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County Borough of Ipswich.

REPORT

of

THE MEDICAL OFFICER OF HEALTH

and

school Medical Officer for the Year 1938.





COUNTY BOROUGH OF IPSWICH.

Annual Report

of the

Medical Officer of Health and School Medical Officer for 1938.

By J. W. HUNTER, M.D., Ch.B., B.Hy., D.P.H., Medical Officer of Health,

School Medical Officer, Superintendent Isolation Hospital,
Medical Officer to the Ipswich Port
Sanitary Authority, etc.

IPSWICH :

EAST ANGLIAN DAILY TIMES CO., LTD.

1939.

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Gounty Borough of Ipswich.

Public Health Department, Elm Street,

IPSWICH.

LADIES AND GENTLEMEN,

I have the honour to present my Annual Report for the year 1938.

This is my first Report to your Authority, but unfortunately, due to the tremendous amount of extra duties thrown on the Health Department under the Air Raid Precautions Scheme there has been considerable delay in preparing the Report. In addition to this, the usual time allotted for consideration of many of the Public Health problems from the statistics available has been curtailed, and therefore I apologise sincerely for any shortcomings which may be apparent.

I wish to tender my thanks to the various Committees of the Local Authority who have supported me in a rather difficult period and helped me to get over an unusual burden of work.

In particular, I wish to record my sincere thanks to all members of the staff who have given unstinted services, not only in their routine Public Health work but also in giving up much of their off-duty time to the sections involved in the Medical Services of the Air Raid Precautions Scheme.

I have the honour to be,

Ladies and Gentlemen,

Your obedient Servant,

J. W. HUNTER, M.D., CH.B., B.HY., D.P.H.

Medical Officer of Health.

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COUNTY BOROUGH OF IPSWICH.

Public Health Officers of the Authority.

December 31st, 1938.

MEDICAL (Whole Time).

Medical Officer of Health, School Medical Officer, Tuberculosis Officer and Superintendent, Ipswich Isolation Hospital.

J. W. HUNTER, M.D., CH.B. (Edin.), B.HY. D.P.H. (Durham).

Senior Assistant Medical Officer of Health, etc., etc.

A. W. GAYE, B.A., M.B., B.CH., D.P.H. (Camb. & Manch.).

Assistant Medical Officer of Health for Maternity and Child Welfare:

DORIS E. P. JOLLY, M.B., B.S., M.R.C.S., L.R.C.P., M.M.S.A., D.P.H.

Assistant Medical Officers of Health and Assistant School Medical Officers:

R. PHILPOTT, M.A., M.R.C.S. (Eng.) L.R.C.P. (London). (and Clinical Tuberculosis Officer).

IRIS M. CULLUM, M.D., B.S. (London), D.P.H.

M. MARKOWE, M.D., B.S. (London), L.R.C.P., M.R.C.S., D.P.H. (and Resident Medical Officer, Ipswich Isolation Hospital).

(Appointed 5th July, 1938.

Medical Superintendent, Ipswich Sanatorium, W. F. SUTCLIFFE, M.R.C.S., L.R.C.P.

Assistant Medical Officer, Ipswich Sanatorium.
E. J. P. McDOWELL, I.M.S.S.A.
(Resigned 1939).

Resident Medical Officer, Heathfields Municipal Hospital.
DOROTHY E. EGLINGTON, M.R.C.S., L.R.C.P.

Part Time.

Acting Medical Officer V.D. Clinic.

R. F. WARD, M.B., B.S., F.R.C.S. (Edin.) (Appointed Medical Officer, 26.1.39).

Medical Officer Heathfields Municipal Hospital and St. John's Home.

F. R. STANSFIELD, M.D., B.S., F.R.C.S. L.R.C.P. (Resigned, 1939).

Public Vaccinator.

H. W. FAREBROTHER, M.R.C.S., L.R.C.P., (London).

Consultants.

Orthopædics.

E. C. BELL JONES, M.B., B.S. (Melb.), F.R.C.S. (Eng.), M.CH. Puerperal Fever.

F. R. STANSFIELD, M.D., B.S., F.R.C.S., L.R.C.P.

DENTAL SURGEONS (Whole Time).

Education and Public Health.

T. A. EDMONDSON, L.D.S., R.C.S. (Eng.). (Resigned 12/7/39).

A. W. T. WARD, L.D.S., R.C.S. (Eng.). R. CUTHILL, L.D.S. (U. Liverpool).

OTHER OFFICERS (Whole Time).

Chief Sanitary Inspector. H. L. BATY. 1, 2.

District Sanitary Inspectors

G. ELLISON. 1, 2. L. J. MASSAM. 1, 2. W. L. BROWN. 1, 2. T. S. ELLIS. 1, 2. A. STUBBS. 1, 2. A. E. INNES. 1, 2.

Health Visitors.

Miss F. PEPPER. 3, 4, 5.

" F. M. CROSS. 3, 4, 5.

" M. SANDBACH. 3.

(Resigned 12/8/39).

" L. COOKE. 3, 4, 5.

Miss M. SPRINGETT. 3, 4, 5.

" D. MACINTOSH. 3, 4, 5.

" D. D. WOODCOCK. 3, 4, 5.

(Commenced 30/5/38).

" E. JONES. 3.

Matron Isolation Hospital.

Miss L. MARTINDALE. 3. (Commenced 16/8/38).

Midwives, Maternity Home.

Miss G. KENNY. 3, 4. Miss A. T. McLAUGHLIN. 3, 4. ... M. N. FIDOE. 3, 4. ... D. G. HEWITT. 3, 4.

Municipal Midwives. Miss C. E. CURRAN. 3, 4. Miss P. P. ADAMS. 3, 4. Mrs. A. F. B. GIRLING. 4. .. H. M. MAUN. 3, 4. (Resigned 31/7/39). .. M. P. OSBORN. 3, 4. Miss H. M. MOORE. 3, 4. (Resigned 1/9/39). ., E. A. ROBERTS. 3, 4. M. A. POTTS. 3, 4. (Resigned 28/2/39). (Commenced 18/7/38). ., F. R. PANNIFER. 3, 4. Mrs. H. M. HULME. 3, 4. (Commenced 1/10/38). (Commenced 1/10/38).

Chief Clerk.

H. I. WALTON, 1.

Part Time.

Public Analyst.
W. LINCOLNE SUTTON, F.I.C.

Vaccination Officers.

Ipswich (Eastern) Sub-District, S. JAMES.

Ipswich (Western) Sub-District, H. J. WALTON.

Matron, Maternity Home. Miss M. BLYTH, 3, 4, 5.

1.—Sanitary Inspectors Certificate R.S. Institute. 3.—Trained Nurse.

2.—Meat Inspectors Certificate. 4.—Certificate of C.M.B.

5.—Health Visitors Certificate R.S.I.

SECTION A.

STATISTICS AND SOCIAL CONDITIONS OF	THE	AREA.
Area of the Borough in Acres (land)		8,629
Population:—		
Census, 1931		87,557
Registrar-General's Estimate Mid-year, 1938		95,070
Number of Inhabited Houses:—		
Census, 1931		21,923
		29,250
Rateable Value (31st December, 1938)		£635,140
Sum represented by a Penny Rate (31st December, 193	(88)	£2,432

SOCIAL CONDITIONS, INCLUDING THE CHIEF INDUSTRIES CARRIED ON IN THE AREA, AND THE EXTENT OF UNEMPLOYMENT.

Ipswich is a County Borough and the capital of Suffolk. It is the centre of an agricultural district but it is also situated at the end of an arm of the sea on the River Orwell which gives access to vessels of considerable tonnage, and Ipswich is a port enjoying a fair amount of trade.

Ipswich possesses many fine parks and open spaces and the total available to the public is approximately 480 acres.

The principal industries include engineering (agricultural and general), the manufacture of clothing, fertilizers, tobacco, etc., and in addition, the factories and works in or adjacent to the town include a beet sugar factory, bacon factory, yeast factory, flour mills, maltings, etc.

EXTENT OF UNEMPLOYMENT.

Number of unemployed registered during each of the quarter months:—

	Man	Waman	Tot	tals.
	Men.	Women.	1938.	1937.
March	 1,697	326	2,023	2,605
June	 1,739	244	1.983	1,422
September	 1,862	311	2,173	1,490
December	 2,326	243	2.569	1,779

Expenditure on Public Assistance Relief during the year:— £39,934.

Average weekly number in receipt:—2,069, the average number of cases being 1,091.

EXTRACTS FROM VITAL STATISTICS OF THE YEAR 1938.

Relating to the net births and deaths after correction for inward and outward transfers as furnished by the Registrar-General.

		Total.	Μ.	F.		
LIVE BIRTHS	Legitimate	1.400	728	672	Birth Rate	per 1.000
,, ,,	Illegitimate			35	of the cresident po	estimated
Total		1,459	752			opulation
STILLBIRTHS	Legitimate	53	33	20)	Rate per 1,	000 total
,,	Illegitimate	2	1	1	(live and sti	
T	otal	55	34	21	36.	.3
Deaths		1,071	546	525	Death-rate of the resident p	opulation
Deaths from	puerperal o	causes:—				
	1 1			R	ate per 1,0	000 total
			Death	is. (l	ive and stil	l) births.
	eral Sepsis Puerperal ca		1		0.66 0.66	
	Total		2		1.32	
Death-rate o	f Infants und	ler one v	ear of a	ige:—		
All in Legit	fants per 1,00 imate infants timate infants	00 live bi	rths O legitin	 nate liv	ve births	44 46 17
				Male	es. Females.	Total.
Deaths from	Cancer (all a	ges)		. 70	92	162
,,	Measles (all			. 0	0	0
,,	Whooping C			0	1	1
,,	Diarrhoea (1			f . 5	1	6
	age)					

POPULATION.

The following Table shows the changes that have taken place in the numbers of the population of Ipswich since the first census in 1801:

Yеаг.	Cens	us Populat	ions.		Popula	ition Incre	ases		Female
i cai.	Males.	Females.	Persons.	Total	Per cent.	Natural	Migr	ations.	1,000 Males
	Maics.	remaies.	reisons.	Increases.	Proportions.	Increases	Inward.	Outward.	Marcs.
1801	4,984	6,293	11,277	_	_	_		-	1,262
1811	6,064	7,606	13,670	2,393	21.2	_			1,254
1821	7,831	9,355	17,186	3,516	25.6			-	1,194
1831	9,169	11,032	20,201	3,015	17.5	_		-	1,203
1841	11,894	13,490	25,384	5,185	25.6	_	_		1,134
1851	15,474	17,440	32,914	7,530	29.6	2,822	4,708		1,127
1861	17,667	20,283	37,950	5,036	15.3	4.075	961		1.148
1871	20,047	22,900	42,947	4.997	13.1	4,373	624		1,143
1881	23,608	26,712	50,320	7,373	17.1	5,290	2,083		1,131
1891	26,658	30,712	57,360	7,040	13.9	7,033	7	_	1,151
1901	31,181	35,449	66,630	9,270	16.1	6,610	2,660	-	1,136
1911	34,980	38,952	73,932	7,302	10.9	8,232		930	1,113
1921	37,359	42,012	79,371	5,439	7.4	5,979		540	1,124
1931	41,285	46,217	87,502	8,131	10.2	5,616	2,515	_	1,119
1931	41,412	46,358	87,770*	_	_		_		_
1932	41,850	46,850	88,700*		_	-	-		_
1933	42.025	47,045	89,070*		_		_		
1934	42,538	47,619	90,157*	_	_	-	-	-	-
1935	43,124	48,276	91,400*	_	_		-	-	
1936	43,628	48,842	92,470*	_		-	-		
1937	44,290	49,580	93,870*	-	_				-
1938	44,860	50,210	95,070*				_		

^{*} Registrar General's estimates.

The Registrar-General's estimate of the population of Ipswich at the middle of 1938 was 95,070, an increase of 1,200.

Thus the estimate shows a continual increase in the population of the Borough from the 1931 census up to the middle of 1938 of 7,300 persons.

This increase is, of course, only in part due to the natural increase of the population which for 1938 was representing the excess of births over deaths, the remainder being due to the difference between immigration and emigration in relation to the Borough.

It must be remembered that the Registrar-General's figure for the mid-year population is only an estimate based on the previous Census figure of 1931. The next exact figure for the local population will only be available at the next Census, 1941.

MARRIAGES.

The number of marriages registered in Ipswich in 1938 was 770.

The following is a Table showing the number of marriages and the marriage rate since 1841:—

Periods.	No. of Marriages.	Marriage ra	tes per 1000 living.
		Ipswich.	England & Wales
1841-1850	2,815	19.43	16.1
1851-1860	3,302	18.70	16.9
1861-1870	3,550	17.64	16.6
1871-1880	4,143	17.77	16.2
1881-1890	4,152	15.37	14.9
1891-1900	4,777	15.43	15.6
1901-1910	5,209	14.86	15.5
1911-1920	6,819	17.83	16.6
1921-1930	6,740	16.20	15.5
1841-1845	1,239	18.29	15.7
1846 - 1850	1,576	20.42	16.5
1851—1855	1,689	19.84	17.1
1856-1860	1,613	17.65	16.7
1861—1865	1,790	18.35	16.8
1866 - 1870	1,760	16.96	16.4
1871-1875	2,072	18.56	17.1
1876 - 1880	2,071	17.04	15.3
1881—1885	2,170	16.59	15.2
1886-1890	1,982	14.22	14.7
1891-1895	2,326	15.60	15.1
1896-1900	2,451	15.28	16.1
1901-1905	2,560	14.99	15.6
1906-1910	2,649	14.73	15.3
1911—1915	3,201	16.94	16.4
1916-1920	3,618	18.70	16.8
1921-1925	3,316	16.34	15.7
1926-1930	3,424	16.06	15.4
1931—1935	3,650	16.32	16.2
1931	679	15.48	15.6
1932	694	15,72	15.2
1933	713	16.00	15.7
1934	798	17.70	16.9
1935	766	16.76	17.2
1936	808	17.47	17.4
1937	823	19.66	
1938	770	16.20	

The highest marriage-rate recorded in Ipswich was 23.1 in 1919, and the lowest 13.0 in 1887.

BIRTHS.

1,459 births were registered in Ipswich in 1938 as compared with 1,393 in the previous year.

The births and birth-rates are set forth in the following Table:-

		Number.		Rates per	1,000 living.
Periods.	Males.	Females.	Persons.	Ipswich.	England and Wale
1841-1850	4.783	4,608	9.391	32.4	32.6
1851-1860	6,088	5,837	11,925	33.7	34.1
1861-1870	6,805	6,488	13,293	33.0	35.2
1871—1880	8,005	7,606	15,611	33.4	35.4
1881-1890	8,619	8,485	17,104	31.6	32.4
1891-1900	9,058	8,729	17,787	28.7	29.9
1901—1910	9,586	9,212	18.798	26.8	27.2
1911-1920	8,436	8,102	16,538	21.6	21.8
1921—1930	7,602	7,396	14,998	18.0	18.3
1841-1845	2,036	2,056	4,092	30.2	32.3
1846-1850	2,747	2,552	5,299	34.3	32.8
1851-1855	2,914	2,864	5,778	33.9	33.9
1856-1860	3,174	2,973	6.147	33.6	34.4
1861-1865	3,308	3,144	6,452	33.0	35.1
1866-1870	3,497	3,344	6,841	32.9	35.3
1871-1875	3,820	3,646	7,466	33.4	35.5
1876-1880	4,185	3,960	8,145	33.5	35.3
1881-1885	4,258	4,230	8,488	32.4	33 5
1886-1890	4,361	4.255	8,616	30.9	31.4
1891-1895	4,444	4,339	8,783	29.4	30.5
1896-1900	4.614	4,390	9,004	28.0	29 3
1901-1905	4,899	4,719	9,618	28.1	28.2
1906-1910	4,687	4,493	9,180	25.5	26.3
1911-1915	4,481	4,271	8,752	23.1	23.6
1916-1920	3,955	3,831	7,786	20.1	20.1
1921-1925	3,829	3,883	7,712	19.0	19.9
1926-1930	3,773	3,513	7,286	17.1	16.7
1931—1935	3,395	3,310	6,705	14.9	-
1921	844	880	1,724	21.7	22.4
1922	773	813	1.586	19.7	20.6
1923	782	766	1,548	19.1	19.7
1924	735	698	1,433	17.5	18.8
1925	695	726	1,421	17.1	18.3
1926	777	763	1,540	18.4	17.8
1927	729	687	1,416	16.8	16.7
1928	768	656	1,424	16.7	16.7
1929	725	713	1,438	16.7	16.3
1930	774	694	1,468	16.9	16.3
1931	702	669	1,371	15.6	15.8
1932	671	692	1,363	15.4	15.3
1933	660	614	1,274	14.3	14.4
1934	657	634	1,291	14.3	14.8
1935	705	701	1,406	15.3	14.7
1936	701 726	677	1,378	14.9	14.8
1937 1938	736	657 707	1,393	14.8	14.9
1000	752	707	1,459	15.4	15.1

The birth-rate for 1938 was 15.4 showing an increase on the last few years of this decade and comparing with the birth-rate of 15.1 per 1,000 for England and Wales and 15 per 1,000 for the 126 County Boroughs and great towns (including London).

ANNUAL NUMBER OF BIRTHS BY SEX AND LEGITIMACY.

The local experience since 1921 is shown thus:—

Year.	1	egitima.	ite.	I	llegitim	ate.	1	All Birt	hs.	Males
	М.	F	P.	M.	F.	Ρ.	M.	F.	P.	1,000 Females
1921	808	831	1,639	36	49	85	844	880	1 724	959
1922	731	777	1.508	42	36	78	773	813	1,586	958
1923	754	733	1,487	28	33	61	782	766	1,548	1,021
1924	700	669	1,369	35	29	64	735	698	1,433	1,053
1925	661	695	1,356	34	31	65	695	726	1,421	957
1926	748	735	1,483	29	28	57	777	763	1,540	1,018
1927	689	665	1,354	40	22	62	729	687	1,416	1,061
1928	736	625	1,361	32	31	63	768	656	1,424	1,170
1929	694	678	1,372	31	35	66	725	713	1,438	1,017
1930	742	669	1,411	32	25	57	774	694	1,468	1,115
1921- 1930	7,263	7,077	14,340	339	319	658	7,602	7,396	14,998	1,028
1931	668	635	1,303	34	34	68	702	669	1,371	1,049
1932	641	656	1,297	30	36	66	671	692	1,363	969
1933	625	581	1,206	35	33	68	660	614	1,274	1,075
1934	632	599	1,231	25	35	60	657	634	1,291	1,036
1935	672	664	1,336	33	37	70	705	701	1,406	1,005
1936	677	645	1,322	24	32	56	701	677	1,378	1,035
1937	696	626	1,322	40	31	71	736	657	1,393	1,120
1938	728	672	1,400	24	35	59	752	707	1,459	1,064

M.-Males F.-Females P.-Persons

It is interesting to observe that while there were a greater number of legitimate male babies born compared with female, our illegitimate figure shows the reverse—(24 males and 35 females).

STILL BIRTHS.

There were 34 male and 21 female stillbirths registered, giving a total rate of .58 per 1,000 as compared with .6 per 1,000 population in England and Wales and .65 for the County Boroughs.

DEATHS AND DEATH-RATES FROM ALL CAUSES AT ALL AGES.

The following Table shows the crude death-rates, decennial and quinquennial, since 1841, and annual since 1921, recorded for Ipswich and compared with the corresponding rates for England and Wales.

	No. of D	eaths (In	pswich).	C	rude De	ath-rates	per 100	0 living.	
Periods.	.,,,,,,,			Mal	es.	Fema	iles.	Pers	ons.
	М.	F.	Р.	Ipswich	E. & W.	Ipswich	E. & W.	Ipswich	E-& W
1841—1850	3.245	3,324	6.569	23.86	23 .1	21.62	21.6	22.67	22.4
1851-1860	3,863	3,987	7,850	23.39	23.1	21.22	21.4	22.24	22.2
1861-1870	4,440	4,480	8,920	23.66	23.7	20.84	21.4	22.16	22.5
871-1880	5,273	5,044	10.317	24.15	22.7	20.34	20.1	22.12	21.4
881-1890	5,053	5,016	10,069	20.02	20.3	17.43	18.1	18.64	19.
891-1900	5,649	5,529	11,178	19.56	19.3	16.74	17.1	18.06	18.5
9011910	5,335	5,231	10.566	16.17	16.4	14.09	14.4	15.07	15.
911-1920	5,270	5,283	10,553	14.56	15.9	13.10	13.0	13.19	14.3
921-1930	4,604	4,778	9,382	11.76	12.9	10.88	11.4	11.29	12.
841-1845	1,402	1,417	2,819	22.07	22.1	19.70	20.6	20.81	21.
846-1850	1,843	1,907	3,750	25.43	24.1	23.43	22.6	24.30	23.
851-1855	1,989	1,971	3.960	24.90	23.5	21.80	21.8	23.26	22.
1856-1860	1,874	2,016	3,890	21.97	22.6	20.69	21.0	21.29	21.
1861-1865	2,235	2.314	4.549	24.59	23.7	22.21	21.5	23.32	22.
1866-1870	2,205	2.166	4,371	22.79	23.7	19.56	21.2	21.07	22.
1871-1875	2,586	2,440	5.026	24.78	23.3	20.52	20.7	22.51	22.
1876-1880	2,687	2,604	5,291	23.58	22.1	20.16	19.5	21.76	20.
1881-1885	2,496	2,505	5.001	20.37	20.5	18.01	18.3	19.12	19.
1886-1890	2,557	2,511	5,068	19.69	20.0	16.88	17.8	18.19	18.
1891—1895	2,841	2,760	5.601	20.46	19.8	17.32	17.7	18.78	18.
1896-1900	2,808	2,769	5,577	18.73	18.8	16.20	16.6	17.38	17.
1901—1905	2,692	2,636	5,328	16.80	17.1	14.55	15.0	15.60	16.
1906—1910	2,643	2,595	5,238	15.57	15.6	13.66	13.8	14.56	14.
1911—1915	2,765	2,597	5,362	15.43	15.4	13.06	13.2	14.19	14.
1916 - 1920		2.686	5,191	13.71	16.5	13.14	12.8	13.41	14.
1921-1925		2,330	4,530	11.53	13.0	10.87	11.4	11.18	12.
1926-1930		2,448	4,852			10.89	11.4	11.40	12.
1931—1935		2,648	5,074	11.50		11.21	11.4	11.34	12.
1921	432	459	891	11.56		10.92			
1922	448	526	974	11.86		12.39	11.3	11.22	12.
1923	411	427	838				12.0	12.14	11.
1924	398	403		10.77	12.4	9.96	10.9		
1925	511	515	801 1.026	10.32		9.31	11.5	9.79	12.
1926	440	429	869	13.12		11.78		12.41	12.
1927	516	544	1,060	11.18		9.72	10.9	10.41	11.
1928	481	479		12.99		12.21	11.6	12.58	12.
1929	505	545	960	11.99		10.65	10.9	11.28	11.
1930	462	451	1,050 913	12.46	14.2 12.3	12.01 9.84	12.7 10.7	12.22 10.53	13.
1931	487	542	1.029	11.76	13.0	11.71	11.6	11.73	12.
1932	495	573	1,068	11.88	12.7	12.33	11.4	12.12	12.
1933	487	532	1,019	11.58		11.30	11.7	11.44	12.
1934	478	505	983	11.23	12.5	10.60	11.1	10.90	11.
1935	479	496	975	11.10		10.27	11.1	10.66	11.
1936	533	580	1,113	12.21	12.9	11.87	11.4	12.03	12.
1937	483	535	1,018	10.90		10.79	11.7	10.84	12.
1938	546	525	1,071	12.17	10.2	10.46	11.7	11.27	11.
1000	0.10	020	4 , 10 / 1	A 40 . 1 .		10.40		11.41	111

The number of deaths registered in 1938 was 1,071 and the deathrate was 11.27.

The decennial age distribution of the deaths during the whole period of the last 98 years is shown in the following Table. The figures represent the number of deaths that would have occurred in each decennium had the population of Ipswich been 1,000,000 living in the corresponding age periods.

Decennial age distribution of the death-rates of persons per million living.

55,963 55,317 44,006 31,811 17,207 11,826 7,601 9,920 4,389 2,489 3,618 3,784 2,150 2,290 1,168 1,924 3,087 2,481 1,925 2,438 1,314 1,331 925 1,566 4,139 4,105 2,585 2,954 1,977 1,735 1,252 2,235 5,623 4,708 3,920 4,768 3,034 2,468 2,496 1,373 6,466 6,080 4,012 4,768 3,034 2,887 2,388 2,199 7,905 6,833 5,644 5,231 3,597 2,692 2,882 2,199 7,905 6,833 5,644 5,231 3,597 2,692 2,882 2,199 11,844 10,756 8,906 7,761 5,931 4,460 3,541 5,405 13,298 17,340 13,733 13,090 10,724 10,054 8,251 15,8	-1860. 1861-1870
389 4,589 3,618 3,784 2,150 2,290 1,168 087 2,481 1,925 2,438 1,314 1,331 925 139 2,585 2,954 1,977 1,735 1,252 4,708 3,920 4,237 2,913 2,468 2,496 6,080 4,012 4,768 3,034 2,887 2,358 905 6,833 5,644 5,231 3,597 2,692 2,488 905 6,833 5,644 5,231 3,597 2,692 2,882 905 6,833 5,644 5,231 3,597 2,692 2,882 905 6,833 6,968 6,277 4,159 3,351 3,443 844 10,756 8,906 7,761 5,931 4,460 3,541 885 17,340 13,733 13,090 10,724 10,054 8,350 885 17,340 13,733 14,403 15,326 10,778 <td>67 157 63 013</td>	67 157 63 013
087 2,481 1,925 2,438 1,314 1,331 925 139 4,105 2,585 2,954 1,977 1,735 1,252 6,080 4,012 4,768 3,034 2,468 2,496 466 6,080 4,012 4,768 3,034 2,887 2,496 466 6,080 4,012 4,768 3,034 2,887 2,496 466 6,080 4,012 4,768 3,034 2,887 2,358 905 6,833 5,644 5,231 3,597 2,692 2,358 905 6,833 5,644 5,231 3,597 2,692 2,382 84 10,756 8,906 7,761 5,931 4,159 3,541 84 10,756 8,206 7,850 6,580 8,380 17,340 13,733 13,090 10,724 10,054 8,251 83 17,340 13,733 14,403 15,326 10,778	10
087 2,481 1,925 2,438 1,514 1,531 1,525 139 4,105 2,585 2,954 1,977 1,735 1,252 139 4,105 2,585 2,954 1,977 1,735 1,252 466 6,080 4,012 4,768 3,034 2,887 2,358 905 6,833 5,644 5,231 3,597 2,692 2,882 905 6,833 6,968 6,277 4,159 3,541 844 10,756 8,906 7,761 5,931 4,460 3,541 844 10,756 8,906 7,761 5,931 4,460 3,541 844 10,756 9,786 7,850 6,580 8,380 885 17,340 13,733 13,090 10,724 10,054 8,251 885 17,340 13,733 18,812 14,403 15,326 10,778 839 31,718 28,301 26,058 21,8	099'/
139 4,105 2,585 2,954 1,977 1,735 1,252 2,435 623 4,708 3,920 4,237 2,913 2,468 2,496 1,373 466 6,080 4,012 4,768 3,034 2,887 2,358 2,199 466 6,080 4,012 4,768 3,034 2,887 2,358 2,199 466 6,083 5,644 5,231 3,597 2,692 2,882 2,199 836 6,988 6,068 6,277 4,159 3,541 3,246 844 10,756 8,906 7,761 5,931 4,460 3,541 5,405 298 17,340 13,733 13,090 10,724 10,054 8,251 8,859 885 17,340 13,733 18,812 14,403 15,326 10,778 15,462 895 23,513 43,228 35,340 37,494 38,747 32,365 839 23,523	4.877
623 4,708 3,920 4,237 2,913 2,468 2,496 1,373 66 6,080 4,012 4,768 3,034 2,887 2,358 2,199 905 6,833 5,644 5,231 3,597 2,692 2,882 2,199 805 6,833 5,644 5,231 3,597 2,692 2,882 2,199 806 6,833 6,968 6,277 4,159 3,541 3,246 84 10,756 8,906 7,761 5,931 4,460 3,541 5,405 885 17,340 13,733 13,090 10,724 10,054 8,380 6,786 885 17,340 13,733 13,090 10,724 10,054 8,380 6,786 839 31,718 28,301 26,058 21,874 32,346 32,365 839 43,228 35,340 38,747 32,365 770 126,582 110,054 104,521 106,149	6,355
456 6,080 4,012 4,768 3,034 2,887 2,358 2,199 905 6,080 4,012 4,768 3,597 2,692 2,882 2,846 905 6,833 5,644 5,231 3,597 2,692 2,882 2,846 905 6,833 5,644 5,231 3,597 2,692 2,882 2,846 836 6,968 6,277 4,159 3,351 3,443 3,246 844 10,756 8,906 7,761 5,931 4,460 3,541 5,405 298 13,916 12,076 9,786 7,850 6,580 8,380 6,786 885 17,340 13,733 13,090 10,724 10,054 8,251 8,859 885 17,340 13,733 18,812 14,403 15,326 10,778 15,462 839 31,718 28,301 26,058 21,854 21,803 22,2560 595 73,151	2,4,0
466 6,080 7,012 7,703 3,597 2,692 2,882 905 6,833 5,644 5,231 3,597 2,692 2,882 836 6,833 6,968 6,277 4,159 3,351 3,443 844 10,756 8,906 7,761 5,931 4,460 3,541 298 13,916 12,076 9,786 7,850 6,580 8,380 885 17,340 13,733 13,090 10,724 10,054 8,251 885 17,340 20,971 18,812 14,403 15,326 10,778 839 23,510 20,971 18,812 14,403 15,326 10,778 839 31,718 28,301 26,058 21,854 21,803 21,803 839 53,553 39,489 43,228 35,340 37,494 38,747 803 73,151 73,039 64,074 59,050 57,701 67,706 780 174,92	8,40/
905 6,833 5,644 5,231 3,397 2,992 6,502 6,503 6,968 6,277 4,159 3,351 3,443 6,968 13,916 12,076 9,786 7,850 6,580 8,380 17,340 13,733 13,090 10,724 10,054 8,251 8,251 17,340 13,733 13,090 10,724 10,054 8,251 8,251 8,393 31,718 28,301 26,058 21,854 21,377 21,803 33,449 43,228 35,340 37,494 38,747 26,582 110,158 102,907 93,126 103,764 104,521 1780 174,921 158,938 157,321 148,959 160,719 144,970 126,582 110,158 102,907 93,126 103,764 104,521 158,938 157,321 264,063 252,801 290,000 11,348 10,844	8,919
636 9,823 6,968 6,277 4,159 3,351 3,443 844 10,756 8,906 7,761 5,931 4,460 3,541 298 13,916 12,076 9,786 7,850 6,580 8,380 885 17,340 13,733 13,090 10,724 10,054 8,251 809 23,510 20,971 18,812 14,403 15,326 10,778 839 31,718 28,301 26,058 21,854 21,377 21,803 993 53,553 39,489 43,228 35,340 37,494 38,747 993 53,553 39,489 43,228 35,340 37,494 38,747 595 73,151 73,039 64,074 59,050 57,701 67,706 770 126,582 110,158 102,907 93,126 104,521 780 174,921 158,938 157,321 148,959 160,719 144,970 7426 263,544	9.703
844 10,756 8,906 7,761 5,931 4,460 3,541 884 13,916 12,076 9,786 7,850 6,580 8,380 885 17,340 13,733 13,090 10,724 10,054 8,251 809 23,510 20,971 18,812 14,403 15,326 10,778 839 31,718 28,301 26,058 21,854 21,377 21,803 839 31,718 28,301 26,058 21,854 21,377 21,803 839 31,718 28,301 26,058 21,854 38,747 839 35,553 39,489 43,228 35,340 37,494 38,747 830 73,151 73,039 64,074 59,050 57,701 67,706 770 126,582 1102,907 93,126 104,521 144,970 780 174,921 158,938 157,321 264,063 252,801 290,000 426 263,544	12,670
298 13,916 12,076 9,786 7,850 6,580 8,380 885 17,340 13,733 13,090 10,724 10,054 8,251 209 23,510 20,971 18,812 14,403 15,326 10,778 839 31,718 28,301 26,058 21,854 21,377 21,803 993 53,553 39,489 43,228 35,340 37,494 38,747 595 73,151 73,039 64,074 59,050 57,701 67,706 770 126,582 110,158 102,907 93,126 104,521 780 174,921 158,938 157,321 148,959 160,719 144,970 426 263,544 245,378 249,051 264,063 252,801 290,000 642 18,061 15,074 13,799 11,299 11,348 10,844	12,070
885 17.340 13,733 13,090 10,724 10,054 8,251 209 23,510 20,971 18,812 14,403 15,326 10,778 209 31,718 28,301 26,058 21,854 21,377 21,803 35,340 37,494 38,747 21,803 23,553 39,489 43,228 35,340 37,494 38,747 21,803 73,151 73,039 64,074 59,050 57,701 67,706 770 126,582 110,158 102,907 93,126 103,764 104,521 178,921 158,938 157,321 148,959 160,719 144,970 144,970 1426 263,544 245,378 249,051 264,063 252,801 290,000 11,348 10,844	12,017
885 17,340 13,733 13,090 10,724 10,034 0,234 10,778 209 23,510 20,971 18,812 14,403 15,326 10,778 21,803 31,718 28,301 26,058 21,854 21,377 21,803 35,340 37,494 38,747 25,555 73,151 73,039 64,074 59,050 57,701 67,706 770 126,582 110,158 102,907 93,126 103,764 104,521 178,921 158,938 157,321 148,959 160,719 144,970 144,970 1426 263,544 245,378 249,051 264,063 252,801 290,000 11,348 10,844	16,907
209 23,510 20,971 18,812 14,403 15,326 10,778 839 31,718 28,301 26,058 21,854 21,377 21,803 993 53,553 39,489 43,228 35,340 37,494 38,747 595 73,151 73,039 64,074 59,050 57,701 67,706 770 126,582 110,158 102,907 93,126 103,764 104,521 780 174,921 158,938 157,321 148,959 160,719 144,970 426 263,544 245,378 249,051 264,063 252,801 290,000 642 18,061 15,074 13,799 11,299 11,348 10,844	18.117
839 31,718 28,301 26,058 21,854 21,377 21,803 993 53,553 39,489 43,228 35,340 37,494 38,747 595 73,151 73,039 64,074 59,050 57,701 67,706 770 126,582 110,158 102,907 93,126 103,764 104,521 780 174,921 158,938 157,321 148,959 160,719 144,970 426 263,544 245,378 249,051 264,063 252,801 290,000 642 18,061 15,074 13,799 11,299 11,348 10,844	25,083
993 53,553 39,489 43,228 35,340 37,494 38,747 595 73,151 73,039 64,074 59,050 57,701 67,706 770 126,582 110,158 102,907 93,126 103,764 104,521 780 174,921 158,938 157,321 148,959 160,719 144,970 426 263,544 245,378 249,051 264,063 252,801 290,000 642 18,061 15,074 13,799 11,299 11,348 10,844	22,22
595 73,131 73,039 64,074 59,050 57,701 67,706 770 126,582 110,158 102,907 93,126 103,764 104,521 780 174,921 158,938 157,321 148,959 160,719 144,970 426 263,544 245,378 249,051 264,063 252,801 290,000 642 18,061 15,074 13,799 11,299 11,348 10,844	20,177
770 126,582 110,158 102,907 93,126 103,764 104,521 780 174,921 158,938 157,321 148,959 160,719 144,970 7426 263,544 245,378 249,051 264,063 252,801 290,000 7642 18,061 15,074 13,799 11,299 11,348 10,844	51,754
770 126,582 110,158 102,907 93,126 103,764 104,521 780 174,921 158,938 157,321 148,959 160,719 144,970 426 263,544 245,378 249,051 264,063 252,801 290,000 642 18,061 15,074 13,799 11,299 11,348 10,844	59.694
780 174,921 158,938 157,321 148,959 160,719 144,970 1426 263,544 245,378 249,051 264,063 252,801 290,000 15,074 13,799 11,299 11,348 10,844	100 001
426 263,544 245,378 249,051 264,063 252,801 290,000 642 18,061 15,074 13,799 11,299 11,348 10,844	144,445
642 18,061 15,074 13,799 11,299 11,348 10,844	1/0,212
642 18,061 15,074 13,799 11,299 11,348 10,844	283.783
	22,241 22,162 22,127

DEATHS AND DEATH-RATES OVER 70 YEARS OF AGE.

