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COUNTY OF LINCOLN - PARTS OF KESTEVEN

ANNUAL REPORT

ON THE
HEALTH AND HEALTH SERVICES
OF THE COUNTY

REPORT
OF THE
COUNTY MEDICAL OFFICER
OF HEALTH

J. H. C. CLARKE, M.A., M.D., D.T.M. & H., D.P.H.

1940

SLEAFORD:
W. K. MORTON & SONS,
1941.

Annual Report
of the
County Medical Officer of Health

PRELIMINARY NOTE.

The size and scope of the Annual Report has been curtailed in view of the increasing pressure of work undertaken by the Public Health Department.

It is satisfactory to be able to record that the impact of war conditions upon the public health in Kesteven had not been adverse up to the end of 1940.

The Birth Rate, 15.91; the Death Rate, 12.21; and infant mortality rate, 47.78, were each better than the corresponding figures for England and Wales.

A very substantial part of the time of the County Medical Officer of Health has necessarily been devoted to the organisation and administration of the Civil Defence Medical Services.

This work is detailed in the chapter headed, "Air Raid Precautions and Civil Defence" on page 22 to which attention is invited as a matter of local and general interest.

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA

Public Health Officers of the County Council :

County Medical Officer of Health :

School Medical Officer :

Tuberculosis Officer :

Medical Officer for Maternity and Child Welfare :

J. H. C. Clarke, M.A., M.D., D.T.M. & H., D.P.H.

Assistant County Medical Officers, Assistant School Medical Officers, Assistant Tuberculosis Officers and Assistant Medical Officers for Maternity and Child Welfare:

T. J. O'Sullivan, B.A., M.D., D.P.H., L.M.

M. Daniels, L.R.C.S., L.R.C.P. (Edin.), D.P.H.

(Appointed 1.1.40).

Orthopaedic Surgeon :

G. A. C. Shipman, M.A., M.B., CH.B., M.R.C.S., L.R.C.P.

Consulting Ophthalmic Surgeon :

A. C. Reid, M.A., B.Sc., M.D., D.O.

Medical Officer for Venereal Diseases :

A. D. Frazer, M.B., CH.B., D.P.H.

Consulting Obstetrician :

R. A. Walker, B.A., M.B., CH.B., F.R.C.S.

Medical Supervisor of Midwives :

J. H. C. Clarke, M.A., M.D., D.T.M. & H., D.P.H.

Dental Surgeons :

R. P. McGlynn, B.D.S., L.D.S.

J. E. Mann, L.D.S.

Public Analysts :

A. H. M. Muter, F.I.C., F.C.S.

W. W. Taylor, B.Sc., F.I.C.

Superintendent Health Visitor :

Non-Medical Supervisor of Midwives :

Miss S. E. Morris, M.B.E.

County Health Visitors :

Miss H. M. Bryden
Miss E. M. Jones
Mrs. T. Kaye
Miss A. Mannion

Miss A. Rooke
Miss M. E. Stamford
Miss I. Pearl

Orthopaedic Nurse :

Mrs. L. M. Ward, C.S.M.M.G.

Blind Welfare Visitor :

Miss A. Sandwith.

Chief Clerk :

Charles H. Smith

OTHER OFFICERS :

District Medical Officers of Health and Sanitary Inspectors :

Stamford Borough	W. Anley Hawes, M.B., D.P.H. F. Ryman.
North Kesteven Rural	W. Sharrard, M.B. J. Chadwick.
Grantham Borough	{ S. F. Nott. C. H. D. Robbs, M.B. G. L. Robinson.
West Kesteven Rural	
Sleaford Urban	{ F. Clare. A. C. Giles, M.B. A. Clarkson.
East Kesteven Rural	
Bourne Urban	{ J. S. Fisher. J. A. Galletly, M.B., D.P.H. W. A. Chivers.
South Kesteven Rural	

COUNTY MEDICAL OFFICER'S REPORT for the year 1940.

General Statistics.

Area of the Administrative County (in acres) ...	463,505
Population (Census 1921)	108,237
Population (Census 1931)	110,360
Population (Registrar General's estimate 1940) ...	110,160
Number of inhabited houses (Census 1921) ...	25,456
Number of inhabited houses (Census 1931) ...	27,590
Number of families or separate occupiers (1921)	25,823
Number of families or separate occupiers (1931)	27,845
Rateable Value (1st April, 1940)	£500,916
Actual product of a penny rate, 1939-40 ...	£2,006

Population.

The Registrar General's estimate of resident population mid 1940 reverts to one figure, viz. 110,160 as a basis for the calculation of birth rates and death rates. Two sets of birth figures are now given for use in calculating birth and infant mortality rates. Details of the population of the several Urban and Rural Districts will be found in Table 1.

Social Conditions.

Kesteven is predominantly an agricultural county. No noteworthy change has occurred in the number of trades and industries established in the area, but employment has remained at a satisfactory level.

EXTRACTS FROM VITAL STATISTICS FOR THE YEAR.

<i>Live Births :</i>	M.	F.	Total.	
Legitimate	853	812	1665	Rate per 1,000 of estimated population : 15.91 (Rate for England and Wales : 14.6)
Illegitimate	33	55	88	
<i>Stillbirths :</i>				
Legitimate	30	27	57	Rate per 1,000 of estimated population : 0.53 (Rate for England and Wales : 0.55) Rate per 1,000 births—live and still : 32.02
Illegitimate	-	1	1	
<i>Deaths:</i>	759	752	1511	Rate per 1,000 of estimated population : Crude 13.72, Nett 12.21 (Rate for England and Wales : 14.3)

Death Rate of Infants under 1 year of age :—

	Kesteven.	England and Wales.
All infants per 1,000 live births ...	47.78	55.00
Legitimate infants per 1,000 legitimate live births ...	48.52	—
Illegitimate infants per 1,000 illegitimate live births ...	33.71	—

Chief Causes of Death, 1940.

Cause of Death.	No. of Deaths.	Rate per 1,000 of est. pop. Kesteven.
Heart Disease ...	361	3.28
Cancer ...	207	1.88
Intra: Cran: vasc: lesions ...	195	1.77
Bronchitis ...	99	0.90
Violence (Accidental) ...	71	0.64
Pneumonia ...	68	0.62
Circulatory Diseases other than Heart Disease ...	39	0.35
Digestive Disease other than Appendicitis ...	35	0.32
Nephritis ...	34	0.31
Respiratory Tuberculosis ...	33	0.30
Congenital Mal: Birth Inj: Infant Dis: ..	30	0.27
Influenza ...	30	0.27

Birth Rate.

