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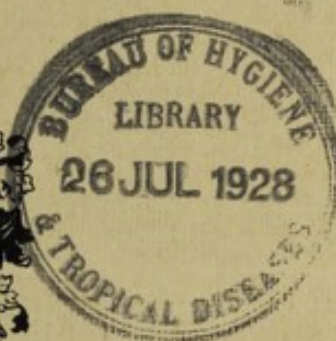
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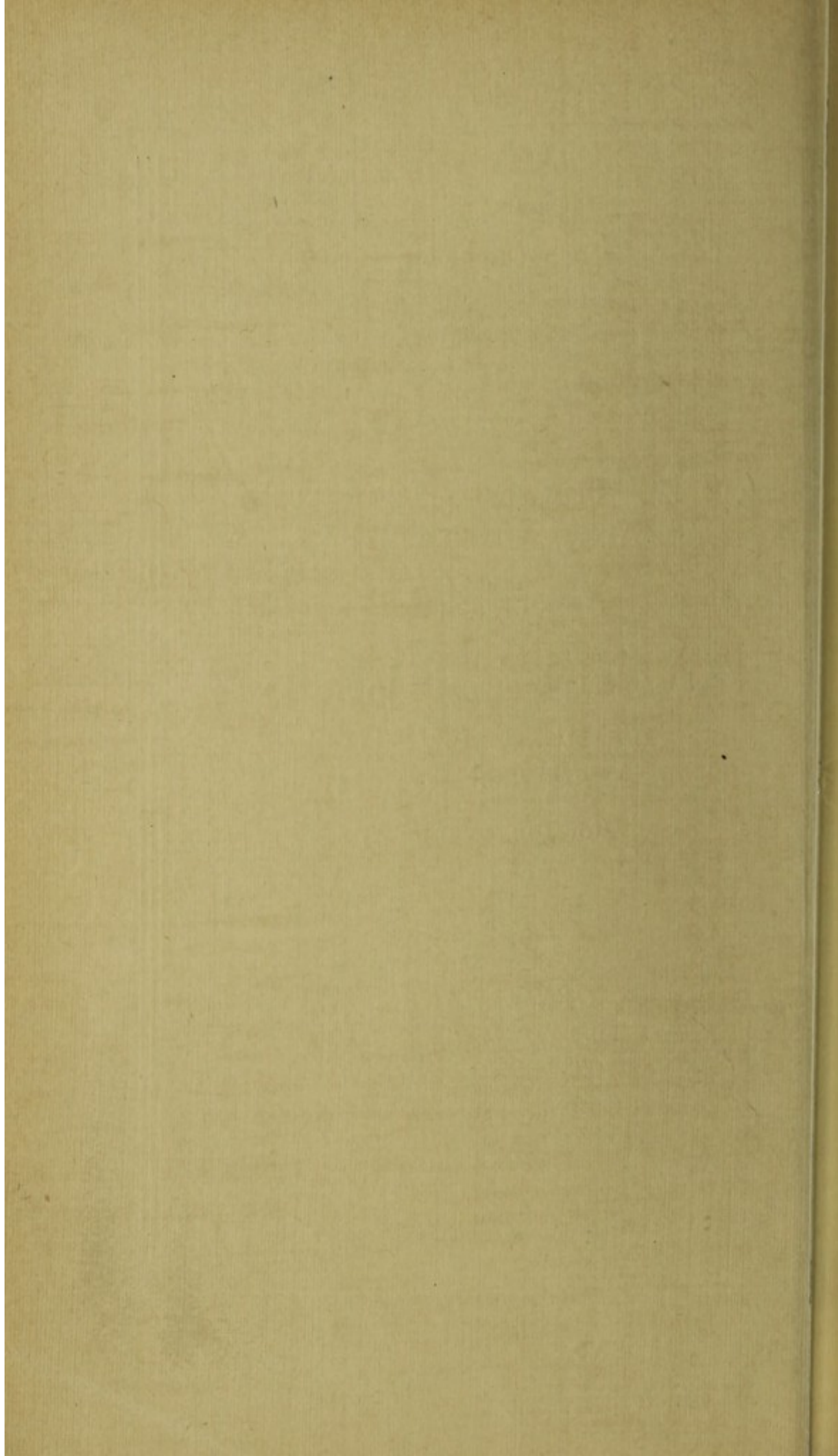
COUNTY BOROUGH OF HALIFAX
HEALTH DEPARTMENT.

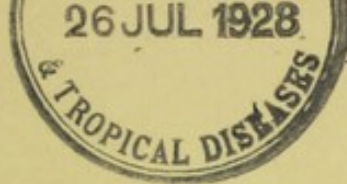
ANNUAL REPORT

ON THE HEALTH OF THE BOROUGH

For the Year 1927.

CYRIL BANKS,
*M.B., B.S. (Lond.), D.P.H. (Sheff.),⁵
Medical Officer of Health.*





COUNTY BOROUGH OF HALIFAX
HEALTH DEPARTMENT.

ANNUAL REPORT
ON THE HEALTH
OF THE BOROUGH
For the Year 1927.

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COUNTY BOROUGH OF BATH AND NORTH EAST SOMERSET
HEALTH DEPARTMENT

ANNUAL REPORT
ON THE HEALTH
OF THE BOROUGH
For the Year 1957

CYRIL BAKER

Medical Officer of Health
Bath and North East Somerset

Health Committee

(as on Dec. 31st, 1927).

Mayor.

ALDERMAN ARTHUR LLEWELLYN WHITTAKER, J.P.

ALDERMAN W. M. BRANSON, J.P., *Chairman.*

COUNCILLOR JOHN FOSTER, *Vice-Chairman.*

Ald. T. HEY, J.P.	Coun. W. GREENWOOD.
„ A. W. LONGBOTTOM, J.P.	„ F. SHARP.
„ A. WALTERS, J.P.	„ H. THORP.
Coun. P. BARRETT.	„ L. LUMB.
„ J. BROADBENT.	„ F. SYKES.
„ M. WILLIAMSON, J.P.	„ M. LIGHTOWLER,
Coun. E. W. LYON.	J.P.

Sub-Committees

Appointed by the Health Committee.

Health Services and Hospital Sub-Committee.

THE CHAIRMAN.	COUNCILLOR SHARP.
VICE-CHAIRMAN.	„ GREENWOOD.
ALDERMAN HEY.	„ THORP.
„ WALTERS.	„ LIGHTOWLER.

Cleansing Sub-Committee.

THE CHAIRMAN.	COUNCILLOR LUMB.
VICE-CHAIRMAN.	„ BARRETT.
ALDERMAN LONGBOTTOM.	„ SYKES.
COUNCILLOR BROADBENT.	„ WILLIAMSON.
COUNCILLOR LYON.	

Accounts Sub-Committee.

THE CHAIRMAN.	COUNCILLOR WILLIAMSON.
VICE-CHAIRMAN.	„ BARRETT.
ALDERMAN WALTERS.	„ LYON.
COUNCILLOR SYKES.	

Maternity and Child Welfare Committee.

The Health Committee with the following additional Members:—
Miss DOROTHY WRIGHT. Mrs. LAVINIA LUMB.
Mrs. E. WHITTAKER. Miss FLORENCE WHITLEY.
Mrs. M. A. TAYLOR, J.P. Mrs. MARY E. WILLIAMSON.
Mrs. D. GLEDHILL.

Welfare of the Blind Sub-Committee.

ALDERMAN W. M. BRANSON.	COUNCILLOR WILLIAMSON.
COUNCILLOR SHARP.	„ LYON.
COUNCILLOR BROADBENT.	

Staff of the Health Department

(as on December 31st, 1927).



*CYRIL BANKS, M.B., B.S.(Lond.), D.P.H.

Medical Officer of Health and Chief Medical Officer of the Corporation.

*WILFRID SMITH, M.Sc. M.B., B.Ch., B.A.O.

Assistant Medical Officer of Health, Clinical Tuberculosis Officer and Resident Medical Officer, Sanatorium.

*A. LATCHMORE, M.D., Ed.

Assistant Medical Officer of Health and Medical Officer to Maternity and Child Welfare Centre.

*F. W. WATERWORTH, M.B., Ch.B., D.P.H.

Assistant Medical Officer of Health and Assistant School Medical Officer.

J. POLLARD, M.R.C.V.S., D.V.S.M., (Vict.)

Veterinary and Meat Inspector.

† H. G. CLINCH, M.Inst. F.E.E.

Chief Sanitary and Smoke Inspector.

†F. TEAL. †J. G. WALSHAW. †E. WILSON. †H. LEAPER.
District Sanitary Inspectors.

†H. H. HAGUE, Assistant Meat Inspector.

T. FEARNLEY, Shops Inspector.

||§*ELSIE R. ORAM, Senior Health Visitor.

*L. WOLSTENHOLME. *E. MARSHALL. ||§*M. H. SUTCLIFFE.

†§*G. BRIGGS. §*M. MOORE. *E. G. TINDLE.
Health Visitors.

J. W. JACKSON, Chief Clerk.

†CHARLES CARLTON. H. WRIGHT. H. CARLTON.
C. MASTERMAN. Assistant Clerks.

F. WILSON, Matron, Fever Hospital.

*W. DAVIDSON, Matron, Sanatorium.

P. SHARP, Removal Officer.

*Salary contributed to, under Public Health Acts or by Exchequer Grants.

†Certificate Sanitary Inspector, Royal Sanitary Institute.

‡Royal Sanitary Institute Certificates as Sanitary, Meat and Smoke Inspector,
and in advanced knowledge of Inspectors' duties.

§Certificate Central Midwives Board.

||Health Visitor's Certificate.

The Analyst for the Borough is
Mr. H. T. LEA, B.Sc. (Hons.) M.Sc.; F.I.C.

COUNTY BOROUGH OF HALIFAX.

REPORT

OF THE

MEDICAL OFFICER OF HEALTH,
FOR THE YEAR 1927.

INTRODUCTION.

*To the Chairman and Members of the Health
Committee.*

MADAM AND GENTLEMEN,

I have the honour to submit the 55th Annual Report on the health of the Borough, dealing with the year 1927. I regret that publication has been delayed a few weeks beyond the usual date; this is because the full energy of the Health Department has been concentrated upon the suppression of Small-pox.

* * * *

For the first time since the last census the Registrar General has estimated a slight increase in population, which had previously been falling year by year. The population is now estimated at 96,270, an increase of 140 over the previous year, though there were 246 fewer births than deaths; this points to a certain amount of migration into the town. The birth rate was extremely low.

* * * *

The death rate was higher than the average of recent years. There were 49 more deaths from influenza than in 1926, and from respiratory diseases 34 more than in 1926, both these increases being due to a nasty outbreak of influenza in February and March. Several other causes of death showed an increase.

The general death rate of the country will probably not go much lower. Over a considerable number of years there has been a steady improvement, as shown on page 10. This means that people have been living longer during these years of improvement, but of course this cannot go on for all time ; it is not claimed that our health services are so efficient as to make people live for ever. And the time has now come when many who have survived longer than the previous average are dying off. Therefore the time may be near when the general death rate may remain fairly level, or may actually increase. This, however, need not deter the public of Halifax from further efforts to improve the healthiness of the town, because Halifax still has a death rate and an infantile mortality rate higher than the average for the 107 County Boroughs and Great Towns (see page 12).

The actual figures do not give support to the statements so frequently heard to the effect that Halifax is a healthy town. It is evidently not a particularly healthy place, though certainly it is healthier than it used to be. Perhaps it will be some time before the Corporation's efforts to improve matters will be reflected in the mortality figures. But let us keep in mind that there is a lot yet to be done in removing insanitary conditions, destroying unhealthy dwellings, giving through ventilation to houses of the back-to-back type, and above all in teaching the public to lead healthier lives.

* * * *

The Maternity and Child Welfare Centre is a most satisfactory section of the Department's activities. The work of the Health Visitors in the homes and the successful work being carried on in the clinics is raising the standard of mothercraft. Mothers are learning what to do to keep their children healthy, and the growing generation will be all the better able to meet the strains and stresses of life. It is true that the number of deaths of infants in the first year of life was higher than in the previous year (90 per thousand as against 79 per thousand), but a reference to the table on page 10 will show that in view of the general unhealthiness of 1927, the infant mortality rate was about what one would expect.

* * * *

On page 61 I have dealt with the distressing mortality among mothers in childbirth. In spite of all we are trying to do there is no improvement in this matter, and the same applies in regard to the deaths of infants during the first month of life. The two together form a single problem

distinct from the question of infant mortality during later periods of the first year, in which we have seen so great an improvement.

The Ministry of Health has set up a special committee to work upon the problem of maternal mortality. Unfortunately Halifax has a bad record—and the reason for this we do not know; we cannot yet interpret the facts.

* * * *

The sanitary inspection of the town, followed by the repair and improvement of bad dwellings is proceeding in a way which reflects great credit on the Chief Sanitary Inspector and his staff. The environment of the inhabitants is improving, and as environment affects health and happiness there should be a corresponding benefit felt. The provision of so large a number of new houses by the Housing Committee and by private enterprise is another most satisfactory feature, the importance of which from the point of view of the sanitarian cannot be lost sight of. It is reasonable to expect that these activities of the Corporation will confer better health on the people, a thing which must be remembered when the cost is being weighed.

* * * *

The abatement of smoke from chimneys continues to receive attention. We have had to deplore, in the past, the difficulty of dealing with the problem of smoke from house chimneys. This difficulty need no longer exist, because the manufacture of solid smokeless fuel has now reached the stage of efficiency. "Coalite," a coke-like substance produced by the low temperature carbonisation process takes exactly the place of coal; it produces no smoke, does not dirty kettles and pans, and does away with the need for the chimney-sweep; it produces bright clean hot fires. After using the material for some time I am able to say that if this fuel continues to be made in the same quality as at present, and is sold at the same price as some of the dealers are now quoting, there need be no further anxiety about atmospheric pollution from house chimneys, for those who try the new fuel are reluctant to go back to the use of raw, smoky, dirty coal.

* * * *

The purity and wholesomeness of the food of the people is being jealously safeguarded, especially in respect of perishable foods, meat supplies and milk. The new regulations which prohibit the use of preservatives in food will result in some disorganisation of trade for a time, but will turn out all right in the end, for not only will the public be spared from the continual involuntary assimila-

tion of harmful chemicals, but producers of perishable foods such as cream, will be driven to the adoption of cleaner methods so that their goods will keep better. I trust this will be kept in mind by the public when the powerful interests behind the food producers conduct a campaign against the preservative regulations—a not unlikely eventuality.

* * * *

I trust this brief introduction may prove sufficiently interesting to induce members of the public to read the Report, which really ought to appeal to them as an account of how one of the Corporation departments (with the help and co-operation of the other departments) is trying to make the town a better place to live in. And if some of the statistics for the year are not so good as might be, let this be regarded as only a temporary set-back, for there is every reason to be most hopeful for the future in regard to the public health.

* * * *

I conclude with the customary but not the less sincere appreciation of the loyal service rendered by the staff of all sections of the Health Department and the Institutions connected therewith, and tender my thanks to the Committee for its encouragement.

I am, Madam and Gentlemen,

Your obedient Servant,

CYRIL BANKS,

Medical Officer of Health.

HEALTH DEPARTMENT,
POWELL STREET,
HALIFAX.

23rd May, 1928.

REPORT.

Statistics.

