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# COUNTY BOROUGH OF HASTINGS.

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**PUBLIC HEALTH DEPARTMENT**

INCLUDING

**SCHOOL MEDICAL SERVICE.**

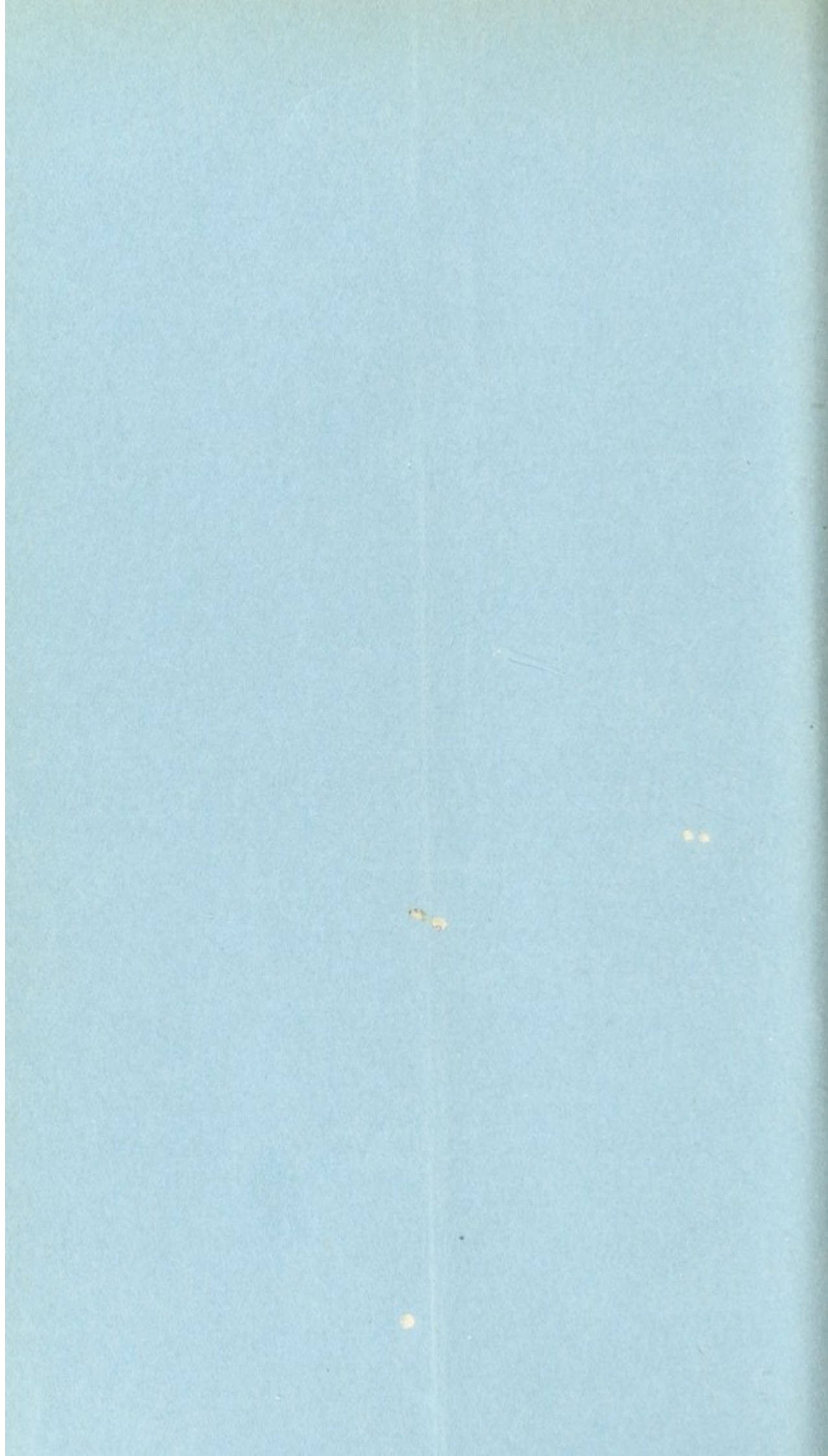
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## ANNUAL REPORT FOR 1936.

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**G. R. BRUCE, O.B.E., M.A., M.D., D.P.H.,**  
Medical Officer of Health  
and  
School Medical Officer.

ST. LEONARDS-ON-SEA :  
PRINTED BY A. H. BUTLER, LTD., 34-35 Western Road.







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## PREFACE.

Health Department,  
44, Wellington Square,  
Hastings,

*April, 1937.*

TO HIS WORSHIP THE MAYOR, AND TO THE ALDERMEN AND  
COUNCILLORS OF THE COUNTY BOROUGH OF HASTINGS.

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to submit herewith the Annual Report of the Health Department for 1936, this being an ordinary, as compared with a five yearly survey report.

The vital statistics for 1936 were generally favourable. The corrected death-rate was 10·98 per 1,000 of the population (estimated mid-year 64,190), as compared with 12·1 per 1,000 England and Wales. The birth-rate, 12·1 per 1,000, as compared with the national figure, 14·8 per 1,000, was exactly the same as for 1935. While the national birth-rate still appears to be falling, the local rate fell to its lowest depths some years ago, and during the past 3 years has shown a slightly upward trend. As in previous years, I draw attention to the fact that our deaths definitely exceed our births, during the past year by 230, so that the only hope of increasing and even maintaining the population at its present basis is by attracting more residents to the town.

The infantile mortality rate, 42·1 per 1,000 births, and the maternal mortality rate, 5·1 per 1,000 births, as compared with figures of 53·3 and 3·6 per 1,000 births in 1935, are dealt with in the appropriate section. The death-rate from tuberculosis fell from ·89 per 1,000 to ·79 per 1,000. The incidence of notifiable infectious diseases, particularly diphtheria with only 14 notifications, was remarkably low in 1936.

The activities of the Health Department as regards Housing were fully maintained, apart from routine house to house



inspection and general district work. The overcrowding survey, a work of considerable magnitude, and fully dealt with by a complete and detailed report, revealed out of 12,607 houses inspected, 222 houses as overcrowded in terms of the Housing Act, 1935. As a result, 100 houses of various sizes from one bedroom to five, or even more if necessary, will be provided for the purpose of rehousing. All necessary work was carried out to complete the series of representations for the second stage of Slum Clearance, which now comprises 209 dwelling houses in 28 areas, with a population of 702, in the Old Town, Central Hastings and St. Leonards and the district of Ore. Apart from the Old Town itself, all rehousing in connection with the first part of the Slum Clearance Scheme was completed, the tenants transferred and all precautions with regard to the disinfection of the evacuated houses and tenants' furniture and effects carried out in accordance with modern methods. In addition, a considerable amount of work was carried out in connection with the Improvement Scheme for the west side of All Saints' Street, which included the reconditioning and preservation of all houses, wherever practicable, in that street.

The various activities of the Health Department in relation to the prevention and treatment of Infectious Diseases, General Sanitary Administration, Tuberculosis, Maternity and Child Welfare, the School Medical Service, Venereal Diseases, Mental Deficiency, etc., were fully maintained, the year's record being set out in the appropriate chapter of the report.

I have to thank the Council, Chairmen and Members of various Committees for their renewed support, and I again acknowledge with gratitude the good work and loyalty of my staff.

I have the honour to remain,  
Mr. Mayor, Ladies and Gentlemen,  
Your obedient Servant,  
G. R. BRUCE.

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# Public Health Officers of the Corporation.

(Continued.)

NAME OF OFFICERS.	OFFICES HELD.
*G. H. HOWE, M.B., CH.B. EDIN. ...	Consultant under the Puerperal Fever and Puerperal Pyrexia Regulations.
*I. M. ROBERTSON, F.R.C.S. (EDIN.)	Consultant for Maternity cases.
N. GRELLIER, M.R.C.S., L.R.C.P., D.M.R.E. (CAMB.) ...	Consulting Radiologist, Hastings Municipal Hospital.
*W. D. PENFOLD, L.D.S., R.C.S.ENG.	School Dental Officer.
G. M. NORMAN, F.I.C., A.R.C.S., F.C.S.	Borough Analyst; Official Agricultural Analyst.
P. PERKINS, M.R.C.V.S. ...	Veterinary Inspector.
E. W. JONES, (a) (b) ...	Chief Sanitary Inspector; also Inspector under Shops Acts, Food and Drugs (Adulteration) Act, Housing Acts, Rats and Mice (Destruction) Act, etc.
G. F. SMART (a) (b) ...	Assistant Sanitary Inspector; Inspector under Shops Acts, etc.
F. R. ALLERTON, (a) (b) ...	do. do.
E. H. SHINGLER (a) (b) ...	do. do.
K. N. KIRBY (pupil) ...	do. do.
*Miss S. A. MYERS, (c) (d) ...	Health Visitor and School Nurse; Inspector of Midwives.
*Miss T. HARRIS, (a) (c) (d) (e) ...	Health Visitor, and School Nurse.
*Mrs. A. ESHELBY, (c) ...	School Nurse.
*Miss G. W. HICKSON, (a) (c) (d) (g)	Health Visitor and School Nurse.
*Miss D. DIXON, (c) (d) (g) ...	Health Visitor and School Nurse.
*Miss H. A. HOBBS, (c) (d) (g) ...	Health Visitor, Tuberculosis.
Miss F. J. SMITH, (c) (f) ...	Matron, Borough Sanatorium.
*C. L. WHEATLEY ...	Chief Clerk.
C. O. PERRING ...	Vaccination Officer.
H. R. H. ASHLEY ...	Clerk, Sanitary Inspector's Office.
R. FREEMAN ...	Clerk, General Office.
W. H. GARDNER ...	Junior Clerk, General Office.
*Miss G. M. BARKER ...	Clerk, Maternity and Child Welfare, Tuberculosis, and School Medical Service.
*Miss I. F. CHEWTER ...	Assistant Clerk, do. do.
*Miss E. BRYANT ...	Clerk, School Medical Service.
*Miss J. SKINNER ...	Clerk, do. do.
*Miss B. C. LAMB ...	Clerk, School Dental Officer.

\*Salary contribution under Public Health Acts or by Exchequer Grants.

- (a) Certificate of the Royal Sanitary Institute and Sanitary Inspectors Examination Joint Board.
- (b) Certificate, Royal Sanitary Institute. Inspector of Meat and other Foods.
- (c) Fully trained General Nurse.
- (d) Certificate of Central Midwives Board. (C.M.B.)
- (e) Certificate, Maternity and Child Welfare Worker.
- (f) Certificate, Fever Training.
- (g) Health Visitor's Certificate.



## SUMMARY OF GENERAL AND VITAL STATISTICS, 1936.

---

Area of Borough	...	...	...	...	4,496 acres.
Population, Census 1931	...	...	...	...	65,207
Registrar-General's estimate of resident population, 1936, for the purpose of Vital Statistics	...	...	...	...	64,190
Number of inhabited houses (end of 1936) according to Rate Books	...	...	...	...	19,151
Rateable Value	...	...	...	...	£737,719
Sum represented by a penny rate	...	...	...	...	£2,935

	Total.	Male.	Female.	
Live Births, 1936 { Legitimate	726	358	368	} = 783
{ Illegitimate	57	28	29	

Birth Rate, 1936, per 1,000 of the estimated resident population ... 12·1

Still Births ... 26

Rate per 1,000 total (live and still) births ... 12·6

Deaths, 1936 ... 1,053

Death Rate, 1936, per 1,000 of the estimated resident population (a) crude ... 16·4

(b) corrected ... 10·98

Deaths from puerperal causes :—

	Deaths.	Rate per 1,000 total (live and still) births.
No. 29—Puerperal sepsis	1	1·2
„ 30—Other Puerperal causes	3	3·9
Total	4	5·1

Death Rate of Infants under one year of age

(a) All infants per 1,000 live births ... 42·1

(b) Legitimate Infants per 1,000 legitimate live births ... 38·5

(c) Illegitimate Infants per 1,000 illegitimate live births ... 87·7

Deaths from Measles (all ages) ... 2

„ „ Whooping Cough (all ages) ... 1

„ „ Diarrhœa (under 2 years of age) ... Nil.

## VITAL STATISTICS.

### (1) POPULATION.

The population at the census of 1931 was returned at 65,207. For statistical purposes the mid-year population of 1936 was estimated by the Registrar General at 64,190, an increase of 90, as compared with the estimated population for 1935.

### (2) BIRTHS.

The net live births registered in Hastings for 1936 were 783, made up as follows :—

	Registered in Borough.	Transferred elsewhere.	Transferred Hastings.	Total.
Males ... ..	422	41	5	386
Females ... ..	432	40	5	397
Totals ... ..	854	81	10	783

Of the births 57, males 28, and females 29, were illegitimate, a percentage of 7·2.

The number of births, 783, in 1936, shewed a very slight increase over the number recorded in 1935, viz., 777. As a matter of fact there has been but little variation in the birth-rate during the past 10 years, the average birth-rate during that period being 12·1 per 1,000 of the population, the exact figure for 1936. Each year attention is drawn to the fact that the deaths exceed the births, in 1936 by 270, a fact due to the peculiar age and sex constitution of a health resort, and the preponderance of females, particularly of mature years in our population.

As regards mid-year population, the estimated increase is surprisingly small in view of the activity of private building enterprise, quite apart from the new council houses, either erected or in course of erection. From returns, supplied by the Borough Engineer, the number of houses built by private enterprise over



a period of three years ending March 31st, 1936, was 316, 452, 400, respectively, an average of 389 houses per annum. On a basis of 4 persons per house, the average number of fresh residents per annum occupying these houses is 1,556 persons. Over a period of 5 years, 1931-1936, on the same estimated basis of occupation, the total number of persons in residence in new houses, privately built, is 6,692. After making allowance for two contingencies :—(a) the excess of deaths over births, about 300 per annum ; (b) the fact that a certain number of dwelling houses or flats will be left unoccupied by the old residents :—it is fair to deduce that a very considerable number of these new buildings must be occupied by entirely new residents to the town, with a corresponding increase on our estimated population.

The comparative birth-rate, with other particulars relating to infantile mortality, is shewn on Table 1, page 35.

### **(3) DEATHS.**

The total net deaths registered in Hastings in 1936 were 1,053, of whom 450 were males, 603 females.

Not included were 155 deaths transferred to other districts ; included were 56 deaths of Hastings residents, occurring elsewhere.

Deaths in Public Institutions were 577, 125 being transferred elsewhere.

There were 40 Coroner's inquests.

The crude death-rate per 1,000 of the population is 16·4, which, corrected for the peculiar age and sex constitution of the population by the new factor, '67, gives a death-rate of 10·98 per 1,000.

### **(4) AGE AT DEATH.**

Of the 1,053 deaths, 33 occurred in infants under one year of age, the infantile mortality being 42·1 per 1,000 births.

From 1-5 years of age there were 13 deaths ; from 5-25 years 21 deaths ; from 25-45 years 71 deaths ; from 45-65 years 216 deaths ; and over 65 years 699 deaths, or 66·3 per cent. of the total.

### **(5) MAIN CAUSES OF DEATH.**

#### **(a) Diseases of the Circulatory System.**

The proportion of the total deaths due to diseases of the heart and arteries amounted to 45·3 per cent. of the total, or 7·4 per 1,000 of the population.



These figures, practically the same as for 1935, and 60 per cent. higher than the figures 10 years ago, exemplify the increasing death-rate from diseases of the heart and circulatory system.

Two factors are involved (a) the stress and strain and the increased pace of modern life ; (b) the considerable proportion of elderly residents seeking a climate suitable for cardiac and circulatory complaints.

**(1) Analysis of Deaths from Diseases  
of the Circulatory System, 1936.**

Deaths from	Total.	Under 45 years.	45-65 years.	Over 65 years.
Heart Disease ... ..	320	10	42	268
Cerebral Hæmorrhage, Arterio-Sclerosis, etc.	157	3	28	126
Other Circulatory Diseases ... ..	2	—	1	1
Totals ... ..	479	13	71	395

**(2) Comparative Analyses, 1927-1936.  
Deaths from Diseases of Circulatory System.**

Year.	Total Deaths. Diseases of Circulatory System.	Percentage of Total Deaths.	Death Rate Diseases of Circulatory System, per 1,000
1927	305	31·9	4·9
1928	336	35·7	5·4
1929	343	34·3	5·4
1930	328	36·7	5·2
1931	381	38·8	6·1
1932	356	35·8	5·6
1933	435	42·4	6·9
1934	439	43·5	6·8
1935	476	46·2	7·4
<b>1936</b>	<b>479</b>	<b>45·5</b>	<b>7·5</b>

**(b) Cancer.**

The local mortality is high and increasing—due to two population factors (a) the unusually large number of elderly people more prone to cancer; (b) the preponderance in our population of females, especially in the late age groups, and the incidence of ulcer of the breast and womb in such. In 1936, the number of deaths due to cancer, 171, was the highest ever recorded and amounted to one in every six deaths. Of this total, 108, or 63 per cent., occurred in females.

The following table shows the comparative mortality since 1910.

1910—1919—yearly average 109 deaths due to cancer.						
1920—1924	do	do	123	„	„	„
1925—1929	do	do	137	„	„	„
1930			114	„	„	„
1931			135	„	„	„
1932			141	„	„	„
1933			148	„	„	„
1934			164	„	„	„
1935			130	„	„	„
<b>1936</b>			<b>171</b>	„	„	„

**Deaths from Cancer in 1936 according to sex and organ of body affected.**

Part affected.	NO. OF DEATHS.		
	Male.	Female.	TOTAL.
Tongue, Lips, Mouth, Throat, or Larynx ... ..	2	1	3
Gullet ... ..	4	2	6
Stomach ... ..	8	21	29
Abdomen, Bowel, etc. ...	29	35	64
Breast ... ..	—	23	23
Womb ... ..	—	8	8
Genito-Urinary ... ..	8	12	20
Miscellaneous ... ..	12	6	18
<b>TOTAL</b> ... ..	<b>63</b>	<b>108</b>	<b>171</b>
<b>PERCENTAGE OF TOTAL</b> ...	<b>36 per cent.</b>	<b>63 per cent.</b>	

### **Radium Treatment.**

A scheme was inaugurated in 1934 under the auspices of the British Empire Cancer Campaign Association, whereby a small supply of radium (110 milligrams in the form of radium needles) was stored in the Royal East Sussex Hospital, for use in that hospital and also available for use in the Buchanan Hospital, St. Leonards-on-Sea and the Princess Alice Hospital, Eastbourne.

Dr. Ian Robertson, who is in medical charge of the arrangements for radium treatment at the Royal East Sussex Hospital, informed me that the available radium had been used with considerable success in a variety of cancerous conditions in that hospital in 1936, approximately 50 cases, including particularly cancer of the tongue, lip, breast and rodent ulcer. It had been also used in recurrent menorrhagia cases in women approaching the menopause.

As regards the Buchanan Hospital, little use has been made of the radium, but the Princess Alice Hospital has taken considerable advantage of the treatment. There had been no difficulty in sending the radium to Eastbourne when necessary. As regards the future, Dr. Robertson felt that larger amounts of radium in the form of tubes are necessary for the treatment of cancer of the womb, and he hoped that such would be available for Hastings and district in the near future through the British Empire Cancer Campaign Association. At present, also, there is no deep X-Ray plant suitable for the treatment of the deep seated cancer cases.

### **Diagnosis.**

The methods available are :—

- (1) Private and panel practice.
- (2) Out-patient departments of the two voluntary hospitals.
- (3) Special diagnostic methods, particularly in Laboratory of Royal East Sussex Hospital, available to in-patients in the wards of the three hospitals, the Royal East Sussex, the Buchanan and the Municipal Hospital.



### Co-ordination.

When considered necessary, patients from the Municipal Hospital are transferred to the Royal East Sussex Hospital for the limited forms of radium treatment available, or if special treatment by large doses of radium is necessary, then the case is transferred to an appropriate London Hospital.

### Propaganda.

Three excellent pamphlets, written on behalf of the Middlesex Hospital, have been adopted and are available through the Health Visitors, the Infant Welfare and Ante Natal Centres, and on request through the Out-patient Departments of the Voluntary Out-patient Hospitals and the Municipal Hospital.

### (c) Respiratory Diseases (Including Influenza, but excluding Pulmonary Tuberculosis).

The total deaths from the above group of respiratory diseases, excluding pulmonary tuberculosis, was 124 (compared with 137 in 1935), with a death-rate of 1·9 per 1,000 of the population.

#### V.8. Table No. 1.

##### VITAL STATISTICS—WARDS—1936.

Ward.	Estimated Ward Population.	Births.			Birth Rate per 1,000.	Deaths	Death Rate per 1,000 crude.	Deaths under 1 year.	Infantile Mortality.
		M.	F.	Total.					
All Saints ... ..	5,672	35	27	62	10·9	100	17·6	4	64
St. Clements ... ..	5,349	75	77	152	28·4	91	17·0	3	19
St. Mary's Lower ...	5,323	26	34	60	11·2	79	14·8	2	33
St. Mary's Upper ...	6,097	29	31	60	9·8	96	15·7	3	50
St. Helen's ... ..	6,289	107	105	212	33·7	94	14·9	11	51
Holy Trinity ... ..	5,750	28	31	59	10·2	91	15·8	2	33
St. Mary Magdalen ...	6,874	12	18	30	4·3	97	14·1	2	66
St. Peter's ... ..	6,144	30	28	58	9·4	100	16·2	4	68
St. Leonards ... ..	9,516	39	38	77	8·0	195	20·4	3	38
Silverhill and Hollington ... ..	7,176	41	47	88	12·2	110	15·3	3	34
Total ... ..	64,190	422	436	858	13·3	1053	16·4	37	43
Transfers out... ..	...	41	40	81				4	
Transfers in .. ..	...	5	5	10				—	
Total Net ... ..	64,190	386	397	783	12·1	1053	16·4	33	42·1

V.S. Table No. 2. (Ministry of Health.) CAUSES OF, AND AGES AT, DEATH DURING YEAR, 1936.

