

[Report 1956] / Medical Officer of Health, Gloucester City & Port.

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Publication/Creation

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ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE

CITY AND PORT OF GLOUCESTER

AND

PRINCIPAL SCHOOL MEDICAL OFFICER

FOR THE YEAR 1956



ORDERED TO BE PRINTED.

With the compliments of the Medical Officer of Health

City and County of the City of Gloucester.



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HEALTH COMMITTEE (1955/56)**Chairman :**

ALDERMAN S. A. STODDART
(*Deputy Mayor*)

Deputy Chairman :

COUNCILLOR R. E. H. MOULDER

Members :

THE MAYOR (*Ex-Officio*)
ALDERMAN MRS. F. WENTWORTH
" M. G. LEWIS
COUNCILLOR T. THOMAS
" F. HARRIS
" MRS. L. R. LANGDON
" (*Mayoress*)
" W. F. ERRINGTON
" F. PHELPS
" A. V. STIRLAND
" J. F. CURTIS
" W. MAY
" J. C. DILLON
" C. COLLINS
" F. DAVENPORT

**NATIONAL HEALTH SERVICE
SUB-COMMITTEE**

The whole of the Members of the Health Committee with the addition of the following co-opted members :—

MISS V. M. DOVER, S.R.N.
MR. W. H. GINGELL
MRS. K. HEAL, S.R.N.
MRS. E. EGGLETON
DR. G. C. WHARTON
MRS. E. PHELPS
MRS. D. M. SALMON
MRS. H. F. ETHERIDGE
MRS. E. M. WHITE
MRS. D. THOMAS

**AFTER CARE SUB-COMMITTEE
(including Mental Health)**

ALDERMAN S. A. STODDART
(*Deputy Mayor*)
" MRS. F. WENTWORTH
" M. G. LEWIS
COUNCILLOR R. E. H. MOULDER
" F. HARRIS
" MRS. E. EGGLETON
" MRS. M. ASKEW

HEALTH COMMITTEE (1956/57)**Chairman :**

ALDERMAN S. A. STODDART (died 6th July, 1956)
COUNCILLOR T. THOMAS (from 13th July, 1956)

Deputy Chairman :

COUNCILLOR T. THOMAS (until 13th July, 1956)
COUNCILLOR T. JONES (from 21st Sept., 1956)

Members :

THE MAYOR (*ex-officio*)
ALDERMAN MRS. F. WENTWORTH
" F. HARRIS
COUNCILLOR R. E. H. MOULDER
" MRS. L. R. LANGDON
" W. F. ERRINGTON
" E. R. JELF
" F. PHELPS
" T. JONES (until 21st Sept., 1956)
" A. V. STIRLAND
" J. F. CURTIS
" W. MAY
" J. C. DILLON
" W. J. LEWIS
" C. COLLINS (from 3rd Oct., 1956)

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MRS. E. EGGLETON
MRS. E. PHELPS
MRS. K. HEAL, S.R.N.
MRS. R. LAYTON
MRS. E. M. WHITE
MRS. H. F. ETHERIDGE
MR. B. S. SAUNDERS, L.D.S., R.C.S.
MRS. M. ASKEW
MRS. M. DAVENPORT
MRS. V. G. LAWSON

**AFTER CARE SUB-COMMITTEE
(including Mental Health)**

ALDERMAN S. A. STODDART (died 6th July, 1956)
COUNCILLOR T. THOMAS (from 13th July, 1956)
ALDERMAN MRS. F. WENTWORTH
" F. HARRIS
COUNCILLOR T. JONES
DR. B. M. MANDEL BROTE
MRS. E. EGGLETON
MRS. M. ASKEW

HEALTH OFFICERS OF THE AUTHORITY

CHARLES COOKSON, M.D., D.P.H., Medical Officer of Health, City and Port of Gloucester ;
Principal School Medical Officer, Medical Officer of the Isolation Hospital.

DAVID S. CLARK, M.B., Ch.B., D.P.M., D.P.H., Senior Assistant Medical Officer of
Health ; School Medical Officer.

VALERIE N. BAKER, M.B., Ch.B., D.Obst.R.C.O.G., Assistant Medical Officer of Health ;
School Medical Officer.

DR. F. J. D. KNIGHTS, M.R.C.P., and DR. R. H. ELLIS, M.R.C.P., Chest Physicians,
and MR. H. A. HAMILTON, M.R.C.O.G., and MR. S. A. BOND, F.R.C.S., M.R.C.O.G.,
Consultant Obstetricians. Part-time, by arrangement with the South Western
Regional Hospital Board :

DRS. H. CAIRNS-TERRY, J. GREENE (Senr. and Junr.), R. B. BARNES, D. C. BRADFORD,
W. MURRAY, N. LEWIS and G. C. MATHERS, Medical Officers, Infant Welfare
Centres.

E. G. H. LIGHTFOOT, L.D.S., Principal School Dental Officer.

MESSRS. R. G. BOODLE, L.D.S., M. J. BARTLETT, L.D.S., and J. R. COND, B.D.S.,
School Dental Officers, part-time.

M. E. D. TURNER, B.Sc., F.R.I.C., Public Analyst, part-time.

Public Health Inspectors : MESSRS. R. I. WILLIAMS (Chief, and Port Health Inspector),
C. H. DAVID (and Assistant Port Health Inspector) (Resigned 23rd August, 1956),
G. W. ALEXANDER (and Assistant Port Health Inspector) (Appointed 24th Sept.,
1956), E. A. BLUNDELL, R. C. UPHAM (Assistant), CAPT. H. H. BURBRIDGE (Assistant
Port Health Inspector, part-time), and two Student Public Health Inspectors.

Health Visitors : MISS A. R. TAYLOR (Superintendent Nursing Officer), The MISSES
P. E. CATES, D. M. EVANS, E. M. GARRETT, C. JONES, J. MACNAMARA, T. MORGAN,
A. POPE, P. M. VENNEL and E. S. VIDAL, and MESDAMES S. McGRATH, I. MASSICKS
and J. TANNER.

M. JONES, F.P.S., Chief Pharmacist, Health Centre, Longsmith Street, Gloucester.

F. L. MAYO, M.P.S., Chief Pharmacist, Health Centre, Barton Street, Gloucester.

MISS G. GAPPER, Home Teacher for the Blind.

E. T. CHINN, Ambulance Officer.

H. J. HARVEY, Chief Clerk and Duly Authorised Officer.

Eight whole-time and three part-time clerks including two Duly Authorised Officers ;
one whole-time, one part-time School Health Services clerks, two Dental Attendants,
whole-time and two part-time Assistants, in conjunction with the Education
Committee ; one Disinfecting Officer and three Rodent Operatives.

HEALTH SERVICES

HEALTH DEPARTMENT :

Priory House, Greyfriars (Tel. 24416-7).

CLINICS AND CENTRES

Health Clinic,

Brunswick Road (Tel. 23253)

Ante and Post Natal Clinics	...	Nurses' Sessions	...	Mondays and Thursdays (by appointment)
		Doctors' "	...	Wednesdays and Fridays (by appointment)
		Bookings	...	Mondays, 9.30 a.m.
Relaxation Classes	...	Mondays to Thursdays,		2.15 p.m.,
		Tuesdays,		6.30 p.m., Wednesdays,
		10 a.m. (by appointment).		

Health Centres : 20 Longsmith Street, Gloucester (Tel. 22362).
11, Barton Street, Gloucester (Tel. 22682).

Infant Welfare Centres :—

Trinity Baptist Church Sunday School, Selwyn Road	...	Tuesdays	2 p.m.
Mission Hall, Sherborne Street	...	Wednesdays	"
St. Stephen's Church Hall, Linden Road	...	"	"
Church Hall, Matson	...	"	"
St. George's Hall, Lower Tuffley	...	Alternate Thursdays	"
St. Michael's Hall, Lower Tuffley	...	"	"
Tyndale School, Stratton Road	...	Fridays	"
Coney Hill	...	"	"
Elmscroft Community Centre, Wotton	...	"	"

General :—

Chest Clinic, Gloucestershire Royal Hospital, Great Western Road	...	Mondays 9-30 a.m.	
		Tuesdays 9-30 a.m.	
		Fridays 9-30 a.m.	
Tuberculosis Immunisation Clinic, Health Clinic, Brunswick Road	...	Saturdays 9-30 a.m.	
		(2nd in each month and 3rd in every other month)	
		and Tuesdays following Saturday Sessions.	
Immunisation against Diphtheria, Whooping Cough and Smallpox	...	Fridays 2-30 p.m.	
Immunisation against Poliomyelitis	...	Tuesdays 10 a.m.	
		(By appointment).	

SCHOOL HEALTH SERVICE

School Minor Ailment Clinics are held as follows :—

1. Health Clinic, Brunswick Road	...	...	Monday, Tuesday, Thursday and Friday mornings.
2. Finlay Road School	...	...	Monday, Wednesday and Friday mornings.
3. Open Air School	...	...	Monday, Wednesday and Friday mornings.
4. Coney Hill School	...	...	Tuesday and Friday mornings.
5. Grange Road School	...	...	Wednesday mornings.
6. Lower Tuffley School	...	...	Wednesday mornings.
7. Archdeacon Street School	...	...	Tuesday and Friday mornings.
School Dental Clinic, Health Clinic, Brunswick Road			By appointment Tuesday, Thursday and Friday. From 9-10 a.m. for emergencies.
Child Guidance Clinic, 19, Bearland (and Cheltenham)			By appointment only.
Speech Therapy Clinic, Day Nursery, Stroud Road...			By appointment Thursdays 9.30 a.m.
Medical provision for all other physical disabilities is made in association with the local hospitals.			

DAY NURSERY

Bath Place, Stroud Road. (Tel. 24332).

AMBULANCE SERVICE

Eastern Avenue (Tel. 25055-6).

HEALTH DEPARTMENT,
PRIORY HOUSE, GREYFRIARS,
GLOUCESTER.

*To the Mayor, Aldermen and Councillors
of the City of Gloucester.*

In this general introduction to my Annual Report for the year 1956 there are certain matters I would refer to, but particularly to the very inadequate accommodation available both for patients at certain clinics and for staff in offices.

Dealing with Clinics first, I will take the Ante-Natal and Post-Natal Clinics as an example.

Over 1,600 mothers attended for the first time, and they made a total number of visits of 8,000. In addition there were 500 visits paid by mothers post-natally, a total of 8,500 attendances in the year.

All these mothers attend to be examined by the doctors or midwives, and reasonable accommodation for waiting, changing and examination are necessary. A small clinical room is also needed.

The accommodation we have to offer is simply the second floor of the Health Clinic in Brunswick Road. It is quite inadequate and leads to crowding. Excellent work is done there by the staff, but neither patients nor staff should be asked to continue working under these conditions.

Admittedly the conditions have been aggravated by the large increase in work of recent years, since it was arranged that not only City patients, but in addition all patients who are to be admitted to the Maternity Hospital receive their ante-natal examinations there. Staff from the Maternity Hospital attend the clinic for that purpose.

The close association maintained there between Domiciliary and Hospital Midwifery on the one hand and between County and City on the other, together with the Consultant Hospital Staff and representatives of the General Practitioners is something particularly good and not to be lost. It is doubtful whether it can be maintained much longer under such trying working conditions.

Secondly, as regards office accommodation, the offices of the Public Health and School Health Services are divided between three main buildings (and the Rodent operatives have their headquarters in a fourth). None of these is connected by internal telephones, nor is any connected to the Guildhall, nor to any other Corporation departments by internal telephone. Every outgoing and incoming telephone call must go over Post Office lines, and involve a waste of time of clerks on our switchboards.

To assemble three or four people to discuss some matter that requires prompt attention involves a number of telephone calls and perhaps 15 minutes of a clerk's time making them. To this must be added the time it takes for the various persons to walk to the meeting point and to return after.

I and my two Assistants have to have offices in three separate buildings, Barton Street, Brunswick Road and Greyfriars.

Five Health Inspectors and 2 Student Inspectors occupy with their desks or tables a room 24 ft x 12 ft. To interview their many callers they have to go downstairs and do so in the entrance lobby to the Health Office.

It is no uncommon thing to find two interviews going on between the front door and the foot of the stairs, except that in fine weather one or both may be more conveniently done outside.

The Health Visitors are only a little better off at 11 Barton Street, though there it is hoped that we may be able to get the use of some more rooms eventually.

It is a very serious handicap on our work to have such a dispersal of staff; and the time lost in telephoning, sending messengers and delivering letters and parcels is very uneconomical.

SHORTAGES OF STAFF.

The continuing shortage of Dental Surgeons and Health Inspectors is becoming serious. I have dealt with the former in my introduction to the School Health Report, but it also is reflected in the amount of work that can be done for mothers and young children. The shortage of Health Inspectors is making a vicious circle of the problem, because the existing ones have to cope with the day to day matters that cannot be put off, and they are becoming over-loaded. Particularly is this noticeable in Meat Inspection. Visits to slaughterhouses are made mainly of an evening and at weekends, and at present the two qualified Assistants are on duty alternate weeks. To be out on duty every evening on alternate weeks becomes irksome.