The Birth Rate has increased from 14.81 in 1939 to 15.91 in 1940. The infantile mortality rate was 47.78 against 41.71 in 1939 and 53.39 in 1938.

GENERAL PROVISION OF HEALTH SERVICES.

Laboratory Service.

The Laboratory arrangements were as stated in my Annual Report for 1939, except that the Emergency Public Health Laboratory established by the Medical Research Council at Stamford was transferred to Leicester. The services provided by this laboratory continued to be available to the local authorities, hospitals and other public institutions serving the southern section of the county.

Ambulance Facilities.

The ordinary ambulance facilities in the County remained as stated in my previous reports. The emergency service which was

organised in connection with the casualty services is referred to under the heading, Air Raid Precautions.

Nursing in the Home.

The County Council have no scheme providing for general nursing in the home. This work is undertaken by the various District Nursing Associations, all of which are affiliated to the Lincolnshire Nursing Association.

There were 44 District Nurse Midwives employed by 36 Nursing Associations in Kesteven during 1940, of whom 22 acted as Infant Health Visitors, Tuberculosis and School Nurses.

CLINICS AND TREATMENT CENTRES.

Infant Welfare Centres.

The Cranwell Infant Welfare Centre which has been run by the County Council in co-operation with the R.A.F. medical staff had to be closed down for the war period. The eight Infant Welfare Centres already established in the county continued throughout the year. The infant mortality rate in the County was 47.78 per 1,000 births, being an increase on the low figure of 41.71 per 1,000 births, reached in 1939.

During the year 1940, it has been possible to establish 6 new Infant Welfare Clinics at some of the more important rural centres of population, viz., at North Hykeham, Billingborough, Market Deeping, Corby, Claypole and Bassingham. This substantial development of the Council's Maternity and Child Welfare Scheme will ensure more equal distribution of the benefits of the Scheme throughout the County.

At the Lincoln Infant Welfare Centre the number of Kesteven children on the register on 31st December, 1940, was 28. 139 attendances were made during the year. The cost of extra nourishment or special treatment given to these cases was by arrangement refunded by the County Council.

Address of Centre	Sessions held		Medical consultations held	Average attendance of children
	Day	Frequency		
Billingham— Church Room	Wednesday	2nd and 4th Wednesday in month	Every session	16
Bourne— North Street	Thursday	1st and 3rd Thursday in month	Every session	40
Heckington— Village Hall	Tuesday	3rd Tuesday each month	Every session	14
Metheringham— Reading Room	Wednesday	1st and 3rd Wednesday each month	Every session	31
Sleaford— Lafford House	Monday	Weekly	1st and 3rd Monday in month	47
Stamford— Broad Street	Friday	Weekly	1st and 3rd Friday in month	31
Waddington— Methodist Schoolrm.	Tuesday	1st Tuesday each month	Every session	34
Heighington— Station Road Methodist Hall	Thursday	2nd Thurs- day in each month	Every session	37
North Hykeham— Wesleyan Schoolrm.	Tuesday	2nd and 4th Tuesday in month	4th Tuesday in month	} Opened Nov. 1940.
Billingham— Forresters' Hall.	Tuesday	1st Tuesday in month	Every session	
Market Deeping— Schoolroom.	Monday	2nd and 4th Monday in month	2nd Monday in month	
Claypole— Village Hall.	Tuesday	2nd Tuesday in month	Every session	
Bassingham— Village Hall.	Tuesday	2nd Tuesday in month	Every session	
Corby— Church Room.	Friday	4th Friday in month	Every session	

Orthopaedic Clinics.

These clinics remained the same as in 1939, and the following are particulars of the work carried out in 1940, excluding work amongst school children for which see the report of the School Medical Officer.

No. of patients on Register	1.1.40	...	...	22
„ „ attendances	...	...	...	335
„ „ treatments	...	...	...	559
„ „ new cases during the year	...	...	...	40

Classification of Disabilities.

Poliomyelitis	...	...	...	...	...	5
Rickets	...	...	...	...	...	5
Paralysis	...	...	...	...	...	2
Flat Feet	...	...	...	...	...	1
Other Foot deformities	...	...	...	...	...	11
Postural Deformities	...	...	...	...	...	16
Tuberculosis:—Adenitis	...	...	...	...	...	3
Surgical	...	...	...	...	...	10
Adenitis—Non T.B.	...	...	...	...	...	4
Other Defects	...	...	...	...	...	17

Eight cases were referred for hospital treatment.

Venereal Disease Clinics.

The following is a statement of the number of cases in Kesteven dealt with during 1940 for the first time and found to be suffering from :—

	Grantham	Peter- borough	Ketton	Nottm.	Total 1940	Total 1939
Syphilis	8	1	2	—	11	9
Soft chancre	—	—	—	—	—	—
Gonorrhoea	25	—	—	—	25	32
Conditions other than Venereal	22	2	1	1	26	15
Total number of attendances	1553	161	134	11	1859	2149

These figures show an increase in the incidence of cases of Syphilis and Conditions other than Venereal, but a diminution of Gonorrhoea. Up to the end of the year no evidence was forthcoming that these diseases were spreading as a result of war conditions.

The number of specimens from persons attending Grantham Treatment Centre which were sent for examination to an approved laboratory was 339.

Other Clinics.

The School, Dental and T.B. Clinics continued to function as stated in my previous annual reports. The facilities at these clinics were available to all evacuees who came into the county. The annual report of the School Medical Officer gives full details of the evacuation and the work of the School Medical Services.

HOSPITALS.

No change has occurred in the constitution of the voluntary hospitals in the administrative county.

Grantham Hospital.

The following is a classification of the cases treated in the beds reserved by the County Council during 1940.

