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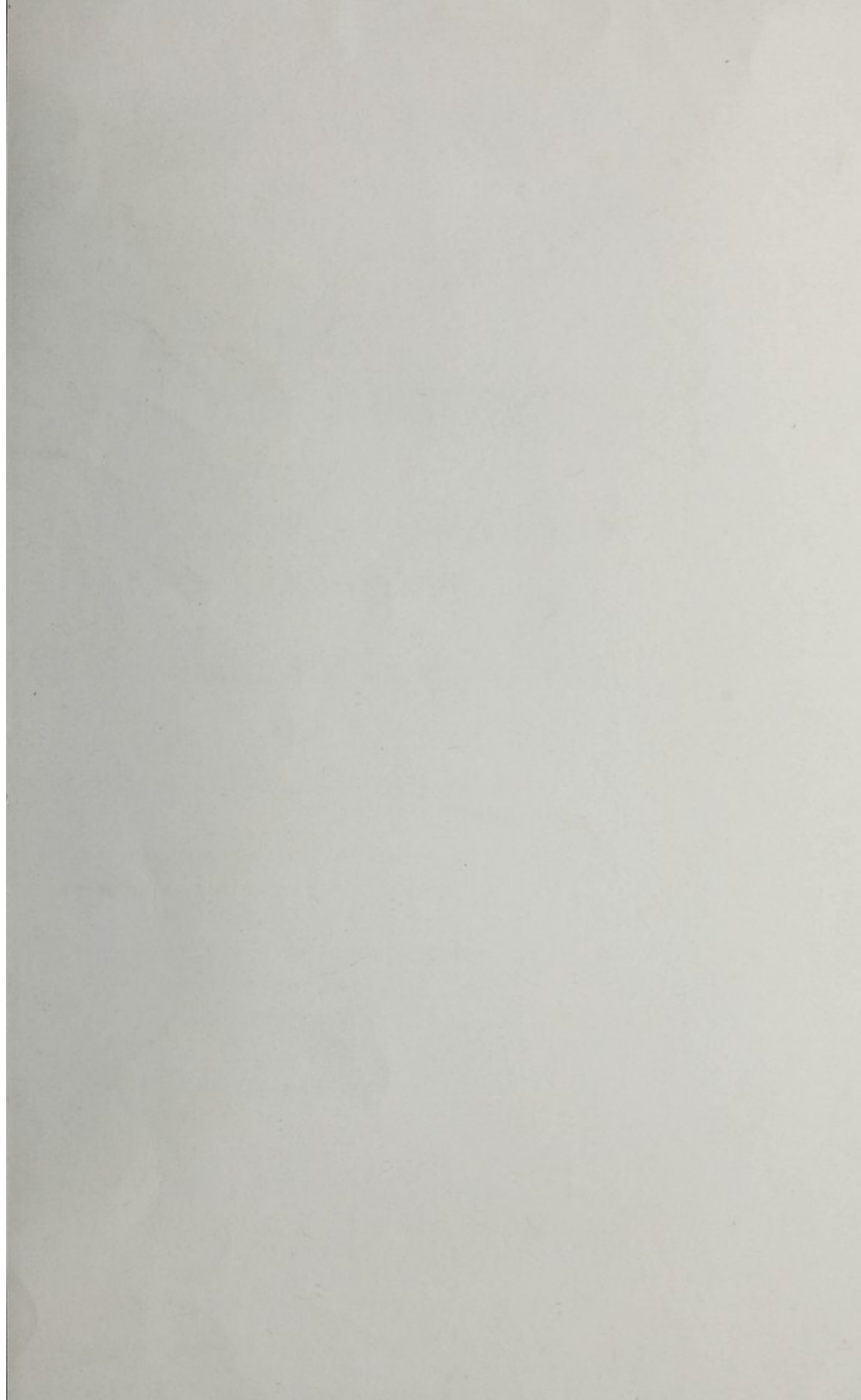
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THE  
**ANNUAL REPORT**  
ON THE  
HEALTH of the COUNTY BOROUGH  
and PORT OF GRIMSBY  
For the Year Ending 31st December, 1938,

BY

**JAMES A. KERR, B.Sc., M.D., D.P.H.**

Medical Officer of Health for the County Borough and Port of Grimsby.

Medical Officer to the Education, Public Assistance and  
Mental Deficiency Committees.

Medical Superintendent of the Corporation Hospitals,

Administrative Tuberculosis Officer

and School Medical Officer.

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GRIMSBY:

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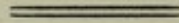
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## HEALTH COMMITTEE.

(56 members).

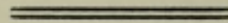


CHAIRMAN :—ALDERMAN C. E. FRANKLIN, J.P.

DEPUTY-CHAIRMAN :—COUNCILLOR A. CORDINER.

### SUB-COMMITTEES OF THE HEALTH COMMITTEE.

					<i>Chairman.</i>
Hospitals and Tuberculosis Joint	..				Alderman C. E. FRANKLIN, J.P.
Venereal Diseases	..	..	..		Councillor C. H. WILKINSON, J.P.
Port Health	..	..	..	..	Councillor C. CANNING.
Sanitary	..	..	..	..	Councillor J. W. LANCASTER.
Tuberculosis Care	..	..	..		Alderman C. E. FRANKLIN, J.P.
(with 16 co-opted members)					



### SPECIAL COMMITTEES.

Maternity and Child Welfare (22 members)	<i>Chairman</i> : Councillor W. HARRIS.
	<i>Deputy Chairman</i> : Mrs. C. A. MARKLEW.
(with 11 co-opted lady members).	
Care of Mental Defectives (18 members)	<i>Chairman</i> : Alderman J. H. TATE, J.P.
	<i>Deputy Chairman</i> : Councillor M. BLOOM.
(with 4 co-opted lady members).	



## LOCAL ACTS, ADOPTIVE ACTS, BYE-LAWS, AND LOCAL REGULATIONS IN FORCE IN THE BOROUGH.

### LOCAL ACTS.

- The Great Grimsby Improvement Act, 1853.
- The Grimsby Improvement Act, 1869.
- The Grimsby Extension and Improvement Act, 1889.
- The Grimsby Corporation Act, 1921.
- The Grimsby Corporation Act, 1927.
- The Grimsby Corporation (Dock, &c.) Act, 1929.
- The Grimsby Corporation Act, 1937.

### ADOPTIVE ACTS.

- The Public Health Acts Amendment Act, 1890.
- The Private Street Works Act, 1892.
- The Public Libraries Acts.
- The Public Health Acts Amendment Act, 1907. (Parts II., IV., VI. and X.)
- The Public Health Act, 1925—(Sections 13 to 33 and 35 of Part II.)
- Local Government and Other Officers Superannuation Act, 1922.

### BYE LAWS.

- Common Lodging Houses, 1892.
- Slaughterhouses, 1892.
- Offensive Trades, 1892.
- Public Bathing, 1892.
- Nuisances, 1892, 1898, 1901, and 1923.
- Houses-let-in-Lodgings, 1903.
- Water Closets—under Section 157 of P.H.A., 1875, and Section 23 of P.H.A.A.A., 1890.
- Section 23 of Municipal Corporations Act, 1882.
- New Streets and Buildings, 1925, and 1937.
- Premises where Food is prepared or cooked, 1926.
- Tents, Vans, Sheds and similar structures, 1926.
- Conduct of persons waiting in streets to enter public Vehicles, 1930.
- Smoke Abatement, 1936.
- Nursing Homes, 1938.
- Employment of Children and street trading by Young Persons, 1938.
- Seamen's Lodging Houses, 1938.

### LOCAL REGULATIONS.

- Grimsby Port Sanitary Authority Regulations.



# STAFF OF THE HEALTH DEPARTMENT.

The Staff of the Public Health Department on the 31st December, 1938, was as follows :—

## MEDICAL STAFF—(a) Whole-time :—

- J. A. KERR, B.Sc., M.D., D.P.H., *Medical Officer of Health, School Medical Officer, Medical Officer under the Mental Deficiency Acts and Medical Inspector of Aliens.*
- J. M. VINE, M.B., B.S., D.P.H., *Deputy Medical Officer of Health, Clinical Tuberculosis Officer and Medical Inspector of Aliens.*
- JANET W. HEPBURN, M.B., Ch.B., D.P.H., *Senior Assistant Medical Officer, Maternity and Child Welfare.*
- RACHEL HALPERIN, M.B., B.S., D.P.H., *Assistant Medical Officer, Maternity and Child Welfare, and Assistant School Medical Officer.*
- W. G. SOUTHEY, M.B., B.S., D.P.H., *Assistant School Medical Officer.*
- D. J. CAMPBELL, F.R.C.P.E., D.P.H., L.D.S., *Venereal Diseases Medical Officer.*
- R. W. B. GRIEG, M.B., Ch.B., *Resident Medical Officer, Corporation Hospital.*

## (b) Part-time :—

- S. W. SWINDELLS, M.B., Ch.B., *Medical Officer, Scartho Road Institution.*
- A. HARRIS, M.B., Ch.B., *District Medical Officer, No. 1 District.*
- F. E. HAMPTON, M.B., Ch.B., *District Medical Officer, No. 2 District.*
- J. COTTRELL, M.B., Ch.B., *Public Vaccinator.*
- C. L. GRANVILLE CHAPMAN, F.R.C.S.I., M.R.C.S., L.R.C.P., *Consulting Surgeon to the Corporation Hospital.*
- J. MACARTHUR, M.R.C.S., L.R.C.P., D.P.M., *Visiting Mental Specialist to the Mental Treatment Clinic.*
- J. W. BROWN, M.D., M.R.C.P., *Consulting Physician to the Corporation Hospital, and to the Scartho Road Institution.*
- W. GORDON DAVIDSON, M.B., Ch.B., D.O.M.S., *Consulting Ophthalmologist to the Maternity and Child Welfare Service and to the Scartho Road Institution.*
- R. GUY PULVERTAFT, M.A., M.B., F.R.C.S., M.R.C.S., L.R.C.P., *Consulting Orthopædic Surgeon to the Corporation Hospital and to Scartho Road Institution.*
- L. P. STEPHEN, M.A., M.B., Ch.B., F.R.C.S., D.P.H., *Consulting Surgeon to the Scartho Road Institution.*
- DRS. CHAPMAN, STEPHEN AND TURNER, *Consultants to the Maternity Home and also under the Puerperal Pyrexia Regulations.*



## DENTAL SURGEONS.—(a) Whole-time :—

L. N. ALLEY, L.D.S., *Senior Dental Officer*. (Appointed 6-1-1939).C. F. SALT, L.D.S., *School Dental Officer*.

## (b) Part-time :—

T. HALL FELTON, L.D.S., R.C.S., *Dental Surgeon to the Corporation Hospital*.

## ANALYTICAL.

J. A. FOSTER, F.I.C. (Hull), *Borough Analyst*.—Part-time.

## VETERINARY SURGEON.

A. J. HINES, M.R.C.V.S., *Borough Veterinary Inspector*.—Part-time.

## SANITARY INSPECTORS.

## BOROUGH :—

\*† J. G. WATSON, *Chief Sanitary Inspector for Borough and Port*.\*† H. PARKINSON, *Deputy Chief Sanitary Inspector*.\*† J. J. TURNER, *Assistant Sanitary Inspector*.

\*† W. A. CHIVERS, " "

\*†§ G. H. EARNshaw, " "

\*† A. D. S. BLACKHALL, " "

\*† H. CORMACK, " "

T. H. R. JOHNSON, *Disinfectors*.

## PORT :—

\*† A. MARTIN, *Senior Port Health Inspector*.\*† G. B. SEGROTT, *Assistant Port Health Inspector*.

\*† J. E. DOBSON, " " "

\* T. J. E. FORD, " " "

\* Holds Certificate of Royal San. Inst. as Inspector.

† Holds Certificate for Royal San. Inst. for Meat and other Foods.

§ Holds Certificate of Royal San. Inst. for Practical Sanitary Science

## HEALTH VISITORS.

Miss F. S. HIGLEY, *Superintendent*, 1, 2, 3.

Mrs. C. E. CHAPMAN, 1, 2.

Miss C. LANCEFIELD, 1, 2, 3.

Mrs. M. A. GREEN, 1, 2.

Miss I. SYLVESTER, 1, 2, 3.

Mrs. M. SHANNAN, 1, 2.

Mrs. B. SMITH, 1, 2, 3. Tuberculosis

Miss E. SPROSTON, 1, 2.

Health Visitor.

1. Certificate of Central Midwives Board.

2. General trained Nurse.

3. Health Visitors' Certificate of R.S.I.

## CLERICAL.

T. E. DAVIDSON, Chief Clerk.	Miss E. B. MASON (M. & C.W.).
R. TULLOCH.	Miss I. WROOT (M. & C.W.).
W. R. GALE.	Miss E. E. LUCAS (M. & C.W.).
A. MANSON.	Miss J. WADDINGHAM (M. & C.W.).
D. AMERY.	(Resigned 23-7-1938).
G. H. CHEFFINGS (Port).	Miss S. MILLER (M. & C.W.).
J. STAMP.	Miss M. BELL (M. & C. W.).
(Appointed 3-9-1938).	(Appointed 25-7-1938).

## MENTAL DEFICIENCY.

Miss E. M. WOULD, *Petition Officer and Mental Welfare Visitor.*  
 Miss G. LAWTEY, *Supervisor, Occupation Centre.*  
 Miss M. Rands, *Assistant Supervisor, Occupation Centre.*  
 Miss M. L. ATKINSON, *Assistant Supervisor, Occupation Centre.*  
 Miss G. CARRUTHERS, *Clerk.* (Appointed 10-10-1938).

## VACCINATION OFFICER.

E. BROWN (also acts as *Deputy Petition Officer for Mental Defectives*).

## V.D. CLINIC.

F. N. BULLOCK, *Laboratory Technician.* (Resigned 31-10-1938).  
 R. H. WELCH, " " (Appointed 21-11-1938).  
 H. THOMAS, *Orderly.*  
 Mrs. F. A. ROBSON, *Nurse.*

## MUNICIPAL MIDWIVES.

Miss F. BURTON, 1, 2. <i>Superintendent.</i>	
Miss L. S. Cameron, 1, 2.	Mrs. F. B. Steele, 1, 2.
Miss D. Campbell, 1.	Miss I. Taylor, 1, 2.
Miss D. Davy, 1, 2.	Mrs. A. Thacker, 1.
Miss P. E. Dorsey, 1, 2.	Miss K. E. Welton, 1.
Miss D. G. Inkpen, 1.	Mrs. N. Whiteley, 1, 2.
Miss E. Marshall, 1, 2.	Miss M. M. B. Williams, 1.
Miss M. Robinson, 1, 2.	Miss E. Wooller, 1, 2.
(Resigned 27-8-1938).	

1. State Certified Midwife.      2. State Registered Nurse.

## CORPORATION HOSPITAL.

Miss E. D. MACKENZIE, R.R.C., *Matron.*

## MUNICIPAL MATERNITY HOME.

Miss M. L. ARCHER, *Matron.*



*To the Chairman and Members of the Public Health, Maternity and Child Welfare  
and the Care of Mental Defectives Committees.*

LADIES AND GENTLEMEN,

I have the honour to submit my fifth Annual Report on the health services of this County Borough.

Although there is no reference in this report to the work of the department in relation to Civil Defence, a severe burden has been caused by the rapid expansion of this branch of work and a heavy drain on the resources of the department and its staff. From a modest commencement in April, 1937, when the first anti-gas instruction was given by the local authority under the auspices of this department the volume of work has grown so much as to occupy the major portion of the time of your Medical Officer of Health. The strain on the department has been exceptionally severe for the following reasons :—

(a) The social services, which have recently been much expanded, have had to be carried on without any modification whatsoever.

(b) During the year there has been a considerable burden of new legislation to assimilate and new schemes to initiate.

(c) During the year, for a variety of reasons, it was not possible to make any increase in the medical, technical and clerical staffs to cope with the additional work.

Had it not been for the kindness of the Health Committee in allowing the department to move to more suitable temporary offices the strain would have been intolerable.

The vital statistics for the year are satisfactory, the birth rate having risen to 17.4 as compared with 15.1 for the country as a whole. The death rate when adjusted according to age incidence was slightly above the average for the remainder of the country, but the infant mortality rate equalled the lowest on record and was 49 per 1,000 births, compared with 53 for England and Wales, and 57 for the large towns and county boroughs.

The incidence of diphtheria was slightly higher than in 1937, 119 cases having occurred during the year. The death rate from diphtheria in Sheffield was nearly twice that of Grimsby, while for Hull it was over four times the local rate. A few cases of the " Gravis " strain were detected, but it is interesting to know that they were of the Leeds and not of the Hull variety. The immunisation campaign continues to make progress, but not as rapidly as would be desired owing to the pressure of other work.

The most important epidemiological event during the year was a minor outbreak of poliomyelitis in August, there being 18 cases in the Borough and a similar number in the surrounding neighbourhood. This epidemic was unduly magnified in importance by certain sections of the national press.

In this introduction I would like to take the opportunity of referring to some special features during the year 1938 :—

(a) A great deal of work has been carried out in the detailed planning of the new municipal hospital, the keystone of the arch of the health services, and it is hoped that building will commence in the summer of 1939.

(b) The orthopaedic scheme has been in full operation and has overtaken most of the arrears at its initiation. Its scope was temporarily widened by the opening of Weelsby Old Hall to deal with convalescent cases following the poliomyelitis outbreak.



(c) The regional scheme for the treatment of cancer was temporarily held up to await legislation introduced by the Government in the autumn of the year.

(d) The municipal midwifery service had its first full working year and the local authority is now directly responsible for the administration and the nursing connected with over 75 per cent. of the births in the Borough. It was decided to close the headquarters temporarily instituted at No. 2 Manor Avenue at the end of the year.

(e) The porter's lodge and waiting room accommodation for visitors was completed and arrangements were made to deal with the heating system at the Corporation Hospital in a comprehensive manner by stages.

(f) The skeletal structure in relation to the medical aspect of Civil Defence was perfected during the year. The work of anti-gas instruction was transferred to the new A.R.P. department in October.

(g) Plans were approved for a new combined child welfare and dental clinic at Hope Street to replace the unsatisfactory premises at Hamilton Street and for a new occupation centre for mental defectives to be built at Nunsthorpe.

(h) Arrangements were made towards the end of the year with the Lindsey County Council for the joint appointment of an obstetric consultant.

(i) At the end of the year a senior dental officer was appointed and plans prepared for a complete overhaul of the dental services of the Corporation.

I should like to take this opportunity of expressing my deep appreciation of the whole-hearted enthusiasm of the voluntary workers at the child welfare centres and of the hundreds of volunteers who have come forward to assist the department in all branches of Civil Defence.

I will conclude by expressing my appreciation of the assistance given me when I took up duty in Grimsby by Aldermen Tate and Thornton who retired during the year. The efficiency of the health services is a testimony to the time and thought they have both devoted to this subject over a period of many years in both cases.

I should also like to place on record the help I received from Mr. John G. Watson, Chief Sanitary Inspector, who retired early in 1939, and to wish him a long and happy retirement.

I am, Ladies and Gentlemen,

Yours faithfully,

JAMES A. KERR,

Medical Officer of Health.

St. James' House,  
Bargate, Grimsby.

**SECTION A.**

## STATISTICS & SOCIAL CONDITIONS.



## SECTION A.—STATISTICS AND SOCIAL CONDITIONS.

## I.—GENERAL STATISTICS.

Area (in acres—excluding foreshore).....	5,468
Registrar-General's estimate of resident population, mid-1938 .....	92,320
Number of inhabited houses (end of 1938) according to Rate Books..	24,842
Rateable value .....	£526,050
Sum represented by a penny rate.....	£1,910

## 2.—EXTRACTS FROM VITAL STATISTICS OF THE YEAR.

Live Births :—	Males.	Females.	Total.	
Legitimate ..	756	761	1517	Birth Rate per 1,000 of the estimated resident population —17·4.
Illegitimate ..	44	52	96	
	<hr/> 800	<hr/> 813	<hr/> 1613	
Stillbirths .....	30	23	53	Rate per 1,000 total (live and still) births—31·8.
Deaths .....	562	492	1054	Death Rate per 1,000 of the estimated resident population —11·4.
Adjusted Death-rate (Areal Comparability Factor 1·07).....				12·2
Deaths from puerperal causes (Headings 29 and 30 of the Registrar-General's Short List) :—				

	Deaths.	Rate per 1,000 total (live and still) births.
No. 29. Puerperal sepsis .....	3	1·80
No. 30. Other Puerperal causes .....	7	4·20
Total .....	<hr/> 10	<hr/> 6·00

## Death Rate of Infants under one year of age :—

	Rate.
All infants per 1,000 live births .....	49
Legitimate infants per 1,000 legitimate live births .....	49
Illegitimate infants per 1,000 illegitimate live births .....	42

	Number.
Deaths from Cancer (all ages) .....	185
„ „ Measles (all ages) .....	6
„ „ Whooping Cough (all ages) ..	3
„ „ Diarrhoea (under 2 years of age) .....	10



The town continues to shew some degree of expansion although the building boom has come to an end. According to the rate-books there were at the end of the year 24,842 inhabited houses, which is 179 more than last year. It must be remembered that this figure is arrived at despite the extensive slum clearance demolition carried out.

Social  
Conditions.

The Manager of the Employment Exchange has kindly furnished particulars regarding the number of unemployed persons in Grimsby :—

Total live register in January, 1938 (including temporarily stopped claimants) : males 6101 ; females 1090 7191

Total live register in July, 1938 (including temporarily stopped claimants) : males 5127 ; females 579 .. 5706

Total live register in December, 1938 (including temporarily stopped claimants) : males 5351 ; females 904 .. 6255

These figures unfortunately continue to shew an increase compared with the previous year, particularly in January and towards the end of the year. In last year's report mention was made of the large number of men who in 1937 secured employment in other districts. The number is much less this year, 80 adults and 160 juveniles having been placed in permanent employment in other areas by the Ministry of Labour. This does not include those who have been given permanent employment in the neighbourhood outside the borough but retain their homes in Grimsby.

There will be a diminution in the amount of juvenile employment in the autumn of 1939 as the number of children likely to secure exemption from school attendance owing to beneficial employment is not expected to be high.

Despite the somewhat gloomy picture painted of Grimsby's principle industry the amount of fish landed in 1938 was 4,316,074 cwts. and yielded £4,252,252 as compared with 3,930,835 cwts. and £3,994,323 the previous year. One source of unemployment in the dock area was the falling off of the importation of timber, the amount being about half that imported in the previous year. In conclusion there is very little change in the economic picture of Grimsby as painted in last year's report because the town has not absorbed much of the work in regard to re-armament.

There were no marked epidemics of infectious disease during the year except a mild outbreak of poliomyelitis with 18 cases during the summer, and there is no evidence that unemployment has exercised any significant influence on the health or physique of children or adults.

The Registrar-General's estimate of the mid-year population of Grimsby for 1938 is 92,320, a decrease of four hundred and forty on his estimate for the previous year.

Population.



This is the third successive occasion on which a decrease has been estimated by the Registrar-General.

The natural increase of the population, *i.e.* the excess of births over deaths for the year was 559.

#### Births.

A total of 1,613 live births (800 males and 813 females) were registered, giving a birth-rate of 17·4 per thousand of the estimated resident population, compared with 15·1 for England and Wales.

This compares favourably with the rate of 16·3 recorded in 1937 and is still well above the average for the country as a whole. For comparison it might be mentioned that the figure for Middlesbrough is 19·7, for Hull 18·1, for Doncaster 13·6, and for Lincoln 13·4.

Ninety-six (5·9 per cent.) of the births were born out of wedlock. This continues to be about 50 per cent. above the average for the country as a whole.

The number of the sexes was about the same, there being 13 more females born than males.

Table showing the birth-rate recorded in the Borough for the last 10 years, along with the corresponding rate for England and Wales :—

Year.	Number of Births.	Rate.	Birth Rate. England & Wales.
1929	1673	18·2	16·3
1930	1745	19·0	16·3
1931	1650	17·8	15·8
1932	1652	17·9	15·3
1933	1671	17·9	14·4
1934	1738	18·5	14·8
1935	1621	17·2	14·7
1936	1677	17·9	14·8
1937	1516	16·3	14·9
1938	1613	17·4	15·1

#### Stillbirths.

There were 53 stillbirths registered, giving a rate of 0·57 per thousand population as compared with 0·60 for England and Wales. The rate expressed per thousand total births (live and still) was 31·8.

#### Deaths.

There have been 1,141 deaths registered as having occurred during the year within the Borough. Of this number 116 were deaths of non-residents; these have been referred to the districts in which the persons ordinarily resided. There were 29 deaths of residents which occurred in other parts of England and Wales and these have to be added to the above number.



The actual number of deaths, therefore, which has to be recorded in calculating the death-rate is 1,054. This gives a death-rate of 11·4 per thousand of the population, as compared with 11·5 in 1937.

The adjusted death-rate for Grimsby (calculated by multiplying the crude rate by the Registrar-General's comparability factor of 1·07) was 12·2, which is slightly above the adjusted figure for England and Wales.

There were three uncertified deaths during the year.

The appended statement shews the death-rate for the last ten years, compared with that for England and Wales:—

Year.	Nett Deaths.	GRIMSBY.		England and Wales Death Rate.
		Crude Death Rate.	Adjusted Death Rate.	
1929	1273	13·9	14·8	13·4
1930	1100	12·0	12·8	11·4
1931	1110	12·0	12·8	12·3
1932	1158	12·5	13·3	12·0
1933	1160	12·4	13·2	12·3
1934	1039	11·0	11·8	11·8
1935	1114	11·8	12·6	11·7
1936	1078	11·5	12·3	12·1
1937	1067	11·5	12·3	12·4
1938	1054	11·4	12·2	11·6

There were 79 deaths of infants under one year of age, giving an infantile mortality rate of 49, compared with 53 for England and Wales and 57 for the 126 great towns and county boroughs. Infantile Mortality.

This rate equals the lowest record for Grimsby ever previously attained which occurred in 1934. Of the total infant deaths 45, or considerably more than half, took place within four weeks of birth.

(For further information see *Maternity and Child Welfare*, page 38).

The following table gives the rate of infantile mortality over a series of years, and the corresponding rate for England and Wales :—

Year.	No. of Deaths.	GRIMSBY.		Rate per 1,000 Live Births England and Wales.
		Rate per 1,000 of Population.	Rate per 1,000 Live Births.	
1911	328	4.37	154	130
1912	217	2.84	104	95
1913	240	3.09	114	109
1914	278	3.54	131	105
1915	210	2.91	106	110
1916	189	2.59	99	91
1917	158	2.16	103	97
1918	207	2.83	129	97
1919	143	1.83	80	89
1920	216	2.63	90	80
1921	222	2.69	102	83
1922	187	2.26	93	77
1923	153	1.80	78	69
1924	183	2.13	99	75
1925	127	1.46	71	75
1926	157	1.80	90	70
1927	109	1.23	66	69
1928	132	1.46	77	65
1929	148	1.61	88	74
1930	129	1.41	74	60
1931	100	1.08	61	66
1932	111	1.20	67	65
1933	114	1.22	68	64
1934	86	0.91	49	59
1935	102	1.08	63	57
1936	113	1.20	67	59
1937	86	0.92	57	58
1938	79	0.85	49	53



Deaths of persons who have attained the age of seventy years and over are included under this head. Old Age  
Death Rate.

During the year 405 persons died at ages varying from 70 to 95, the numbers at age periods being :—

Between 70 and under 75 years	..	..	126
„ 75 and under 80 years	..	..	144
„ 80 and under 85 years	..	..	83
„ 85 and under 90 years	..	..	41

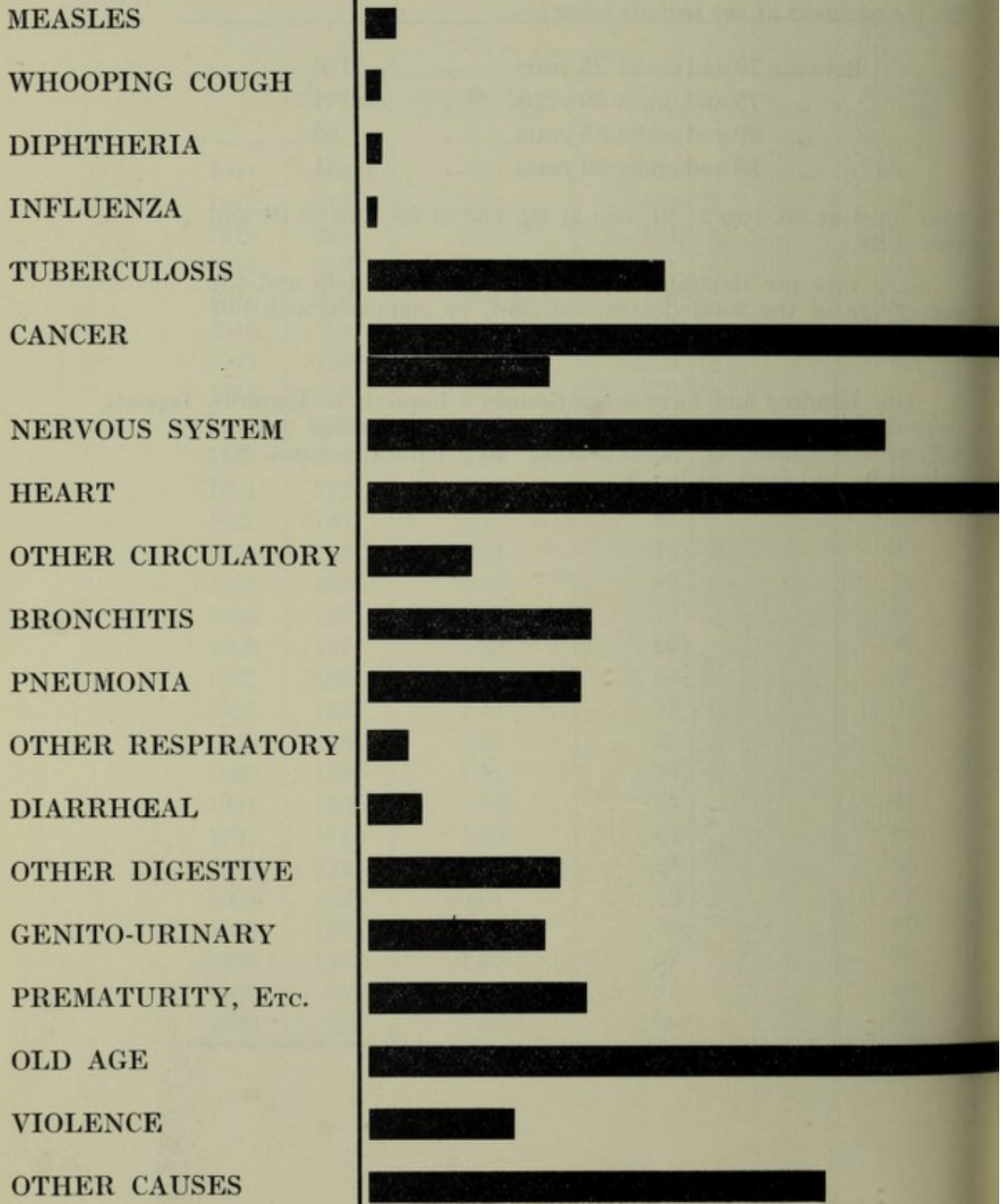
also three at 90, two at 91, one at 92, one at 93, two at 94 and two at 95.

The rate per thousand of the population was 4.38 and the percentage of the total deaths was 38.4, as compared with 4.07 and 35.4 respectively the previous year.

One hundred and forty-seven Coroner's Inquests or Inquiries were held as compared with 114 last year; the findings were as follows :—Accident or misadventure 40; natural causes 93; suicide 9; and open verdict 5. Inquests.

**RELATIVE MORTALITY FROM CERTAIN CAUSES.**

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SECTION A. GENERAL PROVISION OF HEALTH SERVICES.

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SECTION B.

GENERAL PROVISION OF  
HEALTH SERVICES.

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## SECTION B.—GENERAL PROVISION OF HEALTH SERVICES.

### Public Health Officers.

A list of the officers of the Public Health Department is given on pages 8, 9 and 10.

Mr. F. N. Bullock, laboratory technician, resigned during the year to take a similar appointment with the Kent County Council, and was succeeded by Mr. R. H. Welch.

Miss M. Robinson, municipal midwife, resigned on being appointed superintendent midwife at Middlesbrough. This vacancy was not filled. Miss D. Campbell, a municipal midwife, was transferred to the staff of the Municipal Maternity Home.

On the clerical side Miss Bell took the place of Miss Waddingham, resigned, and Mr. J. Stamp was added to the staff.

Towards the end of the year Mr. L. N. Alley was appointed to the position of senior dental officer.

### Laboratory Facilities.

No change has been made in the facilities for the examination of clinical material (sputum, swabs, etc.), water and milk. (*See page 22 of 1936 report.*)

The V.B. Laboratory carried out 3,040 microscopical tests and 6,188 serum tests: of these 1,744 and 3,285 respectively related to persons residing in Grimsby. The work has much increased during the past year, the figures for 1937 being 2,175 microscopical tests and 5,241 serum tests.

### Ambulance Facilities.

The ambulance facilities are as outlined on page 22 of the 1936 report. The ambulance service for the area continues to be adequate, and satisfactory arrangements are made for co-ordination. A further step will be made in this respect when the regional cancer scheme comes into operation.

### Nursing in the Home.

GENERAL.—The Queen's Nurses of the Grimsby and District Nursing Institution continue to do good work for the local authority and receive an annual grant of £175 for this purpose. They also receive a substantial annual donation from the Public Assistance Committee.

INFECTIOUS DISEASES.—Under the above arrangement the Queen's Nurses attend cases of ophthalmia neonatorum and special cases of measles, whooping cough, etc. recommended by the Medical Officer of Health, and they are also available for the nursing of puerperal cases.

A summary of the work carried out by the staff of the Grimsby and District Nursing Institution is set out below:—

<i>Mothers.</i>	<i>Cases.</i>	<i>Visits.</i>
Maternity .. .. .	23	249
Ante-natal .. .. .	12	151
Post-natal .. .. .	24	773

				Cases.	Visits.
Gynæcological	..	..	..	17	633
Puerperal pyrexia	..	..	..	19	350
General	..	..	..	184	2650

*Children under 5 years of age.*

Medical	..	..	..	159	2228
Surgical	..	..	..	62	722
Discharging eyes	..	..	..	59	1200
				<hr/> 559	<hr/> 8956

The Clinics and Treatment Centres provided by the Local Authority and Education Authority in the Borough are as follows:—

Clinics and  
Treatment  
Centres.

MATERNITY AND CHILD WELFARE.

INFANT WELFARE CENTRES.

Second Avenue, Nunsthorpe	Monday .. ..	9-30 a.m. and 2 p.m.
Hamilton Street	Tuesday and Thursday..	2 p.m.
Watkin Street (Tel. No. 4564)	Tuesday and Thursday..	2 p.m.
Church Hall, Old Clew	Friday .. ..	2 p.m.

ANTE-NATAL CLINICS.

Municipal Maternity Home, Nunsthorpe (Tel. No. 7222)	Monday .. ..	9-30 a.m.
(Maternity Home cases only)	Wednesday .. ..	2 p.m.
Watkin Street (Tel. No. 4564)	Monday and Friday ..	2 p.m.

POST-NATAL CLINICS.

Municipal Maternity Home Nunsthorpe (Tel. No. 7222)	Monday .. ..	10-30 a.m.
(Maternity Home cases only)		
Watkin Street	Saturday.. ..	9-30 a.m.

TODDLERS' CLINICS.

Second Avenue, Nunsthorpe	Monday .. ..	9-30 a.m.
Hamilton Street	Friday .. ..	9-30 a.m.
Church Hall, Old Clew	Friday .. ..	2 p.m.
Watkin Street	Friday .. ..	9-30 a.m.

ULTRA-VIOLET RADIATION CLINICS.

Hamilton Street	Monday .. ..	9-30 a.m.
	Wednesday .. ..	10-30 a.m.
	Friday .. ..	2 p.m.

BREAST FEEDING CLINICS.

Second Avenue, Nunsthorpe	Tuesday .. ..	9 a.m.
Hamilton Street	Wednesday .. ..	9 a.m.
Watkin Street (Tel. No. 4564)	Wednesday .. ..	9 a.m.

DENTAL CLINICS.

Hamilton Street	Thursday .. ..	2 p.m.
Watkin Street	Friday .. ..	2 p.m.

DIPHTHERIA IMMUNISATION CLINIC.

Watkin Street (Tel. No. 4564)	Wednesday (fortnightly)	2-30 p.m.
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## SCHOOL MEDICAL SERVICE.

SCHOOL CLINIC.			
Municipal Hall, Burgess Street	Daily (except Saturdays)	9 a.m.	
EYE CLINIC.			
Municipal Hall, Burgess Street	Tuesday (by appointment only)	2 p.m.	
	Fridays (alternate)	2 p.m.	
SPECIAL INVESTIGATION CLINIC.			
Municipal Hall, Burgess Street	Fridays (alternate)	.. ..	2 p.m.
RHEUMATIC AND HEART CLINIC.			
Municipal Hall, Burgess Street	Wednesdays (alternate)	By appointment only.	
DENTAL CLINICS.			
Hamilton Street	Daily (except Saturdays)	By appointment only.	
Watkin Street	Daily (except Saturdays)	By appointment only.	

## ANTI-TUBERCULOSIS SERVICE.

DISPENSARY.			
Municipal Hall, Burgess Street	Tuesday (men only)	.. ..	2 p.m.
(Tel. No. 4867)	Wednesday (women only)	.. ..	2 p.m.
	Wednesday (men and women)		5-30 p.m.
	Thursday (children)	.. ..	2 p.m.
ARTIFICIAL PNEUMOTHORAX CLINIC.			
Municipal Hall, Burgess Street	Monday .. ..	.. ..	11 a.m.
ULTRA-VIOLET RADIATION CLINIC.			
Municipal Hall, Burgess Street	Monday, Wednesday and Friday		9 a.m.

## VENEREAL DISEASES.

CLINIC, 38 QUEEN STREET			
(Tel. No. 4754)	Monday (men)	.. ..	4-30 p.m.
	Monday (women)	.. ..	2 p.m.
	Tuesday (women)	.. ..	4-30 p.m.
	Wednesday (men)	.. ..	4-30 p.m.
	Wednesday (women)	.. ..	2 p.m.
	Thursday (men)	.. ..	1-30 p.m.
	Thursday (women)	.. ..	10 a.m.
	Friday (men)	.. ..	4-30 p.m.

## OTHER SERVICES.

ORTHOPÆDIC CLINIC.			
Grimsby & District Hospital	Thursdays (by appointment only)	9-30 a.m.	
(Tel. No. 5051)			
MENTAL CLINIC.			
Grimsby & District Hospital	Monthly, as required (by appointment only).		
(Tel. No. 5051)			
OCCUPATION CENTRE.			
Stortford Street	Daily (except Saturday).		

Hospitals. GRIMSBY AND DISTRICT HOSPITAL.—I am indebted to Mr. H. B. Coates, the Secretary-Superintendent, for the following notes and statistics in regard to this Voluntary Hospital :—

The full accommodation at the Hospital of 164 beds has been available throughout the year. In addition, on 14th October,



25 beds were equipped at Weelsby Old Hall Annexe for poliomyelitis cases. The total bed complement at the Hospital is now 189, as follows :—

Male	Surgical	..	..	..	55
Female	Surgical	..	..	..	42
Male	Medical	..	..	..	20
Female	Medical	..	..	..	20
Children	Surgical and Medical	..	..	..	15
Pay Bed Wards	Medical or Surgical	..	..	..	9
Isolation Wards	Medical or Surgical	..	..	..	3
Weelsby Old Hall Annexe	Orthopædic				25
					<hr/> 189 <hr/>

*Tonsils and Adenoids.*—The following cases have been dealt with under the joint scheme :—

	1938.	1937.
Total number of cases in the borough .. ..	218	236
Cases under school age residing in the borough ..	41	46
Cases of school age residing in the borough ..	177	190

The majority of these cases now remain in hospital for the night before and the night after operation.

*Blood transfusion service.*—This service has been continued on the lines indicated in last year's report, but the response has not been good, and will have to be much augmented in the event of a national emergency.

The number of available members was 61 and six new volunteers were enrolled during the year. Twenty-nine transfusions were carried out as compared with 10 the previous year. The transfusions took place at the following institutions :—Grimsby and District Hospital 16, Corporation Hospital 5, Municipal Maternity Home 4 and Scartho Road Institution 4.

*Out-patient department.*—On account of the increased number of clinics there is a serious lack of accommodation in this department. 17,300 square yards of the recreation ground adjoining the hospital has been generously conveyed to the Hospital Committee by the Grimsby Town Council, and plans are being prepared for a new out-patients department.

*Orthopædic scheme.*—As a justification for the inauguration of the fracture and orthopædic scheme it is noted that in one year's work 1,753 new cases were seen in the department, and these cases made 7,379 attendances. Of these numbers 88 new patients were seen at the request of the Grimsby Corporation.

Weelsby Old Hall was specially equipped at a cost of £1,039 to take the orthopædic cases from the Corporation Hospital following the outbreak of poliomyelitis, and temporary approval as a special school for this annexe was granted by the Board of Education for a period of six months.



The out-patient department has been approved by the Ministry of Health for the treatment and investigation of cases suffering from surgical tuberculosis.

On account of the increased work in the orthopædic and fracture department it has been found necessary to appoint an additional resident officer, and a resident fracture and orthopædic house surgeon has been appointed. This addition to the resident medical staff has meant structural extensions in the resident officers' quarters.

*Convalescent Fund.*—Full use has been made from the income derived from the King Edward VII. Memorial Convalescent Fund, and 13 patients have been sent to various convalescent Homes under the auspices of this Fund, 1 of which has been sent as a direct recommendation from the Maternity and Child Welfare Committee of the Corporation.

As it was found necessary to close down arrangements at Wragby for convalescent children, it is regretted that there are now no facilities for such cases. There is an urgent need for a recovery home where children could be sent for some treatment and building up, and also where adult patients who are not fit to go to the normal convalescent homes may be sent and receive small dressings or some treatment.

*Nursing.*—The hours of duty for probationer nurses have been reduced to 53 hours per week, and those for sisters and staff nurses to slightly under that figure. It is proposed to still further reduce these hours when more candidates for the nursing profession are available. Candidates aged 17 are now accepted as trainee probationers in the various ancillary departments.

*Equipment.*—The X-ray department has been entirely re-equipped at a cost of £4,000 donated from the Grimsby Fishermen's Widows and Orphans Fund Benevolent Society.

An oxygen tent was provided by the benevolence of a social effort committee at Old Clee, and it is hoped to receive from Lord Nuffield in due course a Both respirator.

*Cancer scheme.*—It is anticipated that the hospital will be an approved centre for the treatment of cancer, and it is expected that immediate structural alterations will have to be made as soon as the Government's Cancer Bill is published.

The following are a few of the more striking figures taken from the comparative statement of admissions and attendances supplied by courtesy of the Secretary-Superintendent :—

The number of patients admitted during the year was 2,887, an increase of 334 over the previous year.

The number of major operations was 1,951, an increase of 401 over the previous year; and the number of minor operations (excluding tonsils and adenoids) was 2,381, an increase of 750.



In the out-patient department the total number of new out-patients was 10,763, an increase of 1,544 for the year.

The ophthalmic and orthopædic out-patient clinics also continued to shew a marked expansion in numbers, whilst the number of X-ray skiagraphs was 14,396—an increase of 2,593.

The work of the electrical and massage department was much extended due to the expansion at Weelsby Old Hall, and the pathological department shewed a marked increase, there being 5,226 specimens dealt with, an increase of 1,733. Of that increase over 60 per cent. was from sources outside the hospital, and a large share in this percentage may be put down to the activities of the Grimsby Corporation.