ADDITIONS TO PALMERS HALL.

Special mention should be made of the very generous gift to the Health Committee by the Gloucester City Blind Association. In October the Chairman of the Association (Alderman H. Cole) at a pleasing ceremony handed over the keys of a suite of rooms built on to Palmers Hall. His Association

VITAL STATISTICS—1956

Below are given the figures relating to the general health of the City.

It will be seen that the birth rate is higher than last year, in fact higher than since 1949. A similar increase has occurred in the Country generally, but whereas there were 15·7 births per thousand of population taking the Country as a whole, the figure for Gloucester is 17·3.

Equally favourably the general Death Rate has fallen to 10·8 per thousand of population as against the national figure of 11·7. Only once in the last ten years has Gloucester's figure been better. This is very satisfactory in view of the continual ageing of the population.

There was one death of a woman due to childbirth.

With the exception of Tuberculosis there were no deaths from any infectious disease, and the incidence of these diseases was satisfactorily low.

As regards Tuberculosis the position is less satisfactory as there was an increase of 19 new cases (all affecting the lungs) over last year. In the report of the Chest Physician, on page 29, an analysis of all new cases will be found.

Also less satisfactory are the increases in the Infantile Mortality and Stillbirth rates.

As has, however, been pointed out frequently before, in dealing with such relatively small figures as occur in a small City like Gloucester, the calculation of rates produces great fluctuations. An obvious example this year is that one maternal death produces a maternal mortality figure of 0·84 per 1000 live births, whereas the figure for the Country is only 0·56. Obviously had there been no such death in Gloucester (as occurred in 1948, 1949, 1951, 1953 and 1955) the rate would have been Nil.

Reviewing all these different figures relating to illness and deaths over recent years there is a satisfactory downward tendency, with the exception of Cancer. This year deaths from Cancer are less than last year, but there is no apparent downward tendency discernible yet.

			Males	Females	Total		
LIVE BIRTHS	(Legitimate	...	585	518	1103	<i>Rate per 1000 of the estimated resident population ...</i>	
	(Illegitimate	...	32	31	63		
	TOTALS	...	617	549	1166		
			Males	Females	Total		
STILLBIRTHS	...	...	12	14	26	<i>Rate per 1000 total (live and still) births ...</i>	
DEATHS	...	...	376	354	730	<i>Death rate per 1000 of the estimated resident population ...</i>	
DEATHS FROM PREGNANCY, CHILDBIRTH AND ABORTION			...	...	...	...	1
-DEATH RATE OF INFANTS UNDER ONE YEAR OF AGE:—							
All infants per 1000 live births (Total= 32)			...	...	...	...	27·4
Legitimate infants per 1000 legitimate live births (Total=30)			...	...	...	...	27·2
Illegitimate infants per 1000 illegitimate live births (Total=2)			...	...	...	...	31·7
DEATHS FROM MEASLES (all ages)			...	...	...	...	Nil
„	„	WHOOPING COUGH (all ages)	...	...	...	...	Nil
„	„	GASTRITIS, ENTERITIS AND DIARRHOEA (under 2 years of age)	...	...	...	...	Nil

VITAL STATISTICS—1947-1956

Live Births

YEAR	LEGITIMATE		ILLEGITIMATE		TOTAL	Rate per 1,000 of the estimated Resident Population	
	MALE	FEMALE	MALE	FEMALE		GLOUCESTER (Unadjusted)	ENGLAND & WALES
1947	704	647	53	42	1446	22.7	20.5
1948	597	524	48	41	1210	18.9	17.9
1949	553	537	35	34	1159	17.9	16.7
1950	545	497	37	25	1104	16.3	15.8
1951	553	518	31	35	1137	16.2	15.5
1952	535	497	22	38	1092	16.4	15.3
1953	553	504	26	29	1112	16.7	15.5
1954	577	492	33	31	1133	16.9	15.2
1955	520	500	23	30	1073	15.9	15.0
1956	585	518	32	31	1166	17.3	15.7

Stillbirths

YEAR	MALE	FEMALE	TOTAL	Rate per 1,000 Total (Live and Stillbirths)
1947	22	9	31	20.9
1948	12	14	26	21.0
1949	9	6	15	12.7
1950	14	17	31	27.3
1951	12	14	26	22.3
1952	15	4	19	17.1
1953	14	23	37	32.2
1954	13	6	19	16.5
1955	5	11	16	14.7
1956	12	14	26	22.3

Deaths

YEAR	MALE	FEMALE	TOTAL	Death-Rate per 1,000 of the estimated Resident Population	
				GLOUCESTER (unadjusted)	ENGLAND & WALES
1947	400	349	749	11.8	12.0
1948	386	347	733	11.4	10.8
1949	411	356	767	11.8	11.7
1950	392	377	769	11.3	11.6
1951	443	374	817	11.6	12.5
1952	360	321	684	10.3	11.3
1953	390	343	733	11.0	11.4
1954	378	353	731	10.9	11.3
1955	380	385	765	11.3	11.7
1956	376	354	730	10.8	11.7

MATERNAL MORTALITY

YEAR	DEATHS	RATE PER 1,000 LIVE AND STILL BIRTHS			
		PUERPERAL AND POST ABORTIVE SEPSIS	OTHER CAUSES	TOTAL	
				Gloucester (unadjusted)	England and Wales
1947	3	Nil	2.03	2.03	1.17
1948	Nil	Nil	Nil	Nil	1.02
1949	Nil	Nil	Nil	Nil	0.98
1950	2	Nil	1.76	1.76	0.86
1951	Nil	Nil	Nil	Nil	0.79
1952	1	Nil	0.90	0.90	0.72
1953	Nil	Nil	Nil	Nil	0.76
1954	1	Nil	0.90	0.90	0.69
1955	Nil	Nil	Nil	Nil	0.64
1956	1	Nil	0.84	0.84	0.56

NUMBER OF DEATHS AND DEATH-RATE OF INFANTS UNDER ONE YEAR OF AGE.

YEAR	NUMBER OF DEATHS			Death-Rate of all Infants Per 1,000 Live Births	Death-Rate of Legitimate Infants Per 1,000 Legitimate Live Births	Death-Rate of Illegitimate Infants Per 1,000 Illegitimate Live Births
	All Infants	Legitimate Infants	Illegitimate Infants			
1947	57	33	24	39.6	24.4	252.6
1948	43	40	3	35.5	35.7	33.7
1949	47	40	7	40.5	36.7	101.4
1950	29	26	3	26.3	24.9	48.4
1951	41	37	4	36.1	34.5	60.6
1952	26	23	3	23.8	22.2	50.0
1953	38	36	2	34.2	34.0	36.4
1954	23	21	2	20.3	19.6	31.2
1955	20	20	Nil	18.6	19.6	Nil
1956	32	30	2	27.4	27.2	31.7

CAUSES OF DEATH, 1956

(SHOWING THE THREE MAIN CAUSES.)

DISEASE	SEX	AGE GROUPS					All ages
		0-25	25-45	45-65	65-75	75+	
Tuberculosis—All forms	M.	—	1	1	1	—	3
	F.	—	2	2	1	2	7
Cancer—All forms	M.	—	2	38	13	14	67
	F.	—	5	29	13	12	59
Heart Diseases and Diseases of Circulation All forms	M.	1	3	28	41	71	144
	F.	—	2	12	29	90	133
All other causes	M.	23	9	42	32	56	162
	F.	22	6	27	29	71	155
Total Deaths—All causes	M.	24	15	109	87	141	376
	F.	22	15	70	72	175	354
TOTALS ...		46	30	179	159	316	730

INFANT MORTALITY

Deaths from stated causes under one year .—

Pneumonia	6
Other Respiratory Diseases	1
Congenital Malformations	10
Other Defined or Ill-Defined Diseases	14
Accidents	1
Motor Vehicle Accidents	—
TOTAL ...	32

Details of Neo-Natal deaths (of children dying within the first four weeks of being born) included in the above Infant Mortality figures, are as follows :—

Congenital Malformations	10
Other Defined or Ill-Defined Diseases	12
TOTAL ...	22

The Neo-Natal Death Rate therefore, was 18·8 per 1,000 live births.

TABLE SHOWING INCIDENCE OF CANCER, 1932-1956

Year	Deaths from Cancer	Percentage of total Deaths registered	Death-Rate per 1,000 Population	Sex	AT AGES—YEARS			
					Under 25	25—45	45—65	65—Up
1932	83	11.7	1.56	M	-	1	18	15
				F	-	4	18	27
19 3	70	10.5	1.31	M	-	3	16	21
				F	-	2	15	13
1934	85	12.8	1.61	M	-	1	21	23
				F	-	3	14	23
1935	95	13.5	1.67	M	-	2	12	25
				F	-	1	19	36
1936	101	13.9	1.78	M	-	2	24	31
				F	-	5	18	21
1937	84	11.1	1.17	M	-	1	14	19
				F	-	3	20	27
1938	85	11.7	1.53	M	-	-	14	23
				F	-	3	16	29
1939	97	12.9	1.67	M	-	4	14	23
				F	-	4	24	28
1940	91	10.0	1.50	M	7		14	22
				F	4		16	28
1941	97	12.0	1.49	M	4		13	31
				F	6		22	21
1942	114	14.8	1.76	M	4		17	27
				F	5		25	36
1943	111	13.0	1.90	M	2		16	29
				F	6		30	28
1944	110	15.4	1.76	M	4		18	27
				F	2		27	32
1945	102	12.9	1.63	M	7		19	28
				F	11		11	26
1946	118	15.4	1.86	M	1		23	33
				F	6		22	33
1947	108	14.4	1.69	M	4		17	29
				F	9		23	26
1948	106	14.5	1.65	M	3		24	30
				F	5		16	28
1949	110	14.3	1.70	M	1		23	27
				F	8		23	28
1950	120	15.6	1.77	M	4		31	27
				F	9		18	31
1951	122	14.9	1.74	M	2		33	36
				F	7		18	26
1952	112	16.4	1.68	M	4		24	36
				F	6		11	31
1953	98	13.4	1.47	M	5		13	27
				F	6		18	29
1954	129	17.6	1.93	M	5		26	33
				F	5		29	31
1955	133	17.3	1.97	M	7		28	30
				F	6		23	39
1956	126	17.3	1.87	M	2		38	27
				F	5		29	25

The 126 deaths are divisible under the following main causes, as grouped by the Registrar General.

	Sex		Total
	M.	F.	
Stomach	11	6	17
Lung and Bronchus	21	2	23
Breast	—	16	16
Uterus	—	5	5
Other... ..	33	29	62
Leukaemia	2	1	3
Totals ...	67	59	126

Section B.

National Health Service Act, 1946.

INTRODUCTION.

Sections 22-29 and Section 51 of the above-named Act lay certain duties on Local Health Authorities, and in this part of my Report the work carried out in connection with each of these Sections is reviewed individually. I also enclose reports from officers dealing specially with certain of these, *i.e.* from the Senior Chest Physician (Dr. Knights) in connection with Tuberculosis, my Senior Assistant, Dr. Clark, with Mental Health and the Ambulance Officer, Mr. Chinn, with the Ambulance Service. Through the courtesy of the South Western Regional Hospital Board and the doctor in charge of the local Mass Radiography Unit (Dr. J. B. W. Hayward); I also enclose statistics relating to the work of that Unit in the City. All these reports make interesting reading.

MIDWIFERY, HEALTH VISITING, HOME NURSING AND HOME HELPS

The stage has now been reached in Gloucester when almost every woman who is to be confined in her own home books a doctor as well as a midwife.

It should be appreciated that the National Health Service Act intended this, and it intended that a doctor should see every woman at least twice before her confinement; so that she should have the benefit of his advice, and also that if he were called to attend the confinement he would know her particulars beforehand; he would not be called as an emergency to a stranger.

The Act did not intend that a doctor should attend a normal confinement; that is a midwife's job. It intended that proper ante-natal supervision should make every confinement if possible a normal one.

Hence it will be seen in the figures that follow that doctors attended about one in seven confinements.

The very competent work of all the Nurses (whether our Health Visitors or the Nurses or Midwives from the Gloucester District Nursing Society) is so closely inter-connected that there is provided a service generally which can hardly be equalled anywhere. Together with this is the wide and free supply of equipment to patients in their own homes.

As far as it is possible to obtain Home Helps of the right type, the Health Committee has made generous provision in its estimates.

All this certainly costs a great deal, but as far as it is possible everything should be done to educate and help people maintain good health in all its aspects, which makes for greater happiness and is economical in the end, but if illness occurs then as far as possible people should be helped to cope with it in their own homes, especially the older people: they are more contented there.

These services are, therefore, directed towards these two principles.

The one disturbing feature of this work is the increasing demands made on Health Visitors. More use is being made of them for instance at Out-Patient Departments of Hospitals, so that they can give the doctors there the home background of patients, especially children, and in turn they learn what the doctor wishes, the sort of routine the children should follow in the course of their treatment at home, and they can help the mothers accordingly.

It is doubtful with our present staff whether all the necessary work can be carried out.