AREA (acres) ... 13,984

POPULATION.—The following figures show the variations which have occurred in the population over a period :—

1901 Census	...	...	...	...	104,944
1911 Census	...	...	...	...	101,553
1921 Census (adjusted)	...	...	...	...	100,700
1922 Registrar-General's Estimate	...	...	...	...	100,500
1923	"	"	"	...	99,840
1924	"	"	"	...	98,750
1925	"	"	"	for Birthrate...	98,090
1925	"	"	"	for Deathrate...	97,860
1926	"	"	"	for Birthrate...	96,300
1926	"	"	"	for Deathrate...	96,130
1927	"	"	"	for Birthrate...	96,400
1927	"	"	"	for Deathrate...	96,270

The explanation of the difference between the "Deathrate population" and the "Birthrate population" is that non-civilians are not included when calculating the deathrate, but they are included when calculating the birthrate.

Standardising figure for Deathrate... .944

This is the figure by which the deathrate of Halifax must be multiplied in order to correct for the peculiar age and sex distribution of the Halifax population. The resulting figure enables a more accurate comparison to be made between the deathrate of Halifax and that of other towns.

Structurally separate dwellings occupied (Census 1921) ... 26,506

Number of families or separate occupiers (Census 1921) ... 26,830

Rateable value ... £670,145

Sum represented by a penny rate ... £2,500

Births.

Legitimate Males 646 ... Females 626 ... Total 1,272

Illegitimate Males 36 ... Females 31 ... Total 67

Total Births ... 1,339.

Birthrate per 1,000 population ... 13.8

Average 10 years, 1880-1889.....	29.3
" " 1890-1899.....	24.2
" " 1900-1909.....	20.0
" " 1910-1919.....	15.9
" 5 " 1921-1925.....	15.6
1925.....	14.5
1926.....	14.5
1927.....	13.8

Deaths.

Males 746	...	Females 838	...	Total 1,584
Deathrate per 1,000	...	...	...	16.4
" "	(Standardised)	...	...	15.4

Average 10 years, 1880-1889.....	21.0
" " 1890-1899.....	18.6
" " 1900-1909.....	15.3
" " 1910-1919.....	15.6
" 5 " 1921-1925.....	14.9
1925.....	16.9
1926.....	14.3
1927.....	16.4
Standardised.....	15.9
Standardised.....	13.5
Standardised.....	15.4

Infant Mortality.

Deaths of infants under 1 year.....121
 Rate per 1,000 births..... 90
 (Legitimate 88, Illegitimate 119).

Average 10 years, 1880-1889.....	159
" " 1890-1899.....	159
" " 1900-1909.....	121
" " 1910-1919.....	101
1920.....	96
1921.....	99
1922.....	110
1923.....	90
1924.....	96
1925.....	93
1926.....	79
1927.....	90

Summary of Deaths.

(Based on the Registrar General's "Short List" of causes of death).

Cause of Death	Number
Enteric Fever	—
Smallpox	—
Measles	20
Scarlet Fever	2
Whooping Cough	6
Diphtheria	8
Influenza	65
Encephalitis Lethargica	3
Meningococcal Meningitis	2
Tuberculosis of respiratory system	76
Other Tuberculous Diseases	20
Cancer, Malignant Disease	158
Rheumatic Fever	6
Diabetes	23
Cerebral Hæmorrhage, etc.	125
Heart Disease	254
Arterio-sclerosis	103
Bronchitis	113
Pneumonia (all forms)	111
Other Respiratory Diseases	11
Ulcer of Stomach or Duodenum	11
Diarrhœa, etc.	13
Appendicitis and Typhlitis	13
Cirrhosis of Liver	5
Acute and Chronic Nephritis	47
Puerperal Sepsis	1
Other Accidents and Diseases of Pregnancy and Parturition	9
Congenital Debility and Malformation, Premature Birth	49
Suicide	33
Other deaths from violence	29
Other defined Diseases	266
Causes ill-defined or unknown	2
Total	1,584

	Year	Birthrate per 1,000 Total Population	Annual Deathrate per 1,000 Population								Rate per 1,000 Births	
			ALL CAUSES	Enteric Fever	Small-Pox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Diarrhoea and Enteritis (under two years)	TOTAL DEATHS under one year
England and Wales ...	1927	16.7	12.3	0.01	0.00	0.09	0.01	0.9	0.07	0.57	6.3	69
107 County Boroughs and Great Towns including London ...	1927	17.1	12.2	0.01	0.00	0.12	0.01	0.10	0.08	0.49	8.3	71
HALIFAX ...	1922	15.9	14.9	.009	0.00	0.10	.009	0.19	0.02	0.23	3.7	110
	1923	15.2	13.8	0.01	0.00	0.05	0.01	0.00	0.02	0.30	7.2	90
	1924	14.9	15.3	0.01	0.00	0.08	0.01	0.06	0.05	0.73	6.7	96
	1925	14.5	15.9	0.04	0.00	0.18	0.01	0.10	0.09	0.40	4.2	93
	1926	14.5	14.3	0.01	0.00	0.02	0.01	0.10	0.09	0.14	7.8	79
	1927	13.8	15.4	0.00	0.00	0.20	0.02	0.06	0.08	0.67	6.7	90

(Provisional figures. The rates have been calculated on a population estimated to the middle of 1927. The mortality rates refer to the whole population as regards England and Wales, but only to civilians as regards London and the group of towns).

Cancer.

In view of the interest now taken by the public in regard to Cancer, the following hints, which appeared in last year's Report, may be repeated :—

1. There is always a chance that cancer can be cured if discovered early.
2. Do not get into a state of worry about cancer—if you suspect that you have it, go and ask your doctor to examine you to settle the question.
3. If your doctor says you have cancer do not waste time but submit to treatment at once.
4. Have nothing to do with people who advertise cancer-curing remedies ; they are only after your money ; cancer cannot be treated by post.
5. If you see or feel a small lump or nodule about your body which puzzles you, consult your doctor at once ; do not wait for pain, for cancer may not be painful in the early stages. This especially applies to lumps in the breast.
6. Persistent cracks or sores or small swellings about the lips, nose, cheeks or tongue, should be reported to the doctor at once.
7. Chronic indigestion may be due in some cases to cancer of the stomach.
8. Unusual discharges or bleedings from any of the openings of the body, especially after forty years of age, should be reported to the doctor at once. This especially applies to women.
9. Constant irritation such as may be caused by ill-fitting false teeth or by excessive smoking, should be remedied.
10. Mule-spinners and chimney sweeps should look out for the effects of constant irritation caused by oil or soot respectively, upon the thighs or lower parts of the body, and should consult a doctor when anything unusual is noticed.
11. Once more—Do not delay !

General Provision of Health Services.

(Arranged as required by the Ministry.)

Hospitals provided or subsidised by the Corporation :—

Tuberculosis—The Sanatorium at Shelf provides accommodation for 25 early and 25 other cases. It is provided by the Halifax Corporation and receives cases from other districts, including Lancashire County and West Riding County.

The Health Committee had a call on 10 beds at the Bermerside Residential School for children in the pre-tubercular stage, or children suffering from tuberculosis of a non-infectious character. This number is to be reduced to 5.

Maternity Hospital—The Maternity Homes in connection with St. Luke's Hospital and the Royal Halifax Infirmary appear amply to meet the needs of the town, but the arrangements by which the Corporation assisted persons to enter these institutions were not greatly used, and were discontinued. The Corporation makes a grant of £300 per annum towards the Infirmary Maternity Home.

Hospital for Children—The Education Committee has an arrangement with the Royal Halifax Infirmary with reference to operations on tonsils and adenoids, and the Maternity and Child Welfare Committee an arrangement with the same Institution for the treatment of Ophthalmia Neonatorum.

Fever Hospital—The Corporation provides the Stoney Royd Fever Hospital which admits cases of Scarlet Fever, Diphtheria, Enteric and other fevers from Halifax, and from the areas of neighbouring Local Authorities. Accommodation for 52 cases.

Small Pox—The Halifax Corporation maintains the Small Pox Hospital at Belle Vue, Mount Tabor, which has accommodation for 36 patients. This hospital is subsidised by the Brighouse Joint Hospital Board and the Urban District Councils of Luddenden Foot, Midgley and Sowerby.

Venereal Diseases.—The Corporation has an arrangement with the Royal Halifax Infirmary for both out-patient and in-patient treatment. See page 57.

AMBULANCE FACILITIES:—

(a) *For Infectious Cases*—

The Corporation's Motor Ambulance Service, worked from Stoney Royd Hospital, serves Halifax and the other districts from which cases are admitted to the hospital.

(b) *For non-Infectious and Accident Cases*—

(1) The Corporation's Motor Ambulance Service, worked by the Fire Brigade (Tel. 3222).

(2) The Ambulance Service of the St. John Ambulance Brigade and British Red Cross Society.
Commandant—Mr. A. E. Rawbon (Tel. 61197).
Transport Officer—Mr. L. Chambers (Tel. 3831).

CLINICS AND TREATMENT CENTRES—

The following are all provided by the Halifax Corporation :

Maternity and Child Welfare Centres (2). See page 59.

School Clinic, Horton Street—

Medical Inspection—Two half-days per week.

Minor Ailments—Six half-days per week.

Dental—Treatment, six half-days per week. Inspection, one half-day per week.

Ophthalmic—Two half-days per week.

Remedial Exercises—5 full days.

An Orthopaedic Clinic is now in operation.

Tuberculosis Clinic, 8, Clare Road. See page 53.

Venereal Diseases Clinic, Royal Halifax Infirmary. See page 57.

Public Health Officers of the Corporation:—

These are set out in the introductory pages of the Report.

NURSING IN THE HOME—This is provided by :—

Halifax District Nursing Association.
Siddal Nursing Association.
Illingworth Nursing Association.
Luddenden Nursing Association.

General Nursing is not subsidised by the Local Authority.

MIDWIVES—See Maternity and Child Welfare Section, page 58.

CHEMICAL WORK—All chemical analyses are performed by Mr. H. T. Lea, M.Sc., the Borough Analyst. This work includes not only the analysis of samples taken under the Sale of Food and Drugs Acts (page 34), but also the examination of water from wells and other sources, which from time to time occupy the attention of the officers of the Health Department.

Legislation in Force.

List of Adoptive Acts, etc., Relating to Public Health in force in the District.

Public Health Acts Amendment Act, 1890.

Infectious Diseases (Prevention) Act, 1890.

A Local Act, 4 Geo. IV., cap XC.

Halifax Improvement Act, 1853.

Halifax Water and Gas Extension Act, 1876.

Halifax Corporation Acts, 1882, 1900, 1902, 1905, 1911, 1924, 1926.

Provisional Orders—Halifax Orders, 1851, 1881 and 1924.

Sanitary Circumstances

AND

Sanitary Inspection of the Area.

(including the Report of the Chief Sanitary Inspector).

Rivers and Streams.

The Borough Engineer (Mr. Tipple) kindly supplies the following information :—

Apart from the district of Northowram, where the sewerage falls to Brighouse and part of Warley draining to Luddenden, the whole of the sewerage of the Borough gravitates to the Sewage Works at Salterhebble, where the effluent is treated. No known pollution takes place. Surface water in isolated cases is taken direct to water courses.

The few cesspools which exist in outlying districts are by systematic inspection and periodic cleansing maintained in a satisfactory condition. No overflow to watercourses is permitted.

Storm water overflows to main sewers are regulated to the requirements of the Ministry of Health and periodically inspected and cleansed.

Sewerage.

The Borough Engineer (Mr. Tipple) kindly supplies the following information :—

The sewerage and drainage of the Borough are generally in a satisfactory condition, and adequate to deal with the maximum flow.

Extensions are rendered necessary from time to time in the outer districts where development is taking place on private building estates and Corporation Housing Schemes, and the Conversion scheme also calls for minor extensions or replacements of old and worn sewers. Under these needs may be mentioned Rosemary Lane, Whitegate Top, Siddal Lane Extension, Leeds Road, and a short length in Bradshaw Lane, and the sewers on the Corporation Housing Schemes at Bracewell Farm, Nursery Lane and Albert Road.

Relaying of the Ovenden main sewer between Dean Clough and Lee Bridge, commenced last year, is being carried in cast iron pipes laid in the bed of the Hebble Brook, passing under Dean Clough Mills, etc.

The Sewage Disposal Works, it is anticipated, will be adequate to deal with the whole of the effluent of the Borough for some time to come. In the light of recent research, modifications of the method of treatment may, however, be considered.

Closet Accommodation.

The Sanitary Inspectors have made 4,016 inspections in connection with the Conversions Scheme.

The number of closets converted during the year was as follows :—

Converted voluntarily by owners but assisted by grant	...	...	...	...	...	740
Converted compulsorily						
(a) by owners	...	...	...	...	...	1,562
(b) by the Corporation	...	...	...	...	...	324
Total conversions completed...						2,626

During previous years the numbers were as follows :—

Total conversions completed during	1926	...	2,652
do do do	1925	...	1,241
do do do	1924	...	395

so that the total number of conversions completed since the inception of the scheme is now 6,914, at a cost to the Corporation of £32,554.

The number of closets in the Borough as on December 31st, 1927, is as follows :—

Water closets	...	...	...	...	17,198
Privy middens in rural areas	...	...	...	...	221
Pail closets where water supply and sewers are available for conversions	...	...	...	...	9,858
Pail closets and privy middens in rural areas without a suitable water supply, or without sewers or both, approx.	...	...	...	...	2,000

Total ... 29,277

A total of 65 privy middens were dealt with during the year, 39 being converted to pail closets and 26 to water closets.

Public Conveniences.

A general scheme for the provision of additional public conveniences was under consideration at the year end.

Sanitary Defects.

The following Tables give details of the various sanitary defects remedied as a result of informal action, matters which were reported to the Health Committee for Statutory Action, and the various prosecutions necessary to enforce compliance with the Law.

A total of 550 visits were made to investigate complaints made to the Health Department, and appropriate action was taken in every case.

Details of sanitary defects remedied by owners or occupiers during the year, as a result of action by the Sanitary Inspectors :—

Choked yard drains cleared...	...	...	15
" gullies cleared	...	...	5
" interceptors cleared	...	...	11
" sewers cleared	...	...	18
" sink waste pipes cleared	...	...	12
" W.C. drains cleared...	...	...	37
" sink drains cleared	...	...	31
" street gullies cleared...	...	...	17
" area drains cleared	...	...	8
" fallpipe drains cleared	...	...	14

Defective W.C. cisterns repaired	...	...	12
„ drainage relaid	...	...	19
„ fallpipe drains repaired	...	...	17
„ sink drains repaired	...	...	72
„ W.C. drains repaired	...	...	40
„ cellar drains repaired	...	...	14
„ yard drains repaired	...	...	20
„ sink traps replaced	...	...	9
„ soilpipes repaired	...	...	6
„ gully drains repaired	...	...	9
„ connection of drain to sewer replaced	...	...	1
Sinks fitted with proper waste pipes...	...	...	8
Houses redrained	...	...	21
Insanitary W.C.'s replaced	...	...	16
Doors of closets repaired	...	...	38
Doors of ash tub places repaired	...	...	29
Floors of ash tub places repaired	...	...	5
Walls and woodwork of ash tub places repaired	...	...	9
Dilapidated closets repaired or rebuilt	...	...	40
„ ash tub places repaired or rebuilt	...	...	34
Privies converted to Goux closets	...	...	39
„ „ to W.C.'s...	...	...	26
Dangerous walls rebuilt or repaired...	...	...	10
Animals kept so as to be injurious to health :—			
Rabbits	...	...	3
Fowls	...	...	7
Horses	...	...	2
Pigs	...	...	5
Accumulation of manure removed	...	...	14
„ of rubbish removed	...	...	21
Dirty houses cleaned	...	...	16
Dirty yards cleared	...	...	8
Overcrowded houses dealt with	...	...	10
Cellar illegally let as dwellings	...	...	4
Flooded cellars remedied	...	...	35
Defective water services repaired	...	...	10
Damp walls remedied	...	...	79
Polluted water supply to houses	...	...	26
Insufficient water supply to houses...	...	...	67
Wash boilers provided	...	...	8
House roofs repaired	...	...	110
„ troughings repaired	...	...	114
„ floors repaired	...	...	81
„ windows repaired or replaced...	...	...	123
Defective stairs repaired	...	...	5
„ wash boilers repaired	...	...	5
„ walls and boarded round sinks	...	...	69
„ window cords replaced	...	...	79
Hand rails fixed	...	...	5
Sinks provided or old ones replaced...	...	...	100

Defective chimneys made good	...	...	27
" fallpipes made good	...	...	46
" cooking ranges made good	...	...	134
" flashings made good	...	...	3
" flagging made good	...	...	35
" plaster work made good	...	...	114
" doors repaired	...	...	44
" sink waste pipes remedied	...	...	14
" pump repaired	...	...	1
" pointing made good	...	...	5
" woodwork replaced	...	...	4
Untrapped street gullies replaced	...	...	7
Ashpits converted to A.T.P.'s	...	...	29
Nuisance from smoke remedied	...	...	3
Huts used as dwellings	...	...	2

Matters reported to the Health Committee for Statutory action were as follows :—

Housing Act 1925.

