[Report 1938] / School Medical Officer of Health, Exeter.

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Exeter (England). City Council.

Publication/Creation

1938

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City and County of the City of Exeter.

ANNUAL REPORT

For 1938,

VITAL STATISTICS,

SANITARY WORK, ETC.,

BY

G. B. PAGE, M.D., D.P.H.,

Medical Officer of Health.

EXETER:

F. E. RADDAN & SON, LTD., COOMBE STREET.

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1939.

I have the honour to present to the Right Worshipful the Mayor, Aldermen, and Councillors of the City of Exeter my Annual Report for the year 1938.

G. B. PAGE.

CITY AND COUNTY OF THE CITY OF EXETER.

Public Health Committee.

MAYOR—

COUNCILLOR R. J. REW.

CHAIRMAN—

ALDERMAN J. S. S. STEELE-PERKINS, J.P.

DEPUTY CHAIRMAN—

ALDERMAN R. M. CHALLICE, J.P.

Alderman J. R. NETHERCOTT	Councillor H. GATER.
Alderman W. HEALE.	Councillor G. C. HEYWOOD.
Councillor W. T. BAKER.	Councillor B. S. MILLER.
Councillor W. W. BEER.	Councillor Mrs. E. W. REED.
Councillor P. F. BROOKS.	Councillor J. D. SEWARD.
Councillor G. G. DAW.	Councillor Mrs. E. E. TINKHAM

Town Clerk—C. J. NEWMAN, ESQ.

Maternity and Child Welfare Committee.

CHAIRMAN—

COUNCILLOR MRS. E. E. TINKHAM.

DEPUTY CHAIRMAN—

ALDERMAN F. H. TARR, J.P.

Ald. J. S. S. STEELE-PERKINS, J.P.	*Non-Members of the Council :*
Councillor G. G. DAW.	Lady DAVY.
Councillor H. GATER.	Mrs. DEPREE.
Councillor R. G. SAUNDERS.	Mrs. MILLER.
Councillor J. W. ACKROYD.	Mrs. PICKARD.
Councillor L. A. GROSE.	Mrs. SMITH, J.P.

STAFF.

PUBLIC HEALTH OFFICERS OF THE AUTHORITY.

(*a*) **Medical.**

Medical Officer of Health, School Medical Officer, Chief Tuberculosis Officer, Medical Officer to the Mental Deficiency Committee, and Medical Superintendent of the Isolation Hospital and Honeylands Children's Sanatorium.

G. B. PAGE, M.D., D.P.H.

Deputy Medical Officer of Health and Clinical Tuberculosis Officer.

M. MACGREGOR, M.D., D.P.H.

Assistant Medical Officer of Health and Assistant School Medical Officer.

JESSIE SMITH, M.B., Ch.B., D.P.H.

Medical Officer, City Hospital. (Temporary).

S. J. P. GRAY, M.A., M.B., F.R.C.S.E.

Venereal Disease Medical Officer.

†P. D. WARBURTON, M.R.C.S., L.R.C.P., D.P.H.

Medical Officer, Ante-Natal Clinic.

†BERTHA HINDE, M.R.C.S., L.R.C.P., M.B., B.S.

Medical Officer, Northern Infant Welfare Centre.

†H. TEMKIN, M.R.C.S., L.R.C.P., M.B., B.S.

Dental Surgeon.

†G. V. SMALLWOOD, L.D.S. Eng.

Assistant Dental Surgeon.

C. A. REYNOLDS, L.D.S. Eng. (From 1-9-38).

District Medical Officers under the Public Assistance Committee.

†No. 1 District. C. W. Marshall, M.D., M.R.C.S., L.R.C.P.
†No. 2 District. G. S. Steele-Perkins, M.A., M.B., B.Ch., M.R.C.S., L.R.C.P.
†No. 3 District. J. R. Bradshaw, M.A., M.B., B.Ch., B.A.O.
†No. 4 District. J. C. Heal, M.B., Ch.B., M.R.C.S., L.R.C.P.

Public Vaccinator.

S. J. P. Gray, M.A., M.B., F.R.C.S.E.

(*b*) **Others.**

Chief Sanitary Inspector and Officer under the Food and Drugs Adulteration Act, etc.

Arthur E. Bonham.
Medaille d'Honneur en Vermeil, F.S.I.A., F.R.S.I.,
Cert. London Sanitary Inspectors' Exam. Board,
Cert. Royal Sanitary Institute,
Cert. Royal Sanitary Institute, Meat and Foods, etc.

Deputy Sanitary Inspector.

A. E. Trounson.	Cert. R. San. Inst.

Assistant Sanitary Inspectors.

T. Coates.	Cert. R. San. Inst.
G. E. Borlace.	Cert. R. San. Inst., Meat and Foods.
A. C. Lewis.	
H. R. Ambrose.	

Veterinary Surgeon.

†H. MacDonald, F.R.C.V.S.

Public Analyst.

†T. Tickle, B.Sc.

Vaccination Officer.

E. S. Howells.

Health Visitors.

Miss C. A. KNUCKEY,
C.M.B. and Cert. R. San. Inst. for Health Visitors.

Miss B. M. KNUCKEY,
C.M.B. and Cert. R. San. Inst. for Health Visitors.

Miss M. M. FOY,
General Training, C.M.B., Cert. R. San. Inst. for Health Visitors issued by Ministry of Health.

Miss D. HICKSON,
General Training, C.M.B.

Miss G. LUNN.
General Training, C.M.B., Cert. R. San. Inst. for Health Visitors issued by Ministry of Health, R.S.C.N.

Miss A. H. EDDS,
General Training, C.M.B., Cert. R. San. Inst. for Health Visitors issued by Ministry of Health.

Miss E. ELY.
General Training, C.M.B., Cert. R. San. Inst. for Health Visitors issued by Ministry of Health. (From 26-4-38 to 3-12-38).

Tuberculosis Dispensary Nurse.

Miss E. K. SHEPPARD, S.R.N.

Matron of Isolation Hospital.

Miss R. E. A. HUTTY, A.R.R.C.

Matron of Tuberculosis Children's Sanatorium.

Miss F. JONES.

Clerks.

E. S. HOWELLS (Chief Clerk).
C. A. MERRICK.
H. TUCKER (Tuberculosis Clerk).
Miss G. ROOKE, Miss S. R. TAYLOR } Maternity and Child Welfare Clerks.
E. W. H. ELLCOMBE.
R. W. STILES.
R. J. BARKER.
C. G. SEAMARK.

† Denotes part-time Officers.

CONTENTS.

CONTENTS.—*Continued.*

ANNUAL REPORT, 1938.

General Statistics.

1.	Area (acres)	4,718.578
2.	Population (as given by the Registrar-General)	69,160
3.	Number of Inhabited Houses (1931)	15,686
4.	Number of Inhabited Houses (end of 1938) according to Rate Books	18,250 (estimated)
5.	Number of Families or Separate Occupiers (1931 Census)	17,025
6.	Rateable Value	£693,540
7.	Sum represented by a Penny Rate	£2,747

Vital Statistics.

		Total	M.	F.	
Live Births	Legitimate	960	456	504	*Birth Rate per* 1,000 *of the estimated resident population* 14.6
	Illegitimate	50	28	22	
Stillbirths		48	26	22	*Rate per* 1,000 *total (live and still) births.* 45.3.
Deaths		888	454	434	*Death Rate per* 1,000 *of the estimated resident population* 11.1

Deaths from puerperal causes (Headings 29 and 30 of the Registrar General's Short List) :—

	Deaths		*Rate per* 1,000 *total (live and still) births.*
No. 29 Puerperal sepsis	1		0.9
No. 30 Other puerperal causes	0		0.0
Total	1	Rate	0.9

Death-rate of Infants under one year of age :—

All infants per 1,000 live births	56.4
Legitimate infants per 1,000 legitimate live births	55.2
Illegitimate infants per 1,000 illegitimate live births	80.0
Deaths from Measles (all ages)	2
,, ,, Whooping Cough (all ages)	3
,, ,, Diarrhoea (under 2 years of age)	5

BIRTH RATE.

The population for the Birth Rate is 69,160.

The total number of births in Exeter in the year 1938 was 1,010 divided as follows :—484 males, and 526 females.

The Birth Rate is the number of births per 1,000 of the population. The Birth Rate for 1938 was therefore, 14.6, being 0.5 above that of last year, 0.5 below that of England and Wales, and 0.4 below that of the 126 Great Towns in which Exeter is classed.

The following table gives the Birth Rate and percentage of illegitimate births to total births for the past 10 years :—

Year.	1929	1930	1931	1932	1933	1934	1935	1936	1937	1938
England and Wales	16.3	16.3	15.8	15.3	14.4	14.8	14.7	14.8	14.9	15.1
Exeter	15.7	15.2	14.2	14.3	13.9	15.05	14.3	13.3	14.1	14.6
Percentage of Illegitimate Births to total births	6.6	5.6	5.03	4.6	5.8	6.07	6.1	4.8	4.8	4.9

DEATH RATE.

The population for Death Rate is 69,160.

The total number of deaths registered as occurring during the year 1938, was 888, divided as follows :—454 males and 434 females.

The Death Rate is the number of deaths per 1,000 of the population. The crude Death Rate for 1938 was 12.8 and the corrected Death Rate 11.1.

CORRECTED DEATH RATE.

In order that the Death Rate of various places may be fairly compared, it is essential to correct the Death Rate for age and sex distribution. To correct a Death Rate for age and sex distribution, the Registrar General has published tables giving factors by which the Death Rate has to be multiplied. The factor for Exeter is .87, and the corrected Death Rate is therefore, 11.1. Below is a table giving the corrected Death Rate fer the past 10 years :—

Year.	1929	1930	1931	1932	1933	1934	1935	1936	1937	1938
England and Wales	13.4	11.4	12.3	12.0	12.3	11.8	11.7	12.1	12.4	11.6
Exeter	11.5	10.04	10.8	9.8	10.7	10.00	10.3	11.3	11.1	11.1

Following is an analysis of the deaths for the various ages together with the cause of death :—

Causes of Death.	Sex	All Ages	0—	1—	2—	5—	15—	25—	35—	45—	55—	65—	75—
All Causes	M	454	36	2	10	2	9	20	16	54	76	109	120
	F	434	21	3	2	6	9	12	20	37	61	102	161
1. Typhoid and para-typhoid fevers	M	—	—	—	—	—	—	—	—	—	—	—	—
	F	2	—	—	—	—	—	—	2	—	—	—	—
2. Measles	M	1	—	—	1	—	—	—	—	—	—	—	—
	F	1	—	1	—	—	—	—	—	—	—	—	—
3. Scarlet fever	M	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
4. Whooping cough	M	1	1	—	—	—	—	—	—	—	—	—	—
	F	2	2	—	—	—	—	—	—	—	—	—	—
5. Diphtheria	M	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
6. Influenza	M	3	—	—	—	—	—	—	—	2	1	—	—
	F	3	1	—	—	—	—	—	—	—	—	1	1
7. Encephalitis lethargica	M	2	—	—	—	—	—	—	—	2	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
8. Cerebro-spinal fever	M	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
9. Tuberculosis of respiratory system	M	27	—	—	—	—	1	9	4	6	4	3	—
	F	16	—	—	—	2	5	3	2	1	3	—	—
10. Other tuberculous diseases	M	7	1	—	2	1	2	—	—	1	—	—	—
	F	3	—	1	—	—	—	—	—	1	—	—	1
11. Syphilis	M	1	—	—	—	—	—	—	—	—	1	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
12. General paralysis of the insane, tabes dorsalis	M	1	—	—	—	—	—	—	—	—	1	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
13. Cancer, malignant disease	M	47	—	—	—	—	—	2	2	8	12	17	6
	F	74	—	—	—	—	—	1	5	12	22	16	18
14. Diabetes	M	7	—	—	—	—	—	—	—	—	2	2	3
	F	5	—	—	—	—	—	—	—	—	1	1	3
15. Cerebral haemorrhage, etc.	M	29	—	—	—	—	—	—	—	2	6	14	7
	F	32	—	—	—	—	—	—	—	5	2	15	10
16. Heart disease	M	109	—	—	1	—	—	—	3	7	22	32	44
	F	131	—	—	—	—	—	1	2	4	13	39	72
17. Aneurysm	M	2	—	—	—	—	—	—	—	—	2	—	—
	F	2	—	—	—	—	—	—	—	1	1	—	—

Causes of Death.	Sex	All Ages	0—	1—	2—	5—	15—	25—	35—	45—	55—	65—	75—
18. Other circulatory diseases	M	18	—	—	—	—	—	—	—	2	6	4	6
	F	25	—	—	—	—	1	—	—	1	3	6	14
19. Bronchitis	M	13	2	—	1	—	—	—	—	—	—	3	7
	F	9	—	—	—	—	—	—	—	1	2	1	5
20. Pneumonia (all forms)	M	37	6	2	1	—	1	2	1	7	2	9	6
	F	21	4	1	2	2	—	—	3	—	2	1	6
21. Other respiratory diseases	M	7	—	—	—	—	—	1	1	3	1	1	—
	F	2	—	—	—	1	—	—	—	—	—	—	1
22. Peptic ulcer	M	5	—	—	—	—	—	—	—	2	2	1	—
	F	3	—	—	—	—	—	—	—	1	1	1	—
23. Diarrhoea, etc.	M	3	2	—	—	—	—	—	—	—	—	—	1
	F	3	3	—	—	—	—	—	—	—	—	—	—
24. Appendicitis	M	1	—	—	1	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
25. Cirrhosis of liver	M	3	—	—	—	—	—	—	—	1	2	—	—
	F	1	—	—	—	—	—	—	—	—	1	—	—
26. Other diseases of liver, etc.	M	3	—	—	—	—	—	—	—	—	—	1	2
	F	3	—	—	—	—	—	—	—	—	1	—	2
27. Other digestive diseases	M	10	1	—	1	—	—	—	1	—	3	3	1
	F	6	1	—	—	—	1	—	—	1	1	1	1
28. Acute and chronic nephritis	M	15	—	—	—	—	—	—	2	3	2	5	3
	F	17	—	—	—	—	—	—	2	4	1	7	3
29. Puerperal sepsis	F	1	—	—	—	—	—	1	—	—	—	—	—
30. Other puerperal causes	F	—	—	—	—	—	—	—	—	—	—	—	—
31. Congenital debility, premature birth, malformation, etc.	M	21	21	—	—	—	—	—	—	—	—	—	—
	F	11	10	—	—	—	—	—	1	—	—	—	—
32. Senility	M	9	—	—	—	—	—	—	—	—	—	1	8
	F	14	—	—	—	—	—	—	—	—	—	1	13
33. Suicide	M	6	—	—	—	—	—	1	—	2	—	1	2
	F	4	—	—	—	—	—	2	1	—	—	1	—
34. Other violence	M	15	1	—	1	1	1	3	—	2	1	2	3
	F	5	—	—	—	—	1	1	—	—	1	—	2
35. Other defined diseases	M	49	1	—	1	—	4	2	2	4	6	10	19
	F	38	—	—	—	1	1	3	4	3	6	11	9
36. Causes ill-defined, or unknown	M	2	—	—	—	—	—	—	—	—	—	—	2
	F	—	—	—	—	—	—	—	—	—	—	—	—

INFANTILE MORTALITY.

The Infantile Mortality Rate is the number of deaths under one year per 1,000 births. There were 57 deaths under one year, and this gives an Infantile Mortality Rate for the year 1938 of 56.4 (legitimate 55.2, illegitimate 80.0), as compared with 56.1 for the previous year.

The Infantile Mortality Rates for the year 1938 were as follows :—

England and Wales	53
126 Great Towns, including London (census populations exceeding 50,000)	57
148 Smaller Towns (census populations 25,000—50,000)	51
London	57
Exeter	56

The following table shows the Infantile Mortality Rate in Exeter for the past ten years.

Year.	1929	1930	1931	1932	1933	1934	1935	1936	1937	1938
England and Wales	74	60	66	65	64	59	57	59	58	53
Exeter	53.2	49.7	56.7	53.6	47.8	55.8	33.6	62.3	56.1	56.4

DEATHS UNDER ONE YEAR.

Cause.	Under 1 month	1 to 3 months	3 to 6 months	6 to 9 months	9 to 12 months	Total.
Tuberculosis	—	—	—	1	—	1
Whooping Cough	—	—	1	2	—	3
Pneumonia	2	1	1	4	2	10
Bronchitis	—	—	—	2	—	2
Diarrhoea	—	2	3	—	—	5
Influenza	—	—	1	—	—	1
Convulsions	—	—	—	1	—	1
Misadventure	1	—	—	—	—	1
Congenital Debility, Premature Birth, Malformation, etc.	29	2	—	—	—	31
Other defined Diseases	—	1	—	—	1	2
Total	32	6	6	10	3	57

The following composite table is reproduced as it gives more valuable information than figures for a single year :—

Year.	Maternal Deaths.	Mortality Rate.	Neo-natal Deaths.	Infantile Mortality Deaths.	Infantile Mortality Rate.
1929	3	3.07	25	52	53.2
1930	5	4.2	21	47	49.7
1931	0	0	30	53	56.7
1932	3	3.02	35	51	53.6
1933	3	3.07	23	45	47.8
1934	3	2.8	27	57	55.8
1935	1	0.9	25	33	33.6
1936	2	2.09	29	57	62.3
1937	1	0.9	34	55	56.1
1938	1	0.9	32	57	56.4

According to the Registrar General, the population is nearly stationary, being actually 80 less than the estimated population for 1937. The number of inhabited houses has only increased by 150, there being a slackening of the rate observed during recent years.