In conclusion the year 1938 may be set down as a very successful period of expansion by the Grimsby and District Hospital. As far as Grimsby residents were concerned the number of in-patients was 1,932 and the number of new out-patients and casualties was 8,565.

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In addition to the above 256 Grimsby residents availed themselves of the facilities offered at the HULL ROYAL INFIRMARY 115 in-patients and 141 out-patients. The approximate number of out-patient attendances was 564.

**GRIMSBY CORPORATION HOSPITAL.**—This hospital consists of 76 beds for infectious diseases and 98 beds for pulmonary and surgical tuberculosis. The latter beds are augmented in the summer months by four huts.

During the year a porter's lodge and additional waiting room accommodation for the relatives of patients was completed; and a scheme to supply a new boiler-house, to overhaul the entire heating system and to provide adequate water storage was approved by the Council. The latter scheme is to be carried out in stages in three years. At the end of the year the provision of a dining room for the tuberculosis patients was under consideration.

In the early part of the year very severe pressure was placed on the infectious diseases side of the hospital by the admission of a large number of cases from outside areas, and in the autumn this pressure was continued by the presence of the cases of poliomyelitis from Grimsby and the district.

**LACEBY HOSPITAL.**—This small hospital of 20 beds has been kept in a good state of repair and in a fit state to admit small-pox cases, if the need arose, at a few hours notice.

During the summer this hospital was used as a summer camp for the children attending the Occupation Centre.

**MUNICIPAL MATERNITY HOME.**—This Home of 38 beds was fairly well utilised during the year, and in it there were 462 births.



SCARTH ROAD INSTITUTION.—This institution continues to do useful work under great difficulties, with an inadequate staff and overcrowded buildings. It is not possible to provide facilities for adequate classification of the patients in the Infirmary by adaptation of the present buildings. The degree of overcrowding in this Institution is at times very marked, patients during rush periods having occasionally to be placed on the floors, and patients suffering from various types of illness having to be placed together in the one ward. It is also most unsatisfactory that nursing staff should be forced to live in temporary quarters, and that each nurse should not have a bedroom of her own.

The work in connection with the new municipal hospital proceeds apace, and it is hoped to let the contract in the spring of 1939.

Despite the representations of the Ministry of Health, the General Nursing Council and the Medical Officer of Health this training school for nurses still continues to lack a resident medical officer.

The following statistics relating to in-patients are taken from the annual return of the Medical Officer, Dr. S. W. Swindells, for the year 1938 :—

1.	Total number of admissions (including infants born in hospital)	..	..	..	..	..	1240
2.	Number of women confined in hospital	..	..	..	..	..	11
3.	Number of live births	..	..	..	..	..	11
4.	Number of still births	..	..	..	..	..	Nil.
5.	Number of deaths among the newly-born ( <i>i.e.</i> , under four weeks of age)	..	..	..	..	..	1
6.	Total number of deaths among children under one year (including those given under item 5)	..	..	..	..	..	21
7.	Number of maternal deaths among women admitted to hospital for confinement	..	..	..	..	..	1
8.	Total number of deaths	..	..	..	..	..	248
9.	Total number of discharges (including infants born in Hospital)	..	..	..	..	..	989
10.	Duration of stay of patients included in 8 and 9 above. Number of cases whose total stay was for the following periods :—						
	(a) Under four weeks	..	..	..	..	..	774
	(b) Four weeks and under thirteen weeks	..	..	..	..	..	288
	(c) Thirteen weeks or more	..	..	..	..	..	175
11.	Number of beds occupied :—						
	(a) Average during the year	..	..	..	..	..	216
	(b) Highest—on 16th May	..	..	..	..	..	232
	(c) Lowest—on 3rd October	..	..	..	..	..	194
12.	Number of surgical operations under general anæsthetic (excluding dental operations)	..	..	..	..	..	227
13.	Number of abdominal sections	..	..	..	..	..	127



The degree of overcrowding remains much the same as last year, but this hospital is shewing a gradually increasing amount of acute work. The number of cases admitted increased by nearly 200 and it will be noted that the number of cases whose stay in hospital was less than four weeks increased by nearly 300. There is thus a continuously increasing number of short stay cases.

All maternity cases are now excluded from the institution. It may be necessary in certain circumstances to admit them for a period to the institution, but they are now transferred to the municipal maternity home when their confinement is pending. Clean abortions and miscarriages are, however, admitted to the institution, and those in which there is any suspicion of sepsis are sent to the Corporation Hospital.

A number of mental defectives in the institution have been moved to various institutions in the neighbourhood specially erected for that purpose.

**No. 1 MEDICAL RELIEF DISTRICT.**

District Medical Officer—Dr. A. Harris, 20 Dudley Street.

Estimated Population—41,620.

Poor Law  
Medical  
Relief.

**No. 2 MEDICAL RELIEF DISTRICT.**

District Medical Officer—Dr. F. E. Hampton, 344 Cleethorpe Road.

Estimated Population—50,700.

There has not been any change in the nature of the work of the district medical officers since the transfer of the duties of the Poor Law Authority to the County Borough.

The number of attendances on persons in receipt of medical relief during the year ended the 31st December, 1938, was

	At Surgery.	At house of patient.	Medicine supplied without seeing patient.	No. of Maternity cases.
No. 1 Medical Relief				
District .. ..	1522	1835	899	1
No. 2 Medical Relief				
District .. ..	1720	1308	45	Nil

Owing to the degree of unemployment there has been a slow and steady increase in the work carried out by the District Medical Officers.

The slow and steady increase of the work of the district medical officers has been more than maintained during the year under review.

The "open-choice" system of medical relief has not been introduced into the borough, and none of the poor law medical out-relief is carried out by full-time medical officers of the local authority.



The development of this branch of the health services has continued during the year. The arrangements for ascertainment, having been consolidated, now appear to be on a satisfactory basis. As the department has become more generally known to the public cases are referred from more varied sources than formerly.

The number of new cases referred during the year was 70. The police and the magistrates have co-operated very closely with the department throughout the year; also, more parents and relatives apply for advice in difficult cases. Close co-operation has been maintained with the Unemployment Assistance Board, through whose activities a number of cases incapable of independent economic existence have been brought to light.

The return of cases, including the new cases referred to above, for which the department has been responsible during the year was as follows :—

In Certified Institutions on 1/1/1938	..	..	..	81
Sent to Institutions during year	..	..	..	29-110
In Public Assistance Institution	..	..	..	47
On Licence from Institutions	..	..	..	4
Under Guardianship	..	..	..	16
Under Statutory Supervision	..	..	..	82
Under Voluntary Supervision	..	..	..	121
Action incomplete on 31/12/1938	..	..	..	67
				<hr/> 447
Died during year	..	..	..	2
Withdrawn or removed from area	..	..	..	19
				<hr/> 426

The greater part of the beds available for this local authority are at Harmston Hall Colony. Of the new beds available during the year 26 only remained unfilled on 31st December, 1938. A proportion of cases were transferred from Bracebridge and Scartho Road Institution to relieve the strain on the accommodation at these places, but a number are still awaiting removal for which other accommodation will have to be found.

The 13 cases under guardianship at the beginning of the year are now increased to 16. 5 new cases were placed under guardianship but two of the original cases have now had to be transferred to Institutions. Conditions in most of the homes are considered satisfactory and although one home is far from desirable, some improvement has been effected during the year. Visitation is the duty of the petition officer.

Supervision of defectives living in their own homes has been carried on during the year so far as conditions permit. A few of the higher grade patients are in work, but the majority are occupied about the house during the day.



*Occupation Centres and Home Training.*—The Occupation Centre continues its valuable work. 30 children have been in attendance at the centre during the year, including 4 children admitted during the year. This number has now been reduced to 25 since two patients have left the district and been referred to another authority; one has married; one been admitted to an Institution, and one proved unsuitable for the centre.

New courses in speech training and remedial exercises have been added to the time-table with beneficial results to the children. The summer camp was held for three weeks in June and proved of great benefit. Two children from Cleethorpes continue in attendance at the centre, the Lindsey County Council contributing a fixed sum for each child.

With regard to home teaching a private bus is chartered for children attending the centre, who are collected and returned to their own homes by this means each day. Any child capable of benefiting can, therefore, attend the centre at which an adequate staff is available to deal with the children attending.

It has been recognised that the present premises are most unsatisfactory and plans for a new building have been approved by the Board. It is hoped that building operations will commence shortly.

*Licence, Discharge and After Care.*—5 patients were on Licence during the year, but in one instance Licence was cancelled in December, the patient being returned to the Institution. The remaining 4 were still on Licence at the end of the year. No patients were discharged during 1938.

The special clinic under the Mental Treatment Act, 1930, has continued during the year under Dr. Macarthur, Medical Superintendent of Bracebridge Mental Hospital, Lincoln, at the Grimsby and District Hospital. Mental  
Treatment  
Act, 1930.

Private practitioners continue to take advantage of the Clinic, referring to it such of their patients as are in need of specialised advice and treatment, and cases presenting a variety of problems have also been referred by the Health Department. The Clinic continues to do valuable work.

The Secretary-Superintendent's figures for cases seen this year are 31 as compared with 11 in the previous year.

#### MATERNITY AND CHILD WELFARE.

I am indebted to Dr. J. W. Hepburn, Senior Assistant Medical Officer for Maternity and Child Welfare, for supplying the following report :—

In spite of the fact that throughout 1938, there was one less than the full complement of health visitors the amount of health visiting was on the whole well maintained, owing to the fact that

Health  
Visiting.



more time was available for district work following the taking over of ante-natal clinics by municipal midwives.

	1938.	1937.	1936.	1935.
A. First visits, under 1 year	1564	1470	1638	1426
B. Subsequent visits				
under 1 year	10090	11661	11941	8280
C. Visits, 1—5 years	13181	13775	14791	12347

There was an increased birth rate during 1938, thus accounting for the increased number of first visits made. The total number of home visits made by the health visitors during 1938 was 26,926 as compared with 29,568 in 1937.

Miss I. V. Brigham left this area on 31st December to take up health visiting duties in Manchester, and Miss F. Higley commenced duties here as Superintendent Health Visitor on 1st January, 1938.

#### Midwives.

Of the 38 midwives who notified their intention to practice, 27 were employed by the Local Authority, 7 in the Municipal Maternity Home, 6 in Scartho Road Infirmary, and 14 in the Municipal Midwifery Service.

1,632 confinements were attended by midwives, 495 as maternity nurses and 1,137 as midwives. A complete report of the actual distribution of the confinements in the area will be seen in *Table M. & C.W. 6*.

1,131 of these confinements took place in the patients' own home, the remaining 501 occurring in institutions. In no case did a handy-woman attend a confinement.

Medical Aid was summoned by district midwives in 295 cases and by midwives at the Municipal Maternity Home in 132 cases, 37.6% of the total cases by midwives as midwives had medical aid called in. The nature of emergencies is seen in the following table.

(a) ANTE-NATAL	..	..	31					
Ante-partum hæmorrhage	..	..	..	..	..	..	..	4
Anæmia	..	..	..	..	..	..	..	1
Albuminuria	..	..	..	..	..	..	..	11
Contracted pelvis	..	..	..	..	..	..	..	2
Hydramnios	..	..	..	..	..	..	..	2
Malnutrition	..	..	..	..	..	..	..	2
Pyelitis	..	..	..	..	..	..	..	1
Rash	..	..	..	..	..	..	..	1
Threatened miscarriage	..	..	..	..	..	..	..	5
Varices	..	..	..	..	..	..	..	1
V. D. H.	..	..	..	..	..	..	..	1
(b) IN LABOUR	..	..	167					
Abnormal presentation (including hand presentation 2, Breech 2, P.O.P. 1)	..	..	..	..	..	..	..	6
Abortion	..	..	..	..	..	..	..	1



Ante-partum hæmorrhage (including Placenta prævia, 4)							15
Cardiac distress	..	..	..	..	..	..	1
Collapse	..	..	..	..	..	..	5
Fœtal distress	..	..	..	..	..	..	1
Miscarriage	..	..	..	..	..	..	5
Obstructed labour (including rigid cervix, 4)	..	..	..	..	..	..	9
Prolonged labour (including uterine inertia, 9)	..	..	..	..	..	..	22
Post-partum hæmorrhage	..	..	..	..	..	..	5
Retained membranes	..	..	..	..	..	..	2
Retained placenta	..	..	..	..	..	..	4
Ruptured perineum	..	..	..	..	..	..	91
(c) PUERPERIUM ..							37
Abscess of vulva	..	..	..	..	..	..	1
Anæmia	..	..	..	..	..	..	1
Cervical adenitis	..	..	..	..	..	..	1
Jaundice	..	..	..	..	..	..	1
Mastitis	..	..	..	..	..	..	3
Offensive lochia	..	..	..	..	..	..	2
Pleurisy	..	..	..	..	..	..	3
Pyrexia	..	..	..	..	..	..	17
Thrombo-phlebitis	..	..	..	..	..	..	6
Unsatisfactory condition of mother	..	..	..	..	..	..	2
(d) INFANT..							60
Asphyxia	..	..	..	..	..	..	3
Collapse	..	..	..	..	..	..	1
Cold	..	..	..	..	..	..	1
Convulsions	..	..	..	..	..	..	1
Dangerous feebleness (including prematurity, 2)	..	..	..	..	..	..	16
Discharging eyes	..	..	..	..	..	..	31
Hæmorrhage	..	..	..	..	..	..	1
Hydrocele	..	..	..	..	..	..	1
Death of infant	..	..	..	..	..	..	1
Mastitis	..	..	..	..	..	..	1
Skin condition	..	..	..	..	..	..	3

On 1st January, 1938, the Municipal Midwifery Service had its full complement of midwives, namely 1 Superintendent Midwife, 12 district midwives and 2 relief midwives. Municipal Midwifery Service.

In May the Superintendent Midwife resigned and her successor, Miss F. Burton, took up office in June. Miss Robinson, district midwife, resigned office in August on her appointment as Superintendent Midwife in Middlesbrough. This vacancy was left unfilled owing to the successful opposition of a voluntary organisation which gave no indication, either to the Ministry of Health or to the local authority, that it proposed enlarging the sphere of its activities at the time when the local authority was making its scheme under the Act. As it was felt that in some cases bookings were lost owing to the effect of high fees and that economic

conditions justified alteration of the scale of fees, after due consideration by the Midwifery Sub-Committee the following adjustments were made on 1st May :—

*First Confinements.*

Where the weekly income less rent is :—

Over 25/- per head .. from £3 0 0 to £2 10 0.

Between 18/- and 25/- per head .. from £2 10 0 to £2 0 0.

Between 15/- and 18/- per head .. from £2 0 0 to £1 15 0.

(Rest of scale unchanged).

*Second and Subsequent Confinements.*

Where the weekly income less rent is :—

Over 25/- per head .. from £2 10 0 to £2 5 0.

Between 20/- and 25/- per head .. from £2 0 0 to £1 15 0.

(Rest of scale unchanged).

The amount of the work done by the Service is as follows :—

VISITS.			Cases referred to A.N. Clinics.	Cases booked.	Cases delivered.
Ante- natal.	Nursings.	Special.			
6619	13,402	1701	660	842	733 + 22 miscarriages

Puerperal Pyrexia developed in 15 cases, resulting in the transfer of 3 cases to the Isolation Hospital and 12 cases to the care of a district nursing association's nurses.

Throat swabs were taken in 26 cases ; 19 cases of discharging eyes were reported, 1 being transferred to the Grimsby Corporation Hospital and 18 to the District Nurses Association.

In 12 cases, delivery was effected by means of forceps, the reasons being :—

Disproportion	..	..	..	..	..	1
Persistent occipito posterior	..	..	..	..	..	1
Contracted outlet	..	..	..	..	..	1
Uterine inertia..	..	..	..	..	..	9

There were 48 babies born before the arrival of a midwife, and in 43 of these there was no possibility of the midwife arriving in time, usually because the infant was just being born as the midwife received the call to attend the case.

Inspection  
of Midwives.

The inspection of midwives practising in the borough was carried out by the superintendent midwife who paid 54 visits to municipal midwives and 19 visits to independent midwives.

Routine supervisory visits were made to all cases attended by municipal midwives, by the superintendent midwife.



The rate for 1938 was 6.00, as compared with 1.26 in 1937. Maternal Mortality.  
 Ten maternal deaths occurred, three from sepsis and seven from other causes. Of the three deaths due to sepsis, two followed septic abortion and the third followed septic infection of a perineal tear, with subsequent thrombo-phlebitis and pulmonary infarction. In the full-time pregnancy only was any ante-natal supervision provided, and in all three cases confinement occurred at the patient's own home, the patient being subsequently transferred to the Corporation Hospital.

The causes of death in the other seven cases were :—

- (a) Hæmorrhage—2 (including (i) shock and P.P.H. following precipitate labour and (ii) shock and concealed accidental hæmorrhage and P.P.H.).
- (b) Acute pulmonary congestion and Pyelitis; prolonged labour and forceps delivery.
- (c) Precipitate labour and achlorhydric anæmia.
- (d) Toxæmia of pregnancy—3 (including (i) acute yellow atrophy of liver, (ii) eclampsia and (iii) toxæmia of pregnancy and severe hypochromic anæmia).

Five of these cases were confined in the Municipal Maternity Home, one in her own home, neither doctor nor midwife being present at the time owing to precipitate labour, and the case of eclampsia died undelivered at the general hospital. All had received ante-natal care, either from private practitioners or at the ante-natal clinic, but in the case dying at the Municipal Maternity Home from precipitate labour and severe achlorhydric anæmia, admission to the Maternity Home was secured immediately the patient attended the ante-natal clinic; unfortunately the patient was then post-mature and blood transfusion merely hurried the onset of labour without any beneficial effect to the patient.

1938 has been outstanding for the occurrence of severe anæmia which has not responded well to treatment, either ante-natally or post-natally; in both anæmia cases ending fatally there was a history of prolonged malnutrition and poverty. The only fatality in a primipara was due to eclampsia, all other cases occurring in multiparæ.

Cause of Death.	Para.	Confinement.		A.N. care received.
		Domiciliary.	Institutional.	
Septic abortion	4	Yes	—	Nil
Septic abortion	7	Yes	—	Nil
Lobar Pneumonia and puerperal sepsis	2	Yes	—	Yes (G.P.)
Shock and P.P.H.	9	Yes	—	Yes (G.P.)
Shock, concealed A.P.H. & P.P.H.	2	—	Yes (M.M.H.)	Yes (A.N.Cl.)
Acute pulm. congestion & pyelitis	2	—	Yes (M.M.H.)	Yes (G.P.)



Cause of Death.	Para.	Confinement.		A.N. care received.
		Domiciliary.	Institutional.	
Precip. labour and Achlorhyd. anæmia	2	—	Yes (M.M.H.)	Yes (A.N.Cl.)
Eclampsia	1	—	Yes (died undelivered)	Yes (G.P.)
Acute yellow atrophy of liver	4	—	Yes (M.M.H.)	Yes (A.N.Cl. and G.P.)
Toxæmia of Preg. and severe Hypochromic anæmia	9	—	Yes (M.M.H.)	Yes (A.N.Cl.)

Puerperal  
Pyrexia.

32 cases of Pyrexia were notified during 1938. Of these confinements 18 took place at patients' own home and 14 in institutions. 17 of these cases were removed to the Corporation Hospital for treatment, and in three cases there was a fatal issue.

The causes of Pyrexia were as follows :—

(a) Abortion .. .. .	6
(b) Acute mastitis .. .. .	6
(c) Pyelitis (1 breech, 2 forceps, 1 normal) .. .. .	4
(d) Acute cervicitis and cervical tear .. .. .	4
(e) Ruptured perineum, abscess of vulva and septicæmia	1
(f) Acute albuminuria and B. coli, septicæmia .. .. .	1
(g) Forceps delivery, ruptured perineum, pulmonary infarct .. .. .	1
(h) Acute endometritis .. .. .	2
(i) Thrombo-phlebitis .. .. .	1
(j) Acute naso-pharyngitis (1 hæmolytic streptococci in throat) .. .. .	2
(k) Pulmonary tuberculosis .. .. .	1
(l) Pernicious anæmia .. .. .	1
(m) G.C. salpingitis .. .. .	2

The case rate per 1,000 births (live and still) for Puerperal Pyrexia was 19.16 as compared with 23.55 in 1937.

Children  
Act, 1908-32.

Part I. of the Children Act (as amended by the Children and Young Persons Act, 1932) is administered by the Maternity and Child Welfare Department and six health visitors, under the supervision of the superintendent health visitor, carry out the duties of infant life protection visitors.

The number of persons receiving children for reward on the Register at the end of 1938 was 21, and the number of children in their care was 22.

16 applications for registration were received during the year, 11 of which were for temporary registration only. Registration was granted in all cases.

226 visits were made to boarded-out children by the health visitors during the year.



One infant was removed from an unsuitable home and admitted to the Scartho Road Infirmary, under Section 212 of the Public Health Act, 1936.

23 cases were referred for treatment and of these six failed to attend. One case received institutional treatment in an orthopædic hospital outside the area. All other cases received treatment at the Grimsby and District Hospital. Orthopædic Treatment.

Some of the conditions treated were :—deformity of hand, 1 ; genu varum, 9 ; rachitic deformity of legs, 5 ; spastic diplegia, 1 ; tortocollis, 1.

Six cases of Poliomyelitis were transferred from the Grimsby Corporation Hospital to Weelsby Old Hall, for orthopædic treatment.

The Maternity and Child Welfare Committee has been responsible for payment of their proportion of cost incurred for both in-patient and out-patient treatment of such cases at the Grimsby and District Hospital in accordance with the arrangements made in 1936, and for the proportion of the total sum paid by the local authority as allocated on a user basis.

As in past years a voluntary organization provides for the care and reception of unmarried mothers, many of whom are transferred to special institutions in other parts of the country. In some instances, where there has been difficulty in persuading the girls to leave home, arrangements have been made for the confinements to take place in the Municipal Maternity Home from which the patients and their infants were discharged to the care of relatives and friends. Unmarried Mothers.

Miss Hough, the Matron of the Home of Help for Girls, has given every assistance in respect to such cases.

The local authority contributed towards the maintenance of three unmarried mothers who were admitted to outside institutions.

There has still been difficulty in finding suitable homes for boarding-out or adoption of illegitimate infants, except in the Nursery and Children's Homes provided by the Public Assistance Committee.

In accordance with the Midwives and Maternity Homes Act, 1926, and the Nursing Homes Act, 1927, three nursing homes are registered, but in December, 1938 one nursing home closed down. Maternity and Nursing Homes.

The usual routine visits of inspection were made and conditions found to be satisfactory.

During 1938, 1,613 live-births, and 53 still-births were registered. Information concerning un-notified births is obtained from the local registrar of births and deaths, but as the result of the municipal midwifery service this number has considerably diminished. Notification of Births.



Infant  
Mortality.

The infant Mortality Rate for 1938 was 49, as compared with 57 in 1937, 67 in 1936, 63 in 1935 and 49 in 1934, and was lower than that for the rest of the country.

There were 79 deaths of infants under 1 year of age, the chief causes of death being prematurity, congenital defects (including congenital debility, atelectasis and injury at birth), respiratory diseases and diarrhoea and enteritis.

		Percentage of Infant deaths			
		1938.	1937.	1936.	1935.
Prematurity .. .. .	..	32.91	33.72	26.54	23.5
Congenital Defects .. ..	..	21.52	13.95	24.77	25.3
Respiratory diseases .. ..	..	15.19	16.28	25.66	28.4
Diarrhoea and enteritis ..	..	12.65	13.95	6.3	—

Enquiries were made into the 26 deaths from prematurity and the following conditions were found to have contributed to the onset of premature labour. Multiple pregnancy, 4; albuminuria, 4; ante-partum hæmorrhage, 6; albuminuria and ante-partum hæmorrhage, 1; albuminuria and hydramnios, 1; Gonorrhœa, 1; Syphilis, 1.

In eight cases there was no known reason elicited for the onset of premature labour.

As in past years, the neo-natal death rate was high, namely 28.58%, 45 infants dying before they reached the age of one month and accounting for 57% of the total infant deaths. The chief causes of neo-natal deaths were prematurity, 25; atelectasis, congenital defects and injury at birth, 13.

Still-births.

There were 53 cases of still-birth registered, and of 48 cases investigated, the following summary of the conditions found:—

<i>Cause.</i>	<i>No.</i>	<i>Primip.</i>	<i>Multip.</i>
Breech .. .. .	6	4	2
Contracted pelvis .. ..	2	1	1
Malpresentation (forceps) .. ..	3	1	2
Impacted shoulders .. ..	2	2	—
Transverse, prolapsed hand and cord ..	1	—	1
Hydrocephalic and spina bifida (forceps)	1	1	—
Hydramnios and anencephaly ..	1	—	1
Post-mature .. .. .	1	—	1
Prolonged labour .. .. .	1	1	—
Strangulation by cord .. ..	4	2	2
Fall .. .. .	1	—	1
B.B.A. .. .. .	1	1	—
Accidental hæmorrhage .. ..	1	—	1
Albuminuria and accidental hæmorrhage	4	—	4
Placenta prævia .. .. .	3	—	3
Toxæmia of pregnancy .. ..	7	1	6
Acute yellow atrophy of liver .. ..	1	—	1
Syphilis .. .. .	1	1	—
Twin (other twin born alive) .. ..	2	2	—
Macerated foetus (unknown cause) ..	5	2	3



It is significant that of eleven cases of albuminuria no less than seven babies were macerated when born, and that six confinements occurred prematurely.

Of the above deliveries, 27 were conducted by midwives and 21 by doctors and midwives acting as maternity nurses.

Of these still-births, 14 occurred anything from four to eight weeks prematurely and in all except one case ante-natal care had been given either by doctor or midwife, the exception being a case with a strongly positive Wasserman reaction, who was only seen once before the onset of premature labour.

This clinic was held thrice weekly throughout the year, except during the summer months, and 258 cases made 1,432 attendances. The cases treated were referred from the various infant welfare centres. Among the conditions treated were malnutrition, rickets, debility following acute illness, marasmus, debility due to chronic catarrhal conditions, adenitis, etc.

Artificial  
Sunlight  
Clinic.

The following table gives a comparison of attendance at infant welfare centres for the past four years.

Infant  
Welfare  
Centres.

	1935.	1936.	1937.	1938.
Hamilton Street .. ..	17,888	16,467	17,795	17,524
Watkin Street .. ..	18,991	17,434	17,695	18,764
Nunsthorpe .. ..	9,410	9,255	8,457	9,101
Old Clee .. ..	—	—	2,140	5,557
Toddlers' Clinics .. ..	—	1,010	1,277	2,110

As will be seen, the attendances show an increase over those of 1937, with the exception of Hamilton Street, where the decrease is probably due to the transference to Old Clee of those cases who find it more convenient to attend there. The opening of a clinic in the Old Clee area has been fully justified and the attendances are well maintained. At this clinic, a portion of the medical officer's time is devoted to the examination of toddlers, who are seen by appointment.

Hamilton Street is to be replaced by the building of a new clinic in Hope Street, on a similar plan to that in Watkin Street, and it is hoped that the premises will be available by the end of 1939. This will fill a long-felt want in that area and will be greatly appreciated by mothers and workers.

The voluntary committee of this clinic sustained a loss by the resignation of its honorary secretary, Mrs. J. Kennington, who had been an indefatigable worker in the interests of the clinic for over ten years. A silver salver, suitably inscribed was presented to her by the voluntary workers and staff of the clinic as a token of their appreciation and esteem. Mrs. H. Watkinson was elected to succeed Mrs. Kennington.

Voluntary workers and members of the Women's Voluntary Aid Detachment have again given invaluable assistance at all the clinics. The funds of the Central Voluntary Committee have been augmented during the year by means of garden parties,



American teas, etc., and the medical officers have been able to call on these funds in special cases. Christmas parties were given to the mothers at each clinic by voluntary workers and three clinics organised summer outings for which mothers paid their own expenses, although a number of needy ones were taken free or at reduced cost, the balance of the cost being met out of voluntary funds.

#### Mothercraft.

A weekly mothercraft class held at Nunsthorpe has continued as before, and a considerable amount of work has been done there by the health visitor in charge, in addition to the very useful work done by one of the voluntary workers in demonstrating model layettes and assisting expectant mothers with advice in making the various types of garments shown.

During 1938, much more work was done in mothercraft teaching at Watkin Street clinic, mothercraft, cookery, and domestic science classes were held, health lectures given and in addition there was a physical training demonstration.

At Old Clee clinic, model layettes, etc., were exhibited at each session, but owing to the fact that only one room is available for all the various activities of a clinic, mothercraft teaching is possible only to a limited extent. A few health talks were given, and arrangements were made for cookery demonstrations to be given in 1939.

No attempt was made to give communal mothercraft teaching at Hamilton Street clinic owing to lack of accommodation, but it is hoped that by the end of 1939 a new clinic will be opened with facilities for carrying out all the usual kinds of mothercraft teaching.

At the local Health and Home Exhibition held from 9th to 14th May a stall was provided, demonstrating ante-natal care, mothercraft and child management. Thanks are due to those voluntary workers who assisted in the making of model garments, to the Nunsthorpe elementary school teachers who supervised the making of original posters by children attending the school, and to the voluntary workers and Queen's nurses who gave their time in attending and explaining the exhibits. Thirty voluntary workers, fourteen municipal midwives, Queen's nurses and all the health visitors were on duty during the five days of the exhibition, it being arranged that a trained nurse and a voluntary worker should attend the stall for two hours at a time, to explain their own particular part of the work. Considerable interest was taken in the stall by the general public. The preparation for and organization of exhibits was carried out by the superintendent health visitor with the aid of voluntary workers.

Here is a detailed note of the mothercraft teaching done at the various centres.



	Nunsthorpe.	Watkin Street.	Old Clee.
<i>Mothercraft classes.</i>			
No. attending ..	69	57	—
Total attendances ..	250	240	—
<i>Cookery demonstration.</i>			
Attendances.. ..	—	9	—
	—	145	—
<i>Domestic science classes.</i>			
No. attending ..	—	8	—
	—	18	—
Total attendances ..	—	138	—
<i>Health lectures.</i>			
No. attending ..	—	35	6
	—	105	40
Total attendances ..	—	415	125
<i>Physical training exhibition.</i>			
No. attending ..	—	1	—
	—	25	—

The superintendent health visitor has had full charge of all arrangements made for mothercraft teaching and deputed such work as she considers advisable to members of her staff, in addition to giving health talks at various centres herself.

Applications for assisted milk supply were dealt with by the assistant medical officer of health and her recommendations were considered monthly by the Maternity and Child Welfare Committee. Assistance has been given to expectant mothers as early in pregnancy as is thought necessary, and special milk allowances have been made to toddlers between the ages of two and five years. Wherever possible mothers have been asked to make small contributions towards the cost of the milk allowed to them, and many cases were assisted free of charge.

The following table shows details of distribution of dried milk foods at each centre :—

		<i>Sales.</i>		<i>Gifts.</i>	
		<i>cwts.</i>	<i>lbs.</i>	<i>cwts.</i>	<i>lbs.</i>
Hamilton Street .. ..	..	12	100	105	96
Watkin Street .. ..	..	12	7	95	97
Nunsthorpe .. ..	..	17	62	18	97
Old Clee .. ..	..	13	74	10	106
Municipal Maternity Home		3	36	—	—
		59	55	231	60

Total distribution 291 cwts. 3 lbs. (or 32,595 lb. packets).

In addition, 10,565 gallons of fresh milk were allowed to necessitous cases by means of a voucher system, as compared with 5,063 gallons in 1937, and all milk allowed was either pasteurised or tuberculin tested.



The number of cases receiving assistance during the year was as follows :—

Hamilton Street	..	..	..	574
Watkin Street	..	..	..	565
Nunsthorpe ..	..	..	..	133
Old Clee ..	..	..	..	60
				<hr/>
				1,332
				<hr/>

#### Toddlers' Clinics.

During the first half of 1938, a toddlers' session was held weekly at Hamilton Street and Nunsthorpe welfare centres, and every second week at Watkin Street, whilst special appointments for routine examination of toddlers were given once weekly during the infant welfare session at Old Clee.

Owing to the fact that routine examination could not be covered under these arrangements, an additional session was provided at Watkin Street Centre, thus allowing for four weekly sessions, and proved of great service.

During the year 1,156 cases made 2,110 attendances, and 170 of the cases made their first attendance at any clinic. There are still a great many failed appointments, necessitating intensive following-up by the health visitors, but on the whole these clinics are well attended, and the mothers already attending the welfare centres now take for granted that immediately the child reaches the age of two years it should be brought to the toddlers' clinic for a routine examination.

Of the 1,090 children who were examined, in 30·3% no defect was discovered, but the remaining 69·7% were found defective in varying degree and referred for treatment. The defects found were as follows :—EYE—squint, 49 ; ptosis, 1 ; blepharitis, 19 ; phlyctenular conjunctivitis, 3. SKIN—impetigo, 24 ; scabies, 4 ; ringworm, 3 ; chicken-pox, 1 ; papular urticaria, 26 ; intertrigo, 1 ; eczema, 6 ; alopecia, 1 ; herpes, 1 ; chilblains, 1 ; xerodermia, 1 ; dermatitis, 3 ; furunculosis, 5 ; warts, 1. EARS—otorrhœa, 19 ; tonsils and adenoids, 157 ; other defects of ear, nose and throat, 21 ; adenitis, 93 ; teeth, 248 ; heart, 6. LUNGS—bronchitis, 42 ; bronchiectasis, 1 ; broncho-pneumonia, 1. DIGESTIVE—31 ; thread-worms, 25 ; rickets, 105 ; OTHER DEFORMITIES—congenital scoliosis, 1 ; dislocation of hip, 1 ; congenital hand defect, 1 ; paralytic talipes, 2 ; cleft palate, 1. MENTAL CONDITION—mentally defective, 3 ; imbecile, 1 ; dull and backward, 4 ; epilepsy, 3 ; cretin, 1 ; nocturnal enuresis, 24 ; very nervous, 11 ; speech, 12 ; malnutrition, 70 ; hernia, 9 ; anæmia, 44 ; acute leukæmia, 1 ; tabes mesenterica, 1.

Where major defects are found, an early appointment for re-examination is made so that the child's progress after treatment may be carefully observed. Specialist orthopædic and ophthalmic treatment is provided by the local authority. Unfortunately, the local authority's dental scheme does not yet allow for



conservative treatment, and only cases in urgent need of extraction on account of severe toothache and/or dental sepsis are referred to the dental clinics.

A total of 478 mothers attended for the purpose of finding in what way and to what extent lactation was failing and in order that, so far as possible, lactation should be re-established. One morning weekly is set aside at each of the three clinics—Hamilton Street, Watkin Street and Nunsthorpe for the purpose of test-feeding, but in cases of urgency, whenever possible test-feeds are carried out at the ordinary infant welfare clinic. Test-feeding Clinics.

On examination of the health visitors' records it was found that of 1,015 infants visited at two weeks old, 77·34% were breast-fed, 6·7% were breast and artificially fed, and 15·96% were artificially fed.

Of 799 babies whose records were available up to three months, the following information is available :—

		At 1st Visits.	At 3 Months.
Breast-fed	.. ..	76·72%	41·92%
Breast and artificially fed	.. ..	6·5%	6·5%
Bottle fed	.. ..	16·77%	51·56%

Of 549 babies whose records were available up to six months, the following information is available :—

		1st Visit.	3 Months.	6 Months.
Breast-fed	.. ..	78·23%	42·44%	29·14%
Breast and bottle fed	.. ..	6·19%	6·00%	4·00%
Bottle fed	.. ..	15·48%	51·54%	66·84%

There is no doubt that the present financial condition of the area has much to do with the decline in breast-feeding, although it is unfortunately only too true that there is a slump in the popularity of breast-feeding.

The multiparous woman is often unsuccessful in breast-feeding owing to pressure of work at home, the primiparous woman on the other hand is unsuccessful either from failure to adjust herself to the carrying out of household duties and yet maintain her health so as to be able to continue lactation, or from dislike of the ties of breast-feeding. Moreover, despite the endeavours of the maternity and child welfare staff little attention is paid to their advice by the mother who desires to wean, and weaning is undertaken on the flimsiest of excuses.

Breast massage, hot and cold sponging, adequate rest and a good diet is preached, but seldom carried out. So far as is possible extra nourishment in the form of wet or dried milk and extra vitamins is provided in necessitous cases, but there is without doubt a growing need for the provision of dinners to poor mothers.

During the first half of 1938 five ante-natal sessions were held weekly, but owing to the very poor attendance at the Nunsthorpe district clinic it was decided to open both Municipal Maternity Home ante-natal sessions to district cases and thus save the almost complete waste of time. Therefore during the Ante-natal Clinics.



latter part of the year two ante-natal sessions were held weekly at Nunsthorpe and the usual two sessions at Watkin Street.

			<i>Cases.</i>	<i>Attendances.</i>
Watkin Street	..	..	790	2165
Municipal Maternity Home	..	..	296	2001
Totals	..	..	1086	4166

The case and attendance figures are almost the same as in 1937, and in view of the fact that 1,137 cases were delivered by midwives no less than 95.5% of those cases attended one of the ante-natal clinics at some time during their pregnancy for routine examination. As in 1937, repeated attendance at a district ante-natal clinic is not recommended unless some morbidity is found or difficult labour is anticipated.

The various conditions found during routine examination at the district ante-natal clinics were :—

ABNORMAL PRESENTATION—breech, 43; occipito posterior, 22; transverse, 10. TOXÆMIA OF PREGNANCY—albuminuria, 58; pyelitis, 7; excessive vomiting, 4; oedema, 13; hyperpyresis, 16; hydramnios, 4; ante-partum hæmorrhage, 13; disproportion, 5; premature rupture of membranes, 1. VENEREAL DISEASES—strongly positive Wasserman reaction, 9; gonorrhœa, 1; vaginal discharge (not gonococcal) 11. CARDIO-VASCULAR DEFECTS—V.D.H., 13; tachycardia, 2; myocarditis, 2; thrombo-phlebitis, 3; varices, 43; hæmorrhoids, 7. PULMONARY DISEASES—laryngitis, tracheitis and bronchitis, 12; asthma, 1; bronchiectasis, 2; pulmonary tuberculosis, 1. NERVOUS SYSTEM—epilepsy, 1; hystero-epilepsy, 2; severe insomnia, 2. SKIN DISEASES—psoriasis, 1; scabies, 4; intertrigo, 2; impetigo, 1; pruritis, 1. DENTAL DISEASE—caries, with and without pyorrhœa, 112. OTHER DEFECTS—anæmia, 60; malnutrition, 14; hyper-thyroidism, 2; constipation, 14; carcinoma of breast, 1; tuberculous sinus of arm, 1; ventral hernia, 1; threadworms, 2.

In all cases of anæmia, iron is provided as a routine, either incorporated with a dried milk or in tablets; extra vitamins are given in malt and cod liver oil, virol, advita, adexolin and viteolin capsules; milk is provided to necessitous cases. The provision of meals to necessitous cases has not yet been achieved, but has been considered.

#### Post-natal Clinics.

Two post-natal clinics were held weekly, one for maternity home cases and the other for district cases, but neither is as well attended as one would like.

			<i>Cases.</i>	<i>Attendances.</i>
District Clinic	..	..	94	224
Municipal Maternity Home	..	..	173	254
Totals	..	..	267	478



All cases seen at the Municipal Maternity Home are those reporting for routine examination six weeks after delivery, but only 13 routine post-natal examinations were made at the district clinic and of these six were on account of abnormality. The following is a list of the defects found at the district clinic:—

GYNÆCOLOGICAL CONDITIONS—Menorrhagia, 2; retroversion, 11; prolapse, 9; chronic cervicitis, 6; lacerated cervix, 4; cervical erosions, 14; cystitis, 2; dysmenorrhœa, 1; sterility, 6. OTHER CONDITIONS—anæmia, 8; general debility, 4; chronic appendicitis, 2; V.D.H., 1; hyperpyæsis, 1; carcinoma of stomach, 1; rheumatism, 3; obesity, 2; lypoma of axilla, 1; varices, 1; hæmorrhoids, 1.

Contraceptive instruction was given in eight cases on medical grounds and fifteen cases were referred for treatment to their own doctor or to the general hospital.

During the year cases have been referred from the toddlers' clinics to the special clinics held by the consultant ophthalmologist under the auspices of the Education Committee. Ophthalmic Treatment.

If the ophthalmic surgeon considers any case suitable it may be transferred for orthoptic treatment.

41 cases were referred to the clinic and prescriptions were given in 26 cases. Assistance towards the cost of glasses was given in 12 cases, half the cost being paid by the parents and half by the Maternity and Child Welfare Committee.

Thirty-one notifications of ophthalmia neonatorum were received during the year. By arrangement with the District Nurses Association home nursing was provided in twenty-five cases and four cases were removed to hospital. All cases made good recoveries before the end of the year and there was no incidence of damage to sight. Ophthalmia Neonatorum.

Home-helps have been employed to assist in 38 cases during the year, and in 80% of the cases were provided free of charge. Home-help Service.

Mr. C. F. Salt, L.D.S., gives the following report of work done during 1938 by the School Dentists. Two sessions weekly have been held, one at Hamilton Street and one at Watkin Street. Dental Treatment.

456 adults and 193 children under five years of age were treated, as compared with 413 adults and 121 children in 1937.

1,070 attendances were made in 80 sessions, giving an average attendance of 13.37 per session.

66 nursing or expectant mothers were fitted with artificial dentures, and two dentures were repaired.

	Attend- ances	Teeth Extracted	Gas N <sub>2</sub> O	Local	Scaling	Dentures Fitted.	Dressings and other Operations.
Adults—456	853	1890	420	14	1	66	2 repairs
Infants—193	217	606	221	—	—	—	—



495 cases were admitted to the Home during 1938, a total of 39 more than in 1937, and the average duration of stay was 14.75 days.

During the early months of the year 11 cases of miscarriage were admitted, but as the result of the advice of the Ministry of Health the admission of such cases was discontinued, in view of the fact that it was not practicable to keep a separate staff for the nursing of all abortions. Arrangements were made for the admission of abortions and miscarriages to the Scartho Infirmary and for the transfer of all public assistance cases to the Maternity Home for confinement, free treatment being given except in cases in receipt of maternity benefit.

5 cases were admitted immediately after child-birth and 34 public assistance cases were given free treatment.

7.14 of the total deliveries were conducted by doctors and the remainder by the nursing staff.

12 cases of puerperal pyrexia were notified, the causes of pyrexia being, septic abortion, 1; thrombo-phlebitis, 1; pyelitis, 4; B.Coli septicæmia, 1; acute mastitis, 2; respiratory catarrh, 3. In only two of these cases were forceps used, but in one case of manual removal of adherent placenta, acute mastitis followed subquætanous saline.

Medical aid was called in for 132 cases for the following reasons :—

ANTE-NATAL—Acute albuminuria, 1; DURING LABOUR—(a) DYSTOCIA—persistent occipito posterior (forceps), 1; disproportion (low forceps), 2; primary and secondary uterine inertia, 6; prolonged labour, 1; prolonged labour and hydramnios, 1; prolapsed cord, 1. (b) HÆMORRHAGE—accidental, 3; syncope and pains, 1; adherent placenta, 2; general œdema, 1; ruptured perineum, 75. PUERPERIUM—pyelitis, 2; thrombo-phlebitis, 2; acute mastitis (including one breast abscess) 2; puerperal pyrexia, 2; influenza, 1; acute naso-pharyngitis (hæmolytic streptococci throat) 1; obstetric shock, 1; dyspnœa, 1; strongly positive Wasserman reaction, 1. BABY—ophthalmia neonatorum (gonococcal) 2; sticky eyes, 12; conjunctivitis, 1; pustular rash on scrotum, 1; pyrexia, 1; melaena neonatorum, 1; convulsions, 1; ulcerated mouth, 1; congenital deformities, 3.

