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Contributors

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HEALTH
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**REPORTS OF THE PUBLIC HEALTH
COMMITTEE FOR THE YEAR ENDED 31st
DECEMBER, 1952 :—**

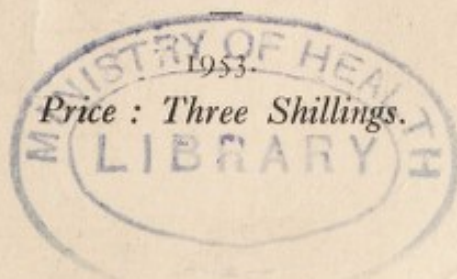
1. Report of the Committee ;
2. Report of the Medical Officer of Health ;
3. Report of the Chief Sanitary Inspector ;
4. Reports on the working of the various departments and clinics at the General Hospital ;
5. Report on St. Saviour's Hospital submitted in accordance with Article 7 of the "Loi (1890) sur la Régie et l'Administration de l'Asile Publique des Aliénés" ;
6. Report on the Jersey Maternity Hospital ;
7. Report on Sandybrook ; and
8. Report on the Ambulance Service.

*Presented to the States by Senator Le Marinel,
President of the Public Health Committee, on the
27th October, 1953.*



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1881

STATES OF JERSEY.

27th October, 1953.

THE PRESIDENT OF THE PUBLIC HEALTH COMMITTEE presented to the Assembly the following Reports for the year ended 31st December, 1952 :—

1. Report of the Committee ;
2. Report of the Medical Officer of Health ;
3. Report of the Chief Sanitary Inspector ;
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6. Report on the Jersey Maternity Hospital ;
7. Report on Sandybrook ; and
8. Report on the Ambulance Service.

THE STATES ordered that the said Reports be printed and that copies thereof be distributed to the Members of the Assembly.

F. DE L. BOIS,
Greffier of the States.



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PUBLIC HEALTH COMMITTEE.

ANNUAL REPORT FOR THE YEAR 1952.

The Committee's policy of providing and maintaining the highest possible standard of modern medical treatment compatible with the economy of the Island continues and, during 1953, a 70 m.m. X-ray plant will be installed at the General Hospital which will permit the taking of an annual X-ray of all persons between the ages of 15 and 25 who volunteer to have this done. This will greatly assist in the early detection and treatment of tuberculosis and marks yet another step towards its eventual abolition.

The Committee has also under consideration the provision of urgently required additional accommodation for the treatment and care of mental defectives and the construction of accommodation at Sandybrook for the male poor law inmates with the consequent releasing of much needed additional accommodation at the hospital.

The Medical Officer of Health, after observing that there were no epidemics during 1952, makes these interesting points on the health of the people of Jersey.

Tuberculosis. (page 15)

The tuberculosis mortality rate during 1952 was the lowest ever recorded.

Infantile Mortality. (page 12)

The infantile mortality rate of 23.5 per 1,000 was also the lowest recorded in Jersey. It is interesting to note that the rate in 1913 was 115.1 per 1,000.

Motor Accidents. (page 13)

There were eight deaths from this cause in 1952. The dangerous ages appear to be between 15 and 25 and after 25 the fall in mortality rates is dramatic. The Medical Officer of Health suggests that this appears to indicate that it is at about that age that the young man marries the girl on the pillion, sells the motor bike and buys a pram !

Suicides. (page 15)

There were eighteen cases of suicide during 1952, the largest number recorded for twenty-five years.

Cancer deaths. (page 15)

The great increase in deaths from cancer is considered to be largely due to the increasing average age of the population.

Nose and Throat. (page 29)

The waiting time for tonsillectomies at the General Hospital has now been brought down to a maximum of two months.

Visual Defects. (page 29)

The new orthoptic clinic at the General Hospital came into operation early in 1952 and 97 cases of urgent squint have been dealt with. The clinic fills a long felt want and has already worked wonders. It is regretted however that many children appear not to be wearing the spectacles which have been prescribed for them and it is hoped that everyone in close contact with such children will endeavour to ensure that they wear their spectacles.

Dental. (page 72)

Once again the report stresses the urgent need for many more dental sessions per week if our children

are to have even half the chances enjoyed by their more fortunate opposite numbers in England in respect of the care of their teeth.

Educationally subnormal children. (page 32)

The report expresses regret that no progress has been made in providing for these unfortunate children who will benefit little or nothing from the ten years of school life that lies before them. There are at least 100 candidates requiring the special educational tuition which cannot be given in an ordinary school and it is considered that this number justifies the employment of a whole-time mental health officer.

Sanitary inspection. (page 43)

There is still too much sub-standard housing in Jersey but the obstacle to the removal of slum property is the difficulty of rehousing the tenants occupying such property. Of thirteen houses condemned during 1952, eight were still occupied at the end of the year.

The introduction of milk bottling has been accomplished without serious complaint and the Medical Officer of Health expresses himself as satisfied that the population is receiving a cleaner and better milk.

Voluntary Societies. (page 40).

The invaluable assistance given to the community by the Jersey District Nursing Association, the Maternity and Infant Welfare Centre and the Jersey Society for the Welfare of the Aged has continued during the year and merits the unstinted support of the public.

Surgical Department. (page 60)

With regard to the reports from the departments at the General Hospital it will be seen that, during 1952, the bed accommodation has been difficult largely owing to the number of male accident cases who occupy beds for a long time and the number of aged female patients who cannot be discharged because they live alone.

There were 91 road accidents, 47 being motor cycle accidents and, of these, 36 (or 77%) received a head injury. It is interesting, and perhaps significant, to note that there was a very great drop in the incidence of head accidents to army dispatch riders when the wearing of crash helmets was made compulsory. The corollary is obvious. The question is, has the time arrived when serious consideration should be given to the enactment of legislation making it compulsory for motor cyclists, and perhaps pillion riders, in Jersey, to wear crash helmets?

X-Ray Department. (page 62)

The mass radiography unit to be installed in 1953 will enable this department to deal with all the requirements of the Medical Officer of Health in connexion with his campaign for the early detection of tuberculosis and it is possible that, should the need arise, one or two evening sessions may be held weekly.

Cardiac Clinic. (page 64)

This clinic is now working to capacity and an appointment system is in operation and is working satisfactorily.

Eye Clinic. (pages 68 & 73)

The number of attendances for 1952 was 2,897 compared with 2,602 in 1951.

Orthoptic Clinic. (page 73)

This department commenced in May with a waiting list of 100 children with squints. This waiting list precluded the acceptance of adult cases but it is hoped eventually to extend the activities of the department to all persons requiring this treatment.

Medical and Skin Clinic. (page 70)

Attendances at the skin clinic have been extremely satisfactory.

The cases treated in the Medical clinic are mostly diabetics who have been treated in the medical wards and who report at the clinic for observations.

This department continues to function excellently and records with great satisfaction that it has had no cases of poliomyelitis during 1952.

Dental Department. (page 72)

Once again the report for this department stresses the arduous nature of the work and draws attention to the present lack of comprehensive dental treatment for school children.

Children's Department. (page 74)

In view of the number of admissions from pneumonia, the need for extra cubicles, incubators and another oxygen tent, is emphasized.

Pharmacy Department. (page 76)

The reorganization of this department has continued during 1952. Many preparations are now manufactured on the premises and the cost of the department has been considerably decreased as a result.

Pathological Laboratory. (page 78)

With the completion of the first floor extension, Jersey has now an up-to-date laboratory, well equipped and staffed with highly efficient technicians.

Main Drainage Scheme.

It is the policy of the Committee to inform the States from time to time of the progress of the drainage scheme and therefore no detailed report is included with the Committee's annual report for 1952. It can be said, however, that after due allowance for the unavoidable initial delay, work on the St. Helier to St. Aubin trunk sewer is now proceeding according to schedule.

General.

The individual reports which follow make extremely interesting reading and show that, thanks to the admirable work of all members of the staff, the services provided at the various institutions under the control of the Committee are not only being maintained at a high standard but, as finances permit, are gradually being expanded so as to meet the requirements of a modern health service.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH.

I have the honour to present the annual report on the health of the people of Jersey for 1952.

There were no epidemics during the year.

The campaign for B.C.G. inoculation continues. 1,400 received B.C.G. during the year, the total to date is 8,253.

The tuberculosis mortality is the lowest ever recorded in Jersey .25 per 1,000.

GENERAL STATISTICS.

Population	57,951
Death rate per 1,000 living	11.5
Birth rate per 1,000 living	14.7
Infant mortality per 1,000 births	23.5
Maternal mortality per 1,000 births	1.2
Persons married per 1,000	15.8
T.B. death rate all forms per 1,000 ... ..	.25

THE POPULATION.

By courtesy of the Essential Commodities Committee I receive every week a statement of the resident and foreign population of the Island based on the issue of ration books. By averaging the weekly figures the average population of the Island was obtained, this was, as stated above 57,951. Whilst it is available this is probably the most accurate figure to use. The resident population, excluding foreign workers and visitors, at mid-year was 55,727. There is in progress a slow but definite decline in the resident population.

The census in 1951 was taken on 8th April and gave the total population resident and foreign 57,296. The same figure in the first week of April 1952, was 57,097 approximately 200 down on the year before.

THE BIRTH RATE.

There were 852 births during the year 1952, eight more than in 1951 but owing to the new method of arriving at the population, the birth rate, 14.7 per 1,000, is slightly less than the last year. This is the first time since the war that the number of births has ceased to fall.

THE DEATH RATE.

Deaths during 1952 numbered 668 as against 686 last year. The death rate is therefore 11.5 per 1,000 as against 12 last year. The percentage of total deaths occurring at ages 65 and upward was 69.3%, at ages 75 and upward 43%. It is evident that the average age of the Jersey population must be high.

MATERNAL MORTALITY.

There was one maternal death from a ruptured ectopic pregnancy, the maternal mortality was therefore 1.2 per 1,000 births.

INFANT MORTALITY AND STILLBIRTHS.

There were 20 deaths in the first year of life distributed as follows :

0—7 days	...	...	...	...	...	...	10
7—28 days	...	...	...	...	...	...	4
28 days—3 months	...	...	...	...	...	...	1
3 months—1 year	...	...	...	...	...	...	5

50% of the infantile deaths occurred in the first week of life. The number of stillbirths was 12. Taking stillbirths and deaths in the first week of life they represent a loss of 22 lives, of which 10 were attributed to prematurity or 45.5%. Prematurity

can be reduced by attending to the welfare of mothers.

The infantile mortality rate of 23.5 per 1,000 is the lowest so far recorded in Jersey. The first recorded figure was in 1913 when the rate was 115.1 per thousand. In that year 946 babies were born and 108 of them died in the first year of their lives. Last year 852 were born and 20 died during the first year. This great improvement is due to many factors, better housing, better nutrition, smaller families with greater individual care of each child, and probably most important, education. Many have contributed to the education of the mother but I am sure a great deal of it is due to the untiring efforts of the Infant Welfare Centres and the District Nurses.

MOTOR ACCIDENTS.

Under this heading are included deaths from all motor driven road vehicles. There were 8 deaths from this cause during 1952. The nomogram gives an analysis of the figures 1948-1952 according to age. It shows very clearly that the dangerous ages lie between 15 and 25. One cannot but deplore this loss of young life but nevertheless one feels that if ever the day arrives when our young men will not take risks our race will have lost its right and its power to survive.

The drop after the age of twenty-five is dramatic and seems to indicate that it is about then the young man marries the girl on the pillion, sells the motor-bike, and buys a pram.

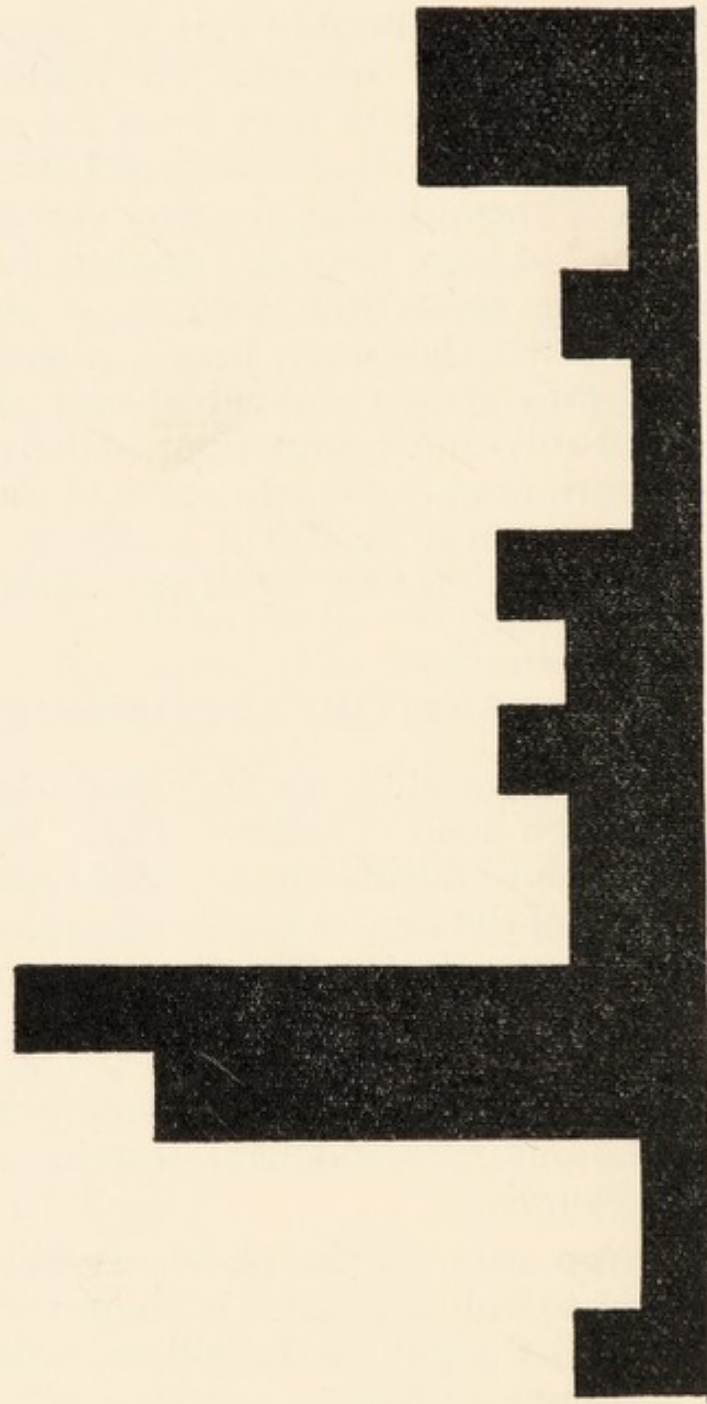
The slight rise at 70 and over indicates the necessity of a quick reaction to stimulus and swift mobility in these days of high speed traffic. However it is better not to analyse too closely a graph based on such small numbers.

AUTOMOBILE ACCIDENTS.

1948 - 1952.

10
9
8
7
6
5
4
3
2
1

NUMBER OF DEATHS.



UNDER 1-4 5-9 10-14 15-19 20-24 25-29 30-34 35-39 40-44 45-49 50-54 55-59 60-64 65-69 70-74 75 AND OVER

AGE GROUPS.

SUICIDE.

There were 18 deaths from suicide during the year 1952. This is the largest number recorded during the last 25 years. Coal gas was used in eight cases, six resorted to hanging. The average age was 52, the youngest was 24 and the oldest 81. All except one were males.

CANCER.

There were 54 deaths from cancer in 1900, last year there were 138 deaths from this cause. Of the 138 deaths from all forms of malignant tumours, 19 were due to cancer of the lung. The average age at death of cancers of the lung was 65.2. The average age of all deaths from cancer was 67 years.

The great increase in deaths from cancer is due to a large extent to the increasing average age of the population. Since 1900 Jersey has become to an ever increasing extent a haven of refuge for the retired and aged. This greatly increases the numbers at the cancer ages and so the cancer death rate.

TUBERCULOSIS.

There were 15 deaths from all forms of tuberculosis during the year 1952. Of these 13 were cases of respiratory tuberculosis and 2 other forms of tuberculosis. The two non-respiratory cases were :

1 Tuberculous pyelitis—male—aged 44.

1 Tuberculous peritonitis—female—aged 40.

TABLE 1.—TUBERCULOSIS MORTALITY RATES.
1909—52 INCLUSIVE.

Year.	RESPIRATORY TUBERCULOSIS.		OTHER FORMS.	
	No. of deaths.	Rate per 100,000.	No. of deaths	Rate per 100,000.
1909	75	143	17	32
1910	65	123	4	8
1911	73	140	14	27
1912	62	119	13	25
1913	51	98	16	31
1914	67	129	14	27
1915	65	125	16	31
1916	67	129	8	15
1917	77	171	20	44
1918	88	195	13	29
1919	56	112	15	30
1920	48	96	9	18
1921	59	119	6	12
1922	69	139	17	34
1923	51	102	11	22
1924	55	110	10	20
1925	35	70	14	28
1926	46	92	7	14
1927	46	92	9	18
1928	37	74	10	20
1929	47	94	8	16
1930	38	76	6	12
1931	34	67	16	32
1932	34	67	8	16
1933	41	81	8	16
1934	51	100	8	16
1935	29	57	8	16
1936	42	83	17	33
1937	28	55	6	12
1938	26	51	4	8
1939	26	51	5	10
1940	46	112	3	7
1941	46	111	7	17
1942	48	118	4	10
1943	47	120	9	23

Year.	No. of deaths.	Rate per 100,000	No. of deaths.	Rate per 100,000
1944	42	108	6	15
1945	31	77	6	15
1946	24	48	3	6
1947	41	76	7	13
1948	39	68	1	2
1949	30	52	—	—
1950	19	33	—	—
1951	19	33	3	5
1952	13	22	2	3



During the year under review 93 cases of respiratory tuberculosis were notified in Jersey. 10 of these were transfers from other areas all of which were inactive at the time of their removal to Jersey.