			Deaths	and Death	-rates over	0 years of a	ge.						
Periods.		Deaths.		1	Death-rates.		Proportions of Total Deaths at all ages.						
	М.	F.	P.	M.	F.	P.	М.	F.	P.				
1841-1850	427	537	964	122.000	116.133	118.660	13.15	16.15	14.6				
1851-1860	513	657	1,170	118.012	108.272	112.337	13.27	16.47	14.90				
1861-1870	626	773	1,399	118.269	100.520	107.756	14.09	17.25	15.6				
1871-1880	801	1,045	1,846	131.462	119.414	124.360	15.19	20.71	17.8				
1881-1890	849	1,046	1,895	121.130	106.712	112.723	16.80	20.85	18.7				
1891-1900	983	1,301	2,284	116.427	111.587	113.620	17.40	23.53	20.4				
1901-1910	1,130	1,463	2,593	116.004	104.002	108.912	21.18	27.96	24.5				
1911-1920	1,268	1,702	2,970	114.637	96.452	103.459	24.06	32.21	28.1				
1921-1930	1,477	2,045	3,522	104.182	90.820	95.982	32.08	42.80	37.5				
1841-1845	195	253	448	120.000	119.114	119.498	13.90	17.85	15.9				
1846-1850	232	284	516	123.733	113.600	117.942	12.58	14.89	13.7				
1851-1855	260	314	574	125.120	109.943	116.335	13.07	15.93	14.4				
1856-1860	253	343	596	111.502	106.787	108.739	13.50	17.01	15.3				
1861-1865	310	369	679	123.950	102.357	111.202	13.87	15.94	14.9				
1866-1870	316	404	720	113.180	98.898	104.696	14.33	18.65	16.4				
1871-1875	414	515	929	138.322	118.227	126.411	16.00	21.10	18.4				
1876-1880	387	530	917	124.838	120.591	122.348	14.40	20.35	17.3				
1881-1885	414	497	911	124.736	107.250	114.547	16.58	19.84	18.2				
1886-1890	435	549	984	117.886	106.230	111.086	17.01	21.86	19.4				
1891-1895	470	637	1,107	116.192	112.963	114.312	16 54	23.07	19.7				
1896-1900	513	664	1,177	116.643	110.299	112.977	18.26	23.97	21.1				
1901-1905	529	665	1,194	111.933	100.590	105.318	19.65	25.22	22.4				
1906-1910	601	798	1,399	119.840	107.027	112.180	22.73	30.75	26.7				
1911-1915	656	838	1,494	122.800	100.407	109.146	23.72	32.26	27.8				
1916-1920	612	864	1,476	107.011	92.903	98.275	24.43	32.16	28.4				
1921-1925	651	970	1,621	100.540	92.345	95.468	29.59	41.63	35.7				
1926-1930	826	1,075	1,901	107.244	89.486	96.424	34.35	43.91	39.1				
1931-1935	956	1,197	2,153	111.085	90.916	98.916	39.40	45.20	42.4				
1936	233	255	488	130.825	93.646	108.348	43.63	44.04	43.8				
1937	206	271	477	114.001	98.046	104.353	42.65	50.65	46.8				
1938	220	267	487	120.218	95.391	105.206	40.15	50.85	45.3				

M.-Males F.-Females P.-Persons

THE PRINCIPAL CAUSES OF DEATH AT ALL AGES FOR 1938.

	N	fales.	Fer	males.	Per	sons.
Causes of Death-	No.	Death- rates.	No	Death- rates-	No.	Death rates.
Heart Diseases	109	1.89	151	3.01	260	2.74
Cancer	70	1.56	92	1.83	162	1.67
Bronchitis	11	.25	12	.23	23	.24
Cerebral Hæmorrhage						
etc.	36	.80	23	.46	59	.61
Pneumonia	27	.60	27	.54	54	.56
Influenza	6	.13	6	.12	12	.12
Tuberculosis	28	.62	29	.58	57	.59
Violence	40	.89	17	.34	57	.59
Bright's Disease	18	.40	13	.24	31	.32
Other Circ. Diseases	33	.74	27	.54	60	.62
Prematurity and						
Debility	25	.56	15	.26	40	.41
Senility	3	.06	10	.20	13	.13
All Other Causes	140	3.12	103	2.09	243	2.54
Total all Causes	546	12.23	525	10.50	1,071	11.27

MONTHLY AND SEASONAL DEATH-RATES FOR PERSONS

Month	1841— 1880	1881— 1900.	1901— 1910.	1911— 1920.	1921— 1930.	1931— 1935.	1937.	1938.
January	24.02	21.52	18.64	15.81	15.60	12.59	15.80	13.13
February	24,21	20.37	18.19	19.22	15.23	15.61	15.83	13.71
March	23.40	21.49	16.74	16.61	13.70	14.72	11.41	10.53
April	21.88	18.36	14.95	14.34	11.70	11.32	11.79	9.47
May	20.95	16.33	14.16	12.86	9.98	10.25	8.02	12.01
June	19.25	14.89	12.29	11.32	9.61	11.05	9.72	10.62
July	18.00	15.15	11.96	10.57	9.03	9.43	9.53	9.78
August	23.11	19.08	14.01	11.43	8.80	9.61	9.53	9.29
September	25.66	18.95	14.64	12.01	8.61	9.03	10.62	12.16
October	21.59	17.12	13.66	12.13	10.06	9.45	8.90	9.04
November	21.17	17.37	15.28	16.08	10.84	10.59	9.72	11.90
December	24.05	20.45	16.50	13.65	12.48	12.72	9.65	13.75
Whole Year	22.27	18.33	15.00	13.80	11,27	11.34	10.84	11.27

The highest mortalities, as would be expected, are shown in the winter months, with an unusually high incidence for May and September.

QUARTERLY DEATH-RATES FOR PERSONS.

	Ma	arch.	Ju	ine.	Septe	ember.	De	cember.
Decennial Periods.	Deat	h-rates.	Deat	h-rates.	Deat	h-rates.	Deat	h-rates.
	Ipswich	England & Wales.	Ipswich	England & Wales.	Ipswich	England & Wales.	Ipswich	England & Wales
1841-1850	24.05	24.7	21.12	22.0	23.09	21.0	22.44	21.7
1851-1860	23.61	24.7	20.56	22.1	22.34	20.3	22.45	21.9
1861-1870	23.84	25.2	20.38	21.8	22.18	21.0	22.26	22.1
1871-1880	24.05	23.7	20.81	20.9	21.60	19.6	22.07	21.3
1881-1890	20.92	21.6	17.15	18.7	17.18	17.3	19.29	19.1
1891-1900	20.69	20.7	15.99	17.6	18.17	17.0	17.41	17.7
1901-1910	17.84	17.7	13.89	14.6	13.53	13.8	15.15	15.4
1911-1920	17.15	17.2	12.84	13.6	11.32	11.8	13.93	15.0
1921-1930	14.83	15.5	10.42	11.7	8.82	9.5	11.12	11.8
1931	16.10	16.5	10.93	11.5	9.41	9.6	10.54	11.7
1932	17.10	15.4	10.23	11.6	9.45	9.7	11.56	11.5
1933	13.52	17.1	10.76	10.8	9.75	9.4	11.75	12.0
1934	13.13	14.6	10,88	11.8	9.31	9.6	10.84	11.2
1935	11.67	13.2	11.62	12.0	9.20	9.8	10.20	12.0
1936	14.44	15.1	12.17	11.8	9.63	9.7	11.91	12.0
1937	14.30	16.2	9.82	11.6	9.89	9.7	9.42	12.3
1938	11.78		10.39	_	10.06	_	11.40	

MORTALITY FROM THE SEVEN PRINCIPAL ZYMOTIC DISEASES.

The group includes Enteric Fever, Smallpox, Scarlet Fever, Diphtheria, Measles, Whooping Cough and Diarrhoea under two years of age.

The Table gives the decennial and quinquennial experiences for a period of 98 years.

Periods	Ma	ales	Fe	males	Pers	sons
	Nos.	Rates	Nos.	Rates	Nos.	Rates
1841—1850	401	2.94	383	2.49	784	2.70
1851-1860	438	2.65	471	2.50	909	2.57
1861-1870	523	2.78	539	2.50	1062	2.63
1871-1880	737	3.37	688	2.77	1425	3.05
1881-1890	514	2.03	528	1.83	1042	1.92
1891-1900	740	2.56	685	2.07	1425	2,30
1901-1910	486	1.47	443	1.19	929	1.32
1911-1920	347	.95	291	.72	638	.83
1921-1930	130	.33	120	.27	250	.30
1841-1845	121	1.90	103	1.43	222	1.65
1846-1850	280	3.86	280	3.42	562	3.63
1851-1855	229	2.86	249	2.75	478	2.80
1856-1860	209	2.45	222	2.27	431	2.36
1861-1865	309	3.40	340	3.26	649	3.32
1866-1870	214	2.21	199	1.79	413	1.99
1871-1875	389	3.72	339	2.85	728	3.26
1876-1880	348	3.05	349	2.70	697	2.86
1881-1885	215	1.75	253	1.81	468	1.78
1886-1890	299	2.30	275	1.84	574	2.06
1891-1895	321	2.31	304	1.90	625	2.09
1896-1900	419	2.79	381	2.22	800	2.49
1901-1905	280	1.74	244	1.34	524	1.53
1906-1910	206	1.21	199	1.04	405	1.13
1911-1915	230	1.28	193	.97	423	1.1
1916-1920	117	.64	98	.47	215	.53
1921-1925	65	.34	71	.33	136	.33
1926-1930	65	.32	49	.21	114	.26
1931—1935	50	.23	46	.19	96	.2
1931	17	.40	25	.54	42	.4
1932	13	.31	7	.15	20	.2
1933	6	.14	7 7	.14	13	.1-
1934	10	.23	7	.14	17 4	. 13
1935	4	.09	-	.22	4	.0-
1936	5	.11	11	.22	16	. 1
1937	2	.04	2 3	.04	4	.0
1938	9	.20	3	.05	12	.1.

The Zymotic death-rate shows a slight rise this year, and over the last six years tends to show a biennial variation—rising one year and falling the next.

DIARRHOEA.

There were 2 deaths from Diarrhoea in 1938, 1 occurring in the age group 5-15, and the other Over 75.

In the group "Diarrhoea Under 2 years of Age," there were 5 male deaths and 1 female, all occurring in infants under 1 year.

DEATHS FROM DISEASES OF THE RESPIRATORY SYSTEM.

This group includes Laryngitis, Bronchitis, Pneumonia, Pleurisy, Asthma, etc.

A total of 87 deaths (43 males, 44 females) were referred to this group in 1938 as compared with 156, 188, 117, 123 and 127 respectively in the five preceding years.

This is the lowest figure yet recorded in Ipswich for this particular group.

A more detailed sub-division of these deaths is shown below:-

	Males.	Females.	Persons
Bronchitis	11	12	23
Pneumonia Other Respiratory	27	27	54
Diseases	5	5	10

This contrasts strongly with the figures for 1937, which are given below:—

		Males.	Females.	Persons
Bronchitis .		42	37	79
Pneumonia . Other Respirator	 rv	39	33	72
Diseases .		3	2	5

The general facts in connection with the Respiratory Death-Rates are given in this Table:—

1841—1850 1851—1860	М.				eath-Rat		Male deat per 1,000 Female		
		F.	P.	M.	F.	Р.	Female deaths.		
1851-1860	502	471	973	3.68	3.06	3.35	1,065		
	636	558	1194	3.84	2.96	3.37	1,139		
1861-1870	704	657	1361	3.67	3.05	3.37	1,071		
1871-1880	832	754	1586	3.81	3.03	3,39	1,103		
1881-1890	924	802	1726	3.65	2.78	3.19	1,152		
1891-1900	1063	918	1981	3.67	2.77	3.18	1,158		
1901-1910	788	795	1583	2.38	2.13	2.24	991		
1911-1920	852	820	1672	2.34	2.03	2.18	1,040		
1921-1930	718	774	1492	1.83	1.75	1.79	927		
1841-1845	202	161	363	3.17	2.23	2.67	1,254		
1846-1850	300	310	610	4.13	3.78	3.95	967		
1851-1855	320	284	604	4.00	3.14	3.54	1,126		
1856-1860	316	274	590	3.70	2.81	3.22	1,153		
1861-1865	353	339	692	3.88	3.25	3.54	1,041		
1866-1870	351	318	669	3.62	2.87	3.22	1,103		
1871-1875	384	346	730	3.67	2.90	3.27	1,109		
1876-1880	448	408	856	3.92	3.15	3.51	1,098		
1881-1885	453	406	859	3.69	2.91	3.28	1,115		
1886-1890	471	396	867	3.62	2.66	3.10	1,189		
1891-1895	591	494	1085	4.25	3.06	3.63	1,196		
1896-1900	472	424	896	3.14	2.48	2.78	1,113		
1901-1905	378	402	780	2.35	2.21	2.28	940		
1906-1910	410	393	803	2.41	2.06	2.23	1,043		
1911-1915	465	381	846	2.59	1.91	2.23	1,220		
1916-1920	387	439	826	2.11	2.14	2.13	881		
1921-1925	347	392	739	1.81	1.82	1.81	885		
1926-1930	371	382	753	1.84	1.69	1.76	971		
1931-1935	312	361	673	1.47	1.52	1.50	864		
1931	70	81	151	1.69	1.74	1.72	864		
1932	60	95			2.02				
1933	63	64	127	1.49	1.36	1.42	984		
1934	63	60	123	1.48	1.26	1.36	1,050		
1935	56	61	117	1.29	1.26	1.28	918		
1936	87	101	188	1.99	2.06	2.03	861		
1937 1938	84 43	72 44	156 87	1.89	1.45	1.66	1,166 977		

M.-Males F.-Pemales P.-Persons

The low Respiratory death-rate is probably explained by reference to the quarterly distribution of deaths, where an abnormally low figure is seen in the December quarter. This may have been due to a relatively mild autumn.

AGE AND SEX DISTRIBUTION OF THE DEATH RATES FROM RESPIRATORY DISEASES PER MILLION LIVING.

Ages		-5.			-10,			-15.			-20.		-	25.		-	50.		-35	i.	1	-4	10.			- 45.			-50.			-55			-60				18.			- 90.			+70	
Periods.	M	F.	P.	M.	p.	P.	M.	у.	P.	M.	F.	Р.	м. 1	P. 1	P. 3	M.	F. P.	31	Р.	P.	M	P			34.	F.	P.	М.	P.	P.	м.	F.	P.	34.	P.	P.	M	1	i. P.	М		p.	P.	31.	P.	P.
1841—1880	13,134	11,117	12,140	572	796	685	215	201	208	265	427	353	506 3	11 3	196 6	26 4	99 55	6 1,0	42 59	6 79	8 1,4	78 91	11 1,1	177 1	,567	982	1,248	3,275	1,264	2,195	4,137	2,01	4 2,98	6,27	7 4,46	1 5,29	0 6,45	6 7,0	98 6,81	3 12,8	387 1	0,626	11,648	20,90	18,35	4 19,410
1881-1900	13,671	9,837	11,733	540	485	514	112	173	143	252	167	206	304 2	59 2	279 7	76	43 53	9 5	87 39	3 48	3 1,4	01 82	26 1,0	094 1	,737	929	1,303	2,436	1,495	1,925	3,687	1,81	8 2,67	5,29	3 3,34	6 4,21	9 9,52	7 4,9	78 6,96	9 11,5	979 1	1,576	11,752	21,42	20,54	8 21,049
1901—1910	8,777	8,337	8,541	380	379	380	115	27	70	153	135	157	247 1	22 1	80 4	18	96 24	2 5	27 49	4 50	7 6	37 39	98 5	508	868	317	576	1,580	902	1,216	2,369	1,32	9 1,790	3,03	6 2,05	7 2,50	7 4,04	0 4,3	00 4,19	1 7,3	353	5,852	6,430	19,28	18,13	0 18,606
1911—1920	8,167	5,643	6,900	387	503	445	110	241	176	269	190	227	214 3	24 2	273 2	77 3	38 30	9 3	93 9	8 23	9 6	09 70	05 6	662 1	,198	635	895	1,022	522	755	2,153	75	4 1,40	3,26	6 1,77	2 2,47	0 4,87	6 2,7	96 3,72	0 9,7	274	6,632	7,896	19,97	19,81	0 19,870
1921-1930	4,360	3,252	3,825	248	274	260	55	106	81	172	157	164	226 1	05 1	159 3	25 1	75 24	6 4	50 15	3 29	5 5	84 44	46 5	511	718	469	587	1,139	582	851	1,398	85	1 1,110	1,78	4 1,383	1,56	8 3,42	2,2	44 2,77	7 5,8	321	5,084	5,409	19,53	18,69	5 19,020
1931—1935	2,015	2,728	2,365	55	161	109	112	-	55	221	150	184	235 -	- 1	106 1	13 2	13 16	5 3	87 11	3 24	2 1	42 18	83 1	164	726	126	405	363	613	492	1,344	3.5	9 821	1,99	5 1,12	9 1,53	6 3,11	0 1,3	27 2,13	2 4,2	292	4,741	4,542	16,96	16.40	5 16,665
1936	2,707	2,806	2,755	267	260	263	272		134	-	-	-	284 -	- 1	128			-	-	-	6	87 59	91 6	635	351	305	326	1,405	989	1,190	764	69	5 72	87	6 3,12	0 2,06	3 4,45	6 3,6	68 4,02	4 8,1	154	6,466	7,213	24,70	20,19	8 21,980
1937	2,400	829	1,628	-	-	-	-		-	-	-	-	279 -	- 1	125 8	11 -	- 39	3 -	-	-	1-	- 29	91 1	156	345	602	482	1,384	-	670	1,503	-	71	1,72	7 1,92	1 1,83	0 3,29	3 4,5	16 3,96	4 7,3	04	4,632	5,812	23,24	15,55	7 18,595
1938	3,161	818	2,011	-	-	-	-	-	-	519	-	247	276 -	- 1	129 2	267 -	- 12	9 -	- 12	1 56	9 -	- 33	34	154 1	,024	297	636	684	641	662	1,116	33	8 709	1,28	0 37	9 80	3 3,25	0 2,2	30 2,69	1 3,6	508	4,005	3,829	14,75	11,79	0 12,962

M.—Males F.—Females P.—Persons



QUARTERLY RESPIRATORY DEATH-RATES PER MILLION LIVING.

Periods	March	June	September	. De ember
1841 —1850	5,213	2,978	1,891	3,384
1851-1860	4,963	3,473	1,698	3,431
1861-1870	5,100	3,071	1,991	3,392
1871-1880	5,240	3,030	1,490	3,874
1881-1890	4,857	2,823	1,550	3,579
1891-1900	5,425	2,737	1,411	3,265
1901-1910	3,748	1,918	1,064	2,328
1911-1920	3,798	1,947	872	2,154
1921-1930	3,430	1,321	734	1,712
1931-1935	2,825	1,166	683	1,367
1936	3,698	1,697	1,032	1,721
1937	3,240	940	803	1,690
1938	2,645	844	1,085	710

DEATHS FROM DISEASES OF THE CIRCULATORY SYSTEM.

(a) DISEASES OF THE HEART.

260 deaths (109 males, 151 females) were ascribed to diseases of the heart in 1938, as compared with 219, 226, 230, 201 and 229 in the five preceding years.

This would seem to be a slight increase over the last quin-

quennium.

(b) Deaths Ascribed to Arterio Sclerosis. The Table explains itself:—

Periods.	Arterio-S	clerosis-
T CT TOTAL	Numbers.	Rates
1921—1930	172	.20
1921-1925	51	.12
1926-1930	121	.28
1931—1935	199	.44
1931	20	.22
1932	60	.67
1933	34	.38
1934	37	.41
1935	48	.52
1936	34	.36
1937	32	.34
1938	24	.25

13 males and 11 females—a total of 24 persons were in this group, which includes the large sub-group of Cerebral Vascular accidents (Haemorrhage and Thrombosis) or Apoplexy.

(c) Total Deaths from Diseases of the Circulatory System.

Table showing the decennial and quinquennial distribution of the deaths and death-rates from Diseases of the Heart, and the Blood Vessels:—

	D	eaths and	Death-rat Ci	es of per rculatory	rsons from System.	Diseases o	f the
Periods.	1	Number of	Deaths.		Death-r	ates per 1,	000 living.
	Heart Diseases.	Arterial Diseases.	All Others.	Total.	Heart Diseases.	Arterial Diseases.	All Circula- tory Diseases
1841-1850	146	19	23	188	.503	.065	.648
1851-1860	235	38	11	284	.665	.107	.803
1861-1870	378	52	19	449	.937	.129	1.113
1871-1880	536	61	11	608	1.147	.130	1,301
1881-1890	579	68	9	656	1.071	,125	1.213
1891-1900	742	85	9	836	1.194	.136	1.345
1901-1910	795	71	13	879	1.128	.100	1.254
1911-1920	1,010	155	14	1,179	1.321	.202	1.542
1921-1930	1,158	238	21	1,417	1.389	.285	1.700
1841-1845	57	9	18	84	.420	.066	.619
1846-1850	89	10	5	104	.576	.064	.673
1851-1855	120	18	4	142	.704	.105	.833
1856-1860	115	20	7	142	.629	.109	.776
1861-1865	181	37	8	226	.926	.189	1.157
1866-1870	197	15	11	223	.949	.072	1.074
1871-1875	249	31	6	286	1.115	.138	1.281
1876-1880	287	30	5	322	1.179	.123	1.323
1881-1885	287	26	5 7 2 4	320	1.096	.099	1.220
1886-1890	292	42	2	336	1.045	.150	1.202
1891-1895	341	39	4	384	1.142	.130	1.286
1896-1900	401	46	5	452	1.247	.143	1.405
1901-1905	373	35	7	415	1.092	.102	1.215
1906-1910	422	36	6	464	1.173	.100	1.289
1911-1915	515	85	6	606	1.359	.224	1.602
1916-1920	495	70	8	573	1.277	.180	1.476
1921-1925	486	81	7	574	1.195	.199	1.412
1926-1930	672	157	14	843	1.572	.367	1.972
1931-1935	1,053	247	23	1,323	2.355	.552	2.959
1936	226	41	7	274	2.446	.443	2.965
1937	219	36	7	262	2.333	.383	2.791
1938	260	24	39	323	2.735	.247	3.328

The recent increase in deaths from circulatory causes has been maintained. While, as has been previously pointed out, this increase has in part been due to a more precise certification, there is no doubt that it is in great part due to an absolute increase in arterial diseases, mainly high blood pressure. It is an inevitable accompaniment which we must expect to follow in the wake of our ever-widening sphere of human activity and increased tempo of living.

VIOLENCE.

The decennial and quinquennial deaths and death-rates from Violence are shown in the Table below:—

	Nu	mber of De	aths.	Death-R	ates per 1,0	00 living.
Periods.	Males	Females	Persons	Males	Females	Persons
1841—1850	122	39	161	.89	.25	.55
1851-1860	146	72	218	.88	.38	.61
1861-1870	168	58	226	.89	.26	.56
1871-1880	169	52	221	.77	.20	.47
1881-1890	190	68	258	.75	.23	.47
1891—1900	227	98	325	.78	.29	.52
1901—1910	242	111	353	.73	.29	.50
1911—1920	268	146	414	.74	.36	.54
1921—1930	247	130	377	.62	.29	.45
1841—1845	49	20	69	.77	.27	.50
1846-1850	73	19	92	1.00	.23	.59
1851—1855	73	33	106	.91	.36	.62
1856—1860	73	39	112	.85	.40	.61
1861—1865	91	23	114	1.00	.22	.58
1866—1870	77	35	112	.79	.31	.53
1871—1875	82	20	102	.78	.16	.45
1876—1880	87	32	119	.76	.24	.48
1881—1885	93	32	125	.75		.47
	97				.23	
1886—1890		36	133	.74	.24	.47
1891—1895	97	40	137	.69	.24	.45
1896—1900	130	58	188	.86	.33	.58
1901—1905	120	55	175	.74	.29	.51
1906—1910	122	56	178	.71	.29	.49
1911—1915	137	68	205	.76	.34	.54
1916—1920	131	78	209	.71	.38	.53
1921—1925	113	58	171	.59	.27	.42
1926—1930	134	72	206	.66	.32	.48
1931—1935	145	67	212	.68	.28	.47
1936	32	13	45	.73	.26	.48
1937	30	16	46	.67	.32	.49
1938	40	17	57	.89	.34	.59

57 deaths (40 males and 17 females) were ascribed to violence in 1938 as compared with 46, 45, 30, 41 and 49 respectively in the five preceding years.

18 of these deaths were due to suicide (10 males, and 8 females). This compares with 15 suicides in 1937 and 14 in 1936. The increase in suicide by coal gas poisoning is noticeable—the figure being 10 (6 males and 4 females) for 1938, contrasting with 4 (all males) for 1937.

Hanging was responsible for 3 (1 male, 2 females), and drowning for 1 female death.

Accidental falls and road accidents were responsible for the remaining deaths.

PUERPERAL MORTALITY.

Two deaths were associated with Pregnancy and Childbirth in 1938, as compared with 7 in 1937, 8 in 1936 and an average of 5 for the quinquennium 1931-1935.

The Maternal Mortality rate was thus equal to 1.32 per 1,000 live and still-births.

The Puerperal death-rates per 1,000 births are set forth in the following Table:—

Periods.	Puerperal	Puerperal		All other	Total all causes.								
	Fever.	Hæmorrhage,	Convulsions	Conditions.	No.	Rates							
1841—1850	1.81	.42	.53	1.71	42	4.47							
1851-1860	1.00	.17	1.00	1.60	45	3.77							
1861-1870	.90	.45	.52	1.51	45	3.38							
1871-1880	1.53	.57	.25	1.72	64	4.09							
1881-1890	2.16	.52	.41	1.41	77	4.50							
1891-1900	1.57	.50	.22	1.92	75	4.21							
1901-1910	.63	1.07	.63	1.44	70	3.72							
1911-1920	1.39	.60	.97	1.33	71	4.29							
1921-1930	2.20	.53	.66	.66	61	4.06							
1931 - 1935	1.34	.29	.29	1.64	24	3.57							
1921	1.74	_	_	1.74	6	3.46							
1922	.63		1.89	.63	5	3.15							
1923	1.29	-	-	.64	3	1.93							
1924	1.39	-	.69	.69	4	2.79							
1925	2.81	.70	_	_	5	3.52							
1926	1.94	.65	1.94	1.30	9	5.84							
1927	2.11	1.41	.71	71	7	4.94							
1928	4.91	2.81	.70		12	8.42							
1929	2.08	_	.69	-	4	2.77							
1930	3.40			.68	6	4 08							
1931	1.45	-		.73	3	2.18							
1932	-	.73	.73	2.20	5	3,66							
1933	1.56	.78	.78	.78	5	3.92							
1934	4.64	_		1.54	8	6.19							
1935	.71			1.42	3	2.13							
1936	1.45	1.45	1.45	1.45	8	5.80							
1937	.71	1.43	1.43	1.43	7	5.02							
1938	.66	-	.66	-	2	1.32							

The Maternal Mortality rate (deaths associated with child bearing per 1,000 live and still-births) and the Puerperal Mortality Rate (per 1,000 women living, 15 to 45) were both the lowest ever experienced in Ipswich. This is a figure of which the Health Department, Midwives and Doctors of the town can indeed be proud, and should spur all concerned to eradicate puerperal mortality from Ipswich.

The statistical side of this study is further illustrated in the Table showing Puerperal Mortalities in terms of death-rates of women aged 15-45 years of age:—

Periods.	Number of Deaths.	Death-rates per 1,000 women living 15-45 years of age.
1841—1850	42	.549
1851-1860	45	.504
1861-1870	45	.449
1871-1880	64	.564
1881-1890	77	.580
1891-1900	75	.477
1901-1910	70	.394
1911-1920	71	.373
1921—1930	61	.299
1841—1845	18	.501
1846-1850	24	.592
1851-1855	18	.419
1856-1860	27	.582
1861-1865	25	.509
1866-1870	20	.391
1871-1875	32	.586
1876-1880	32	.543
1881-1885	33	.518
1886-1890	44	.638
1891-1895	46	.612
1896-1900	29	.353
1901-1905	3.5	.402
1906-1910	35	.386
1911-1915	35 35 33	.352
1916-1920	38	.394
1921-1925	23	.231
1926-1930	38	.365
1931-1935	24	.219
1936		.354
1937	8 7 2	.305
1938	2	.086

INFANT MORTALITY.

The Table gives the numbers of Infant deaths and the Infa * Mortality rates since 1841:—

	No.	of Dea	ths.		Infa	Female				
Period.					les.	Fem	ales.	Infa	ints.	Infant De the per1,000 Male
	Males.	Fmis.	Infants	Ips.	E.&W.	Ips.	E.&W.	Ips,	F.&W.	Ipswich.
1841—1850	913	743	1,656	190	167	161	137	176	153	812
1851-1860	1,122	931	2,053	184	168	159	139	172	154	829
1861-1870	1,141	982	2,123	167	168	151	139	159	154	861
1871-1880	1,369	1,024	2,393	171	163	134	134	152	149	748
1881-1890	1,327	1,004	2,331	153	155	118	128	136	142	756
1891-1900	1,582	1.181	2,763	174	168	135	138	155	153	746
1901-1910	1,322	1.044	2,366	138	140	113	114	126	128	789
1911-1920	889	615	1,504	105	112	76	89	91	100	691
1921-1930	496	343	839	65	81	46	63	56	72	691
1841-1845	361	296	657	176	162	143	133	160	148	815
1846 - 1850	552	447	999	201	172	175	142	188	157	809
1851 - 1855	550	453	1,003	188	172	158	141	173	156	823
1856 - 1860	572	478	1,050	180	166	160	137	171	152	835
1861-1865	567	492	1,059	171	166	156	136	164	151	867
1866-1870	574	490	1,064	164	170	146	142	155	157	855
1871-1875	647	487	1,134	169	167	133	138	152	153	752
1876-1880	722	537	1,259	172	159	135	130	154	145	744
1881-1885	647	496	1,143	152	152	117	125	134	139	766
1886-1890	680	508	1,188	155	159	119	131	138	145	747
1891-1895	763	559	1,322	171	165	128	135	150	151	732
1896-1900	819	622	1,441	177	170	141	141	160	156	759
1901-1905	763	605	1,368	155	151	128	124	142	138	792
1906-1910	559	439	998	119	129	97	105	109	117	785
1911-1915	525	365	890	115	121	85	97	101	110	695
1916-1920	364	250	614	92	101	65	79	78	90	686
1921-1925	274	197	471	71	86	50	66	61	76	718
1926-1930	222	146	368	58	77	41	59	50	68	657
1931-1935	148	159	307	43	70	48	54	45	62	1074
1911	99	82	181	107	142	96	117	102	130	891
1912	120	75	195	135	106	87	84	112	95	625
1913	109	65	174	119	120	74	96	96	108	596
1914	101	87	7.7.7.	108	116		93	104	105	861
1915	96	56	152	117	123	70	96	94	110	583
1916	78	57	135	90	102	71	80	81	91	730
1917	71	48	119	107	108	73	85	90	96	760
1918	66	49	115	94	108	71	86	83	97	742
1919	59	41	100	89	100	58	78	70	89	694
1920	90	55	145	89	90	55	69	72	80	611
1921	70	58	128	83	93	65	72	74	83	828
1922	38	47	85	49	87	58	66	54	77	1236
1923	52	27	79	66	78	35	60	51	69	519
1924	49	26	75	67	85	37	65	52	75	530
1925	65	39	104	93	84	54	66	73	75	600
1926	46	24	70	59	79	31	61	45	70	521
1927	51	41	92	69	79	59	60	65	70	803
1928	46	23	69	59	74	35	56	48	65	500
1929	44	32	76	60	83	44	65	52	74	727
1930	35	26	61	45	68	37	51	41	60	742
1931	46	36	82	65	75	53	57 56	59	66 65	782 1818
1932	22	40	62	32	73	57	55	45		966
1933	30	29	59	45	72	47		46	64	
1934	33	27	60	50	65	42	51	46	59	818
1935	17	27	44	24	64	38	50	31	57	1588
1936	36	26	62	51	66	38	50	45	59	722
1937	26	20	46	35	65	30	50	33	58	769
1938	43	21	64	57	-	30	-	44	53	488

AGE DISTRIBUTION OF THE INFANT DEATH-RATES.

	0	-1 week		0-	-1 mont	h.	0-	-3 month	18.	3-	-6 month	18.	6-	-9 month	19.	9—	-12 mont	hs.		—1 year	r.
	M.	F.	Р.	М.	F.	Р.	м.	F.	P.	M.	F.	P.	М.	F.	P.	м.	F.	P.	M.	F.	1
		***	20.05	54.10	47.52	51.00	96.38	81.81	89.23	39.72	32.33	36.09	34.07	29.08	31.62	20.69	18.01	19.38	190	161	1
841—1850	28.64	29.08	28.85	54.19	47.52 40.94	45.87	87.87	74.18	81.17	39.91	35.12	37.56	30.88	24.15	27.58	25.62	26.04	25.82	184	159	1
851—1860	29.56	24.67	27.16	50.59	38.84	44.61	80.82	72.90	76.95	36.59	30.82	33.77	29.09	24.35	26.78	21.16	23.27	22.19	167	151	1.
361—1870	29.09	20.80	25.05	50.11		39.71	78.82	55.61	67.51	34.60	32.47	33.56	31.23	24.58	27.99	26.35	21.95	24.21	171	134	1.
371—1880	26.23	16.17	21.33	47.22	31.81	39.40	74.83	55.03	65.01	29.70	23.80	26.77	26.68	18.97	22.86	22.74	20.50	21.63	153	118	1
881—1890	28.07	20.62	24.38	45.24	35.39	41.49	84.45	63.92	74.38	37.86	28.64	33.34	28.48	24.40	26.48	23.84	18.32	21.13	174	135	1
91—1900	27.60	20.50	24.12	47.36	39.07	45.21	79.49	61.55	70.69	23.88	19.75	21.86	19.92	15.95	17.98	14.60	16.06	15.32	138	113	1
001-1910	30.46	22.68	26.65	51.11	31.35	36.40	62.35	45.79	54.23	15.52	11.11	13.36	15.17	10.44	12.75	12.32	8.76	10.58	105	76	
11-1920	26.07	19.87	23.03	41.25	23.52	28.73	46.69	30.96	38.93	7.23	5.27	6.26	5.65	5.00	5.33	5.52	5.28	5.40	65	46	
21-1930	24.46	15.54	20.06	33.01	23.32	20.75	10.02	50.70	00.70	,,,,,,						100000000					
41—1845	26.52	22.37	24.43	52.06	42.80	47.40	96.26	71.98	84.06	32.41	35.02	33.72	30.45	23.34	26.88	18.17	13.61	15.88	176	143	
46—1850	30.21	34.48	32.27	56.06	51.33	53.78	96.46	89.73	93.22	45.14	30.17	37.93	36.76	33.70	35.28	22.57	21.55	22.07	201	175	
51—1855	32.60	25.48	29.07	51.81	40.50	46.20	93.34	73.67	83.59	41.18	35.96	38.59	31.22	25.13	28.21	22.99	23.39	23.19	188	158	
356—1860	26.78	23.88	25.37	49.46	41.37	45.55	82.86	74.67	78.90	38.75	34.30	36.60	30.56	23.20	27.00	28.04	28.59	28.30	180	160	
861—1865	26.29	22.90	24.64	48.36	41.34	44.94	81.31	77.92	79.66	33.85	29.89	31.92	31.74	23.53	27.74	24.48	25.12	24.79	171	156	
866—1870	31.74	18.83	25.43	51.75	36.48	44.29	80.35	68.18	74.40	39.17	31.69	35.52	26.59	25.11	25.87	18.01	21.53	19.73	164	146	
371—1875	26.43	15.35	21.02	47.90	30.44	39.37	82.98	52.66	68.17	31.93	33.18	32.54	32.98	24.95	29.06	21.46	22.76	22.10	169	133	
376—1880	26.04	16.91	21.60	46.59	33.08	40.02	75.02	58.33	66.91	37.03	31.81	34.49	29.62	24.24	27.01	30.82	21.21	26.15	172	135	
881—1885	25.83	19.85	22.85	43.91	34.27	39.11	72.80	57.68	65.26	31.47	21.98	26.74	26.06	18.43	22.26	21.60	19.14	20.38	152	117	
886-1890	30.26	21.38	25.88	46.54	32.66	39.69	76.81	52.40	64.76	27.97	25.61	26.81	27.28	19.50	23.44	23.84	21.85	22.86	155	119	1
891-1895	29.47	21.06	25.17	50.00	35.72	42.92	88.43	61.07	74.92	35.32	27.19	30.51	26.32	20.28	23.33	21.60	20.28	20.95	171	128	
396-1900	25.80	20.04	23.00	44.88	35.08	40.11	80.66	66.74	73.88	40.33	30.06	35.33	30.57	28.47	29.51	26.01	16.40	21.44	177	141	
01-1905	30.20	27.54	28.90	54.49	45.56	50.11	85.31	70.56	78.09	30.20	22.03	26.20	23.06	17.37	20.27	17.14	18.22	17.67	155	128 97	
906-1910	30.72	17.58	24.29	47.57	32.27	40.08	73.39	52.08	62.96	17.28	17.36	17.32	16.64	14.46	15.57	11.94	13.80	12.85	119	85	
911-1915	30.12	22.00	26.16	45.52	33.48	39.74	69,40	48.00	58.95	16.29	13.81	15.08	18.07	12.17	15.19	13.39	11.47	12.45	117 92	65	13
916-1920	21.49	17.48	19.52	36.41	28.97	32.74	54.36	43.33	48.96	14.66	8.09	11.43	11.88	8.09	10.01	11.12	5.74	8.47 5.83	71	50	
921 - 1925	25.33		21.26	35.24	25.75	30.47	52.22	34.00	43.05	7.05	5.92	6.48	6.01	5.40	5.70	6.26	5.40 4.83	4.94	58	41	
926-1930	23.58			32.33	21.06	26.90	41.08	27.61	34.58	7.42	4.55	6.03	5.30	4.55	4.94	5.04	3.62	3.87	43	48	
931—1935	15.61	16.91	16.25	25.33	26.58	25.95	32.69	34.44	33.40	4.71	3.62	4.17	2.06	6.34	4.17	4.12	4.43	4.35	51	38	
1936	24.25		18.14	37.08	20.67	29.02	41.36	28.06	34.83	2.85	1.47	2.17	2.85	4.43 3.04	3.62	1.35	1.52	1.43	35	30	
1937 1938	19.02				18.26 18.33	20.10		24.35	24.40		1.52 2.82	3.58 6.85	4.07	2.82	3.36	6.65	1.41	4.11	57	30	

M.—Males F.—Females P.—Persons



INFANT MORTALITY TABLE 1938

			DAYS.												W	KKKS	i.											3	ion'	rns.										
Cause of Deat	h.		1	2	1	3	4	1	5	6	T	7	1	1	2	1	3	4		1	2		3	I	4		5	1	6		7	8	1	9	1	10		11	12	-1 ye
		36	F P	M F	P M	p p	MF	P M	P	M F	P M	p P	м г	PX	I F	РМ	F P	м г	P M	FF	м г	P	M F	P 3	d 12 1	РМ	F P	м	FP	MI	P	м	P :	M F	PM	4 F	P M	P P	M P	PMF
Whooping Cough															1							1 1																		- 1
C.S.A																	1 1			1						Hi									all r					- 1
Cereb. T																													1 1	1	1									1 1
Cereb. Haemorrhage	*																			1			1	1			П													- 1
Convulsions	121				1	1							1	1			16		1									1	1		П						П			2-
Mastoid Dis																												1	1											1-
Broncho Pneumonia																1	1		1	1	1	1				3	3							1	1 1	1 :	2 1	1		7 2
Bronchitis								11													1	1									Н									1-
D.D. Stomach															П						1	1																П		1-
Gastro Enteritis																							1	1			Н			1	1				2	1	2			4-
Intestinal Diseases														Н																				1	1			11		1-
Peritonitis																										1	1											Н		1-
Osteomylitis																																			1,	1				1-
Congenital Malformati	ons		3 3					1	1				1 3	4 1		1 1	1 2	1 1	2 4	5 9	3	3	1 1	2			1 1			1	1							П		8 81
A.D.M				1	1 1	1							2	2					2	2								1	1											3-
Prematurity		6	2 8	1 1	2	1 1				1	1		8 4	12					8	4 12							П													8 41
Injury at Birth				1	1								1	1		1	1		2	2				11											Ш					2-
O.D. Early Infancy		***	1 1	2	2								3	3				1	1 1	3 4																				1 3
Violence										H																		1	1								1			
TOTAL		б	612	3 3	6 2	1 3		1-	- 1	1 —	1-		13 10	23 1	-	3	2 5	2 1	3 19	13,32	6 1	7	2 2	4		4 1	5	4 1	5	2 1	3 -		- 1	1 :	2 4	1 5	1	1-		43 21 6

27 + 16 = 43 8 + 2 = 10 3 + 2 = 5 5 + 1 = M.—Males F.—Females P.—Persons.



