on Fridays.

Dr. E. H. B. Coghill is the medical attendant of the Clinic, and Miss R. Clark the Superintendent Nurse.

The work of the Clinic includes advice to mothers, and attention to minor ailments of infants and children under school age for which ordinary medical attention is rarely, if ever, obtained. The work is mainly preventive, and infraction of the work of medical practitioners is avoided. Cases are sometimes referred to them, and vice versa. Short demonstrations in such matters as washing and dressing infants are given. Light refreshments are provided by some ladies kindly interested in the Clinic. The infants are regularly weighed, and advice is given on matters concerning both infants and mothers.

The attendances at the Clinics in 1925 were 4,316 of 1,011 children, 724 under two years of age, and 287 aged three and four years; 77 mothers attended for advice on 137 occasions. The attendances in 1924 and 1923 were 5,248 and 4,111 respectively.

The staff at the Clinic included the Superintendent Nurse, Miss R. Clark, and Nurses Simmonds, Forward and Curtis. These Nurses were also engaged in home visiting. On January 1st, 1925, Acacia Villa, Seaside, was opened as a Centre and the Friday Clinic was held in that populous area instead of at the Town Hall. The figures as to those attending there are included in the summary above. There were 1,583 attendances of 429 children, 318 under two and 111 aged three and four, 59 attendances of 32 mothers and 35 attendances of 24 expectant mothers.

(b) Home Visiting.—The Borough is divided for this purpose into three districts, each having its own Nurse Visitor. The visits paid numbered 7,613 (9,602 in 1924), and were as follows:—To expectant mothers, 250; to infants under one year, 3,271; and to children aged one to five years, 4,092. The percentage of the births which took place in Eastbourne notified to the Medical Officer of Health in 1925 was 98, or all but 16. In the cases of 588 births, or 82% of the total number, visits were made. The Notification of Births Act enables the Nurses to make visits within two or three days of a birth.

The Department receives notices from the Maternity Home when maternity cases are discharged, and is thus able to keep in touch with the cases born in the Home.

- (c) ANTENATAL CLINIC.—(i.) At the Town Hall and Acacia Villa on Wednesdays and Fridays at 2 p.m. respectively, in connection with the Maternity and Child Welfare Clinic. Number of attendances in 1925, 135 of 119 expectant mothers.
 - (ii.) At the Maternity Home, Wednesday afternoons, and as occasion demands.

Number of expectant mothers attending Number of attendances 858

Number of visits by general practitioners to their patients at this Clinic 45

The majority of the cases were normal and required information on minor matters only.

There were 30 abnormal cases, viz.:-

Contracted Pelvis		 	8
Albuminuria		 	6
Breech Presentation		 	4
Ante Partum Hæmor	rhage	 	4
Vaginal Growth		 	1
Vaginal Discharge		 	2
Minor Ailments		 	5

Some of these cases were serious and demonstrate the value of Ante-Natal work.

The opening of the new part of the Maternity Home enabled the Ante-Natal work to be carried out much more easily.

(d) FOOD was distributed in 1925 in the form of dried or new milk for nursing mothers and young children.

The various "Orders" of the Ministry of Health were carried out during the year. In connection with milk distribution, the scale of income adopted in accordance with Circular 185 of 31st March, 1921, was as follows:—

Number in Family.	Free	e Milk.	Milk a	ost.	alf
z unitry.	S.	d.	s.	d.	
1	 7	0	 8	0	
2	 7	0	 8	0	
3	 7	0	 8	0	
4	 6	6	 7	6	
5	 6	6	 7	6	
6	 6	6	 7	6	
7	 6	0	 7	0	
8	 6	0	 7	0	
9	 6	0	 7	0	
10	 5	6	 6	6	
11	 5	6	 6	6	
12	 5	6	 6	6	

Applicants for milk are required to fill up a form giving particulars of their income and rent paid. These forms are considered by a small Sub-Committee, including a member of the Maternity and Child Welfare Committee, and milk granted in accordance with the above scale.

The milk is supplied under a Contract with a local firm. It is by no means certain that this milk is used only by the person for whom it is intended, and in 1926 a new arrangement is contemplated by which the recipient's own dairyman is given an order for the increased supply.

