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THE HEALTH OF LEICESTER DURING 1945



E. K. MACDONALD
O.B.E., M.D., D.P.H.



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**THE NINETY-SEVENTH
ANNUAL REPORT UPON**



**THE HEALTH OF
LEICESTER
DURING
1945**

E. K. MACDONALD
O.B.E., M.D., D.P.H.

CITY OF LEICESTER

HEALTH COMMITTEE

Chairman.

ALD. G. PARBURY.

Vice-Chairman.

ALD. HARRISON, M.B.E., J.P.

<p>MR. CAVE. MISS CHAMBERLAIN. MR. COOPER. CORT. MISS FORTEY, J.P., B.Sc. Ald. Miss FRISBY, J.P. MISS M. GOODWIN, M.B.E., J.P.</p>	<p>ALD. HAND, J.P. MR. HARRIS. " JACKSON. PARAGREEN MR. ROUND, J.P. MRS. SIMPSON, J.P.</p>	<p>MR. F. S. SMITH. MRS. SWAINSTON, M.B.E. MR. G. H. TAYLOR ALD. IDA WARNER, M.B.E., J.P. " WILFORD, J.P.</p>
--	--	---

The Committee meet on the 4th Friday in each month in the Committee Room, Town Hall, at 3.30 p.m.

The Health Committee, together with the following co-opted members, not being members of the City Council, constitute the Statutory Maternity and Child Welfare Committee :—Mrs. Banton, Mrs. Taylor, Miss E. J. Windley, B.A.

Accounts Sub-Committee.

MR. ROUND.	MRS. SWAINSTON. MR. G. H. TAYLOR
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Health Inspection Sub-Committee.

<p>MR. CORT (Chairman). CAVE. MR. COOPER. MISS FORTEY. " FRISBY.</p>	<p>MISS GOODWIN. MR. HARRISON PARAGREEN. ALD. PARBURY. " IDA WARNER.</p>
--	--

Isolation Hospital and Dispensary and Venereal Diseases Sub-Committee.

<p>MR. HARRISON (Chairman). CAVE. MR. COOPER. CORT. MISS FORTEY. " GOODWIN</p>	<p>MR. HARRIS. " JACKSON. ALD. PARBURY. MR. ROUND. MRS. SWAINSTON. ALD. WILFORD.</p>
--	--

ISOLATION HOSPITAL SUB-COMMITTEES.

Grounds.

<p>MR. COOPER (Chairman). " CORT</p>	<p>MR. HARRISON. ALD. PARBURY. MR. ROUND.</p>
--	---

Dietary.

<p>MR. ROUND (Chairman). MISS FORTEY</p>	<p>MR. HARRIS. " HARRISON. ALD. PARBURY.</p>
--	--

"Home Place" Management Sub-Committee.

<p>ALD. WILFORD (Chairman). MR. HARRISON " CORT.</p>	<p>ALD. PARBURY. MRS. SWAINSTON.</p>
--	--

Maternity and Child Welfare Sub-Committee.

MISS FORTEY (Chairman).	MR. PARAGREEN
MR. CAVE.	ALD. PARBURY.
MISS CHAMBERLAIN.	MR. F. S. SMITH.
MR. COOPER.	MRS. SIMPSON.
MISS FRISBY.	" TAYLOR
" GOODWIN.	MISS WINDLEY.
MR. HARRISON	

Necessitous Maternity Cases.

MRS. SIMPSON.	MISS WINDLEY.
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Maternity Home and Day Nursery Management Sub-Committee.

ALD. HAND (Chairman).	MR. PARAGREEN.
MISS CHAMBERLAIN	ALD. PARBURY.
MISS FORTEY.	MRS. SIMPSON.
" FRISBY.	" TAYLOR.
" GOODWIN	MISS WINDLEY.
MR. HARRISON	

General Purposes Sub-Committee.

ALD. PARBURY (Chairman).	MR. HARRISON.
MR. CORT.	ALD. WILFORD.
MISS FORTEY.	

City General Hospital Sub-Committee.

ALD. PARBURY. (Chairman).	MR. HARRISON.
MR. COOPER.	MR. ROUND.
CORT.	MRS. SIMPSON.
MISS FORTEY.	" SWAINSTON.
" FRISBY.	ALD. IDA WARNER.
MR. HARRIS.	" WILFORD.

CITY GENERAL HOSPITAL SUB-COMMITTEES.

Assessments.

MR. COOPER.	MR. CORT.
	ALD. PARBURY.

Farms, Grounds and Buildings.

MR. CORT (Chairman).	MR. HARRISON.
MR. COOPER.	ALD. PARBURY.
	MR. ROUND.

Dietary.

MR. HARRIS (Chairman).	ALD. PARBURY.
MISS FORTEY.	MR. ROUND.
MR. HARRISON	MRS. SWAINSTON.

Slum Clearance and Property Inspection Sub-Committee.

ALD. PARBURY (Chairman).	MR. HARRIS.
MR. COOPER.	" HARRISON.
CORT.	" JACKSON.
MISS FORTEY.	" ROUND.
	ALD. IDA WARNER.

Office Accommodation Sub-Committee.

ALD. PARBURY (Chairman)	MISS FRISBY.
MR. CAVE.	ALD. HAND.
MR. COOPER.	MR. HARRIS.
CORT.	" HARRISON.
MISS FORTEY.	ALD. WILFORD.

City Ambulance Service Sub-Committee.

MR. COOPER.	MR. HARRISON.
MISS FRISBY	" JACKSON.
" GOODWIN.	ALD. PARBURY.