Defective houses	...	...	...	69
Closing orders	...	...	...	8
Failure to inscribe the name and address of the owner in the tenant's rent book	...	...	...	4

Public Health Act 1875.

Animals so kept as to be injurious to health	...	...	...	3
Black smoke	...	...	...	5
Houses so overcrowded as to be injurious to the health of the inmates	...	...	...	1
Defective drainage	...	...	...	3
Illegal letting of cellars as dwellings	...	...	...	1
Insufficient closet accommodation (houses affected)	...	...	...	27
Insanitary closet accommodation (privy middens)	...	...	...	25
Leakage of sewage from farm premises	...	...	...	1

Public Health Act 1875.

Public Health (Amendment) Act 1890.

Halifax Corporation Act 1905.

Defective combined drains	26
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Milk and Dairies Order 1926.

Cowkeeper not registered	1
Dairyman do	1

Halifax Corporation Act 1900, Section 121.

Opening and repairing drain without notice	1
--	-----	-----	-----	---

Halifax Corporation Act 1911.

Repairing drain other than in accordance with Byelaws	1
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Prosecutions during 1927.

Date	Act	Offence	Penalty
Jan. 25th	Hx. Corpora- tion Act	Failure to provide a proper and sufficient water supply to three dwellinghouses	Adjourned
Feb. 8th	do	do do do	Dismissed on payment of Analyst's fees and town's water provided to houses £12 12s. 0d.
Jan 28th	Meat Regula- tions	Failing to provide clean head covers when carrying meat	£3
" 28th	do	do do do	£5
" 28th	do	Carrying meat in an open vehicle without adequate covering	£2
May 10th	Public Health Act 1875	Six cases for selling unsound meat	£60
" 17th	Milk & Dairies Order	Producing milk under dirty conditions	£3
June 3rd	Shops Act	Breach of Closing Order	£1
" 3rd	Housing Act 1925	Failing to inscribe name and address of owner in tenant's rent book	£4
" 14th	Sale of Food & Drugs Act	Selling milk adulter- ated with 8.5% water	£10 & costs £1/11/6
Aug. 26th	Public Health Act 1875	Black smoke	£5 & costs 6/6
Dec. 30th	do do	Defective drainage	Costs £1/7/-
" 30th	Hx. Corpora- tion Act	Failure to give notice of intention to repair drain	Costs 10/-
	Hx. Corpora- tion Byelaws	Improper repair of drain	

Factories and Workshops.

Factory and Workshops Act 1901.

Public Health Acts (Amendment) Act 1890, Section 22.

Halifax Corporation Act 1900, Section 130.

Workshops.

The number of workshops (excluding bakehouses) on the register at the end of 1927 was 471.

411 visits were made to workshops and 60 to factories, and the various conditions necessitating action by the Inspectors are set out in the Table.

Nine notices under Section 5 of the Factory and Workshops Act 1901, were received from H.M. Factory Inspector, four being in respect of factories and five of workshops.

Of these the following were remedied during the year, including 3 factories carried over from the end of 1926:

Factories ...	7	Workshops ...	3
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Notices in respect of which no action by the Department was considered necessary:

Factories ...	Nil	Workshops ...	1
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Notices outstanding at the end of the year, 1.

The following Table shows the various defective conditions remedied during the year:—

The administration of the Factory and Workshop Act 1901,
in connection with

FACTORIES, WORKSHOPS AND WORKPLACES.

1. Inspection of Factories, Workshops and Workplaces.

Premises (1)	Number of		
	Inspections (2)	Written Notices. Informal (3)	Occupiers Prosecuted (4)
Factories ... (including Factory Laundries)	111	2	—
Workshops ... (including Factory Laundries)	446	15	—
Workplaces ... (Other than Outworkers Premises)	84	2	—
Total ...	641	19	—

2. Defects found in Factories, Workshops and Workplaces.

Particulars (1)	Number of Defects			Number of offences in respect to which Prosecutions were instituted (5)
	Found (2)	Remedied (3)	Referred to H.M. Inspector (4)	
Offences under the Public Health Acts—				
Want of cleanliness ...	7	7	...	...
Want of ventilation ...	1	1	...	...
Overcrowding ...	...	...	...	...
Want of drainage of floors ...	1	1	...	...
Other nuisances ...	9	9	...	...
Sanitary Accommodation:				
Insufficient, unsuitable, or defective ...	18	17	...	...
Not separate for sexes...	...	...	...	...
Offences under the Factory and Workshops Acts—				
Illegal occupation of underground bakehouse.. (S. 101)	1	1	...	...
Other offences ... (Excluding offences relating to out-work and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order 1921.)	5	4	2	...
Total ...	42	40	2	...

Bakehouses.

Factory and Workshops Act, 1901.

Ministry of Health Act, 1919.

S.R.O. 958 of 1926.

The number of bakehouses, including factories, on the Register is 116. In connection with these 282 visits were made, and the following defective conditions were discovered and remedied :—

Choked interceptor ...	...	...	...	1
Bakehouse used as sleeping room ...	...	...	...	1
Limewashing overdue (not carried out within the Statutory 6 months) ...	...	...	...	6

Dirty closet ...	...	...	...	...	1
Defective ceiling	...	...	...	...	1
Without Abstract	...	...	...	...	1

Sanitary Condition of Places of Public Amusement and Refreshment.

Ministry of Health Circular 120 of 1920.

All the Theatres, Cinema Theatres, Cafes, Dance Halls, etc., were inspected during the year, and except for one case of insufficient or unsuitable sanitary accommodation which was under action at the year end, they were found to be generally satisfactory.

A large amount of work was carried out on behalf of the Licensing Bench in connection with applications for Stage Play Licenses.

The following Table shows the number of visits made to such premises :—

Theatres	...	...	...	15
Cinema Theatres	...	...	...	47
Dance Halls	...	...	...	21
Markets	...	...	...	30
Public Houses, Clubs, etc. (for Stage Play Licenses)...	...	...	...	38
Total				151

Local Authorities need direct powers to deal with the sanitary conditions of offices, and any buildings used for meetings or as places of public amusement.

Smoke Prevention.

Boiler Smoke.

Sixty-two formal observations of thirty minutes duration have been taken of the various chimneys in connection with steam boilers, and the average emission of black smoke was 1.6 minutes in thirty.

Five Statutory Notices were served by order of the Health Committee and proceedings were instituted in one case, resulting in a penalty of £5 and 6s. 6d. costs, and an order to abate.

Shop Inspection, etc.

Mr. Fearnley, the Inspector under the Shops Acts 1912 to 1921, also under the Children's Byelaws, the Fabrics (Misdescription) Act, and the Rats and Mice (Destruction) Act 1919, has carried out the following work :—

Half-holiday Closing Visits	...	...	800
Assistants' Half-holiday Visits	...	...	558
Children's Bye-Law	..	...	713
Registration & Administrative Visits	...	...	616
Special	..	...	264
Fabrics (Misdescription) Act	..	...	268
Shops Early Closing	..	...	534
Rats and Mice (Destruction) Act Visits	...	...	568
Shops without Assistants Half-holiday Notice (Sec. 1)			46
Do. Young Persons'	..	(Sec. 2)	26
Do. Mixed Business	..	(Sec. 10)	198
Do. Half-holiday Closing Notice		(Sec. 4)	98
Do. Seats for Female Assistants		(Sec. 3)	3
Contravention of Mealtimes		(Sec. 1, Sub. 5)	8
Do. Assistants Half-holiday		(Sec. 1, Sub. 1)	42
Do. Half-holiday Closing		(Sec. 4)	379
Do. Early Closing Act or Orders		(Sec. 5)	200
Do. Young Persons' Hours		(1920 21 Act) (Sec. 2)	4
Do. Children's Bye-Laws	...	...	40
Warning Notices sent	...	...	21

Prosecutions.

At the Borough Court on Friday, 3rd June, 1927, a local butcher was fined £1 for keeping his shop open and serving a customer at 8-30 p.m. on Saturday, the 23rd April, 1927. He should have closed at 8 p.m. (Butchers' Closing Order).

Rats and Mice (Destruction) Act, 1919.

Number of premises that are or have been rat-infested during the year	...	...	...	121
Premises temporarily clear after Rat Week...	...	...	...	34
Premises where numbers were reduced	...	...	...	54
Premises at present rat-infested	...	...	...	71
Visits paid to rat-infested premises in Rat Week	...	...	...	184
Visits paid to rat-infested premises during the year...	...	...	...	568
Number of rat tails brought to the Health Department during the year	...	...	...	1,121
Number of rat tails brought to the Health Department during Rat Week	...	...	...	268
Number of rats killed in addition	...	...	...	288

The year under review has been a record one for the number of rats killed, 80 more rat tails being brought to the Health Department during Rat Week, than in the corresponding week the previous year, and 211 more in the whole year than in 1926. In addition to those counted

there are many slain by poison or virus and even by gun and trap, and these can only be estimated. The increased number killed is evidence of greater keenness to clear out the vermin.

There is an increase in the number of small premises infested, but in many of them the rats are only seen for two or three weeks during the spring and autumn ; greater care to ensure that all food containers are rat proof would soon end these periodic visits.

Housing.

The present procedure is to concentrate on blocks of property which are obviously in need of repair, and after inspection, the owner is supplied with a complete specification of the works required together with a letter requesting attention. Later on the Inspector meets his architect, surveyor or contractor, and it is decided how to carry out the work. The original inspection is but the beginning, and an enormous amount of work is involved in the supervision of the repairs.

Housing Statistics for the year 1927.

Number of new houses erected during the year :—

(a) Total (including numbers given separately under (b)	502
(b) With State Assistance under the Housing Acts :—	
(i) By the Local Authority	258
(ii) By other bodies or persons	204

The above figures were kindly supplied by the Borough Engineer.

UNFIT DWELLING HOUSES.

1.—Inspection.

1. Total number of dwellinghouses inspected for housing defects (under the Public Health or Housing Acts)	1,252
2. Number of dwellinghouses which were inspected and recorded under the Housing Consolidated Regulations 1925	255

3. Number of dwellinghouses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	...	...	...	...	8
4. Number of dwellinghouses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	...	...	...	...	1,079
2.—Remedy of defects without service of formal notices.					
Number of defective dwellinghouses rendered fit in consequence of informal action by the Local Authority or their officers	...	...	...	...	912
3.—Action under Statutory Powers.					
A. Proceedings under Section 3 of the Housing Act 1925.					
1. Number of dwellinghouses in respect of which notices were served requiring repairs	...	...	...	...	69
2. Number of dwellinghouses which were rendered fit after service of formal notices	...	...	...	...	58
3. Number of dwellinghouses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close	...	...	...	...	None
B. Proceedings under Public Health Acts.					
1. Number of dwellinghouses in respect of which notices were served requiring defects to be remedied...					57
2. Number of dwellinghouses in which defects were remedied after service of formal notices—					
(a) by owners	...	...	...	...	58
(b) by Local Authority in default of owners	...	...	...	...	None
C. Proceedings under Section 11, 14 and 15 of the Housing Act 1925.					
1. Number of representations made with a view to the making of Closing Orders	...	...	...	...	8

2. Number of dwellinghouses in respect of which Closing Orders were made	8
3. Number of dwellinghouses in respect of which Closing Orders were determined, the dwellinghouses having been rendered fit	None
4. Number of dwellinghouses in respect of which Demolition Orders were made	None
5. Number of dwellinghouses demolished in pursuance of Demolition Orders	None

Houses Let in Lodgings (Furnished Rooms).

377 visits have been made to 205 "Furnished Rooms," most of which are now beyond the scope of the Byelaws, now practically useless, owing to the fact that the rentals exceed the 6s. per week specified. This being the case, the Public Health Act 1875, has been used so far as overcrowding and dirty conditions are concerned, and Section 3 of the Housing Act 1925, for structural conditions generally.

The following Table shows the conditions dealt with in such premises during the year :—

Overcrowding	1
Defective cooking range	6
Dogs kept in rooms	1
Choked drainage	2
Defective plasterwork... ..	15
" roof	3
" windows	13
" floorboards	2
" closet	1
" flagging	3
" floors	5
" fixtures	5
" doors	8
Sinks provided or replaced	32
Ashpits disposed of	1

Common Lodging Houses.

There are still 10 Common Lodging Houses registered to accommodate 602 lodgers and these are supervised by the police. 70 visits have been made to them by the Sanitary Inspectors in connection with the efforts of the Department to guard against the dangers of unnotified cases of small-pox.

Tents, Van-Dwellings, etc.

A total of 59 visits have been made to moveable dwellings, and in one case lack of sanitary accommodation was discovered and dealt with.

The van dwellings visiting the town in connection with the seasonal fairs maintained their excellent record.

Inspection and Supervision of Food.

*(Compiled from reports of the Veterinary Inspector and
the Chief Sanitary Inspector).*

Milk Supply.

At the end of the year there were on the Register :

Cowkeepers	...	...	...	68
Cowkeepers and Dairymen	...	...	...	67

Milk and Dairies (Amendment) Act 1922 (Registration).

Under Section 2 of the Milk and Dairies (Amendment) Act 1922, nine retailers were invited to appear before the Health Committee to show cause why their names should not be removed from the Register. Two complied with the requirements specified on notice before the monthly meeting of the Committee at which they should have appeared. With the exception of two all have complied with the requirements of the Committee.

Bacteriological Examination of Samples.

Total number of samples taken for bacteriological examination as an index of general cleanliness	...	90
Number of samples taken within the Borough	...	52
Number of samples taken supplied outside Borough...	...	17
Number of Graded Milk samples	...	21
Number of samples taken supplied outside Borough up to a clean standard	...	3
Number of samples taken from sources outside the Borough for the detection of tubercle bacilli	...	5
Number of samples from sources outside the Borough containing tubercle bacilli	...	0

The bacteriological counts of samples of (ungraded) milks taken during the year have ranged :—

From		To	
No. of Bacteria per c.c.	Coli Organisms per c.c.	No. of Bacteria per c.c.	Coli Organisms per c.c.
2,650	absent from 1 c.c.	13,100,000	present in 1/1000 c.c.

The worst was from a source outside the Borough.

Interest has been taken to reduce high bacterial counts from sources within or outside the Borough where the producer has been willing to accept advice and help as the undermentioned Table will illustrate :—

Before		After	
No. of Bacteria per c.c.	Coli Organisms per c.c.	No. of Bacteria per c.c.	Coli Organisms per c.c.
3,520,000	+ 1/10,000	11,033	— 1/100 c.c.
1,270,000	+ 1/100	20,000	— 1 c.c.
1,150,000	+ 1/1,000	31,000	+ 1/10 c.c.
110,000	+ 1/1,000	6,700	— 1 c.c.