Four maternal deaths occurred, two in cases booked for confinement at the Home, one of whom had booked her own medical practitioner to attend the confinement, the others being cases admitted in emergency and hopelessly ill on admission.

The causes of death will be seen in *Table M. & C.W. 5*, and in the same table will be seen the detailed causes of the 11 infant deaths and the 29 stillbirths which took place.

Two cases of gonorrhœal ophthalmia neonatorum occurred



and were removed to the Corporation Hospital, where they made a good recovery.

At the ante-natal clinics 296 cases made 2,001 attendances, and at the post-natal clinic 173 cases made 254 attendances.

It is still noticeable that attendance at the post-natal clinic for routine examination is poor, despite the fact that each patient is given an appointment for post-natal examination prior to her discharge from the Home.

TABLE M. &amp; C. W. 1.

## HOME VISITATION. WORK OF THE HEALTH VISITORS.

	(1)	(2)	(3)	(4)	(5)	(6)	(7)	Total
Visiting of children :—								
First Visits .. .. .	337	211	223	245	—	191	357	1564
Subsequent visits (under 1 yr.)	1843	1425	1818	2137	—	1274	1593	10090
do. do. (over 1 yr.)	2200	2169	2415	2522	—	2187	1688	13181
Visits to Stillbirths .. ..	5	2	4	4	—	3	5	23
do. Ophthalmia Neo.cases								
First visits .. .. .	3	5	4	4	—	6	3	25
Subsequent visits ..	1	1	10	1	—	12	2	27
do. Ante-natal cases ..	97	138	166	231	—	98	68	798
do. Whooping Cough cases	8	11	7	5	—	26	9	66
do. Measles cases .. ..	11	1	7	3	—	6	20	48
do. Chicken-pox cases ..	19	—	—	—	—	1	—	20
do. Infantile Diarrhoea								
cases .. .. .	—	1	—	—	—	2	—	3
do. Puerperal Fever cases	—	—	—	—	—	—	—	—
do. do. Pyrexia cases	—	—	—	—	—	—	—	—
do. Cases under Children								
Acts, 1908-32 .. ..	65	20	51	12	—	11	67	226
do. Miscellaneous cases	68	262	135	149	—	151	90	855
Total visits .. .. .	4657	4246	4840	5313	—	3968	3902	26926
Weekly average for each								
Health Visitor .. .. .	99	90	103	113	—	84	83	—

TABLE M. &amp; C. W. 2.

## NOTIFICATION OF BIRTHS.

Notified by			Live Births	Still Births
Medical Practitioners .. ..	..	..	471	16
Certified Midwives .. .. .	..	..	1114	31
Parents and others .. .. .	..	..	1	—
			1586	47
Total Notifications received ..			1,633	

TABLE M. & C. W. 3.  
INFANT WELFARE CENTRES. STATISTICS.

	Hamilton Street	Watkin Street	Nunsthorpe	Old Clee	Total
Number of names on register .. ..	838	888	364	331	2421
Attendances :—					
Mothers.. ..	8433	9053	4305	2872	24663
Babies .. ..	5400	6462	3433	2162	17457
Children .. ..	3691	3249	1363	523	8826
Average attendance per Session :—					
Mothers.. ..	86	92	89	57	—
Babies .. ..	55	66	72	43	—
Children .. ..	37	33	28	11	—
Consultations .. ..	3353	2590	1270	1100	8213
Average Consultations per session .. ..	34	26	26	22	—

TABLE M. & C. W. 4.  
OPHTHALMIA NEONATORUM.

CASES			Vision un- impaired	Vision impaired	Total Blindness	Deaths
Notified	Treated					
	At Home	In Hospital				
31	27	4	31	—	—	—



TABLE M. &amp; C. W. 5.

Name of Institution	.. ..	Municipal Maternity Home.
Number of Beds	.. ..	38
Address	.. ..	Second Avenue, Nunsthorpe, Grimsby.
<i>Medical Superintendent</i>	.. ..	DR. J. W. HEPBURN.
<i>Matron</i>	.. ..	MISS M. L. ARCHER.

Information required.	Particulars.
(1) Number of Maternity cases admitted during the year .. ..	495
(2) Average duration of stay .. ..	14.75 days.
(3) No. of cases delivered by— (a) Midwives .. .. (b) Doctors .. ..	429 33
(4) No. of cases in which medical assistance was sought by a midwife in emergency .. ..	132
(5) No. of cases notified as— (a) Puerperal fever .. .. (b) Puerperal pyrexia .. ..	Nil 12
(6) No. of cases of pemphigus neonatorum	Nil
(7) No. of infants not entirely breast fed while in the institution .. ..	52
(8) No. of cases notified as ophthalmia neonatorum, stating the result in each case .. ..	3 (Two cases transferred to another Institution. One case well on discharge).
(9) No. of maternal deaths— Cause of death in each case :—	4 (1) Pneumonia, Pyelitis, Albuminuria, Prolonged labour, forceps delivery. (2) Concealed accidental hæmorrhage—fall. Atonic uterus. (3) Collapse, precipitate labour, Achlorhydric Anæmia. (4) Yellow atrophy of liver.
(10) No. of infant deaths— (a) Stillborn .. .. (b) Within 10 days of birth .. .. Cause of death in each case :— (a) Stillborn.	29 11 4 Albuminuria. 3 A.P.H. Accidental hæmorrhage, Albuminuria. 3 No known reason. 2 A.P.H. Central Placenta Prævia. Emergency. 1 Albuminuria, Mitral Stenosis. 1 Twin. 1 Syncope with pains, cord tightly round neck. 1 Transverse lie, bi-polar version, emergency. 1 Extended breech. 1 Accidental hæmorrhage, emergency. 1 Hydramnios, Anencephalic monster. 1 Macerated fœtus. 1 Pyelitis, Albuminuria, slow dilatation forceps. 1 Transverse lie, prolapse of cord. 1 Concealed accidental hæmorrhage. 1 Marginal placenta prævia. 1 Albuminuria, yellow atrophy of liver. 1 Post Mature. 42 weeks. 1 Low forceps, short cord, 8". 1 Twin, macerated. 1 Short cord.

Information required.	Particulars.
(b) Within 10 days of birth.	1 Prematurity, Pyelitis. 2 Twins, Atelectasis, Convulsions. 2 A.P.H. Albuminuria. 1 Congenital debility, Prematurity. 1 Prematurity, 34 weeks. Hydramnios. 1 Intracranial hæmorrhage. Precipitate labour. 1 A.P.H. Prematurity, 30 weeks. 1 Albuminuria, 34 weeks. 1 Convulsions, Prematurity, Toxæmia of pregnancy, congenital defects.

TABLE M. &amp; C.W. 6.

## WORK OF MIDWIVES. STATISTICS.

	Domiciliary Cases.	Cases in Institutions.	Total.
No. of cases attended by midwives during the year :—			
1. Employed by the Council :			
As midwives .. .. .	516	439	955
As maternity nurses ..	217	33	250
2. Employed by Voluntary Associations :			
As midwives .. .. .	136	—	136
As maternity nurses ..	142	—	142
3. In private practice :			
as midwives .. .. .	46	—	46
as maternity nurses ..	74	29	103
Totals } as midwives .. .. .	698	439	1137
as maternity nurses ..	433	62	495



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## SECTION C.

# SANITARY CIRCUMSTANCES.

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SECTION C.—**SANITARY CIRCUMSTANCES.**

## Water.

The quarterly chemical and bacteriological examinations made during the year of the public water supply provided by the Grimsby, Cleethorpes and District Water Board proved the water to be very satisfactory. The supply was adequate for all the needs of the borough and the water mains extended to new streets in the district.

The reports set out below are typical of all the others for 1938.

## BACTERIOLOGICAL REPORT. SAMPLE NO. 60/P.

*Quantitative Enumeration of Bacteria.*

On Agar Plates, incubated at 20°C. for 3 days, 5 colonies per 1 c.c. developed.

On Agar Plates, incubated at 37°C. for 2 days, 3 colonies per 1 c.c. developed.

*Examination for Special Bacteria.*

B. Coli types	..	..	..	..	absent in 100 c.c.
Streptococci	..	..	..	..	absent in 100 c.c.
Clostridium Welchii	..	..	..	..	absent in 40 c.c.

*Result of Examination.*

From the consideration of the above data no exception can be taken upon bacteriological grounds to the use of this water for domestic purposes.

(Sd.) J. W. B., Pathologist.

## CHEMICAL REPORT. SAMPLE NO. 90/B.

					Grains per Gallon.
Total solid residue	..	..	..	..	20.72
Chlorine	..	..	..	..	1.47
					Parts per Million.
Free Ammonia	..	..	..	..	0.003
Albumenoid Ammonia	..	..	..	..	0.008
Nitrogen as Nitrates	..	..	..	..	2.500

From the above data I conclude that this water is chemically satisfactory for a public supply.

(Sd.) J. A. FOSTER, F.I.C., etc., *Borough Analyst.*

A sample of water taken from a pump in the Scartho Road Cemetery was examined and found to be of doubtful quality. Later a notice marked "Not for drinking purposes" was affixed to the pump.



I am indebted to the Borough Engineer and Surveyor, Mr. J. V. Oldfield, A.M.Inst., C.E., for the following information in respect of drainage and sewerage of the Borough :—

Drainage  
and  
Sewerage.

A description of the drainage and sewerage of the Borough was given on pages 28 and 29 of the report for 1932.

The main sewer through Scartho was constructed some four years ago, and afterwards sewers in the populated side roads, viz., Ferriby Lane, Church Lane, St. Giles' Avenue, East End Lane, Springfield Road and Fairfield Road have been completed, whilst the whole of the sewage from the Grimsby Corporation Hospital has been dealt with under this scheme.

Meanwhile, a main 4'6" x 8'6" reinforced concrete intercepting sewer to accommodate the north and east ends of the town and link up with the Scartho system has been constructed for over a mile in length, and the remainder of contract which covers a further 1½ miles of sewers is to be commenced within the next few weeks.

With the exception of a few outlying farm-houses and bungalows in Scartho, practically the whole of the houses in the borough are now connected to the main sewers.

A scheme is at present being prepared for the erection of a new pumping station and twin outfalls to serve the western side of the borough.

The River Freshney is the only water course in the borough and does not receive any factory effluents.

Rivers and  
Streams.

All premises in the borough were on the water carriage system except where the 78 pail closets remained in use during the year. This comparatively small number will only dwindle as the outlying districts are further developed and sewered. Late in December arrangements were completed for the conversion of the pail closets remaining in the Clew ward.

Closet  
Accommo-  
dation.

*Hand flushed water closets.*—129 conveniences of this type were fitted with flushing apparatus during 1938 and some houses with hand flushed water closets were included in slum clearance areas. Less than half of the hand flushed water closets in use during 1937 remained unconverted at the end of 1938.

#### COLLECTION OF REFUSE (DOMESTIC AND TRADE).

House and shop refuse is collected weekly, and the refuse from hotels, cafes, etc., twice and in some cases three times weekly.

Public  
Cleansing.

The tonnage collected during the year shews a small decrease of 90 tons. This is attributed to slum clearance and re-housing schemes from which it is a recognised fact that the bulk collected from the new estates is far less than under old conditions.

A separate collection of waste paper and cardboard packing cases has been instituted during the year from the large business premises, and 407 tons 15 cwts. 2 qrs. were baled and sold.



This has saved considerable time in sorting and also enables the House Scavenging gangs to carry out their work more efficiently, and obtain heavier loads.

Privy boxes still remain in the Scartho, Fairfield and Bradley districts, and are emptied weekly by a contractor who carries out the work in a satisfactory manner. No complaint as to lack of service has been received during the year.

All premises found to be locked or dust bins found to be on fire are notified to the occupier by post card informing them of the circumstance of non-removal for the week in question.

#### DISPOSAL OF REFUSE.

The department have still in use the two excellent estates on which "Controlled Tipping" takes place, thus easing the work of the destructor, which is now 37 years old. This plant is now getting towards the end of its useful life and the Cleansing Committee will shortly be considering the installation of a modern salvage and incinerator plant.

The completed portion of the Gilbey Estate Tip has now been taken over by the Education Committee and will be laid out and used for School recreation purposes.

During the year ending on March 31st, 1939, the 24,260 tons of refuse collected was disposed of in the following manner :—

	Tons.
Incineration—Destructor .. .. .	9,042
Land and allotments for manurial use .. ..	46
Controlled tipping—Little Coates .. ..	1,403
"    "    Gilbey Estate .. ..	4,665
"    "    Nuns Estate .. ..	8,592
Waste paper baled and sold .. .. .	408
Nightsoil, tipped for farmers .. .. .	104
	<hr/>
	24,260

#### STREET SCAVENGING.

This work is carried out by horse gangs in the town and by barrow men in the main streets and outlying districts.

Special scavenging is carried out after each market, both town and Freeman Street, and practically all main streets throughout the town are swept on Saturday evenings from 10-30 p.m.

Street gullies are emptied six times per year in all parts of the borough. Service is also given free of charge in emptying private gullies on house property when requested by the Health Department or occupiers of the premises concerned.



*Statistics for the Year ending 31st March, 1939.*

Corresponding period last year.		COLLECTION OF REFUSE.		Loads Collected.		
Motor.	Horse.			Motor.	Horse.	Total.
1,072	6,528	To Destructor	.. ..	1,458	6,549	8,007
3	384	„ Depot for baling	.. ..	1	651	652
1	64	„ Allotments and land	.. ..	—	49	49
1,027	—	„ Little Coates tip	.. ..	935	—	935
1,494	2,437	„ Gilbey Estate tip	.. ..	1,411	2,003	3,414
4,630	534	„ Nuns Estate tip	.. ..	4,619	277	4,896
<hr/>				<hr/>		
8,227	9,947			8,424	9,529	17,953
<hr/>				<hr/>		
Total—24,350 tons.				Total—24,260 tons.		

STREET SCAVENGING.					
158	892	To Depots and Destructor	.. ..	157	1,151
—	3,822	„ Holme Hill Brick Pit	.. ..	—	3,538
—	4,106	„ Allotments and land	.. ..	—	3,755
<hr/>				<hr/>	
158	8,820			157	8,444
<hr/>				<hr/>	
				8,601	

## REMOVAL OF DETRITUS FROM RIBY STREET PUMPING STATION

805	Total horse loads removed	.. ..	—	860
<hr/>				
788	Deposited on farms	.. ..		849
17	„ on allotments	.. ..		11

T.	C.	Q.	DESTRUCTOR.	T.	C.	Q.	T.	C.	Q.
7,685	13	0	House refuse delivered to	8,544	9	0			
482	19	2	Trade and sundry „	497	7	0			
<hr/>				<hr/>			9,041	16	0
8,168	12	2					<hr/>		

## RESIDUE REMOVED.

2,667	7	0	Rough clinker	.. ..	3,187	17	0		
895	1	0	Fine ash and flue dust	.. ..	853	10	0		
26	0	1	Assorted scrap iron	.. ..	25	18	0		
374	3	2	Baled tins	.. ..	335	12	0		
21	17	0	Carpets and rags (baled)	.. ..	9	3	2		
<hr/>				<hr/>			4,412	0	2
3,984	8	3					<hr/>		

Sanitary  
Inspection.

I am indebted to Mr. John G. Watson, Chief Sanitary Inspector, for the following section of the report furnished under Article 27 (Sub Section 18) of the Sanitary Officers (Outside London) Regulations, 1935, for the year ending 31st December, 1938 :—

#### INSPECTIONS.

##### *General Sanitation.*

Accumulations .. .. .	142
Animals, etc. .. .. .	45
Ashbins .. .. .	1625
Bakehouses .. .. .	271
Caravans .. .. .	82
Common lodging-houses .. .. .	13
Dirty houses .. .. .	193
Dirty persons .. .. .	13
Drainage .. .. .	4534
Drain Tests .. .. .	17
Factories (without power) .. .. .	782
do. (with power) .. .. .	183
Infectious diseases .. .. .	668
Offensive smells .. .. .	144
Offensive trades .. .. .	342
Outworkers .. .. .	19
Passages .. .. .	2063
Piggeries and stables .. .. .	191
Public Conveniences .. .. .	1863
Rats and Mice Act .. .. .	515
Shops (Shops Act, 1934) .. .. .	145
Smoke observations .. .. .	53
Water supply .. .. .	95
Workplaces .. .. .	699
Housing and nuisances .. .. .	4694
Housing Consolidated Regulations (1925) .. .. .	1729

#### NOTICES ISSUED.

Informal .. .. .	2060
Statutory <i>re</i> housing .. .. .	11
Statutory under other Acts .. .. .	10

#### SUMMARY OF DEFECTS REMEDIED.

Drains and gullies cleared (involving 552 houses) .. .. .	1473
Ditches cleansed .. .. .	1
Footpath channels fixed .. .. .	6
New drains constructed .. .. .	12
Drains repaired .. .. .	7
New gullies provided .. .. .	20
New gully covers fixed .. .. .	93
New inspection chambers constructed .. .. .	2
New inspection chamber covers fixed .. .. .	11
Inspection chambers reconstructed .. .. .	1



New wash hand basin fixed	..	..	1
Chemical closet provided	..	..	1
New ventilation shaft fixed	..	..	1
Water closets cleared	..	..	68
New water closet basins fixed	..	..	39
Water closet cisterns repaired	..	..	93
Water closet water service pipes repaired			102
Water closet roofs repaired	..	..	42
Water closet walls and ceiling plaster renewed	..	..	69
Water closet doors repaired	..	..	27
Water closet seats renewed	..	..	35
Water closet eaves gutters renewed	..	..	8
Water closet basin joints re-made	..	..	64
Water closet floors repaired	..	..	19
New urinals provided	..	..	2
New water closets provided	..	..	2
New scullery sinks fitted	..	..	14
New sink waste pipes fitted	..	..	2
Old drains sealed	..	..	1
Rain water fall pipes repaired	..	..	55
Soil pipe repaired	..	..	1
Sumps abolished	..	..	3
Yard taps repaired	..	..	10
Emergency orders obtained under section 48 Public Health Act, 1936	..	..	49

*Other Nuisances, etc.*

Passage paving renewed (adjoining houses)	393	50
New ashbins provided	..	716
Complaints received and investigated	..	1899
Verminous houses disinfested	..	153
Refuse accumulations removed	..	32
Rooms disinfested after infectious disease	..	405
Yard cleansed	..	1

*Offensive Trades.*

No. of Tripe boilers	..	..	4
„ Fat melters	..	..	5
„ Glue makers	..	..	1
„ Gut scrapers	..	..	2
„ Hide and Skin dealers	..	..	2
„ Fish meal makers	..	..	1
„ Fish curers	..	..	48

The following defects were noted during regular inspections by the Sanitary Inspectors and in most instances the necessary work completed with little delay :—

Limewashing required	..	..	9
Choked drains	..	..	2

Defective w.c.'s .. .. .	7
Dirty yard .. .. .	1
Defective floors .. .. .	5
Defective yard paving .. .. .	6
Defective eaves gutters .. .. .	4
Defective roofs .. .. .	3
New inspection chambers constructed .. .. .	2
New rain water pipes fixed .. .. .	2
Defective brickwork of walls .. .. .	2
Defective coppers .. .. .	2
W.c. not screened .. .. .	1
Dirty w.c.'s .. .. .	2
New w.c.'s constructed .. .. .	2
Dilapidated fittings .. .. .	1

During the year applications to establish the trades of hide and skin dealer and gut scraper were received. The Council granted the application of the gut scraper but refused that of the hide and skin dealer.

In consequence of section 108 of the Public Health Act, 1936 all the byelaws relating to offensive trades were revised, re-drafted and submitted for approval.

#### *Factories Act, 1937.*

This Act came into operation during 1938 and for record purposes all the statistics have been classified under the Factories Act, although the old Factory and Workshop Act was in force part of the year.

The following contraventions were noted and only five notices had not been complied with at the end of the year.

Want of cleanliness (Limewashing, etc.)	53
Inadequate ventilation .. .. .	1
Defective floors .. .. .	10
Insufficient sanitary accommodation .. .. .	5
Unsuitable or defective w.c.'s .. .. .	12
W.c.'s not separated for sexes .. .. .	2
Other matters .. .. .	68

#### Common Lodging Houses.

There were 4 registered common lodging houses in the borough, and these were generally maintained in good order. Three men were registered as deputy keepers.

Byelaws relating to Seamen's Lodging Houses were approved by the Board of Trade and became operative during 1938.

#### Offices.

The visits paid to offices in the Borough did not necessitate any action being taken under the provisions of the Public Health Act, 1936. There are no basement offices in Grimsby.



Rag flocks are not made in the borough. Four informal samples submitted to the Public Analyst were found to be genuine after analysis.

Rag Flock Acts, 1911 & 1928.

The use of rag flocks in upholstering is gradually declining and a legal standard of cleanliness is now required to apply to all stuffing materials used in connection with the trade of an upholsterer.

Twelve inspector's samples were examined by the Public Analyst. Three were taken at a farm and the remainder at retailer's shops.

Fertilizers and Feeding Stuffs Act, 1926.

Nine samples were genuine :—1 fish meal, 2 barley meal, 1 sussex ground oats, 1 bran, 1 linseed cake, 1 pig meal, 1 Egyptian cotton cake, 1 wheatings.

The three samples not genuine were :—

Bone Meal—13·5% deficient in phosphoric acid.

Flaked Maize—2·35% deficient in oil.

Basic Slag—2·0% deficient in phosphate content.

Official follow-up samples were taken in 1939.

As far as this department was concerned these premises were tolerably maintained throughout the year.

Places of Public Entertainment.

During the 145 inspections made in 1938 it was found that the requirements of the part of the Act administered by the Health Department were satisfied except where the following defects were noted which were remedied after service of informal notices :—

Shops Act, 1934.

Defective w.c.'s .. ..	5
No w.c. accommodation..	1
Dirty walls .. ..	1

There is no camping site within the borough. Usually persons wishing to camp, pass through Grimsby to get to the open spaces nearer the coast at Cleethorpes or in the Grimsby Rural District.

Camping Sites.

9,304 rats were brought to the Corporation destructor in 1938, nearly 3,000 less than last year. The inspections made by sanitary inspectors to rat-infested premises increased to 515. In consequence of advice and informal notices many defects were remedied and preventive measures adopted.

Rats & Mice (Destruction) Act, 1919.

The usual local activities associated with the National Rat Week held in November were undertaken by the Health Department.

Smoke  
Abatement.

Smoke emissions from factory chimneys were observed by the sanitary inspectors. Offenders were interviewed and in some cases written notices sent. Usually these had a salutary effect.

Below is a summary of the findings on analysis of the contents of soot gauge in Grant Thorold Park.

1938.

Month.	Undissolved Matter (tons per sq. mile).	Dissolved Matter (Tons per sq. mile).	Total Solids (Tons per sq. mile).
January ..	4.5	4.92	9.42
February ..	4.82	5.379	10.20
March ..	6.566	6.496	13.06
April .. ..	5.624	5.309	10.93
May .. ..	7.62	5.28	12.90
June .. ..	15.51	9.85	25.36
July .. ..	4.09	7.33	11.42
August ..	4.19	6.67	10.86
September ..	5.65	9.05	14.70
October ..	3.423	8.453	11.876
November ..	5.03	6.50	11.53
December ..	3.53	12.30	15.83

As the soot gauge was only fixed in November, 1937, it is not possible to make any comparisons with previous records.

Swimming  
Baths.

The two swimming baths in the borough are :—

Orwell Street Public Baths—45,000 gallons capacity.

Wintringham Secondary School—22,000 gallons capacity.



14 samples of bath water were examined bacteriologically and the findings are summarised below :—

Premises.	B. Coli.	Strepto- cocci.	B. Enteri- tidis Sporogenes	Clostri- dium. Welchii.	Date.
Orwell Street	Absent 100 c.c.	Absent 100 c.c.	Absent 100 c.c.	—	16/6/38
do.	Absent 50 cc.	Absent 50 cc.	— —	Absent 40 cc.	23/6/38
do.	Absent 100 cc.	Absent 100 cc.	— —	Present 40 cc.	20/7/38
do.	Present 5 cc.	Present 5 cc.	— —	Present 40 cc.	5/8/38
do.	Present 10 cc.	Present 10 cc.	—	do.	15/8/38
do.	do.	do.	—	do.	23/8/38
do.	do.	do.	—	do.	15/9/38
do.	Present 5 cc.	Present 5 cc.	—	do.	19/10/38
Wintringham School	Present 100 cc.	Absent 100 cc.	Absent 100 cc.	—	16/6/38
do.	Present 10 cc.	Present 10 cc.	—	Present 40 cc.	6/8/38
do.	Present 5 cc.	Present 5 cc.	—	do.	15/8/38
do.	Present 10 cc.	Present 10 cc.	—	do.	23/8/38
do.	Present 50 cc.	Present 50 cc.	—	do.	15/9/38
do.	do.	do.	—	Absent 40 cc.	19/10/38

At both these baths the water was changed nightly, and a chlorine solution added.

As in previous years the bacterial content of the bath water was far from satisfactory. After the summer session had ended the Baths Committee installed a continuous filtration plant at the Orwell Street Baths.

During the year the Borough Council obtained a site for the erection of a modern swimming bath in Scartho Road, and the Education Committee had plans prepared for the erection of a new secondary school which will include an up-to-date swimming bath.

Eradication  
of Bed Bugs.

(1) No. of Council houses found to be infested	..	..	3
No. of other houses found to be infested	..	..	56
No. of Council houses disinfested	..	..	3
No. of other houses disinfested	..	..	56

## (2) Methods employed in freeing infested houses were :—

At badly infested premises when the Corporation workmen carried out the disinfestation, the walls were stripped of paper and the strippings burnt. Next the skirting boards, picture rails, architraves, etc., were removed by a joiner, and as he did this work the disinfestor immediately sprayed a solution on to the materials and into the crevices. Later the joiner used a blow lamp in the crevices and on the materials before the woodwork was re-fixed. Owners were charged with the cost.

In light infestations spraying was found to be effective, without the removal of much woodwork.

The insecticides used for spraying by the Corporation were "Deodex" supplied by the Lowes Consolidated Chemicals, Ltd., London, S.E. 15, and "Klex" supplied by Batty & Co., Hull.

Some private contractors and owners fumigated with sulphur and others with Cimex blocks.

(3) As the Sanitary Inspector made his detailed inspections of slum dwellings he noted the condition and the presence of vermin in the houses. Later he conferred with the officer in the Town Clerk's Department who arranges the tenancies of the Council Houses. Before removal took place the Housing Officer visited the slum dwelling and arranged for disinfestation of the contents. Upon removal the contents from the houses were freely sprayed with insecticide and the bedding passed through the steam disinfecting plant. When infested articles were of little or no value they were burnt.

During 1938 four houses in slum clearance areas were found to be verminous when the usual inspections were being made previous to removal to council houses and the contents were disinfested in each case.

(4) The Corporation disinfecting staff carried out the disinfestation of the contents of slum dwellings before removal to council houses.

(5) Before and after disinfestation the Sanitary Inspectors and disinfectors instruct the tenants how to maintain their houses free from vermin. The housing officer in the Town Clerk's Department is responsible for the supervision of re-housed slum-dwellers on the Council's housing estate.



At every school in the borough a satisfactory water supply was available, supplied by the Grimsby, Cleethorpes and District Water Board. Schools.

The sanitary accommodation and washing facilities at the older schools require modernizing.

No school was closed for infectious disease during the year.

Except for minor improvements and renovations there has been no change relating to the public conveniences in the borough during 1938. Public Conveniences.

The erection of the new public conveniences for males and females in Humber Street was in progress at the end of the year.

It was found in the course of the investigation that the  
 and various reports to the Committee, and that the

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## SECTION D. HOUSING.

The number of houses owned by the Government during the year

was 287.

184 houses were demolished as a result of their condition

and 3 houses were destroyed in consequence of fire.

Demolished and destroyed houses were demolished for public purposes.

During the year

The following information is being furnished for your information:

Houses were during the year

Year	Number of houses	Number of houses	Number of houses
1941	287	184	3
1942	287	184	3

## SECTION D. HOUSING.

## SECTION D.—HOUSING.

The number of houses erected in the Borough during the year was 285.

164 houses were demolished as a result of slum clearance, 3 houses were demolished in anticipation of formal notice of slum clearance, and 4 other houses were demolished for sundry business purposes.

Slum  
Clearance.

The following information is given regarding slum clearance :—

## ORDERS MADE DURING THE YEAR.

Name of Clearance Order.	No. of Houses	Order made	Local Enquiry	Result
Pasture Street, No. 44 ..	4	28 3 38	7 9 38	Confirmed.
Burgess Street, No. 45 ..	6	do.	do.	Confirmed except for 1 house demolished before Enquiry.
New Dock Street, No. 46 ..	20	do.	do.	Confirmed.
Kent Street, No. 47 ..	8	do.	do.	do.
Kent Street, No. 48 ..	2	do.	do.	do.
Albert Street, No. 49 ..	30	do.	do.	Confirmed except for 6 houses for which the Local Authority accepted a Reconditioning Scheme.
Nelson Street, No. 50 ..	8	do.	do.	Confirmed.
Albion Street, No. 51 ..	4	do.	do.	Local Authority accepted a Reconditioning Scheme for 3 houses. Other house dealt with under Sec. 11.
Victor Street, No. 52 ..	12	do.	do.	Confirmed for 3 houses. Local Authority accepted Reconditioning Scheme for remainder.
Victoria Street, No. 53 ..	5	23 5 38	18 10 38	Confirmed.
Cressey Street, No. 54 ..	6	do.	do.	do.
Burgess Street, No. 55 ..	17	do.	do.	do.
King Edward Street, No. 56 ..	6	do.	do.	do.



Name of Clearance Order.	No. of Houses	Order made	Local Enquiry	Result.
King Edward Street, No. 57 ..	2	23 5 38	18 10 38	Confirmed.
Burgess Street, No. 58 ..	6	do.	do.	Confirmed except for 1 house—excluded.
Kent Street, No. 59 ..	8	do.	do.	Confirmed for 3 houses. 1 house excluded and a Reconditioning Scheme accepted for 4 houses.
Kent Street, No. 60 ..	4	do.	do.	Confirmed.
Burgess Street, No. 61 ..	5	25 7 38	Pending at end of year.	
Queen Street, No. 62 ..	11	do.	do.	
Havelock Street, No. 63 ..	2	do.	do.	
Havelock Street, No. 64 ..	3	do.	do.	
Whitgift Street, No. 65 ..	2	do.	do.	
King Edward Street, No. 66 ..	3	do.	do.	
Eastgate, No. 67 ..	7	do.	do.	
New Street, No. 68 ..	3	do.	do.	
George Street, No. 69 ..	8	do.	do.	
Redhill, No. 70 ..	5	do.	do.	
Redhill, No. 71 ..	2	do.	do.	
Deansgate, No. 72 ..	2	do.	do.	
Albion Street, No. 73 ..	5	do.	do.	
Brighowgate, No. 74 ..	2	do.	do.	

#### INDIVIDUAL UNFIT HOUSES.

The medical officer of health represented 5 houses under Section 11 of the Housing Act, 1936, and the Local Authority made Demolition Orders in every case.

Premises.	Considered by Local Authority.	Demolition Order made.
16 Holme Street ..	20 6 1938	27 6 1938
Back 16 Holme Street ..	do.	do.
44 Louth Road ..	19 12 1938	30 12 1938
Cottage, Colebrook's Farm, Scartho ..	do.	do.
109 Albion Street ..	do.	do.

The following table shows the number of houses demolished during the year under slum clearance :—

#### CLEARANCE ORDERS.

Name of Order.	No. of Houses.	
	Total on Area.	Demolished 1938.
Burgess Street, No. 10—1936 ..	11	3
Berry's Buildings, No. 17—1936 ..	8	8
King Edward Street, No. 18—1936 ..	3	3
Hope Street, No. 22—1936 ..	31	3
Strand Street, No. 23—1936 ..	25	1
Grime Street, No. 24—1936 ..		
(Compulsory Purchase Order) ..	2	2
King Edward Street, No. 25—1937 ..	9	9
do. No. 26—1937 ..	3	3
do. No. 27—1937 ..	3	3
do. No. 28—1937 ..	2	2
do. No. 29—1937 ..	3	3
do. No. 30—1937 ..	15	14
do. No. 31—1937 ..	3	3
do. No. 32—1937 ..	14	14
do. No. 33—1937 ..	9	9
do. No. 34—1937 ..	3	3
do. No. 35—1937 ..	6	6
do. No. 36—1937 ..	5	5
Burgess Street, No. 37—1937 ..	5	5
Cressey Street, No. 38—1937 ..	2	2
Burgess Street, No. 39—1937 ..	2	2
King Edward Street, No. 41—1937 ..	8	8
do. No. 42—1937 ..	19	19
Burgess Street, No. 43—1937 ..	22	22

#### INDIVIDUAL UNFIT HOUSES.

13, 15 Lower Spring Street ; 127, 127a Strand Street ; 111 King Edward Street ; 146, 1, 2, 3 Back 146 King Edward Street ; 16, Back 16 Holme Street : " Victoria," Old Clee.

#### HOUSES DEMOLISHED IN ANTICIPATION OF FORMAL NOTICE OF SLUM CLEARANCE.

No. of houses demolished during 1938—3.

Total No. of houses demolished since the inception of the slum clearance programme—461.

I am indebted to Mr. John G. Watson, Chief Sanitary Inspector, for the remainder of the report of this section :—



## HOUSING STATISTICS.

## 1.—INSPECTION OF DWELLINGHOUSES DURING THE YEAR.

(1) (a)	Total number of dwellinghouses inspected for housing defects (under Public Health or Housing Acts) .. ..	1502
(b)	Number of inspections made for the purpose .. ..	5555
(2) (a)	Number of dwellings (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 .. ..	135
(b)	Number of inspections made for the purpose .. ..	1729
(3)	Number of dwellings found to be in a state so dangerous or injurious to health as to be unfit for human habitation	Nil
(4)	Number of dwellinghouses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation .. ..	1481

## 2.—REMEDY OF DEFECTS DURING THE YEAR WITHOUT SERVICE OF FORMAL NOTICES.

Number of defective dwellinghouses rendered fit in consequence of informal action by the Local Authority or their officers .. .. .	989
--	-----

## 3.—ACTION UNDER STATUTORY POWERS DURING THE YEAR :—

(a)	Proceedings under sections 9, 10, and 16 of the Housing Act, 1936 :—	
(1)	Number of dwellinghouses in respect of which notices were served requiring repairs .. .. .	11
(2)	Number of dwellinghouses which were rendered fit after service of formal notices :—	
(a)	By owners .. .. .	10
(b)	By local authority in default of owners .. ..	Nil
(b)	Proceedings under Public Health Acts :—	
(1)	Number of dwellinghouses in respect of which notices were served requiring defects to be remedied .. .. .	10
(2)	Number of dwellinghouses in which defects were remedied after service of formal notices :—	
(a)	By owners .. .. .	Nil
(b)	By local authority in default of owners .. ..	10
(c)	Proceedings under sections 11 and 13 of the Housing Act, 1936 :—	
(1)	Number of dwellinghouses in respect of which Demolition Orders were made .. .. .	5
(2)	Number of dwellinghouses demolished in pursuance of Demolition Orders .. .. .	12

(d) Proceedings under section 12 of the Housing Act, 1936 :—

- |   |     |
|---|-----|
| (1) Number of separate tenements or underground rooms in respect of which Closing Orders were made .. ..  | Nil |
| (2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit .. .. | Nil |

4.—HOUSING ACT, 1936—PART IV.—OVERCROWDING :—

- |  |      |
|--|------|
| (a)— (i) Number of dwellings overcrowded at the end of the year  | 36   |
| (ii) Number of families dwelling therein .. ..   | 36   |
| (iii) Number of persons dwelling therein .. ..   | 288  |
| (b)— Number of new cases of overcrowding reported during the year .. ..  | 2    |
| (c)— (i) Number of cases of overcrowding relieved during the year .. ..  | 105  |
| (ii) Number of persons concerned in such cases .. ..   | 817  |
| (d)—Particulars of any cases in which dwellinghouses have again become overcrowded after the local authority has taken steps for the abatement of overcrowding | None |
| (e)—Again private property owners have co-operated with the Local Authority by permitting tenants to exchange houses with a view to abating overcrowding.      |      |

The following statement indicates the work done to effect improvements under the Acts and Regulations mentioned :—

	Public Health Acts and Housing Acts.	Housing Consolidated Regulations, 1925.
Airbricks inserted under floors .. ..	19	2
Chimney pots fixed .. ..	17	1
Chimney stacks re-built and re-pointed .. ..	15	16
Damp proof courses renewed .. ..	13	4
Doors and windows repaired .. ..	59	58
Doorsteps renewed .. ..	1	5
Firebacks and firegrates renewed .. ..	115	50
Eaves gutters and downspouts repaired .. ..	143	74
Fences renewed .. ..	14	—
Floors repaired .. ..	149	103
Handrails re-fixed .. ..	30	1
Plasterwork renewed .. ..	135	212
Rain water pipes repaired .. ..	41	—
New ranges fixed .. ..	7	3



				Public Health Acts and Housing Acts.	Housing Consolidated Regulations, 1925.
New windows fixed	..	..	..	.. 3	—
New staircase fixed	..	..	..	.. 1	—
Roofs repaired	..	..	..	.. 268	73
Sash cords renewed	..	..	..	.. 170	—
Staircases repaired	..	..	..	.. 2	61
Skirting boards renewed	..	..	..	.. 13	16
Walls rendered in cement	..	..	..	.. 11	—
Walls repaired or re-pointed	..	..	..	.. 173	26
Window sills renewed	..	..	..	.. 2	—
Washing coppers renewed	..	..	..	.. 14	7
Washing copper brickwork repaired	..	..	..	.. 30	14
Yard and path pavings repaired	..	..	..	.. 177	62
Yard gates and posts repaired or renewed	..	..	..	.. 27	32
Door frames renewed	..	..	..	.. —	106
Doors renewed	..	..	..	.. —	24
Pantries ventilated	..	..	..	.. —	3
Scullery sinks fitted	..	..	..	.. —	19
Ventilation shafts repaired	..	..	..	.. —	5
W.c. seats repaired	..	..	..	.. —	13
W.c. cisterns repaired	..	..	..	.. —	2
W.c. roofs repaired	..	..	..	.. —	24
W.c. water service pipes repaired	..	..	..	.. —	2
New w.c. basins fixed	..	..	..	.. —	5
New gully covers fitted	..	..	..	.. —	3
Yard walls re-built	..	..	..	.. —	5





## SECTION E. INSPECTION AND SUPERVISION OF FOOD.

The following regulations have been adopted by the Board of Health, and are hereby published for the information of the public. The Board of Health is composed of the Mayor, the Board of Aldermen, and the Board of Supervisors. The Board of Health is authorized to make and enforce such regulations as may be necessary for the preservation of the health of the city. The Board of Health is also authorized to make and enforce such regulations as may be necessary for the preservation of the health of the city. The Board of Health is also authorized to make and enforce such regulations as may be necessary for the preservation of the health of the city.

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# SECTION E.—INSPECTION AND SUPERVISION OF FOOD.

The following information has been supplied by Mr. John G. Watson, Chief Sanitary Inspector :—

Milk Supply.

The inspections of cowsheds and dairies and the sampling of milk in the borough were carried out by the sanitary inspectors.

The clinical examination of animals in the Grimsby cowsheds was performed by veterinary surgeons of the Ministry of Agriculture and Fisheries. During the year six milk cows were found to be tuberculous and were slaughtered under the provisions of the Tuberculosis Order.

Milk and Dairies Order, 1926.

The general standard of cleanliness at the registered premises has been good throughout the year with a few exceptions.

The following figures are of interest :—		1937.	1938.
Number of wholesale purveyors on register	..	65	66
Number of milkshops and retail purveyors on register	.. .. .	567	646
Number of bottled-milk shops on register	..	215	240
Number of bottled-milk purveyors on register	..	36	40
INSPECTIONS—Cowsheds	.. .. .	..	112
Dairies and milkshops	.. .. .	..	901

Milk (Special Designations) Order, 1936.

The number of licences in operation during the year under this Order were :—

Dealers in Tuberculin Tested Milk	.. .. .	4
Producers of Accredited Milk	.. .. .	7
Dealers in Accredited Milk	.. .. .	8
Producers of Pasteurised Milk	.. .. .	6
Dealers in Pasteurised Milk	.. .. .	3

Supplementary licenses :—

Accredited Milk	.. .. .	2
-----------------	---------	---

Seventy two samples of designated milk were submitted for examination during 1938 and the results are summarised below :—

	No. of Samples.	Complying.	Not Complying.
<i>Bacteriological Examinations.</i>			
Pasteurised Milk	.. .. 24	24	—
<i>Methylene Blue Tests.</i>			
Accredited Milk	.. .. 36	26	10
<i>Phosphatase Tests.</i>			
Pasteurised Milk	.. .. 12	10	2

The producers of the milk which did not comply with the statutory requirements were given written warnings. In one case, a producer of Accredited Milk appeared before the Health Committee to show cause why his licence should not be revoked. The Committee admonished him, and further samples taken from his farm were found to be satisfactory. The examination of follow-up samples in the other cases proved them to comply with the order.

Late in the year samples of Pasteurised Milk were taken for the phosphatase test to be applied which reveals whether the milk has been properly pasteurised or not.



One licence holder installed a more up-to-date plant during 1938, and two more licence holders have indicated that it is their intention to install additional plant so that the output of pasteurised milk could be increased, in one case by 200%.

The inspections made at food premises during the year were as follows :—

Bakehouses .. .. .	271
Fish curing houses .. .. .	341
Fishmonger's shops .. .. .	124
Food preparing premises .. .. .	350
Fried fish shops .. .. .	343
Greengrocer's shops .. .. .	667
Grocer's shops .. .. .	48
Ice cream makers and vendors .. .. .	439
Markets .. .. .	331
Meat shops and stalls .. .. .	6170
Restaurants .. .. .	3
Slaughterhouses .. .. .	5970

Meat and  
other Foods.

The table set out below gives information relating to the slaughter of animals for food and inspection of meat at the 31 private slaughterhouses in the Borough.

#### CARCASES INSPECTED AND CONDEMNED.

	Cattle, exclud- ing Cows.	Cows.	Calves.	Sheep and Lambs.	Pigs.
Number killed (if known) ..	—	—	—	—	—
Number inspected .. ..	2231	844	371	7446	11073
<i>All diseases except Tuberculosis</i>					
Whole carcasses condemned ..	1	5	3	15	17
Carcasses of which some part or organ was condemned ..	131	50	3	44	242
Percentage of the number inspected affected with disease other than tuberculosis .. ..	5.91%	6.51%	1.65%	0.79%	2.34%
<i>Tuberculosis only.</i>					
Whole carcasses condemned ..	3	17	—	—	7
Carcasses of which some part or organ was condemned ..	156	150	1	—	390
Percentage of the number inspected affected with tuberculosis .. ..	7.12%	19.78%	0.26%	—	3.58%

Other food condemned included :—

2478 lbs. imported meat.	11 boxes pears.
84 lbs. English meat.	1 box water cress.
100 lb. fish.	16 boxes dates.
194 rabbits.	8 stones apples.
1 keg pigs' feet.	1565 tins fruit.
4 kegs pigs' maws.	1042 tins milk.
4 stones flour.	306 tins meat.
385 lbs. confectionery.	300 tins fish.
24 lbs. grapes.	17 cases miscellaneous tinned
8 lbs. bacon	goods.

All these condemnations were made owing to decomposition and unsoundness.

Slaughter-houses.	No. on Register January 1st, 1938 .. ..	31
	No. on Register December 31st, 1938 .. ..	31
	No. of Slaughtermen's licences on Register .. ..	147
	No. of Slaughtermen's licences granted 1938 .. ..	7
	No. of Slaughtermen's licences renewed 1938 .. ..	10
	No. of breaches of Slaughterhouse Byelaws .. ..	2
	No. of defects remedied .. ..	2
	Breaches of Public Health Meat Regulations .. ..	2
	Breaches of Slaughter of Animals Act, 1936 .. ..	5

One licensed slaughterman was prosecuted for failing to use a humane killer when slaughtering pigs. The magistrates fined him £1.