CAUSES OF DEATH.		Net Deaths at the subjoined ages of Residents, whether occurring within or without the District												Total Deaths whether of Residents or Non-Residents in Institutions in the District.	WARD DISTRIBUTION.											
		All ages.	0 to 1 year.	1 to 2 yrs.	2 to 5 yrs.	5-15 yrs.	15-25 yrs.	25-35 yrs.	35-45 yrs.	45-55 yrs.	55-65 yrs.	65-75 yrs.	75 & upds.		All Saints.	St. Clements.	St. Mary's Lower.	St. Mary's Upper.	St. Helens.	Holy Trinity.	St. Mary Magdalen.	St. Peter's.	St. Leonard.	Silverhill & Hollington.		
All Causes	{ Certified Uncertified	1052 1	33 ...	7 ...	6 ...	5 ...	16 ...	30 ...	41 ...	75 ...	141 ...	268 ...	430 1	577 ...	100 ...	91 ...	79 ...	96 ...	93 1	91 ...	97 ...	100 ...	195 ...	110 ...		
Typhoid and Paratyphoid Fevers		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Measles		...	5	2	1	2	...	...	...	...	...	...	...	3	2	2	...	...	...	...	...	1	...	...		
Scarlet Fever		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Whooping Cough		...	1	1	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1		
Diphtheria		...	1	...	...	...	1	...	...	...	...	...	...	1	...	...	...	...	...	...	...	1	...	...		
Influenza		...	10	...	...	...	...	...	1	...	3	3	2	1	5	...	3	1	2	1	1	...	2	...		
Encephalitis Lethargica		...	1	...	...	...	...	...	1	...	...	...	...	1	...	...	...	...	...	...	1	...	...	...		
Cerebro-Spinal Fever		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Tuberculosis of respiratory system		...	46	...	...	...	3	6	13	10	7	7	...	49	4	9	1	5	3	6	3	3	8	4		
Other tuberculous diseases		...	5	...	1	1	1	...	...	...	1	1	...	6	...	1	...	1	1	...	1	1	...	...		
Syphilis		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
General paralysis of the insane, tabes dorsalis		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Cancer, Malignant Disease		...	171	...	...	1	...	...	2	8	17	31	57	55	99	20	15	11	...	16	12	15	13	14	32	23
Diabetes		...	9	...	...	...	...	...	...	...	1	2	4	2	4	1	3	1	...	...	...	...	1	2	1	
Cerebral Haemorrhage, etc.		...	157	...	...	...	...	1	...	2	5	23	57	69	52	13	9	10	15	9	13	17	16	40	15	
Heart Disease		...	320	1	...	...	...	1	5	3	12	30	87	181	140	37	32	28	30	34	26	27	26	55	25	
Aneurysm		...	1	...	...	...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	1	...	...	...	...	
Other circulatory diseases		...	1	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	
Bronchitis		...	34	1	...	...	...	...	1	1	4	7	20	8	3	2	5	2	4	4	3	5	5	1		
Pneumonia (all forms)		...	76	4	1	...	...	2	4	3	7	9	12	34	61	2	5	3	5	9	8	8	10	15	11	
Other respiratory diseases		...	4	...	...	...	...	...	1	...	...	...	1	2	2	...	...	1	1	...	1	...	...	...	1	
Peptic Ulcer		...	10	...	...	...	...	...	...	3	4	1	2	9	1	...	2	2	...	...	1	...	4	...	...	
Diarrhoea, etc.		...	2	...	...	1	...	...	...	...	...	1	...	...	1	...	...	...	...	...	1	...	...	...	...	
Appendicitis		...	3	...	...	...	...	...	1	1	...	1	...	6	1	...	...	...	...	1	...	...	...	1	...	
Cirrhosis of liver		...	3	...	...	...	...	...	...	...	3	...	...	2	...	...	1	...	...	...	...	1	...	1	...	
Other diseases of liver, etc.		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	1	1	...	
Other digestive diseases		...	2	...	...	...	...	...	...	...	...	...	1	1	1	...	...	...	...	1	1	...	...	...	...	
Acute and Chronic Nephritis		...	31	...	...	...	1	1	1	2	3	...	11	12	14	...	2	2	3	...	2	6	1	7	8	
Puerperal Sepsis		...	1	...	...	...	1	...	...	...	...	...	...	1	...	...	...	...	...	...	...	1	...	...	...	
Other puerperal causes		...	3	...	...	...	1	1	1	...	...	...	...	2	...	...	...	...	...	...	1	...	2	...	...	
Congenital Debility, Premature Birth, Malformations, etc.		...	18	17	...	1	...	...	...	...	...	...	...	9	1	1	1	2	5	1	2	2	2	1	...	
Senility		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Suicide		...	13	...	...	...	3	4	2	2	2	...	...	1	2	...	2	1	...	1	...	1	3	3	...	
Other deaths from violence		...	18	3	1	...	2	1	3	1	3	4	...	13	...	...	1	2	2	3	2	3	2	3	...	
Other defined diseases		...	107	4	3	...	1	2	3	3	8	14	18	51	85	12	10	7	10	13	8	8	14	14	11	
Causes ill-defined or unknown		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Totals		...	1053	33	7	6	5	16	30	41	75	141	268	431	577	100	91	79	96	94	91	97	100	195	110	





**V.S. Table No. 3.**

**DEATH RATES—1920-1936—HASTINGS.**

	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935	1936
Number of Deaths	850	852	869	821	930	879	924	954	941	993	894	981	993	1026	1008	1030	<b>1053</b>
Death Rate per 1,000 crude	14.2	14.3	14.6	13.6	15.4	14.5	15.06	15.5	15.0	15.9	14.28	15.84	15.73	16.16	15.8	16.07	<b>16.4</b>
*Death Rate per 1,000 corrected	11.9	12.0	12.2	11.3	12.9	10.4	10.8	11.1	10.8	11.4	10.25	11.39	11.29	11.60	10.58	10.76	<b>10.98</b>

\* Factor for correction 1920-1924—.84.

1925-1933—.718.

1934-1935—.67.

1936—.67.

## V.S. Table No. 4.

## BIRTH RATE, DEATH RATE, AND ANALYSIS OF MORTALITY DURING THE YEAR 1936.

Provisional figures for England and Wales compared with those of Hastings.

	Birth-rate per 1,000 Total Population.		Annual Death-Rate per 1,000 Population.									Rate per 1,000 Live Births	
	Live Births.	Still Births.	All Causes.	Typhoid and Paratyphoid fevers.	Small-pox.	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Influenza.	Violence.	Diarrhoea and Enteritis under 2 Years.	Total Deaths under One Year.
England and Wales ... ..	14.8	0.61	12.1	0.01	—	0.07	0.01	0.05	0.07	0.14	0.52	5.9	59
122 County Boroughs and Great Towns, including London ...	14.9	0.67	12.3	0.01	—	0.09	0.01	0.06	0.08	0.14	0.45	8.2	63
143 Smaller Towns (Resident Populations, 25,000—50,000 at Census 1931) ... ..	15.0	0.64	11.5	0.00	—	0.04	0.01	0.04	0.05	0.15	0.39	3.4	55
London ... ..	13.6	0.53	12.5	0.01	—	0.14	0.01	0.06	0.05	0.14	0.52	14.4	66
<b>Hastings</b> ... ..	12.1	0.4	16.4 (a) 10.98(b)	0.00	—	0.07	0.00	0.01	0.01	0.15	0.28	2.5	42

(a) crude death-rate.

(b) corrected death-rate.

The maternal mortality rates for England and Wales are as follows { per 1,000 Live Births

Puerperal Sepsis.	1.40	Others.	2.41	Total.	3.81
"	1.34	"	2.31	"	3.65
"	1.2	"	3.9	"	5.1

Hastings ... ..

## INFECTIOUS DISEASES.

### (1) NOTIFIABLE INFECTIOUS DISEASES, 1936.

A complete analysis is found in Table No. 3, p. 20.

#### **I.D. Table No. 1.**

QUARTERLY INCIDENCE OF SCARLET FEVER, DIPHTHERIA AND  
ENTERIC FEVER.

	Scarlet Fever.	Diphtheria	Enteric Fever.	Total.
1st Quarter ... ..	14	3	—	17
2nd Quarter ... ..	13	5	—	18
3rd Quarter ... ..	21	3	3	27
4th Quarter ... ..	53	3	1	57
Totals ... ..	101	14	4	119

#### **Scarlet Fever.**

The total number of cases, 101, approximated to the average for the past five years. The type of disease was generally of a mild and sporadic character, with a few exceptions, marked by septic complications.

Ninety-seven cases or 96 per cent. of the total, a very high proportion, were admitted to the isolation hospital

There was one return case.

#### **Diphtheria.**

The number of cases notified, 14, was extremely low, in fact the lowest recorded over a prolonged period. With one or two exceptions, the cases were of a mild type, there being one death. The history of infectious diseases teaches us that a diphtheria record, such as we have experienced, low prevalence with a



preponderance of mild cases for nearly four years, is generally the prelude to increased prevalence, with a high proportion of more severe or toxic cases. In this connection the campaign for diphtheria immunisation is distinctly disappointing. The whole machinery is available, the parents in selected schools have been circularised, but only a very few consents have been obtained, in the absence of serious or fatal diphtheria. Further comments with regard to this matter are made in the report on the School Medical Service.

I would again emphasise the importance of diphtheria immunisation, (*a*) to the individual child who is protected from a potentially dangerous disease, (*b*) to the community as a whole. Immunisation against diphtheria has been highly successful in the U.S.A., Canada, and in a lesser measure some large cities in the country; but it should be realised that mass immunisation, up to 50 or 60 per cent. of the child population, is necessary to ensure a definite fall in the mortality.

It is proposed to continue the policy of providing immunisation against diphtheria through the school clinics and to inaugurate from time to time campaigns in individual schools and districts.

### **Erysipelas.**

Forty cases were notified, nine being admitted to the Isolation Hospital.

### **Enteric and Paratyphoid Fevers.**

Four cases were notified, all sporadic, one being imported.

### **Infectious Diseases of the Central Nervous System.**

One case of encephalitis lethargica and one case of polio encephalitis were notified.

### **Small-Pox.**

No case was notified, and it was not necessary to open the Small-Pox Hospital at Brede.

The vaccination return for 1935, see table, shows a slight increase in primary vaccination as compared with the previous year. The percentage of vaccinations, 38·2, remains dangerously low.

## (2) NON-NOTIFIABLE INFECTIOUS DISEASES.

There was a considerable outbreak of measles in the late summer and autumn of 1936, 568 cases being notified through the School Medical Service; 98 of the more serious cases, or those from homes, where nursing facilities were difficult, were admitted for treatment to the Borough Sanatorium, with three deaths, a notably satisfactory result in view of the high proportion with acute catarrhal bronchitis and pneumonia. The measles epidemic was accompanied by a minor outbreak of whooping-cough with 91 cases reported from the School Medical Service. The incidence of chicken-pox and mumps was slight. As regards influenza and influenzal pneumonia, apart from the usual increased prevalence in the late winter and spring, there was no epidemic, the total deaths being 10.

**I.D. Table No. 2.** VACCINATION RETURNS FROM 1920.

Year.	Births, Central District.	Successful Primary Vaccination.	Conscien- tious Objectors.	Percentage of births vaccinated.
1920—1924 inclusive.	4,042	1,522	2,026	37·6
1925 ...	688	280	348	40·7
1926 ...	661	305	393	44·6
1927 ...	828	315	376	38·0
1928 ...	801	289	466	36·1
1929 ...	791	305	423	38·5
1930 ...	825	302	457	36·6
1931 ...	790	296	447	37·5
1932 ...	792	291	444	36·7
1933 ...	752	303	390	40·3
1934 ...	844	296	498	35·1
1935 ...	849	314	497	36·8
Totals	8,621	3,296	4,739	38·2



I.D. TABLE No. 3.

TABLE II. (MINISTRY OF HEALTH).  
CASES OF INFECTIOUS DISEASES NOTIFIED DURING THE YEAR, 1936.

NOTIFIABLE DISEASES.		NUMBER OF CASES NOTIFIED.													WARD DISTRIBUTION.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																														
		At all ages.	At ages— Years.												Deaths.*	Total cases removed to Hospital.	All Saints.	St. Clements.	St. Mary's Lower.	St. Mary's Upper.	St. Helen's.	Holy Trinity.	St. Mary Magdalen.	St. Peter's.	St. Leonard.	Silverhill and Hollington.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
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Small Pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	

\*For Analysis of Deaths See Table No. 2 (Ministry of Health), page 14a.



**I.D. Table No. 4.****DEATHS FROM THE SEVEN CHIEF EPIDEMIC DISEASES.**

	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935	1936
Smallpox ...	...	...	...	...	...	...	...	...	...	...	...	...
Scarlet Fever ...	2	...	...	...	...	...	1	...	1	1	2	...
Diphtheria ...	...	1	...	2	4	4	5	6	6	1	1	1
Enteric Fever ...	1	...	1	...	1	1	...	2	1	...	1	...
Measles ...	...	8	...	3	1	12	1	1	...	1	2	5
Whooping Cough	1	5	...	4	2	1	1	1	4	2	...	1
Diarrhoea	1	6	4	2	3	2	1	1	...	3	...	2
Totals ...	5	20	5	11	11	20	9	11	12	8	6	9

**(3) BOROUGH SANATORIUM FOR INFECTIOUS DISEASES.**

The Borough Sanatorium contains 70 beds with 14 wards in 4 blocks. As a result of a policy of improvement over a period of 13 years, the whole hospital has been re-conditioned and re-equipped. The Sanatorium, under the Local Government Act, 1929, serves also as the Isolation Hospital for the Rural District of Battle and for the Borough of Rye. The question of the reservation of additional beds for an adjoining Borough is under consideration. This will entail further bed provision in the nature of a small cubicle block.

The number of fully equipped beds at the Small-Pox Hospital at Brede is 20, and this hospital also serves, under agreements, a considerable portion of the adjoining area of East Sussex. No case of small-pox occurred in 1936.

The total number of patients admitted, 279, was slightly above the average, due to an unusually high number of measles admissions to which reference has been made. It should be emphasised that the fullest possible use of the beds available is made, so that every kind of infectious disease (12 varieties were dealt with in 1936) may be admitted, a policy particularly helpful in the case of hotels, boarding houses and private schools.

With regard to cases of scarlet fever, the high percentage of admissions, 96 per cent. is remarkable, in view of the fact

that home isolation is permitted, under reasonable conditions of isolation. The intramuscular injection of anti-scarlet serum in all cases with moderate to severe symptoms of temperature, rash, etc., was continued, it is believed, with considerable advantage. The Dick and Schultz-Charlton, in scarlet fever, and the Schick skin tests in diphtheria were used, when indicated, with advantage for diagnostic purposes. For erysipelas cases, anti-scarlet serum, anti-erysipelas serum, and the mixed anti-streptococcal serum were all used in accordance with the particular indications of the case.

**(B) Cases under Treatment in 1936.**

**I.D. Table No. 5.**

Disease.	In Hospital Jan. 1st, 1936.	Ad- mitted. 1936.	Died 1936.	Dis- charged 1936.	In Hospital Dec. 31st, 1936.
Scarlet Fever ...	13	127	...	113	27
Diphtheria ...	3	25	1	22	5
Typhoid Fever ...	2	...	...	2	...
Paratyphoid 'B' ...	...	3	...	3	...
Measles ...	5	98	3	100	...
German Measles ...	...	3	...	3	...
Whooping Cough ...	...	4	1	2	1
Chicken Pox ...	...	3	...	2	1
Mumps ...	...	1	...	1	...
Erysipelas ...	...	13	1	12	...
Anterio Poliomyelitis ...	...	1	...	...	1
Encephalitis Lethargica ...	...	1	1	...	...
Totals	23	279	7	260	35

**Complications.**

SCARLET FEVER :—	Nephritis ...	...	...	1
	Adenitis ...	...	...	17
	Rheumatism ...	...	...	5
	Rhinitis ...	...	...	7
	Conjunctivitis ...	...	...	2
	Otorrhœa ...	...	...	5
	Septic Fingers ...	...	...	3
	Tonsilitis and Quinsy ...	...	...	7
	Breast Abscess ...	...	...	1
	Relapses ...	...	...	4
	Return Cases ...	...	...	2
DIPHThERIA :—	Paralysis ...	..	...	2

MEASLES :—Broncho-pneumonia	...	...	...	10
Otitis Media including	1	Mastoid		
Operation	...	...	...	3
WHOOPING COUGH :—Broncho-pneumonia	...	...	...	3

#### Average Stay in Hospital, 1936.

Scarlet Fever	...	...	...	30 days.
Diphtheria	..	...	...	40 „
Measles	...	...	...	21 „
Number of Rural Cases during 1936	...	...	...	49

## TUBERCULOSIS.

### (1) VITAL STATISTICS.

#### (a) Notifications, 1936.

The notifications in 1936, 152, pulmonary 121, non-pulmonary 31, were slightly higher than in 1935, when the figure was 149.

#### T. Table No. 1.

TUBERCULOSIS, 1936—NOTIFICATIONS.

Age Period.	New Cases.		Deaths.	
	Pulmonary.	Non-Pulmonary.	Pulmonary.	Non-Pulmonary.
0—1 years ...	...	...	...	...
1—5 „ ...	...	4	...	2
5—10 „ ...	2	10	...	} 1
10—15 „ ...	...	4	...	
15—20 „ ...	7	2	...	
20—25 „ ...	11	4	3	...
25—35 „ ...	25	4	6	...
35—45 „ ...	24	1	13	...
45—55 „ ...	23	1	10	...
55—65 „ ...	16	...	7	1
65 upwards ...	13	1	7	1
Totals ...	121	31	46	5
Grand Totals	152		51	



**T. Table No. 2.**

TUBERCULOSIS, 1936—NOTIFICATIONS FROM  
VARIOUS SOURCES.

Category.	Primary Notifica- tions.	Duplicate Notifications.	Supple- mental Notifica- tions.	Totals.
Pulmonary Males ...	63	4	6	73
"    Females	42	1	10	53
Non-Pulmonary Males	15	2	1	18
"    Females	15	...	...	15
Totals ...	135	7	17	159

**T. Table No. 2a.**

CASES OF TUBERCULOSIS ON THE NOTIFICATION REGISTER  
ON THE 31ST DECEMBER, 1936.

TOTAL CASES.	PULMONARY.			NON-PULMONARY.		
	Males.	Females.	Total.	Males.	Females.	Total.
530	224	198	422	42	66	108

**T. Table No. 3.**

TUBERCULOSIS PRIMARY NOTIFICATIONS, SINCE 1924.

	1924	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935	1936
Pulmonary	98	94	76	65	60	82	84	141	102	91	69	114	105
Other Forms	26	39	29	19	18	14	24	23	20	26	18	28	30
Totals ...	124	133	105	84	78	96	108	164	122	117	87	142	135

### Relation of Deaths to Notifications.

The number of cases, not notified before death, increased from 5 in 1935 to 10 in 1936. There was a definite decrease in those notified less than three months before death from 21 to 13 during 1936. In a health resort it is inevitable that a certain number of advanced cases of pulmonary tuberculosis should come for treatment shortly before a fatal issue, and in such cases the medical man may be in doubt as to his position as regards the necessity for notification.

In order to emphasise the principle and also, because it is a statutory duty on the part of the medical practitioner, the latter is asked in each unnotified case, to explain fully the circumstances.

#### T. Table No. 4.

RELATION OF DEATHS TO NOTIFICATIONS, 1936.

					Pulmonary	Other Forms.	Total.
Not notified				before death	10	1	11
Notified less than 3 months				" "	13	2	15
" 3 to 6				" "	7	...	7
" 6 to 12				" "	2	...	2
" 1 to 2 years				" "	4	1	5
" over 2				" "	10	1	11
Totals ... ..					46	5	51

### Death Rate from Tuberculosis.

**T. Table No. 5.**

DEATHS FROM TUBERCULOSIS SINCE 1905.

Year.	No. of deaths Pulmonary Tuberculosis.	No. of deaths Other Forms of Tuberculosis.	Total Deaths.	Death Rate All Forms per 1,000.
1905-09 average	84	28	112	1·8
1910-14    "	62	23	85	1·4
1915    ...    "	56	14	70	1·3
1916    ...    "	69	28	97	1·9
1917    ...    "	60	18	78	1·5
1918    ...    "	88	17	105	2·0
1919    ...    "	92	16	108	1·8
1920    ...    "	66	23	89	1·5
1921    ...    "	70	15	85	1·4
1922    ...    "	58	19	77	1·3
1923    ...    "	42	6	48	·79
1924    ...    "	65	13	78	1·3
1925    ...    "	71	13	84	1·4
1926    ...    "	58	14	72	1·18
1927    ...    "	64	7	71	1·15
1928    ...    "	52	7	59	·94
1929    ...    "	41	11	52	·83
1930    ...    "	44	11	55	·88
1931    ...    "	45	5	50	·80
1932    ...    "	50	3	53	·84
1933    ...    "	36	7	43	·67
1934    ...    "	43	5	48	·75
1935    ...    "	52	5	57	·89
<b>1936</b> ...    "	<b>46</b>	<b>5</b>	<b>51</b>	<b>·79</b>

The above table shows very definitely how much the tuberculosis mortality has fallen locally in the present century. At the same time it should be realised that as a chronic infectious disease both the incidence and mortality of tuberculosis have minor waves of increasing and decreasing intensity. Of recent years this particular phenomenon has been emphasised as regards young adults, and especially women, between the ages of 20-30, in whose case the dramatic fall in both incidence and mortality has not occurred. In fact the incidence is actually reported to have increased in certain districts.

Again, an influenzal epidemic, such as has recently been experienced, often leaves an aftermath of chest conditions, a proportion of which turn out to be tuberculous.



## (2) TUBERCULOSIS HEALTH VISITOR, ETC.

### (a) Home Visiting.

Home visits to new cases	...	...	68
"      "      old      "	...	...	1,710
Total visits	...	...	<u>1,778</u>

### (b) Articles supplied from the Health Department.

Bottles of Disinfectant	...	...	192
Sputum Mugs and Flasks	..	...	16
Thermometers	...	...	14

## (3) TUBERCULOSIS DISPENSARY.

The Tuberculosis Dispensary at the Royal East Sussex Hospital deals with notified or suspected cases of tuberculosis sent for diagnosis and consultation with regard to appropriate treatment. The special departments of the hospital, X-Ray, the Pathological Laboratory, the Dental, Light Therapy and Orthopædic Departments are utilised fully.

There was a further increase in X-Ray work, the number of examinations having increased from 111 to 132.

With regard to specific treatment Tuberculin was used in a fair proportion of suitable cases, Emulsion (B.E.) mainly for surgical tuberculosis in children, after operation; old Tuberculin (O.T.) in adults, specially selected, after sanatorium treatment, in very small doses, and carefully supervised.

The intra-dermal (Mantoux) Tuberculin test was used with advantage in diagnosis.

During the year, 175 new cases were examined at the Dispensary, excluding 23 cases transferred from other areas or returned after discharge. Of 46 contacts examined, one was diagnosed as suffering from pulmonary, and one from non-pulmonary tuberculosis. The total number of attendances at the dispensary was 1,095, a small increase as compared with 1935.

I would again stress the value of contact examination. All contacts, in whom there is any question of a positive diagnosis, are kept under observation, and every means of diagnosis available is utilised, until a definite answer can be given.

**T. Table No. 6.**

RETURN SHOWING THE WORK OF THE TUBERCULOSIS DISPENSARY,  
DURING THE YEAR 1936.