(i.) New Milk .--

The total amount for which orders were given was 7,539 pints, or a decrease on the previous year of 2,610 pints. Great care had to be exercised to be sure that necessitous cases got the milk, and that, on the other hand, none was given in unnecessary cases. 79 families received milk in the following manner, some families having milk for two of the reasons set out:—

Expectant mothers				8
Nursing mothers				46
Infants				43
Amount Allowed-One p	oint da	aily.		
Average length of time a	llowe	d, 13.6	weeks	S.
Number receiving free-				
Expectant mothers				8
Nursing mothers				44
Infants				40
Number receiving partly	free-			
Expectant mothers				_
Nursing mothers				2
Infants				3
(ii.) Dried Milk-				
Number receiving—				
Infants				112
Nursing mother	S			7
Number paving full		orice		87

Number paying part cost 9
Number receiving free 17

Dried Milk used.—"Ambrosia," "Cow and Gate" and "Glaxo."

(e) Boarding-out.—No children were boarded-out during 1925. The opening of the Infants' Home has removed the necessity for general boarding-out of infants, which had become so difficult to arrange at reasonable cost.

A second home for boarding-out young children is now in operation privately for illegitimate children only. The general boarding-out system is arranged by the Guardians.

(f) Unmarried Mothers.—Temporary homes were provided for five of these cases. The estimates were framed to allow provision to be made for five cases at any one time up to twelve months from the date of birth.

Bell Hostel.—This Hostel provided a local means of dealing with unmarried mothers. The premises are excellent for the purpose, and the Committee carries out most useful work. During 1925 two confinements took place in the Hostel.

The charges to the Council were as follows:— 25/- per week until the mothers went to work, then 20/- per week.

Of the three Municipal cases remaining in the Hostel on 1st January, 1925, two left at the expiration of 12 months from date of admission and one at the expiration of six months.

Two new cases were sent in, one leaving after one month and the other being still in the Hostel.

There is a small Committee originally formed in 1920, linking the work of the Hostel, the Guardians and this Authority, so as to give a guiding hand to such cases from before "confinement" onwards. This was re-organised in 1923.

(g) Municipal Maternity Home, 9 Upperton Road.—
Consulting Obstretric Surgeon: Dr. A. H. Crook.
Important extensions to this Home were finished
in May, 1925. Facilities for Ante-Natal work and
proper bedroom accommodation for the staff were
the main features.

This Home was again in 1925 a great success under the care of Miss Macintosh, the Matron. During the year, 20.5%, as compared with 20.9% in 1924 and 17.6% in 1923, of all the births in the Borough took place there. There are ten maternity beds.

One hundred and forty-five mothers were admitted for confinement and 147 children were born, of whom two died and five were still-born or immature births.

One other mother was admitted for temporary treatment in connection with labour.

The Ante-Natal work at this Home, as shown above, is a very important development and has much increased the value of the Institution.

MATERNITY HOME. MATERNITY CASES.
Return for the Year ending 31st December, 1925.

1. Total number of cases admitted, 146.

For confinement, 145.

(b)

For treatment in connection with labour, 1.

Average duration of stay, 17.42 days.

Number of cases delivered by—

 (a) Midwives, 76; 52.4%.
 (b) Doctors, 69; 47.6%.

 Number of cases in which medical assistance was sought by the midwife, with reasons for requiring assistance:—

 (a) During Labour—

7	the midwife, with reason	ns for	requiring	assist	ance	
)	During Labour—					
	Breech Presentation				1	
	Uterine Inertia				1	
	Delayed Labour				4	
	Prolapsed Cord				1	
	Impacted Breech				1	
	No presenting part felt				1	
	Adherent Placenta				1	
					-	10
)	After Labour—					
	Rise of Temperature				1	
	Gastritis				1	
	Sore Throat				1	
	Torn Perineum				1	

Mental Condition				1	
Rheumatoid Arthritis				1	
Sub-Involution				2	
Thrombosis				1	
(c) For Infant—				-	9
Inflammation of Eyes				1	
Rise of Temperature				1	
				_	2
					-
					21
In Auto-Natal work Doctor	e also s	and the fall	orning .		-
In Ante-Natal work, Doctor. Contracted Pelvis	2 ((120) 2(aw ine jour	owing t		
		* *		8	
Albuminuria				6	
Ante Partum Hæmorr	hage			4	
Breech Presentation				4	
Vaginal Discharge				2	
Vaginal Growth				1	
	* *		* *		
Minor Ailments				5	200
				-	30
					-