Maternity	...	...	...	...	...	...	86
Tonsils and Adenoids	...	...	...	...	...	...	92
Orthopaedic	...	...	...	...	...	...	14
Tuberculosis	...	...	...	...	...	...	20
Renal Tuberculosis	...	...	...	...	...	...	2
T.B. adenitis	...	...	...	...	...	...	3
Osteomyelitis	...	...	...	...	...	...	1
Abscess L. hip	...	...	...	...	...	...	1
Haematoma	...	...	...	...	...	...	2
Vaginal Cyst	...	...	...	...	...	...	1
Circumcision	...	...	...	...	...	...	1
Hernia	...	...	...	...	...	...	3
Epithelioma	...	...	...	...	...	...	1
Lacerated Nose	...	...	...	...	...	...	1
Feeding Difficulties (Infant)	...	...	...	...	...	...	1
Osteoma of Scapula	...	...	...	...	...	...	1
Inflammation of Left Thigh	...	...	...	...	...	...	1
Isch. Rectal Cystic Change	...	...	...	...	...	...	1
Observation	...	...	...	...	...	...	1
Carcinoma	...	...	...	...	...	...	2
Dyspepsia	...	...	...	...	...	...	1
Cont. Bowel	...	...	...	...	...	...	1
Obstruction	...	...	...	...	...	...	1
Melena	...	...	...	...	...	...	1
Thyrototoxicosis	...	...	...	...	...	...	1
Septic wounds	...	...	...	...	...	...	1
Salpingitis	...	...	...	...	...	...	1
Mastoiditis	...	...	...	...	...	...	1
Diabetes	...	...	...	...	...	...	1
Influenza	...	...	...	...	...	...	1
Marasmus	...	...	...	...	...	...	1
Ranula	...	...	...	...	...	...	1

MENTAL DEFICIENCY ACTS, 1913-1938.

Ascertainment.

Mental Defectives are ascertained by Medical Officers, School Nurses and Health Visitors, and the Relieving Officers. At the end of the year the number of cases on the register was 491.

Of this number 88 cases were under statutory supervision at the 31st December, 1940, 129 cases were in institutions, and 21 were on licence from institutions, while 2 were under guardianship.

Institutional Accommodation.

The Lincolnshire Joint Board for the Mentally Defective is responsible for institutional provision for the care of Mental Defectives in Lincolnshire. The various institutions administered by this Board are graded to suit the classification of patients.

MIDWIVES.

The arrangements for the supervision of midwives remain as before. One hundred and fifteen routine inspection visits were made by the non-medical supervisor, Miss S. E. Morris, M.B.E.

The Council's Ante-Natal examination scheme is much appreciated by the midwives and abnormalities discovered have been speedily dealt with and prompt hospital treatment obtained where necessary. The abnormalities found were :—

Small Measurements	...	...	...	...	...	6
Pelvic Contractions	...	...	...	...	...	4
Albuminaria	...	...	...	...	...	7
High Blood Pressure	...	...	...	...	...	2
Anaemia	...	...	...	...	...	9
Cardiac Diseases	...	...	...	...	...	3
Malpresentations	...	...	...	...	...	5
Bad Home Conditions	...	...	...	...	...	5
Vaginal Discharge	...	...	...	...	...	5
Other Conditions	...	...	...	...	...	4
Treated in Hospital	...	...	...	...	...	15

Some statistics relating to the work of the midwives are given below :—

Number of cases attended, no doctor having been engaged for the confinement	...	...	803
Number of these which were primiparas	...	...	196
Number of miscarriages	...	...	36
Number of maternal deaths	...	...	—
Number of Ante-natal visits paid during the year	...	...	3236
Number of visits paid to Midwifery cases	...	...	13754
Number of Maternity cases attended	...	...	464
Number of visits paid to Maternity cases	...	...	7521
Number of District Nurses who notified their intention to practice	...	...	54
Number of Private Midwives who notified their intention to practice	...	...	6

MATERNITY AND NURSING HOMES.

The arrangements for the registration of nursing homes as required under sections 187 to 194 of the Public Health Act, 1936, continue as before. There were four nursing homes on the register on 31st December, 1940. Three provided for maternity and other cases and one for other cases.

Exemptions from registration were made in respect of one cottage hospital and two general hospitals.

Ten visits of inspection were made during the year to nursing homes on the register.

INSPECTION AND SUPERVISION OF FOOD.

Milk and Dairies Order, 1926.

During 1940, 21 samples were taken. In one case evidence of Tuberculosis was found and the necessary action taken.

I am indebted to the Divisional Veterinary Inspector of the Ministry of Agriculture and Fisheries for the following information :—

Milk and Dairies (Consolidation) Act, 1915, Section 4.

“Only one complaint under Section 4 of the above Act was dealt with. In this case it was thought the offending cow had been sold for slaughter between the date on which the sample was taken and the date on which the examination of the herd was carried out. Bulk samples of milk from the herd on the latter occasion were found negative for Tubercle Bacilli on biological test.”

Tuberculosis Order of 1938.

“During the year, 144 cases of suspected Tuberculosis were reported. Of these 69 were found affected with Tuberculosis within the meaning of the Order and were slaughtered. These figures show a decrease of approximately 25 per cent. compared with the year 1939.”

Anthrax Order of 1938.

“Only two outbreaks of Anthrax were discovered amongst farm stock during the year. In one of these, the carcase of a cow which had died or was about to die of Anthrax was dressed by the owner and removed to Lincoln Abbatoir where the disease was discovered, but fortunately no serious developments took place as the result of this.”

Milk (Special Designations) Order, 1936.

59 Accredited Licences and 5 Tuberculin Tested Licences were renewed on 1st January, 1941, against fifty-five Accredited and four Tuberculin Tested Licences granted on 1st January, 1940.

During 1940, 54 samples of milk were taken for bacteriological examination. Of these 32 were satisfactory and 22 unsatisfactory.

In the Borough of Grantham, which is a separate Authority for this purpose, 7 informal samples of pasteurised and 4 of accredited milk were sent for bacteriological examination.

The Divisional Veterinary Inspector of the Ministry of Agriculture and Fisheries has supplied me with the following information :—

“During the year 1940 a routine clinical examination was carried out by the Veterinary staff of this department of 211 herds licensed for the production of Accredited Milk. The total number of cattle involved was 4,724, and 3 animals showing typical symptoms were discovered and dealt with under the Tuberculosis Order. A certain number of cases of Mastitis were found but these were confined to one or two farms and no extensive outbreaks have occurred. The general standard of health of the cattle was very high.

In addition, a clinical examination of 775 non-designated dairy herds was carried out during the year. These contained 6,135 cattle. 16 clinical cases of Tuberculosis were found and dealt with under the Tuberculosis Order, but very few cases of Mastitis or other conditions likely to affect the milk were discovered.

During the year tuberculin tests were carried out on 4 herds holding Tuberculin Tested licences. In only 2 cases were any reactors found and these were immediately eliminated from the herds. The proportion of reactors was not high.”

Food and Drugs Act, 1938.

The County Council administers the provisions of this Act in the Administrative County.