DIAGNOSIS.	PULMONARY.				NON-PULMONARY.				TOTAL.				GRAND TOTAL
	Adults.		Children.		Adults.		Children.		Adults.		Children.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
A.—NEW CASES examined during the year (excluding contacts):—	...	...	...	...	...	...	...	...	...	...	...	...	...
(a) Definitely tuberculous	27	17	...	...	1	6	5	3	28	23	5	3	59
(b) Diagnosis not completed ... ..	...	...	...	...	...	...	...	...	1	2	1	...	4
(c) Non-tuberculous ... ..	...	...	...	...	...	...	...	...	19	29	11	7	66
B.—CONTACTS examined during the year:—	...	...	...	...	...	...	...	...	...	...	...	...	...
(a) Definitely tuberculous	...	1	...	...	...	...	...	1	...	1	...	1	2
(b) Diagnosis not completed ... ..	...	...	...	...	...	...	...	...	...	2	1	...	3
(c) Non-tuberculous ... ..	...	...	...	...	...	...	...	...	8	13	9	11	41
C.—CASES written off the Dispensary Register as	...	...	...	...	...	...	...	...	...	...	...	...	...
(a) Recovered ... ..	1	...	...	1	2	4	6	3	3	4	6	4	17
(b) Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous) ... ..	...	...	...	...	...	...	...	...	28	46	21	19	114
D.—NUMBER OF CASES ON Dispensary Register on December 31st:—	...	...	...	...	...	...	...	...	...	...	...	...	...
(a) Definitely tuberculous	108	80	...	...	5	12	12	13	113	92	12	13	230
(b) Diagnosis not completed ... ..	...	...	...	...	...	...	...	...	1	6	2	...	9

1. Number of cases on Dispensary Register on January 1st ...	259
2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years ...	23
3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of" ...	70
4. Cases written off during the year as Dead (all causes)...	17
5. Number of attendances at the Dispensary (including Contacts)	1,095
6. Number of Insured Persons under Domiciliary Treatment on the 31st December ...	23
7. Number of consultations with medical practitioners:—	
(a) Personal ...	54
(b) Other ...	201
8. Number of visits by Tuberculosis Officers to homes (including personal consultations) ...	73
9. Number of visits by Nurses or Health Visitors to Homes for Dispensary purposes ...	980
10. Number of	
(a) Specimens of sputum, etc., examined...	98
(b) X-ray examinations made in connection with Dispensary work ...	132
11. Number of "Recovered" cases restored to Dispensary Register, and included in A(a) and A(b) above ...	3
12. Number of "T.B. plus" cases on Dispensary Register on December 31st ...	190



**T. Table No 7.****DISPENSARY ATTENDANCES FOR 1936.**

(1) Insured men	...	...	...	...	333
women	...	...	...	...	190
(2) Non-insured men	...	...	...	...	32
women	...	...	...	...	230
children—					
f boys	...	...	...	...	169
l girls	...	...	...	...	123
(3) Ex-military cases	...	..	...	...	38
Total attendances					1,115

**(4) INSTITUTIONAL TREATMENT, 1936.**

No alteration has taken place in the arrangements for institutional treatment.

(a) 30 beds at Darvell Hall Sanatorium for pulmonary tuberculosis.

(b) 4 beds at the Royal East Sussex Hospital for surgical tuberculosis.

(c) 21 beds at the Municipal Hospital for emergency or advanced cases.

(d) Occasional beds as required at Heritage Craft Schools, Chailey or its seaside home, Bishopstone, for cases of crippling due to tuberculosis, and at the Royal Sea Bathing Hospital, Margate, for surgical tuberculosis, etc.

**T. Table No. 8.****CASES SENT TO INSTITUTIONS DURING 1936.**

To Darvell Hall Sanatorium	...	...	...	41
„ Royal East Sussex Hospital	...	...	..	13
„ Royal Sea Bathing Hospital, Margate	..			2
„ Heritage Craft Schools, Chailey	...	...		1
„ „ „ „ Bishopstone	...	...		2
„ Hastings Municipal Hospital	...	...	...	2
Total				61



**T. Table No. 9.**RESULTS OF INSTITUTIONAL TREATMENT IN CASES  
DISCHARGED IN 1936.

	Quiescent.	Not Quiescent	Died in Institution.	Total.
Pulmonary :—				
T.B. — ... ..	2	...	...	2
T.B. +				
Group 1 ... ..	3	6	...	9
Group 2 ... ..	...	26	2	28
Group 3 ... ..	...	7	...	7
Non-Pulmonary :—				
Bones—Joints ...	2	2	...	4
Glands, etc. ...	3	...	...	3
Abdominal ... ..	2	2	...	4
Totals ... ..	12	43	2	57

**T. Table No. 10.**

TREATMENT OF CASES IN MUNICIPAL HOSPITAL, 1936.

		In Institutions on January 1st.	Admitted during the year.	Discharged during the year.	Died in the Institutions.	In Institutions on Dec. 31st.
		(1)	(2)	(3)	(4)	(5)
Number of patients suffering from pulmonary tuberculosis	Adult Males ...	4	26	16	7	7
	Adult Females	6	14	11	5	4
	Children ... ..	1	—	1	—	—
	Total ... ..	11	40	28	12	11
Number of patients suffering from non-pulmonary tuberculosis	Adult Males ...	—	2	1	—	1
	Adult Females	1	2	1	—	2
	Children ... ..	—	2	—	2	—
	Total ... ..	1	6	2	2	3
GRAND TOTAL ... ..		12	46	30	14	14

It will be noted from the above tables that only a few of the pulmonary cases are discharged from sanatorium as quiescent, caution in prognosis being considered advisable. At the same time many cases, marked as non-quiescent, continue to keep remarkably stable as regards both their general health and pulmonary condition, provided they are kept under observation for relapse, and their economic circumstances are reasonably good. With regard to modern treatment, all suitable cases receive artificial pneumo-thorax, which is continued as out-patients at the sanatorium at intervals of two to three weeks over a period of several years. Phrenic evulsion and the Danish gold or Sanocrysin treatment are also used with advantage in particular cases. It should be emphasised that the modern treatment of pulmonary tuberculosis, especially certain surgical operations on the chest and lungs of a severity and an extent undreamt of a few years ago, does save or prolong the lives of individual cases, although the broad effect of such individual successes may not affect to any extent the national death-rate.

The tuberculosis wards at the Municipal Hospital were used with much advantage, more especially for advanced and infectious cases from unsuitable and insanitary homes and occasionally for diagnostic purposes in early cases. During 1936, there were 46 admissions.

#### (5) THE TUBERCULOSIS CARE COMMITTEE.

The work of this Committee supplements the anti-tuberculosis services of the Corporation in certain important directions, viz., supplies of food, clothing, money grants to dependants during sanatorium treatment, etc.

A typical week's working of the scheme shows :—

	£	s.	d.
(a) Monetary allowances ... ..	1	16	0
(b) Pasteurised milk... ..	1	13	3
(c) Eggs ... ..	16	4	
(d) Butter ... ..	10	6	
Total weekly liability ...	£4	16	1

The policy of making special grants to patients to enable them to purchase materials for basket making, leather work, etc., was continued, and found to be very helpful, both as a physical and mental stimulus, to a few men whose disease was more or less stabilised, but who had no chance of regular employment in the ordinary labour market. The return from the sale of these articles, though only small, was also welcomed.

**(6) PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS)  
REGULATIONS, 1925, & PUBLIC HEALTH ACT, 1925,  
SECTION 62.**

It was not necessary to take action under the above during 1936.

## MATERNITY & CHILD WELFARE.

### (1) VITAL STATISTICS.

#### (a) Notification of Births Act.

The number of births reported to the Health Department in 1936 was as under :—

<i>Total Births</i> —Notified by midwives	...	...	497
"      doctors	...	...	163
"      relatives and others	...	...	203
			863
<i>Still Births</i> —Notified by midwives	...	...	3
"      doctors	...	...	21
"      relatives and others	...	...	7
			31



Percentage of still births to notified births, 3·6.

The number of un-notified births was 20, including 19 live births and 1 still birth.

**(b) Infantile Mortality in 1936.**

Net live births registered	...	...	...	783
Number of deaths of infants under one year	...			33
Infantile mortality	...	...	...	42·1
Net illegitimate live births registered	...	...		57
Number of deaths of illegitimate infants under one year	...	...	...	5
Infantile mortality in illegitimate infants	...			87·7

**(c) Maternal Mortality, 1936.**

Deaths from puerperal sepsis	...	...	...	1
Deaths from other accidents and diseases of pregnancy	..	...	...	3
Maternal mortality	...	...	...	5·1

The infantile mortality rate, 42·1 per 1,000 births, shows a reduction, as compared with the rate for 1935, viz., 55·3 per 1,000, and is definitely below the estimated figure for England and Wales, 59 per 1,000. For comparative figures, showing the remarkable reduction of our infantile mortality during the present century, the table on page 35 should be studied.

Of the 33 infant deaths, no fewer than 18 or 55 per cent., were due to causes operating at birth, *e.g.*, prematurity, marasmus, congenital malformations, etc. Each year this important neo-natal mortality, during the first three months of life, assumes greater importance, as the general infantile mortality over the whole first year of life declines. The essential causes of this mortality are obscure, difficult to track, and therefore equally difficult to combat; only by research, by improving, in every possible direction the supervision and care of the expectant mother, the general midwifery services, and immediate post-natal treatment will definite success be obtained.

Pneumonia and bronchitis caused 5 infant deaths, or 6·3 per 1,000 births. No deaths were due to diarrhœa and enteritis.

The maternal mortality figure 5·1 per 1,000 births, is slightly higher than that for 1935, 3·6 per 1,000 births, and also the national figure, 3·81 per 1,000 births. In a community with a limited number of births, however, one or two maternal deaths makes a material difference in the rate. Over a series of recent years the local average maternal mortality is definitely below that for the country, a figure slightly below 4 per 1,000 births. The following services, specially recommended by the Ministry of Health to deal with particular aspects of the problem, have been made available, and in particular Nos. (1), (2) and (3) have been of definite value in specified cases.

(1) The provision of consultants for cases of difficult labour.

(2) The provision of hospital beds in the Municipal Hospital for such cases.

(3) The provision of hospital beds in the Municipal Hospital for ante-natal cases, where special medical treatment is indicated.

(4) The provision of home helps in the ante-natal period, where specially required owing to the medical condition of the expectant mother.

(5) The provision of a certified midwife in doctors' cases where a handywoman would otherwise have been engaged.

After careful consideration, it has been decided that the domiciliary midwifery services for the borough, under the Midwives Act of 1936, should be carried out by four full-time midwives, employed by the District Nursing Association, under subsidy, the service to be supplemented by the employment of a municipal midwife, to work in the West St. Leonards end of the town. If necessary a second municipal midwife will be employed to meet any additional needs for domiciliary midwifery, in connection with Section 6 of the Act, under which after an Appointed Day, probably January 1st, 1938, it will not be legal for unqualified women to assist at confinements, as maternity nurses.

With these and other services as set out in the report, a comparatively complete maternity and child welfare service on lines recommended by the Ministry of Health has been provided.



M. and C.W. Table No. 1.

## ANALYSIS OF INFANTILE AND MATERNAL MORTALITY FROM 1900—1936.

Year.	Births.		Maternal Mortality.		Infantile Mortality.		Infant Deaths 0-4 weeks.		Deaths from Diarrhoea and Enteritis.		Deaths from Pneumonia & Bronchitis.		Deaths from Congenital Debility, Prematurity and Atrophy, etc.	
	Births.	Rate.	Deaths.	Rate per 1000 Births.	Deaths under 1 year.	Rate per 1000 Births.	Deaths 0-4 weeks.	Rate per 1000 Births.	Deaths 0-2 years.	Rate per 1000 Births.	Deaths 0-1 year.	Rate per 1000 Births.	Deaths 0-1 year.	Rate per 1000 Births.
1900-04	1231	18.67	7	5.7	137	111	not available	19.5	24	19.5	24	19.5	23	18.7
1905-09	1100	17.4	5	4.5	105	95	38	34.5	15	13.6	16	14.5	19	17.3
1910-14	902	14.9	3	3.3	75	83	26	28.8	13	14.4	11	12.2	28	31.0
1915	809	15.5	3	3.7	79	97	35	43.3	1	1.2	17	21.0	36	44.5
1916	785	15.7	2	2.5	47	60	22	28.0	1	1.4	6	7.6	23	29.3
1917	759	15.1	not available	not available	59	78	not available	not available	6	7.9	not available	not available	25	32.9
1918	838	16.1	1	1.2	60	71	29	34.6	2	2.4	8	9.5	30	35.8
1919	784	13.0	4	5.1	56	71	33	42.1	3	3.8	6	7.7	32	40.8
1920	1146	19.1	3	2.6	59	51	28	24.4	9	7.9	6	5.2	31	27.1
1921	850	14.3	6	7.1	44	52	16	18.8	6	7.1	7	8.2	19	22.4
1922	930	15.6	8	8.6	46	49	32	34.4	3	3.2	4	4.3	29	31.2
1923	834	13.9	6	7.2	36	43	20	23.9	2	2.4	3	3.6	19	23.1
1924	778	12.9	4	5.1	54	69	29	37.3	1	1.3	11	14.1	30	38.6
1925	783	13.0	2	2.6	31	40	10	12.4	1	1.3	9	10.2	10	12.8
1926	770	12.6	1	1.6	49	64	18	23.8	6	7.8	12	15.6	10	13.0
1927	776	12.6	1	1.3	51	66	29	37.4	4	5.2	7	9.0	13	20.6
1928	752	12.0	3	4.0	38	51	17	23.9	2	2.7	8	10.6	13	17.3
1929	762	12.2	1	1.3	27	35	14	18.4	3	3.9	4	5.2	12	15.7
1930	767	12.2	2	2.6	44	57	21	27.4	2	2.6	9	11.7	17	22.2
1931	764	12.3	3	4.1	39	51	25	32.8	1	1.3	3	3.9	26	34.1
1932	752	11.9	4	5.3	33	44	11	14.6	1	1.3	11	14.6	14	18.6
1933	713	11.2	5	6.7	33	46	19	26.6	...	...	4	5.6	20	28.1
1934	805	12.6	3	3.6	29	36	14	17.5	...	...	8	9.9	14	17.5
1935	777	12.1	3	3.6	43	55.3	27	34.7	...	...	10	12.8	26	33.4
1936	783	12.1	4	5.1	33	42.1	18	22.9	...	...	5	6.3	16	20.4

Average



1936. Net Deaths from Stated Causes at various ages under 1 year of age.

CAUSES OF DEATHS.	WARD DISTRIBUTION.										Total deaths under 1 year.	9 months and under 12 months.	6 months and under 9 months.	3 months and under 6 months.	4 weeks & under 3 months.	Total under 4 weeks.	3-4 weeks.	2-3 weeks.	1-2 weeks.	Under 1 week.
	All Causes	Certified	Uncertified	All Saints.	St. Clement.	St. Mary's Lower.	St. Mary's Upper.	St. Helen's	Holy Trinity.	St. Mary Magdalen.										
All Causes	14	1	2	1	18	4	1	6	4	33	4	3	2	3	8	1	2	4	3	3
Small Pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Chicken Pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles	...	...	...	...	...	...	...	...	2	2	...	...	...	...	...	...	...	...	...	...
Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria and Croup	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	1
Diarrhoea	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Enteritis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculous Meningitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Abdominal Tuberculosis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Tuberculous diseases	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Congenital Malformation	2	1	...	...	3	2	...	...	...	5	...	1	1	1	2	1	1	2	2	1
Premature Birth	10	...	1	...	11	...	...	...	...	11	1	...	...	...	3	1	1	...	...	...
Atrophy, Debility and Marasmus	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Atelectasis	1	...	...	...	1	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...
Injury at birth	1	...	...	...	1	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...
Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Syphilis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Rickets	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Meningitis	...	...	...	...	...	...	...	1	...	1	...	1	...	...	...	...	...	...	...	...
Convulsions	...	...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...
Gastritis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Laryngitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Bronchitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...
Pneumonia (all forms)	...	...	1	...	1	1	...	2	1	4	1	...	...	...	2	...	...	...	...	...
Suffocation (overlying)	...	...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	1	1	1
Other causes.	...	...	...	1	1	1	1	1	...	4	1	...	...	...	...	...	...	...	...	...
Totals	14	1	2	1	18	4	1	6	4	33	4	3	2	3	8	1	2	4	3	3

Net Births in { legitimate 726  
the year { illegitimate 57

Net deaths in { legitimate infants 28  
the year of { illegitimate infants 5

## (2) INSPECTION OF MIDWIVES AND ADMINISTRATION OF MIDWIVES' ACTS.

No. of Midwives on Register—Trained	...	15
		—
No. of visits to Midwives, Inspections	...	44
Special Visits and Interviews	... ..	8
		—
	Total	52
		—

### Midwives' Notifications (Medical Help) :—

(a) Ante-Natal	... ..	15
(b) Labour	... ..	63
(c) Puerperium	... ..	15
(d) Infant	... ..	14
		—
	Total	107
		—

### Other Official Notifications :—

(a) Still-births	... ..	3
(b) Liability to Infection	... ..	1
(c) Artificial Feeding	... ..	—
(d) Having laid out a Dead Body	... ..	1
(e) Death of Baby	... ..	2
		—
	Total	7
		—

The total number of births notified by midwives was 497.

At the quarterly routine inspection of the Midwives' registers, the charts have been found to be well kept, the bags and appliances used being scrupulously clean. The midwives are keeping well in touch with the ante-natal clinics. Ante-natal records are well kept. No irregularity necessitating report to committee was found.

### (b) Puerperal Fever and Pyrexia Regulations, 1926.

Under the above regulations the following arrangements were continued.

- (1) Hospital beds at the Royal East Sussex and the Municipal Hospitals, 11 cases being admitted during 1936.
- (2) The provision of consultants.
- (3) The provision of nursing by the District Nursing Association in cases treated at home.



- (4) Investigation into source of infection by Medical Officer of Health and, if necessary, the Inspector of Midwives.
- (5) Bacteriological examinations of blood and lochia at the Laboratory of the Royal East Sussex Hospital.

Number of Notifications :—

Puerperal Pyrexia	..	...	...	...	27
„ Fever	...	...	...	...	3

In each case of puerperal fever or pyrexia, enquiries are made through the private doctor in charge and decisions made as to appropriate treatment, precautionary measures, etc. An analysis of the causes of the pyrexia or fever, is as follows :—

Abortion	...	...	...	...	5 cases.
Absorption of septic products	..	...	...	...	5 „
Difficult labour	...	...	...	...	5 „
Septic lochia	...	...	...	...	2 „
Abscess of breast	...	...	...	...	2 „
Sapraemia	...	...	...	...	2 „
Tonsilitis...	...	...	...	...	1 „
Pneumonia	...	...	...	...	1 „
Influenza	...	...	...	...	1 „
Local sepsis	...	...	...	...	1 „
Retained products	...	...	...	...	1 „
No ascertainable cause...	...	...	...	...	4 „
Total					30

### (3) THE WORK OF THE HEALTH VISITORS.

Tables (a), (b), (c) and (d) deal fully with the work of the four health visitors, who are also employed as district school nurses, female visitors under the Mental Deficiency Acts, and as official infant protection visitors for boarded-out children under the Children's Acts of 1908 and 1932.



**M. and C.W. Table No. 3.**

(a) HOME VISITS (all visits included).

	First Visits.	Secondary Visits.	Total.
I. Babies under 1 year of age ...	809	3221	4030
II. Infants 1-5 years of age ...	9	4760	4769
III. Special Visits ... ..	221	39	260
IV. Expectant Mothers ... ..	256	368	624
Totals ... ..	1295	8388	9683

V. Unsuccessful visits included above ... 833

(b) INFECTIOUS DISEASES (Visits included under (a)).

DISEASE.	Notified:	Visits.		No. Nursed D.N.A.	No. Admitted Hospital.
		No. Visited	Total Visits.		
I. Ophthalmia Neonatorum ..	3	2	...	...	1
II. Pemphigus Neonatorum...	...	...	...	...	...
III. Puerperal Fever ... ..	3	...	...	...	1
IV. Puerperal Pyrexia ... ..	27	7	...	...	10
V. Measles or German Measles	...	146	...	2	71
VI. Whooping Cough ... ..	...	43	...	1	2
VII. Epidemic Diarrhœa ... ..	...	...	...	...	...
VIII. Poliomyelitis ... ..	...	...	...	...	...
Totals ... ..	33	198	...	3	85

(c) SPECIAL INFORMATION RELATING TO OPHTHALMIA  
NEONATORUM.

Cases.			Vision Unimpaired.	Vision Impaired.	Total Blindness.	Deaths.	Removed from District.	Still under treatment at end of year.	Any other category.
Notified.	Treated.								
	At Home.	In Hospital							
3	2	1	3	::	::	::	::	::	::

*(d)* MISCELLANEOUS.

(1) Visits under Infant Protection	...	222
(2) Visits to Mental Defectives	...	231
		<hr/>
		453
		<hr/>

**(4) THE MATERNITY AND CHILD WELFARE CENTRES.**

The work of the centres, as the table shows, has been fully maintained, the total attendances 15,687, showing a slight increase as compared with the previous year. A very large proportion of babies born to the working class population, in fact about 80 per cent. of all babies born, attend the centres. The valuable work of the voluntary association, with many willing and useful helpers, is most cordially and gratefully acknowledged.

The new centre at Norman Road Wesleyan Church Hall, transferred from West St. Leonards, and now associated with an ante-natal centre, has more than justified the change. In view of increasing numbers it has in fact been necessary to have the ante-natal sessions twice instead of once monthly. The lack of an infant welfare centre is now felt definitely in the West St. Leonards district. The erection of a new church hall on a suitable site may, by good will and mutual arrangement, solve the difficulty for the mothers of that neighbourhood.

The attendances at the three ante-natal clinics have increased from 463 to 578. There is good co-ordination between the clinics and the midwives, who generally attend, at any rate, on the first occasion, with their cases.

**M. and C.W. Table No. 4.**

Centre.	Medical Officer.	Day and Time.	New Cases.	Old Cases.	Total Attendances.	Medical Consultations.
Norman Rd.	Dr. G. Ticehurst	Tuesday, 2.30 p.m. ...	149	3222	3371	1142
Halton ...	Dr. Downer ...	Wednesday, 2.30 p.m.	146	3206	3172	1104
Park View...	Dr. Stanley ...	Thursday, 2.30 p.m.	120	2355	2475	1204
Central	Dr. Farnfield ...	Friday, 2.30 p.m. ...	202	4627	4829	1326
Hollington	Dr. Downer ...	Friday, 2.30 p.m. ...	43	1219	1262	505
Halton, Ante-Natal	Dr. Walker ...	1st & 3rd Mondays, 2.30 p.m....	78	92	170	170
Park View Ante-Natal	Dr. G. Ticehurst	1st, 2nd & 4th Wednesdays, 2.30 p.m.	97	205	302	298
Norman Rd. Ante-Natal	Dr. G. Ticehurst	3rd Wednesday, 2.30 p.m. ...	47	59	106	104
Totals ...			882	14905	15687	5853

**(5) HOME HELPS.**

Number of cases attended in 1936—36.