The Death Rate is the same as in 1937. The recorded deaths include 2 from enteric fever against 5 the previous year. There were 2 deaths from measles and 3 from whooping cough ; once again there were no deaths from scarlet fever or diphtheria. The tuberculosis death rate (all forms) is up at 0.76 per 1,000 population against 0.69 in 1937 and 1936, this is the highest rate recorded since 1933 when it was 0.81.

Exeter has again a favourable maternal mortality rate.

The Birth Rate rose in 1937 and has again risen during 1938, being 14.6. The lowest rate experienced during the past ten years was 13.3 in 1936. At the beginning of the decade it was 15.7. Infantile mortality is more or less stationary at 57. More than half of these deaths were neo-natal, that is to say, they occurred within the first 28 days of life, and were attributable to causes arising before or during birth. Nothing illustrates more clearly the need for good ante-natal and midwifery services than our continued inability to reduce this portion of the infantile

mortality rate. A good deal of attention is given to the expectant mother to-day, but are we giving sufficient attention to the expected child?

Apart from the 32 neo-natal deaths, only 4 of the remaining 25 occurred in breast-fed babies, and only 7 out of the whole 57 regularly attended the Child Welfare Centres. It is hoped that the increased staff of Health Visitors provided by the Council will play an important part in helping and educating mothers, and bringing them to the Centres.

HOSPITALS.

Name.	Situation.	Purpose.	Beds available.	Proportion used by residents outside area.	Management.
Tuberculosis Wards, Isolation Hospital	Whipton	Pulmonary cases	19 male and 12 female	—	See Isolation Hospital
Honeylands Tuberculosis Children's Sanatorium	Whipton	Tuberculosis in children (School)	10 male and 10 female	—	Public Health Cte. Staff— Medical-M.O.H. Nursing- Matron, 2 Nurses
Isolation Hospital	Whipton	Infectious Disease cases	78 beds and 10 cots for fevers and 31 beds for Tuberculosis (see page 60)	By agreement with 16 Local Authorities and other Bodies in the County of Devon, their cases are admitted to the Isolation Hospital which is capable of expansion in times of necessity.	Public Health Committee. Staff— Medical— M.O.H. Nursing— Matron 1 Sister 2 Staff Nurses 2 Asst. Nurses 8 Probationers
Municipal Maternity Home, City Hospital	Heavitree Road	Maternity cases	6	—	Maternity and Child Welfare Committee Staff— See City Hospital.
Royal Devon and Exeter Hospital	Southern-hay	General	Total beds 280 Children's beds 46	City cases 1,799 From outside areas 2,493	Voluntary

HOSPITALS.—Continued.

Name.	Situation.	Purpose.	Beds available.	Proportion used by residents outside area.	Management.
West of England Eye Infirmary	Magdalen Street	Eye cases	55 including 17 for children	City cases 1620 From outside areas 2480	Voluntary
City Hospital	Heavitree Road	General—largely senility	134 and 5 cots	—	Public Assistance Committee. Staff—Medical—1 (non-resident) Nursing—Matron 15 Nurses 8 Nurse Attns.
The Princess Elizabeth Devonian Orthopaedic Hospital	Buckerell Bore	Orthopaedic cases	70, including 54 for children	City cases 80 From outside areas, 416	Voluntary
Gladstone Nursing	Gladstone Road	Medical and surgical	20	—	Public Assistance Committee. Staff—Medical—Own Doctor Nursing—(see City Hospital)

NUMBER OF BEDS AVAILABLE FOR :—

	Male.	Female.	Institution.
General Medical	60		Royal Devon & Exeter Hosptl.
General Surgical	144		do. do.
Children	10	— 10	Honeylands Children's Sanatorium.
	46		Royal Devon & Exeter Hosptl.
	12		City Hospital
Maternity	—	10	Royal Devon & Exeter Hosptl.
	—	6	Municipal Maternity Home
Venereal Diseases	5		Royal Devon & Exeter Hosptl. jointly with Devon C.C.
	—	6	St. Mary's Home
Tuberculosis	19	— 12	Tuberculosis Wards, Exeter Isolation Hospital
Chronic Sick	24		Ernsborough Home--House for Incurables
Mental	384		Exeter Mental Hospital
Mental Deficiency	12	— 12	City Hospital, also varying number of beds at Royal Western Counties Institution, Starcross
Orthopaedic	—		As required at Orthopaedic Hospital (deformities and surgical tuberculous children)
Ear, Nose and Throat	15		Royal Devon & Exeter Hosptl.
Puerperal Pyrexia	—		As required at Royal Devon & Exeter Hospital.
Ophthalmia Neonatorum	—		Treated by arrangement at Eye Infirmary

INSTITUTIONAL PROVISION FOR UNMARRIED MOTHERS, ILLEGITIMATE INFANTS AND HOMELESS CHILDREN.

Name.	Address.	Accommodation.
St. Olave's Maternity Home	32, Bartholomew Street, East	17 Beds for unmarried mothers
St. Mary's Home	25, Mary Arches St.	6 Beds for female V.D.
St. Elizabeth's Home (Home of Refuge)	Melbourne House, Holloway Street	6 Beds for girls in temporary difficulties or from Police Court
Dr. Barnardo's Home for Girls	Feltrim, Topsham Road	67 Beds
St. Lawrence's Home for Waifs and Strays	Polsloe Road	30 Beds

---

AMBULANCE FACILITIES.

(*a*) For infectious diseases :—

Two motor ambulances.
One horse discharging cab.
One horse ambulance in reserve.
} Provided by the Council.

(*b*) For non-infectious cases and accidents :—

Three motor ambulances provided by St. John's Ambulance Association. The Council contributes £300 per annum. The provision has proved adequate for the needs of the City and surrounding district.

CLINICS AND TREATMENT CENTRES.

Name.	Address.	When Held.	Arrangements for Medical Supervision.	Whether provided by the Council or not.
Central Child Welfare Centre	Alice Vlieland Child Welfare Centre	Weekly on Tuesdays at 2.30	Dr. J. Smith, Asst. M.O.H.	Yes.
Western Child Welfare Centre	Buddle Lane	Weekly on Fridays at 2.30	Dr. J. Smith, Asst. M.O.H.	Yes.
Eastern Child Welfare Centre	Shakespeare Road, Burnthouse Lane	Weekly on Wednesdays at 2.30	Dr. G. B. Page M.O.H.	Yes.
Northern Child Welfare Centre	Alice Vlieland Child Welfare Centre	Weekly on Fridays at 2.30	Dr. H. Temkin	Yes.
Impetigo School Clinic	1a, West Southernhay	Daily at 9.30	S.M.O.	Yes.
Ringworm School Clinic	Do.	Do.	Do.	Yes.
Scabies School Clinic	5 Southernhay, W.	When required	Do.	Yes.
Diseases of Ears and Eyes School Clinic	1a, West Southernhay	Daily at 9.30 a.m.	Do.	Yes.
Treatment Centre for Tonsils & Adenoids Operations	City Hospital	When required	Private Practitioner	By agreement with the Public Assistance Committee
Treatment Centre for Errors of Refraction (including Squint) and other defects or disease of the eyes, not treated at Daily Clinic, 1a W. Southernhay	Eye Infirmary Magdalen St.	Mondays and Tuesdays at 10 a.m.	Eye Infirmary Staff	By agreement with the Eye Infirmary Committee
Tuberculosis Dispensary	1, West Southernhay	Daily from 9 to 5.30 (except Sats. 9 to 12.30)	Dr. M. MacGregor Clinical T.O.	Yes.
Venereal Disease Clinic	Royal Devon and Exeter Hospital	MEN. Mondays, 3 to 5 Fridays, 6 to 8 WOMEN. Fridays, 3 to 5	Dr. P. D. Warburton	Yes, jointly with the Devon County Council
Cleansing Station	5 Southernhay, W.	When required	M.O.H.	Yes.
Orthopaedic Clinic	Alice Vlieland Child Welfare Centre	Twice a month	Orthopaedic Surgeon	In conjunction with Devon County Council
Ante-Natal Clinic	Alice Vlieland Child Welfare Centre	Weekly on Mondays at 2.30 p.m.	Dr. B. Hinde	Yes.

PUBLIC ASSISTANCE MEDICAL SERVICES.

The City is divided into four districts which correspond with the areas used for Child Welfare and other Health Work. The following medical practitioners are District Medical Officers on a part-time basis.

No. 1 District (Northern)	Dr. C. W. Marshall.
No. 2 District (Central)	Dr. G. Steele-Perkins.
No. 3 District (Eastern)	Dr. J. R. Bradshaw.
No. 4 District (Western)	Dr. J. C. Heal.

Domiciliary nursing services are provided free for all poor persons by arrangements with the District Nursing Association.

The Town Clerk is Public Assistance Officer and the Medical Officer of Health is Medical Adviser to the Public Assistance Committee.

I am indebted to the Public Assistance Officer for the following figures :—

Number of persons in receipt of out-relief (excluding medical relief only) :—

Men	157
Women	302
Children	223
Total	682

Inmates of the City Hospital :—

Number in Hospital, 1.1.38	241
Number of admissions during the year	462
Number in Hospital, 31.12.38	226

Children's Home :—

Number in Home, 1.1.38	62
Number of admissions during the year	63
Number in Home, 31.12.38	57

BLIND PERSONS ACT, 1920.

Number on Register, 1st January, 1938	218
Since added	22
Died, transferred, removed, etc.	21
Number on Register, 31st December, 1938	219

The age and sex of those certified during the year was as follows :—

Age	*Male.*	*Female.*
0—1	—	—
1—	—	—
2—	—	1
5—	1	—
15—	—	—
25—	—	—
35—	1	—
45—	—	—
55—	1	5
65—	1	6
75 and upwards	3	3
	7	15

Fourteen cases were also examined, in addition to the above with the following results :—

	Male.	*Female.*
Certificate confirmed	2	3
Placed under observation	2	1
Not certifiable	3	3
	7	7

PROFESSIONAL NURSING IN THE HOME.

(*a*) General.

The Exeter Maternity and District Nursing Association provides nurses who visit patients daily for nursing, dressings, etc., for which payment is required according to the means of the patient.

Trained nurses from the Royal Devon and Exeter Hospital and private institutions.

(*b*) For Infectious Diseases.

The Royal Devon and Exeter Hospital provides nurses for fever cases, as also do the private institutions.

The Local Authority makes a grant of £150 per annum to the Exeter Maternity and District Nursing Association to cover nursing services on behalf of the Public Health and Public Assistance Departments. The Association's nurses undertake the nursing of measles, whooping cough, and pneumonia, in addition to their general work.

MIDWIVES.

51 midwives notified their intention of practising in the City, 23 of whom were working in institutions or nursing homes. All were State Certified Midwives by examination, there being no midwives practising in the City by virtue of being in practice before the Act.

No disciplinary cases were reported to the Board.

LABORATORY WORK.

With the approval of the Ministry, all pathological and bacteriological work is now carried out at the Laboratory of the Royal Devon and Exeter Hospital, under the direction of Dr. W. A. Robb, with the exception of those examinations which are made at the Tuberculosis Dispensary.

In the City, the usual routine examinations are carried out free, but swabs from diphtheria contacts are only undertaken without charge if the Medical Officer of Health has been first consulted.

Examinations made :—

For diphtheria :—

(a) Primary investigations, including contacts			864
Positive	57		
Negative	807		
(b) Others			593
Positive	28		
Negative	565		

For Enteric Fever :—		
Widal		22
Positive	10	
Negative	12	
Blood culture		3
Positive	Nil	
Negative	3	
Faeces culture		67
Positive	9	
Negative	58	
Urine culture		47
Positive	Nil	
Negative	47	
For V.D. Department :—		
For detection of spirochetes		3
For detection of gonococci		142
For Wassermann re-action		282
Others		53
Total		480
For T.B., excluding examinations at Tuberculosis Dispensary, *q.v.*		
Sputum		53
Positive	11	
Negative	42	
Others		8
Miscellaneous Examinations :—		
Cerebro-spinal fluid		6
Others		14

LOCAL ACTS, ORDERS, ETC.

Adopted—

*Infectious Diseases (Prevention) Act, 1890.
P.H.A. (Amend) Act, 1890.
Museum and Gymnasium Act, 1891.
*Cleansing of Persons Act, 1897.
Public Library Acts.
*Baths and Washhouses Acts.
P.H.A. (Amend) Act, 1907 (all adopted 1909).
P.H.A. 1925, Part II. (except sections 20 and 34), and Parts III, IV and V.
Exeter Corporation Acts, 1928 and 1935.

BYE-LAWS AND REGULATIONS.

Houses let in Lodgings, 1924.
Public Abattoir, 1933.
Private Slaughterhouses, 1933.
Removal of Snow and Keeping of Animals, 1892.
Common Lodging Houses, 1902.
Prohibiting the Admission into the Cattle Market of Animals unfit for Food, 1911.
Building Bye-Laws, 1926.
Offensive Trades, 1926.
Nursing Homes, 1929.

* Repealed in whole or in part by P.H. Act, 1936.

SANITARY CIRCUMSTANCES OF THE AREA.

WATER.

The City water supply is derived from the River Exe and distributed by being pumped to service reservoirs. During the year, the alterations and extensions at the Water Works mentioned in previous reports have been practically completed. The extended works were opened officially by the Mayor on 8th July.

On this important occasion an illustrated brochure compiled by the City Surveyor was issued as a souvenir. The information contained therein is of considerable general and historical interest and is well worth repeating here.

Historical Note.

The history of the supply of water to the inhabitants of Exeter as a modern concern, might be said to begin in 1833, in which year the Exeter Water Company was empowered by Act of Parliament to erect water wheels, pumps and other machinery at Pynes, and to abstract water from the River Exe above Pynes Weir. The year before the passing of this Act there had been an outbreak of cholera in this country and in Exeter, following the disastrous cholera epidemic on the Continent in 1831, and this was mainly responsible for the promotion of the Parliamentary Bill, and the beginning of the modern system of supply from the Exe.

Early documents record that in 1694 a lease was granted to four of the inhabitants for 200 years to bring in water to the City and suburbs. The water was to be taken from the new Mill Leat near Exe Bridge and pumped to a cistern in a building behind the

Guildhall, called the Back Grate, and from there distributed to the City. This supply continued in use until the new works were constructed under the 1833 Act. In the 1833 Act is the proviso that " nothing in this Act shall extend or be construed to extend or empower the said Company to remove, raise, sink, alter, impede or injure the ancient watercourse belonging to the Mayor, Bailiffs and Commanalty of the said City of Exeter, which has been immemorially conveyed from its source in the Parish of St. Sidwell in the County of the City of Exeter to the conduit in South Street." This old supply was piped to fountains in various parts of the City and was still in use towards the end of the last century.

The first reservoir of reasonable storage capacity to be constructed by the Company was at Danes Castle to which water was pumped from Pynes.

In 1856 a new Intake was made on the Exe at North Bridge near Stoke Canon and water was conveyed by means of a 24-inch stoneware pipe to the pumps at Pynes. About the same time two filter beds were constructed at Danes Castle for purifying the supply from that reservoir before distribution to the City. In 1873 the Marypole Head Reservoir was constructed and water pumped to it from the reservoir at Danes Castle.

In 1877 the Corporation arrived at an Agreement with the Company for the purchase of the Undertaking, and in the following year an Act of Parliament promoted by the Corporation gave power to take over the Company and to supply water to the City and the neighbouring Parishes of Heavitree, St. Thomas the Apostle, Alphington and Pinhoe, and parts of the Parishes of St. David and St. Leonard.

The works acquired from the Company were not enlarged or developed in any degree until 1898 in which year extensive alterations were commenced. The Settling Tanks and Filter Beds were then constructed at Pynes and a new 30-inch diameter conduit laid down between the Intake and Pynes. The Intermediate Reservoir at Pennsylvania Park was constructed in 1902, and a 14-inch diameter pumping main laid to this reservoir from Pynes.

In 1924 the first pressure filtration plant was installed at Pynes and additional pumping machinery put down to meet the rapidly increasing consumption.

The Corporation Act of 1928 granted additional powers to the Undertaking and the Act of 1935, besides conferring further powers in relation to the Undertaking, extended the Water Supply Area to include the following Parishes : Brampford Speke, Clyst Honiton, Clyst St. Mary, Exminster, Huxham, Ide, Poltimore, Shillingford St. George, Sowton, Stoke Canon, Upton Pyne, and parts of the Parishes of Broadclyst and Topsham.

The new scheme for extending and improving the Waterworks was outlined in a report prepared at the direction of the City Water Committee by the City Engineer, Mr. R. H. Dymond, M.Inst.M. and Cy.E., and considered at a special meeting held on 18th October, 1933. The Engineer's proposals were adopted and the scheme received the approval of the Council on 24th October, 1933. The Ministry of Health Inquiry was held at the Guildhall on the 26th September, 1934, without opposition being raised in any particular to the proposed scheme. The provisional consent of the Minister was received on the 12th November, 1934, and, after the submission of revised estimates based on the tenders accepted, sanction was given to borrow the sum of £68,800, being the total estimated cost of the scheme.