There is no system of meat marking in operation.

Meat Shops, Stalls, Vehicles and Food Premises.	Regular attention was paid to cleanliness of premises and the purity of the food supply by frequent inspections at meat shops, stalls and other food preparing premises.
---	--

During the summer it was necessary to seize diseased meat in two butchers' shops. Legal proceedings were taken and the butchers convicted. One was fined £21 and the other £3 3s. 0d.

There was no case of food poisoning notified during 1938.

Bakehouses.	The following defects were noted during inspections at the 85 bakehouses in the borough. Later these defects were remedied.
-------------	---

Walls required cleansing .. ..	24
Defective w.c. .. ..	1
Refuse accumulation .. ..	1
Defective roofs .. ..	3
Choked drains .. ..	2
Defective ceiling .. ..	1
Defective floor.. ..	1



With a few exceptions these premises have been kept satisfactorily during the year. The defects found were remedied without the necessity of statutory action being taken.

Fish Frying  
Premises.

New byelaws were drafted during 1938.

Defects found :—

Defective roofs .. .. .	2
Defective eaves gutters .. .. .	2
Choked drain .. .. .	1
Defective floors .. .. .	4
Defective yard paving .. .. .	1
Defective woodwork .. .. .	2
No ventilation .. .. .	1
Defective refuse bins .. .. .	2
Refuse accumulations .. .. .	2
Limewashing required .. .. .	10
Dirty pans .. .. .	2

Premises where ice cream was made and places where it was sold were visited during the season by the sanitary inspectors, and the following defects noted and later remedied :—

Ice Cream.

Limewashing required .. .. .	1
Defective yard paving .. .. .	1
Choked drain .. .. .	1
Dirty methods .. .. .	1
Dirty container .. .. .	1
Refuse accumulation .. .. .	1

Specific legislation is still required for a more rigorous control of the manufacture and sale of ice cream.

234 samples were obtained for analysis under this Act during 1938 and 14 or 5.9% were found to be adulterated. A detailed summary follows :—

Food and  
Drugs  
(Adultera-  
tion) Act,  
1928.

Article	Number taken	Official	Informal	Genuine	Adulterated
Almonds (Ground)	2	—	2	2	—
Arrowroot ..	2	—	2	2	—
Baking Powder ..	2	—	2	2	—
Bicarb. of Soda ..	2	—	2	2	—
Blanc Mange P'dr.	2	—	2	2	—
Boracic Acid ..	2	—	2	2	—
Butter .. ..	5	—	5	5	—
Cheese .. ..	8	—	8	8	—
Chicory .. ..	1	—	1	1	—
Cocoa .. ..	4	—	4	4	—
Coconut (Desiccated)	2	—	2	2	—
Coffee .. ..	2	—	2	2	—
Condensed Milk ..	3	—	3	3	—
Corn Flour ..	3	—	3	3	—

Article.	Number taken.	Official.	Informal.	Genuine.	Adulterated.
Cream .. ..	4	—	4	4	—
Custard Powder	2	—	2	2	—
Ginger (Ground) ..	2	—	2	2	—
Ground Rice ..	2	—	2	2	—
Icing Sugar ..	2	—	2	2	—
Jam .. ..	2	—	2	2	—
Lard .. ..	4	—	4	4	—
Lemon Cheese ..	4	—	4	4	—
Marmalade ..	2	—	2	2	—
Margarine ..	4	—	4	4	—
Milk (Raw) ..	154	16	138	140	14
Mincemeat ..	2	—	2	2	—
Pepper .. ..	2	—	2	2	—
Sausage .. ..	4	—	4	4	—
Tinned Peas ..	4	—	4	4	—
	234	16	218	220	1

Particulars of the adulterated samples are given below :—

Sample No.	Nature of Sample.	Particulars of Adulteration.	Result.
8	Raw Milk	6.6% deficiency in fat	Official samples later—genuine.
9	(Informal) do.	6.6% „ „	do.
14	do.	13.3% „ „	do.
21	Raw Milk (Formal)	7% „ „	Warning letter. Follow-up sample genuine.
24	Raw Milk (Informal)	15.0% „ „	Two official samples later—genuine.
83	do.	11.7% „ „	Official sample later—genuine.
114	do.	10% „ „	do.
130	do.	3% „ „	Two later samples genuine.
163	do.	6.7% „ „	Official samples later—genuine.
164	do.	3.5% added water	Follow up sample to be taken— January, 1939.
174	do.	5% deficiency in fat	Later sample—genuine.
213	do.	2.3% added water	do.
227	do.	6.6% deficiency in fat	Follow up sample to be taken— January, 1939.
170	do.	3.7% deficiency in fat	Warning letter. No doubt due to improper stirring.



Three samples of full cream sweetened condensed milk were taken and found to be satisfactory.

No action was taken under the Artificial Cream Act 1929, and the Public Health (Dried Milk) Regulations 1923 and 1927.

Public Health (Condensed Milk) Regulations 1923 & 1927.

During the year 200 samples were analysed for the presence of preservative and the various articles sampled were all found to be free from preservatives or when used, within the required limit.

Public Health (Preservatives, etc., in Food) Regulations, 1925-27.

Butter	5	Cheese	8	Condensed Milk	3
Cream	4	Jam	2	Lard	4
Lemon Cheese	4	Marmalade	2	Margarine	4
Milk (Raw)	154	Mincemeat	2	Sausage	4
Tinned Peas	4				

Chemical analysis of food and water was undertaken by the Borough Analyst, Capt. J. A. Foster, F.I.C., F.C.S., 23 Chapel Lane, Hull.

Chemical & Bacteriological Examination of Food.

Bacteriological examinations of food and water were carried out at the Grimsby and District Hospital.

Dr. Sheather of Wroxton, Chorleywood, Herts., examines biological specimens.

A certain amount of educational propaganda is undertaken by articles contributed by the medical officers to the local edition of "Better Health" which has a circulation of 2,000. The ex-Empire Marketing Board frames were also used to display the posters of the Central Council for Health Education.

Nutrition.

The superintendent health visitor has been able to include in her mothercraft lectures some elementary instruction in dietetics combined with cookery demonstrations.

The position in Grimsby can best be described by reference to the report on nutrition which will be found on pages 140-146 in the section referring to the School Medical Service.

No action was taken under the Public Health (Shell Fish) Regulations, 1934, or the Public Health (Cleansing of Shell Fish) Act, 1932.

Shell Fish (Molluscan).

There are no layings in the district, but supplies of shell fish are received in Grimsby from the following sources:—

*Oysters*.—Whitstable Natives. Imported from Holland, re-laid at Whitstable.

*Blue Points*. Imported from America direct in cold weather, but in warm weather the oysters are landed at Ireland and then sent to England as required.

*Mussels*.—Boston, Morecambe, Ireland and Holland.

*Winkles*.—Cockburnspath, Berwickshire.

*Whelks*.—Taken 12 miles north east of Spurn.

*Cockles*.—Grainthorpe.

Public Health  
Department  
Washington  
D.C. 20540

These samples of fish were collected from the following sources:

The fish were taken from the following sources:

The fish were taken from the following sources:

The fish were taken from the following sources:

Public Health  
Department  
Washington  
D.C. 20540

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**SECTION F.**

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

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**SECTION F.—PREVALENCE OF, AND CONTROL OVER,  
INFECTIOUS AND OTHER DISEASES.**

General.

The incidence of notifiable diseases (other than tuberculosis) was as shewn below :—

Disease.	Total Cases Notified.	Cases admitted to Hospital.	Total Deaths.
Scarlet Fever .. .. .	185	149	—
Diphtheria .. .. .	126	119	3
Enteric Fever (including Paratyphoid)	1	1	—
Pneumonia .. .. .	47	11	45 all forms
Cerebro-spinal Fever .. .. .	1	1	1
Acute Poliomyelitis .. .. .	17	15	1
Acute Polioencephalitis .. .. .	1	1	—
Encephalitis Lethargica .. .. .	1	—	1
Ophthalmia Neonatorum .. .. .	31	4	—
Puerperal Pyrexia .. .. .	32	19	3
Erysipelas .. .. .	30	13	—
Chicken Pox .. .. .	911	8	—

No notifications were received in regard to small-pox, cholera, typhus fever, plague, or dysentery.

Table II. on page 179 gives an analysis of the total notified cases under various age groups and in Wards.

Table VIII. on pages 185, 186, 187 gives a comparison of the death-rates and case rates for certain infectious diseases.

Influenza is not notifiable unless complicated by pneumonia, so there is no means of knowing the incidence of this disease during the period under review. Two deaths were attributed to influenza.

It will be noted that the notification rate in regard to pneumonia continues to be most unsatisfactory, although this year the number of cases notified actually exceeds the number of deaths. Arrangements have been made to tighten up the machinery of receiving information from the school head teachers in respect to measles, whooping cough and chicken pox. All cases of measles and whooping cough are immediately visited by health visitors to ascertain whether there are any children under 5 in the house, and whether hospital accommodation is desirable.

Scarlet  
Fever.

One hundred and eighty-five notifications of scarlet fever were received, giving an attack rate of 2.00 compared with 2.41 for England and Wales. There were no deaths.

149 cases (80.5 per cent.) were removed to the Corporation Hospital for treatment.



It is not yet appreciated by the public what a change has taken place in this disease in recent years, for it is now relatively mild in character in most cases. There is no reason now why cases of scarlet fever should not be nursed at home, provided there is sufficient isolation accommodation, and other children are not being kept away from school.

As a routine practice cases are now discharged from hospital after the 28th day, and this has not led to any increase in the carrier rate.

It should be considered whether terminal disinfection should not be given up following cases of scarlet fever, a practice which has been discontinued by a number of local authorities without any untoward results.

The following table shows the comparative prevalence of scarlet fever over a period of years :—

INCIDENCE OF SCARLET FEVER IN VARIOUS YEARS.

1	2	3	4	5	6	7	8	9
Year.	Estimated Population.	Total No. of Cases Notified.	Attack Rate per 1,000 Population.	No. of Deaths Regd.	Mortality per 100 Cases Notified.	Mortality per 1,000 Population.	No. of cases treated in Hospital.	Percentage removed to Hospital.
1925	86,810	106	1.22	—	—	—	72	67.9
1926	87,190	157	1.80	—	—	—	119	75.7
1927	88,340	105	1.18	1	.95	.01	79	75.2
1928	90,270	98	1.08	—	—	—	69	70.4
1929	91,440	308	3.36	—	—	—	237	76.9
1930	91,440	320	3.49	1	.31	.01	244	76.2
1931	92,280	138	1.49	—	—	—	108	78.2
1932	92,250	67	0.72	—	—	—	51	76.1
1933	93,090	55	0.59	—	—	—	46	83.6
1934	93,700	183	1.95	—	—	—	136	74.3
1935	93,900	195	2.07	—	—	—	143	73.3
1936	93,690	211	2.25	1	0.47	0.01	154	72.9
1937	92,760	215	2.31	2	0.93	0.02	155	72.0
1938	92,320	185	2.00	—	—	—	149	80.5

There were 126 notifications of diphtheria, giving an attack rate of 1.36 compared with 1.58 for England and Wales. Diphtheria.

Three deaths occurred, giving a death rate of 0.03 compared with 0.07 for England and Wales. 119 cases (94.4 per cent.) were removed to the Corporation Hospital for treatment.

Only in a few county boroughs is the death rate lower than in Grimsby. The continued relative absence of the gravis strain is more remarkable in view of its presence in the neighbouring cities of Hull and Leeds. In one or two instances have moderate cases of diphtheria exhibited the gravis strain, but it is of epidemiological interest that it was of the Leeds variety.



It is highly desirable that where skilled nursing is not available every case of diphtheria should be admitted to hospital, in view of the possible sequelæ. Much larger doses of antitoxin, often intravenously, are given nowadays.

There is still a tendency among practitioners in the area to await bacteriological confirmation before making a diagnosis on clinical grounds.

Diphtheria antitoxin is supplied to practitioners free on demand for necessitous cases, but the word "necessitous" is liberally interpreted.

The table appended shows the prevalence of Diphtheria over a period of years:—

INCIDENCE OF DIPHTHERIA IN VARIOUS YEARS.

1 Year	2 Estimated Population.	3 Total No. of Cases Notified.	4 Attack Rate per 1,000 Population.	5 No. of Deaths Regd.	6 Mortality per 100 Cases Notified.	7 Mortality per 1,000 Population.	8 No. of Cases treated in Hospital.	9 Percentage removed to Hospital.
1925	86,810	88	1.01	2	2.27	.02	72	81.8
1926	87,190	78	0.89	—	—	—	67	85.8
1927	88,340	62	0.70	6	9.67	.06	47	75.8
1928	90,270	111	1.22	3	2.70	.03	88	79.2
1929	91,440	98	1.07	7	7.14	.07	73	74.4
1930	91,440	65	0.71	2	3.07	.02	50	76.9
1931	92,280	59	0.63	7	11.86	.07	43	72.8
1932	92,250	127	1.37	6	4.72	.06	109	85.8
1933	93,090	84	0.90	4	4.76	.04	72	85.7
1934	93,700	61	0.65	2	3.27	.02	57	93.4
1935	93,900	55	0.58	3	5.45	.03	53	96.3
1936	93,690	48	0.51	2	4.16	0.02	47	97.9
1937	92,760	86	0.92	5	5.81	0.05	82	95.3
1938	92,320	126	1.36	3	2.38	0.03	119	94.4

Diphtheria  
Immunisation.

The absence of any outbreak of diphtheria during the past few years in Grimsby ensures that there is a reasonably fertile soil for an outbreak, and therefore the necessity of pressing forward with diphtheria immunisation has been apparent.

During the year 455 school children and 142 pre-school children were immunised with the written permission of the parent or guardian by the staff of the health department. In addition the free provision of immunisation material to general practitioners in necessitous cases has been continued. All cases admitted to the children's block of the Corporation Hospital and all children under 12 years of age admitted to the Brighowgate Homes are also immunised as a routine on admission.



In every case three 1 c.c. doses of T.A.M. are given, usually at fortnightly intervals. Except in the cases of nurses at institutions no preliminary Schick test is carried out, but a certain amount of post-Schick testing is done. In no case so far has an immunised child developed even a bacteriological attack of diphtheria.

Measles serum is not used as a routine for either prophylaxis or attenuation although it has been used in exceptional cases on one or two occasions with serum obtained by courtesy from other local authorities.

Only one sporadic type of para-typhoid B. fever occurred during the year, and the case was admitted to the Corporation Hospital for treatment. The attack rate was therefore 0.01 per thousand of the population as compared with 0.03 for England and Wales. Enteric Fever.

In view of the relatively small number of cases during the past decade the table previously shewn is omitted.

The total number of notifications received was forty-seven—46 of acute primary pneumonia and one of influenzal pneumonia. Deaths registered from all forms of pneumonia numbered 45. Pneumonia.

Eighty cases were notified in 1937.

One case—a boy aged 8—was notified, which was removed to the Scartho Road Infirmary and terminated fatally. Cerebro-Spinal Fever.

Only one sporadic case occurred in 1937.

Early in August seventeen cases of poliomyelitis and one of polioencephalitis occurred in the borough. The cases were widespread throughout the town, and only in two cases in the extensive following up of contacts was there found to be any inter-relationship. This outbreak coincided with a similar outbreak in Cleethorpes and the surrounding district, and rapidly reached a peak within a fortnight. Like the Essex outbreak which occurred almost simultaneously it is an interesting bacteriological fact that there was a widespread outbreak of mild sore throat among the school children at the same time. It was not possible to pursue this matter further owing to the children being away from school due to the summer vacation and owing to the fact that apparently no animals suitable for inoculation were available in this country. All the cases with the exception of two were removed to the Corporation Hospital, where arrangements were made for a consultant physician and a consultant orthopaedic surgeon to see each case on admission and where necessary thereafter in order to assist the full-time officers of the department. Only the first sporadic case, which was discovered in the poor law institution, succumbed. The activities of the department were somewhat hindered by the interest displayed in the outbreak by a section of the national press. Acute Poliomyelitis.



The local authority were able to prevail on the Board of Education to grant temporary recognition to Weelsby Old Hall as a special school. The latter is a subsidiary hospital to the Grimsby and District Hospital, and the cases were transferred there early in October as soon as the international political situation was more settled. This temporary recognition for six months was afterwards extended by the Board of Education for a further period of six weeks.

It is considered that with efficient teamwork from the outset the end results achieved in this epidemic will stand comparison with similar outbreaks, but it must be borne in mind that the degree of paresis was in many cases not marked.

One particular case which was published in the national medical press led those in charge of the outbreak to believe that more faith could be placed on the value of some species of rocking stretcher rather than any other form of artificial respirator. *See also page 89.*

Puerperal  
Pyrexia.

There were notified 32 cases of puerperal pyrexia, giving a rate per thousand total births (*i.e.* live and still) of 19.20 as compared with 14.42 for England and Wales.

The department is now of opinion that this notification is being thoroughly carried out. When a case is nursed at home the services of a district nurse is offered by the local authority, but 19 of the cases notified were removed to hospital. It is very desirable as a general rule that those in whom the pyrexia is due to sepsis should be admitted to hospital at an early stage.

Erysipelas.

Thirty cases were notified, giving a case rate of 0.32 as compared with 0.40 for England and Wales. Thirteen cases were admitted to the Corporation Hospital for treatment. 14 cases were notified in 1937.

Ophthalmia  
Neonatorum.

Thirty-one cases were reported during the year, compared with 26 cases in 1937, and four cases were admitted to the Corporation Hospital for treatment. The services of a nurse from the District Nursing Association is offered by the local authority in all cases nursed at home.

Chicken  
Pox.

There were notified 911 cases of chicken-pox, compared with 302 in 1937. Eight cases were treated in the Corporation Hospital.

Small-Pox.

There were no cases of small-pox in Grimsby during 1938.

It is desirable that some national propaganda should be instituted pointing out the relative increased risk of encephalitis following primary vaccination if through carelessness or ignorance the latter is postponed to adult life.



The following table shews the Vaccination Officer's Returns Vaccination. for the last ten years :—

YEAR.	1929	1930	1931	1932	1933	1934	1935	1936	1937	1938
Births .. .. .	1696	1746	1634	1579	1609	1749	1656	1675	1512	1622
Successfully Vaccinated .. ..	482	507	503	413	408	439	443	497	422	444
Insusceptible of Vaccination .. ..	4	9	5	12	15	11	8	3	3	4
Had Small Pox .. .. .	—	—	—	—	—	—	—	—	—	—
Declarations of Conscientious objection	1118	1122	1025	1038	1072	1196	1113	1042	983	1022
Died Unvaccinated .. .. .	96	94	71	85	77	71	59	86	58	62
Removals transferred to other districts	15	13	15	32	25	27	21	14	11	17
Postponed by Medical Certificate ..	7	3	7	7	4	9	5	6	11	23
Removals to places unknown or which cannot be reached .. .. .	5	8	16	11	14	8	7	25	24	21
Temporarily unaccounted for ..	—	—	—	—	1	—	—	—	—	6
Percentage Vaccinated as to births ..	30·1	30·6	32·2	27·8	26·5	26·1	27·7	31·2	29·0	28·6
Successfully Vaccinated after Dec. of C.O. has been made .. .. .	1	9	2	1	—	—	—	1	—	—
Successful Vaccinations of cases born in other districts .. .. .	8	7	29	13	25	10	14	11	11	9

It will be noted that there has been relatively little change during the past six years in regard to the percentage of vaccinations in relation to births.

It should be appreciated by the parents of infants that vaccination, when not already carried out, is rendered necessary in adolescence should the person go abroad or seek to obtain various types of appointments.

#### NON-NOTIFIABLE INFECTIOUS DISEASES.

One hundred and fifty-eight cases—as compared with 481 in 1937—were brought to the notice of the Health Department by health visitors, school teachers, etc. The majority occurred in the early portion of the year. Every endeavour was made to educate the public regarding the dangerous character of this disease, and to admit to the Corporation Hospital all cases where there was risk of complications, bad housing, etc. During the year 20 cases were thus admitted. Measles.

Six deaths occurred during the year, equal to a death-rate from this cause of 0·06 compared with 0·04 for England and Wales.



Whooping  
Cough.

Ninety-one cases, as compared with 43 in 1937, were brought to the notice of the Department, and educational leaflets were distributed. Three cases were admitted to the Corporation Hospital for treatment. There were three deaths during the year, equal to a death-rate from this cause of 0.03 which is the same rate as that for England and Wales.

Grimsby  
Corporation  
Hospital.

I am indebted to the Matron, Miss E. D. Mackenzie, R.R.C., for the following report in respect to the isolation side of this hospital:—

SCARLET FEVER.—149 cases were admitted from the borough and 33 from outside the borough. There were no deaths. The average stay in hospital was 41.2 as compared with 30.4 days in 1937. Complications were:—rhinorrhœa 5; adenitis 12; impetigo 8; nephritis 1; otorrhœa 10; tonsillitis 3 and rheumatism 2.

DIPHTHERIA.—119 cases were admitted from the borough and 121 from outside the borough. There were nine deaths, three of which were Grimsby patients. This gives a case mortality of 4.6, as compared with 4.0 for 1937. The average stay in hospital was 50.7 as compared with 35.3 days in 1937. In only two cases was it necessary to perform tracheotomy. Complications were:—paresis 21; otorrhœa 4; myocarditis 5; broncho-pneumonia 1; rheumatism 1; impetigo 4; tonsillitis 2 and cystitis 1.

PUERPERAL CASES.—19 cases were admitted from Grimsby and 18 from outside areas. There were three deaths, all Grimsby cases. The number of complications in this type of case are many and varied, and blood transfusion has often to be resorted to.

ERYSIPELAS.—13 cases were admitted from the borough and 3 from outside areas. There were no deaths. The average stay in hospital was 24.3 days as compared with 21 days in 1937.

WHOOPING COUGH.—There were 3 cases admitted from the borough. No complications developed, and the average duration of stay was 20.3 days.

MEASLES.—20 patients were admitted from the borough and 3 from outside areas. Six cases developed pneumonia and four Grimsby cases died. The average duration of stay in hospital was 19.2 days as compared with 28.3 days in 1937. Six measles contacts were temporarily admitted from the Grimsby and District Hospital for observation.

OPHTHALMIA NEONATORUM.—Three cases were admitted from Grimsby and 3 from outside the borough. All made an uninterrupted recovery.

RUBELLA.—One Grimsby and two outside cases were admitted.

VARICELLA.—These cases are admitted when the home circumstances demand it and the disease is severe, requiring careful nursing. Eight Grimsby cases were admitted during the year. There were no deaths and no complications.



**PRIMARY PNEUMONIA.**—Five Grimsby cases were admitted, also two from outside the borough. There were two deaths, one being a Grimsby case.

**TYPHOID FEVER.**—No cases were admitted during the year, but 6 cases of para-typhoid B. were admitted, one being from within the Borough. There were no deaths or complications, and the average duration of stay was 53 days.

**MUMPS.**—One Grimsby case and two outside cases were admitted. There were no complications.

**POLIOMYELITIS AND POLIO-ENCEPHALITIS.**—16 cases were admitted from the borough and 14 from other areas. One Grimsby patient and two outside cases succumbed, several being admitted in a very advanced state. As already stated there was co-ordinated teamwork between the full-time officers of the local authority and the consultant physician and consultant orthopaedic surgeon, each case received a complete cytological examination of the cerebro-spinal fluid immediately on admission and a complete charting of the electrical reactions of the muscular system. Every case was put in plaster as soon as the consultants considered it desirable, and massage was commenced at a relatively early date. The cases were afterwards transferred to the annexe of the Grimsby and District Hospital at Weelsby Old Hall as already mentioned.

Other diseases admitted were :—cellulitis of neck 1 ; laryngitis 1 ; encephalitis 1 ; tonsillitis 1 ; gonorrhœa 1 ; tuberculosis 2 ; malaria (benign tertian) 1 ; hydrocephalus 1 ; cerebro-spinal meningitis 1 ; tuberculous meningitis 1 ; syphilis 1 ; actinomycosis 1 ; bronchitis 1 ; erythema 8 ; nothing abnormal deducted 12.

The work of this hospital has practically doubled during the past few years. Until about five years ago the average number of cases on the infectious diseases side was between three and four hundred, and it has rapidly grown. In 1937 three hundred and eighty-one Grimsby and 123 outside cases—a total of 504—were admitted, but in 1938 this figure rose to 442 Grimsby and 206 outside cases, making a total of 648.

**LABORATORY.**—This is in constant use for the routine examination of throat swabs and sputa. All cases of diphtheria and suspected throats have swabs taken on admission, and media are inoculated in the ward. The nurse then places the culture in the laboratory incubator.

There has been a large increase in the amount of laboratory work throughout the year. 4,316 diphtheria swabs were examined as compared with 2,576 in 1937, and 606 specimens of sputa as compared with 465.

All nurses on joining the staff are tested for their susceptibility to diphtheria and scarlet fever, and if necessary immunized.

Cancer.

The death-rate in Grimsby and in England and Wales is shown in the table below :—

## DEATH-RATE PER 1,000 FROM CANCER.

			<i>Grimsby.</i>	<i>England and Wales.</i>
1925	..	..	1·15	1·34
1926	..	..	1·35	1·36
1927	..	..	1·38	1·38
1928	..	..	1·33	1·42
1929	..	..	1·52	1·44
1930	..	..	1·43	1·45
1931	..	..	1·37	1·48
1932	..	..	1·38	1·51
1933	..	..	1·47	1·53
1934	..	..	1·80	1·56
1935	..	..	1·52	1·58
1936	..	..	1·55	1·62
1937	..	..	1·29	1·63
1938	..	..	2·00	1·66

The cancer mortality rate shews a remarkable upward rise for the year which cannot be adequately explained. It is partly due to the better diagnosis and subsequent death certification.

Cases requiring radium or deep X-ray therapy are either sent by the Grimsby and District Hospital to Leeds General Infirmary or by the Public Assistance Committee to the National Radium Centre at Sheffield.

As forecasted in my annual report for 1936, following the initiative of this county borough a regional scheme has been evolved and will be administered by a joint committee, and will make provision for deep X-ray therapy and radium treatment in Lincolnshire generally. The inception of this scheme has been somewhat delayed by financial considerations arising from the passing of the Cancer Act, but it is hoped during 1939 that the detailed machinery will be set in motion.



An analysis of the 185 deaths from cancer during 1938, shewing localisation, age and sex distribution is here given, the preponderance of males being noted :—

	5—		15—		25—		45—		65—		T <sup>1</sup>	
	M	F	M	F	M	F	M	F	M	F	M	F
Buccal cavity and pharynx ..	1	—	—	—	—	—	8	1	11	2	20	3
Digestive organs and peritoneum	—	—	—	—	2	—	17	9	39	19	58	28
Respiratory organs .. ..	—	—	—	1	1	—	5	1	4	2	10	4
Uterus .. .. .	—	—	—	—	—	1	—	13	—	5	—	19
Other female genital organs ..	—	1	—	—	—	—	—	2	—	2	—	5
Breast .. .. .	—	—	—	—	—	2	—	13	—	5	—	20
Male genito-urinary organs ..	—	—	—	—	1	—	4	—	2	—	7	—
Skin .. .. .	—	—	—	—	—	—	—	—	1	1	1	1
Other or unspecified organs ..	—	—	—	1	2	—	3	—	1	2	6	3
Totals ..	1	1	—	2	6	3	37	39	58	38	102	83

No action was taken in respect to the prevention of blindness or the treatment of persons suffering from any disease or injury to the eyes during the year, but a scheme was approved by the local authority under Section 176 of the Public Health Act, 1936, to come into operation at the beginning of 1939. Prevention of Blindness.

The welfare of the blind has been delegated by the Council to the Grimsby Society for the Blind, who do excellent work. The work under the Blind Persons Act is delegated to the Society.

No action was taken during 1938 under the Public Health (Prevention of Tuberculosis Regulations), 1925, relating to persons suffering from pulmonary tuberculosis employed in the milk trade, or under Section 172 of the Public Health Act, 1936, relating to the compulsory removal to hospital of persons suffering from tuberculosis. Tuberculosis

Tuberculosis. I am indebted to Dr. J. M. Vine, Tuberculosis Officer, for the following report :—

TABLE SHEWING NEW CASES AND MORTALITY DURING 1938 FOR THE  
COUNTY BOROUGH OF GRIMSBY.

Age Periods.	NEW CASES.				DEATHS.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
0—1	—	1	3	—	—	1	1	—
1—5	—	—	6	4	—	—	—	2
5—10	1	—	7	6	—	—	—	2
10—15	3	2	3	4	1	—	—	—
15—20	6	8	3	2	2	4	—	1
20—25	8	6	1	2	7	3	—	—
25—35	16	9	4	4	6	5	1	—
35—45	9	4	—	1	4	4	—	—
45—55	10	4	1	—	9	4	1	—
55—65	7	5	2	—	6	4	—	—
65 and upwards	2	—	—	—	1	—	—	—
Totals .. ..	62	39	30	23	36	25	3	5

TOTAL NEW CASES .. 154

TOTAL DEATHS .. 69

Death Rate per 1,000 of Population	Pulmonary ..	·66
" " "	Non-Pulmonary	·08
" " "	All Forms ..	·74

Included in the deaths were 5 cases that had not been previously notified as suffering from tuberculosis. The proportion of non-notified deaths therefore is 7·2, as compared with 7·9 per cent. in 1937.



The number of primary notifications received per 1,000 of the population, and the ratio of non-notified deaths for the past few years, are shewn below :—

Year.	Total primary notifications.	Notifications per thousand of population.	Ratio of non-notified Deaths.	Ratio of non-notified Deaths.	
				Pulmonary.	Non-Pulmonary.
1922	109	1.30	45%	—	—
1932	197	2.13	14%	6.6%	7.5%
1933	176	1.89	15%	5.6%	10.1%
1934	221	2.35	11%	7.0%	4.1%
1935	217	2.31	8%	5.4%	2.7%
1936	184	1.96	9%	4.7%	4.7%
1937	156	1.68	8%	8.0%	—
1938	154	1.66	7%	2.9%	4.3%

The number of non-notified deaths during 1938 was 5, being the same as in the previous year.

Medical Officers of the Department have notified 24 cases of tuberculosis, or 15.6 per cent. of the total notifications received during the year, as compared with 26 cases and 23 per cent. in 1937.

Some of the reasons why this figure remains at a high rate are as follows :—

- (a) Contact examinations have yielded 6 definite cases (as compared with 5 during 1937), and certain cases referred by Medical Officers of the Health Services have been found to be tuberculous.
- (b) The acute cases with no doctor in attendance, or only for a few days prior to death.
- (c) Definite cases of tuberculosis transferring to this area (there were 14 such cases during 1938) which are required to be re-notified under the Public Health (Tuberculosis) Regulations, 1930.

From the analysis of the 5 non-notified deaths during 1938, it is revealed that 4 cases were discovered in post mortem examination, leaving one death which is not satisfactorily accounted for as regards notification.

There is again a preponderance of deaths in persons who died within one year of notification. This is proved by the fact that out of a total of 60 pulmonary deaths during 1938, 30 persons died within one year of being notified to the Local Authority, apart from 2 un-notified pulmonary deaths during this period. A factor of paramount importance in the success of a tuberculosis scheme is the promptness with which notifications are received. There is still room for improvement in this direction. Too many cases are being notified when the disease is well-established and going into the advanced stages.

Tuberculosis  
Dispensary.

The following table, as required by the Ministry of Health, is a general analysis of the work done by the Tuberculosis Department in the Dispensary, Burgess Street, during the year :—

DIAGNOSIS.	PULMONARY.				NON-PULMONARY				TOTAL				Grand Total	
	Adults		Children		Adults		Children		Adults		Children			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
A.—NEW CASES examined during the year (excluding contacts):—														
(a) Definitely tuberculous	48	32	3	2	8	9	12	13	56	41	15	15		
(b) Diagnosis not completed	—	—	—	—	—	—	—	—	18	17	20	16	412	
(c) Non-tuberculous ..	—	—	—	—	—	—	—	—	70	71	34	39		
B.—CONTACTS examined during the year :—														
(a) Definitely tuberculous	—	1	1	1	—	—	2	1	—	1	3	2		
(b) Diagnosis not completed	—	—	—	—	—	—	—	—	2	5	18	14	162	
(c) Non-tuberculous ..	—	—	—	—	—	—	—	—	22	36	31	28		
C.—CASES written off the Dispensary Register as														
(a) Recovered	3	4	—	—	—	4	12	10	3	8	12	10	33	
(b) Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous) ..	—	—	—	—	—	—	—	—	132	155	109	111	507	



DIAGNOSIS.	PULMONARY.				NON-PULMONARY.				TOTAL.				Grand Total.
	Adults.		Children.		Adults.		Children.		Adults.		Children.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
D.—NUMBER OF CASES on Dis- pensary Regis- ter on Decem- ber 31st :— (a) Definitely tuberculous	163	134	18	14	34	36	91	76	197	170	109	90	566
(b) Diagnosis not completed	—	—	—	—	—	—	—	—	28	22	46	42	138

1. Number of cases on Dispensary Register on January 1st .. .. 751
2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years .. .. 14
3. Number of cases transferred to other areas, cases not desiring further assistance under the tuberculosis scheme, and cases "lost sight of" .. 26
4. Cases written off during the year as Dead (all causes) .. .. 69
5. Number of attendances at the Dispensary (including Contacts) .. 7675
6. Number of Insured Persons under Domiciliary Treatment on the 31st December .. .. Nil
7. Number of consultations with medical practitioners :—
  - (a) Personal .. .. 90
  - (b) Other .. .. 1609
8. Number of visits by Tuberculosis Officers to homes (including personal consultations) .. .. 387
9. Number of visits by Nurses or Health Visitors to homes for Dispensary purposes .. .. 1088
10. Number of :—
  - (a) Specimens of sputum, etc., examined .. .. 1125
  - (b) X-ray examinations made in connection with Dispensary work .. 1792
11. Number of "Recovered" cases restored to Dispensary Register, and included in A (a) and A (b) above .. .. 2
12. Number of "T.B. plus" cases on Dispensary Register on December 31st 187

NUMBER OF DISPENSARIES FOR THE TREATMENT OF TUBERCULOSIS (excluding Centres used only for special forms of treatment).

Provided by the Council	..	..	..	..	..	..	..	1
Provided by Voluntary Bodies	..	..	..	..	..	..	..	Nil

During the year 1,339 individual persons attended the Dispensary, making a total of 7,675 attendances, and the following table illustrates the progress the Department has made, particularly in recent years :—

Year.	Total number of persons who attended.	Number of new Cases.	Total Attendances.
1923	444	205	2,708
1930	775	414	4,620
1931	768	455	7,019
1932	839	483	8,641
1933	773	440	8,723
1934	854	526	8,605
1935	1230	560	9,570
1936	1407	493	7,644
1937	1341	691	7,171
1938	1339	588	7,675

Applications  
for  
Treatment.

During the year under review 154 cases were notified under the Public Health (Tuberculosis) Regulations, 1930, as suffering from tuberculosis (all forms), and it is very pleasing to record that each of these cases applied to the Local Authority for treatment. This is the first occasion that it has been possible to record such a state of affairs.

Classifica-  
tion of new  
cases.

(a) *Pulmonary Tuberculosis.*

During 1938 applications were received from 85 new cases of pulmonary tuberculosis, in addition to which must be added 3 definite cases discovered in the examination of contacts. In 1937, 99 new cases were found, also 3 definite contacts.

The following is the classification of these new cases, together with a comparison of the figures for previous years :—

	1938.	1937.	1936.	1935.	1934.
(1) T.B. Minus (Sputum negative or absent)	40	38	46	45	60
(2) T.B. Plus 1 (Positive early case)	12	16	8	14	12
(3) T.B. Plus 2 (Positive intermediate case)	15	28	22	33	24
(4) T.B. Plus 3 (Positive advanced case)	21	20	15	16	20

(b) *Non-Pulmonary Tuberculosis.*

There were 42 new cases diagnosed as suffering from non-pulmonary tuberculosis, in addition to which must be added 3 definite cases discovered in the examination of contacts. In 1937 30 new cases were found, also 2 definite contact cases.



The following table gives a comparison with previous years :—

Year.	Bones.	Abdomen.	Other Organs.	Peripheral Glands.	Total.
1930	21	11	12	19	63
1931	25	8	18	28	79
1932	8	12	11	23	54
1933	13	6	11	18	48
1934	15	10	2	60	87
1935	8	9	9	39	65
1936	13	10	16	17	56
1937	5	4	13	10	32
1938	13	5	9	18	45

Of the total cases who applied for treatment 87.5 per cent. of the new cases were seen before notification by the Tuberculosis Officer as to diagnosis. The figure for the previous year was 91.6 per cent. and is highly satisfactory, as it is considered if 80 per cent. of new cases are referred before diagnosis this is the index figure to work to.

The figure 87.5 per cent. refers only to cases actually seen in the Dispensary, Hospital or home consultation, and does not include a diagnosis made by the Tuberculosis Officer in the Pathological Laboratory before notification. If the quota obtained from these specimens were included the figure would be further increased.

The systematic examination of contacts continues. In the majority of cases the Tuberculosis Officer regards contacts as subjects for prolonged observation, especially where the primary case has an open lung lesion, and sees them at intervals over a period of many months at the Dispensary. Contacts.

There has been a decrease in the number of contacts examined this year—162 as compared with 258 for 1937. It is considered that at least two contacts should be examined for every positive case appearing during the year, and this figure has been nearly approached. It is the Dispensary nurse's duty to make home visits at intervals to all notified cases for the purpose, amongst others, of arranging for the examination of contacts at the Dispensary. The part-time services of a second temporary nurse are still available, releasing the senior nurse for two afternoons weekly.

A very close co-operation exists between the School Medical Service and the Tuberculosis Department.



The following table shews the number of contacts examined since 1930 :—

	Tuberculous.				Total Examinations.			
	Adults.		Children.		Adults.		Children.	
	M.	F.	M.	F.	M.	F.	M.	F.
1930	—	3	2	2	33	38	55	65
1931	—	3	1	—	25	80	35	31
1932	1	5	3	1	57	97	15	14
1933	3	5	2	5	22	59	16	25
1934	—	4	24	9	25	36	68	53
1935	1	2	5	9	25	34	58	51
1936	—	4	1	—	12	15	32	31
1937	1	2	1	1	49	61	73	75
1938	—	1	3	2	24	42	52	44

Home Visits.

The number of home visits paid by the Tuberculosis Officer was 387, as compared with 507 for the previous year. 90 visits were paid in consultation with the patient's private doctor, as compared with 113 in 1937, the remainder being periodical visits to cases who were unable to attend the Dispensary.

Dental Treatment.

During 1938, 7 patients were seen by the School Dentist at the Dental Clinic as compared with 19 in the previous year.

Tuberculous Ex-Servicemen.

Under the supervision of the Dispensary staff at the close of the year were seven soldiers or sailors whose disease was held by the Ministry of Pensions to be attributable to, or aggravated by, service in the Great War and a pension granted for disability. During the year one ex-serviceman received institutional treatment in the Corporation Hospital.

Nurse's Visits.

The senior Tuberculosis Nurse made a total of 1,088 visits during the year, as compared with 1,204 in 1937, to the homes of patients.

Bacteriological Laboratory Examinations.

During the course of the year 1,125 specimens were examined in the Council's laboratories for the presence of tubercle bacilli, this being the largest number examined in one year. The reports are handed to the doctors concerned within twenty-four hours, and this is very much appreciated by them. The following table shows the source from which the specimens were obtained :—

Tuberculosis Dispensary.		Specimens from Residential Institutions.				General Practitioners.	
		Corporation Hospital.		Infirmary Institution.			
Pos.	Neg.	Pos.	Neg.	Pos.	Neg.	Pos.	Neg.
33	202	293	313	5	40	27	212



The enormous growth in this important section can be seen from the following figures :—

<i>Year.</i>	<i>Positive.</i>	<i>Negative.</i>	<i>Total.</i>
1930	159	419	578
1931	229	490	739
1932	296	567	863
1933	226	640	866
1934	276	633	909
1935	283	658	941
1936	236	721	957
1937	238	827	1065
1938	358	767	1125

Artificial  
Pneumo-  
thorax  
Clinic.

During 1938 patients made a total of 419 attendances at this Clinic, as compared with 374 in 1937.

X-Ray  
Work.

The X-ray machine at the Dispensary continues to give fairly satisfactory work, though it is now eight years since it was installed and it is beginning to age. Every adult case and all children sent in as suspects are now X-rayed, in many cases several times. Non-pulmonary disease is treated by arrangement with the Grimsby and District Hospital at the Orthopædic Clinic and X-rays when required are taken on the Hospital apparatus.

We continue to carry out radiological examinations on behalf of the Lindsey County Council, the arrangement entered into in 1934 still holding good.

During 1938, 1,792 cases were X-rayed and reported upon, as compared with 1,458 in the previous year.

The following table shews an analysis of the work done in this Department during the year :—

	Adult Males.	Adult Females.	Boys.	Girls.	Total.
Screening :— Pulmonary	565	610	13	17	1205
Films :— Pulmonary	276	261	21	29	587
Totals	841	871	34	46	1792

1930	Total examinations	..	..	..	128
1931	"	"	..	..	153
1932	"	"	..	..	115
1933	"	"	..	..	150
1934	"	"	..	..	382
1935	"	"	..	..	1,202
1936	"	"	..	..	1,219
1937	"	"	..	..	1,458

## Housing.

During the year a total of 101 cases of pulmonary tuberculosis and 53 cases of non-pulmonary tuberculosis were notified, and the following interesting facts are noted from the primary home visit of the tuberculosis nurse :—

Only in one instance were the premises overcrowded, information concerning which was given to the Housing Department.

Of the 154 cases notified 104 cases were the first and only case in the family.

In 42 cases there had been a previous patient in the same family.

In 8 cases the circumstances of the patient were such that it was unnecessary to make a detailed investigation of home conditions.

Co-operation between the Tuberculosis Department and the Housing Department of the Local Authority is on a very satisfactory basis, and during the year several families have moved to improved homes on the Council's estates.

Ultra-Violet  
Ray  
Treatment.

The number of patients treated from the Tuberculosis Department since 1935, together with attendances made, is as follows :—

		1935.	1936.	1937.	1938.
Attendances	{ General Light	4,172	2,892	2,733	2,937
	{ Local Light	85	119	76	65
Patients treated	{ General Light	100	90	88	88
	{ Local Light	8	9	9	3

During the year three cases of lupus received treatment at a private clinic where a Krohmayer lamp is used for intensive local irradiation.

## GRIMSBY CORPORATION HOSPITAL. (TUBERCULOSIS SECTION).

The accommodation at the Sanatorium remains as in the past three years and the waiting list has persisted much as in 1937.

When accommodation has been overtaxed at the Sanatorium and there is necessity for urgent admission to hospital, cases have been received in the Scartho Road Infirmary and transferred to the Sanatorium at the first available opportunity.

## Orthopædics.

The hospital continues to be in demand for orthopædic work. Such cases are under the care of Mr. R. Guy Pulvertaft, F.R.C.S., who visits regularly and carries out necessary operations at the hospital. Since 1937 the balconies specially built for heliotherapy have been in constant use, making a valuable addition to the hospital facilities. On discharge from the hospital these cases attend Mr. Pulvertaft's out-patients at the Grimsby and District Hospital. The Corporation is responsible for the supply of surgical



appliances as ordered for these patients, and they are also watched over by the local Cripples' Guild. A welcome addition to the hospital staff has been the services of Miss Haig, orthopædic organiser, who has given much time instructing suitable cases in handicrafts. Considerable skill has been reached in the manufacture of hand-made toys, for which there is a ready market.