Many reports as to the value of this work have been received.

**(6) MATERNITY HOMES.**

During 1936, 5 cases, as compared with 15 in 1935, were sent by the Maternity and Child Welfare Committee to Fernbank Maternity Home, under the District Nursing Association. At the Municipal Hospital 128 births, as compared with 92 in 1935, were notified from the maternity ward.

The maternity unit of the Municipal Hospital has become an important factor in the maternity services of the borough. By steady annual increases, the total births in the hospital are now nearly four times as many as they were seven years ago. Nearly one in every six births within the borough takes place at the Municipal Hospital. Normal midwifery cases are admitted either as private cases or through the Public Assistance Committee. Special arrangements have been made for nursing mothers with their babies, if detained, in the children's annexe ;



arrangements have also been made, through the Maternity and Child Welfare Committee, for the admission of difficult and complicated maternity cases and also special cases during the ante-natal period. The East Sussex Council has an arrangement for the admission of both normal and abnormal midwifery cases, through the maternity and child welfare committee of the County.

The question of improving the existing accommodation for the maternity unit, a matter now of considerable importance and urgency, has been the subject of various reports from me, and is now receiving the attention of the appropriate sub-committee.

### **(7) DISTRIBUTION OF MILK.**

This work is controlled by a special sub-committee, all cases being investigated by the Health Visitors and the Medical Officer of Health in the first instance.

The number of applications passed by the Sub-Committee during the year were :—

For Fresh milk ...	...	...	498
„ Dried milk ...	...	...	107

The amount represented being :—

Fresh milk ...	...	...	19,481 pints.
Dried milk ...	...	...	609 lbs.

### **(8) DENTAL TREATMENT.**

28 Children under school age received dental treatment at school clinics ; 13 expectant or nursing mothers received treatment at the Royal East Sussex Hospital. This work has considerably increased.

### **9 { ORTHOPÆDIC SCHEME. ULTRA-VIOLET RAY TREATMENT.**

See Special Section.

### **(10) TREATMENT OF TODDLERS.**

Children under the age of 5 years, not attending school, may receive treatment at the school clinics, 61 children having made 330 attendances in 1936.

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## VENEREAL DISEASES CLINIC.

The venereal diseases clinic at the Royal East Sussex Hospital, serves, in addition to Hastings, the Borough of Bexhill and the neighbouring district of East Sussex. The clinic has the support and confidence of the medical practitioners of the town and district.

Cards advertising the days and times of the various clinics available for men and women are exhibited in all the public lavatories, both municipal and railway, throughout the town. Copies have also been distributed to all hospitals, convalescent homes and similar institutions.

The Clinic Sister, in addition to her nursing duties, carries out a considerable amount of valuable social work, especially among the younger female patients. Every effort is made to keep in touch with all patients who lapse before completing treatment.

Dr. Lazarus Barlow, Medical Officer, reports as follows :—

“The total number of new cases from Hastings attending the clinic for the first time during 1936 was 68, which is practically the same as in 1935. Of these, 5 were cases of syphilis, which shews a considerable drop on 1935, when the number was 14 ; 31 were cases of gonorrhœa, the same as in the previous year, and the remainder after examination proved to be non-venereal.

The total attendances dropped from 4,407 to 4,135, this is partly accounted for by the smaller number of new cases and also because I stopped the more intensive form of intermediate treatment tried during the previous year. As regards the number of doses of arsenobenzene compounds given, the analysis this year does not shew the separate figures for each district, but for the clinic as a whole the number is slightly increased.

The number of “in-patient” days shewed a marked drop from 57 to 16. Taking the clinic as a whole, the total attendances dropped from 6,717 to 5,929.

There were fewer new cases from all parts during the year, 129 as compared with 155 in 1935 ; of these, 62 attended on the advice of their medical practitioners. This shews that the clinic is well supported by the practitioners of the town and district. Needless to say, the utmost secrecy is maintained in the working of the clinic."

### VENEREAL DISEASES CLINIC.

#### COMPARATIVE STATEMENT OF WORK FOR YEARS 1930-1936. HASTINGS CASES ONLY.

	1930	1931	1932	1933	1934	1935	1936
Number of new cases suffering from :—							
(a) Syphilis ... ..	25	14	20	17	15	14	5
(b) Soft Chancre ... ..	nil	1	nil	nil	nil	nil	nil.
(c) Gonorrhœa ... ..	53	35	37	29	39	31	31
(d) Non-venereal conditions	47	35	27	29	47	25	32
Total ... ..	125	85	84	75	101	70	68
Total attendances out-patient clinic ... ..	4506	4536	4133	3700	3681	4407	4135
In-patient days ... ..	67	139	247	17	48	57	16
Doses of Salvarsan :—							
Out-Patient Clinic... ..	445	} 395	488	464	365	278	531
In-Patient Department ...	nil						
*Pathological Examinations :—							
(a) Examined by Medical Officer, V.D. Clinic ...	503	625	852	515	565	535	450
(b) Sent to approved laboratory ... ..	170	457	463	494	485	536	569

\*These include all specimens.



## MENTAL DEFICIENCY.

PARTICULARS OF MENTAL DEFECTIVES AS ON 1ST JANUARY, 1937.

(a) "SUBJECT TO BE DEALT WITH" BY THE LOCAL AUTHORITY.

(b) WHO MAY BECOME "SUBJECT TO BE DEALT WITH" BY THE  
LOCAL AUTHORITY.

Category.	Males.	Females.	Total.
A. NUMBER OF CASES "SUBJECT TO BE DEALT WITH":—			
1. UNDER "ORDER"—			
(a) (1) In Institutions (excluding cases on licence) { Under 16 years of age.	1	2	3
{ Aged 16 years and over.	10	34	44
(2) On licence from Institutions { Under 16 years of age.	...	...	...
{ Aged 16 years and over.	1	1	2
(b) (1) Under Guardianship (excluding cases on licence) { Under 16 years of age.	...	...	...
{ Aged 16 years and over.	15	23	38
(2) On licence from Guardianship { Under 16 years of age.	...	...	...
{ Aged 16 years and over.	1	2	3
2. In "places of safety" { Under 16 years of age.	...	1	1
{ Aged 16 years and over.	...	...	...
3. Under Statutory Supervision ... ..	17	17	34
Of whom—			
Awaiting removal to an Institution...	1	...	1
4. Action not yet taken under any one of the above headings—			
(a) Notified by Local Education Authorities (Sec. 2 (2) ) ... ..	1	...	1
Carried forward ...	47	80	127

Category.		Males.	Females.	Totals.
Brought forward ...		47	80	127
(b) Mental Defectives in receipt of Poor Relief:—				
(1) Institutional	(a) In Public Assistance Institutions not approved under Sec. 37	...	...	...
	(b) In Institutions certified under the M. D. Acts including those approved under Sec. 37	...	...	...
	(1) Cases 'placed' under Sec. 3 ...	...	...	...
	(2) Other cases ...	...	...	...
(2) Domiciliary ...		...	...	...
(c) Otherwise "ascertained" ...		...	...	...
B. NUMBER OF CASES WHO MAY BECOME "SUBJECT TO BE DEALT WITH."—				
1. IN INSTITUTIONS OR UNDER GUARDIANSHIP—dealt with under Sec. 3:—				
(a) In regard to whom the Local Authority contributes under its permissive powers ...		3	...	3
(b) Maintained wholly by parents, relatives or others ...		...	...	...
(c) In approved Home—Local Authority contributes ...		2	...	2
2. Reported to the Local Authority from any reliable source but as to whom no action has been taken ...		3	8	11
3. Under Voluntary Supervision ...		...	5	5
Totals ...		55	93	148

Number of above Cases on the Registers of Occupation Centres:—

	M.	F.	Total.
Under Statutory Supervision ...	...	3	7 10
Under Voluntary Supervision ...	...	...	...
On Licence from Institutions ...	...	...	...
Under Guardianship ..	...	5	6 11
On Licence from Guardianship ...	...	...	...
Total 8 13 21			

### During the year 1937.

#### 1. (a) Number of instances in which licence was granted :—

	M.	F.	Total.
(1) From Institutions ... ..	...	1	1
(2) „ Guardianship ... ..	...	1	1

#### (b) Number of instances in which cases on licence have been returned to Institutions or transferred to Guardianship during the year :—

	M.	F.	Total.
(1) To Institutions ... ..	...	1	1
(2) „ Guardianship ... ..	...	...	...

#### 2. Cases notified by Local Education Authorities (Section 2 (2) ) during the year 1936 :—

	M.	F.	Total
Method of disposal—			
Sent to Institutions (by order)	...	...	...
Sent to Approved Home ...	...	...	...
Placed under Guardianship (by order) ... ..	...	...	...
Placed under statutory Supervision ... ..	2	1	3
Placed in “ Places of Safety ”	...	...	...
Died or Removed from Area	...	...	...
Action not yet taken—			
{ (a) In receipt of Poor Relief ... ..	...	...	...
{ (b) Others ... ..	1	...	1
Total	3	1	4

#### 3. Of the total number of mental defectives known to the Local Authority :—

##### (a) Number who have given birth to children during 1936.

(1) After marriage	} Nil.
(2) While unmarried	

M. F.

##### (b) Number who have married during 1936    nil    nil



The following figures show the steady increase in the working of the mental deficiency scheme during the past 14 years :—

On January 1st, 1923—On books	...	29 cases.
„ „ 1925— „	...	58 „
„ „ 1928— „	...	99 „
„ „ 1931— „	...	108 „
„ „ 1934— „	...	129 „
„ „ 1935— „	...	138 „
„ „ 1936— „	...	143 „
„ „ 1937— „	...	148 „

(a) **Ascertainment.**

Every channel of information is utilised—*e.g.*, the Officers of the Committee, the Poor Law, the N.S.P.C.C., the Police. As seen above the numbers on the register are steadily increasing and have now reached 2·4 per 1,000 of the population.

The peak of ascertainment has not yet been reached. From time to time, elderly defectives, generally owing to economic reasons, become subject to be dealt with, in addition to the normal ascertainment of youthful defectives.

(b) **Home Supervision.**

The systematic monthly visitation of defectives, either under guardianship or at home under voluntary or statutory supervision, is carried out by the male and female officers of the Authority under the supervision of the Medical Officer of Health.

(c) **Guardianship Cases.**

There was an increase during the year of 7 cases.

In the absence of any local institution, except the Municipal Hospital, this method of control has been of immense benefit in many cases. As regards suitable defectives, left at home, the reason is purely economic. No difficulties have arisen with regard to behaviour and control, as such cases are in the charge of a parent or near relative.

With regard to defectives sent away to the Guardianship Society, I would emphasise the necessity of choosing both the

right kind of defective and also the right guardian and environment. Assuming these conditions are rigidly fulfilled, then the system may be very successful and in certain types, *e.g.*, fit for farm or house work, may even be the method of choice.

**(d) Institutional Cases.**

A small increase is noted in the number of defectives in Institutions.

During the year, no progress has been made with regard to an *ad hoc* institution for mental defectives in relation to the Brighton scheme at Laughton Lodge. Meanwhile the existing policy of utilising guardianship, whenever practicable, and obtaining vacancies in various scattered institutions and the Municipal Hospital, which is licensed for 24 defectives, 12 male and 12 female, must be continued.

**(e) The Occupation Centre—Halton School Clinic.**

The Voluntary Association for Mental Welfare has continued to do excellent work at the Occupation Centre, where there are nearly 30 pupils of varying degrees of defectiveness, selected from those under home guardianship, statutory and friendly supervision, and also from those at the Municipal Hospital. The standard and variety of the work have steadily improved, and includes rug making, raffia, sewing, knitting, some elementary reading and writing, dancing, rhythmic exercises and the percussion band.

Improved accommodation is urgently required and it is hoped to make some definite proposals with regard to this in conjunction with the Education and the Maternity and Child Welfare Committees, which also use the Clinic.

**(f) School for Delicate Children—Mental Side.**

The Education Committee are responsible for the above school, with accommodation for 65-68 children between the ages of 7-16 years. A voluntary care committee supervises all children after leaving school for a period of years, except those who are transferred to the care of the Mental Deficiency Committee.



**(g) The Mental Treatment Act, 1930.**

The clinic is concerned with the observation and diagnosis of early or doubtful cases of mental and nervous disorder, and with the supervision of cases after their discharge from the Mental Hospital.

The total number of new cases was 73, total attendances for year 400, or an average of 7.75 attendances per session.

During the year, as an additional service, the social worker paid 115 home visits in the case of new patients at the clinic, and patients discharged from the East Sussex Mental Hospital. This sociological work is of great value in linking up the Mental Hospital and the Clinic with the home conditions, so that the Medical Officer obtains a really complete picture of the patient and his environment.

**(h) The Local Government Act, 1929.**

In accordance with the provision and the spirit of this Act, the relief of mental defectives, previously carried out by the Poor Law, is now administered by the Mental Deficiency Committee, mainly by way of making a parent or other relative the official guardian of the defective.

Seven defectives, maintained in Stoke Park Institution by the Public Assistance Committee, were handed over under order to the Mental Deficiency Committee during the year.

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## **SCHOOL MEDICAL SERVICE.**

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### **Summary of Year's Work.**

(a) Routine medical examination of 1,709 children in the elementary schools, 118 girls in the High School, 84 children in the St. Leonards School for Delicate Children, 16 children in the Hastings School for Delicate Children, and 145 boys in the Grammar School.

(b) Medical examination and treatment, where necessary, at the two school clinics of 2,005 children, who made 10,469 attendances.



(c) 5,153 re-inspections by the Medical Officer at the schools and clinics.

(d) Examination by refraction of 476 cases of defective vision, 348 children being supplied with spectacles under the Authority's scheme.

(e) Operative treatment of 202 cases of enlarged tonsils or adenoids or of both conditions at the local hospitals.

(f) 1,866 cases of minor ailments treated at the two clinics.

(g) Provision of simple treatments, *e.g.*, lotions, ointments, dressings and nutritive drugs, total issues being 5,665.

(h) Dental inspection by the school dentist of 3,766 children, 1,637 being actually treated during the year.

(i) Cleanliness inspections at the schools by the school nurses, of 14,687 children inspected, 524 being found defective in varying degrees and 5 cleansed at the public station.

(j) Control of infectious disease, with numerous visits by the staff to the schools and homes, the total exclusions being 375, total home visits 1,791.

(k) A complete orthopædic scheme for the treatment of crippling. (See special chapter).

(l) Medical supervision of the children at the Hastings and St. Leonards Schools for Delicate Children, the latter with two wings, one for the mentally retarded, the other open-air. (See special note).

## **1. STAFF.**

See "Staff of the Health Department," pp. 6-7.

## **2. CO-ORDINATION WITH WORK OF OTHER HEALTH SERVICES.**

- (a) **Infant and Child Welfare.**
- (b) **Nursery Schools.**
- (c) **Debilitated Children under School Age.**

See previous reports for full details.

(1) No *ad hoc* Nursery Schools have been established, but special arrangements in Nursery Classes have been made in all the Infant Schools for children under the age of five years, for example:—

(a) Special chairs, tables, rests, blankets, etc.

(b) Morning milk at  $\frac{1}{2}$ d., or free in necessitous cases recommended by the school medical officer.

(2) The school clinics are available for the treatment of children under five years of age not attending school, but recommended through the Maternity and Child Welfare Service, both for ordinary medical and dental treatment and for diphtheria immunisation.

An increasing amount of use is made of the former service.

### 3. SCHOOL HYGIENE.

(a) Accommodation and attendances for the quarter ending December 31st, 1936:—

Total accommodation	...	...	8,937
Average number on registers	...	...	6,341
Average attendance	...	...	5,816
Percentage of attendance	...	...	91.7
Average attendance for 1936	...	...	5,835
Average attendance for 1935	...	...	5,998

The total number on the registers of elementary schools on 31st December, 1936, 6,341, again shows a decrease, 144, as compared with the figure of the previous year. Two factors are concerned:

(a) The relatively high birth-rate in the post-war years, 1920-1922. The children born in these years are now leaving school.

(b) The relatively low birth-rate of recent years. The total births during the past 5 years vary from 713 to 805 per annum. In 1900, there were over 1,200 births per annum. It should be noted that there was a tendency for the birth-rate to rise slightly during the past three years.

Recommendations by the School Medical Officer with regard to school hygiene have been dealt with by the appropriate Committees. The estimates provide for an expenditure of approximately £2,300 on repairs and improvements.



A special Sub-Committee is now dealing with the whole matter of the elementary school buildings within the Borough, under Circular 1444, Board of Education, of 4th January, 1936. In my report on this Circular, I have dealt particularly with the position as regards Nursery Schools and Clinics, and also Elementary Schools. As regards the former, there is, in all probability, little necessity for Nursery Schools, but a considerable field for the development of existing and new Nursery Classes on lines recommended in the Circular. The provision of new Infant Departments in Hollington and Ore will provide a good opportunity in this direction. Some of the existing Nursery Classes are in certain respects below a desired standard.

As a result of the gradual redistribution of the population towards the periphery of the Borough, two new elementary schools will almost certainly be required, and certain of the older schools may with advantage be vacated. It remains to be seen whether the schools, which are still to be utilised, can be brought up to a satisfactory standard on the lines of Circular 1444 and the handbook subsequently published.

So far the special Sub-Committee have been mainly concerned with the problem of the senior schools as the first stage of the complete scheme for the re-development.

The matter of the general standard of the elementary schools has been referred to in previous reports. It is an accepted fact that in many important respects, *e.g.*, general arrangement and lay-out, playground space, ventilation, natural lighting, sanitary conveniences, provision of cloakrooms, hot water supply, arrangements for drying clothes, etc., our elementary schools, especially some of the older ones, and generally the church schools, are sadly deficient.

A circular dealing with the expeditious and satisfactory treatment of accidents, occurring in schools and playgrounds, was issued to ensure the maximum degree of co-operation between parents, teachers, the school medical department, ambulance service, general practitioners and general hospitals.



(b) **Mid-day Meals informally served in the Schools.**

The head-teachers in a considerable proportion of the schools have continued the previous arrangements, as fully set out in recent reports, to the great advantage of the children who cannot return home for dinner.

**4. MEDICAL INSPECTION. ELEMENTARY SCHOOLS.**

(a) **Age Groups of Children Inspected.**

The total number of children examined at routine medical inspection in the elementary schools was 1,709, viz.: 635 entrants, 556 intermediates, and 518 leavers. In addition, 967 children with defects requiring observation or treatment were re-inspected.

(b) **Schedule of Medical Inspection.**

The schedule comprises all the headings required by the Board of Education.

Every effort is made by the staff of the School Medical Service to avoid disturbance of the school time table.

**5. { FINDINGS OF MEDICAL INSPECTION.  
MEDICAL TREATMENT.**

(a) **Uncleanliness.**

**Table IV., Group 5. Uncleanliness and Verminous Conditions.**

1. Average number of visits per school made during the year by the school nurses	...	7
2. Total number of examinations of children in the schools by school nurses	... ..	14,687
3. Number of individual children found unclean		524
4. Number of children cleansed under arrangements made by the Local Education Authority	... ..	5
5. Number of cases in which legal proceedings were taken :—		
(a) Under the Education Act, 1921	...	Nil.
(b) Under School Attendance Bye-laws...		Nil.

The improvement in the cleanliness of the children was fully maintained.

**(b) Minor Ailments, including Skin Diseases.**

**(1) Ringworm.**

**(a) Scalp.**

Three cases were diagnosed during the year. All three cases were treated by X-Rays at Charing Cross Hospital with highly satisfactory results.

**(b) Body.**

Two cases were diagnosed and successfully treated at the school clinics.

**(2) Scabies.**

Two cases were diagnosed and treated at the school clinic, and also at the cleansing station.

**(3) Impetigo.**

The treatment with elastoplast, which has been carried out during the last three years, has continued to give excellent results.

**(4) Other Skin Diseases.**

A considerable number of children attending the school clinic belong to this group of minor injuries, burns, scalds, boils, septic sores, abscesses, etc., no fewer than 1,451 having received treatment during the year.

**(5) Tonsils and Adenoids.**

202 children were found to be suffering from chronic tonsilitis, the presence of adenoids or a combination of these defects of such degree as to warrant operative interference; at the same time every case is considered on its merits, and operation only recommended on definite pathological grounds properly ascertained.

These figures show a slight increase on the previous year, although the conservative policy of recent years has been carried out.

**(6) Tuberculosis.**

There is full co-operation between the School Medical and the Tuberculosis Services, both under the Medical Officer of



Health, all actual or suspected cases among school children being referred at once to the Tuberculosis Dispensary for necessary investigation, including X-Rays, tuberculin skin test, etc.

**(7) External Eye Disease.**

Of these 171 cases received treatment at the clinic, mainly cases of blepharitis, conjunctivitis, corneal ulcer, etc.

**(8) Defective Vision.**

During the year 476 children were refracted at the school clinics ; 235 at Halton Clinic and 241 at Park View Clinic.

The following is a list of the findings :—

Emmetropia	...	...	...	65
Hypermetropia	...	...	...	127
Hypermetropic astigmatism	...	...	...	118
Myopia	...	...	...	69
Myopic astigmatism	...	...	...	68
Mixed astigmatism	...	...	...	29
Total	...	...	...	476

Included in this total were 27 cases of squint.

Spectacles were provided for 348 children under the authority's scheme.

**(9) Ear Disease and Hearing.**

The lines of treatment outlined in the 1933 report have been followed with good results ; where necessary cases are referred to the Ear Department at one of the Voluntary Hospitals.

**(10) Dental Treatment.**

Mr. W. D. Penfold, School Dental Surgeon, reports :—" The outstanding feature of the report of the work, carried out by the Dental Department during the year ending 31st December, 1936, is the very satisfactory increase in the numbers accepting the treatment offered at the clinics, viz., 70 per cent. of those referred for treatment, a figure which has not been reached hitherto and an increase of 15 per cent. over that of the previous year. Owing to this appreciable increase in acceptances it was found impossible to attend all schools for inspection purposes, but these will be visited early in the year.



A total of 3,766 children were examined during the twelve months, of whom 2,315 were referred for treatment and 1,637 actually treated. A total number of 2,073 fillings were inserted, 1,213 of which were in permanent teeth.

The somewhat large increase in the number of 'other operations'—126 more than in the previous year, indicates that a considerable number of patients who had neglected their teeth previously have at last accepted treatment. Many of these teeth were so badly decayed, however, that it was found necessary to insert one or more dressings before finally filling them, thus necessitating more than one visit to the clinic before completion.

28 infants from the Welfare Centres have been treated during the year. 413 casuals attended for treatment, 114 of whom had previously refused treatment and 172 of whom were referred for extractions under general anaesthetic owing to the presence of septic conditions.

Although inspections are not carried out at the Grammar School and High School a number of children from these schools requested and received treatment at the clinics.

The impressions gained this year are that prejudices are being overcome and that parents are showing more appreciation of the facilities offered them."