New Scheme.

The works projected under the Extension Scheme comprised the installation of an additional 24 pressure filters ; the construction of a reservoir at Pynes for the storage of filtered water ; the construction of a high level reservoir at Barley Lane ; the duplication of the pumping main to the Intermediate Reservoir ; a new 9-inch rising main to the new reservoir at Barley Lane and a 6-inch trunk main for distributing the supply from this reservoir ; alterations to the River Intake ; the conversion of the slow sand filters into sedimentation tanks and the reconstruction of the existing settling tanks ; additional pumping machinery.

The method of collection and treatment under the new scheme is as follows : Water is abstracted from the River Exe near the point where the Great Western Railway crosses the river at Stoke Canon and conveyed a distance of 1½ miles by means of a 30-inch diameter pipe to the works at Pynes. Immediately before being discharged into the Sedimentation Basin, the water is to be treated with sulphate of alumina which will cause the bulk of the suspended matter to be deposited during the circulation of the water through the basins. This partially treated water is then subjected to a further, but smaller, dose of alumina and pumped through the pressure filters which completely remove all traces of turbidity from the water. After filtration, the sterilization of the supply is effected by means of chloramine treatment and a solution of lime water is added to restore the alkalinity of the supply. The purified water is then conveyed into the new storage reservoir and this in turn discharges the supply into a suction well from which the various pumps raise the supply into the City.

The Scheme may be represented briefly thus : River Exe → intake near Stoke Canon → pipe line to works → alumina treatment → sedimentation → further alumina treatment → pressure filters, consisting of 32 Bell mechanical filters in 8 batteries of 4 → sterilization by chloramine treatment → adjustment of alkalinity by added lime water → filtered water reservoir → service reservoir → mains and branch mains → consumer.

The total capacity of the works is about four million gallons per day.

The purity of the water is controlled by chemical analyses made at least quarterly and by frequent bacteriological analyses. During certain stages of the recent alterations, bacteriological analyses were made daily. These two forms of examination are complementary to one another and not alternative. Generally speaking bacteriological examination is the more likely to give early indication of anything unsatisfactory under ordinary circumstances. Both forms of examination are applied to water in the service reservoirs, and at various points in the City, as well as at the main filtered water reservoir at the works. Investigation of the raw water and surveys of the river are undertaken from time to time in collaboration with the officers of neighbouring local authorities.

Bacteriologically speaking, the filtered water invariably shows absence of bacillus coli and streptococci per 100 c.c. Each c.c. contains as a rule only two or three harmless saprophytes. The free chlorine in the filtered water at the works is usually in the neighbourhood of 0.2 parts per million ; it is still measurable though much diminished by the time the service reservoirs are reached, averaging 0.07 parts per million or less, and as a rule it cannot be detected by the time the water reaches the consumer.

Sterilization by chloramine, which has replaced sterilization by chlorine, is generally considered to be more satisfactory. Chloramine is a more persistent sterilizing agent than chlorine and in the long run is less likely to give rise to taste troubles.

During May and June a number of complaints about taste were received either by the City Surveyor or myself. The complaints mostly stated that the water had an earthy taste. There is no doubt that the water had an unpleasant taste at times during this period attributed, I think correctly, to the very low state of the river due to drought and the deficient aeration of the raw water. I am also of opinion that a considerable amount of new apparatus in circuit and the change over to chloramine were contributory factors, as both these things—change of system and new apparatus or pipes—are recognised causes of temporary taste troubles. Exeter water has been chlorine treated in one way or another for a good many years. Complaints of water-borne disease elsewhere will serve to bring home to citizens the necessity for this.

Both the City Surveyor and the Medical Officer of Health are officers of the Water Committee, and attend the Committee meetings. There is free exchange of information between these departments, and with the officials of the County Council which is the River's Pollution Authority for Devon. In addition, I would like to acknowledge the valuable services of Mr. W. H. Hoyle, B.Sc., of the Surveyor's Department ; he is responsible for most of the bacteriological work.

Owing to the operation of the Superannuation Scheme adopted by Exeter in 1924, the medical history, etc. of workmen permanently engaged in the water undertaking was known to the Medical Officer of Health. Special medical investigations are made as required. Recent events elsewhere have impressed water undertakers and their officers how necessary it is to take equal care in the matter of temporary workmen.

SWIMMING BATH.

Bacteriological examination of the water on various dates and at different times of the day shows that the purification plant has maintained a very satisfactory degree of purity. Better provision for swimming has received the attention of the City Council. Plans and estimates have been submitted to the Ministry of Health and have now been sanctioned.

DRAINAGE AND SEWERAGE.

The general system of sewers converges to the main outfall at Countess Weir. Here the sewage is treated by the activated sludge principle and the effluent passed into the river which is tidal at this point. The effluent continues to be satisfactory. The sludge is further treated in sludge digestion tanks, dried and ultimately buried or sold as fertiliser. The sludge has a good manurial value, and sales have increased.

As noted in the Annual Report for 1937 there were complaints of serious nuisance during August of that year. Following a recommendation of the Ministry of Health, an independent expert observer was engaged to advise the City Council.

Mr. J. H. Garner, B.Sc., F.I.C., was engaged and submitted a preliminary report which came before the City Council 28th July, 1938.

Mr. Garner reported that the Sewage Disposal works were properly constructed, efficiently managed and in a satisfactory condition generally. Considering the extent of the works they were remarkably free from odours of any description, and that the possibility of nuisance under ordinary weather conditions, such as he had experienced, was remote.

The report went on to say that Exeter sewage had certain peculiarities—readily undergoing decomposition with a tendency to develop sulphuretted hydrogen. The time taken for the sewage to flow through the long main sewer to the works, and warm weather conditions (especially the latter) were both factors favourable to this decomposition.

Mr. Garner endorsed the steps already taken by the City Council to deal with this tendency in the sewage by chlorination, and suggested additional chlorinating plant at certain strategic points. These recommendations have been carried out.

The particular weather conditions obtaining in August, 1937, have not recurred.

Mr. Garner is continuing his observations.

HOUSE REFUSE.

This is dealt with by controlled tipping on two sites. No nuisance has arisen.

The provision and maintenance of proper dust-bins continues to receive attention.

SANITARY INSPECTION OF THE AREA.

STATEMENT OF CHIEF SANITARY INSPECTOR.

HOUSES AND PREMISES.

Number Inspected upon Complaint	412
Number of Defective Yards paved	18
Number of Defective Eaves and Gutters Rectified	11
Number of Walls, Floors and Ceilings Repaired	48
Number of Roofs Repaired	21
Number of Rooms cleansed and Limewashed	24

BATHS, LAVATORIES AND SINKS.

Number of Glazed Sanitary Sinks Provided	18
Number of Waste Pipes Trapped	20

WORK IN PROGRESS.

Number of visits made thereto	8513

DRAINS.

Number of Smoke Tests made	214
Number of Water Tests made	147
Number Laid or Re-Laid or Repaired	62
Number Cleansed, Trapped and Ventilated	71
Number of Defective Bell and D Traps replaced by Stoneware Gullies	2
Number of Rainwater Pipes Disconnected	10

COURTS AND PASSAGES.

Number of Visits made thereto	273
Number Re-paved	1
Number Limewashed	—

WATER CLOSETS.

Number of Additional W.C.'s Provided or Reconstructed	8
Number Repaired, Ventilated, etc.	34
Number of Soil Pipes Repaired, Ventilated, or Reconstructed	14
Number of Flushing Apparatus Improved	18
Number Limewashed	18

DUST RECEPTACLES (PORTABLE).

Number of Visits	26
Number of New Dust Receptacles Provided	29

SLAUGHTER HOUSES.

Number of Visits to Public Abattoir.....	375
Number of Visits to Private Slaughterhouses	242
Number of Contraventions Found and Remedied	1

BAKEHOUSES.

Number Inspected	57
Number of Contraventions Found and Remedied	4

OUTWORKERS.

Number of Premises	37

DAIRIES, COWSHEDS AND MILKSHOPS.

Number of Inspections made	115
Number of Contraventions of Acts, Orders and Bye-laws dealt with	10

OFFENSIVE TRADES.

Number of Inspections made	41
Number of Contraventions Found and Remedied	—

FOOD.

Number of Preparation and Storage Premises Visited	355
Number of Defects Discovered and Remedied	2

ANIMALS KEPT SO AS TO BE A NUISANCE.

Number of Cases Abated	10

ACCUMULATION OF OFFENSIVE REFUSE.

Number of Removals	20
Number of Dung-Pits Provided or Re-modelled	—

MEETINGS OF OWNERS.

Number of Interviews and Appointments Kept	234

MENTAL DEFECTIVES.

Enquiries and Visits made to Male Defectives	188

RATS AND PESTS.

Enquiries and Visits	277

MERCHANDISE MARKS ACTS.

Inspections are Made during Visits to Food Shops and Stores.

FACTORIES ACT, 1937.

1.—Inspections for purposes of provisions as to health, including inspections made by Sanitary Inspectors.

Premises. (1)	Number of		
	Inspections. (2)	Written Notices. (3)	Occupiers Prosecuted. (4)
Factories with mechanical power	427	3	—
Factories without mechanical power	148	—	—
†**Other Premises** under the Act (including works of building and engineering construction but not including outworkers' premises)	—	—	—
†Electrical Stations should be reckoned as factories. **Total**	575	3	—

2.—Defects found.

Particulars. (1)	Number of Defects.			Number of defects in respect of which Prosecutions were instituted (5)
	Found. (2)	Remedied. (3)	Referred to H.M. Inspector (4)	
Want of cleanliness (S.1)	7	7	—	—
Overcrowding (S.2)	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—
Inadequate ventilation (S.4)	—	1	—	—
Ineffective drainage of floors (S.6)	—	—	—	—
Sanitary Conveniences (S.7) insufficient	—	2	—	—
Sanitary Conveniences (S.7) unsuitable or defective	3	5	—	—
Sanitary Conveniences (S.7) not separate for sexes	—	—	—	—
Other Offences — .... (Not including offences relating to Home Work or offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921, and re-enacted in the Third Schedule to the Factories Act, 1937.)	—	—	—	—
Total	10	15	—	—

OUTWORK IN UNWHOLESOME PREMISES.

SECTION 108.

Nature of Work. (1)	Instances. (2)	Notices served. (3)	Prosecutions (4)
Wearing Apparel—			
Making, &c.			
Cleaning and Washing			
Household linen			
Lace, lace curtains and nets			
Curtains and furniture hangings			
Furniture and upholstery			
Electro-plate			
File making			
Brass and brass articles			
Fur pulling			
Cables and chains			
Anchors and grapnels			
Cart gear			
Locks, latches and keys			
Umbrellas, etc.			
Artificial flowers			
Nets, other than wire nets			
Tents			
Sacks			
Racquet and tennis balls			
Paper, etc., boxes, paper bags			
Brush making			
Pea picking			
Feather sorting			
Carding, &c., of buttons, &c.			
Stuffed toys			
Basket making			
Chocolates and sweet meats			
Cosaques, Christmas crackers, Christmas stockings, etc.			
Textile weaving			
Lampshades			
Total	Nil	Nil	Nil

Housing Acts.

Houses inspected—(*a*) under Regulations	122
(*b*) on Complaint	82
Tenements, cleansed, whitewashed, etc.	48
Floors relaid or repaired	116
Walls, ceilings, etc., repaired	297
Roofs repaired or reconstructed	81
Stairs and doors repaired	95
Windows provided to rooms	43
Windows of rooms made to open	20
Windows of rooms repaired, etc., and sash cords renewed	120
Yards repaved or repaired	42
Drains reconstructed	44
Drains repaired	23
Defective or insufficient eaves, gutters or rainwater pipes	56
Bell or D traps replaced with stoneware gullies	1
Scullery troughs and baths provided	62
Waste pipes trapped	48
Water closets provided	13
Water closets repaired, etc.	38
Water closets reconstructed	13
Defective water closet pans replaced with pans of wash-down pattern and flush improved	27
Flushing of water closets improved	9
Water closets provided with a window	4
Water closets limewashed	10
Coppers, stoves and grates repaired	55
Water taps provided on pipe direct from main	39
Rooms closed for use as bedrooms	—
Smoke tests	111
Water tests	144
Food Cupboards provided	33

SHOPS AND OFFICES.

The Shops Act, 1934, is administered by the Inspector of Weights and Measures. No reports relating to ventilation and temperature of shops and to sanitary circumstances have been received from him. As to the question of sanitary accommodation and other matters in offices, no complaints were received of any statutory nuisances therein.

CAMPING SITES.

There are no camping sites within the City area.

SMOKE ABATEMENT.

It is pleasing to record a definite improvement in the matter of black smoke emissions. No complaints were received, and only once was it necessary to visit the brickworks in Monk's Road in respect of a rather bad emission of black smoke from the chimney of side-fired kilns, which was found to be due to careless stoking.

HOUSES LET IN LODGINGS.

At the end of 1937 there were 55 of these houses on the register. Three were dealt with in the Lower North Street Clearance Area and one in Friar's Walk by Demolition Order. The remaining 51 were periodically inspected when such action as was necessary under the Bye-laws, was taken.

OFFENSIVE TRADES.

These remain the same as before, viz. :—

Tanner	1
Fat and bone boiler, cattle feeding stuffs and artificial manure works	1
Fat and bone boiler	1
Gut scraper	1

Complaints were received during the hot months of offensive smells from both fat boiling works which adjoin each other. At the larger works fumes from the steam digestors are discharged directly into water condensers, while at the smaller works where two open boiling vats are in use, the fumes are collected and discharged under the fire-box of a vertical boiler where destruction depends upon the condition of the fire.

These latter premises are held on lease from the City Council who, at the time of writing, is considering whether that part of the lease dealing with fat boiling and the reception upon the premises of fat and bones or any putrescible material shall be renewed or not.

The number of fish friers' premises on the register at the end of 1938 was 33. All were satisfactorily conducted and no complaints were received in respect of same.

SCHOOLS.

The conveniences and sanitary fittings were examined and such defects or deficiencies as were discovered were passed to the Secretary for Education and dealt with by him.

SLUM CLEARANCE.

The five-years programme of slum clearance prepared by the Public Health Committee involved the clearance of 500 of the worst type of unhealthy houses, at the rate of 100 each year.

Where possible, they were dealt with as Clearance Areas, Public Enquiries being held in respect of each. There were 33 such Areas and all were confirmed by the Minister of Health with minor modifications on legal grounds—interlocking—and only two dwelling-houses were excluded as being capable of restoration at reasonable expense. After 1934, by reason of an alteration in the law, it was not possible to include in Clearance Areas other buildings—stores, etc.—however dilapidated or insanitary.

Representations, re-housing and clearance proceeded according to schedule and resulted as follows :—

No. of houses in Areas demolished or awaiting demolition	376
No. of houses dealt with by Demolition Orders	116
No. of houses demolished after informal action	22
Total	514

The houses dealt with in 1938—included in the foregoing figures—are :—

In Clearance Areas	27
By Individual Demolition Orders	15
By informal action	14
	56

A CORNER OF LOWER NORTH STREET
CLEARANCE AREA.

HOUSING AND SLUM CLEARANCE.