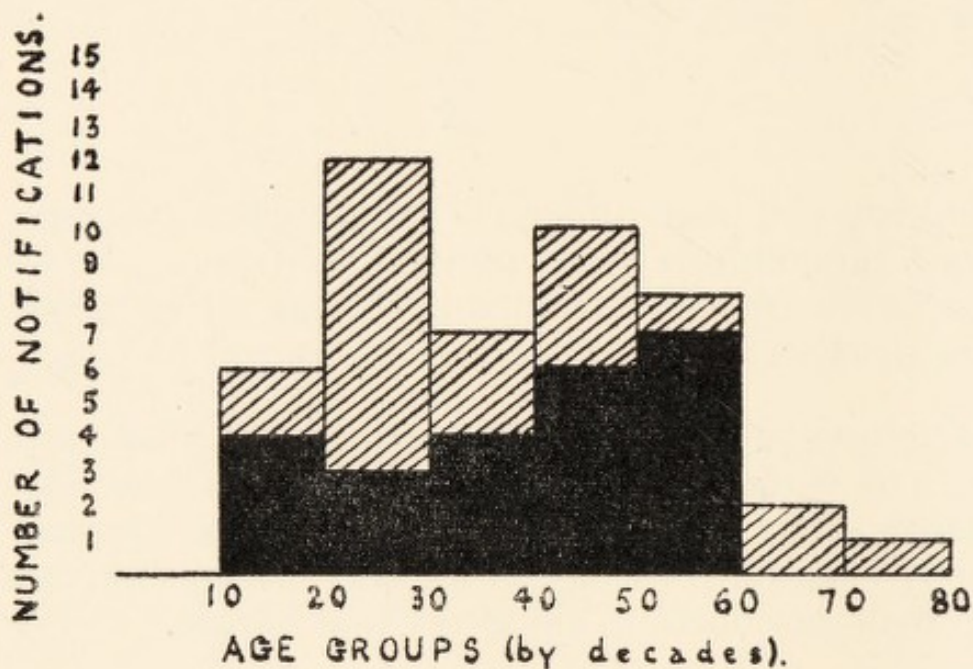
The nomograms deal only with the 83 local cases and it is evident that the pattern of previous years remains the same. Sex distribution is approximately even until the age of 40 after which there are two male notifications for every one female.

The highest number of notifications (26) is still by those in the third decade of life but of them only 8 were classified as "late" cases. The nomograms show very clearly how the proportion of "late" cases increases amongst the over forties.

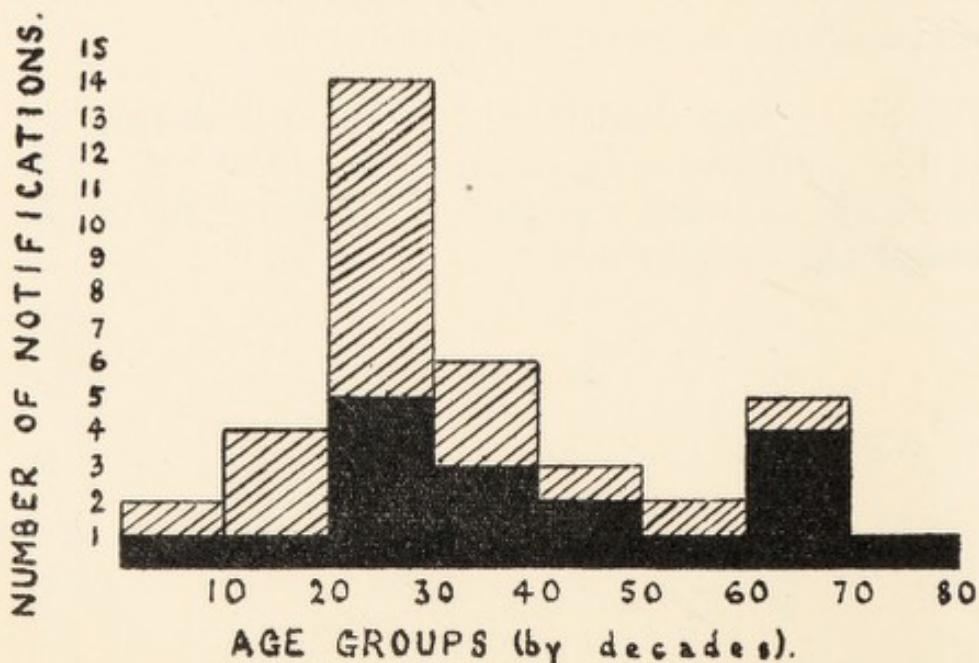
Of the 15 who died from tuberculosis during the year the youngest was 30 and the oldest 77. The average age at death was 52. There were no deaths amongst the under thirties.

INDIGENOUS NOTIFICATIONS. 1952.

MALE  = EARLY CASES.
 = LATE CASES.



FEMALE  = EARLY CASES.
 = LATE CASES.



During 1951 notifications of respiratory tuberculosis numbered 89. Of these 11 were transfers from other areas so that in 1951 Jersey produced 78 cases as against 83 this year. This slight rise in the incidence is probably due to our greater activity in case finding and does not mean a real increase in actual number of cases arising. As during 1953 we hope to see installed and functioning a 70 mm. X-ray plant which will allow for mass radiography, there will probably be another apparent rise in the incidence.

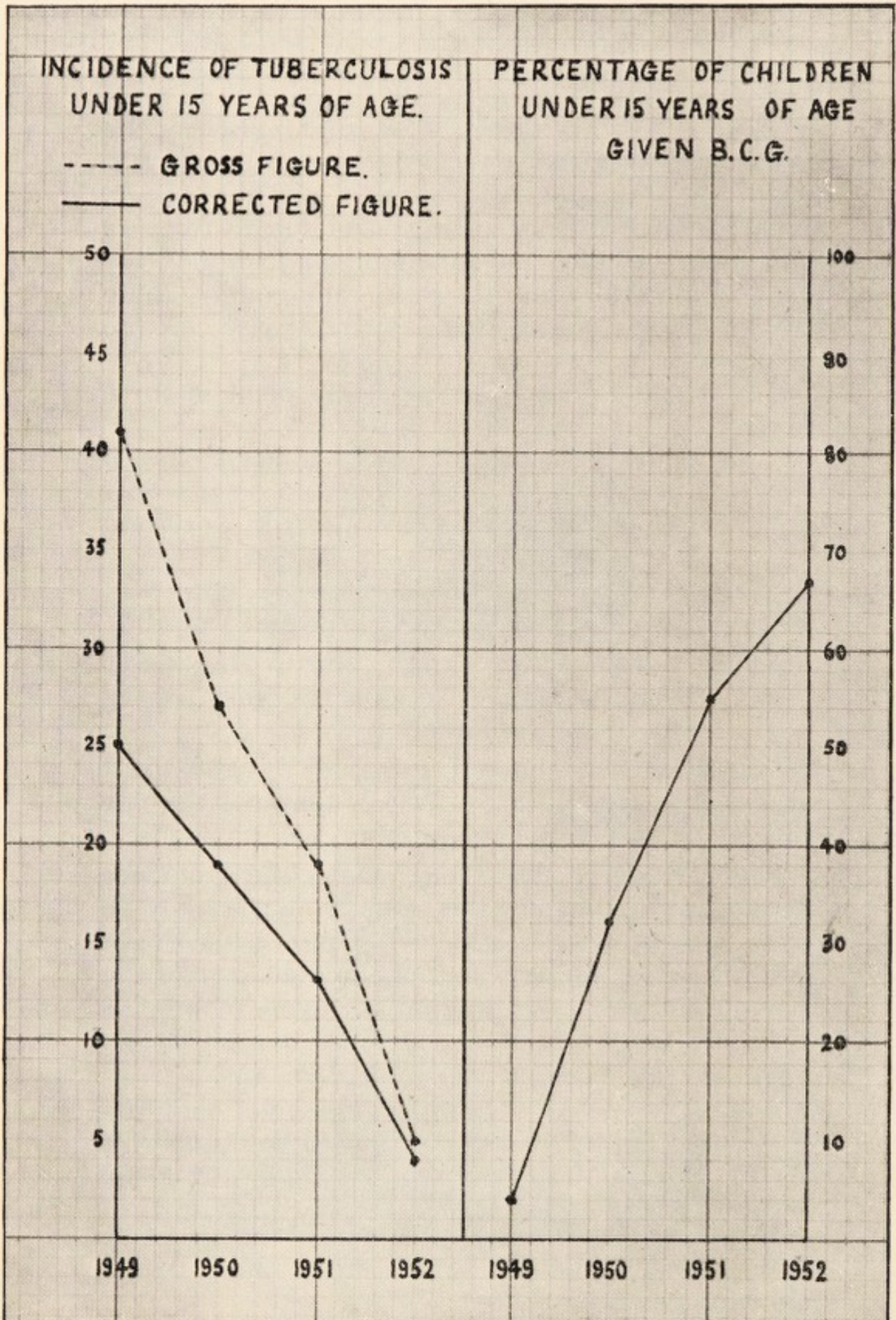
It is hoped to use this new X-ray plant in three ways.

- (1) To increase the number of contacts of each case X-rayed. It is hoped to do not only the home contacts but also the work and leisure contacts.
- (2) To X-ray yearly all between the ages of 15 and 25 who volunteer to have this done.
- (3) To offer a free 70 mm. film to all patients where medical practitioners think there is any reason for having it done.

This will be rendered possible by the great reduction in cost in using 70 mm. film and the ease with which relatively large numbers can be handled.

The fall in the death rate whilst the incidence remains approximately the same is due mainly to recent advances in treatment. There is no doubt that the acute miliary and pneumonic cases have now almost the best prognosis. Even meningitis now recovers. Of three cases in the children's wards at the General Hospital one was a T.B. meningitis and to-day she is alive and well if somewhat deaf. Isoniazid has been added to our armementarium against this disease and is proving most valuable.

The incidence of tuberculosis under the age of 15 on the island has fallen dramatically as shown by the following chart.



B.C.G. vaccination to provide protection against tuberculosis was given for the first time in Jersey in the autumn of 1949 and there is already good reason to think the B.C.G. campaign is showing results. As the autumn of 1953 is to see the opening of a similar campaign in Great Britain and Northern Ireland, this appears to be a good time to review our results in order to encourage our friends on the mainland, if for no other reason.

The campaign began in a small way at the end of 1949 and only moved into top gear during 1950. By the end of 1951 the bulk of the acceptors in the schools had been done and 1951 also saw the start of infant vaccination on a large scale basis. By the end of 1952 nearly 11,000 persons had been tested and the number who had received B.C.G. reached a total of 8,253. The accompanying diagrams show how the percentage vaccinated in each age group has increased from year to year. These percentages given each year do not represent the number of new cases vaccinated in that year but are the totals from the beginning of the campaign. A glance at the diagram for 1952 shows that by the end of that year just over 60% of our under 15's had received B.C.G. The exact percentage of course varies from age group to age group *e.g.*, 75% of 1-2's have been vaccinated compared with only 30% of the 2-3's but the percentage quickly rises again as we move along the age groups towards 15.

This total of 8,253 represents a great deal of exacting and painstaking work. It represents the wholehearted co-operation of many departments, from the Pharmacy at the General Hospital which provided the sterile needles and syringes to the willing help given by all school principals and district nurses. It represents many hours of overtime

ungrudgingly given by the clerical staff of this Department who have done all the work behind the scenes connected with the organisation of innumerable sessions and the keeping of 11,000 individual records.

Fortunately it also represents a very substantial protection against the ravages of tuberculosis and the evidence of that is to be seen in a further study of the yearly diagrams. Along the bottom half of each diagram will be found plotted the new cases of active tuberculosis that occurred in each age group during that year. It will be seen that whereas there were 25 cases under 15 in 1949 and 19 in 1950 there were only 13 in 1951 and only 4 in 1952. Thus as the proportion of children protected has increased so the number of new cases in these age groups has fallen.

The graph given beside the diagrams is based on the results of our tuberculin testings of over 9,900 individuals as a preliminary to the giving of B.C.G. and provides a clear picture of the natural pattern of infection in Jersey. It is compared with figures taken from Table II of the Medical Research Council National Tuberculin Survey, *Lancet* XVI, Vol. 1, 1952, page 779, at age 5, averaged ages 7-8, 9-10, 11-12, and 13-14. About 12% of those infected under the age of 15 will show signs of disease and about 8% of those over 15. From the graph it will be seen that by the time the school-leaving age of 15 is reached, 22% of that age group will have picked up their primary infection. But as soon as school is left behind the rate of infection is more than trebled and in the next 10 years, 51% of the group that left school at 15 will have picked up their primary infection. Thus more than half of our Jersey population receives its first infection in the first 10 years after leaving school. So much for the oft repeated theory that there is no need for B.C.G. if

there is "no T.B. in the family". The vast majority of these new cases of infection occurred outside the family circle, the germ being picked up up at work or at play. All need B.C.G., for all are at risk as soon as they close their front doors behind them.

No wonder then that this 15-25 age group provides us with more new cases of active T.B. each year than any other comparable age group. We have already seen a big reduction in the number of cases under the age of 15, that being the group that is most protected. Within the next 6 years there should be just as great a reduction in the 15-25's. Provided the B.C.G. acceptance rate remains the same as it is to-day, we can expect to have in 1959 not more than 10 new cases of active disease under the age of 25 where normally we would expect 50.

B.C.G. is now well established as a valuable weapon in the fight against tuberculosis but 30% of parents are still not prepared to accept its protection. Some refuse because they think that there is no danger, there being "no T.B. in the family". Others refuse because they doubt whether B.C.G. really does protect.

This report should be sufficient to refute both arguments and we hope that soon we will be able to achieve an acceptance rate of 100%. Not till then will be reaped the fullest possible benefit.

Of course there is no intention of depending on B.C.G. alone to wipe out tuberculosis. Every effort is being made and will be made to diagnose as early as possible and to treat effectively so as to reduce the number of chronic sputum positive cases in the community who are the reservoir of infection in this Island which is free from bovine tuberculosis.

The reservoir of tuberculosis consists largely of males in the 5th and 6th decade of life. They are chronic bi-lateral cases for whom even to-day little can be done. We keep them alive but they remain infectious. The provision of some sort of home for these men would serve two useful purposes.

- (1) It would reduce their danger to the community.
- (2) It would ease the bed situation at Overdale.

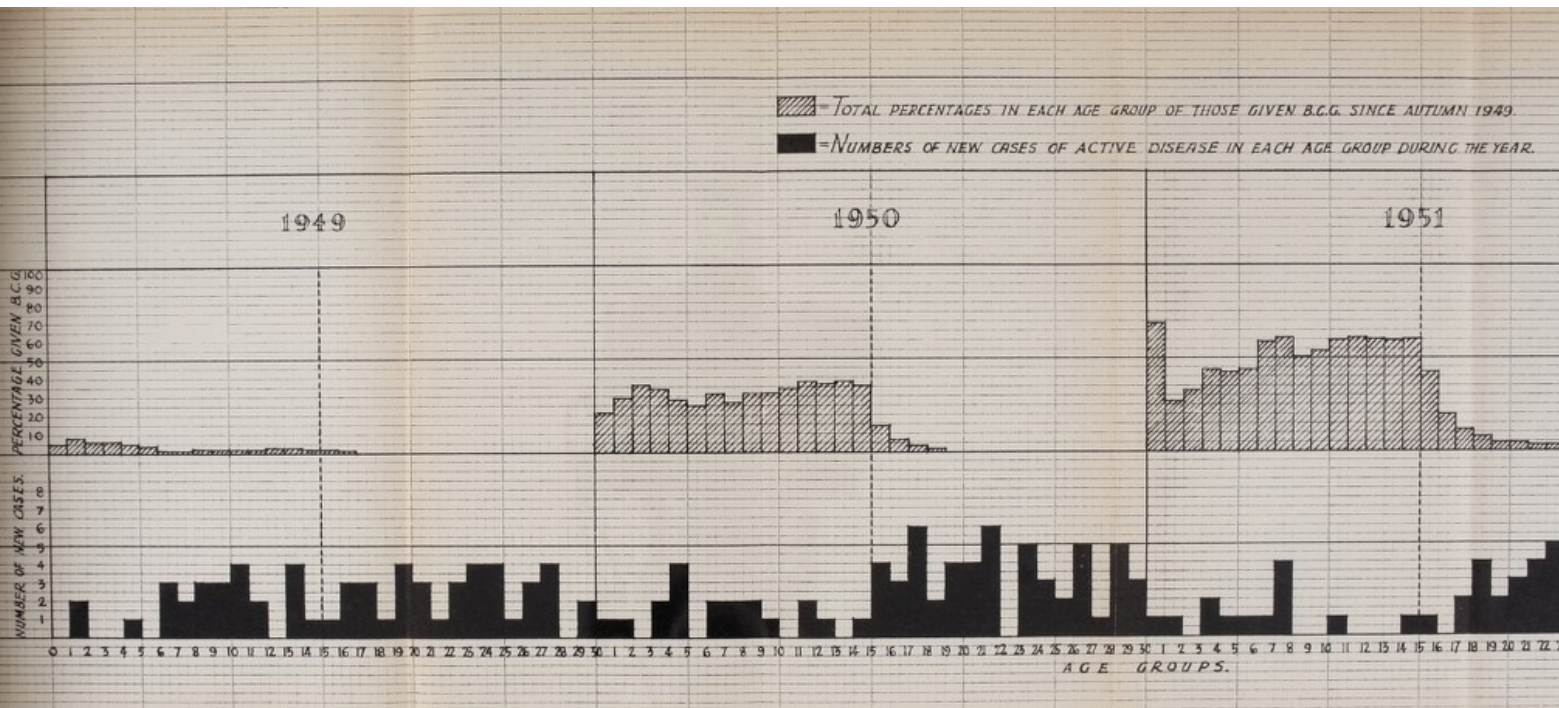
What is wanted is some place where they could live under supervision but with reasonable freedom away from the hospital atmosphere—a sort of boarding house where, if necessary, a lodger could have a few days rest in bed. Serious illness would of course necessitate removal.