The following tables give particulars of admissions, discharges etc., of persons treated in the Grimsby Corporation Hospital :—

		1933.	1934.	1935.	1936.	1937.	1938.
<i>Admissions</i> :—	(a) Definite cases	127	145	167	146	140	112
	(b) Observation cases	49	54	33	39	43	30
	Total admissions	176	199	200	185	183	142
<i>Discharges</i> :—	(a) Definite cases	91	104	144	125	100	88
	(b) Observation cases	50	38	44	29	34	39
	Total discharges	141	142	188	154	134	127
<i>Deaths</i> :—	(a) Definite cases	30	30	19	26	32	31
	(b) Observation cases	3	4	1	—	6	1
	Total deaths	33	34	20	26	38	32

The following cases have been admitted during recent years on behalf of outside authorities :—

		1933.	1934.	1935.	1936.	1937.	1938.
Adult Males	..	41	23	26	39	39	32
Adult Females	..	1	1	3	—	2	1
Children	..	—	2	1	4	1	2
Total admitted	..	42	26	30	43	42	35

The total number of cases admitted to the Tuberculosis Section of this Hospital during 1938 was 177, as compared with 225 in 1937.

I am obliged to Mr. T. Hall Felton, Dental Surgeon, for the following report on the dental work at the Hospital during 1938 :—

Dental  
Treatment.

Most of the observations which I made in my report for 1937 are equally applicable to the past year, except that I am glad to have made a slight increase in the amount of conservative treatment done during 1938. I am also pleased to record that no patient refused dental treatment during the year. When I was first appointed to the Hospital I found it necessary on many occasions to explain at length to patients why they were expected to receive dental treatment as part of their treatment for tuberculosis. I have found that the patients as a whole have now come to recognise dental treatment as a normal part of the Hospital routine, and it is now very seldom that there is any reluctance to receive such treatment.

I give below my statistical report and must again express my gratitude for the very willing assistance and co-operation of the Medical and Nursing Staffs which is always at my disposal.

No. of visits to Hospital by Dental Surgeon .. .. 55

No. of visits to Dental Surgeon's private surgery by patients .. .. 26

	Male.	Female.	Children.	Total.
No. of Dental Examinations	85	49	29	163
No. of Dental Extractions ..	141	68	33	242
No. of other Operations ..	52	26	1	79
	General.	Local.	Total.	
No. of Dental Anæsthetics ..	1	121	122	

#### Educational Facilities.

The school at the Sanatorium is under the care of Mrs. Tulloch, and continues to be of great benefit to the children, both from a medical as well as from an educational and disciplinary point of view.

The following are the internal statistics of this section of the Corporation Hospital for the year under review :—

#### ARTIFICIAL PNEUMOTHORAX.

No. of A.P. inductions .. ..	31
No. of refills .. ..	545

#### GOLD THERAPY.

No. of cases treated .. ..	16
No. of injections given .. ..	267

#### ARTIFICIAL SUNLIGHT.

No. of cases treated .. ..	43
----------------------------	----

#### PLASTER SPLINTS AND CASTS.

No. of casts or splints supplied .. ..	40
--	----

#### SEDIMENTATION ESTIMATIONS.

No. of sedimentation estimations carried out .. ..	31
--	----

#### OPERATIONS.

No. of operations performed under general anæsthesia ..	11
---	----

#### PHRENIC OPERATIONS.

No. of phrenic operations carried out .. ..	3
---	---

#### PATIENT DAYS.

	Grimsby cases.		Outside cases.	
	<i>Patient days.</i>	<i>Bed case days.</i>	<i>Patient days.</i>	<i>Bed case days.</i>
1933 ..	23,795	13,901	5,163	2,911
	(Average daily number cases whole institution ..			80)
1934 ..	29,412	20,031	4,116	2,073
	(Average daily number cases whole institution ..			92)



		Grimsby cases.		Outside cases.	
		<i>Patient days.</i>	<i>Bed case days.</i>	<i>Patient days.</i>	<i>Bed case days.</i>
1935	..	29,388	19,790	5,825	3,750
		(Average daily number cases whole institution .. 96)			
1936	..	30,320	18,921	6,220	3,823
		(Average daily number cases whole institution .. 99·8)			
1937	..	29,953	21,117	6,481	4,310
		(Average daily number cases whole institution .. 99·8)			
1938	..	31,466	22,113	5,974	4,244
		(Average daily number cases whole institution .. 102·1)			

Every child on admission to the Sanatorium is immunised by injection against diphtheria.

Admissions to outside institutions during 1938 numbered four pulmonary adults, three of whom were discharged before the end of the year, together with the non-pulmonary case who was brought forward from 1937, leaving two pulmonary cases under treatment at the close of 1938.

Outside  
Institutions.

A great advance in chest surgery has been made in recent years and the outlook for cases suitable for operation has been considerably improved. Advantage is taken of the facilities available at the larger chest hospitals, and the Tuberculosis Officer wishes to record his appreciation of the Hospitals Sub-Committee's action in this regard.

There is one patient suffering from pulmonary tuberculosis in the Bracebridge Mental Hospital, Lincoln.

Admissions to and discharges from outside sanatoria during 1938 were as follows :—

	Sex.	SANATORIUM.	Under treat- ment 1.1.1938	Ad- mitted during 1938	Dis- charged during 1938	Remain- ing under treat- ment 31.12.38
Adult	Males	Royal Sea Bath- ing Hospital, Mar- gate ..	1	—	1	—
		London Chest Hospital, Victoria Park	—	1	—	1
Adult	Females	St. Bartholomew's Hospital, London	—	1	—	1
		Brompton Hos- pital, London	—	1	1	—
		London Chest Hos- pital, Victoria Park	—	1	1	—
		Totals ..	1	4	3	2

Tuberculosis  
Care  
Committee.

The Tuberculosis Care Committee was appointed in this County Borough in 1925, and its work has functioned with marked success since.

A sum of £5 per 1,000 of the population per annum in accordance with the Local Government Act, and set out in the explanatory Circular 1072, is available for the use of the Committee and this amounts to £470 per annum. In addition to this official grant the Committee has also a Special Fund, which assists in the provision of extra nourishment, dental treatment, clothing and footwear, bedsteads and bedding, and grants to patients receiving occupational therapy. The Special Fund is kept in a solvent condition by donations and efforts made by the Committee itself through dances, street collections, etc. During 1938 a sum of £348 was expended out of this fund on various forms of assistance which cannot be met out of the official grant, in addition to which the £470 from the official grant was spent on extra nourishment only.

Further details of this Committee's activities will be found in their Annual Report.



TABLE T. 1.

## PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1930.

PART I.—SUMMARY OF NOTIFICATIONS during the period from the 1st January, 1938, to the 31st December, 1938, in the area of the County Borough of Grimsby.

Formal Notifications.												
Number of Primary Notifications of new cases of tuberculosis												Total Notifica- tions.
AGE PERIODS	0 to 1	1 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 and upwards	Total (all ages)
Pulmonary Males ..	—	—	1	3	6	8	16	9	10	7	2	62
“ Females ..	1	—	—	2	8	6	9	4	4	5	—	39
Non-pulmonary Males ..	3	6	7	3	3	1	4	—	1	2	—	30
“ “ Females	—	4	6	4	2	2	4	1	—	—	—	23
												65
												41
												31
												24

## SUPPLEMENTAL RETURN.

PART II.—New cases of Tuberculosis coming to the knowledge of the Medical Officer of Health during the above-mentioned period, otherwise than by formal notification.

AGE PERIODS	0 to 1	1 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 and upwards	Total Cases
Pulmonary Males ...	—	—	—	—	—	—	1	—	—	1	—	2
Females ...	—	—	—	—	—	—	—	—	—	—	—	—
Non-pulmonary Males ...	—	—	—	—	—	—	—	—	—	—	—	—
Females ...	—	1	1	—	1	—	—	—	—	—	—	3

TABLE T. 1—*continued*.

The source or sources from which information as to the cases (mentioned on the preceding page) was obtained is as follows:—

Source of Information.	No. of Cases	
	Pulmonary	Non-pulmonary
Death Returns { from local Registrars	1	2
transferable deaths from Registrar-General	—	—
Posthumous notifications	1	1
"Transfers" from other areas (other than transferable deaths)	—	—
Other Sources if any (specify)	—	—

PART III.—NOTIFICATION REGISTER.

Number of cases of Tuberculosis remaining at the 31st December, 1938, on the Registers of Notifications kept by the Medical Officer of Health of the County Borough .. .. .	PULMONARY.			NON-PULMONARY.			Total Cases.
	Males	Females	Total	Males	Females	Total	
188	148	336	133	112	245	581	
Number of cases <i>removed</i> from the Register during the year by reason of—							
1. Withdrawal of notification .. .. .	3	2	5	3	1	4	9
2. Recovery from the disease .. .. .	3	4	7	12	14	26	33
3. Death (all causes) .. .. .	41	27	68	5	6	11	79
4. Otherwise .. .. .	11	5	16	3	4	7	23



TABLE T. 2.  
TABLE SHOWING THE ANNUAL DEATH RATE FROM TUBERCULAR DISEASES  
IN GRIMSBY AS COMPARED WITH ENGLAND AND WALES AS A WHOLE SINCE 1912.

Year.	Tuberculosis (Pulmonary).			Tuberculosis (all forms).		
	GRIMSBY.		England and Wales.	GRIMSBY.		England and Wales.
	No. of deaths.	Rate per thousand of population.	Rate per thousand of population.	No. of deaths.	Rate per thousand of population.	Rate per thousand of population.
1912	55	.72	1.02	80	1.05	1.37
1913	59	.73	.99	92	1.18	1.35
1914	68	.86	1.02	96	1.22	1.36
1915	75	1.03	1.14	113	1.56	1.51
1916	87	1.19	1.15	130	1.78	1.52
1917	77	1.05	1.21	105	1.43	1.60
1918	88	1.20	1.30	115	1.57	1.67
1919	74	.93	1.00	92	1.16	1.28
1920	86	1.04	.87	122	1.48	1.13
1921	87	1.05	.88	121	1.46	1.13
1922	89	1.06	.89	117	1.39	1.12
1923	82	.96	.84	102	1.24	1.06
1924	83	.97	.84	99	1.16	1.06
1925	77	.91	.83	98	1.21	1.04
1926	92	1.04	.77	127	1.43	0.96
1927	86	.97	.74	105	1.19	0.95
1928	72	.79	.75	102	1.12	0.92
1929	96	1.05	.79	115	1.25	0.95
1930	85	.93	.73	109	1.19	0.89
1931	85	.92	.74	108	1.16	0.89
1932	81	.87	.68	106	1.14	0.84
1933	71	.76	.69	89	.95	0.83
1934	58	.62	.63	72	.77	0.76
1935	61	.65	.60	74	.78	0.71
1936	49	.52	.58	64	.68	0.68
1937	53	.57	.58	63	.67	0.69
*1938	61	.66	.53	69	.74	0.63

\* R.G. Population 92,320

TABLE SHOWING THE NUMBER OF BEDS AVAILABLE FOR THE TREATMENT OF TUBERCULOSIS ON THE 31ST DECEMBER, 1938, IN INSTITUTIONS BELONGING TO THE COUNCIL.

NAME OF INSTITUTION.	FOR PULMONARY CASES.		FOR NON-PULMONARY CASES.		TOTAL.
	Adults.	Children under 15.	Adults.	Children under 15.	
Grimsby Corporation Hospital, Scartho .. .. .	62	13	10	13	98
(Since July, 1936, four additional single-bed huts have been erected out of revenue. These are used for adult male patients).					

TABLE T. 4.

TABLE SHOWING THE EXTENT OF RESIDENTIAL TREATMENT AND OBSERVATION DURING THE YEAR IN INSTITUTIONS (OTHER THAN POOR LAW INSTITUTIONS) APPROVED FOR THE TREATMENT OF TUBERCULOSIS.

		In Institutions on Jan. 1st. (1)	Admitted during the year. (2)	Discharged during the year. (3)	Died in the Institutions. (4)	In Institutions on Dec. 31st. (5)
Number of doubtfully tuberculous cases admitted for observation	Adult males	6	8	12	1	1
	Adult females	—	—	—	—	—
	Children	10	22	27	—	5
	Total	16	30	39	1	6
Number of patients suffering from pulmonary tuberculosis	Adult males	35	54	40	18	31
	Adult females	18	35	27	8	18
	Children	3	4	4	1	2
	Total	56	93	71	27	51
Number of patients suffering from non-pulmonary tuberculosis	Adult males	3	6	4	2	3
	Adult females	4	3	5	—	2
	Children	9	14	11	2	10
	Total	16	23	20	4	15
GRAND TOTAL .. .. .		88	146	130	32	72



TABLE T. 5.

TABLE SHOWING THE RESULTS OF OBSERVATION OF DOUBTFULLY TUBERCULOUS CASES DISCHARGED DURING THE YEAR FROM INSTITUTIONS APPROVED FOR THE TREATMENT OF TUBERCULOSIS.

Diagnosis on discharge from observation.	FOR PULMONARY TUBERCULOSIS.						FOR NON-PULMONARY TUBERCULOSIS.						TOTALS.		
	Stay under 4 weeks.			Stay over 4 weeks.			Stay under 4 weeks.			Stay over 4 weeks.					
	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.
Tuberculous ..	1	—	—	2	—	1	—	—	—	2	—	3	5	—	4
Non-tuberculous ..	1	—	—	4	—	11	—	—	1	2	—	5	7	—	17
Doubtful .. ..	—	—	—	1	—	4	—	—	—	—	—	2	1	—	6
TOTALS .. ..	2	—	—	7	—	16	—	—	1	4	—	10	13	—	27

TABLE T. 6.

## SCARTH ROAD INFIRMARY.

TABLE SHOWING THE EXTENT OF RESIDENTIAL TREATMENT PROVIDED DURING THE YEAR IN POOR LAW INSTITUTIONS FOR PERSONS CHARGEABLE TO THE COUNCIL.

		In Institutions on Jan. 1st.	Admitted during the year.	Discharged during the year.	Died in the Institutions.	In Institutions on Dec. 31st.
Number of patients suffering from pulmonary tuberculosis	Adult males	—	6	3	3	—
	Adult females	—	4	2	2	—
	Children	—	4	3	1	—
	Total	—	14	8	6	—
Number of patients suffering from non-pulmonary tuberculosis	Adult males	—	2	2	—	—
	Adult females	—	3	3	—	—
	Children	1	—	1	—	—
	Total	1	5	6	—	—
GRAND TOTAL .. ..		1	19	14	6	—

TABLE T. 7.

TABLE SHOWING THE IMMEDIATE RESULTS OF TREATMENT OF DEFINITELY TUBERCULOUS PATIENTS DISCHARGED DURING THE YEAR FROM INSTITUTIONS (OTHER THAN POOR LAW INSTITUTIONS) APPROVED FOR THE TREATMENT OF TUBERCULOSIS.

Classification on admission to the Institution.		Condition at time of discharge.	Duration of Residential Treatment in the Institution.												Grand Totals.					
			Under 3 months.			3-6 months.			6-12 months.			More than 12 months.				Totals.				
			M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.		M.	F.	C.		
PULMONARY TUBERCULOSIS.																				
Class T.B. minus.	Class T.B. plus, Group 1.	Class T.B. plus, Group 2.	Class T.B. plus, Group 3.	Quiescent .. ..	—	3	—	10	5	—	4	1	3	—	—	—	14	9	3	26
				Not quiescent ..	—	—	—	—	—	—	1	—	—	—	—	—	1	—	—	1
				Died in Institution	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1
				Quiescent .. ..	—	—	—	3	3	—	2	1	—	—	2	1	5	6	1	12
				Not quiescent ..	—	1	—	2	—	—	1	—	—	—	—	—	3	1	—	4
				Died in Institution	2	—	—	—	1	—	—	—	—	—	—	—	2	1	—	3
				Quiescent .. ..	—	—	—	4	3	—	4	1	—	2	—	—	10	4	—	14
				Not quiescent ..	2	1	—	1	—	—	2	5	—	1	1	—	6	7	—	13
				Died in Institution	1	2	—	—	—	—	3	—	—	2	—	—	6	2	—	8
				Quiescent .. ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
				Not quiescent ..	—	—	—	—	—	—	1	—	—	—	—	—	1	—	—	1
				Died in Institution	5	3	—	2	1	1	2	1	—	—	—	—	9	5	1	15
Totals (pulmonary) ..					11	10	—	22	13	1	20	9	3	5	3	1	58	35	5	98
NON-PULMONARY TUBERCULOSIS.																				
Bones and Joints.				Quiescent .. ..	—	—	—	—	1	—	1	—	3	2	—	—	3	1	3	7
				Not quiescent ..	—	—	1	—	1	—	—	—	—	—	—	—	—	1	1	2
				Died in Institution	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	1
Abdominal				Quiescent .. ..	—	—	—	—	1	2	—	—	1	—	—	2	—	1	5	6
				Not quiescent ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
				Died in Institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Organs				Quiescent .. ..	—	—	—	—	1	—	—	—	—	—	—	—	—	1	—	1
				Not quiescent ..	1	—	—	—	1	—	—	—	—	—	—	—	1	1	—	2
				Died in Institution	2	—	1	—	—	—	—	—	—	—	—	—	2	—	1	3
Peripheral Glands.				Quiescent .. ..	—	—	2	—	—	—	—	—	—	—	—	—	—	—	2	2
				Not quiescent ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
				Died in Institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Totals (non-pulmonary) ..					3	—	4	—	5	2	1	—	4	2	—	3	6	5	13	24



TABLE T. 8. (A) PULMONARY TUBERCULOSIS

Table showing in summary form (a) the condition at the end of 1938, of all patients remaining on the Dispensary Register; and (b) the reasons for the removal of all cases written off the Register. The Table is arranged according to the years in which the patients were first entered on the Dispensary Register as definite cases of pulmonary tuberculosis, and their classification at that time.

Condition at the time of the last report made during the year which the Table relates.	Previous to 1928			1928			1929			1930			1931			1932			1933			1934			1935			1936			1937			1938				
	Class T.B. minus			Class T.B. plus			Class T.B. minus			Class T.B. plus			Class T.B. minus			Class T.B. plus			Class T.B. minus			Class T.B. plus			Class T.B. minus			Class T.B. plus			Class T.B. minus			Class T.B. plus				
	Class T.B. minus	Group 1	Group 2	Group 3	Total (Class T.B. plus)	Class T.B. minus	Group 1	Group 2	Group 3	Total (Class T.B. plus)	Class T.B. minus	Group 1	Group 2	Group 3	Total (Class T.B. plus)	Class T.B. minus	Group 1	Group 2	Group 3	Total (Class T.B. plus)	Class T.B. minus	Group 1	Group 2	Group 3	Total (Class T.B. plus)	Class T.B. minus	Group 1	Group 2	Group 3	Total (Class T.B. plus)	Class T.B. minus	Group 1	Group 2	Group 3	Total (Class T.B. plus)			
Disease Arrested	Adults M	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1			
Not Arrested	Adults M	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1			
Children	F	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1			
Condition not ascertained during the year		1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1			
Total on Dispensary Register at 31st Dec.		1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1			
Discharged as Recovered	Adults M	46	1	7	8	3	1	1	1	3	2	5	5	5	10	5	5	7	7	14	30	13	9	22	20	10	14	24	21	10	19	29	28	17	21	39		
Not Recovered	Adults M	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1			
Children	F	22	1	4	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1			
Lost sight of, or otherwise removed from Dispensary Register	Adults M	164	17	23	5	45	114	1	6	1	8	86	3	1	2	6	8	2	10	169	7	4	2	13	129	2	1	1	4	146	3	4	3	10	274	1	10	11
Dead	Adults M	17	8	19	33	60	1	5	7	10	22	7	2	14	23	39	2	1	3	12	16	2	3	21	9	2	5	7	290	2	5	7	469	2	2	4		
Children	F	3	1	2	2	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1			
Total written off Dispensary Register		276	32	74	63	169	124	6	23	22	51	101	8	26	42	76	116	15	13	28	56	122	15	24	47	86	147	9	26	30	65	155	11	20	33	64		
GRAND TOTALS		276	33	81	63	177	128	6	23	22	51	103	8	27	42	77	117	15	16	28	59	122	20	29	47	86	149	14	31	30	75	160	18	27	33	78		

TABLE T. 9.

(B) NON-PULMONARY TUBERCULOSIS.

Table showing in summary form (a) the condition at the end of 1938 of all patients remaining on the Dispensary Register; and (b) the reasons for the removal of all cases written off the Register.

[illegible]



I am indebted to Dr. D. J. Campbell, V.D. Officer and Pathologist, for the following report in respect to venereal diseases :—

Venereal  
Diseases.

The accommodation provided for the treatment of venereal diseases at the clinic in Queen Street has been severely taxed during the year 1938 for, as the following figures show, all previous numbers of new patients, attendances and work done have been considerably exceeded. These figures make the inevitable plea for larger and better premises even more convincing.

The following table gives a comparison of out-standing figures for the past few years :—

				Average of 3 previous years.	1938.
Early Syphilis	..	..	..	30	41
Late Syphilis	..	..	..	58	56
Congenital Syphilis	..	..	..	12	22
Gonorrhœa	..	..	..	169	252
Non-specific venereal disease	..	..	..	201	208
Attendances..	..	..	..	13709	17827
Defaulters	..	..	..	100	117
Total new cases	..	..	..	547	656

It is difficult to determine whether the gradual increase during the recent years indicates greater prevalence of venereal disease in the community or a better appreciation of the necessity of obtaining proper advice and treatment by those who have contracted disease or run the risk. Whatever the explanation the work done plays a considerable part in the Public Health Department's scheme of preventive medicine.

As in previous years a large proportion of new patients have been referred by their private doctors while every other hospital and branch of the health services have discovered many patients in need of the treatment the venereal diseases scheme offers. Of these the majority have been reluctant to attend the clinic in its situation and the consultant staff of the Grimsby and District Hospital have frequently mentioned this difficulty in obtaining further treatment when the patients leave the wards.

The difficulty is also very frequent amongst pregnant mothers found to have latent syphilis when they are examined by the doctors at the ante-natal clinics. Unless proper treatment is given the child expected will probably show grave stigmata of congenital syphilis. When the mother refuses to attend the Queen Street clinic Dr. Halperin, in co-operation with the venereal diseases officer, has carried out the treatment at the Watkin Street clinic. This is an admirable method but duplicates the services and after the confinement the mother is unable to continue the treatment for the requisite period.

Approach to the public is very difficult on matters referring to venereal diseases and their dangers. Tribute must be paid to the local Press for their frequent references to the work carried out and their reporting of public meetings convened to tell the inhabitants of Grimsby of the dangers. The "hush-hush" policy of our fore-fathers dies slowly.



At the beginning of the year a vigorous campaign was carried out by the local authority in conjunction with the British Social Hygiene Council. Mr. R. D. Sanders, one of the best known of the Society's vigorous lecturers, came to Grimsby and gave lectures to various associations and clubs, members of the Nautical School and the Junior Instructional Centre.

On the Sunday terminating the week's campaign a huge audience, mainly consisting of young people, attended the Plaza Cinema when addresses were given by Councillor Wilkinson, Mr. R. D. Sanders and the venereal diseases officer, and a film "The Test For Love" was shown. The hundreds unable to gain admission proved that the citizens of Grimsby want to know.

The campaign undoubtedly brought knowledge to hundreds of young people whose parents would probably be unable or unwilling to impart the very essential facts.

During the year the venereal diseases officer has had a chat with each batch of pupils at the Instructional Centre, and the Nautical School.

The number of specimens examined in the laboratory show an increase parallel to the increased work done in the clinic itself. Investigations on the same lines as those reported last year have been continued both for the Grimsby clinic and those of the other authorities using the laboratory service.

In the clinic the outstanding change in treatment has been the greater use of the sulphonamide drugs, especially the product of Messrs. May and Baker "693", which has revolutionised the treatment of gonorrhœa. The great drawback resulting is that the obvious symptoms cease so very much sooner than under the old regime and patients are the more inclined to default before adequate tests of cure can be carried out. The co-operation of the general practitioners on this point is urgently desired, especially as so many are undertaking the treatment of gonorrhœa now that it is so much easier.

Dr. R. W. B. Greig, of the Corporation Hospital, has availed himself of the teaching course at the clinic to qualify for the certificate granted under the Venereal Diseases Regulations.

Mr. F. N. Bullock, for many years the technician in the laboratory obtained another appointment under the Kent County Council and his place has been filled by Mr. R. H. Welch who has recently retired from the R.A.M.C. after a period of service wholly devoted to laboratory work. The increased work has necessitated the appointment of a full time laboratory boy.

The loyalty and whole-hearted work of the nursing and laboratory staff have again been manifest and made the increased work possible and so gratifying to patients and the profession alike.



VENEREAL DISEASES LABORATORY, GRIMSBY, 1938.

The following tests were carried out :—

Wassermann tests upon blood	..	..	..	..	..	4516
Kahn tests upon blood	..	..	..	..	..	208
Cerebro-spinal fluids :—						
Wassermann tests	..	..	..	..	..	156
Cell counts	..	..	..	..	..	123
Globulin	..	..	..	..	..	108
Protein	..	..	..	..	..	97
Chlorides	..	..	..	..	..	16
Colloidal gold	..	..	..	..	..	124
Gonococcal complement fixation tests	..	..	..	..	..	953
Smears for gonococci	..	..	..	..	..	1878
Cultures for gonococci	..	..	..	..	..	823
Dark ground examinations for spirochaetes	..	..	..	..	..	69
Examinations for Trichomonas vaginalis	..	..	..	..	..	157
Total	..	..	..	..	..	9228

The number of specimens dealt with in 1937 was 7,416.

WASSERMANN TESTS UPON BLOOD.

	Grimsby.	Lindsey.	Lincoln.	Holland.	Other areas.	Totals.
Clinics	927	516	385	93	28	
Hospitals	1027	78	626	23	—	
Practitioners	192	124	131	86	—	
Totals	2146	718	1142	202	28	4236

WASSERMANN TESTS UPON SPINAL FLUIDS.

	Grimsby.	Lindsey.	Lincoln.	Holland.	Other areas.	Totals.
Clinics	23	7	3	1	1	
Hospitals	72	5	27	2	—	
Practitioners	7	1	—	7	—	
Totals	102	13	30	10	1	156

SPECIAL WASSERMANN TESTS UPON BLOOD. (" E ")

	Grimsby.	Lindsey.	Lincoln.	Holland.	Other areas.	Totals.
Clinics	34	11	4	2	—	
Hospitals	8	—	7	—	—	
Practitioners	2	—	5	1	—	
Totals	44	11	16	3	—	74

SPECIAL WASSERMANN TESTS UPON BLOOD (" T ").

	Grimsby.	Lindsey.	Lincoln.	Holland.	Other areas.	Totals.
Clinics	170	36	—	—	—	206

KAHN TESTS UPON BLOOD.

	Grimsby.	Lindsey.	Lincoln.	Holland.	Other areas.	Totals.
Clinics	34	15	6	74	—	
Hospitals	21	3	19	—	—	
Practitioners	19	7	4	6	—	
Totals	74	25	29	80	—	208

GONOCOCCAL COMPLEMENT FIXATION TESTS.

	Grimsby.	Lindsey.	Lincoln.	Holland.	Other areas.	Totals.
Clinics	300	210	225	2	27	
Hospitals	121	6	34	—	—	
Practitioners	14	7	5	2	—	
Totals	435	223	264	4	27	953

## CELL COUNT. (C.S. FLUIDS).

	<i>Grimsby.</i>	<i>Lindsey.</i>	<i>Lincoln.</i>	<i>Holland.</i>	<i>Other areas.</i>	<i>Totals.</i>
Clinics ..	20	5	3	—	—	
Hospitals ..	55	1	22	2	—	
Practitioners ..	5	2	2	6	—	
Totals ..	80	8	27	8	—	123

## GLOBULIN (C.S. FLUIDS).

	<i>Grimsby.</i>	<i>Lindsey.</i>	<i>Lincoln.</i>	<i>Holland.</i>	<i>Totals.</i>
Clinics ..	19	6	2	—	
Hospitals ..	49	1	18	1	
Practitioners ..	4	2	—	6	
Totals ..	72	9	20	7	108

## COLLOIDAL GOLD TESTS (C.S. FLUIDS).

	<i>Grimsby.</i>	<i>Lindsey.</i>	<i>Lincoln.</i>	<i>Holland.</i>	<i>Totals.</i>
Clinics ..	21	6	2	—	
Hospitals ..	59	3	21	1	
Practitioners ..	2	2	—	7	
Totals ..	82	11	23	8	124

## PROTEIN (C.S. FLUIDS).

	<i>Grimsby.</i>	<i>Lindsey.</i>	<i>Lincoln.</i>	<i>Holland.</i>	<i>Totals.</i>
Clinics ..	12	4	1	—	
Hospitals ..	49	1	17	1	
Practitioners ..	4	2	—	6	
Totals ..	65	7	18	7	97

## CHLORIDES (C.S. FLUID).

	<i>Grimsby.</i>	<i>Lindsey.</i>	<i>Lincoln.</i>	<i>Holland.</i>	<i>Totals.</i>
Clinics ..	—	—	—	—	
Hospitals ..	15	1	—	—	
Practitioners ..	—	—	—	—	
Totals ..	15	1	—	—	16

## SMEARS FOR GONOCOCCI.

	<i>Grimsby.</i>	<i>Lindsey.</i>	<i>Lincoln.</i>	<i>Holland.</i>	<i>Other areas.</i>	<i>Totals.</i>
Clinics ..	809	271	—	—	45	
Hospitals ..	—	—	—	—	—	
Practitioners ..	155	595	2	1	—	
Totals ..	964	866	2	1	45	1878

## CULTURES FOR GONOCOCCI.

	<i>Grimsby.</i>	<i>Lindsey.</i>	<i>Other areas.</i>	<i>Totals.</i>
Clinics ..	558	176	22	
Hospitals ..	50	4	—	
Practitioners ..	13	—	—	
Totals ..	621	180	22	823

## EXAMINATION FOR SPIROCHÆTES.

	<i>Grimsby.</i>	<i>Lindsey.</i>	<i>Lincoln.</i>	<i>Holland.</i>	<i>Other areas.</i>	<i>Totals.</i>
Clinics ..	35	14	2	4	8	
Hospitals ..	2	—	1	—	—	
Practitioners ..	3	—	—	—	—	
Totals ..	40	14	3	4	8	69

## EXAMINATION FOR TRICHOMONAS VAGINALIS.

	<i>Grimsby.</i>	<i>Lindsey.</i>	<i>Other areas.</i>	<i>Totals.</i>
Clinics ..	118	36	1	
Hospitals ..	—	1	—	
Practitioners ..	1	—	—	
Totals ..	119	37	1	157

TOTAL FOR THE YEAR (all tests) :—9,228.



1.—AMOUNT OF SHIPPING ENTERING THE PORT DURING THE YEAR.

# SECTION G.

## PORT HEALTH SERVICE.

## SECTION G.—PORT HEALTH SERVICE.

The general description of the Port is still similar to that contained in the Annual Report for 1933.

## 1.—AMOUNT OF SHIPPING ENTERING THE PORT DURING THE YEAR.

TABLE A.

Description of Vessels.	Number.	Tonnage.	Number Inspected		Number reported to be defective.	Number of Vessels on which Defects were remedied.	Number of vessels reported as having, or having had, during the voyage, infectious disease on board
			By the Medical Officer of Health.	By the Health Inspector.			
Steamers ..	*507	309,346	10	560	42	40	5
Motor† ..	39	8,329	Nil	31	3	3	Nil
Foreign :—							
Sailing ..	Nil	Nil	Nil	Nil	Nil	Nil	Nil
Fishing ..	2436	178,903	Nil	179	18	18	Nil
Total Foreign ..	2982	496,488	10	770	63	61	5
Coastwise :—							
Steamers ..	*105	28,361	Nil	161	13	10	Nil
Motor† ..	183	20,144	Nil	46	2	Nil	Nil
Sailing ..	2	138	Nil	Nil	Nil	Nil	Nil
Fishing ..	Nil	Nil	Nil	658	109	109	2
Total Coastwise ..	290	48,643	Nil	865	124	119	2
Total Foreign and Coastwise ..	3272	545,131	10	1635	187	180	7

\* As per Customs returns. † Includes mechanically propelled vessels other than steamers.

Number of Vessels under 100 tons entering the Port during the year.

British .. 1843. Tonnage .. 165,870.

Foreign .. 12. Tonnage .. 1,040.

Number of foreign and Coastwise Fishing Vessels and Tonnage, excluding inshore Fishing Boats and Herring Drifters.

Foreign .. 3,324. Tonnage .. 449,954.

Coastwise .. 10,113. Tonnage .. 775,507.



## ROUTINE INSPECTION OF VESSELS ARRIVING AT THE PORT.

FOREIGN :—	British Steam Ships	..	..	..	149
	„ Motor Vessels	..	..	..	3
	„ Motor Fishing Vessels	..	..	..	Nil
	„ Sailing Ships	..	..	..	Nil
	Foreign Steam Ships	..	..	..	300
	„ Motor Vessels	..	..	..	22
	„ Motor Fishing Vessels	..	..	..	Nil
	British Steam Fishing Vessels	..	..	..	119
	Foreign „ „ „	..	..	..	1

Total .. .. 594

COASTWISE :—	British Steam Ships	..	..	..	86
	„ Motor Vessels	..	..	..	26
	„ Motor Fishing Vessels	..	..	..	Nil
	„ Sailing Ships	..	..	..	Nil
	Foreign Steam Ships	..	..	..	37
	„ Motor Vessels	..	..	..	20
	„ Motor Fishing Vessels	..	..	..	Nil
	British Steam Fishing Vessels	..	..	..	433
	Foreign „ „ „	..	..	..	Nil

Total .. .. 602

Foreign .. .. 594

Coastwise .. .. 602

1196

Re-inspections .. .. 439

(The above are included under inspections  
in Table A).

The Nationalities of the Vessels were as follows :—

British	..	..	..	..	..	815
Danish	..	..	..	..	..	135
French	..	..	..	..	..	59
Norwegian	..	..	..	..	..	33
Finnish	..	..	..	..	..	38
Dutch	..	..	..	..	..	32
Icelandic	..	..	..	..	..	19
Estonian	..	..	..	..	..	11
Swedish	..	..	..	..	..	35
German	..	..	..	..	..	7
Belgian	..	..	..	..	..	2
Latvian	..	..	..	..	..	6
Spanish	..	..	..	..	..	3
Russian	..	..	..	..	..	1

Total .. .. 1196

## II.—CHARACTER OF TRADE OF PORT.

TABLE B.

(a) Passenger Traffic during the year.

Number of Passengers.	ALIENS			Transmigrants
	1st Class	2nd Class	3rd Class	
Inwards ..	1190	Nil	Nil	49
Outwards ..	No	Class shewn 1180		24



## MEDICAL INSPECTION OF ALIENS.

*Annual return by the medical inspector of aliens for the year ended 31st December, 1938*

	Total	Number inspected by the medical inspector	Number subjected to detailed examination by the medical inspector	Certificates Issued					Transmigrants.	
				Lunatic idiot or M.D.	Undesirable for medical reasons	Physically incapacitated	Suffering from acute infectious disease	Landing necessary for adequate medical examination	Vermineous	Trachoma favus, etc.
1. (a) Total number of Aliens (excluding Alien Seamen) landing at the Port	1190	841	105	..	..	..	..	..	..	..
(b) Aliens refused permission to land by Immigration Officer	2	..	..	..	..	..	..	..	..	..
(c) Transmigrants	49	..	6	..	..	..	..	..	..	..
2. Total Aliens arriving at the Port	1241	841	111	..	..	..	..	..	..	..
3. (a) Total number of vessels carrying Alien passengers	..	..	208							
(b) Number of such vessels dealt with by the Medical Inspector	..	..	90							

TABLE A.

Analysis of Aliens landing (see 1 (a)).		Total
Residents Returning	..	42
In Transit	..	111
Visitors	..	775
Business	..	61
Diplomatic	..	1
Seamen	..	7
Contract Seamen	..	94
Ministry of Labour Permit (M.L.) :-		
(a) Males	..	35
(b) Females	..	44
(c) Children	..	2
Aliens coming to settle not holding M.L. Permits :-		
(a) Males	..	12
(b) Females	..	5
(c) Children	..	1
Total	..	1190

TABLE B.

Classification of Aliens referred to the Medical Inspector by the Immigration Officer for detailed examination—		Examined	No. of Certificates issued.
(i) holding Ministry of Labour permits	..	63	..
(ii) intending to take up employment and remain in the country over 3 months	..	1	..
(iii) intending to make their home in this country	..	2	..
(iv) students coming for educational purposes	..	26	..
(v) in regard to whom there is any mention of health as a reason for their visit	..	..	..
(vi) who appear to the I.O. (a) not to be in robust health ; (b) to be mentally or physically abnormal or sub-normal ; (c) to be dirty in their person or (d) are selected for special reasons	..	17 (d)	..
(vii) seamen travelling as passengers	..	..	..
Total	..	109	..

## (b) Cargo Traffic.

*Principal Imports :—*

Timber, wood-pulp, fish, foodstuffs and general.

The figures in tons for 1938, compared with the previous year, are as follows :—

	1938.	1937	Increase or Decrease.
Bacon .. .. .	44,271	44,292	—21
Butter .. .. .	50,073	47,040	+3,033
Eggs .. .. .	8,620	8,256	+364
Sleepers and Logs .. .. .	5,748	3,942	+1,806
Wood Pulp .. .. .	114,800	145,367	—30,567
Sundries .. .. .	38,343	45,242	—6,899

*Principal Exports :—*

Coal and Coke, Fish, Fish-meal and general.

	1938.	1937.	Increase or Decrease.
Steel .. .. .	11,413	17,162	—5,749
Pig Iron .. .. .	1,709	3,916	—2,207
Paper .. .. .	1,733	1,115	+618
Dry Salt Fish .. .. .	11,972	5,596	+6,376
Coal and Coke .. .. .	1,030,796	1,120,491	—89,695
Sundries .. .. .	14,546	19,419	—4,873

During the year the total quantity of edible fish (including foreign) landed was 4,316,074 cwts., and the value of same £4,252,252—over a quarter of a million more than last year.

*Foreign Ports from which vessels arrive.*

Russia.—Archangel, Kovda, Leningrad, Marmansk, Onega.

Norway.—Drammen, Fredrikstad, Larvik, Oslo, Trondhjem, Arendal, Kragero, Christiansund, Bergen.

Sweden.—Gothenburg, Gefle, Hernosand, Soderhamp, Stockholm, Sundsval, Skelleftea.

Finland.—Helsingfors, Kotka, Trangsund, Viborg, Kemi, Xypila, Helsinki, Uleaborg, Mesane, Toppila, Igerka.

Germany.—Hamburg, Konigsberg, Bremen, Stettin.

Holland.—Rotterdam, Amsterdam, Groningen.

Belgium.—Antwerp, Ghent.

France.—Dieppe, Le Harve, Brest, Calais, Bordeaux, Bayonne, Rouen, Dunkirk, Marseilles.

Denmark.—Esbjerg, Fredricksund, Copenhagen.

Portugal.—Faro, Lisbon, Oporto.

Spain.—Seville, Valencia, Cartagena, Barcelona, Huelva.

Latvia.—Riga, Ventspels, Libau.

Estonia.—Tallin.

Poland.—Gdynia.

Iceland.—Reykjavik.

Danzig.—Danzig.



## CANAL BOATS ACT.

722 entered the port during the year, of which 81 were inspected. No infectious disease occurred on any of the Canal Boats during the year.

*Infringements of the Act dealt with were :—*

Certificates not identifying owners with boats .. .. .	1
Masters without Certificates .. .. .	15
Boats not properly marked .. .. .	27
Cabins require painting .. .. .	10
„ out of repair .. .. .	22
„ delapidated .. .. .	1
Without proper water vessels .. .. .	6
Total .. .. .	82

32 notices were served on owners. No legal proceedings were taken in respect of infringements. The number of infringements found continues to be high.

## III.—WATER SUPPLY.

The town water supply is available for the port and for shipping.

All precautions are taken against contamination.

There are two water boats in use, one in each dock; they are in good sanitary condition.

The water supply for the fish market is being adequately chlorinated by the Railway Company, and about 300,000 gallons per day are used. Unfortunately the Railway Company have not yet provided facilities for making this chlorinated supply available for washing out the fish rooms of trawlers.

## IV.—PORT SANITARY REGULATIONS, 1933.

The information under these Regulations is as described in the Annual Report for 1934, except in regard to paragraph 10 relating to venereal disease. This is shewn at the end of Table D.

TABLE C.

Cases of Infectious Sickness landed from Vessels.

DISEASE.	Number of Cases during the year.		No. of Vessels concerned.	Average number of Cases for previous 5 years.
	Passengers.	Crew.		
Influenza .. ..	—	4	3	55
Scabies .. ..	—	2	2	Nil
Pneumonia .. ..	—	1	1	Nil

TABLE D.

Cases of Infectious Sickness occurring on Vessels during the voyage but disposed of prior to arrival.

Disease	Number of Cases during the year.		No. of Vessels concerned.	Average number of Cases for previous 5 years.
	Passengers.	Crew.		
Pneumonia .. ..	—	—	—	1

No cases of Plague, Cholera, Yellow Fever, Smallpox or Typhus occurred, or any plague infected rats discovered during the year.

#### *Venereal Disease.*

During the year, there was a total of 331 attendances by 101 foreign seamen at the Grimsby Clinic.

Of the above number, 32 were found to be suffering from syphilis, 45 from gonorrhœa, and 24 were found not to be suffering from venereal disease.



V.—MEASURES AGAINST RODENTS.  
Numbers 1 to 5 as described in Annual Report for 1934.

RATS DESTROYED DURING THE YEAR.

TABLE E. (1) On Vessels.

Number of	Jan.	Feb.	Mch.	Apl.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.	Total in y'r.
Black Rats ..	10	8	10	6	20	12	20	8	16	12	17	5	144
Brown Rats ..	9	4	3	5	16	5	6	6	6	4	6	3	73
Species not recorded ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Examined ..	..	4	2	2	2	4	4	4	..	4	2	2	..
Infected with Plague ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Total													217

TABLE F. (2) In Docks, Quays, Wharves and Warehouses.

Number of	Jan.	Feb.	Mch.	Apl.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.	Total in y'r
Black Rats ..	120	84	171	67	95	47	56	100	72	67	175	67	1121
Brown Rats ..	298	199	200	294	460	368	291	283	179	198	280	190	3240
Species not recorded ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Examined ..	..	..	2	2	2	..	..	..	..	..	2	2	..
Infected with Plague ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Total													4361

RATS EXAMINED FOR PLAGUE OR OTHER DISEASES :—

14 black rats and 26 brown rats were sent for examination.

THE REPORT FROM THE ANALYST IS AS FOLLOWS :—

These rats have been examined and found to be free from B. Pestis, or other diseases.

INTERNATIONAL SANITARY CONVENTION.

During the year 61 Deratisation Exemption Certificates were issued.

436 traps were set by the Rat Searcher on 61 vessels and 90 rats were caught, the balance of 127 being from vessels, making a total of 217.

It has not been found necessary to fumigate any vessel under the above "Convention" for the following reasons :—

Vessels trading to and from this port are mostly engaged between the Baltic and Continental ports. The nature of the trade is such that the cargoes of the vessels are seldom in for more than a week, and in a number of cases for only 36 hours; this leaves little chance for rats to nest or harbour.

There are no food cargoes in most of these ships.

Special attention is paid to the work of detecting rats in warehouses, wharves, quays, etc., and when necessary trapping and laying of poison baits are resorted to.

TABLE G.

Measures of Rat Destruction on Plague "infected" or "suspected" Vessels from plague infected ports arriving in the Port during the year.—Nil.

TABLE H.  
Deratisation Certificates and Deratisation Exemption Certificates issued during the year.