The rise in the Infant Mortality figure compared with last year can be attributed essentially to its abnormally low level in 1937. Further, the number of female infant deaths per 1,000 males has reached the lowest yet recorded in Ipswich, viz.: 488, i.e., 1 female death occurs for every 2 male deaths.

However, our rate is still considerably lower than that for England and Wales (53), for County Boroughs (57) and for small towns (51).

STILLBIRTHS.

I insert the usual Table about Stillbirths:-

Year	M	ales	Fe	males	Infants		
	No.	ž	No.	o' .	No.	ž	
1927	18	4.5	9	2.6	27	3.6	
1928	38	4.8	23	3.4	61	4.1	
1929	40	5.3	29	3.9	69	4.6	
1930	42	5.2	26	3.6	68	4.5	
1931	27	3.7	23	3.3	50	3.5	
1932	30	4.2	16	2.2	46	3.2	
1933	26	3.7	25	3.9	51	3.8	
1934	28	4.1	30	4.5	58	4.3	
1935	31	4.2	26	3.5	57	3.9	
1936	24	3.3	23	3.3	47	3.3	
1937	22	2.9	21	3.1	43	3.0	
1938	34	4.5	21	2.9	55	3.7	

Of the 55 Stillbirths registered in 1938, two were illegitimate, a proportion of 3.6%.

Our figures show that the proportion of stillbirths amongst legitimate infants in 1938 was 3.8%, as compared with 3.4% in the case of the illegitimate.

In accordance with the usual custom, I give a Table in which the ante- (stillbirth) and post- (live birth) natal Infant Mortality rates are shown together.

The combination of the two with existing conditions of Infant Mortality about doubles the rate, and gives a more accurate impression of the true state of affairs. Stillbirths and the mortality of the early weeks of life are closely linked together. Many stillborn infants die during the process of birth, and this particular group is very intimately connected with the excessive Infant Mortality of the first four days of life, to which attention has been drawn in these Reports for years.

		Death-rates of Infants											
Ante-		Males			Females		Infants						
	Post- Natal	Total	Ante- Natal	Post- Natal	Total	Ante- Natal	Post- Natal	Tota					
1928	48	59	106	34	35	68	41	48	89				
1929	53	60	112	39	44	83	46	52	98				
1930	52	45	96	36	37	73	45	41	85				
1931	37	65	101	33	53	86	35	59	94				
1932	42	32	74	22	57	79	32	45	76				
1933	36	45	81	39	47	84	38	46	83				
1934	41	50	91	45	42	87	43	46	89				
1935	42	24	66	35	38	73	39	31	70				
1936	33	51	84	33	38	71	33	45	78				
1937	29	35	64	31	30	61	30	33	62				
1938	45	60	105	29	30	59	37	45	82				

SECTION B.

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

1.—Full particulars of the Public Health Officers of the Authority, Medical, Nursing, Sanitary, etc., including in each case information as to their special diplomas or certificates of qualification as well as their offices and duties are given in the beginning of the Report.

2.—LABORATORY FACILITIES.

The work carried out in the Laboratory of this Department since 1921 is as follows:—

		BS from Cas heria or Sus Diphtheria.	pected	SPUTA from Actual or Suspected Cases of Tuberculosis.						
Year.	Ex- amined.	Positive.	Per cent. Positive.	Ex- amined	Positive.	Per cent. Positive.				
Average 1921-25	1,260	240	19%	218	52	24%				
1926-30	1,560	239	15%	236	68	29%				
1931-35	하다 하다 10 H -		270	74	27%					
1931	5.023	793	16° o	232	52	22%				
1932	4,847	679	14%	234	62	26%				
1933	3,171	285	9%	312	85	27%				
1934	3,640	274	7%	289	80	27%				
1935	4,474	375	8%	283	89	31%				
1936	4,116	375	9%	400	128	32%				
1937	1,774	73	4%	476	157	34%				
1938	1,566	128	8%	393	135	34%				

3,953 Urines were examined in connection with the Ante-Natal Clinic, with the following results:—

Albumen,	trace	 		6.7
Albumen,	cloud	 	***	15
Sugar		 		23
Pus		 		8

The laboratory has now been transferred from the Public Health Department to the Isolation Hospital. Medical practitioners are therefore reminded that swabs should only be left at the Health Department during office hours, after which they must be delivered to the Isolation Hospital. In connection with doubtful cases of Diphtheria I feel it necessary to reiterate to practitioners and the public that the laboratory result on Diphtheria swabs is at all times a secondary consideration to the clinical picture, and that the absence of morphological coryne-bacterium diphtheria: on culture should not deter the practitioner from sending the case to hospital for observation.

3.—AMBULANCE FACILITIES.

I.—Infectious Cases.

A Motor Ambulance has been provided by the Council and Motor Vans for the removal of infected bedding.

The appended Table indicates the journeys and mileage run during 1938, as compared with the previous year, and the average of the five years, 1931-1936.

SERVIC	E.	Average 1931—1935 (inclusive).	1937	1938
AMBULANCE. Ipswich	Journeys	575	421	444
	Miles	2441	2047	2148
Out of	Journeys	135	154	181
Borough	Miles	3648	4404	5063
Total	Journeys	710	575	625
	Miles	6089	6451	7211
BEDDING VANS. Collection of Bedding	Journeys	256	374	314
	Miles	1946	2434	2705
Return	Journeys	96	206	213
of Bedding	Miles	896	1332	2017
Collection	Journeys	70	98	115
of Meat	Miles	347	748	1125
Port Work Pin Mill	Journeys Miles	1 24	_	=
Small Pox Hospital	Journeys Miles	20 103	=	_
Other Journeys Miles		125	270	349
		1200	1954	3345
Total	Journeys	568	948	991
	Miles	4516	6468	9192

II.—Non-Infectious and Accident Cases.

The Council have no Ambulances for use in these connections, but assists the local Branch of St. John Ambulance by an annual grant.

The East Suffolk and Ipswich Hospital further provide their own ambulances for accident cases.

4.—NURSING IN THE HOME.

This is provided by the Ipswich Nurses' Home, which brings the benefits of skilled nursing within the reach of all classes in Ipswich and the neighbourhood and is maintained partly by subscriptions and donations, partly by profits from private nursing.

The General District Staff of the Home consists of three fully-trained Sisters, assisted by an average of 5 pupils.

For the year ended 31st March, 1939, the following particulars of cases nursed are provided:—

			No. of Cases.	No. of Visits.
General District			1,297	40,230
These include:-				
Parish Cases (free)			305	9,525
Cases nursed under	6d. per	visit	369	22,545
Ipswich Public Med	ical Ser	vice	111	4,891

Thus a total of 9,525 visits have been made to the sick poor of the town, free of charge, and 22,545 visits under 6d. each.

5.—TREATMENT CENTRES AND CLINICS.

(As existing at 31st December, 1938).

1. Infant Welfare Centres.

(a) PUBLIC HEALTH DEPARTMENT, ELM STREET.

Monday morning, 9.30 a.m. to 12.30 p.m.

Every afternoon (except Saturday), 2.30 p.m.—5.0 p.m. Medical Officer in attendance Monday morning, Wednesday and Friday afternoon.

(b) Branch Clinic, Clapgate Lane.

Every Monday, Tuesday, Wednesday and Thursday afternoon, 2.30 p.m.—5.0 p.m.

Every Friday afternoon, 4 p.m.—5 p.m.

Medical Officer in attendance Monday, Tuesday and
Thursday.

2. Ante-Natal and Post-Natal Clinics.

(a) Public Health Department, Elm Street. Every Monday, 2.30 p.m.—5 p.m. Every Tuesday, Thursday and Friday, 10 a.m.—1 p.m.

(b) Branch Clinic, Clapgate Lane. Every Wednesday and Saturday, 10 a.m.—1 p.m.

ARTIFICIAL LIGHT CLINIC (Elm Street only).
 Every afternoon, except Wednesday and Saturday, at 2.30 p.m.

School Clinics (Elm Street and Clapgate Lane).
 Every morning. Special sessions in the afternoon.

5. Treatment Clinics (Elm Street and Clapgate Lane).
Open every morning. Every afternoon except Saturday.

Dental Clinics (Elm Street and Clapgate Lane).
 Children attend by appointment.
 Tuberculosis patients, expectant mothers and children under
 5 years, by special appointment.

Tuberculosis Dispensary (Elm Street only).
 New cases each Tuesday and re-examinations each Friday at 10 a.m.
 Children every Friday at 2.30 p.m.
 Treatment cases each Thursday at 2.30 p.m.

8. TREATMENT CENTRE (VENEREAL DISEASES).

Clinics are held at the East Suffolk and Ipswich Hospital (Voluntary Hospital) as under:—

Adults—Males, Wednesday at 5.30 p.m., Friday at 1 p.m. Females, Wednesday at 4.0 p.m., Friday at 2.30 p.m. Children, Thursdays at 11 a.m.

6.—HOSPITALS.

I.—Public.

(a) FEVER. Ipswich Isolation Hospital, Foxhall Road, Ipswich—110 beds, including cubicle block of 24 beds for suspects or mixed infections—accommodation for all forms of Infectious Diseases

(b) SMALL Pox. Ipswich Small Pox Hospital, Foxhall Heath, near Ipswich —24 beds.

(c) Tuberculosis.

Ipswich Sanatorium, Foxhall, near Ipswich—120 beds, early cases.

Ipswich Isolation Hospital:-

Pulmonary Tuberculosis—30 beds. Surgical Tuberculosis—24 beds.

East Suffolk and Ipswich Hospital (Voluntary Hospital)—beds as required for operative treatment.

(d) MATERNITY.

Ipswich Maternity Home, Wingfield Street, Ipswich— 15 bedrooms (18 beds) and 2 Labour Rooms.

(e) Municipal Hospital.

Borough General Hospital-250 beds.

(f) Mental Hospital.

Ipswich Mental Hospital-400 beds.

H.—VOLUNTARY.

(a) East Suffolk and Ipswich Hospital-400 beds.

7.—TRANSFERRED MEDICAL SERVICES.

BOROUGH GENERAL HOSPITAL.

The Heathfields Municipal Hospital was appropriated for Public Health purposes on the 1st April, 1938.

This was made possible by the Local Government Act of 1929 which, while not abolishing the Poor Law, abolished the Boards of Guardians, making possible the unification of all the principal medical services, institutional and other, under the local authority.

The advantages of appropriating Institutions for general hospital purposes are obvious. Patients are admitted without recourse to the Poor Law machinery, while the Hospital is administered by a Medical Superintendent instead of being under the control of a Master. Cooperation with the local voluntary hospital is thus facilitated and immediate interchange of patients made possible to the great advantage of all concerned.

The Borough General Hospital is now an integral part of the Public Health Organisation in Ipswich, is administered by the Public Health Committee and is under the general supervision of the Medical Officer of Health.

The following Table gives the statistics for 1938:-

	Males.	Females.	Persons.	1937.
No. in Hospital on 1st January, 1938 Admissions during the year	128 548	93 546	221 1,094	242 922
Total treated	676	639	1,315	1,164
Discharges during the year	440	421	861	698
Deaths during the year	124	122	246	245
Remaining on 31st December, 1938	112	96	208	221

The duration of stay of the 1,107 persons who were either discharged from, or died in, the Institution, was as follows:—

- (a) Four weeks or less 667
- (b) Exceeding four weeks, but under 13 weeks 285
- (c) Exceeding 13 weeks ... 155

The types of cases admitted are indicated briefly in the following rough classification of some of the principal diseases or groups of diseases dealt with:—

Types	of Case	·s.		Nos. Admitted.							
.,,,,,,				1935	1936	1937	1938				
Dementia				60	52	67	39				
Senile Dementia		***		14	22	19	18				
Epilepsy		***		21	18	24	23				
Other diseases of	nervo	us systen		66	83	79	103				
Heart diseases				57	83	74	103				
Senile decay				45	47	44	21				
Diseases of skin				27	23	61	63				
Bronchitis		***		63	65	59	87				
Cancer	***		***	42	47	61	46				
Tuberculosis				13	28	10	5				
Maternity				29	14	30	74				
Violence				31	23	25	35				

The age distribution of the admissions was as follows:-

Age Periods.		No. Admitted.								
nge remotis.		1935	1936	1937	1938					
Under 1 year		47	43	65	129					
1-25 years		90	108	127	169					
25-45 ,,	***	134	143	166	168					
5-65		198	232	274	269					
55-85	***	224	233	256	318					
Over 85 ,,		29	39	34	41					
Total		722	798	922	1,094					

8.—HEALTH EDUCATION.

(a). NATIONAL PUBLICITY.

The Committee co-operated with the Ministry of Health in the six months' National Publicity Campaign from October, 1937 to March, 1938.

Posters and leaflets were supplied by the Ministry and displayed and distributed throughout Ipswich by the Department.

The posters were displayed on the hoardings and special boards in various parts of the town, while small bills and cards were exhibited in the trolley-buses, offices, shops, etc.

The leaflets were overprinted with particulars as to our various clinics and were distributed to parents through the schools and various clinics, etc.

The campaign served a very useful purpose and, owing to the length of time it was spread over, was particularly valuable, not only by bringing the Health Services to the notice of the public, but by maintaining their interest in our schemes.

The Committee has six Empire Marketing Board Poster Frames in various positions in the town and on these are displayed a different set of posters each month. These posters are purchased from the Central Council for Health Education.

The usual distribution of "Better Health" booklets took place each month throughout the year.

(b). Municipal Exhibitions.

In May, 1938, a Municipal Exhibition was held in Ipswich for a period of ten days.

The Public Health Department was offered space in the section devoted to the activities of the Corporation and stands were utilised to call the attention of the public to the School Medical Service.

Amongst other exhibits was a complete Dental Unit, and with a dental surgeon always in attendance, proved a valuable means of propaganda for the many thousands of people who toured the exhibition.

Leaflets were distributed from the stands and talks were given to those inspecting the exhibits.

During the latter part of May and the early part of June, the Dental Board of the United Kingdom arranged and carried out dental demonstrations in all the schools in the town. A trained demonstrator gave an explanatory talk lasting about twenty minutes and the children then examined the models which had been sent down by the Board.

These demonstrations are held every four years or so, and prove of considerable value in training school children in the care of the teeth.

Several lectures have been given throughout the year by members of the stall to various organisations directly or indirectly associated with the welfare of the school population.

(c) Mothers' Circle.

A special class is held at the Branch Clinic, Clapgate Lane, for the mothers in attendance at the M. & C. W. Clinics. The instructress is an official teacher of the Women's League of Health and Beauty, and is of the opinion that the keenness displayed by the members of the class is very great. The mothers are carefully supervised by Dr. D. E. P. Jolly, the M. & C. W. Officer, who ensures that this enthusiasm for dancing and exercises does not over-reach itself, and also gives short health talks to the class.

In order to extend the province of this form of health education, a Fathers' Circle has been formed and a Keep-Fit class is run for the husbands of the ladies in the Mothers' Circle. This is held at a neighbouring school gymnasium.

9.—POOR LAW MEDICAL OUT-RELIEF.

The Public Assistance Domiciliary Medical Service giving an "open choice" of Doctors and Chemists came into operation on the 1st April, 1938, and displaced the former system of a part-time District Medical Officer and Central Dispensary. This system has proved a success, and various features of the scheme together with a summary of the special report on the Domiciliary Medical Services are appended at the end of this report.

10.—INSTITUTIONAL PROVISION FOR THE CARE OF MENTAL DEFECTIVES.

At the beginning of 1938 the Local Authority, under the Mental Deficiency Acts, was maintaining 140 defectives in certified Institutions. During the year, 13 patients were admitted or taken over (including 5 patients from the Borough General Hospital who had been in the Infirmary for several years prior to its severance from Heathfields), 2 were recalled for institutional care who had been on license and 1 who had absconded was found. Against this, 1 was placed on license, 2 died, 1 was discharged, 1 was transferred to the Mental Hospital and 1 case was transferred to another Local Authority. Thus there were 150 cases actually maintained in Institutions on the 31st December,

1938. These were maintained mainly by the Royal Eastern Counties Institution at Colchester (87 cases). At Heathfields and the Borough General Hospital 32 cases were maintained and 12 at the Handford Home.

Some of the patients, mainly in Heathfields (the Public Assistance Institution), are obliged by reason of their physical condition to be permanent patients at the Borough General Hospital.

It will ultimately be necessary to make provision for the accommodation elsewhere of those mental defectives at present in Heathfields Institution and in the Borough General Hospital, and this question is receiving the careful consideration of the Committee for Mental Deficiency.

At the Handford Home for Feeble-minded Girls, sufficient bedroom accommodation for 22 inmates is provided. The Committee feel, however, that the inmates need more day-room space and are making enquiries to remove the Home to a quieter neighbourhood. Of the 22 patients resident on the 31st December, 1938, 19 were defectives on orders, 12 being chargeable to Ipswich and 7 to other Authorities.

11.—MATERNITY AND CHILD WELFARE.

The requirements of the Ministry of Health as to developments or changes in the services provided under the following heads will be found in the section on Maternity and Child Welfare.

- (i.) Midwifery and Maternity Services.
- (ii.) Institutional Provision for Mothers or Children.
- (iii.) Health Visitors.
- (iv.) Child Life Protection.
- (v.) Arrangements for Dental, Orthopaedic, etc. cases.

Full details are given in Appendix I.

12.—NURSING HOMES.

REGISTRATION OF NURSING HOMES.

There are four registered private nursing homes in the borough, and in addition the Ipswich Maternity Home, which is owned by the Corporation. Each Home has been inspected by the Maternity and Child Welfare Officer, and all have been found satisfactory.

Unregistered Homes are chiefly discovered by noting advertisements in the press and by the statements of informants registering deaths.

One unregistered Home was discovered in 1938.

No difficulties were encountered in dealing with any of the proprietors, who were always most courteous and co-operative.

SECTION C.

SANITARY CIRCUMSTANCES OF THE AREA.

1.—WATER SUPPLY.

During the year samples were taken and examined by the Public Analyst each month from the town's reservoirs and sources of supply. His reports consistently stated that the supply was "of high organic and bacteriological purity and fit for drinking and all the purposes of a public supply."

Twenty-nine samples were taken from private wells supplying dwelling-houses, for chemical analysis by the Public Analyst. Of these samples, 26 were certified as fit, and 3 as unfit for drinking purposes. In the latter 3 cases, one house is unoccupied, one house now derives a supply from the town's mains and in the other case, improvement to the surroundings of the well has been carried out and the supply is now satisfactory.

2.—RIVERS AND STREAMS.

There are two Rivers, viz.:—River Gipping and River Orwell, within the area of the Local Authority. The Gipping is a fresh water stream discharging into the Orwell, which is a tidal river.

Inspections during the year have not revealed any necessity to take action to check pollution.

3.—CLOSET ACCOMMODATION.

All premises are served by water closets except those on the outskirts and unsewered parts of the Borough.

The number of privy closets is		 38
The number of pail closets is		 159
The number of dry earth closets	is	 1
The number of chemical closets i	S	 5

4.—PUBLIC CLEANSING.

STREET CLEANSING AND COLLECTION AND DISPOSAL OF HOUSE REFUSE.

CLEANSING SUPERINTENDENT'S REPORT.

Table indicating the cost of Public Cleansing in Ipswich since 1927-28, together with the average cost for 112 Cities and Boroughs, 1937-38.

					NOTES		*****	_	-					-		
ing.	1,000 nptied.	Cost per gullies er	4	I	1	I	1	1	47.2	47.1	34.5	25.0	21.0	19.5		
Street Cleansing	Cost per 10,000 yds. of streets cleansed.		. d.	1	1					21 1			_			1
reet				8	9					8						0
s	Cost per 1,000 population.									06						173
	the £.	ni stan		48	22	72	0.4	30	20	6.60	09	09		00		1
1,000 per		.InfoT'	4	665	634	532	569	596	552	532	549	500	191	524		1070
Exp	-1	Disposa	43	305	300	193	225	247	214	206	224	191	120	147		378
Net ture hou		Collectio	4	360	334	339	344	349	338	326	325	339	341	377		692
ndi- ,000 n per	2	Total.	42	158	153	143	152	159	150	148	156	153	143	163		246
Net Expendi- ture per 1,000 population per	E	Disposa	વર	7.5	72	52	09	99	28	57	64	48	37	46		86
Net ture popu		Collectio	4	86	8	91	92	93	6	91	92	104	106	117		160
ire per um.		Total.	ď.	10	00	10	6	2	10		0	=	10	B		16 9
Net Expenditure per ton per annum.	1	Disposa	s. d.							7 5						5 10
Net 15	.ttc	Collectio	s. d.			12 0			11 11	11 8	11 3	12 2	12 2	12 9		10 11
	meight pulation		100					9.		8 2						16.2
	, noi	Populat		84140	85990	85800	86860	87770	88700	89070	90157	91400	92470	93870		I
'səsı	ioH, lo	Number		21688	22:104	22986	23280	23413	24115	24870	25678	92826	29056	29381		Ī
	YEAR.			1927-28	1928-29	1929-30	1930-31	1931-32	1932-33	1933-34	1934-35	1935-36	1936-37	1937.38	Average for 112 cities and	boroughs (1936-1937)

I submit herewith my report, together with a comparative Table of the Public Cleansing costs for the Borough of Ipswich for the year ended March 31st, 1938.

17,288 tons of house and trade refuse were collected and disposed of during the year.

By Incineration ... 2,073 tons.

By Controlled Tipping ... 15,215 ,,

The nett cost of the combined service was £15,353.

The population during the year has increased by 1,400, and the number of premises by 325.

Controlled tipping was further extended during the year and 88% of the total output was dealt with in this manner. The remainder was treated at the Destructor Works.

The cost of Street Cleansing during the year was £9,875, and Gully Cleansing £688.

SUMMARY OF THE COST OF SERVICES UNDERTAKEN BY THE PUBLIC CLEANSING DEPARTMENT, 1937-1938.

Cleansing Costs	Total Gross Expenditure.		Revenue			Net C	Net Cost per head o population				
Collection of House and Trade Refuse Disposal of House	£11,209	0	0	£168	0	0	£11,041	0	0	2s.	4.3d
and Trade Refuse Street Cleansing in- cluding Gully Clean- sing and Snow Re-	£4,862	0	0	£550	0	0	£4,312	0	0		11d.
moval	£10,563	0	0	-			£10,563	0	0	2s.	3 d
Total	£26,634	0	0	£718	0	0	£25,916	0	0	5s.	6. 3 d

L. A. Jones, Cleansing Superintendent.

5.—SANITARY INSPECTION OF THE AREA.

Mr. Baty, Chief Sanitary Inspector, reports as follows:-

Analysis of Inspections.							
Private Houses				4,784			
Houses visited or measure	d for "	Permitted No	ımber"	1,862			
11 1. 1 1.			annoci	15			
Van Dwellings				13			
Common Lodging Houses		***		74			
Houses with reference to a			House	44			
Houses prior to removal t				1,465			
Houses subsequent to remo				1,200			
D II				122			
Overcrowded Houses				97			
Verminous Houses				438			
Revisits				1,171			
Total Inspections of Hous				11,285			
Slaughter-houses			2000	3,028			
Butchers' Shops				1,015			
Cowsheds				107			
Dairies and Milk Shops				243			
Purveyors of Milk		***		26			
Bakehouses				109			
Ice Cream Premises				176			
Fried Fish Shops				120			
Cafes and Restaurants				42			
Cares and Trestaurants			• • • •	144			
Total Inspections with refe	erence to	Food		4,866			
Rivers				10			
Ditches				12			
Refuse Dumps				52			
Visits after Infectious Dis	eases			279			
Shops	***			651			
Factories, Workshops, &c				184			
Schools				48			
Places of Entertainment			***	31			
Public Baths				3			
Urinals				168			
Stables	***			21			
Piggeries				36			

Analysis of Inspections—continued.						
Offensive Trade Premises				165		
Markets				57		
Smoke Nuisances				26		
Cesspools		***		351		
Complaints Investigated				1,192		
Visits re Works in Progress and Completed						
Interviews at Office				3,527		
At Port				374		
Wholesale Warehouses				47		
Offices				43		
Miscellaneous Inspections	•••		٠	153		
Total of other Inspections				7,623		
Total Inspections made du	ring the	vear ···		23,774		

Analysis of Work Carried Out.							
Drains inspected				190			
Drains smoke tested				57			
Drains water tested				36			
Drains reconstructed				4			
Drains repaired				38			
Drains unblocked and cl	eansed			69			
Inspection chambers prov	vided			11			
Inspection chambers repa	aired			15			
Ventilating shafts repaire	ed			9			
New ventilating shafts p	rovided			4			
New water-closets provide	ded			30			
New sinks and waste pi	pes provided			4 5			
Water-closets cleansed				.5			
Water-closets repaired			***	45			
Water-closet cisterns repa	nired			30			
Lavatory basins provided				3			
New water-closet pans p	provided		***	47			
New drains provided				41			
New gullies fixed			***	8			
Cesspools cleansed			***	51			
Total Drainage Works	carried out			697			

Analysis of Work Ca	rried Out	—сопиниеа.		1938
General repairs of houses				43
Chimney stacks repaired				15
Roofs repaired				114
Eaves-gutters repaired or i	renewed	5.5.0		46
Rain water pipes repaired		ved		28
Brickwork repointed	or renev			23
Damp-proof courses provi	ded	***	***	20
				102
Dampness otherwise remed				36
Yards re-paved or yard p		paired		20
Wash-houses repaired	***			25
New floors provided			***	35
Scullery floors concreted		•••	• • • •	8
Ceiling plaster repaired				20
Wall plaster repaired				31
New fireplaces provided				5 8
Fire grates repaired				
Coppers repaired				18
Sash-cords renewed				38
Windows repaired				14
New windows provided				3
Doors repaired				17
Door sills provided				2
Air bricks provided				29
Ash Bins provided		•••		44
Total works carried out t	o Houses	•••		701
Premises limewashed				17
Dirty houses cleansed	22.22	1203		15
Urinals cleansed				6
Removals of manure				12
D 1 ((556	2000	22
Hydrogen cyanide fumiga	ations			607
Sulphur dioxide fumigation	ne			56
				28
Liquid insecticide treatmen			• • • •	6
Wasps' nests destroyed			***	1
Town's water supply pro				770
Total of other works car	ried out		•••	770

Progress of Notices:—				
Preliminary Notices Served				158
Preliminary Notices Completed				150
Statutory Notices Served				11
Statutory Notices Completed				20
6.—SHOPS AND OFFICES.				
Inspections under the Shops Acts	, 1912-19	936 have 1	peen r	nade
as follows:—				
Visits			651	
Re-Visits			128	
			6	
Verbal warnings given for contraven	tions of the	he Acts	42	
Written warnings given for contrave	ntions of	the Acts	57	
Exemption Certificates granted (Shops A	ct, 1934,		
Sec. 10)			Nil.	
Exemption Certificates refused (
Sec. 10)			Nil.	
Proceedings were taken against or				
employing a shop assistant or				
holiday. The case was dism	ussed on	payment		
of four shillings costs.	œ	C 1.		
Number of plans of proposed new of				
tions, or additions, affecting			23	
during the year	openial	rogard to	23	
Number of offices inspected with sanitary accommodation, venti				
freedom from effluvia and overc			43	
Number of offices where addition			15	
modation was provided			11	
Number of offices where improve	ed ventil			
			2	
Number of offices where improve				
observed			3	
7.—CAMPING SITES.				
(i.) The number of sites in the	a area w	hich were		
used for camping purposes du			1	
(ii.) The number of camping s			1	
which licences have been is				
Authority under Section 2				
** * * * * * * * * * * * * * * * * * * *			Nil.	
(iii.) The estimated maximum n				
resident in the area at one				
summer season, 1938			20)
8.—SMOKE ABATEMENT. Twenty six observations were made	la durina	the year		

Twenty-six observations were made during the year. In 7 cases smoke emission was excessive, and warnings were given, resulting in improvement.

9.—SWIMMING BATHS AND POOLS.

There are three open-air and two indoor public swimming baths in the Borough, one open-air baths being privately owned and the remainder owned by the Council.

During the year there has been no change in the methods of purification of the bath water and the condition of the water has been

satisfactory.

10.—ERADICATION OF BED BUGS.

- Number of Council houses found to be infested (a) 45 Number of other houses found to be infested ... (b) 38 (i.) Number of Council houses disinfested 45 Number of other houses disinfested ... 38 (11.) Number of rooms d'sinfested 250 (iii.) ... 12,439 (iv.) Number of beds disinfested
- (2) The methods employed for freeing infested houses from bed bugs are:—

(i.) Use of liquid insecticides.

(ii.) Sulphur dioxide fumigations.

(3) The methods employed for ensuring that the belongings of tenants are free from vermin before removal to Council houses are as follows:—

Bedding, furniture and rooms are inspected by a sanitary inspector and, if found infested, bedding is destroyed, or disinfested by steam, and furniture is destroyed, or fumigated,

either by sulphur dioxide or hydrogen cyanide.

(4) The work of disinfestation is carried out by the Local Authority in the case of steam disinfestation of bedding, or sulphur dioxide fumigation of furniture. In the case of disinfestation of furniture with hydrogen cyanide, the work is done on behalf of the Local Authority by a firm of contractors operating from London.

The measures taken by way of supervision or education of tenants to prevent infestation of re-infestation after cleansing are as

follows:-

Systematic inspections are made by the sanitary inspectors of all Council houses for this purpose, and special attention is given to houses occupied by tenants whose belongings were formerly infested. Advice is given to tenants on this subject and disinfestation is carried out free of charge when any further infestation is discovered.

11.—SCHOOLS.

Forty-eight visits were made to the schools during the year and on no occasion was it found necessary to take any action regarding the sanitary condition of the premises.

The water supply to the schools is obtained from the Town's

mains and is satisfactory.

SECTION D.

HOUSING.

	SPEC	CTION OF DWELLING-HOUSES DURING R.	G THE
(1)		Total number of dwelling-houses inspected for housing defects under Public Health or Housing Acts Number of inspections made for the purpose	4,785 6,954
(2)		Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	153
	(b)	Number of inspections made for the purpose	194
(3)	so c	mber of dwelling-houses found to be in a state dangerous or injurious to health as to be unfit human habitation	153
2.—REN	refe not hab	mber of dwelling-houses (exclusive of those cred to under the preceding sub-head) found to be in all respects reasonably fit for human itation	137 HOUT
Nu	mbei sequ	r of defective dwelling-houses rendered fit in ence of informal action by the Local Authority officers	149
	ΓΙΟ! ΈΑΙ	N UNDER STATUTORY POWERS DURING	G THE
(a)		ceedings under Sections 9, 10 and 16 of the using Act, 1936:—	
	(1)	Number of dwelling-houses in respect of which notices were served requiring repairs	Nil.
	(2)	Number of dwelling-houses which were rendered fit after service of formal notices:—	
		(a) By Owners	Nil.
		(b) By Local Authority in default of Owners	Nil.

(b)	(1)	Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	137
		Number of dwelling-houses in which defects were remedied after service of formal notices:— (a) By Owners	20
		(b) By Local Authority in default of Owners	Nil.
(c)	Hou	needings under Sections 11 and 13 of the sing Act, 1936:— Number of dwelling-houses in respect of which Demolition Orders were made	Nil.
	(2)		Nil.
(d)	Proc 1936	eeedings under Section 12 of the Housing Act,	
	(1)	Number of separate tenements or underground rooms in respect of which Closing Orders were made	Nil.
	(2)	Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or rooms having been rendered fit	Nil.
—HC	USI	NG ACT, 1936, PART IV. OVERCROWD	ING.
(a)	(ii.)	Number of dwellings overcrowded at the end of the year Number of families dwelling therein Number of persons dwelling therein	51 51 382
(b)		Number of new cases of overcrowding reported during the year	18
(c)		Number of cases of overcrowding relieved during the year	81 621
(d)	(ii).	Particulars of any cases in which dwelling-houses have again become over-crowded after the Local Authority have taken steps for the abatement of overcrowding	Nil.
(e)		Any other particulars with respect to over- crowding conditions upon which the Medical Officer of Health may consider it desirable	NT:1
		to report	Nil.

SECTION E.

INSPECTION AND SUPERVISION OF FOOD.

1.—MILK SUPPLY.

(a) Inspection of farms and dairies under the Mil Order, 1926.	k and	d dairies
Number of dairy farms in the Borough		7
Number of dairies in the Borough		45
Number of Producer-Retailers		11
Number of shops selling milk		68
Number of visits to dairy farms		107
Number of visits to dairies and shops selling milk		243
Number of new dairies built		3
Number of dairies improved structurally		5
Number of dairies discontinued in use		2
(b) Bacteriological examination of milk.		
Number of samples taken (School milks)		55
Number of samples taken (Ordinary milk)		49
Number of samples taken (Designated milk)		89
Number of samples taken (For T.B. Exam.)		48
Number of samples taken (Brucella Abortis)		2
(c) Milk (Special Designations) Orders, 1936 and	1938.	
Number of producers of Tuberculin Tested milk	in	
the Borough	•••	Nil.
Number of retailers of Tuberculin Tested milk in	the	
Borough		6
Number of producers of Accredited milk in the Boro	ough	4
Number of retailers of Accredited milk in the Boro	ugh	6
Number of retailers of Pasteurised milk in the Boro	ugh	2
Number of samples of milk taken		89

2.—MEAT AND OTHER FOODS.