At present some of these cases are permanently in Overdale with a consequent irksome restriction on their lives, some are at home under unsuitable conditions. Dealing with the reservoir will be our last and I hope final task.

Here I would repeat that the freedom of the Jersey cow from tuberculosis is not due to any campaign of test and slaughter though that idea is prevalent amongst even experts on the mainland. The Jersey cow has always been free from tuberculosis so any variations in our incidence rate or mortality rates cannot be due to the elimination of bovine tuberculosis.

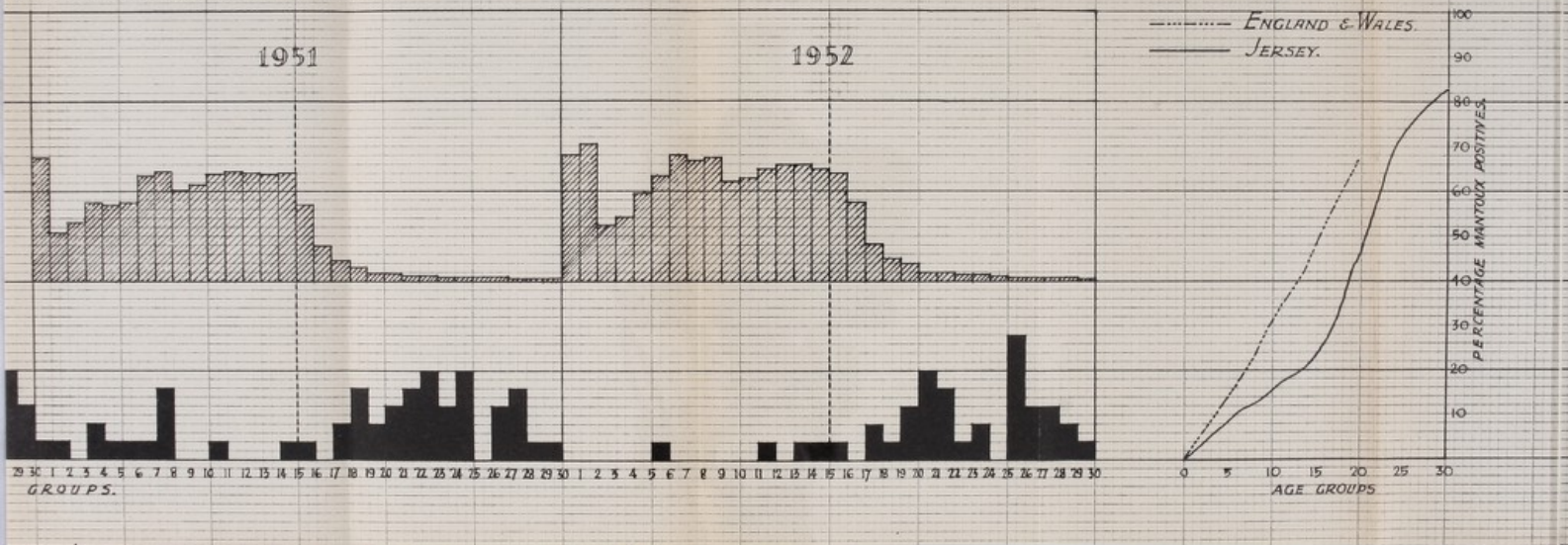
The following quotation from a paper presented to the Jersey Breed Conference in 1949 by Messrs. T. Le Q. Blampied, F.R.C.V.S. and Albert Messervy M.R.C.V.S., is of interest in this respect.

“ In 1834, at a Meeting of the Agricultural Society it was stated that with the help of a States



GROUP OF THOSE GIVEN B.C.G. SINCE AUTUMN 1949.
 THE DISEASE IN EACH AGE GROUP DURING THE YEAR.

GRAPH SHOWING THE PERCENTAGE OF MANTOUX
 POSITIVES IN SUCCESSIVE AGE GROUPS
 UP TO 30 YEARS IN ENGLAND & WALES
 AND IN JERSEY



Grant a regularly educated Veterinary Surgeon had been brought over to the Island at a retainer of £40 per annum.

At a Meeting of the R.J.A. & H.S. in 1892, a letter was read from Mr. Peer of New York giving the impression that "Jerseys on the Island are subject to Tuberculosis". Col. Le Cornu moved that the President be requested to inform Mr. Peer "that Tuberculosis has never been known to exist amongst our stock".

In 1898, in connection with the shipment of cattle to Denmark, the Danish Government sent a Veterinary Surgeon to supervise the tuberculin test. Of 130 cattle tested only one cow re-acted to the test. This animal was destroyed and a post-mortem examination carried out in the presence of Mr. A. Le Sueur, a local Veterinary Surgeon, revealed no tubercular lesions.

The position still holds good and is confirmed by the Tuberculin Test carried out in connection with the export of cattle."

OVERDALE HOSPITAL.

For some years most of the work of Overdale has been with tuberculosis. Owing to the age distribution of the tuberculosis cases and the preponderance of males in the advanced and chronic class there has been a definite tendency for a short waiting list to develop for male cases. We have been able to admit women immediately in all cases but sometimes the admission of men has had to be delayed for as much as 4—6 weeks. To ease matters where ever home conditions and the condition of the patient permitted, domiciliary treatment has been instituted. This has been quite successful but has greatly increased the work of the staff.

In these cases rest in bed and chemotherapy has been carried out. Should artificial pneumothorax or pneumoperitoneum become necessary the patient has been admitted. Consideration was given to the provision of extra beds but this has been at least temporarily ruled out and at the request of the Public Health Committee and very reluctantly on my part, the number of beds for infectious disease was reduced to eight to give more accommodation for tuberculosis.

Infectious beds are there to deal with any epidemic emergency which may arise. Fortunately here, as elsewhere, they tend nowadays to stand empty for long periods. In England many infectious hospitals have been closed or are used for other purposes but some are maintained in every region in spite of the fact that most are less than half full. It is too early to say that we have banished serious epidemics for ever, the risk still exists and to cover this risk with 8 beds is I hope only a temporary measure. The rapid advance in immunisation, antibiotics and chemotherapy may make this a good risk and it may work out satisfactorily.

OVERDALE STATISTICS.

ADMISSIONS :

Infectious disease.....	50	
Pulmonary Tuberculosis.....	97	
Spinal and Pulmonary Tuberculosis..	2	
Spinal Tuberculosis.....	1	
Renal Tuberculosis	1	Total 151

INFECTIOUS DISEASES :

Paratyphoid B.	5	
Scarlet Fever	14	
Varicella.....	7	
Mump	3	
Robella	4	
Cerebro-spinal Fever	1	
Erysipelas	1	
Cases of varied nature sent for observation and investigation.....	15	Total 50

Tuberculosis :

Respiratory Tuberculosis	97	
Other forms	4	Total 101

Deaths :

Pulmonary Tuberculosis	3
Subarachnoid hæmorrhage	1
19 sent to England for thoracic surgery.	
48 respiratory tuberculosis were discharged fit for work after a period of convalescence.	
36 respiratory tuberculosis discharged unfit for work.	

Tuberculosis Out-patient Clinic :

New patients.....	211
Routine examination of out-patients.	620
Artificial pneumothorax and pneumoperitoneum treatments	1,366
Number of patients screened.....	2,197

PARATYPHOID B.

There were only 5 confirmed cases of paratyphoid B. during 1952.

POLIOMYELITIS.

One case was notified, a visitor infected in England and becoming ill in Jersey. There were no indigenous cases.

DIPHTHERIA.

There were no cases of diphtheria during 1952. This is the third year without a case of diphtheria.

Total immunisations including first immunisations and subsequent re-immunisations...	2,487
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The immunisations are carried out by the district nurses and at the infant welfare clinic.

Percentage of school children immunised according to a sample survey of children is given below.

Girls.—500 Medical Record Cards examined :

Immunised	407
Immunised within the last five years.....	230
No record of immunisation.....	93

Boys.—500 Medical Record Cards examined :

Immunised	392
Immunised within the last five years	228
No record of immunisation	108

Percentage immunised—79.9

FOSTER CHILDREN.

The number of children in foster homes has remained fairly stationary during the year. Fewer children have had to be referred to the Child Guidance Clinic for behaviour problems, and their health has been very good.

It remains difficult to keep a check on unregistered foster homes, particularly during the summer months. Children placed in a registered foster home one year are known to have been placed the following year in another foster home, but efforts to find these homes are often fruitless.

Every year a few children become over 14 years old. It is most satisfactory to find that the majority of these children are able to remain in their foster homes, going out to work from them, and staying until they make a home of their own.

The numbers can be summarised as follows :

Total number of foster homes	30
Newly registered	8
Total number of children	65
Boarded out privately	20
" " by Parishes	22
" " by Public Instruction Committee ...	23

New children boarded out during the year	15
Boarded out privately	5
" " by Parishes	5
" " by Public Instruction Committee ...	5
Children ceasing to be foster children	17
Returned to parents	9
Over 14 years old	5
Returned to Institutions	1
Adopted	2
Transfers to new foster homes	4

REPORT ON SCHOOL MEDICAL INSPECTIONS FOR THE YEAR 1952.

During 1952, 2,585 children attending States' schools were medically examined. Of this number 1,971 were at elementary schools, 104 at the Intermediate School and 510 at the two colleges.

A total of 1,769 children were found to have one or more defects requiring treatment or observation, such defects totalling 2,670. As in other years the majority of these defects, 2,133, fell into four main groups.

(1) *Nose & Throat* : 222 cases of tonsils, adenoids or nasal obstruction due to other causes were noted of which just over half were referred for investigation and treatment. The waiting time for tonsillec-
tomies at the General Hospital is now down to a maximum of two months and has been as low as one month.

(2) *Visual Defects* : 357 cases of visual defect were noted of which 39 were suffering from squint. Early in 1952 the new Orthoptic Clinic at the General Hospital came into being under the care of Dr. Harthan, and during the year 97 cases of squint were referred to it. Many of these, of course, were

old cases that had been noted in previous years and for whom no treatment was then available. This clinic fills a long-felt need and has already worked wonders. Even when vision in the affected eye has not been fully restored, the straightening of the crooked eye has had a great effect on the child's morale and this effect alone is in itself sufficient justification for the clinic's existence. Before this clinic's advent the big majority of the cases of squint went untreated. A few found their way to London hospitals but even then the distance prevented them from receiving adequate after treatment. It used to be a melancholy task, recording year by year, the steady deterioration of sight in squinting eyes for which no treatment was available. But that, it is hoped, is now a thing of the past.

Concerning the cases with errors of refraction that are referred to the General Hospital, Dr. Drecourt reports that many children do not wear the glasses prescribed for them. These children seem to prefer being half blind than to seem to spoil their "beauty" by the wearing of glasses. Some, at a distance of six yards, cannot read letters that a normal person can read at ten times the distance but still they will not wear their glasses. This strange preference is not, of course, entirely confined to children, but be that as it may, for the child who must use his or her eyes continually, whether on book, blackboard or film strip, it is a serious matter. Ensuring that glasses prescribed are worn should be the urgent responsibility of all who are in close contact with the child.

(3) *Teeth*: 36% of all children examined during the year were found to have carious teeth. This figure does not take into account those children in whom, though no decayed teeth were present, teeth had either been filled or lost prematurely due to decay. The time available at a medical inspection

would not permit of such a detailed dental survey though it may be possible to do a representative sample at a later date. Using mirror and probe, it is probable that many more decayed teeth would have been noted.

The figure given then, 36%, is not to be regarded as a measure of the total damage done by dental decay but only as a measure of neglect. Neglect to provide an adequate school dental service.

It may be said that much of this decay is in the first teeth and therefore not of much importance. But the saving of first teeth is important—for two good reasons. Firstly, they are needed for mastication—it is not uncommon to find a youngster of six or seven with hardly a tooth left in his head. Secondly, their premature loss has an adverse effect on the positioning of the permanent teeth that are to follow. And even when they are present, it would be difficult to maintain that the presence of ten or twelve rotting stumps in a child's mouth is good for its health. But let the problem of the first teeth pass. At the moment the only hope for their owners lies in extractions. Their permanent teeth are yet to come. By the age of twelve the majority of the permanent teeth will be in position. But our figures show that 25% of our twelve plus age groups have got one or more carious teeth. The average figure actually is 2.8, giving an estimated total of 1,100 permanent teeth in need of treatment in children attending the States' controlled schools, the two colleges being excepted. Again, this figure is not a measure of the damage already done but of neglect to cope with the damage now in the doing. Treatment is needed now but there seems little likelihood of it being provided if we are to judge by the number of fillings—363, in the permanent teeth of adults and children that time allowed the General

Hospital Clinic to do in 1952. Many more dental sessions per week are most urgently required if Jersey children are to have even half a chance compared with their more fortunate opposite numbers on the mainland.

(4) *Flat Feet* : 618 cases were noted under this heading, roughly 25% of all children examined. About half of this number were not really flat but were tending so far in that direction that the exercises ordered for the real cases were ordered for them too. Experience has shown that these borderline cases become truly flat in a short space of time and prevention is better than cure. Regular exercises conscientiously carried out under supervision do much to make the children concerned "feet conscious" and go a long way towards the elimination of those cases that are due to postural faults. There are several different causes of flat feet but defective posture is by far the commonest and fortunately is the most amenable to treatment. What exercises can do, is shown in a comparison of two well-known schools in this Island. In one, exercises are given regularly under supervision and here only 14% have really flat feet. In the other, as far as is known, no attention is paid to the problem and here 23% are really flat.

Much still remains to be done in coping with this problem.

Educationally Subnormal Children : It is much regretted that no progress can be reported in the making of provision for these unfortunate children. The answer to their problem was summed up in last year's report in the words "early diagnosis, proper training and adequate supervision" and it might be as well to consider the problem afresh under those headings.

(1) *Early Diagnosis* : This is essential and should be accomplished at the latest, by the end of the

child's first year at school. Yet it is still the usual thing to find that only the very worst are picked out and referred for examination, and then only at the end of their school career when the task of finding them a suitable job is too much for the powers-that-be. And so they leave school untrained and unfitted for even the simplest work. Some of them are in possession of special talents that might have been exploited to their own and the community's ultimate benefit, but without training these talents are wasted. The co-operation of the Island's school teachers then is vital to success in this first task of early diagnosis.

(2) Proper Training: Once they are diagnosed much can be done to enable these children to become useful citizens. But it requires time and endless patience. It requires specially trained teachers and it needs special equipment. It certainly needs a special school. Special classes in each school would be enough for those whose retardation is slight but there remains a "hard core" whose retardation is gross and for such only a special school will meet the need. There are at least 100 candidates for a special school in Jersey with many more candidates for special tuition in the ordinary schools.

(3) Adequate Supervision: For the true defective supervision is always needed, more for their own sakes than for the sake of others. Defectives are rarely dangerous and should never be classed with those that are mentally ill—the so-called "lunatics" of the old days. In Great Britain and Northern Ireland provision is made in the area of each local authority for the supervision of these cases by the employment of mental health officers. In addition to other duties, these individuals keep an eye on every defective in their area. They help to find them suitable jobs and lodgings. Where necessary, they look after their financial affairs and see that they are not exploited by the unscrupulous. Their help

is especially valuable in the safeguarding of defective girls and women of child-bearing age. Miss Findlay, the Psychiatric Social Worker attached to the General Hospital, in addition to her many other duties, does what she can for them in the limited time at her disposal but there are sufficient numbers of these individuals in Jersey to justify the employment of a whole-time mental health officer.