The number of samples submitted to the Public Analysts during 1940 totalled 381, the details being as follows :—

Milk	219	Flowers of Sulphur ...	2
Margarine	12	Gin	2
Jam	7	Meat Paste	2
Bread	6	Tea	2
Butter	6	Tincture of Iodine ...	2
Cheese	6	Whisky	2
Coffee	6	Sweet Spirits of Nitre	2
Flour	4	Ammoniated Quinine	
Flour, Self Raising ...	4	Tablets	1
Lard	4	Aspirin	1
Sausages	4	Brandy	1
Beer	3	Calomel	1
Cocoa	3	Digestive Tablets ...	1
Confectionery	3	Mustard	1
Cream	3	Port	1
Potted Meat	3	Rum	1
Vinegar	3	Sherry	1
Dripping	2	Sugar	1
Epsom Salts	2	Veal Ham and Tongue	1
Eucalyptus Oil	2	Other Articles ...	54

Twenty-seven samples of milk and 2 of potted meat were found to be adulterated.

The following table shows the action taken in the cases of unsatisfactory samples :—

No. of Sample	Article	Report of Public Analyst.	Action Taken
BK. 8	Milk	20% Deficient in Fat.	Dismissed.
BK. 15	Potted Meat	15% Starchy Matter.	Warned.
BK. 19	Milk	9% Extraneous Water.	Fined £1.
BK. 35	Milk	16% Deficient in Fat.	Dismissed P.O. Act, Pay 4/- costs.
SK. 471	Milk	3% Deficient in Fat.	Vendor Warned.
SK. 488	Milk	6% Deficient in Fat.	Vendor Warned.
BK. 45	Milk	6% Deficient in Fat.	Warned.
SK. 492	Milk	10% Deficient in Fat.	Vendor Warned.
SK. 505	Milk	9% Deficient in Fat.	Vendor Warned.
SK. 518	Milk	4% Deficient in Fat.	Vendor Warned.
BK. 82	Potted Meat	Contains 10% Starchy Matter	Warned.
BK. 117	Milk	4% Extraneous Water.	Warned.
BK. 125	Milk	8% Deficient in Fat.	Warned.
BK. 145	Milk	2½% Extraneous Water.	Dismissed.
BK. 148	Milk	30% Deficient in Fat.	Fined 5/-.
BK. 149	Milk	8% Extraneous Water.	Dismissed. Pay 4/- costs.
K. 59 (Informal)	Milk	23.33% Deficient in Fat.	Vendor Warned.
K. 60 (Informal)	Milk	33.33% Deficient in Fat.	Vendor Warned.
K. 65	Milk	16% Deficient in Fat.	Vendor Warned.
K. 71	Milk	4% Deficient in Fat.	Vendor Warned.
K. 72	Milk	2% Deficient in Fat.	Vendor Warned.
K. 73	Milk	4% Deficient in Fat.	Vendor Warned.
K. 74 (Informal)	Milk	3.33% Deficient in Fat.	Vendor Warned.
K. 76 (Informal)	Milk	3.33% Deficient in Fat.	Vendor Warned.
K. 79 (Informal)	Milk	10% Deficient in Fat.	Vendor Warned.
K. 80 (Informal)	Milk	16% Deficient in Fat.	Vendor Warned.
K. 120 (Informal)	Milk	13.33% Deficient in Fat.	Vendor Warned.
K. 126 (Informal)	Milk	13.33% Deficient in Fat.	Vendor Warned.
K. 131 (Informal)	Milk	6.66% Deficient in Fat.	Vendor Warned.

Borough of Grantham. Fourteen samples of Pasteurised and 8 of Accredited Milk were taken in connection with the Milk (Special Designations) Order, 1926. Sixty-four samples of milk were submitted to the Public Analyst during 1940, 4 of which were formal samples; the remainder were informal samples.

Fifty-one were genuine and 13 deficient in fat. The action taken in respect of these 13 samples, K59—K131, is stated in the previous table.

PREVALENCE AND CONTROL OVER INFECTIOUS DISEASES.

During 1940, 1216 notifications of infectious diseases were received in the county as a whole, against 355 in 1939. This increase is accounted for by the large numbers of measles notification received. Measles and whooping cough were included in the list of notifiable diseases as from the 9th February, 1940.

Table showing the Distribution of Notified Cases of Infectious Diseases in Rural and Urban Districts.

SANITARY DISTRICT	Total No. notified	Scarlet Fever	Diphtheria	Measles	Acute Pneumonia	Cerebro Spinal Fever	Acute Poliomyelitis	Acute Encephalitis	Dysentery	Ophthalmia Neonatorum	Puerperal Pyrexia	Enteric Fever	Erysipelas
Bourne U.D. ...	201	57	32	99	10	..	..	..	1	..	1	..	10
Grantham M.B. ...	91	15	5	33	17	8	1	..	..	1	3	1	7
Sleaford U.D. ...	174	5	9	141	14	1	..	..	..	..	3	1	..
Stamford M.B. ...	270	44	2	203	5	3	..	..	2	..	10	..	1
Aggregate of Urban Districts	736	121	48	467	46	12	1	..	3	1	17	2	18
East Kesteven R.D.	121	21	4	82	10	..	..	2	..	..	1	..	1
North Kesteven R.D.	183	14	..	150	11	1	1	..	..	..	3	..	3
South Kesteven R.D.	134	38	29	46	10	..	1	..	..	1	..	..	9
West Kesteven R.D.	42	15	2	12	6	2	1	..	..	..	3	..	1
Aggregate of R.D.'s.	480	88	35	290	37	3	3	2	..	1	7	..	14
Totals for whole County	1216	209	83	757	83	15	4	2	3	2	24	2	32
Rate per 1,000 living	11.04	1.90	0.75	6.87	0.75	0.14	0.04	0.02	0.03	0.02	0.22	0.02	0.29

The District Councils are responsible for immunisation of children against diphtheria, and schemes arising from Circular 2230 of the Ministry of Health are now in operation in all urban and rural districts in the County.

The schemes commenced in late 1940 or early 1941, and it is understood that the public response has proved to be very satisfactory. Reference has been made in previous reports to the inadequate amount of isolation hospital accommodation provided in the western half of the County, roughly in the area served by Grantham, West and North Kesteven. It will be recalled that the scheme to provide isolation hospital treatment of the more severe type of case, e.g., diphtheria, enteric fever, dysentery, cerebro-spinal fever, etc., by the erection of a cubicle block at the Grantham Isolation Hospital was deferred at the outbreak of hostilities. The existing block at this institution is only suitable for the reception of one infectious disease at a time, scarlet fever being the disease usually dealt with. Under prevailing war-time conditions of evacuation, over-crowding, and unsatisfactory housing conditions, as well as the general mobility of sections of the population, the risk of epidemic diseases occurring is greatly increased.