## **6. INFECTIOUS DISEASES.**

### **(a) Notifiable Infectious Diseases.**

See section Infectious Diseases pages 17-19 for particulars of incidence, etc.

As regards diphtheria immunisation, the response of parents to invitation has been very poor indeed, due probably to the fact that the incidence of diphtheria is at present extremely low.

It is intended to persevere with the work of propaganda in the hope that parents will realise the responsibility to protect their children against this insidious and treacherous disease, which is only going through a cycle of low and mild incidence, before entering one of greater and more virulent intensity.

Details of the work are as follows :—

	Park View Clinic.
No. Schick tested before immunisation	26
Percentage Schick positive ... ..	65
No. immunised with T.A.F. ... ..	14
No. of immunised who received three full doses of T.A.F. ... ..	9
No. immunised with 2 full doses ... ..	2
No. immunised with 1 full dose ... ..	3

(b) **Non-Notifiable Infectious Diseases.**

It was not considered necessary to close any school, department or class during 1936.

REPORTED BY HEAD TEACHERS, SCHOOL NURSES AND  
SCHOOL ATTENDANCE OFFICERS.

Measles ... ..	568 cases.
German Measles ... ..	4
Whooping-cough ... ..	91
Chicken-pox ... ..	42
Mumps ... ..	15
Total ... ..	720

**Exclusions from School.**

375 children were excluded from school by the School Medical Officer for the following diseases :—

1. Infectious Diseases (including Rheumatism and Influenza) ... ..	26
2. Diseases of the Skin (including Ringworm) ... ..	86
3. Inflammatory conditions of the Throat, Tonsillitis, Adenitis, etc. ... ..	30
4. Nervous Conditions, including Chorea, Epilepsy, etc. ... ..	15
5. Diseases of the Digestive System ... ..	2
6. Bronchial Catarrh and Colds, etc. ... ..	74
7. Heart Disease ... ..	6
8. Injuries ... ..	7
9. Diseases of the Ear ... ..	3
10. Diseases of the Eye ... ..	35
*11. Tuberculosis (definite or suspected) ... ..	1
12. Other Diseases ... ..	90
Total ... ..	375

\*This does not include children excluded by the Tuberculosis Officer.



The following certificates were given for schools in which the attendance fell below 60% under Grant Regulations 8 and 9.

Measles	...	...	...	...	8 certificates.
Whooping Cough	...	...	...	28	"

### 7. FOLLOWING UP. WORK OF SCHOOL NURSES.

Number of Schools (including Special School and Open Air Schools)	...	...	...	24
Visits of Nurses to Schools	...	...	...	158
" " " Departments	...	...	...	165
Visits to Homes:—				
By direct instruction of School Medical Officer	...	...	...	234
At request of School Attendance Officer	...	...	...	201
Following up cases of uncleanness	...	...	...	132
General cases, following up	...	...	...	888
School Visits—miscellaneous	...	...	...	468
Total	...	...	...	1,923

### Examinations for cleanliness:—

Primary	...	...	...	...	14,105
Secondary	...	...	...	...	582
Total	...	...	...	...	14,687

### { 8. PHYSICAL TRAINING. GAMES.

There was no organiser of Physical Training throughout the year, the teachers being responsible for all instruction.

Careful consideration was given to Circular 1445 of the Board of Education, and as a result, it was decided to co-operate with neighbouring authorities, so that the part-time services of both a male and a female organiser of physical training should be available in 1937.

The treatment of minor orthopædics in the schools has received continued attention, particularly in the Grammar School. It is hoped that the newly appointed organisers will be able to help in this direction.



Co-operation with the orthopædic clinic in supervising the results in the case of children discharged, and apparently cured, is also very important; unless the special exercises are continued relapse is undoubtedly certain.

A special report on the lack of accommodation for changing at school playing fields was prepared by the Deputy School Medical Officer and considered by the Children's Care Sub-Committee.

## **9. PROVISION OF MEALS AND NUTRITION OF CHILDREN.**

(a) Dinners for necessitous children on the same lines as in previous years were provided during the periods given below in suitable restaurants.

	Average Number Fed each Day.	
7th January to 8th April, 1936 ... ..	...	347
11th May to 14th August, 1936 ... ..	...	308
15th September to 23rd December, 1936 ...	...	339

The average numbers in attendance in the second and third terms show a considerable increase as compared with those of 1936.

The restaurants are visited regularly by members of the staffs of the school medical service, the school attendance officers, teachers and sanitary inspectors. Both as regards quality and quantity the dinners were generally satisfactory. Special menus, including salads, sweets and stewed fruit, were arranged at my request during the warm months, but were not really popular with the children, who mostly preferred the heavier winter menus.

(b) Preliminary selection is made by the head teacher of such children as appear on social and economic grounds, and their general physical condition to be "unable by reason of lack of food to take full advantage of the education provided." The school medical officer is consulted in any application made on medical grounds or where his advice is considered of advantage.

(c) Practically all the schools provide morning lunch milk under the scheme of the Milk Marketing Board.

Reports respecting the number of children receiving such milk were obtained for the Board of Education on two occasions

during the year 1936, and summaries of the information are given below :—

31ST MARCH, 1936.

	Free.	On payment of $\frac{1}{2}$ d. per third pint.	Total.
Total, Public Elementary Schools	52	2,148	2,200
Athelstan Road Open Air School	14	12	26
Hollington Open Air School ...	15	9	24
„ M.D. „ ...	...	14	14
High School for Girls ...	...	160	160
	<hr/> 81	<hr/> 2,343	<hr/> 2,424

1ST OCTOBER, 1936.

	Free.	On payment of $\frac{1}{2}$ d. per third pint.	Total.
Total, Public Elementary Schools	50	2,007	2,057
Athelstan Road Open Air School	7	12	19
Hollington Open Air School ...	13	9	22
„ M.D. „ ...	5	13	18
High School for Girls ...	...	160	160
	<hr/> 75	<hr/> 2,201	<hr/> 2,276

There is a slight increase in the number of children having morning milk in 1936 as compared with 1935. The number of schools using milk pasteurised under licence, continues to increase: any other milk must attain on bacteriological examination the standard of accredited milk. All milk supplied by the Education Committee is pasteurised.

The nutritional condition of the children inspected during the year is set out in Table II. B; 2·5 per cent. are returned as excellent, 75·5 per cent. as normal, 19·8 per cent. as slightly sub-normal and 2 per cent. as bad. In view of the continued and difficult economic conditions, especially during the winter months, it is my opinion that the nutrition of the children has been well maintained, and in this connection the provision of free meals and milk and the lunch milk scheme must be factors of considerable importance.



## 10. SCHOOL BATHS.

Baths are not available at any of the elementary schools, but are provided at the School for Delicate Children, St. Leonards, and for cases of uncleanness, scabies, etc., specially referred, at the Disinfecting Station at Rock-a-Nore.

- 11. CO-OPERATION OF PARENTS.
- 12. CO-OPERATION OF TEACHERS.
- 13. CO-OPERATION OF SCHOOL ATTENDANCE OFFICERS.
- 14. CO-OPERATION OF VOLUNTARY BODIES.

At routine medical inspection the attendance of parents was 74 per cent.; refusals to permit examination 2 per cent.

The interest of parents in the work of the School Medical Service, especially as regards investigation of cases at routine school inspection, and also in the work of treatment at the school clinics and elsewhere, was fully maintained.

I acknowledge with gratitude the constant and continued help and sympathy accorded to us by the teachers, school attendance officers and the representatives of various official and voluntary societies.

## 15. BLIND, DEAF, DEFECTIVE & EPILEPTIC CHILDREN.

See Table III.—pp. 82-85.

### (a) Ascertainment and General Treatment.

The special register is kept up-to-date. Appropriate treatment is secured for each case ascertained through the School Medical Service, private medical practitioners, the local hospitals, or by sending the child to Chailey or other suitable institution.

### (b) Mentally Defective Children—not in the Special School.

#### (1) THE DULL AND BACKWARD GROUP.

Children belonging to this group, not capable of being certified for the Special School, are referred to the Director of Education and the headmaster.

There is a field for development as regards the appropriate treatment of these children in special classes in the ordinary elementary schools of the town.



(2) **THE LOW GRADE GROUP—NOT SUITABLE FOR THE SPECIAL SCHOOL.**

These children are under the Mental Deficiency Committee and in suitable cases the Occupation Centre at Halton School Clinic is available.

(c) **The Schools for Delicate Children.**

(1) **St. Leonards.**

A. MENTAL OR SPECIAL SCHOOL SIDE.

The number of children on the roll was maintained at 69-70. The health of the children throughout the year was very satisfactory, as a result of the good hygienic conditions at the school, and the excellent mid-day meal. The average gain in weight during the year was high. Less than one-third of the children were found at the routine medical inspection to have defects requiring treatment. Special attention by personal interviews with parents, and following up by the school nurses, was given to the matter of the treatment of these defects.

Admissions—

Boys	...	...	10
Girls	...	...	2
Total			<hr/> 12 <hr/>

Discharges—

Placed under "After Care" Committee	...	...	...	...	15
Placed under M.D. Committee	...				4
Returned to ordinary school	...				1
Left the town	...	...	...		2
Discharged on medical grounds					1
Total					<hr/> 23 <hr/>

### The After Care Committee.

This voluntary committee supervises by means of home visits and personal interviews former pupils up to the age of 21, and wherever necessary cases are referred for intensive observation and any necessary action by the Mental Deficiency Committee. Such cases are in the vast minority, and most of the former pupils obtained and hold steady jobs.

#### B. THE OPEN-AIR SIDE.

During the year 14 children were admitted, for the following reasons :—

Infantilism	...	...	...	...	1
Tuberculous Abdomen	...	...	...	...	1
Heart Disease	...	...	...	...	3
Rheumatism	...	...	...	...	1
Debility and Bronchitis	...	...	...	...	4
Debility, Anæmia and Malnutrition	...	...	...	...	3
Chronic Catarrh of lungs	...	...	...	...	1
Total					14

Fifteen children were discharged during the year, 14 as fit to re-enter ordinary schools, and one left the town.

The average gain in weight for a period of 12 months was 6 lbs.

#### (2) Hastings.

At Athelstan Road School for Delicate Children 21 children were discharged, 19 as fit to re-enter ordinary schools, one child was transferred to St. Leonards Open Air School, and one left the town.

16 children were admitted for the following reasons :—

Anæmia, Debility and Old Rickets	...	...	...	...	10
Rheumatism and Heart Disease	...	...	...	...	4
Enlarged Glands	...	...	...	...	1
Bone Disease	...	...	...	...	2
Asthma and Bronchitis	...	...	...	...	4
Total					21

The average gain in weight for a period of 12 months has been  $4\frac{3}{4}$  lbs.

The two open-air schools have 50-54 places for delicate children of the types mentioned above. The immediate results after a period of treatment at the school of six months up to 5 or 6 years are often very good. In some cases the child remains perfectly well. In other cases the child relapses after six months or a year at an ordinary school, due to the altered environment and curriculum. A return to the Open-Air School might again affect a marked change for the better, but unfortunately at present no accommodation is available for children over the age of 9-10 years. This will be corrected as far as Hastings is concerned at the new open-air school to be erected at Ore. At the same time I recommend that an additional classroom for older children should be provided at the Hollington Open-Air School.

**St. Leonards School for Delicate Children.  
Mental Branch.**

**(A) RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN  
THE YEAR ENDED 31ST DECEMBER, 1936.**

DEFECT OR DISEASE.	Routine Inspections.	
	No. of Defects.	
	Requiring Treatment.	Requiring to be kept under observation, but <i>not</i> requiring treatment.
SKIN :—		
(1) Ringworm, Scalp ... ..	...	...
(2) Ringworm, Body ... ..	...	...
(3) Scabies ... ..	...	...
(4) Impetigo ... ..	...	...
(5) Other Skin Diseases (Non-Tuberculous) ... ..	...	...
TOTAL (Heads 1 to 5) ... ..	...	...



DEFECT OR DISEASE.	Routine Inspections.	
	No. of Defects.	
	Requiring Treatment.	Requiring to be kept under observation, but <i>not</i> requiring treatment.
EYE :—		
(6) Blepharitis ... ..	...	...
(7) Conjunctivitis ... ..	...	...
(8) Keratitis ... ..	...	...
(9) Corneal Opacities ... ..	...	...
(10) Other conditions (excluding Defective Vision and Squint) ...	...	...
TOTAL (Heads 6 to 10) ... ..	...	...
(11) Defective Vision (excluding squint)	6	...
(12) Squint ... ..	...	...
EAR :—		
(13) Defective Hearing ... ..	2	...
(14) Otitis Media ... ..	...	...
(15) Other Ear Diseases ... ..	...	...
NOSE AND THROAT :—		
(16) Chronic Tonsillitis only ... ..	1	3
(17) Adenoids only ... ..	...	1
(18) Chronic Tonsillitis and Adenoids	1	3
(19) Other Conditions .. ..	...	...
(20) Enlarged Cervical Glands (Non-Tuberculous ... ..	...	1
(21) Defective Speech ... ..	1	...
HEART AND CIRCULATION :—		
Heart Disease—		
(22) Organic ... ..	...	...
(23) Functional ... ..	...	...
(24) Anæmia ... ..	2	1
LUNGS :—		
(25) Bronchitis ... ..	...	1
(26) Other Non-Tuberculous Diseases	...	...
TUBERCULOSIS :—		
Pulmonary—		
(27) Definite ... ..	...	...
(28) Suspected ... ..	...	...
Non-Pulmonary—		
(29) Glands ... ..	...	...
(30) Bones and Joints ... ..	...	...
(31) Skin ... ..	...	...
(32) Other Forms ... ..	...	...
TOTAL (Heads 29 to 32 ... ..	...	...

DEFECT OR DISEASE.	Routine Inspections.	
	No. of Defects.	
	Requiring Treatment.	Requiring to be kept under observation, but <i>not</i> requiring treatment.
NERVOUS SYSTEM :—		
(33) Epilepsy ... ..	...	...
(34) Chorea ... ..	...	...
(35) Other Conditions ... ..	...	...
DEFORMITIES :—		
(36) Rickets ... ..	...	...
(37) Spinal Curvature ... ..	5	3
(38) Other Forms ... ..	1	1
(39) Other Defects and Diseases (excluding Uncleanliness and Dental Diseases) ... ..	1	1
Total ... ..	20	15

**(B) CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED  
DURING THE YEAR IN THE ROUTINE AGE GROUPS.**

Age Groups.	Number of Children Inspected.	A (Excellent)		B (Normal)		C (Slightly subnormal)		D. (Bad)	
		No.	%	No.	%	No.	%	No.	%
St. Leonards School for Delicate Children (Mental Branch) ... ..	64	6	9.3	48	75.0	10	15.6	...	...

**St. Leonards School for Delicate Children  
(Open-Air Branch).**

**(A) RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN  
THE YEAR ENDED 31ST DECEMBER, 1936.**

DEFECT OR DISEASE.	Routine Inspections.	
	No. of Defects.	
	Requiring Treatment.	Requiring to be kept under observation, but not requiring treatment.
<b>SKIN :—</b>		
(1) Ringworm, Scalp ... ..	...	...
(2) Ringworm, Body ... ..	...	...
(3) Scabies ... ..	...	...
(4) Impetigo ... ..	...	...
(5) Other Diseases (Non-Tuberculous) ... ..	...	...
<b>TOTAL (Heads 1 to 5) ... ..</b>	...	...
<b>EYE :—</b>		
(6) Blepharitis ... ..	...	...
(7) Conjunctivitis ... ..	...	...
(8) Keratitis ... ..	...	...
(9) Corneal Opacities ... ..	...	...
(10) Other Conditions (excluding Defective Vision and Squint) ... ..	...	...
<b>TOTAL (Heads 6 to 10) ... ..</b>	...	...
(11) Defective Vision (excluding Squint) ... ..	<b>1</b>	...
(12) Squint ... ..	...	...
<b>EAR :—</b>		
(13) Defective Hearing ... ..	...	...
(14) Otitis Media ... ..	...	...
(15) Other Ear Diseases ... ..	...	...
<b>NOSE AND THROAT :—</b>		
(16) Chronic Tonsillitis only ... ..	...	<b>1</b>
(17) Adenoids only ... ..	...	...
(18) Chronic Tonsillitis and Adenoids ... ..	<b>2</b>	...
(19) Other Conditions ... ..	...	...
(20) Enlarged Cervical Glands (Non-Tuberculous) ... ..	...	<b>1</b>
(21) Defective Speech ... ..	...	...



DEFECT OR DISEASE.	Routine Inspections.	
	No. of Defects.	
	Requiring Treatment.	Requiring to be kept under observation, but <i>not</i> requiring Treatment.
HEART AND CIRCULATION:—		
(22) Heart Disease—Organic ...	...	...
(23)                      Functional ...	...	1
(24) Anæmia ...	...	2
LUNGS:—		
(25) Bronchitis ...	...	2
(26) Other Non-Tuberculous Diseases ...	...	...
TUBERCULOSIS:—		
Pulmonary—		
(27)   Definite ...	...	...
(28)   Suspected ...	...	...
Non-Pulmonary—		
(29)   Glands ...	2	1
(30)   Bones and Joints ...	...	...
(31)   Skin ...	...	...
(32)   Other forms ...	1	1
TOTAL (Heads 29 to 32) ...	3	2
NERVOUS SYSTEM:—		
(33) Epilepsy ...	...	...
(34) Chorea ...	...	...
(35) Other Conditions ...	...	...
DEFORMITIES:—		
(36) Rickets ...	...	...
(37) Spinal Curvature ...	1	1
(38) Other Forms ...	...	...
(39) Other Defects and Diseases (excluding Uncleanliness and Dental Diseases) ...	...	...
Total ...	7	10

**(B) CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED  
DURING THE YEAR IN THE ROUTINE AGE GROUPS.**

Age Groups.	Number of Children Inspected.	A (Excellent)		B (Normal)		C (Slightly subnormal)		D (Bad)	
		No.	%	No.	%	No.	%	No.	%
St. Leonards School for Delicate Children (Open- Air Branch) ...	20	—	—	12	60·0	7	35·0	1	5·0

**Hastings School for Delicate Children (Open-Air Branch).**

**(A) RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN  
THE YEAR ENDED 31ST DECEMBER, 1936.**

DEFECT OR DISEASE.	ROUTINE INSPECTIONS.	
	No. of Defects.	
	Requiring Treatment.	Requiring to be kept under Observation but <i>not</i> requiring Treatment.
SKIN :—		
(1) Ringworm, Scalp ... ..	...	...
(2) Ringworm, Body ... ..	...	...
(3) Scabies ... ..	...	...
(4) Impetigo ... ..	...	...
(5) Other Diseases (Non-Tuberculous)	...	...
TOTAL (Heads 1 to 5) ...	...	...
EYE :—		
(6) Blepharitis ... ..	1	...
(7) Conjunctivitis ... ..	1	...
(8) Keratitis ... ..	...	...
(9) Corneal Opacities ... ..	...	...
(10) Other Conditions (excluding Defective Vision and Squint) ...	...	...
TOTAL (Heads 6 to 10) ...	2	...
(11) Defective Vision (including Squint) ... ..	...	...
(12) Squint ... ..	...	...

DEFECT OR DISEASE.	ROUTINE INSPECTIONS.	
	No. of Defects.	
	Requiring Treatment.	Requiring to be kept under Observation but not requiring Treatment.
EAR :—		
(13) Defective Hearing ... ..	..	...
(14) Otitis Media ... ..	...	...
(15) Other Ear Diseases... ..	...	...
NOSE AND THROAT :—		
(16) Chronic Tonsillitis only ... ..	...	5
(17) Adenoids only ... ..	...	...
(18) Chronic Tonsillitis and Adenoids	2	...
(19) Other Conditions ... ..	...	...
(20) Enlarged Cervical Glands (Non-Tuberculous) ... ..	...	2
(21) Defective Speech ... ..	...	...
HEART & CIRCULATION :—		
(22) Heart Disease—Organic ... ..	...	...
(23)                      Functional ... ..	...	3
(24) Anæmia ... ..	1	...
LUNGS :—		
(25) Bronchitis ... ..	...	...
(26) Other Non-Tuberculous Diseases	...	...
TUBERCULOSIS :—		
Pulmonary—		
(27)   Definite ... ..	...	...
(28)   Suspected ... ..	...	...
Non-Pulmonary—		
(29)   Glands ... ..	...	...
(30)   Bones and Joints ... ..	...	...
(31)   Skin ... ..	...	...
(32)   Other Forms ... ..	...	...
TOTAL (Heads 29 to 32)	...	...
NERVOUS SYSTEM :—		
(33) Epilepsy ... ..	...	...
(34) Chorea ... ..	...	...
(35) Other Conditions ... ..	...	...
DEFORMITIES :—		
(36) Rickets ... ..	...	1
(37) Spinal Curvature ... ..	...	...
(38) Other Forms ... ..	...	3
(39) Other Defects and Diseases (excluding Uncleanliness and Dental Diseases) ... ..	2	1
Total ... ..	7	15



**(B) CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED  
DURING THE YEAR IN THE ROUTINE AGE GROUPS.**

Age Groups.	Number of Children Inspected.	A (Excellent)		B (Normal)		C (Slightly subnormal)		D (Bad)	
		No.	%	No.	%	No.	%	No.	%
Hastings Open-Air School ... ..	16	1	6.2	8	50.0	6	37.5	1	6.2

**High School for Girls.**

**(A) RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN  
THE YEAR ENDED 31ST DECEMBER, 1936.**

DEFECT OR DISEASE.	ROUTINE INSPECTIONS.	
	No. of Defects.	
	Requiring Treatment.	Requiring to be kept under Observation but not requiring Treatment.
<b>SKIN :—</b>		
(1) Ringworm, Scalp ... ..	...	...
(2) Ringworm, Body ... ..	...	...
(3) Scabies ... ..	...	...
(4) Impetigo ... ..	...	...
(5) Other Diseases (Non-Tuberculous)	...	...
<b>TOTAL (Heads 1 to 5) ...</b>	...	...
<b>EYE :—</b>		
(6) Blepharitis ... ..	...	...
(7) Conjunctivitis ... ..	...	...
(8) Keratitis ... ..	...	...
(9) Corneal Opacities ... ..	...	...
(10) Other Conditions excluding Defective and Squint ... ..	1	...
<b>TOTAL (Heads 6 to 10) ...</b>	1	...
(11) Defective Vision (excluding Squint)	13	...
(12) Squint ... ..	...	...