I have referred at the beginning of this Report to the urgent need for more and better clinic and office accommodation. Included in this is the need for a central Infant Welfare Clinic where children between the ages of 1-5 can be specially catered for. At present these children tend to get "lost" amongst the great number of babies who are brought so regularly to the peripheral centres.

DENTAL CARE OF MOTHERS AND YOUNG CHILDREN

Unfortunately the acute shortage of Dental Officers makes it impossible to do much work amongst the young children.

All mothers attending the Ante-Natal Clinics are offered an appointment with the Dental Surgeon, and though a large number already attend one privately, all those who accept are in fact seen. Even so, little conservative work has been possible. Mostly the work has consisted of removing affected teeth and supplying dentures.

In the case of the young children it has not been possible to consider a campaign encouraging routine inspections and treatment. All that has been possible is to deal with "casualties" (toothache, etc.) as the mothers bring them along.

This is a very unsatisfactory state of affairs.

DAY NURSERY

The small numbers attending during the past few years have caused the Health Committee concern. But it has been continuously decided that as a matter of policy it is wise to retain at least one Nursery if only because there are certain mothers who must work and who can make no other possible arrangements for the day time care of their children. It is also thought that if this last remaining Nursery were to close and the building put to some other use, then should the need for a nursery recur there would be nowhere to house it.

MORAL WELFARE

A word of praise should be said for the work of the City Moral Welfare Association, and its Social Worker, Miss Hey. Much of this work has to be done visiting people in their homes of an evening. Dealing with a girl who is likely to have an illegitimate child, with her parents, with the putative father (and sometimes his parents, too) means patience and persistence together with a need to be practical yet very sympathetic. The subsequent future of the child has also to be considered and arrangements made.

The problem has been greatly intensified in Gloucester, as elsewhere, by the influx of West Indians. Their attitude to illegitimacy is different from ours, and complicates matters very much.

It is impossible to represent adequately this work statistically. I am quite certain, however, that the City is extremely fortunate in having this voluntary organisation dealing with this problem, and equally fortunate in the person of its Social Worker.

VACCINATION AND IMMUNISATION

Methods of immunisation against Smallpox, Diphtheria and to a small extent against Whooping Cough have continued. The number of children immunised against Diphtheria is greater than last year, especially in the age groups above one year old; in fact the "Immunity Index" is now over 50% for them. There were, however, less than one third of children under one year so protected during the year.

In May, 1956 was started immunisation against Infantile Paralysis, but discontinued during the summer months. It was due to recommence in September, but because of difficulties in obtaining the material it was not possible to do this before December.

The material used is Government sponsored and issued direct to Local Authorities. The national campaign that preceded the issue, together with the local one, produced a ready response. The Ministry

INFANT WELFARE CENTRES.

No. of centres provided at end of year	9
No. of sessions now held per month at centres	32
No. of children who attended during the year and who were born in :—	
1956	796
1955	558
1954-51	259
Total No. of children who attended during the year	1613
No. of attendances during the year made by children who at the date of attendance were :—	
Under 1 year	10025
1 but under 2	2184
2 but under 5	537
Total attendances during the year	12746
No. of Doctors' consultations :—	
Children under 1 year	2831
Children over 1 year	532
No. of children immunised at centres	477
No. of injections given at centres	1462

PUBLIC HEALTH LABORATORY WORK

The following Ante-Natal figures relate to all cases attending the City Clinics, and include all cases for domiciliary confinement in the City, together with all cases booked for the City Maternity Hospital, whether resident in the City or surrounding County.

Ante-Natal Clinics

Blood, smears, etc. :—

R.b.c. and Hb.	1770
Rhesus Factor	1492
Blood Group	1498
Kahn and W.R.	1531
Other Tests	39
Total	6330

PREMATURITY, STILLBIRTHS AND ABORTIONS

There were 19 premature live infants born at home. There were 26 stillbirths, of which 13 were under $5\frac{1}{2}$ lbs.

Weight at Birth	PREMATURE LIVE BIRTHS						PREMATURE STILLBIRTHS		
	Born at home and nursed entirely at home			Born at home and transferred to hospital on or before 28th day			Born in hospital	Born at home	Born in nursing home
	Total	Died within 24 hours of birth	Survived 28 days	Total	Died within 24 hours of birth	Survived 28 days			
3 lb. 4 oz. or less	—	—	—	—	—	—	5	2	—
Over 3 lb. 4 oz., up to and including 4 lb. 6 oz. ...	—	—	—	—	—	—	2	—	—
Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. ...	3	—	2	—	—	—	—	2	—
Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. ...	16	—	16	—	—	—	2	—	—
TOTALS ...	19	—	18	—	—	—	9	4	—

DENTAL TREATMENT

(a) Numbers provided with Dental Care.

	Examined	Needing treatment	Treated	Made dentally fit
Expectant and Nursing Mothers	219	157	91	28
Children under five ...	101	100	100	9

(b) Forms of Dental Treatment provided.

	Scalings and Gum Treatment	Fillings	Silver Nitrate Treatment	Crowns or Inlays	Extractions	General Anaesthetic	Dentures Provided		Radio graphs
							Full Upper or Lower	Partial Upper or Lower	
Expectant and Nursing Mothers ...	1	—	—	—	328	12	24	23	1
Children under 5	—	—	—	—	195	91	—	—	1

DAY NURSERY**Attendances**

Nursery	Number of Approved Places		Number of Children on the Register at the end of the Year		Average Daily Attendance during the Year	
	Under 2	2-5	Under 2	2-5	Under 2	2-5
Bath Place	15	25	3	8	4	8

BIRTH CONTROL CLINIC

No. of Sessions held	25
No. of cases on Register at beginning of year	378
No. of new cases attending Clinic on Doctors' recommendations during the year	92
No. of cases removed from the Register during the year, left City, or ceased to attend	96
No. of cases remaining on the Register at the end of year	374
No. of Attendances	488
County Cases attending Clinic (included in above figures)	35

MORAL WELFARE

No. of cases sent to Mother and Baby Homes :—

Expectant Mothers	9
Post-Natal Cases... ..	4

DISTRIBUTION OF WELFARE FOODS

National Dried Milk	53101 tins
Cod Liver Oil	8123 bottles
A. and D. Vitamin Tablets	3854 packets
Orange Juice	62534 bottles

SECTION 23

Midwifery

Number of new cases :—							
Doctor	not booked—present	...	...	...	...	...	—
„	„ „ —not present	...	...	...	...	...	11
„	booked—present	...	...	...	...	...	93
„	„ —not present	...	...	...	...	...	513
Number of	Midwifery visits	...	...	...	...	...	10743
„	„ Maternity	...	...	...	...	...	2370
„	„ Ante-natal	...	...	...	...	...	3424
„	„ Post-natal	...	...	...	...	...	502
„	„ Casual	...	...	...	...	...	1072
Total number of visits made							18111
Number of cases on books being nursed at 1/1/56							
„	„ „ „ „ „ „ „	...	...	...	...	...	24
„	„ „ „ „ „ „ „	...	...	...	...	...	19

MEDICAL ASSISTANCE CALLED IN DOMICILIARY CASES BY MEDICAL HELP FORMS follows :—

Condition of Mother	...	...	...	...	...	...	183
Condition of Child	...	...	...	...	...	...	20
Miscarriages	...	...	...	...	...	...	3
TOTAL	...	...	...	...	...	...	206
Number paid by Local Health Authority							
„	„	„	„	„	„	„	—

SECTION 24

Health Visiting, etc.

The following is a summary of the work carried out by the Health Visiting Staff :—

No. of Visits to Homes :—

No. of first visits to expectant mothers	...	...	...	...	...	...	567
„ „ re-visits „ „ „	...	...	...	...	...	...	83
Total	...	...	...	...	...	...	650
No. of first visits to children under 1 year	...	...	...	...	...	...	1144
„ „ re-visits „ „ „ „	...	...	...	...	...	...	5985
Total	...	...	...	...	...	...	7129
Total No. of visits to children :—							
1 and under 2 years	...	...	...	...	...	...	3151
2 but „ 5 „	...	...	...	...	...	...	6608
Total	...	...	...	...	...	...	17538

Other cases :—

Deaths investigated	...	...	...	...	...	6
Stillbirths investigated	...	...	...	...	...	—
Houses inspected and reported	...	...	...	...	...	33
Infectious Diseases	...	...	...	...	...	686
Tuberculosis	...	...	...	...	...	1310
Post-natal	...	...	...	...	...	64
Mental defectives	...	...	...	...	...	265
Hospital follow-ups	...	...	...	...	...	83
Aged people	...	...	...	...	...	656
Home help	...	...	...	...	...	614
Sundry	...	...	...	...	...	2540
Unsuccessful	...	...	...	...	...	2955
School Health Service	...	...	...	...	...	710
Total						9922
TOTAL NO. OF VISITS						27460

ATTENDANCES AT CLINICS, &C.

Relaxation Classes	...	...	...	...	...	254
Infant Welfare	...	...	...	...	...	788
School Minor Ailments	...	...	...	...	...	564
School Medical Inspections	...	...	...	...	...	225
Schools Head Inspections	...	...	...	...	...	279
Tuberculosis	...	...	...	...	...	220
Birth Control	...	...	...	...	...	25
Immunisation and Vaccination	...	...	...	...	...	173
Hospital	...	...	...	...	...	100
Any other clinics, meetings, etc.	...	...	...	...	...	168
TOTAL						2796

Health Talks	284
--------------	-----	-----	-----	-----	-----	-----	-----

SECTION 25

Home Nursing

(CARRIED OUT BY THE GLOUCESTER DISTRICT NURSING SOCIETY):—

Number of cases attended during the year :—

Medical	...	...	...	...	...	1548
Surgical	...	...	...	...	...	298
Infectious diseases	...	...	...	...	...	2
Tuberculosis	...	...	...	...	...	26
Maternal complications	...	...	...	...	...	83
Others	...	...	...	...	...	2
Total number of cases						1959

Number of cases on books at 1/1/56	...	...	295
“ “ “ “ “ “ 31/12/56	...	...	297

Visits paid to all patients :—

Number of Medical Visits	...	...	...	...	48712
„ „ Surgical Visits	...	...	...	...	8235
„ „ Infectious Diseases Visits	...	...	...	...	10
„ „ Tuberculosis Visits	...	...	...	...	735
„ „ Maternal Complications Visits	...	...	...	...	457
„ „ Other Visits	...	...	...	...	10
Total number of visits	...	...	...	...	58159
Number of Night Nursing Visits (included in above figures)	...	...	...	...	1213

SECTION 29

Domestic Help

No. of Domestic Helps employed at 31st December, 1956 :—

Whole-time	...	...	—
Part-time	...	...	38

No. of cases where Domestic Help was provided during the year :—

Maternity	...	...	41
Tuberculosis	...	...	12
Others :—			
Sickness	...	...	} 270
Old age	...	...
Total	...	...	323

An analysis of the above figures shows :—

		PAYING CASES	FREE CASES	TOTAL
Maternity	...	41	—	41
Tuberculosis	...	6	6	12
Blind	...	—	2	2
Illness	...	33	13	46
Chronic sick and Old Age Pensioners	}	98	124	222
TOTALS	...	178	145	323

Cost of Service (1956-7) estimated	...	...	...	£7710
Recovered from Paying Cases (1956-7)	...	...	...	£950

SECTION 26

Vaccination and Immunisation

1. Against Smallpox

Age at date of Vaccination ...	Under 1	1	2 to 4	5 to 14	15 or over	Total
Number Vaccinated ...	117	16	10	6	46	195
Number Re-Vaccinated ...	—	—	3	11	55	69

N.B.—There were no cases “Specially Reported” during 1956 as showing complications from Vaccination.

2. Against Tuberculosis

Number of Persons vaccinated under Contact Scheme ... 34

IMMUNISATION

Immunisation against Diphtheria in Relation to Child Population

Number of Children who had completed a full course of Immunisation at any time up to 31st December 1956

Age at 31.12.56 ... i.e. Born in Year ...	Under 1 1956	1-4 1955-1952	5-9 1951-1947	10-14 1946-1942	Total under 15
Last complete course of injections (whether primary or booster) ...	318	2312	3294	2175	8099
1951 or earlier ...	—	—	1867	3017	4884
Estimated mid year child population 1956	1140	4160	10400		15700
Immunity Index ...	30·0	55·6	52·5		51·5

N.B.—There were no notifications of Diphtheria in 1956.

SECTION 27

Ambulance Service

I give below the report of the Ambulance Officer, together with a statistical summary of the year's work in this service.

"For the second time since the introduction in July 1948, of the National Health Services Act, 1946 there is a small reduction in the number of cases dealt with in a year by the City Ambulance Service. The figures for 1956 being: Ambulance Cases 5355, Sitting Cases 20853, making a total of 26208 cases; showing a decrease over 1955 of 1419 cases, and a reduction in mileage of 4605.

It is interesting to note the annual average of 23257 cases and 140392 miles since 1948, as compared with approximately 3000 cases and 70000 miles for the years immediately preceding 1948.