Net Tonnage	No. of Ships	No. of Deratisation Certificates issued.					Number of Derat- isation Exempt. Cer- tificates issued	Total Cer- tificates issued
		After fumigation with			After trapping poison- ing, etc.	Total		
		H.C.N.	Sulphur	H.C.N. & Sulphur				
1	2	3	4	5	6	7	8	9
Ships up to 300 tons .. ..	23	—	—	—	—	—	23	23
„ from 301 tons to 1000 tons	34	—	—	—	—	—	34	34
„ „ 1001 „ 3000 „	4	—	—	—	—	—	4	4
„ „ 3001 „ 10000 „	—	—	—	—	—	—	—	—
„ over 10,000 tons ..	—	—	—	—	—	—	—	—
Totals .. ..	61	—	—	—	—	—	61	61

# VI.—HYGIENE OF CREW'S SPACES.

TABLE J.  
Classification of Nuisances.

Nationality of Vessel.	Number inspected during the year	Defects of Original Construction.	Structural defects through wear and tear.	Dirt, Vermin, and other conditions prejudicial to health
British .. ..	1149	1	149	142
Other Nations	486	2	37	41

# SANITARY IMPROVEMENTS EFFECTED.

## STEAMERS.

Defective ventilators replaced	3	Dirty wash-houses cleansed	6
„ plate ships side rep.	2	Galleys cleansed .. ..	2
„ radiators repaired	4	Food lockers cleansed ..	31
„ decks „	6	Seat „ „ ..	10
„ doors „	5	Bunks cleansed „ ..	49
„ bunks „	15	Tanks „ „ ..	14
„ port frames repaired	10	Leaky overhead decks rep.	2
„ lights repaired	3	Quarters painted wholly or	
„ bulkheads „	4	in part .. ..	17
„ stoves „	2	Quarters cleansed .. ..	20
„ W.c. flush pipes rep.	2	Bilges cleansed & disinfected	1
„ W.c. seats repaired	3	F'csles cleansed & repainted	2
W.c.'s painted .. ..	6	Ventilation improved ..	1
W.c.'s choked, cleared ..	21	Verminous vessels fumigated	15
Drainage remedied	1	„ „ sprayed	8



## TRAWLERS.

Defective bunks repaired	25	Dirty seat lockers cleansed	284
„ stoves „	27	„ bunks cleansed ..	1735
„ food lockers repaired	16	„ transom locker cleansed	142
„ decks repaired	7	„ food lockers cleansed	387
„ chain pipes repaired	9	„ galleys etc. „	147
„ deck lights „	1	„ wash-houses „	4
„ bulkheads „	1	„ „ painted	2
„ linings „	3	„ beds destroyed ..	517
W.c.'s repaired .. ..	1	„ tanks cleaned ..	4
„ soil pipe repaired ..	1	Quarters painted wholly or	
„ connection repaired	11	in part .. ..	174
„ seat repaired .. ..	1	„ cleansed .. ..	181
„ basin renewed .. ..	1	Verminous vessels fumigated	106
„ painted .. ..	49	„ „ sprayed	6
„ cleansed .. ..	55		

On nearly all fishing vessels the forecastles are used for the storing of ships stores and gear. This applies particularly to the smaller vessels in which deck store houses are not provided or, if provided, are of very limited capacity. There is no doubt that this practice contributes largely to the difficulty of keeping crews' quarters clean and in good condition. Unfortunately there seems to be no reasonable solution to the problem as extensive structural alterations would be necessary.

Particular attention is paid to the condition of crews' accommodation and it is pleasing to note that there is a very definite improvement in the way that these are maintained, due in no small measure to the added interest which Masters and Officers are taking in them.

Crews'  
Quarters.

The older type of common forecastle is gradually disappearing and being substituted by two or four berth cabins, thus eliminating many of the insanitary conditions which existed on board ship.

It is satisfactory to note the gradual conversion of the old trough closets into ones of more modern standards.

The standard of ventilation is also much improved, especially in the newer type of vessel and also larger port holes than heretofore, thus greatly improving the natural lighting.

Serious bug infestation of crews' quarters still causes some concern, especially in older vessels with wooden bunks, but it is very gratifying to know that this nuisance is tackled in no uncertain manner on the Master's or Agent's attention being drawn to it.

## VII.—FOOD INSPECTION.

## PUBLIC HEALTH (IMPORTED FOOD) REGULATIONS, 1937.

Quantities and descriptions of food seized and forfeited during the year.

Nature of Article.	Weight.				Why Condemned.	Whether Seized or Forfeited.	How Disposed of.
	Tons.	Cwts.	Qrs.	Stns.			
Haddocks ..	152	10	3	1	Decomposed	Forfeited	Sent to Meal Works.
Codling ..	159	17	2	1	"	"	"
Catfish ..	123	1	1	1	"	"	"
Dabs ..	20	18	1	—	"	"	"
Colefish ..	15	17	—	—	"	"	"
Cod ..	32	6	3	—	"	"	"
Roker ..	8	15	2	1	"	"	"
Roes ..	3	9	—	1	"	"	"
Plaice ..	4	14	3	1	"	"	"
Halibut ..	2	16	3	1	"	"	"
Sea Bream ..	2	6	—	—	"	"	"
Whiting ..	4	5	1	—	"	"	"
Herrings ..	2	9	—	—	"	"	"
Dogfish ..	1	16	—	—	"	"	"
Mackerel ..	3	6	1	1	"	"	"
Tusk ..	—	14	—	—	"	"	"
Ling ..	—	7	2	—	"	"	"
Skate ..	—	3	3	—	"	"	"
Hake ..	—	6	1	1	"	"	"
Gurnards ..	—	13	1	1	"	"	"
Lemon Soles ..	—	13	—	—	"	"	"
Megrims ..	—	2	2	—	"	"	"
Turbot ..	—	1	—	—	"	"	"
Soles ..	—	1	1	—	"	"	"
Witches ..	—	2	2	—	"	"	"
Brill ..	—	3	—	—	"	"	"
Salmon ..	—	4	—	—	"	"	"
Conger Eels ..	—	3	3	—	"	"	"
Crabs 29 score	—	—	—	—	—	—	—
Total	—	—	—	—	—	—	—
Condemned	542	7	—	—	"	"	"
Quantities of Fish remaining	—	—	—	—	—	—	—
Unsold ..	742	6	—	—	"	"	"
Total ..	1284	13	—	—	—	—	—

\* In previous years the whole of the above has been shown under one heading.



*Ex Rail.*

Nature of Article.	Quantity.	Why Condemned.	Whether Seized or Forfeited.	How Disposed of.
Mixed Fish ..	83 stns.	Decomposed	Forfeited	Sent to Meal Works.
Kippers ..	199 "	"	"	"
Wet Fillets ..	19 "	"	"	"
Skate ..	13 "	"	"	"
Dogfish ..	97 "	"	"	"
Hake ..	30 "	"	"	"
Dry Fish ..	1 "	"	"	"
Cod ..	4 "	"	"	"
Chitterlings ..	3 "	"	"	"
Trout ..	8 "	"	"	"
Lemon Soles ..	1 "	"	"	"
Mackerel ..	9 "	"	"	"
Plaice ..	9 "	"	"	"
Halibut ..	3 "	"	"	"
Roker ..	5 "	"	"	"
Sprats ..	3 "	"	"	"
Roes ..	6 "	"	"	"
Prawns ..	4 "	"	"	"
Crayfish tails ..	9 "	"	"	"
<i>Fish Curing Houses.</i>				
Bloaters ..	24 stns.	"	"	"
Herrings ..	4 "	"	"	"
<i>Ex Esbjerg.</i>				
Pigs Maws ..	19 casks	"	"	To Corporation Destructor.

*Shell Fish.*—There are no shell-fish beds in the area of the Port Health Authority.

The layings from which the oysters are marketed in this district are Hunstanton and Brightlingsea.

Number of Samples of Food examined by :—

(a) Bacteriologists—Nil.

(b) By Analyst—

*Nature of Sample.*

*Result of Examination.*

Jellied Veal

Free from Preservatives.

Brawn

" " "

Strawberry Pulp

" " "

I am indebted to Mr. A. Martin, Chief Port Health Inspector, for the details of the sanitary work carried out in the district during the year.

District.

1,952 inspections and re-inspections have been made *re* defects and nuisances during the year.

#### SANITARY IMPROVEMENTS EFFECTED.

##### GENERAL.

Eaves gutters repaired	..	..	..	..	..	17
Roofs repaired	..	..	..	..	..	13
Walls repaired	..	..	..	..	..	16
Doors renewed or repaired	..	..	..	..	..	4
Floors relaid or repaired	..	..	..	..	..	21
Staircases repaired	..	..	..	..	..	1
Windows repaired	..	..	..	..	..	20
Stoves repaired	..	..	..	..	..	1
Down spouts repaired	..	..	..	..	..	24
Smoke holes repaired	..	..	..	..	..	2
Yard surfaces repaired	..	..	..	..	..	4
Road surfaces repaired	..	..	..	..	..	1
Eaves gutters cleansed	..	..	..	..	..	1
Walls cleansed	..	..	..	..	..	199
Floors cleansed	..	..	..	..	..	7
Staircases cleansed	..	..	..	..	..	12
Down spouts cleansed	..	..	..	..	..	1
Ceilings cleansed	..	..	..	..	..	20
Yard surfaces drainage provided	..	..	..	..	..	1
Doors provided	..	..	..	..	..	1
Means of heating provided	..	..	..	..	..	2
Ashpit provided	..	..	..	..	..	1
Water supply provided	..	..	..	..	..	5
Washing facilities provided	..	..	..	..	..	9
Wash basins renewed	..	..	..	..	..	1
Ventilation improved	..	..	..	..	..	3
Lighting improved	..	..	..	..	..	2
Down spouts disconnected from drain	..	..	..	..	..	2
Smoke holes reconstructed	..	..	..	..	..	5
Accumulations of rubbish removed	..	..	..	..	..	16

##### DRAINAGE.

New drains constructed	..	..	..	..	..	44
„ reconstructed	..	..	..	..	..	1
„ repaired	..	..	..	..	..	9
„ ventilated	..	..	..	..	..	12
„ cleansed	..	..	..	..	..	7
Rodding eyes provided	..	..	..	..	..	6
Intercepting traps provided	..	..	..	..	..	3
Sewage plant provided	..	..	..	..	..	1
Inspection chambers provided	..	..	..	..	..	11
„ repaired	..	..	..	..	..	3
New gullies provided	..	..	..	..	..	30
„ cleansed	..	..	..	..	..	10
Waste pipe disconnected from drain	..	..	..	..	..	1



## WATER CLOSETS.

New w.c.'s provided .. .. .	26
New privies provided .. .. .	1
Insanitary or unsuitable w.c.'s abolished .. .. .	8
Insanitary or unsuitable w.c.'s reconstructed .. .. .	4
Ventilation improved .. .. .	2
Water supply provided .. .. .	1
New basins fixed .. .. .	3
New soil pipes fixed .. .. .	1
Doors renewed or repaired .. .. .	2
Flush pipe renewed .. .. .	1
Cisterns repaired .. .. .	2
Roof repaired .. .. .	1
Walls repaired .. .. .	6
Floors repaired .. .. .	3
Soil pipes repaired .. .. .	3
Seats repaired .. .. .	2
Connections repaired .. .. .	4
Flush pipe repaired .. .. .	1
W.c.'s cleansed .. .. .	73
Walls cleansed .. .. .	2
New urinals provided .. .. .	2
Urinals cleansed .. .. .	2
Insanitary or unsuitable urinals abolished .. .. .	1

60 letters and informal notices were served on owners or occupiers during the year.

Fish merchants stands cleansed .. .. .	210	Fish Market.
Fish merchants utensils cleansed .. .. .	416	
Fish merchants ice bins cleansed .. .. .	205	
Fish merchants new ice bins .. .. .	14	
Fish curers kits (lots) cleansed .. .. .	107	
Fish merchants carriers cleansed .. .. .	68	

A large number of dirty offal barrels were cleansed, and foul fish boxes destroyed.

The construction of the new fish market, referred to in the Annual Report of 1937, is proceeding steadily. Several sections have been completed and 790 lineal feet of the new quay and market are now in use.

Additional  
Fish Market  
Facilities.

The second and final part of the scheme has now commenced and when completed will add a further 490 lineal feet of excellent market accommodation.

The method employed of constructing the new market in sections and opening each section immediately on completion ensures that little disorganisation of the industry occurs.

As mentioned in the last report, it is proposed to erect filleting houses at the extreme end of the new market.

This work has not yet been commenced.



Public  
Conveni-  
ences.

There are a large number of these situated on the docks. They are the property of the Railway Company, and are generally kept in good order.

Liver  
Barrels.

These are getting less in number due to many of the vessels now extracting the oil from the livers on board and discharging the crude oil into iron drums. The old liver barrels are now only found on a few North Sea boats.

Fish  
Carriers  
(Barrels).

These are principally used by fish curing firms, and are a constant source of trouble, due to them not being properly cleansed. Your Inspectors have paid most particular attention to them during the past few months, and there is a marked improvement, but they still leave quite a lot to be desired.

Many firms have not yet appreciated that these barrels are intended to convey fish presumed to be for human consumption.

Non-  
Returnable  
Boxes.

It is hoped some day to convert the trade to a proper appreciation of the fact that the adoption of some type of non-returnable-fish-box would do a great deal to improve the value of goodwill existing throughout the country towards the Grimsby fish trade. At the same time the quality of the fish on arrival at its destination would be improved.

Trawler  
Owner's  
Boxes.

There has been a marked improvement in the way in which these boxes are kept.

The Grimsby Trawler Owners Federation have now secured a building which they are reconstructing to enable them to deal with the washing of these boxes on much more modern lines.

Rats and  
Mice  
(Destruction  
Act), 1919.

With reference to the above Act, 587 inspections and re-inspections were made.

4,361 rats were caught on premises, of these 1,121 were black and 3,240 were brown.

A regular system of examination is carried out in stores, warehouses, etc. If rats or traces of rats are found in any building, orders are at once given for their clearance either by traps, poison or fumigation.

Leaflets are distributed pointing out the obligations under the Act, also the penalties for non-compliance.

A card index is kept of all buildings, etc., in which rats have been found.

Parrots  
(Prohibition  
of Import)  
Regulations,  
1930.

One Notice was issued during the year.

The Shops  
Acts,  
1912-1934.

Periodical inspections are being carried out under the above Acts.

Factories  
Act, 1937.

These places are kept under constant supervision, a card index record kept as to the nature of the trade carried on and their conditions.



Further particulars will be found in copy of Home Office Form below :—

1.—INSPECTIONS FOR PURPOSE OF PROVISION AS TO HEALTH.

Including inspections made by Sanitary Inspectors.

Premises. (1)	Number of		
	Inspections. (2)	Written Notices. (3)	Occupiers Prosecuted. (4)
Factories with mechanical power	830	1	Nil
Factories without „ „	788	77	Nil
Other premises under the Act .. (including works of building and engineering construction but not including outworkers' premises).	Nil	Nil	Nil
Total .. ..	1618	78	Nil

2. DEFECTS FOUND.

Particulars. (1)	Number of Defects.			Number of defects in respect of which prosecutions were instituted. (5)
	Found. (2)	Remedied (3)	Referred to H.M. Inspector. (4)	
Want of cleanliness (S. 1) .. ..	156	154	Nil	Nil
Overcrowding (S. 2) .. ..	Nil	Nil	„	„
Unreasonable temperature (S. 3) ..	„	„	„	„
Inadequate ventilation (S. 4) .. ..	2	1	„	„
Ineffective drainage of floors (S. 5) ..	21	18	„	„
Sanitary { insufficient ..	8	6	„	„
Conveniences (S. 7) { Unsuitable or defective	19	12	„	„
{ Not separate for sexes	Nil	Nil	„	„
Other offences .. ..	55	43	„	„
Total .. ..	261	234	Nil	Nil

Offensive  
Trades.

The trades scheduled as offensive trades within the Port of Grimsby are the trades of a Fish Curer and a dealer in fish offal. The Liver Oil Factory also is so scheduled.

Fish Meal  
Works.

Only one of these is situated in the Dock Area, and it is kept under constant supervision. No cause for complaint was found. The proprietors are at all times most courteous and willingly co-operate with the Health Department in all matters with which they are concerned.

Fish Curing  
Houses.

There are 36 fish curing houses situated within the dock area.

As pointed out in previous reports many fish curers carry on a wet fish business in addition to that of fish curing, the curing house being used for purposes in connection with both businesses.

During the year extensive repairs have been carried out at several curing houses.

The work done being principally in connection with drainage improvements, relaying of defective floors, and the improvement of sanitary accommodation.

Under the bye-laws a notice is served twice yearly requiring limewashing of the premises.

All curing houses are systematically inspected in order to ensure compliance with these notices and also to see that a reasonable standard of cleanliness is constantly maintained.

It is a pleasure to record that practically all of the work required at these premises has been carried out promptly by the several owners concerned and in conjunction with the Authority's Officers.

Fish Liver  
Oil Factory.

A fish liver oil factory well equipped with modern plant for extracting oil from livers and refining same, is established on the North Wall, No. 3 Fish Dock.

The factory is well conducted and there has been no cause for complaint during the year.

Fish  
Cleaning and  
Packing  
Houses.

There are 40 fish cleaning houses situated within the dock area.

These premises are systematically inspected and no difficulty has been experienced in securing a reasonable standard of cleanliness, both in respect of premises and processes.

Generally, the premises employed are in a fair state of repair, and where necessary a notice has been served requiring improvement.

In the case of new premises or the reconstruction of old premises, it is gratifying to record that the owners concerned usually seek the advice of the Health Department.



Fish waste from all premises situated within the dock area is taken to the meal works and converted into fish meal. Fish Waste.

A daily collecting of fish waste is in operation and is undertaken by the proprietors of the meal works.

The daily collection of fish waste ensures that all waste collected is fresh in condition, as there is little or no risk of it having reached a state of decomposition, and this, together with the cleansing of the barrels used, reduces the risk of nuisance arising to a minimum.

The system operates satisfactorily and there has been no cause for complaint during the year.

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The Railway Company have given special attention to road sweeping and the collection of refuse during the year with satisfactory result. Considerable sums of money have been spent on improving certain sections of the road surfaces.

No sickness of a serious nature occurred in the dock area during the year.

I acknowledge with thanks the cordial co-operation which we receive from H.M. Customs and Waterguard and from H.M. Immigration Officers, also the Port Master and the Dock Officials of the London and North Eastern Railway Company.

The first of these is the fact that the present system of the world is not a perfect one, and that it is not a perfect one.

A second consideration of the world is the fact that it is not a perfect one, and that it is not a perfect one.

The third consideration of the world is the fact that it is not a perfect one, and that it is not a perfect one.

The fourth consideration of the world is the fact that it is not a perfect one, and that it is not a perfect one.

The fifth consideration of the world is the fact that it is not a perfect one, and that it is not a perfect one.

The sixth consideration of the world is the fact that it is not a perfect one, and that it is not a perfect one.

The seventh consideration of the world is the fact that it is not a perfect one, and that it is not a perfect one.

The eighth consideration of the world is the fact that it is not a perfect one, and that it is not a perfect one.

The ninth consideration of the world is the fact that it is not a perfect one, and that it is not a perfect one.

The tenth consideration of the world is the fact that it is not a perfect one, and that it is not a perfect one.

The eleventh consideration of the world is the fact that it is not a perfect one, and that it is not a perfect one.

The twelfth consideration of the world is the fact that it is not a perfect one, and that it is not a perfect one.

The thirteenth consideration of the world is the fact that it is not a perfect one, and that it is not a perfect one.

The fourteenth consideration of the world is the fact that it is not a perfect one, and that it is not a perfect one.



CHAMBERSBURG EDUCATION COMMITTEE  
Report of the School Medical Officer  
FOR THE YEAR 1938

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SECTION H.

SCHOOL MEDICAL SERVICE.

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## GRIMSBY EDUCATION COMMITTEE.

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### Report of the School Medical Officer FOR THE YEAR 1938.

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TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION  
COMMITTEE.

I have the honour to present my fifth annual report as School Medical Officer.

The year 1938 has been one of further consolidation and expansion of the School Medical Service, and the School Medical Services Sub-Committee has continued to shew a keen interest in the work of the service. The expenditure on special services continues to be low compared with other county boroughs. The school dental service has been working under grave disabilities, but it is hoped that the leeway in this respect will be made up.

The main advances during the year were as follows :—

(a) The commencement of building of the new clinic in Hope Street to replace the present unsatisfactory premises at Hamilton Street.

(b) A further expansion of the provision of school meals and milk in schools, and closer co-ordination in this respect with the medical services.

(c) Satisfactory teamwork in dealing with an outbreak of poliomyelitis among school children and others, with co-ordination with the voluntary hospital in dealing with the after-effects thereof.

I should like to point out that the five points emphasised in the introduction to my annual report last year have still to be dealt with. These are :

1. Closer integration with other health services, particularly in regard to nursing facilities.

2. Reconstruction of the present most unsatisfactory school clinic at Burgess Street.

3. Further extension of the dental services including provision for the secondary school, the junior instruction centres and the toddlers.



4. Provision of an open-air school of 120 places.
5. Provision of special training in speech therapy for selected cases.

I would also suggest that the following matters need attention :—

6. Provision of special classes in the schools for feeble-minded children.
7. A more comprehensive scheme for dealing with nose and throat defects.

I should like to take this opportunity of thanking the Chairman and members of the School Medical Services Sub-Committee, the Director of Education and the officials and teachers for their interest, co-operation and support throughout the year. The support from the Director of Education in securing a higher standard of efficiency in the school medical service has been most welcome, and I should particularly like to thank Dr. W. G. Southey who has written the major portion of this report for me as he has also done for its four predecessors.

JAMES A. KERR,

School Medical Officer.

Public Health Department,  
St. James' House,  
Bargate, Grimsby.

April, 1939.

**GRIMSBY EDUCATION COMMITTEE.***Chairman*—ALDERMAN J. H. CURRY, J.P.*Deputy-Chairman*—COUNCILLOR I. ABRAHAM, J.P.

DIRECTOR OF EDUCATION—

DR. J. STUART HAWNT.

**SCHOOL MEDICAL SERVICES SUB-COMMITTEE.***Chairman*—COUNCILLOR C. CANNING.*Deputy-Chairman*—COUNCILLOR J. KEAY.

THE MAYOR, ALDERMAN H. WELDRICK, J.P.

Alderman	J. H. CURRY, J.P.	Councillor	W. ROBERTS.
Councillor	I. ABRAHAM, J.P.	"	W. H. WINDLEY.
"	M. BLOOM.	Mrs.	W. H. THICKETT.
"	J. H. CARR.	Mr.	A. COLLINSON.

**STAFF OF SCHOOL MEDICAL DEPARTMENT.**

MEDICAL OFFICER OF HEALTH AND SCHOOL MEDICAL OFFICER—

JAMES A. KERR, B.Sc., M.D., D.P.H.

ASSISTANT SCHOOL MEDICAL OFFICERS—

W. G. SOUTHEY, M.B., B.S., D.P.H.

Miss R. HALPERIN, M.B., B.S., D.P.H.

J. MILLER VINE, M.B., B.S., D.P.H.

DENTAL OFFICERS—

L. N. ALLEY, L.D.S. (Appointed 6.1.1939).

C. F. SALT, L.D.S.

A. W. MCCARTHY, L.D.S. (Resigned 31.5.1938).

SCHOOL NURSES—

Miss F. S. HIGLEY, Superintendent. (Appointed 3.1.1938).

NURSES K. DRUMMOND (Resigned 30.4.1938), E. RANDS,  
J. UPTON, H. BRYAN, A. ABBEY and G. E. BRIGHAM (until  
July, 1938).

DENTAL ATTENDANTS—

Miss R. HENFREY.

Miss A. M. ROBERTS.

OFFICE CLERKS—

Miss J. COOKE; Miss M. GREEN.

MENTAL WELFARE VISITOR—

Miss E. M. WOULD.



The average number of children on the register during 1938 was 12,566, a reduction of 70 on the previous year. It is anticipated that during 1939 there will be a marked increase consequent on the raising of the school leaving age as it is expected that exemptions on account of beneficial employment will be few.

**Co-ordination.**—The School Medical Service is more intimately linked with the Maternity and Child Welfare Service although the health visitors are still entirely separate from the school nurses. It is desirable that future appointments of school nurses should be confined to those who have the health visitor's qualification, and the same individual should supervise the work of both classes of officers.

The toddlers' clinics of the Maternity and Child Welfare Department are continuing to make progress, and soon it is hoped that the diminution in the number of defects found in entrants will shew a further diminution. Special arrangements are also being made to supervise the children attending the first nursery class established at Macaulay Street School.

The arrangements for the co-operation of the teachers, health visitors and school attendance officers in respect to measles, whooping cough and chicken-pox has continued, and there is now very little unnecessary loss of attendance from this source. It is hoped in the near future to revise the regulations in regard to the exclusion of contacts from these diseases to still further diminish the loss of school time through these complaints.

Care is taken that any defects found by the staff of the Isolation Hospital during the stay of children there is brought to the notice of the school medical staff.

Arrangements have been made through the Borough Insurance Committee for a synopsis of the individual records of children who have left school to be available to practitioners in respect to the 14 to 16 group who have recently come within the scope of the National Insurance Acts.

The new dental clinic in Watkin Street is housed in premises rented from the Maternity and Child Welfare Committee, and cases are sent by the latter Committee to the ophthalmic, orthoptic and cardiac clinics, the cost being adjusted between the two committees on a user basis.

It is anticipated that by the end of 1939 the maternity and child welfare clinic in Hope Street will be completed, when it will be possible to house there the present clinic in unsatisfactory premises at Hamilton Street. The Education Committee will then consider the question of adapting the Hamilton Street premises for use as a meals centre.

It is hoped that when the new municipal offices are completed and the clerical departments move from their old



premises it will be possible to re-construct the present unsatisfactory school clinic and tuberculosis dispensary.

**School Hygiene.**—I am indebted to the Director of Education for the following information in respect to progress made during 1938 in improving the environment of school children :—

Removal of partitions and walling at Edward Street junior boys' and girls' school. Alteration to flushing system of the latrines at Edward Street School.

Hot water supply and additional wash bowls provided at Victoria Street Infants' school.

Re-decoration of special classroom at Little Coates school.

Erection of new canteen for provision of meals at Nuns-thorpe school.

Fixing of drinking fountains at Strand Street school.

Completion of new Macaulay Street school, providing accommodation for 450 juniors, 300 infants and 30 in the nursery class.

Commencement of the reconstruction of South Parade school which will eventually provide accommodation for 450 juniors and 340 infants.

### MEDICAL INSPECTION.

The usual routine medical inspections of school children by age-groups were carried out during the year, each school being visited at least once for this purpose.

The number examined was as follows :—

Entrants (5-6 years)	1246
2nd Age Group (8-9 years)	1287
3rd Age Group (12-14 years)	1217
	—
Total	3750
	—

The special cases seen during the year amounted to 1,742, as compared with 1,990 in 1937, and 2,228 in 1936.

### FINDINGS OF MEDICAL INSPECTION.

(a) **Nutrition.** Consideration of the subjoined Table will show the average heights and weights in the different groups, compared with those found in 1937. The differences, if any—whether decreases or increases—are only fractional.



## Average Height and Weight.

		GRIMSBY 1938		GRIMSBY. 1937	
		Height Inches	Weight Lbs.	Height Inches	Weight Lbs.
<b>ENTRANTS.</b>					
5-6 years	Boys	42.9	43.3	42.8	43.7
5-6 years	Girls	42.5	41.6	42.1	41.6
<b>2ND AGE GROUP</b>					
8-9 years	Boys	49.3	57.0	49.4	57.7
8-9 years	Girls	49.1	55.3	49.0	55.5
<b>3RD AGE GROUP.</b>					
12-13 years	Boys	56.6	80.8	56.4	80.9
12-13 years	Girls	57.4	84.3	57.4	82.1

Unemployment in the town continued to increase during 1938, but, fortunately that increase has not been reflected as yet in any appreciable increase in the cases showing sub-normal nutrition, nor should it be so in the future if the machinery now available for the prevention of "malnutrition" functions properly. It should be emphasised once again that "malnutrition" should always be regarded as a condition to be prevented rather than cured.

As regards nutritional assessment of the 3,750 examined, 645 (17.2%) were classed "A," 2,623 (69.9%) were classed "B," 476 (12.7%) were classed "C" and only 6 (0.16%) were classed "D." Compared with the figures of 1937, there was a small increase in the "C" group, and a slight decrease in the "A" and "D" groups.

Each of the six cases of "malnutrition" was carefully investigated in regard to the home conditions and family circumstances of the child, and a brief resumé similar to that given in the report for 1937 may be of interest.

J.L. mother says "always small since birth"—father who died in 1937 was also "small" child. Though small and fragile looking, is active and sleeps well and "seldom ails"—free dinners were for some time provided for the school children of this family, but recently discontinued; this child seems to have neither capacity nor liking for milk; case seems to be one of poor physique rather than true malnutrition.

F.P. very puny feeble-looking child; has been under observation at School Clinic since 2nd February, 1938; history suggests abnormal sensitiveness (frequently weeps without apparent cause; does not play with other children; shrinks from company); eight in family; home circumstances poor; all children



have free milk and dinners ; some neurosis probably chief factor in this child's poor nutrition.

- B.S. very tiny but active and intelligent child ; home circumstances good ; father in regular employment ; good meals provided ; adequate hours of rest ; tonsils enucleated in 1936 ; probably case of poor physique rather than true malnutrition.
- R.S. poor physique ; speech defective ; was premature baby ; signs of rickets in early life ; operation for tonsils and adenoids in 1936 ; tracheotomy 1937 ; home conditions fairly good ; five children in family ; adequate hours of rest ; ventilation and cleanliness satisfactory ; mother a good manager ; father earns 39/-, and one son earns 8/- ; rent and rates 10/11 ; free milk and dinners refused.
- P.J. signs of verminous infestation at school examination ; mother brought child to clinic and said " delicate since birth " ; mother suffers from pulmonary tuberculosis but child is " mantoux negative " ; mother does her best but is inefficient ; family stock is obviously poor ; recommended free milk and dinners.
- H.S. a twin and " premature " child (other child died in infancy) ; only weighed  $2\frac{1}{2}$  lbs. at birth ; backward in teething and talking ; walked first at age of 5 ; education commenced at age of 7 ; home circumstances good ; father earns £3 ; free meals not required.

In addition to routine medical inspections, " nutritional surveys " were carried out in the following schools :—

- |                               |                             |
|-------------------------------|-----------------------------|
| (1) Victoria Street Infants'. | (2) Victoria Street Girls'. |
| (3) " " Boys'.                | (4) South Parade Boys'.     |
| (5) Little Coates Jun. Mixed. | (6) Hilda Street Infants'.  |
| (7) Hilda Street Boys'.       | (8) Holme Hill Girls'.      |
| (9) Holme Hill Jun. Boys'.    | (10) Holme Hill Sen. Boys'. |
| (11) St. Mary's Girls'.       | (12) St. Mary's Boys'.      |
| (13) Strand Street Infants'.  | (14) Strand Street Girls'.  |
| (15) Weelsby Street Girls'.   | (16) St. John's Infants'.   |
| (17) St. John's Girls'.       |                             |

All these schools serve areas where there is considerable unemployment and poverty, and they were specially selected for survey as being the most likely to reveal cases of sub-normal nutrition if such exists to any unusual degree in the town.

It should be understood that there was neither time nor the facilities for a detailed examination of the children picked out for enquiry : but the home circumstances of every child whose nutrition appeared on clinical assessment to be sub-normal were subsequently investigated by a school nurse and arrangements made for giving extra nourishment (either milk or dinners) when this was found to be necessary.



The following table has been drawn up to show a brief analysis of some of the findings.

School Inspected.	No. on Register.	Fathers unemployed or Mothers Widowed.	Number (average) who purchase Milk.	Number having free Milk.	Number having free Dinners.	No. found to be of sub-normal nutrition (not previously investigated)
Victoria St. Infants'	220	—	60	—	25	24
" Girls'	238	86	80	34	28	25
" Boys'	215	105	46	33	44	40
South Parade Boys'	250	43	49	—	2	36
Little Coates Junior	468	108	102	10	6	28
Hilda Street Infants'	221	—	70	13	9	5
" " Boys'	375	111	90	34	18	26
Weelsby Street Girls'	284	61	40	17	9	17
Strand Street Infants'	223	—	55	18	13	9
" " Girls'	196	64	48	28	24	14
Holme Hill Girls'	245	26	30	30	25	26
" " Junior Boys'	167	29	30	4	7	22
" " Senior Boys'	189	40	50	8	5	32
St. Mary's Girls'	163	20	40	4	12	20
" Boys'	172	29	35	10	15	29
St. John's Infants'	252	—	60	6	1	8
" Girls'	340	—	110	18	2	6

It will be found that in five of the schools it was impossible to obtain unemployment figures : and that two of the schools surveyed at the beginning of the year show no figures for free milk. It will be observed that the nutritional surveys were more productive of cases of subnormal nutrition than the previous year.

(b) **Uncleanliness.** The total inspection of school children during 1938 was 41,820, and the number showing verminous infestation was 880 compared with 633 in 1937, 609 in 1936, 359 in 1935, 500 in 1934, and 795 in 1933. For the purpose of these inspections the nurses paid 398 visits to schools, an average of 19.3 per school, as compared with an average of 11.5 per school in 1937.

It will be noted that the number of visits paid to schools by nurses for this purpose has almost doubled compared with last year.

At school medical inspections 210 children out of a total of 3,750 examined showed signs of louse infestation, a considerable increase on the figures for the previous year, but some of the increase is to be explained by the fact that during the year every case showing nits (no matter how few they might be) was counted as an infestation, whereas in previous years trivial cases have been ignored unless there happened to be a previous history of louse infestation.

(c) **Diseases of the Skin.** Figures for the three principal contagious diseases found at routine and special inspections



are given below, together with those of the three previous years for purposes of comparison.

	Ringworm.	Scabies.	Impetigo.
1935	26	72	73
1936	25	64	106
1937	17	58	49
1938	10	82	32

An increase in scabies but reduction in the incidence of ringworm and impetigo will be noted.

(d) **Visual Defects and External Eye Diseases.**—At routine inspection 91 cases of defective vision and 26 cases of squint were found as against 83 and 36 in 1937.

External eye diseases totalled 132, most of which consisted of mild degrees of blepharitis: only 29 requiring treatment. Special inspections showed a further 50 cases of such diseases.

(e) **Nose and Throat Defects.**—Cases of tonsils, adenoids or both found at routine and special inspections to require treatment totalled 176, as against 254 in 1937: a rather remarkable reduction in incidence. It seems as if we are making up the leeway of years of opposition by parents and that the number of tonsils and adenoids requiring attention will now remain at a lower level.

(f) **Ear Disease and Defective Hearing.**—Cases requiring treatment totalled 122 as against 192 in 1937; also a fairly large reduction in incidence.

(g) **Dental Defects.**—See report of School Dentist.

(h) **Orthopædic and Postural Defects.**—The total found at all inspections was 58 as against 46 in 1937.

(i) **Heart Disease.**—Excluding functional cases, 16 cases were found as against 20 in 1937.

(j) **Tuberculosis.**—7 cases of pulmonary tuberculosis and 28 cases of non-pulmonary tuberculosis were diagnosed in 1938, as compared with 11 pulmonary and 14 non-pulmonary cases in 1937.

(k) **Nervous Defects.**—There were 17 cases of chorea diagnosed at all inspections as against 9 in 1937.

The number of children found to require treatment for any condition save defects of nutrition, uncleanliness and dental diseases at routine medical inspections during the year was 307 or 8.2%.



### Following Up.

The remarks made in last year's report and reports also of previous years continue to be appreciable.

The great majority of children with remediable defects found at school inspections are brought to the Clinic within a short while for advice or treatment, while the few who can afford a private doctor are dealt with in that way. It is seldom that one finds defects unremedied when reinspection takes place at school a year later.

Reinspection of cases that are brought to the Clinic are arranged for as frequently as may be necessary.

The figures for Clinic attendances each year may be regarded as a measure of the confidence that the parents of this town have acquired in their School Medical Service. This "clinic consciousness" on the part of the public may have its drawbacks when the staff and accommodation are limited: but it has the great merit of securing both uniformity and continuity in treatment, and of convincing parents that the various members of the staff have the true interests of their children at heart.

### ARRANGEMENTS FOR TREATMENT.

(a) **Defects of Nutrition.**—The Local Authority may be congratulated on having taken a great step forward in the prevention and treatment of nutritional defects in the school children of this town, when the provision of free milk for necessitous cases on the recommendation of the school medical officers was introduced at the beginning of 1938.

It was pointed out in the annual report for 1937 that the considered opinion of medical officers for the Corporation was that true malnutrition is fortunately rare in Grimsby; so that the problem of nutrition should always be regarded as one of prevention rather than cure.

A third of a pint of milk a day for a definitely under-nourished child may not be regarded as any great addition to its diet; but when added to the diet of children whose nutrition is assessed as border-line or only slightly below normal (in other words potential sufferers from malnutrition) it must have a very definite preventative value.

The provision of free mid-day dinners had been previously the only available weapon in the fight against under-nourishment, whereas to-day the free milk is an additional weapon very much welcomed by medical officers.

Home circumstances of many school children have deteriorated very considerably in recent months owing to continued and extended unemployment, and it is highly probable that the Authority will in the near future have to make even more extensive provision than it is doing at present for free meals, if the hitherto satisfactory state of school children's nutrition is to be maintained.



Besides the provision of milk and/or meals large quantities of vitamin preparations are supplied from the school clinic on the recommendation of medical officers either at cost price, half price or free according to the circumstances of the parents.

The Medical Officer of Health has nothing to add to or subtract from the report made to the members of the Special Committee *re* Nutrition which was included in his report for 1937, except to state that it is hoped that the assistance given by the Education Committee in providing teachers for the well attended classes conducted by the Maternity and Child Welfare Committee at the clinics will eventually bear fruit.

A Special Observation Clinic (or "Malnutrition Clinic") was held every Friday afternoon throughout the school year from 2 p.m. to 4-30 p.m. for the purpose of dealing with

- (1) cases requiring observation rather than active treatment
- (2) cases of subnormal nutrition, and
- (3) problem cases, psychoneurotic in type, that would ordinarily be referred to a child guidance clinic if such existed.

This Clinic, as mentioned in previous reports, serves a very useful purpose in relieving congestion at the morning clinics and in suiting the convenience of mothers who find it difficult to attend a morning clinic.

Cases are only seen by appointment.

At this Special Clinic, 104 cases made a total of 378 attendances during the year. They were classified as follows:—

Debility and Subnormal Nutrition	52
Rheumatism and Chorea	3
Heart Defects .. .. .	2
Anæmia .. .. .	15
Asthma and Bronchitis .. ..	16
Psychoneuroses .. .. .	5
Other conditions .. .. .	11

This compares with 97 cases and 263 attendances during 1937. It is hoped that eventually a proper child guidance clinic will be established somewhere in this part of England to deal with the cases from neighbouring counties.

(b) **Uncleanliness.**—The baths provided at the school clinic for cleansing cannot be used for the purposes they are intended, but some propaganda is carried out in respect to the washing of hands of those attending at the clinics. There are, however, no facilities for employing baths in the treatment of skin diseases. It is hoped to provide these in conjunction with the new municipal hospital.

X-ray treatment for ringworm is not available.



As remarked in previous reports, most of the skin conditions treated at the clinic ("septic sores" in particular) are the direct result of dirt and parental incompetence.

As regards verminous heads, cleansing notices were served in 69 cases, of which 2 required a notice on two different occasions. The figures for 1937 were 47 and 1 respectively.

20 children had their heads cleansed at the School Clinic at their parents' request.

There have been no prosecutions for this offence in Grimsby in recent years.

The arrangements for ordinary washing, not to speak of baths, at the Clinic are negligible; and the provision of one or two properly fitted wash basins with hot water and towels would be of great assistance to the nurses who have to attempt some sort of cleaning for many of the children before dressings can be applied. As has been pointed out in previous reports, many of the cases of septic sores and other skin conditions that are brought to the Clinic for dressing could be prevented if ordinary soap and water were properly used in the homes. That such a state of affairs should persist in spite of ceaseless propaganda both in schools and clinics is a sad commentary on so-called civilization.

(c) **Minor Ailments.**—The figures for attendances at the School Clinic were as follows —

Total cases	6088
Total attendances	17600

as compared with 6,732 and 12,590 respectively in 1937.

The large increase in the number of attendances will be noted.

The clinic is held every morning of the school week from 9-30 a.m. to 1 p.m.

Of the above cases, 1,358 were dealt with by one or other of the clinic nurses, and did not require to be seen by the medical officer.

The present arrangements whereby cases not of an urgent nature are seen by the medical officer by appointment only (these appointments being previously made by the senior clinic nurse, one of whose duties is to "sort out" as far as possible all cases into "urgent" and "not urgent") are functioning very satisfactorily, and preventing much of the congestion and waiting that at one time seemed to be an unavoidable feature of the morning clinics.

(d) **Defects of Vision and Diseases of the Eye.**—Refraction clinics were held every Tuesday afternoon from 2 p.m. to 6 p.m.

Every Thursday afternoon in addition a clinic was held by Dr. W. Gordon Davidson, the consulting ophthalmologist appointed under the Authority's scheme to deal with cases of squint and of any diseases of the eye that were referred to him from the school clinic or the Maternity and Child Welfare Department.

At the Tuesday clinics, 473 children (of whom 343 were new cases) had refraction and glasses prescribed, of which number 418 obtained glasses under the Authority's scheme.

At Dr. Davidson's clinics, a further 149 children, of whom 95 were new cases, had refraction and 147 of these had glasses prescribed.

7 cases of eye diseases, apart from squints and errors of refraction were referred from the school clinic to Dr. Davidson during the year. 23 operations for squint were performed by him, and 41 cases received orthoptic training at his consulting rooms.

Analysis of the new cases of errors of refraction dealt with at both clinics during the year is as follows :—

Squint	..	..	..	24.0%
Hypermetropia	..	..	..	14.0%
Myopia—high nil	..	..	..	} 4.2%
„ low 4.2%	..	..	..	
Astigmatism	{	hypermetropic	44.3%	} 57.8%
		myopic	7.5%	
		mixed	6.0%	

I am obliged to Dr. Davidson for the report on orthoptic work carried out under his supervision during the year :—

Total number of attendances	..	..	..	1,047
do. do. operations	..	..	..	23

Patients discharged :—

Cured—

Orthoptic exercises and operation	..	10
Orthoptic exercises and occlusion	..	5
Cured with operation alone (cosmetic cures)	..	6
	—	21

Failures—

Due to poor or absent response to treatment	..	4
---	----	---

Cases at present under treatment—

Occlusion	..	20
Orthoptic exercises	..	17
Orthoptic exercises and operation	..	7
	—	44

Waiting list	..	23
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(e) **Nose and Throat Defects.**—As mentioned before the number of cases requiring attention in this respect fell from 254 to 176. These were classified as follows :—

Chronic tonsillitis .. .. .	60
Adenoids only .. .. .	28
Chronic tonsillitis and adenoids .. .. .	88

Operative treatment was provided for 90 cases of unhealthy tonsils, adenoids or both tonsils and adenoids, at the Grimsby and District Hospital under the Authority's scheme, for a further 4 cases at the Hull Royal Infirmary and for 8 cases privately—a total of 102 cases.

In the great majority of cases, the results of operation have been quite satisfactory.

The Nasal Hygiene Clinic, whose inception was referred to in last year's report, was held every afternoon throughout the school year under the supervision of an enthusiastic clinic nurse and gave splendid results in all types of cases showing catarrhal conditions of the nose and throat. Many cases where the necessity for immediate operation on tonsils and adenoids seemed doubtful were benefited considerably by the treatment, but the best results were obtained in (a) old operation cases showing residual catarrh due either to recurrence of adenoids or their inadequate removal, (b) cases of chronic rhinitis, and (c) cases of chronic otitis media.