Every year sees the entrance into Jersey school life of numbers of children who will benefit little or nothing from the ten years that lie in front of them because no provision has been made for their special educational needs. Every year sees the emergence into the battle of life of a like number of adolescents with the most doubtful of futures in front of them. Unfitted to hold their own, they will drift from job to job, and if they are no one's special responsibility they will be exploited by all who care to take advantage of them. A burden to their homes in childhood they will now become a burden to the community for life. There is an answer to their need. One wonders how long they will have to wait for that answer.

Heart Cases : 23 cases of suspected cardiac trouble were referred to Dr. Richard O'Meara, who continues to provide detailed reports on the findings and most helpful guidance as to what the child may or may not do in the way of games and exercises. Without this expert advice many children would be compelled, as a precautionary measure, to adopt the life of a "cardiac cripple" but thanks to his Clinic the chaff can be separated from the grain and only the genuine cases are restricted.

Once again I would like to express my indebtedness to the kindness and co-operation of the many school principals who endure the medical inspections so patiently and to the District Nurses who turn out unfailingly though often at great inconvenience to themselves.

MEDICAL INSPECTIONS 1952.
ELEMENTARY SCHOOLS.

SCHOOL.	Group I		Group II		Group III		Group IV		Group V		Total Exam.	Total Def.	No. Abs.
	Ex.	Def.	Ex.	Def.	Ex.	Def.	Ex.	Def.	Ex.	Def.			
Halkett Place	53	42	31	26	41	27	40	24	4	—	169	119	9
New Street Boys	—	—	17	11	34	17	28	12	2	—	81	40	2
St. Mark's Road	—	—	27	22	6	2	2	1	6	2	41	27	3
La Motte Street	—	—	—	—	27	15	37	25	1	1	65	41	—
St. James St.	24	21	28	23	20	10	—	—	3	—	75	54	5
Brighton Rd. (Girls)...	—	—	35	28	42	30	32	18	14	9	123	85	7
Val Plaisant (Infants)..	45	27	—	—	—	—	—	—	3	1	48	28	—
First Tower	35	28	25	24	19	12	18	12	19	14	116	90	2
Vauxhall Boys	—	—	15	11	17	8	29	14	3	2	64	35	—
Brighton Rd. (Infants).	78	69	—	—	—	—	—	—	—	—	97	85	1
St. Lawrence	19	16	18	14	6	5	—	—	1	1	51	40	3
St. Peter's	26	20	23	18	20	13	16	6	11	3	112	77	4
St. Brelade's (Central).	42	37	28	22	12	7	15	10	22	15	111	82	11
La Moye	34	28	23	11	4	4	—	—	1	1	37	24	2
St. Ouen's	21	20	12	10	13	9	9	5	11	1	66	45	3
Les Landes	30	25	15	10	15	6	—	—	—	—	60	41	5
St. Mary's	6	3	13	9	11	7	4	1	5	4	24	24	2
Trinity	11	8	11	6	6	5	9	4	—	—	37	23	—
St. Martin's	20	15	19	17	25	16	16	7	2	1	82	56	1
St. John's	29	25	21	16	11	4	31	17	1	—	93	62	3
St. Saviour's (Central).	39	33	19	14	7	6	5	3	9	2	79	58	4
St. Luke's	52	48	29	21	14	12	18	12	13	12	126	105	14
Grouville	24	24	26	25	26	17	18	13	4	3	98	82	3
St. Clement's	39	33	14	12	13	11	21	17	14	4	101	77	7
TOTALS	650	533	435	347	389	243	348	201	149	76	1971	1400	91

MEDICAL INSPECTIONS 1952.

ELEMENTARY SCHOOLS.

Number of children examined	1,971
Number of children with defects	1,400
Number of children absent from Inspections	91

GROUP.	Age.	No. examined.	No. with defects.
1.	5—7	650	533
2.	8—9	435	347
3.	11—12	389	243
4.	14—15	348	201
5.	“ special ” (Referred by Head Teachers)	149	76
TOTAL		<u>1,971</u>	<u>1,400</u>

No. of children referred to Dr. Richard O'Meara— Cardiac Clinic	19
No. of children referred to Dr. Harthan—Orthoptic Clinic	94

MEDICAL INSPECTIONS 1952.

STATES INTERMEDIATE SCHOOL : JERSEY COLLEGE FOR GIRLS :
VICTORIA COLLEGE AND PREPARATORY SCHOOL.

STATES INTERMEDIATE SCHOOL :

Number of children examined	104
Number of children with defects	56
Number of children absent from Inspections	2
Number of children referred to Dr. Richard O'Meara —Cardiac Clinic	2

JERSEY COLLEGE FOR GIRLS :

Number of girls examined	226
Number of girls with defects	124
Number of girls absent from Inspection	15
Number of girls referred to Dr. Richard O'Meara— Cardiac Clinic	1
Number of girls referred to Dr. Harthan—Orthoptic Clinic	1

VICTORIA COLLEGE AND PREPARATORY SCHOOL :

Number of boys examined	284
Number of boys with defects	189
Number of boys absent from Inspection	11
Number of boys referred to Dr. Richard O'Meara— Cardiac Clinic	1
Number of boys referred to Dr. Harthan—Orthoptic Clinic	2

MEDICAL INSPECTION.

SUMMARY OF DEFECTS OR DISEASES FOR STATISTICAL PURPOSES
FOR 1952.

	Intermediate School	Girls' College	Victoria College & Prep.
Teeth	25	49	78
Skin	1	1	2
EYES			
Vision.....	14	26	39
Squint	Nil	1	1
Other	1	3	3
EARS			
Hearing	1	1	1
Otitis Media.....	4	Nil	1
Other	3	4	8
<i>Nose and Throat ...</i>	2	9	6
Cervical Glands ...	2	7	2
Heart	2	1	1
Lungs.....	2	1	6
<i>Hernia</i>	Nil	Nil	Nil
Other	Nil	Nil	4
<i>Orthopaedic</i>			
Posture	Nil	6	2
Flat foot	14	56	89
Other	1	12	2
Anæmia	1	Nil	1
Overweight	Nil	1	Nil
TOTALS :	73	178	246

SANITARY INSPECTION.

The valuable and detailed report of the Chief Sanitary Inspector follows this section. The regular routine of this branch, inspecting housing sites, sanitary installations, drains, foodstuffs, kitchens in cafés, ice cream factories, etc., is of the utmost value in preserving the health and well being of the community.

Though there is still too much sub-standard housing there is still great difficulty in re-housing people in condemned property. If re-housing was easier slum property could be removed more rapidly. Of 13 houses condemned during the year 8 were still occupied at the end of the year.

An interesting case arose concerning apples from abroad. A batch of these which had been sprayed with lead arsenate had so much arsenic still on them that analysis gave in many instances figures well above the maximum standard of 1/100 grain per pound.

Though it is improbable that anyone would consume sufficient of these apples to get a poisonous dose it would be a very dangerous precedent to pass foodstuffs with such amounts as a like tolerance would have to be extended to other foodstuffs with disastrous results. The department has taken steps to prevent the sale of such apples in Jersey.

The introduction of milk bottling has passed off without serious complaints and I am satisfied that we are having a cleaner and better milk.

VOLUNTARY SOCIETIES.

The Jersey District Nursing Federation still carries on its invaluable work. Though the Jersey Maternity Hospital now does most of the midwifery the district nurses attended 114 cases in their homes.

Their work as domiciliary nurses has been greatly increased since the introduction of the antibiotics especially penicillin. As this antibiotic must be given by injection in most cases the work falls extensively on the district nurse. They also act as school nurses doing a monthly cleanliness inspection in each school. This had produced a remarkable decline in the number of verminous heads. They carry out the great bulk of our anti-diphtheria immunisations and they help in the B.C.G. campaign. In fact they are invaluable and I do not know what we should do without them.

THE JERSEY MATERNITY AND INFANT WELFARE CENTRE.

This society now runs 11 clinics which are well attended and much appreciated by the mothers. They carry out immunisation and B.C.G. vaccinations. The most valuable work done is in the education of mothers and they can I think take a lot of the credit for the steady reduction in the infant mortality rate.

THE JERSEY SOCIETY FOR THE WELFARE OF THE AGED.

This society has come into existence during the year to help the aged to remain in their own homes by the provision of home helps. It has proved its value. Capable, sympathetic women have been found and many old people have been helped by having the household chores done, meals cooked, business transacted for them, etc. The work is most valuable as it keeps the old people in their homes and out of institutions which however well run do not feel quite the same and are much more expensive. The only trouble is lack of funds.

Once that little detail can be overcome the society should do an extremely valuable work for the community.

CONCLUSION.

I must thank Dr. A. S. Darling for his assistance in writing this report and for his excellent report on the schools. I also thank Mr. L. Hammond, Chief Sanitary Inspector, his staff and all the staff of my office for friendly, wholehearted and ungrudging help at all times.

Final Note : The first States' Veterinary Surgeon was appointed in 1834 ; the first Medical Officer of Health in 1887.

R. N. MCKINSTRY,
*Medical Officer of Health,
States of Jersey.*

STATE OF NEW YORK

IN SENATE

January 1, 1901.

REPORT

OF THE

COMMISSIONERS OF THE LAND OFFICE

IN ANSWER TO A RESOLUTION PASSED BY THE SENATE

APRIL 18, 1899.

ALBANY:

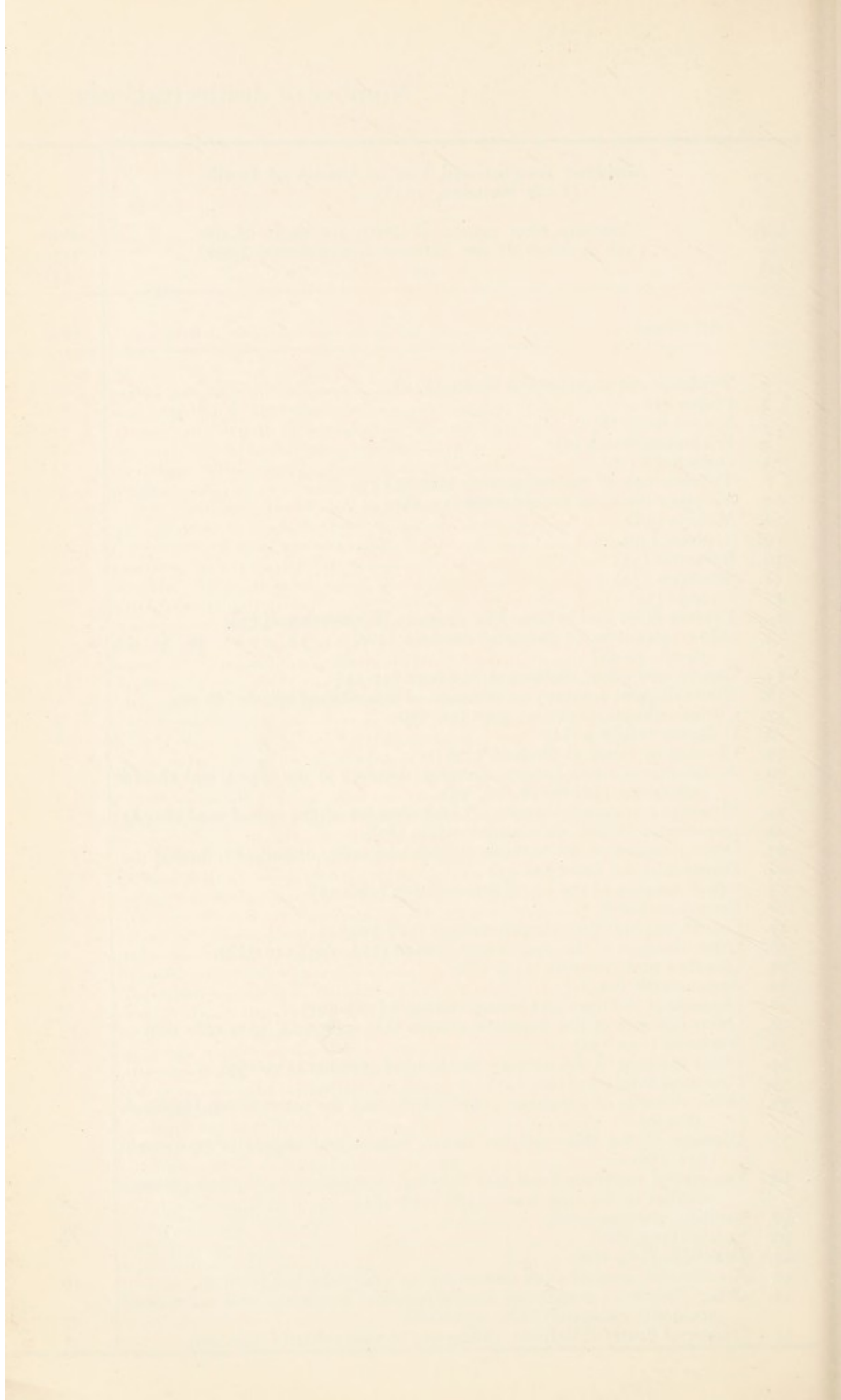
ANDREW CLARK, STATE PRINTER,

1901.

TABLE II.

Number of deaths (exclusive of stillbirths) by cause and sex : latest available years, 1948 to 1952.

List No. (1)	Abridged International List of Causes of Death, (Fifth Revision, 1938).			1948			1949			1950			1951			1952		
	(Numbers after causes of death are those of the 1938 revision of the detailed International List.) (2)	Both sexes (3)	Male (4)	Female (5)	Both sexes (6)	Male (7)	Female (8)	Both sexes (9)	Male (10)	Female (11)	Both sexes (12)	Male (13)	Female (14)	Both sexes (15)	Male (16)	Female (17)		
	All causes	664	330	334	693	347	346	670	322	348	686	359	327	667	341	326		
1.	Typhoid and paratyphoid fevers (1, 2).....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
2.	Plague (3)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
3.	Scarlet fever (8)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
4.	Whooping cough (9)	1	—	1	—	—	—	—	—	—	1	1	—	—	—	—		
5.	Diphtheria (10).....	3	1	2	—	—	—	—	—	—	—	—	—	—	—	—		
6.	Tuberculosis of the respiratory system (13).....	39	24	15	30	16	14	19	13	6	19	13	6	13	8	5		
7.	All other forms of tuberculosis (14-22).....	1	—	1	—	—	—	—	—	—	3	1	2	2	1	1		
8.	Malaria (28)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
9.	Syphilis (30)	—	—	—	1	1	—	2	2	—	1	—	—	1	1	—		
10.	Influenza (33)	1	—	1	4	1	3	1	—	1	8	4	4	1	1	—		
11.	Smallpox (34)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
12.	Measles (35)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
13.	Typhus fever and typhus-like diseases [Rickettsioses] (39)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
14.	Other infections or parasitic diseases (4-7, 11, 12, 23-27, 29, 31, 32, 36-38, 40-44)	7	2	5	6	4	2	5	2	3	2	1	1	4	1	3		
15.	Cancer and other malignant tumours (45-55).....	121	61	60	108	55	53	129	55	74	138	73	65	138	62	76		
16.	Nonmalignant tumours or tumours of unspecified nature (56,57).....	1	1	—	—	—	—	—	—	—	—	—	—	1	—	1		
17.	Chronic rheumatism and gout (59, 60).....	2	1	1	—	—	—	2	—	—	2	2	2	2	2	—		
18.	Diabetes mellitus (61).....	6	3	3	4	2	2	4	1	3	4	2	2	4	—	4		
19.	Chronic or acute alcoholism (77)	—	—	—	—	—	—	—	—	—	5	2	3	2	1	1		
20.	Avitaminoses, other general diseases, diseases of the blood, and chronic poisonings (58, 62-76, 78, 79).....	9	4	5	4	2	2	7	3	4	8	3	5	9	1	8		
21.	Meningitis (nonmeningococcal) and diseases of the spinal cord (81, 82)	—	—	—	1	1	—	—	—	—	1	1	—	3	—	3		
22.	Intracranial lesions of vascular origin (83)	78	24	54	110	44	66	102	39	63	85	34	51	84	39	45		
23.	Other diseases of the nervous system and sense organs (80, 84-89).....	9	3	6	9	3	6	6	1	5	11	2	9	10	7	3		
24.	Diseases of the heart (90-95)	136	75	61	171	88	83	146	74	72	149	83	66	140	67	73		
25.	Other diseases of the circulatory system (96-103)	24	14	10	20	11	9	10	5	5	12	10	2	21	13	8		
26.	Bronchitis (106).....	24	13	11	16	10	6	18	11	7	20	13	7	27	14	13		
27.	Pneumonia and bronchopneumonia (107-109).....	37	21	16	46	16	30	41	22	19	42	25	17	29	15	14		
28.	Other diseases of the respiratory system (104, 105, 110-114).....	9	5	4	22	13	9	10	3	7	19	10	9	14	11	3		
29.	Diarrhea and enteritis (119, 120)	2	1	1	1	—	1	—	—	—	1	—	1	2	1	1		
30.	Appendicitis (121)	1	1	—	1	—	1	—	—	—	1	1	—	3	—	3		
31.	Diseases of the liver and biliary passages (124-127).....	5	3	2	8	3	5	5	4	1	8	2	6	10	8	2		
32.	Other diseases of the digestive system (115-118, 122, 123, 128, 129)	13	8	5	18	12	6	11	5	6	14	9	5	17	10	7		
33.	Nephritis (130-132)	15	8	7	12	6	6	26	13	13	18	13	5	16	8	8		
34.	Other diseases of the urinary and genital systems (133-139).....	9	7	2	2	1	1	11	10	1	5	2	3	13	12	1		
35.	Puerperal infection (140, 147).....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
36.	Other diseases of pregnancy, childbirth, and the puerperium (141-146, 148-150)	1	—	1	2	—	2	3	—	3	1	—	1	1	—	1		
37.	Diseases of the skin, cellular tissue, bones, and organs of movement (151-156).....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
38.	Congenital malformations and debility, premature birth, and diseases peculiar to the first year of life (157-161)	16	5	11	16	10	6	16	10	6	25	16	9	15	9	6		
39.	Senility, old age (162).....	49	15	34	43	18	25	51	15	36	60	20	40	45	15	30		
40.	Suicide (163, 164).....	7	5	2	11	9	2	11	10	1	8	6	2	18	17	1		
41.	Homicide (165-168).....	—	—	—	—	—	—	1	—	1	—	—	—	—	—	—		
42.	Automobile accidents (all motor-driven road vehicles) (170).....	10	7	3	13	12	1	10	7	3	6	3	3	8	7	1		
43.	Other violent or accidental deaths (suicide, homicide, and automobile accidents excepted) (169, 171-198).....	27	17	10	12	9	3	20	15	5	12	9	3	17	10	7		
44.	Causes of death ill-defined, unknown, or unspecified (199, 200).....	1	1	—	2	—	2	3	2	1	—	—	—	—	—	—		



ANNUAL REPORT OF THE CHIEF SANITARY INSPECTOR.