	Cattle, excluding Cows.	Cows.	Calves.	Sheep and Lambs.	Pigs.
Number killed (if known)	4,385	479	206	_	66,732
Number inspected	4,385	479	206	3,532	66,732
All diseases except Tuberculosis Whole carcases condemned	9	1	2	9	42
Carcases of which some part or organ was condemned	23	14	2	16	3,616
Percentage of the number in- spected affected with disease other than tuberculosis	0.73	3.12	0.96	0.45	5.4
Tuberculosis only. Whole carcases condemned	5	12	_	_	288
Carcases of which some part or organ was condemned	30	212	_	_	8,527
Percentage of the number in- spected affected with tuber- culosis	0.79	46.7	_	_	12.77

Number of pigs man		accordar	ice with	Meat		
Marking Scheme					1,545	
Number of animals exa	amined	(Anti-Mo	rtem)	2	3,699	
Number of visits to sla	ughterh	nouses			3,028	
Number of visits to she	ops, stal	ls, etc.			1,015	
Number of private sla	ughter-	houses in	use at th	e end		
of year					11	
The under-mentioned human consumption duri			e condem	ned as	unfit	for
Carcases of beef				1.55.5	27	
Beasts' lungs	* * *	***	* * *	***	273	
Beasts' heads and tong	gues		***	***	164	
Beasts' livers	***				18	
Beasts' mesenteries					86	
Beasts' kidneys		***			17	
Beasts' hearts					2	

Beasts' spleens					1
Beasts' stomachs					2
Beasts' omentum					165
Beef in lbs					280
Carcases of mutton					9
Sheeps' plucks					1
Sheeps' livers					16
Carcases of veal					2
Calves' plucks					1
Calves' kidneys			***		4
Carcases of pork	***				330
	 a 6 500	haada)			330
Pork in lbs. (including	g 0,399		1 tons 12	cwts.	2 ars.
Pigs' heads					7,716
Pigs' plucks and heng					4,032
Pigs' kidneys					6,577
Pigs' livers					2,255
Pigs' hearts					6
Pigs' pancrea					74
Pigs' spleens					2
Pigs' sets of intestines					1,581
Pigs' stomachs					68
Pigs' lungs					18
Pigs' part sets of intes					2,935
Pigs' diaphragms					616
Pigs' mesenteries					2,320
Pigs' part legs					86
Tinned food (tins):-					
Meats					174
Fruits					1,375
Jam					7
Fish					97
Chicken					20
Milk					48
Cream					6
Fish (stones)					5
Cooking fat (lbs.)					24

3.—FOOD AND DRUGS (ADULTERATION) ACT, 1928.

The following Table shows the samples taken during the year:-

Article.		Samples taken.		Samples genuine.		Samples adulterated.	
	Formal.	Informal.	Formal.	Informal.	Formal.	Informa	
Milk		82	_	66	_	16	_
Cream		-	2		2		
Butter			18		18		_
Margarine			10		10	_	_
Lard			6		6	_	_
Potted Meat		-	4		2		2
Meat Paste		-	1		1		-
Tinned Condensed							
Milk		_	6		6		
Tinned Cream			6		6	_	
Tinned Fruit		-	7		7		
Tinned Fish			6	-	6		-
Jam		-	2		2	-	_
Lemon Curd			2		2	_	
Orange Curd			1		1		-
Honey		-	1		1		_
Coffee			1		1		-
Malt Vinegar		-	4		4		-
Camphorated Oil			1	_	1	_	_
Olive Oil		-	1		1		
Syrup of Figs		-	1	*****	1	-	
Ice Cream		-	28		28		
Sausage Meat		-	2		2	-	
Syrup			1		1	-	
Cream Cheese		-	1		1		-
Totals		82	112	66	110	16	2

The following actions were taken during the year:-

Sample No.	Article.	Offence.	Action.
25	Potted Meat	Starch present	Verbal warning.
156	Potted Meat	Starch present	Verbal warning.
19	Milk	11% deficiency in milk-fat	Vendor cautioned.
22	Milk	9% deficiency in milk-fat	vendor cadeloned.
23	Milk	6% deficiency in milk-fat	
80	Milk	6% deficiency in milk-fat	Vendor cautioned.
98	Milk	20% deficiency in milk-fat	Vendor cautioned.
99	Milk	1% deficiency in milk-fat; sample in course of de- livery following No. 98.	vendor cautioned.
100	Milk	1% deficiency in milk-fat; sample in course of de- livery following No. 98.	
101	Milk	6% deficiency in milk-fat; "Appeal to Cow" sample following No. 98.	
102	Milk	5% deficiency in milk-fat; "Appeal to Cow" sample following No. 98.	
103	Milk	1% deficiency in milk-fat; 'Appeal to Cow'' sample following No. 98.	
105	Milk	32% deficiency in milk-fat	Vendor cautioned.
116	Milk	16% deficiency in milk-fat; "Appeal to Cow" sample following No. 105.	vendor cautioned.
119	Milk	2% deficiency in milk-fat; "Appeal to Cow"	
122	Milk	sample following No. 105.	Taken at the request of
123		32% deficiency in milk-fat	Taken at the request of
124	Milk Milk	16% deficiency in milk-fat 23% deficiency in milk-fat	the County Sanitary Officer.

4.—CHEMICAL AND BACTERIOLOGICAL EXAMINATION OF FOOD.

Twenty-eight samples of ice cream were submitted for bacteriological examination, and the bacterial count varied from 700 to 100,000 per ml. and in one case to many millions per ml. 10 showed B. coli in 1/100th ml. 1 showed B. coli in 1/1000th ml. and 1 showed B. coli in 1/100,000th ml.

Twelve samples were submitted for chemical analysis and the

result showed fat contents varying from 1.43% to 16.7%.

Bacteriological examinations were carried out at the Laboratory of the East Suffolk County Council, and chemical analysis by the Public Analyst.

SLAUGHTER OF ANIMALS ACT, 1933.

Number of slaughtermen's licenses renewed ... 54
Number of new slaughtermen's licenses issued ... 5
Number of slaughtermen's licenses refused ... Nil.

DISEASES OF ANIMALS ACTS, 1894-1937.—Nil.

Tuberculosis Order, 1938.—Nil.

Animals (Importation) Fertilizers and Feeding			Nil.	
Number of samples				 1
MERCHANDISE MARKS AC	T.			
Number of visits				 6
Warnings given				
RATS AND MICE (DESTRI		Аст.		
Visits to premises				 258

FACTORIES AND WORKSHOPS, YEAR 1938.

1.—Inspection of Factories, Workshops and Workplaces:—

		Number of	
Premises.	Inspections.	Written Notices.	Occupiers Prosecuted
Factories (with mechanical	00		
power) Factories (without mechanical	99		
other Premises (under the	56	4	_
Act	29	-	-
Total	184	4	_

2.—Defects found in Factories, Workshops and Workplaces:—

	Nt	imber of Defe	cts.	Number of Defects in respect of
Particulars.	Found.	Remedied.	Referred to H.M. Inspector.	which Prosecutions were instituted.
Nuisances under Public Health Acts:—	lage.			
Want of Cleanliness	16	16	-	_
Overcrowding		-	_	_
Unreasonable Temper-			_	_
ature	1	1		_
Inadequate Ventilation Ineffective drainage of floors	_	_	_	
Sanitary Conveniences Insufficient		4		_
Unsuitable or defective	1	1		
Not separate for Sexes	1	1		
Offences under the Factory and Workshop Acts:— Other Offences	_			_
TOTAL	23	23	-	-

PORT OF IPSWICH HEALTH AUTHORITY.

REPORT FOR 1938.

1.—Amount of Shipping Entering the Port During the Year 1938.

TABLE A.

			No. In	spected	No.	No. of vessels	No. of vessels reported as having or having had
	No.	Tonnage.	By the Medical Officer of Health.	By the Sanitary Inspector.	reported to be defective.	on which defects were remedied.	during the voyage Infectious Disease on board.
Steamers *Motor Sailing Fishing	125	135,545	_	101	39	34	1
Motor	100	59,993	-	86	10	9	_
Sailing	_	-	_	-	_		
H (Fishing		_					
Total Foreign	225	195,538	_	187	49	43	1
.s (Steamers	375	112,165	_	154	29	26	_
*Motor		62,128		110	8	5	_
Sailing		58,727		111	28	25	_
Steamers *Motor Sailing Fishing	-	-	_	-	_	_	_
Total Coastwise	1,704	233,020	_	375	65	56	_
Total Foreign and Coastwise	1,929	4 2 8,558	_	562	114	99	1

^{*} Includes mechanically propelled vessels other than steamers.

II.—CHARACTER OF TRADE OF PORT:—

TABLE B.

(a) Passenger Traffic during the year.—Nil.

(b) Cargo Traffic.—Principal imports: Coal, oil, spirits, grain, timber, road stone, sand, shingle, phosphates, fertilisers,

feeding stuffs and ore.

(c) Foreign Ports from which vessels arrive:—Antwerp (Belgium), Amsterdam, Rotterdam and Wormaveer (Holland), Hamburg, Stettin, Bremen (Germany), Klaipeda, Gdynia, Danzig, Archangel, Baltic and White Sea Ports, Novorossisk, Odessa, (Black Sea), Huelva (Spain), Tunis, Sfax and Suez (Africa), Abadan (Persian Gulf), Curacao (Dutch East Indies), Vancouver, Oregon, Portland (U.S.A.), Antilla (Cuba), Rosario, San Lorenzo, San Pedro, San Nicolas, Monte Video.

III.—WATER SUPPLY:—

- (a) For the Port.—Water Supply is obtained from the Ipswich Corporation's water mains.
- (b) For Shipping.—Shipping in the Dock and at Cliff Quay obtain water from the Ipswich Corporation's water mains. Shipping at the deep water mooring berth in Butterman's Bay use a water boat from Harwich.
- (c) Number of water boats and their sanitary condition.—One water boat is used. It is owned by the Felixstowe Dock Company and is inspected regularly by the Sanitary Inspector of the Harwich Port Health Authority. The sanitary condition is satisfactory.

IV.—PORT SANITARY REGULATIONS, 1933:—

- Arrangements for dealing with Declarations of Health:

 A Declaration form is handed to the Master of a vessel from a foreign port either by the Pilot, the Customs Officer or the Port Sanitary Inspector, and, when filled in, is returned to the Port Health Authority either by the Customs Officer or the Port Sanitary Inspector.
- Boarding of vessels on arrival:—
 Vessels from foreign ports are boarded by an Officer of the Port Health Authority either at the deep water mooring berths at Butterman's Bay, which is situated about six miles down the river, or at Cliff Quay, Ipswich, or at the Ipswich Dock.
- 3. Notification to the Authority of inward vessels requiring special attention (wireless messages, land signal stations, information from pilots, Customs Officers, etc.):—

 Arrangements have been made with the Customs Officers to notify to the Port Health Authority any inward vessel requiring special attention; also, for wireless messages received by local shipping agents, in accordance with the provisions of Article 6 of the Regulations, to be forwarded to the office of the Port Health Authority.
- 4. Mooring stations designated under Article 10: (a) within the docks; (b) outside the docks:—
 - (a) The established inner mooring station is situated at Cliff Quay, Ipswich.
 - (b) The established outer mooring station is situated at the Anchorage at Butterman's Bay.

 Particulars of any standing exemptions from the provisions of Article 14:—

A standing exemption from detention under Article 14 has been granted by the Medical Officer in respect of all unhealthy ships, except those unhealthy on account of cholera, plague, yellow fever, typhus, smallpox or chickenpox.

- Experience of working of Article 16:—
 No difficulty arose during the year in carrying out the restrictions on boarding or leaving a ship arriving from a foreign port.
- 7. What, if any, arrangements have been made for:-
 - (a) Premises and waiting rooms for medical examination.
 - (b) Cleansing and disinfection of ships, persons and clothing and other articles.
 - (c) Premises for the temporary accommodation of persons for whom such accommodation is required for the purpose of the regulations.
 - (d) Hospital accommodation available for Plague, Cholera, Yellow Fever, Smallpox and other infectious diseases.
 - (e) Ambulance transport.
 - (f) Supervision of contacts.
 - (a) Medical examinations are carried out on board the ship concerned.
 - (b) On a ship where infectious disease has occurred, disinfection of the infected parts of the ship is carried out by the staff of the Port Health Authority. A cleansing station for persons is established at the office of the Port Health Authority, and further facilities for the cleansing of persons exist at the Ipswich Borough Isolation Hospital and at the Ipswich Smallpox Hospital.
 - (c) Temporary accommodation is available at the Ipswich Borough Isolation Hospital for persons requiring such accommodation for the purposes of the Regulations.
 - (d) A smallpox hospital (24 beds) is maintained by the Ipswich Sanitary Authority, and is available for cases of smallpox in the Port.
 - (e) A motor ambulance, and two motor vans, are available for transport purposes.
 - (f) Contacts proceeding to places outside the Borough and Port of Ipswich are notified to the Medical Officer of Health of the district to which they are proceeding. Contacts remaining on the ship are kept under observation daily by an officer of the Port Health Authority.

- Arrangements for the bacteriological or pathological examination of rats for plague:

 The examination of rats for plague is carried out at the laboratory of the East Suffolk County Council, at Ipswich. The number of rats examined for plague during the year 1937 was 13.
- Arrangements for other bacteriological or pathological examinations:—
 Other bacteriological or pathological examinations are carried out at the Ipswich Public Health Department, the East Suffolk County Council Laboratory and the East Suffolk and Ipswich Hospital, at Ipswich.
- 10. Arrangements for the diagnosis and treatment of venereal disease among sailors under international arrangements:— Diagnosis and treatment are carried out at the East Suffolk and Ipswich Hospital.
- Arrangements for the interment of the dead:— Nil.
- 12. Other matters, if any, requiring or receiving attention:

 Nil.

Table C.

Cases of Infectious Sickness landed from Vessels:—

Disease.	Number of Ci		No. of Vessels	number of Cases for
Disease.	Passengers.	Crew.	concerned.	previous 5 years.
_	_	-	_	

TABLE D.

Cases of Infectious Sickness occurring on Vessels during the voyage, but disposed of prior to arrival:—

To:	Number of C the y		No. of Vessels	Average number of
Disease.	Passengers.	Crew.	concerned	Cases for previous 5 years.
_		1	1	_

V.—Measures Against Rodents.

(1) Steps taken for detection of rodent plague.

(a) In ships in the Port.

(b) On quays, wharves, warehouses, etc., in the vicinity of the port.

(a) Ships visited by the Port Sanitary Inspector have enquiry and search made on board for unusual

mortality of rats and mice.

(b) Premises in the vicinity of the Dock and quays are visited from time to time by the Port Sanitary Inspector and similar enquiries and search are made.

(2) Measures taken to prevent the passage of rats between ships and the shore.

Special measures, such as rat-guarding mooring ropes, are taken, and no evidence has been found of rat migration from ship to shore during the year.

(3) Methods of deratisation of (a) Ships, (b) Premises, in the

vicinity of docks or quays.

- (a) The Port of Ipswich is not an "approved" port for the purposes of Article 28 of the International Sanitary Convention, 1926. Ships requiring deratisation have therefor to proceed to an "approved" port, the nearest being the ports of London or Dover in the South or the ports of Hull and Goole in the North.
- (b) Deratisation of premises in the vicinity of the Dock and quays is carried out by the occupier of the premises concerned, the usual method being the use of traps and poisoned baits.
- (4) Measures taken for the detection of rat prevalence in ships and on shore.

The usual inspections are made by the Port Sanitary Inspector. It has not been found necessary to take special measures such as the employment of a full-time ratcatcher.

(5) Rat-proofing.

(a) To what extent are docks, wharves, warehouses, etc., rat proof?

(b) Action taken to extend rat-proofing.

(i) In ships; (ii) on shore.

(a) Many of the buildings, etc., in the vicinity of the dock and quays are very old and are not considered ratproof. Recently-erected buildings are designed with rat-proofing in mind and are more satisfactory.

(b) Advice is given by the Port Sanitary Inspector to the person concerned where evidence is found of the necessity of extension of rat-proofing of either ships or buildings. RATS DESTROYED DURING THE YEAR.

TABLE E. (1) On Vessels.

Number of Rats.	Jan.	Feb.	Mar.	Apl.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total in year.
Black Srown Species not recorded Examined Infected with plague	11111	11111	-	11111	- -	12111	11111	11411	2	14111		11111	11 28 11

(2) In Docks, Quays, Wharves and Warehouses.

Total in year.	103 1180 8
Dec.	18111
Nov.	27 1
Oct.	121 12
Sept.	1 63
Aug.	12111
July	65
June	179
May	157
Apl.	42 167 2
Mar.	1 1 1 2 1 1
Feb.	57
Jan.	117
Number of Rats.	Slack Srown Species not recorded Sxamined nfected with plague

Since November, 1937, twopence per carcase has been paid for all rats caught in the Port and Borough.

The total number of rats caught in the Port and Borough during the year was 1,570.

TABLE G.

Measures of rat destruction on Plague "infected" or "suspected" Vessels or Vessels from plague infected ports arriving in the port during the year.

No such vessel arrived in the Port of Ipswich during the year.

TABLE H.

Deratisation Certificates and Deratisation Exemption Certificates issued during the year.

Ipswich is not an "approved" port for this purpose and therefore no certificates were issued.

VI.—HYGIENE OF CREWS' SPACES.

Table J.

Classification of Nuisances.

Nationality of Vessel.	No. Inspected during the year.	Defects of original construction.	Structural defects through wear and tear.	Dirt, vermin and other conditions prejudicial to health.
British	382	3	12	49
Other Nations	180	2	7	41

VII.—FOOD INSPECTION.

(1) Action taken under the Public Health (Imported Food) Regulations, 1925, the Public Health (Imported Food) Amendment Regulations, 1933, the Public Health (Imported Milk) Regulations, 1926, and the Public Health (Preservatives, etc., in Food) Regulations, 1925 to 1927:

> No action was taken under the above-mentioned Regulations, in the Port of Ipswich, during the year.

(2) Shell-fish. Information respecting any shell-fish beds or layings within the jurisdiction of the P.H.A., stating whether they are in the opinion of the Medical Officer liable to pollution, Report of any action, taken under the Public Health (Shell-fish) Regulations, 1934, or the Public Health (Cleansing of Shell-fish) Act, 1932:—

There are oyster beds or layings within the jurisdiction of the Ipswich P.H.A. No action has been taken during the year under the above-mentioned Regulations and Act. The oyster beds are not liable to pollution.

The oysters are not retailed, but are sold wholesale to Whitstable buyers, who relay them on their grounds in Kent. Oysters are derived from Brightlingsea and Whitstable; escallops from Plymouth and Northern France; cockles from the local coast; whelks from local coast and King's Lynn; and winkles from Mersea and Brightlingsea.

- (3) Number of Samples of Food examined by :-
 - (a) Bacteriologist.
 - (b) Analyst.

No samples of food were examined in the Port of Ipswich during the year.

> H. L. BATY, Chief Port Sanitary Inspector.

SECTION F.

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

NOTIFICATIONS OF INFECTIOUS DISEASE.

The following Table gives the numbers of cases of Infectious Disease notified in Ipswich, together with the Notification Rates per 1,000 living in 1938, and the preceding twelve years.

Diseases Notified,	1926-1930.	1930.	1931-1935	1935.	16	1936.	==	1937.	-	1938.
	Nos.	Rates.	Nos.	Rates.	Nos.	Rates.	Nos.	Rates.	Nos.	Rates.
Chicken Pox	3596	8.43	1943	4.27	1	1	1	1	1	-
	472	1.10	914	2.01	123	1.83	16	.17	65	.68
Scarlet Fever	983	2.29	1826	4.01	187	2.03	268	2.85	225	2.36
Pneumonia	484	1.13	435	95	78	.84	62	99	46	.48
	140	32	203	44	59	.63	54	.57	53	.55
Puerperal Fever	73	17	100	.22	13	.14	0.0	00	2.1	00
Puerperal Pyrexia	33	.07	41	60	6	60.	10	60.	10	20.
)phthalmia										
Neonatorum	52	.12	59	.13	10	.10	œ	80	15	15
Enteric Fever	37	80	63	.14	3	.03	4	.04	3	.03
Malaria	3	900	61	.004	1	I	1	1	1	1
FLV	1	I	1	I	I	1	1	1	22	.23
tis										
Lethargica	13	.03	7	.015	1	.01	-	.01	1	
Anterior										
Poliomyelitis	00	.018	5	.004	I	1	10	.10	10	.10
Cerebro-Spinal										
Fever	10	.02	2	.011	١	1	-	.01	_	.10
Acute Polio										
Encephalitis	-	.002	-	.002	1	1	-	.01	1	1
Small Pox	1	.002	1	1	1	1	1	1	1	1
Continued Fever	1	1	-	.002	1	1	1	1	-	.01
Relapsing Fever	1	1	1	1	1	1	1	!	1	1
Total	5906	13.85	5602	12.49	483	5.22	462	4.92	472	4.96

A summary of the age incidence of notified cases, number of cases hospitalised and table of deaths is given in the following Table:—

						Α	GE C	ROUI	PS.					Re- moved to	Death
	0-	1-	2-	3—	4—	5—	10-	15—	20-	35—	45-	65×	Total	Hosp.	
htheria	_	4	1	1	4	14	18	9	8	4	2	-	65	64	3
rlet ever	1	5	10	9	20	111	34	13	18	2	2	_	225	209	_
eumonia	3	3	3	3	_	7	4	2	4	6	7	4	46	14	4
sipelas	2	1	-	-	1	-	2	-	7	7	18	15	53	18	-
erperal Pyrexia		_	_	_	_	_	_	1	21	9	_		31	20	1
hthalmia onatorum	15	_		_	_	_	_	_	_	_	_	_	15	6	_
ceric	-	-	-	-	_	-	-	_	-	-	3	-	3	2	1
sentry	1	4	4	2	1	5	1	3	-	1	_	_	22	1	_
ite iomyelitis	_	_	2	1	_	1	3	1	_	2	_	_	10	8	2
rebro- nal Fever	1	_	_	_	_	_	_	_	_	_	_	_	1	1	1
apsing Fever	_	_	_	_	_	_	1	_	_	_	_	_	1	_	_
Total	23	17	20	16	26	138	63	29	58	31	32	19	472	343	12

For mortality from the seven principal Zymotic Diseases, see page 20, Section A.

PREVALENCE OF SCARLET FEVER.

225 cases were notified in 1938, the equivalent of an attack rate of 2.36 per 1,000 living.

The following Table summarises the facts as to the notifications since the beginning of notification in 1891.

	Notifi	cations.	Remo	ovals.	Case
Periods.	Numbers.	Attack Rates per 1,000 living.	Numbers.	Proportion per cent.	Fatality per cent
1891—1900	2,654	4.29	993	37	1.9
1901-1910	1,126	1.60	880	78	1.3
1911 - 1920	2,683	3.51	2,070	77	1.6
1921-1930	1,562	1.87	1,423	91	.5
1891-1895	1,792	6.01	620	35	2.1
1896-1900	862	2.69	373	43	1.7
1901—1905	692	2.02	517	74	.8
1906—1910	434	1.20	363	83	2.1
1911—1915	2,065	5.45	1,513	73	1.8
1916—1920	618	1.59	557	90	.9
1921—1925	581	1.43	533	91	1.0
1926—1930	981	2.29	890	90	.3
1931—1935	1,826	4.08	1,699	93	.2
1931	495	5.64	461	93	.6
1932	346	3.92	324	93	.3
1933	194	2.17	184	94	
1934	459	11	421	91	
1935	332	3.64	309	93	.3
1936	187	2.02	169	90	-
1937	268	2.85	258	96	-
1938	225	2.36	209	93	_

The Ward distribution of the notified cases of Scarlet Fever since 1931 is shown in the following Table:—

Ward.	1931.	1932.	1933.	1934.	1935.	1936.	1937.		Total 1931—1938
St. Margaret's	86	75	23	45	38	31	67	67	332
St. John's	94	69	32	38	43	31	39	38	382
Alexandra	61	49	21	62	64	18	18	17	310
St. Clement's	138	47	42	250	159	66	51	50	803
Bridge	67	65	28	33	10	27	39	21	290
West	52	41	48	31	20	14	54	32	292
BOROUGH	498	346	194	459	334	187	268	225	2,511

Several cases of Scarlet Fever were associated with cases of Pharyngitis, Tonsillitis and simple sore throat in family contacts without the occurrence of a rash, thus supplementing the frequently observed fact and now bacteriologically verified observation that it is the same organism which is responsible for these various manifestations. The appearance or absence of a rash in a streptococcal infection is merely dependent on the availability in the infected individual's blood of scarlatinal anti-toxin, or substance which neutralises the rash-producing toxin liberated by certain types of streptococcus.

The following Table gives Deaths and Death-rates from Scarlet Fever since 1841.

ni-1-	Ma	les.	Fem	nales.	Per	sons.
Periods.	No.	Rate.	No.	Rate.	No.	Rate
1841-1850	53	.38	67	.43	120	.41
1851-1860	56	.33	64	.34	120	.33
1861-1870	153	.81	151	.70	304	.75
1871-1880	101	.46	99	.39	200	.42
1881-1890	18	.07	20	.06	38	.07
1891-1900	21	.07	31	.09	52	.08
1901-1910	4	.01	11	.02	15	.02
1911-1920	26	.07	18	.04	44	.05
1921-1930	3	.007	6	.01	9	.01
1841-1845	16	.25	20	.27	36	.26
1846-1850	37	.51	47	.57	84	.54
1851-1855	27	.33	39	.43	66	.38
1856-1860	29	.34	25	.25	54	.29
1861-1865	115	1.26	118	1.13	233	1.19
1866-1870	38	.39	33	.29	71	.34
1871-1875	59	.56	43	.36	102	.45
1876-1880	42	.36	56	.43	98	.40
1881-1885	16	.13	20	.14	36	.13
1886-1890	2	.01			2	.00
1891-1895	19	.13	18	.11	37	.12
1896-1900	2	.01	13	.07	15	.04
1901-1905	1	.00	5	.02	6	.01
1906-1910	3	.01	6	.03	9	.02
1911-1915	23	.12	15	.07	38	.10
1916-1920	3	.01	3	.01	6	.01
1921-1925	1	.00	5	.02	6	.01
1926-1930	2	.01	1	.00	3	.00
1931—1935	i	.00	4	.04	5	.01
1931			3	.06	3	.03
1932		_	1	.02	1	.01
1933	_			_		_
1934			-	_		_
1935	1	.02	-	_	1	.01
1936		-	-		-	-
1937	_				-	
1938						-

THE PREVALENCE OF DIPHTHERIA.

The following Table provides the main facts with regard to Diphtheria prevalence since 1891 and also the percentage of cases removed to Hospital, together with the case fatality per cent.

The notifications for 1938 numbered 65.

There were three deaths in 1938.

For details as to type, etc., see Appendix on Isolation Hospital.

	Notifi	cations.	Remo	ovals.	Deaths.
Periods.	Numbers.	Attack Rates per 1,000 living.	Numbers.	Proportion per cent.	Case Fatality per cent
1891-1900	536	.88	33	6	29.3
1901 1910	791	1.12	461	58	12.9
1911-1920	1,779	2.33	1,618	90	7.1
1921—1930	1,208	1.45	1,167	96	4.3
1891—1895	273	.91	12	4	37.7
1896-1900	263	.82	21	8	20.5
1901-1905	428	1.22	185	43	13.5
1906-1910	363	1.01	276	76	12.1
1911-1915	628	1.66	532	84	9.4
1916-1920	1,151	2.97	1,086	94	5.9
1921-1925	736	1.81	708	96	3.4
1926-1930	472	1.10	459	97	5.7
1931—1935	914	2.04	893	97	5.5
1931	348	3.97	336	96	6.9
1932	178	2.02	176	99	6.7
1933	135	1.51	132	98	5.1
1934	90	.99	88	97	6.6
1935	163	1.78	161	98	1.2
1936	123	1.33	118	96	5.0
1937	16	.17	16	100	
1938	65	.68	64	98	3.0

The following Table shows the behaviour of the Diphtheria death-rates since 1841.

D	Ma	ales.	Fem	ales.	Pers	ons.
Periods.	No.	Rate.	No.	Rate.	No.	Rate
1841—1850	19	.13	16	.10	35	.12
1851-1860	23	.13	27	.14	50	.14
1861-1870	43	.22	57	.26	100	.24
1871-1880	56	.25	53	.21	109	.23
1881-1890	77	.30	91	.31	168	.31
1891-1900	72	.24	85	.25	157	.25
1901-1910	57	.17	45	.12	102	.14
1911-1920	69	.19	58	.14	127	.16
1921-1930	27	.06	25	.05	52	.06
1841-1845	7	.10	7	.09	14	.10
1846-1850	12	.16	9	.10	21	.13
1851-1855	7	.08	5	.05	12	.07
1856-1860	16	.18	22	.22	38	-20
1861-1865	24	.26	48	.46	72	-36
1866—1870	19	.19	9	.08	28	-13
1871-1875	15	.14	17	.14	32	-14
1876-1880	41	.35	36	.27	77	-31
1881-1885	20	.16	27	.19	47	-17
1886-1890	57	.43	64	.43	121	.43
1891-1895	51	.36	52	.32	103	.34
1896-1900	21	.14	33	.19	54	.16
1901-1905	30	.18	28	.15	58	.16
1906-1910	27	.15	17	.09	44	.12
1911-1915	35	.19	24	.12	59	.15
1916-1920	34	.18	34	.16	68	.17
1921-1925	9	.04	16	.07	25	.06
1926-1930	18	.08	9	.04	27	.06
1931—1935	26	.12	25	.10	51	.11
1931	13	.31	11	.23	24	.27
1932	7	,16	5	.10	12	.13
1933	2	.04	5	.10	7	.07
1934	2 2	.04	4	.08	6	.06
1935	2	.04		-	6	.02
1936	3	.06	3	.06	6	.06
1937	-	_	-	-	_	_
1938	2	.04	1	.02	3	.03

THE PREVENTION OF DIPHTHERIA.

GENERAL INTRODUCTION AND INCIDENCE.

Diphtheria is a very dangerous disease attacking mainly children of school age and under. As with most infectious diseases its incidence is very irregular, but epidemics are found to prevail in any particular area every few years. Ipswich has been comparatively free from the severe form of the disease for some time, but epidemic waves are now arising in many parts of the country, for example, Bristol and Birmingham, in fact the latest report of the League of Nations Health Section shows that Diphtheria is definitely on the increase in all parts of Europe.

MORTALITY.

"In spite of our knowledge of diphtheria, which is far in advance of that of any other human disease, in spite of our possession of a remedy which is theoretically perfect and of a means of prevention which is 100% proof against mortality and 90% proof against attack, diphtheria still stands in the forefront of the causes of death of children. It kills some three to five thousand children every year in this country, and not the sickly children, but those of previous good health who are usually in happy circumstances and are most wanted. It varies greatly in its severity and clinical features for reasons which are well understood, since the nature of diphtheria is known to us and we have complete command of it, if and where and when the public will allow us to exercise it. The three to five thousand deaths a year are a persistent reminder of failure which rankles more than any other. For these deaths there is no valid excuse; they occur because we have not done what we know we should have done; our children die from diphtheria because we let them die, not because we cannot prevent them from dying. The blame may be a public apathy, but it is the duty of the Health Authority to remove that apathy by enlightenment and stimulation of the public.

Although patients admitted to modern fever hospitals have the advantages of skilled treatment, and above all skilled nursing, which between them effect the saving of many lives, hospitalisation does not diminish the incidence of the disease and therefore does not control diphtheria, but only promotes the salvage of the diphtheria patients."

PROGRESS IN OTHER AREAS.

In several of the large cities in Canada and U.S.A., and in certain of their provinces, the extent of the decline of diphtheria shows indubitably that it is the most preventable of all infectious diseases, in fact in some cities, e.g., Toronto, not one death occurred from diphtheria in 1937. This amazing reduction from the average annual number of 65 deaths which used to occur in that town, has been due entirely to the diphtheria prevention campaign.

MEASURES OF PREVENTION.

The first step to be taken consists of the application of a simple test for determining whether or not a child is susceptible to diphtheria. Depending on the result of this test we divide our child population into two groups, those who are immune, whether natural or as the result of a previous infection and those who are susceptible. It is the latter group with whom we are mainly concerned. The susceptible population can be protected by an injection of a harmless, but most potent preparation which is given by hypodermic injection and is quite painless and free from complications. As mentioned above, this means of prevention is 100% proof against mortality and 90% proof against attack. It has been calculated that the average cost of immunising a child is 2s. 4d. whereas the cost of treating a case in the Isolation Hospital is £25.

SUGGESTED SCHEME.

- A propaganda campaign to enlighten the public in this town on the danger of apathy and the value of prevention.
- (2) Testing the entire school population and all newcomers soon after admission to school.
- (3) Offering the means of prevention by active immunisation to all school children found susceptible, and to all the pre-school children.

CONCLUSION AND SUMMARY.

"The public memory is short, epidemics of diphtheria are the sensation of a few weeks, they are speedily forgotten. Deaths from diphtheria are constantly greater than those of maternal mortality, and over half those from road fatalities. The constancy of the tribute diphtheria extracts from us makes it unsensational, we pay for it as a matter of course, yet it requires no revolution to bring it to zero. The means are at hand—cheap, easy, free from risk. In a world full of troubles beyond our powers to control, it is incredible that one which could always be foreseen and always prevented with little trouble at an infinitesimal cost, should be allowed to remain."

The action advised above is the testing of all school children and the immunisation of the susceptibles and all children of pre-school age.

Since the above was written we have had the added danger to the children of Ipswich from diphtheria brought in by the evacuee children from London, where the carrier rate and diphtheria incidence is so high. More than ever, it is now essential that such a scheme as outlined above be proceeded with.

PREVALENCE OF THE ENTERIC GROUP.

There were three cases of Enteric Fever notified in 1938. An interesting, but unfortunate case occurred in one of the Corporation Sewage workmen who accidentally slipped into one of the sedimentation tanks and developed a pyrexia of unknown origin some weeks later which ultimately proved to be typhoid—a fatal case.

The following Table explains itself.

	Notifi	cations.	Rem	ovals.	Case
Periods.	Numbers.	Attack Rates per 1,000 living.	Numbers.	Proportion per cent.	Fatality per cent
1891-1900	938	1.51	376	40	12.8
1901-1910	485	.69	388	80	16.1
1911-1920	77	.10	62	80	7.7
1921—1930	71	.08	58	81	7.0
1891-1895	383	1.28	130	34	14.3
1896-1900	555	1.73	246	44	11.7
1901—1905	380	1.11	297	78	17.1
1906—1910	105	.29	91	86	12.4
1911—1915	56	.14	46	82	5.3
1916—1920	21	.05	16	76	14.3
1921 - 1925	34	.08	28	82	8.8
1926—1930	37	.08	30	81	5.4
1931—1935	63	.14	57	92	1.6
1931	3	.03	3	100	_
1932	5	.05	5	100	20.0
1933	1	.01	1	100	
1934	2	.02	2	100	_
1935	52	.57	46	90	-
1936	3	.03	3	100	-
1937	4	.04	3	75	
1938	3	.03	2	66	33.3

PNEUMONIA.

There were 46 cases notified under the Public Health (Infectious Diseases) Regulations of 1927. Fourteen of these cases were admitted and treated at the Isolation Hospital. (q.v.)

ERYSIPELAS.

53 cases were notified and 18 admitted and treated at the Isolation Hospital.

SMALLPOX.

There were no cases or deaths notified in 1938.

MEASLES.

This disease is not notifiable in the Borough, but the following Table provides a picture of the severity of Measles in the town.

The facts with regard to Measles mortality are set forth in the Table:—

	Ma	iles.	Fem	iales.	Pers	sons.
Periods.	No.	Rates.	No.	Rates.	No.	Rates
1841-1850	52	.38	35	.22	87	.30
1851-1860	39	.23	32	.17	71	.20
1861 - 1870	38	.19	36	.16	74	.18
1871-1880	43	.19	36	.14	79	.16
1881-1890	103	.40	93	.32	196	.36
1891 - 1900	102	.35	79	.22	181	.29
1901-1910	103	.31	90	.24	193	.27
1911-1920	70	.19	52	.12	122	.15
1921-1930	26	.06	21	.04	47	.05
1841-1845	29	.45	12	.16	41	.30
1846-1850	23	.31	23	.28	46	.29
1851-1855	21	.26	15	.16	36	.21
1856-1860	18	.21	17	.17	35	.19
1861-1865	27	.29	26	.24	53	.27
1866-1870	11	.11	10	.09	21	.10
1871-1875	15	.14	12	.10	27	.12
1876 - 1880	28	.24	24	.18	52	.21
1881-1885	27	.22	27	.19	54	.20
1886-1890	76	.58	66	.44	142	.50
1891-1895	30	.21	34	.21	64	.21
1896-1900	72	.48	45	.26	117	.36
1901-1905	49	.30	40	.22	89	.26
1906-1910	54	.31	50	.26	104	.28
1911-1915	45	.25	37	.18	82	.21
1916-1920	25	.13	15	.07	40	.10
1921-1925	10	.05	12	.05	22	.05
1926-1930	16	.07	9	.04	25	.06
1931—1935	6	.02	3	.01	9	.02
1931	1	.02	2	.04	3	.03
1932	3	.07		-	3	.03
1933	1	.02	1	.02	2	.02
1934	-	-		-		-
1935	1	.02		-	1	.01
1936	1	.02	2	.04	3	.03
1937	_	-	1	.02	1	.01
1938	-	-			-	_

WHOOPING COUGH.

The Table shows the deaths and death-rates from Whooping Cough since 1841.