The District Councils are the authorities for the prevention, control and hospital treatment of infectious diseases, and it is difficult to see how these duties are to be satisfactorily carried out in the absence of adequate isolation hospital accommodation.

An increased demand for bed accommodation for infectious cases might be met by the South Kesteven Isolation Hospital near Bourne. It is recognised however, that the provision which this Hospital makes for the eastern section of the County is adequate for this area, but not for the County as a whole. In the event therefore of a widespread epidemic occurring the likelihood of accommodation at the South Kesteven Isolation Hospital being available to neighbouring authorities is remote. It is desirable therefore that emergency alternative hospital accommodation for infectious diseases should be arranged by the authorities serving the north and western sections of the County.

Dr. W. A. Hawes, M.O.H., Stamford, in his annual report for 1940 refers to the difficulty of providing adequate isolation in billets for evacuees with minor infectious diseases.

He has therefore earmarked Barn Hill House, Stamford, as a minor infectious diseases hospital to serve Stamford and surrounding areas in Kesteven, Soke of Peterborough and Rutland. The transport under this scheme will be provided by the Kesteven County Council who have an emergency ambulance available for this purpose.

Ophthalmia Neonatorum.

Particulars of cases during 1940 :—

Notified	Cases		Vision unimpaired	Vision impaired	Total Blindness	Deaths
	At Home	Hospital				
1	1	...	1	...	...	...

WELFARE OF THE BLIND.

The work of the Kesteven Blind Society has been carried on, on the lines indicated in my previous annual reports.

I am indebted to Mrs. Cyril Greenall, Hon. Secretary of the Kesteven Blind Society, for the following report for the year ended 31st March, 1941 :—

Registration.

“Sixteen cases have been registered during the year, including 1 removed from the register in 1939 but now re-registered.

“Deaths, 18; Left the Area, 1; Come to the Area, 1; Total number of Registered Blind Persons, March 31st, 1941, 187, a decrease of 3 on the previous year.

“Fourteen Blind Evacuees have come to the area, 7 have now returned to their homes. Allowances have been paid to 8 on behalf of their own local authority.

“Two Blind Children are at special schools. The trainee at Nottingham completed his training in machine knitting at the end of the year, and will be included in the Nottingham Institution's Home Workers Scheme, so bringing the number of Home Workers to 6, 4 of whom are in the Nottingham School. Ten other blind persons are more or less regularly employed, but their work has been handicapped by the difficulty in procuring materials.

“Miss Ross resigned at the end of the 1939-40 year and Miss Sandwith was appointed in her place and started work for the Society on June 1st, 1940 ; her work has been very satisfactory. She had no car of her own, so the Society purchased one, using their small invested funds.

“Regular allowances in cash or kind have been paid to an average of 75 persons, and the First Grade Home Workers have received augmentation of their earnings.

“A further grant of £500 per annum has been made to the Society by the County Council, but unfortunately this does not

suffice to bring the incomes of the blind up to that of pensioners eligible for the supplementary pensions. The present conditions make it most difficult to raise voluntary funds, indeed several of our regular subscribers have been obliged to reduce their subscriptions, and in some cases to withdraw them altogether. The refusal of permission to hold the usual Flower Day in Grantham was a very serious loss to our blind people.

“We have 3 blind persons in Homes for the Blind, 1 in a Mental Hospital, and 9 men and 6 women in local P.A. Institutions.”

TUBERCULOSIS.

The following figures show the position of the County as regards existing cases of tuberculosis at the end of the year 1940 :—

<i>Pulmonary</i>			<i>Non-Pulmonary</i>			<i>Total Cases</i>
<i>Male</i>	<i>Female</i>	<i>Total.</i>	<i>Male</i>	<i>Female</i>	<i>Total.</i>	
163	180	343	86	92	178	521

Notifications.

Particulars of new notifications of tuberculosis and of all deaths from the disease during 1940 are shown below.

Age Period	New Notifications including Supplemental Return				Deaths			
	Pulmonary		Non-Pulm.		Pulmonary		Non-Pulm.	
	M	F	M	F	M	F	M	F
Under 1 year ...	..	..	..	1	1	..	..	1
1 — 5 years	..	..	4	3	..	..	..	1
5 — 15 „	..	..	4	7	..	..	1	..
15 — 25 „	10	5	7	4	} 12	11	1	2
25 — 35 „	15	7	3	5				
35 — 45 „	6	2	..	3	} 7	2	..	1
45 — 55 „	4	..	..	..	
55 — 65 „	3	..	..	..	
65 and upwards	1	..	..	1	..	..	..	..
TOTALS	39	14	18	24	20	13	2	5

Prevalence of Tuberculosis.

The number of new cases of tuberculosis notified during the year was 95, of which 53 were suffering from pulmonary tuberculosis and 42 from other forms of this disease. The corresponding figures in 1939 were 115, 71 and 44 respectively.

The total number of cases on the dispensary register at the end of the year was pulmonary 343 and non-pulmonary 178. The number of patients who attended the dispensary was 384 and the number of attendances was 598.

There were 49 consultations with medical practitioners and the number of domiciliary visits to patients was 305.

185 specimens of sputum were examined and 68 X-ray examinations were carried out. The number of patients receiving institutional treatment during the year numbered 75.

Provision is made for the diagnosis, supervision and treatment of suspected and declared cases of tuberculosis at the Council's Tuberculosis Dispensaries at Sleaford and Grantham. The Assistant Tuberculosis Officers are also Assistant School Medical Inspectors and Infant Welfare Officers. This arrangement is most advantageous as it allows close co-ordination of work. It is for example, desirable that the doctor who is dealing largely with and becomes experienced in diseases of the chest should also have as another duty the examination of children of school and pre-school age. Cases of incipient tuberculosis may thus be detected in their earliest stages when they are generally most amenable to cure. Moreover, records of pre-school examinations are passed on for the information of the school medical inspector; these are subsequently retained for a period of years after the child leaves school for the information of the Tuberculosis Officer and medical practitioners.

Cases of tuberculosis are largely referred to the Council's dispensaries as a result of statutory notification by medical practitioners, but many others, especially in the "suspect" category, are discovered through the school medical service.

When the diagnosis is completed, the dispensary continues to supervise the progress of the patient before and after treatment in a sanatorium. In suitable cases extra nourishment may be provided. Ambulant cases attend the dispensary at specified times or are seen at their homes, and most are encouraged to do graded work which is of value in their treatment.