The considerable number of sitting cases conveyed to hospital for treatment, could, in my opinion be very much reduced. Patients who are quite able to walk, and could use public transport, are being transported by ambulance at the request of the various departments at the several hospitals in this area.

There were 210 patients conveyed by rail to Hospitals and Convalescent Homes in various parts of the Country, which was 25 less than last year. An estimate of the mileage that would have been involved had these cases travelled by ambulances all the way is: Ambulance Cases 20=3820 miles, and Sitting Cases 190=29826 miles, making a total of 33646 miles. The co-operation of the British Railways in reserving accommodation, sometimes at short notice, is greatly appreciated. Also, the splendid work of the few lady members of the British Red Cross Society who act as escorts for these cases is very much appreciated. In addition, they also save a great deal of time and cost to the Service.

In 1956 one additional Driver-Attendant was appointed to cover the hours previously undertaken by the volunteers, and two men appointed Driver-Attendants to replace two men who left the Service. In October two Part-time Night Telephonists were appointed in view of the Emergency Calls received during the night, and so avoid any closing of the Ambulance Station.

In February, 1956 a Part-time Cook was appointed for two hours per day to cook the mid-day meal for the staff, and has proved a most welcome concession.

All personnel have passed the re-examination in First-Aid.

Since 1952 the efficient working of the Ambulance Service has been considerably helped by Radio Control, and must show a financial saving each year. Without such means of control, more staff and vehicles would be required to undertake the work, as mentioned in previous reports.

Civil Defence Training has proceeded throughout the year with most satisfactory results.

Vehicle replacements during the year were two Bedford/Walter Martin Dual Purpose Ambulances, and further replacements will be required during 1957 of two Dual Purpose Ambulances and two Four-berth Ambulances.

It is to be noted that the change in the colouring of the vehicles from "mid-night blue" to "sea haze", which is a very light blue, has been well received. This was undoubtedly a very wise decision of the Health Committee, as the ambulances are now more conspicuous.

The Hospital Car Service continues to give most useful service, and their work during the year shows an increase of 117 persons carried, and an increase of 3770 miles. The figures for 1956 are: cases 253, and 8112 miles.

Every endeavour is made to operate the Ambulance Service as economically as possible, without in any way lowering the high standard of efficiency that the Service has built up. The costs of the Service do increase every year, the result of two factors: (a) The National Awards of salaries and wages, and (b) the increased cost of vehicle spares, petrol and oil."

1. Total Calls during the Year

VEHICLE	City	County	Over Hospital	Inter-Hospital	Other Authorities	TOTALS
Ambulances	3030	1295	171	821	38	5355
Cars	12968	6267	617	984	17	20853
TOTALS	15998	7562	788	1805	55	26208

2. Total Mileage during the Year

VEHICLE	City	County	Over Hospital	Inter- Hospital	Other Author- ities	TOTALS
Ambulances	14814	12257	1227	8807	200	37305
Cars	37268	41428	3934	4987	385	88002
Totals	52082	53685	5161	13794	585	125307

Additional mileage in connection with the Children's and Welfare Departments and transport work for the Hospital Management Committee and the Ambulance Service, is as follows :—

<i>Department.</i>	1956	1955
Children's	—	208
Welfare... ..	295	321
Hospital Management Committee ...	116	128
Hospital Welfare	17	25
Education	—	4
Ambulance Service	5187	6723
Total ...	5615	7409

<i>Omnibus Mileage.</i>		
Occupation Centre	10104	10850
Blind Persons	842	433
Disabled Persons	709	196
Totals ...	11655	11479

Mileage in respect of Civil Defence Training, Driving Instruction and Civil Defence Exercises for the year was :—

	AMBULANCES.	CARS.	TOTAL.
Driving Instruction ...	1350	5	1355
Civil Defence Exercises ...	96	—	96
Totals ...	1446	5	1451

Summary of Cases for the Year.

				1956	1955
City Accidents	...	...	...	1063	1034
City Removals	...	...	...	14935	17101
County Accidents	...	...	...	342	337
County Removals	...	...	...	7220	6656
Over Hospital Cases	...	...	...	788	526
Inter Hospital	...	...	...	1805	1885
Other Authorities	...	...	...	55	88
Totals				26208	27627
Total Mileage	...	...	...	125307	129912
Total Patients carried	...	...	...	27437	28297
Decrease of Mileage over 1955	...	...	...	4605	
Decrease of Cases over 1955	...	...	...	1519	
Decrease of Persons carried over 1955	...	...	...	1492	
Total vehicle journeys.	Ambulance	...	...	3111	3001
	Cars	...	...	4950	4865
Totals				8061	7866

3. Hospital Car Service

				1956	1955
Total Cases	...	...	...	253	136
Total Mileage	...	...	...	8112	4342
Increase of Cases over 1955	...	...	...	117	
Increase of Mileage over 1955	...	...	...	3370	

4. Cases Conveyed by Rail

			1956	1955
Total Cases conveyed by Train.	Stretcher	...	20	22
	Sitting	...	190	213
Totals			210	235

SECTION 28

Prevention of Illness, Care and After Care

TUBERCULOSIS

REPORT BY F. J. D. KNIGHTS, M.D., M.R.C.P.

95 new cases of tuberculosis notified in the City of Gloucester were handled in the Chest Clinic service. They are analysed as follows:—

<i>Total</i>	<i>Surgical</i>	<i>Primary or post-primary infection</i>	<i>Minimal Phthisis</i>	<i>Moderate Phthisis</i>	<i>Advanced Phthisis</i>
95	9	16	13	53	4

These numbers being comparatively small, the general trend is better seen in the Clinical Area figures for North Gloucestershire:—

<i>Total</i>	<i>Surgical</i>	<i>Primary or post-primary infection</i>	<i>Minimal Phthisis</i>	<i>Moderate Phthisis</i>	<i>Advanced Phthisis</i>
309	41	50	48	142	28

TABLE I. (CLINICAL AREA FIGURES)

Number of New Cases of Phthisis and Severity at Time of Diagnosis.

Year	1949	1950	1951	1952	1953	1954	1955	1956
Total Number	258	254	263	239	244	229	184	218
Minimal Cases	31%	30%	20%	20%	18%	20%	20%	22%
Moderately Advanced Cases	50%	52%	69%	68%	67%	66%	71%	65%
Advanced Cases	19%	18%	11%	12%	15%	14%	9%	13%

TABLE II

Source of Reference of Cases Analysed in Table I.

	1949+1950 (512 cases)	1951+1952 (502 cases)	1953+1954 (473 cases)	1955+1956 (402 cases)
Referred from General Practitioners	54%	43%	41%	44%
Mass Radiography	15%	30%	27%	26%
Contact Organisation	9%	7%	7%	7%
Hospital, Forces, In-transfer, etc.	22%	20%	25%	23%

CONTACT EXAMINATION

Contact examinations arising out of City cases notified in 1956.

(1) *Adults.*

92 in the under-45 age group were called, of whom 79 attended (86%). In the over-45 age group 76 were called, of whom 63 attended (83%). The overall response of adult contacts called for the first time was 84.5%. Two adults were notified as a result of these examinations. One woman was already in hospital when she became known as a contact, and she was subsequently notified "pulmonary tuberculosis". Another woman developed a tuberculous pleural effusion three months after her first contact X-ray, which was normal.

(2) *Children.*

Of 49 children called, 9 did not attend at all, 3 were tuberculin negative but defaulted during B.C.G. vaccination attendances, 6 were X-rayed and discharged, and 2 were notified as having primary complexes.

The remaining 29 are analysed as follows :—

Age 0-4 Tub. Positive. Healthy. Referred to G.P. and H.V. for observation	...	1
Age 5-12 Tub. Positive. Healthy. Referred to G.P. and H.V. for observation	...	2
Age 12-16 Tub. positive. Healthy. For mass radiography follow-up	...	3
Tub. positive. Dubious health. Under clinic observation	...	5
Tub. negative. Successfully B.C.G. vaccinated	...	11
Tub. negative. B.C.G. postponed, still to be vaccinated	...	2
Tub. negative. B.C.G. refused, for serial Mantoux testing	...	3
Defaulted Mantoux. Puberty age, for mass radiography follow-up	...	2
		<hr/> 29

34 City children were B.C.G. vaccinated under the contact scheme in 1956.

Cases of Tuberculosis in the City of Gloucester.

The number of notified cases in the City of Gloucester known to us at present is 658. These are analysed as follows :—

Green (non-infectious)	...	392
Yellow (quiescent now, but potentially infectious)	...	177
Red (infectious)	...	99
Number of Red cases deemed incurable or permanently infectious	...	48
Number of Red cases Streptomycin-resistant	...	4
Insufficient information for classification	...	23

Posthumous Notifications.

In 1956 there was one case, a woman of 72 who died in a Mental Hospital and the diagnosis was made at autopsy.

MASS RADIOGRAPHY SERVICE

Report of survey during the year :

	Male	Female	Total
Miniature Films...	6420	6589	13009
Large Films—			
Total Recalled	192	179	371
Did not attend	8	3	11
Normal	99	105	204
Significant	81	71	152
Being investigated	4	—	4

Analysis of Tuberculous Cases

ACTIVE TUBERCULOSIS	Under 15	15-24	25-34	35-44	45-59	60 and Over	Total
Male	1	2	4	—	3	1	11
Female	—	7	4	—	1	—	12
Total	1	9	8	—	4	1	23

UNDER OBSERVATION	Under 15	15-24	25-34	35-44	45-59	60 and Over	Total
Male	—	6	3	2	1	1	13
Female	—	4	6	4	2	—	16
Total	—	10	9	6	3	1	29

INACTIVE TUBERCULOSIS	Under 15	15-24	25-34	35-44	45-59	60 and Over	Total
Male	—	2	2	4	3	2	13
Female	3	3	6	7	3	—	22
Total	3	5	8	11	6	2	35

CASES PREVIOUSLY DETECTED	Male	Female	Total
Active	1	—	1
Under Observation	2	—	2
Inactive	1	5	6

NON-TUBERCULOUS CASES	Male	Female	Total
Acquired Abnormality of the Bony Thorax	2	—	2
Abnormality of the Diaphragm ...	3	2	5
Acquired Cardio Vascular Lesion ...	—	1	1
Bronchiectasis	6	3	9
Bronchial Carcinoma	5	—	5
Bacterial and Virus Infections of the Lungs	3	3	6
Congenital Cardiac Lesion	1	—	1
Congenital Abnormality of the Bony Thorax	1	3	4
Hilar Adenitis	1	—	1
Pleural Thickening	8	4	12
Pneumoconiosis... ..	2	—	2
Pneumoconiosis and Tubercle ...	1	—	1
Scarring following Lobectomy ...	1	—	1
Sarcoidosis	1	—	1
Pulmonary Fibrosis	9	5	14
Total	44	21	65

Summary of Tuberculosis Notifications 1st January to 31st December, 1956

		PRIMARY, FORMAL AND SUPPLEMENTARY NOTIFICATIONS													TOTAL (All) Ages
		0-	1-	2-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-	
Respiratory, Males	...	—	—	1	2	1	1	8	10	2	9	7	2	—	43
Respiratory, Females	...	—	—	1	1	1	5	9	6	2	4	4	1	2	36
Non-Respiratory, Males	...	—	—	—	—	—	—	1	1	1	—	1	—	—	4
Non-Respiratory, Females	...	—	—	—	—	—	—	1	1	—	2	1	—	—	5

Number of Cases of Tuberculosis remaining on the Register of Notifications on 31st December, 1956

PULMONARY			NON-PULMONARY			TOTAL CASES
Males	Females	Total	Males	Females	Total	
308	275	583	35	40	75	658

Notifications, Deaths and Visits Made

	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956
New Cases ...	136	135	129	88	98	114	102	71	69	88
Deaths ...	55	54	27	33	32	19	16	18	12	10
Visits made by Health Visitors	1111	1545	921	1161	1530	1770	1740	1593	1320	1310

Bedding and Shelters on Loan to Tuberculosis Cases at 31-12-56

Mattresses ...	...	...	...	...	...	...	8
Blankets ...	...	...	...	...	...	...	72
Shelters ...	...	...	...	...	...	...	—
Bedsteads ...	...	...	...	...	...	...	7
Sheets ...	...	...	...	...	...	...	75
Pillows ...	...	...	...	...	...	...	6
Pillow Cases ...	...	...	...	...	...	...	4

Extra Nourishment

FREE MILK

Number in receipt of free milk at 31-12-55 ...	51
Number in receipt of free milk at 31-12-56 ...	52

RECUPERATIVE HOLIDAYS

Granted	...	...	...	...	...	...	14
Not granted	...	...	...	...	...	...	3

OTHER LABORATORY WORK

Suspected Food Poisoning or Dysenteries	...	...	...	...	...	11
„ Diphtheria	...	...	...	...	...	—
Miscellaneous	...	...	...	...	...	10

SECTIONS 28 AND 51

Mental Health

LUNACY AND MENTAL TREATMENT

It is pleasing to record that such a large number of patients are now admitted voluntarily to the local mental hospitals under the provisions of the Mental Treatment Act, 1930. Such admissions are without formality.