Periods.	Mai	les.	Fem	ales.	Pers	ons.
renous.	No.	Rates.	No.	Rates.	No.	Rates
1841-1850	76	.55	89	.57	165	.56
1851-1860	66	.39	98	.52	164	.46
1861 - 1870	82	.43	97	.45	179	.44
1871 - 1880	126	.57	139	.56	265	.56
1881 - 1890	110	.43	138	.47	248	.45
1891 - 1900	98	.33	102	.30	200	.32
1901-1910	75	.22	92	.24	167	.23
1911 1920	64	.17	73	.18	137	.17
1921 - 1930	33	.08	39	.08	72	.08
1841-1845	31	.48	32	.44	63	.46
1846-1850	45	.62	57	.69	102	.66
1851-1855	26	.32	53	.58	79	.46
1856-1860	40	.46	45	.46	85	.46
1861-1865	33	.36	37	.35	70	.35
1866-1870	49	.50	60	.54	109	.52
1871-1875	60	.57	60	.50	120	.53
1876-1880	66	.57	79	.61	145	.59
1881-1885	44	.35	76	.54	120	.45
1886-1890	66	.50	62	.41	128	.45
1891-1895	52	.37	50	.31	102	.34
1896-1900	46	.30	52	.30	98	.30
1901-1905	45	.28	45	.24	90	.26
1906-1910	30	.17	47	.24	77	.21
1911-1915	39	.21	43	.21	82	.21
1916-1920	25	.13	30	.14	55	.14
1921-1925	17	.09	21	.09	38	.09
1926-1930	16	.07	18	.08	34	.08
1931-1935	10	.04	9	.03	19	.04
1931	-magn	-	7	.15	7	.07
1932	2	.04	-		2	.02
1933	2	.04	1	.02	3	.03
1934	6	.14	1	.02	7	.07
1935	_	_	_	_	-	-
1936	1	.02	4	.08	5	.05
1937		_		_		_
1938	-	-	1	.02	1	.01

Both Measles and Whooping Cough cases, complicated by Pneumonia, etc., are readily accepted for treatment at the Isolation Hospital. Uncomplicated cases are only hospitalised when the home conditions are conducive to the onset of complications.

Intimations are received by the School Medical Department from Head Teachers of any prolonged absences from school. These cards are passed on to the Health Visitors who visit the homes and advise parents.

In the case of Measles, Whooping Cough and Chicken Pox, exclusions are granted as necessary and leaflets of instruction and advice are left with parents in all cases where a Doctor has not been called in.

The following exclusions were granted in 1938:-

3.1 1		1.1
Measles	 	 11
Chicken Pox	 	 659
Whooping Cough	 	 240

INFLUENZA.

Although this is non-notifiable, its incidence can be assessed from the death certificates as there were 12 deaths ascribed to Influenza in 1938, which is low compared with last year's figure of 53, one of the highest recorded for a good many years.

	1	Deaths an	d Death	-Rates from	a Iniiuenz	a.
Period.	Num	ber of De	eaths.	Death-Ra	ites per 1,0	00 living
	М.	F.	P.	М.	F.	Р.
1841-1850	10	13	23	.073	.084	.079
1851-1860	3	3	6	.018	.015	.016
1861-1870	4	1	5	.028	.004	.012
1871-1880		2	2	.000	.008	.004
1881 - 1890	1	4	5	.003	.013	.009
1891 - 1900	121	143	264	.418	.433	.425
1901-1910	79	82	161	.239	.220	.228
1911-1920	171	204	375	.471	,505	.490
1921 - 1930	101	132	233	.258	.300	.280
1841—1845	2	4	6	.031	.055	.044
1846-1850	8	9	17	.110	.110	.110
1851-1855	3	1	4	.037	.011	.023
1856-1860		2	2	_	,020	.010
1861-1865	3	1	4	.033	,009	.020
1866 - 1870	1	-	1	.010	_	.004
1871—1875		1	1	_	.008	.004
1876-1880		1	1	_	.007	.004
1881-1885	-	_	_		-	_
1886-1890	1	4	5	.007	.026	.017
1891 - 1895	71	86	157	.511	.533	.525
1896-1900	50	57	107	.333	.333	,333
1901-1905	32	36	68	.199	.198	.199
1906-1910	47	46	93	.276	.241	.258
1911-1915	39	36	75	.217	.182	.198
1916-1920	132	168	300	.722	.819	.774
1921-1925	40	68	108	.209	.317	.266
1926-1930	61	64	125	.304	.284	.293
1931—1935	38	51	89	.180	.215	.199
1931	6	5	11	.144	.107	.125
1932	9	23	32	.215	.490	.360
1933	15	16	31	.356	.340	.348
1934	6	3	9	.141	.063	.099
1935	2	4	6	.046	.082	.065
1936	8	8	16	.183	.163	.173
1937	24	29	53	.541	.584	.564
1938	6	6	12	.134	.119	.126

ARTIFICIAL IMMUNISATION.

Artificial immunisation is provided against Diphtheria at the Central and Branch Clinics for school children and pre-schoolchildren-

No active campaign has been carried out. Immunisation is performed at the request of the parents or guardians of the children, and a fee is payable.

The material used is T.A.F., in three injections of 1 cc. each at fortnightly intervals. The Schick test is performed in the case of older children prior to immunisation, and after the completion of immunisation if thought desirable.

During 1938, 13 children were immunised against Diphtheria, 6 under school age and 7 of school age. Anterior Schick tests were performed in 3 cases and posterior Schick tests in 5 cases.

No special action was taken by the Local Authorities in regard to the use of Measles serum as the incidence and severity of Measles is so very low.

VENEREAL DISEASES.

REPORT RELATING TO ALL PERSONS WHO WERE TREATED AT THE TREATMENT CENTRE AT IPSWICH DURING THE YEAR ENDING DECEMBER 31st, 1938.

The number of cases treated in 1938 are given in the appended Table:—

		Males.	Females	Persons
Gonorrhœa		 143	72	215
Syphilis	***	 117	88	205
Soft Chancre		 _	_	_
Other conditions		 62	74	136
Total 1938		 322	234	556
Total 1937		 282	132	414
Average 1931-		 236	128	364

The number of cases dealt with for the first time are given below, classified according to residence:—

Year.	Ipswich.	East Suffolk.	West Suffolk.	Essex.	Total.
Average 1931—1935	126	64	2	12	204
1932	128	64	1	13	206
1933	113	67	4	10	194
1934	127	57	3	7	194
1935	134	67	2	12	215
1936	112	46	9	8	175
1937	145	66	1	11	223
1938	243	99	2	10	354

OUT-PATIENT ATTENDANCES.

(a) For individual attention by Medical Officer.

		Males.	Females.	Persons.
Gonorrhœa		 1,371	507	1.878
Syphilis		 1,347	1,036	2,383
Soft Chancre		 		
Other conditions		 102	152	254
Total 1938		 2,820	1,695	4,515
Total 1937		 1,709	604	2,313
Average 1931-	1935	 1,613	850	2,463

(b) For intermediate treatment (irrigation, dressing, etc).

	Males.	Females.	Persons.
Gonorrhœa	100	2,424	6,878
Other conditions		226	346
Total 1938	. 4,574	2,650	7,224
Total 1937	0.000	695	4,206
Average 1931—1935		649	4,482

(c) Total.

		Males.	Females.	Persons
Gonorrhœa		5,825	2,931	8,756
Syphilis		1,347	1,036	2,383
Soft Chancre		_		
Other Conditions	***	222	378	600
Total 1938		7,394	4,345	11,739
Total 1937		5,220	1,299	6,519
Average 1931-1935		5,446	1,498	6,944

Total number of attendances of all patients residing in each area:

Year.	Ipswich.	East Suffolk.	West Suffolk.	Essex.	Total.
Average 1931—1935	5,731	1,032	44	137	6,944
1932	5,042	992	25	116	5,786
1933	4,653	926	61	113	7,599
1934	6,499	1,041	49	127	7,148
1935	6.532	1,147	46	133	7,858
1936	4,365	997	26	124	5,512
1937	5,327	956	69	167	6,519
1938	8.928	2,581	49	181	11,739

IN-PATIENT DAYS.

Number of Patients and aggregate number of "In-patient days" of treatment:—

	Males.		Females.		Persons.	
	Patients	Days.	Patients.	Days.	Patients.	Days.
Syphilis	3	67		_	3	67
Gonorrhœa	12	185	18	547	30	732
Soft Chancre				-		_
Other conditions	2	36	-	-	2	36
Total 1938	17	288	18	547	35	835
Total 1937	4	58	12	465	16	523
Average 1931-1935	8	116	9	273	17	389

The following Table shows the "In-patient days" classified according to areas:—

Year.	Ipswich.	East Suffolk.	West Suffolk.	Essex.	Total.
Average	167	100	20	0.4	200
1931—1935	167	162	36	24	389
1932	242	222	21	18	503
1933	87	194	_	16	297
1934	202	169	93	31	495
1935	155	162	64	15	396
1936	105	123	55	_	283
1937	93	411	2	17	523
1938	452	372	2	9	835

EXAMINATION OF PATHOLOGICAL MATERIAL AND NUMBER OF DOSES OF ARSENOBENZENE COMPOUNDS GIVEN.

еат.	by Medica at Cer	l Officer	Specimens Examined by an Approved Laboratory.		No. of de	oses of Ar	rsenobenz	ene Com	pound
car		1000000	Wassermanns		Ipswich	East Suffolk	West Suffolk	Essex	Total
erage									
-1935	5	186	121	97	223	117	11	40	391
932	3	187	144	78	253	147	8	54	462
933	8	193	120	101	241	83	25	59	408
934	4	155	117	73	267	144	15	16	442
935	3	187	60	104	158	50	3	3	214
936	2	199	67	67	113	47	20	12	192
937	6	313	93	88	174	77	10	29	290
938	9	664	336	172	872	383	0	78	1,333

SPECIAL INVESTIGATIONS.

VULVO-VAGINITIS IN CHILDREN.

In the summer of 1938 considerable public alarm was caused by rumours of an outbreak of venereal disease among the children attending a certain school in the borough. A full investigation was carried out, and revealed that a few cases had occurred, but that there was in no sense of the word an epidemic. The total number of cases observed was 17, of whom 2 had received treatment for the same condition in 1937 and a further 3 were under treatment at the time of the outbreak, having had the condition for several months.

Facilities for examination at the Clinic were offered, and routine smears were taken and examined bacteriologically. Where suspicious clinical or bacteriological signs were reported the cases were referred to the East Suffolk Hospital or to the private doctor for treatment.

By October, 1938 all the cases had cleared up with the exception of two who were still attending the East Suffolk Hospital. No recurrence has taken place.

CANCER.

162 deaths (70 males, 92 females) were referred to Cancer in 1938, as compared with 140, 184, 164, 151 and 154 respectively in the five preceding years.

15.13% of the deaths from all causes were ascribed to Cancer.

Sixty-six of the persons dying from Cancer were over 70 years of age. This was equal to 40.7% of the total Cancer deaths at all ages.

The following Table shows the deaths and death-rates from

Cancer since 1841.

		rumoci	s and c	rude Deat	ii races.		
Period.	Ma	iles.	Fem	Females.		Persons.	
	No.	Rates.	No.	Rates.	No.	Rates	
1841-1850	12	.08	50	.32	62	.21	
1851 - 1860	21	.12	80	.42	101	.28	
1861 - 1870	47	.25	143	.66	190	.47	
1871-1880	96	.43	193	.77	289	.61	
1881-1890	115	.45	243	.84	358	.66	
1891-1900	182	.63	299	.90	481	.77	
1901-1910	290	.87	413	1.11	703	1.00	
1911-1920	399	1.10	562	1.39	961	1.25	
1921-1930	523	1.33	694	1.58	1217	1.46	
1841-1845	4	.06	24	. 33	28	.20	
1846-1850	8	.11	26	.31	34	.22	
1851-1855	12	.15	43	.47	55	.32	
1856-1860	9	.10	37	.38	46	.25	
1861-1865	12	.13	77	.74	89	.45	
1866-1870	35	.36	66	.59	101	.48	
1871-1875	48	.46	103	.86	151	.67	
1876-1880	48	.42	90	.69	138	.56	
1881-1885	50	.40	117	.84	167	.63	
1886-1890	65	.50	126	.84	191	.68	
1891-1895	74	.53	145	.91	219	.73	
1896-1900	108	.72	154	.90	262	.81	
1901-1905	117	.73	164	.90	281	.82	
1906-1910	173	1.01	249	1.31	422	1.17	
1911-1915	196	1.09	274	1.38	470	1.24	
1916-1920	203	1.11	288	1.40	491	1.26	
1921-1925	256	1.34	329	1.53	585	1.44	
1926-1930	267	1.33	365	1.62	632	1.48	
1931-1935	314	1.48	443	1.87	757	1.69	
1926	44	1.10	61	1.38	105	1.24	
1927	50	1.23	66	1.45	116	1.34	
1928	49	1.21	80	1.75	129	1.50	
1929	57	1.41	79	1.73	136	1.58	
1930	67	1.63	79	1.72	146	1.68	
1931	47	1.13	86	1.85	133	1.51	
1932	67	1.60	88	1.87	155	1.74	
1933	59	1.40	95	2.01	154	1.72	
1934	62	1.45	89	1.86	151	1.67	
1935	79	1.83	85	1.76	164	1.79	
1936	86	1.97	98	2.00	184	1.99	
1937	60	1.35	80	1.61	140	1.49	
1938	70	1.56	92	1.83	162	1.67	

PRINCIPAL SITE DISTRIBUTIONS OF THE DEATHS FROM CANCER.

The following Table gives the experience of 1938:-

Site.	Males.	Females.	Persons
Stomach	6	12	18
Breast	_	14	14
Intestines	18	22	40
Rectum	6	4	10
Lungs	10	5	15

This includes the same organs as in 1937, with the exception that Cancers of the Lung replace Cancers of the Oesophagus.

There is a rise in Cancers of the Intestines, Rectum and Lungs, and a fall in those of the Breast and Stomach.

AGE AND SEX DISTRIBUTION OF THE DEATH-RATES FROM CANCER PER MILLION LIVING.

1938.	P.		12,313 14,641 14,641 17,492 1,669 1,669
	ď.	28 27 27 27 28 26 27 151 151 262 811 277 4,577 8,068	11,222 17,112 17,375 12,605 1,693 13,962
1931-1935	F.	53 54 48 11,263 2,251 3,019 3,468 4,551 8,266	11,568 15,205 16,074 14,846 1,875 13,595
19	M.	55 — 165 — 284 290 654 2,056 4,352 4,608 7,818	10.740 20,145 19,658 8,247 1,488 14,524
	Ъ.	29 27 27 27 27 3821 1,532 3,550 5,093 7,334	10,140 13,108 14,238 19,495 8, 10,495 1,465 1,465 11,663
1921—1930	F.	54 26 26 26 79 79 1,083 2,003 2,634 5,445 6,638	8,575 12,573 15,877 11,242 1,580 1,102
19	M.	58 27 27 28 32 97 106 292 2,439 3,731 4,662 8,205	12,436 13,992 11,420 8,962 1,336 12,554
0.	Р.	55 52 14 119 119 447 756 1,539 2,276 3,580 4,595 9,033	10,740 12,736 9,699 7,590 1,256 10,962
1911—1920	H.	27 27 29 184 196 673 1,011 2,086 2,513 3,792 4,085 7,973	10,550 11,200 11,389 9,090 1,394 10,754
19	M.	82 51 	8,252 11,039 10,5 8,992 15,178 11,2 6,705 6,905 11,3 6,373 5,076 9,0 1,002 1,103 1,3 8,106 11,300 10,7
	P.	13 27 28 28 32 104 75 616 616 936 1,644 3,741 5,095 5,890	8,252 8,992 6,705 6,373 1,002 8,106
1901—1910	Н.	26 27 27 27 1128 105 11,130 11,859 2,651 3,582 5,288 5,288 5,884	7,705 8,826 7,105 8,858 1,112 8,034
15	M.	273 70 70 76 40 1,398 2,371 3,928 4,846 5,939	9,045 9,230 6,172 1,808 879 8,208
	P.	21 31 24 28 88 88 88 161 772 1,302 2,019 3,481 3,365 5,664	4,804 4,099 5,025 3,389 723 4,551
1881-1900	F.	43 117 100 277 286 1,168 1,669 2,359 4,541 3,442 6,096	4,287 4,797 6,563 2,791 877 4,659
31	M.	15 32 32 54 43 72 27 27 312 867 1,613 2,176 3,266 5,108	5,479 3,124 2,820 4,746 4,746 548
	Ъ.	20 20 28 221 418 1,083 1,328 1,498 2,041 2,505	2,404 2,603 2,714 666 424 2,393
1841-1880	F.	20 111 124 124 1298 7248 7248 1,842 1,987 2,682 2,552	2,714 2,822 2,663 517 579 579 2,579
-	M.	20 12 29 32 32 55 127 70 261 249 718 917 1,239 2,447	1,967 2,331 2,797 935 248 2,131
Age	Periods.	100 110 110 110 110 110 110 110 110 110	- 75 - 80 - 85 + 85 All Ages + 70

M.-Males F.-Females P.-Persons

Until this year facilities for the diagnosis and treatment of Cancer in the area were solely available at the East Suffolk and Ipswich Hospital, which has a well equipped X-Ray Department together with facilities for medium and surface X-ray therapy. Patients requiring deep X-ray therapy were transferred to one of the greater London hospitals.

In 1936 it was decided to form a Radium Centre at the Hospital, and the Hospital Authorities are now endeavouring to ascertain if it is possible to secure the specialist services of a Radiation Officer to take charge of the Centre and to co-ordinate the scheme with other hospitals.

As noted in the previous section, the appropriation by the Public Health Committee of the Poor Law Infirmary took place on the 1st April. This is a hospital of 311 beds and, since appropriation, is in the process of being raised to the status of a large general hospital.

While diagnostic facilities may be reasonably sufficient at the East Suffolk and Ipswich Hospital, it has been obvious from their large waiting lists that the facilities for treatment were far from adequate. Further, with the ageing of the population so that nearly half dies at the age of 70 or more, we are in the midst of an increase in the number of deaths from Cancer which the above Table clearly shows. As has previously been explained, the greatest increase in Cancer statistics are to be found in those of internal organs due to the greater ease with which diagnosis of Cancer can be made. Accordingly, increased facilities are becoming increasingly necessary both for diagnosis and for treatment of Cancer, and one of the great benefits the appropriation of the Borough General Hospital will confer on Ipswich and its surroundings will be to provide for these additional requirements. A scheme for the co-ordination of these two general hospitals is under consideration, especially in view of the new Cancer Act.

PREVENTION OF BLINDNESS.

The general welfare of the blind in Ipswich is promoted by the Ipswich Blind Society, on which Committee are representatives of the Ipswich Town Council, viz.: the members of its Public Health Committee.

The following changes took place during the year ended 31st March, 1939.

New cases regis	tered		 	19
Transfers into I			 	4
Transfers out of	Ipswi	ch	 	
Deaths .			 	12

A total of 39 (34 males, 5 females) were in employment—34 by Blind Organisations and 5 by others. 49 males and 106 females were unemployable.

The chief occupations were basket workers, brush makers and firewood workers.

The number of persons over 70 years of age were 16 males and 48 females—a total of 64.

A scheme is now afoot to perform routine tests on all pregnant women in attendance at the clinics, so that any disease which might result in blindness in the unborn child can be treated in its early stages.

TUBERCULOSIS.

The following Table shows the notifications of Tuberculosis since 1909:—

Year.	I	Pulmona	ry.	Not	n-Pulmo	nary.	A	ll Forms	S.
	М.	F.	P.	М.	F.	P.	M.	F.	P.
1909	41	23	64	_	_	_	41	23	64
1910	29	15	44		_		29	15	44
Average	35	19	54	-	_	_	35	19	54
1911	75	57	132		_		75	57	132
1912	178	152	330	_	_	_	178	152	330
1913	112	88	200	58	52	110	170	140	310
1914	98	58	156	18	23	41	116	81	197
1915	60	56	116	18	20	38	78	76	154
1916	91	77	168	19	17	36	110	94	204
1917	77	78	155	18	12	30	95	90	183
1918	81	97	178	16	18	34	97	115	212
1919	82	82	164	26	39	65	108	121	229
1920	70	67	137	39	36	75	109	103	212
Average	92.4	81.2	173.6	21.2	21.7	42.9	113.6	102.9	216.
1921	173	131	304	41	35	76	214	166	380
1922	90	65	155	23	21	44	113	86	199
1923	72	61	133	38	36	74	110	97	207
1924	72	69	141	24	28	52	96	97	193
1925	72	74	146	34	32	66	106	106	212
1926	55	68	123	41	35	76	96	103	199
1927	68	59	127	26	27	53	94	86	180
1928	72	69	141	20	24	44	92	93	185
1929	63	69	132	25	32	57	88	101	189
1930	62	54	116	19	26	45	81	80	161
Average	79.9	71.9	151.8	29.1	29.6	-58.7	109.0	101.5	210
1931	69	63	132	24	23	47	93	86	179
1932	70	75	145	19	28	47	89	103	192
1933	80	82	162	21	19	40	101	101	202
1934	92	88	180	20	29	49	112	117	229
1935	76	81	157	16	13	29	92	94	186
1936	77	71	148	12	18	30	89	89	178
1937	46	43	89	11	15	26	57	58	115
1938	51	45	96	13	21	34	64	66	130

Notification rates are assessed in the appended Table:-

Periods.	Pulmonary.			Non-	Pulmon	агу.	All Forms.			
	М.	F.	P.	M.	F.	P.	М.	F.	P.	
1911-1920	2.55	2.01	2.27	.58	.54	.56	3.13	2.55	2.83	
1921-1930	2.03	1.63	1.82	.74	.67	.70	2.77	2.30	2.52	
1931-1935	1.83	1.64	1.73	.47	.47	.47	2.31	2.12	2.21	
1931	1.66	1.36	1.50	.58	.49	.53	2.24	1.85	2.03	
1932	1.68	1.61	1.64	.45	.60	.53	2.13	2.21	2.17	
1933	1.90	1.74	1.82	.50	.40	.45	2.40	2.14	2.27	
1934	2.16	1.84	1.99	.46	.60	.54	2.63	2.45	2.54	
1935	1.76	1.68	1.72	.37	.27	.32	2.13	1.95	2.04	
1936	1.76	1.45	1.60	.27	.36	.32	2.03	1.82	1.92	
1937	1.03	.86	.94	.24	.30	.27	1.28	1.16	1.22	
1938	1.14	.90	.95	.29	.42	.36	1.43	1.31	1.37	

AGE AND SEX DISTRIBUTIONS OF THE NOTIFICATIONS OF TUBERCULOSIS, 1938.

Age.	Pu	lmona	ry.		ll othe forms.			Total 1938.		Total 1937.
	M.	F.	P.	М.	F.	P.	М.	F.	P.	Persons
— 1	_	1	1	3	_	3	3	1	4	1
1- 5		1	1	2	3	5	2	4	6	4
5-10	2	2	4	2	4	6	4	6	10	17
10-15	3	2	5	3	4	7	6	6	12	8
15-20	3	7	10	1	5	6	4	12	16	8
20-25	7	11	18	1	2	3	8	13	21	11
25-35	14	9	23	_	1	1	14	10	24	28
35-45	6	5	11	_	_		6	5	11	18
45-55	8	2	10	-	1	1	8	3	11	10
55-65	4	1	5	_	-		4	1	5	7
+65	4	4	8	1	1	2	5	5	10	3
Total	51	45	96	13	21	34	64	66	130	115

PRINCIPAL SITES OF TUBERCULOSIS.

The following Table shows the number of cases of the different varieties of Tuberculosis, notified since 1921:—

Situation of Disease.	Average 1921—1925	Average 1926—1930	Average 1931—1935	1935	1936	1937	1938
Pulmonary	175.6	127.8	155.2	157	148	89	96
Abdominal	7.6	8.6	4.4	6	4	5	3
Cerebral	5.2	6.0	5.4	3	3	4	4
General	0.6	0.2	_		-		-
Bones and Joints	19.6	13.4	8.0	7	3	4	6
Glands	17.2	20.4	21.4	11	15	11	20
All other forms of T.B	12.4	6.0	3.2	2	5	2	1
TOTAL	238.2	182.4	197.6	186	178	115	130

TUBERCULOSIS SURVIVAL TABLE CORRECTED TO DECEMBER 31st, 1938.

The number of persons notified as suffering from the various forms of Tuberculosis and known to have survived on December 31st, 1938, is shown as follows:—

Se	Sex. Pulmonary.		Non-Pulmonary.	All Forms
Males Females Persons		726	302	1028
		682	320	1002
Per	sons	1408	622	2030
	1937	1594	647	2241
	1936	1590	641	2231
	1935	1534	632	2166
	1934	1454	634	2088
118	1933	1367	603	1970
So	1932	1273	608	1881
Persons	1931	1225	576	1801
P	1930	1194	566	1760
	1929	1179	529	1708
	1928	1145	506	1651
	1927	1092	527	1619
	1926	1095	484	1579

DEATHS FROM TUBERCULOSIS.

A total of 57 deaths were ascribed to Pulmonary and Non-Pulmonary forms of Tuberculosis in the year 1938, as compared with 47 in 1937 (the lowest figure yet recorded in the Borough), 60, 57, 75, 59 and 75 respectively in the five preceding years.

Forty-three of the deaths (19 male, 24 female) were referred to Pulmonary Tuberculosis and 14 (9 male, 5 female) to other forms of Tuberculosis.

The following Table shows the death-rates per million living from the various forms of Tuberculosis from 1841-1850 to the present date:—

Periods.	T	ulmonar iberculos	y is.	Non-Pulmonary Tuberculosis.			A Tu	ll forms aberculos	of is.
i crious.	М.	F.	P.	M.	F.	P.	M.	F.	Ρ.
1841—1850	3,529	3,610	3,572	360	357	359	3,890	3,968	3,93
1851-1860	2,725	3,088	2,918	551	420	481	3,276	3,508	3,40
1861—1870	2,819	2,857	2,839	570	344	449	3,390	3,201	3,28
1871—1880	2,739	2,423	2,571	476	496	486	3,215	2,919	3,05
1841—1880	2,909	2,921	2,915	496	411	451	3,405	3,333	3,36
1881—1890	2,167	1,970	2,062	630	608	618	2,797	2,578	2,68
1891—1900	1,984	1,526	1,740	450	430	439	2,435	1,956	2,17
1881—1900	2,070	1,733	1,890	534	512	522	2,604	2,246	2,41
1901-1910	1,728	1,215	1,456	397	363	379	2,125	1,579	1,83
1911-1920	1,332	1,069	1.193	367	282	322	1,700	1,352	1,51
1921-1930	986	703	837	186	157	168	1,173	860	1,00
1841—1845	3,873	4,019	3,950	94	152	125	3,968	4,172	4,07
1846 - 1850	3,228	3,252	3,241	593	537	563	3,822	3,790	3,80
1851-1855	3,105	3.296	3,207	638	420	522	3,744	3,717	3,72
1856-1860	2,368	2,894	2,649	469	420	443	2.837	3,315	3,09
1861-1865	2,520	3.071	2,814	517	297	399	3,037	3,359	3,21
1866-1870	3,101	2,655	2,863	620	388	496	3,721	3,044	3,35
1871-1875	2,808	2,607	2,701	469	538	498	3,277	3,146	3,20
1876 - 1880	2,676	2,253	2,452	482	456	469	3,159	2,710	2,92
1881-1885	2,359	2,143	2,244	644	640	642	3,004	2,783	2,88
1886-1890	1,986	1,808	1,891	616	578	595	2,602	2,386	2,48
1891-1895	2,131	1,701	1,901	439	351	392	2,571	2,052	2,29
1896-1900	1,848	1,363	1,590	460	503	483	2,308	1,866	2,07
1901-1905	1,779	1,335	1,543	349	331	339	2,128	1,667	1,88
1906-1910	1,679	1,100	1,373	442	394	417	2,121	1,495	1,79
1911-1915	1,468	981	1,212	357	246	299	1,825	1,227	1,51
1916-1920	1,199	1,155	1,175	377	318	346	1,577	1,473	1,52
1921-1925	1,085	779	923	183	154	167	1,268	933	1,09
1926-1930	892	631	754	189	160	173	1,082	791	92
1931—1935	734	597	662	113	143	129	848	741	79
1931	869	776	820	144	215	182	1,014	992	1,00
1932	788	661	721	95	149	124	884	811	84
1933	618	425	516	214	85	145	832	510	66
1934	752	672	709	47	189	122	799	861	83
1935	649	455	547	69	82	76	718	538	62
1936	710	409	551	45	143	97	756	552	64
1937	564	302	426	22	121	74	587	423	50
1938	424	478	452	201	100	147	624	578	59

AGE DISTRIBUTION OF THE TUBERCULOSIS DEATH-RATES PER MILLION LIVING (PERSONS).

599 1938 131 618 618 749 711 711 618 477 477 1,159 803 803 803 803 151 Age distribution of the Tuberculosis death-rates per million living (persons). 500 1937 1931-1935 598 163 166 762 1,088 1,347 937 937 937 946 1,020 1,355 1,355 1,355 1,355 1,355 1,355 1,355 1,355 1,355 1,355 1,355 1,088 1,368 791 1921-1930 731 275 275 270 769 769 1,247 1,494 1,247 1,464 1,464 1,464 1,464 1,452 1,452 1,452 1,141 1,141 1,142 1,143 1,494 1,008 1911-1920 516 1,869 458 531 1,455 1,924 1,959 1,897 1,897 1,897 1,778 1,788 1,788 1,788 1,737 1,737 1901 - 19102,405 802 804 604 1,221 2,032 2,227 2,227 2,256 2,579 2,065 2,065 2,065 1,722 1,836 1881 - 19003,020 1,006 1,041 1,969 1,969 2,758 3,497 3,492 3,700 2,776 2,776 2,776 2,776 2,776 2,776 3,492 3,492 3,492 3,492 3,493 3,494 3,493 1841-1880 3,488 1,081 1,081 1,081 3,018 5,136 5,136 5,136 5,137 3,275 3,547 3,547 3,547 690 690 367 All ages Age Periods. +70 +70

	Number o	Number of Deaths under I year from various forms of Tuberculosis.							
	Pulmonary.	Cerebral.	Abdominal.	All Forms.	per 1,000 Birth				
1841—1850	31	_	34	68	7.241				
1851-1860	56	3	61	120	10.062				
1861-1870	21	3	59	85	6.394				
1871-1880	17	10	50	82	5.252				
1881-1890	20	41	30	98	5,729				
1891-1900	15	21	27	68	3.710				
1901-1910	17	14	15	59	3.138				
19111920	7	18	10	43	2.600				
1921-1930	1	10		12	.800				
1931-1937		5	_	6	.633				
1938	-	2	-	2	.137				

This is the lowest Infantile Tuberculosis death-rate yet recorded for Ipswich.

TUBERCULOSIS DISPENSARY.

The number of cases on the Dispensary Register (as distinct from the Notification Register) at December 31st, 1938, was 466.

This figure includes only those cases presenting themselves at the Dispensary during the last two years.

827 X-Ray examinations were carried out during 1938.

The Tuberculosis Officer paid 25 visits to the homes of patients, and in addition, furnished Practitioners with 275 written reports upon patients sent him for examination.

Year.	No. of Patients attending Dispensary.	No. of Visits paid by Patients.	No. of Visits to Homes by Nurse.
Average 921—1925	569	2000	9699
926-1930	587	3000 2331	2622 3171
931—1935	689	2485	3526
551-1555	609	2400	3326
1932	646	2734	3128
1933	760	2817	3641
1934	747	2514	3775
1935	713	2204	3592
1936	802	2924	3240
1937	866	3263	3661
1938	730	2203	3249

INSTITUTIONAL TREATMENT OF TUBERCULOSIS.

During the year 172 patients were admitted to Institutions for the treatment of Tuberculosis, 169 were discharged and 23 died.

With regard to the cases discharged from Institutions, the following summary of the results of treatment is furnished by the Medical Superintendents:—

		No. of c	ases	
Condition at time of discharge.	Pulmonary.	Other Forms of Tuberculosis	Others.	Total.
Quiescent Not Quiescent Observation only Borough General Hosp.	53 27 — 4	18 10 1	33	71 37 33 5
In Institutions under 28 days	6	15	2	23
TOTAL	90	44	35	169

1.—IPSWICH SANATORIUM.

REPORT ON CASES TREATED TO A CONCLUSION DURING 1938.

During the year 160 cases, including 48 Ipswich cases, were discharged or left the Sanatorium. Of these, 2 left before completing 28 days' stay and are not classified in the Tables. 158 cases, including 48 Ipswich cases, are classified in Table "A." In Table "B," the 48 Ipswich cases are classified separately. The "Observation" cases diagnosed as Tuberculous in the Tables are included also in the classification Tables; the "Observation" cases diagnosed as non-Tuberculous are excluded from those Tables.

Of the 69 cases classified as "T.B. minus," 91.3% were quiescent on discharge. Of 18 cases classified as "T.B. plus Group 1," 77.7% were quiescent on discharge. Of the 41 cases classified as "T.B. plus Group 2," 34.1% were quiescent on discharge. Of the 25 cases classified as "T.B. plus Group 3," no case reached the stage of quiescence; 24% of these advanced cases died in the Sanatorium.

W. F. SUTCLIFFE,
Medical Superintendent.

11th May, 1939.

CLASSIFICATION OF PATIENTS TREATED TO A CONCLUSION IN 1938.

TABLE "A." ALL CASES.

	Grand Totals		5	-	1 4	1	14 26	-	19	9
		C	$\frac{2}{3}$		1.1			1	11	-
	Totals	M	- 1	-	∞ $+$	1	7 7		=	10
		M	=-	1	9	1	7. =	1	∞	1
	118	O	2	1	11	1	-	1	1.1	-
ent	More than 12 Months	W	-	-	1.1	1	C4	1		1
reatm	Mo 12	M	-	1	-	1	-	1	1 8	1
ial T		0	2	1	11	1	11	1	11	1
Duration of Residential Treatment	6-12 Months	*	6	1	10 01	1	41	1	9	8
of Re	N	N	4	1	01	1	40	1	63	1
tion		C	01	1	11	1	11	1	11	1
Dura	3-6 Months	M	10	1		1	- 10	-	c1	1
	N	M	9	1	8	1	200	1	1 8	1
	eo	C	27	1	11	1	11	1	11	1
	Under 3 Months	W		1	1-	1	61	1	01	1
	DM	M	-	1		1	11	1	11	1
	Condition at time of Discharge		Quiescent	Died in Institution	Quiescent Not Quiescent	Died in Institution	Quiescent	Died in Institution	Quiescent	Institution
	Classification on Admission		sss sunit/	L'B.	ssel e qu	T.B.	sse gulq g dn	T.B.	sulq .	L.B
	Adm				sisolu	претс	T Vienor	nluq		

OBSERVATION CASES.

	Diagnosis on Discharge from Observation		Week			ay ov Weck		7	otals	
osis	from Observation	M	W	C	М	W	C	M	W	С
percul	Tuberculous Non-Tuberculous	_1	_	9	1 2	1	1 3	2 2	1	10
Te	Doubtful	-	-	-	_		-	-	-	-
	Totals	1	_	9	3	1	4	4	1	13

38.

193	
Z	
CONCLUSION	
V.	
TO	SA
TED	CASE
TREATED	IPSWICH
NTS	
PATIENTS	" B "
IPSWICH I	TARIF
OF IP	
ASSIFICATION (

	Grand Totals.		24	1	8		rc rc	T	1 80	-
		O	21 2	1	11	1	11	!	11	1
	Totals	W	11	1	-	1	- 5	1	1 64	1
		M	ω	1	61	i	6 4	1	1-	1
	an hs.	O	∞	1	11	1	11	1	11	-
ent.	More than	W	11	1	11	1	11	1	11	1
reatm	Mc 12	M	11	1	-	1	11	1	11	1
ial T		o	12	1	11	1	11	1	11	1
sident	6-12 Months.	W	11	1	-	1	64	1	01	1
of Res	M	M	-	1	-	1		1	1-	1
Duration of Residential Treatment.	3-6 Months.	0	-	1	11	1	11	1	11	1
Dura		W	11	1	11	1	! -	1	11	1
	M	M	24	1	1.1	1	3.62	1	11	١
		U	-	-	11	1	11	1	11	1
	Under 3 Months.	W	11	-	11	1	11	1	11	1
	DM	M	11	1	11	1	11	1	11	1
	Condition at time of Discharge.		Quiescent Not Quiescent	Died in Institution	Quiescent	Died in Institution	Quiescent	Institution	Quiescent	Institution
	Classification on Admission.		ssu Snuib	CL T.B. 7	ssal sulq I du	T.B.	Plus 2.	T.B	seel sulf.	T.B
	Classi				.sisolu	nperc	Г утыпоп	Puln		

OBSERVATION CASES.

N.	Diagnosis on Discharge	Stay under 4 Weeks.		Stay over 4 Weeks.		Totals.				
nar.	from Observation.	M	W	С	M	W	С	M	w	C
For Pulmonary Tuberculosis.	Tuberculous	_	_	8	_	_	1	_	_	5
	Non-Tuberculous	_	-	-	2	-	3	2	-	
	Doubtful		_	-	-	-	_	-	_	
part .	Totals		_	8	2	_	4	2	_	1:

2.—EAST SUFFOLK AND IPSWICH HOSPITAL.