Milk and Dairies Order 1926.

Much work has been done under this Order in the provision of a number of dairies—46 having been erected or adapted.

In spite of opposition these have been acknowledged to be of great advantage. This leaves a number still to comply.

Statutory Notices Article 12 (1).

7 Notices were served on occupiers of cowsheds for the provision of more window space. In one case the tenancy has been discontinued.

Water Supply to Farms.

Town's water has been conveyed to some of the outer districts, which has been taken advantage of by a number of farmers, thus providing an important essential for the production of clean milk.

The following alterations were carried out :—

Alterations to cowsheds for light	...	4
Alterations to cowsheds for floors	...	2
Partitioning middenstead Art. 22 (4)	...	1
Number of dairy cows examined	...	2,640

Proceedings were instituted under the Milk and Dairies' Order 1926, during the year as follows :—

- (1) Failing to remove all dirt in or around flanks, udders and teats prior to milking—Dismissed.
- (2) Failing to keep milk stools clean—Penalty £1.
- (3) Failing to keep clothing clean—Penalty £1.
- (4) Failing to remove milk from cowshed or use covered receptacle—Penalty £1.

Dairymen (not cowkeepers). These are supervised by the Sanitary Inspectors.

There are 72 persons whose premises are registered as Dairies, and 105 who are registered for the sale of only bottled sterilised milk under seal in which case registration of *premises* is not required.

198 visits were made to Dairies (in addition to the work of the Veterinary Inspector described above).

Milk (Special Designations) Order, 1923.

There are within the Borough two producer-retailers of graded milks, one producing Certified Milk and the other Grade A. In addition a producer of Certified Milk outside the Borough has several agents within the Borough.

Tuberculosis Order—Diseases of Animals Acts.

Number of Reports	...	...	22
Number of Reports confirmed	...	...	12
Tuberculosis of the Udder	...	...	5
Bacteriological examinations of Milk	...	...	25
Number reported positive	...	...	3
Cattle examined under the Order	...	...	224

Meat Inspection.

Public Abattoir.—The reconstruction has reached such a stage, that while the new part has not been officially opened, some sections are actually in use.

Private Slaughterhouses.

Registered	...	5
Licensed	...	—
		5

The approximate number of animals slaughtered therein during the year is as follows :—

Cattle.	Calves.	Sheep and Lambs.	Pigs.
291	38	900	200

Meat Inspection, etc.

The following Table shows the number of visits paid to the slaughterhouses, butchers' shops, markets, etc. :—

Description of Premises				Number of Visits
Public Slaughterhouses	...	...	...	907
Private Slaughterhouses	...	...	...	102
Borough Market	...	...	...	376
Wholesale Market	...	...	...	307
Fasting Sheds...	...	...	...	101
Potted Meat Houses	...	...	...	301
Tripe Boiling Houses	...	...	...	191
Butchers' Shops	...	...	...	1647
Cowsheds	...	...	...	758
Dairies	...	...	...	70
Other Visits	...	...	...	392
Total				5,152

The following Table shows the number of animals slaughtered during the year, the number condemned, and the total weight of the same :—

	Cattle.	Calves.	Sheep and Lambs.	Pigs.	Offals.	Total.
Number of Animals slaughtered at the public slaughter- house ... }	9305	2153	24146	5417	lbs. ...	41021
Do. condemned..	54	12	20	37	...	123
Number Condemned on account of Tuberculosis ... }	51	1	...	23	5995	75
Apx. Weight of those condemned in lbs }	30570	1085	1130	3481	7528	43794

The following Table shows the total Approximate weight of meat and offals destroyed on account of tuberculosis, and from other causes :—

Total Amount of Meat Destroyed	lbs. 42656
Total Amount of Offals Destroyed	7528
Total Amount of Meat Destroyed on account of Tuberculosis	36835
Total Amount of Offals Destroyed on account of Tuberculosis	5995
Total Amount of Meat Destroyed from other causes	5821
Total Amount of Offals Destroyed from other causes	1533
Total Meat and Offals Destroyed ...	50184

Condemned meat is dealt with by the Cleansing Department of the Corporation, being removed to the Charles-town Depot and sterilised by heat.

Kinds of Food Destroyed	Quantity in lbs.
54 Carcases of Beef	30570
Beef not in Carcase	5948
12 Carcases of Veal	1085
20 Carcases of Mutton and Lamb	1130
Chilled and Frozen Beef	750
37 Carcases of Pork	3481
Pork not in Carcase	442
187 Rabbits	380
Fish	91
Fruit and Vegetables	4492
Canned Provisions	249
Shell Fish	1744
201 Eggs... ..	15
Total Weight ...	50377

In 2 cases a Justices' Order had to be obtained, but in all the rest the articles were surrendered.

Public Health (Meat) Regulations 1924.

Proceedings were instituted under these Regulations during the year as follows :—

Not wearing clean and washable head covering.

Penalty £3 and costs.

Not wearing clean and washable head covering.

Penalty £5 and costs.

Conveying meat in an unclean open vehicle.

Penalty £2 and costs.

Six summonses under the *Public Health Act*, 1875 :—

Offering for sale unsound meat.

Penalty £10 and costs in each case.

Sale of Food and Drugs Acts, 1875 to 1927.

The Sale of Milk Regulations 1901 and 1912.

The Public Health (Regulations as to Food) Act 1907.

The Public Health (Milk and Cream) Regulations 1912 and 1917.

The Public Health (Condensed Milk) Regulations 1923.

The Public Health (Dried Milk) Regulations 1923.

Fertilisers and Feeding Stuffs Act 1906.

Rag Flock Act 1911.

Milk.

The 132 milk samples taken during the year from 78 retailers, have contained, on an average, 3.73 per cent. of fat and 9.06 per cent. of solids other than fat, the minimum for each being 3 per cent. and 8.5 per cent. respectively.

The following Tables give particulars as to the food-stuffs sampled with details relating to samples found to be adulterated :—

The following Table gives particulars of the various samples taken :—

Article	Number of Samples Procured			Number not Genuine			Number of Prosecutions	Amount of Fines imposed
	Formal	Informal	Total	Formal	Informal	Total		
New Milk ...	132	0	132	4	0	4	1	Sample No. 80 Fined £10 and £1 11s. 6d. costs
Condensed Milk ...	0	12	12	0	0	0	0	
Cream (Preserved) ...	1	9	10	1	1	2	0	
Scotch Whisky ...	2	5	7	0	1	1	0	
Beer ...	0	6	6	0	0	0	0	
Olive Oil ...	0	12	12	0	0	0	0	
Rum and Coffee ...	0	1	1	0	0	0	0	
Salmon Paste ...	0	1	1	0	0	0	0	
Corn Flour ...	0	4	4	0	0	0	0	
Margarine ...	1	8	9	0	0	0	0	
Sausage ...	6	5	11	1	1	2	1	Sample No. 246 Fined £2 and £1 8s. 0d. costs
Jam ...	0	6	6	0	0	0	0	
Liquorice Powder ...	0	3	3	0	0	0	0	
Epsom Salts ...	0	3	3	0	0	0	0	
Vinegar ...	0	7	7	0	0	0	0	
Lard ...	0	8	8	0	0	0	0	
Sponge Buns ...	0	4	4	0	0	0	0	
Slab Cake ...	0	2	2	0	0	0	0	
Dried Fruits ...	0	6	6	0	0	0	0	
White Pepper ...	0	3	3	0	0	0	0	
Ground Cinnamon ...	0	2	2	0	0	0	0	0
Ground Nutmeg ...	0	2	2	0	0	0	0	0
Seidlitz Powders ...	0	4	4	0	0	0	0	0
Butter ...	0	4	4	0	0	0	0	0
Total ...	142	117	259	6	3	9	2	

Adulterated Samples.

Serial Number	Article	Whether Formal or Informal	Nature of Adulteration	Observations
3	Scotch Whisky	Informal	Reduced to more than 35 U.P.	Two formal samples found to be genuine
126	Preserv'd Cream	"	Excess of preservative	Letter from Town Clerk asking for explanation. Letter of explanation accepted by Health Committee
129	"	Formal	"	
80	New Milk	"	8.5 % added water	Fined £10 and £11s. 6d. costs
110	"	"	3 % Fat abstracted	No action, later sample found genuine
161	"	"	3 % added water	See Sample No. 238
238	"	"	7.6 % added water	Milk purchased outside the Borough from the same farm as No. 161. Farmer was prosecuted in the West Riding Court and fined £12 and £11s. 6d. costs, an "on delivery" sample being found to contain more than .17 % added water. This milk was coming into Halifax
241	Pork Sausage	Informal	contained 0.25 % boric preservative	
246	"	Formal	contained 0.15 % boric preservative	Fined £2 and £18s. 0d. costs

Borough Analyst's Commentary.

Mr. H. T. Lea, M.Sc., F.I.C., the Borough Analyst, supplies the following notes on the samples taken:—

The 131 samples of milk submitted for examination had an average fat content of 3.73% and an average non fatty solids content of 9.06%. Only 4 samples fell below the minimum standard of 3.0% fat and 8.5% non fatty solids fixed by the Sale of Milk Regulations. The agitation, in certain parts of the country, for a modification of the milk standard, or a new system of milk control, viewed in the light of the above figures, seems to be totally unnecessary. The present standard was fixed by the Board, now Ministry, of Agriculture and Fisheries in 1901—one wonders what standard would be fixed by the Ministry of Health in 1928—a higher one without doubt.

These results show that the milk of Halifax compares very favourably in quality with that of other towns. The public however, require not only milk of good quality, but milk that has been produced under good hygienic conditions. Milk which has been passed through an efficient sieve or filter has only an apparent cleanliness—the true test of clean production is a bacteriological examination.

Exclusive of milks, 57 samples submitted for analysis were tested for preservatives under the Preservative Regulations. Boric acid was present in 4 butters, 10 creams and 3 sausages. The Preservative Regulations with respect to prohibition of boric acid in butter and cream only came into force on January 1st, 1928, so no action could be taken. In one case, a sample of cream contained an excessive amount of boric acid; the vendors, who were merely retailers, were cautioned. In the case of the preserved sausage, proceedings were instituted, and the maker, who was adding sausage meal containing boric acid to the meat during the manufacture, was fined two pounds at the Halifax Borough Court.

A sample of 'Rum and Coffee' was examined and found to contain one-and-a-half per cent. only of Proof Spirit, together with extract of coffee and chicory, sugar and synthetic rum essence. This is surely a flagrant case of misdescription where the purchaser is getting, not what he wants, but a useless substitute—yet as the Food Laws stand at present, it would be a matter of some difficulty for any authority to prevent the sale of this commodity.

With the exception of one informal sample of Scotch Whiskey, which had been watered, all remaining samples were satisfactory.

Fertiliser and Feeding Stuffs Act 1906.

Twelve samples were taken during the year, eight of Fertilisers and four of Feeding Stuffs.

In an informal sample of Bone Meal (No. 24) the nitrogen content was lower than that of genuine Bone meal and also lower than that guaranteed. A formal sample (No. 25) was found to be deficient in nitrogen to the extent of over 50%. A letter was sent to the firm concerned asking for an explanation, a reply was duly received and accepted by the Health Committee.

Rag Flock Act, 1911.

Three informal samples were taken during the year, two of these contained 40 parts per million of chlorine, this being 10 parts per million above the maximum allowed by the Act. Letters were sent to the firms concerned and no further action was taken.

Report of Administration in connection with the Public Health (Milk and Cream) Regulations 1912 and 1917, during the year ended 31st December, 1927.

1.—Milk and Cream not sold as Preserved Cream.

	(a) No. of Samples examined for the presence of a preservative	(b) No. in which preservative was reported to be present, and percentage of preservative found in each sample
Milk	131	Nil
Cream	Nil	Nil
Condensed Milk..	12	Nil

2.—Cream sold as Preserved Cream.

(a) Instances in which samples have been submitted for analysis to ascertain if the statements on the label as to preservatives were correct 10

(1) Correct Statements made 8

(2) Statements incorrect 2

Percentage of preservative found in each sample				Percentage stated on Statutory Label	
No. of Sample...	123	0'29		0'4	
"	... 124	0'29		0'4	
"	... 125	0'26		0'4	
"	... 126	0'77		0'4	
"	... 127	0'39		0'4	
"	... 128	0'27		0'4	
"	... 129	0'56		0'4	
"	... 153	0'36		0'4	
"	... 154	0'15		0'4	
"	... 155	0'32		0'4	

(b) Determination made of Milk-Fat in cream sold as preserved cream :—

- | | | | | |
|------------------------|-----|-----|-----|-----|
| (1) Above 35 per cent. | ... | ... | ... | 10 |
| (2) Below 35 per cent. | ... | ... | ... | Nil |

(c) Instances where (apart from analysis) the requirements as to labelling or declaration of preserved cream in Article V. (1) and the proviso in Article V. (2) of the Regulations have not been observed ... Nil

(d) Particulars of each case in which the Regulations have not been complied with, and action taken :—

Sample 126 was informal and Sample 129 was formal, both from the same firm. A letter was sent to the firm concerned asking for an explanation, this was duly received and accepted by the Health Committee.

3.—Thickening substance—None detected.

The cafes and restaurants were all visited and the requisite Notices found posted up in accordance with the Act.

Fish Friers.

There are about 173 fish friers in the town, and 110 visits were made to their premises during the year.

Owing to the dirty conditions discovered in a few cases, the inspection of fried fish shops now is being pressed and the occupiers of such premises will, in many cases be asked to improve their methods.

Manufacture and Sale of Ice Cream.

Public Health Act 1875, and Halifax Corporation Act and Regulations made thereunder.

151 visits of inspection were made to 149 premises used for the sale or manufacture of ice cream.

In two cases the vendors were warned to stop making the commodity on account of unsuitability of premises.

The Halifax Corporation Act of 1926, which requires the owners or occupiers of premises used for the sale or manufacture of ice cream to register them with the Local Authority, should be of assistance to the Department, but it is a matter of regret that the Act did not give power to refuse registration.

Prevalence of, and Control over, Infectious Diseases.

Notifiable Diseases during the year.

DISEASE	AGE PERIODS												Total	Cases admitted to Hospitals
	Under 1	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45	45-65	65 and upwards		
Small Pox...	—	—	—	—	1	1	1	3	1	1	4	—	12	10
Deaths...	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Typhoid Fever	—	—	—	—	—	—	—	—	2	2	1	—	5	3
Deaths	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	1	—	7	13	13	93	29	16	13	3	4	—	192	155
Deaths...	—	—	—	—	—	2	14	8	8	—	2	—	2	80
Diphtheria...	2	2	4	2	7	34	3	—	—	—	—	—	83	80
Deaths...	—	1	—	1	3	3	—	—	—	—	—	—	8	—
Puerperal Fever	—	—	—	—	—	—	—	—	1	—	—	—	1	—
Deaths...	—	—	—	—	—	—	—	—	1	—	—	—	1	—
Puerperal Pyrexia	—	—	—	—	—	—	—	—	9	—	—	—	9	5
Deaths...	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas...	—	—	—	—	—	—	—	4	8	8	19	4	43	6
Deaths...	—	—	—	—	—	—	—	—	—	—	—	1	1	6
Ophthalmia Neonatorum...	11	—	—	—	—	—	—	—	—	—	—	—	11	—
Deaths...	1	—	—	—	—	—	—	—	—	—	—	—	1	—
Encephalitis Lethargica...	—	—	—	1	—	—	—	—	1	—	1	—	3	1
Deaths...	—	—	—	1	—	—	—	—	1	—	1	—	3	—
Acute Polio Encephalitis...	—	—	—	—	—	—	—	—	—	—	—	1	1	1
Deaths...	1	—	—	—	—	—	—	—	—	—	—	1	2	—
Acute Polio Myelitis	—	—	—	1	—	—	—	—	—	—	—	—	1	—
Deaths...	1	—	—	—	—	—	—	—	—	—	—	—	1	—
Cerebro Spinal Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Deaths...	—	1	—	—	—	—	—	—	—	1	—	—	2	—
Pneumonia—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Influenzal	—	—	1	1	—	2	1	4	9	8	3	4	33	—
Deaths...	2	2	1	2	—	—	—	—	2	7	11	5	32	3
Primary...	2	1	2	1	2	11	4	5	16	6	20	2	72	—
Deaths...	1	—	1	1	1	2	—	2	4	8	13	5	38	—
Tuberculosis—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Respiratory	—	—	—	1	—	8	8	17	66	25	25	3	153	99
Deaths...	1	—	—	1	—	1	2	6	28	12	19	6	76	—
Other Forms	—	2	1	3	3	11	9	3	3	3	1	2	41	9
Deaths...	—	2	3	1	1	4	3	1	3	—	1	1	20	—
Total Notification	16	5	15	23	26	160	66	60	137	56	80	16	660	378
Total Deaths	7	6	5	7	5	12	5	9	39	28	45	19	187	—

For notes on these figures see following pages.