The whole procedure is less irksome than certification, for everybody concerned : more importantly it helps to reduce the resistance to admission to mental hospitals so often felt and expressed by patients and relatives alike.

This change in outlook is specially welcome, because the important advances that have been made in the treatment of mental conditions in the last twenty years have given a new value to the Mental Hospital. It is true that there are still, unfortunately, cases of mental illness that are hopeless from the start, but there are now many that can be improved and many that can be completely cured by early hospital treatment.

Higher rates of cure have not yet solved the problems of shortage of accommodation, because this improvement has been accompanied by a widening of the indications for treatment in hospital.

An important practical contribution to the solution of local accommodation difficulties, however, was made during the year by the opening of a new block of 36 beds designed on the most modern lines at Coney Hill Hospital.

But there is still some distance to go before the demand for beds can be satisfied. There must still, therefore, be some restrictions on admissions ; and this means that there is still difficulty and delay in dealing with some of the problems that arise from mental illness, particularly those caused by patients that are only mildly mentally ill, but who are living in circumstances where proper nursing and control are not possible.

ADMISSIONS TO HORTON ROAD AND CONEY HILL HOSPITALS :—

(a) CERTIFIED PATIENTS	...	...	...	...	5
(b) VOLUNTARY PATIENTS	...	...	...	...	134
(c) TEMPORARY PATIENTS	...	...	...	...	9
(d) THREE DAY ORDER PATIENTS	...	...	...	...	14
(e) MAGISTRATE'S ORDER—14 DAY PATIENTS	...	...	...	...	17

Other cases investigated but not admitted	16
---	-----	-----	----

MENTAL DEFICIENCY

The bulk of the day to day work under this heading is supervisory. Statutory supervision, in practice, consists mainly of friendly oversight, advice and encouragement to patients and their relatives. In many cases this help is critical to the patient in maintaining his adjustment to his social surroundings, and enabling him to work and earn a living at some simple job that is within his capacity.

Patients under supervision in their own homes at 31/12/55	...	...	...	...	69
New cases notified during the year	...	...	...	...	8
					<hr/> 77

Admitted to Institutions	...	...	...	...	2
Died	...	...	...	...	2
					<hr/> 4

Patients under supervision in their own homes at 31/12/56	<hr/> 73
---	-----	-----	-----	-----	----------

Number of above Patients attending Cheltenham Occupation Centre	23
---	-----	-----	----

Number of Patients in "Places of Safety" awaiting admission to Institutions	...	1
---	-----	---

Patients awaiting admission to Institutions	3
---	-----	-----	-----	-----	-----	---

PATIENTS ON LICENCE FROM INSTITUTIONS :			<i>Stoke Park Hospital</i>		<i>Hortham and Brentry Hospitals</i>		<i>Other Hospitals</i>	
			M	F	M	F	M	F
Number on Licence	31/12/55	...	1	1	4	1	2	—
"	"	"	31/12/56	...	1	4	2	—
							1	1

PATIENTS IN INSTITUTIONS :				<i>Stoke Park Hospital</i>		<i>Hortham and Brentry Hospitals</i>		<i>Other Hospitals</i>	
				M	F	M	F	M	F
Number at	31/12/55	...	...	29	33	14	2	6	2
"	"	31/12/56	...	25	33	14	2	6	2

Section C.

Infectious Diseases

Number of Notifications of Infectious Diseases from 1942 to 1956

DISEASE	1942	1943	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	367	188	280	171	75	60	172	167	70	55	46	65	68	55	50
Diphtheria	320	309	162	128	99	34	14	2	1	—	1	—	—	—	—
Pneumonia	90	100	71	72	82	84	52	41	52	69	48	67	27	58	32
Cerebro-Spinal Fever	10	3	—	—	2	6	2	3	*	*	*	*	*	*	*
Meningococcal Infection	*	*	*	*	*	*	*	*	1	3	2	1	—	—	1
Poliomyelitis or Polio. Encephalitis	—	—	—	—	—	14	1	4	*	*	*	*	*	*	*
" Paralytic	*	*	*	*	*	*	*	*	2	—	4	2	—	9	—
" Non-Paralytic	*	*	*	*	*	*	*	*	1	—	4	3	—	4	—
Dysentery	—	—	7	9	2	2	—	2	—	—	7	10	6	3	6
Ophthalmia Neonatorum	14	11	7	12	5	6	2	2	4	1	2†	2†	1†	4†	—
Puerperal Pyrexia and Puerperal Fever	21	27	21	9	15	8	10	10	5	13	21	30	22	18	20
Erysipelas	15	19	21	27	14	21	15	20	20	10	12	6	12	6	5
Enteric Fever (including Paratyphoid Fever)	6	—	3	1	5	—	1	—	*	*	*	*	*	*	*
" or Typhoid Fever	*	*	*	*	*	*	*	*	—	—	—	—	—	—	—
Paratyphoid Fever	*	*	*	*	*	*	*	*	—	1	1	—	1	—	—
Tuberculosis (New Cases) Respiratory	94	119	113	121	110	124	119	121	75	85	101	91	67	60	79
Meninges and C.N.S.	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*
Other Forms	21	36	13	20	20	12	16	8	13	13	13	11	4	9	9
Measles	172	1170	133	640	22	863	480	327	1493	607	585	735	814	632	527
Whooping Cough	104	183	52	123	164	162	67	165	243	238	135	130	238	74	124
Encephalitis Lethargica	—	2	—	1	—	—	—	—	*	*	*	*	*	*	*
Acute Encephalitis Infective	*	*	*	*	*	*	*	*	—	1	—	—	—	—	—
" Post-Infectious	*	*	*	*	*	*	*	*	—	—	—	—	—	—	—
Benign-Tertian Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Food Poisoning	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—
									37	7	4	4	12	3	1

*See different classification.

† Vision unimpaired.

Not Notifiable

Section D.

MEDICAL EXAMINATIONS OF CORPORATION EMPLOYEES

Entrants for Training Colleges 35 ; Fire Brigade 8 ; Education Department 14 ; Welfare Department 11 ; Health Department 2 ; City Surveyor's Department 16 ; City Architect's Department 17 ; City Treasurer's Department 9 ; Town Clerk's Department 8 ; Housing Department 3 ; Children's Department 4 ; Public Library 3 ; City Museums 1 ; Other Authorities 2 : making a total of 133.

Section . E

National Assistance Act, 1948. The Blind Persons Act, 1938.

Total Blind Population 1956.

TABLE I.

AGE PERIODS									TOTAL
0-1	1-4	5-15	16-20	21-39	40-49	50-64	65-69	Over 70	
1	1	1	2	8	14	40	9	79	154

TABLE II.
AGES AT WHICH BLINDNESS OCCURRED.

0-1	1-4	5-10	11-20	21-30	31-39	40-49	50-59	60-69	Over 70
16	5	6	2	12	10	15	20	15	53

RETROLENTAL FIBROPLASIA.

No new case was notified under this heading during the year.

The Home Teacher of the Blind reports as follows:—

"Although there was a substantial increase in the number of registrations during the year under review, this was not necessarily due to an actual increase of blindness in the City. There was one instance where operative treatment was refused, and one declined registration after notification. There was one de-certification after a successful cataract operation.

On 31st December the number of registered blind persons was 154: 64 males and 90 females. 88 were over the age of 65. There was a child of 2 at home (a Fibroplasia case) and a girl of 17 at the Royal Normal College for the Blind. 50 cases had other defects as well as blindness.

Twenty-two employed blind persons were engaged in the following full-time occupations: 1 Basketmaker (a home worker under the Bristol scheme), 1 Typist, 1 Shopkeeper, 1 Domestic Worker, 10 Factory Operatives, 3 Labourers, 1 Physiotherapist, 1 Porter, 1 Telephone Operator, 1 Air Ministry Training Officer and 1 General Assistant to Home Teacher. In addition, there were, of course, busy housewives, and others engaged in pastime handicraft work. 23 males and 1 female were registered under the Disabled Persons (Employment) Act of 1944.

The names of 12 persons appeared on the partially-sighted register: 6 males and 6 females. Of these, 4 required observation only. A girl of ten attended the Exeter School for the Partially-Sighted. There were 4 employed persons.

Approximately 1,950 blind welfare visits were paid, and some form of advice, guidance or instruction given on practically every occasion. Just over 200 lessons were given in Braille and Moon types, 310 in simple handwork at home, and about 20 in Typewriting. A number of newly-blind persons were taught to perform household and other tasks without risk of accident. It is gratifying to note that accidents to blind persons in the home are of very rare occurrence as compared with those sustained by people with perfect vision. Blind housewives seldom cut, scald, or burn themselves in the kitchen.

In spite of the high cost of materials, and the fact that it was not always possible to recover the cost from a blind pupil, the handicraft section of the work continued to be self-supporting. Two main classes were held weekly except for short breaks at bank holiday times. All classes were well attended and there was never a dull moment. It was quite impossible for me to give sufficient individual attention, and sometimes difficult to introduce ideas suitable for very elderly pupils who only became interested in handwork after the loss of sight. On an average the attendances on Wednesday afternoon was 30, and on the Tuesdays 9. The latter were specially interested in basketry.

The news that Mrs. Veale (one of my voluntary helpers) would be leaving Gloucester to live in Devonshire was received with regret. Mrs. Veale will always be remembered not only for her general helpfulness, but also for her sincerity, her sense of humour and cheerful personality.

Again, a successful savings club was run by a voluntary worker. At Christmas, 1s. 6d. interest was paid on every £ saved. The helper herself took responsibility for raising interest money.

On the last Saturday in August, a party of our people visited the Bristol Show for Blind Gardeners and several prizes were won in the handicraft section. The cost of the coach was met from handicraft funds.

One of the main features of the year was the formation of a percussion group which has given a great deal of pleasure particularly to elderly people. Experience has shown, unfortunately, that the piano at Palmers Hall cannot be kept in good condition owing to rust and atmospheric conditions.

Another progressive step was the formation of a Club for the Deaf-Blind (not hard-of-hearing) in October. From the beginning, this little club of 4 members which meets on the first Friday of each month has been most successful and very interesting to run. The members play games very seriously indeed, and are very good with jig-saw puzzles, etc. I am fortunate in having the services of a voluntary helper whose brothers and sisters are deaf and dumb, and whose husband is a registered blind person.

The sum of £37 was raised at a Sale of Work held at Palmers Hall on 27th October.

Social activities included an outing to Bourton-on-the-Water and Evesham on 23rd June. Flaxley Abbey was visited on 18th July, and there were several parties including a Christmas Party on 20th December. From time to time during the year our people were entertained by concert parties and other artists whose services were entirely free to us.

In order to acknowledge the valuable help received from other organizations and friends, films, including "Conquest of the Dark" and "Pathway into Light" were shown. On one occasion the Speaker was Mr. Birkbeck, the R.N.I.B.'s Placement Officer. These films were greatly appreciated by large audiences and there have been repeated requests for more. There is, of course, a certain amount of work and time involved when organizing these shows.

A gift of 180 eggs from Norton W.I. was greatly appreciated by our sick people. These eggs were all distributed between 2 and 6 p.m. on a Saturday. I was very grateful for the assistance of Mrs. Hough who provided transport for this work.

Mr. Rich continued to provide instruction in ballroom dancing for a group of our people. His services were greatly appreciated.

The provision of Sets and the provision of Radio repairs, Batteries, etc., continued to be met by the Gloucester City Blind Association. The Christmas "Wireless for the Blind" appeal was again successful and all our reasonable requirements were met. It was interesting to note that two-thirds of newly-registered blind persons owned television sets. The Gloucester City Blind Association continued to help generously with some of the refreshment needed at our Society functions and our Classes help to cover the cost of the remainder; each person attending contributes 2d. This arrangement has proved most successful.

The extension to Palmers Hall (in the form of two dressing rooms) was provided by The Gloucester City Blind Association and handed over officially to the City Council on 28th October. These rooms have been used for small classes, and for individual lesson.

The Talking Book Library continued to provide excellent service. In several cases the Gloucester G.P.O. gave valuable assistance in collecting cases for return from the blind person's house. This was greatly appreciated, not only by the blind people but also by the home teacher. (I have broken at least three cycle baskets with these heavy cases.)

The Handicraft Refresher Course held at the Bristol Workshops in April and organized by the Western Regional Association for the Blind was most helpful and beneficial in every way. I am very grateful for having had the opportunity to attend.

Looking back, I think it is true to say that 1956 was a very progressive year, full of activity and new ideas.

This report would be incomplete without an expression of thanks to all voluntary organizations and individual workers (including my Sick Visitors). To National, Regional and Statutory Bodies for their sympathetic help and co-operation throughout the year."

BLIND COFFEE CLUB

The activities of the Club, which meets at Palmers Hall on Saturday evenings, have continued under the able Chairmanship of Mr. W. H. Brown.

In addition to educational and social meetings at the Hall, visits have been paid by coach to several places of interest.

A Skittles Club also holds regular meetings, mainly at the Bristol Omnibus Company's skittle alley in London Road. The Club is very much indebted to those who manage the Company's Sports Club for their continuous help and kindness. The Skittles Club also plays away matches.