Progress in this important work is clearly shown in the statement that follows :—

Year	HOUSES DEMOLISHED. Under Clearance Areas.	Under Individual Orders	Total	HOUSES ERECTED. (a) By City Council. No.	Situation.	(b) By Exeter Workmen's Dwellings Company. No.	Situation.	(c) By Church Army Housing, Ltd. No.	Situation.	Total.
1895		21	21	—	—	—	—	—	—	—
1896		7	7	—	—	—	—	—	—	—
1897		9	9	—	—	—	—	—	—	—
1898		10	10	—	—	—	—	—	—	—
1899		—	—	—	—	—	—	—	—	—
1900		34	34	—	—	—	—	—	—	—
1901		5	5	—	—	—	—	—	—	—
1902		5	5	—	—	—	—	—	—	—
1903		1	1	—	—	—	—	—	—	—
1904		3	3	—	—	—	—	—	—	—
1905		8	8	—	—	—	—	—	—	—
1906		4	4	49	Isca Road	—	—	—	—	—
1907		—	—	—	—	—	—	—	—	49
1908		—	—	—	—	—	—	—	—	—
1909		—	—	—	—	—	—	—	—	—
1910		—	—	—	—	—	—	—	—	—
1911	Blackboy Rd	2	2	—	—	—	—	—	—	—
1912	71 Bartholomew Street	4	75	—	—	—	—	—	—	—
1913		7	7	—	—	—	—	—	—	—
1914		18	18	—	—	—	—	—	—	—
1915		—	—	—	—	—	—	—	—	—
1916		—	—	—	—	—	—	—	—	—
1917		—	—	—	—	—	—	—	—	—
1918		—	—	—	—	—	—	—	—	—
1919		4	4	—	—	—	—	—	—	—
1920		1	1	—	—	—	—	—	—	—
1921	89 Paul St.	2	91	129	Polsloe and Pinces	—	—	—	—	—
1922		—	—	49		—	—	—	—	129
1923		4	4	20	Buddle Lane	—	—	—	—	49
1924		1	1	16	Isca Road and Coombe St. flats	—	—	—	—	20
1925		5	5	49	Isca Road and Buddle Lane	—	—	—	—	16
1926		6	6	32	Chamberlain Road and Buddle Lane	—	—	—	—	49
1927		13	13	299	Buddle Lane, King Street and Preston Street	28	Looe Road	8	Rutherford Street	32
1928	97 No. 4 Area, Sec. A	32	129	32	Buddle Lane	26	Clayton Road	4	Rutherford Street	335
1929		8	8	242	Burnthouse Lane	95	Haven Road and Beacon Avenue	2	Stepcote Hill King Street	62
1930		27	27	186	Burnthouse Lane	5	Chamberlain Road and Duckworth Road	6	Carlile Road	339
1931		31	31	—	—	16	Emmanuel Bldgs.	—	—	197
1932		15	15	207	Burnthouse Lane	80	Wonford Street and Wykes Road	6	St. Mary's Steps Terrace	16
1933	133 No. 4 Area Secs. C. & D. Lower Rack-close, Cricklepit Milford Cotts. Pancras Lane N. Bridge Terrace, Chapples' Bls	1	134	141	Burnthouse Lane and Preston St. and Rack Street flats	64	Foxhayes	—	—	393
1934	91 Mary Arches St., Friernhay St., Exe Island	8	99	79	St. Loye's	109	Foxhayes, Mildmay Close, Exwick Road and King's Dwellings	2	Preston Street	205
1935	82 Union Terr. Gatty's Court Cumberland Terrace Ida Cotts. Ebenezer Cts. Prospect Pl. James' St. Smythen St.	38	120	223	St. Loye's	—	—	—	—	190
1936	93 Hampton Pl. Bartholomew St. Clarence Pl. Well St. Grant's Cotts Sidwell St. Tuckett's Sq. Summerland St. Summerland Row Mt. Radford Square Shubbery Pl. Heavitree Albert Place, Wonford Bannister's Bls., Wonford Langsford Cs., Wonford	21	114	154	St. Loye's	20	Beacon Avenue	2	Stepcote Cottages	223
1937	83 Silver Lane, Blackboy Rd Part of Centre Street Centre Lane Paragon Pl. South Street Church Lane, Cowick Street Hamlyn's Ct., Cowick Street Brewer's Crt., Cowick Street Pellew's Bldgs. Cowick Street Gray's Court, Cowick Street St. Olave's Pl. Mary Arches St. Spring Place, Little Silver.	34	117	152	St. Loye's, Coombe Street, and West Street Flats	30	Barley Mount, Redhills			176
1938	27 Lower North Street	15	42	116	St. Loye's, Buddle Lane and Preston Street Flats	105	Barley Mount, Redhills			182
	706	404	1170	2275	—	578	—	39	—	2883

The figures shown under (a) were supplied by the City Architect; those under (b) by Mr. J. P. G. Davey, Secretary, and those under (c) by Mr. J. P. G. Davey, Asst. Hon. Secretary.

HOUSING.

(*a*) *Statistics.*

1. *Inspection of Dwellinghouses during the year* :—

(1)	(a)	Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	616
	(b)	Number of inspections made for the purpose	702
(2)	(a)	Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932	122
	(b)	Number of inspections made for the purpose	214
(3)		Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	46
(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	570

2. *Remedy of Defects during the year without Service of Formal Notices* :—

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers 556

3. *Action under Statutory Powers during the year* :—

(*a*) Proceedings under sections 9, 10 and 16 of the Housing Act, 1936 :—

(1)		Number of dwelling-houses in respect of which notices were served requiring repairs	8
(2)		Number of dwelling-houses which were rendered fit after service of formal notices :—	
	(*a*)	By owners	8
	(*b*)	By local authority in default of owners.....	—

(*b*) Proceedings under Public Health Acts :—

(1)		Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	6

(2) Number of dwelling-houses in which defects were remedied after service of formal notices :—

(*a*) By owners 8

(*b*) By local authority in default of owners..... —

(*c*) Proceedings under sections 11 and 13 of the Housing Act, 1936 :—

(1) Number of dwelling-houses in respect of which Demolition Orders were made 15

(2) Number of dwelling-houses demolished in pursuance of Demolition Orders 22

(*d*) Proceedings under Section 12 of the Housing Act, 1936 :

(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made 84

(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit 4

4. *Housing Act*, 1936. *Part IV. Overcrowding* :—

(*a*) I. No. of dwellings overcrowded at end of the year 58

II. No. of families dwelling therein 60

III. No. of persons dwelling therein 362

(*b*) No. of new cases of overcrowding reported during the year 54

(*c*) I. No. of cases of overcrowding relieved during the year 104

II. No. of persons concerned in such cases 606

(*d*) Particulars of any cases in which dwelling-houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding .... Nil.

REMARKS.

Of the 104 cases of overcrowding relieved, 43 cases were re-housed in Council houses ; the number of persons concerned in these cases being 269.

Overcrowding in Council houses was relieved in 27 cases by re-housing in other Council houses with more accommodation. These 27 cases are included in the total of 104 cases relieved.

It will be noted that the number of dwellings overcrowded at the end of the year is only 58. In many of these cases the families are large and will be offered alternative accommodation in the larger Council houses built for that purpose.

Of the 54 new cases of overcrowding reported during 1938, the proportion of illegally overcrowded dwellings is small. Many of the dwellings became overcrowded by reason of children attaining to the ages of 1 year and 10 years respectively.

ERADICATION OF BED BUGS.

1.	(*a*)	No. of Council houses found to be infested	35
		No. of Council houses dis-infested	35
	(*b*)	No. of other houses found to be infested	34
		No. of other houses dis-infested	34

2. *The methods employed for freeing infested houses from bed bugs.*

Where possession can be obtained, the whole of the interior is fumigated (after easing skirting boards, picture rails, and in some instances, floor-boards), with flowers of sulphur, to which cayenne pepper is added—in the proportion of 1 oz. of cayenne pepper to 10 lbs. of flowers of sulphur—the same being evenly mixed before ignition. The dose is repeated after the expiration of seven days.

Where such fumigation cannot be carried out, the treatment is spraying with sol. D., obtained from Messrs. R. Sumner & Co., Liverpool.

3. *The methods employed for ensuring that the belongings of tenants are free from vermin before removal to Council houses.*

In all cases where vermin is proved to exist, articles that cannot be treated with steam are carefully sprayed with solution as described under (2) above, and are removed from the premises, while bedding, clothing, etc., is removed to the steam disinfector and afterwards returned to the new premises.

4. *Whether the work of disinfection is carried out by the Local Authority or by a Contractor.*

By the Local Authority, free of cost.

5. In cases where it is found necessary to disinfect furniture, etc., before the removal of families from unfit houses to Council houses, the latter are visited by a Sanitary Inspector who makes tactful observations and inquiries to ascertain if the measures taken were successful. Up to the present, their visits have been appreciated by the tenants.

DAIRIES, COWSHEDS AND MILKSHOPS.

On the register there are 107 Dairies, Milkshops or Milkstores (in which cattle are not kept) for the sale by retail of liquid milk. For the production of milk for sale wholesale and retail, there are 18 Dairies in which cattle are kept.

In addition to the foregoing, cream is sold by retail at a number of shops and also from stalls in the market, and a considerable quantity of liquid milk is retailed in the City by farmers occupying farms situate in the Devon County area.

The number of producers occupying farms situate outside the district, who supply milk wholesale to Exeter traders, is approximately 280.

Quarterly visits are made to the cowkeepers' premises by the Veterinary Inspector and at other times by the District Sanitary Inspector. The premises and methods employed were, as a rule, found to be satisfactory.

The Tuberculosis Order of 1938 revokes the Tuberculosis Order of 1925 and its amending Order, and is now operated by Veterinary Inspectors of the Ministry of Agriculture and Fisheries. They carry out routine inspection of all dairy herds and deal with animals found to be diseased, and also arrange the prescribed veterinary examination and tuberculin testing of herds licensed under the Milk (Special Designations) Order and supply quarterly returns upon this work to the Public Health Department.

Of 36 test samples of milk taken for examination for tuberculosis, 35 gave negative results and 1 was positive. The facts were communicated to the County Health Department from whose area the infected sample came. Their Veterinary Inspector subsequently reported having discovered two cows at the farm with tuberculous udders and that they had been destroyed under the Tuberculosis Order.

Two other samples that were included in the 35 mentioned above contained pus cells. The affected cows were traced and their milk excluded from sale.

THE MILK (SPECIAL DESIGNATIONS) ORDER, 1936.

Licences hereunder in respect of graded milks were issued as follows :—

Producers—

of Tuberculin Tested	2
of Accredited	1

Dealers—

of Tuberculin Tested (including 1 supplementary)	12
of Accredited	1

Pasteurisers—

No. of Plants licensed	3
Dealers	1

Samples examined—

Designation.	No. unsatisfactory.	No. within the Standard of Cleanliness.	Total.
Tuberculin Tested	3	40	43
T.T. (Pasteurised)	—	2	2
Accredited	3	19	22
Pasteurised	5	30	35

Ungraded Milk.

Thirty-four samples were examined. Of these, 14 did not reach the standard of cleanliness required for graded milk, but 20 were equal in cleanliness to such milk.

Enquiry was made into the 14 unsatisfactory samples, and suitable action taken. In ten of these cases the appropriate County Authority made the investigations and furnished reports.

ICE CREAM.

All manufacturers and/or vendors of ice cream within the City are registered under the Corporation Act, 1928, and the premises are periodically inspected. Samples were examined as follows :—

For cleanliness	21
For chemical purity	11

Under "cleanliness" the number that failed to reach the standard required for "Accredited" Milk was 12, while 9 were within it.

Those chemically examined were satisfactory.

PUBLIC ABATTOIR AND MEAT INSPECTION.

The accompanying table gives particulars of the animals dealt with at the Public Abattoir. In the aggregate the number is below that for the previous year, and is mainly due to a temporary decline in the mutton carcase trade with London.

The systematic examination of all carcases is carried out at the Public Abattoir in accordance with recommendations contained in Memorandum 62 (Foods), and inspections are regularly made and recorded at the 10 private slaughterhouses on killing days.

ANIMALS SLAUGHTERED AT THE PUBLIC ABATTOIR AND THE FEES EARNED DURING THE FINANCIAL YEAR, 1-4-38 TO 31-3-39.

ANIMALS.	Number slaughtered.	Fees earned for slaughter.	Lairage No. of days.	Fees earned for lairage.	Storage. No. of days.	Fees earned for storage.	Total fees earned.
		£ s. d.		£ s. d.		£ s. d.	£ s. d.
Cattle	4175	417 10 0	3753	62 11 0	66	16 6	480 17 6
Calves	2419	80 12 8	78	13 0	64	10 8	81 16 4
Sheep	10260	171 0 0	217	18 1	—	—	171 18 1
Pigs at 1/-	6521	326 1 0	108	18 0	—	—	331 14 0
Pigs at 2/6	38	4 15 0					
Total	23413	999 18 8	4156	65 0 1	130	1 7 2	1066 5 11

Amount received from the sale of Cartridges, £42 17s. 5d.

TABLE OF CHARGES.

Slaughtering tolls, including lairage for two days.			Lairage tolls per day, after expiration of second day.	Storage tolls per day, after expiration of second day.
	s.	d.		
For every Bull, Bullock, Cow or Heifer	2	0	4d.	3d.
For every Calf		8	2d.	2d.
For every Pig	1	0	2d.	2d.
For every Sow or Boar over 14 score	2	6	2d.	2d
For every Sheep or Lamb		4	1d.	1d.

CARCASES INSPECTED AND CONDEMNED, DURING 1938.

	Cattle excluding Cows.	Cows.*	Calves.	Sheep and Lambs.	Pigs.
Number killed	4551	808	2446	15946	8031
Number inspected	3674	808	2419	12010	7233
All Diseases except Tuberculosis :— Whole carcases condemned	3	4	17	91	26
Carcases of which some part or organ was condemned	218	208	31	391	634
Percentage of number inspected affected with disease other than Tuberculosis	7.2	26.3	1.98	4.0	9.1
Tuberculosis only :— Whole carcases condemned	17	20	5	—	29
Carcases of which some part or organ was condemned	141	94	2	—	188
Percentage of the number inspected affected with Tuberculosis	4.3	14.1	0.29	—	3.0

* Cows do not include heifers with first calf for the purposes of these tables.

CLASSIFICATION OF DISEASES.

1938.

WHOLE CARCASES SEIZED OR SURRENDERED ON ACCOUNT OF GENERALIZED TUBERCULOSIS.

Description.	Number of Animals.	WEIGHTS.											
		Carcases.				Organs & Offal.				Totals.			
		T	C	Q	Lbs	T	C	Q	Lbs.	T	C	Q	Lbs
Bulls	—	—	—	—	—	—	—	—	—	—	—	—	—
Cows	20	5	3	2	26	1	12	1	2	6	16	0	0
Heifers	16	3	15	1	24	1	1	2	4	4	17	0	0
Steers.....	1	—	4	1	0	—	1	2	0	—	5	3	0
Calves	5	—	3	3	6	—	1	0	27	—	5	0	5
Pigs	29	1	11	1	13	—	3	2	10	1	14	3	23
Totals	71	10	18	2	13	3	0	0	15	13	18	3	0

PARTS OF CARCASES, OFFAL, ETC., SEIZED OR SURRENDERED ON ACCOUNT OF LOCALIZED TUBERCULOSIS

Description.	Number of Animals	WEIGHTS.											
		Meat.				Organs & offal.				Totals.			
		T	C	Q	Lbs	T	C	Q	Lbs	T	C	Q	Lbs
†Bovi'es	235	1	2	3	21	4	2	1	9	5	5	1	2
Calves	2	—	—	—	—	—	—	1	2	—	—	1	2
*Pigs	188	1	1	3	11	—	15	0	19	1	17	0	2
Totals	425	2	4	3	4	4	17	3	2	7	2	2	6

† Includes 57 heads.

* Includes 151 heads.

WHOLE CARCASES SEIZED OR SURRENDERED ON ACCOUNT OF DISEASES OR CONDITIONS OTHER THAN TUBERCULOSIS.

Description.	Number of whole carcases seized or surrendered.	Disease or condition which rendered meat unfit for food.																								Weight, including Offal, etc.			
		Anaemia	Asphyxia	Decomposition	Distomatosis	Emaciation	Fevers (non-specified).	Hydraemia	Inflammation, Acute	Immature, Unborn	Injuries	Jaundice	Johnes disease	Joint-Ill	Moribund	Pleurisy or Peritonitis, Acute	Physicked	Poisoned	Rheumatism, acute	Septic Mastitis	Septic Pneumonia	Sarcomatosis	Septicaemia	Swine Fever	Uraemia			Tons.	Cwts.	Qrs.	Lbs.
Steers	—																													
Cows	4						1	1					1										1				1	4	1	12
Heifers	3															1	1		1									12	2	24
Calves	17			2		1		3		3			1	1	1		1				1		3					13	3	9
Sheep	80	1		3	3	3	1	31	4		1	1			13	1		1	2	1	5		8		1			9	3	0
Lambs	11			2	1	1		1							3						1		2					4	0	3
Pigs	26		1			2		2	1			1			1	3					1	1	1	12				1	0	22
Total	141	1	1	7	4	7	2	38	5	3	1	2	2	1	18	5	2	1	3	1	8	1	15	12	1			6	5	3	14

WEIGHT OF MEAT AND OTHER FOODS SEIZED OR SURRENDERED.

	Tons.	Cwts.	Qrs.	Lbs.
Whole carcases including offals on account of Generalised Tuberculosis	13	18	3	0
Parts of carcases and offals, etc., on account of Localised Tuberculosis	7	2	2	6
Whole carcases including offals on account of diseases or conditions other than Tuberculosis	6	5	3	14
Parts of carcases and offals, etc., on account of Local affections	4	14	3	5
Imported Meat	—	7	1	0
Other Foods, consisting mainly of Fish	5	9	3	4
Total weight of Meat and other Foods seized or surrendered during 1938	37	19	0	1

PARTS OF CARCASES, OFFAL, ETC., SEIZED OR SURRENDERED ON ACCOUNT OF MINOR DISEASES AND CONDITIONS (OTHER THAN TUBERCULOSIS) SUCH AS RHEUMATISM, DAMAGED, PLEURISY, PARASITES, ETC.

	Weight.											
	Meat.				Offal and Organs.				Total.			
	T	C	Q	L	T	C	Q	L	T	C	Q	L
Beef	—	2	3	0	2	3	1	16	2	6	0	16
Mutton and Lamb	—	3	1	25	—	12	1	15	—	15	3	12
Pork	—	2	1	8	1	8	2	4	1	10	3	12
Veal	—	—	1	14	—	1	2	7	—	1	3	21
Total	—	8	3	19	4	5	3	14	4	14	3	5

PARTICULARS OF IMPORTED MEAT SEIZED OR SURRENDERED, INCLUDING ORGANS, OFFAL, ETC.