Section	Sub-section	Area (Acres)	Value (\$)	Notes
1	1.1	100	100	
2	2.1	200	200	
3	3.1	300	300	
4	4.1	400	400	
5	5.1	500	500	
6	6.1	600	600	
7	7.1	700	700	
8	8.1	800	800	
9	9.1	900	900	
10	10.1	1000	1000	
11	11.1	1100	1100	
12	12.1	1200	1200	
13	13.1	1300	1300	
14	14.1	1400	1400	
15	15.1	1500	1500	
16	16.1	1600	1600	
17	17.1	1700	1700	
18	18.1	1800	1800	
19	19.1	1900	1900	
20	20.1	2000	2000	
21	21.1	2100	2100	
22	22.1	2200	2200	
23	23.1	2300	2300	
24	24.1	2400	2400	
25	25.1	2500	2500	
26	26.1	2600	2600	
27	27.1	2700	2700	
28	28.1	2800	2800	
29	29.1	2900	2900	
30	30.1	3000	3000	
31	31.1	3100	3100	
32	32.1	3200	3200	
33	33.1	3300	3300	
34	34.1	3400	3400	
35	35.1	3500	3500	
36	36.1	3600	3600	
37	37.1	3700	3700	
38	38.1	3800	3800	
39	39.1	3900	3900	
40	40.1	4000	4000	
41	41.1	4100	4100	
42	42.1	4200	4200	
43	43.1	4300	4300	
44	44.1	4400	4400	
45	45.1	4500	4500	
46	46.1	4600	4600	
47	47.1	4700	4700	
48	48.1	4800	4800	
49	49.1	4900	4900	
50	50.1	5000	5000	
51	51.1	5100	5100	
52	52.1	5200	5200	
53	53.1	5300	5300	
54	54.1	5400	5400	
55	55.1	5500	5500	
56	56.1	5600	5600	
57	57.1	5700	5700	
58	58.1	5800	5800	
59	59.1	5900	5900	
60	60.1	6000	6000	
61	61.1	6100	6100	
62	62.1	6200	6200	
63	63.1	6300	6300	
64	64.1	6400	6400	
65	65.1	6500	6500	
66	66.1	6600	6600	
67	67.1	6700	6700	
68	68.1	6800	6800	
69	69.1	6900	6900	
70	70.1	7000	7000	
71	71.1	7100	7100	
72	72.1	7200	7200	
73	73.1	7300	7300	
74	74.1	7400	7400	
75	75.1	7500	7500	
76	76.1	7600	7600	
77	77.1	7700	7700	
78	78.1	7800	7800	
79	79.1	7900	7900	
80	80.1	8000	8000	
81	81.1	8100	8100	
82	82.1	8200	8200	
83	83.1	8300	8300	
84	84.1	8400	8400	
85	85.1	8500	8500	
86	86.1	8600	8600	
87	87.1	8700	8700	
88	88.1	8800	8800	
89	89.1	8900	8900	
90	90.1	9000	9000	
91	91.1	9100	9100	
92	92.1	9200	9200	
93	93.1	9300	9300	
94	94.1	9400	9400	
95	95.1	9500	9500	
96	96.1	9600	9600	
97	97.1	9700	9700	
98	98.1	9800	9800	
99	99.1	9900	9900	
100	100.1	10000	10000	

Enteric (Typhoid) Fever.

Five cases were notified, but of these two were not suffering from this illness at all. Of the other three, one was a mild case of paratyphoid B. The other two were serious cases, one paratyphoid B and the other typhoid. Both recovered. There was no relationship between the occurrences, so far as could be discovered, and in no case was the origin found out.

Smallpox.

Three district invasions of the town by small-pox occurred. The first occurred at Wheatley in April, and was undoubtedly due to infection received by one of the patients when visiting Wyke, at a time when several other people in that district were infected.

The first patient, on becoming ill infected the second, both in the same house. They were both vaccinated persons, but vaccination had taken place 46 to 48 years previously, and its effects were wearing off, but it was still effective enough to make the illness so slight as to be difficult to recognise. Fortunately they were kept at home and the only people infected were unvaccinated relatives in two houses. It was only when these new cases occurred that a name was put to the disease and the facts reported to the Health Department. Prompt measures were taken, chief among them being the immediate vaccination of a large number of contacts, and the disease never spread beyond the three houses originally infected. The first two cases were already clear when reported, but the others, three in number, were removed to the Small-Pox Hospital. One child not suffering was vaccinated and sent into the Small-Pox Hospital with its mother, and it took no harm.

The next outbreak was in the Claremount district, when six people in one house were discovered to be infected. Only two of them were vaccinated persons, and these had been vaccinated as long as 35 and 46 years previously, yet their illnesses were trivial. The unvaccinated ones had more profuse rashes and one was seriously ill. All recovered. The usual routine of removal to hospital, disinfection of belongings and vaccination of contacts was undertaken and provided heavy work for several members of the staff. There was no further spread. The first of these cases had undoubtedly been infected in the adjacent district of Queensbury, where a number of people were suffering from an illness not, up till then, recognised. Your Medical Officer was able to be of service by visiting the Queensbury district (and also Shelf) and satisfying

the authorities there that small-pox was at large in the districts. Fortunately the officers concerned, on becoming aware of the state of things, acted promptly and efficiently, and it is to their credit that they were able to suppress what at one time seemed likely to be a very widespread outbreak, but not before a numerous collection of cases had been dealt with.

The third outbreak in Halifax, in November, consisted of one case only; an unvaccinated girl who had almost certainly been infected in Queensbury. Her doctor recognised the disease promptly and she was got away in an early stage of the illness. This girl worked in a Halifax factory among many others, and the employers wisely helped in persuading the girls to be vaccinated, and gave the authorities every facility for carrying out the work of prevention, and acknowledgments are due to them. There was no spread. These outbreaks placed a large amount of work on the staff of the Department, but the results made it worth while.

Owing to the general neglect of vaccination in the community in recent times, small-pox has come to stay, and for the last few years it has been widespread in the country, as was predicted by those who were in a position to judge. The only fortunate thing about it is that the type most common *at present* is a mild form of small-pox which rarely kills, though it sometimes disfigures, and is usually repulsive. Some of the outbreaks about the country, however, having been spread from Oriental or African sources, have been of the more serious variety, and the ratio of deaths to cases in these outbreaks has been a tragic feature.

There are many people who, without having had any experience on which to form an opinion (or in spite of such experience), lose no opportunity of proclaiming to the public that they "do not believe in vaccination." It does not really matter what they believe, because ascertained facts are available.

Your Medical Officer, whose duty it is to advise the Council on these matters, advises as follows:—

- (a) That vaccination protects against small-pox.
- (b) That vaccination, followed by re-vaccination at intervals through life, can and does abolish all risk of contracting small-pox.
- (c) That sanitation, however good, will not prevent small-pox, and that small-pox is not limited to the poor and badly-housed, but invades all classes of homes.

- (d) That other measures adopted by Health Authorities to limit outbreaks of small-pox (such as isolation, disinfection, etc.) would by themselves be futile, since without vaccination those called upon to do the work and to look after the sufferers would themselves contract small-pox, and pass it on to their attendants, and so on. In practice, those doing this work do not contract small-pox, being well vaccinated.
- (e) That it is open to everyone to choose whether he will have small-pox or not, and it is therefore unfair that the vaccinated ratepayer should have to share the heavy cost of the hospital treatment of the unvaccinated, in addition to the loss of trade which results when small-pox breaks out.

Public Health (Small-Pox Prevention) Regulations, 1917.

No vaccinations were carried out by the Medical Officer of Health under these regulations, the Public Vaccinators working in prompt and cordial co-operation with the Department so as to render the other course unnecessary.

Scarlet Fever.

With 192 cases, the year was a "medium" one for scarlet fever. The cases were fairly evenly distributed over the town and throughout the year, with a somewhat special incidence in September and October. A succession of cases over a period in the Northowram district required much special investigation, and ultimately cleared up. There was a tendency for the cases to assume the old fashioned severe type, but this has now largely lost its terrors owing to the very valuable curative agent to be referred to later. There were two deaths. One was a child already dangerously ill with another disorder when the scarlet rash appeared, and he can hardly be said to have died from scarlet fever. The other was a case of sufficient rarity to merit remark. A five year old girl was taken ill with diarrhoea and vomiting one afternoon and within a few hours was collapsed and unconscious. She died next morning. An inquest was held but was adjourned until bacteriological and chemical examinations were made, in search of bacterial or other poisons. None were found. In the meantime the girl's brother developed scarlet fever, and the Medical Officer of Health suggested that the fatal case had probably been what is known as acute toxic scarlet fever of fulminating type—an illness referred to in the text books but fortunately rarely seen. In this type of illness the poisoning is so intense that the patient may die before the rash appears, and indeed, in this case there

was nothing to indicate the nature of the illness until the brother became ill with an ordinary sort of scarlet fever, and even then indisputable proof was lacking. The circumstances, however, were such that the doctor who was investigating the case felt justified in adopting the theory and the Coroner accepted the suggestion.

The case is dealt with at some length because of its rarity and because a similar case occurred later—this time fortunately diagnosable by a brilliant rash—and was cured by a modern form of treatment. During the last year or two there has been in use at the Fever Hospital a serum for scarlet fever, similar to that used for diphtheria, but prepared from the serum of animals immunised against bad forms of scarlet fever. The results have been truly remarkable, for severe cases have usually cleared up in a few days, and the rather heavy cost of the treatment has been recovered by the avoidance of the prolonged stays in hospital which would otherwise have been expected. In the case in question a child was taken ill with a very acute attack of scarlet fever, with rash; the illness was so severe that within 24 hours of the first symptom the child was collapsed and seemed likely to die quickly. The parents did not agree to removal to hospital, so the Medical Officer of Health, who had been called in, provided the family doctor with some of the serum for use. The results exceeded all expectations and the child made a rapid and complete recovery. The credit for such results must be given to those who are engaged in research in laboratories, and elsewhere, "discovering the causes of things." And incidentally, those who have a natural dislike of experiments upon animals might note that such experiments have now robbed scarlet fever of most of its terrors.

Diphtheria.

During the last three years diphtheria has been more prevalent than usual in Halifax, though Halifax has not compared badly with other great towns. This dreadful disease, so insidious in its onset, so treacherous, so apt to escape discovery until too late for cure, is always a source of intense anxiety to those whose duty it is to prevent its spread and to treat it in hospital. Out of the 83 cases notified many proved not to be true diphtheria, in fact quite a number were sent into hospital as doubtful cases, for observation—a very wise course in the interests of the patients. There were eight deaths registered as due to this illness, and of these three died within a few hours of admission to hospital, being moribund when sent in.

There was a succession of cases at intervals in one of the institutions of the town, and every possible step was

taken to limit the spread of infection, but although the cases were not numerous, it was some time before this source of danger could be regarded as clear. Towards the end of the year, and carried on into 1928, a succession of very puzzling cases, many of a severe and dangerous type, occurred in one area, mostly but not entirely associated with one school. The School Doctor and his staff, in co-operation with the Medical Officer of Health, concentrated their attention on this outbreak, which did not yield all its secrets in spite of close study. There is no doubt that a series of cases, so mild as to escape notice, yet of an infectious character, occurred, and spread the infection. Some of them, by systematic inspection, aided by bacteriological tests, were discovered and isolated. In view of the poisonous character of the virus in this outbreak one shudders to think what would have happened had there been no organisation ready to put up a defence against it, or no fever hospital ready to apply modern treatment. The outbreak was bad enough as it was, and in view of the serious nature of many of the cases, there is reason for pleasure in the large proportion that recovered. Most of the doctors of the town are fully alive to the need for prompt action in any case which seems as though it may be diphtheria, and lose no time in having the case admitted to the Fever Hospital, day or night.

Attention is drawn to the need for **IMMEDIATE** medical advice in ailments of children, and especially when there is anything wrong with the throat, or when breathing is difficult. Diphtheria is a disease which comes on with very slight symptoms, and the patients are always more seriously ill than they seem to the inexperienced. The antitoxin treatment of Diphtheria, which is of such remarkable value when applied early, is of little use when several days have been wasted in the hope that domestic remedies may cure. Parents should keep diphtheria always in mind and send for the doctor early when a child is poorly.

Schick Testing and Immunisation.

The circumstances of the local cases have not been such as to make it desirable to apply the Schick routine, and after careful and prolonged consideration, it is not proposed at present to organise any public immunisation scheme.

Puerperal Fever and Puerperal Pyrexia.

There was only one case of puerperal fever notified and this recovered. This improvement is more apparent than real, because under regulations which came into force in October 1926, provision is made for a new category—puerperal pyrexia—and probably several cases of this would

have been notified as fever under the old arrangement. There were nine cases notified as puerperal pyrexia and of these one died. Each notification led to enquiries, and the nine cases are classified as follows for purposes of record—

Pyrexia due to causes other than parturition 4
Pyrexia due to puerperal conditions :—

Haemorrhage (1 fatal)	...	...	2
Albuminuria	...	...	1
Breast abscess before delivery...	...	...	1
Macerated foetus	...	...	1
			—
			9

Ophthalmia Neonatorum.

The following Table classifies the notified cases :—

Cases.			Vision Unimpaired	Vision Impaired	Total Blindness	Death
Notified	Treated.					
	At Home	In Hospital				
11	5	6	10	—	—	1

Encephalitis Lethargica.

Three cases were notified, and all died. Only one was admitted to hospital, and this was studied both before and after death by distinguished investigators, who, on behalf of the Ministry of Health, are studying the problem of this disease, and who travelled from London immediately on receipt of a telegram from the Medical Officer of Health.

Cerebro-Spinal Fever.

There was one death registered as due to this disease, that of a man 43 years of age, who died after a few hours illness. The nature of the disease was uncertain during life. The other death in the Registrar-General's table has not been traced locally.

Acute Polioencephalitis.

Two deaths were registered as due to this disease of the nervous system, but one of them, at any rate, was of a very doubtful nature and was not notified during life.

Acute Poliomyelitis.

One, a notified case, recovered. There was one death registered, a Halifax person who died in another town, the death being "transferred by the Registrar General."

No epidemiological significance, therefore, attaches to any of the cases of cerebro spinal fever, acute polioencephalitis or acute poliomyelitis.

Pneumonia.