- Number of cases notified as puerperal sepsis, with result of treatment in each case, Nil.
- 6. Number of cases in which temperature rose above 100.4 for 24 hours, with rise of pulse rate (Sapraemia), 1.
- 7. Number of cases notified as ophthalmia neonatorum, with result of treatment in each case, Nil.
- 8. Number of cases of "inflammation of the eyes," however slight, 2.
- 9. Number of infants not entirely breast fed while in the Institution, with reasons why they were not breast fed (Insufficient milk), 3.
- 10. Number of maternal deaths, with causes, Nil.
- 11. Number of fœtal deaths (still-born, or within 10 days of birth) and their causes, and the results of the postmortem examination, if obtainable:—

Still-born 1 Immaturity 4

Number of cases remaining in the Home on 31st December, 1925, 8.

The infant mortality rate for the first fortnight after birth in the Home was 13.6 per 1,000 births.

A mother suffering from rheumatism was sent to Droitwich for treatment after labour for four weeks.

The Home has been sanctioned as a Training Centre for Midwives, and particulars as to this branch of the work are as follows:—Seven Nurses were taken for training, of whom four sat for and obtained their C.M.B. Certificates. The other resident pupils are receiving their tuition.

For Ante-Natal work see section (c).

The patients are attended by their own Medical Attendant if they wish; otherwise by the Matron and Staff.

In five cases the Cæsarian operation was performed successfully as regards both mother and infant.

The charge for patients is £2 2s. per week and, while waiting in the Home for confinement, 3/6 and 5/- per day. For non-residents the charge is doubled.

In the cases of the 146 mothers admitted, full charges were paid in 134 cases, part charges were paid in eight cases and in four instances no part of the charges were paid.

(h) Infants' Home, 9 Upperton Road.—Matron: Miss C. B. Macintosh.

In this Home there are nominally sixteen beds, but owing to pressure the number has been occasionally exceeded by one or two for a short period. During building operations eight only were used.

MUNICIPAL INFANTS' HOME—9 UPPERTON ROAD. Return for the year ending 31st December, 1925.

Return for the year ending 3	1st Decemb	ber, 195	25.
1. Number of cases admitted :-			
Born in the Home			147
Admitted Infants			35
			182
2. Average duration of stay, 32.5 da	ays.		
 Reasons for admission, giving nu heading:— 	umber of ca	ases un	der each
Born in the Home			147
Boarded-Out			18
Illness of Mother			10
Circumcision			1
Not gaining in Weight			2
Observation			1
Marasmus			1
Vomiting and Diarrhœa			1
Convulsions and Diarrhœa			1
			-

4. Numbe	r of cases discharged	:		
(a) In Good Health		 	161
	b) Improved		 	
(c) No Improvement		 	-
				-
				163

- 5. Number of cases of infectious disease, with brief account of any epidemic which has occurred, Nil.
- 6. Number of deaths, giving date and cause of death and period of residence:—

Date.	Cause of Death.	Period of
8th Jan.	Congenital Syphilis	
4th June	Acute Cystitis Pyræmic Abscesses in Right	11 days.
	Lung, Palate, Scalp and Fingers. Empyema Right	
	Septic Absorption. Cardiac	91 days
10th Oct.	Failure	21 days. 24 days.
25th Oct.	Marasmus. Toxæmia and Convulsions	48 days.
5th Jan.	Anencephalic Monster	
27th April 15th July	Abortion	_
29th Aug.	Still-borr	_
27th Dec.	Macerated Anencephalic Fœtus	

 Number discharged on account of illness, with the nature of the illness, infectious or otherwise, and the result of treatment elsewhere, Nil.