The following Table gives the number of Patients suffering from Surgical Tuberculosis who have been treated at the East Suffolk and Ipswich Hospital since 1925:—

Year.	Remaining from Previous Year.	Admitted.	Treated.	Discharged.	Deaths.	Remaining
1925	12	44	56	45	3	8
1926	8	53	61	48	2	11
1927	11	29	40	36	2	2
1928	2	26	28	22	6	_
1929	-	21	21	19	1	1
1930	1	21	22	20	1	1
1931	1	24	25	18	_	7
1932	7	16	23	19		4
1933	4	32	36	31	-	5
1934	5	28	33	32	-	1
1935	1	23	24	17	4	3
1936	3	17	20	13	2	5
1937	5	29	34	32	1	1
1938	1	25	26	24		2

3.—IPSWICH ISOLATION HOSPITAL.

(a) TREATMENT OF PULMONARY TUBERCULOSIS.

The Field Ward had, until this year, been used solely for the treatment of advanced cases, but this year it was decided to admit early cases requiring hospitalisation as well as observation cases. The latter are observed while in cubicles attached to the Ward and the presence or absence of the disease decided upon within one month of admission. Early cases of Tuberculosis requiring hospital treatment as a preparation to Sanatorium treatment can, at the same time, be assessed both clinically and psychologically as to their suitability for sanatorium life. Thus this hospital unit forms a new link in the Ipswich Borough Tuberculosis Scheme.

When a case is suitable for collapse of the lung by means of artificial pneumo-thorax, this treatment is initiated in the Field Ward and thus the reaction of the patient may be observed while under constant medical and nursing supervision and providing he makes satisfactory progress he is then passed on to the Sanatorium.

Year.	Remaining from previous Year.	Admitted.	Treated.	Discharged.	Deaths.	Remaining
1925	18	62	80	35	24	21
1926	21	60	81	39	25	17
1927	17	53	70	28	28	14
1928	14	62	76	22	27	27
1929	27	46	73	24	25	24
1930	24	65	89	34	27	28
1931*	28	19	47	36	11	_
1932	_	35	35	8	8	19
1933	19	48	67	32	18	17
1934	17	53	70	32	22	16
1935	16	59	75	35	20	20
1936	20	56	76	32	21	23
1937	23	69	92	47	20	25
1938	25	92	117	73	20	24

^{*}Ward closed from 8th August, 1931, to 11th May, 1932.

(b) TREATMENT OF SURGICAL TUBERCULOSIS.

Year.	Remaining from Previous Year.	Admitted.	Treated.	Discharged.	Deaths.	Remaining
1925	_	10	10	3	_	7
1926	7	6	13	4	1	8
1927	8	30	38	17	1	20
1928	20	20	40	23	3	14
1929	14	35	49	26	4	19
1930	19	32	51	34	2	15
1931*	15	2	17	17	_	_
1932*	_	19	19	_	-	19
1933	19	16	35	24	3	8
1934	8	8	16	4	_	12
1935	12	2	14	7	_	7
1936	7	10	17	12	1	4
1937	4	24	28	14	2	12
1938	12	24	36	21	1	14

^{*}Ward closed from 21st January, 1931, to 14th October, 1932.

The patients in this ward receive specialised orthopaedic nursing, and in addition are under the close supervision of the consulting Orthopaedic Surgeon, Mr. E. C. Bell Jones. For the greater part of the year, provided the weather is suitable, all the beds are moved out into a sheltered verandah, where the patients may receive the full benefits of fresh air and sunlight.

DENTAL WORK IN CONNECTION WITH TUBERCULOSIS, 1938.

	Males.	Females.	Total.
Number inspected at Clinic	18	14	32
	1	3	4
" , " , " Isolation Hospital " of visits to Isolation Hospital			4
cocce treated	10	14	24
attandanasa mada	41	58	99
tooth autracted	11	21	32
local apasethetic cases	5	9	14
Nitrous Onido administro	.,		
	1	3	4
Eillings	10	32	51
	4	52	56
,, ,, Sundry dressings	+	34	50
,, ,, patients for whom dentures were fitted	2	-1	6

Compared with the year 1937, we record 25 fewer persons inspected and 55 fewer teeth extracted. On the other hand, 13 more fillings were done.

Below is a Table showing the occupation of those notified as Tuberculous during the six years, 1933-1938. In addition to those shown below, 203 children have been under observation for Tuberculosis. Of these, a great majority are suspected cases of hilar Tuberculosis, i.e., Tuberculosis of glands of the root of the lung, and not involving the lung itself.

	MAL	E.	FEM	IALE.
Occupation or Profession.	Pulmonary	Non- pulmonary	Pulmonary	Non- pulmonary
General Labourers	49	1	_	_
Housewives			153	14
Clerks	25	2.	10	2
Woodworkers	22	2 3	_	_
Grocers, Bakers, Provision		3		
Merchants, Butchers	18	2		
	42	2 15	38	8
No occupation		15		0
Domestics	2		28	4
Factory Hands, Machinists	1000			
Etc	10	_	32	4
Shop Assistants	8	2	19	1
Drapers, Tailors, Tailor-				
esses	5	_	21	1
Foundry Workers	16	2	-	
Drivers and Conductors	14	1		
Builders and Plasterers	16	_		_
Painters	12	_		
Travellers (Postmen,				
Hawkers, Etc.)	8	2	_	_
Nurses and Medical Work-	0	-		
	1		9	1
ers	1		,	
Services: Army, Navy and	3	2		
Air Force	3	2		
Metal Workers, Welders,	10			
Etc	10	1		
Engineers	10	2	_	
Teachers	2	1	2	2
Printers	3	_	4	1
Warehousemen and Store-	77370			
keepers	6	-	_	_
Electricians	5	_		
Refuse Collectors	3	-	_	
Milkmen, Dairymen	3		_	
Waitresses and Barmen	4		1	
****	2		_	-
Window Cleaners	la	100000	5,57,50	

APPENDIX. I.

MATERNITY AND CHILD WELFARE.

MATERNITY WELFARE.

Clinics held under the Maternity and Child Welfare Scheme under the personal supervision of the Assistant Medical Officers of Health (Dr. Doris E. P. Jolly and Dr. I. M. Cullum).

The Clinics at the Public Health Department and Branch Clinic were as under during 1938:—

Public Health Department, Elm Street.—Monday afternoons, Tuesday, Thursday and Friday mornings.

Branch Clinic, Clapgate Lane.—Wednesday and Saturday mornings.

ANTE-NATAL CLINICS.

The following Table gives the numbers examined and the total examinations by the Medical Officer:—

	Ma	ain Clinic.		Bra	nch Clinic.		Tota!
Year.	Cases Examined.	Re-exam- inations.	Total.	Cases Examined.	Re-exam- inations.	Total.	Exam- nations.
1924	27	18	45	_	_	_	45
1925	61	65	126	_	-		126
1926	123	81	204		_	-	204
1927	206	71	277	_	-		277
1928	290	115	405		_		405
Average	141	70	211		_		211
1929	311	343	654	_	_	_	654
1930	447	687	1134		_		1134
1931	476	656	1132		_		1132
1932	679	1016	1695	200	_	-	1695
1933	747	1122	1869		-	_	1869
Average	532	765	1297		_	_	1297
1934	751	1328	2079	_	_	_	2079
1935	825	1531	2356	-	_		2356
1936	681	1306	1987	147	430	*577	2564
1937	714	1672	2386	274	723	997	3383
1938	798	2155	2953	334	1155	1489	4442
verage	754	1598	2352	_	_	_	2965

Part year only.

POST-NATAL CLINICS.

	Ma	in Clinic.		Bra	nch Clinic.		Total
Year.	Cases Examined.	Re-exam- ination.	Total.	Cases Examined	Re-exam- inations.	Total.	Exam- inations
1924	_	_	_	_	_	_	_
1925	_	_	10				10
1926	-	_	48	_	_	_	48
1927	52	43	95	_	-	-	95
1928	67	66	133	_	_	-	133
Average		_	_		_	_	
1929	79	63	142	_		_	142
1930	92	44	136	_	_	-	136
1931	104	44	148	_		_	148
1932	63	32	95	_			95
1933	61	22	83		_	-	83
Average	80	41	121	_	_	_	121
1934	70	22	92			_	92
1935	73	29	102	_	_	_	102
1936	69	34	103	27	8	35	138
1937	69	33	102	82	37	119	221
1938	97	47	144	31	5	36	180
Average	76	33	109	_	_	_	147

ANTE AND POST-NATAL CLINICS.—DEFECTS FOUND.

The examinations carried out at the Ante-Natal and Post-Natal
Clinics revealed the following defects:—

1		Ante-Natal.		P	ost-Nata	1.
Defect.	Main Clinic.	Branch Clinic.	Total.	Main Clinic.	Branch Clinic.	Total
Albuminuria	10	4	14	1	_	1
Anæmia	1	4	5	_	_	_
Breast Disorders	1	_	1	7	-	7
Contracted Pelvis	1	1	2	-	-	-
Debility	_	1	1	7		7
Dental Caries	298	156	454	15	2	17
Disease of Heart	5	3	8	_	1	_
Dyspepsia	_	1	1	1	-	1
Gynæcological Disorders	14	8	22	24	7	31
Hæmorrhage	10	3	13	1	_	1
Hæmorrhoids	3	3	6		_	_
Malpresentation	1	1	2	-		_
Neuralgia	_	_	_	-		-
Oedema	5	8	13		-	_
Ophthalmic Disorders	3	_	3	_		_
Respiratory Diseases	7	4	11	1	_	1
Skin Disorders	2	8	10	5	_	5
Tuberculosis	-	1	1		-	
Varicose Veins	108	53	161	-	1	1
All others	27	14	41	3	2	5
TOTAL	496	273	769	65	12	77

IPSWICH MATERNITY HOME.

I append a Table which shows the admissions since the opening of the Home in July, 1918:—

Year.	Cases	admitted	from	Total	Average duration	Per cent of Total
rear.	IPSWICH.	Outside Areas,	Total.	No. of Days.	of stay in days.	Ipswich Births.
1919—1920	144	18	162	2,112	13.0	4.2
1921-1925	356	61	417	4,732	11.3	4.7
1926-1930	560	133	693	7,521	10.9	7.8
1931 - 1935	1171	223	1394	14,739	10.6	17.7
1926	71	15	86	935	10.8	4.6
1927	87	15	102	1,154	11.3	6.2
1928	114	27	141	1,562	11.1	8.2
1929	136	31	167	1,803	10.8	9.6
1930	152	45	197	2,067	10.5	10.6
1931	169	50	219	2,296	10.5	12.3
1932	200	33	233	2,494	10.7	14.3
1933	208	34	242	2,580	10.7	15.8
1934	258	56	314	3,285	10.5	20.5
1935	336	50	386	4,084	10.6	23.3
1936	311	57	368	3,846	10.4	22.1
1937	351	50	401	5,217	13.0	24.8
1938	332	38	370	5,113	13.8	22.6

66 per cent. of the women were confined by the midwives at the Home.

In 68 cases, or 27 per cent., medical assistance was sought, in 17 cases during labour, in 42 after labour, and in 12 for the infant, 3 requisitions involved both mother and child.

Eight cases of Puerperal Pyrexia were notified during the year.

There were no maternal deaths, but 6 infants died under 10 days and 12 infants were stillborn (including one of twins).

The monthly admissions are given below:-

January	 	30	July	 	30
February	 	40	August	 	28
March	 	36	September		31
April	 	26	October	 	34
May	 	31	November	 	24
June	 	29	December	 	31

MIDWIVES AND MATERNITY NURSING.

During the year 1938 it was decided to increase the number of Municipal Midwives from 9 to 12. In December, 1938, the number of midwives in the scheme was 10, a further 2 taking up their appointments on the 1st January, 1939.

Number of cases attended during the year as Midwife

Number of cases attended during the year as Maternity

Nurse 364

The scheme provides that a woman desiring to book a midwife or maternity nurse may either call at the Public Health Department or go direct to one of the midwives serving the district in which she lives.

The Public Health Department, however, reserves the right to adjust bookings where necessary.

The fees arranged were as under:-

For the services of a midwife ... 35/-

For the services of a maternity nurse ... 28/-

These fees cover attendance for 14 days and are subject to variation in accordance with an approved scale.

The usual Tables are given with regard to requisitions for medical help and these refer to the complete year, 1938.

The Table shows the number of cases in which the midwives required medical help:—

	Noti	fications receive	d.	Percentage of Birth attended by Midwive in which Medical Hel- was called in.	
Year.	On behalf of Mother.	On behalf of Child.	Total,		
1921-1925	320	164	484	12.5%	
1926-1930	372	174	546	12.5%	
1931-1935	494	197	691	17.2%	
1926	76	38	114	13.5%	
1927	64	37	101	13.0%	
1928	78	21	99	12.1%	
1929	73	39	112	12.2%	
1930	81	39	120	12.6%	
1931	88	37	125	15.3%	
1932	88	46	134	15.7%	
1933	100	40	140	17.7%	
1934	104	44	148	19.4%	
1935	114	30	144	18.1%	
1936	106	41	147	18.0%	
1937	120	38	158	19.4%	
1938	148	44	192	24.4%	

The causes for which medical help was required are set forth as follows:—

	Average 1921-1925.	Average 1926—1930.	Average — 935.	1933.	1934-	1935.	1936.	1937.	1938
OTHER:— Perineum onged, Tedious or	16	21	36	40	35	47	44	53	68
ficult Labour ty Presentations ctions norrhages peral Pyrexia r Rise of Tem-	11 7 4 4 2	12 7 4 6 4	17 10 2 7 3	17 6 - 7 6	17 15 3 7 3	20 11 2 3 5	11 9 2 3 4	16 6 7 5	18 12 3 12 5
rature erent Placenta minuria pitis tion racted Pelvis mpsia pse of Cord cution	4 3 2 1 1 1 1 1 1	2 3 1 2 1 1 1 1 9	3 3 1 2 2 2 - - 1 12	3 4 2 1 5 — 1 1 7	5 1 1 3 1 — — — — 13	2 4 1 2 - - - - 17	3 8 3 1 1 - 1 - 16	6 9 2 - - - - - - 16	7 2 - 3 - - 2 - 16
TOTAL	64	74	99	100	104	114	106	120	148
HILD:— larging Eyes ity, Feebleness, etc. aturity ermations ulsions and Fits cation eorrhages (various)	10 8 6 2 2 1 3	8 9 5 4 1 - 2 6	12 8 7 3 — 2 7	9 4 11 5 — 2 9	20 5 6 2 1 4 6	7 7 7 2 — 1 6	10 3 7 2 — 4 15	7 3 8 4 — 3 13	9 1 5 9 1
TOTAL	32	35	39	40	44	30	41	38	44

ASSISTED SCHEMES IN CONNECTION WITH MATERNITY WELFARE.

The main sections in the scheme are: (a) Milk and Milk Foods to expectant and nursing mothers; (b) Provision of Maternity Home accommodation at reduced fees; (c) Provision of Midwives or Maternity Nurses at reduced fees; (d) Help towards the payment of the fees of Medical Practitioners called in by Midwives under the Midwives Act; (e) Provision of Dental Treatment and Dentures.

(a) MILK SUPPLY.

The following Table shows the number of mothers and the quantity of milk supplied during 1938, together with the figures for previous years:—

Year.	Mothers.			Pints of Milk.				
	Expectant.	Nursing.	Total.	Expectant.	Nursing.	Total.		
1930	39	104	143	1,823	10,989	12,812		
1931	59	181	240	2,784	21,744	24,528		
1932	101	272	373	4,991	26,971	31,962		
1933	107	273	380	5,093	27,280	32,373		
1934	80	198	278	3,616	20,659	24,275		
1935	83	207	290	4,351	19,680	24,031		
1936	83	233	316	4,326	28,133	32,459		
1937	104	215	319	5,194	27,763	32,957		
1938	164	301	465	11.199	40.451	51.650		

(b) MATERNITY HOME FEES.

273 women out of a total of 332 were admitted to the Ipswich Maternity Home at reduced fees. This represents 82% of assisted cases in 1938 as compared with 79% in 1937 and 78% in 1936.

The full fee is 9/- per day, but women were admitted at varying rates as under:—

8/-	 6	4/6	 3	2/6	***	3
7/6	 8	4/3	 37	2/-		9
7/-	 14	4/-	 17	1/6		1
6/9	 15	3/9	 3	1/-		9
6/-	 48	3/6	 12	6d.		1
5/-	 74	3/-	 12	Free		1

The same procedure was followed as in previous years, and the charges fixed in accordance with an income scale.

(c) Provision of Midwives or Maternity Nurses at Reduced Fees.

The Committee has approved a scale which provides a reduction in the case of the services of a midwife or maternity nurse if the curcumstances of the famliy fall below a given figure. 665 women availed themselves of this concession and this represents 72% of assisted cases.

The full fee for a midwife is 2/6 per day and for a maternity nurse 2/- per day. The actual fees charged according to the scale varied from nothing up to these figures.

(d) Doctor's Fees.

The midwives found it necessary to call in medical assistance at 178 confinements for 192 causes. Accounts were received from Medical Practitioners in 171 of these cases.

The amount paid by the Local Authority was £197 2s. 6d., as compared with £158 10s. 0d. in 1937. In 108, or 63% of these cases the fee has been settled in full, the amount recovered being £127 10s. 6d.

Forty-one, or 24%, desired to pay by instalments, and the sum received to date totals £15 13s. 10d.

In 14 cases the fee due has been written off on account of poverty.

To date, therefore, £143 4s. 4d., or 72%, of the cost under this heading, has been recovered. The amount recovered in 1937 was 71%.

DENTAL WORK IN CONNECTION WITH MATERNITY WELFARE.

This being my last annual report after nearly twenty years of service with the Borough of Ipswich Education and Public Health Authorities, I would like to take this opportunity of making comparisons.

In 1930 we commenced the dental treatment of expectant and nursing mothers, children under 5 years of age, also patients attending the Tuberculosis Clinic and the Isolation Hospital.

With regard to Dental Work for Maternity Welfare, the following comparison is interesting:—

	YE	ARS.
	1930	1938
Number of patients examined	67	529
" advised to have treatment	66	515
,, actually treated at Clinic	38	322
,, of attendances made	136	1,492
,, ,, teeth extracted	137	1,382
" " Nitrous Oxide and Oxygen		351000
administrations	39	311
,, ,, local anaesthetics given		26
,, ,, fillings	28	397
,, ,, sundry dressings	192	257
,, ,, patients supplied with dentures	4	86
,, ,, dentures supplied	7	149

An examination of the following Table reveals that during the year, 253 mothers were examined, of whom 245 were advised to have dental treatment. The number actually treated was 161, the number of teeth extracted being 826, an average of over 5 teeth per patient.

We are still trying to persuade expectant mothers to have any necessary treatment carried out previous to confinement, the old idea that a mother must of necessity lose some teeth when a child is born, being difficult to eradicate. On further examination of the Table it will be noted that 56 patients were supplied with dentures, the actual number of dentures fitted being 96. These figures again show the unfortunate apathy of the majority of mothers to seek dental attention until their teeth become hopelessly decayed, consequently extractions and the provision of dentures form the bulk of the work. The table also shows that the average number of fillings per patient was 1.3 as compared with 5.13, which was the average number of extractions per patient.

	Ma	in Cli	nic.	Brat	ich Cl	inic.	
	A.N.	P.N.	Total.	A.N.	P.N.	Total.	TOTAL
Number of patients examined advised to have treat-	210	43	253	231	45	276	529
ment	202	43	245	225	45	270	515
actually treated at Clinic	132	29	161	116	45	161	322
of attendances made	613	156	769	571	152		1,492
of teeth extracted of Nitrous Oxide and Oxygen administra-	663	163	826	389	167	556	1,382
tions of local anaesthetics	146	39	185	91	3 5	126	311
given	14	2	16	5	5	10	26
,, of fillings	187	37	224	143	30	173	397
of sundry dressings of scalings and clean-	85	26	111	30	11	41	152
ings	43	7	50	47	8	55	105

CHILD WELFARE.

The following is a Summary of the Home Visits since 1921:—

HOME VISITS BY HEALTH VISITORS.

Year.	Expectant	Children.					
1001.	Mothers.	-1	1-5	Total			
Average							
1921-1925	14	2,090	1,910	4,000			
1926-1930	35	1,596	3,012	4,608			
1931—1935	82	3,396	6,168	9,564			
1926	18	1,643	2,149	3,792			
1927	6	1,477	2,094	3,571			
1928	20	1,621	4,432	6,053			
1929	55	1,590	3,384	4,974			
1930	75	1,647	3,004	4,651			
1931	61	2,965	5.992	8,957			
1932	69	3,721	6,326	10,047			
1933	65	3,403	6,182	9,585			
1934	120	3,158	5,825	8,983			
1935	96	3,735	6,516	10,251			
1936	152	3,124	5,295	8,419			
1937	179	3,206	6,373	9,579			
1938	140	3,421	5,078	8,499			

In addition the Health Visitors paid visits under the following headings:—

To	Cases in which	Midwives	had sumn	noned M	edical	
	assistance					51
,,	Cases notified a			rperal Py	rexia,	
	Ophthalmia	Neonator	um, etc.			6
,,	Stillbirths					58
"	Miscellaneous	Visits				1,758

1,556 visits were paid by members of the staff to homes in connection with fees relating to Medical assistance, the Maternity Home and the Midwives Act.

WORK OF THE INFANT CLINICS.

There are two Infant Clinics in Ipswich, one at the Public Health Department in Elm Street and the other at the Branch Clinic, Clapgate Lane.

Infant clinics are held during the following sessions:-

Public Health Department, Elm Street.—Every week-day afternoon except Saturday, from 2.30 p.m. to 5 p.m.

Branch Clinic, Clapgate Lane.—Monday, Tuesday, Wednesday and Thursday from 2.30 p.m. to 5 p.m. Friday from 4 p.m. to 5 p.m.

The following is a summary of the visits paid to the Centre since 1921:—

		MAIN CLINIC.		B	BRANCH CLINIC.			TOTAL.	
Year.	Infants-1.	Children 1-5.	Total.	; Infants-1.	Children 1—5.	"otal.	Infants-1.	Children 1-5.	Total.
Average	2 500	0.010					000	0,00	
6761-176	700,1	0.010			1	l	70c'/	3,013	10,01
1926 - 1930	8,711	3,833	12,544	1	1	I	8,711	3,833	12,54
931—1935	8,216	4,132		3,008	1,527	4,535	11,224	5,659	16,883
1926	7,428	3,083	10,511	1	1	1	7,428	3,083	10.51
1927	7,076	3,206		1	1	1	7,076	3,206	10.28
1928	9,144	4,079	13,223	1	-	1	9,144	4.079	13.22
1929	8,820	3,973	12,793	1,243	481	1,724	10,063	4,454	14.51
1930	7,930	3,749		1,916	596	2,512	9,846	4,345	14.19
1931	9,024	4,608		2,660	1,263	3,923	11,684	5,871	17.55
1932	8,381	4.287	12,668	2,615	1,615	4,230	10,996	5,902	16,89
1933	8,056	3,930		3.175	1,657	4,832	11,231	5,587	16.81
1934	7,763	4,003	11,766	2,886	1,473	4,359	10,649	5,476	16,12
1935	7,856	3,831		3,704	1,628	5,332	11,560	5,459	17,01
1936	9.018	4,670		3,939	2,806	6,745	12,957	7,476	20,43
1937	8,390	5,408		4,745	3,671	8,416	13,135	9,079	22,21
1938	8,871	6,079	14,950	5,481	4,625	10,106	14,352	10,704	25,056

EXAMINATION OF INFANTS BY MEDICAL OFFICER.

Under the Personal Supervision of the Assistant Medical Officers (Dr. Doris E. P. Jolly & Dr. I. M Cullum.).

Public Health Department, Elm Street.—Monday mornings, 9.30 p.m. to 12.30 p.m. Wednesday and Friday afternoons from 2.30 p.m. to 5 p.m.

Branch Clinic, Clapgate Lane.—Monday, Tuesday and Thursday afternoons from 2.30 p.m. to 5 p.m.

Age.	No. of Infants Examined.	No. of Re-Examinations.	Total 1938.	1937.	Average 1926—1930.	Average 1931—1935
-1	1,024	2,862	3,886	4,065	1,645	3,201
-2	352	1,267	1,619	1,465	445	796
-3	289	805	1,094	784	217	483
-4	188	527	715	583	161	314
-5	171	343	514	406	117	219
Total	2,024	5,804	7,828	7,303	2,585	5,013

ARTIFICIAL LIGHT CLINIC.

Artificial Light Clinic-Monday, Tuesday, Thursday and Friday, 2.30 p.m., Elm Street.

The figures in the appended Table show the number of children who attended:—

Age.	No of Children Treated.	Number of Re-Visits.	Total 1938.	1937.	Average 1931—1935
- 1	_		_	37	238
- 2	28	278 241	306	209	411
- 3	20	274	261 287	249 80	235 194
— ⁴	13 11	220	231	215	201
Total	72	1,013	1,085	790	1,279
School Children	85	1,448	1,533	1,642	2,014
Grand Total	157	2,461	2,618	2,432	3,093

The following Table shows the defects of the children referred to the Sunlight Clinic:—

Defect.	5 years.	+ 5 years.	Total.
Subnormal Nutrition	7	6	13
Pretubercular Debility	2	8	10
Enlarged Glands (Neck)	1	9	10
Rachitic & Prerachitic	12	_	12
Tuberculous Affections :-			
Cervical Glands	1	2	3
Abdominal	_	_	_
Bones & Joints	_	-	
Lupus	_		_
Convalescence following			
Infectious Diseases	_	_	_
Catarrhal and Bronchial			
Infections	12	11	23
Anæmia, Debility and	1.00		100
Marasmus	15	36	51
Unclassified	5	4	9
TOTAL ALL FORMS	55	76	131

OPHTHALMIA NEONATORUM.

Fifteen cases were notified in 1938, as compared with 8 in the previous year.

Two cases were treated at home by medical practitioners.

Of the other cases, five were admitted to the East Suffolk and Ipswich Hospital, and five to the Ipswich Isolation Hospital, two were treated at the Borough General Hospital and one at the Ipswich Maternity Home.

The following Table gives the result of treatment:-

Recovery	without imp	airme	nt of vision	 13
Marked in	mpairment of	both	eyes	 _
Died				 1
Removed	from Distric	t and	lost sight of	 1

INFANT LIFE PROTECTION.

At the beginning of 1938 there were 60 Foster-Mothers and 74 children on the Register, whilst at the end of the year there remained 64 Foster-Mothers and 81 children.

The Health Visitors paid 203 visits to children under five years of age, and 193 to children over five years.

Four applicants for recognition as Foster-Mothers were considered unsuitable, one owing to lack of accommodation.

ASSISTANCE SCHEMES IN CONNECTION WITH CHILD WELFARE.

The main sections of the schemes are:—(a) Milk and Milk Foods for Infants; (b) Provision of Dental Treatment.

(a) MILK AND MILK FOODS.

The following Table shows the number of infants and the quantity of Milk or Milk Foods supplied during 1938, together with the figures for the seven previous years:—

Year.	Infants.	Cows Milk. Pints.	Dried Milk. Lbs. Pints.	Total Pints of Milk.
1930	65	829	760 or 4,140	4,969
1931	88	635	989 or 5,687	6,322
1932	106	760	1,022 or 5,876	6,636
1933	98	963	1,198 or 6,888	7,851
1934	69	486	953 or 5,479	5,965
1935	76	1,061	766 or 4,404	5,465
1936	142	4,553	1,220 or 7,015	11,568
1937	275	15,669	1,371 or 7,883	23,552
1938	482	33,974	1,358 or 7,808	41,782

DENTAL WORK IN CONNECTION WITH INFANT WELFARE.

		Mai	n Clin	ic.	Bran	ch Cli	nic.	
		М	F	Υ	М	F	Т	Total,
	of cases inspected	156	150	306	333	322	655	961
	of cases found to re-							
	treatment	145	140	285	153	139	292	577
	number of cases treated	142	133	275	126	106	232	507
Number	of attendances made of Deciduous teeth	281	264	545	473	456	929	1,474
	of Local Anaesthetics	235	202	437	167	153	320	757
	of Nitrous Oxide and Oxygen administra-	35	22	57	11	10	21	78
	tions	119	119	238	85	82	167	405
	of Fillings	57	64	121	140	179	319	440
,,	of Sundry Dressings	185	116	301	36	25	61	362
**	to whom advice was given, no treatment			001		20		002
	being necessary	11	10	21	180	183	363	384

Compared with the year 1937, there was an increase of 513 children inspected, 146 fillings and 150 dressings in the total work done.

These figures are very encouraging, they obviously show the appreciation of parents for the interest shown and benefit derived from care and treatment of the temporary dentition.

APPENDIX II.

IPSWICH ISOLATION HOSPITAL.

The appended Table shows the total numbers admitted to, and treated at, the Hospital since 1901:—

Year.	Admissions.	Total Treated.
Annual		
Average 1901—1910	176	202
1911—1920	574	634
1921—1930	490	561
,, 1921-1925	423	484
1926—1930	557	639
,, 1931—1935	857	984
1931	1,068	1,200
1932	783	944
1933	647	744
1934	955	1,072
1935	831	958
1936	684	817
1937	747	812
1938	814	910

Patients were admitted to the Hospital from the under-mentioned Authorities:—

Authority.			Infectious Diseases.	Tuberculosis.	Total.
IPSWICH			489	102	591
County Councils-		-			
East Suffolk	***		23	12	35
West Suffolk	***		3	_	3
Norfolk				2	2
County Boroughs-				_	
Urban District Cou	ncils-				
Aldeburgh			1	-	1
Felixstowe			18	-	18
Leiston			11	_	11
Saxmundham			_	_	
Woodbridge			18	_	18
Hadleigh			10	_	10
Eve			1	_	1
Rural District Cour	ncils-				
Blyth			17	-	17
Cosford			16	-	16
Deben			25	-	25
Gipping			6		6
Hartismere			7	-	7
Samford			35		35
Other Authorities-	- 10000			-	
Royal Air Ford		***	4		4
Private O.B. Ca	ases	***			
Royal Hospital		1,			
			14		14
TOTAL			698	116	814

ACCOMMODATION.

Table giving the number of admissions and Patient Days for Ipswich and Outside Borough Patients (Infectious Diseases only):—

		Admissi	ons.			Patient I	Patient Days.			
Year.	Ipswich.	"Outside" Patients.	Total.	% of Outside Patients.	Ipswich.	"Outside" Patients.	Total.	% of Outside days.	Weekly number under treatment	
1929	528	123	651	18.9	18,609	4,448	23,057	19.3	74	
1930	535	124	659	18.8	19,002	4,931	23,933	20.6	77	
1931	902	145	1047	13.8	36,308	5,617	41,925	13.4	135	
1932	590	139	729	19.0	26,644	6,113	32,757	18.7	103	
1933	430	153	583	26.2	17,026	6,184	23,210	26.6	73	
1934	624	270	894	30.2	24,327	11,393	35,720	31.8	112	
1935	623	146	769	19.0	24,620	5,682	30,302	18.7	98	
1936	459	159	618	25.7	16,626	5,842	22,468	26.0	74	
1937	474	180	654	27.5	13,514	5,220	18,734	27.9	63	
1938	489	209	698	30.0	12,392	6,209	18,601	33.4	64	

The following Table gives the usual details as to admissions, etc.:-

Disease			Average 19261930		1936	1937	1938
US S.	No. in Hospital Jan. 1st Admissions	41 357	47 475	100 804	106 618	39 654	59 698
CTIO	Total Treated	398	522	904	724	693	757
INFECTIOUS DISEASES.	No. discharged , of deaths , Remaining Dec. 31st		444 21 57	774 27 103	656 29 39	613 21 59	688 26 43
osis.	No. in Hospital Jan. 1st Admissions	18 66	21 57	20 43	20 56	22 69	25 92
COL	Total Treated	84	78	63	76	91	117
TUBERCULOSIS.	No. Discharged of Deaths Remaining Dec. 31st	46 18 20	28 28 22	29 16 18	31 23 22	46 20 25	73 20 24
IL SIS.	No. in Hospital Jan. 1st Admissions	_	14 25	11 10	7 10	4 24	12 24
CULC	Total Treated	_	39	21	17	28	36
SURGICAL TUBERCULOSIS	No. Discharged , of Deaths , Remaining Dec. 31st		21 3 15	10 1 10	12 1 4	14 2 12	21 1 14
	No. in Hospital Jan. 1st Admissions	59 423	82 557	131 857	133 684	65 747	96 814
TOTAL.	Total Treated	482	639	988	817	812	910
TO	No. Discharged of Deaths Remaining Dec. 31st	395 34 53	493 52 94	813 44 131	699 53 65	673 43 96	782 47 81

Table showing the principal Diseases admitted to the Isolation Hospital, together with the fatalities attached to each:—

P. Constant	No. of	Cases Adn	nitted		Deaths		Case
Diseases	Ipswich	Other Districts	Total	Ipswich	Other Districts	Total	Fatality per cent
Scarlet Fever	214	113	327			_	_
Diphtheria Other Throat, etc. Diseases—	54	13	67	3	-	3	4.5
Tonsillitis	12	3	15			_	_
Miscellaneous	18	3	21	2		2	9.5
Measles and Rubella	5	_	5	_	_	_	
Erysipelas	21	5	26			-	-
Puerperal Pyrexia	19	9	28	1	_	1	3.5
Pneumonia	15	8	23	4	3	7	30.4
Pertussis Ophthalmia Neona-	3	1	4	-	-	-	_
torum	7	2	9		_	-	-
Typhoid Group	2	4	6	1	1	2	33.3
Chicken Pox	27	5	32	-		-	
Pemphigus	1	3	4	_	-	-	
Poliomyelitis	8	12	20	2 2	1	3	15.0
Cerebro Spinal Fever	3	3	6	2	2	4	66.6
Mumps	8	1	9	_	-	-	_
Miscellaneous Group	37	11	48	3	1	4	8.3
Nils, Queries, etc	35	13	48	-	_	_	_
TOTAL (Infectious Group)	489	209	698	18	8	26	3.7
Tuberculosis-							
Pulmonary	86	6	92	16	4	20	21.7
Other Forms	16	8	24	1	_	1	4.2
Total (Tuberculosis Group)	102	14	116	17	4	21	18.1
GRAND TOTAL	591	223	814	35	12	47	5.7

SCARLET FEVER.

The 340 cases admitted during 1938 were distributed among the following age groups:—

Under 1 yr. 1-5 5-15 15-25 25-35 35-45 Over 45. 1 57 222 33 17 6 4

There were no deaths from Scarlet Fever in 1938.

For deaths and death-rates from Scarlet Fever since 1841, see page 20.

The following complications have occurred in the patients treated during the year:—

		No.	Percentage.
Bronchitis		 1	.29
Otorrhoea—bilatera	aJ	 3	.88
,, unilate	ral	 6	1.76
Mastoiditis and op	eration	 6	1.76
Cervical Adenitis		 31	9.11
Onychia		 2	.58
Nephritis		 2	.58
Albuminuria		 1	.29
Rheumatism		 1	.29
Carditis		 1	.29
Rhinitis		 16	4.70
Parotitis		 1	.29

The introduction of the group of sulphonamide drugs has provided another powerful weapon for the physician in treating streptococcal infections. The number of complications due to the invasive character of the streptococcus have certainly been diminished since this drug has been used. Unfortunately the figures for 1938 are not large enough for comparison with previous years.

PNEUMONIA.

Eighteen patients were admitted, of whom 6 died. The patients were in the following age groups:—

	Under 1 year.	1-5	5-15	15-25	25-35	35-45	Over 45
Admissions	1	6	6	_	_	2	3
Deaths	. 1	2				1	2

In this disease again the new sulphonamide drug known as sulpha-pyridine (M. & B. 693) has been of the greatest life-saving importance in many of the cases. It has been shown that the mortality from Lobar Pneumonia which previously numbered 20% to 30%, has been lowered by the use of this drug to 5% to 8% of cases.

PUERPERAL PYREXIA.

Thirty-four cases were admitted and 1 died. The final diagnosis of these cases included:—

Phlegmasia Alba Dolens.

Septic Abortion.

Pyelitis of the puerperium.

Puerperal Sepsis (2 cases).

Pelvic Cellulitis (2 cases).

Coli-Bacilluria.

Acute Mastitis.

Acute Endometritis.

Lobar pneumonia and appendicular abscess.

Appendicular abscess (2 cases).

Thrombophlebitis of varicose vein.

Acute cervicitis.

DIPHTHERIA.

The 90 cases admitted were distributed among the following age groups:—

Under 1 yr. 1-5 5-15 15-25 25-35 35-45 Over 45 1 17 44 15 8 3 2

Three deaths from Diphtheria occurred in 1938. The incidence of severe toxic cases was low.

POLIOMYELITIS.

In common with other areas of East Anglia, Ipswich and East Suffolk County suffered from the epidemic of Poliomyelitis which affected this country in the summer of 1938. A total of 24 cases were admitted and treated in the Hospital, 8 Ipswich and 14 County cases.

The majority of the cases were fortunately very mild and, as is shown below in a special report by Mr. Bell Jones, the Orthopaedic Surgeon, the results (18 months after the onset) have in most cases been reasonably favourable.