Staff of the Health Department

(As constituted January, 1946.)

Medical Officer of Health.

E. K. MACDONALD, M.D., M.R.C.S., L.R.C.P., D.P.H.

Deputy Medical Officer of Health.

J. C. H. MACKENZIE, M.D., D.P.H.

Secretary.

WILFRID CARR, F.C.C.S.

Medical Officers in Charge of Departments.

<i>Medical Superintendent, City General Hospital</i>	..	A. P. M. PAGE, M.D., M.R.C.P.
<i>Medical Superintendent, City Isolation Hospital</i>	..	J. C. H. MACKENZIE, M.D., D.P.H.
<i>Medical Officer for Maternity and Child Welfare</i>	..	E. B. B. HUMPHREYS, M.B., Ch.B.
<i>Pathologist</i>	.. .. .	R. S. WALE, M.D.
<i>Tuberculosis Officer</i>	.. .. .	ALEXANDER SCOTT, M.A., B.Sc., M.B., Ch.B.

Assistant Medical Officer.

Assistant Tuberculosis Officer E. G. LAWRIE, M.B., Ch.B.

Assistant Medical Officers (and Assistant School Medical Officers.)

K McALPINE, M.B., Ch.B.	MOLLY B. WILSON, M.B., Ch.B., D.P.H.
GLADYS RANDALL, M.B., B.S., D.P.H.	*ANNYS M. CUSACK, M.B., B.S., D.P.H.
*MARGARET D. HIRD, M.B., Ch.B., D.P.H.	I. DUB, M.D.
JANET M. DONE, M.D., D.P.H.	PAULINE K. HEARTH, M.B., B.Ch., B.A.O., D.P.H.

City General Hospital.

<i>Deputy Medical Superintendent and Surgeon</i>	..	T. M. J. d'OFFAY, M.B., Ch.B., F.R.C.S.
<i>Obstetrician and Gynaecologist</i>	.. ..	D. R. CAIRNS, M.B., M.R.C.O.G.
<i>Assistant Pathologist</i>	.. ..	E. KELEN, M.D.
<i>Orthopaedic Registrar</i>	.. ..	J. REDDING, M.B., F.C.R.S.E.

and Four Resident Medical Officers

<i>Radiographers</i>	.. ..	{ (Miss) A. McLOUGHLIN, M.S.R. (Miss) H. BRIGHT, M.S.R.
<i>Laboratory Technicians</i>	.. ..	{ F. H. G. HAYES (Miss) L. BARNES
<i>Physiotherapists</i>	.. ..	{ (Mrs.) D. KELLOCK, C.S.P. (Mrs.) B. BIKKER, C.S.P. (Mrs.) J. DRURY, C.S.P.

City Isolation Hospital and Sanatorium.

Chief Assistant Resident Medical Officer .. J. M. SHEACH, M.B., Ch.B.
and Three Resident Medical Officers

<i>Radiographer</i>	.. ..	(Mrs.) M. J. STEPHENS, M.S.R.
<i>Laboratory Technician</i>	.. ..	Mr. J. LAUDER

* On Active Service.

Consultant Medical Officers (all Departments).

Physicians	..	..	..	..	{ J. V. C. BRAITHWAITE, M.D., F.R.C.P. R. M. CAIRNS, M.D., Ch.B.
Cardiologist	..	..	..	..	J. P. W. JAMIE, M.A., M.D., B.Ch.
Gynaecologist	..	..	..	..	T. C. CLARE, M.D., F.R.C.S., F.R.C.O.G. E. R. FRIZELLE, M.Ch., F.R.C.S.E.
Surgeons	..	..	..	..	D. B. MCGAVIN, M.Ch., F.R.C.S. J. C. BARRATT, V.C., M.B., B.S., F.R.C.S.
Gynaecological Surgeon	..	..	..	..	R. LODGE, M.B., F.R.C.S., M.R.C.O.G.
Orthopaedic Surgeon	..	..	..	..	L. MORRIS, M.D., F.R.C.S.
Ear, Nose and Throat Surgeon	..	..	..	..	N. E. KENDALL, F.R.C.S.
Ophthalmic Surgeon	..	..	..	..	*A. L. MCCURRY, M.D., D.O.M.S.
Obstetric Surgeon (to Westcotes)	..	..	..	..	T. W. ALLEN, B.A., M.B., D.R.C.O.G.
Radiodiagnostician	..	..	..	..	D. F. LAWSON, M.A., M.B., B.Ch., D.M.R.E.
Radiotherapist	..	..	..	..	O. ENGLANDER, M.D.
Dermatologist	..	..	..	..	F. A. E. SILCOCK, M.D., D.P.H.
Thoracic Surgeon	..	..	..	..	T. HOLMES SELLORS, D.M., M.Ch., F.R.C.S.
					D. JUSTIN DAVIES, M.B., D.A. W. S. RUSSELL, M.A., M.R.C.P., M.R.C.S., M.B., B.CHIR.
Anaesthetists	..	..	..	..	T. F. BOSTOCK, M.R.C.S., M.R.C.P. K.C., BUCK, M.D. (Miss) J. S. B. McNEIL, M.B., Ch.B., D.A. S. RODKER, M.R.C.S., L.R.C.P. C. H. WILKIE, M.D., Ch.B., B.Sc., Director of V.D. Services
Venereologists	..	..	..	..	H. N. C. ATKINSON, M.R.C.S., L.R.C.P. (Mrs.) K. M. LODGE, M.B., B.S., M.R.C.S., L.R.C.P.
Public Vaccinators	..	..	..	..	(Mrs.) U. E. LACEY, M.R.C.S., L.R.C.P. A. J. L. SPEECHLEY, M.R.C.S., L.R.C.P. C. H. PARKER, M.R.C.S., L.R.C.P.
					No. 1. A. MORRICK, M.B., Ch.B. 2. A. J. L. SPEECHLEY, M.R.C.S., L.R.C.P.
District Medical Officers	..	..	..	..	2a. W. WHITELAW, M.B., Ch.B. 3. J. H. NOBLE, M.D., M.R.C.P. 4. F. T. DOLEMAN, M.R.C.S., L.R.C.P. 5. P. J. J. HUGHES, M.B., B.Ch. 6. I. PLATT, M.B., Ch.B. 7. G. SMITH, M.D., Ch.B.
Dental Surgeon	..	..	..	..	J. ROWLETT, L.D.S.