The figures given in the table for notification of Influenzal and Primary Pneumonia are not reliable, because, though improving, notification of these illnesses is not yet general. But the figure for registered deaths from these causes is enough to show that 1927 was a bad year for influenza and its resulting respiratory complications. In this respect it was not as bad as 1924, but there was a very nasty outbreak from early February to the middle of March which sent up the deathrate during that period sufficiently to affect the figure for the full year. The outbreak was very sharp, and as usual with influenza the Health Authorities were powerless to do anything really effective. Most of the persons who died were either elderly or already debilitated from pre-existing illnesses of other kinds ; in other words it struck down the defenceless.

It must be freely confessed that we do not know enough about influenza to be able to check it.

Non-Notifiable Infectious Diseases.

Measles followed its usual course by occurring about two years after its last serious outbreak. Having been fairly uncommon since the end of 1924 and early 1925 (when it occurred to a serious extent in Halifax), it broke out again about the end of April 1927, and continued into May. It passed across the town from place to place and, as usual, caused few deaths until it got into the poorer districts. Here there were 20 deaths, 17 within the period named. The seriousness of this is somewhat mitigated by the fact that quite a large proportion of the fatal cases were children with bodily or mental defects, or both. Several of the children were known to the Health Visitors and Clinic Staff as being debilitated infants who were at ordinary times barely able to survive. Still, there were others who were cut off from normal healthy life, and so the tragedy of measles was re-enacted. The Department did what it could, by house to house visitation of the affected districts urging the calling in of medical advice in the early stages, or advising removal to hospital for the very ill. The Health Visitors made 621 visits to homes for this purpose. Other hospital provision being available the limited accommodation of the Fever Hospital was not offered, though a few special cases were admitted.

Whooping Cough was rather more prevalent than usual and there were 6 deaths, 3 in February, 3 in May. 66 cases were visited by the Health Visitors.

The Fever Hospital, Stoney Royd.

The Hospital had a very busy year, dealing with the cases set out in the table. The occurrence of such a serious type of diphtheria as was experienced last year is always a cause of suspense and anxiety for the staff. Constant care and watchfulness were required, and the nursing staff was not lacking in its devotion to duty. Fever Hospital administration has problems of its own, owing to the liability of children to suffer from more than one infectious disease at a time. Such problems arose during the year, and taxed the small-ward accommodation heavily. It was an anxious year, but it can be said that the staff stood the test satisfactorily.

The upkeep of the Institution, owing to its age, remained as heavy as usual. The problem of improvement or replacement of part or the whole of the hospital was not lost sight of, but no progress was made towards its solution. It is certain that heavy expenditure must be anticipated in the near future if the requirements are satisfactorily to be met, and it is hoped that when the Health Committee comes forward with proposals the Council will give generous and sympathetic consideration, for the need is great.

The following Table shows the number and classification of cases admitted, including those received from adjacent areas at the cost of the respective Local Authorities :—

Disease	Halifax	Queensbury U.D.C.	Elland U.D.C.	Shelf U.D.C.	Sowerby U.D.C.	Total
Enteric Fever	3	—	—	—	—	3
Scarlet Fever	155	—	—	2	1	158
Diphtheria	80	3	1	1	—	85
Encephalitis Lethargica ...	1	—	—	—	—	1
Other Diseases (including observation cases) ...	10	—	—	—	—	10
Totals	249	3	1	3	1	257

Smallpox Hospital, Mount Tabor.

This Hospital, maintained by the Council, is under agreement to admit cases from the Brighthouse Joint Hospital Board's area, from Luddenden Foot, Midgley and Sowerby. Some income could have been derived by admitting cases from other areas which wanted accommodation, but the beds were jealously reserved for the use of the districts named, in view of the anxiety which prevailed as to the spread of small-pox on a large scale. The Hospital was empty from January 20th, 1926, until April 25th, 1927, when it was mobilised to admit a small group of cases from Wheatley. From then it was in constant use until December for the following cases :—

Small-pox cases, Halifax	...	...	10
Contact, Halifax	...	...	1
Small-pox cases, Brighthouse Joint Board	...	...	43

54

The Hospital was staffed (in addition to the resident caretaker and his wife) by nurses from Stoney Royd Fever Hospital, and the victualling and nursing was supervised by Miss Wilson, Matron, Stoney Royd. The Medical Officer of Health and the Assistant Medical Officer of Health, provided the medical attendance. The situation of the Hospital, on the open moorland, is such as to expose it to wild weather, and the wood and iron buildings are not the most suitable type for such a situation, the upkeep being costly. Still, the patients seemed very comfortable. Small-pox being now a permanent guest in the country, owing to neglect of vaccination, permanent and more suitable hospital accommodation will be required for it, and must be definitely anticipated. This will involve heavy expenditure ; vaccination would be cheaper, but the public, rejecting advice, has chosen. It must pay for its choice.

Luddenden Joint Hospital Board.

Negotiations for the dissolution of this Board, and the reception of infectious disease cases from Luddenden Foot and Midgley at Stoney Royd Hospital lapsed for a time but have been taken up once more, and the matter may be settled by the time this Report appears in print.

Disinfection.

The steam disinfecter is situated at the Borough Fever Hospital, Stoney Royd, and 9,426 articles of bedding, clothing, etc., were disinfected during the year. Also 212 library and other books were disinfected in a special apparatus which is provided for that purpose. 368 rooms in private houses were disinfected.

Cleansing Station.

This is at the Stoney Royd Hospital. 40 children were treated during the year, these being sent by the Education Committee, suffering from scabies and other conditions, and 6 other verminous persons treated.

Tuberculosis.

TUBERCULOSIS DEATH-RATE.		
PERIOD	Respiratory only	All Forms
10 years average 1917-26 ...	'92	1'17
1927	'79	'99

The following Table shows the ages of the cases at the time of notification and at death :—

AGE PERIOD		TUBERCULOSIS							
		* NEW CASES				DEATHS			
		Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
		M	F	M	F	M	F	M	F
Under 1 year	...	—	1	—	—	—	1	—	—
1 to 5 years	...	1	—	8	4	1	—	4	3
5 to 10 "	...	3	6	7	7	1	—	2	2
10 to 15 "	...	5	3	4	5	—	2	1	2
15 to 20 "	...	9	9	2	1	2	4	—	—
20 to 25 "	...	16	12	1	1	3	8	1	1
25 to 35 "	...	14	28	2	1	5	11	—	2
35 to 45 "	...	13	12	2	1	6	6	—	—
45 to 55 "	...	15	5	—	—	7	3	—	—
55 to 65 "	...	5	3	2	—	6	4	1	—
65 and upwards	...	4	2	—	—	3	3	1	—
TOTALS	...	85	81	30	20	34	42	10	10

*Includes primary notifications, and cases not notified during life, but first intimated by death returns.

The ratio of non-notified tuberculosis deaths to total deaths from this disease was 19 per cent.

The following Table shows the number of notified cases of Tuberculosis remaining in the Borough on December 31st, 1927 :—

Total Cases	Pulmonary			Non-Pulmonary		
	Males	Females	Total	Males	Females	Total
537	203	167	370	86	81	167

Public Health (Prevention of Tuberculosis) Regulations, 1925.

No action appeared to be called for.

Public Health Act, 1925 ; Section 62.

No action was taken.

Tuberculosis Scheme.

Diagnosis.	Pul-monary.	Non-Pul-monary.	Total.
A—New cases (excluding contacts) :			
• (a) Definitely tuberculous ...	105	14	119
(b) Doubtfully tuberculous ...	—	—	33
(c) Non-tuberculous ...	—	—	38
B—Contacts :			
(a) Definitely tuberculous ...	9	—	9
(b) Doubtfully tuberculous ...	—	—	—
(c) Non-tuberculous ...	—	—	12
C—Cases written off Clinic Register as :			
(a) Cured ...	24	7	31
(b) Diagnosis not confirmed or Non-tuberculous (including cancellation of cases notified in error) ...	—	—	65
D—Number on Register Dec. 31st :			
(a) Diagnosis completed ...	309	85	394
(b) Diagnosis not completed ...	—	—	4
Number of persons on Clinic Register on Jan. 1st			348
Number of persons transferred from other areas, and of "lost sight of" cases returned	...	...	2
Number of patients transferred to other areas and cases "lost sight of"	...	...	12

Died during the year	...	...	...	...	55
Number of observation cases under A (b) and B (b) above in which period of observation exceeded two months	...	...	...	...	4
Number of attendances at the Clinic (including contacts)	...	...	...	...	963
Number of attendances of non-pulmonary cases at Orthopaedic out-stations for treatment or supervision	...	...	...	...	10
Number of consultations with medical practitioners :					
(a) At homes of applicants	...	...	...	...	16
(b) Otherwise	...	...	...	...	204
Number of other visits by Tuberculosis Officer to homes	...	...	...	...	6
Number of visits by Nurses or Health Visitors for Clinic purposes	...	...	...	...	2378
Number of					
(a) Specimens of sputum, etc., examined	...	...	...	...	380
(b) X Ray examinations made in connection with Clinic work	...	...	...	...	4
Number of Insured persons on Clinic Register on Dec. 31st	...	...	...	...	279
Number of Insured persons under Domiciliary Treatment on the 31st December	...	...	...	...	22

Shelf Sanatorium.

Admissions and Discharges during the year :—

	Halifax cases	Other Cases	Total
Remaining in on December 31st, 1926	27	14	41
Admitted during the year	95	31	126
	122	45	167
Discharged during the year	95	37	132
Remaining in on December 31st, 1927	27	8	35

Grouping of cases admitted during the year :—

A. *Non-Pulmonary* :—

B. *Pulmonary* :—

	Male.	Female.	Total.
Group 1. Early cases ...	21	23	44
Group 2. Intermediate cases	19	16	35
Group 3. Advanced cases ...	27	20	47

We still have to deplore the small percentage of early, *i.e.*, really suitable Sanatorium cases. The increase in number of advanced cases admitted during the year is accounted for by the policy of endeavouring to take the most infectious cases away from their homes.

The average length of stay was 139 days, as compared with 139, 129 and 124 days in the preceding three years respectively.

The condition of the patients discharged was as follows :

Improved.	No Change.	Worse.	Dead.	Total.
92	17	13	10	132

All the deaths were pulmonary cases and Halifax residents.

Tuberculosis After-care Committee.

The Tuberculosis After-Care Committee of the Halifax Council of Social Welfare continued its useful work in the manner described in previous Reports.

Bacteriological Examinations.

The arrangements are as follows :—

Diphtheria.

Swabbing outfits may be obtained from the Health Department, and after use may be posted direct to the Pathological Department, Medical School, Thoresby Place, Leeds. Positive results are telephoned or telegraphed direct to the practitioner, but negative results are communicated by post only.

Enteric Fever.

Blood outfits for the agglutination test are supplied by the Health Department, and may be sent direct to the above address at Leeds.

Tuberculosis.

Sputum and other material is examined only at the Tuberculosis Clinic, 8, Clare Road, Halifax, and should not be sent to Leeds. Sputum must be sent in special outfits which will be supplied on the application of the practitioner.

Examinations 1927.

The following Table shows the number of examinations carried out either at the University of Leeds or at the Tuberculosis Clinic during the year, either for the medical practitioners of the town, for the fever hospital, the clinics, or the Health Department :—

Lymph Glands for Tubercle	...	...	2
Sputum for Tubercle	...	...	380
Diphtheria Swabs	...	...	358
Hair for Ringworm	...	...	2
Agglutination Test (Widal) T.A.B.	...	...	4
Others (Pus, Fluids, etc.)	...	...	2
Total			748

In addition to the above, samples of milk from cows suspected to be suffering from tuberculosis of the udder have been taken by the Veterinary Inspector and submitted to bacteriological tests in other laboratories.

Issue of Sera and Vaccines.

Diphtheria Antitoxin :

As the Health Department is usually prepared to remove diphtheria cases to hospital on the shortest notice, the issue of diphtheria antitoxin for use in the town should be rarely required ; a supply is kept at the Health Department for issue in certain circumstances.

Botulism Antitoxin :

The Ministry of Health has placed botulism antitoxin at certain centres about the country. The nearest to Halifax are Manchester and Leeds. The Medical Officers of Health of these places are in charge of the supplies.

Venereal Diseases.

In conjunction with the County Authority, a joint clinic for the treatment of venereal diseases is held at the Royal Halifax Infirmary.

The clinic is open for women and children every Tuesday afternoon from 3-30 to 4-30, and from 6 to 8. For men, every Thursday between 6 and 8 p.m. Also an auxiliary treatment centre for men is open daily from 10 a.m. to 12 noon, and 6 to 8 p.m., and on Sundays from 10 a.m. to 12 noon. It appears that these arrangements are sufficient and adequate for the needs of the Borough.

There is a Medical Officer with an Assistant Medical Officer in charge of this clinic.

The following figures refer to local patients attending the Treatment Centre :—

Number of persons dealt with for the first time during the year, and found to be suffering from :—

				Local Clinic	Other Clinics
Syphilis	...	...	...	40	—
Soft Chancre	...	...	...	—	—
Gonorrhoea	...	...	...	89	1
Conditions other than Venereal...				116	—
Total				245	1

Total attendances at the out-patient clinic	...	...	...	5782	1
Aggregate number of in-patient days				155	—
Number of doses of Salvarsan Substitutes given	...	...	...	469	—

Specimens sent to an approved Laboratory for :—

Detection of Spirochaetes	...	3	—
Detection of Gonococci	...	7	—
Detection of other organisms	...	—	—
Wassermann Reaction	...	256	—
Total	...	266	—

765 examinations for detection of Gonococci were carried out at the Treatment Centre.

There are 7 medical practitioners, not including the two officers of the clinic, in the Borough, qualified to receive free supplies of Salvarsan substitutes.

There were 125 specimens sent to the pathological laboratory provided by the Council, by the general practitioners during the year.

Maternity and Child Welfare.

Midwives.

Number practising in the Borough of Halifax during the year	31
(This includes Midwives working in Institutions).	
Number holding the Central Midwives Board Certificate (by examination)	28
Number of <i>bona fide</i> Midwives (<i>i.e.</i> , holding the Certificate of the Central Midwives Board by virtue of having been in practice before 1902)	3
Number of cases in which Medical Aid was summoned by Midwives	112
23 medical aid notices were sent on behalf of the child,	
7 for inflammation of eyes, 10 for feebleness, etc., and	
3 for cases of skin affections.	

Notification by midwives of intention to resort to artificial feeding, 10.

Notification by midwives of liability to be a source of infection, 7.

Midwifery Services Subsidised by the Corporation.

The Midwifery Service carried on by the Halifax District Nursing Association in the Bradshaw area is subsidised by the Corporation. The total number of cases attended by the Association's midwives, including those in Bradshaw, was 383 (a doctor being engaged in 71 of these cases).

The Luddenden Nursing Association also receives a small subsidy from the Corporation, and the cases attended by the Luddenden nurse within the Borough numbered 7.

It must be remembered that although the cases are few in number, the roads are extremely steep, and the houses scattered, which makes the midwife's work very arduous.

Midwives Inspection.

With regard to the inspection of Midwives, it is again gratifying to report that no case has occurred of damage to the eye of a newly born child from inflammation.

Referring to the anxiety caused by the occurrence of pemphigus neonatorum in 1926, we are glad to report that there has been no death from this cause in 1927.

Notification of Births Act, 1907 :—

Number of births notified...	} including births transferable to other districts. {	1,424
Number of births registered		1,563
Ratio of notified to registered ...		91.1%
Number of stillbirths notified ...		70
Number of notified births attended by Doctors with and without Midwives ...		367
Number of notified births attended by Midwives only ...		514
Number of notified births attended in St. Luke's Maternity Home and Hospital		214
Number of notified births attended in Royal Halifax Infirmary ...		329

The increased use of Institutions for confinements makes it difficult for private midwives to earn a livelihood, and so far we are not in a position to say that this increasing use of Institutions has reduced the total number of maternal deaths.