Artificial Pneumothorax.

An A.P. Session is held at Sleaford Dispensary each Monday. The inductions of A.P. are usually undertaken as part of sanatorium treatment, and after discharge from sanatorium the collapse therapy is continued at the dispensary. The chests of patients are screened by X-rays at regular intervals. This method of putting the lung at rest, by air pressure, i.e., by injecting air into the pleural cavity, is having good results in selected cases. When the diseased lung is immobilised, healing is promoted. During the year four cases with active pulmonary tuberculosis were found after treatment to be quiescent, and the lungs were allowed to

re-expand. These patients are now in regular employment. At present fourteen patients are having A.P. treatment; ten do normal work and four part-time work. 244 artificial pneumothorax refills were carried out at the Sleaford Tuberculosis Dispensary.

Light Therapy.

Satisfactory results continued to be obtained from local and general light therapy given to orthopaedic cases and to children referred from the dispensaries to the Council's ultra-violet light clinics.

AIR RAID PRECAUTIONS AND CIVIL DEFENCE.

The County Council is the scheme making authority in respect of the Air Raid (General) Precautions Scheme for the County. The working out of all Civil Defence Emergency Medical arrangements was delegated to the County Medical Officer, who has been designated Director of Civil Defence Medical Services, and Agent of the Ministry of Health.

The main functions of these services fall under three heads, viz. :—

- (a) Organisation and Administration.
- (b) Training, and
- (c) Operations.

The following is a summary of the work accomplished, with a note of any material changes which have occurred in 1940.

First Aid Posts.

The Ministry of Health have approved the establishment of five fixed first aid posts, three of which are in clinic premises in Grantham, Sleaford and Bourne, owned or leased by the County Council, and two in premises owned by and adjoining the Voluntary Hospitals in Grantham and Stamford. This arrangement has proved to be convenient, and satisfactory in actual operation.

Mobile First Aid Posts.

The Ministry of Health authorised three Mobile Units, one each in Grantham, Stamford and Sleaford. The theory of these travelling first aid posts is that they shall proceed to any part of a rural district which has been "blitzed" and requires the services of a doctor, nurse and members of the V.A.D. The Mobile Post carries personnel and equipment to the place indicated and treatment is carried out in a suitable adjoining premises. A Mobile Aid Post may also be used in an urban district to reinforce existing urban first aid services. Apart from regular practices, and co-operation exercises, none of these units has been tested in actual operations, but in the largest urban districts plans have been

made to select in advance a suitable premises in each ward to work in conjunction with the Mobile Unit.

The Medical Practitioner in charge of each first aid post is paid, according to the rule of the Ministry of Health, a retaining fee of £21/0/0 a year. This sum is in respect of allocation and specialised training of personnel for which the medical practitioner is responsible. In addition, the medical practitioner is entitled to claim remuneration on a sessional basis in respect of professional services rendered in an air raid. Mr. Dalton, the Deputy County Surveyor, acts on the staff of the County M.O.H. as honorary Ambulance Officer. He has rendered valuable service during the year and submits the following information in relation to Emergency Ambulances, and cars for stretcher parties and sitting case cars.

“Report on Casualty Services Vehicles as at 31st December, 1940.

Ambulances.

The authorised number of full time ambulances at the end of 1940 was 50 per cent. of the establishment and consisted of 23 car conversions and one bus. During the year 9 of the 10 buses and vans had been replaced by converted cars.

The other 50 per cent. of establishment comprises tradesmen's vehicles which are not readily available as, even if at their depots, they are usually full up with provisions, etc., which have to be unloaded and the stretcher racks fitted before they can report for duty.

The position with regard to ambulances is summarised below :

District.	Full Time.	Part Time.
Grantham	8	9
Stamford	5	5
Sleaford	6	8
Bourne	2	3
North Kesteven	3	3

Cars for F.A. Parties and Sitting Cars.

I stated in my last report that it may be found necessary to purchase a percentage of cars to be maintained on a full time basis owing to the non availability of part time vehicles at short notice. This position has been accentuated and the Committee at its meeting on the 27th November, 1940, decided to proceed with the purchase of 10 vehicles to be adapted for the use of First Aid Parties and 7 of these had been purchased by the end of the year.

Cars for Sitting Cases are still provided on a voluntary basis and here again the efficiency of the service is dependent on the availability of the volunteers when required.

The position with regard to F.A. Party and Sitting Cars at the end of 1940 was as under :—

District.	Establishment.	F.A.P. Cars.	Sitting Cars.	Total.
Grantham ...	24	20	28	48
Stamford ...	12	12	9	21
Sleaford ...	18	13	14	27
Bourne ...	4	2	5	7
North Kesteven	6	5	5	10
	—	—	—	—
	64	52	61	113 "
	—	—	—	—

The following table shows the number of Aid Posts, Mobile Units, Civil Defence Ambulances, Cars for Sitting Cases and First Aid (stretcher) Parties in the area of each Local Authority.

Local Authority	First Aid Posts	Mobile Units	First Aid Points	Ambulances	Cars for Sitting Cases	Stretcher Parties
Grantham M.B. and West Kesteven R.D.	2	1	5	17	28	12
Stamford M.B.....	1	1	2	10	9	6
South Kesteven R.D. and Bourne U.D.	1	—	5	5	5	2
Sleaford U.D. and East Kesteven R.D.	1	1	5	14	14	9
North Kesteven R.D.	—	—	5	6	5	3

Distribution of Equipment and Stores.

All equipment and stores for the emergency first aid services, and certain supplies for class 1 (Voluntary) Hospitals, and Civil Defence (County Council) Hospitals are provided by the Ministry of Health without charge under the E.M.S. Scheme, the County Health Department acting as the receiving and distributing agent.

The classes of equipment which have already been distributed are as follows :—

- (a) **Drugs, splints, dressings, etc., for aid posts and mobile units.** The complete amount of such stores and equipment had not been received by the outbreak of war, and incomplete issues were therefore made as an emergency measure in September, 1939. As the equipment was not complete Local Authorities were instructed to make up deficiencies by local purchase.
- (b) **Additional Stores for E.M.S. Hospitals.** The scheme approved by the Ministry of Health for the provision of beds for air raid casualties, so far as Kesteven is concerned, involved the use of existing Voluntary Hospitals in Grantham, Bourne and Stamford, the expansion of the Ward accommodation at the Grantham, Stamford and

Sleaford County Institutions, and the adaptation and use of the Asylums at Rauceby and Bracebridge. The Asylum accommodation was subsequently handed over to the R.A.F. and Army respectively as General Hospitals for the Services.