Description.	Weight.			
	Tons	Cwts.	Qrs.	Lbs.
Beef	—	6	3	6
Mutton and Lamb	—	—	1	3
Pork	—	—	—	19
Total	—	7	1	0

PARTICULARS OF OTHER FOODS SEIZED OR SURRENDERED.

Particulars.	Weight.			
	Tons	Cwts.	Qrs.	Lbs.
Fish (mainly from Fish Market)	3	1	3	23
Tinned Meats	—	1	3	5
Cooked Meats	—	—	—	18
Bacon	—	—	—	6
Poultry	—	—	1	19
Prawns	—	—	—	14
Sausages	—	—	—	8
Rabbits	—	—	—	9
Vegetables (root crops)	1	19	0	26
Fruit	—	4	3	16
Salmon (tinned)	—	—	1	15
Tinned Offals	—	—	2	13
Total	5	9	3	4

MEAT AND OTHER FOOD SEIZED OR SURRENDERED, SHOWING WEIGHT MONTHLY.

Month.	Weight.			
	Tons.	Cwts.	Qrs.	Lbs.
January	4	4	2	16
February	3	7	1	25
March	4	0	0	15
April	2	6	2	0
May	5	2	3	26
June	2	13	2	5
July	1	13	2	18
August	2	18	2	10
September	1	17	3	3
October	2	17	3	3
November	4	6	0	24
December	2	9	2	24
Total	37	19	0	1

FOOD AND DRUGS (ADULTERATION) ACT, 1928.

During the year, particular attention was paid to the possible presence of lead in beer, stout and cider.

Altogether 92 samples were examined and 41 found to contain lead in such proportion as likely to be injurious to health (see table). No fault was found with samples on any other ground.

Experiment proved that the pipes and fittings used in public houses were at fault. Samples of bottled beer and cider were found to be free from lead, also the liquors when drawn from the wood.

Letters were written to the licensees and owners and all promised remedial measures without undue delay. Re-inspections will be made to ensure that the possibility of lead poisoning from this source is eliminated.

Article.	Examined.		Adulterated.	
	Formal	Informal	Formal	Informal
Angelica	—	1	—	—
Aspirin Tablets	12	—	—	—
Beer	53	23	36	14
Bicarbonate of Soda	5	5	—	—
Butter	8	4	—	—
Cider	1	8	—	2
Cocktail (Seagers)	—	1	—	—
Coffee	1	1	—	—
Crystalised Cherries	—	2	—	—
Crystalised Ginger	—	2	—	—
Glycerine	—	1	—	—
Ice Cream	—	11	—	—
New Milk	69	—	18	—
New Milk (appeal to cow)	4	—	—	—
Pale Ale	—	2	—	1
Puddings	3	—	—	—
Raisins	—	2	—	—
Salt Fish	—	1	—	—
Sausages (beef)	1	3	—	—
Sausages (pork)	1	4	—	—
Sausages (chipolata)	—	1	—	—
Scald Milk	11	—	3	—
Skimmed Milk	15	—	3	—
Stout	3	2	2	2
Strawberry Jam	1	—	1	—
Sultanas	—	1	—	—
Sweets	—	1	—	—
Tea	1	1	—	—
Tripe	2	—	—	—
Wine	—	3	—	—
Total	191	80	63	19

The number of samples of milk reported as adulterated was 12.42%, being below that of the previous year when it was 16.5%. In all cases follow-up samples were obtained either in the City, or outside by the County Police who always willingly co-operate in cases found in the City, but which can be traced to premises or dealers in the County area.

The facts in all of the formal samples reported as adulterated were carefully considered, and prosecutions were undertaken in 4 instances.

LEGAL PROCEEDINGS.

Offence.	*Result.*
Selling scald milk containing 25% of added water.	Convicted and ordered to pay costs amounting to 18/-.
*Selling new milk that was 28% deficient in fat.	Case dismissed.
Selling new milk that was 14% deficient in fat.	Fined £5, including costs.
*Selling new milk that was 24% deficient in fat.	Case dismissed.

* Wholesalers. " Hunt *v* Richardson " successfully raised.

BAKEHOUSES.

These were regularly inspected, and in no case was it found necessary to serve formal notice, such minor defects as were discovered being dealt with by formal action.

THE PUBLIC HEALTH (PRESERVATIVES, ETC., IN FOOD) REGULATIONS, 1925 TO 1927.

Every sample of food taken for analysis was examined for the presence of preservatives. None was found.

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

The year 1938 was again a favourable one in the City. Although more cases of scarlet fever and diphtheria were notified than in 1937, once again there were no deaths from these diseases. Neither disease tended to be severe in type, scarlet fever being exceptionally mild and free from complications.

Only two cases of enteric fever were notified against 16 in 1937. One of these, a double infection with bacillus typhosus and bacillus paratyphysosus B. proved fatal. The source of infection was not traced and may have been outside the City. The other case was a mild example of paratyphoid B., possibly due to eating infected watercress. In this connection it may be remarked that a good deal of wild watercress is sold in this neighbourhood, of doubtful cleanliness. The growers of cultivated watercress in Hertfordshire, Hampshire, and other places take great trouble to ensure that their produce is clean and free from risk. Watercress makes a good addition to a salad and is liked by many eaten alone. Care should be taken to see that the source of the cress is satisfactory. Few, if any, streams around Exeter are free from pollution ; hence the cultivated brands should be preferred.

Last year a considerable amount of space was devoted to the risk of consuming uncooked shellfish from polluted layings in the Exe Estuary. There have been no cases in the past twelve months from this source, so that it would appear that the publicity which the local press kindly gave the matter, has done good.

Under the Exeter Shellfish Regulations, 1919, which are administered by the Port Health Authority, the whole of the Exe Estuary is a prohibited area, unless the shellfish removed are subjected to a cleansing and sterilizing process approved by the Ministry of Health. *In addition, an absolute prohibition is in force in respect of two areas, one opposite Lympstone and the other at Starcross. These regulations apply to the removal of shellfish for sale. The regulations cannot prevent private individuals gathering shellfish and distributing them to their friends. It is this practice which commonly leads to trouble.

The comparative frequency of paratyphoid B in sporadic form in Great Britain and the probable causes at work were commented upon in the report for 1936. It is reasonably certain that many mild cases especially those occurring in children, are missed altogether. Every case of diarrhoea with fever should be thoroughly investigated, and not lightly dismissed under such terms as " gastric influenza " and so forth.

In addition to the typhoid and paratyphoid fevers there has been a revival of interest in dysentery. The commonest form in this country is the variety named after Sonne. It is usually mild but highly infectious. Six cases were notified.

*These regulations have been modified recently in respect of winkles.

Although we in Exeter have been fortunate in respect of diseases of the enteric dysentery group, the situation in the country generally cannot be viewed with complacency. Outbreaks on a fairly large scale during recent years must have increased the number of carriers, and carriers are not easily detected. In fact, one might say with much truth that a carrier is rarely detected until he or she has done some harm. Our complicated and extensive water supplies, the elaborate milk and dairies industry, and the immense amount of contaminable foods handled annually are a potential source of risk. We know that this group of diseases does not spread easily where sanitary circumstances are good. It is a tribute to the care exercised by water undertakers, the various food and dairy interests, and the sanitary services that these diseases are, after all, relatively uncommon in this country.

Of the non-notifiable diseases, moderate epidemics of whooping cough, measles and mumps occurred during the late winter and early spring, each reaching its peak in the month of March. No deaths were certified as due to whooping cough or measles among school children. Among younger children there were 3 from whooping cough and 2 from measles.

Smallpox.

No cases occurred in the City.

Vaccination.

Vaccination Officer : Mr. E. S. Howells.

Public Vaccinator : Dr. S. J. P. Gray.

No primary vaccinations were carreid out by the Medical Officer of Health or his staff under the Smallpox Regulations, 1917.

The latest statistics are for the year 1937, and are as follows :—

Births registered	1175
Vaccinated	518
Insusceptible	2
Statutory declaration received	554
Died unvaccinated	54
Postponed	3
Removed to other districts	32
Removed to places unknown	5
Unaccounted for	7

It will be noted that 44.0 per cent. of the infants were vaccinated, which is 0.4 per cent. below that of the previous year.

The partially protected condition of the population cannot be considered satisfactorily.

No cases of post-vaccinal encephalitis.

Scarlet Fever.

106 cases were notified against 72 of the previous year, 90 being removed to hospital.

There were no deaths.

Diphtheria.

39 cases were notified against 8 the previous year, all being removed to hospital.

There were no deaths.

Enteric Fever.

2 cases were notified against 16 in 1937.

There was one death.

Puerperal Pyrexia.

46 cases were notified against 30 in 1937. Of these 41 were treated at the Royal Devon and Exeter Hospital, 18 being County cases.

Pneumonia.

62 cases were notified against 70 in 1937 and there were 6 deaths against 11. Of these, 11 cases were treated at the Royal Devon and Exeter Hospital.

Erysipelas.

13 cases were notified against 14 the previous year, 1 being treated at the Royal Devon and Exeter Hospital, and 3 at the Isolation Hospital.

There were no deaths.

CEREBRO-SPINAL FEVER.

1 case was notified. Treated at the Royal Devon and Exeter Hospital, and came from the administrative County of Devon.

DYSENTERY.

6 cases notified.

MALARIA.

No cases notified.

ENCEPHALITIS LETHARGICA.

No cases notified.

ACUTE POLIO-ENCEPHALITIS AND POLIOMYELITIS.

2 cases were notified. One case treated at Royal Devon and Exeter Hospital came from the administrative County of Devon. In the other case the diagnosis was not confirmed.

DIARRHOEA.

5 infant deaths were certified as due to this cause.

CANCER.

The following table shows deaths from cancer during the past ten years.

Year	1929	1930	1931	1932	1933	1934	1935	1936	1937	1938
Deaths	110	82	96	116	108	121	127	124	117	121

The next table shews deaths from cancer during the past year according to age periods and sex.

0–1		1–2		2–5		5–15		15–25		25–35		35–45		45–55		55–65		65–75		75 & over		Total	
M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
—	—	—	—	—	—	—	—	—	—	2	1	2	5	8	12	12	22	17	16	6	18	47	74

The facilities for diagnosis and treatment were fully described in the report for 1936. There has been no change.

NOTIFIABLE DISEASES DURING THE YEAR.

Disease.	Cases Notified.														Cases admitted to I. Hospital	Deaths.												
	Under 1	1 2	2 3	3 4	4 5	5 10	10 15	15 20	20 35	35 45	45 65	65 & over	Total		Under 1	1 2	2 3	3 4	4 5	5 10	10 15	15 20	20 35	35 45	45 65	65 & over	Total	
Diphtheria (including Membraneous Croup)		1	1	3	1	17	10	1	3		2		39		39													
Scarlet fever		4	3	3	6	53	21	8	7		1		106		90													
Enteric Fever (including Paratyphoid)						1					1		2		1										1			1
Dysentery						2			1	2	1		6		1													
†Puerperal Pyrexia									40	6			46															
*Pneumonia	2	3	2	1	2	10	3	6	10	5	13	5	62			2							1	1	1			5
Erysipelas	1				1					9	2		13		3													
Cerebro-Spinal Fever								1					1															
Polio-encephalitis							1						1		1													

* Deaths from cases notified and not total number of deaths.

† Some of these cases were admitted to the Local General Hospital from the County Area for diagnosis and notified by the Hospital authorities.

TUBERCULOSIS.

The organisation of the Tuberculosis Scheme remains unchanged. The work done is set out in the tables below.

Various aspects of the problem have been discussed in previous Annual Reports, v.z.—Difficulties in Diagnosis and the Advanced Case, 1937 ; the Disease in Children, infection and natural resistance, 1936 ; the Importance of Early Diagnosis and Correct Treatment, 1935 ; Contact Examination—Milk-borne Infection, 1934 ; General Review of work in Exeter, 1933. This year it is not proposed to discuss any particular aspect of our work.

Since the close of the year, tuberculosis workers all over the world have lost a teacher and leader by the death of Professor Sir Robert Philip, M.D., LL.D., F.R.C.P., of Edinburgh University. Well known in Great Britain, there can be few medical men so widely known and appreciated the world over. By a coincidence he graduated in 1882—the year Koch discovered the tubercle bacillus. In 1885 he became physician to the New Town Dispensary, one of the public dispensaries which are a feature of Edinburgh, and a valuable teaching asset to the Medical School. Already deeply interested in Tuberculosis, he was able to pursue his studies here and in 1887 founded the Victoria Dispensary for Consumption and Diseases of the Chest. This was the beginning of what is now known as the Edinburgh Dispensary System, a system which is the foundation of the campaign against tuberculosis in every country in the world. Essentially the dispensary is the centre of a system which includes institutions for the treatment and care of all varieties and stages of the disease, and for the after-care and return to work of those whose disease has been arrested. The dispensary was regarded by Philip as a centre for information and propaganda, for diagnosis, a medical sorting house, for the supervision of suspects and contacts, for the after-care of the arrested, for research, and an axis for the co-ordination of all the tuberculosis work of each area.

It is a commonplace of preventive medicine that new ideas develop slowly. The French adopted the scheme unofficially in 1902, and in England a voluntary dispensary was begun at Paddington in 1909. Oldham introduced voluntary notification of consumptives as long ago as 1892 and Manchester followed in 1899. After various incomplete schemes of notification, all forms of tuberculosis were made notifiable officially in 1912. But the

really effective step was not taken by the Government until 1921, when all Counties and County Boroughs had to formulate and put into operation satisfactory schemes. Nevertheless, by 1913, when the Departmental Committee on Tuberculosis sat, Philip had in Edinburgh a complete working scheme of dispensary, sanatorium, advanced hospital, farm colony and after-care committee—the whole of which was linked up later on with the University. Having been privileged to assist in the Edinburgh Scheme under the personal guidance of Sir Robert Philip, one feels that one has played a small part in a piece of very important social work.

Much has been done, much remains to be done. We are still without a specific against the tubercle bacillus. Modern research has yielded one or two notable successes in the realm of chemo-therapy ; it is a reasonable hope that some drug may be discovered capable of attacking the organisms of tuberculosis within the body of the host.

INSTITUTIONAL ACCOMMODATION remains the same.

The following figures show at a glance the main facts of the tuberculosis statistics for the City during 1938.

Total cases on Register, 1st January		504
Pulmonary	357	
Non-Pulmonary	147	
Total notifications received after deduction of 9 duplicates, but including 4 inwards transfers		99
Pulmonary	70	
Non-Pulmonary	29	
Deaths during the year		53
Pulmonary	43	
Non-Pulmonary	10	
Outward Transfers		16
Pulmonary	11	
Non-Pulmonary	5	
Total cases on Register, 31st December		488
Pulmonary	347	
Non-Pulmonary	141	

Table I. shows notifications and deaths during the year arranged according to ages.

TABLE I.

Age Periods.	New Cases.				Deaths.			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
0	—	—	2	—	—	—	1	—
1	—	—	2	1	—	—	2	1
5	1	1	4	3	—	—	—	—
10	2	—	1	3	—	2	1	—
15	3	6	1	2	—	2	2	—
20	9	8	—	1	1	3	—	—
25	9	6	3	—	9	4	—	—
35	6	5	1	1	3	1	—	—
45	9	—	—	1	6	1	1	1
55	2	1	1	1	5	3	—	—
65 and upwards	1	1	—	1	3	—	—	1
Totals	42	28	15	14	27	16	7	3
					53			

Only 3 cases were not notified before death. Of these one was an inward transfer and had been notified elsewhere. This was a pulmonary case.

The remaining 2 cases were examples of non-pulmonary tuberculosis. One being an example of acute infection in a child, and 1 of old standing kidney disease which the practitioner thought was notified by his predecessor.

Medical practitioners are required to notify all forms of tuberculosis to the medical officer of health of the district in which the case occurs as soon as possible after the diagnosis is made, unless there is good reason for believing that the case has been previously notified in that district. The fact that a patient has been notified in some other place does not absolve a medical practitioner from the duty of notifying in Exeter.

Table II.

Classification of new cases seen at the Dispensary during the year.

PULMONARY.					NON-PULMONARY.				
T.B.--	T.B.+1	T.B.+2	T.B.+3	Total	Bones & Joints	Abdom-inal	Other Organs	Glands	Total
26		6	29	61	4	1	5	12	22

The number of cases referred to the Tuberculosis Dispensary either before or at the time of notification was 84, being 91.3 per cent. of primary notifications.

Table III.

Gives an analysis of the principal statistics for the past 10 years.

		1929	1930	1931	1932	1933	1934	1935	1936	1937	1938
Notifications	Pulmonary	85	74	87	90	86	87	79	80	95	70
	N-Pul'ary	16	22	28	24	20	39	28	30	46	29
Deaths	Pulmonary	45	48	48	43	48	35	42	38	41	43
	N-Pul'ary	12	9	10	10	7	15	7	10	7	10
Deaths per 1,000 pop'tn	Pulmonary	.73	.78	.74	.69	.71	.51	.61	.55	.59	.62
	N-Pul'ary	.19	.14	.15	.15	.10	.22	.10	.14	.10	.14

INSTITUTIONAL TREATMENT.