SUMMARY.

			ies bo		Admit Infan	
In Home, 1st January,	1925		3		8	
Admitted since			147		35	
			-	150	- 4	13
Discharged—						
In Good Health			136		25	
Improved			-		2	
No Improvement			-		_	
			_		-	
			136		27	
Died			2		2	
Still-births, etc.			5		_	
A TOTAL CONTRACTOR OF CONTRACTOR				143	- 5	29
				-		-
Remaining in Home on	31st De	c., 192	25	7		14
						_

In September and October, 1925 a form of illness characterised by lethargy, light coloured stools (no diarrhœa), abdominal gaseous swelling,

wasting and temperature affected eleven of the fifteen children. Two died and the others gradually recovered. At about the same time four of twelve children in the Princess Alice Memorial Hospital had similar symptoms. In five of the Home cases and in three of the Hospital cases stools were examined pathologically and abundance of B. Welchii was the only abnormality found. All the circumstances of the cases were examined and the only common factor to all the cases was the milk supply. It was found that the milk had large quantities of B. Welchii and the supply was changed. No further cases occurred.

Four resident probationers were being trained during the year in the care and management of infants. In connection with this part of the Institution two Courses of Lectures and training in the care of infants were given. Beside the staff, 32 persons attended the Courses. Examinations were held, 27 Certificates being awarded.

(i) MUNICIPAL MIDWIFE.—The Municipal Midwife for external work, Miss H. A. G. Collyer, lives at the Maternity Home and the work is directed from there. In 1925, 57 confinement cases were attended in various parts of the Borough, 12 of these were in connection with doctors, and 45 were managed by the Midwife herself.

In two cases twins were born and one case was a still-birth.

The total number of visits paid by the Municipal Midwife was 335 to 90 patients, and in addition 31 patients visited the Home on 38 occasions.

In every case but two, in which part fees were paid, the full fee of 25/- was paid by the patient.

The Maternity Home and Municipal Midwife births amounted in 1925 to 204 of the total 716 births registered, or 28.5%.

(j) MIDWIVES ACT, 1902.— Fourteen registered midwives (one untrained) gave notice of their intention to practise during 1925. Of these nine were practising in Institutions, and only two practised regularly outside Institutions. They are visited by the Superintendent Nurse, herself a qualified midwife, and by the Medical Officers when necessary. The visits paid by the Superintendent Nurse during the year numbered 16.

Midwives attended 53.2% of the total births during 1925.

Medical assistance was sought, apart from Maternity Home cases, by midwives in 26 cases during 1925, viz., for the mother, 20 cases; and for the infant, 6 cases. (14 by Municipal Midwife).

For the mother-

Abnormal labour		 	3
Delayed labour		 	2
Ante-partum hæmor	rhage	 	2
Ruptured perineum		 	5
Premature birth		 	1
Rise of temperature		 	3
Post Partum hæmori	rhage	 	2
Malpresentation		 	2
For the infant			
Prematurity		 	2
Hæmorrhage		 	1
Discharge of Eye		 	3

The scale of fees arranged by the Ministry of Health was adhered to and in most cases refunded amounts were obtained from the patients.

(k) Home Help.—The Home Help (Mrs. Hicks) attended 52 cases during the year, viz., 41 homes for household duties in maternity cases and 11 homes for ordinary relief work (for expectant or nursing mothers or during illness of children). Her salary is 35/- per week. Very useful work has been accomplished.

(l) Hospital Accommodation.—*The Borough Hospital provides accommodation for Puerperal Fever, Ophthalmia, Measles and other infectious ailments.

The Princess Alice Memorial Hospital provides for some abnormal confinements if required.

*The Maternity Home at 9 Upperton Road provides for confinements in married women only.

*The Infants' Home at the same address provides for babies with certain ailments, such as malnutrition, which can only with difficulty and imperfectly be dealt with in the homes.

The Bell Hostel, Salehurst Road, provides for unmarried mothers and their infants.

* Municipal Hospitals.

- (m) CRECHE.—The Christ Church Creche in Rylstone Road for 16 children is subsidised by the Local Authority up to £300 per annum. Councillor Miss Hudson represents the Authority on the Committee. The Medical Officer of Health and Assistant Medical Officer of Health are the Medical advisers. This is now so little used that it will be closed in March, 1926.
- (n) Dental Work.—Mothers (prospective and actual) are occasionally assisted as regards dental work and dentures. The following dental assistance was given in 1925:—

Mothers receiving dentures	 	8
Mothers paying part cost	 	7
Mother receiving denture free	 	1

In addition, extractions were made in six other cases, two cases being free, and fillings in four cases, the mothers paying part cost in three cases.