It is an excellent achievement to maintain interest with varied programmes in this way year by year. It is especially so as this is a Club run by the blind themselves. We of the Health Office deliberately avoid having anything to do with the Club arrangements except in that we go as guests from time to time, and enjoy ourselves.

DEAF

Work among the Deaf is undertaken by the Gloucester Diocesan Association for the Deaf, from their Headquarters in St. Mary's Square.

During the year, further work has been done on these premises by the deaf themselves. A new heating system has been installed and the hall and certain rooms have been re-floored. The house now contains a Chapel, offices and recreation rooms and a large room where lectures, etc., can be given.

The Association is virile and does good work for the Deaf, both at its headquarters and by visiting the deaf in their homes, in hospital or elsewhere. Placement in industry also features in their work.

PHYSICALLY HANDICAPPED.

This work is undertaken by the Gloucester Branch, British Red Cross Society.

Domiciliary visits for occupational therapy are undertaken, and a regular weekly session is held at Palmers Hall, the patients being conveyed to and from by the City Ambulance Service.

The Gloucester branch of the British Red Cross Society has been trying to get the services of an Occupational Therapist who can give more time still. The Health Committee pays a small sum towards office expenses, but has undertaken to pay a substantial sum towards the above appointment; unfortunately the Society has not been able to find the right person yet.

In addition, during the summer 4 women and 4 men were taken for a week's holiday at a camp at Gorleston. These people because of their physical infirmities, cannot manage to live in hotels or

boarding houses, but special arrangements are made at a few camps such as this one. It is an excellent piece of arrangement by the Gloucester branch of the Society, especially as such physically handicapped persons could not otherwise get any holiday at all. Miss MacSwiney, the Hon. Secretary of the branch, must be particularly praised, not only for this work but for running the weekly Occupational Handicraft Class and gathering round her such a body of helpers.

The Health Committee contributes to the cost of the holidays, as also does the Fluck Charity through its Hon. Secretary and Treasurer, Mr. D. G. Price.

All the above work by the Society is voluntary.

The Gloucester Cripples Society continues its social work also with the physically handicapped, including a day's Outing in the summer and a Party at Christmas time. This also is a voluntary effort, and the organizer is Mr. David Embling.

Section F.

Sanitary Circumstances of the Area

I give below a report from the Chief Public Health Inspector :

"I beg to report on the work carried out by the Public Health Inspectors during the year 1956.

Inspections for slum clearance continued steadily throughout the year and Clearance or Compulsory Purchase Orders affecting some properties were confirmed by the Minister of Housing and Local Government. Rehousing commenced and by the end of the year families moved from these properties to other accommodation provided, in the main, by the Corporation Housing Department, a few families finding their own new accommodation. One difficulty of slum clearance is deciding which houses should be dealt with first and which should be left until the fourth and fifth years of the five-year plan. A good start has been made in the Kingsholm area which is expected to be cleared by the end of the third year and so enable proper redevelopment to be accomplished in the very near future.

One other aspect of the work of the Public Health Inspectors that I must mention is atmospheric pollution. The implementation of the Clean Air Act is going to give the Inspectors a great deal of extra work and if there is to be any significant improvement in the abatement of smoke and grit pollution, a much greater percentage of their time will have to be devoted to this important subject.

In the spring of the year, Mr. O. M. Hale (a retired Inspector) who had been employed temporarily for the Housing Survey, resigned because of ill-health. In the early summer Mr. C. H. David resigned to take up a senior post at Basingstoke and Mr. Alexander was promoted to fill his place. Later in the year we were shocked by the sudden death of Mr. E. Newbould, who after retirement returned to work in the department, where his long experience and thorough knowledge of the City was very valuable.

We are now two Inspectors short and in spite of several advertisements have failed to fill these vacancies. I hope that the vacancies will not remain unfilled for any great length of time as the existing staff are already being pushed rather too far, more especially as the daily meat inspection duty entails quite a considerable amount of overtime work."

The following is a summary of the inspections made during the year 1956.

PUBLIC HEALTH ACT.

Dwelling Houses — on complaint	...	...	...	544
Moveable Dwellings	...	...	...	85
Offensive Trades	...	...	...	8
Workplaces	...	...	...	3
Schools	...	...	...	30
Smoke Observations	...	...	...	105
Stables and Piggeries	...	...	...	62
Theatres, Cinemas, Fairs, etc.	...	...	...	6
Public Sanitary Conveniences	...	...	...	386
Common Lodging Houses	...	...	...	11
Verminous Premises	...	...	...	17
Drain Tests	...	...	...	68
Re-Visits	...	...	...	1491
Work in Progress	...	...	...	370

HOUSING ACT.

Houses Inspected	...	...	...	...	...	164
Basement Dwellings	...	...	...	...	...	11
Houses Let in Lodgings	...	...	...	...	...	12
Overcrowding	...	...	...	...	...	19
Re-Visits	...	...	...	...	...	402

FOOD AND DRUGS ACT.

Bakehouses	...	...	...	...	...	31
Dairies	...	...	...	...	...	94
Ice Cream Premises	...	...	...	...	...	57
Restaurants, Cafes, Kitchens, etc.	...	...	...	...	...	44
Hotels and Beer Houses	...	...	...	...	...	32
Fish Shops and Fish Friers	...	...	...	...	...	48
Markets and Food Stalls	...	...	...	...	...	132
Food Preparation and Storage Premises	...	...	...	...	...	110
Butchers Shops	...	...	...	...	...	105
Food Shops	...	...	...	...	...	269
Food Vehicles	...	...	...	...	...	41
Samples — Bacteriological	...	...	...	...	...	97
Biological	...	...	...	...	...	3
Food and Drugs Samples — Formal	...	...	...	...	...	34
Informal	...	...	...	...	...	40
Water Samples	...	...	...	...	...	2

FACTORIES ACT.

Factories Power	...	...	...	...	...	205
Non-Power	...	...	...	...	...	14
Outworkers	...	...	...	...	...	—

PORT HEALTH.

Vessels — Foreign Going	...	...	...	...	105
Coastwise	...	...	...	...	19
Canal Boats	...	...	...	...	3
Rodent Control	...	...	...	...	14

OTHER.

Shops Act ...	...	...	...	...	...	2
Pet Animals Act	...	...	...	...	...	—
Rag Flock Act	...	...	...	...	...	—
Rodent Control — Dwelling Houses			...	...	...	163
Business Premises			...	...	...	51
Others		...	...	...	...	52
Noise Nuisances	...	...	...	...	...	20
Infectious Disease Inquiries			...	...	...	5
Food Poisoning Inquiries			...	...	...	6
Slaughterhouses	...	...	...	...	...	1858
Miscellaneous	...	...	...	...	...	859
Merchandise Marks Act	...	...	...	...	...	111

The following is a summary of the notices served and complied with during 1956 (together with outstanding notices complied with).

	Served	Complied with
Informal	222	222
Statutory, Public Health Act	46	33
„ Housing Act	—	—
Factories, Power	23	17
Factories, Non-Power	1	—
Other Premises	1	2
Gloucester Corporation Act	27	24

HOUSING—1955

CLEARANCE AREAS CONFIRMED DURING 1956.

Title of Order	Clearance Area Nos.	No. of Houses in Order	No. of Persons Rehoused during 1956
City of Gloucester			
(Kingsholm) (No. 1) C.P.O., 1955	90, 91, 92, 93, 94	37	—
(Kingsholm) (No. 2) C.P.O., 1956	95	22	54
(Kingsholm) (No. 3) C.P.O., 1956	97, 98	31	39
(Area No. 96) (The Knapp) Clearance Order, 1956	96	7	19
(Area No. 99) (Upper Rea) Clearance Order, 1956	99	4	—
(Area No. 100) (St. Catherine Street) (No. 1) Clearance Order, 1956	100	2	—
(Area No. 101) (St. Catherine Street) (No. 2) Clearance Order, 1956... ..	101	5	—
(Area No. 102) (Longsmith Street) Clearance Order, 1956	102	5	4
(Areas Nos. 103 and 104) (Westgate Street) Clearance Order 1956	103, 104	5	—

DEMOLITION AND CLOSING ORDERS.

	Houses	Number of Persons displaced
(1) Housing Act, 1936.		
(a) Houses demolished as a result of formal or informal procedure under Section 11	5	35
(b) Houses closed in pursuance of an under- taking given by the owners under Section 11 and still in force	—	—
(c) Parts of buildings closed (Section 12)... ..	2	8
(2) Housing Act, 1949.		
(a) Closing Orders made under Section 3 (1)	Nil	Nil
(b) Demolition Orders determined and Closing Orders substituted under Section 3 (2)	Nil	Nil
(3) Local Government (Miscellaneous Provisions) Act 1953.		
Houses closed (Sections 10 and 11)	1	2

REPAIRS.

Housing Act, 1936.

Number of houses made fit after service of formal notices (Section 9, 10 and 16).

(a) by owners	...	...	...	...	Nil
(b) by local authority in default of owners	...	...	...	...	Nil

HOUSING ACT, 1936—OVERCROWDING.

(a) Number of Corporation dwellings Inspected...	...	...	...	1
Overcrowded	...	...	...	1
(b) Number of privately-owned dwellings—Inspected...	...	...	...	2
Overcrowded	...	...	...	1

The overcrowded houses were referred to the Housing Manager.

VERMINOUS PREMISES

Number of houses disinfested 68

All disinfestations were carried out with D.D.T. or B.H.C. compounds.

OFFENSIVE TRADES

The following Offensive Trades were carried on in the City at the end of the year:—

Dealers in rags, bones and rabbit skins	...	...	...	...	...	2
Dealers in hides, skins, etc.	...	...	...	...	...	1
Tripe Boilers	...	...	...	...	...	1
Tallow and Fat Melters	...	...	...	...	...	1
Number of Inspections made of above premises	...	...	...	...	...	8

COMMON LODGING-HOUSES

No on register	...	...	...	...	...	3
No. of rooms registered for sleeping	...	...	...	...	...	24
Permitted number of lodgers	...	...	...	...	...	131
No. of Inspections	...	...	...	...	...	11

RODENT CONTROL**TYPES OF PROPERTY.**

	Local Authority	Dwelling Houses	Agr.	All Other (including business) Premises	TOTAL
Number of Properties inspected as a result of:—					
(a) Notification	47	241	5	109	402
(b) Survey or otherwise	24	432	24	589	1069
Number of properties inspected which were found to be infested by rats	9	91	13	57	170
Number of properties inspected which were found to be infested by mice	27	144	—	119	290

FACTORIES ACT, 1937.

PART I OF THE ACT.

1.—INSPECTIONS for purposes of provisions as to health.

Premises	Number on Register	Number of		
		Inspections	Written notices	Occupiers prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are enforced by the Local Authority	59	14	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	322	205	—	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	2	—	—	—
TOTAL	383	219	—	—

2.—CASES IN WHICH DEFECTS WERE FOUND.

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (S.1) ...	2	2	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4)...	—	—	—	—	—
Ineffective drainage of floors (S.6)	1	1	—	—	—
Sanitary Conveniences (S.7)					
(a) insufficient	—	—	—	—	—
(b) Unsuitable or defective	15	8	—	13	—
(c) Not separate for sexes	1	1	—	—	—
Other offences against the Act (not including offences relating to Outwork)	5	5	—	—	—
TOTAL ...	24	17	—	13	—

OUTWORK.

PART VIII OF THE ACT (Sections 110 and 111).

Nature of Work	Section 110			Section 111		
	No. of out-workers in August list required by Sect. 110 (1) (c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in unwholesome premises	Notices served	Prosecutions
Wearing apparel						
Making, etc.	9	—	—	—	—	—
Cleaning and washing ...	—	—	—	—	—	—
TOTAL	9	—	—	—	—	—

Section G.

Inspection and Supervision of Food

<i>Type of Premises.</i>								<i>Number</i>
REGISTERED OR LICENSED FOOD PREMISES.								
Dairies	...	...	...	...	...	...	...	9
Distributors of Milk	...	...	...	...	...	...	...	68
<i>Tuberculin Tested Milk.</i>								
Dealers' Licences	...	...	...	...	...	...	...	59
Supplementary Licences	...	...	...	...	...	...	...	4
<i>Pasteurised Milk.</i>								
Pasteurisers' Licences	...	...	...	...	...	...	...	2
Dealers' Licences	...	...	...	...	...	...	...	65
Supplementary Licences	...	...	...	...	...	...	...	1
<i>Ice Cream.</i>								
Manufacturers — Hot Mix		...	...	...	...	...	...	4
Cold Mix		...	...	...	...	...	...	3
Vendors	...	...	...	...	...	...	...	199
Preserved Meat	...	...	...	...	...	...	...	34
<i>Butter Factories and Margarine</i>								
Wholesale Dealers	...	...	...	...	...	...	...	12
OTHER FOOD PREMISES.								
Bakehouses	...	...	...	...	...	...	...	18
Butchers' Shops	...	...	...	...	...	...	...	69
Cafes, Restaurants and Canteens	...	...	...	...	...	...	...	84
Wet and Fried Fish Shops	...	...	...	...	...	...	...	39
General Food Shops	...	...	...	...	...	...	...	297
Public Houses	...	...	...	...	...	...	...	126
Wholesale Premises	...	...	...	...	...	...	...	8
Food Factories	...	...	...	...	...	...	...	7

THE MILK (SPECIAL DESIGNATION) (RAW MILK) REGULATIONS, 1949 and THE MILK (SPECIAL DESIGNATION) (PASTEURISED AND STERILISED MILK) REGULATIONS, 1949.