DEFECT OR DISEASE.	ROUTINE INSPECTIONS.	
	No. of Defects.	
	Requiring Treatment.	Requiring to be kept under Observation but not requiring Treatment.
EAR :—		
(13) Defective Hearing ... ..	...	...
(14) Otitis Media ... ..	...	...
(15) Other Ear Diseases ... ..	...	...
NOSE AND THROAT :—		
(16) Chronic Tonsillitis only ... ..	1	24
(17) Adenoids only ... ..	...	...
(18) Enlarged Tonsillitis and Adenoids ... ..	...	...
(19) Other Conditions ... ..	...	...
(20) Enlarged Cervical Glands (Non-Tuberculous) ... ..	...	1
(21) Defective Speech ... ..	...	...
HEART & CIRCULATION :		
(22) Heart Disease—Organic ... ..	...	...
(23)                      Functional ... ..	...	11
(24) Anæmia ... ..	...	...
LUNGS :		
(25) Bronchitis ... ..	...	...
(26) Other Non-Tuberculous Diseases ... ..	...	...
TUBERCULOSIS :		
Pulmonary—		
(27)   Definite ... ..	...	...
(28)   Suspected ... ..	...	...
Non-Pulmonary—		
(29)   Glands ... ..	...	...
(30)   Bones and Joints ... ..	...	...
(31)   Skin ... ..	...	...
(32)   Other Forms ... ..	...	...
TOTAL (Heads 29 to 32) ... ..	...	...
NERVOUS SYSTEM :		
(33)   Epilepsy... ..	...	...
(34)   Chorea ... ..	...	...
(35)   Other Conditions ... ..	...	...
DEFORMITIES :		
(36) Rickets ... ..	1	...
(37) Spinal Curvature ... ..	...	...
(38) Other Forms ... ..	4	13
(39) Other Defects and Diseases (excluding Uncleanliness and Dental Diseases) ... ..	...	...
Total ... ..	20	49

**(B) CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED  
DURING THE YEAR IN THE ROUTINE AGE GROUPS.**

Age Groups.	Number of Children Inspected.	A (Excellent)		B (Normal)		C (Slightly subnormal)		D (Bad)	
		No.	%	No.	%	No.	%	No.	%
High School for Girls ....	118	...	...	110	93.2	8	6.7	...	...

**TABLE II.  
Grammar School for Boys.**

**(A) RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN  
THE YEAR ENDED 31ST DECEMBER, 1936.**

DEFECT OR DISEASE.	ROUTINE INSPECTIONS.	
	No. of Defects.	
	Requiring Treatment.	Requiring to be kept under Observation but not requiring Treatment.
SKIN :—		
Ringworm—		
(1) Scalp ... ..	...	...
(2) Body ... ..	...	...
(3) Scabies ... ..	...	...
(4) Impetigo .. ...	...	...
(5) Other Diseases (Non-Tuberculous)	...	...
TOTAL (Heads 1 to 5) ... ..	...	...
EYE :—		
(6) Blepharitis ... ..	...	...
(7) Conjunctivitis ... ..	...	...
(8) Keratitis ... ..	...	...
(9) Corneal Opacities ... ..	...	...
(10) Other Conditions excluding Defective Vision and Squint ... ..	2	...
TOTAL (Heads 6 to 10) ... ..	2	...
(11) Defective Vision (excluding Squint) ... ..	16	1
(12) Squint ... ..	...	...



DEFECT OR DISEASE.	ROUTINE INSPECTIONS.	
	No. of Defects.	
	Requiring Treatment.	Requiring to be kept under Observation but not requiring Treatment.
Ear :—		
(13) Defective Hearing ... ..	...	...
(14) Otitis Media ... ..	...	...
(15) Other Ear Diseases... ..	...	...
Nose AND THROAT :—		
(16) Chronic Tonsillitis only ... ..	...	37
(17) Adenoids only ... ..	...	...
(18) Chronic Tonsillitis and Adenoids ... ..	...	2
(19) Other Conditions ... ..	...	...
(20) Enlarged Cervical Glands (Non-Tuberculous) ... ..	...	1
(21) Defective Speech ... ..	...	...
Heart & Circulation :—		
(22) Heart Disease—Organic ... ..	...	..
(23)                      Functional ... ..	...	8
(24) Anæmia ... ..	...	...
Lungs :—		
(25) Bronchitis ... ..	...	...
(26) Other Non-Tuberculous Diseases ... ..	...	...
TUBERCULOSIS :—		
Pulmonary—		
(27) Definite ... ..	...	...
(28) Suspected ... ..	...	...
Non-Pulmonary—		
(29) Glands ... ..	...	...
(30) Bones and Joints ... ..	...	...
(31) Skin ... ..	...	...
(32) Other Forms ... ..	...	...
TOTAL (Heads 29 to 32) ... ..	...	...
NERVOUS SYSTEM :—		
(33) Epilepsy ... ..	...	...
(34) Chorea ... ..	...	...
(35) Other Conditions ... ..	...	...
DEFORMITIES :—		
(36) Rickets ... ..	...	...
(37) Spinal Curvature ... ..	...	...
(38) Other Forms ... ..	1	17
(39) Other Defects and Diseases (excluding Uncleanliness and Dental Diseases) ... ..	...	...
Total ... ..	19	66

**(B) CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED  
DURING THE YEAR IN THE ROUTINE AGE GROUPS.**

Age Groups.	Number of Children Inspected.	A (Excellent)		B (Normal)		C (Slightly subnormal)		D (Bad)	
		No.	%	No.	%	No.	%	No.	%
Grammar School	145	...	...	118	81.3	27	18.6	...	...

**19. EMPLOYMENT OF CHILDREN & YOUNG PERSONS.**

Number of licences issued to children in 1936	...	191
Number of such children medically examined	...	114
Number of such children rejected	...	4

Description of the work at which the children were employed and number of children so employed:—

Delivery of papers	...	...	...	...	126
„ „ milk	...	...	...	...	2
Errands	...	...	...	...	62
Housework	...	...	...	...	1
Total	...	...	...	...	191

A number of children are also employed under licences granted previous to 1936.

In addition to the above, 5 children were licensed to take part in entertainments, each child being medically examined before the issue of the licence.

**20. TEACHING OF MOTHERCRAFT TO SENIOR GIRLS.**

In all senior schools for girls and the domestic service centres, mothercraft teaching is carried out. The school nurses advise generally on the courses. No systematic or *ad hoc* teaching on matters of sex is undertaken.

The new housekeeping centre at Ore Village Girls' School, really a reconditioned caretaker's cottage, is used for the purpose,

as the rooms are about the same size as those of a large Council house. The girls at this centre were most interested and enthusiastic and the parents were also very appreciative of the work done and information given.

## 21. MISCELLANEOUS.

Eighty entrants for scholarships to the High School for Girls and Grammar School for Boys received a special medical examination. The School Medical Officer advised the Education Committee with regard to medical matters in connection with the engagement of teachers, and teachers on the sick list, etc.

# MEDICAL INSPECTION RETURNS.

Year ended 31st December, 1936.

**TABLE I.—MEDICAL INSPECTIONS OF CHILDREN  
ATTENDING PUBLIC ELEMENTARY SCHOOLS.**

### (A) Routine Medical Inspections.

NUMBER OF INSPECTIONS IN THE PRESCRIBED GROUPS.

Entrants ... ..	635
Second Age Group .. ..	556
Third Age Group ... ..	518
<hr/>	
Total ...	1,709

NUMBER OF OTHER ROUTINE INSPECTIONS.

Grammar School (Boys) ... ..	145
High School (Girls) ... ..	118
Hastings Open Air School ... ..	16
St. Leonards Open Air School ... ..	20
St. Leonards Special School .. ..	64
<hr/>	
	363
<hr/>	
Grand Total ...	2,072
<hr/>	



**(B) Other Inspections.**

NUMBER OF SPECIAL INSPECTIONS	...	...	1,456
NUMBER OF RE-INSPECTIONS	...	...	5,153
			-----
Total	...	...	6,609
			-----

**(C) Children found to Require Treatment.**

Number of individual children found at Routine Medical Inspection to require treatment (excluding Uncleanliness and Dental Diseases).

## PRESCRIBED GROUPS.

Group.	For defective vision (excluding squint).	For all other conditions recorded in Table II A.	Total.
(1)	(2)	(3)	(4)
Entrants ... ..	1	98	99
Second Age Group ... ..	19	51	69
Third Age Group ... ..	17	47	64
Total (Prescribed Groups) ...	37	196	232
Other Routine Inspections ...	36	35	70
Grand Total ... ..	73	231	302

The following table is an analysis of the number of children suffering from defects requiring treatment in schools apart from the elementary schools :—

School.		Number Examined.	Number with Defects.
High School for Girls ...	...	118	20
Grammar School ...	...	145	19
Open Air School, Hastings ...	...	16	5
School for Delicate Children, St. Leonards Open Air Side...		20	7
Mental Side ...	...	64	19

**TABLE II.**

**Medical Inspection Returns.**

(A) RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN  
THE YEAR ENDED 31ST DECEMBER, 1936.

DEFECT OR DISEASE.	ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
	No. of Defects.		No. of Defects.	
	Requiring Treatment.	Requiring to be kept under Observation but not requiring Treatment.	Requiring Treatment.	Requiring to be kept under Observation, but not requiring Treatment.
SKIN :—				
(1) Ringworm, Scalp...	...	...	3	...
(2) Ringworm, Body ...	...	...	2	...
(3) Scabies ...	...	...	2	...
(4) Impetigo ...	...	...	138	...
(5) { Other Diseases (Non-Tuberculous)	4	1	147	...
{ Minor Injuries, Bruises, Sores, etc.	1	...	473	...
TOTAL (Heads 1 to 5)	5	1	765	...

DEFECT OR DISEASE.	ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
	No. of Defects.		No. of Defects.	
	Requiring Treatment.	Requiring to be kept under Observation but not requiring Treatment.	Requiring Treatment.	Requiring to be kept under Observation but not requiring Treatment.
EYE :—				
(6) Blepharitis ... ..	4	4	11	...
(7) Conjunctivitis ... ..	1	...	25	...
(8) Keratitis ... ..	...	...	...	...
(9) Corneal Opacities ... ..	..	...	...	...
(10) Other Conditions (excluding Defective Vision and Squint)...	18	1	113	1
Total (Heads 6 to 10)	23	5	149	1
(11) Defective Vision (excluding Squint)	37	7	262	1
(12) Squint ... ..	...	1	24	...
EAR :—				
(13) Defective Hearing ... ..	2	1	7	1
(14) Otitis Media ... ..	2	1	18	...
(15) Other Ear Diseases	4	...	66	1
NOSE AND THROAT :—				
(16) Chronic Tonsillitis only ... ..	48	356	88	32
(17) Adenoids only ... ..	...	1	2	1
(18) Chronic Tonsillitis and Adenoids ... ..	3	6	132	23
(19) Other Conditions ... ..	...	8	33	4
(20) Enlarged Cervical Glands (Non-Tuberculous) ... ..	1	62	28	12
(21) Defective Speech ... ..	...	1	...	...
HEART & CIRCULATION :—				
(22) Heart Disease—Organic	...	7	...	...
(23) Functional	...	42	6	4
(24) Anæmia ... ..	29	7	56	3
LUNGS :—				
(25) Bronchitis ... ..	3	1	66	...
(26) Other Non-Tuberculous Diseases ... ..	15	...	16	...



DEFECT OR DISEASE.	ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
	No. of Defects.		No. of Defects.	
	Requiring Treatment.	Requiring to be kept under Observation but not requiring Treatment.	Requiring Treatment.	Requiring to be kept under Observation but not requiring Treatment.
TUBERCULOSIS :—				
Pulmonary—				
(27) Definite ... ..	...	...	...	...
(28) Suspected ... ..	...	...	...	...
Non-Pulmonary—				
(29) Glands ... ..	...	...	1	...
(30) Bones and Joints ... ..	...	...	...	...
(31) Skin ... ..	...	...	...	...
(32) Other Forms ... ..	...	...	...	...
TOTAL (Heads 29 to 32)	...	...	1	...
NERVOUS SYSTEM :—				
(33) Epilepsy ... ..	...	...	...	2
(34) Chorea ... ..	...	...	6	3
(35) Other Conditions ... ..	...	...	...	...
DEFORMITIES :—				
(36) Rickets ... ..	3	4	4	...
(37) Spinal Curvature ... ..	2	16	1	...
(38) Other Forms ... ..	13	92	20	3
(39) Other Defects and Diseases (excluding uncleanliness and Dental Diseases) ... ..	57	28	773	51
Total ... ..	247	647	2523	142

**(B) CLASSIFICATION OF THE NUTRITION OF CHILDREN  
INSPECTED DURING THE YEAR IN THE ROUTINE  
AGE GROUPS.**

Age Groups.	Number of Children Inspected.	A (Excellent)		B (Normal)		C (Slightly subnormal)		D (Bad)	
		No.	%	No.	%	No.	%	No.	%
Entrants ... ..	635	23	3.6	492	77.4	107	16.8	13	2.0
Second Age Group	556	15	2.6	361	64.9	157	28.2	23	4.1
Third Age Group	518	8	1.5	417	80.5	89	17.1	4	.7
Other Routine Inspections ...	363	7	1.9	296	81.5	58	15.9	2	.5
TOTAL ...	2072	53	2.5	1566	75.5	411	19.8	42	2.0

**Table III. Return of all Exceptional Children in the Area.**  
BLIND CHILDREN.

At Certified Schools for the Blind.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
3	...	...	2	5

PARTIALLY SIGHTED CHILDREN.

At Certified Schools for the Blind.	At Certified Schools for the Partially Sighted.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
...	...	1	...	2	3

## DEAF CHILDREN.

At Certified Schools for the Deaf.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
3	...	...	...	3

## PARTIALLY DEAF CHILDREN.

At Certified Schools for the Deaf.	At Certified Schools for the Partially Deaf.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
...	...	1	...	...	1

## MENTALLY DEFECTIVE CHILDREN.

## FEEBLE-MINDED CHILDREN.

At Certified Schools for Mentally Defective Children.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
64	...	...	1	65

## EPILEPTIC CHILDREN.

## CHILDREN SUFFERING FROM SEVERE EPILEPSY.

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
...	...	...	1	1



## PHYSICALLY DEFECTIVE CHILDREN.

## A. TUBERCULOUS CHILDREN.

I.—CHILDREN SUFFERING FROM PULMONARY TUBERCULOSIS.  
(Including pleura and intra-thoracic glands.)

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
...	...	...	...	...

## II.—CHILDREN SUFFERING FROM NON-PULMONARY TUBERCULOSIS.

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
10	7	...	2	19

## B. DELICATE CHILDREN.

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
34	98	...	5	137

## C. CRIPPLED CHILDREN.

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
2	24	...	1	27

## D. CHILDREN WITH HEART DISEASE.

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
7	8	...	3	18

## CHILDREN SUFFERING FROM MULTIPLE DEFECTS.

Combination of Defect.	At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
Partially Blind—T.B. Glands ...	...	...	...	1	1
Heart Disease—Mental Defect (F.M.)	1	...	...	...	1

**Table IV. Return of Defects Treated during the Year ended 31st December 1936.**

## TREATMENT TABLE.

## GROUP I. MINOR AILMENTS (EXCLUDING UNCLEANLINESS).

DISEASE OR DEFECT.	NUMBER OF DEFECTS TREATED, OR UNDER TREATMENT DURING THE YEAR.		
	Under the Authority's Scheme.	Otherwise.	Total.
SKIN:—			
Ringworm, Scalp—			
(i) X-Ray Treatment ...	3	...	3
(ii) Other ...	...	...	...
Ringworm, Body ...	2	...	2
Scabies ...	2	...	2
Impetigo ...	138	...	138
Other Skin Diseases ...	150	1	151
MINOR EYE DEFECTS ...	171	1	172
(External and other, but excluding cases falling in Group II.)			
MINOR EAR DEFECTS ...	99	...	99
MISCELLANEOUS ... (e.g., minor injuries, bruises, sores, chilblains, etc).	1,301	3	1,304
TOTALS ...	1,866	5	1,871

GROUP II. DEFECTIVE VISION AND SQUINT (EXCLUDING MINOR EYE DEFECTS TREATED AS MINOR AILMENTS.—GROUP I.).

DEFECT OR DISEASE.	NUMBER OF DEFECTS DEALT WITH.		
	Under the Authority's Scheme.	Otherwise.	Total.
ERRORS OF REFRACTION ... (Including Squint).	476	3	479
OTHER DEFECT OR DISEASE OF THE EYES ... (Excluding those recorded in Group I.)	...	...	...
TOTAL ...	476	3	479
NUMBER OF CHILDREN FOR WHOM SPECTACLES WERE :			
(a) Prescribed ...	364	3	367
(b) Obtained ...	348	3	351

GROUP III. TREATMENT OF DEFECTS OF NOSE AND THROAT.

NUMBER OF DEFECTS.													
RECEIVED OPERATIVE TREATMENT.												Received other forms of Treatment. (iv)	Total No. Treated. (v)
Under the Authority's Scheme, in Clinic or Hospital. (i)				By Private Practitioner or Hospital apart from the Authority's Scheme. (ii)				Total. (iii)					
(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)		
79	2	121	...	1	...	...	1	80	2	121	1	33	237

(i) Tonsils only. (ii) Adenoids only. (iii) Tonsils and Adenoids.  
(iv) Other defects of the nose and throat.



## GROUP IV. ORTHOPÆDIC AND POSTURAL DEFECTS.

	Under the Authority's Scheme. (1)		
	Residential treatment with education. (i)	Residential treatment without education. (ii)	Non-residential treatment at an orthopaedic clinic. (iii)
Number of children treated ...	2	2	73

Otherwise. (2)			Total number treated.
Residential treatment with education. (i)	Residential treatment without education. (ii)	Non-residential treatment at an orthopaedic clinic. (iii)	
...	...	2	77

## GROUP V.—DENTAL DEFECTS.

(1) Number of Children who were :—

(a) Inspected by the Dentist :—

		Aged.			
Routine Age Groups	{	5	...	341	Total ... 3,446
		6	...	309	
		7	...	394	
		8	...	348	
		9	...	389	
		10	...	356	
		11	...	343	
		12	...	427	
		13	...	406	
		14	...	133	
(b) Specials	...	...	...	...	320
(c) Total (Routine and Specials)	...	...	...	...	3,766

(2)	Number found to require treatment	...	...	...	...	2,315
(3)	Number Actually treated	...	...	...	...	1,637
(4)	Attendances made by the Children for treatment	...	...	...	...	3,886
(5)	Half-days devoted to	{ Inspection 25½ Treatment 480½ }				Total ... 506
(6)	Fillings	...	...	{ Permanent teeth 1,213 Temporary teeth 860 }		Total ... 2,073
(7)	Extractions	...	...	{ Permanent teeth 354 Temporary teeth 1,759 }		Total ... 2,113
(8)	Administration of general anæsthetics for extractions	...	...	...	...	386
(9)	Other Operations	{ Permanent teeth 403 Temporary teeth ... }				Total ... 403

#### GROUP VI.—UNCLEANLINESS AND VERMINOUS CONDITIONS.

(i.)	Average number of visits per school made during the year by the School Nurses	...	...	...	...	...	7
(ii.)	Total number of examinations of children in the Schools by School Nurses	...	...	...	...	...	14,687
(iii.)	Number of individual children found unclean	...	...	...	...	...	524
(iv.)	Number of children cleansed under arrangements made by the Local Education Authority	...	...	...	...	...	5
(v.)	Number of cases in which legal proceedings were taken :—						
	(a) Under the Education Act, 1921	...	...	...	...	...	nil.
	(b) Under School Attendance Byelaws	...	...	...	...	...	nil.

## ORTHOPÆDIC SCHEME.

### PREVENTION AND TREATMENT OF CRIPPLING, POSTURAL DEFECTS, &c.

The Orthopædic Clinic at the Royal East Sussex Hospital deals with :—

- (a) Children of school age.
- (b) Infants under school age.
- (c) Cases of tuberculosis of all ages.

The scheme includes :—

- (a) Consultation and systematic supervision of treatment by the Orthopædic Surgeon.
- (b) Remedial Treatment at the Clinic by the Orthopædic Surgeon and Nurse. Provision of necessary appliances.
- (c) Specialised treatment, e.g., Ultra-violet Rays and X-Rays.
- (d) In-patient treatment for short periods.

- (e) Institutional Treatment, with Education, at the Heritage Craft Schools, Chailey, for Cripples, with sea-side branch at Bishopstone.

Cases attending Orthopædic Clinic, December 31st, 1936 :—

(a) SCHOOL MEDICAL SERVICE.

Infantile Paralysis	...	...	11 cases.
Congenital Conditions	...	...	5 „
Scoliosis and Kyphosis	...	...	13 „
Miscellaneous	...	...	26 „
Total	...	...	55 „

(b) MATERNITY AND CHILD WELFARE.

Infantile Paralysis	...	...	Nil.
Congenital Conditions	...	...	3 cases.
Rickets	...	...	5 „
Miscellaneous	...	...	5 „
Total	...	...	13 „

(c) TUBERCULOSIS ... 6 cases.

The total attendances during the year were 3,771, plus 457 attendances for ultra-violet-ray treatment. The number of new cases referred for treatment were :—

	Orthopædic.	Light Treatment.
Maternity and Child Welfare Service	12	15
School Medical Service	42	2
Tuberculosis ...	1	1
Totals	55	18

The number of children receiving institutional treatment and education at Chailey was seven, five cases of tuberculosis and two cases under the School Medical Service scheme.

The indications for light treatment were chiefly surgical tuberculosis, marasmus and debility in babies, also rickets.



The quarterly reports from the Surgeon in charge of the Orthopædic Clinic were closely investigated and followed up, particularly with regard to children discharged as cured or who had failed to attend regularly. The former are followed up at the school clinic, the latter are the subject of home visits by the Health Visitors, who endeavour to persuade the parents to send the children regularly for treatment.

The total attendances are slightly reduced as regards the Orthopædic Clinic, but increased by 50 per cent. for light treatment.

A persistent endeavour is made by the staff of the School Medical Service to deal with cases of minor deformity or departures from correct posture at the schools, by teaching appropriate exercises and arranging for such to be carried out at home and at school. The results, notably at the Open Air Schools, the Grammar School and the Central Schools, have been very gratifying. Indeed, it is correct to say that all round there has been a considerable improvement in this respect in recent years. At the same time there is still need for further improvement, especially as regards the minor departures from the normal, *e.g.*, flat-foot, dropped shoulder, slight degrees of kyphosis and scoliosis, or even a generally slouching or slovenly posture or gait. Freed from the discipline of school, young lads or girls, if constitutionally inclined to such a defect, are apt to relapse. In this connection it is hoped that the national Keep Fit movement, now in process of development, may be helpful.

Attention to the harmonious physical development of young people at the critical stage of adolescence should be stressed, and, in this branch of the work, medical co-operation is essential.

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## REPORT ON PUBLIC HEALTH BACTERIOLOGICAL WORK, 1936.

The work is carried out in the laboratory of the Royal East Sussex Hospital under Dr. P. Lazarus-Barlow, Pathologist to the Hospital, the following being a summary for 1936.