(o) STAFF.—Four part-time nurses, who also assist in school medical work, and one whole-time midwife nurse.

The clerical work is carried out by the clerical staff of the Public Health Department.

- (p) Ophthalmia.—Four cases, all in legitimate children.
 No blindness. One in a midwife's practice. See
 "Infectious Diseases."
- (q) Hampden Park District Nursing Association.—
 Owing to the comparatively isolated nature of this part of the Borough, the Local Authority has agreed with the Association for the use of its nurse in some Maternity and Child Welfare cases in that district. A retaining contribution of £10 10s. per annum is paid to the Association.

The following figures for 1925 show the extent of the work of the Association:—

Number o	f Maternity cases		4
Number o	f visits to such cases		269
Number o	f cases of children under 5		16
Number o	f visits to such cases		69
Number o	f cases of children of school	age	12
Number o	f visits to such cases		21

- (r) VOLUNTARY ASSISTANCE.—Some ladies give practical help at the Clinics by assisting in social enquiries and help, and by helping to provide light refreshments for the mothers.
- (s) Breast Feeding.—Five hundred and five of the births were followed up for 12 months to ascertain the state of breast feeding. Of these 505, mothers fed the babies naturally for nine months in 353 instances, 141 babies were partly breast fed and 11 were hand fed from birth. Of the 141 partly breast fed babies, 31 were breast fed for six months and over, 50 for from three to six months, 23 for two months and 37 for one month.
- (t) ORTHOPÆDIC TREATMENT.—At the "Tiny Tim" Cripples' Centre, 72 Royal Parade.—Three boys from the Infant Welfare Centre received treatment as follows:—Club Foot, 1 case; Other Foot Deformity, 1 case; General Debility, 1 case.

Seven girls from the Infant Welfare Centre

received treatment, including:—Rickets, 1 case; Club Foot, 1 case; Infantile Paralysis, 1 case; Myotonia Congen., 1 case; Post Encephalitis, 1 case.

The youngest patient was 16 days old when treatment was commenced. Both feet were badly clubbed. Such good progress has been made as a result of the treatment received that it is practically certain that operation will not be needed.

Dr. Trower has taken a keen interest in this work and his help and advice which are always available have been very much appreciated.

In addition to the work carried out at the above Centre among the physically defective children, 16 children have received treatment at "Solsana," Summerdown Road, through the kindness of Miss Buck, who has very generously placed her apparatus and time at the disposal of the Clinic.

From the Infant Welfare Clinics 8 children have been treated with artificial sunlight, 3 boys and 5 girls. The average number of treatments given was 11.12. In each case they were discharged "much improved."

The following note may be of interest in connection with the artificial sunlight treatment:— The lamp used is a mercury vapour lamp. Distance of the child from the lamp commences at 3ft.; this is gradually lessened to 2ft. Commencing exposure is $1\frac{1}{2}$ minutes back and front, 3 minutes in all; this is gradually raised till the child receives 25 minutes' exposure. Both the distance from the lamp and the exposure used is determined by the amount of skin reaction resulting from the previous exposure.

It is hoped that a permanent Orthopædic scheme will incorporate these agencies if possible and if those concerned will consent.

(u) Finance.—For the year ending March 31st, 1926, the general Maternity and Child Welfare work cost £2,017, and the Maternity and Infant Home, £3,189, with £600 Capital Charge in addition, a total of £5,806.

The general income for the same year was £1,349 and the Treasury Grant £2,209, leaving a nett cost to the Rates of £2,248, or rather over one penny in the pound.

With this Section should be read the Infant Mortality part of the Report.

BLIND PERSONS.

When the Blind Persons Act, 1920, became law the Council appointed a Statutory Committee to administer its provisions. This Committee includes six members of the Council and four co-opted members, one of the latter being nominated by the Board of Guardians, one the Hon. Secretary and one the Hon. Treasurer of the Voluntary Association for the Blind.

The Committee's scheme approved by the Ministry was published in my report for 1921.

During 1925 frequent visits were paid to blind persons who wished to be visited. The Council's paid visitor carried out necessary investigations.