PUBLIC HEALTH DEPARTMENT,
SOUTH HILL,
JERSEY.
March, 1953.

*To the President and Members of the
States' Public Health Committee.*

I have the honour to submit my twenty-ninth Annual Report, for the year 1952, on the various works, improvements, water supply, (wells, springs and rain water), housing, Licensed Premises, cafés, restaurants, building sites, plan approvals for all types of buildings, alterations etc., food supply, clean milk production, Rodent Control, disinfections etc.

GENERAL SUMMARY OF INSPECTIONS, Etc.

Total number of inspections, re-inspections and miscellaneous visits	4,684
Inspections and re-inspections of dwelling houses	2,160
Inspections in response to requests for advice	665
Inspections in connection with complaints	495
Inspections in connection with infectious diseases	32
Inspections of premises where food is prepared or exposed for sale (restaurants, cafés, tea rooms, etc.)	201
Inspections of fried fish shops	3
Inspections of wet fish shops	7
Inspections at request of Department of Essential Commodities (Food Control Section).....	40
Inspections in connection with unsound food	119
Inspections of Licensed premises	166

Inspections of boarding houses	62
Inspections in connection with " Law on Public Health, 1934 "	1,403
Inspections of proposed housing sites	388
Inspection of housing estates	27
Inspections of sites for garages, greenhouses, etc.	138
Inspections in connection with " Loi sur la Protection de l'Enfance "	17
Inspections of dairy farms, dairies and milk shops	154
Inspections of milk delivery vans	4
Inspections of workshops, workrooms, etc.	118
Inspections in connection with " Licensing Law, 1950 " ...	26
Inspections of shops.....	179
Inspections of Institutions and Church Halls	57
Inspections of Nursing Homes	1
Inspections of schools	21
Inspections of canning factory	6
Inspections of Cinemas and site for Cinema.....	7
Inspections of moveable dwellings.....	43
Inspections of Holiday Camps and camping sites	17
Inspections of butchers' shops	13
Inspections of Meat Market	3
Inspections of piggeries	1
Inspections of ice-cream premises	13
Inspections of ice-cream vehicles	23
Inspections of bakehouses	21
Inspections of Airport	3
Inspections of brooks, streams, etc.....	25
Inspections of rubbish dumps.....	15
Inspections of Battle of Flowers site	3
Inspections with Sub-Committee members	7
Inspections with Medical Officer of Health	79
Inspections with Officials of Engineer's Department	7
Visits to supervise works in progress.....	887
Inspections in connection with laying of sewer.....	144
Appointments and interviews.....	1,593
Letters written	326
Smoke and water tests.....	592
Preliminary notices served	89
Callers for advice	2,448
Callers re complaints	426
Telephone callers	1,650
Reports to Food Control.....	65
Unsound food certificates issued.....	607
Reports in connection with Licensing Law, 1950.....	6

Certificates issued in connection with Licensing Law.....	19
Permits granted under the "Loi sur la Protection de l'Enfance".....	9
Detailed reports submitted to Public Health Committee...	63
Detailed reports submitted	20
Reports to Committee re plans	65
Committee meetings attended	45
Sub-Committee meetings attended.....	33
Samples of ice-cream collected for bacteriological examination	33
Samples of ice-cream collected for chemical analysis	32
Attendances at Police Court	3
Attendances at Royal Court	1
Attendances at Inquest	1

WATER SUPPLY.

Samples taken for chemical analysis	122
Chemical samples which were not satisfactory.....	76
Samples taken for bacteriological examination.....	127
Bacteriological samples which were not satisfactory.....	62
Number of samples which were satisfactory chemically, but not bacteriologically	9
Number of samples which were satisfactory bacteriologically but not chemically	27
Number of wells dealt with.....	82
Number of springs dealt with.....	13
Number of rain water cisterns dealt with.....	7
Number of samples which contained lead in solution.....	17
Wells cleansed, cemented and protected	13
Rain water cisterns cleansed	6
Wells condemned	7
Rain water cisterns condemned	9
Lead pipes and pumps removed from wells.....	10
Waterworks supply in place of well or rain water.....	4
Chlorination plants installed	1
Storage tanks cleansed and/or treated.....	4
Number of pumps fitted to wells.....	1

Provision of a chlorination plant at a closed Catering Establishment was required under conditions of rescindment of the Closure Order. Checks on its efficiency to ensure a satisfactory water supply were carried out during the year 1952.

IMPROVEMENTS TO DWELLING HOUSES.

Houses provided with new sanitary facilities.....	44
Farmhouses provided with new sanitary facilities	14
Houses supplied with Waterworks service.....	3
Number of houses reconditioned.....	2
Improvements to dwelling houses such as cleansing, distempering, plastering, new windows, doors, additions etc.	18
Number of verminous houses disinfested or cleansed.....	104
Overcrowding abated	2

DISINFECTIONS, DISINFESTATIONS, ETC.

Number of rooms disinfected for infectious diseases	139
Number of farms disinfected for Foot and Mouth disease	6
Number of bundles of bedding and clothing disinfected...	178
Number of mattresses disinfected	144
Number of rooms disinfested (bugs, fleas, etc)	405

DETAILS OF DWELLING HOUSES WHICH HAVE
UPON REPORT BEEN CONDEMNED AND CLOSED BY
ACT OF THE PUBLIC HEALTH COMMITTEE AS
BEING UNFIT FOR HUMAN HABITATION.

Number of Houses Condemned.	Position.	Date of Report.	Result of Action taken.
1	100A, St. Saviour's Road, St. Helier.	30.1.52	Vacated.
1	Ricardo Bungalow, Green Island, St. Clement.	15.2.52	Vacated.
1	4, Bagot Manor Cot- tages, St. Saviour.	13.3.52	Still occupied 31.12.52.
1	Basement Flat, 7, Nelson Street, St. Helier.	16.4.52	Still occupied 31.12.52.
1	Hillside Cottage, Ville Emphrie, St. Law- rence.	30.5.52	Vacated and demolished.
1	Former Jesuit Bathing Chalet, Samarès Coast Road, St. Clement.	26.7.52	Vacated.
1	Marguerita, George- town Park Estate, St. Clement.	12.8.52	Still occupied 31.12.52.
1	Petit Menage, St. Peter's Valley.	23.8.52	Still occupied.
1	Greenbanks Cottage, St. Peter.	12.9.52	Still occupied.
1	The Cottage, Creux Baillot, St. Ouen.	21.11.52	Still occupied.

Number of Houses Condemned.	Position.	Date of Report.	Result of Action taken.
1	Shed adjoining Glen Cottage, near Delafield Hotel, First Tower, St. Helier.	1.12.52	Vacated.
1	2, Montague Cottages, Common Lane, St. Helier.	4.12.52	Still occupied 31.12.52.
1	West View, Léoville, St. Ouen.	12.12.52	Still occupied.

Total number of houses condemned..... 13

Detailed lists of tenants have been forwarded to the Housing Committee for their consideration for re-housing when accommodation becomes available.

It is of interest to note that between the years 1923—1952, four hundred and seventeen houses have been condemned and closed by Act of the Public Health Committee, a great majority of which have been demolished.

CLOSING ORDER RESCINDED, PROPERTY BEING COMPLETELY RE-CONDITIONED.

Number of Houses.	Position.	Closing Order.	Rescinded.
1	Hillside Cottage, New St. John's Road, St. Helier.	3.4.50	26.1.52

SUMMARY OF WORK IN CONNECTION WITH THE
LAW ON PUBLIC HEALTH, 1934, AND AMENDMENT
1948.

Seven hundred and ninety-seven plans were submitted for examination, and out of these, seven hundred and fifty-four were approved.

The following table gives a description of the plans approved:—

Number of houses	197
Number of bungalows	96
Number of flats.....	35
Number of alterations and additions to dwellings...	235
Number of miscellaneous repairs to buildings.....	112
Number of shops	8
Number of garages, greenhouses, etc.....	285
Number of offices.....	5
Number of bakehouses	1
Number of classrooms	3
Number of chalets	1
Number of dairy premises	1

Eighteen plans were on report rejected by the Committee as being unsatisfactory.

One hundred and forty-one dwelling houses, bungalows, flats, etc., were to be newly connected directly or indirectly to the main sewers and one hundred and forty were to be drained to modified sewage disposal plants.

Arising from the above, sixty-eight new properties were connected to the sewer, eleven existing properties were re-connected, eighty-three new properties and sixteen existing properties were drained to modified sewage disposal plants.

It should perhaps be emphasised that this table does not relate to any work done other than by plan submitted under the Law on Public Health.

LICENSED PREMISES.

The following table gives details of inspections and improvements effected to these premises.

1. Number of premises dealt with.....	18
2. Inspections and re-inspections	24
3. Interviews with owners' representatives	4
4. Additional ladies W.Cs provided	4
5. Additional gents W.Cs provided	1
6. New urinals provided.....	1
7. New drainage provided	2
8. Improved ventilation to sanitary accommodation	1
9. Screening of sanitary conveniences	1
10. New sewer services provided.....	1
11. New bar sinks provided	3
12. New bar sinks fitted with hot water supply...	6
13. Water supply connected to bar sink.....	6
14. Wash basins provided.....	2
15. New staff sanitary accommodation provided...	1

RESTAURANTS, CAFÉS, SNACK BARS, Etc.

Periodical routine inspections were carried out, and the work of improvement continues, particularly on poorer premises.

New premises were brought up to standard before being recommended to Food Control (E.C.C.) for issue of catering licence. These premises were issued with Clean Food Plaques, Posters and Notes.

FOOD SAMPLES.

Seven hundred samples of food were taken under the provision of the "Loi touchant la Falsification des Denrées".

Nature of Sample.	Number of samples Taken.	Genuine.	Remarks.
Milk	484	435	49 samples either contained extraneous water, showed fat deficiency or were suspicious.
Butter	7	7	—
Flour	4	4	—
Liver Oil	10	7	3 samples unsatisfactory. Investigated by Medical Officer of Health.
Vinegar	3	3	—
Jam	4	4	—
Condensed Milk ...	1	1	—
Vitamin B.1	1	1	—
Vitamin B.12	1	1	—
Ice Cream	43	43	—
Water Ice	1	1	—
Cake Mixture... ..	3	3	—
Adexolin... ..	1	1	—
Jersey Cream... ..	1	1	—
Honey	1	1	—
Chocolate Blanc-mange Powder ...	1	1	—
Parish's Food... ..	2	2	—
Chlorodyne	3	3	—
Sardines	3	3	—
Tomato Ketchup ...	2	2	—
Jersey Tomatoes ...	1	1	—
Orange Juice	3	3	—
Spa 66	1	—	Unsatisfactory. Investigated by Medical Officer of Health.

Nature of Sample.	Number of Samples Taken	Genuine.	Remarks.
Lemonade Crystals..	1	1	—
Lemonade Powder...	1	1	—
Paprika	1	1	—
Chips	3	3	—
Tincture of Iodine...	10	7	3 samples unsatisfactory. Investigated by Medical Officer of Health.
Compound Liqueurice Powder ...	2	2	—
Dried Mint	2	2	—
Dried Thyme... ..	1	1	—
Dried Sage	1	1	—
Dried Mixed Herbs..	1	1	—
Cod Liver Oil and Malt	2	2	—
Travel Sickness Tablets	4	4	—
Scott's Emulsion ...	1	1	—
Cod Liver Oil Emulsion	1	1	—
Ground Almonds ...	7	7	—
Desiccated Coconut.	1	1	—
Sago	2	2	—
Ice Cream Powder...	1	1	—
Ground Rice	2	2	—
Cornflour	1	1	—
Malt Vinegar	5	5	—
Olive Oil... ..	3	3	—
Tinned Bone and Vegetable Broth...	1	1	—
Tinned Apple and Blackcurrant juice	1	1	—
Tinned Chicken Broth	1	1	—
Tinned Custard Pudding	1	1	—
Tinned Beef Broth...	1	1	—

Nature of Sample.	Number of Samples Taken.	Genuine.	Remarks.
Tinned Apple, Prune and Custard ...	1	1	—
Nasal Compound ...	1	1	—
Golden Tonic ...	1	1	—
Coffee Essence ...	2	2	—
Milton	1	1	—
Apples	12	5	7 samples unsatisfactory.
Pork Sausages ...	2	2	—
Beef Sausages... ..	1	1	—
Aspirins	3	3	—
Bicarbonate of Soda	2	2	—
Veganin	1	1	—
Mustard	1	1	—
Cocoa	2	2	—
Baking Powder ...	3	3	—
Coffee and Chicory Essence	2	2	—
Curry Powder ...	1	1	—
Pepper Flavour Compound... ..	1	1	—
Ground Ginger ...	1	1	—
Epsom Salts	2	2	—
Glauber Salts... ..	2	1	1 sample unsatisfactory. Investigated by Medical Officer of Health.
Castor Oil	2	2	—
Camphorated Oil ...	2	2	—
Seidlitz Powder ...	2	2	—
Boric Acid	2	2	—
Eucalyptus Oil ...	2	1	1 sample unsatisfactory. Investigated by Medical Officer of Health.
Calcium Lactate ...	2	2	—
Cream of Tartar ...	2	2	—
Ammon. Tincture of Quinine	2	2	—
Borax	2	2	—
Mixed Spice	1	1	—
	700	635	

MILK SUPPLY AND SAMPLING.

All milk containing extraneous water, showing poorness in fat, and those which were suspicious were investigated.

APPLES.

During December samples taken from a consignment of Italian apples revealed that a proportion of the consignment had excessive amounts of lead arsenate as a result of spraying.

Distribution of these apples was stopped, and further action took place during the current year.

ICE CREAM, ICES, WATER ICES (CONTROL) (JERSEY) REGULATIONS, 1951.

During the year 1952, registration of itinerant retailers and manufacturers was carried out and routine sampling continued.

Eleven motor vehicles, two trailers, two tricycles and one handcart were inspected and permits granted in respect of them, after various requirements had been effected. Where washing facilities were not provided, the condition of wrapped sales only was imposed. These retailers were re-inspected in operation during the summer.

Five manufacturers' licences were recommended, three for water ices. All these manufacturers supplied and sold from their own premises only.

Ice cream in general distribution to the public continued to consist of three main products, manufactured in England.

32 samples for fat content were taken. One sample was below local prescribed standards but well above that obtaining on the mainland at the relevant time.

33 samples for methylene blue reductase test were taken, all but three being satisfactory. One sample of water ice was examined.

The undermentioned goods were condemned as being unfit for human consumption and destroyed:—

MEATS.

Tinned Ham—3,456 tins (129 cwt.); Luncheon Meats—954 tins (8 cwt.); Lunch tongues—300 tins (9 cwt.); Jellied Veal—137 tins (6 cwt.); Ox Tongues—72 tins (259 lbs.); Stewed Steak—92 tins (92 lbs.); Sausages—80 tins (80 lbs.); Liver Sausages—26 lbs.; Pork Kidney—9 tins (8½ lbs.); Braised Kidney—9 tins (9 lbs.); Steak and Kidney Pudding—21 tins

(21 lbs.); Chopped Kidney—1 tin (12 ozs.); Pork and Lentils—5 tins (3½ lbs.); Veal, Ham and Beef—1 tin (4½ lbs.); Veal, Pork and Ham—1 tin (4 lbs.); Veal, Pork and Beef—1 tin (4 lbs.); Minced Beef Loaf—10 tins (7½ lbs.); Pork Chops—1 tin (9 ozs.); Chicken Cutlets—1 gross box (32 lbs.); Chicken in Jelly—2 tins (2 lbs.); Chicken—1 (2¼ lbs.); Goose—1 (6 lbs.); Bacon—44½ lbs.; Skinned Rabbits—26 lbs.; Mincedmeat—2 tins (2 lbs.); Braised Hearts—2 tins (1½ lbs.); Tripes—6 tins (3 lbs.); Brawn—43 tins (48 lbs.); Irish Stew—15 tins (15 lbs.); Pastes—523 jars (255 lbs.); Soups—13 tins (10¾ lbs.).