Matrons.

City General Hospital	..	..	..	..	Miss E. L. LIVERMORE (Acting) S.R.N., S.C.M.
City Isolation Hospital	..	..	..	..	B. NESBITT, S.R.N.
Westcotes Maternity Home	..	..	..	..	E. BRADSHAW, S.R.N., S.C.M.
Day Nurseries	..	..	..	..
"Home Place," Holt	..	..	..	..	W. KNIGHT

Engineer to Health Department.

R. H. LETCHFORD, A.I.E.E., A.M.I.H.V.E.

Public Analyst's Laboratory.

Public Analyst	..	..	..	..	F. C. BULLOCK, B.Sc., P.A.Inst.W.B., F.R.I.C.
Assistants	..	..	..	..	{ N. HERON, F.R.I.C. H. M. BEE. T. W. TOSELAND
Clerk	..	..	..	..	E. HOLMES (Miss)

Sanitary Inspectors.

Chief Inspector	..	..	..	..	F. G. McHUGH, 1 3 4 5
Deputy Chief Inspector	..	..	..	..	H. ELKINGTON, 3 5

Inspectors—

R. T. BLAYLOCK, 1 3 4 7
T. W. BERESFORD, 2 3

H. BURLEY, 2 3

H. CLOUGH, 1 3

M. C. CRIPPS, 1 3

R. V. FIDDES, 1 3

G. H. FYFE, 2 3

W. J. GETGOOD, 1 3 4

T. HINES, 1 3

W. C. LONG, 1 3

G. H. MAWHINNEY, 2 3 4 15

A. McCARTNEY, 2 14

*F. W. MURRAY, 7 8

W. MUSTON, 1 3

J. W. NORTH, 1 3

E. OWEN, 2 3 14

W. J. PARKINSON, 1 3 6

*A. SMITH, 2 3 4 14

E. THOMPSON, 1 3

*A. G. WATKIN, 2 3 16

A. WELTON, 1 3

J. WRIGHT, 2 3

* On Active Service.

Health Visitors.

Superintendent... .. MRS. REED, 9 10
Deputy Superintendent Miss E. M. CRAGG, 9 10 13

District Health Visitors—

Miss D. M. ABBOT, 9 12 13	Miss D. L. MALLISON, 9 12 13
" M. ASH, 9 12 13	" J. G. MASTERS, 9 10
" L. CHAMBERS, 9 13	" E. J. OWEN, 9 12 13
" M. CONLON, 9 12 13	" H. E. RICH, 9 12 13
" H. M. DENSHAM, 9 12 13	" V. STRAW, 9 12, 13
" K. L. HOULTON, 9 12 13	" F. E. TOON, 9 12 13
" A. KAVANAGH, 9 12 13	" M. WATCHORN, 9 12 13
" E. LEWIS, 9 12 13	" E. WILFORD, 9 13
	" E. L. WOLLASTON, 9, 13
	{ Miss F. BEASLEY, 9 13
	" E. MOUND, 9 13
	" C. NEILL, 11
Tuberculosis Nurses	MRS. E. A. GRAINGER, 9 13
Diphtheria Immunisation	

1. Holds Sanitary Inspector's Certif. Roy. San. Inst.
2. Holds Royal Sanitary Institute and Sanitary Inspectors Exam. Joint Board Certificate.
3. Holds Meat and Food Inspector's Certif. Roy. San. Inst.
4. Holds Certif. of Roy. San. Inst. for San. Science as applied to Buildings and Public Works.
5. Holds Sanitary Inspector's Certif. under Public Health (London) Act, 1891.
6. Holds Sanitary Inspector's Certif. San. Inspectors' Assocn.
7. Holds Certif. of Royal San. Assocn. of Scotland for Meat Inspection.
8. Holds Certif. of Royal San. Assocn. of Scotland for Sanitary Science.
9. Holds Certif. of the Central Midwives' Board.
10. Holds Health Visitor's Certif. of the Roy. San. Inst.
11. Holds Certif. as fully Trained Nurse.
12. Holds Health Visitor's Certificate.
13. Holds State Registered Nursing Certificate.
14. Holds Liverpool University Certificate of Competency as Meat and Food Inspector.
15. Holds Diploma of Royal Institute of Public Health and Hygiene.
16. Holds Smoke Inspector's Certificate, R.S.I.

Municipal Midwives.

Area No 1. Saffron Lane.

MRS. DODSON, S.C.M., 2, Burnaston Road	Tel No. 32172
Miss GREEN, S.C.M., 2, Burnaston Road	" 32172
Miss JEFFS, S.R.N., S.C.M., 10, Sheridan Street	" 32182

Area No. 2. Braunstone.