The extra accommodation in these above-mentioned Voluntary Hospitals and Public Assistance Institutions was provided in part by the crowding of beds, and in part by the adaptation of other accommodation, e.g., day rooms which could be spared as ward accommodation. The re-constituted County Institutions were re-named "Civil Defence Hospitals." Extra equipment had to be provided ; such equipment included beds and bedding, ward furniture, stretchers, blankets, drugs, dressings and surgical instruments and appliances.

- (c) **Stretchers and Blankets for Ambulances and Stretcher Parties** were issued to all local authorities.
- (d) **Stocks of Tetanus Anti-Toxin** were also received. Part was held in central reserve and the bulk distributed to the emergency hospitals and first aid posts.
- (e) **Sandbags** for the protection of municipal and voluntary hospitals, included in the Emergency Hospital Scheme.
- (f) **Protective Equipment for Hospitals**, including protective clothing, gum boots, hoods, gloves, steel helmets and respirators. This equipment has been issued as supplies were made available.
- (g) **Equipment for Stretcher Parties, Wardens Posts, etc.** This was sent to the County Council by the Home Office, being issued through the local stores set up by the A.R.P. Department. In order to deal effectively with all stores a—d respectively, the County M.O.H. set up a central store, administered by his department at the County Institution, Sleaford. At this store all consignments were received from the Government, classified and issued to hospitals and local authorities. This store also acts as the County reserve of drugs and dressings for hospitals and equipment for aid posts, Mobile units and E.M.S. hospitals.

Voluntary First Aid Posts and Points.

In addition to the eight Official Fixed and Mobile First Aid Posts, and twenty-two First Aid Points, provided by the Government, it was possible for the County M.O.H. and his staff voluntarily to undertake the first aid training of large numbers of persons in the rural districts. It was also possible to obtain through voluntary effort suitable premises as dressing stations and a wide range of first aid equipment. As a result a considerable number of unofficial first aid posts and points have been organised, many

of which can be staffed by medical practitioners, trained nurses, and trained personnel. This movement to provide the rural districts with additional first aid post services on a voluntary basis continued throughout 1941, and a full report on this subject will be provided in my Annual Report for 1941.

Civil Nursing Reserve.

The Civil Nursing Reserve is a body of female volunteers including trained and assistant nurses not already engaged on work of national importance, and nursing auxiliaries, who have been trained in first aid, home nursing and hospital nursing, through arrangements made by the County M.O.H. The Organisation is administered centrally by the Ministry of Health, and by the Regional Nursing Organisation, while locally, in the County of Kesteven the administration is undertaken by the County Medical Officer of Health.

The Civil Nursing Reserve is regarded as a reservoir for staffing the first aid services, and emergency hospitals in times of need. For this purpose the members are classified into the categories of "Mobile" and "Immobile." The mobile members are those willing to serve on a whole time basis, wherever they are needed. After local training, their subsequent posting and supervision are the function of the Regional Nursing Officer. In consequence the effective local Register of the Civil Nursing Reserve, consists only of the list of "Immobile" trained and assistant nurses, and nursing auxiliaries.

On the 31st December, 1940, there were 355 names on the Civil Nursing Reserve List, most of them being allocated to first aid posts and points. Others are employed in the Voluntary and Civil Defence Hospitals.

Casualty Bureau.

The Casualty Bureau established in the County Health Department serves the Administrative Counties of Kesteven and Soke of Peterborough, and the City of Peterborough. The functions of the bureau are mainly the recording of air raid and war casualties, liaison with all emergency medical services, hospitals, voluntary and municipal in the area referred to above, and the transmission of information to the Ministry of Pensions, and the Service Departments.

Stamford Civil Defence Hospital.

This is a separate hospital block, organised with the consent of the Ministry of Health and the County Council within the premises of St. George's Home, Stamford. The local administrative staff consists of the Master and Matron who act in conjunction with the County Health Department, in relation to such

matters as admissions and discharges of patients, staffing, equipment, drugs and medical stores. The nursing staff, cleaners, etc., who are necessary to staff this hospital are provided by agreement with the Ministry of Health ; the nursing staff being recruited through the local or regional Civil Nursing Reserve machinery.

The visiting medical staff is provided locally in Stamford. The County Medical Officer, as agent of the Ministry of Health, is in full charge of these arrangements.

The Stamford Civil Defence Hospital was open during the year for reception of military sick, 67 Service cases being admitted in January, 1940. The Hospital was again in use in October, 1940, when two medical cases from the Army were admitted. At that time, however, a request was made by the Regional Officer of the Ministry of Health to provide an emergency maternity home to cater for parties of expectant women who were to be evacuated from London to Stamford. A suitable layout having been devised within the Stamford Civil Defence Hospital, and the necessary fixtures, ward equipment, drugs, and medical stores installed, accommodation for 40 maternity beds was provided within a very short period. In this re-organisation of the Civil Defence Hospital valuable assistance was obtained from the Regional Medical Officer of the Ministry of Health, and the County Architect.

The Stamford Emergency Maternity Home was opened on 26th October, 1940, to provide accommodation for a party of 80 expectant women. The majority of these women were billeted in the town, and admitted to the home shortly before confinement. In the meanwhile a special weekly ante-natal session was held at the County Council's Broad Street Clinic in order to supervise their progress. A staff of 9 midwives was supplied to the Maternity Home by the London County Council, Dr. Dale being the Medical Officer in Clinical charge of the Home, and the Ante-natal Clinic. Arrangements were made to admit any cases of puerperal or other infection to Leicester City Isolation Hospital, and Dr. T. C. Clare was appointed Obstetric Consultant with the approval of the Ministry of Health. The Maternity Home closed on the 13th December, 1940.

Rest Centres.

A scheme administered by the Public Assistance Officer to provide Rest Centres in the more vulnerable parts of the County, for persons "bombed out" of their houses was established in 1940. Detailed arrangements for the feeding, sleeping and general welfare of these persons were worked out. The County Public Health Department made arrangements for securing the attendance of medical practitioners and nurses at rest centres in cases of accident or illness.

Evacuation.

A full report upon the evacuation scheme as it affected Kesteven in 1940 was given in my Annual Report as School Medical Officer.