VEGETABLES.

Mixed Vegetables—8 tins (9½ lbs.); Spaghetti—1 tin (8 ozs.); Tomatoes—19 tins (38 lbs.); Asparagus Spears—2 tins (2 lbs.); Macedoine Vegetable—8 tins (20 lbs.); Peas—41 tins (48½ lbs.); Beans—94 tins (96 lbs.); Carrots—15 tins (30 lbs.).

FRUIT.

Pineapple in Syrup—81 tins (101 lbs.); Pineapple Preserve—89 tins (89 lbs.); Pineapple Cubes—223 tins (278 lbs.); Pineapple Chunk—6 tins (11½ lbs.); Pineapple Slices—105 tins (129 lbs.); Orange Preserve—72 tins (72 lbs.); Apples—23 tins (40 lbs.); Cherries—117 tins (265 lbs.); Peaches—247 tins (380½ lbs.); Peach pulp—59 tins (663 lbs.); Apricot Pulp—153 tins (16 cwt.); Dried Apricots—1 box (27½ lbs.); Apricot in Syrup—143 tins (304 lbs.); Prunes—202 tins (189 lbs.); Plums—227 tins (471 lbs.); Pears—266 tins (548 lbs.); Strawberries—4 tins (8 lbs.); Raspberries—3 tins (5 lbs.); Gooseberries—1 tin (10 ozs.); Rhubarb—2 tins (4 lbs.); Grape Fruit Segments—3 tins (134 lbs.); Greengages—7 tins (14 lbs.); Fruit Salad—6 tins (7 lbs.); Gooseberry Jam—138 tins (138 lbs.); Marmalade—5 tins (12 lbs.); Sweet Corn—1 tin (2 lbs.).

FISH

Pilchards—4 tins (2½ lbs.); Rock Lobster—24 tins (21½ lbs.); Rock Lobster Tails—2 boxes (20 lbs.); Sardines—118 tins (59 lbs.); Salmon—17 tins (7 lbs.); Smoked Cod Fillets—31 stone; Smoked Haddock Fillets—6 stone; Tunny Fish—2 tins (1½ lbs.); Mullet—1 box (80 lbs.); Crab—2 boxes (101 lbs.) and 5 tins (4½ lbs.); Hard Herring Roes—1 tin (8 ozs.); Herrings in Tomatoes—85 tins (76 lbs.);

MISCELLANEOUS ARTICLES.

Milk—146 tins (292 pts.); Sugar 3 cwt.; Butter—14 lbs.; Ginger Snaps—5 tins (44 lbs.); Milk Whipping Compound—27 cases (3 cwt. 1 qtr.); Chocolate—18 lbs.; Toffee—2 ozs.;

Lyle's Syrup—9 tins (17 lbs.); Fowler's Treacle—1 tin (2 lbs.); Salad Cream—270 bottles (84½ lbs.); Xmas Pudding—1 tin (1 lb.); Baby Foods—1,160 tins (1 cwt. 3 qtrs. 3 lbs.); Sponge Cake and Pudding Mixture—480 tins (240 lbs.); Cereals—48 packets (24 lbs.); Sandwich Spread—240 bottles (60 lbs.); Frozen Eggs—11 tins (242 lbs.).

The total amount of all foods condemned was 11 tons 13 cwt. 1 qtr. 14 lbs. and 36½ gallons liquid.

PRODUCTION OF CLEAN MILK.

METHYLENE BLUE REDUCTASE TEST.

Total number of samples taken 1,730

One thousand five hundred and two samples of morning milk were taken from farmers cans at the collecting depots and examined on day of receipt. One thousand three hundred or approximately 87.8% were satisfactory, one hundred and seventeen or approximately 7.7% were fair and sixty-five or approximately 4.5% were unsatisfactory. These figures indicate that the improvement during the previous year is being maintained.

Nine samples were taken from farmers cans at the collecting depots and examined after keeping for twelve hours. None of these samples were satisfactory, one or approximately 11% was fair and eight or approximately 89% were unsatisfactory. These samples were taken in July during warm weather and kept at atmospheric temperature before being examined.

One hundred and sixty-two samples were taken from farmers at the collecting depots and examined after being kept at atmospheric shade temperature for twenty-four hours. One or approximately 0.6% was satisfactory, three or approximately 1.9% were fair and one hundred and fifty-eight or approximately 97.5% were unsatisfactory. These samples were taken during the warm months of July and August in order to find out the keeping quality of raw milk under the worst conditions.

Fifty-six samples were taken from roundsmen and milk shops all of which proved to be satisfactory. This indicates a considerable improvement on the previous two years.

PHOSPHATASE TEST.

This test is used to indicate the efficiency of pasteurisation with the following results.

One hundred and forty samples were taken at all stages from dairy to consumer and one hundred and twenty-one or approximately 86.4% were satisfactory, four or approximately 2.9% were fair and fifteen or approximately 10.7% were unsatisfactory. The unsatisfactory samples were taken whilst changes were taking place in the dairies due to the installation of bottling plants and the results would not normally be so high.

TUSTMUN SEDIMENT TEST.

One thousand one hundred and two samples were examined by this method for macroscopic examination for extraneous matter.

One thousand and sixty-five or approximately 96.6% were satisfactory and thirty-seven or approximately 3.4% were fair.

MILK BOTTLE STERILITY TEST.

After the introduction of bottling of milk, the above test was carried out at the dairies and all results were satisfactory.

Farm inspections and re-inspections.....	246
Visits to dairies during pasteurisation	433
Visits to milk shops	375
Interviews	641
Complaints	24
Visits to bacteriological laboratory.....	365
Visits to analysts laboratory	279
Interviews with milk roundsmen and inspections of delivery vans.....	405
New cowsheds erected.....	2
New dairies erected	2
Existing cowsheds re-constructed	4
New pigsties erected.....	8

HOLIDAY CAMPS.

Periodical inspections were made of the Holiday Camps during the season and the conditions were found to be generally satisfactory.

GENERAL IMPROVEMENTS TABLE.

The undermentioned figures are the result of complaints received and requests for advice on existing properties.

New connections to sewer	29
Renewed connections to sewer	83
Drainage systems remodelled	152
Modified sewage disposal plants installed.....	41
Soakaways built.....	27
Drains unchoked	47
Foul soakaways or cesspools abolished	20
Brick drains abolished	15
Old drains abolished.....	77
Obsolete or defective drainage fittings replaced.....	51
Private sewers re-built.....	6
PLUMBING WORK.	
New baths installed	60
New sinks installed	74
New wash-hand basins installed.....	95
New urinals installed	1
IMPROVEMENTS TO SANITARY CONVENIENCES.	
New water closets constructed.....	116
Foul privies and closets abolished	26
Miscellaneous nuisances abated	87
Drainage examinations.....	7

DRAINAGE.

The work of examining and smoke testing existing private drainage systems in conjunction with the renewal or construction of public sewers continued on a large scale.

Aquila Road, Byron Road, Clarendon Road, Journeaux Street, Palmyra Road, St. Aubin's Road (Rue de Galet westwards), St. Saviour's Road, and Val Plaisant were the major thoroughfares involved, while few were the streets which did not see individual house drains receiving attention.

The variety of defects found during this work are without number, and the attention required varies from complete renewal to minor alterations. Such variation compels individual decisions regarding each property, but every effort is made to achieve a satisfactory overall standard of drainage in a consistent, reasonable and economical manner.

The importance of this work can best be emphasised by bringing to mind the fact that the mileage of house drainage is vastly more extensive than that of public sewers, and the repair or renewal of the former must necessarily be complementary to the latter to achieve an all round improvement in the drainage system.

CESSPOOL EMPTIERS.

One thousand, six hundred and nineteen septic tanks, soak-aways, etc.,—a total of two thousand, nine hundred and twenty-two loads—were emptied by the cesspool emptiers.

RODENT CONTROL OPERATIONS.

Free assistance is given to owners and occupiers of property or land for the eradication of the rat and mouse population, and it will be appreciated how essential the work is when it is realised the amount of damage and destruction of food being caused by these vermin.

During the year 145 new complaints were investigated which, together with outstanding cases from 1951 required 386 destruction services of various kinds, 385 re-inspections and extra visits.

The bi-annual poisoning service of sewers was completed, and the rat situation in them is as satisfactory as can be expected.

Fly trouble was not extensive during the season, only two cases having to be dealt with. 24 complaints of cockroaches and mosquitoes, 11 cases of swarms of bees, wasps, flying ants (including one case of hornets) received, were dealt with the recognised treatment.

One case of death-watch beetles was inspected and identified by the States Experimental Laboratories and advice given accordingly.

The new Warfarin treatment for rat destruction has been in use since February, and is proving to be valuable.

SANITARY INSPECTORS' ASSOCIATION
CONFERENCE.

As your delegate, I attended the above Conference held at Brighton and would like to take this opportunity of thanking you, as they prove to be of great benefit.

Yours obediently,

L. HAMMOND,
Chief Sanitary Inspector.

THE PRESIDENT,
PUBLIC HEALTH COMMITTEE,
GENERAL HOSPITAL,
JERSEY.

GENERAL HOSPITAL.

SURGICAL AND PHYSIOTHERAPY DEPARTMENT.

We beg to submit our report on the Surgical Department for the year 1952.

OPERATIONS :—

Mr. Halliwell	...	...	...	...	614
Mr. Birt...	...	...	...	...	506
					1,120

OUT-PATIENT CLINICS :—

Mr. Halliwell	845 old patients
” ”	529 new ”
Mr. Birt :	1,076 old patients ;
” ”	529 new ”

Total 2,979

ORTHOPAEDIC CLINIC :— 1,299 old patients.
473 new ”

Total ... 1,772

The bed situation during the past year has been very difficult. It has been due to two factors ; the number of male accidents who occupy beds for a long time and the number of old women who cannot be discharged because they live alone and have no one to look after them.

It may interest the Committee to know the figures for accidents during the year. The total number of road accidents was 91 (74 males and 17 females). These can be divided as follows :—

Motor-cycle accidents :—

47 (40 males ; 7 females) ; 3 males died.

Motor-car accidents :—

19 (12 males ; 7 females) ; 2 males died.

Cycle accidents :—

16 (13 males ; 3 females) ;

Other vehicles : lorries, tractors, cranes :—

9 (all males) ; 1 died.

Of the 47 motor-cycle accidents 36 (77%) received a head injury. There has recently been a considerable discussion both in the medical and lay press as to the advisability of making it compulsory for motor-cyclists to wear crash helmets. During the early part of the last war the Army in England found that the incidents of head injuries were excessively high amongst dispatch riders who, at that time, were not wearing crash helmets. In approximately 1941 it was made compulsory for all military dispatch riders to wear crash helmets which produced a very great drop in the incidents of head injuries. It is therefore of interest to consider how many of the patients admitted to the Hospital as a result of motor cycle accidents might have avoided an injury to the head had they been wearing a crash helmet.

This, of course, does not give a clear picture of the number of vehicle accidents treated as the figures relate only to those cases which were sufficiently serious to require admission ; neither does it show the total fatalities as those cases brought in dead do not come into our figures.

A. C. HALLIWELL, F.R.C.S.

ST. JOHN BIRT, F.R.C.S.

GENERAL HOSPITAL.

X-RAY DEPARTMENT.

The number of cases referred to this Department for X-ray diagnostic examination during 1952 was 8,776 ; a decrease of 205 on the previous year. This decrease can be partially attributed to the shortage of X-ray films which occurred during 1952.

During last year there was a considerable increase in the number of cases sent for the more extensive type of examination, involving the use of contrast media.

There was a reduction in the number of cases referred from the Public Health Department for routine examination, owing to film shortage. The Mass Radiography unit now installed will enable the Department to deal with the requirements of the Medical Officer of Health in this regard. The number who are willing to submit to this type of examination is not yet clear.

The importance of the detection of tuberculosis whilst the disease is still in the early and curable stage, and before the infective stage is reached, still requires a wider and more general appreciation, and routine radiography of appropriate age groups and contacts still remains the most important single method of establishing the diagnosis of tuberculosis of the lungs. It is hoped that the number who present themselves for examination will be considerable. If so, it may be necessary to re-introduce the system of working by staggered hours in this Department, which formerly proved satisfactory, to

enable one or two evening sessions to be held weekly, should the occasion arise. This has the advantage of relieving congestion in this Department during normal working hours and facilitating the attendance of those coming forward for examination.

The X-ray plant continues to give satisfactory service, but has reached an age when minor replacements are becoming necessary.

There was a slight increase in the number of patients who were referred to the Department for X-ray therapy during 1952.

THOMAS WARRINGTON.

GENERAL HOSPITAL.

CARDIAC CLINIC.

A total of 663 patients were seen at this Clinic during the year 1952 of which 194 were new patients. The figures show an increase of 80 in the cases seen compared with the previous year.

An appointment system is in operation which is working satisfactorily apart from an inevitable waiting list which occurs at odd times. This Clinic is now working to capacity and many interesting cases are seen including a further case of Patent Ductus Arteriosus which was successfully operated on at the Westminster Hospital. This makes the remarkable total of five cases in Jersey alone, all of which have been successfully operated upon. In addition, some three or four cases of Hypertension were successfully treated surgically by Mr. Frank d'Abreu at the same Hospital.

R. O'MEARA.

GENERAL HOSPITAL.

MEDICAL CLINIC.

The Medical Clinic is held on Wednesday afternoons and a total of 587 patients were seen. This is an increase of 106 cases on the previous year. No appointment system is necessary for this Clinic as the cases can be dealt with much more quickly than in the Cardiac Clinic.

Several most interesting cases were seen, including one of Myasthenia Gravis in a girl of fourteen, a sister, strangely enough, of the case of Patent Ductus Arteriosus seen at the Cardiac Clinic. This is a rare and usually fatal condition but was cured by the removal of her thymus gland. The operation was performed by Mr. Geoffrey Keynes and took place at the same time as the operation upon her sister. Photographs of the case taken by Mr. F. B. Brown, before and after operation, were published in the Medical Press and clearly showed her dramatic recovery.

R. O'MEARA.

GENERAL HOSPITAL.

PSYCHIATRIC CLINIC.

I have pleasure in submitting my report on the work of the Psychiatric Clinic under the supervision of Dr. Wishart and myself during 1952.

ATTENDANCES.

	New		Old		Total
	<hr style="width: 50%; margin: auto;"/>		<hr style="width: 50%; margin: auto;"/>		<hr style="width: 50%; margin: auto;"/>
ADULT CLINIC	199	...	1,944	...	2,143
CHILD GUIDANCE CLINIC	48	...	370	...	418
	<hr style="width: 50%; margin: auto;"/>		<hr style="width: 50%; margin: auto;"/>		<hr style="width: 50%; margin: auto;"/>
	247	...	2,314	...	2,561

Of the new patients, 104 were referred from the Medical and Surgical Wards. 69 were admitted to the Observation Ward, of whom 25 adults were certified.

There were 21 cases of attempted suicide seen during the year.

Dr. Darling carried out 44 Intelligence Tests on children referred to the Child Guidance Clinic.

3 Mentally Deficient children were transferred to Maison de la Martine.

One boy, who is illegitimate and whose presence in Jersey was disrupting the home life, was accepted under the Fairbridge Farm scheme and writes happily from Australia.

In addition to her work at the Clinics, Miss Findlay, Psychiatric Social Worker, carried out the following :—

ADULTS : Visits—251. Interviews in the Department—724

CHILDREN : Visits—Home 58

School 41

Others 25

Mrs. Layard continues to supervise the playroom. We were sorry to lose the services of Dr. Collinson, who for the past three years has assisted at the Adult Clinic.

LOUISE O'MEARA,
M.B., B.Ch., D.P.H., D.P.M.

GENERAL HOSPITAL.

EYE DEPARTMENT.

The work in the Eye Department has again increased during the year 1952 as the undermentioned figures show.

Although the number of operations was only 47, the number of attendances was 2,897 compared with 2,602 in 1951. 297 schoolchildren attended the Clinic compared with 184 during the previous year.

E. A. C. DRECOURT, M.D.

GENERAL HOSPITAL.

EAR, NOSE AND THROAT DEPARTMENT.

I have much pleasure in submitting my report on the work in the Ear, Nose and Throat Department for the year 1952. As the figures will show the work of the Department continues to increase annually.

Number of attendances	1,660
Number of operations.....	432
Number of minor operations (Out-Patients) ...	69

LEO. L. RATAZZI.

GENERAL HOSPITAL.

DEPARTMENT OF MEDICINE.