Miss HOPKINS, S.C.M., 17, Imperial Avenue	" 34398
Miss McCaULL, S.C.M., 13, Braunstone Avenue	" 22323
Miss PRINCE, S.R.N., S.C.M., 124, Ainsdale Road	" 88865
MRS. RITCHIE, S.C.M., 29, Camville Road	" 88598

Area No. 3. Western.

Miss CONWAY, S.R.N., S.C.M., 145, Glenfield Road	" 88350
Miss P. SPINK, S.R.N., S.C.M., 205, Fosse Road North	"

Area No. 4. Central.

MRS. LEDGER, S.C.M., 205, Birstall Street	" 20502
Miss NEWELL, S.R.N., S.C.M., 47, Princess Road	"

Area No. 5. Northern.

MRS. V. E. CLARKE, S.C.M., 186, Canon Street Extension	" 61483
MRS. FEARN, S.C.M., 13, Perseverance Road, Birstall	" 84354
MRS. G. SMITH, S.C.M., 141, Catherine Street Extension	" 61664
Miss HATELY, S.R.N., S.C.M., 37, Wavertree Drive	" 61726

Area No. 6. Humberstone.

Miss BARKER, S.R.N., S.C.M., 22, Swainston Road	" 28040
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Area No. 7. Spinney Hill.

MRS. HURD, S.R.N., S.C.M., 34, Diseworth Street	" 65481
Miss E. REDHEAD, S.R.N., S.C.M., 34, Diseworth Street	" 65481

Area No. 8. Stoneygate and Evington.

Miss MANSFIELD, S.C.M., 165, Clarendon Park Road	" 78085
--	---------

Temporary Midwife—

MRS. SEALE, S.C.M., 3, Bakewell Street	" 59216
--	---------

Chest Radiography Unit.

Senior Radiographer	..	..	..	Miss M. V. RAY
Junior Radiographer	..	..	..	Mr. L. BEAVER
Dark Room Technician	..	..	..	Miss A. BRYAN
Liaison Officer	..	..	..	Miss D. HAMPSON
Three Clerks				

City Ambulance Service.

Ambulance Officers	A. E. PIGGOTT
				H. GOODRIDGE
				L. J. MILLARD

Clerical Staff.

Chief Clerk	F. KELLETT.
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General Clerks—

E. SLINGSBY.	Miss D. R. POTTERTON.	Miss J. BROOKS.
*G. H. SEAL.	" V. DAWN	" K. M. TUSTAIN
*R. FIELDMAN.	" V. NETHERCOT.	" E. E. BATTLE.
J. A. JACKSON.	MRS. E. MCCARTHY.	MRS. G. UTTING.
P. DAVENPORT	Miss A. M. ASTLE	Miss B. V. HART
M. GRIFFIN	Mrs. L. PARTRIDGE	" B. E. FRANCIS

Tuberculosis Dispensary	..	..	..	..	{ Miss J. HEATON.
					" B. M. BOND.

Isolation Hospital and Sanatorium—

Steward	..	..	..	..	..	H. I. REES.*
						{ F. W. HYDE.
						L. H. REES.
Clerks	..	..	..	..	..	Miss V. ALLSOP.
						Mrs. M. LANG
						Miss C. J. SQUIRE

City General Hospital—

Steward	..	..	..	..	..	E. H. BALL.
Asst. Steward	..	..	..	..	..	S. WHATSIZE.

						{ L. HEATHERLEY.*
						Miss D. WATTS
						" C. STONE.
						" J. GUILLAIN.
						" B. C. GRIFFIN
						" K. WRIGHT.
Clerks	..	..	..	..	..	Mrs. M. A. WILLIAMS
						Miss S. WRIGHT.
						" P. R. TATE
						" K. CHAYTOW
						" M. McDONALD

Milk Depot	{ Mrs. BREWIN.
						Miss L. HARDING
Vaccination Officer	J. H. LOCKWOOD

* On Active Service.

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SUMMARY OF STATISTICS

FOR THE YEAR 1945.

CITY OF LEICESTER.

Population at Census, 1931	239,169
„ (estimated) 1945	256,960
Marriages	2,894
Births (corrected)	4,940
Birth-rate	19.2
Deaths (corrected for transferable deaths)	3,123
Death-rate	12.2
Deaths under One Year	268
Infant Mortality (per 1,000 Births)	54.3
Maternal Mortality (per 1,000 total births)	0.99
Zymotic-rate (per 1,000 population)	0.35
Respiratory Disease death-rate	1.39
Cancer death-rate	1.93
Tuberculosis death-rate	0.70
Phthisis-death-rate	0.58

Area of City (in acres)	16,979
Number of persons per acre at Census, 1931	27.9
Number of persons per “structurally separate dwelling” at Census, 1931	3.80
Number of Inhabited Tenements, January, 1946	79,164
Number of Empty Houses, January, 1946	130
Number of Empty Cottages, January, 1946	10
Rateable value (1945-1946)	£2,113,641
General Rate for the year, 1945-1946	16/2 in £

	England and Wales	County Boroughs	London Adminis- trative County
Birth-rate	16.1	19.1	15.7
Death-rate	11.4	13.5	13.8
Infant Mortality (per 1,000 Births)	46	54	53

(Registrar General's Figures.)

*To the Chairman, Lord Mayor and Members of the
Health Committee.*

Mr. Chairman, my Lord Mayor, Ladies and Gentlemen,

I have the honour to submit herewith the Annual Report on the Health of Leicester for the year 1945.