Of the 67 blind persons on the register at the end of 1924, 6 have died, 1 has been transferred to the Brighton County Borough Asylum, but remains on the register, and 1 has left Eastbourne permanently. Three new cases have been added and two have been restored to the register, making a total of 65 in the following age groups:—

- Age Group.			Males.	Females.	Total.
Under 5 years			_	-	_
Between 5 and 15			3	2	5
Between 15 and 25			3	3	6
Between 25 and 65			16	20	36
65 years and upward	s		5	13	18
Totals			27	38	65

Of these 65, 1 male is permanently employed in a Blind Workshop at Tunbridge Wells and 1 female is an inmate of the Salisbury Diocesan House of Mercy.

It is satisfactory to note the comparatively small number of young blind persons,

Of the 65 blind persons, 27 are totally blind, the remainder having a varying amount of sight in all cases insufficient to enable the persons concerned to earn a livelihood.

Twenty-seven blind persons are in receipt of the State Pension.

The present conditions as to occupation are :-

() () () ()		
(a) Children under school age		-
(b) Children of school age		5
These are at :—		
Public Elementary Schools (not total	ally	
blind)		-
Blind School, Southsea	***	3
Not at School (otherwise defective)		2
(c) Persons of an age and condition	for	
Institutional Training:—		
In Institutions		2
(d) Persons receiving Home Instruction in-	_	
Chair-caning, Raffia, Rug-making, Basl	ket-	
making and Knitting		13

During 1925 materials for basket-making and chaircaning were supplied in three cases.

Assistance with regard to clothing was given in one case.

The Local Committee keeps in touch with the Metropolitan and Adjacent Counties' Association for the Blind.

The amount expended under the scheme for the year 1925 has been £126, and a provision of £119 has been made in the estimates for 1926.

In addition to the Statutory Committee which has been appointed under the Act, a Voluntary Committee was also re-formed in 1921 to look after the social interests of the blind, and to give temporary assistance both monetary and otherwise, which would not be provided under the Act.

This Committee has undertaken individual social visiting and entertainments have been given. It is influential and active.

At the Free Library there are books in Braille which are changed as required, but the Council makes a grant to the National Lending Library for the Blind in London, and it has been found more convenient to change books direct. Of the Eastbourne blind, 18 can read Braille, and arrangements are made to teach others if required. Miss Ainsworth kindly teaches Braille.

During the year the Council allowed 31 of the blind free 'bus tickets and free chair tickets for the Parade.

Home teaching was definitely arranged towards the close of 1925 by sharing the services of a trained sighted teacher with East Sussex. Eastbourne uses half her time. She commenced duties in December, so that it is too early to report on the result, but at the beginning of March the sighted teacher, Miss Hewitt, had 13 pupils learning raffia work, basket work, rug work and other similar work. At present the pupils' work has not much saleable value, but this is increasing and the work will not be merely a pastime.

Members of the Voluntary Committee kindly teach, as well as visit, especially Braille.

In July and August a blind teacher gave paid help, but this was found incomplete, and it is hoped the definite appointment of a sighted teacher has put the teaching that is possible on a firm basis.

Two of the Eastbourne blind are on the Home Training Scheme of the National Institute for the Blind and 5/-weekly is contributed by the Council in respect of each.

One blind ex-soldier is connected with St. Dunstan's Scheme.

Sometimes persons with defective eyesight are disappointed at not being classed as Blind Persons for pensions purposes. The principle laid down in the following extract from the 1915 Report of the Royal Society of Medical Section of Ophthalmology is the one used in the determination as to "blindness":—

"Experience shows that persons whose acuity of

vision (refractive error being corrected) is below onetwentieth of the normal (3/60 Snellen) are usually unable to perform work requiring eyesight while persons with vision better than one-tenth (6/60 Snellen) are usually able to perform such work. Persons with intermediate degrees may or may not be able."

There are special cases which may have to be decided upon beyond this principle.

The Report for 1925-6 of the Voluntary Committee shows an expenditure for the year of £102 13s. 10d. One of its most useful features is supplementary pensions, mainly small sums, but making for increased comfort for the blind.



County Borough of Lastbourne.

Chart shewing the principal Meteorological Conditions during each day of the year 1925.