Table IV.

Tuberculosis Wards, Whipton Hospital.

Remaining under treatment on 1st January 1938			Admitted during the year			Discharged during the year			Deaths during the year.			Remaining under treatment 31st Dec., 1938.		
M	F	TOTAL	M	F	TOTAL	M	F	TOTAL	M	F	TOTAL	M	F	TOTAL
17	10	27	39	24	63	29	20	49	10	5	15	17	9	26

Table V.

Honeylands Children's Sanatorium, Whipton.

Remaining under treatment 1/1/38.			Admitted during the Year.			Discharged during the Year.												Remaining under treatment 31/12/38			
M	F	TOTAL	M	F	TOTAL	Males						Females							M	F	TOTAL
						Improved	Quiescent	Not Tuberculosis	To C.I.H.	Not Diagnosed	Total	Quiescent	Much Improved	To C.I.H.	Mistaken Diagnosis	Not Diagnosed	Not T.B.	Total			
10	10	20	12	13	25	2	2	4	3	1	12	1	2	1	1	2	6	13	10	10	20

Table VI.

Royal National Sanatorium, Bournemouth.

Remaining on 1-1-38			Admitted during the year.			Discharged during year.			Remaining on 31-12-38.		
M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total
1	2	3	2	1	3	3	3	6	—	—	—

The total cost of the treatment of these patients was £204 8s. 7d.

Table VII.

Other Institutions.

Institution.	Condition for which treated.	Remaining under treatment on 1-1-38.			Admitted during Year.			Discharged during Year.			Deaths during the year.			Remaining under treatment on 31-12-38.		
		M	F	Total	M	F	Total	M	F	Total	M	F	T'l	M	F	Total
Princess Elizabeth Orthopaedic Hospital, Exeter	Spine	2		2	1		1	3		3						
	Hip			—												
	Ankle															
	Knee	1		1	2		2	3		3						
	Sacroiliac Joint					1									1	1
Mount Gold Orthopaedic Hospital, Plymouth	Multiple Bone															
	Spine		1	1	2		2	1	1	2				1		1
	Shoulder															
	Abdomen				1		1	1		1						
	Elbow															
Royal Devon and Exeter Hospital Exeter	Leg	1		1				1		1						
	Spine															
	Neck Glands				1	4	5	1	4	5						
	Abdominal				1		1	1		1						
	Genito-urinary				4	1	5	3	1	4	1		1			
	Sacro-iliac Joint															
	Ankle															
Total		4	1	5	12	6	18	14	6	20	1		1	1	1	2

The total cost of the treatment of these patients was £606 6s. 2d., Princess Elizabeth Orthopaedic Hospital, £280 9s. 10d., Mount Gold Orthopaedic Hospital, £255 12s. 10d., Royal Devon and Exeter Hospital, £70 3s. 6d.

TUBERCULOSIS DISPENSARY.

The following particulars are given of cases under supervision at the Dispensary by the Clinical Tuberculosis Officer.

Diagnosis.	Pulmonary.				Non-Pulmonary				Total.			
	Adults.		Children		Adults.		Children		Adults.		Children	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
A.—New cases examined during the year (excluding contacts:)												
(a) Definitely Tuberculous	35	22	1	2	6	5	5	3	41	27	6	5
(b) Doubtfully Tuberculous	—	—	—	—	—	—	—	—	3	—	4	3
(c) Non-tuberculous	—	—	—	—	—	—	—	—	23	35	16	15
B.—Contacts examined during the year :												
(a) Definitely Tuberculous	1	—	—	—	—	—	1	2	1	—	1	2
(b) Doubtfully Tuberculous	—	—	—	—	—	—	—	—	—	—	4	1
(c) Non-tuberculous	—	—	—	—	—	—	—	—	15	13	14	16
C.—Cases written off the Dispensary Register as :—												
(a) Recovered	3	—	2	1	1	3	3	4	4	3	5	5
(b) Non - Tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as Tuberculous)	—	—	—	—	—	—	—	—	50	63	35	40
D.—Number of Persons on Dispensary Register on Dec. 31st. :												
(a) Definitely Tuberculous	123	75	18	23	23	17	28	20	146	92	46	43
(b) Diagnosis not completed	—	—	—	—	—	—	—	—	7	1	9	8

TUBERCULOSIS DISPENSARY.—*continued.*

1. Number of persons on Dispensary Register on January 1st, 1938	384	8. Number of visits by Tuberculosis Officers to Homes (including personal consultations)	226
2. Number of cases transferred from other areas and cases returned after discharged under Head 3 in previous years	3	9. Number of visits by Nurses or Health Visitors to Homes for Dispensary purposes	578
3. Number of cases transferred to other areas, cases not desiring further assistance under the Scheme, and cases "lost sight of"	40	10. Number of (a) Specimens of sputum, &c., examined	Dispensary 100 TOTAL 548
4. Cases written off during the year as dead (all causes)	35	(b) X-ray examinations made in connection with Dispensary work	172
5. Number of attendances at the Dispensary (including Contacts)	1709	11. Number of "Recovered" cases restored to Dispensary Register and included in A (a) and A (b)	1
6. Number of Insured Persons under Domiciliary Treatment on 31st December	9	12. Number of T. B. plus cases on Dispensary Register on the 31st December	1 3
7. Number of consultations with Medical Practitioners: (a) Personal	8		
(b) Other	174		

X-RAY EXAMINATIONS.

During the year 172 X-ray examinations had been made (43 for screen only).

EXTRA NOURISHMENT.

Extra nourishment has been granted to various patients and the total cost of same for the financial year 1938-39 was £15 9s. 0d.

VENEREAL DISEASE.

With the approval of the Ministry of Health, arrangements have been made between the Royal Devon and Exeter Hospital, the Devon County Council and the City Council of Exeter, for the treatment of these diseases at a special department of the Hospital.

The hours of attendance are as follows :—

MEN ..... Mondays, 3—5 p.m., and Fridays, 6—8 p.m.
WOMEN ..... Fridays, 3—5 p.m.

If in-patient treatment is necessary, special beds are available in the Hospital.

Unmarried female patients are admitted to St. Mary's Home, by arrangement with the authorities of the home, for in-patient treatment by the surgeon in charge of the clinic.

The following figures relate to the City only. Number of cases dealt with during the year at, or in connection with, the out-patient clinic for the first time and found to be suffering from :—

(*a*)	Syphilis	17
(*b*)	Chancroid	—
(*c*)	Gonorrhoea	44
(*d*)	Conditions other than venereal	24
		—
		85
		—

Total attendance of cases during the year at out-patient clinic — 3302.

Aggregate number of " in-patient days " of treatment during the year — 1.

Examination of pathological material :—

For detection of spirochetes	3
For detection of gonococci	142
For Wassermann and Kahn reaction	282
Other examinations	53

The City's share of the expenses for the year amounted to £596 3s. 0d.

The following figures apply to the entire department and are not given separately for the City and County :—

Number of cases who ceased to attend out-patient clinic :—

Before completing a course of treatment	42
Number of cases transferred to other treatment centres or to care of private practitioners	44
Number of patients discharged from out-patient clinic after completion of treatment and observation	99
Number of cases which ceased to attend after completion of treatment, but before final tests of cure	21
Number of cases who, on 31.12.38, were under treatment or observation	92
	298

The total number of cases under treatment at the end of the year showed a decrease of 31.

Attendances are not limited to clinic hours, but patients attend on other days and hours for interim treatment.

Notices are exhibited in all the public conveniences setting out the facilities available, and judging from the number of enquiries originating from these notices, they are doing useful work.

These arrangements are intimated to all doctors commencing practice in Exeter. Two medical practitioners were supplied with arseno-benzol compounds free, amounting to 32 doses in all.

INFANT LIFE PROTECTION.

On the 31st December, 1938, there were 73 foster children in the City, and the number of registered foster mothers was 62.

The health visitors paid 509 visits to foster mothers during the year. The figures for the previous year were 90, 71 and 404 respectively. Necessary action was taken wherever conditions were found to be unsatisfactory, and everything possible was done to encourage foster mothers to attend the child welfare centres regularly with their children when these were of appropriate age.

In addition there were 21 children at the Dunraven (voluntary) Home.

Legal proceedings were taken in one case, the accused being dismissed with a caution.

MATERNITY AND CHILD WELFARE.

During the year the Minister of Health called for a special report on the working of arrangements made for the provision of domiciliary midwives under the Midwives Act, 1936, with particular reference to putting into operation Section 6 of the Act, (prohibition of unqualified person acting as maternity nurses for gain). This report dated 25th October, 1938, was accepted by the Council and forwarded to the Minister, who made the order under Section 6. The order will become operative on 1st April, 1939, after its provisions have been duly advertised in the local press and otherwise.

The report covers the period from the appointed day, viz., 30th July, 1937 to 30th September, 1938, and is printed for convenience as Appendix I to this Annual Report.

Since the special report was published, two midwives have surrendered their certificates under the Act and the proper compensation has been paid. A third has given notice of intention to surrender her certificate, but this will take effect in 1939. In no case has it been found necessary to cancel certificates by reason of old age or infirmity.

Increasing work is being done by the three ante-natal centres conducted by the Exeter Maternity and District Nursing Association. The municipal ante-natal centre—working principally in connection with the temporary maternity home at the City Hospital—continues to be fully employed, in fact, the figures

show a slight increase over last year. Ante-natal work is becoming generally appreciated and the facilities provided are well used. Post-natal work and care does not appear to make the same appeal to mothers, many of whom seem content to suffer various disabilities resulting from child-birth rather than have them remedied. Post-natal work is also handicapped by the lack of adequate gynaecological in-patient facilities. This lack has been met in the Appropriation Scheme (Local Government Act, 1929) to be submitted shortly to the City Council. Moreover, the ordinary ante-natal and post-natal clinics require the backing of what may be termed a Major or Control Clinic conducted by an expert at a hospital under hospital conditions. Nevertheless, the figures for post-natal work are a little misleading, as mothers referred to the post-natal clinics are nearly always suffering from more or less serious morbid conditions following child-birth, whereas a considerable number of minor disabilities are dealt with at the ordinary child welfare centres as has always been the case.

One important point is that our ante-natal and post-natal centres are all staffed by medical practitioners **in the active practice of obstetrics,** and not by medical officers who may not have conducted a case of labour for many years. The Maternity and Child Welfare Committee considers this to be an essential principle of the work.

The co-operation between the Maternity and Child Welfare Committee of the Council and the Exeter Maternity and District Nursing Association continues to be close and cordial. The Association is to be congratulated on the excellent work it is doing, not only in the sphere of maternity, but also in general nursing.

The provision of a fully equipped maternity home has received further consideration. As stated in previous reports, this matter is bound up with the problem of the appropriation of the City Hospital (Public Assistance) as a Public Health Hospital under the Local Government Act, 1929. The Public Health Committee has prepared a Scheme which will come before the City Council before this Annual Report is in print.

Practically all the educational work attempted at the Welfare Centres is of an individual kind. The preventive aim of the work must always be kept in view. This is emphasised in printed cards handed out at the Centres and left in the homes of young mothers by the health visitors. These cards give full information about the Centres and associated work.

During the year two small books have been on sale at the Centres. One is a cookery book especially designed for working class households by Dr. Nash, formerly Medical Officer of Health of Heston and Isleworth. Those capable of forming an opinion consider this one of the best books of its kind on the market. Published at sixpence, it was retailed at the centres at half price. The other was a pamphlet on diet incorporating infant diet sheets which have been used at the welfares for some years, and dealing with the proper feeding of older children, school children, expectant mothers and so forth on modern lines. This pamphlet was really an answer to the many questions parents ask and was the result of experience gained by the staff in this work.

Neither book can be described as a best seller so far as the welfares are concerned, although readily taken up in some other quarters.

Following suggestions in Board of Education Circular No. 1460 the Education Committee co-operated with the Maternity and Child Welfare Committee in organising cooking demonstrations for mothers. The Welfare Centres chosen for this experiment were the Central and Northern because of the convenient proximity of the Holloway Street Domestic Science Centre. The Education Committee generously supplied everything including a fully qualified teacher without expense to the Welfares, and the afternoon selected was the non-medical afternoon so that mothers attending the class could have their children looked after by voluntary workers.

This experiment was also unsuccessful. It was found impossible to fill the 18 places, and a class of a dozen or so dwindled to half that number before the six meetings were concluded.

These experiences are disappointing so far as they go.

In some places short lectures are organised in connection with the welfares. One cannot help wondering how much of the lecture really gets home. In the long run advice given individually by doctor or nurse, advice suited to the needs and capacity of the patient, is probably the more valuable although much less spectacular.

In spite of the fact that child welfare work has been carried on in Exeter since 1907, there are still many families that do not take advantage of the services offered. The Ministry of Health attaches a good deal of importance to the percentage of **notified**

births represented by first attendance at the welfares. For some years past this figure has varied from 42 to 44 or thereabouts. Last year the percentage rose sharply to 55.4 largely due to increased first attendances in the Western and Central Districts. In last year's report it was pointed out that this figure is not free from fallacy, and that a more accurate statement would be obtained if the net number of registered live births after adjustment for inward and outward transfers was used as the denominator.

Reference to tables given below will show that there has been a considerable increase in the attendances of older children (toddlers) and a substantial increase in total attendances. It has not been thought necessary or desirable to set up special toddlers clinics at the welfares. The practice is for the mother to bring the latest baby and the other children under school age to the centre, instead of leaving one or the other with a neighbour while she attends a special clinic. In this way, toddlers come under the eye of nurse and doctor, and voluntary workers find plenty of amusement for them while the baby receives medical attention. Thanks to the City Council and its Maternity and Child Welfare Committee, our welfares are spacious buildings with plenty of room for all. One can only suppose that special toddlers clinics are an unwelcome necessity for those less fortunately equipped. We do, however, try to make a point of examining children about to go to school.

The Northern and Central Welfares continue to meet in the same building on different days. The possibility of the Northern Welfare using a community centre similar to those in the Eastern and Western Districts is under consideration. Such an arrangement would probably mean a readjustment of boundaries between the Northern and Central Districts, and until building and rebuilding has developed further in these districts the division might prove difficult.

The success of the Welfares depends in the first instance upon the daily domiciliary work of the Health Visitors. They have put in a very good year's work as the statistical tables clearly show. Sincere thanks are due to the staff of voluntary workers at each centre and particularly to the honorary secretaries for all the help they have given during the year.

I.—CHILD WELFARE CENTRES.

Centre.	Average No. of Infants on Books.	Average No. of Attendances of Children.	Average No. of Attendances of expectant Mothers.
Central District	164	72	4.7
Western District	291	102	3.0
Northern District	237	80	1.4
Eastern District	354	90	2.3

Altogether 1,180 children under school age attended the centres making 17,125 attendances. The figures for the previous year were 1,106 and 14,742. The attendances of the various age groups were as follows :—

Centre.	Under 1.	1 to 2	2 to 3	3 to 4	4 to 5	Total.
Central	1654	867	550	263	126	3460
Western	2555	1065	805	675	207	5307
Northern	1658	1144	559	463	124	3948
Eastern	1788	890	937	640	155	4410
Total	7655	3966	2851	2041	612	17125

II.—MUNICIPAL ANTE-NATAL AND POST-NATAL CENTRE

No. of sessions held	48
No. of mothers attending	169
Total attendances	497
Of new cases :—	
Ante-Natal	129
For diagnosis	4
Post-Natal	9
Referred by :—	
Doctors at Welfare Centres	14
Health Visitors	3
Midwives	2
Private practitioners	—
Miscellaneously (*e.g.*, by office staff in cases already sanctioned by the Committee for the Maternity Home, by other mothers attending the Clinic)	123
Referred for treatment :—	
Dental treatment	56
Royal Devon and Exeter Hospital	10
Birth Control Clinic	1
Eye Infirmary	2

III.—MIDWIVES ACT, 1936.

Summary of work carried out by the Exeter Maternity and District Nursing Association on behalf of the City Council during the year.

	Total.
No. of cases attended as midwives	249
No. of visits as midwives	4432
No. of cases attended as Maternity Nurses	95
No. of visits to cases as Maternity Nurses	1692
Total number of cases seen at the Clinics	448
Attendances at the Clinics	1325
Examined by Doctor	432
Visits to patients' homes	1467
Total number of cases seen at the Post-Natal Clinics	11
Total number of attendances	44
Examined by doctor	10
Total number of Medical Aid Forms, for Mother or Baby	78
Total number of Medical Aid Forms, for Mother or Baby, ante-natal	18
Total number of cases referred to Hospital	11
Total number of cases referred to Hospital, ante-natal	8
No. of cases dealt with under lying-in-charity	44

During the year 459 mothers attended the Association's Ante-Natal and Post-Natal clinics making 1,369 attendances. Of this total, 442 attendances were to see the Association's medical officers and 927 to see nurse-midwives.

The Association also undertakes nursing of the sick poor on behalf of the Public Health Committee.

During the year, 2,514 nursing visits were made at the instance of various medical officers employed by the Council.

IV.—PROVISION OF MILK AND FOODSTUFFS.