COMMITTEE CHANGES :

ALDERMAN ASTLEY CLARKE, M.A., M.D., D.L., J.P., I have already recorded, in my report for last year, the serious loss sustained in the death of Dr. Astley Clarke in February, 1945.

MISS E. FRISBY, M.B.E., J.P., I much regret to record the death, in February, 1946, of Miss Frisby, first woman Lord Mayor of Leicester, who had given many years of devoted service to the City and to the Health Committee. Miss Frisby had actually resigned from the Council before her death.

On the 9th November, 1945, a very unusual amount of change in Committee personnel occurred. A new Chairman and Vice-Chairman were appointed, and no fewer than ten new members who had not served on the Council before, were elected to the Health Committee. Among the ten retiring members were several who had given many years of devoted service to the Committee, and to them and to Alderman Parbury, who relinquished his Chairmanship after serving for nearly twenty years as either Vice-Chairman or Chairman, I give my grateful thanks for all the encouragement and interest they have shown to the service.

To the new Committee Members, it is proper that I accord a welcome. I hope they will find this Report of interest—it certainly records matters of the greatest importance to Leicester.

STAFF. With the retirement of Dr. W. S. Thomson (see 1944 Report), Dr. J. C. H. Mackenzie was appointed temporarily as Deputy Medical Officer of Health.

STATISTICS :

POPULATION. The Registrar-General estimates the mid-1945 population as 256,960. This compares with 257,450 for 1944.

BIRTH RATE. This remained higher than of late years, except for 1944. The illegitimate rate was considerably higher than in pre-war years. (See page 1.)

INFANT MORTALITY RATE. Due mainly to increased mortality from pneumonia and diarrhoea and vomiting, the infant mortality rate rose to 54.3 per 1,000 live births—a total of 268 deaths. This increase is discussed on page 3.

DEATHS. The death rate at 12.2 was much the same as last year. For the first time there was a slight check in the rise of the number of deaths from cancer (see page 7, where I have discussed the establishment of a Cancer Organisation for the area).

Only one death was ascribed to diphtheria, and as there were only 98 definite notifications of this disease, a new low record was established (see page 9).

CHEST RADIOGRAPHY CENTRE. On the 12th February, 1945, the Mass X-ray Service went into operation. Although it was impossible, owing to our inability to appoint a Medical Director, to work the Unit at its full rate, close on 20,000 persons were examined. The Service should prove a most useful addition to our means of preventing disease (see page 12).

CIVIL DEFENCE. I have given in very brief outline a summary of the organisation and work of the Casualty Services during the war. It is impossible in a few words to do justice to the wonderful spirit of service that the citizens of Leicester showed (see page 19).

HEALTH PROPAGANDA. One of the most important duties of a Health Department now and even more so in the future, is to teach the people the way of Health. In our modern and highly complicated method of life which we call civilisation, there are many factors which operate adversely against a really healthy life. Health has to be won and like anything else that is really worth while, some trouble has to be taken if success is to be achieved. Health Propaganda, therefore, is an important duty of the Health Department.

In the spring of 1945, recognising this fact, we staged a four-week exhibition (full details are given on page 26), and it is hoped that much good was done. But such exhibitions are not enough. Propaganda, to be effective, must be continuous and I look forward to the day when every

Health Department will have its propaganda branch, arranging, for example, regular publicity displays on some aspect or other of Health—lectures in factories, cinema shows, and so on. The Central Council for Health Education—the national body for this purpose—can be of the greatest assistance to us and I hope that as life becomes more normal after the war, more and more use will be made of them.

The year 1945 saw the end of the greatest and most devastating war in history. It also ushered in the birth of a period of peace, of which much is expected and even more hoped. The Health Service of this country has a great responsibility for the future happiness of the nation. In the pages of this Report will be found in some small measure an account of the way in which one City, at any rate, is attempting to discharge its responsibility.

I cannot close this opening letter to the Report without expressing to you, Mr. Chairman, and to your Vice-Chairman and Committee the most grateful thanks of the Department and of myself for the very real help and encouragement you have given us in our work. Your inspiring leadership and most kindly consideration are of real value.

I would also like to thank all the staff for their continued high standard of service.

I am,

Mr. Chairman, my Lord Mayor, Ladies and Gentlemen,

Your obedient Servant,

E. K. MACDONALD, M.D., B.S., D.P.H.,

Medical Officer of Health.

Health Department,
Grey Friars,
Leicester,
31st July, 1946.

ANNUAL REPORT, 1945

SECTION A.

Statistics and Social Conditions of the Area

STATISTICS

Population

The Registrar-General estimates the population at mid-1945 as 256,960. This compares with 257,450 at mid-1944 and 263,000 for 1938. The figure only includes civilians, which perhaps accounts for the reduction.

Birth Rate

The number of (live) births for 1945 was :

Male births	..	..	..	2,509 (2,696)
Female births	..	..	..	2,431 (2,536)
Total	..	..	..	4,940 (5,232)
Birth rate	..	..	..	19.2 (20.3)

Note.—The 1944 figures in this and succeeding sections are given in brackets.

Reference to Table I shows that the figures, though less than for 1944, are still substantially higher than for many years.

Of the total live births, 610 (322 males, 288 females) were illegitimate, giving an illegitimate birth rate of 2.4, or, put otherwise, one birth in eight was illegitimate. This proportion compares with about one in twenty before the war and therefore indicates a very great increase in

Table 1.