Kesteven, having been scheduled as a reception area for evacuees under the Government Scheme for dispersal of school children, mothers and young children from target cities, the following arrangements became operative :—

Between the 7th July and 23rd October, 1940, 1195 children and 156 adults arrived from a bombed city in an adjacent county. All children were medically inspected on arrival at the railheads by the School Medical Service. Those who were found to be unfit for billeting upon private householders, and those who afterwards developed conditions making them unsuitable to remain in billets were referred for treatment in the Civil Defence Hospitals in Sleaford and Grantham, and in the Hostels at Bourne and at Stamford.

During the year, 150 evacuees were dealt with in this way. It can be said that this work of medically inspecting, segregating and treating large numbers of evacuees, in addition to ordinary duties has added a burden of responsibility on the School Medical Service which has been efficiently discharged.

The dispersal of evacuees amongst the various institutions referred to above was necessary owing to the limited amount of accommodation (28 beds) available at the County Hostel at Bourne. It seems clear that in view of the occurrence of outbreaks of minor ailments, particularly of skin diseases, amongst these evacuees it will be necessary to secure additional hostel accommodation. This course would seem to be in the interest alike of the evacuees and their guardians.

It is not possible to give a report upon the public service rendered by the Civil Defence Medical Organisation under air raid conditions. Valuable experience of such conditions has been obtained. This account however, must necessarily be deferred until the end of the war, as the dates, locations and scale of the raids are of a confidential character.

Table I.—Vital Statistics.

DISTRICT.	Popu- lation	No. of Births *	Birth Rate	Number of Deaths	Death Rate.			Illegiti- mate Births * †	No. of Births †	Deaths under 1 year	Infant Mortality Rate
					Crude Rate	Compar- ability Factor	Cor- rected Rate				
Bourne	4,907	75	15.28	63	0.90	11.56	1	75	2	26.67	
Grantham	20,970	359	17.12	305	0.93	13.53	21	361	19	52.63	
Sleaford	7,753	117	15.09	99	0.89	11.36	6	119	4	33.61	
Stamford	10,430	144	13.81	131	0.94	11.81	6	165	7	42.42	
Total Urban Districts...	44,060	695	15.77	598	0.92	12.49	34	720	32	44.44	
East Kesteven	16,180	281	17.37	200	0.94	11.62	11	281	16	56.94	
North Kesteven... ..	21,650	342	15.80	284	0.86	11.28	17	342	15	43.86	
South Kesteven	13,390	199	14.86	199	0.84	12.48	10	199	10	50.25	
West Kesteven	14,880	236	15.86	230	0.86	13.29	16	237	12	50.63	
Total Rural Districts...	66,100	1,058	16.01	913	0.87	12.02	54	1,059	53	50.05	
Total Administrative County	110,160	1,753	15.91	1,511	0.89	12.21	88	1,779	85	47.78	

* Registrar General's figure for calculation of birth rates.

† Registrar General's figure for calculation of infant mortality rates.

Table II.—Showing for Each District the Number and Causes of Death during 1940.

CAUSES OF DEATH.	Bourne U.D.	Grantham Borough	Sleaford U.D.	Stamford Borough	Aggregate	E. Kesteven R.D.	N. Kesteven R.D.	S. Kesteven R.D.	W. Kesteven R.D.	Aggregate	TOTALS
1. Typhoid and parat: fevers	..	..	..	1	1	..	..	..	..	..	1
2. Cerebro-spinal fever ...	1	..	..	2	3	..	..	1	..	1	4
3. Scarlet fever ...	..	..	..	..	..	..	..	..	..	..	..
4. Whooping cough ...	..	..	..	..	..	..	..	..	1	1	1
5. Diphtheria ...	2	2	..	..	4	..	..	..	..	..	4
6. Tub: of resp. system ...	2	8	2	2	14	3	7	5	4	19	33
7. Other forms of tuberculosis	1	..	1	1	3	1	..	2	1	4	7
8. Syphilitic diseases ...	..	2	..	..	2	2	1	1	2	6	8
9. Influenza ...	..	..	1	5	6	5	8	4	7	24	30
10. Measles ...	..	1	..	..	1	..	1	..	..	1	2
11. Ac: polio-myel: and polio-enceph: ...	..	1	..	..	1	..	1	..	..	1	2
12. Ac: inf: enceph: ...	..	1	..	..	1	..	..	..	..	..	1
13. Cancer of buc: cav: and oesoph: (M) Uterus (F)	..	8	..	6	14	5	6	2	5	18	33
14. Cancer of stomach and duodenum ...	2	10	4	2	18	6	4	6	4	20	38
15. Cancer of breast ...	2	..	..	1	3	5	2	2	5	14	17
16. Cancer of all other sites ...	7	24	13	12	56	10	17	21	16	64	120
17. Diabetes ...	..	3	4	1	8	2	2	4	1	9	17
18. Intra: Cran: vasc: lesions	6	44	9	10	69	31	37	30	28	126	195
19. Heart disease ...	13	72	17	21	123	57	76	45	60	238	361
20. Other dis: of circ: sys: ...	1	9	2	3	15	3	8	5	8	24	39
21. Bronchitis ...	1	21	9	12	43	6	27	12	11	56	99
22. Pneumonia ...	6	15	9	8	38	9	6	6	9	30	68
23. Other resp: dis: ...	..	3	3	4	10	2	3	4	7	16	26
24. Ulcer of stomach or duodenum ...	..	4	..	..	4	1	1	1	..	3	7
25. Diarrhoea under 2 years of age ...	..	..	..	..	..	1	..	..	..	1	1
26. Appendicitis ...	..	2	2	3	7	..	1	2	1	4	11
27. Other dig've: dis: ...	4	8	3	5	20	4	3	1	7	15	35
28. Nephritis ...	2	4	5	2	13	4	7	4	6	21	34
29. Puer: and post abort: sepsis ...	..	..	..	..	..	..	..	..	..	..	..
30. Other maternal causes ...	..	2	..	1	3	1	..	1	..	2	5
31. Prem: birth ...	..	5	1	1	7	4	4	1	4	13	20
32. Con: mal: birth inj: infant: dis: ...	1	9	..	2	12	5	6	5	2	18	30
33. Suicide ...	1	1	1	3	6	4	..	..	1	5	11
34. Road traffic acc: ...	..	1	2	2	5	6	8	3	6	23	28
35. Other violent causes ...	..	11	1	4	16	3	8	7	9	27	43
36. All other causes ...	11	34	10	17	72	20	40	24	25	109	181
ALL CAUSES ...	63	305	99	131	598	200	284	199	230	913	1511