Health Visiting Summary :--

Primary Visits ...	1,333
Visits, 1-5 years ...	3,994
Repeat visits under 1 year ...	5,652
Ante-natal visits ...	268

The Health Visitors also spend some part of their time in visiting cases of tuberculosis and mental deficiency, 363 visits being made during the year.

The number of visits to homes is smaller than in previous years, as the Health Visitors have to spend more time at the clinics, owing to increased number of sessions and attendances.

Infant Welfare Centres.**Northgate—**

Number of sessions, 260.
New cases, 680.
Re-visits, 8,481.
Average attendance per session, 35.23.

Queen's Road—

Number of sessions, 91.
Tuesday ; Morning and Afternoon sessions.
New cases, 216.
Re-visits, 3,595.
Average attendance per session, 41.87.

Total new cases	...	...	...	...	896.
Increase on previous year	...	...	...	...	33.
Total re-visits to Clinics	...	...	...	...	12,076.
Increase on previous year	...	...	...	...	2,025.

N.B.—Two new Sessions (Monday morning and Friday afternoon) were started at Northgate in the beginning of February.

A Toddlers' Clinic, to teach breathing exercises and remedial games, was commenced on the 4th February, but after two sessions, had to be closed on account of the prevalence of influenza. It was re-opened on March 25th and closed again on April 9th on account of the prevalence of measles. The Toddlers' Clinic was re-opened on June 24th and there has been no further interruption since that date.

Ante and Post-natal Clinics :—

Number of sessions, 44.
New cases, 94.
Total attendances, 315.
Average attendance, 7.1.
Increase of new cases over last year, 14.

Toddlers Clinic—

Number of sessions, 27.
Attendances, 222.
Average attendance per session, 8.2.

Infant Mortality.

(see statistics, page 10).

Out of 120 deaths under one year, 68 occurred during the first month, 52 over one month and under twelve months.

More than half of the deaths between one and twelve months were due to respiratory diseases, and many were associated with the epidemics of measles and influenza prevalent in the early months of 1927.

It is noteworthy that a very small proportion of the deaths under one year are attributed to digestive disorders, which indicates a vast improvement in the feeding and management of infants, compared with the statistics of some years ago.

It is probable that the overcrowding, over which we have little control, is responsible in some measure for the high mortality from respiratory diseases.

Maternal Mortality.

Year after year comment has been made in this Report on the high maternal mortality in Halifax. There seemed for a time to be signs of improvement, but in 1927 a serious set-back occurred, as the Table shows.

	1921	1922	1923	1924	1925	1926	1927
Sepsis ...	3	3	3	0	1	1	1
Other causes	9	7	7	6	7	7	9
Per 1,000 births	6·7	6·2	6·5	4·0	5·6	5·7	7·4

It had been hoped that with increased facilities for institutional treatment at the time of confinement and with more supervision during pregnancy there would be marked improvement; and so there may be, in time, for theoretically these things promise success. It is evident, however, from a study of the fatal cases, that not nearly sufficient use is being made of the facilities for ante-natal supervision, while in some instances of difficult labour operative treatment in institution has been resorted to only after prolonged and exhausting experiences in the house. Records are preserved of these fatal cases, but it would serve no good purpose to go into details in a publication of this kind; they will be available for the Committee set up by the Ministry of Health to study puerperal morbidity. In some cases it is difficult to see how trouble could have been averted, considering all the circumstances; in others it may well be that greater supervision during pregnancy would have prevented subsequent trouble. A wide variety of causes of maternal death is shown in the records of the year, and no one can study the subject without realising the difficulty of the problems which have to be solved. But it must be emphasised that medical supervision during pregnancy will have to become the rule rather than the exception, and that such supervision will have to be frequent, constant, detailed and of conscientious thoroughness if any good is to come of it. To this end there is room for more close co-operation between doctors, midwives, patients and institutions. With few of the above cases can it be said that the desirable conditions have been fulfilled.

Orthopaedic Clinic.

The Orthopaedic or Cripple Clinic founded jointly by the Maternity and Child Welfare, Health and Education Committees, has done excellent work. The sessions were

originally held in the School Clinic, but as regards the children from the Infant Welfare Centre this was not found successful, as the mothers attended badly. It was therefore arranged that sessions should be held occasionally at the Northgate Centre, and the massage and remedial exercise sessions are also held there. Children requiring operative treatment for rickets were sent to St. Luke's Hospital, Bradford, so as to be treated by the Orthopaedic Surgeon of the clinic, Mr. F. W. Goyder, F.R.C.S.

As the work of this clinic has to be treated as a whole, I am appending a copy of Mr. Goyder's report which is published also in the Annual Report of the School Medical Service :—

Mr. Goyder's Report.

Last year's report, which covered the first four months of the existence of this clinic, was necessarily incomplete. It dealt mainly with the immediate needs of the clinic and the direction in which it was likely to expand. This time we have a full year's figures, which show much more clearly the varieties of physical defect which have to be dealt with, the way in which they have been treated, and the lines on which development must take place if the scheme is to have the full value intended by its originators.

The Orthopaedic Surgeon has attended on 34 occasions. This large number has been necessary in order that the waiting list of 366 children, who had been recommended by the School Medical Inspectors, could be fully investigated. All these children have been notified to attend, and of those who have failed to do so, some have appeared after a second notification, but most appear to have passed school age and have thus ceased to come under the jurisdiction of the school authorities, so that we start the new year with no arrears. The rate at which cases are referred for examination by the School Medical Inspectors will determine in the future the frequency of the attendance of the Orthopaedic Surgeon.

Of the cases notified over 70 per cent. presented themselves for examination, a marked improvement on last year's figures.

The statistics of these cases are as follows :—

Non-Tuberculous.	Number of Cases	Number of Attendances
Below School Age	44	355
Of School Age	222	5,474
Tuberculous (all ages)	7	10
Totals	273	5,839

Of the 5,839 attendances, 5,293 were visits for treatment, and the remainder, 546, represents the number of cases actually examined by the Orthopaedic Surgeon (over 16 per session). Of the cases seen by the Surgeon, 347 were new cases and 199 were for re-examination.

The following Table indicates the type of cases dealt with (other than Tuberculous cases) and the treatment provided :—

Below School Age.	Treatment Given.
Rickets 34	Surgical Appliance, Exercises and Massage
Little's Disease 2	Remedial Exercises
Flat Foot 2	Massage and Remedial Exercises
Post-Diphtheritic Paralysis 1	Massage and Remedial Exercises
Debility 1	Massage and Remedial Exercises
Congenital Lateral Curvature of Spine 1	Operative. Massage, etc,
Weak Legs 1	Massage and Remedial Exercises
Infantile Hemiplegia 1	Remedial Exercises
Erb's Paralysis 1	Operative. Remedial Exercises and Massage
Total 44	

Of School Age.	Treatment Given.
Rickets 11	Surgical Appliance, Radiant Heat, etc.
Flat Foot... .. 62	Remedial Exercises and Massage
Stoop 56	Remedial Exercises
Lateral Curvature Spine 32	Remedial Exercises
Injuries 12	Massage and Remedial Exercises
Infantile Paralysis ... 11	Surgical Appliance, Radiant Heat
Defective Feet (other than Flat Feet) ... 10	Massage, Radiant Heat, Exercises
Infantile Hemiplegia ... 6	Remedial Exercises and Radiant Heat
Torticollis 5	Operative, Remedial Exercises and Massage
Erb's Paralysis 4	Operative, Remedial Exercises and Massage
Weak Leg 2	Radiant Heat, Massage, Exercises
Chorea 1	Remedial Exercises
Flat Chest 10	Remedial Exercises
Total ... 222	

Table of cases sent to special institutions at cost of Orthopaedic Scheme :—

	Tuber- culous.	Non-Tuberculous.	
		Of School Age.	Below School Age.
In Institutions on January 1st, 1927	2	1	—
Sent in during year	3	3	3
Total	5	4	3
Discharged during year	1	2	1
Remaining in December 31st, 1927	4	2	2

The Institutions in question were :—

- (a) Kirby Moorside Special Hospital School ;
- (b) St. Luke's Hospital, Bradford (under Mr. Goyder)
- (c) Heatherwood, Ascot.

Other cases recommended for operation by the Surgeon were treated in voluntary hospitals, such as Royal Halifax Infirmary, independently of the scheme. In 17 other cases in which operative treatment was advised, no action has been taken by the parent.

83 children, for whom the Orthopaedic Surgeon advised remedial exercises or massage, cannot be treated until vacancies occur amongst those now under treatment, or unless the staff is augmented.

The cases have to be treated by one Masseuse working full-time, and by two part-time Masseuses, one working five hours and one two-and-a-half hours per week, the remaining two-and-a-half hours being devoted to attendance upon the Orthopaedic Surgeon at his visits. As explained in the last report it is only by grouping the bulk of the children into classes that the present staff can deal with this number, and even so its working capacity has been diminished on several occasions by enforced absence of the staff from illness.

As the Maternity and Child Welfare Department is not as yet getting its full share of the services of the massage staff, it follows that provision is urgently needed for the remedial treatment of nearly 200 children per week. It has been suggested that many of the postural deformities occurring in girls attending secondary schools, such as stoop, lateral curvature of the spine, flat chest, and flat foot, could be transferred for treatment to their own schools, but the provision of adequate treatment at these schools is not yet sufficient, and they (the schools) themselves are already in need of more help in this direction. This help could be given from the Orthopaedic Clinic were the staff increased, and the new Masseuse could divide her time between the Orthopaedic Clinic, the schools, and the Maternity and Child Welfare Centre. The Orthopaedic Surgeon desires specially to stress this point, and to urge its consideration by the joint Committee.

From the detailed list given it will be seen that 27.9 per cent. are cases of flat foot and 44.1 per cent., *i.e.*, nearly half, are postural deformities of the trunk. Adequate treatment of such conditions is the main justification for the establishment of a clinic such as this, for such deformities, if treated early and energetically, can nearly always

be cured. But a limited staff means delay, and delay diminishes the percentage of successful results. Again, of the cases (95) discharged, 22 discontinued treatment because they had left school. Many postural deformities arise in early adolescence and are hence not present when the children are examined on first entering school. It is important, therefore, that the cases should not be kept waiting for treatment, that treatment should be completed before the school-leaving age, and where this is impossible, that they should be under supervision by some after-care organisation after they have left school.

Turning to the children of pre-school age we find that 77 per cent. are cases of rickets with associated deformities. As the main function of the clinic in older children is to deal with postural deformities, so in the Maternity and Child Welfare section rickets must have our chief attention. And at present our arrangements are still incomplete. Regular sessions by the Orthopaedic Surgeon are now being held at the Maternity and Child Welfare Centre instead of at the clinic, and the massage staff now attends there at stated times. At the time of writing this report, a lamp for ultra-violet radiation is being installed at the Northgate Centre, so as to centralise the work, many parents being unable to take their children to the Infirmary, to bring them for massage at the School Clinic, and also to attend at the Maternity and Child Welfare Centre.

Institutional treatment is required, as mentioned in last year's report, in a high percentage of cases of rickets, and the arrangements for this, though adequate where operation is required, are still insufficient.

The year's experience in cases requiring institutional treatment has been valuable.

Cases of surgical tuberculosis have been sent to Kirby Moorside, and 3 were returned at the conclusion of treatment early in 1928 (being shown on Table as still in on December 31st, 1927). The Orthopaedic Surgeon is satisfied that the results have justified the expense of the treatment, and that the results would not have been so good had the children been treated locally. A similar case returned from Ascot (sent by the Education Committee before the Orthopaedic Centre was fully organised), and this shows an equally satisfactory result. A non-tuberculous case from Kirby Moorside, though the general health is vastly improved, could, as far as the deformities are concerned, have been treated equally well at the clinic, so that the Orthopaedic Surgeon suggests that our beds at Kirby Moorside be kept for cases of surgical tuberculosis only. Regarding cases requiring special orthopaedic experience and operative procedures, such as obstetrical

paralysis and torticollis, the Orthopaedic Surgeon has been allowed the privilege of dealing with these cases personally in his orthopaedic wards at St. Luke's Hospital, Bradford. This means a minimal period in Hospital, because the after-treatment is carried out at the clinic in Halifax. The results have been satisfactory, and the Orthopaedic Surgeon hopes that the privilege will be continued. The same arrangements have been made for cases of rickets requiring surgical treatment, and the Orthopaedic Surgeon is satisfied with the results so far obtained.

Altogether the results of the first year's working have been most gratifying to the Orthopaedic Surgeon, and have, in his opinion, amply justified the establishment of the clinic. Any criticisms he has made in this report are made in the hope of increasing its efficiency, and not for the purpose of minimising its achievements.

F. W. GOYDER, F.R.C.S.

Table to show (1) the number of children who completed treatment at the Remedial Exercises' Clinic during 1927 ; (2) the average duration of treatment :—

Condition	Boys	Girls	Total Attendance in Weeks		Average Attendance in Weeks	
			Boys	Girls	Boys	Girls
Lateral Curvature, Spine	5	11	108	246	21.6	22.36
Rickets	2	...	38	...	19.0	...
Torticollis ... ..	...	2	...	30	...	15.0
Infantile Paralysis ... ..	...	1	...	1	...	39.0
Infantile Hemiplegia	1	...	27	...	27.0	...
Flat Chest... ..	3	5	57	72	19.0	14.4
Flat Foot	24	23	231	243	9.62	10.56
Stoop	5	29	82	355	6.4	12.24
Defective Feet (other than Flat Feet)	2	1	37	13	18.5	13.0
Pain in Joint ... ..	...	1	...	3	...	3.0
Injuries	5	6	11	15	2.2	2.5

Artificial Sunlight Clinic.

As an adjunct to the work of the Orthopaedic Surgeon on ricketty babies and also for general use upon debilitated mothers and infants, it was decided to obtain the sanction of the Ministry of Health for the equipment of an Artificial Sunlight Department at the Northgate Centre. Although this was not obtained in time for the lamp to be put into use during the year under review, preliminary steps were taken. Dr. Latchmore, at her own expense and in her own time, visited the Kirby Moorside Orthopaedic Hospital School, in which some of our children were under treatment, and she was much impressed by the splendid conditions and equipment of the place.

Visits were also paid to the famous Sunlight Centre at Alton, and to Hayling Island, where the children have sea bathing under ideal conditions, and where those not able to walk are carried on stretchers and dipped in the sea.

At Kirby Moorside and Alton during the Winter, artificial sunlight is given to supply the deficiencies of nature.

Two Municipal Clinics at Manchester, the Manchester Babies' Hospital, the Light Department of the Salford Royal Hospital and the Sunlight Departments of the Bradford and Halifax Royal Infirmaries were also visited, and methods studied.

Miss Oram, the chief Health Visitor, through the courtesy of Dr. Franklyn, was able to take a course of study in the use of the artificial sunlight lamp at the Royal Halifax Infirmary.

Inspection of Maternity Homes.

In the Halifax Corporation Act 1926, powers were given for the compulsory registration of Maternity Homes in Halifax. These provisions were later included in the Midwives' and Maternity Homes' Act 1926, which established the powers for the whole country.

Only one Maternity Home has been registered (those at the Halifax Royal Infirmary and St. Luke's Hospital not being subject to registration). This home has been inspected in accordance with the Act.

During 1928 all Nursing Homes, not only those for Maternity purposes, will become subject to registration and inspection.

Staff.