Year	Estimated Population	BIRTHS				DEATHS				INFANTILE MORTALITY	
		Male	Female	Total	Rate	Male	Female	Total	Rate	Deaths under 1 year	Rate
1938	263,300	1,942	1,931	3,873	14.7	1,526	1,425	2,951	11.2	178	45.95
1939	262,900	1,848	1,819	3,667	13.9	1,531	1,497	3,028	11.5	180	49.1
1940	259,400	1,901	1,703	3,604	13.9	1,941	1,813	3,754	14.5	187	51.2
1941	265,310	1,917	1,765	3,682	13.9	1,676	1,570	3,246	12.2	207	55.0
1942	259,400	2,205	2,119	4,324	16.7	1,515	1,401	2,916	11.2	219	50.6
1943	254,800	2,467	2,280	4,747	18.6	1,642	1,610	3,252	12.8	230	48.5
1944	257,450	2,696	2,536	5,232	20.3	1,615	1,459	3,074	11.9	204	39.0
1945	256,960	2,509	2,431	4,940	19.2	1,548	1,575	3,123	12.2	268	54.3

illegitimacy. With the cessation of hostilities it is to be presumed that the situation will become more normal.

Stillbirths

There was a total of 132 stillbirths, 65 being males and 67 females. The figures are very similar to those for 1944.

Infant Mortality Rate

The total deaths of infants under one year of age were 268, giving an infant mortality rate of 54.3 per 1,000 live births.

Reference to Table I shows that these figures indicate an unhappy rise.

In 1944, the rate at 39.0 certainly was a low record but, since 1937, only once has the 1945 figure been exceeded. It is therefore important to try to determine what is the cause of the rise.

Out of a total of 268 deaths, the following were the main causes of mortality :

	Males	Females	Total
1. Congenital malformation, etc.	34	29	63
2. Premature births	32	28	60
3. Pneumonia	26	34	60
4. Diarrhoea and Vomiting ..	28	15	43
<hr/>			
Total	120	106	226
5. Remaining causes	20	22	42
<hr/>			
			268
<hr/>			

From a study of the incidence of these causes of death, it appears that causes 1 and 2 are about in the same ratio as of late years, and that it is an increase in deaths from pneumonia and diarrhoea that has adversely affected the mortality rate.

The following graph (on page 6) shows the infantile death rate per 1,000 live births from pneumonia and diarrhoea since 1938.

Pneumonia in 1945 is shown to have approximately doubled the rate in 1944, and in the case of diarrhoea, apart from the high incidence of 1942, this disease is also much increased.

Marriages

The number of marriages solemnised in Leicester was :