SOURCE OF SPECIMENS.	NATURE OF SPECIMENS.	No.
A. General Practitioners, Borough Sanatorium, Medical Officer of Health.	Sputum for Tubercle Bacilli ... ..	119
	Throat Swabs for Diphtheria	389
	Widal Examination for Typhoid Group ...	9
	Miscellaneous ... ..	73
B. School Medical Service.	Throat Swabs for Diphtheria, etc.	31
C. Tuberculosis Dispensary.	Sputum for Tubercle Bacilli ... ..	99
	Miscellaneous ... ..	1
D. Municipal Hospital	Miscellaneous ... ..	157
	Total Specimens examined	872

**DIPHTHERIA ANTI-TOXIN.**—Supplies are kept at the Health Department and at Police Stations, and issued on request to the medical practitioners of the town.

## GENERAL SANITARY ADMINISTRATION.

### (1) LOCAL ACTS AND ORDERS, BYELAWS, ADOPTIVE ACTS.

During the past year no additions or amendments were reported.

Two Bills were prepared.

#### (a) HASTINGS EXTENSION.

To extend the boundaries of the Borough of Hastings and for purposes incidental thereto.



(b) **HASTINGS CORPORATION GENERAL POWERS.**

In the latter a number of sections dealing with health and general sanitation have been incorporated. These sections contain powers additional to those in ordinary health legislation, including the Public Health Act, 1936, but generally sanctioned in other recent local acts.

The most important public health sections deal with the following :—

- (a) Provision of camping grounds and their temporary closure, etc.
- (b) Removal of infirm and diseased persons in certain cases.
- (c) Entry into premises in case of disease.
- (d) Sanitary conveniences for workmen engaged in buildings.
- (e) As to sale of food from barrows.
- (f) Registration of hawkers of meat, fish, fruit, etc.
- (g) Registration of premises used in connection with ice cream, etc.
- (h) For regulating manufacture and sale of ice cream.
- (i) For notifying cases of food poisoning.
- (j) For dealing with noise nuisance.

**(2) PUBLIC HEALTH PROPAGANDA.**

(a) During the year the Hastings Edition of Better Health, the Official Journal of the Central Council for Health Education, was resumed. The journal deals with varied topical and general health matters in a well informed, but simple, manner, and in each number there is something of interest and value to all readers. Each month 2,000 copies are issued free of charge, to members of the Council and Education Committee, to the Medical Profession, through the schools, infant welfare and ante-natal centres, etc.

(b) Health propaganda forms a definite and important part of the daily work of the Medical Officer of Health, the School Dentist, Sanitary Inspectors and Health Visitors and School Nurses.

(c) The voluntary health societies at their annual meetings generally arrange for a well-known speaker on some health subject.



**(3) NURSING HOMES (REGISTRATION) ACT, 1928.**

	Year ending December 31st, 1936.		
	Maternity Homes.	General Nursing Homes.	Maternity & General Nursing Homes.
1. Number of applications for registration ... ..	2	6	1
2. Number of Houses registered ...	2	5	1
3. Number of orders made refusing or cancelling registration ...	...	...	...
4. Number of appeals against such orders ... ..	..	...	...
5. Number of cases in which such orders have been			
(a) confirmed on appeal ...	...	...	...
(b) disallowed ... ..	...	...	...
6. Number of applications for exemption from registration ...	...	...	...
7. Number of cases in which exemption has been			
(a) granted ... ..	...	...	...
(b) withdrawn ... ..	...	...	...
(c) refused ... ..	...	...	...

Five Maternity, 21 General and 8 combined Maternity and General Nursing Homes altogether are registered.

A thorough inspection and investigation is made by the Medical Officer of Health on application for registration.

The Model Byelaws of the Ministry of Health are in force and all homes are inspected periodically by the Medical Officer of Health.

As a result the general standard of several of the older nursing homes has been improved materially during recent years. The co-operation of the medical profession has been invited with regard to the matter of any unregistered homes which might still exist.

**(4) WATER SUPPLY.**

The existing supply, from the large reservoir and gathering grounds at Great Sanders, about eight miles distant, and from eight deep wells in the Ashdown Sands scattered around the neighbouring district, was sufficient for the needs of the Borough in 1936. The apparatus for the treatment of small quantities of iron and manganese, and the mechanical filters, Paterson's gravity

type, have maintained throughout the year the clear and clean appearance of the water. Bacteriological examinations carried out monthly from the various sources of supply, have been uniformly satisfactorily (see specimen below).

As regards the future it is obvious that the present supply even if fully maintained (and this is doubtful) will not cope with the increasing demand. Various factors may be mentioned-- for example (a) the work in house-building, about 400-500 new houses per annum in recent years, with an enormous increase in bathroom consumption of water, (b) the enlargement of the corporation boundary, (c) the increasing population in Council Houses, due to slum clearance and rehousing of overcrowded tenants, in addition to the normal Council housing schemes. The recent Corporation Bill contained important provisions for increased water powers, of a similar nature, but of greater magnitude, to those of the Great Sanders undertaking. This scheme should provide an ample water supply for Hastings and certain other districts for several generations to come.

The Counties Public Health Laboratories,

91, Queen Victoria Street,

London, E.C. 4.

28th September, 1936.

#### CHEMICAL ANALYSIS—BREDE CLEAR WATER TANK.

The sample was taken on September 18th, 1936.

The analytical results of this sample are as follows, expressed in parts per 100,000.

Appearance :—Bright, few particles of mineral debris.

Colour :—Normal.

Reaction :—PH. Neutral 6·7. Free Carbonic Acid 3·0.

Total Solids	...	...	...	...	...	29·0
Chlorine in Chlorides	...	...	...	...	...	3·5
Nitrogen in Nitrates	...	...	Nil.	Nitrites—	Absent	
Hardness :—Permanent	...	...	...	...	...	4·5
Temporary	...	...	...	...	...	8·5
Total	...	...	...	...	...	13·0



Carbonates as C <sup>o</sup> 3	...	...	...	...	6.3
Metals:—Iron—0.025. Manganese—Absent. Zinc—Absent.					
Free Ammonia	...	...	...	...	0.0094
Albumenoid Ammonia	...	...	...	...	0.0100

JOHN F. BEALE.

For Drs. Beale and Suckling.

Report on the Bacteriological Examination of a sample of water. Received 12th October, 1936. From Hastings Corporation. Source—Halton Reservoir.

Number of colonies per cubic centimetre of water growing upon Agar at 20°C in three days	...	...	...	...	4
Number of colonies per cubic centimetre of water growing upon Agar at 37°C in one day	...	...	...	...	1
" " " " 2 days					4
Smallest quantity of water producing acid and gas in bile-salt Lactose broth after two days incubation at 37°C	...	...			Absent in 100 c.c.
Smallest quantity of water containing the Bacillus Coli	...	...	...	...	" " "
Smallest quantity of water giving the reaction of the B. Welchii (Bacillus Enteritidis Sporogenes)	...	...	...	...	" " "

This is a clear and bright water of a very high degree of bacterial purity. It is a pure and wholesome water suitable for drinking and domestic purposes.

JOHN F. BEALE,

For Drs. Beale and Suckling.

### (5) SWIMMING POOLS.

These are three in number :—

- (a) The Open Air Swimming Pool, West Marina, length 330 ft., width 90 ft. Capacity 1,000,000 gals.  
Opened in 1931.
- (b) The large covered in bath, White Rock, length 165 ft., width 36½ ft. " 200,000 "  
Opened in 1933.
- (c) The small covered in bath, White Rock, length 75 ft., width 30 ft. ... " 65,000 "  
Opened in 1934.



The White Rock Baths Establishment contains in addition a well equipped medical baths section, also Turkish Baths and a Spray Section, with Needle Sprays, Scotch, Vichy and Aix Douches.

Sea water is used throughout, and during the winter months the water at the White Rock Baths is heated to a comfortable temperature.

The principles of the methods adopted to purify the water are similar in each bath. These include:—

- (1) The addition of a coagulant, soda—with or without ammonia.
- (2) Filtration.
- (3) The addition of chlorine or the more modern chloramine process, as the sterilising agent.
- (4) Aeration of the water.

Both alkalinity and chlorination are checked by the usual colorimetric tests twice or thrice daily. An additional check is carried out by occasional bacteriological examinations.

The optimum strength of chlorine, which seems to give the most satisfactory result, short of causing smarting of the eye, appears to be from .2 to .3 parts per million at the White Rock Baths and .5 parts per million at the Open Air Swimming Pool. It should be remembered that prolonged exposure to sea water will cause some irritation to the conjunctival membrane of the eyes quite apart from minute quantities of chlorine in the water.

Bacteriological tests carried out during the season have been satisfactory, both as regards the total bacterial count and also the presence of *b. coli*, and in addition have been well within the limits of the American standard, which is quoted in the official brochure on the subject issued by the Ministry of Health.

## **(6) DRAINAGE AND SEWERAGE.**

A considerable amount of inspection and repair work is carried out in individual houses (see Sect. (7)) under the Sanitary Inspectors.

An official enquiry by the Ministry of Health has now been held with regard to the scheme prepared by the Borough Engineer

and approved by the Council for the replacing and modernisation of the sewage disposal of the Borough which includes :—

(1) **A SYSTEM OF STORM SEWERS AND FLOOD RELIEF.**

This should effectively get rid of the flooding which from time to time takes place in the low lying parts of the town.

(2) **NEW SOIL SEWERS.**

To be provided wherever necessary.

(3) **SEWAGE DISPOSAL.**

(a) All soil sewage and a certain amount of storm sewage will be taken to the outflow at the east end of the town.

(b) Special methods of sewerage and disintegration will be utilised.

(c) To avoid accumulation during high tides the sewage will be pumped.

A start with this large scheme has been made, but the whole work will be spread over a period of about 10 years.

### **(7) SCAVENGING.**

The collection and disposal of house and business refuse is carried out by the Borough Engineer's department.

The greater bulk of the town's refuse is now collected in large covered-in vehicles, "the inside-loading 'Prodigy,'" from a public health point of view a great improvement on previous methods.

Residents can materially assist the cleansing department by burning whatever refuse can conveniently be burnt in fires or stoves, and by wrapping up and compressing as tightly as possible in newspapers any remaining organic refuse, before placing such in the dustbin.

The disposal of refuse is now entirely carried out on the controlled tipping system at Pebsham Farm, the site to be used as an Aerodrome.

The Health Department co-operates in the replacement of existing insanitary bins, and also in connection with the provision of regulation dustbins to replace insanitary ash-pits.



**(8) SANITARY INSPECTION OF DISTRICT.****(a) Sanitary Inspectors' Summary for 1936.**

1.	Visits of inspection to drainage works in progress ...	191
2.	Visits of inspection to works in connection with notices ...	838
3.	Visits to outworkers' premises ...	42
4.	Inspection of bakehouses ...	39
5.	„ „ slaughterhouses ...	379
6.	„ „ dairies, cowsheds and milk shops ...	1,005
7.	Enquiries respecting Infectious Diseases, etc. ...	134
8.	Drain tests applied ...	178
9.	Houses and premises provided with new water-tight drains, properly intercepted and ventilated ...	10
10.	Cesspools emptied and cleansed ...	18
11.	Cesspools abolished ...	—
12.	Drains cleared and amended ...	78
13.	New iron and lead soil and ventilating pipes fixed ...	22
14.	New closets fixed ...	31
15.	Closets amended ...	31
16.	New flushing boxes provided, necessary storage cisterns being fixed where required ...	21
17.	Flushing boxes repaired ...	21
18.	Glazed stoneware sinks fixed, fitted with proper wastepipes and trapped where necessary ...	17
19.	Yards repaved ...	33
20.	Sanitary ashbins provided ...	2,164*
21.	Accumulations of manure and other refuse removed ...	119
22.	Rooms, etc., cleansed and whitewashed ...	124
23.	Nuisances abated from animals improperly kept ...	6
24.	Nuisances abated from chimneys sending forth black smoke ...	1
25.	Miscellaneous repairs ...	1,400
26.	New W.C.'s erected ...	1
27.	New urinals constructed ...	4
28.	Inspection of premises where food is exposed for sale ...	475

\*In conjunction with Borough Engineer's Department.

**(b) General Summary.**

Inspection and re-inspection of premises—visits ...	7,122
Houses and premises inspected ...	4,857
Complaints investigated ...	521
Complaints investigated under Rats and Mice (Destruction) Act ...	727

**PRELIMINARY NOTICES.**

Number of written Notices served during the year 1936	309
„ „ „ „ complied with during the year 1936 ...	128
„ „ „ „ not complied with during the year 1936 ...	150
„ „ „ „ reported to the Public Health Committee during the year 1936 ...	7
„ „ „ „ served during the year 1936 which are still receiving attention ...	26
„ „ „ „ served during the year 1936 which were partly complied with ...	5



## OTHER NOTICES.

Legal Notices served by Town Clerk	...	...	...	32
Premises inspected under Increase of Rent and Mortgage Interest (Restrictions) Acts, 1920 to 1933	...	...	...	5
Certificates granted	do.	do.	..	5

MILK AND DAIRIES (CONSOLIDATION) ACT, 1915.

MILK AND DAIRIES (AMENDMENT) ACT, 1922.

MILK AND DAIRIES ORDER, 1926.

Number of Preliminary Notices served during 1936	...	2
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**(9) INSPECTION AND SUPERVISION OF FOOD.****(a) Milk Supply of District.**

Retail Purveyors of Milk on Register, 1936	...	...	116
Wholesale Traders or Producers, 1936	...	...	21
Purveyors of Certified, Grade (A) or Pasteurised Milk, 1936	...	...	12
Pasteuriser's Licence to sell Milk as "Pasteurised"			3
Samples for bacterial content and tubercle bacilli	...		32
Samples under Milk (Special Designations) Order	...		12

A significant fact in the milk supply is the continued increase in the amount which is pasteurised in the town on or before delivery to the retailer. Efficiently pasteurised milk protects the consumer against two potential dangers :—

(a) Infection by the bovine tubercle bacillus, the main cause of surgical tuberculosis of childhood.

(b) Certain infectious diseases, *e.g.*, typhoid fever, diphtheria or scarlet fever, epidemics of which, on a widespread scale, may from time to time, be due to milk infected at the source. During the past year or two the public have had several sharp reminders of this danger.

With regard to the heating of pasteurised milk, the temperature, 145°-150°F for thirty minutes, does not, according to recent research, affect the food value, and any slight loss in vitamin value is amply compensated for in children by the addition of a little cod liver oil and fruit juice, both in common use, and in adults by the protective value of a mixed diet.

The improvement in the keeping quality of the pasteurised milk results in economy both for customer and retailer. It should be noticed that only a comparatively small amount of the pasteurised milk is actually sold as such under licence.

During the year 47 samples of milk, including samples of milk supplied to the schools under the scheme of the Milk Marketing Board, were examined for bacterial count, *b. coli*, and tubercle bacilli by guinea pig inoculation.

All specimens examined for tubercle bacilli were negative. As regards unsatisfactory bacterial counts or *b. coli* examinations, an investigation into the possible causes is carried out in each case at the dairy or at the farms concerned, either by this department or through the county Medical Officer of Health.

**(b) Meat.**

No alterations are reported with regard to the number of private slaughter-houses, the majority of which have been in existence for a considerable period.

The whole matter has been the subject of a special report from the Medical Officer of Health to the Public Health Committee and is now under consideration. The situation has, in fact, been altered materially by the activity of building operations in the outskirts of the town during recent years, so that small private slaughter-houses, with all the defects of their type, previously standing by themselves in rural surroundings, are now in the midst of building estates. In addition, there are the unpleasant sounds and sights associated with slaughter-houses in close proximity with dwelling-houses.

The only possible and practical remedy in view of all the circumstances, as regards building developments and the actual condition and type of the slaughter-houses from a public health point of view, is the establishment of a public abattoir by the municipality or private enterprise.

Practically all animals killed are examined soon after slaughtering under the P.H. (Meat) Regulations of 1924 by a Sanitary Inspector.

The gradual improvement in the butchers' shops has been maintained.



## TUBERCULOUS MEAT CONDEMNED DURING 1936.

Description.					Number of animals or parts of animals.
Heifers (whole carcasses)	...	...	...	...	2 + 3-quarters.
Pigs	„	„	...	...	2
Cows	„	„	...	...	5 + 3-quarters.
Beasts	„	„	...	...	2 + 2-quarters.
Beef	...	...	...	...	41 stones.
Ox Heads	...	...	...	...	23
Ox Lungs	...	...	...	...	46 sets.
Ox Hearts	...	...	...	...	7
Ox Livers	...	...	...	...	18
Ox Mesentery	...	...	...	...	15
Tongues	...	...	...	...	15
Ox spleen	...	...	...	...	6
Pigs' Heads	...	...	...	...	17
Pigs' Plucks	...	...	...	...	6
Pigs' Crow	...	...	...	...	1
Pigs' Livers	...	...	...	...	1
Pigs' Lungs	...	...	...	...	1 set.
Pigs' Spleen	...	...	...	...	1
Pigs' Crop	...	...	...	...	1
Pigs' Mesentery	...	...	...	...	1

## MEAT (OTHER THAN TUBERCULOUS) CONDEMNED DURING 1936.

Description.					Number of animals or parts of animals.
Cows	...	...	...	...	2
Sheep (whole carcasses)	...	...	...	...	1
Pigs	„	„	...	...	2
Beef	...	...	...	...	171 stones.
Ox Head	...	...	...	...	2
Ox Livers	...	...	...	...	20 & 4 stones.
Ox Kidney	...	...	...	...	1
Ox Heart	...	...	...	...	1
Ox Lungs	...	...	...	...	1 set.
Calf	...	...	...	...	1
Calves' Livers	...	...	...	...	1
Ox Tongue	...	...	...	...	4
Calves' Hearts	...	...	...	...	1



Description.					Number of animals or parts of animals.
Calves' Lungs	...	...	...	...	1
Pork	...	...	...	...	23 stones.
Pigs' Lungs	...	...	...	...	10 sets.
Pigs' Plucks	...	...	...	...	3
Pigs' Hearts	...	...	...	...	5
Pigs' Livers	...	...	...	...	17
Lamb	...	...	...	...	5 lbs.
Sheeps' Livers	...	...	...	...	17 & 2 tins.
Lambs' Livers	...	...	...	...	9½ stones.
Mutton	...	...	...	...	11½ „
Suet	...	...	...	...	2 „

#### SUNDRY FOODSTUFFS CONDEMNED DURING 1936.

Ham	...	...	...	...	{ 47 tins. 28½ lbs.
Corned Beef	...	...	...	...	6 tins.
Bacon	...	...	...	...	56 stones.
Veal	...	...	...	...	1 tin.
Lettuce	...	...	...	...	50 crates.
Prawns	...	...	...	...	8 tins.
Shrimps	...	...	...	...	38 doz. tins.
Sausages	...	...	...	...	7 lbs.

#### (c) Other Foods.

Particular attention is paid, particularly during the summer months, to premises engaged in the manufacture, preparation, storage and exposure of food for sale, under Section 115, Hastings Corporation Act, 1924. In recent years considerable improvements have been effected in many of these establishments, particularly the smaller types. In addition, a number of new *ad hoc* businesses, designed on modern hygienic lines, have been established in the centre of the town.

The appointment of an additional Assistant Sanitary Inspector, mainly for the administration of the Shops Acts, has been of considerable value in increasing the amount of attention to premises and shops dealing with food.

**Fish Condemned, 1936.**

	Cases.	Boxes.	Stones.	lbs.	Kits.	Galls.	Barrels.	Bushels.	Bags.
Coalfish ... ..	...	11	51	...	...	...	...	...	...
Mackerel ... ..	...	15	13	...	...	...	...	...	...
Herrings ... ..	5	13	50	...	1	...	...	...	...
Haddocks ... ..	...	13	...	...	...	...	...	...	...
Dabs ... ..	6	1	2	...	...	...	...	...	...
Whiting ... ..	...	...	11	...	...	...	...	...	...
Cod ... ..	...	3	41½	...	...	...	...	...	...
Roes ... ..	...	13	...	10	...	...	...	...	...
Plaice ... ..	2	3	8	...	...	...	...	...	...
Kippers ... ..	...	58½	...	...	...	...	...	...	...
Bloaters ... ..	...	...	6	...	...	...	...	...	...
Codlings ... ..	...	9	...	...	...	...	...	...	...
Dog Fish ... ..	7	1	55½	...	...	...	...	...	...
Skate Wings ... ..	...	9	...	...	...	...	...	...	...
Prawns ... ..	...	...	...	3½	...	1	...	...	...
Dried Fillets ... ..	...	4½	6½	...	...	...	...	...	...
Soles ... ..	...	...	4½	...	...	...	...	...	...
Crabs ... ..	1	...	...	...	...	...	...	...	...
Witches ... ..	3	...	2	...	...	...	...	...	...
Fillets ... ..	...	28	...	...	...	...	...	...	...
Shrimps ... ..	...	4	...	...	...	32	...	...	2
Lemon Soles ... ..	3	...	48½	...	...	...	...	...	...
Dried Codlings ... ..	...	2	...	...	...	...	...	...	...
Whelks ... ..	...	...	...	...	...	4	...	2	1
Smelts ... ..	...	2	...	...	...	...	...	...	...
Monk Fish ... ..	...	...	1½	...	...	...	...	...	...
Halibut ... ..	...	...	3½	...	...	...	...	...	...
Oysters 100 ... ..	...	...	...	...	...	...	...	...	...
Lobsters ... ..	...	...	...	13	...	...	...	...	...
Brill .. ...	1	...	...	9	...	...	...	...	...

Total Weight of Fish Condemned, 653 stones.

**(d) Food and Drugs (Adulteration) Aot, 1928.**

During the year 182 samples were taken and submitted to the Borough Analyst, at the School of Science, Hastings. The following are particulars of the samples, results of analysis and the action taken in certain cases.

MILK:—79 samples taken, 71 genuine, *i.e.*, above the legal standard; 8 adulterated, or below the legal standard, as follows:—

*Report of Analysis.**Action Taken.*

- (a) Fat 2·87%; Solids not fat 8·43%; Explanation asked for.  
deficient in fat, 4·3%. Poor sample,  
weak in Proteins, not condemned  
as watered.

<i>Report of Analysis.</i>	<i>Action Taken.</i>	
(b) Fat 2·42% ; Solids not fat 8·67% ; 19·3% deficient in fat.	Followed up by further samples.	
(c) Fat 2·78% ; Solids not fat 8·77% ; 7·3% deficient in fat.	Do.	Do.
(d) Fat 2·7% ; Solids not fat 8·66% ; 10% deficient in fat.	Do.	Do.
(e) Fat 2·62% ; Solids not fat 8·97% ; 12·7% deficient in fat.	Do.	Do.
(f) Fat 2·75% ; Solids not fat 8·12% ; 8·3% deficient in fat. Not watered, protein low.	Do.	Do.
(g) Fat 2·82% ; Solids not fat 8·35% ; below standard, but not watered.	Do.	Do.
(h) Fat 5·38% . Solids not fat 8·22% ; 8·35% deficient in solids not fat, but not adulterated.	Do.	Do.