The personnel of the staff engaged upon Maternity and Child Welfare work has not changed, and absence due to illness has been less than usual. The improved bill of

health is probably due to the better conditions under which the work is carried on at Northgate in comparison with the previous premises used.

Voluntary Workers.

Our grateful thanks are again tendered to those ladies who so willingly give up so much time to assist in the work of the Centres. Without their help it would be impossible to carry on the work, and their unselfish efforts on behalf of their fellows is very highly appreciated.

Propaganda Work.

There was no Health Week celebration in Halifax during the year, as it is generally thought that this type of health propaganda has had its day, and is not of the most useful and permanent character.

The various clinics continued to be centres of health education, and in addition to the teaching received in those places large quantities of useful pamphlets were distributed, touching on a variety of topics, these being of special interest to parents.

A new medium for educating the public in matters of health has been developed by the Central Council for Health Education, a body organised by the Society of Medical Officers of Health. The organisation now publishes a monthly journal entitled "Better Health," containing bright, sane and reliable articles on health matters, suitable for the general public and free from sensationalism or fads. This journal has been adopted by the Health Committee, local pages for advertisements and Health Department news being added. At first one thousand copies were circulated monthly but the demand increased, and later the monthly circulation was raised to two thousand. Copies are given away at the clinics and at the libraries, but only to such persons as are likely to read them with interest. The number of such persons is evidently great, because the demand exceeds the supply. In order to keep down the cost an attempt is being made to get societies, clubs, and employers of labour to pay for a certain number of copies each month, and if this should prove successful in bringing in income additional to the advertisement revenue, it will be possible to enlarge the circulation. Full

information may be obtained by intending advertisers, club secretaries, etc., from the Medical Officer of Health. The success of the journal in providing interesting and useful reading material is assured, and the lessons taught will do much to get rid of superstitions and errors regarding health and disease.

Mental Deficiency Act, 1913.

The outstanding difficulty in the work of the Halifax Committee for the Care of the Mentally Defective is the inability to secure vacancies in suitable institutions for female defectives. Therefore several women and girls who would be better off if placed in such institutions must remain at home. The Committee fully recognises its responsibility and has taken steps, but so far no new accommodation has become actually available. Another difficulty is to get accommodation for young boys. This may be overcome by an extension of the existing accommodation at Whixley Institution, of which the Halifax Committee are part-owners. In the meantime the Committee has reason to feel satisfied with much of its work of guarding the unfortunate people whose mental development is below normal. The work is expensive and any extensions of the scheme will prove a heavy financial burden. But this burden will have to be borne, or the community will fail to meet what must be regarded as an obligation.

Halifax cases are at present in the following Institutions :

- Mid-Yorkshire Institution, Whixley, near York.
- Gibbet Street Institution, Halifax.
- Pontville R.C. Special School, Ormskirk, Lancs.
- Stoke Park Colony, near Bristol.
- Royal Albert Institution, Lancaster.
- St. Francis R.C. Special School, Buntingford, Herts.
- Girls' Training Homes, Clapton.
- Wordsley Institution.
- Tenterden Union, Tenterden, Kent.

The following Table shows the position on December 31st, 1927 :—

A. *Number of Cases "Subject to be dealt with."* :—

1. Under "Order"	M.	F.	Total
(a) In Institutions	23	14	37
(b) Under Guardianship	—	—	—
Out on Licence from Institutions	2	1	3

	M.	F.	Total
2. In "places of safety" ...	—	—	—
3. Under Statutory Supervision ...	34	31	65
Numbers of foregoing :—			
(a) Attending Occupation Centres	—	—	—
(b) Awaiting removal to an Institution ...	6	4	10
4. "Subject to be dealt with," but action not yet taken :—			
(a) Notified by Local Education Authority, Sec. 2 (1), (b) (v)	—	—	—
(b) Otherwise "ascertained" ...	—	—	—
B. Number of Cases who may become "Subject to be dealt with" :—			
1. In Institutions or under Guardianship dealt with under Sec. 3—			
(a) in regard to whom the Local Authority contributes under its permissive powers ...	—	—	—
(b) Maintained wholly by parents, relatives or others ...	—	—	—
2. Reported to Local Authority from any reliable source but as to whom it had not been decided whether they are "subject to be dealt with" or not :—	—	—	—
3. Under Voluntary Supervision ...	—	—	—
Numbers of foregoing attending Occupation Centres ...	—	—	—

Cases Notified by Local Education Authorities under Sec. 2 (1), (b), (v).

	M.	F.	Total
Sent to Institutions (by Order) ...	—	—	—
Placed under Guardianship (by Order)	—	—	—
Placed under Statutory Supervision ...	5	2	7
Placed in "Places of Safety" ...	—	—	—
Died or removed from area ...	—	—	—
Action not yet taken ...	—	—	—
Total ...	5	2	7

The particulars given above relate solely to cases under the care of the Statutory Committee, and have nothing to do with children of school age, who, so long as they are capable of receiving benefit from instruction in a special school remain under the care of the Education Committee. Particulars regarding them are to be found in the reports of the School Medical Service published separately, in which the work of the special school at Quarry House is described.

Medical Examination of Tramwaymen and Gasworkers.

The Medical Officer of Health and Dr. Smith carried out the following medical examinations on behalf of the Tramways and Gas Committees, including several consultations with usual medical attendants :—

Tramwaymen—

Applicants for employment or promotion	...	36
Return to work after sickness (other than cases certified by usual medical attendants)	...	1

Gasworkers—

Special examinations	—
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INDEX.

Acts, Local etc. ...	16	Laboratory Work ...	16, 56
Administration, Sanitary ...	16	Lodging Houses ...	28
After-Care, Tuberculosis ...	55	Luddenden Joint Hospital Board	51
Ambulance ...	15		
Amusement Places ...	24	Maternal Mortality ...	61
Analyst, Borough ...	37	Maternity and Child Welfare ...	58
Ante-natal clinics ...	60	Homes ...	68
Antitoxin Botulism ...	56	Measles ...	49
Diphtheria ...	56	Meat Inspection ...	31
Area ...	9	Mental Deficiency ...	70
Artificial Sunlight Clinic ...	68	Meteorology ...	74
		Midwives ...	58
Bacteriology ...	55	Milk, ...	29, 34
Bakehouses ...	23		
Birth, Notification ...	59	Notices ...	20
Rates ...	9	Notification, Births ...	59
		Disease ...	41
Cancer ...	13	Nursing, District... ..	16
Caravans ...	29		
Cerebro-Spinal Fever ...	48	Ophthalmia ...	48
Cleansing Station ...	52	Orthopaedics ...	61
Clinic, Ante-natal ...	60		
Infant ...	59	Pneumonia ...	49
School ...	15	Polioencephalitis ...	48
Tuberculosis ...	15, 52	Poliomyelitis ...	48
Venereal ...	15, 57	Population ...	9
Closets ...	17	Propaganda ...	69
Common Lodging Houses ...	28	Prosecutions ...	21, 25
Conveniences (Public) ...	18	Puerperal Fever ...	47
Cowkeepers ...	29		
Cream ...	38	Rag Flock Act ...	38
Cripples ...	61	Rainfall ...	74
		Rateable value ...	9
Dairies ...	30	Rats ...	25
Death in Childbirth ...	9	Rivers ...	16
Rates ...	9		
Diphtheria ...	46	Sale of Foods and Drugs ...	34
Disinfection ...	51	Sanatorium ...	54
Dispensary Tuberculosis ...	52	Sanitary Defects... ..	18
Drainage ...	18	Sanitary Administration ...	16
		Scarlet Fever ...	45
Enteric Fever ...	43, 56	School Medical Service... ..	15
Encephalitis ...	48	Sewerage ...	17
		Shops Inspection ...	24
Factories ...	22, 23	Slaughterhouses ...	31
Fish Friars ...	39	Small Pox Hospital ...	43, 51
Fertiliser and Feeding Stuffs ...	38	Smoke abatement ...	24
Fever Hospital ...	50	Staff ...	4, 68
Food Inspection... ..	29	Stoney Royd Hospital ...	50
Food and Drugs, Sale of ...	34	Syphilis ...	57
Gas Workers ...	72	Tents ...	29
Gonorrhœa ...	57	Tramwaymen ...	72
		Tuberculosis ...	52
Health Committee ...	3	Tuberculosis Order (D.A.A.) ...	31
Health Services ...	14	Typhoid Fever ...	43
Health Visitors ...	59		
Hospital, Fever ...	50	Venereal Disease ...	57
Small Pox ...	51	Veterinary Inspector ...	29
Tuberculosis ...	52	Vital Statistics ...	9
Housing ...	26	Voluntary Workers ...	69
Ice-cream ...	40	Water supply ...	30
Infant Mortality ...	10, 60	Whixley Institution ...	70
Infant Welfare ...	59	Whooping Cough ...	50
Infectious Disease ...	41	Workshops ...	22
Institutions, Summary ...	14		

INDEX

1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9
10	10	10	10
11	11	11	11
12	12	12	12
13	13	13	13
14	14	14	14
15	15	15	15
16	16	16	16
17	17	17	17
18	18	18	18
19	19	19	19
20	20	20	20
21	21	21	21
22	22	22	22
23	23	23	23
24	24	24	24
25	25	25	25
26	26	26	26
27	27	27	27
28	28	28	28
29	29	29	29
30	30	30	30
31	31	31	31
32	32	32	32
33	33	33	33
34	34	34	34
35	35	35	35
36	36	36	36
37	37	37	37
38	38	38	38
39	39	39	39
40	40	40	40
41	41	41	41
42	42	42	42
43	43	43	43
44	44	44	44
45	45	45	45
46	46	46	46
47	47	47	47
48	48	48	48
49	49	49	49
50	50	50	50
51	51	51	51
52	52	52	52
53	53	53	53
54	54	54	54
55	55	55	55
56	56	56	56
57	57	57	57
58	58	58	58
59	59	59	59
60	60	60	60
61	61	61	61
62	62	62	62
63	63	63	63
64	64	64	64
65	65	65	65
66	66	66	66
67	67	67	67
68	68	68	68
69	69	69	69
70	70	70	70
71	71	71	71
72	72	72	72
73	73	73	73
74	74	74	74
75	75	75	75
76	76	76	76
77	77	77	77
78	78	78	78
79	79	79	79
80	80	80	80
81	81	81	81
82	82	82	82
83	83	83	83
84	84	84	84
85	85	85	85
86	86	86	86
87	87	87	87
88	88	88	88
89	89	89	89
90	90	90	90
91	91	91	91
92	92	92	92
93	93	93	93
94	94	94	94
95	95	95	95
96	96	96	96
97	97	97	97
98	98	98	98
99	99	99	99
100	100	100	100

General Summary of Meteorological Observations taken at the Public Library, Belle Vue, from January 1st, 1927, to December 31st, 1927.

By E. GREEN, LIBRARIAN.

LATITUDE OF STATION = 53° 43' N.

LONGITUDE = 1° 52' W.

HEIGHT ABOVE SEA LEVEL = 625 FEET.

1927	Pressure of Atmosphere in Month.			Temperature of Air in Month.							Mean Temperature.		Vapour.			Mean Reading of Thermometer.			Wind.										Rain.		REMARKS		
Month.	Mean at 37° F. and Sea Level.	Range.	Highest.	Lowest.	Range.	Mean.			Adapted.	Air.	Dew Point.	Elastic Force.	Mean.	Short of saturation.	Mean degree of Saturation % 100.	Mean Weight of a cubic foot of Air.	Maximum Rays of Sun.	Minimum on Grass.	Estimated Strength.	Relative proportion of										Mean amount of Cloud.		No. of Days of Fall.	Amount Collected.
						Of all Highest.	Of all Lowest.	Daily Range.												N.	N.E.	E.	S.E.	S.	S.W.	W.	N.W.	Calms.					
lbs.	in.	°	°	°	°	°	°	°	lbs.	grs.	grs.	°	°	°	°	°	°	°	°	°	°	°	°	°	°	in.	in.						
January	29.606	1.394	51.5	25.2	26.3	44.0	34.5	9.5	39.5	37.4	.208	2.4	0.3	91	540.0	54.7	29.5	3.7	3	0	0	0	1	9	11	12	10	8.3	25	2.96	The observations have been reduced to mean values by Glaisher's Barometrical & Diurnal Range Tables, and the Hygrometrical results have been deduced from the seventh edition of Hygrometrical Tables, after corrections for Index errors of the Instruments employed.		
February	29.993	1.488	55.8	22.0	33.8	45.5	32.7	12.8	39.8	37.4	.208	2.4	0.3	91	540.0	61.4	26.7	2.0	0	4	1	4	0	6	3	6	20	8.5	12	1.28			
March	29.614	1.596	64.1	34.0	30.1	49.4	37.7	11.7	45.0	39.6	.244	2.8	0.5	84	533.3	79.3	31.6	3.0	0	2	2	2	1	16	6	10	10	7.5	19	2.95			
April	29.818	1.096	60.0	31.5	28.5	49.6	36.7	12.9	44.8	35.3	.205	2.4	0.9	71	533.7	88.3	31.1	3.0	4	0	0	0	1	5	8	16	6	7.5	22	3.27			
May	29.997	0.816	70.1	28.9	41.2	56.6	40.3	16.3	50.8	43.8	.286	3.3	0.8	50	526.7	93.8	34.7	2.5	2	7	1	1	1	6	0	9	20	7.9	15	1.28			
June	29.855	0.726	72.7	38.7	16.1	58.4	43.4	15.0	53.7	43.0	.277	3.1	1.4	69	523.7	102.4	38.3	3.0	2	3	0	0	1	3	11	11	12	7.2	17	2.62			
July	29.867	0.756	76.8	47.9	28.9	64.8	50.6	14.2	59.9	51.4	.380	4.3	1.3	76	517.2	106.4	45.6	2.5	1	4	0	1	6	7	4	0	23	7.9	16	2.44			
August	29.827	1.170	72.3	43.7	28.6	63.9	50.4	13.5	59.3	50.4	.367	4.1	1.3	76	518.1	101.8	44.6	2.5	1	1	0	3	3	8	12	6	11	8.0	22	6.05			
September	30.110	1.310	70.2	38.8	31.4	59.3	47.0	11.3	54.5	48.1	.334	3.8	0.9	80	522.3	91.1	41.5	2.5	1	1	0	0	0	7	9	16	14	7.9	22	4.45			
October	29.985	1.222	66.2	32.9	33.3	55.6	42.1	13.5	50.4	44.3	.298	3.4	0.1	86	527.7	82.8	34.9	3.5	0	6	2	0	0	11	5	6	18	7.0	22	3.64			
November	29.932	1.176	62.7	28.2	34.5	47.2	36.8	10.4	42.6	37.1	.225	2.6	0.5	85	535.6	83.9	29.2	2.5	10	1	3	3	2	9	6	5	8	7.3	23	3.75			
December	29.918	2.022	50.2	17.0	33.2	38.1	30.8	7.3	34.5	29.7	.183	2.2	—	97	545.6	42.8	24.2	2.0	0	7	1	6	1	0	0	0	31	9.0	16	2.05			
Annual Means	29.877	1.231	64.4	32.4	30.5	52.6	40.3	12.4	47.9	41.5	.268	3.1	0.7	82	530.3	82.4	34.3	2.7	2.0	3.0	1.0	2.0	1.0	7.0	6.0	8.0	15.0	8.0					

The Mean Monthly Readings of the Earth Thermometer, four feet below the surface, were as follows:—

January, 43° March, 42° May, 47° July, 53° September, 55° November, 48°
 February, 45° April, 44° June, 50° August, 55° October, 51° December, 44°

Highest Readings = 55° on August 2nd to Sept. 24th.

Lowest Readings = 41° on Feb. 7th to March 2nd.

Rain fell on 231 days, and measured 36.74 inches.