The Bragg-Paul Respirator was required for three of the severer cases where the respiratory muscles were involved and in two of these cases there was a generalised involvement of the spinal cord with a terminal spread into the medulla. In the third case treated in the Respirator there had been a polio-encephalitis from the very beginning. All three cases appeared to become bulbar towards the end, and the Respirator, while maintaining respiration, seemed to have no effect in arresting central (bulbar) respiratory and cardiac failure. Possibly, if the cases had merely exhibited peripheral respiratory failure (i.e., cervical or dorsal lesions only), the Respirator would no doubt have been more efficacious in treatment.

The orthopaedic aspects of the epidemic as affecting 21 of the survivors is given by Mr. Bell Jones, Orthopaedic Surgeon:—

"The residual paralyses 18 months after the onset were as follows:

Two cases remain of the massive paraplegic type—paralysis of the abdomen and both lower extremities.

One case has a complete, persistent right upper extremity paralysis.

One case has some degree of abdominal muscular paralysis requiring the use of a belt.

One case has some degree of abdominal paralysis requiring a belt and a slight degree of paralysis of the left quadriceps.

One case has a slight degree of abdominal paralysis and weakness of the lower leg requiring an iron. This case is still recovering.

One case has a slight quadriceps weakness and is still recovering.

The worst sufferer of the epidemic is a boy of about 10 years of age, who has complete paralysis of one arm, shoulder and neck muscles, so that a special appliance is required to support the upper limb and head.

Conclusions:-

- The high percentage of recoveries with two or more as above listed nearly recovered.
 - 2. Three cases only sustained serious crippling.
- 3. The very few cases requiring Orthopaedic appliances and walking instruments is noted.
- The absence of cases who will require subsequent Orthopaedic operations is also noted."

APPENDIX III.

SUMMARY OF SPECIAL REPORT ON DOMICILIARY MEDICAL SERVICE.

EXTRACTS FROM REPORT BY MR. L. W. GREENHALGH, CHIEF OFFICER,

PUBLIC ASSISTANCE DEPARTMENT.

The Public Assistance Domiciliary Medical Service which gives an "open choice" of doctors and chemists, came into operation on the 1st April, 1938, and displaced the former system of a part-time District Medical Officer and Central Dispensary. A panel of 25 doctors and 27 chemists was formed.

REMUNERATION.

In accordance with the scheme approved by the Public Assistance Committee, a fee of 9/- per quarter has been paid to all Medical Practitioners on the Panel in respect of each case attended by them under the Scheme.

PATIENTS TREATED.

During the year 990 persons were attended under the Scheme, necessitating 4,040 visits to homes by Doctors and 4,324 visits by patients to Doctors' Surgeries.

DISPENSING SERVICES.

During the year, 8,913 prescriptions were dispensed by the Chemists on the Public Assistance List.

The drugs and other items must conform in price and quality to those supplied under the National Health Insurance Acts.

The checking and pricing of prescriptions has been carried out by the East Anglian Joint (Pricing of Prescriptions) Committee, who check and price the National Health prescriptions for the area.

The average cost per prescription for the year was 9d. and the average cost per patient treated was 6s. 9.1d.

SPECIAL CERTIFICATES.

The scheme provides for certificates to be issued for Special Purposes respecting the condition of certain applicants who are not receiving Medical Relief; 686 of these Certificates were issued by Doctors during the year and were paid for at the authorised rate of 2s. 6d. each.

Some of the Special Purposes for which certificates have been required are:—as to fitness for work; as to extra nourishment required; as to fitness of children to be admitted to institutions and as to sickness in respect of applicants seeking relief on account of illness.

EXTRA MEDICAL RELIEF.

Many recommendations for extra nourishment have been dealt with during the year by the Out-Relief sub-committees, who have made additional grants where necessary.

SUMMARY OF EXPENDITURE.

It is interesting to compare the expenditure for 1937 and 1938 on Medical Relief:—

ITEM.	TOTAL CO.	ST FOR YEAR
Part-time Medical Officer's Salary Doctors' Fees Dispenser's Salary (50%) and cost of drugs Drugs and Dispensing Fees	1937. £ s. d. 400 0 0 146 0 0	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
Total	546 0 0	1108 2 5

MEDICAL REPORT BY DR. HUNTER.

While Statistics of birth and mortality have now been recorded for many years, it is but recently that an insight has been obtained into sickness and invalidity figures.

Since 1899 the notification of infectious diseases has been compulsory, and since 1901 the notification of industrial diseases has been enforced. In 1911, when the National Health Insurance Scheme was introduced, great hopes were held out that a complete compilation of diseases throughout the working classes would become available.

The various local Public Health Services such as Maternity and Child Welfare, Tuberculosis and School Medical Services, have each in their turn helped to provide further information under this heading.

However, from the above sources it has only been possible to compile data which, though complete in themselves, relate only to the incidence of a series of diseases or to the sickness experience of special categories of the population.

Now with the advent of a properly controlled domiciliary service we have at our disposal another source of information. The group of the population affected provides a complete section of the poorer stratum of society including as it does males and females of all ages. A careful analysis of these sickness records, together with subsequent compilations in future years, should throw light on many matters of importance in Preventive Medicine. For example, the effect of bad housing conditions and low income levels upon the health of the section of the community in receipt of Public Assistance could be investigated and the incidences of those common causes of incapacity variously labelled anaemia, nervous debility and neurasthenia could be stated.

Consideration of Table Nine, showing the distribution of the population affected in six age groups and sub-divided by sex, shows at a glance that there were roughly seven females attended to three males. This disparity only appears after childhood and adolescence is passed and is no doubt bound up with social problems as distinct from purely medical ones.

Tables ten and eleven show respectively the distribution of males and females in some twenty disease groups and in six age groups, 0-5, 5-15, 15-25, 25-45, 45-65 and 65 and over.

Before considering the actual diseases it is interesting to note that in the group 15-25 only two males and eighteen females required medical treatment, showing that, although no doubt a number of this age were receiving medical benefits under the National Health Insurance this was no doubt the healthiest age group in this investigation. Turning to the actual disease groups, the most striking feature is that in almost every group without exception, the largest number required medical attention for colds, bronchitis, tonsilitis, etc. Further, the totals for this particular group, both in males and females, were far greater than those in any other disease group. Amongst males, the next highest group is that of the infectious diseases although on examination of the age groups in which these occur it is seen that it is almost completely in the 0-5 and 5-15 groups.

In the female group, diseases of the digestive system, mainly gastritis and dyspepsia, rank second with diseases of the circulatory system and rheumatism closely following. Debility, neuralgia and headache are responsible for much of the female sickness. While amongst males, influenza, diseases of the skin and circulatory diseases are responsible for most of the other sickness. It is interesting to note that there is almost twice the incidence of rheumatism among females as there is in males, as well as four times the amount of neurasthenia.

JOHN WM. HUNTER, Medical Officer of Health.

Public Health Department, Elm Street, Ipswich. June, 1939.

AGE AND SEX DISTRIBUTION OF PATIENTS TREATED. TABLE IX.

Ages.		M	ales.	Fen	nales.	To	otal.
Ages.		No.	% of Total.	No.	% of Total.	No.	%
0-5		60	6.1	72	7.3	132	13.4
5-15		110	11.1	109	11.0	219	22.1
15-25	* * *	2	2.1	18	.18	20	2.0
25-45	***	21		120	12.1	141	14.2
45-65		61	6.2	181	18.3	242	24.5
Over 65		50	5.0	186	18.8	236	23.8
Totals		304	30.7	686	69.3	990	100.0

DISTRIBUTION OF DISEASES

SUB-DIVIDED INTO

TABLE X.

	DISEASE.				Males.			
	DISEASE.	0-5	5-15	15-25	25-45	45-65	Over 65 yrs.	Tota
1.	Influenza	5	14	_	_	2	2	23
2.	Tuberculosis, all forms	_	_	_	1	2	_	3
3.	Organic Heart Disease and Circulatory Diseases		_	_	3	4	5	12
4.	Anaemia	-	-	_	-	1	1	2
5.6.	Bronchitis, Tonsilitis, Nasal Catarrh, Cold, etc Pneumonia & other diseases	23	47	_	5	15	10	100
	of the respiratory system	2	2	_	_	1	2	7
7.	Diseases of the digestive system	3	6	_	_	8	5	2:
8.	Diseases of the genito- urinary system	1	1	_	1	1	_	
9.	Diseases of the nervous					4	2	
10.	system and special senses Skin Diseases	4	6	1	_	4	2 4	1
11.	Injuries and Accidents	2	2	_	1	_	1	
12.	Abcess, Boils and other septic conditions	1	6	_	1	1	1	1
13.	Lumbago, Rheumatism, etc.	_	2	_	3	7	2	1
14.	Debility, Neuralgia and Headache	1	5	_	2	7	6	2
15.	Malignant Disease	_	-	_	_	_	3	
16.	Infectious Diseases	15	11	_	-	1	2	2
17.	Puerperal State and Preg- nancy	_	_	_	_	_	_	_
18.	Endocrine Diseases	-	-	-	1	-	-	
19.	Neurasthenia, etc	_	_	_	1	_	1	
20.	Other Diseases	3	7	-	2	3	3	1
	Totals	60	110	2	21	61	50	30

NGST PATIENTS TREATED.

GROUPS.

TABLE XI.

Total No of Patient			š.	FEMALES		
treated.	Total.	Over 65 years.	45-65	25-45	15-25	5-15
46	23	4	6	4	1	4
11	8	-	1	6	_	1
71 25	59 23	29 5	18 5	9 11		2 2
257	157	33	35	18	5	36
15	8	1	2	1	_	3
100	78	18	28	11	1	13
26	22	3	11	4	4	_
32 41	24 22	4 5	12 6	4	=	4 6
19	13	7	2	2	_	-
42 63	32 49	13 26	7 15	6 3	=	5 4
79 9	58 6	17 3	18	12	4	4
63	34	_	_	_	-	19
11 5	11 4	4	_1	10		_
17	15	7	_	7	1	_
58	40	7	11	11	1	6
990	686	186	181	120	18	109





County Borough of Ipswich

School Medical Officer's REPORT

1938.



STAFF OF THE SCHOOL MEDICAL SERVICE.

DECEMBER, 1938.

Medical Staff:

Medical Officer of Health and School Medical Officer;

A. M. N. Pringle, M.B., C.M. (Edin.), D.P.H. (Camb.). (Retired 17th January, 1938).

J. W. Hunter, M.B., Ch.B. (Edin.), Bh.y., D.P.H. (Durham), M.D. (Edin.) Appointed 5th May, 1937, and Commenced duties 18th January, 1938).

Assistant Medical Officers of Health and Assistant School Medical Officers:

A. W. GAYE, B.A., M.B., B.C., D.P.H. (CAMB.), M.B., Ch.B. (MANC.).

R. PHILPOTT, M.A., M.R.C.S. (ENG.), L.R.C.P. (LONDON).

IRIS M. CULLUM, M.B., M.D., B.S., D.P.H.

M. Markowe, M.B., M.D., B.S., L.R.C.P., D.P.H. (Appointed 5th July, 1938).

Dental Staff:

Senior Dental Surgeon:

T. A. Edmondson, L.D.S., R.C.S., (Eng.)

Assistant Dental Surgeons:

A. W. T. WARD, L.D.S., R.C.S. (ENG.)
R. CUTHILL, L.D.S. (L'POOL.).

Health Visiting Staff:

Eight Health Visitors are employed by the Council, and of these, three are engaged full-time in the School Medical Service and the others render part-time service.

County Borough of Ipswich.

Public Health Department, Elm Street,

IPSWICH.

19th June, 1939.

LADIES AND GENTLEMEN,

I have the honour to present the report on the Medical Inspection of School Children during 1938.

Apologies must be tendered for delay in publication and any shortcomings owing to the fact that for many months past an extraordinary amount of executive duties in connection with air raid precautions has been thrown on all sections of the department.

I wish to tender my thanks to the members of the Education Committee and the staff of the Education Office for their valuable assistance and co-operation.

Special thanks are also due to all members of the staff of the School Medical Service, whose duties during the latter part of the year were carried out under exceptional circumstances, and I am also grateful for the assistance which has been rendered in the compilation of this report.

I have the honour to be,

Ladies and Gentlemen,

Your obedient Servant,

J. W. HUNTER.

II.

CO-ORDINATION.

There is complete co-ordination between the various branches of the school medical services and the various branches of the health services of the borough.

The main clinic and branch clinic provide both maternity and child services in addition to school medical requirements and medical, nursing and clerical staffs are common.

The records from the child welfare department, including dental records are passed on and included, as far as necessary, in the data comprised in the school medical schedules.

III.

SCHOOL HYGIENE.

The officers of the department make frequent inspections, and any recommendations are made through the School Medical Officer to the appropriate departments. The provision of arrangements for sanitation and general hygiene has now reached a very high standard owing to the fact that the re-organisation scheme of the Education Authority is nearing completion.

IV.

SCHOOL MEDICAL INSPECTION.

(a) MEDICAL STAFF.

The routine inspection includes the three groups, viz.: Entrants (5 years old), Intermediates (8 years old), and Leavers (12 years old).

There is under consideration inclusion of another age group or the re-arranging of the present groups by reason of the raising of school leaving age.

By the close co-operation which exists between the Education Department and School Medical Department, the programme is arranged as far as practicable two weeks ahead, and the teachers given as much notice as possible of the intended date of the visit of the Medical Officer and Health Visitor.

All parents are notified and requested to attend at these routine school medical inspections. Their presence is a tremendous asset in attempting to obtain as full advantage as possible of the medical survey.

At the beginning of 1938, the routine inspections had fallen in arrears due to shortage of staff, illness, etc.

In order that this might be remedied, a rather intensive programme was undertaken, and in this branch an up-to-date programme was embarked on in 1939.

During 1938, 5,202 children were examined at the routine medical inspections. This figure represents 45.58% of the average number of children on the registers.

This compares with 3,539 in 1937 and 2,898 in 1936.

The increase in numbers during 1938 at routine medical inspection will necessitate a greater number of children requiring special investigation and observation, as for example, eye defects, tonsillar defects, etc. These are being expedited as rapidly as possible.

(b) Nursing Staff.

CLEANLINESS INSPECTIONS IN THE SCHOOLS BY THE HEALTH VISITORS Every school is visited and the total number of examinations in 1938 was 33,045, a decrease of 2,000 compared with 1937. The average number of visits per school was 5. Appropriate action is taken in all cases requiring advice or treatment, and such cases are followed up until the desired end is attained.

(c) SCHOOL CLINICS.

School Clinics are held every morning in the Public Health Department, Elm Street, and at the Branch Clinic, Clapgate Lane, which serves the schools in the new housing estates in that area.

A School Medical Officer and Health Visitors are in attendance every morning at each clinic.

These clinics have cases referred by parents, teachers and other authorities. The children requiring treatment are referred either to their family doctor, special clinic, or to the local hospital according to the needs of the appropriate case.

The following table illustrates the extent to which the School Clinics have been used since inception, and includes Main and Branch Clinics:—

	Numbers of Children	Total Attend-	Exclusions.		
Period.	attending at Clinic.	ances at Clinic.	Granted.	Not Granted	
Average		1.500	1.004		
1912-1915	_	4,568	1,004		
1916-1920	1,850	6,611	1,525	325	
1921-1925	2,846	10,726	1,930	910	
1926-1930	4,193	13,189	2,520	1,673	
1931	4,668	12,148	2,239	2,429	
1932	4.888	14,229	2,299	2,589	
1933	4,756	13,308	2,035	2,721	
1934	4,755	12,074	1,898	2,857	
1935	4,817	13,043	1,779	3,038	
1936	5,343	19,108	2,276	3,067	
1937	7,176	28,245	2,257	4,919	
1938	10,485	41,706	3,011	7,474	

The increase is largely due to the extent the Branch Clinic has been used, the figures for which follow.

	Numbers of Children	Total Attend-	Exclusions.		
Period.	attending at Clinic.	ances at Clinic.	Granted.	Not Granted	
8 months, 1936	1,590	4,108	489	1,101	
1937	3,330	11,682	803	2,527	
1938	5,455	15,976	1,238	4,217	

These tables indicate, in the most convincing manner, the need for these clinics, and the extent of their appreciation by the public.

V.

FINDINGS OF MEDICAL INSPECTION.

PRELIMINARY.

Routine Medical Examinations of Children in the three age groups (5, 8 and 12 years), together with number of defects found at such examinations:—

	1937.				1938.	
	Boys.	Girls.	Total.	Boys.	Girls.	Total
Entrants-						
No. examined	607	543	1150	780	858	1638
No. of defects	45	19	64	75	80	155
Percentage	7.4	3.5	5.5	9.61	9.32	9.46
Intermediates—						
No. examined	657	510	1167	996	930	1926
No. of defects	102	54	156	157	121	278
Percentage	15.5	10.6	13.4	15.76	13.01	14.43
Leavers-						
No. examined	608	614	1222	812	826	1638
No. of defects	66	77	143	77	86	163
Percentage	10.8	12.5	11.7	9.48	10.41	9.34
Total—						0.01
No. examined	1872	1667	3539	2588	2614	5202
No. of defects	213	150	363	309	287	596
Percentage	11.4	9.0	10.2	11.94	10.97	11.45

There is a definite increase of defects found in the youngest age group, especially among the girls (nearly 3 times as many as in 1937), and a slight decrease among the twelve-year-olds.

NUTRITION.

Table II.B. shows 5,202 examinations in Elementary Schools and gives the numbers and percentage of those falling into the four groups as required by the Board of Education, namely:—Excellent, Normal, Slightly Sub-normal, Bad.

Below are Tables comparing these figures.

	1937			1938				
	Excellent	Normal	Slightly subnormal	Bad	Excellent	Normal	Slightly subnormal	Bad
Entrants Inters. Leavers	10.89%	77.8%	6.43% 11.22% 7.77%	.09% .09%	10.93% 12.05% 25.33%	72.96% 72.54% 62.83%	15.00%	.42% .41% .18%

	Norma	al, or better.	
		1937	1938
Entrants		93%	83.88%
Intermediates Leavers		92%	84.58% 88.16%

During the year, 5,202 children were examined at routine medical inspection, and the Table shows the percentage falling into the four categories.

A.	В.	C.	D.	
15.89%	69.6%	14.17%		

Interesting information can be gained by a study of the figures observed at the different age groups.

	A.	В.	C.	D.
Entrants	10.93%	72.96%	15.69%	.42%
Intermediates	12,05%	72.54%	15.00%	.41%
Leavers	25.33%	62.83%	11.66%	.18%

Taking groups C. and D. together as representing those which are below normal, it is observed that the figure falls as the age rises, i.e., the largest number of defects is found in the five-year-old group.

This observation is not confined to defects of nutrition alone, as it is the general experience throughout the country that there are more defects at this age than at any other. It thus appears obvious that greater care and more supervision are required between the ages of 0 and 5. Most children are born perfect, and the majority of the defects seen at the age of five are the result of unsuitable feeding, or infection, in early infancy. One of the solutions of the problem of malnutrition among school children is, therefore, to be found in an extension of the already existing maternity and child welfare facilities.

Reviewing our figures as a whole, the variation from last year is found to be due, partly to the fact that more children were examined, and partly to the changing personnel of the School Medical Staff. The following Table shows the percentages observed by each Medical Officer in a random sample of 2,000 children.

	A.	В.	C.	D.
Dr. W.	 21.0%	77.94%	1.06%	-
Dr. X.	 15.61%	78.64%	5.75%	
Dr. Y.	 10.94%	75.08%	13.98%	-
Dr. Z.	 15.22%	63.02%	21.62%	.14%

In studying this Table it must be remembered that each Medical Officer examined different children. It is impossible to separate the personal factor from the assessment of nutrition, which is not a mathematical entity capable of exact computation, but a physiological state even varying from day to day in the same individual.

A comparison with 1910 will enable us to obtain a detached view of the whole problem. As in other areas, Ipswich children are now taller and heavier than they were then. In 1910, 20 children were classed as having bad nutrition, but it is probable that the School Medical Officer of 1910 would report few cases of what he considered bad nutrition among our 1938 children. This is merely another example of the rising standard of the average, which is usually taken as normal. Where nutrition is concerned, it is obvious that there must be a limit, since children cannot go on growing indefinitely, and it seems opportune to insert here a warning against the acceptance of mere size as a criterion of physical fitness.

The whole subject of the nutrition of the school population of the town is under review at the present time and, but for the September crisis, a scheme designed to help a larger number of children by providing more specific treatment to remedy the known existing deficiencies in the dietary of those found to be suffering from malnutrition, would have come into operation in 1938. As it was, facilities were made available for the supply of milk twice daily instead of once daily during the Autumn term. The supply of meals continued as before, and 27 children were in receipt of meals during the whole year.

(b) Uncleanliness.

A Table giving particulars of the work carried out in this section together with the numbers found unclean is appended:—

	1937.	1938.
No. of visits by Health Visitors to Schools	 186	145
Average per school	 6.41	5
No. of examinations	 35,552	33,045
No. of children found unclean	 553	601
Percentage of total examined found unclean	 1.55	1.81

22 "24-hours" notices were served.

In no case was it necessary to take legal proceedings, but 8 children were cleansed by the Authority.

96 children were excluded from school for verminous conditions, involving a loss of 557 school days.

(c) Minor Ailments and Diseases of the Skin.

These complaints include Ringworm, Scabies, Impetigo, etc.

The following Table gives the numbers found at routine and special inspections during the past three years:—

			1936.	1937.	1938
Ringworm	:				
Scalp			8	12	3
Body		***	9	-	3
Scabies			23	33	32
Impetigo			155	178	286

The number of children excluded in these three groups was 194,

and the days lost, 2,522.

There was a definite increase in Scabies during the latter part of the year, necessitating a large number of special baths for treatment. Impetigo is also increased. Although the number of cases has increased, the degree of severity of these conditions is much less, the children being referred to the clinic at an earlier stage than a few years ago.

(d) VISUAL DEFECTS AND EXTERNAL EYE DISEASES.

Table II. of the Statistical Tables indicates that 324 children were found during the year at routine or special inspections to be suffering from defective vision, whilst another 24 were found to squint and 319 had other eye disorders.

Special Eye Clinics are held each week, and during the year 508

children were examined, the total visits being 892.

The number of glasses prescribed or to be changed was 350 and

of that number 337 have been obtained to date.

The Education Committee's Scheme, which provides glasses, either free of cost or on part payment in certain cases, materially assisted in the attainment of this high percentage.

The defects found were:-

Hypermetropia			68
Hypermetropic Asti	gmatism		33
Myopia			97
Myopic Astigmatism			19
Mixed Astigmatism		5	
Squint			8
Corneal Opacities			1
All Others			5

17 children with defective vision were referred to the Eye Specialist at the local Hospital.

With the increase in numbers for Routine Inspection, a larger number were referred for eye examination.

(e) Nose and Throat Defects.

The number of children found to require treatment (excluding other conditions usually of a temporary and minor character only) was 150, which was made up as follows:—

Chronic Tonsillitis only ... 81 Adenoids only ... 16 Chronic Tonsillitis and Adenoids 53

In addition, 998 children were marked for observation under this

heading.

There is a marked increase in he numbers found to require observation during the year. Again evidence of the higher average standard of the so-called normal child.

(f) EAR DISEASE AND DEFECTIVE HEARING.

Table II. indicates that the following were referred for treatment during 1938:—

Defective Hearing ... 7
Otitis Media ... 44
Other Ear Diseases ... 144

(g) Dental Defects.

The report of the School Dental Surgeon is given under the section "Arrangements for Treatment."

839 children were directly referred to the dentist as the result of medical inspection.

(h) ORTHOPAEDIC AND POSTURAL DEFECTS.

87 children were found during the year to require treatment. Of the 87 cases, 55 were postural and 32 other orthopaedic cases.

(i) HEART DISEASE AND RHEUMATISM.

The following cases of heart disease were discovered at Routine Medical Inspection or at the School Clinic during the year:—

Organic ... 7 for treatment, 20 for observation.

Functional ... 3 ,, ,, 44 ,, ,, 3 of the Organic Heart Disease cases were known to be rheumatic in origin and 5 congenital, and 3 rheumatism.

(j) Tuberculosis.

The number of cases falling into this group during 1938 is given as under:—

Pulmonary Tuberculosis ... 1
Non-pulmonary ,, ... 4
Suspected ,, ... 1

These cases are effectively covered by the existing scheme.

(k) Other Defects and Diseases.

The figures were slightly above those of the previous year.

VI.

FOLLOWING UP.

Following up defects found at previous Medical Inspections is

carried out by the School Medical Staff and Health Visitors.

The number of children seen during 1938 was 1,750, and the examinations totalled 1,830. These examinations are carried out at school.

The Health Visitors also followed up absences from school reported by Head Teachers.

In special cases the Health Visitors also visited the child at school and (or) in the home.

VII.

ARRANGEMENTS FOR TREATMENT.

The Local Authority undertakes at the School Treatment Clinics or by arrangements with other Authorities, treatment as under:—

- (a) Minor ailments at the Main and Branch Clinics.
- (b) Dental defects at the Dental Clinics.
- (c) Visual defects at the Eye Clinic.
- (d) Artificial Sunlight treatment at the Public Health Department.
- (e) Surgical treatment of Tonsils and Adenoids at the East Suffolk and Ipswich Hospital.
- (f) X-Ray treatment of Ringworm at the same Institution.
- (g) Tuberculous or suspected Tuberculous children at Sanatorium or Hospital.

(a) MINOR AILMENTS TREATMENT CLINIC.

This Clinic has been established for many years and deals with all types of minor ailments.

The undermentioned Table gives the numbers of children treated and the diseases or defects dealt with.

Disease or Defect.		Main.			Branch.			
		1936	1937	1938	1936	1937	1938	
Number of children Total visits paid	treate	d	717 4,468	989 7,331	1,246 9,251	689 3,361	1,663 7,062	2,417 13,080
Ringworm—Scalp Skin Scabies Impetigo			4	4	7	1	-	_
			18	27	27	2 5	1	4
			27	58	71	56	63	127
Other Skin Disease		444	100	74	39	153	330	624
Minor Ear Defects . Nose and Throat Def Minor Injuries			72	82	80	47	141	158
			45	50	53	34	115	102
	efects		_			17	_	_
			314	453	596	273	663	879
Miscellaneous			136	240	372	101	349	522
Total			717	989	1,246	689	1,663	2,417

The Authority has an arrangement with the local General Hospital for the X-Ray Treatment of Ringworm at a cost of £2 2s. 0d. per case, treated to a successful conclusion.

Last year 5 cases were referred, as compared with 7 in 1937.

Cases of Scabies receive special baths at the Cleansing Station attached to the Public Health Department. 350 baths were given to children during the year, and the clothing was disinfected at the same time.

Minor Eye Defects included children with Blepharitis, Conjunctivitis, Keratitis and Corneal Ulcers.

Minor Injuries.—All children injured in schools or playgrounds are referred first of all to the Treatment Clinic, and if the injury is severe the patient is referred at once to the local Hospital.

(b) Dental Defects.

The following is the report of Mr. T. A. Edmondson, the Senior School Dental Surgeon.

REPORT OF THE WORK OF THE SCHOOL DENTAL DEPARTMENT FOR THE YEAR 1938.

During the year 27 Elementary and the Northgate Schools were visited, the number of departments being 35.

The following Table gives details of ages of the children inspected:

TABLE A.

			1938				1937	
	Main	Branch	North- gate	Total	Main	Branch	North- gate	Total
5 years	655	289	H	944	637	285	н	922
6 ,,	583	315	Total	898	647	362	Total	1,009
7 ,,	712	402	5	1,114	689	386	-	1,075
8 ,,	715	372	No.	1,087	749	369	o.	1,118
9 ,,	707	378	E.	1,085	752	346	E.	1,098
10 ,,	647	387	spe	1,034 1,230	777 844	382 320	pe	1,159 1,164
11 ,,	680 671	550 459	inspected	1,130	627	286	No. inspected	913
13	676	466	Ē.	1,142	580	232	<u>e</u>	812
14 ,,	136	56	809	1,001	183	14	785	982
Total	6,182	3,674	809	10,665	6,485	2,982	785	10,252

Since the commencement of the scheme it has been our practice during school inspections, to mark in detail on each child's Dental Record Chart, the condition of every tooth, and to give in each annual report various interesting detailed statistics. Such detailed inspection took time to accomplish, an average of about 110 children being dealt with at each session. In order to economise both time and labour, it is now our practice at inspections, merely to discover whether or not a child requires treatment, in other words, dividing them into two classes—children requiring treatment and children not requiring treatment. By this method we can inspect an average of about 170 children per session, the accurate record being made when the child attends for treatment. This procedure avoids the waste of time involved in making careful charts for those children whose parents subsequently refuse treatment.

The following Table gives details of children requiring treatment.

1938.			1937		
Main Clinic	Branch Clinic	Total	Main Clinic	Branch Clinic	Total
6,991	3,674	10,665	7,270	2,982	10,252
4,530	2,682	7,212	4,781	2,075	6,856
	Clinic 6,991	Main Branch Clinic Clinic 6,991 3,674	Main Branch Clinic Total 6,991 3,674 10,665	Main Branch Clinic Total Main Clinic 6,991 3,674 10,665 7,270	Main ClinicBranch ClinicTotalMain ClinicBranch Clinic6,9913,67410,6657,2702,982

64.79 72.99 67.62 65.76 69.58 67.67

TABLE B.

During the year 6,831 letters, including 2,682 from the Branch Clinic were sent to parents inviting consents to treatment. 6,344 letters were returned, of which 63.42% were consents and 36.58% refusals. The following table indicates the variation in the percentage of "consents" to treatment.

TABLE C.

	Percentage of C	onsents.
Year.	Branch and Main Clinics.	Branch only
1936	60.43	63.22
1937	60.67	57.97
1938	63.42	62.11

In my report for the year 1937 regarding the Whitton Open Air School, it was stated that only 32% consented to treatment. This year the following covering letter was sent to the parent of every child requiring treatment.

Dear Sir or Madam,

At the recent inspection at Whitton Open Air School by the School Dentist, it was reported that your child is suffering from certain dental defects.

You will appreciate that in order that your child should derive full benefit from the stay at the Open Air School as recommended by the School Medical Officer it is desirous that you should avail yourself of all the advice and treatment offered and recommended by the officers of the school medical service.

If you do not feel you can carry out the recommendations in regard to your child's health, it may be deemed necessary to consider whether your child should have a further stay at the Open Air School.

I therefore urge you to consider having the treatment suggested for your child carried out at the earliest possible moment, and if necessary you can fix an appointment to discuss the matter with the School Dental Officer concerned.

Yours faithfully,

J. W. HUNTER,

Medical Officer of Health. School Medical Officer.

It is gratifying to report the direct result, which was that 70% consented to treatment.

During the year, dental inspection of the pupils in the boys' and girls' departments of the Northgate School was carried out.

The total number inspected was 809. Of this number 381, or 47% were found to require dental treatment. 14 had treatment carried out by their own private dental practitioners, leaving 367 who, in due course, attended the Dental Clinic.

Treatment actually carried out amounted to:-

818 Fillings.

177 Extractions.

271 Other operations.

90 Regulation attendances.

SUMMARY OF WORK DONE DURING 1938.

The following are tabulated details of work done during the year:—

			Total	Branch
		(ir	cluding	only.
		I	Branch).	
Number of schools visited			29	8
Number of visits to schools			95	27
" ,, departments visited			35	8
" ,, half days devoted to inspec	tion		95	27
" ,, children examined at dental	l inspecti	on	10,665	3,674
" ,, children requiring treatmen	t		7,212	2,682
Actual number of children treated			5,271	1,581
Number of attendances made			7,617	2,159
" ,, appointments arranged			8,439	2,403
,, ,, ,, broken			1,753	539
", ", fillings in deciduous teeth			579	399
" " " " permanent teeth			4,105	1,004
,, ,, root canal treatments			7	_
Total number of fillings			4,691	1,403
Number of deciduous teeth extracted			6,128	1,836
", ", permanent teeth extracted			1,320	340
,, ,, local anaesthetic cases			478	231
", ", nitrous oxide and oxygen	adminis	tra-		
tions			3,133	860
,, ,, sundry dressings in deciduo	us teeth		276	134
,, ,, ,, ,, perman	ent teeth		788	101
,, ,, children for whom advice w.			648	147
", ", children brought to clinic	who t	hen		
refused treatment			38	15
,, ,, half days devoted to treatme	nt		1,072	211
,, ,, employment cases treated			38	
,, ,, artificial crowns fitted				
" ,, regulation plates fitted			22	4
", ", dentures fitted			12	1
,, ,, scalings			55	16

Facilities are available in the dental department for parents to contribute and £136 18s. 3d. was collected in the department last year.

REPORT ON THE WORK IN THE DENTAL DEPARTMENT OF THE BRANCH CLINIC FOR THE YEAR 1938.

During the year all the children in the schools served by the Branch Clinic have been inspected and those accepting treatment have been treated.

A comparison of the consents to treatment for the two years 1937 and 1938 reveals the following:—

		1937.	1938.
Eastern Senior Girls	 	55.46	61.86
Gainsborough Junior Mixed	 	50.00	58.84
Greenwich Junior Mixed	 	61.94	61.00
Nacton Road Junior Mixed	 	79.50	82.62
Orwell Junior Mixed	 	51.73	51.16
Priory Heath Junior Mixed	 	58.49	64.12
South Eastern Senior Boys	 	53.60	55.11

The percentage of consents for all the schools in the Branch area was 62.11, this compares with 57.97, the percentage of acceptances in 1937.

I would like to draw special attention to the percentage of consents in Nacton Junior Mixed School and Eastern Senior Girls' School. In the case of the girls' school the percentage of consents has been raised by 14.57 in two years. We owe this increase to the efforts of the Headmistress, who has personally distributed to the girls the treatment invitations, at the same time exhorting them to accept. She has spoken to all the refusal cases, getting many of them to change their minds and accept the treatment offered.

We know that Heads of schools are very busy people, but if we could get all of them to adopt the same attitude it is probable that we should have an all-round increase in the consents. The children are more readily influenced by their schoolmasters and mistresses than by anyone else.

The number of broken appointments still remains high, approximately one appointment in every five arranged is not kept.

T. A. EDMONDSON,

School Dental Surgeon.

(c) Visual Defects.

Dealt with in earlier part of the Report.

(d) ARTIFICIAL SUNLIGHT.

An Artificial Sunlight Clinic has been established in the Public Health Department for some years, and deals with children of all ages.

During the year under review, the number of children of school age who received treatment was 85 and they paid 1,533 visits.

The defects for which treatment was given included:-

Anaemia and Debility			36
Catarrhal and Bronchial	Infecti	ons	11
Enlarged Glands (neck)			
Sub-normal Nutrition			6
Tuberculosis Group			2
Pre-Tubercular Debility			8
Other Defects			3
Orthopaedic Disorders			- 4

(e) SURGICAL TREATMENT OF TONSILS AND ADENOIDS.

The Education Committee has had, for some years a working arrangement with the local General Hospital for the surgical treatment of Tonsils and Adenoids.

In cases where an operation is considered necessary, the parent is given a letter to present to the Ear, Nose and Throat Specialist at the local Hospital. The note is returned to the School Medical Officer with the Surgeon's recommendations, and if an operation is considered to be necessary, arrangements are made by the Hospital Authorities to carry out such recommendation.

The Education Committee pays the Hospital 3/6 for each visit for examination or advice in all cases where the parent is not a member of the Hospital "Contributor's Scheme."

The Hospita! Authorities have provided special accommodation for this type of case, and all children under this Scheme are dealt with as in-patients.

The agreed figure, including operation, is 6/- per day under 10 and 8/- per day over that age, in the case of Non-Contributors only. The total cost to the Committee under this heading in 1938 was £41 1s. 0d.

The following Table gives figures for the last three years:—

				1936.	1937.	1938
Number of Children	n referred	to	Hospital	 130	165	194
Total attendances (c	out-patien	ts)		 107	178	172
Operations carried	out			 72	107	122
In-patient days	Over 10			 78	111	124
in-patient days	Jnder 10		***	 320	601	549

(f) X-RAY TREATMENT OF RINGWORM. See "Minor Ailments."

(g) Tuberculosis or Suspected Tuberculosis.

The number of school children who were admitted to Institutions during 1938 for the treatment of Tuberculosis or suspected Tuberculosis is shown below:—

INSTITUTION	Boys.	Girls.	Total
Ipswich Sanatorium East Suffolk & Ipswich Hospital (for	12	4	16
treatment of Surgical Tuberculosis) Ipswich Isolation Hospital—	1	4	5
(a) Pulmonary Tuberculosis		_	_
(b) Surgical Tuberculosis	_	5	5
TOTAL	13	13	26

The number of children sent to institutions in this connection during 1937 was 58.

A marked decrease is shown in both Pulmonary and Surgical Tuberculosis in children of school age.

VIII.

INFECTIOUS DISEASES.

The close co-operation of the sections of the public health and school medical departments ensures a very complete scheme for detecting and preventing the spread of infectious diseases amongst the school population.

The home of every patient notified as suffering from an infectious disease is visited by an officer of the public health department, who records the names of all persons residing therein.