I have pleasure in enclosing the figures of the attendances at my Medical and Skin Clinics during 1952.

SKIN CLINIC.

Old Patients	810
New Patients	399
	1,209
Total.....	1,209

MEDICAL CLINIC.

Old Patients	562
New Patients	67
	629
Total.....	629

The total attendances at the Skin Clinics are extremely satisfactory and this Clinic has now become firmly and permanently established. The cases of the Medical Clinic are mostly diabetics who have been treated upstairs in the Medical Wards and who report at the Clinic for observation. It is surprising that in such a small community there are so many cases of diabetes requiring Insulin and strict dieting.





THE MEDICAL WARDS.

The work in the Wards continues to be of a very satisfactory and excellent quality, but the great difficulty, as always, is the question of the aged people who, though not suffering from any particular illness, are yet incapable of looking after themselves.

Happily, there have been no cases this year of poliomyelitis and therefore the Iron Lungs have remained idle.

The cubicles are of inestimable value in treating cases which require specialised therapy and a maximum of quiet.

P. G. BENTLIF, M.D., M.R.C.P.,
Senior Physician.

GENERAL HOSPITAL.
DENTAL DEPARTMENT.

I herewith present the Annual Report of the Dental Department for the year 1952. The following table will show that the department is as busy as ever, indeed the figures show a slight increase on those for 1951.

Total Attendances at Clinic	2,442
Adult attendances for extractions under anæsthetic.....	685
Child attendances for extractions under anæsthetic.....	1,263
	1,948
	1,948
Total Child attendances	1,712
Old Patients attending Clinic	1,166
New Patients attending Clinic	1,276

24 schools were visited in the Island, and the 3,993 pupils in them, were dentally examined.

Of these 1,096 required treatment, and 762 accepted treatment at the Clinic.

During the year 3 fractured manibles were successfully treated, 2 cases of Vincents disease of the mouth dealt with and 2 dental cysts were removed.

Last July Dr. Farquharson resigned the post of Dental Anæsthetist to take up an appointment in Northern Rhodesia. His place has been taken by Dr. Osment, who is deservedly popular with both patients and staff.

The work in the clinic continues to be very arduous and the time must come when more comprehensive dental treatment will be available to the island's school children.

A. S. SWAIN, L.D.S.

GENERAL HOSPITAL.

ORTHOPTIC DEPARTMENT.

This new department commenced work in May 1952 with a waiting list of over 100 children with squints. This fact alone precluded the department from accepting adults for treatment, until such time as the numbers of school children had been reduced to the normal average.

With only two clinics and one operating day per week the waiting list, at the time of writing, both for the clinic and for operation is being reduced and it is hoped to extend the activities of the department to all cases requiring Orthoptic treatment.

As regards the accommodation, this is not satisfactory either in size or design, but in spite of this good results have been obtained.

Looking ahead, with the inevitable increase in numbers which will result from the opening of the clinic to all cases, it cannot be stressed too much that the Eye department should be properly housed as a separate unit.

G. D. HARTHAN, D.O.M.S.,
Surgeon in Charge.

GENERAL HOSPITAL.

**CHILDREN'S MEDICAL CLINIC AND
MEDICAL WARD.**

There were 509 attendances in this Department during the year. This included 323 in the out patients Clinic and 186 admissions to the Ward.

Of these admissions 8 died—

- 4 of Pneumonia,
- 2 of Congenital defects incompatible with life,
- 1 of Friedrichsen-Waterhouse syndrome.

There was only one case of tuberculosis admitted during the year and this child had contracted the disease in England before arriving in Jersey.

In view of the number of admissions from pneumonia in infants our equipment could be improved with the help of some extra cubicles and incubators and another oxygen tent.

H. L. DURELL.

GENERAL HOSPITAL.

—
VENEREAL DISEASE.
—

NUMBER OF ATTENDANCES.

	Old	New		Total.
	—	—		—
Male	155	24	...	179
Female	188	7	...	195

It will be noticed that there is some decline in the numbers attending this department. This may be attributed to two facts :—

- (a) War—seven years past.
- (b) More Practitioners are treating uncomplicated cases themselves.

However, the numbers are still being maintained and the clinic is more fully operative during the visitor season.

A variation of interesting and sometimes rather rare cases have been seen.

F. G. MAITLAND,

GENERAL HOSPITAL.

PHARMACY DEPARTMENT.

This year an endeavour has been made to classify and record the work done by the Department, and records were commenced on July 1st, 1952. The results for the *six months* ending 31st December 1952 are shown below.

The Department now supplies medical goods to all States Institutions, also follow-on medicines for children from the Hospital sent to Brig-y-don. This is a recent development and the work entailed is not reflected in the figures.

A change has been made in the buying policy for drugs and dressings. Contract buying has been extended, and many preparations are now manufactured on the premises. The result has been a considerable decrease in the cost of the Department. It is expected that the cost figure will be stabilised in 1953, and thereafter show only minor fluctuations depending on number of patients and market conditions.

The Medical Staff have fully co-operated in sanctioning the use of, and prescribing, mainly standard drugs instead of the higher priced advertised preparations.

The supply of medical gases direct from Southampton has not been entirely satisfactory,

and an assurance has been given by British Oxygen Company that a local depot will be formed in 1953. Delays will be obviated and a small saving effected in cost.

Number of issues to wards and departments	19,194
Dangerous Drugs (D.D.A.) issued to wards and Out-patients	288
Surgical sundries issued	4,569
Surgical instrument repairs handled	142
Intravenous infusions, injections, etc. prepared	1,121
Syringes, batches of hypo. needles, special instrument sterilisations	2,197
Outpatient prescriptions (including N.H.S. and Pink prescriptions).....	8,334
Sales to individuals, priced issues to other Hospitals and States Institutions, etc.....	1,901
Lectures to Nursing Staff by Chief Pharmacist.....	10
Emergency calls (Out of hours) answered.....	12

CHARLES W. HAREWOOD,
Chief Pharmacist.

GENERAL HOSPITAL.

PATHOLOGICAL LABORATORY.

The long and eagerly awaited first floor extension of the Laboratory has been finished and put into use. The resulting improvement in working conditions has already been reflected in the quality of the work done. This, in part, is due to the use of apparatus formerly impossible owing to lack of space, and also to lessened fatigue of the staff.

No annual report could be complete without praise to the technical staff for their hard work and loyal co-operation.

EDWARD GEAL,
Director of Pathology.

EXAMINATIONS PERFORMED IN THE
PATHOLOGICAL LABORATORY.

Post Mortem Examinations...	140
Urine Chemical ...	1,280
Urine Bacteriological ...	451
Urine Pregnancy Tests ...	64
Blood Counts ...	1,121
Blood Sugars...	614
Blood Ureas ...	305
Blood Grouping ...	298
Blood Transfusions ...	272
Blood Sedimentation Rate ...	1,566
Blood Cultures ...	18
Blood Cholesterol...	104
Bleeding and Clotting Times ...	9
Kahn Tests ...	1,219
Faeces, Chemical ...	136
Faeces, Bacteriological...	251
Faeces, Fat Estimation...	15
Throat and Nasal Swabs ...	456
General Swabs ...	235
Examination of Pus ...	58
Cerebro-spinal Fluids ...	75
Pleural Fluids ...	28
Sputum Examinations ...	1,146
Test Meals ...	99
Renal Efficiency Tests ...	9
Preperation of Vaccines ...	44
Widal Reactions ...	27
Hair for Fungus ...	9
Basal Metabolic Rates ...	16
Liver Function Tests ...	58
Examination of Stomach Contents ...	6

Examination of Gastric Lavage	22
Skin Scrapings	17
Examination of Spermatic Fluid	45
Estimation of Prothrombin Time	58
Estimation of Serum Sodium	10
Estimation of Serum Protein	32
Serum Potassium Estimation	4
Blood Acid and Alkaline Phosphatases	70
Blood Uric Acids	18
Estimation of Serum Calcium	6
Bacteriological Examination of Water	162
Bacteriological Examination of Milk	1,732
Examination of Ice Creams... ..	36
Tissue for Histological Examination	388
Estimation of Serum Amylase	6
Estimation of Plasma Chlorides	14
Total... ..	<u>12,769</u>

GENERAL HOSPITAL.

ENGINEERING DEPARTMENT.

I have much pleasure in submitting my report for 1952.

Children's Unit.

An important addition in this department has been the building of a sluice room, sterilizing room and toilet adjacent to the lower ward.

Over these units we now have a verandah, and, with an opening having been cut and a doorway put in the upper ward, it is now possible to wheel bed and patient out in the open air.

Other alterations in this department have included the conversion of a bathroom etc. into a kitchen and milk room as separate units.

On the upper floor, built in cupboards have been erected on the landing, thus obviating the use of cupboards of varying sizes.

Pharmacy.

Modifications to the existing pharmacy have included the cutting of an opening and the erection of a doorway leading from the dispensing department to the sterilizing department. Other changes have been made for the better storing of oils and drugs.

Top floor.

This long corridor, including bathrooms, etc. and 16 bedrooms has been completely redecorated. Alterations at the S.W. end, have enabled us to build a kitchen on this floor.

Main Office.

A private office has been erected within the Main Office and a counter has been provided for the use of the general public.

Records Office.

The side entrance vestibule (S.W.) of the Hospital has been modified, and with a counter fitted up for the general public, has now been adapted as a Records Office.

Theatre.

One large cabinet for instruments was built in our workshops and fitted up in the sterilizing room of the theatre.

Laboratory.

Many alterations have been carried out on the ground floor of this department, bringing it in line with modern requirements.

These have included the fitting up of benches, sinks, and built-in cupboards.

A separate inspection room has also been erected.

General.

The porter's lodge has been decorated throughout. A darkroom has been erected on the Female Surgical floor for the use of the Theatre. The Chapel Walls have been repointed. The main Hospital staircase has been painted and a new floor has been laid in the Doctors' Consulting room.

A partition and doorway has been fitted in the lower corridor.

Sandybrook.

This annexe has received attention as required, this has included the reslating and fitting of new gutters in the Nurses' Quarters,

The building of a concrete area for swilling and cleaning out the bins.

Painting and decorating as was found necessary. Finally and perhaps the most important, on the electrical side, the repair work and maintenance is ever on the increase, as more electrical apparatus is brought into service.

The following departments have been re-wired either in whole or in part.

Physiotherapy Dept., Female Surgical Dept., Medical Wards, Laboratory and Laundry.

In conclusion, I would like to place on record the continued goodwill and co-operation received from the members of my staff.

H. DALLAIN,
Engineer.

GENERAL HOSPITAL.
STATISTICAL TABLES for the Year ending
31st December, 1952.

ADMISSIONS AND DISCHARGES.

Patients and Inmates at the General Hospital on 1st January,
 1952 263

Month.	Admissions.	Discharges.	Remaining at end of Month.
January	237	213	287
February	233	249	271
March... ..	270	252	289
April	259	271	277
May	262	268	271
June	270	272	269
July	316	283	302
August	327	347	282
September... ..	255	249	288
October	288	281	295
November	273	278	290
December	231	251	270
Patients and Inmates at the General Hospital on 31st December, 1952			270

**GENERAL HOSPITAL.
STATISTICAL TABLES.**

STATISTICS FOR THE YEAR TO 31ST DECEMBER 1952.

IN-PATIENTS.

Number of Patients at beginning of the Year	105
Number of Patients admitted during the Year... ..	3,177
Number of Patients at the end of the Year	118
Average number of Patients resident daily throughout the Year	130

ANNUAL EXPENDITURE ON IN-PATIENTS AND AVERAGE COST OF
EACH IN-PATIENT PER WEEK.

	Expenditure on In-Patients.	Average Cost of each In-Patient per week.
	£	£ s. d.
Provisions	17,536	2 11 9
Surgery and Dispensary	9,748	1 8 9
Domestic	11,674	1 14 5
Salaries and Wages	58,822	8 13 6
Miscellaneous	2,025	6 2
Administration	3,363	9 11
Establishment Renewals and Repairs	3,278	9 8
Total Cost	106,446	15 14 2

**GENERAL HOSPITAL.
STATISTICAL TABLES.**

STATISTICS FOR THE YEAR TO 31st DECEMBER, 1952.
OUT-PATIENTS DEPARTMENTS.

NEW PATIENTS AND ATTENDANCES.

Departments.	New Patients ...	Attendances.
Casualty	11,633	29,680
Eye ... ..	...992	2,897
E.N.T.	635	1,660
Skin	399	1,209
Medical	157	1,216
Cardiac	194	663
Surgical	1,058	2,979
Children... ..	76	323
Special	31	374
Daily Medical and Surgical Clinics	1,787	4,176
X-ray including Deep Therapy ...	7,727	8,099
Dental	1,276	2,442
Physiotherapy	1,534	15,501
Psychiatry	247	2,561
Orthoptic	86	712
Total... ..	27,832	74,492

**GENERAL HOSPITAL.
STATISTICAL TABLES.**

STATISTICS FOR THE YEAR TO 31st DECEMBER 1952.

OUT-PATIENTS.

Total Number of New Out-Patients	27,832
Total Number of Out-Patient Attendances	74,492

ANNUAL EXPENDITURE ON OUT-PATIENTS AND AVERAGE COST OF EACH OUT-PATIENT ATTENDANCE AND OF EACH OUT-PATIENT.

	Expenditure on Out- Patients.	Average cost of each Out-Patient Attendance.	Average Total Cost of each Out-Patient
	£		
Provisions	800	2.58d	6.90d
Surgery and Dispensary..	8,302	26.75d	71.58d
Domestic	1,707	5.49d	14.72d
Salaries and Wages ...	11,566	37.25d	99.74d
Miscellaneous	453	1.46d	3.91d
Administration	1,949	6.29d	16.80d
Establishment Renewals and Repairs	592	1.90d	5.11d
Total Cost	25,369	81.72d	218.76d

General Hospital, Statement of Affairs

	£	s.	d.		£	s.	d.
HOSPITAL BALANCES AS							
AT 1st JANUARY 1952.							
Amount due from Pension- naires	4,408	0	4				
Amounts due from Parishes	7,516	17	4				
Cash in Hand	—	—	—		11,924	17	8

TREASURER OF THE STATES OF JERSEY.

Expenditure during the 12 months to date on the following Votes.

Salaries and Wages ...	93,824	4	3				
Upkeep of Hospital and Inmates	67,715	5	4				
Upkeep of Buildings...	8,935	9	6				
Pensions	791	13	8				
Contributions in Sus- pense	1,175	12	6				
Nurses' Home	5,778	13	7				
Patients Travelling to England	1,335	16	2				
Special Appliances in Suspense	2	1	9		179,558	16	9

£191,483 14 5

for the Year ended 31st December, 1952.

	£	s.	d.	£	s.	d.
TREASURER OF THE STATES OF JERSEY.						
Receipts during the twelve months to date under the following heads.						
Interest on Investments	319	3	2			
Pensions	10,058	0	1			
Sundries	4,148	1	2			
Parishes	13,427	10	0			
Contributions in Suspense	1,150	11	9			
Special Appliances in Suspense	20	9	3	29,123	15	5

MAINTENANCE ACCOUNT.

Hospital for 12 months to date	137,661	3	2			
Appropriation Account...	4,351	4	11			
Nurses' Home	5,778	13	7			
Adjustment—Parishes ...	1,392	7	4	149,183	9	0

HOSPITAL BALANCE AS AT 31st DECEMBER, 1952.

Amount due from Pensionnaires	8,447	7	4			
Amount due from Parishes	4,729	2	8			
Cash in Hand	—	—	—	13,176	10	0

£191,483 14 5

**MALE POOR LAW DEPARTMENT.
STATISTICAL TABLES.**

STATISTICS FOR THE YEAR TO 31st DECEMBER, 1952.

Number of Inmates at the beginning of the Year...	57
Number of Inmates admitted during the Year.....	74
Number of Deaths and Discharges during the Year	78
Number of Inmates at the end of the Year	53
Average number of Inmates resident daily through- out the Year	54

ANNUAL EXPENDITURE ON INMATES AND AVERAGE COST OF EACH
INMATE PER WEEK.

	Expenditure on Inmates.	Average Cost of each Inmate per Week.		
	£	£	s.	d.
Provisions	3,571	1	5	4
Surgery and Dispensary	517		3	8
Domestic	1,058		7	6
Salaries and Wages	4,203	1	9	10
Miscellaneous	41			3
Administration	80			7
Establishment Renewals and Repairs	200		1	6
Total Cost ...	9,670	3	8	8

GENERAL HOSPITAL.

CHAPLAIN'S REPORT.

I have the honour to submit herewith a report for 1952.

Visits paid for all purposes :

Hospital	...	...	217	
Overdale	...	...	38	Total 255

Number of Communion administered in the Hospital Church and to patients on the wards :

Hospital	...	...	337	
Overdale	...	...	90	Total 427

Baptisms	...	...	5
Marriage	...	...	1
Burials	...	...	10
Special services	...	...	12

Collections in the Hospital Church amounted to £12 19s. 9d. expenses to £3 18s. od. leaving a total balance in hand of £46 6s. 5d.

Outstanding events during the year were the Confirmation service on May 7th, when the Bishop of Southampton confirmed four members of the nursing staff; the annual service of the Royal College of Nursing; and the Harvest Festival service.