The following 103 samples were all genuine :—Butter, 7 ; Margarine, 8 ; Mint Sauce, 1 ; Tinned Peas, 5 ; Sardines, 3 ; Prunes, 1 ; Baking Powder, 3 ; Marmalade, 1 ; Meat and Fish Pastes, 14 ; Lard, 9 ; Sweets, 8 ; Pepper, 2 ; Jam, 3 ; Mustard, 2 ; Dried Apricots, 1 ; Almond Essence, 1 ; Tinned Cream, 1 ; Grape Fruit Marmalade, 1 ; Jellied Veal, 1 ; Cheese, 6 ; Ground Ginger, 1 ; Ruby Wine, 1 ; Tea, 9 ; Sausage, 1 ; Demerara Sugar, 1 ; Jelly, 2 ; Tomato Sauce, 1 ; Dried Fruit, 1 ; Blackcurrant Fruit Wine, 1 ; Fruit Pie, 1 ; Veal, Ham and Tongue Roll, 1 ; Steak and Kidney Pudding, 1 ; Lemon Curd, 1 ; Cheese and Celery, 1 ; Beef Suet, 1 ; Fruit Salad, 1.

### (10) FACTORIES, WORKSHOPS AND WORKPLACES.

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

Premises	Number of		
	Inspections	Written Notices	Prosecutions
Factories (Including Factory Laundries) ... ..	8	...	...
Workshops (Including Workshop Laundries) ... ..	42	2	...
Workplaces (Other than Out Workers' Premises included in Part 3 of this Report) ...	28	1	...
Total ... ..	78	3	...



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

Particulars.	Number of Defects.			Number of Prosecutions.
	Found.	Remedied.	Referred to H.M. Inspector.	
<i>Nuisances under the Public Health Acts: *</i>				
Want of Cleanliness	7	5	...	...
Want of Ventilation	3	...	1	...
Overcrowding	...	...	...	...
Want of drainage of floors	1	1	...	...
Other Nuisances	4	1	...	...
Sanitary accommodation	{ insufficient	2	1	...
	{ unsuitable or defective	4	3	...
	{ not separate for sexes	1	...	...
<i>Offences under the Factory and Workshop Acts:</i>				
Illegal occupation of underground bakehouse (S. 101)	...	...	...	...
Other offences (excluding offences relating to out-work and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921)	...	...	...	...
Total	22	11	1	...

\* Including those specified in Sections 2, 3, 7, and 8, of the Factory and Workshops Act 1901 as remediable under the Public Health Acts.

## 3—Home Work.

17 lists were sent in, with 12 contractors and 26 workmen.

Class.	Number.
<b>(4).—REGISTERED WORKSHOPS.</b>	
Workshops on the register (S. 131) at the end of year.	378
<b>(5).—OTHER MATTERS.</b>	
Matters notified to H.M. Inspector of Factories:	
Failure to affix Abstract of the Factory and Workshop Act (S. 133, 1901) ... ..	Nil.
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Acts (S. 5, 1901) ... ..	Notified by H.M. Inspector ...
	4
Other ... ..	Reports (of action taken) sent to H.M. Inspector ...
	4
Underground Bakehouses (S. 101):	
Certificates granted during the year ... ..	Nil.
In use at the end of the year ... ..	21

**(11) SHOPS ACTS. MERCHANDISE MARKS ACTS.  
PHARMACY AND POISONS ACTS.**

The following is a report of the work of the Inspector, specially appointed to carry out work under the above acts in August, 1936.

SHOPS ACTS, 1912-1934.

REPORT FOR 1936 (10TH AUGUST—31ST DECEMBER).

Total number of Shops inspected	...	...	...	...	319
No. of visits and re-visits in connection with Shops Acts	...	...	...	...	537

The following is a summary of the contraventions and other conditions which have been dealt with at the premises inspected :—

No. of shops in which (1) Notice <i>re</i> Half-Day Closing not displayed	...	...	...	94
" " " " " (2) Notice <i>re</i> Assistants' Half-holiday not displayed	...	...	...	82
" " " " " (3) Notices <i>re</i> Mixed Shops not displayed	...	...	...	77
" " " " " (4) Records of Young Persons' hours not kept	...	...	...	43
" " " " " (5) Notice as to Provisions of Shops Act, 1934, not exhibited (Forms H or J)	...	...	...	49
No. of written Notices served in respect of contraventions of various Sections of the Shops Acts	...	...	...	8

SHOPS ACT, 1934.

Section 10. Sub-sections	(1) (a) Ventilation.
	(1) (b) Temperature.
	(2) Sanitary Convenience.
	(3) Lighting.
	(4) Washing Facilities.
	(5) Rest Room or Meal Facilities.

Section 12	...	...	...	Seats for Female Assistants.
Total number of shops inspected under above Sections	...	...	...	180
Sanitary conveniences found defective in	...	...	...	5 shops.
Improper Washing Facilities found in	...	...	...	2 "
No. of shops exempted in respect of Sanitary Conveniences under Section 10 (2) and (6)	...	...	...	3
Form K, <i>re</i> Seating Accommodation for Female Assistants in Shops, found not displayed in	...	...	...	10 shops
Insufficient Seating Accommodation found in	...	...	...	4 "



## REPORT FOR 1936 (10TH AUGUST—31ST DECEMBER).

## MERCHANDISE MARKS ACT, 1926.

No. of Inspections	...	...	...	...	...	...	171
No. of verbal notices given in respect of goods not properly indicated as to source or origin	...	...	...	...	...	...	32

## PHARMACY AND POISONS ACT, 1933.

(In force as from 1st May, 1936).

No. of inspections	...	...	...	...	...	...	28
No. of shopkeepers found not complying with Rule 21 of the Poisons Rules, 1935, as to putting their names and addresses on bottles or outside containers of prepacked articles	...	...	...	...	...	...	5
Shopkeeper found to be unlicensed for sale of disinfectants, who decided to withdraw stock from sale in preference to being licensed	...	...	...	...	...	...	1

The poisons mentioned in Part II. of the Pharmacy and Poisons Act, 1933, usually sold by shopkeepers are included in :—

Household Ammonia,  
Carbolic Disinfectants,  
Sanitary Fluids,  
Insecticides,  
Rat and Mouse Poisons,  
Sheep Dips,  
Horticultural Sprays,  
Seed and Bulb Dressings,  
Hair Dyes.

**(12) Disinfestation of Houses, etc.**

Much attention was devoted to disinfestation of properties infested with bugs. These might be roughly classified into three types.

- (a) A few Council Houses.
- (b) Houses and household effects in connection with slum clearance.
- (c) Other infested houses.

The following method of disinfestation has been adopted, items 1 to 3 being used especially in connection with the transfer of tenants from Clearance Areas.

(1) Fumigation by cyanide gas in sealed furniture vans of tenants' effects in slum clearance transfers by the London Fumigation Company under contract.

(2) Disinfection by steam of bedding, mattresses, etc., articles liable to retain cyanide gas, at the Corporation's Steam Disinfecting Station.



(3) The ultimate disinfection of the evacuated houses by orthodichlor-benzine. This method has, in accordance with the recommendation of the Ministry of Health, been discontinued in occupied houses or in empty houses where there is any risk of the vapour spreading to other houses. The diluted solution only is used now.

(4) In ordinary single dwelling-houses a variety of methods is in use, including Cimex, Pyagra, ordinary sulphur candles, the painter's blow lamp, removal of skirting boards, steam disinfection, etc.

(5) After disinfestation the co-operation of the occupier of the house is absolutely necessary, both as regards the liberal application of soap and hot water and also requesting the further help of the Health Department should there be any sign of a recurrence of the bug trouble.

#### **Premises Disinfested, 1936.**

Total number of premises or bedding disinfested					218
					—
One visit only	...	...	...	...	144
Two visits	...	...	...	...	59
Three visits	...	...	...	...	4
Four visits	...	...	...	...	6
Five visits	...	...	...	...	1
Six visits	...	...	...	...	1
Seven visits and over	...	...	...	...	3
					—
Council houses	...	...	...	...	25
For Bedding, etc., only	...	...	...	...	114
					—

I am informed by the Housing Manager that the results of disinfestation on transfer from slum clearance have been satisfactory, very few instances of relapse having so far been recorded.

#### **Disinfestation in connection with Slum Clearance.**

- (a) Number of families disinfested as regards furniture, household effects, etc., during transfer to new Council Houses ... 101
- (b) Number of empty dwelling-houses disinfested by orthodichlor-benzine before demolition ... 46

**(13) DISINFECTING & CLEANSING STATION, AMBULANCE  
WORK. HOUSE, ETC., DISINFECTION.**

**(a) Disinfecting Station—Summary of Articles Disinfected.**

	Private Houses.	Public Insti- tutions, Hos- pitals, Homes	Upholsterers, Private Firms.	From other Sources.
Mattresses... ..	783	657	141	6
Blankets ... ..	1,353	1,290	45	1,199
Pillows ... ..	1,637	1,912	140	397
Other Articles and Clothing ... }	4,937	1,418	345	153
Total... ..	8,710	5,277	671	1,755

**(b) Cleansing Station.**

	Numbers bathed for			Sets of Clothing Disinfected.
	Scabies.	Vermin.	Other Causes.	
Adults ... ..	1	19	4	24
School Children ...	3	3	...	4
Children under School Age ...	...	...	...	...
Total... ..	4	22	4	28

**(c) Premises Disinfected.**

Dwelling Rooms.	Hospital Wards.	School Rooms.	Offices, Shops.	Cells.	Miscellaneous. Name if necessary.
802	21	5	...	2	1 Taxi-Cab. 1 Van.

No complaints received as to injury to or loss of articles disinfected.

**(d) Lethal Chamber.****FOR AGED, INFIRM AND DISEASED CATS AND DOGS.**

Dogs destroyed	...	...	..	...	17
Cats destroyed	...	...	...	...	67

**(e) Any other Work.**

Dealing with condemned fish at the Fishmarket and assisting Inspector R.S.P.C.A.

**(f) Ambulance and Disinfecting Van.**

1. Number of journeys removal of patients...	369
2. Number of journeys removal of bedding...	3,575
3. Number of journeys disinfection of houses	831
Mileage—	
(a) Ambulance ... ..	3,839
(b) Disinfecting Van ... ..	12,910

**(14) REPORT ON COMMON LODGING HOUSES, 1936.**

The two registered Common Lodging Houses in the Borough are kept under the close supervision of the Sanitary Inspector.

Both houses were free from notifiable infectious disease during the year and are kept in accordance with the regulations.

**(15) HOUSING.**

During 1936 much attention was devoted to various aspects of the housing problem, including investigation of complaints, routine house to house inspection, special work in connection with the Slum Clearance programme, the development of the Improvement Area in All Saints' Street, and the consideration of and the investigation into overcrowding under the 1935 Housing Act.

With regard to Slum Clearance, considerable progress was made in the first stage of the Five Years' Plan. The rehousing schemes at Bembrook Farm, Red Lake and Hollington were completed and the tenants transferred, after disinfestation of their furniture and household goods. The evacuated houses



and buildings are now being demolished, and as a result of the Council's decision, there will be a complete clearance of the Valley of the Bourne, with a central road. In addition to rebuilding schemes, already approved, one on the north-east corner of All Saints' Street, the other at the lower end of the Bourne Valley in Area 15, there will be additional rebuilding schemes bordering upon the new road. The entire clearance of the Bourne Valley, which will act as an air funnel and a lung for the rest of the Old Town, still very congested on site, has much to commend itself from a public health point of view.

Preparations were continued for the second stage of the Five Years' Slum Clearance Plan. Representations have now been made of Areas 18 to 45 inclusive, which deal with 209 dwelling-houses, with a population of 702. The local enquiry will be held in the early summer of 1937, and the rehousing schemes and clearance of the properties should be completed before or shortly after the end of 1938. These areas deal with congested and worn out properties between All Saints' Street and Tackleway, and also other parts of the Old Town, also with areas in the Ore District, and the central parts of Hastings and of St. Leonards.

As regards the Improvement Scheme, which corresponds to the west side of All Saints' Street, all the houses have been inspected, and dealt with under the model byelaws. Wherever practicable the owners have been asked to re-condition and improve their houses. In this respect, additional window space, improved ventilation of bedrooms, lighting of stairs, a ventilated food cupboard, separate w.c., water and sink accommodation, are required wherever practicable. We have found the owners generally willing to meet the wishes of the department. A certain number of the All Saints' Street houses have passed the stage beyond improvement or repair, and these are being considered with regard to demolition.

In some instances these houses have nothing to commend themselves, from a hygienic, constructional or aesthetic point of view. A few are worth the expenditure of some thought, time, energy and money to recondition and preserve.

My report under the overcrowding sections of the Housing Act, 1935, was presented in May, 1936. As a result of the survey of 12,607 houses, the total of the overcrowded houses was found to be 222, and the percentage of overcrowding 1·76, a figure which compares favourably with that in certain industrial areas.

As regards rehousing, the report, subsequently adopted, recommended the building of 100 houses of various types :—

20 small houses	...	...	2 bedroom type,
40 medium houses	...	...	3 bedroom type.
40 larger houses	...	...	4 or more bedroom type.

The small houses deal with aged people or small families as sub-tenants who cause other houses to be overcrowded. The large houses deal with the large families and should in some instances have 5 or 6 bedrooms for very large families.

At present the Housing Department of the Council has under its control approximately 600 houses, built or building.

Further commitments include the

- (a) Bourne Valley Scheme, and the completion of the first part of the Five Years' Plan of Slum Clearance.
- (b) Rehousing for the second part of the Slum Clearance programme.
- (c) Rehousing for overcrowding.
- (d) Rehousing for the Public Health Committee for individual demolitions under the Housing Act.
- (e) Schemes to meet the needs of individual applicants outside these schemes.

I estimate that in about 3 or 4 years' time the total number of Corporation houses will have reached a figure of approximately 1,100.

In previous reports I have emphasised the necessity for a continuous forward housing policy, more particularly as regards old-fashioned cottage property, which still constitutes the bulk of the housing available for the working classes, also a certain type of flat, hastily and often unsuitably converted, a relic of post-war housing difficulty, and finally, most particularly, the



basement flat, a feature of this and other similarly situated Mid-Victorian towns. As the standard of housing improves, so inevitably will these types gradually disappear. It is in such individual cases that action can be taken, either to repair, recondition or demolish, or in the cases of basements to close, in accordance with the powers given under the Housing Acts. The Christ Church Society has also given a lead in improvement schemes, based on the Octavia Hill tradition, at present on a small scale in a Union Street property, but with very encouraging results.

### HOUSING STATISTICS, 1936.

#### I. INSPECTION OF DWELLING HOUSES DURING THE YEAR :—

(1) (a) Total number of dwelling-houses inspected for housing defects under the Public Health or Housing Acts ... ..	861
(b) Number of inspections made for the purpose	1,004
(2) (a) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 ... ..	250
(b) Number of inspections made for the purpose	362
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ...	24
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation ... ..	265

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

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers...	283
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#### III. ACTION UNDER STATUTORY POWERS DURING THE YEAR :—

##### A. Proceedings under Sections 17, 18 and 23 of the Housing Act, 1930 :—

(1) Number of dwelling-houses in respect of which notices were served requiring repairs ...	1
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(2) Number of dwelling-houses which were rendered fit after service of formal notices :—	
(a) by owners ... ..	3
(b) by Local Authority in default of owners ... ..	Nil.
B. Proceedings under Public Health Acts :—	
(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied .. ...	29
(2) Number of dwelling-houses in which defects were remedied after service of formal notices :—	
(a) by owners ... ..	29
(b) by Local Authority in default of owners ... ..	Nil.
C. Proceedings under Sections 19 and 21 of the Housing Act, 1930 :—	
(1) Number of dwelling-houses in respect of which Demolition Orders were made ... ..	9
(2) Number of dwelling-houses demolished in pursuance of Demolition Orders .. ..	4
D. Proceedings under Section 20 of the Housing Act, 1930 :—	
(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made ... ..	3
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit ... ..	7

## LOCAL GOVERNMENT ACT, 1929.

### HOSPITAL POLICY—MEDICAL ASPECTS.

#### (a) The Municipal Hospital, Frederick Road.

the following improvements and additions have been provided since 1930 :—

- (1) An additional block of 41 beds for female cases.
- (2) Separate children's annexe with 35 beds.
- (3) Central heating.
- (4) Additional open-air ward for 4 male tuberculosis cases.

(5) New mortuary.

(6) New casual ward.

(7) X-Ray, Massage, Ultra Violet Ray and Heat Department.

The matter of further improvement in accommodation is now receiving attention—more particularly as regards

(a) The provision of a new *ad hoc* maternity unit.

(b) Improved accommodation for mental cases.

(c) The utilisation of the discarded casual block for hospital purposes.

(d) A commencement has now been made with the erection of the nurses' home, a notable, but very necessary improvement.

The completion of this building will not only make the so-called Hospital side more self contained, but will set free important buildings on the House side. It should be realised that the existing buildings on the House side are old, and now unsatisfactory in various respects and that the question of the whole future of the House side, as apart from the Hospital, is in the "melting pot." It should, however, be possible to devise a complete scheme, which will not only deal with the best solution of the House problem, but also solve the difficulties which still face the Hospital side.

No definite action has been taken as regards declaration and appropriation under the Public Health Acts, but the further alterations and additions mentioned will make this a much more practicable matter.

#### (b) **Hospital Accommodation.**

The accommodation available for Hastings and District, in the voluntary hospitals, the Royal East Sussex, the Buchanan, and Bexhill, together with the Municipal Hospital, is about 550 beds, which appears adequate.

**(c) Transfer of Medical Work.**

With regard to the transfer of medical work under the 1929 Act :—

(a) The Medical Officer of Health is medical adviser to the Public Assistance Committee and in medical charge of the Cottage Homes for children.

(b) Medical relief is administered by a Special Sub-Committee of the Public Assistance Committee, there being 4 districts, with 4 district medical officers.

(c) Vaccination and Infant Protection are administered in the department of the Medical Officer of Health under the Public Health and Maternity and Child Welfare Committees respectively, the Health Visitors acting as Infant Protection Visitors.

**STATISTICS, MUNICIPAL HOSPITAL, 1936.**

**1. Classification of Beds :—**

	Male.	Female.	Total.
Medical and Surgical ...	56	117	173
Tuberculosis .. ...	6	13	19
Maternity ... ..	—	11	11
Mental ... ..	14	24	38
	<hr/>	<hr/>	<hr/>
Total ... ..	76	165	241
Children ... ..			51
			<hr/>
	Grand Total	...	292
			<hr/>

2. Total Admissions ... ..	...	1,548
3. Confinements ... ..	...	127
4. Average beds occupied ... ..	...	260
Highest ... ..	...	288
Lowest ... ..	...	231
5. No. of operations ... ..	...	217
,, abdominal operations ... ..	...	42
6. No. of cases Out-Patients ... ..	...	234
,, visits ... ..	...	1,189
7. Ante-natal Clinic—(a) cases ... ..	...	128
(b) attendances ... ..	...	391



## METEOROLOGY.

I am greatly indebted to Mr. Simmons, the Meteorologist for the Borough, for the following information relating to weather conditions in Hastings in 1936.

**Table showing (1) hours of Bright Sunshine.  
(2) Rainfall in inches.  
(3) Ultra Violet Radiation (Monthly Average Reading).**

Month.	Sunshine.	Rainfall in inches.	Ultra Violet Radiation (Monthly average reading).
January ...	37·1	4·88	·2
February ...	101·4	2·18	·8
March ...	105·6	1·20	1·0
April ...	148·9	2·06	1·4
May ...	248·5	·07	2·7
June ...	231·0	3·27	4·3
July ...	179·0	4·40	2·3
August ...	205·1	1·42	2·6
September ...	129·0	2·24	1·0
October ...	126·4	1·59	·7
November ...	38·5	3·93	...
December ...	82·7	2·06	·3
Total ...	1,663 hrs.	29·30	17·3
Average ...	4·50 hrs.	monthly 2·44 ins.	1·4

**2. Comparative Sunshine figures.**

<b>Hastings</b>	...	...	...	1633·0 hrs.
Eastbourne	...	...	...	1626·8 „
Margate	...	...	...	1616·6 „
Dover	...	...	...	1603·2 „
Brighton	...	...	...	1590·3 „
Bournemouth	...	...	...	1510·1 „
Tunbridge Wells	..	...	...	1395·1 „

**3. Temperature.**

Maximum 56·4°; Normal 55·4°.

Minimum 45·2°; Normal 44·5°.

Absolute maximum 83°.

Absolute minimum 28°.

Earth temperature 1 ft. 53·8°.

Earth temperature 4 ft. 51·4°.

**4. Miscellaneous.**

Rainfall was 0·93 in. above normal.

Snow fell on 8 occasions.

Thunderstorms on 11 occasions.

Ground Frost on 44 occasions.

Wind at Gale force on 11 occasions.

Warmest days, June 19th and 20th, Temperature 83° F.

Warmest night, June 21st, Temperature 62° F.

Coldest day, February 11th, Temperature 35° F.

Coldest night, February 12th, Temperature 26° F.

Relative Humidity, Morning 81%.

Relative Humidity, Night 83%.

Prevailing winds, S.W. and N.E.

## Summary of Provision of Health Services for the Area.

**(a) Laboratory facilities.**

(See Special Section).

**(b) Ambulance facilities.**

The service both for infectious and non-infectious cases is adequate for the district.

(See Report for 1930.)

**(c) Nursing in the Home.**

See Special Section—Maternity and Child Welfare.

(See also Report for 1930).

**(d) Clinio and Treatment Centres.**

(See Special Sections).  
(See Report for 1930).

**(e) Hospitals—Public and Voluntary.**

(See Special Section).

**(f) Medical Services transferred from Late Board of Guardians.**

(See Special Section).

**(g) Mental Deficiency.**

(See Special Section).

**(h) Maternity and Child Welfare Services.**

(See Special Section).

**(i) Institutional Provision for Unmarried Mothers, Illegitimate Infants and Homeless Children.**

(See Report for 1930).

**(j) Prevention of Blindness.**

The Corporation gives a substantial grant to the Voluntary Society for the Blind, which is carrying out an ever increasing most admirable and beneficent work, *e.g.*, maintenance of subsistence allowance up to 22/6 per week for each blind person, obtaining and keeping suitable work, general and special treatment in local hospitals and national institutions.

By a declaration under the Local Government Act of 1929, the Voluntary Committee now deals with blind persons and sighted "dependents" requiring out-relief from the Public Assistance Committee.

The Public Health Committee has also authorised the Honorary Medical Officer, Dr. Lowe, to complete the Special Medical Certificate of the Board of Education and the Ministry of Health in respect of all new cases.

**(k) Rag, Flock Acts, 1911, 1922.**

The amount of flock used is comparatively small in amount, clean and employed in re-making mattresses and general upholstery. The premises are all in a satisfactory condition and under the regular supervision of the Sanitary Inspectors.