Churches	1,655 (1,288)
Otherwise	1,239 (1,023)
<hr/>	
Total	2,894 (2,311)
<hr/>	

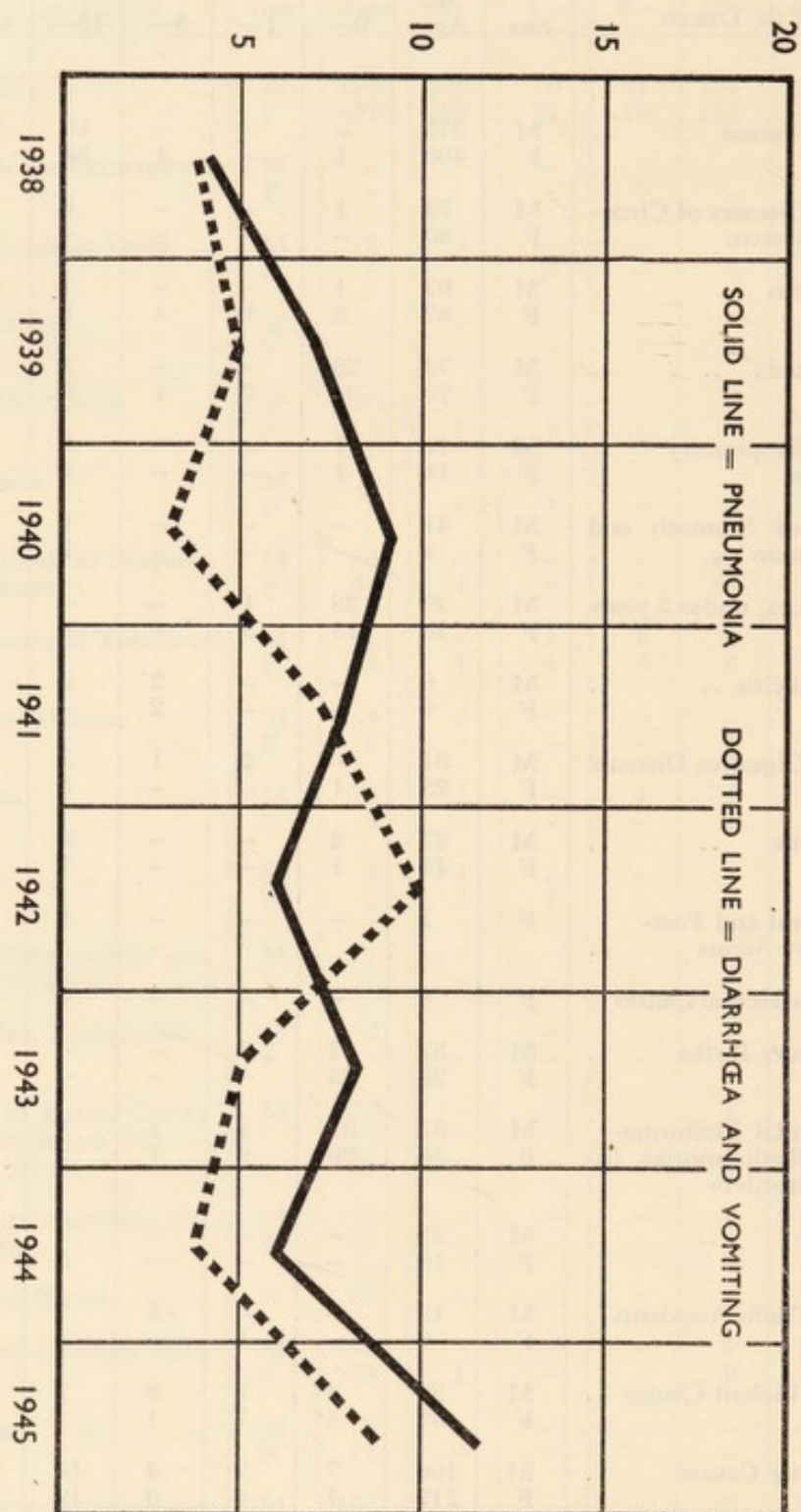
TABLE 2

CAUSES OF DEATH	Sex	All Ages	0—	1—	5—	15—	45—	65—
ALL CAUSES	M	1548	140	10	21	133	427	817
	F	1575	128	21	16	154	323	933
1. Typhoid and Paratyphoid Fevers	M	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—
2. Cerebro-Spinal Fever ..	M	2	1	—	—	—	—	1
	F	—	—	—	—	—	—	—
3. Scarlet Fever	M	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—
4. Whooping Cough ..	M	—	—	—	—	—	—	—
	F	2	1	1	—	—	—	—
5. Diphtheria	M	—	—	—	—	—	—	—
	F	1	—	1	—	—	—	—
6. Tuberculosis of Respiratory System	M	85	—	—	—	42	35	8
	F	64	1	—	—	50	11	2
7. Other forms of Tuberculosis	M	11	—	1	2	6	1	1
	F	20	1	4	5	6	1	3
8. Syphilitic Disease ..	M	4	2	—	—	—	2	—
	F	5	—	—	—	1	2	2
9. Influenza	M	12	1	—	1	2	3	5
	F	8	—	—	—	1	—	7
10. Measles	M	3	1	2	—	—	—	—
	F	2	1	1	—	—	—	—
11. Acute Poliomyelitis and Polioencephalitis	M	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—
12. Acute Inf. Encephalitis	M	2	—	—	—	2	—	—
	F	—	—	—	—	—	—	—
13. Cancer of Buccal Cavity and Oesophagus (M) ..	M	20	—	—	—	1	2	17
Uterus (F)	F	26	—	—	—	3	15	8
14. Cancer of Stomach and Duodenum	M	57	—	—	—	4	20	33
	F	39	—	—	—	3	12	24
15. Cancer of Breast ..	F	63	—	—	—	4	35	24
16. Cancer of all other Sites	M	158	—	—	—	7	68	83
	F	133	1	—	—	9	47	76
17. Diabetes	M	9	—	—	—	—	2	7
	F	11	—	—	—	—	3	8
18. Intra Cranial Vascular Lesions ..	M	139	—	—	—	1	39	99
	F	216	1	—	1	1	46	167

TABLE 2—continued.

CAUSES OF DEATH	Sex	All Ages	0—	1—	5—	15—	45—	65—
19. Heart Disease ..	M	373	—	—	—	16	91	266
	F	400	1	—	1	24	56	318
20. Other Diseases of Circulatory System ..	M	73	1	—	—	6	9	57
	F	80	—	—	—	—	12	68
21. Bronchitis ..	M	93	1	—	—	3	27	62
	F	82	3	1	1	1	8	68
22. Pneumonia ..	M	74	26	—	—	3	19	26
	F	73	34	2	1	5	8	23
23. Other Respiratory Diseases ..	M	19	1	—	—	1	7	10
	F	16	1	—	—	2	5	8
24. Ulcer of Stomach and Duodenum ..	M	41	—	—	—	1	30	10
	F	4	—	—	—	1	2	1
25. Diarrhoea, under 2 years	M	29	28	1	—	—	—	—
	F	18	15	3	—	—	—	—
26. Appendicitis ..	M	6	—	—	2	2	—	2
	F	6	—	—	2	—	2	2
27. Other Digestive Diseases	M	31	—	2	1	2	5	21
	F	25	1	—	—	5	7	12
28. Nephritis ..	M	67	2	—	—	9	19	37
	F	45	1	—	—	1	15	28
29. Puerperal and Post-Abortive Sepsis ..	F	1	—	—	—	1	—	—
30. Other Maternal Causes ..	F	4	—	—	—	4	—	—
31. Premature Births ..	M	32	32	—	—	—	—	—
	F	28	28	—	—	—	—	—
32. Congenital Malformations, Birth Injuries, Infant Disorders ..	M	37	34	1	1	1	—	—
	F	35	29	2	1	2	—	1
33. Suicide ..	M	23	—	—	—	3	10	10
	F	16	—	—	—	5	8	3
34. Road Traffic Accidents ..	M	13	—	—	5	5	2	1
	F	8	—	1	—	3	1	3
35. Other Violent Causes ..	M	29	3	1	5	2	10	8
	F	32	5	1	1	3	5	17
36. All Other Causes ..	M	106	7	2	4	14	26	53
	F	112	4	4	3	19	22	60

INFANTILE MORTALITY RATE



Death Rate

The total number (corrected) of deaths was 3,023 (3,074), namely 1,548 (1,615) males and 1,575 (1,459) females.