The school children in such a house are excluded from Day and Sunday Schools (Diphtheria 10 days, Scarlet Fever 8 days, if the patient is removed to the Isolation Hospital), and notice is sent to the Education Office to that effect. The Education Office notifies the head teachers.

Furthermore, in the case of Diphtheria, swabbing is recommended, and parents may arrange this with the family doctor or with the Health Department.

During 1938 the notifications of infectious disease of children of school age and removals to hospital were as under:—

	Notified.	Removed
Scarlet Fever	 110	101
Diphtheria	 31	30
Pneumonia	 9	4
Poliomyelitis	 3	3
Erysipelas	 2	2
Dysentery	 6	6
Relapsing Fever	 1	-

Scarlet Fever was less prevalent among school children during

the year.

Another arrangement which helps considerably is the notification by Head Teachers of absences from school. These cards are passed as soon as received to the Health Visitors, who visit the homes and advise parents.

In cases of non-notifiable infectious diseases, exclusions are granted as necessary, and leaflets of instruction and advice are left

with parents in all cases where a doctor has not been called in.

The exclusions granted in this group of infectious diseases included the following:—

 Measles
 ...
 ...
 ...
 ...
 ...
 659

 Whooping Cough
 ...
 ...
 ...
 ...
 240

 Mumps
 ...
 ...
 ...
 ...
 ...
 54

 Impetigo, Sores
 ...
 ...
 ...
 ...
 ...
 ...

In addition the Health Visitors excluded children for the undermentioned reasons:—

Minor Injuries 2
Other Ailments 364

No school or portion of a school was closed during the year on account of the prevalence of infectious diseases. School Medical Officers or Health Visitors visit any schools in which an abnormal number of cases has occurred, and such visit is sometimes accompanied by the swabbing of a class or the close inspection of each scholar as to nasal discharge, etc., etc.

During the year 3 certificates were given that the attendance of a department had fallen below 60 per cent. owing to the prevalence of

epidemic illness.

There was a big epidemic of mumps in the schools.

IX.

OPEN-AIR EDUCATION.

The Certified Open-Air School (Whitton) is dealt with under the section "Blind, Deaf, Defective and Epileptic Children."

(a) PLAYGROUND CLASSES.

Four open-air classrooms on four playfields were used during the year.

(b) OPEN-AIR CLASSROOMS IN PUBLIC ELEMENTARY SCHOOLS.

In the recently built schools it is possible to throw open one or more sides of the classrooms.

(c) School Journeys and Camps. No school journeys or camps.

X.

PHYSICAL TRAINING.

The report of Mr. W. Tye, the Organiser of Physical Training is appended:—

IPSWICH BOROUGH EDUCATION COMMITTEE. PHYSICAL TRAINING REPORT FOR YEAR ENDED DECEMBER 31st, 1938.

INTRODUCTORY.

It is pleasing to report that physical education in the schools continues to make real progress. The standard of the training generally has made a definite improvement during the last year. This is largely due to improved accommodation both inside and outside. An increased provision of suitable halls, spacious and well surfaced playgrounds and modern swimming baths have made it increasingly possible for some form of effective training to be taken under much better conditions throughout the year. This extraordinary increase in facility is appreciated by the schools, and the instruction generally is in consequence being carried out with more regularity, greater efficiency and much more enjoyment. The Committee's provision of physical training clothing has also considerably contributed towards a higher standard in the schools supplied.

STAFF.

Miss R. C. Bennett, Assistant Organiser of Physical Training, left the service of the Committee on May 31st to take up an organising post in Cambridge. She was succeeded by Miss R. B. Ayles, who began duties on September 1st. Miss Bennett is to be commended on the excellent service she gave whilst in the Borough, where her work was very much appreciated by both teachers and scholars. A definite improvement in standard of work in many of the girls' and infants' schools during the last two years is undoubtedly largely due to her influence.

DUTIES.

The Organisers continue to visit the schools for an equivalent of three days each week. During this time they try to keep in touch with all the varied phases of the physical activities, which of late years, have increased in the schools.

Demonstrations of physical training and an increased number of children receiving swimming instruction, have made the Summer term of recent years a particularly arduous one.

TEACHERS' CLASSES.

Much time and thought are still given to the training of teachers. To cope with the demand for suitable teachers for adult classes in physical training, which are increasing in and round about the Borough, two Leaders' Classes were again formed during the Spring and Autumn terms. These classes were opened to representatives of voluntary associations, as well as to Borough and County teachers. The attendances on the whole have been satisfactory, particularly amongst the women. Several of these leaders are now taking classes; their high standard in gymnastics has been of great help when giving demonstrations in many centres in the South of the county.

A class for Senior School women teachers was also held during the latter end of 1937 and the early part of 1938. This class was taken by Miss R. C. Bennett, who gave the teachers a series of lessons, and also lectures and demonstrations in the type of work suitable for older girls, including instruction in the use of gynmastic apparatus.

The numbers in attendance at the above-mentioned classes were:-

	Spring Term.	Autumn Term.
Leaders Class (Men)	 45	50
Do. (Women)	 55	51
Apparatus Class (Women)	 30	
Total	 130	101

SWIMMING INSTRUCTION.

The number of children desirous of swimming instruction, both elementary and more advanced, has gradually increased during recent years. The opening of the Broom Hill and Piper's Vale Baths, as well as the admission of scholars from Elementary Schools to St. Matthew's Bath, largely account for the increase. Fortunately, most of the schools are now much nearer to swimming pools, and in consequence get more benefit from the instruction.

Whilst five part-time specialist teachers were engaged to assist with the instruction, the remainder was carried out by the teachers from the schools, and this included responsibility for instruction in life saving. In the main the part-time teachers took responsibility for learners only. The need is becoming increasingly evident for part-time teachers capable of assisting with the more advanced instruction.

In addition to provision for learners and life-saving, arrangements were made last season for children who held the learners' certificate to attend the swimming baths in place of games, to receive more advanced instruction in swimming. This was taken advantage of by 265 boys and 109 girls, who seemed both to enjoy and to obtain benefit from the instruction. To ensure that the time is spent to the greatest advantage it is suggested that there should be a scheme of instruction

common to all the senior schools, and a test held at the end of the season to assess the value of the instruction.

Details of the results for the season were as follows:— Numbers receiving instruction—

Learners:	Boys	 1,385
	Girls	 1,117
Life-Saving:	Boys	 102
	Girls	 65
Advanced:	Boys	 265
	Girls	 109

Certificates awarded-

				Boys.	Girls.
1.	25 yards			141	160
2.	45 yards			232	163
3.	Life Saving:				
	Elementary		***	31	27
	Intermediate	:		50	2
				454	352
4.	Total of Certif	icates		8	806

DEMONSTRATIONS.

At the annual Athletic Sports organised by the Schools' Sports Association, a massed demonstration of physical training was again arranged. Groups from 28 Senior and Junior Schools took part. The object of the display was to shew the public a normal lesson as taken daily in the schools. Rythmical exercises in mass were followed by varied group activities, each group illustrating the use of special apparatus. The display was witnessed by a large and appreciative audience. Such demonstrations do a great deal of good among the parents, who are usually more sympathetic to physical training ideals after they have seen what is being done in the schools.

It is encouraging to note that most of the senior schools now make a strong feature of physical training displays on their "open days" for parents.

During the Summer term a demonstration of games and athletics suited to adults was arranged on Portman Road Ground by the Recreative Council of Physical Training in conjunction with the local Education Authorities. Representatives of American and English Universities, in addition to the Achilles Athletic Club and local games clubs, gave a most interesting and instructive demonstration of training methods for athletic events and games. There were large audiences present on both occasions, many of whom took part in the coaching practices subsequently offered by the experts.

PLAYFIELDS AND GAMES.

The Committee's playfields, with a total area of approximately sixty-eight acres, continue to be a real boon to the schools. On recent inquiry it was found that 5,286 children from the Senior and Junior schools used the fields weekly for organised games. The fields are laid out and equipped for winter and summer games, inclusive of athletics. The Schools' Sports Association, who use the pitches extensively on Saturday morning for games, and during summer evenings for athletics, can now carry out an uninterrupted programme for inter-school activities.

The annual Hockey Festival, which is organised by the Suffolk Women's Hockey Association in conjunction with the Committee's Organisers of physical training, was increasingly successful this year. In all, twenty-two Secondary and Elementary schools, drawn from a wide area, took part in keenly contested games. Comments by the Adjudicators, which followed the matches, made the tournament most valuable to those who were interested in the technique of the game.

PHYSICAL TRAINING CLOTHING.

The Committee's provision of physical training clothing to the four fully organised senior schools has been most beneficial and very encouraging. All the boys and girls here are now suitably equipped for physical training, and as a result, the teachers are able to carry out a more suitable scheme of instruction under more pleasant and hygienic conditions. In consequence, the general standard of the work has improved, and is being carried out with more precision and vigour.

Throughout the schools generally during the last year or so the children have shewn a greater readiness to remove superfluous clothing when taking exercise. Obviously the value of this is being stressed by the teachers, and both parents and scholars are beginning to realise

the value of air and sun to the human body.

The provision of wire cages in the South Eastern Senior School gymnasium, for storing physical training clothing has been a great help. The clothing can now be safely stored, warmed and ventilated when not in use. The Organisers wish to express their gratitude to the Committee for their generous provision of physical training clothing to these senior schools.

SPORTS ASSOCIATION.

The Schools Sports Association continue to do very good work indeed on behalf of the children's games, sports and swimming, after school hours. Much credit is due to these numerous teachers who so willingly give their time for the good of the children.

W. Tye, Organiser of Physical Training.

XI.

PROVISION OF MEALS.

(a) MEALS.

Children are supplied with breakfasts, dinners and morning milk free of cost, provided they are necessitous within the meaning of the Education Act. During the year 27 children were supplied with meals. All applications are submitted to the School Medical Officer for his recommendation.

(b) MILK IN SCHOOLS.

An approved milk supply is available in every school in the Borough.

Samples are taken from time to time and submitted to laboratory investigation.

The following table gives details of children partaking of the milk in schools scheme.

As stated in the nutrition section, during the Autumn term milk was available twice daily, and rather a larger percentage than expected partake of these advantages.

Date.	Children paying for milk.		Milk p by Edu Comm	cation	Milk po by P Assist Comm	ublic ance	Tot	al
28.1.38 25.2.38 25.3.38 29,4.38 27.5.38 24.6.38 22.7.38	4,4 4,4 4,4 4,4	321 177 412 149 128 463 369	946 426 960 430 963 446 933 415 893 401 912 406 873 411		5,693 5,867 5,821 5,797 5,712 5,781 5,653			
Average	4,	117	9	25	4	19	5,761	
30.9.38 27.10.38 25.11.38 16.12.38	a.m. 4,835 4,825 4,798 4,742	p.m. 1,292 1,239 1,259 1,230	a.m. 897 922 975 989	p.m. 837 859 917 939	a.m. 392 405 412 422	p.m. 366 381 387 394	a.m. 6,124 6,152 6,185 6,153	p.m. 2,495 2,479 2,563 2,563
Average	4,800	1,255	946	888	408	382	6,154	2,525

XII.

CO-OPERATION OF PARENTS, TEACHERS, SCHOOL ATTENDANCE OFFICERS AND VOLUNTARY BODIES.

(a) PARENTS.

Parents are invited by printed notice to attend at the school when their children are to undergo Routine Medical Inspection, but it is not usual for them to be present at Following Up Examinations. The number of parents attending the Routine examinations was 81.3% of the total children examined.

Many also accompany their children to the School Clinic.

The attendance and co-operation of the parents facilitates all branches of inspection and treatment.

(b) Teachers.

Without the active co-operation of Teachers, the School Medical Service would function imperfectly, and the thanks of the School Medical and Dental Staffs are due to all members of the Teaching profession who have, during the past year, and in some cases for many years, done everything possible to assist the service.

Close co-operation exists between the various sections of the School Medical Service and Education Departments and valuable help has also been afforded by the Voluntary Association for Mental Welfare and the National Society for the Prevention of Cruelty to Children.

XIII.

BLIND, DEAF, DEFECTIVE AND EPILEPTIC CHILDREN.

(a) BLIND.

Table III. (Statistical Tables) gives particulars with regard to the Blind and Partially Blind children.

It will be seen that the Education Committee is responsible for the maintenance of five children at Certified Schools for the Blind.

(b) DEAF.

If the same Table is referred to, it will be seen that 10 Ipswich children are at Certified Schools for the Deaf.

(c) MENTALLY DEFECTIVE.

69 children were examined under this heading during 1938 and in addition, 2 cases were re-examined.

Of these, 34 children were classified as follows:-

Classified as :-				Males	Females.	Total
Feeble Min	nded			10	3	13
						_
Idiots				-	1	1
	7	otal Cer	tified	10	4	14

Of the remainder, 12 were "Dull and Backward," 7 "Backward," and 1 of average intelligence.

The remainder were referred for observation, re-examination and classification.

This by no means represents the ascertainable figure, as there are 67 children on the list for examination and 35 for re-examination.

The following Table compares the figures of 1938 with those of previous years:—

						C	CLASS	IFIC	ATIO	N.								
Year.	Feeb	le-Mir	nded.	In	ibecile	es.	1	diots			ull an			Total.				
	м.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.			
Average 1921-1925 1926-1930 1931-1935	18 10 9	11 10 8	29 20 17	2 4 1	4 3 2	6 7 3	_ _ 1	=		20 13 9	12 14 5	32 27 14	40 27 20	27 27 15	67 54 35			
1932 1933 1934 1935 1936 1937	8 5 9 6 17	6 7 4 3 10 5	14 12 13 9 27 22	- 1 - 1 1 2	1 2 4 — 1 3	1 3 4 1 2 5	2 1 - 1 -	1 1 -	3 1 1 1 -	14 2 11 4 4 9	5 5 8 2 8 6	19 7 19 6 12 15	24 9 20 12 22 29	13 14 17 5 19	37 23 37 17 41 43			
1938	10	3	13	_	_	_		1	1	6	6	12	16	10	26			

Ipswich has a Special School for mentally retarded children at Britannia Road, and the register shows the following figures:—

	Boys.	Girls.	Total.
On Register December, 1937,	43	22	65
Admitted during the year	10	2	12
Left during the year	7	7	14
Remaining on Register December, 1938.	45	18	63

BRITANNIA ROAD SPECIAL SCHOOL.

The number in attendance at the end of the year was 63, 45 of whom were boys.

14 children left during the year, of the 7 boys, 3 are in work, 1 attends the basketry class, 1 went to an institution, and 2 died; and of the 7 girls, 3 are in work, 3 are in domestic work at home and 1 went to an institution.

The average mental age this year works out at 7.5, with an average chronological age of 12, which is much the same as last year.

(d) PHYSICALLY DEFECTIVE.

This group includes Tuberculous, Delicate and Crippled children and children with Heart Disease, and figures with regard to them will be found upon reference to Table III.

There is always available accommodation at the Ipswich Sanatorium for any tuberculous children or children requiring institutional observation.

Arrangements are also in force with the local Hospital for any orthopaedic work which may be necessary.

WHITTON OPEN AIR SCHOOL.

The Education Committee also has its own Open Air School at Whitton.

The Whitton Open Air School register gives the following figures:—

	Boys.	Girls.	Total.
On Register December, 1937	 58	48	106
Admitted during the year	 31	23	54
Left during the year	 22	29	51
Remaining December, 1938	 66	43	109

The average attendance, 89.9, was not so good as in former years, and the girls' attendance was 38.4, and the boys 51.5.

Of the 9 children who left as being 14 years of age, all except one are known to have obtained employment.

All the children were medically examined at least once during the year, a visit for this purpose being made to the school each term.

A dental demonstration took place at the school on May 27th, but was very poorly attended by parents—only six came, but following dental inspection in September, many children received treatment.

50% of the children have received cod liver oil and malt in addition to the half-pint of milk and mid-day meal.

Quite a number of the children were able to take part in sports held at the school.

Shower baths are being added to the school and will prove of definite benefit.

(e) Supervision of Mentally Defective Children not in Special School.

This is performed on behalf of the Education Committee by the Local Branch of the Mental Welfare Association.

From September, 1924 until December, 1938, 111 boys and 80 girls have left the Britannia Road Special School. The following statistics show what has happened to these boys and girls up to December, 1938.

			M.	F.	Total.
Regularly employed			41	26	67
Irregularly employed			14	10	24
Unemployable			10	6	16
Never placed in work, a	lthough	not			
unemployable			_	4	4
Admitted to Training Home	es		14	12	26
Placed under Guardianship			5	1	6
Lost sight of			1	7	8
Removed from register			20	13	33
Removed from area			4	1	5
Dead			2		2
			111	80	191

AFTER CARE.

During 1938, after care for these school leavers was provided by the Ipswich Mental Welfare Association as follows:—

Friendly supervision Statutory supervision	 ***	M. 18 52	F. 9 38	Total. 27 90
		70	47	117

XIV.

FULL-TIME COURSES OF HIGHER EDUCATION FOR BLIND, DEAF, DEFECTIVE AND EPILEPTIC STUDENTS.

(a) The Education Committee arrange for the training of these students at Residential Institutions. Each case is considered on its merits after considering the report of the School Medical Officer, any recommendations made by the Ipswich Blind Society in the case of adults and, where a child is already in an Institution, the report of the Principal of the Institution.

The number of trainees at Residential Institutions during the year under review was—blind 1, cripple 2, epileptic 1, deaf 1.

- (b) No courses are maintained by the Authority.
- (c) The training of one crippled person was completed during the year.

XV.

NURSERY SCHOOLS.

There is no Nursery School in Ipswich.

XVI.

SECONDARY SCHOOLS AND OTHER INSTITUTIONS OF HIGHER EDUCATION.

The School Medical Service is concerned with the following Schools:—

Ipswich School. High School for Girls. Northgate Schools. Aided Higher School for Boys.
,, ,, ,, Girls.
Provided Secondary Schools for
Boys and Girls.

(1) MEDICAL INSPECTION.

Routine medical inspections are carried out at the Ipswich and Northgate Schools and the following Table gives the number of children examined:—

School.	Examined.	No. of Defects Found.*	No. of Following up or Re- examinations.
Ipswich School Northgate Boys Northgate Girls	53 199 127	13 16 26	117 88 99
Total	379	55	304

^{*}Excluding Dental Defects and Malnutrition.

In addition, 60 boys were examined as to fitness for sports.

The defects found, excluding Dental, can be classified as follows:—

		Ipswich	School.	Northga	te Boys.	Northga	ate Girl
Defect.		Treat- ment.	Obser- vation.	Treat- ment.	Obser- vation.	Treat- ment.	Obser- vation
Malnutrition (see special Ta	able below)						
Other Diseases, Skin (Non. Eyes-	T.B.)	_	_	_	17	_	3
Blepharitis			_	-	_	_	3
Defective Vision				7	3	7	4
Squint		1	_	_	_	_	_
Other Conditions		_	_	1	1	2	_
Ears—						_	
Defective Hearing			_	_		_	_
Other Diseases		_		_	1	_	
Nose and Throat—							
Enlarged Tonsils			4		2	_	16
Adenoids		_	_	_	1	-	_
Tonsils and Anenoids				_	_	-	1
Other Conditions			-	_		2	_
GLANDS-		_					
Enlarged Cervical		-		_	4	_	4
Speech—							
Defective		-	_	_		-	-
HEART CIRCULATION-							
Functional		-		1	_	-	4
Anaemia		_		_	_	-	1
Lungs—							1
Other Non. T.B. Dise	ase			-	1	_	1
Tuberculosis—							
Suspected T.B. Lungs		_			_	_	-
Nervous System—							
Other Conditions		-		-	-	-	-
Deformities—							
Spinal Curvature		3	1	1	-	7	11
Other Forms		9	4	2	4	5	5
OTHER DEFECTS		_	1	4	9	3	2
Total		13	10	16	43	26	55

(2) NUTRITION.

The following Table gives the results of examinations so far as nutrition is concerned:—

		Ipswich School.		Northg	Northgate Boys.		Northgate Girls	
		No.	%	No.	%	No.	%	
Excellent		 19	35.85	65	32.67	24	18.9	
Normal		 32	60.38	123	61.8	87	68.5	
Slightly S	ub-Nor	2	3.77	11	5.53	16	12.6	
Bad		 	_	-		-	_	

The girls do not appear to have as good nutrition as the boys, but the boys and girls are, of course, examined by different doctors.

(3) FOLLOWING UP AND MEDICAL TREATMENT.

The figures as to "following up" examinations have been given in a foregoing Table.

Free treatment is afforded by the Committee for Special Place holders and for minor ailments in the case of fee-paying pupils.

XVII.

PARENTS' PAYMENTS.

The Education Committee has fixed the undermentioned charges for the treatment of school children:—

Tonsils and Adenoids, operative treatment: 5/- (including operation and subsequent treatment).

Provision of Spectacles and other medical appliances: Cost price.

Dental: 6d. for the first attendance, with a maximum charge of 1/- should further attendance be necessary to complete the treatment required.

Minor Ailments: Free.

The scale of charges refer to public elementary school children only. The fees are paid at the School Clinic generally at the same time as treatment is carried out.

So far as fee-paying pupils at Secondary Schools are concerned, the above scale applies, except as under—

Tonsils and Adenoids, operative treatment: 17/- (including operation and subsequent treatment).

Dental: 2/- per attendance.

The amount collected for the last financial year, 1937-38, was £131 11s. 5d.

XVIII.

HEALTH EDUCATION.

In May, 1938 a Municipal Exhibition was held in Ipswich for a period of ten days.

The Public Health Department was offered space in the section devoted to the activities of the Corporation, and stands were utilised to call the attention of the public to the School Medical Service.

Amongst other exhibits was a complete Dental Unit, and with a dental surgeon always in attendance, proved a valuable means of propaganda for the many thousands of people who toured the exhibition.

Leaflets were distributed from the stands and talks were given to those inspecting the exhibits.

During the latter part of May and the early part of June, the Dental Board of the United Kingdom arranged and carried out dental demonstrations in all the schools in the town.

A trained demonstrator gave an explanatory talk lasting about twenty minutes and the children then examined the models which had been sent down by the Board.

These demonstrations are held every four years or so, and prove of considerable value in training school children in the care of the teeth.

Several lectures have been given throughout the year by members of the staff to various organisations directly or indirectly associated with the welfare of the school population.

XIX.

SPECIAL INQUIRIES.

An inquiry was made during the year into the occurrence of cases of vulvo-vaginitis amongst school children.

During the first week in July 1938, a case of vulvo-vaginitis was reported to the Public Health Department.

During July, investigations were made and with the co-operation of the Medical Practitioners in the area, school teachers, etc., 16 other cases of varying degrees in children of school age and under were observed. In two cases it was known to be a relapse of a previous attack and in three other cases a history of some weeks or months of the condition prior to this investigation. These cases had already been under treatment and excluded from school.

In most of the cases investigation was carried out by arrangement with the East Suffolk and Ipswich Hospital.

In the majority of the children, the condition cleared up in 2-3 weeks. After all manifestations of the condition had cleared, all children were kept under observation either by their own doctors or at the Clinic for a minimum period of three weeks.

The investigation brought to light a number of cases, but in no way suggested any epidemic form or flare up of the condition.

XX.

MISCELLANEOUS

(a) EMPLOYMENT OF SCHOOL CHILDREN.

Total number of medical examinations during 1938 was 302.

Number passed on first ex	aminatio	n	 195
Number passed on re-exam	mination		 46
Number re-examined			 54
Number withdrawn on re-	-examinat	ion	 5
Number refused			 2
	Tota	1	 302

STAMMERERS.

The report of the Speech Therapist, Miss S. D. Miller, is appended:—

REPORT ON CLASSES FOR STAMMERERS AND SPEECH DEFECTIVES, 1938.

During 1938, classes for stammerers and speech defectives were held at the following schools.—

Ranelagh Road Junior Mixed C. School.
Bramford Road Infants' C. School.
St. Helen's Junior Mixed C. School.
Clifford Road Boys' C. School.
Clifford Road Infants' C. School.
Priory Heath Junior Mixed C. School.
Greenwich Junior Mixed C. School.
Gainsborough Junior Mixed C. School.
Central Senior Boys' C. School.
Britannia Road Special School.

In March, the centre at the Greenwich Junior Mixed C. School was transferred to Gainsborough Junior Mixed C. School for the greater convenience of the children concerned.

The total number of cases which attended the various centres during the course of the year was 78; an increase of six on last year. Of these, twenty-nine were stammerers and forty-nine were speech defectives.

Stammerers.

- 20 continue in attendance. One of these is of sub-normal mentality, attending Britannia Road Special School.
 - 1 was withdrawn owing to poor health.
 - 1 left the town.
 - 4 were discharged as having benefited.
 - 3 were discharged as satisfactorily re-adjusted.

Speech Defectives.

- 38 continue in attendance. One of these is of sub-normal mentality, attending Britannia Road Special School.
- 1 reached school-leaving age. This was a cleft-palate case of sub-normal mentality attending Britannia Road Special School.
- 1 left the town.
- 2 were withdrawn at wish of parents.
- 2 were discharged as having benefited.
- 5 were discharged with normal speech.

In comparison with previous years, the number of cases discharged is low. There were, however, a number of cases almost ready to be recommended for discharge, who were kept in attendance for a further period, in order to achieve a more satisfactory standard of speech.

Various difficulties arise; such as the inconvenience of the distance to be travelled to the nearest centre, weather conditions, or through the cases being too young or irresponsible to travel alone. These difficulties are usually overcome by the excellent co-operation of the teachers and parents concerned; and satisfactory arrangements made for most cases needing to attend a speech centre.

> S. D. MILLER, Speech Therapist.

(c) Public Elementary Schools and School Population.

The following Table gives the number of Public Elementary Schools and the approximate number of Elementary School children:—

	1936.	1937.	1938.
Number of Public Elementary Schools	29	29	29
Average number on School Registers	11,538	11,416	11,411
Average attendance of children at School	10,479	10,093	10,293

TABLE I.

MEDICAL INSPECTIONS OF CHILDREN ATTENDING PUBLIC ELEMENTARY SCHOOLS.

A.—ROUTINE MEDICAL INSPECTIONS.

Number of Inspections in the prescribed Groups:-

Entrants			 1,638
Second Age G	roup		 1,926
Third Age Gr			 1,638
	Total		 5,202
Number of other R	outine Insp	ections	
	Grand	Total	 5,202

B.—OTHER INSPECTIONS.

 	12,402
 	20,113
 	32,515

C.—CHILDREN FOUND TO REQUIRE TREATMENT.

Number of individual children found at Routine Medical Inspection to require treatment (excluding Defects of Nutrition, Uncleanliness and Dental Diseases).

Group.	vi		For all other con- ditions recorded in Table II. A.	Total.
Entrants		8	111	119
Second Age Group		135	109	237
Third Age Group		75	57	130
Total (Prescribed Groups)		218	277	486
Other Routine Inspection	ons	_	_	_
Grand Total		218	277	486

TABLE II.

A.—RETURN OF DEFECTS FOUND BY MEDICAL

INSPECTION IN THE YEAR ENDED 31st DECEMBER,
1938.

			TINE TIONS.		CIAL CTIONS.
	** / · · ***	No. of Defects.		No. of Defects.	
Defect or Disease,		Requiring Treat- ment.	Requiring to be kept und- er observa- tion, but not requiring treatment.		Requiring to be kept und- er observa- tion, but no requiring treatment.
	Ringworm-Scalp	-	_	3	_
	Body	-	_	3	_
Skin	Scabies	4		28	1
DEIII	Impetigo Other Diseases	4	9	273	-
	(Non-Tuberculous)	10	56	1,053	4
	Blepharitis	1	16	53	1
	Conjunctivitis	-	3	109	_
	Keratitis	-		3	_
	Corneal Opacities Other Conditions (exclud-	_	_	1	_
Eye	ing Defective Vision and Squint)	5	12	147	5
	Defective Vision (excluding	218	56	106	5
	Squint) Squint	11	14	13	-
	Defective Hearing	3	22	4	_
Ear	Otitis Media	5	10	39	2
	Other Ear Diseases	4	13	140	15
	Chronic Tonsillitis only	43	844	38	114
Nose and	Adenoids only Chronic Tonsillitis and	7	20	9	4
Throat	Adenoids	19	11	34	5
	Other Conditions	13	46	251	21
Enlarged	Cervical Glands (Non-Tuberculous)	7	585	129	102
Defective	Speech	8	14	38	2
Heart	Heart Disease—Organic	1	18	3	2
and Cir-	Functional	_	41	2	1
culation	Anæmia	2	97	4	
	Bronchitis	10	29	48	5
Lungs	Other Non-Tuberculous Diseases	8	47	1	3

TABLE II.—Continued.

		1	6	1	5
Tuber-	Non-Pulmonary— Glands		3	3	
culosis		1	3	3	
			1		
				_	
	Other Forms	-			_
NT	Epilepsy		4	3	2
Nervous	Chause		1	7	_
System	0.1 - 0 - 11.1	4	15	6	4
Deform-	Rickets		16	_	
	Spinal Curvature .	45	52	9	3
ities	Oil - Passes	15	44	13	4
Defect	fects and Diseases (excludings of Nutrition, Uncleanlines ental Diseases)		92	3,492	27
	Total Number of Defects .	504	2,198	6,066	337

B.—CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED DURING THE YEAR IN THE ROUTINE AGE GROUPS

Number of Children	(Exc	A cellent)	(No	B ormal)				D ad)
Inspected.	No.	%	No.	%	No.	%	No.	%
1638 1926	179	10.93	1195	72.96 72.54	257	15.69	7 8	.42
1638	415	25.33	1029	62.83	191	11.66	3	.18
								.34
	of Children Inspected.	of Children Inspected. No. 1638 179 1926 232 1638 415	of Children Inspected. No. % 1638 179 10.93 1926 232 12.05 1638 415 25.33	of Children Inspected. No. % No. 1638 179 10.93 1195 1926 232 12.05 1397 1638 415 25.33 1029	Of Children Inspected. No. % No. % 1638 179 10.93 1195 72.96 1926 232 12.05 1397 72.54 1638 415 25.33 1029 62.83	No. % No.	Of Children Inspected. No. % No. % No. % No. % 1638 179 10.93 1195 72.96 257 15.69 1926 232 12.05 1397 72.54 289 15.00 1638 415 25.33 1029 62.83 191 11.66	Number of Children Inspected. No. %

TABLE III.

RETURN OF EXCEPTIONAL CHILDREN IN THE AREA.

BLIND CHILDREN.

At Certified Schools for the Blind.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
3	_	-	1	4

PARTIALLY SIGHTED CHILDREN.

Schools for	At Certified Schools for the Partially Sighted		At other Institutions.	At no School or Institution.	Total.
2	_	6	1	_	9

DEAF CHILDREN.

At Certified	At Public	At	At no School	Total.
Schools for the	Elementary	other	or	
Deaf.	Schools.	Institutions.	Institution.	
9	-	_	_	9

PARTIALLY DEAF CHILDREN

At Certified Schools for the Deaf and Partially Deaf.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
1	9	_	_	10

TABLE III.—Continued.

MENTALLY DEFECTIVE CHILDREN. FEEBLE-MINDED CHILDREN.

At Certified Schools for Mentally Defec- tive Children.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
62	8	1	6	77

EPILEPTIC CHILDREN. CHILDREN SUFFERING FROM SEVERE EPILEPSY.

At Certified	At Public	At	At no School	Total.
Special	Elementary	other	or	
Schools.	Schools.	Institutions.	Institution.	
	_	_	-	_

PHYSICALLY DEFECTIVE CHILDREN.

A. TUBERCULOUS CHILDREN.

1.—CHILDREN SUFFERING FROM PULMONARY TUBERCULOSIS.
(Including pleura and intra-thoracic glands.)

At Certified	At Public	At	At no School	Total.
Special	Elementary	other	or	
Schools.	Schools.	Institutions.	Institution.	
_	_	7	_	7

2.—CHILDREN SUFFERING FROM NON-PULMONARY TUBERCULOSIS.

At Certified	At Public	At	At no School	Total.
Special	Elementary	other	or	
Schools	Schools	Institutions.	Institution.	
_	2	5	-	7

TABLE III.—Continued.

B. DELICATE CHILDREN.

At Certified	At Public	At	At no School	Total.	
Special	Elementary	other	or		
Schools.	Schools.	Institutions.	Institution.		
101	412	10	1	524	

C. CRIPPLED CHILDREN.

At Certified	At Public	At	At no School	Total.
Special	Elementary	other	or	
Schools.	Schools.	Institutions.	Institution.	
7	13	_	2	22

D. CHILDREN WITH HEART DISEASE.

At Certified	At Public	At	At no School	Total.
Special	Elementary	other	or	
Schools.	Schools.	Institutions.	Institution.	
6	21	-	1	28

CHILDREN SUFFERING FROM MULTIPLE DEFECTS.

Combination of Defect.	At Certified Special Schools.	At Public Elemen- tary Schools.	At other Institu- tions.	At no School or Institu- tion.	Total
Heart Disease and Feeble Minded Cripple and Feeble Minded Deaf and Dumb and Feeble Minded		Ξ	=	<u>-</u>	1 2 1
Total	3	_	-	1	4

TABLE IV.

TREATMENT TABLES.

Group I.—Minor Ailments (excluding Uncleanliness, for which see Table VI.).

	Number of Defects Treated, or Unde Treatment During the Year				
Disease or Defect.	Under the Authority's Scheme.	Otherwise	Total.		
Skin— Ringworm-scalp. (1) X-Ray Treatment. (2) Other Ringworm, body Scabies Impetigo Other skin disease	3 32 277		5 3 32 277 1,063		
Minor Eye Defects— (External and other, but excluding cases falling in Group II)		3	319		
Minor Ear Defects	190	5	195		
Miscellaneous— (e.g. minor injuries, bruises, sores chilblains, etc.)	3.413	226	3,639		
Total	5,292	241	5,533		

Group II.—Defective Vision and Squint (excluding Minor Eye Defects treated as Minor Ailments—Group I.).

	Number of De	No. of children for whom spectacles were					
				Prescribed.		Obtained	
Defect or Disease	Under the Authority's Scheme.	Other- wise-	Total	(1) Under the Author- ity's Scheme	wise.	(i) Under the Author- ity's Scheme	(ii) Other wise
Errors of Refraction (including Squint) Other Defect or Disease of the	509	16	525	338	12	322	11
Eyes (excluding those recorded in Group I)	-	1	1				
TOTAL	509	17	526	3	50	33	33

Group III .- Treatment of Defects of Nose and Throat.

			Rece	ived	Opera	tive '	Freatr	nent.					
	ority in Cli	r the 's Sch nic or pital.	eme.	OT	ate Prospi	ly ractiti tal, ar luthor	part	Total-		Received other forms of Treatment.	Total number Treated		
(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)		
_	3	113	4		_	_	_		3	113	4	3	123

⁽i) Tonsils only. (ii) Adenoids only. (iii) Tonsils and Adenoids.(iv) Other defects of the nose and throat.

Group IV.-Orthopaedic and Postural Defects.

	Total number treated.	16
	Non- residential treatment at an orthopaedic clinic.	1
Otherwise.	Residential treatment without education.	ı
	Residential treatment with education.	L
scheme.	Non- residential treatment at an orthopaedic clinic.	16
Under the Authority's Scheme.	Residential treatment without education.	ı
Under th	Residential treatment with education.	I
		Number of children treated

Table V.—Dental Inspection and Treatment.

	Tubic 11	2011111	LINDILOIN	OII III	D I KEA	WILLY I.	
(1) N	Number of child	dren insp	pected by t	he D	entist:—		
((a) Routine age	e-groups	-				
	A	ge			Numbe	r	
					944		
	(898		
	7				1,114		
	8			• • • •	1,087	T . 1 0 (756
	10		•••		1,085	Total 9,8	356
	10 11			***	1,034		
	12				1,230		
	13				1,130 1,142		
	14				192		
,					1/2/		2.042
	b) Specials			• • •	• • • •		2,043
	c) Total (Rout						11,899
	lumber found to	-	treatment				8,730
	lumber actually						4,755
	ttendances mad			eatme	nt		6,739
(5) H	Half-days devot	ed to:-					
	Inspection				85	Total 1,0	011
	Treatment				926		
(6) F	illings:—						
	Permanent					Total 3,8	866
(5) D	Temporary	teeth			579 (
(/) E	xtractions:—	4 + 1-			1 210 1	Total 7.2	71
	Permanent				6,061	Total 7,2	./1
(8) A	Temporary		langestheti	ce for		one	3,024
(9) (dministrations other Operation	or genera	ii anaestnet	101	CATIACTI	ons	3,021
1)	Permanent	teeth			902)		
	Permanent Temporary	teeth			2725	Total 1,1	74
	z comportant y						
7	Γable VI.—UN	CLEANLI	NESS AND	VERN	INOUS	Conditio	NS.
(i.)	Average num						100
	year by the	Health	Visitors				5
(ii.)	Total number	of exami	inations of o	childr	en in the	schools	
, ,	by Health						33,045
(iii.)	Number of ina						601
	Number of in						
(iv.)	87(2) and (3) of the I	Education A	ct, 19)21		8
(v.)	Number of cas	ses in wh	ich legal pro	oceed	ings were	e taken:—	
	(a) Under	the Edu	cation Act,	1921			-
	(b) Under	School A	Attendance	Byela	aws		