The results of samples of milk taken under the above regulations were as follows :—

DESIGNATION	Methylene Blue Test		Phosphatase Test		Biological Examinations (for Tuberculosis)	
	Satisfactory	Un-satisfactory	Satisfactory	Un-satisfactory	Positive	Negative
Tuberculin Tested ...	6	1	—	—	—	1
Tuberculin Tested (Pasteurised) ...	—	—	—	—	—	—
Pasteurised ...	56	—	63	—	—	—
Non-designated ...	3	1	—	—	—	3
TOTAL ...	65	2	63	—	—	4

CARCASSES INSPECTED AND CONDEMNED DURING THE YEAR 1956.

	Cattle excluding Cows.	Cows.	Calves.	Sheep and Lambs.	Pigs.
Number killed and inspected	3387	232	1619	9473	10564
<i>All Diseases except Tuberculosis.</i>					
Whole Carcasses condemned	—	—	5	6	10
Carcasses of which some part or organ was condemned	997	45	4	260	125
Percentage of the number inspected affected with disease other than Tuberculosis	29·4	19·4	0·5	2·8	1·3
<i>Tuberculosis only.</i>					
Whole carcasses condemned	1	—	2	—	1
Carcasses of which some part or organ was condemned	101	12	1	—	152
Percentage of the number inspected affected with Tuberculosis ...	3·0	5·2	0·1	—	1·4

TOTAL WEIGHT OF UNSOUND FOOD DEALT WITH

	Tons.	Cwts.	Qrs.	Lb.
Meat and Offals	10	6	1	7
Other Foods	4	3	3	10
	14	10	0	17

DISPOSAL OF UNSOUND FOOD

All unsound meat was disposed of within the City, being converted into fertiliser, etc., by a process of steam sterilisation. All other unsound foods were disposed of by burial on the Corporation's controlled refuse tip.

SLAUGHTER-HOUSES

No. of Licensed Slaughterhouses in the City—	...	4
No. of visits to Slaughterhouses for inspection of Carcases	... ..	1858

FOOD AND DRUGS ACT, 1938.

The number of samples taken for analysis during the year was as follows :—

Year	Number taken	Satisfactory		Unsatisfactory	
		Formal	Informal	Formal	Informal
1956	74	32	29	2	11

ICE CREAM

The number of samples taken for analysis during the year was as follows :—

Year	Number Taken	Grade I	Grade II	Grade III	Grade IV
1956	18	7	2	9	—

FOOD POISONING

Total number of outbreaks	...	...	...	Nil
Number of cases	...	...	...	1
Number of deaths	...	...	...	Nil
Organisms responsible	...	...	...	Salmonella.
Food involved	...	...	...	Not identified.

PROSECUTIONS

FOOD AND DRUGS ACT, 1955

Mouse in loaf	Fined £5.
---------------	-----	-----	-----	-----	-----------

Section H.

Port Health

TABLE A.

SECTION I—STAFF.

<i>Name of Officer.</i>	<i>Nature of Appointment.</i>	<i>Date of Appointment.</i>	<i>Qualifications.</i>	<i>Other appointments held.</i>
Dr. Charles Cookson	Port Medical Officer	1st Apr., 1934	M.D., D.P.H.	Medical Officer of Health, City of Gloucester.
R. I. Williams	Port Health Inspector	1st Jan., 1952	D.P.A., M.S.I.A.	Chief Public Health Inspector, City of Gloucester.
C. H. David	Assistant Port Health Inspector	1st Jan., 1952 (Resigned 23rd Aug., 1956)	M.S.I.A.	Public Health Inspector, City of Gloucester
G. W. Alexander (vice C. H. David resigned)	Assistant Port Health Inspector	24th Sept., 1956	M.S.I.A.	Public Health Inspector, City of Gloucester
Capt. O. Olsen	Assistant Port Health Inspector	9th Dec., 1954 (Resigned 4th Mar., 1955)	Master Mariners Certificate, Board of Trade	Harbour Master.
Capt. H. H. Burbridge	Assistant Port Health Inspector	7th Mar., 1955	Master Mariners Certificate Board of Trade	Harbour Master.

Address and telephone number of the Medical Officer of Health : Health Department,
 Greyfriars,
 Gloucester.
 Gloucester 24416/7.

Telegraphic Address Portelth, Gloucester.

SECTION II—AMOUNT OF SHIPPING ENTERING THE DISTRICT DURING THE YEAR.

TABLE B.

Ships from	Number	Tonnage	Number inspected		Number of ships reported as having or having had during the voyage infectious disease on board
			By the Medical Officer of Health	By the Port Health Inspector	
Foreign Ports	117	47,560	—	117	—
Coastwise ...	4,132	347,702	—	20	—
TOTAL ...	4,249	395,262	—	139	—

SECTION III—CHARACTER OF SHIPPING AND TRADE DURING THE YEAR.

TABLE C.

No change.

SECTION IV—INLAND BARGE TRAFFIC.

The main traffic is with petrol, timber and grain to Worcester and Stourport.

SECTION V—WATER SUPPLY.

No change.

SECTION VI—PUBLIC HEALTH (SHIPS) REGULATIONS, 1952.

No change.

SECTION VII—SMALLPOX.

No change.

SECTION VIII—VENEREAL DISEASES.

No change.

SECTION IX—CASES OF NOTIFIABLE AND OTHER INFECTIOUS DISEASES ON SHIPS.

Nil.

SECTION X—OBSERVATIONS ON THE OCCURRENCE OF MALARIA ON SHIPS.

Nil.

SECTION XI—MEASURES TAKEN AGAINST SHIPS WITH OR SUSPECTED OF PLAGUE.

Nil.

SECTION XII—MEASURES AGAINST RODENTS IN SHIPS FROM FOREIGN PORTS.

Ships and warehouses in Gloucester Docks and ships in Sharpness Docks are kept under the supervision of the City Pests Officer.

Bacteriological and pathological examination of rodents is carried out at the Gloucestershire Royal Hospital (Royal Infirmary).

Rodents destroyed in the year from foreign ports. TABLE E.

Category	Number
Black rats	—
Brown rats	—
Species not known	—
Sent for examination	—
Infected with plague	—

Deratting Certificates and Deratting Exemption Certificates issued during the year for ships from foreign ports.

TABLE F.

No. of Deratting Certificates issued					Number of Deratting Exemption Certificates issued	Total Certificates issued
HCN	After Fumigation with Other Fumigant (state method)	After trapping	After poisoning	Total		
1	2	3	4	5	6	7
Nil	Nil	Nil	Nil	Nil	11	11

SECTION XIII—INSPECTION OF SHIPS FOR NUISANCES. TABLE G.

Inspections and Notices.

Nature and number of inspections					Notices served		Result of serving Notice
					Statutory	Others	
British	...	...	...	24	—	—	
Foreign	...	...	...	113	—	—	
TOTAL	...	...	...	137	—	—	

Public Health Act, 1936, Part X—Canal Boats

1. (a) Number of Canal Boats inspected 2
- (b) Number of inspections made 5
2. Number of occupants using Canal Boats :— *Male* *Female*
 - Adults 3 1
 - Children under five — —
 - Children over five — —
3. Number of infringements of the Public Health Act and Canal Boats Regulations —
4. Number of legal proceedings taken during the year —
5. Number of Notices served during the year —
6. Number of cases of infectious disease during the year —
7. Number of new registrations during the year —
8. Number of Canal Boats on register at end of year ... 12

Section I.

School Health Service

EDUCATION COMMITTEE

1955-56

Chairman :

ALDERMAN MRS. M. L. EDWARDS

Vice-Chairman :

COUNCILLOR A. H. GEORGE

Members :

THE MAYOR (*ex officio*)

Alderman T. Hannam-Clark

„ G. A. H. MATTHEWS

„ W. J. SMITH

Councillor MRS. L. R. LANGDON
(*Mayoress*)

„ M. C. BYE

„ F. PHELPS

„ A. V. STIRLAND

„ MRS. F. E. FITCH

„ P. G. J. ATKINSON

„ D. COLE

„ R. H. SMITH

„ I. C. PRITCHARD

REV. W. G. E. QUICKE

REV. CANON M. J. ROCHE

MR. P. W. ROBINSON, B.Sc.

MR. L. A. BUTTLING

MR. A. E. HANCOX

MRS. M. TAYLOR.

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„ H. M. G. ROWE

„ MRS. L. R. LANGDON

„ M. C. BYE

„ A. V. STIRLAND

„ MRS. F. E. FITCH

„ C. COLLINS

„ I. C. PRITCHARD

REV. K. F. EVANS-PROSSER

REV. W. G. E. QUICKE

REV. CANON M. J. ROCHE

MR. P. W. ROBINSON, B.Sc.

MR. L. A. BUTTLING

MR. A. E. HANCOX

MRS. M. TAYLOR

Madam Chairman, Ladies and Gentlemen,

In presenting my Annual Report for the year 1956 I would comment especially on the following points :—

SHORTAGE OF DENTAL OFFICERS

The establishment for Dental Officers in Gloucester is at least one Principal and three Dental Officers. Again I have to report that we only have a Principal and no Dental Officers. Mr. Lightfoot, the Principal, admittedly is ably assisted by three local dental practitioners who between them provide five sessions a week, the equivalent of less than half of a whole-time man. The effects of this continued shortage is that regular conservative work can only be attempted amongst a small section of the school population, the juniors, and even with them at less regular intervals than is desirable. One result is that the lack of inspection and preventative treatment that can be given to the older children causes increasing troubles with their teeth, and therefore a greater demand for urgent extractions. These emergency cases arrive at the clinics and interfere with the progress of what regular conservative work can be attempted by an appointments system. In fact the school dental clinic is largely an emergency dental out-patient department at present.

The Education Committee is fully aware of this most undesirable position and has made every effort to remedy it.

The present Dental Clinic is situated on the second floor of a building and is inadequate. Furthermore, with such competition from all sides for dental surgeons, such a clinic is unattractive to young women or men who have been trained in the most modern surroundings.

The Education Committee has set up plans and proposals to the Ministry of Education for building a new clinic, but because of restrictions on loans, no approval to build has yet been received. Until we have a new clinic it is felt that we will not succeed in attracting any whole-time Dental Officers.

MENTALLY HANDICAPPED CHILDREN

I am pleased to be able to report on the greatly increased amount of medical supervision now given to the welfare of these children since Dr. D. S. Clark joined the staff. Such care was not possible previously, with only one Assistant School Medical Officer. Now, and especially with his special knowledge of this work, it can be said that these children are getting a far better service than was possible before.

IMMUNISATION AGAINST INFECTIOUS DISEASES

This subject has been dealt with in my Report on the Public Health Services, but as many of the persons immunised are school children, special reference might be made to them here.

To the list of diseases against which immunisation is offered, Poliomyelitis has now been added. It is also hoped at the end of this year, or the beginning of 1958, to add Tuberculosis.

One point that has to be borne in mind in getting school children to a clinic is the interruption that is thereby caused to school lessons. Not only is it a loss to an individual child to miss a lesson, but the interruption to a teacher to have children entering and leaving classes is distracting. When the calls for Dental and Minor Ailments, immunisations, special examinations for employment and other causes are considered, together with calls not associated with the School Health Service, one can only conclude that school teachers are a long suffering body of people. Efforts are being made to see how much some of this work can be done outside school hours.

MASS RADIOGRAPHY

Through the kindness of the South Western Regional Hospital Board, it has been possible to offer Mass Radiography to children in their last year at Secondary Schools. It has also been possible to arrange special examinations at schools where special reasons justify it.

Judged by percentages of new cases of Tuberculosis discovered in this way, the results might indicate that the Mass X-ray Unit would be more profitably employed amongst adults, where the percentage of new cases of disease found is higher. Nevertheless it is very important indeed to detect cases in school children, and in turn to find the source of their infection. I suggest, therefore, that this work is very profitable in the end.

I have dealt with this subject also in my main report, but have included the figures relating to children here.

Once again it is a pleasure to record the happy relations that exist with the Chief Education Officer and his staff.

I am, Madam Chairman, Ladies and Gentlemen,

Your obedient Servant,

CHARLES COOKSON,

Principal School Medical Officer.

STATISTICS.

Population of Gloucester	...	...	...	...	67,300
School Population	...	...	...	...	12,589
Distribution of School population :—					
				<i>No.</i>	<i>No. on Rolls.</i>
A. Primary Schools	...	...	...	33	7,945
B. Secondary Schools	...	...	...	11	4,482
C. Special Schools	...	...	...	2	162

MEDICAL INSPECTIONS.