Fresh and dried milks are supplied by the Council in those cases where the condition of the infant shows that extra nourishment is required and the parents are unable to provide it. It is supplied either at half-cost or free, according to circumstances. During the financial year 1938-39, the cost of milk supplied was £811 17s. 7d.

In respect of this sum, £197 7s. 11d. was received from the mothers in part payment. Net cost, £614 9s' 8d., being an increase of £43 7s. 7d. over the previous year.

The scale approved by the City Council for the issue of milk is as follows :—

No. in Family.	Free of cost. Income not exceeding per head, less rent.	At half-cost price. Income not exceeding per head, less rent.
1 or 2	8/-	9/-
3	7/-	8/-
4	6/-	7/-
5 or more	5/-	6/-

V.—BIRTHS.

1,215 notifications of live births were received during the year, 95.5 of the notifications were made by midwives and 4.5 by medical practitioners or relatives.

In 307 instances the midwives summoned medical help, in accordance with the rules of the Central Midwives Board, while 46 other notifications in connection with still births, artificial feeding, etc., were received.

The amount paid by the Local Authority to doctors under the Midwives Act was £386 11s. 10d. of which £119 18s. 10d. was received back from patients in part payment.

The conditions for which the midwives summoned medical aid were as follows :—

Premature labour	2
Ruptured perineum	70
Prolonged labour	50
Abnormal presentation	21
Ante-partum haemorrhage	13
Post-partum haemorrhage	6
Adherent placenta	9
Stillbirth	5
Albuminuria	10
Miscarriage	10
Rise of temperature	16
Unsatisfactory condition of mother	46
Unsatisfactory condition of baby	49

VI.—STILLBIRTHS.

The number of stillbirths during the year was 48, 26 were attended by doctors and 22 by midwives.

These may be classified as follows :—

	Macerated, *i.e.*, died at some time prior to birth.	Non-Macerated.
Difficult labour and abnormal presentations	3	12
Malformation of Infant	1	5
Toxaemia of pregnancy and albuminaria	3	3
Ante-Partum Haemorrhage	3	—
Ill-health of, or accident to mother	6	4
No cause assigned	3	5
Totals	19	29

VII.—HOME VISITS UNDER THE NOTIFICATION OF BIRTHS ACTS.

During the year, the health visitors paid 873 first visits and 6,024 subsequent visits to children under the age of 12 months and 6,323 visits to children between the ages of 12 months and 5 years.

The health visitors staff the various centres and clinics and are also school nurses under the Education Committee.

VIII.—MATERNITY HOME AND SERVICES.

The arrangement made with the Public Assistance Committee for the use of the maternity accommodation at the City Hospital as a Temporary Municipal Maternity Home has continued to work satisfactorily. The number of cases admitted was 106 compared with 103 the previous year.

Complicated and difficult cases are admitted to the Royal Devon and Exeter Hospital, the admissions numbering 59 compared with 58 in 1937. It is agreed that the number of beds available for maternity and ante-natal patients in Exeter is insufficient. The provision of adequate accommodation is under consideration.

IX.—BIRTH CONTROL.

A Birth Control Clinic is carried on by the Exeter and District Women's Welfare Association. Cases suitable in the sense of the Ministry of Health's Memorandum 153/MCW are referred by the Local Authority and granted financial assistance.

Since 1930, a total of 93 cases have been referred ; of these, 8 failed to attend, 4 have left the City, 4 have died, 17 are known to have become pregnant and 17 have been taken off the books for non-attendance. This statement does not include others who decline to make use of the Clinic's services.

X.—DENTAL TREATMENT.

Arrangements have been made, with the approval of the Ministry and with the consent of the Education Committee, for the dental treatment of expectant and nursing mothers by the School Dental Surgeons.

Summary of the work done during the year 1938 :—

No. of patients seen	132
No. of visits paid by patients	494
No. of administrations of gas	88
No. of teeth extracted under gas	712
No. of teeth extracted otherwise	14
No. of dentures fitted	92
No. of teeth replaced	948
Other operations	23

Total cost of dental treatment for 1938-39 was £382 10s. 8d., of which £23 0s. 9d. was received back from patients.

XI.—ORTHOPAEDIC TREATMENT.

During the year 30 children from the Infant Welfare Centres received treatment for the following conditions :—

Congenital deformities	11
Injuries at birth	—
Rickets and sequelae	11
Poliomyelitis	2
Miscellaneous	6

and were dealt with as follows :—

28 received out-patient treatment at the clinic of whom 3 have been recommended for in-patient treatment and are await-

ing admission, and 7 have been removed from the books for various reasons. The remaining two received in-patient treatment and are now attending the clinic on discharge from hospital.

The following table gives particulars of cases on the clinic register during the year :—

On Clinic Register at end of 1937.	New cases during 1938.	Cases re-admitted during 1938.	Total cases during 1938.	Discharged.				Remaining on register at end of 1938
				Cured.	Transferred to S.M. Dept.	Non-attendance, etc.	Total.	
31*	30	2	63	7	12	6	25	38

* 4 of this number received in-patient treatment during the year.

The cost of in-patient treatment was £323 12s. 2d., and of this sum £11 1s. 9d. was received back in part payment by patients.

The cost of out-patient treatment was £94 2s. 11d., of which £20 15s. 6d. was contributed by patients.

The Devonian Association for Cripples Aid give a complete orthopaedic service, and continues to do most valuable work.

XII.—OPHTHALMIA NEONATORUM.

Year.	Cases.			Vision unimpaired	Vision impaired	Total Blindness	Removed from district	Deaths	Total
	Notified	Treated. At Home	Treated. Hospital						
1929	8	4	4	7	—	—	1	—	8
1930	4	1	3	4	—	—	—	—	4
1931	6	2	4	6	—	—	—	—	6
1932	11	8	3	11	—	—	—	—	11
1933	7	5	2	7	—	—	—	—	7
1934	6	2	4	5	—	—	—	1	6
1935	7	4	3	6	—	—	1	—	7
1936	7	6	1	7	—	—	—	—	7
1937	1	1	—	1	—	—	—	—	1
1938	3	—	3	3	—	—	—	—	3

It is many years since a case of this disease resulted in injury to vision. There are special facilities for treatment at the West of England Eye Infirmary and there is good co-ordination between this Institution and the V.D. Clinic at the Royal Devon and Exeter Hospital.

Most of the cases reported by midwives under the Board's rules are examples of conjunctivitis due to other causes.

NURSING HOMES REGISTRATION ACT, 1927.

The following is a list of registered nursing and maternity homes in the City.

St. Olave's Home	(17 beds)
St. Mary's Home	(6 beds).
Southcroft, Heavitree Road	(4 beds).
Belmont, Southernhay West	(16 beds).
1, Baring Crescent	(8 beds).
Mowbray, Fore Street, Heavitree	(12 beds).
St. David's, 31, St. David's Hill	(11 beds).
Ernsborough House, Colleton Crescent	(24 beds, for incurable invalids).
Stork's Nest, Topsham Road	(4 beds).
St. Mary's, Blackall Road	(6 beds).
36, St. Leonard's Road	(12 beds).
Duryard Park, Argyll Road	(5 beds).

All the above are visited periodically by the Medical Officer of Health and the maternity homes also by the Supervisor of Midwives.

The following are exempted under the Act :—

Royal Devon and Exeter Hospital.

Eye Infirmary.

During the year the City Council instituted a prosecution under the Public Health Act, 1936, in a case where a nursing home was apparently being conducted although the licence had been revoked. A conviction was obtained and a fine imposed.

EXETER ISOLATION HOSPITAL.

Accommodation and ambulance arrangements remain the same.

In addition to the City, the hospital serves the following local authorities by contracts with the City Council :—

St. Thomas Rural District Council.
Dawlish U.D.C.
Exmouth U.D.C.
Budleigh Salterton U.D.C.
Ottery St. Mary U.D.C.

Sidmouth U.D.C.
Seaton U.D.C.
Axminster U.D.C. and R.D.C.
Honiton T.C. and R.D.C.
Crediton U.D.C. and R.D.C.
Okehampton T.C. and R.D.C.
Princetown Prison Authorities.

The final part of the scheme involves the addition of 24 beds and an operating theatre and staff accommodation. Cases of pulmonary tuberculosis are admitted from Exeter only. Puerperal cases and cases of venereal disease are not admitted. Fever cases are admitted only on the authority of the medical officer of health concerned.

At the beginning of the year, 19 fever patients remained under treatment, 9 of these being from the County. During the year 261 patients were admitted, 93 County and 168 City. At the end of the year, 32 patients remained under treatment, 11 County and 21 City.

Cases of pulmonary tuberculosis are dealt with under a separate section of this Report.

The following table shows the number of cases treated at the Exeter Isolation Hospital during the past ten years :—

Year		County	City	Total
1929	Treated at Exeter Isolation Hospital	167	151	318
1930	,, ,, , ,,	279	361	640
1931	,, ,, ,, ,,	108	161	269
1932	,, ,, ,, ,,	84	107	191
1933	,, ,, ,, ,,	60	86	146
1934	,, ,, ,, ,,	116	113	229
1935	,, ,, ,, ,,	119	174	293
1936	,, ,, ,, ,,	126	179	305
1937	,, ,, ,, ,,	168	96	264
1938	,, ,, ,, ,	93	168	261
	Average number of cases admitted for the ten years	132	159	291

The following was the mortality amongst the 261 cases :—

County	City
1	3

This gives a case mortality of 1.5.

The average duration of each patient's stay in the Isolation Hospital was 31.2 days.

	Days
Against in 1929	40
,, 1930	52
,, 1931	31
,, 1932	35
,, 1933	36
,, 1934	31
,, 1935	34
,, 1936	35
,, 1937	36
,, 1938	31
Average stay for the ten years	36

The average number of fever patients per day was 21.6.

During the financial year 1938-39, a total of £2,334 10s. 9d. was received for the treatment of infectious disease, being £2,035 2s. 3d. from outside authorities, and £299 8s. 6d. from City patients.

Disease.	Remaining.	Admitted.	Discharged.		Deaths.	Remaining at end of year.
			Diagnosis confirmed.	Diagnosis not confirmed.		
Scarlet Fever	9	152	140	3	—	18
Diphtheria	6	59	48	3	—	14
Tonsillitis	—	6	6	—	—	—
Enteric Fever	3	12	13	—	2	—
Dysentery	—	1	1	—	—	—
Erysipelas	—	8	8	—	—	—
Measles	—	11	9	1	1	—
Whooping Cough	—	6	4	2	—	—
Chickenpox	—	1	1	—	—	—
Mumps	—	1	1	—	—	—
Poliomyelitis	1	3	2	2	—	—
Polio-encephalitis	—	1	—	—	1	—
Erythema	—	1	1	—	—	—
	19	262	234	11	4	32

EXPLANATORY NOTES :—

SCARLET FEVER. Single cases of this disease were complicated by measles, rubella and diphtheria respectively. Of the cases in which diagnosis was not confirmed, one proved to be urticaria and two were erythema. A majority of the cases were treated with serum and this proved satisfactory. The type of disease has been mild with little tendency to troublesome complications.

DIPHTHERIA. It will be noted that there were no deaths in 54 cases (net) treated. Of these 10 were " bacteriological " cases only, 3 were nasal and 3 laryngeal. One apparently straightforward case in an adult developed acute otitis with mastoid complication requiring operation. This was due to a coincident streptococcal infection.

In three cases the diagnosis was not confirmed, 1 tonsillitis, 1 Vincent's Angina, and 1 acute infantile dyspepsia.

ENTERIC FEVER. Altogether 15 cases were treated against 20 last year, but as one case was admitted twice the number of persons treated is 14 and the actual number of admissions during the year 11. These cases include a group of 5 typhoids from a small outbreak at Axminster. One of these was fatal owing to perforation of the intestines, although the perforation was found and closed by operation within two hours of its occurrence. Of the other fatal cases, one was typhoid and the other an example of double infection with typhoid and paratyphoid B. There was only one other case of paratyphoid B (contracted in Wales) and this too, was a double infection, the other organism being the dysentery bacillus Flexner type Y. This patient recovered after a long illness, but died some months later from heart disease.

DYSENTERY. The single case was due to infection with the Sonne bacillus, and was contracted in France.

MEASLES. One case was complicated by scarlet fever, and three others by pneumonia, one of which died.

WHOOPING COUGH. Four cases were genuine, three being complicated by pneumonia, the remaining two proved to be bronchitis and diphtheria respectively.

CHICKENPOX. The single patient also had scarlet fever at the same time.

POLIOMYELITIS AND POLIOENCEPHALITIS The single case of encephalitis was admitted on the 6th January and was really part of the 1937 outbreak fully described in the last report. One case of poliomyelitis remained from the previous year, and one other case admitted in May was genuine. Both these had paralysis of the upper arm muscles. In two other cases the diagnosis was not confirmed.

As cases were notified in some numbers in various parts of England during the late summer and autumn, it was considered desirable to put into operation a scheme for early isolation and treatment similar to that arranged in 1937 in conjunction with the County Medical Officer of Health and the Medical Officer of Health of Plymouth.

Particulars of the scheme were circularised to all district medical officers and practitioners in the area. By it the County of Devon was divided roughtly in half, Plymouth and Exeter Isolation Hospitals acting as centres wherein isolation and early orthopaedic treatment were provided.

The great importance of early and accurate diagnosis was emphasised, also the undesirability of labelling cases prematurely and sending so-called observation cases to hospital. The initiative must rest with the family doctor, and if he feels unable to come to a decision it is his duty to obtain a second opinion. To rush cases to Hospital for observation is not in the best interests of the patient and is unnecessary from a public health point of view. The disease does not appear to be very infectious, second cases in a household being rare. It has been taught for a long time that the disease is commonly conveyed by a third party who appears to be perfectly healthy. The exact method of infection is still in doubt. At all events there is plenty of time for a careful clinical examination and in doubtful cases a delay of eight to twelve hours with ordinary domestic isolation will do no harm. The most useful single procedure is lumbar puncture, but this cannot replace proper enquiry at the bedside.

The exact period during which a patient remains infectious is not known : the official figure of six weeks probably errs on the safe side. Once diagnosed, the main requirements are to bring the cases into convenient centres where they can be isolated temporarily and receive immediate orthopaedic as well as medical treatment.

During the past year a good deal has been said and written about convalescent serum in the treatment of poliomyelitis. The consensus of opinion seems to be that serum has no real value. In these circumstances we have not troubled to prepare any more.

Fortunately our arrangements were not required as there was no prevalence of this disease in Devon during 1938.

Great public interest has been displayed recently in artificial respirators of one sort and another, designed to maintain life while damaged respiratory muscles have the chance to recover. There are several forms of respirator obtainable working on different principles. Those especially interested are referred to the descriptions in the medical journals of a demonstration organised towards the end of 1938 by the London County Council.

It was at the time of this demonstration that Viscount Nuffield decided that the apparatus known as the Both Respirator could be manufactured on a large scale by his organisation, and either sold at a low price or given to suitable hospitals. The apparatus resembles the original "iron lung," but is less complicated and cumbersome.

It is recorded with great pleasure and grateful thanks that Viscount Nuffield has decided to present one of these respirators to the Exeter Isolation Hospital, and another to the Princess Elizabeth Orthopaedic Hospital in Exeter.

Patients requiring this form of treatment will be admitted to these hospitals, as special skill in nursing and special care in running the apparatus are required.

At the time of writing the respirator has arrived and steps are being taken to send certain members of the staff to Radcliffe Infirmary, Oxford, for the necessary instruction. The respirator cannot be loaned to small hospitals or private individuals.

SMALLPOX HOSPITAL.

By agreement with the County Council, it has been arranged that any smallpox cases arising shall be treated at the County Council's Smallpox Hospital at Upton Pyne.

SUPERANNUATION.

During the year, 130 persons were medically examined under the scheme against 141 the previous year. Of these, 93 were examined as to fitness for inclusion in the scheme, and 37 as to fitness for returning to work after sickness or injury. In some cases several examinations of an individual were necessary.

MENTAL DEFECTIVES.

Ascertainment, Classification and Supervision.

Educable defectives under the age of 16 are supervised by the Education Committee. All other mental defectives with the exception of those in receipt of poor law relief or who have been dealt with under the provisions of the Lunacy and Mental Treatment Acts, are under the care of a Statutory Committee appointed by the City Council.

The number reported to the Statutory Committee since the passing of the Mental Deficiency Act, 1913, is 377. Of these 54 have died, 67 have left the City or been de-certified, 13 have been transferred to the Mental Hospital, and 8 are in the City Hospital and Childrens' Home as the responsibility of the Public Assistance Committee (one being certified under the Lunacy Acts). The remaining 235 cases are placed as follows :—

In certified institutions	99
*In the Rampton State Institution	3
On licence from certified institutions	8
Under guardianship	5
Under statutory supervision	28
In receipt of poor relief but under supervision	13
Under voluntary supervision	79
	235

* It should be noted that these cases are the responsibility of the State so long as they are detained at the Rampton State Institution.

Of the cases under statutory supervision, three were awaiting vacancies at the Royal Western Counties Institution on the 1st January, 1939.

There is still insuperable difficulty in finding places for the lower grade mental defectives in spite of the extension of the Royal Western Counties Institution, Starcross, now in partial occupation. There is also difficulty in placing educable mentally defective children of school age whose parents desire admission to a special residential school.