It is always emphasised to parents that the few weeks clinic treatment should be regarded mainly as educational, and that lasting benefit can only be looked for if treatment at home is continued for some months after clinic treatment is completed.

The more intelligent children and mothers fully understand this and make arrangements accordingly. The only real failures are amongst the stupid, who fail to grasp the necessity for continuity in treatment.

The number of children treated during the year was 300, and the total of attendances was 4,430.

(f) **Ear Disease and Defects of Hearing.**—In addition to the cases mentioned above, a further 74 children were treated at the Nasal Hygiene Clinic for otorrhœa and chronic otitis media ; and they made total attendances of 1,231.

There are no facilities at the clinic for the zinc ionisation treatment of middle ear disease ; but highly satisfactory results have been obtained all the year by a combination of nasal hygiene and one or other of the following methods of local treatment.

- (a) daily instillation (after cleansing the ear) of a saturated solution of boric acid in spt. vin. meth. followed by insufflation with dry boric acid powder,



- (b) daily insufflation with iodized boric acid powder as described in the annual report for 1933 of the Chief Medical Officer of the Board of Education,
- (c) gentle syringing daily with one in 1,000 acraflavine solution.

Occasionally the best results are obtained by alternating these three methods of local treatment every few days.

In view of the Board of Education report relating to children with defective hearing the question of purchasing a gramophone audiometer was given consideration, but in view of the present strain on both the school medical and nursing staff and in view of the fact that from the relative figures per thousand of school population the majority of deaf and partially deaf children had been ascertained, consideration of this question was deferred for a further period.

- (g) **Dental Defects.**—See dentist's report.

(h) **Orthopædic Defects.**—The scheme made by the local education authority in conjunction with the Grimsby and District Hospital continues to function satisfactorily, and all children with such defects are referred there and dealt with by Mr. R. Guy Pulvertaft, F.R.C.S.

During the year 45 cases were referred as out-patients, and 13 cases were admitted as in-patients. Successive infections of the children's block in the Grimsby and District Hospital with infectious disease and with resultant quarantine have materially hindered the work of the hospital in regard to in-patient treatment.

The cases which require a long term of in-patient treatment are sent elsewhere, and during the year 4 cases were sent to Harlow Wood Hospital, near Mansfield, and one was sent to the auxiliary hospital at Gringley-on-the-Hill.

In August an outbreak of poliomyelitis occurred in Grimsby and district, and practically all the cases were sent to the Grimsby Corporation Hospital. After the infective period had passed arrangements had to be made for their further hospital treatment, and on the 14th October, 1938, following some delay owing to the international situation, they were transferred to Weelsby Old Hall, an annexe of the Grimsby and District Hospital, which was at the same time given temporary recognition by the Board of Education as a special school for a period of six months. Temporary teaching facilities were made available by the co-operation of the Education Committee with that of a neighbouring local authority.

- (i) **Heart Disease and Rheumatism.**—A fortnightly session is held at the School Clinic by Dr. J. W. Brown, the consultant physician in these diseases to the local authority.



Sixty-four cases, of which 25 were new, made a total of 157 attendances at this clinic.

The clinic continues on the lines indicated by Dr. Brown in his report for the year 1936, and I am indebted to him for a further report this year as follows :—

The rheumatic and heart clinic has continued to be active and much clinical and scientific work has been done. The results of this work will be discussed at a later stage when more data has accumulated. Much thought has been devoted to the problem of employment for these children when they leave school. This aspect of work has become of greater and greater importance as time wears on, owing to the rapidly narrowing field in which work can be found due to the general level of unemployment, the insistence on a high grade of physical fitness in pensionable employment and superannuation schemes, and in a town, such as this, devoted to one main industry, the lack of any wide choice of work. Another formidable obstacle in placing these cardiac children is the fear that exists in the minds of employers as to the results of the Workmen's Compensation Act if one of these cases should become ill during their employment. Ideally no job that could be filled by a cardiac case should be taken by a perfectly fit person. Only in Germany is there legislation that insists upon 2 per cent. of places in any industry being filled by people at least 50 per cent. disabled. A certain lack of interest and apathy exists as to the fate of these children when they leave school. Even whilst they are at school it is too often assumed that they will never be worth very much, whereas, in reality, it is these very children to whom the greatest educational pains should be devoted so as to fit them for some form of remunerative employment. Experience shews that many cases with established valvular disease are capable of performing useful work without damage to themselves, or shortening their lives. Too often as stressed in previous reports, the presence of cardiac signs even of the most trifling nature, has led to gross and unnecessary restriction of the activities of the patient. This clinic has always set its face resolutely against such an attitude, and stress has been laid upon the dignity and usefulness of work to patient and parent alike. A glance at the appropriate records will shew how few children are excluded from school, even temporarily, if they have attended the clinic. It is discouraging to prepare a person for work and then to find that it is refused by employers. Your physician has managed to place a few of these cases, but it requires somebody to take an active interest in their welfare, similar to that taken in the crippled children. Amongst skilled and semi-skilled work suitable for these cases may be included clerking, secretarial work, handiwork and crafts, electrical construction, architectural work, poster designing, music either instrumental or teaching, millinery,



dressmaking, tailoring, cobbling, cabinet making, etc. At an early stage the child's interest should be diverted towards one or other of these, and encouragement and assistance should be given to them to attend night school or other centre. A real need, if rehabilitation and employment is to be effected, is to employ a trained worker in conjunction with the various clinics.

(j) **Tuberculosis.**—As in previous years, all suspected cases found at either routine or special inspections were straightaway referred to Dr. Vine the Tuberculosis Officer, who has always taken the keenest interest in such cases, and worked in close and cordial collaboration with the School Medical Service.

**Ultra Violet Therapy.**—No provision is made for ultra violet therapy by the Education Committee although a certain number of pre-tuberculous children receive treatment at the anti-tuberculosis dispensary.

#### DENTAL REPORT.

It is hoped that the new premises to replace the present unsatisfactory clinic at Hamilton Street will be ready at the end of 1939.

As mentioned in my last annual report the dental officers owing to the additional anæsthetic sessions became more and more in arrears with their work. The effect of the evening sessions imposed by the Education Authority was to cause one of the dental officers to seek employment elsewhere, and the work to get further in arrears. In the autumn of 1938 the Board of Education indicated their disapproval of evening dental sessions. Finally, the Education Authority came to a true appreciation of how the arrears were piling up and towards the end of the year appointed a senior dental officer and arranged for a third officer to be appointed as soon as the new clinic was available.

I am indebted to Mr. C. F. Salt, L.D.S., for the following report :—

This report refers to the dental work done at the Hamilton Street and Watkin Street school dental clinics during the year 1938.

3,363 children belonging to 22 school departments were inspected in 38 visits, an average of 88.2 per visit.

Of the children inspected 628 boys and 582 girls were new entrants, and 1,124 boys and 1,029 girls were re-inspected.

The numbers re-treated as the result of periodical inspection were 530 boys and 635 girls.

Of the 1,420 teeth filled 1,419 were permanent and 1 temporary, and of the 7,797 teeth extracted 1,747 were permanent and 6,050 were temporary teeth.



The percentages of teeth extracted work out as 22.4 per cent. permanent and 77.6 per cent. temporary: these figures are much the same as those for 1937, viz.:—21.43 per cent. permanent and 78.56 temporary.

Too many of the 1,707 "Specials" were again those who had refused treatment when inspected, the result being that many permanent that could have been saved at the time of the inspection had to be extracted when the child did attend the clinic owing to having had pain.

The percentage of children with all sound teeth was boys 12.27 per cent., and girls 10.46 per cent. These figures are very low, but as there are four schools still classed as "non-routine" and further, as I have been doing all the work for the eighteen schools by myself since May 31st, it is not to be wondered at. I do not consider that these figures can be improved until a fully complete staff of Dental Officers is engaged, and they have had sufficient time to overtake the arrears of work due to an incomplete staff.

The percentage of those inspected classed as requiring treatment was 72 per cent., while 5.27 per cent. though not absolutely sound were classed as not requiring treatment.

40 scholarship children from the Wintringham Secondary School were treated during the year, as were also 4 girls and 25 youths from the Juvenile Instruction Centres, 1 M.D. child, 1 child from the Occupational Centre, and 7 tuberculosis patients.

Instructions were received to hold experimental evening sessions from 6-0 to 7-30 p.m. on three evenings per week in addition to the normal morning and afternoon sessions. These evening sessions commenced on April 4th, and were discontinued on November 9th on receipt of instructions to do so.

INSPECTIONS.	Boys.	Girls.	Total.
Children Inspected (Routine) ..	1751	1612	3363
Teeth sound .. ..	424	353	
Teeth less than 4 decayed ..	635	591	
Teeth more than 4 decayed ..	692	668	
Oral sepsis including abscesses ..	59	56	
Half-days devoted to inspections ..	..	..	38
.. .. treatment ..	..	..	418
.. .. M. & C.W. treatment ..	..	..	80

#### Dental Defects.

Number of children inspected:—

Routine .. ..	3,363
Specials .. ..	1,707

Number of children requiring treatment

(Routine) .. ..	2,426
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Number of children treated (Routine)	1,921
Number of attendances made by children for treatment (Routine and Specials)	4,657
FILLINGS :—	
Permanent teeth .. .. .	1,419
Temporary teeth .. .. .	1
EXTRACTIONS :—	
Permanent teeth .. .. .	1,747
Temporary teeth .. .. .	6,050
ANÆSTHETICS :—	
General (N <sub>2</sub> O) (Gas) .. .. .	3,098
Local .. .. .	38
Number of children re-treated as the result of periodical inspection	Boys 530 Girls 635
	Total 1,165
Number of children re-inspected	Boys 1,124 Girls 1,029
	Total 2,153
Number of New Entrants inspected	Boys 628 Girls 580
	Total 1,210

Also see Table V. on page 173.

I also submit some observations made by Mr. L. N. Alley, L.D.S., in respect to future developments shortly after he took over duty at the end of the year :—

During the year 1938, the dental service has been carried on under difficulties, the major one being shortage of staff.

From May until December Mr. Salt was the only full-time dental officer on the staff, and he worked hard in the attempt to keep up with the demand on the service.

Naturally arrears of work have accumulated and it will take some considerable time to overcome these arrears. However, during the year 1939 an effort will be made to put into action a scheme of educational and conservative dentistry.

One of the difficulties with which we shall have to contend is the large number of casual cases visiting the clinics. It must be remembered that a school dental service is not designed to provide extractions for a very large number of



"casuals." It is an educational scheme of conservative dentistry and that alone is its justification. With additional staff and organisation it should be possible to reduce this number.

Our aim will be to secure that as many children as possible shall leave school with all their permanent teeth free from disease and trained in the care of the mouth.

It is hoped that in the near future it will be possible to dentally examine annually every school child and give him the opportunity to have any necessary treatment after each inspection.

As far as possible the treatment will be conservative in character and include, in addition to fillings, measures taken for the relief of overcrowding and malposition of the teeth.

The school dental scheme cannot be considered complete unless the pre-school child is included and thus a continuity of inspection and treatment is procured. Otherwise it is impossible to plan the dental work on constructive lines.

If children are rendered dentally fit in their early years they can more easily be kept so by regular inspections and treatments. The alternative is valuable time spent by the dental officers in extracting teeth to relieve pain and eradicate sepsis—thus rendering the mouth clean for the time being. Too early extraction of the first teeth predisposes the permanent dentition to dental disease.

It has been reported that one child in every five entering our elementary schools at the age of five is physically unfit to take full advantage of the education provided. From this it will be seen that enormous possibilities present themselves in the field of public health.

The dental supervision of the child under school age should be regarded as the most important problem in preventive dentistry and coupled with this the care of the expectant mother.

Also the children attending the secondary school will be included in our scheme of periodic dental inspection and advice.

In this way it will be our endeavour to build up a dental service that will be appreciated by the children, parents, teachers and in fact by all who are interested in health matters.

### **Infectious Diseases.**

No schools or departments were closed on this account during the year, nor was it necessary to issue any certificates under Article 23b of the Education Code in respect to diminished attendance.

The exclusion machinery of the school medical service in respect to infectious diseases is reasonably watertight, and the question of alteration of the rules for exclusion of contacts is under consideration.

The diphtheria immunisation scheme continues to find favour although our activities owing to shortage of medical staff are mainly devoted to dealing with children under five and intensive propaganda is not indulged in. Nevertheless, during the year 597 children were immunised by an officer of the Health Department.

There has been very little variation in the average attendance of the elementary school children in Grimsby during the past seven years, the percentages being :—

1931 .. ..	89.04	1935 .. ..	89.74
1932 .. ..	90.33	1936 .. ..	89.80
1933 .. ..	89.23	1937 .. ..	87.70
1934 .. ..	90.37	1938 .. ..	90.03

Below will be found a table giving the cases of notifiable diseases amongst school children (5 to 15 age group) :—

Scarlet Fever .. ..	122
Diphtheria .. ..	76
Pneumonia .. ..	5
Cerebro-spinal fever .. ..	1
Acute poliomyelitis .. ..	8
Erysipelas .. ..	2
Chicken-pox .. ..	694
Tuberculosis :—	
Respiratory .. ..	6
Other Forms .. ..	20

Weekly returns are tabulated for every school in the area in respect to scarlet fever and diphtheria, and any undue incidence of either of these diseases in any one school can be easily detected and appropriate measures taken. Some educational work as to the futility of disinfection of school premises has been initiated.

#### PRINCIPAL CAUSES OF DEATH AT AGES 5 TO 15 YEARS.

	1934.	1935.	1936.	1937.	1938.
Measles .. ..	1	—	—	1	—
Scarlet fever .. ..	—	—	1	1	—
Diphtheria .. ..	2	2	—	1	1
Influenza .. ..	—	—	—	1	—
Cerebro-Spinal Fever .. ..	—	—	—	—	1
Pulmonary tuberculosis .. ..	—	3	—	3	1
Other tuberculous diseases .. ..	4	3	5	2	2
Heart disease .. ..	2	3	1	4	2
Bronchitis .. ..	—	—	1	1	1
Pneumonia .. ..	5	5	1	4	1
Appendicitis .. ..	1	3	3	2	—
Nephritis .. ..	1	—	—	—	—
Rheumatic fever .. ..	1	2	—	—	—
Poliomyelitis .. ..	—	—	—	—	—
Acute Polioencephalitis .. ..	—	—	—	1	—
Accidents .. ..	2	—	3	1	1



### **Open-air Education.**

A fair amount of auxiliary open-air education is given by means of play-room classes. Every endeavour should be made to increase these when the weather is suitable and provided accommodation is available. Some of the newer schools have been so constructed as to have a maximum amount of ventilation. The children attending the Brighowgate Homes under the Public Assistance Committee have an annual camp.

In view of the number of delicate children in the elementary schools it is desirable that the Local Authority should consider the necessity for erecting a small open-air school.

### **Physical Training.**

It is noted with pleasure that provision has been made in the estimates for 1939 for the appointment of a Director of Physical Training.

During the year 431 boys and 308 girls were taught to swim. It is hoped that with the provision of more ample facilities by the local authority in respect to swimming baths in the near future these numbers will be materially increased.

### **Provision of Meals.**

There has been a further extension of the work under the Provision of Meals Act, 1906, which is now under the direct control of the School Medical Services Sub-Committee and not a separate sub-committee. The number of meals provided has risen from 21,561 in 1936 and 31,448 in 1937 to 81,451 in the present year. The children are supplied with dinners at the Salvation Army Hostel, the Queen Mary Hostel, the Hygienic Cafe and Nunsthorpe School.

All children selected for free meals are referred to the school medical officers for examination and report, and the menus of the various centres are submitted from time to time to the School Medical Officer for any observation and suggestions he may care to make. The various organisations supplying meals have gradually come into line in producing a satisfactory diet which assists in remedying the vitamin deficiency. The unfortunate thing is that children of mothers who are not good housewives are not always able to benefit by this provision of meals because they come above the income limit. Full advantage is not taken of the opportunity of improving the manner of eating by the children, and this will not be possible until meals can be provided in a building under the control of the Education Authority.

For varying periods during the year 563 children received free dinners only, 646 children free milk daily, while 165 children received free milk and dinners combined. At the close of the year 231 children were in receipt of free dinners



only, 476 children free milk only, while 156 children were receiving both milk and dinners.

It is unfortunate that the remarks made last year about the lack of utilisation of the milk supply in schools—which is heavily subsidised by the Government—continues to be true. It is true that there is a slight improvement as the number of one-third pint bottles of pasteurised or tuberculin tested milk supplied during the year rose from 642,033 to 793,008 and the average daily number of children supplied rose from 3,200 to 3,427, which is not nearly good enough being just over 25 per cent.—one of the lowest in the country.

### **CO-OPERATION OF PARENTS, TEACHERS, SCHOOL ATTENDANCE OFFICERS AND VOLUNTARY BODIES.**

**Teachers.**—Parents are notified of the day and hour of inspection of each child, but as might be expected the attendance of parents is highest with the infants and lowest with the older boys. A good deal of educational work is still required in regard to the necessity of early treatment of defective vision and teeth. I wish to express my indebtedness to the school teachers who have to combine their assistance to the School Medical Service with their other numerous duties, but they can be one of the most valuable "following up" agents by reason of their close contact with the parents.

**School Attendance Officers.**—These officers have worked in close co-operation with the Public Health Department, especially in regard to infectious diseases.

**Grimsby and District Hospital.**—Practically the whole of the tonsils and adenoids cases dealt with by the Education Authority and all the orthopædic cases who did not require long term in-patient treatment were referred to this hospital, which also deals with all types of illness among the school population.

The following particulars are taken from a report furnished by the Secretary-Superintendent :—

During the year 177 children of school age residing in the borough were dealt with at the hospital for tonsils and adenoids.

**Poliomyelitis cases.**—19 children were transferred from the Corporation Hospital to Weelsby Old Hall for orthopædic treatment on 14th October, 1938, and the premises were specially equipped for this purpose at a cost of £1,039.

**Hull Royal Infirmary.**—We have again to thank the Hull Royal Infirmary for the kind and courteous manner with which they have dealt with the cases referred to them



during the year. 8 cases thus referred are classified as follows :—

Ear, nose and throat defects	..	..	5
Eyes .. .. .	..	..	1
Other surgical conditions	..	..	2

**N.S.P.C.C.**—We should like to welcome Inspector C. R. Cooke to Grimsby and to state that he has more than maintained the high standard set by the Society, also to record our thanks for the interest he has taken in every case referred to him where parental neglect has seemed to threaten the welfare of school children.

**Police Aided Association.**—This association supplied during the winter months 553 pairs of boots to necessitous and deserving children ; and in this regard has been of great assistance to the authority, for school attendance inevitably suffers when children are inadequately shod. In addition 202 pairs of boots were repaired.

### BLIND, DEAF, DEFECTIVE AND EPILEPTIC CHILDREN.

These are discovered by (a) routine visits of the medical staff to schools, (b) special reports of teachers, and (c) reports from school attendance officers.

The ascertainment of all defective children within the meaning of Part V. of the Education Act, 1921, is reasonably complete. There is need for an open-air school for delicate children. The local authority has made special provision for a number of beds in a residential open-air school to be built for a neighbouring authority.

Adequate arrangements are made for placing defective children in special schools throughout the country as will be seen from the following list :—

#### CHILDREN IN SPECIAL SCHOOLS.

<i>Name.</i>	<i>Date of Birth.</i>	<i>Institution.</i>
Daines, George	11 4 24	Yorkshire Deaf Institution.
Wivell, Sidney	9 4 24	" " "
Hardy, Bernard	5 10 27	" " "
Alcock, Edwin	22 10 24	" " "
Critten, Rhita	13 10 27	" " "
Wright, Fred	5 11 23	Henshaw's Institution, Manchester.
Ward, Lawrence	17 10 26	" " "
Thomason, Fred	22 5 26	Royal Blind School.
Ingham, Katherine	11 8 32	Sunshine Home, Southport.
Cole, Janet	16 10 23	" " "
Linford, William	22 3 23	Birmingham.
Leedham, William	11 9 22	Lingfield Colony.
Burton, Winifred	30 4 23	Much Hadham.
Plues, Ronald	11 6 27	Maghull, Liverpool.

<i>Name.</i>	<i>Date of Birth.</i>	<i>Institution.</i>
Cook, Clive	21 7 24	Littleton House, Girton.
Brown, Elsie	2 10 25	Allerton Priory, Liverpool.
Sullivan, Dolly	1 12 23	" " "
Parker, Ada	26 1 29	" " "
Blewitt, George		Children's Hospital, Gringley-on-the-Hill.
Haddock, Gladys		Harlow Wood Hospital.
Hall, Elsie		" " "
Nicholson, Norah	20 6 33	" " "
Bennett, Gordon	aged 9	" " "

The following children were dealt with during the year :—

F.W.	(m)	Deaf boy admitted to Henshaw's Institution, Manchester.	
L.W.	(m)	Blind boy admitted to Henshaw's Institution, Manchester.	
W.L.	(m)	Blind boy admitted to Blind School, Birmingham.	
A.P.	(f)	Mentally Deficient child admitted to Allerton Priory, Liverpool.	
N.N.	(f)	Crippled child admitted to Harlow Wood Hospital.	
J.L.	(m)	Crippled boy admitted to Stanmore, Essex.	
P.G.	(m)	Crippled child admitted to Weelsby Old Hall	14 10 38
B.O.	(f)	Crippled child admitted to Weelsby Old Hall	"
I.J.	(f)	Crippled child admitted to Weelsby Old Hall	"
B.O.	(f)	Crippled child admitted to Weelsby Old Hall	"
K.P.	(f)	Crippled child admitted to Weelsby Old Hall	"
G.B.	(m)	Crippled child admitted to Weelsby Old Hall, and later transferred to Harlow Wood Hospital	"

#### MENTAL DEFICIENCY (NOTIFICATION OF CHILDREN) REGULATIONS, 1928.

Number of children notified during the year ending 31st December, 1938, to the local mental deficiency authority—12.

The ascertainment of mentally defective children has continued through the year on the lines inaugurated three years ago. Twenty-seven children have been referred for investigation from the schools during the year. Of these four were found to be ineducable and were so notified to the local mental deficiency authority; thirteen were found to be feeble-minded but educable in a special school or class; eight were merely dull and backward; one was of normal



intelligence but showed behaviour difficulties; one has not yet been seen. A number of children already on the books were re-examined.

One feeble-minded child was sent to a residential special school and several other feeble-minded children were taken off the register during the year, having reached the age of 14. After deducting these cases the number of feeble-minded children remaining in the elementary schools at the end of the year is 51.

It is not thought that this figure represents the total number of feeble-minded children in the schools, and up to the present, as there is no systematic method of testing, only those children who showed marked difficulty in learning have been referred for examination. In addition it is thought that were specialised education available in the form of special classes more children would be referred for examination and classification.

**Full-time Courses of Higher Education for Blind, Deaf, Defective and Epileptic Students.**—During the year one adult student (T.L.S.) attended for training at the Royal Midland Institution for the Blind, Nottingham, and one adult student (J.L.) attended at Stanmore Cripples College, Middlesex.

### NURSERY SCHOOLS.

There is no nursery school in the area under the local education authority. A small private nursery school has recently closed but not because of any lack of pupils.

Provision has been made for a nursery class of 30 places and it is hoped that this experiment is the forerunner of the provision of accommodation elsewhere.

### THE SECONDARY SCHOOL.

There is only one secondary school maintained by the local authority, the Wintringham Secondary School.

Inspection is carried out at practically weekly intervals at a forenoon session. Arrangements have been made for the lady medical officer to examine the girls at this school. All entrants are seen first, and all others at alternate years. In this way half of the scholars are seen each year, over 15 per cent. of parents appear at inspections, and as might be expected, the majority of those attend in respect to girls. All children are measured and weighed by the school nurse on the day prior to inspection.

During the year 388 children were inspected and 119 parents attended. This shews a relative increase in the number of parents attending.



The total percentage of children found to require treatment other than dental treatment was 4.6 as compared with 7.0 in 1937 and 7.5 in 1936, but it is regretted that the number found to be dentally defective still remains too high, being 18.04. There is a relative improvement in the boys as compared with the girls. It is hoped that in 1939 or early 1940 to initiate routine dental inspection for the secondary school.

It is, however, felt that the careful followup cases by the teaching staff of the school is gradually bearing fruit. Adequate arrangements are made for following up by the school nurse of dental defects discovered at the time of inspection, and the forms of treatment available to the elementary school children are available also to the scholarship children; the remainder are referred to private practitioners or to hospitals.

The Principal, Mr. R. W. Jackson, is keenly interested in the health of the school, and there has been active co-operation between the teaching staff and the officers of the school medical service.

### **JUNIOR INSTRUCTION CENTRES.**

I am indebted to Dr. J. Miller Vine for the following report:—

Systematic medical examinations have been carried out during the year of boys attending the above centre. The examination is entirely voluntary and no pressure is put on the boys to submit themselves, and it is satisfactory that there have been no refusals. On the contrary the medical examination frequently develops into a brief discussion between the boy, the Principal, and the Medical Officer as to fitness for various careers and a general consideration of the boy's future.

Dental decay is still by far the most common defect found and it is most satisfactory that out of 65 cases, 52 had treatment either at the school dental clinic or with their private dentists. Defective vision was noted in 18 cases who were recommended for further examination. Other conditions noted included septic tonsils, otitis media, enuresis, dermatitis, speech defects, and tuberculosis contacts who were examined under X-ray at the tuberculosis clinic.

The total number examined was 118 of whom 76 were found to require treatment for 95 defects. Owing to the relatively short stay of many at the Centre it is not possible to follow up cases completely, except in the cases of dental treatment which is taken advantage of almost at once.

The centre badly needs some form of bathing establishment. It is most unhygienic that young adult boys should



perform physical training, get themselves thoroughly warmed up (as the keen ones do) and then have to change into their street clothes with the perspiration still wet upon them. It is inviting serious illness apart from the unpleasantness of it. One could scarcely imagine any kind of sports club where a bath was not available and yet here, among boys for whom physical training is a necessity, no shower bath is provided. Attention was drawn to this defect in these notes last year but no action has been taken. There is no need for an elaborate installation and a shed with half a dozen showers and enough heat to take the chill off the water in winter would be sufficient. Surely this is not much to ask for, especially at the present when there is so much talk about improving the man power of the nation, physical fitness and the rest of it.

The assistant medical officer wishes once more to pay grateful tribute to the Principal, Mr. R. Walker, for his keen co-operation in this work, and also thanks, on behalf of the boys, Dr. Douglas Campbell for once again giving them a most valuable and appreciated talk on Social Hygiene matters.

I am indebted to Dr. Rachel Halperin for the following report :—

Three medical inspections were made at the Junior Instruction Centre for girls during 1938, one each term, a total of 60 girls being examined. Thirty defects were found, viz. :—decayed teeth 18 ; defective vision 8 ; blepharitis 1 ; anæmia 1 ; defective posture 1 ; malnutrition 1, and 19 girls were referred for treatment either at the school clinic or to their own panel doctor. Of these 12 have received the treatment recommended.

### PARENTS' PAYMENTS.

The arrangements for recovering the cost of treatment from parents of children attending the public elementary schools and scholarship children attending the secondary school are similar. They are as follows :—

**Free** medical treatment to be given to the children of parents where the family income (after deducting rent and rates) does not exceed 9s. od. in respect of each adult, 6s. od. for the first child, and 5s. od. for each additional child.

**Half payment** to be made where the family income (after deducting rent and rates) does not exceed 17s. 6d. for each adult and 5s. od. for each additional child.

Over this scale the **full** payment to be made by the parents.

In respect of the various forms of treatment full payment shall be in accordance with the following scale :—

**Orthopædic treatment.**—1s. od. out-patient ; 5s. od. in-patient ; excepting treatment in Special Schools which will be subject to individual assessment.

**Orthopædic Appliances.**—Income after deducting rent and rates with one child (add 5/- for each dependent child) :—

Under 24/- per week, free.			
24/-	and under	30/-	one-seventh.
30/-	„	36/-	two-sevenths.
36/-	„	42/-	three-sevenths.
42/-	„	48/-	four-sevenths.
48/-	„	56/-	five-sevenths.
56/-	„	60/-	six-sevenths.
60/-	or over,		full cost.

**Orthoptic treatment.**—7s. 6d. for full course of treatment.

**Supply of spectacles.**—7s. 6d.

During the year 418 children obtained spectacles under the Authority's scheme. In 229 cases the spectacles were supplied free of charge ; in 81 cases the Education Committee paid half the cost, and the remaining 108 paid full price.

**Tonsils and adenoids.**—7s. 6d. (No contribution to be made by parents who are registered contributors to the Hospital).

90 children received operative treatment through the Education Committee.

**Dental treatment.**—6d. for complete treatment.

**Patent foods and drugs.**—Full cost.

## HEALTH EDUCATION.

The ex-Empire Marketing Board frames have been freely used for propaganda purposes, and opportunity was taken during the year by the local authority to avail themselves of one of the travelling lecturers of the Dental Board of the United Kingdom.



### SPECIAL ENQUIRIES.

Other than nutritional surveys, owing to the great demands on their time in routine work, it was not possible for the medical officers to carry out any special enquiries.

### MISCELLANEOUS.

**Employment certificates.**—During the year 229 certificates were given to school children who were engaged in partial employment after school hours. This compares with 217 employment certificates in 1937, 138 in 1936, and 114 in 1935.

**Open-air education.**—In 1938 arrangements were made by the Education Authority for selected parties of senior boys from the elementary schools to spend a week receiving instruction at a youth hostel at Caistor. The children partaking in this experiment derived material benefit therefrom and it is hoped that this experiment will be continued in future summers. Attention was given by the school medical officers to the diet of the children, to the sleeping arrangements and to the water supply.

**Boarded-out children.**—Arrangements were made for the medical inspection of children boarded out in Grimsby in agreement with other areas by officers of the school medical service. Other arrangements were also made for domiciliary medical attention by private practitioners when necessary.

**Remand Homes.**—Arrangements were made for the medical examination of children on admission to the remand homes under the control of the Local Authority, prior to appearance in Court and prior to being sent to an approved school.

TABLE I.

**Medical Inspections of Children attending Public Elementary Schools.****A.—ROUTINE MEDICAL INSPECTIONS.**

Number of inspections in the prescribed groups.

Entrants .. .. .	1,246
Second age group .. .. .	1,287
Third age group .. .. .	1,217
Total .. .. .	3,750

Number of other routine inspections .. .. . Nil

Grand Total .. 3,750

**B.—OTHER INSPECTIONS.**

Number of special inspections .. .. .	1,742
Number of re-inspections .. .. .	4,750
Total .. .. .	6,492

**C.—CHILDREN FOUND TO REQUIRE TREATMENT.**

Number of individual children found at Routine Medical Inspection to require Treatment (excluding Defects of Nutrition, Uncleanliness and Dental Diseases).

Prescribed Groups :

Entrants .. .. .	100
Second Age Group .. .. .	106
Third Age Group .. .. .	101
Total (Prescribed Groups) .. .. .	307
Other Routine Inspections .. .. .	Nil
Grand Total .. .. .	307



TABLE II.

A. Return of Defects found by Medical Inspection in the year ended 31st December, 1938.

DEFECT OR DISEASE					Routine Inspections.		Special Inspections.	
					No. of Defects.		No. of Defects.	
					Re- quiring treat- ment 2	Requiring to be kept under observation but not requiring treatment. 3	Re- quiring treat- ment 4	Requiring to be kept under observation but not requiring treatment 5
1								
Skin	(1) Ringworm—Scalp .. .. .				—	—	4	—
	(2) " Body .. .. .				—	—	6	—
	(3) Scabies .. .. .				4	—	78	—
	(4) Impetigo .. .. .				3	—	29	—
	(5) Other Diseases (Non-Tuberculous)				6	33	127	1
TOTAL (Heads 1 to 5) .. ..					13	33	244	1
Eye	(6) Blepharitis .. .. .				20	91	13	3
	(7) Conjunctivitis .. .. .				1	2	16	—
	(8) Keratitis .. .. .				—	—	1	—
	(9) Corneal Opacities .. .. .				—	2	2	—
	(10) Other Conditions (excluding Defec- tive Vision and Squint) .. ..				8	8	15	—
TOTAL (Heads 6 to 10) .. ..					29	103	47	3
Ear	(11) Defective Vision (excluding Squint)				91	240	18	1
	(12) Squint .. .. .				26	99	4	3
	(13) Defective Hearing .. .. .				4	26	10	1
	(14) Otitis Media .. .. .				9	11	29	—
	(15) Other Ear Diseases .. .. .				7	18	63	3
Nose and Throat	(16) Chronic Tonsillitis only .. ..				36	195	24	7
	(17) Adenoids only .. .. .				8	32	20	1
	(18) Chronic Tonsillitis and Adenoids ..				37	47	51	—
	(19) Other Conditions .. .. .				18	23	247	—
	(20) Enlarged Cervical Glands (Non-Tuberculous) ..				3	63	31	3
Heart & Circula- tion	(21) Defective Speech .. .. .				—	42	1	1
	Heart Disease :							
	(22) Organic .. .. .				5	11	—	—
	(23) Functional .. .. .				1	28	1	—
	(24) Anæmia .. .. .				2	16	21	—
Lungs	(25) Bronchitis .. .. .				5	42	14	1
	(26) Other Non-Tuberculous Diseases ..				1	7	14	—
	Pulmonary :—							
	(27) Definite .. .. .				—	—	—	—
	(28) Suspected .. .. .				—	—	—	—
Tuber- culosis	Non-Pulmonary :—							
	(29) Glands .. .. .				—	11	—	—
	(30) Bones and Joints .. .. .				—	2	—	—
	(31) Skin .. .. .				—	1	—	—
	(32) Other Forms .. .. .				—	—	—	—
TOTAL (Heads 29 to 32) .. ..					—	14	—	—
Nervous System	(33) Epilepsy .. .. .				—	3	4	—
	(34) Chorea .. .. .				1	3	16	—
	(35) Other Conditions .. .. .				11	40	24	—
Defor- mities	(36) Rickets .. .. .				—	14	—	—
	(37) Spinal Curvature .. .. .				3	2	—	—
	(38) Other Forms .. .. .				4	34	15	—
(39) Other Defects and Diseases (excluding Defects of Nutrition, Uncleanliness and Dental Diseases)					25	52	704	—
Total .. .. .					339	1198	1602	25

TABLE II.

B.—CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED DURING THE YEAR  
IN THE ROUTINE AGE GROUPS.

(see Administrative Memorandum No. 124, dated 31st December, 1934).

Age Groups.	Number of Children In- spected	A (Excellent)		B (Normal)		C (Slightly subnormal)		D (Bad)	
		No.	%	No.	%	No.	%	No.	%
Entrants .. ..	1246	198	15.89	880	70.63	166	13.32	2	0.16
Second Age-group	1287	226	17.5	894	69.6	163	12.6	4	0.3
Third Age-group ..	1217	221	18.1	849	69.8	147	12.1	—	0.0
Other Routine Inspections ..	—	—	—	—	—	—	—	—	—
TOTAL ..	3750	645	17.20	2623	69.95	476	12.69	6	0.16

TABLE III.

Return of all Exceptional Children in the area, Year ended December 31st, 1938.

#### BLIND CHILDREN.

A blind child is defined by Section 69 of the Education Act, 1921, as one who is "too blind to be able to read the ordinary school books used by children." This definition covers some children who are totally, or almost totally, blind and can only be appropriately taught in a school for blind children, and others who have partial sight and can be appropriately taught in a school for partially sighted children. Only the first class should be included in this section.

At Certified Schools for the Blind.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
2	—	—	—	2

#### PARTIALLY SIGHTED CHILDREN.

In this Section are entered children who, though they cannot read ordinary school books or cannot read them without injury to their eyesight, have such power of vision that they can appropriately be taught in a school for the partially sighted.

Children who are able by means of suitable glasses to read the ordinary school books used by children without fatigue or injury to their vision should not be included in this Table.

At Certified Schools for the Blind.	At Certified Schools for the Partially Sighted.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
3	—	—	—	—	3



Table III.—continued.

**DEAF CHILDREN**

A deaf child is defined by Section 69 of the Education Act, 1921, as one who is "too deaf to be taught in a class of hearing children in an elementary school." This definition covers some children who are totally, or almost totally, deaf and can only be appropriately taught in a school for deaf children, and others who have partial hearing and can be appropriately taught in a class for partially deaf children. Only the first type should be included in this section.

At Certified Schools for the Deaf.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
5	2	1	1	9

**PARTIALLY DEAF CHILDREN.**

In this Section are entered children who can appropriately be taught only in a class for the partially deaf.

At Certified Schools for the Deaf and Partially Deaf.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
1	1	—	—	2

**MENTALLY DEFECTIVE CHILDREN.****Feeble-Minded Children.**

Mentally Defective children are children who, not being imbecile and not being merely dull or backward, are incapable by reason of mental defect of receiving proper benefit from the instruction in the ordinary Public Elementary Schools, but are not incapable by reason of that defect of receiving benefit from instruction in Special Schools for mentally defective children.

The following Table includes all such children except those who have been notified to the Local Authority under the Mental Deficiency Act in accordance with Article 3 of the Mental Deficiency (Notification of Children) Regulations, 1928.

At Certified Schools for Mentally Defective Children.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
4	54	—	30	88

**EPILEPTIC CHILDREN.****Children Suffering from Severe Epilepsy.**

This Section refers only to children who are epileptic within the meaning of the Act, i.e., children who, not being idiots or imbeciles, are unfit by reason of severe epilepsy to attend the ordinary Public Elementary Schools.

For practical purposes the Board are of opinion that children who are subject to attacks of major epilepsy in school should be recorded as "severe" cases and excluded from ordinary Public Elementary Schools.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
2	—	—	—	2



Table III.—continued.

**PHYSICALLY DEFECTIVE CHILDREN.****A. Tuberculous Children.****I.—CHILDREN SUFFERING FROM PULMONARY TUBERCULOSIS.**

(Including pleura and intra-thoracic glands).

At Certified Special Schools.	At Public Elementary Schools.†	At other Institutions.	At no School or Institution.	Total.
—	14	2	10	26

**II.—CHILDREN SUFFERING FROM NON-PULMONARY TUBERCULOSIS.**

At Certified Special Schools.	At Public Elementary Schools.†	At other Institutions.	At no School or Institution.	Total.
—	117	10	16	143

† It is essential that tuberculous children who are, or may be, a source of infection to others should be promptly excluded from Public Elementary Schools.

**B. Delicate Children.**

This Section is confined to children (except those included in other groups) whose general health renders it desirable that they should be specially selected for admission to an Open Air School. Such children are included irrespective of the actual provision of Open Air Schools in the area, or of the practicability in present circumstances of sending the children to Residential Schools. At the same time it should be remembered that children should not be regarded as suitable for admission to an Open Air School unless the Medical Officer would be prepared to certify under Section 55 of the Education Act, 1921, that they are incapable by reason of physical defect of receiving proper benefit from the instruction in ordinary Public Elementary Schools.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	16	—	—	16

**C. Crippled Children.**

This Section is confined to children (other than those diagnosed as tuberculous and in need of treatment for that disease) who are suffering from a degree of crippling sufficiently severe to interfere materially with a child's normal mode of life, i.e., children who generally speaking are unable to take part, in any complete sense, in physical exercises or games or such activities of the School curriculum as gardening or forms of handwork usually engaged in by other children, and in whose case the Medical Officer would be prepared to certify under Section 55 of the Education Act, 1921, that they are incapable by reason of such physical defect of receiving proper benefit from the instruction in the ordinary Public Elementary Schools.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
3	29	—	7	39



Table III.—continued.

## D. Children with Heart Disease.

This Section is confined to children in whose case the Medical Officer would be prepared to certify, under Section 55 of the Education Act, 1921, that they are incapable by reason of such physical defect of receiving proper benefit from the instruction in the ordinary Public Elementary Schools.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	4	—	—	4

## CHILDREN SUFFERING FROM MULTIPLE DEFECTS.

## At Public Elementary Schools.

Deafness and Mental Defect .. .. . 1

## At Other Institutions.

Deafness and Mental Defect .. .. . 1

Heart Disease and Mental Defect .. .. . 1

TABLE IV.

## TREATMENT TABLES.

GROUP 1. MINOR AILMENTS (excluding Uncleanliness, for which see Table VI.)

Disease or Defect	Number of Defects treated or under treatment during the year.		
	Under the Authority's Scheme	Otherwise	Total
1	2	3	4
<i>Skin :</i>			
Ringworm—Scalp			
(i.) X-Ray Treatment. If none, indicate by dash .. ..	—	—	—
(ii.) Other Treatment .. ..	4	—	4
Ringworm—Body .. ..	7	—	7
Scabies .. ..	78	—	78
Impetigo .. ..	29	—	29
Other Skin Diseases .. ..	133	2	135
<i>Minor Eye Defects :</i>			
(External and other, but excluding cases falling in Group II.) ..	79	—	79
<i>Minor Ear Defects</i> .. ..	224	3	227
<i>Miscellaneous :</i>			
(e.g., minor injuries, bruises, sores, chilblains, etc.) .. ..	1357	—	1357
Total .. ..	1911	5	1916

Table IV.—continued.

Group II.—DEFECTIVE VISION AND SQUINT (excluding Minor Eye Defects treated as Minor Ailments—Group I.).

	No. of Defects dealt with.		
	Under the Authority's Scheme.	Otherwise	Total.
Errors of Refraction (including Squint) ..	622	27	649
Other defects or disease of the eyes (excluding those recorded in Group I) .. .. .	18	—	18
Total .. .. .	640	27	667
No. of Children for whom spectacles were	Under the Authority's Scheme.	Otherwise	Total.
(a) Prescribed .. .. .	619	27	646
(b) Obtained .. .. .	550	27	577

GROUP III.—TREATMENT OF DEFECTS OF NOSE AND THROAT.

NUMBER OF DEFECTS.											
Received Operative Treatment.											
Under the Authority's Scheme in Clinic or Hospital 1				By Private Practitioner or Hospital apart from the Authority's Scheme. 2				Total. 3			
(i.)	(ii.)	(iii.)	(iv.)	(i.)	(ii.)	(iii.)	(iv.)	(i.)	(ii.)	(iii.)	(iv.)
31	13	46	—	4	—	8	—	35	13	54	—
										—	102

(i.) Tonsils only. (ii.) Adenoids only. (iii.) Tonsils and Adenoids.

(iv.) Other Defects of the Nose and Throat.

GROUP IV. Orthopædic and Postural Defects.

	(1) Under the Authority's Scheme.			(2) Otherwise.			Total Number treated.
	Residential treatment with Education.	Residential treatment without Education.	Non-Residential treatment at an Orthopædic Clinic.	Residential treatment with Education.	Residential treatment without Education.	Non-Residential treatment at an Orthopædic Clinic.	
	(i)	(ii)	(iii)	(i)	(ii)	(iii)	
Number of Children Treated ...	10	13	45	—	—	—	63



TABLE V.

**Dental Inspection and Treatment.**

(1) Number of Children Inspected by the Dentist :—

Routine Age Groups					
Aged :	(5), 443;	(6), 493;	(7), 469;	(8), 443;	} Total .. 3363
	(9), 340;	(10), 326;	(11), 209;	(12), 290;	
	(13), 295;	(14), 55			
Specials	..	..	..	..	1707
Total (Routine and Specials)					5070
2. Number found to require treatment	..	..	..	..	2426
3. Number actually treated	..	..	..	..	1921
4. Attendances made by children for treatment	..	..	..	..	4657
5. Half-days devoted to :—					
Inspection	..	..	..	..	38
Treatment	..	..	..	..	418
					Total 456
6. Fillings :—					
Permanent teeth	..	..	..	..	1419
Temporary teeth	..	..	..	..	1
					Total 1420
7. Extractions :—					
Permanent teeth	..	..	..	..	1747
Temporary teeth	..	..	..	..	6050
					Total 7797
8. Administrations of general anaesthetics for extractions	..	..	..	..	3098
9. Other operations :—					
Permanent teeth	..	..	..	..	252
Temporary teeth	..	..	..	..	—
					Total 252

TABLE VI.