Details of Special Inspections and Re-inspections will be found in Tables which follow.

Examinations of children for—

(a) Fitness for employment	...	...	...	182
(b) Ascertainment and educational subnormality	...	...	...	—

Examinations of candidates for—

(a) Teachers' Training Colleges	...	...	...	35
(b) Posts in Education Department	...	...	...	14

INFESTATION WITH VERMIN.

I am glad to report that there is a further slight fall in the percentage of individual pupils found to be infested. The figure, however, is still far too high, and greater efforts will be made by the School Nurses to help the Teachers in reducing it considerably.

<i>Year</i>	<i>Total No. of pupils examined</i>	<i>Total No. of pupils infested</i>	<i>Percentage</i>
1939	19,450	648	3.3
1940	16,657	1,813	10.9
1941	13,633	1,555	11.4
1942	19,551	2,085	10.7
1943	18,632	2,302	12.4
1944	17,729	2,296	13
1945	15,168	2,603	17.1
1946	20,073	2,477	12.3
1947	20,638	2,746	13.3
1948	23,282	2,810	12.1
1949	26,497	2,822	10.7
1950	19,215	1,819	9.5
1951	16,817	1,011	6
1952	24,537	1,262	5.1
1953	25,076	964	3.8
1954	23,984	887	3.7
1955	24,512	878	3.6
1956	28,116	911	3.2

MASS RADIOGRAPHY.

Detail of children examined during the year by Mass Miniature Radiography are as follows :—

	Male	Female	Total
Miniature Films	428	659	1087
Large Films—			
Total Recalled	8	4	12
Did not attend	—	—	—
Normal	6	2	8
Significant	2	2	4
Being investigated	—	—	—

	Male	Female	Total
NON-TUBERCULOUS CASES			
Abnormality of the Diaphragm ...	1	—	1
Congenital Cardiac Lesion ...	1	—	1
Pulmonary Fibrosis	—	1	1
INACTIVE TUBERCULOSIS	—	1	1

MANTOUX TESTING AND B.C.G. VACCINATION.

This work continues amongst “contact” or suspected cases, the Chest Physicians being responsible for the work.

HANDICAPPED CHILDREN.

1. *Deaf and Blind.*

There are 8 children at special schools for the deaf or partially deaf, 2 at schools for the partially blind and 2 at a school for the blind.

2. *Delicate Children.*

The Open Air School remains full. There were 38 admissions during the year.
1 child at Residential School.

3. *Epileptics.*

Excluding the educationally sub-normal, there is 1 child in a special school for epileptics.

Those who were in ordinary schools and held their places, without detriment to themselves or others last year, are still there.

4. *Educationally Sub-Normal, 18.*5. *Physically Handicapped, 7.*

DENTAL SURGERY.

The Principal Dental Officer reports as follows :—

"During the year 1956 there has been a slight increase in the number of children inspected, though much the larger proportion of patients are those attending the Dental Clinic for "Special and Emergency" treatment.

The overall figures for extractions which reached a peak in 1954, again show a slight drop, while the number of fillings and of teeth filled shows a slight increase over the previous year, which is a more satisfactory ratio.

Dental caries continues to be one of the major unsolved problems of our times. It is one of those diseases which appear to have increased with "civilization" and is probably linked with our dietetics and nutritional changes as well as with faulty oral hygiene. This seems to be borne out by the drop in the caries rate during the "rationing period" of the last war, and its rise again since luxury foods have become more available. This, of course, is not the whole of the picture, and though much scientific work is being done with regard to caries, and its cause and prevention, there are still very wide fields for research in dietetics and agricultural methods in the production of our food, and in the treatment of the soil in which it is grown.

In the latter part of the year we were pleased to welcome Mr. J. R. Cond, B.D.S. BIRM to our staff as a further part-time Dental Officer in addition to Mr. R. G. Boodle and Mr. M. J. Bartlett who have been with us since 1936 and 1951 respectively.

Since the last report some further progress has been made towards the provision of the new Dental Clinic.

In conclusion I should like to mention my appreciation of the co-operation which has been shown by the Head Teachers and staffs of the Schools of Gloucester."

MEDICAL INSPECTION AND TREATMENT

Medical inspection of Pupils attending Maintained Primary and Secondary Schools.

TABLE I.

A.—PERIODIC MEDICAL INSPECTIONS.

NUMBER OF INSPECTIONS IN THE PRESCRIBED GROUPS :—

Entrants	1393
Second Age Group	1373
Third Age Group... ..	2219
TOTAL	4985

NO. OF OTHER PERIODIC INSPECTIONS —

GRAND TOTAL **4985**

B.—OTHER INSPECTIONS

No. of Special Inspections	1837
No. of Re-Inspections	101
TOTAL	1938

C.—PUPILS FOUND TO REQUIRE TREATMENT :—

GROUP 1	For defective vision (excluding squint) 2	For any of the other conditions recorded in Table II A. 3	Total individual pupils 4
Entrants	54	156	210
Second Age group ...	65	99	164
Third Age group ...	84	131	215
Total (prescribed groups)	203	386	589
Other Periodic Inspections ...	—	—	—
GRAND TOTAL ...	203	386	589

D.—CLASSIFICATION OF THE PHYSICAL CONDITION OF PUPILS INSPECTED DURING THE YEAR IN THE AGE GROUPS RECORDED IN TABLE I.A.

Age Group 1	Number of Pupils Inspected 2	Satisfactory		Unsatisfactory	
		No. 3	% of Col. 2 4	No. 5	% of Col. 2 6
Entrants	1393	1393	100%	—	—
Second age group ...	1373	1373	100%	—	—
Third age group ...	2219	2219	100%	—	—
Other periodic Inspections ...	—	—	—	—	—
Total	4985	4985	100%	—	—

TABLE II.

INFESTATION WITH VERMIN

(i) Total number of examinations in the schools by the school nurse or other authorised persons	} 28116
(ii) Total number of individual pupils examined	
(iii) Total number of individual pupils found to be infested	911
(iv) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2) Education Act, 1944)	—
(v) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3) Education Act, 1944)	—

TABLE III

RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED
31ST DECEMBER, 1956.

A.—PERIODIC INSPECTIONS.

Defect Code No.	DEFECT OR DISEASE	PERIODIC INSPECTIONS				TOTAL (including all other age groups inspected	
		Entrants		Leavers		Requiring treatment	Requiring observation
		Requiring treatment	Requiring observation	Requiring treatment	Requiring observation		
4	Skin ...	3	30	—	20	11	81
5	Eyes—						
	(a) Vision ...	54	41	84	226	203	376
	(b) Squint ...	15	29	—	3	17	36
	(c) Other ...	4	3	2	13	8	19
6	Ear—						
	(a) Hearing ...	3	8	2	7	6	27
	(b) Otitis Media ...	1	3	2	2	5	12
	(c) Other ...	2	3	2	2	4	10
7	Nose or Throat ...	25	61	6	38	39	107
8	Speech ...	7	11	2	5	11	18
9	Lymphatic glands...	—	5	—	6	—	18
10	Heart ...	1	8	1	20	2	41
11	Lungs ...	3	64	4	22	9	119
12	Developmental—						
	(a) Hernia ...	5	30	—	6	5	48
	(b) Other ...	—	11	—	—	—	16
13	Orthopædic—						
	(a) Posture ...	3	11	17	30	21	54
	(b) Feet ...	5	42	29	70	40	157
	(c) Other ...	—	4	6	34	6	39
14	Nervous system—						
	(a) Epilepsy ...	3	2	—	3	—	11
	(b) Other ...	—	—	—	—	—	—
15	Psychological—						
	(a) Development ...	—	3	—	—	—	6
	(b) Stability ...	4	21	3	7	9	35
16	Abdomen ...	—	—	—	3	—	4
17	Other ...	4	92	10	68	18	205

B.—SPECIAL INSPECTIONS.

Defect Code No.	DEFECT OR DISEASE	SPECIAL INSPECTIONS	
		Requiring Treatment	Requiring Observation
4	Skin	1	10
5	Eyes—		
	(a) Vision	28	313
	(b) Squint	1	31
	(c) Other	2	5
6	Ears—		
	(a) Hearing	—	26
	(b) Otitis Media	1	—
	(c) Other	—	2
7	Nose and Throat	9	146
8	Speech	1	26
9	Lymphatic Glands	—	32
10	Heart	2	23
11	Lungs	1	54
12	Developmental—		
	(a) Hernia	1	29
	(b) Other	—	18
13	Orthopædic—		
	(a) Posture	—	31
	(b) Feet	—	90
	(c) Other	—	10
14	Nervous System—		
	(a) Epilepsy	—	1
	(b) Other	—	—
15	Psychological—		
	(a) Development	—	4
	(b) Stability	—	46
16	Abdomen	—	1
17	Other	1	163

TABLE IV

GROUP 1.—EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases known to have been dealt with	
	by the Authority	otherwise
External and other, excluding errors of refraction and squint	273	6
Errors of Refraction (including squint)	73*	200
Total ...	346	206
Number of pupils for whom spectacles were Prescribed	—*	110

* Including cases dealt with under arrangements with the Supplementary Ophthalmic Services.

TABLE IV (continued)

GROUP 2.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases known to have been treated	
	by the Authority	otherwise
Received operative treatment		
(a) for disease of the ear ...	—	37
(b) for adenoids and chronic tonsilitis	—	269
(c) for other nose and throat conditions ...	—	14
Received other forms of treatment ...	18	7
Total ...	18	327
Total number of pupils in schools who are known to have been provided with hearing aids—		
(a) in 1956 ...	—	5
(b) in previous years ...	—	—

GROUP 3.—ORTHOPAEDIC AND POSTURAL DEFECTS

	By the Authority	Otherwise
Number of pupils known to have been treated at clinics or out-patient departments ...	87	5

GROUP 4.—DISEASES OF THE SKIN

(excluding uncleanness, for which see Table II).

	Number of cases treated or under treatment during the year by the Authority
Ringworm— (i) Scalp ...	3
(ii) Body ...	1
Scabies ...	—
Impetigo ...	119
Other skin diseases ...	9
Total ...	132

TABLE IV (continued)**GROUP 5.—CHILD GUIDANCE TREATMENT**

Number of pupils treated at Child Guidance clinics under arrangements made by the Authority	45
---	-----	-----	-----	-----	-----	-----	-----	----

GROUP 6.—SPEECH THERAPY

Number of pupils treated by Speech Therapists under arrangements made by the Authority	65
--	-----	-----	-----	-----	-----	-----	-----	----

GROUP 7.—OTHER TREATMENT GIVEN

(a)	Number of cases of miscellaneous minor ailments treated by the Authority	...	...	...	...	1546
(b)	Pupils who received convalescent treatment under School Health Service arrangements	...	...	...	...	—
(c)	Pupils who received B.C.G. Vaccination	...	...	...	...	14
(d)	Other—Appendix	...	...	...	...	7
	Accidents	...	...	...	...	13
	Burns	...	...	...	...	6
	Hernia	...	...	...	...	2
	Heart	...	...	...	...	1

TABLE V**DENTAL INSPECTIONS AND TREATMENT CARRIED OUT BY THE AUTHORITY**

(1)	Number of pupils inspected by the Authority's Dental Officers :—					
	(a)	At Periodic Inspections	...	...	...	498
	(b)	As Specials	...	...	...	2196
		TOTAL	...	...	...	2694
(2)	Number found to require treatment	...	...	...	...	2632
(3)	Number offered treatment	...	...	...	...	2510
(4)	Number actually treated	...	...	...	...	2363
(5)	Number of attendances made by pupils for treatment including those recorded at 11 (h) overleaf	...	...	...	...	4365
(6)	Half-days devoted to (a) Periodic (School) Inspection					5
	(b) Treatment	...	...	...	...	588
	TOTAL	...	...	...	...	593

TABLE V (continued)

(7) Fillings :—						
Permanent teeth	...	...	...	...	...	1143
Temporary teeth	...	...	...	...	...	2
TOTAL						1145
(8) Number of teeth filled—						
Permanent teeth	...	...	...	...	...	971
Temporary teeth	...	...	...	...	...	2
TOTAL						973
(9) Extractions :—						
Permanent teeth	...	...	...	...	...	1052
Temporary teeth	...	...	...	...	...	3027
TOTAL						4079
(10) Administration of general anaesthetics for extraction...						2037
(11) Orthodontics :—						
(a) Cases commenced during the year	...	...	...	...	...	—
(b) Cases carried forward from previous year	...	...	...	...	...	—
(c) Cases completed during the year	...	...	...	...	...	—
(d) Cases discontinued	...	...	...	...	...	—
(e) Pupils treated with appliances	...	...	...	...	...	—
(f) Removable appliances fitted	...	...	...	...	...	—
(g) Fixed appliances fitted	...	...	...	...	...	—
(h) Total attendances	...	...	...	...	...	—
(12) Number of pupils supplied with artificial dentures						11
(13) Other operations :—						
Permanent teeth	454
Temporary teeth	120
TOTAL						574



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JOHN JENNINGS (Gloucester) LTD.
Brunswick Road :: Gloucester