22 new cases were investigated during the year. The following tables show :—

(*a*) the agencies by which the cases were reported; and

(*b*) the action taken.

Number of cases reported by :—

1. The Local Education Authority	(*a*) Under the Mental Deficiency (Notification of Children) Regulations	4
	(*b*) Informally for general supervision	5
2. The Police		1
3. The Public Assistance Authorities		4
4. Other Local Authorities		2
5. Other sources		6
		22

Action taken :—

1. Sent to Certified Institutions	3
2. Awaiting admission to a Certified Institution	1
3. Placed under statutory supervision	5
4. Placed under voluntary supervision	8
5. On examination found to be not certifiable	2
6. No action at present	3
	22

The situation in Exeter regarding ascertainment, classification and supervision of mentally defective persons remains satisfactory, except for the shortage of places in institutions already mentioned.

The importance of accurate work and correct action under the Mental Deficiency Acts is only just being recognised by the more intelligent members of the general public and is not yet appreciated by the masses. Mental deficiency problems need to be tackled openly and boldly rather than hidden away as if they were something unseemly or indelicate. It is pleasant to note an increasing interest in these problems.

LICENCE.

The Board of Control frequently emphasises the value of licence. During the year three female defectives were granted licence (one to a resident situation, one to the care of her relatives, and one to the City Hospital to await the birth of her child), and one had to be recalled to the institution as she became unsettled in her situation. Two males were also granted licence (one to a resident situation and one to the care of his relatives) and two had to be recalled to the institution as they became unsettled in their situations. One male on licence was also discharged.

There were eight defectives on licence on the 1st January, 1939. The following table shows how they were placed :—

	Male	Female	Total
In resident situations	3	3	6
In care of relatives, and in daily situations	—	1	1
At City Hospital	—	1	1
	3	5	8

EMPLOYMENT.

The Board of Control also emphasises the value of employment in the cases of all defectives where this is in any way possible. This matter has been carefully investigated in Exeter and it is found that a surprisingly large number of defectives are employed, either for wages or as domestic help in the homes of their relatives. To meet the needs of the very small number of male defectives not so employed, arrangements have been made with the Public Assist-

ance Committee to open an employment centre at their Institution. Here instruction is given in suitable work, and the defectives are allowed a small weekly sum for pocket money by way of encouragement. In some cases the training so given may lead later to the possibility of remunerative employment, but in the majority of cases its real value is in giving the defective person some occupation for mind and body. Relatives of these defectives have expressed their appreciation of what is being done.

EXPENDITURE.

The expenditure for the financial year was £7,433 3s. 4d., the bulk of which was for the maintenance of patients in institutions, this amount being £6,703 0s. 11d.

APPENDIX I.

Special Report to the Chairman and Members of the Maternity and Child Welfare Committee of the Exeter City Council.

Midwives Act, 1936.

In accordance with a letter from the Ministry of Health under date 8th October, 1938, addressed to the Town Clerk, I beg to report as follows on the provision made for domiciliary midwifery and upon the working of the arrangements since the inception of the service.

The Scheme. At this date the whole of the Scheme as finally approved by the City Council and submitted to the Ministry of Health is in being. The Scheme and the heads of the agreement between the City Council and the Exeter Maternity and District Nursing Association were reported in Appendix I, page 89, of the Annual Report of the Medical Officer of Health for 1936, copies of which are in possession of the Ministry and were sent to every member of the Council.

The inception of the Scheme on the appointed day, viz., 30th July, 1937, and the work done up to the end of that year were described in some detail in the Annual Report of the Medical Officer of Health for that year, pages 75-79, but to save the inconvenience of further reference the salient facts will be repeated and the statistics brought up to date, that is to 30th September, 1938.

General Considerations. In deciding to carry out obligations as to the provision of an adequate domiciliary midwifery service under the Act by means of an agreement with the Exeter Maternity and District Nursing Association, the Council had in mind the already not inconsiderable amount of nursing and maternity work which the Association was undertaking in the City in an efficient manner partly in return for grants made by the Local Authority. It appeared that so far as Exeter was concerned, the needs of the City would best be met by an extension of the Association's activities, rather than by the setting up of a purely municipal service, which, in so small an area, would almost inevitably become an opposition service.

Reference to the Scheme will show that the opportunity was taken at the same time to assist the Association to extend its ante-natal and general nursing work, particularly by the establishment of fully staffed branches in proximity to the two large Council Housing Estates on the south-eastern and south-western borders of the City.

The Council and the Association have now had sufficient experience to realise the wisdom of their decision.

There was some delay in the final settlement of certain details between the Ministry, the Council and the Association, nevertheless, the Association announced their willingness to start on the appointed day and, in fact, did so.

Work was begun with 5 out of the 7 midwives stipulated in the agreement, but by 14th October the full complement was available.

The Association already possessed a branch in the south-western district, but this was transferred to much better premises on 12th April, 1938. Temporary accommodation in the south-eastern district was arranged, and this was replaced by permanent accommodation on 4th May, 1938. The central headquarters remain at Dix's Field. All branches have suitable notice boards and are on the telephone.

The ante-natal centres additional to the one carried on for many years past at Dix's Field, are at the Buddle Lane Community Centre for the south-western district, opened 1st September, 1937, and at the Shakespeare Road Community Centre for the south-eastern district, opened 1st October, 1937. All act as ante-natal and post-natal centres, and have the same facilities as the centre conducted by the Council at the Alice Vlieland Welfare Centre, Bull Meadow. The Shakespeare Road Centre meets weekly and the other two fortnightly.

In a full year the Association receives £500 in addition to grants arranged before the Act. Payment from the appointed day to 31st December, 1937, was calculated *pro rata*.

Fees for midwifery and maternity nursing are collected by the Association in accordance with an agreed scale, details of which are given in Appendix I, page 89, of the Report of the Medical Officer of Health for 1936.

The present position. Inasmuch as Exeter is the largest centre of population in a wide district, the gross number of births taking place in the City is weighted by an unusual proportion of institutional as opposed to domiciliary births. Thus a considerable proportion of the births occurring in the Royal Devon and Exeter Hospital, St. Thomas Public Assistance Institution (Devon County Council), the two homes conducted by the Diocesan Society for Friendless Girls, as well as private maternity homes, are in respect of mothers belonging to places outside the City and are therefore " transferable outwards " by the rules of the Registrar-General. This is shown by the following figures.

	Registered births.	Add transferred in	Deduct transferred out.
1935	1098	18	201
1936	1099	34	151
1937	1175	31	226

It follows from this that the number of maternity cases to be provided for by a service of domiciliary midwives is smaller than might be supposed from a casual glance at the crude figures.

In 1937 out of a gross total of 1,233 births taking place in the City, 456 occurred in institutions and 777 in private houses.

Of this 777, the number attended by the Exeter Maternity and District Nursing Association was as follows :—

A.	Before the Scheme, *i.e.*, 1st January—29th July inclusive—as midwives	151
	as maternity nurses	60
		211
B.	After the Scheme, *i.e.*, 30th July—31st December inclusive—as midwives	75
	as maternity nurses	37
		112
	Grand Total	323

The Association attended therefore, a little under half of the total domiciliary confinements in the City.

From the 1st January—30th September, 1938, the work has been as follows—as midwives	193
as maternity nurses	82
	275

The Association's midwives are not yet working to full capacity, so that it may be stated quite definitely that the provision made has been sufficient.

Midwives in Private Practice. Having regard to the residential character of this City, it is reasonable to assume that many middle and upper class mothers who prefer to have their babies at home, will continue to employ private midwives as maternity nurses so long as these are available.

In this connection it is noted that 44 midwives notified their intention of practising in the City during 1937, 17 of whom were working in institutions. This leaves 27 in private practice as midwives and/or maternity nurses. All these 44 midwives were State Certified by Examination, there being no midwives in the City practising by virtue of being in practice before the date of the principal Act.

Cancellation or Surrender of Certificates. Under the 1936 Act no midwife has been retired on account of old age or infirmity, there being in fact no cases for consideration under this section. Hitherto, no midwife in private practice has surrendered her certificate for compensation, although one or two have made enquiries. The determining factor in the latter case would appear to be the irrevocable nature of the decision which has to be made, that is to say, the certificate once surrendered is cancelled for ever.

Maternal Mortality. The City's record of maternal mortality is consistently good and is given below for the past ten years. During 1938 (up to 30th September) there has been one maternal death yielding a rate round about unity. It may be

added that the Exeter Maternity and District Nursing Association has carried out its work without losing a mother for many years :—

Year.	Maternal Deaths.	Mortality Rate.	Neo-natal Deaths.	Infantile Mortality Deaths.	Infantile Mortality Rate.
1928	4	3.9	23	66	69.04
1929	3	3.07	25	52	53.2
1930	5	4.2	21	47	49.7
1931	0	0	30	53	56.7
1932	3	3.02	35	51	53.6
1933	3	3.07	23	45	47.8
1934	3	2.8	27	57	55.8
1935	1	0.9	25	33	33.6
1936	2	2.09	29	57	62.3
1937	1	0.9	34	55	56.1

Incidentally, the higher proportion of neo-natal deaths, *i.e.*, infants who die in the first 28 days of life, is noteworthy, as this fraction of infantile mortality is not influenced much by ordinary Child Welfare activities, *but is likely to be influenced by good ante-natal provision.*

Medical Aid. (Section 14 of the Midwives Act, 1918). Arrangements under this Section have worked smoothly for many years. This side of the work was the subject of a special memorandum by the Medical Officer of Health to the City Council dated 11.6.35. In addition, a panel of consultants is available to medical practitioners. This was constituted in October, 1935.

In the Ministry of Health Circular No. 1705, the Council was requested to take steps to put into effect the recommendations made in the Report (CMD 5422) on Maternal Mortality, namely that the Local Supervising Authority should, in consultation with the local medical profession, arrange that the best local obstretic skill is made available when midwives are required by the Rules of the Central Midwives Board to call in a doctor. The procedure recommended in the Circular has been adopted, and the Council is now awaiting the constitution of the special Advisory Committee described therein. Moreover, it has been agreed that this Obstetric

Advisory Committee shall have a somewhat wider function than the mere compilation of a panel of approved practitioners, and that it shall, in fact, act in a general advisory capacity in all matters pertaining to the public maternity service.

Prohibition of unqualified persons acting as Maternity Nurses for gain.

Having regard to the provision for a public maternity service made under the Act of 1936 and to the particular needs of the City, the Council is now asked by the Ministry to consider Section 6 of that Act, and to decide whether it feels justified in requesting the Minister, in the light of this report, to make operative the order contained in sub-section 2 of this section, which would make it an offence for unqualified persons to assist at confinements as nurses for gain. Section 6 of this Act is as follows :—

"(1) If, on or after the date on which this section is applied to the area of any authority or to any county district contained therein, any person, being a woman neither certified under the principal Act nor registered in the general part of the register of nurses required to be kept under the Nurses Registration Act, 1919, or a male person receives any remuneration for attending in that area or district as a nurse on a woman in childbirth, or at any time during the ten days immediately after childbirth, that person shall be liable on a summary conviction to a fine not exceeding ten pounds :

Provided that the provisions of this sub-section shall not apply in the case of :—

(*a*) any person who, while undergoing training with a view to becoming a duly qualified medical practitioner or a certified midwife, attends on a woman as aforesaid as part of a course of practical instruction in midwifery recognised by the General Medical Council or by the Board ;

(*b*) any person who attends on a woman as aforesaid in any nursing home which is registered under the Nursing Homes Registration Act, 1927, or exempt from the operation of that Act under section 6 thereof, or in any hospital or other premises or institution which is not included in the definition of the expression " nursing home " in sub-section (1) of section 10 of that Act by virtue of paragraphs (1), (2), and (3) thereof ; or

(c) a woman who, before the first day of January, nineteen hundred and thirty-seven, has been certified by the authorities of a hospital or other institution to which the Minister has by order applied this proviso, to have been trained in obstetric nursing and who has given notice in writing to the authority of the area that she has been so certified.

(2) The Minister may by order apply this section to the area of any authority, or to any county district contained therein, when he is satisfied that that authority has secured in pursuance of this Act the provision of a service of domiciliary midwives which is adequate for the needs of the area or district.

(3) the provisions of this section shall be in addition to, and not in derogation of, the provisions of sub-section (2) of section one of the principal Act."

In submitting this report to the Ministry of Health and to the City Council, I beg to say that in my opinion the provision made for a public domiciliary maternity service is sufficient for the present needs of the City, that the service is satisfactory, and that the service is capable of extension from time to time if necessary on the present administrative basis.

G. B. PAGE,
Medical Officer of Health.

25th October, 1938.

APPENDIX II.

Special Report to the Chairman and Members of the Public Health Committee.

Health Campaign, 1937-38.

This campaign was undertaken by the Central Council for Health Education under the auspices of the Ministry of Health and the Board of Education.

The object of the campaign was to draw public attention to the various social services provided by Local Authorities and to increase the use made of these services.

The campaign began on 1st October, 1937, and ended on 31st March, 1938. In was conducted by means of posters, leaflets, newspaper articles, broadcasts and special meetings.

The campaign was divided into four sections :—

1. Introductory.
2. Maternity and Child Welfare.
3. School Children.
4. The adolescent and adult with special reference to Physical Fitness.

The first communication about the campaign was dated 18th March, 1937, that is to say after the Council's estimates for the financial year had been approved It was, therefore, impossible to incur any heavy additional expenditure and, in fact, none was incurred except in connection with the Physical Fitness section for which a special grant of £50 was made. For the same reason it was not possible to display monthly the large 80″ × 120″ posters, except in connection with the section named.

During the whole of the campaign both indoor and outdoor posters were displayed by various Council departments, together with counter cards, traffic cards, book-markers and leaflets. In addition to Council departments, various other offices and organisations assisted, namely :—

The Exeter Maternity and District Nursing Association, The Information Bureau, The Exeter Insurance Committee, The Employment Exchange.

The numbers of posters, etc., *distributed monthly* were as follows :—

Outdoor	20″ × 30″	24
Indoor	20″ × 30″	24
For Schools	20″ × 30″	60
For class demonstration	20″ × 30″	30
Counter cards		24
Traffic cards		120
Four page folders		2000
Book marks		500

The monthly distribution of folders was as follows :—

800 to senior scholars at schools to take home, 200 for the public health office, 1,000 distributed to householders in the City. Also 2,000 folders dealing with Tuberculosis were distributed and 500 folders dealing with Venereal Disease were distributed through various social organisations in the City.

In addition, an extra supply of folders was made available for the public meeting dealing with Physical Fitness in the Civic Hall, and the Empire Marketing Board's notice boards were kept supplied with suitable posters throughout the six months.

The outstanding event of the campaign was the Public Meeting and Demonstration in support of Physical Fitness in the Civic Hall on 17th March under the chairmanship of the Right Worshipful the Mayor. Between the demonstrations the audience was addressed by the Right Honorable Robert Bernays, M.P., Mr. A. Jenkins, M.P., and Lord Burghley, J.P., M.P. It is understood that the Hall could have been filled twice over.

On Tuesday, 5th October, the Western Welfare Centre in Buddle Lane was opened officially by the Mayor, accompanied by the Sheriff and their Ladies.

On Monday, 13th December, Ladysmith Road Senior Boys' School was opened by the Parliamentary Secretary to the Board of Education (Kenneth M. Lindsey, Esq., M.P.).

Co-operation with other bodies was undertaken, for example, exchange of posters, etc., with the Odeon Cinema on the occasion of the exhibition of the health film " One Hundred Years " ; also the Medical Officer of Health addressed the local branch of Toc H by invitation, the subject being " The Food we Eat."

Although the amount of advertising matter used was not large, *none of it was wasted*..

Business men say that advertising is necessary, but they add that it must be carried out expertly. The material received from the Central Council for Health Education was good and of a type calculated not to raise controversy. There must, however, come a time when health propaganda, if persisted in, touches upon controversial matters, and this seems best avoided so far as Local Authorities are concerned.

The health services in Exeter and elsewhere have received considerable publicity ; it is up to the individual to use them. Public meetings generally consist of preaching to the converted. What counts most is the steady day to day work of committees and their officers, particularly medical officers, health visitors and sanitary inspectors who meet the people in their homes.

It is a physiological axiom that an appropriate stimulus is followed by a response. Too frequently repeated stimuli do not produce response, but fatigue. Occasionally repeated stimuli produce not only response, but sometimes a better response as time goes on. Probably this is true of the kind of stimulus we call advertisement, or propaganda.

At the present time the public seem to be overwhelmed and just a little bewildered by health propaganda, slogans and the like. There is scarcely a journal that has not a health section, articles about health, and disease, and so forth. The ordinary advertisements are full of this sort of thing whether the subject be beer, bread, beans, or " baccy ".

Occasionally there is an element of comedy. For example, a recent poster near a City bus stop urges " Exercise every day—walk to work." On the back of the bus tickets will be found " Never walk when you can ride. Its quicker and easier."

By all means let us advertise our health services—if possible by the excellence of their work—and at any rate in our way as best suits the City. Above all let us retain our sense of proportion—and a sense of humour.

G. B. PAGE,

Medical Officer of Health.

14th April, 1938.