**Uncleanliness and Verminous Conditions.**

(i.) Average number of visits per school made during the year by the School Nurses	..	..	..	..	19.3
(ii.) Total number of examinations of children in the Schools by School Nurses	..	..	..	..	41820
(iii.) Number of individual children found unclean	..	..	..	..	880
(iv.) Number of individual children cleansed under Section 87 (2) and (3) of the Education Act, 1921	..	..	..	..	—
(v.) Number of cases in which legal proceedings were taken :—					
(a) Under the Education Act, 1921	..	..	..	..	—
(b) Under School Attendance Byelaws	..	..	..	..	—

## WINTRINGHAM SECONDARY SCHOOL.

TABLE A.

Return of Defects found in the course of Medical Inspection.

DEFECT.	CODE GROUPS.		SPECIAL.	
	Referred for Treatment.	Referred for Observation.	Referred for Treatment.	Referred for Observation.
NUTRITION .. .. .	—	5	—	—
MALNUTRITION .. .. .	—	1	—	—
UNCLEANLINESS { Head .. .. .	—	—	—	—
{ Body .. .. .	—	—	—	—
SKIN { Head .. .. .	—	—	—	—
{ Body .. .. .	—	—	—	—
Ringworm .. .. .	—	—	—	—
Scabies .. .. .	—	—	—	—
Impetigo .. .. .	—	—	—	—
Other Diseases .. .. .	—	1	—	—
EYE				
Defective Vision and Squint .. .. .	7	32	—	—
Eye Disease .. .. .	3	9	—	—
EAR.				
Defective Hearing .. .. .	—	—	—	—
Ear Disease .. .. .	1	1	—	—
TEETH.				
Dental Disease .. .. .	52	—	—	—
NOSE AND THROAT.				
Enlarged Tonsils .. .. .	3	10	—	—
Adenoids .. .. .	—	1	—	—
Enlarged Tonsils and Adenoids .. .. .	2	—	—	—
Defective Speech .. .. .	—	—	—	—
Other Diseases or Defects .. .. .	—	—	—	—
HEART AND CIRCULATION.				
Heart Disease .. .. .	—	—	—	—
Organic .. .. .	—	—	—	—
Functional .. .. .	—	1	—	—
Anæmia .. .. .	—	3	—	—
LUNGS.				
Pulmonary Tuberculosis .. .. .	—	—	—	—
Definite .. .. .	—	—	—	—
Suspected .. .. .	—	—	—	—
Bronchitis .. .. .	—	1	—	—
Other Diseases .. .. .	—	—	—	—
NERVOUS SYSTEM.				
Epilepsy .. .. .	—	—	—	—
Chorea .. .. .	—	—	—	—
Other Disease .. .. .	—	2	—	—
NON-PULMONARY TUBERCULOSIS.				
Glands .. .. .	—	—	—	—
Bones and Joints .. .. .	—	—	—	—
Other Forms .. .. .	—	—	—	—
DEFORMITIES DUE TO RICKETS .. .. .	—	—	—	—
OTHER DEFORMITIES .. .. .	—	3	—	—
OTHER DEFECTS OR DISEASES.. .. .	—	9	1	—



Table A.—*continued.*

## Number of Children examined not including Specials

## AGE GROUPS.

	4	5	6	7	8	9	10	11	12	13	14	15	16	17
Males ..	—	10	6	4	6	5	13	47	24	23	37	26	9	1
Females	1	12	3	12	20	6	16	31	22	17	24	10	3	—
Total	1	22	9	16	26	11	29	78	46	40	61	36	12	1

Reinspections .. Nil. Specials .. Nil.

TABLE B.

	Number Inspected.	No. found to require Treatment.	% found to require Treatment.
Boys at all ages ..	211	25	11·8
Girls at all ages ..	177	45	24·9
Total .. ..	388	70	18·04
Other Routine Insps.	nil	nil	nil
Totals .. ..	388	70	18·04

TABLE C.

## Number of individual children found at Routine Medical Inspection to Require Treatment (excluding Uncleanliness and Dental Diseases).

Group. (1)	Inspected. (2)	Found to require Treatment. (3)	% of Children found to require Treatment. (4)
CODE GROUPS.			
Entrants .. ..	48	1	2·08
Intermediates ..	144	7	4·9
Leavers .. ..	196	10	5·1
Total (Code Groups)	388	18	4·6
Other Routine Insps.	nil	nil	nil

Re-inspections .. .. 56 girls.  
 " .. .. 38 boys.  
 Special Inspections .. .. 1 girl.  
 Parents present .. .. 74 girls.  
 " " .. .. 45 boys.





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## STATISTICAL TABLES.

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TABLE I.—VITAL STATISTICS OF THE WHOLE BOROUGH DURING 1938 AND PREVIOUS YEARS.

YEAR.	Population estimated to Middle of each Year.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS		NETT DEATHS BELONGING TO THE DISTRICT.				
		Un-corrected Number.	Nett.		Number.	Rate.	of Non-residents registered in the District. 8	of Resi-dents not registered in the District. 9	Under 1 Year of Age.		At all Ages.		
			Number.	Rate.					Number.	Rate per 1,000 Net Births. 11	Number.	Rate.	
													3
1	2	3	4	5	6	7	8	9	10	11	12	13	
1920	81,950	..	2383	29.0	1148	14.0	79	49	216	90	1118	13.6	
1921	82,330	..	2173	26.3	980	11.9	55	55	222	102	980	11.9	
1922	83,600	..	2003	24.0	1130	13.5	62	45	187	93	1113	13.3	
1923	84,650	..	1962	23.1	925	10.9	58	47	153	78	914	10.7	
1924	85,620	..	1845	21.5	1125	13.1	79	47	183	99	1093	12.7	
1925	86,810	..	1792	20.6	973	11.2	69	50	127	71	954	10.9	
1926	87,190	..	1728	19.8	1058	12.1	59	54	157	91	1053	12.0	
1927	88,340	1660	1654	18.7	1042	11.7	88	82	109	66	1036	11.7	
1928	90,270	1733	1702	18.8	1052	11.6	75	48	132	77	1025	11.3	
1929	91,440	1696	1673	18.2	1324	14.4	107	56	148	88	1273	13.9	
1930	91,440	1745	1745	19.0	1125	12.3	69	44	129	74	1100	12.0	
1931	92,280	1634	1650	17.8	1126	12.2	53	37	100	61	1110	12.0	
1932	92,250	1584	1652	17.9	1198	12.9	88	48	111	67	1158	12.5	
1933	93,090	1608	1671	17.9	1201	12.9	89	48	114	68	1160	12.4	
1934	93,700	1753	1738	18.5	1096	11.6	89	32	86	49	1039	11.0	
1935	93,900	1656	1621	17.2	1165	12.4	96	45	102	63	1114	11.8	
1936	93,690	1677	1677	17.9	1153	12.3	105	30	113	67	1078	11.5	
1937	92,760	1514	1516	16.3	1123	12.1	96	40	86	57	1067	11.5	
1938	92,320	1628	1613	17.4	1141	12.3	116	29	79	49	1054	11.4	
Area of District in acres (land and inland water)		5,468			Total population at all ages			..		92,458			At Census of 1931
					Number of inhabited houses			..		21,129			
					Number of families, or separate occupiers			..		22,027			



TABLE II.—CASES OF INFECTIOUS DISEASES NOTIFIED DURING THE YEAR 1938.

NOTIFIABLE DISEASES.	Number of Cases notified.													Total Cases notified in each Ward of the Borough.										Total Cases removed to Hospital.				
	At all ages.	At Ages—Years.												Alexandra.	Central.	Clee.	Coates.	Hainton.	Humber.	North-East.	Scartho.	South.	South-West.		Victoria.	Wellington.	Weelsby.	Wellow.
		Under 1.	1 to 2.	2 to 3.	3 to 4.	4 to 5.	5 to 10.	10 to 15.	15 to 20.	20 to 35.	35 to 45.	45 to 65.	65 & upwards.															
Small Pox ..	—	2	7	7	13	93	29	11	11	5	—	—	8	16	23	2	9	—	25	14	5	34	14	2	20	10	3	149
Scarlet Fever ..	126	—	3	8	8	9	56	20	5	13	3	—	5	8	12	2	9	—	13	18	—	15	4	9	15	13	3	119
Diphtheria inc. Mem. Crp	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Enteric Fever (Typhoid and Paratyphoid) ..	46	2	3	2	5	3	4	1	2	9	4	7	4	1	9	—	1	3	—	4	—	6	2	2	9	8	—	1
Acute Prim. Pneumonia	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	11
Acute Inf'zal Pneumonia	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1
Cerebro-Spinal Fever ..	17	—	1	2	4	—	8	—	—	—	—	2	—	4	1	4	—	1	—	—	—	4	1	—	—	2	—	15
Acute Poliomyelitis ..	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1
Acute Polioencephalitis	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Encephalitis Lethargica	31	31	—	—	—	—	—	—	—	—	—	—	1	2	4	2	1	1	3	4	—	—	—	3	5	—	—	4
Ophthalmia Neonatorum	32	—	—	—	—	—	—	—	—	—	—	—	—	1	1	4	—	2	4	2	—	—	2	3	1	—	1	19
Puerperal Pyrexia ..	30	1	—	—	—	—	—	2	—	2	3	17	5	8	3	1	1	1	1	—	—	1	5	4	—	4	1	1
Erysipelas ..	91	21	25	50	43	60	622	72	9	6	1	2	—	79	57	51	47	49	59	23	21	193	73	35	106	85	33	8
Chicken Pox ..	1383	57	39	69	68	85	784	124	29	67	21	28	12	109	88	108	54	72	110	65	27	276	103	51	160	119	41	341*
Totals ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..

\* Includes 8 cases admitted to Scartho Road Infirmary as follows:—Pneumonia 6; Cerebro-spinal Fever 1; Ophthalmia Neonatorum 1.





TABLE III.—CAUSES OF AND AGES AT DEATH DURING THE YEAR 1938.

Causes of Death.	Net Deaths at the subjoined ages of "Residents" whether occurring within or without the District.											
	All Ages.			Under 1 year	1 and under 2.	2 and under 5.	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.	65 and upwards	Total Deaths whether of "Residents" or "Non-Residents" in Institutions in the District
	Total.	Males	Females									
1	2	3	4	5	6	7	8	9	10	11	12	13
ALL CAUSES { Certified .. ..	1051	560	491	77	13	14	16	34	78	301	518	506
Uncertified .. ..	3	3	..	2	..	..	..	..	..	..	1	..
1. Typhoid & Paratyphoid Fevers .. ..	..	..	..	..	..	..	..	..	..	..	..	..
2. Measles .. ..	6	4	2	..	3	2	..	..	..	1	..	4
3. Scarlet Fever .. ..	..	..	..	..	..	..	..	..	..	..	..	..
4. Whooping Cough .. ..	3	2	1	1	..	2	..	..	..	..	..	..
5. Diphtheria .. ..	3	3	..	..	1	1	1	..	..	..	..	9
6. Influenza .. ..	2	2	..	..	..	..	..	..	1	1	..	1
7. Encephalitis Lethargica .. ..	1	1	..	..	..	..	..	..	..	..	1	..
8. Cerebro-spinal Fever .. ..	1	..	1	..	..	..	1	..	..	..	..	2
9. Tuberculosis of Resp. system..	61	36	25	1	..	..	1	16	19	23	1	38
10. Other Tuberculous Diseases ..	8	3	5	1	1	1	2	1	1	1	..	9
11. Syphilis .. ..	15	10	5	1	..	..	..	1	3	4	6	8
12. General Paralysis of the Insane, Tabes Dorsalis ..	8	5	3	..	..	..	..	..	..	7	1	2
13. Cancer, Malignant Disease ..	185	102	83	..	..	..	2	2	9	76	96	84
14. Diabetes .. ..	9	4	5	..	..	..	..	..	1	4	4	8
15. Cerebral Haemorrhage, etc. ..	102	47	55	..	..	..	..	..	2	32	68	33
16. Heart Disease .. ..	144	69	75	..	..	..	2	1	5	56	80	29
17. Aneurysm .. ..	2	2	..	..	..	..	..	..	..	1	1	..
18. Other Circulatory Diseases ..	20	12	8	..	..	1	..	1	1	5	12	6
19. Bronchitis .. ..	47	32	15	1	..	..	1	1	1	9	34	8
20. Pneumonia (all forms) .. ..	45	25	20	11	4	3	1	1	3	8	14	19
21. Other Respiratory Diseases ..	8	5	3	..	..	..	..	..	2	6	..	5
22. Peptic Ulcer .. ..	5	5	..	..	..	..	..	..	..	5	..	7
23. Diarrhoea, etc. .. ..	11	7	4	9	1	..	..	..	..	..	1	7
24. Appendicitis .. ..	8	5	3	..	..	..	..	1	4	3	..	11
25. Cirrhosis of Liver .. ..	2	1	1	..	..	..	..	..	..	1	1	1
26. Other Diseases of Liver, etc. ..	2	..	2	..	..	..	..	..	..	1	1	3
27. Other Digestive Diseases ..	24	15	9	..	..	1	1	..	3	10	9	17
28. Acute and Chronic Nephritis..	28	11	17	..	..	1	..	1	2	9	15	8
29. Puerperal Sepsis .. ..	3	..	3	..	..	..	..	..	3	..	..	3
30. Other Puerperal Causes .. ..	7	..	7	..	..	..	..	1	6	..	..	6
31. Congenital Debility, Premature Birth, Malformation, etc. ..	46	28	18	45	..	1	..	..	..	..	..	21
32. Senility .. ..	144	70	74	..	..	..	..	..	..	1	143	67
33. Suicide .. ..	10	9	1	..	..	..	..	..	4	5	1	1
34. Other Violence .. ..	21	17	4	..	..	..	2	..	3	9	7	24
35. Other Defined Causes .. ..	73	31	42	9	3	1	2	7	5	23	23	65
36. Causes ill-defined or unknown ..	..	..	..	..	..	..	..	..	..	..	..	..
Totals .. ..	1054	563	491	79	13	14	16	34	78	301	519	506
Sub-entries (included above)— Acute-Poliomyelitis (in 35) ..	1	..	1	..	1	..	..	..	..	..	..	2

TABLE III.—CAUSES OF AND AGE AT DEATH DURING THE YEAR 1901

Cause of death	Total		Males		Females		Total		Males		Females		Total		Males		Females	
	No.	Per cent	No.	Per cent	No.	Per cent	No.	Per cent	No.	Per cent	No.	Per cent	No.	Per cent	No.	Per cent	No.	Per cent
1. Tuberculosis	1,041	18.5	687	19.5	354	17.5	1,041	18.5	687	19.5	354	17.5	1,041	18.5	687	19.5	354	17.5
2. Cancer	487	8.8	312	9.1	175	8.5	487	8.8	312	9.1	175	8.5	487	8.8	312	9.1	175	8.5
3. Heart disease	312	5.6	198	5.8	114	5.5	312	5.6	198	5.8	114	5.5	312	5.6	198	5.8	114	5.5
4. Pneumonia	287	5.2	175	5.1	112	5.4	287	5.2	175	5.1	112	5.4	287	5.2	175	5.1	112	5.4
5. Consumption	254	4.6	158	4.6	96	4.6	254	4.6	158	4.6	96	4.6	254	4.6	158	4.6	96	4.6
6. Typhoid fever	187	3.4	112	3.3	75	3.6	187	3.4	112	3.3	75	3.6	187	3.4	112	3.3	75	3.6
7. Smallpox	154	2.8	96	2.8	58	2.8	154	2.8	96	2.8	58	2.8	154	2.8	96	2.8	58	2.8
8. Cholera	121	2.2	75	2.2	46	2.2	121	2.2	75	2.2	46	2.2	121	2.2	75	2.2	46	2.2
9. Diphtheria	96	1.7	58	1.7	38	1.8	96	1.7	58	1.7	38	1.8	96	1.7	58	1.7	38	1.8
10. Scarlet fever	87	1.6	51	1.5	36	1.7	87	1.6	51	1.5	36	1.7	87	1.6	51	1.5	36	1.7
11. Measles	75	1.4	46	1.4	29	1.4	75	1.4	46	1.4	29	1.4	75	1.4	46	1.4	29	1.4
12. Whooping cough	68	1.2	41	1.2	27	1.3	68	1.2	41	1.2	27	1.3	68	1.2	41	1.2	27	1.3
13. Tetanus	51	0.9	31	0.9	20	1.0	51	0.9	31	0.9	20	1.0	51	0.9	31	0.9	20	1.0
14. Typhus	46	0.8	29	0.8	17	0.8	46	0.8	29	0.8	17	0.8	46	0.8	29	0.8	17	0.8
15. Erysipelas	38	0.7	23	0.7	15	0.7	38	0.7	23	0.7	15	0.7	38	0.7	23	0.7	15	0.7
16. Syphilis	31	0.6	19	0.6	12	0.6	31	0.6	19	0.6	12	0.6	31	0.6	19	0.6	12	0.6
17. Leprosy	23	0.4	14	0.4	9	0.4	23	0.4	14	0.4	9	0.4	23	0.4	14	0.4	9	0.4
18. Rabies	19	0.3	12	0.3	7	0.3	19	0.3	12	0.3	7	0.3	19	0.3	12	0.3	7	0.3
19. Scalds and burns	17	0.3	10	0.3	7	0.3	17	0.3	10	0.3	7	0.3	17	0.3	10	0.3	7	0.3
20. Poisoning	15	0.3	9	0.3	6	0.3	15	0.3	9	0.3	6	0.3	15	0.3	9	0.3	6	0.3
21. Hemiplegia	12	0.2	7	0.2	5	0.2	12	0.2	7	0.2	5	0.2	12	0.2	7	0.2	5	0.2
22. Paralysis	10	0.2	6	0.2	4	0.2	10	0.2	6	0.2	4	0.2	10	0.2	6	0.2	4	0.2
23. Dropsy	9	0.2	5	0.2	4	0.2	9	0.2	5	0.2	4	0.2	9	0.2	5	0.2	4	0.2
24. Stomach disease	8	0.1	5	0.1	3	0.1	8	0.1	5	0.1	3	0.1	8	0.1	5	0.1	3	0.1
25. Liver disease	7	0.1	4	0.1	3	0.1	7	0.1	4	0.1	3	0.1	7	0.1	4	0.1	3	0.1
26. Kidney disease	6	0.1	3	0.1	3	0.1	6	0.1	3	0.1	3	0.1	6	0.1	3	0.1	3	0.1
27. Lung disease	5	0.1	3	0.1	2	0.1	5	0.1	3	0.1	2	0.1	5	0.1	3	0.1	2	0.1
28. Brain disease	4	0.1	2	0.1	2	0.1	4	0.1	2	0.1	2	0.1	4	0.1	2	0.1	2	0.1
29. Nervous system	3	0.1	2	0.1	1	0.1	3	0.1	2	0.1	1	0.1	3	0.1	2	0.1	1	0.1
30. Skin diseases	2	0.0	1	0.0	1	0.0	2	0.0	1	0.0	1	0.0	2	0.0	1	0.0	1	0.0
31. Unknown	1	0.0	1	0.0	0	0.0	1	0.0	1	0.0	0	0.0	1	0.0	1	0.0	0	0.0
<b>Total</b>	<b>5,612</b>	<b>100.0</b>	<b>3,456</b>	<b>100.0</b>	<b>2,156</b>	<b>100.0</b>	<b>5,612</b>	<b>100.0</b>	<b>3,456</b>	<b>100.0</b>	<b>2,156</b>	<b>100.0</b>	<b>5,612</b>	<b>100.0</b>	<b>3,456</b>	<b>100.0</b>	<b>2,156</b>	<b>100.0</b>



TABLE IV.—INFANTILE MORTALITY DURING THE YEAR 1938.  
 Nett Deaths from stated causes at various Ages under 1 Year of Age.

CAUSE OF DEATH.		Under 1 week	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 4 weeks.	1-3 Months.	3-6 Months.	6-9 Months.	9-12 Months.	Total Deaths under 1 year.
1		2	3	4	5	6	7	8	9	10	11
ALL CAUSES	Certified ..	35	5	1	2	43	14	7	6	7	77
	Uncertified ..	2	..	..	..	2	..	..	..	..	2
Measles .. .. .		..	..	..	..	..	..	..	..	..	..
Whooping Cough .. .. .		..	..	..	..	..	..	1	..	..	1
Diphtheria .. .. .		..	..	..	..	..	..	..	..	..	..
Influenza .. .. .		..	..	..	..	..	..	..	..	..	..
Tuberculosis of Nervous System .. .. .		..	..	..	..	..	..	..	..	..	..
Tuberculosis of Intestines and Peritoneum .. .. .		..	..	..	..	..	..	..	..	..	..
Other Tuberculous Diseases .. .. .		..	..	..	..	..	..	1	..	1	2
Syphilis .. .. .		1	..	..	..	1	..	..	..	..	1
Meningitis .. .. .		..	..	..	..	..	..	..	..	..	..
Convulsions .. .. .		2	..	..	..	2	..	..	..	..	2
Bronchitis .. .. .		..	..	..	..	..	1	..	..	..	1
Pneumonia .. .. .		..	..	..	..	..	3	1	4	3	11
Other Respiratory Diseases .. .. .		..	..	..	..	..	..	..	..	..	..
Inflammation of the Stomach .. .. .		..	..	..	..	..	..	..	..	1	1
Diarrhoea and Enteritis .. .. .		..	..	..	1	1	5	2	1	..	9
Hernia, Intestinal Obstruction .. .. .		..	..	..	..	..	..	..	..	..	..
Congenital Malformations .. .. .		6	1	..	..	7	1	1	..	..	9
Congenital Debility and Sclerema .. .. .		2	..	..	..	2	1	..	..	..	3
Icterus .. .. .		..	..	..	..	..	..	..	..	..	..
Premature Birth .. .. .		21	2	1	1	25	1	..	..	..	26
Injury at Birth .. .. .		1	..	..	..	1	1	..	..	..	2
Disease of Umbilicus .. .. .		1	..	..	..	1	..	..	..	..	1
Atelectases .. .. .		1	2	..	..	3	..	..	..	..	3
Suffocation—in bed or not stated how .. .. .		..	..	..	..	..	..	..	..	..	..
Other causes .. .. .		2	..	..	..	2	1	1	1	2	7
Totals .. .. .		37	5	1	2	45	14	7	6	7	79

Nett Births in the year	Legitimate ..	1,517	}	1,613
	Illegitimate	96		
Nett Deaths in the year of	Legitimate Infants	75	}	79
	Illegitimate Infants	4		





TABLE V. (1938).		NETT DEATHS, <i>i.e.</i> , DEATHS ACTUALLY BELONGING TO THE DISTRICT.																										
		LOCALITIES.																										
CAUSES OF DEATH.		Alexandria	Central	Cie	Costes	Hainion	Humber	North East	South	South West	Scarbo	Victoria	Wesley	Wellow	Wellington	INSTITUTIONS				Total at all Ages	AGES.							
																General Dist. Hospital	Scarbo Infirmary	Corporation Hospital.	Other Institutions		Under 1 Year	1 and under 2	2 and under 5	5 and under 15	15 and under 25	25 and under 45	45 and under 65	65 and up.
All causes	Certified .. .. .	52	45	69	20	49	49	35	87	43	21	37	57	41	45	106	232	48	15	1051	77	13	14	16	34	78	301	518
	Uncertified .. .. .	—	—	—	1	—	—	—	—	1	—	—	1	—	—	—	—	—	—	3	2	—	—	—	—	—	—	1
1.	Typhoid and Paratyphoid Fevers ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
2.	Measles .. .. .	—	—	—	—	—	—	—	1	—	—	1	—	—	—	—	—	4	—	6	—	3	2	—	—	—	1	—
3.	Scarlet Fever .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
4.	Whooping Cough .. .. .	—	—	—	—	—	2	—	1	—	—	—	—	—	—	—	—	—	—	3	1	—	2	—	—	—	—	—
5.	Diphtheria .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	—	3	—	1	1	1	—	—	—	—
6.	Influenza .. .. .	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	1	1	—
7.	Encephalitis Lethargica .. .. .	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1
8.	Cerebro-spinal Fever .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	—	—	—	1	—	—	—	—
9.	Tuberculosis of respiratory system ..	3	4	2	1	1	1	—	5	5	—	2	4	—	1	2	4	26	—	61	1	—	—	1	16	19	23	1
10.	Other Tuberculous Diseases .. .. .	—	—	1	—	—	—	—	—	—	—	—	—	—	—	3	1	3	—	8	1	1	1	2	1	1	1	—
11.	Syphilis .. .. .	—	—	—	—	1	1	—	1	1	—	1	1	—	1	2	6	—	—	15	1	—	—	—	1	3	4	6
12.	General Paralysis of the insane, tabes dorsalis .. .. .	—	—	3	—	1	—	2	—	—	—	—	—	1	—	—	1	—	—	8	—	—	—	—	—	—	7	1
13.	Cancer, Malignant Disease .. .. .	6	10	7	6	5	9	7	14	9	3	10	12	5	10	20	49	3	—	185	—	—	—	2	2	9	76	96
14.	Diabetes .. .. .	—	1	—	—	—	—	—	1	1	—	—	—	—	—	1	5	—	—	9	—	—	—	—	—	1	4	4
15.	Cerebral Hæmorrhage, etc. .. .. .	2	3	11	1	3	6	4	8	2	2	8	7	8	6	4	27	—	—	102	—	—	—	—	—	2	32	68
16.	Heart Disease .. .. .	11	6	20	4	9	9	5	19	6	5	5	12	5	7	7	14	—	—	144	—	—	—	2	1	5	56	80
17.	Aneurysm .. .. .	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	—	1	1
18.	Other circulatory diseases .. .. .	1	2	2	—	—	1	2	1	1	—	—	3	1	2	1	3	—	—	20	—	—	1	—	1	1	5	12
19.	Bronchitis .. .. .	6	2	5	1	5	2	2	2	3	1	2	1	2	5	2	6	—	—	47	1	—	—	1	1	1	9	34
20.	Pneumonia (all forms) .. .. .	1	1	3	2	1	1	3	7	1	1	3	2	2	4	3	9	1	—	45	11	4	3	1	1	3	8	14
21.	Other respiratory diseases .. .. .	—	—	—	—	—	—	—	2	—	—	—	—	—	1	3	2	—	—	8	—	—	—	—	—	2	6	—
22.	Peptic Ulcer .. .. .	—	—	—	—	—	—	—	—	—	—	1	—	—	—	2	2	—	—	5	—	—	—	—	—	—	5	—
23.	Diarrhœa, etc. .. .. .	1	—	1	—	2	—	—	—	—	—	—	—	—	—	—	7	—	—	11	9	1	—	—	—	—	—	1
24.	Appendicitis .. .. .	—	—	—	—	2	—	—	1	—	—	—	1	—	—	3	1	—	—	8	—	—	—	—	1	4	3	—
25.	Cirrhosis of Liver .. .. .	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	1	—	—	2	—	—	—	—	—	—	1	1
26.	Other diseases of liver, etc. .. .. .	—	—	—	—	—	—	—	1	—	—	—	—	—	—	1	—	—	—	2	—	—	—	—	—	—	1	1
27.	Other digestive diseases .. .. .	—	—	1	—	1	1	—	4	—	—	—	1	—	—	14	2	—	—	24	—	—	1	1	—	3	10	9
28.	Acute and Chronic Nephritis .. .. .	5	—	2	1	4	—	1	2	4	2	—	—	1	—	2	4	—	—	28	—	—	1	—	1	2	9	15
29.	Puerperal Sepsis .. .. .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	—	—	3	—	—	—	—	—	3	—	—
30.	Other puerperal causes .. .. .	—	1	—	—	—	—	—	—	—	—	—	—	—	—	1	1	—	4	7	—	—	—	—	1	6	—	—
31.	Congenital Debility, premature birth, malformations, etc. .. .. .	3	3	—	2	1	5	3	5	5	—	—	—	2	—	2	4	—	11	46	45	—	1	—	—	—	—	—
32.	Senility .. .. .	7	8	10	—	9	5	3	5	4	6	4	9	8	4	2	60	—	—	144	—	—	—	—	—	—	1	143
33.	Suicide .. .. .	2	1	—	—	1	1	—	1	—	—	—	—	2	1	1	—	—	—	10	—	—	—	—	—	4	5	1
34.	Other Violence .. .. .	1	—	—	1	1	1	—	—	1	—	—	1	—	1	10	2	2	—	21	—	—	—	2	—	3	9	7
35.	Other defined causes .. .. .	2	2	1	2	2	3	3	5	—	—	—	4	4	2	20	20	3	—	73	9	3	1	2	7	5	23	23
36.	Causes ill-defined, or unknown ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Totals .. .. .		52	45	69	21	49	49	35	87	44	21	37	58	41	45	106	232	48	15	1054	79	13	14	16	34	78	301	519
Special Causes (included above) :—																												
Acute Poliomyelitis (in 35)		—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	1	—	—	—	—	—	—





TABLE VI.

TABLE SHOWING ACREAGE, POPULATION, DENSITY, BIRTH AND DEATH RATES,  
AND INFANTILE DEATH RATES IN WARDS, 1938.

Ward.	Acreage.	Estimated Popula- tion.*	Density.	Birth Rate per 1000.	† Death Rate per 1000.	Infantile Death Rate per 1000 Births
Alexandra ..	315	7,800	24	14.1	6.6	54
Central ..	86	6,250	73	17.4	7.2	37
Clee ..	370	10,900	29	14.8	6.3	43
Coates ..	266	3,150	11	19.6	6.6	112
Hainton ..	116	5,750	49	13.9	8.5	50
Humber ..	109	8,250	76	20.7	5.9	53
North-East ..	232	5,450	23	17.2	6.4	53
South ..	1822	10,100	5	31.4	8.6	50
South-West ..	79	6,000	76	26.0	7.3	51
Scarthoe ..	985	2,300	2	13.9	9.1	31
Victoria ..	128	6,000	47	15.5	6.1	54
Weelsby ..	678	7,600	11	7.6	7.6	17
Wellow ..	200	4,520	22	9.5	9.0	70
Wellington ..	82	8,250	100	15.1	5.4	24

\* Based on Registrar-General's estimate of total population.

† Excluding deaths occurring in Institutions in the Borough.

It will be noted that the death-rate is highest in the Scartho and Wellow Wards.

The infantile mortality rate is highest in the Coates Ward, followed by the Wellow Ward. Last year the infantile mortality rate was lowest in the Weelsby and Wellow Wards; this year it is lowest in the Weelsby and Wellington Wards.

It must be appreciated that there will be wide fluctuations in the figures in small areas such as these.

TABLE VII.

BIRTH-RATES, DEATH-RATES, ANALYSIS OF MORTALITY, MATERNAL DEATH RATES, AND CASE RATES FOR CERTAIN INFECTIOUS DISEASES IN THE YEAR 1938.

(England and Wales, London, 126 Great Towns and 148 Smaller Towns).

(Provisional figures based on Weekly and Quarterly Returns).

	ENGLAND and WALES.	126 County Boroughs and Great Towns including London.	148 Smaller Towns (Resident populations 25,000 to 50,000 at 1931 Census).	London Administra- tive County.	GRIMSBY, C.B.
Rates per 1,000 population.					
<i>Births :—</i>					
Live .. .. .	15.1	15.0	15.4	13.4	17.4
Still .. .. .	0.60	0.65	0.60	0.48	0.57
<i>Deaths :—</i>					
All causes .. .. .	11.6	11.7	11.0	11.4	12.2*
Typhoid and Paratyphoid fevers ..	0.00	0.00	0.00	0.00	0.00
Small-pox .. .. .	0.00	—	0.00	—	—
Measles .. .. .	0.04	0.05	0.03	0.06	0.06
Scarlet fever .. .. .	0.01	0.01	0.01	0.01	0.00
Whooping cough .. ..	0.03	0.03	0.02	0.03	0.03
Diphtheria .. .. .	0.07	0.07	0.06	0.05	0.03
Influenza .. .. .	0.11	0.10	0.11	0.06	0.02
<i>Notifications :—</i>					
Small-pox .. .. .	0.00	0.00	0.00	—	—
Scarlet fever .. .. .	2.41	2.60	2.58	2.05	2.00
Diphtheria .. .. .	1.58	1.85	1.53	1.90	1.36
Enteric fever .. .. .	0.03	0.03	0.04	0.05	0.01
Erysipelas .. .. .	0.40	0.46	0.39	0.46	0.32
Pneumonia .. .. .	1.10	1.28	0.98	0.98	0.50
Rates per 1,000 Live Births.					
Deaths under 1 year of age	53	57	51	57	49
Deaths from Diarrhoea and Enteritis under 2 years of age .. .. .	5.5	7.8	3.6	13.1	6.19
<i>Maternal Mortality :—</i>					
Puerperal sepsis .. ..	0.89	} Not available.			1.85
Others .. .. .	2.19				4.33
Total .. .. .	3.08				6.18
Rates per 1,000 Total Births (i.e. Live and Still).					
<i>Maternal Mortality :—</i>					
Puerperal sepsis .. ..	0.86	} Not available.			1.80
Others .. .. .	2.11				4.20
Total .. .. .	2.97				6.00
<i>Notifications :—</i>					
Puerperal fever .. ..	} 14.42	18.08	12.51	{ 3.53 15.46 {	19.20
Puerperal pyrexia .. ..					

\* Adjusted death-rate.



TABLE VIII.

RETURN RELATING TO ALL PERSONS WHO WERE TREATED AT THE TREATMENT CENTRE AT GRIMSBY, DURING THE YEAR ENDED THE 31ST DECEMBER, 1938.

	Syphilis		Soft Chancre		Gonorrhœa		Conditions other than Venereal.		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	To'ts
1. Number of cases on 1st January, under treatment or observation ..	131	114	—	—	90	32	22	13	243	159	402
2. Number of cases removed from the register during any previous year which returned during the year under report for treatment or observation of the same infection ..	15	7	—	—	—	—	—	—	15	7	22
3. Number of cases dealt with for the first time during the year under report (exclusive of cases under Item 4) suffering from :—											
Syphilis, primary .. ..	13	1	—	—	—	—	—	—	13	1	14
" secondary .. ..	17	6	—	—	—	—	—	—	17	6	23
" latent in 1st year of infection .. ..	1	3	—	—	—	—	—	—	1	3	4
" all later stages .. ..	39	17	—	—	—	—	—	—	39	17	56
" congenital .. ..	14	8	—	—	—	—	—	—	14	8	22
Soft Chancre .. ..	—	—	4	—	—	—	—	—	4	—	4
Gonorrhœa 1st year of infection .. ..	—	—	—	—	199	43	—	—	199	43	242
" later .. ..	—	—	—	—	8	2	—	—	8	2	10
Conditions other than venereal .. ..	—	—	—	—	—	—	147	61	147	61	208
4. Number of cases dealt with for the first time during the year under report known to have received treatment at other Centres for the same infection .. ..	24	2	—	—	24	1	—	—	48	3	51
Totals of Items 1, 2, 3 and 4 ..	254	158	4	—	321	78	169	74	748	310	1058
5. Number of cases discharged after completion of treatment and final tests of cure or after diagnosis as non-venereal .. ..	23	15	2	—	87	22	139	65	251	102	353
6. Number of cases which ceased to attend before completion of treatment and were, on first attendance suffering from :—											
Syphilis, primary .. ..	—	—	—	—	—	—	—	—	—	—	—
" secondary .. ..	1	2	—	—	—	—	—	—	1	2	3
" latent in 1st year of infection .. ..	—	2	—	—	—	—	—	—	—	2	2
" all later stages .. ..	22	16	—	—	—	—	—	—	22	16	38
" congenital .. ..	4	8	—	—	—	—	—	—	4	8	12
Soft Chancre .. ..	—	—	1	—	—	—	—	—	1	—	1
Gonorrhœa, 1st year of infection .. ..	—	—	—	—	40	15	—	—	40	15	55
" later .. ..	—	—	—	—	6	—	—	—	6	—	6
7. Number of cases which ceased to attend after completion of treatment but before final tests of cure ..	2	2	—	—	20	2	—	—	22	4	26
8. Number of cases transferred to other centres or to institutions, or to care of private practitioners ..	56	5	—	—	69	5	8	1	133	11	144
Died .. ..	4	2	—	—	—	—	—	—	4	2	6
9. Number of cases remaining under treatment or observation on 31st December .. ..	142	106	1	—	99	34	22	8	264	148	412
Totals of Items 5, 6, 7, 8 & 9 ..	254	158	4	—	321	78	169	74	748	310	1058



TABLE VIII.—continued.

	Syphilis		Soft Chancre		Gonorrhœa		Conditions other than Venereal.		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	To'ts
10. Number of cases in the following stages of syphilis included in Item 6 which failed to complete one course of treatment :—											
Syphilis, primary .. ..	—	—	—	—	—	—	—	—	—	—	—
" secondary .. ..	1	1	—	—	—	—	—	—	1	1	2
" latent in 1st year of infection .. ..	—	2	—	—	—	—	—	—	—	2	2
" all later stages .. ..	8	12	—	—	—	—	—	—	8	12	20
" congenital .. ..	1	7	—	—	—	—	—	—	1	7	8
11. Number of attendances :—											
(a) for individual attention of the medical officers .. ..	2619	2197	28	—	2335	1082	554	155	5536	3434	8970
(b) for intermediate treatment, e.g., irrigation, dressing .. ..	244	67	46	—	6481	1621	330	68	7101	1756	8857
Total Attendances .. ..	2863	2264	74	—	8816	2703	884	223	12637	5190	17827
12. In-Patients :—											
(a) Total number of persons admitted for treatment during the year .. ..	—	—	—	—	—	—	—	—	—	—	—
(b) Aggregate number of "in-patient days" of treatment given .. ..	—	—	—	—	—	—	—	—	—	—	—
	Under 1 year		1 and under 5 years		5 and under 15 years		15 years and over		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
13. Number of cases of congenital syphilis in Item 3 above classified according to age periods .. ..	2	2	4	—	2	3	6	3	14	8	
	Arsenical										
	Approved Arsenobenzene Compounds				Others		Mercury		Bismuth		
14. Chief preparations used in treatment of Syphilis :—	Novostab (Boots)										
(a) Names of preparations .. ..	Sulphostab ..				Tryparsamide (May & Baker)		Mercury Sulphide (Collosal)		Bismostab		
(b) Total number of injections given (out-patients and in-patients) .. ..	Stabilarsan ..								Quinostab (Boots)		
	Kharsulphan (B. W. & Co.)				460		4		2978		
	2225										
15. PATHOLOGICAL WORK :—	Microscopical.		Cultural for Gonorrhœa	Serum		Cerebro spinal fluid	Others for diagnosis of Venereal Disease				
	for Syphilis	for Gonorrhœa		for Syphilis	for Gonorrhœa						
(a) Number of specimens examined at and by the medical officer of the treatment centre .. ..	Nil	Nil	Nil	Nil	Nil	Nil	Trichomonas Vaginalis Nil				
(b) Number of specimens from patients attending at the centre sent for examination to an approved laboratory .. ..	57	1110	679	1129	461	28	119				



TABLE VIII.—continued.

STATEMENT SHOWING THE SERVICES RENDERED AT THE TREATMENT CENTRE DURING THE YEAR, CLASSIFIED ACCORDING TO THE AREAS IN WHICH THE PATIENTS RESIDED.

Name of County or County Borough (or Country in the case of persons residing elsewhere than in England and Wales) to be inserted in these headings.	Grimsby	Lindsey	Foreigners	Bristol	Hull	S. Shields	Surrey	Sheffield	Leeds	Suffolk	London	Birmingham	Leicester	Cornwall	Dorset	E. Riding	Derbyshire	Lancashire	Liverpool	Plymouth	Gloucester	Cardiff	Cardiganshire	Sunderland	Totals
A. Number of cases from each area included under the following headings in Item 3:																									
Syphilis .. .. .	80	22	14	1	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	119
Soft Chancre .. .. .	2	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4
Gonorrhœa .. .. .	138	67	40	—	1	—	—	1	—	—	—	—	1	—	—	1	—	—	1	—	1	—	—	—	252
Conditions other than venereal ..	137	37	24	—	—	1	1	1	1	—	1	—	—	—	1	1	1	1	—	—	—	—	1	—	208
Total .. .. .	357	128	78	1	1	1	1	2	1	1	2	—	1	—	1	2	1	1	1	—	1	1	1	—	583
B. Total number of attendances of all patients residing in each area ..	14550	2769	331	3	23	2	8	4	28	4	18	53	2	1	4	4	1	1	12	3	1	1	2	2	17827
C. Aggregate number of "In-patient days" of all patients residing in each area ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

TABLE IX.

BACTERIOLOGICAL EXAMINATIONS, 1938.

	Positive.	Negative.	Total.
<i>Throat Swabs for Diphtheria :—</i>			
Grimsby Corporation Hospital .. ..	1020	3296	4316
Private Practitioners .. ..	69	328	397
Scarthoe Road Infirmary .. ..	—	9	9
School Clinic .. ..	15	103	118
Contacts .. ..	—	48	48
<i>Sputum for Tubercle Bacilli :—</i>			
Grimsby Corporation Hospital .. ..	293	313	606
Private Practitioners .. ..	27	208	235
Tuberculosis Dispensary .. ..	33	202	235
Scarthoe Road Infirmary .. ..	5	40	45
Maternity Home .. ..	—	4	4
	1462	4551	6013
<i>Specimens sent to Outside Laboratories :—</i>			
Haemolytic Streptococci .. ..	19	58	77
Widal Reaction .. ..	1	12	13
Diphtheria Bacilli .. ..	3	4	7
Examination for Tubercle Bacilli ..	—	5	5
Examinations for Anthrax .. ..	—	1	1
<i>Bacteriological Examinations of Milk sent to Outside Laboratories .. ..</i>			
	6	52	58
Totals .. ..	1491	4683	6174



TABLE X.

## ANNUAL REPORT

OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR 1938 FOR THE COUNTY BOROUGH AND PORT OF GRIMSBY IN THE COUNTY OF LINCOLNSHIRE.

On the administration of the Factory and Workshop Act, 1901, and the Factories Act, 1937 (which superseded the Act of 1901 on 1st July, 1938).

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

INCLUDING INSPECTIONS MADE BY SANITARY INSPECTORS.

Premises. (1)	Number of		
	Inspections (2)	Written Notices (3)	Occupiers prosecuted (4)
<i>Factories with mechanical power</i> .. ..	1113	1	—
<i>Factories without mechanical power</i> ..	1570	93	—
† <i>Other Premises</i> under the Act (including works of building and engineering construction but not including out-workers' premises) .. ..	—	—	—
† <i>Electrical Stations</i> should be reckoned as factories <i>Total</i> ..	2683	94	—

## 2.—DEFECTS FOUND.

Particulars (1)	Number of Defects			Number of defects in respect of which prosecutions were instituted. (5)
	Found (2)	Re-medied (3)	Referred to H.M. Inspector (4)	
Want of cleanliness (S. 1.) .. ..	209	207	—	—
Overcrowding (S. 2) .. ..	—	—	—	—
Unreasonable temperature (S. 3) ..	—	—	—	—
Inadequate ventilation (S. 4) .. ..	3	1	—	—
Ineffective drainage of floors (S. 6) ..	31	28	—	—
Sanitary Conveniences (S. 7) {	insufficient	13	11	—
	unsuitable			
	or defective	31	22	—
not separate for				
sexes .. ..	2	2	—	—
Other offences .. ..	123	109	—	—
(Not including offences relating to Home Work or offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921, and re-enacted in the Third Schedule to the Factories Act, 1937).				
<i>Total</i> .. ..	412	380	—	—

Outwork in Unwholesome Premises.—Nil.