Plans to beautify the church are being proceeded with and the Chaplain thanks the Committee for their kind co-operation and for making a grant of £100 towards the cost.

In conclusion, I thank the Committee for the helpfulness and support given me in my work and I wish to record that I have received every possible consideration and help from the Matrons and staffs of both the General Hospital and of Overdale.

L. W. HIBBS,
Chaplain.

ST. SAVIOUR'S HOSPITAL.

 MEDICAL SUPERINTENDENT'S REPORT FOR THE YEAR
 1952.

I have the honour to submit for your consideration the Eighty-Fourth Annual Report of the work of the hospital.

The changes which have occurred amongst the patients are as follows:—

	Male	Female	Total
	—————	—————	—————
Number resident on 1st January, 1952	79	140	219
Number admitted during the year 1952	21	20	41
Number discharged during the year 1952	8	17	25
Number deceased during the year 1952	6	8	14
Number resident on 31st December, 1952	87	137	224
Total under treatment during 1952...	100	163	263

ADMISSIONS.

Admissions for the year were nine fewer than in 1951, and of the total of 41 more than half were of the male sex, in contrast to previous years when female admissions largely predominated. As a result, the hospital is now full on the male side as well as on the female side. There were 31 new cases, including 2 boys who had to be transferred from the Maison de la Martine to the main hospital, the remaining 10 having been previously in hospital here or on the mainland. In 7 of the new cases, the primary disorder was mental deficiency.

Classification by Age and Sex.	Male	Female
Over 70 years	2	2
50—70 years	7	5
30—50 years	5	9
15—30 years	6	4
Under 15 years	1	—
	—	—
	21	20
	—	—

DISCHARGES.

Eight men and seventeen women were discharged during the year. One male and one female had to be readmitted while still on trial.

	Male	Female	Total
Discharged recovered	2	3	5
Discharged relieved to care of relatives	3	13	16
Discharged not improved to care of relatives	1	—	1
Transferred to mental hospitals in England	1	1	2
Repatriated to France	1	—	1
	—	—	—
	8	17	25
	—	—	—

DEATHS.

Fourteen patients died, six males and eight females, three more than in 1951. Their average age was 64 years. No unusual circumstances attended any of the deaths.

HEALTH.

The general standard of health of patients and staff has remained uniformly good. One female patient was found, on routine clinical examination, to be suffering from open pulmonary tuberculosis. Subsequently fluoroscopic examination of all patients

was carried out by the Medical Officer of Health, and revealed two further cases of this disease, hitherto unsuspected, on the female side. Four patients sustained accidental fractures, one of the wrist, one of the humerus, and two of the neck of the femur, all of which united satisfactorily, one of the latter after operation.

Routine radiographic examination of the chest was carried out in all members of the nursing staff and this year the kitchen and domestic staff were included in the investigation.

CHARGEABILITY.

The chargeability of patients remaining under treatment at the end of the year is as follows :—

CLASS	Male	Female	Total
First	2	19	21
Second	7	22	29
Special Rates	—	1	1
RATE-AIDED			
Island	4	20	24
St. Helier	46	33	79
St. John	1	4	5
St. Saviour	2	2	4
St. Lawrence	4	4	8
St. Martin... ..	1	9	10
St. Ouen	8	1	9
St. Clement	3	1	4
St. Peter	2	7	9
Grouville	4	2	6
St. Brelade	3	3	6
Trinity	—	6	6
St. Mary	—	3	3
	87	137	224

MAISON DE LA MARTINE

	Male	Female	Total
Number resident on 1st January 1952	9	11	20
Number admitted during the year 1952	3	1	4
Number discharged during the year 1952	2	1	3
Number deceased during the year 1952	—	1	1
Number resident on 31st December 1952	10	10	20

The children at Maison de la Martine have maintained a satisfactory level of health and nutrition during the year, and I am glad to say that a Sister qualified in Mental Deficiency nursing is now in charge of this department. Two older boys who became troublesome have had to be transferred under certificate to the main hospital, thus emphasizing again the need for proper accommodation for older defectives.

An unfortunate scalding accident resulted in the death some days later at the General Hospital of a four year old imbecile girl. An inquest was held on the body in the presence of H.M. Attorney-General.

One other child died during the year, from convulsions associated with organic brain disease.

STAFF.

No important changes have occurred in nursing and domestic staffs and it has been possible to maintain these at a reasonably satisfactory level. My congratulations go to Mr. R. P. Killmister, who, while retaining the stewardship of this hospital, has been promoted to the office of Steward-General of the Island Hospitals.

OCCUPATIONAL THERAPY DEPARTMENT.

A successful sale of work was held in October in the presence of the Bailiff of Jersey and Lady Coutanche and numerous members of the States and other officials. The department has continued its good work under the supervision of the Occupational Therapist in charge, Miss V. M. Fearne, and once more a number of high awards were obtained at the annual Eisteddfod.

ENTERTAINMENTS.

The usual programme of entertainments and outings was undertaken and this year for the first time since before the war it proved possible to revive the patients' Fancy Dress Ball at Christmas, with very great success. The Christmas decorations, this time on a Coronation theme, were very much admired. A popular new feature was the institution of occasional whist-drives for the patients.

DIVINE SERVICE.

The Church of England services have been held regularly on the first Sunday of each month by the Chaplain, the Reverend S. R. Knapp, and were well attended. Roman Catholic services were also conducted monthly by Father Ryan.

THE FARM.

The farm has once more assured an adequate supply of milk, eggs and vegetables for the institution, the total value of the produce being £3,638 19s. 1d.

GROUNDS AND GARDENS.

These have been well-maintained throughout the year and are frequently a subject of favourable comment from visitors.

REPAIR AND UPKEEP OF BUILDINGS.

All necessary repairs and redecoration have been carried out, and rubber flooring has been laid in a number of side-rooms, thereby improving the standards of cleanliness and hygiene.

HEAT, LIGHT, POWER AND WATER.

Improvements have been effected in the central heating and radiators installed in two female day-rooms previously heated by coal fires. The drinking water supply has now been carried to all parts of the hospital. The Insurance Company's Inspector has again reported favourably in respect of the maintenance and general condition of the power house, mechanical plant and electrical fittings.

I am again greatly indebted to the Steward-General and to all members of the staff, nursing and non-nursing, for their loyal support and assistance, and to the President and Members of the Public Health Committee for their continued interest and encouragement. To all I tender my grateful thanks.

JOHN WISHART,
B.A., M.B., B.S., M.R.C.S., L.R.C.P., D.P.M.,
Medical Superintendent.

STATEMENT OF AFFAIRS
to December 31st, 1952.

St. Saviour's Hospital—Statement of Affairs,

	£	s.	d.	£	. d.
HOSPITAL BALANCES, 1st JANUARY, 1952.					
Amounts due from Parishes	3,430	0	0		
Amounts due from Pensionaires, Nett	1,005	8	9		
				4,435	8 9
TREASURER OF THE STATES OF JERSEY.					
Expenditure on the following Votes.					
Rental	279	0	0		
Salaries and Wages ...	29,771	4	1		
Pensions... ..	338	8	0		
Upkeep of Buildings ...	2,795	3	2		
Maintenance and Supplies	30,034	14	10		
Nurses' Quarters (Construction)	596	1	5		
Nurses' and Domestic Staff Quarters	985	0	5		
				64,799	11 11
				£69,235 0 8	

Year ended 31st December, 1952.

	£	s.	d.	£	s.	d.
TREASURER OF THE STATES OF JERSEY.						
Receipts on the following Estimates during the Year to date.						
Pensions	6,338	0	5			
Sundries	512	1	6			
Parishes	13,812	5	0			
				20,662	6	11
MAINTENANCE, APPROPRIATION AND FARM ACCOUNTS.						
Maintenance	37,654	6	1			
Appropriation	5,480	6	4			
Farm	741	6	0			
				43,875	18	5
HOSPITAL BALANCES AT 31st DECEMBER, 1952.						
Amounts due from						
Parishes	3,554	5	0			
Nett Amounts due from Pensionnaires..	1,142	10	4			
				4,696	15	4
				£69,235 0 8		

St. Saviour's Hospital—Maintenance Account

	£	s.	d.	£	s.	d.
TO ORDINARY EXPENDITURE.						
1. PROVISIONS	16,135	7	11	16,135	7	11
2. SURGERY & DISPENSARY.						
Drugs, Chemicals and						
Disinfectants	827	12	8			
General Equipment ...	22	14	10			
				850	7	6
3. DOMESTIC.						
Furniture and Fixtures,						
Renewal, Repairs ...	1,548	17	9			
Patients' Clothing... ..	1,584	8	7			
Bedding and Drapery... ..	316	17	7			
Rent, Light, Heat, Power,						
etc.	7,237	5	5			
Uniform, staff	313	17	2			
Occupational Therapy... ..	1,058	16	11			
Medical and Dental						
Treatment of Staff ...	2	0	9			
				12,062	4	2
4. SALARIES, WAGES AND PENSIONS.						
Other Officers and Em-						
ployees	23,527	6	0			
Pensions to Retired						
Employees	338	8	0			
Medical and Dental						
Treatment of Patients.	1,479	1	5			
				25,344	15	5
5. MISCELLANEOUS.						
General and Miscella-						
neous Expenses	353	4	2			
Travelling Expenses	760	11	9			
Maintenance Allowances,						
Staff	210	16	6			
Newspapers, Periodicals,						
and Press Notices	152	19	10			
Funerals, Inmates	19	10	0			
				1,497	2	3
Carried forward...	£55,889	17	3			

Year ended 31st December, 1952.

	£	s.	d.	£	s.	d.
BY INCOME.						
Charges to In-Patients and Parishes	20,411	12	0			
Staff, Medical and Dental Treatment... ..	4	11	0			
	<hr/>			20,416	3	0
BY BALANCE, being Nett Cost of the Institution for the year to date (Mainte- nance of Patients only) carried to Statement of Affairs						
	37,654	6	1			
	<hr/>			37,654	6	1

**STATISTICS FOR
UNIT OF COST.**

Number of Days in period	366
Number of Paying-in Patient Days	77,138
Number of non-paying Patient Days	11,236
Cost per patient per day	13/1 $\frac{3}{4}$ d.
Average receipt per paying patient per day	5/3 $\frac{1}{2}$ d.

Carried forward... £58,070 9 1

St. Saviour's Hospital—

	£	s.	d.	£	s.	d.
Brought forward...				55,889	17	3
6. ADMINISTRATION.						
Medical Superintendent	1,270	0	0			
Steward... ..	685	0	0			
Postages, Telegrams and Telephones	99	3	2			
Books and Stationery ...	70	3	3			
	<hr/>			2,124	6	5
7. ESTABLISHMENT.						
Chaplain	50	0	0			
Freights and Wharfage...	6	5	5			
	<hr/>			56	5	5
				<hr/>		
				£58,070	9	1
				<hr/> <hr/>		

APPROPRIATION ACCOUNT.

	£	s.	d.	£	s.	d.
To EXTRAORDINARY EXPENDITURE.						
Repairs and Upkeep of Buildings	3,880	2	11			
Roads, Avenues and Gar- dens, Repairs and Upkeep	19	1	7			
Nurses' Quarters, 1st Block... ..	596	1	5			
Nurses and Domestic Staff Quarters	985	0	5			
	<hr/>			£5,480	6	4
				<hr/> <hr/>		

FARM ACCOUNT.

	£	s.	d.	£	s.	d.
To GENERAL EXPENSES, Labour, forage, etc... ..						
	4,543	0	11			
	<hr/>					

£4,543 0 11

Maintenance Account.

	£	s.	d.	£	s.	d.
Brought forward...	58,070	9	1			

£58,070 9 1

APPROPRIATION ACCOUNT.

	£	s.	d.	£	s.	d.
BY BALANCE, carried to State- ment of Affairs... ..	5,480	6	4			

£5,480 6 4

FARM ACCOUNT.

	£	s.	d.	£	s.	d.
BY SALES, Livestock, etc... ..	162	15	10			
BY SUPPLIES to the Institution, viz :						
Milk, Vegetables, Potatoes, Eggs, etc.	3,638	19	1			
BY BALANCE, carried to State- ment of Affairs	741	6	0			

£4,543 0 11

JERSEY MATERNITY HOSPITAL.

During 1952 the total number of women delivered at the Jersey Maternity Hospital was 616 and the number of booked cases was 223.

Details of the cases dealt with are as follows :—

Number of deliveries with medical aids	... .. 40
Do. forceps	... .. 67
Do. by doctors	... .. 212
Do. by midwives	... .. 368
Do. by Cæsarean Section.	36

In addition there were 8 cases at home of delivery before the arrival of the midwife.

The total number of live births was 621, comprising 331 boys and 290 girls. Included in this number were 10 sets of twins :—

- (a) 4 sets of girls.
- (b) 4 sets of boys.
- (c) 2 sets of 1 boy and 1 girl.

The average weight of the live boys was 7 lb. 6 oz. whilst the lightest boy weighed 3 lb. 15 oz., and the heaviest 11 lb. 11 oz.

The average weight of the live girls was 7 lb., whilst the lightest girl weighed 4 lb. 2 oz., and the heaviest 9 lb. 14 oz.

The number of still births was 13 and these were due to the following causes :—

1. 12 weeks premature.
2. Hydrocephalic and spinal bifida.
3. Prolapsed cord and breech delivery.
4. Prolapsed cord. Breech delivery.
5. Macerated fœtus. 12 weeks premature.
6. Born at home before arrival of doctor. 12 weeks premature.
7. 1st twin—cord tightly round neck—4 weeks premature.
8. Macerated fœtus. 10 weeks premature.
9. Macerated hydrocephalic—8 weeks premature.
10. Anencephalic.
11. Anencephalic born at home before arrival of midwife.
12. Mother had several pre-eclamptic fits whilst in labour.
13. Anencephalic—9 weeks premature.

The number of neo-natal deaths was 7 (5 males and 2 females), and these were due to the following causes—

1. Head very malformed.
2. 2nd twin—white asphyxia—did not respond to treatment.
3. Baby became very jaundiced and hæmorrhaged from nose and mouth. Premature. Weight 4lb. 10oz.
4. Baby immature—Mother pre-eclamptic toxæmia.
5. 7 weeks premature.
6. Fallots Tetra Allegy † Fistula between œsophagus and trachea.
7. Ante partum hæmorrhage. Baby 12 weeks premature. (Cæsarean section).

During the year in addition to the 36 cæsarean sections, 104 operations for rupture of membranes were performed, and 79 circumcisions were dealt with at the hospital. The number of attendances at the ante-natal clinic was 1,019.

E. THORNLEY,
Matron.

SANDYBROOK.

DEAR SIR,

I herewith submit to you and your committee my report on the work of Sandybrook Hospital for the year 1952.

The hospital has been full to capacity during the whole year and the nursing and domestic staffs deserve great credit for their excellent and kindly work for the aged and sick, often carried out under difficult and trying circumstances.

The number of patients in the hospital on 31st of December 1951 was 100 and on the 31st of December 1952 was 99.

The number of patients discharged to other institutions, to their relatives, or homes, was 35.

The number of patients admitted was 55.

Deaths in the hospital amounted to 23.

Causes of death:—

Diseases of the Heart	7
„ „ „ Blood	3
„ „ „ Blood Vessels	6
„ „ other Organs	2
Carcinomata	5
	23
	—

Average age at death was 80 years.

JOHN R. HANNA,
Visiting Physician.

SANDYBROOK ANNEXE.

STATISTICAL TABLES.

STATISTICS FOR THE YEAR TO 31ST DECEMBER 1952.

Number of Inmates at the beginning of the Year	100
Number of Inmates admitted during the Year... ..	56
Number of Deaths and Discharges during the Year ...	57
Number of Inmates at the end of the Year	99
Average number of Inmates resident daily throughout the Year	101

ANNUAL EXPENDITURE ON INMATES AND AVERAGE COST OF EACH
INMATE PER WEEK.

	Expenditure on Inmates.	Average Cost of each Inmate per week.	
	£	£	s. d.
Provisions	4,642	17	7
Surgery and Dispensary... ..	885	3	4
Domestic	5,115	19	5
Salaries and Wages	10,583	2	0 2
Miscellaneous	263	1	0
Administration	380	1	6
Establishment Renewals and Repairs	1,554	5	11
Total Cost... ..	23,422	4	8 11

AMBULANCE SERVICE.

In connection with the above Service, I have the honour to submit the following report for 1952.

CASES TRANSPORTED.

General	...	1,470
Maternity	...	84
Accident	...	533
X-Ray	...	311
Fever	...	37
Mortuary	...	91
By Air	...	43
By Sea	...	15
Requiring Special Treatment	...	399
		2,983
TOTAL MILEAGE	...	23,886
PETROL CONSUMED	...	2,090 Gallons
AMBULANCE HIRE CHARGES	...	£947 15s. od.
OIL CONSUMED	...	94½ Quarts

Note.—Ambulance Hire Charges do not include Accidents, as these are carried free.

Of the road accidents recorded, 31 Motor Cycles, 28 Cars, 25 Cycles were involved.

O. L. AUBIN,
pp/County Commissioner.