The death rate was 12.2 (11.9).

See Table I for comparison with recent years.

Comment on Causes of Death

Table 2 shows the deaths classified according to certain specified causes and to age and sex.

I would draw attention to the following points :

Cancer. 496 (519) deaths. Death rate 1.93 (1.95). I believe that 1945 was the first year which showed locally and nationally a slight check in the increasing cancer death rate. It is, of course, too early to say that the improvements in ascertainment and treatment are bearing fruit, but at least it can be said that the future is brighter than the past.

During the year attempts were made to implement the Cancer Act, 1939, by means of the establishment of a Cancer Organisation based on the Sheffield University and Hospitals and covering the major part of the North Midland Region. Although no legal scheme had been adopted, considerable progress to a practical affiliation of the various hospitals and authorities in the area had been made.

Under the proposal, the Cancer Organisation was to be based on Sheffield and placed under a joint authority with representatives from Local Authorities, Voluntary Hospitals, the University and other interested bodies. The Sheffield Director of the Cancer Organisation was to exercise, and in fact now does exercise, a general oversight over the affiliated centres, such as Leicester, and the work of the local Radiotherapists was equally co-ordinated with that of the Director.

As far as Leicester is concerned, it was agreed that the Royal Infirmary should be developed as an "A" Centre, i.e., with full facilities for all types of treatment, including radiotherapy, and that the City General Hospital should be a "B" Centre, i.e., with full facilities for treatment other than radiotherapy. This presupposes co-operation to the fullest degree between the two hospitals and thus when a Radiotherapist was appointed to the Royal Infirmary, he was also appointed on the staff of the City General Hospital.

I am glad to record this degree of co-operation, which is a hopeful augury for the future.

Final approval of the scheme for the area was deferred pending the coming into force of the National Health Service Bill which repeals the Cancer Act (part), and as at present constituted will merge the cancer proposals in the larger schemes of hospital provision and government.

Heart and Vascular Disease (including Cerebral Haemorrhage). As usual, this class of disease accounts for the largest single group of deaths, 42 per cent. or 1,281 deaths being assigned to this cause. 355 deaths occurred from cerebral hæmorrhage, the majority (266) being over 65 years of age. Of the remaining 926 deaths, 709 occurred in persons over 65 years of age, and only 43 in persons under 45 years of age.

Respiratory Disease. 175 deaths were ascribed to bronchitis, 147 to pneumonia and 35 to other respiratory diseases (excluding pulmonary tuberculosis). Thus a total of 357 deaths occurred from this cause, compared with 309 in 1944. I have already commented on the increase in mortality in the first year of life from pneumonia.

Apart from this, the incidence from these diseases is more marked, as usual, in the latter years of life.

Digestive Tract. In my last report, I drew attention (page 7) to the increased incidence of disease of the digestive tract. This increase was continued in 1945. 41 deaths in males and four in females were ascribed to ulcer of the stomach and duodenum, and 68 to other conditions affecting the alimentary canal.

INFECTIOUS DISEASE

Tuberculosis. See Appendix I.

Measles. Notifications, 5,493 ; deaths, 5.

Commencing at the end of January, 1945, and lasting till the end of April, 1945, there was a severe epidemic of measles. The week of highest incidence was that ending on the 17th March, during which no fewer than 723 notifications were received. The five deaths occurred in children, all under five years of age, two being under one year of age.

The deaths and notifications were evenly divided between the sexes.

Scarlet Fever. Notifications, 718 ; deaths, nil.

Whooping Cough. Notifications, 458 ; deaths, two.

Typhoid and Paratyphoid Fevers. Notifications, nil ; deaths, nil.

Cerebro-Spinal Fever. Notifications, 22 ; deaths, two.

Diphtheria. Notifications, 98 ; deaths, one.

A mortality rate of under one per cent. has never before been recorded so far as I can ascertain in these annual reports, and it is necessary to go back as far as 1904 before finding a year in which only one death has occurred from diphtheria. As, however, in that year, only 30 cases of diphtheria were discharged from the hospital, the case mortality was 3.3 per cent.

Undoubtedly the continued low incidence of the disease is due in part to the immunisation campaign.

The methods used to encourage parents to accept immunisation for their children have been fully detailed in previous reports, but there is one innovation to record this year.

It has been found desirable to give a "boosting" dose to children, who had been immunised a year or two before going to school, when first they entered the infant school. The intervening period had probably seen some loss of the acquired immunity and thus it is felt necessary to give some added protection to the child at a time that the risk is greatest. Propaganda to this effect was therefore initiated with the great assistance of the infant head teachers, to whom I am most grateful for their co-operation. The response was satisfactory.

Diphtheria Immunisation

	Under 5	Over 5	Total
Number of children immunised in 1945.	3,051	916	3,967
Number of children immunised since start of scheme	12,200	36,957	49,157
Percentage of children immunised since start of scheme	63.5	79.9	
Number of children given "boosting" dose in 1945	63	847	910
Number of cases of genuine diphtheria during 1945 in "immunised" children	5	27	32
Number of deaths from genuine diphtheria during 1945 in "immunised" children	Nil	Nil	Nil

TABLE 3

SUMMARY OF STATISTICAL DATA GIVEN BY:	BIRMINGHAM	BRISTOL	CARDIFF	COVENTRY	LEEDS	LEICESTER	LIVERPOOL	MANCHESTER	NEWCASTLE- ON-TYNE	NOTTINGHAM	PORTSMOUTH	SHEFFIELD	STOKE-ON- TRENT	SUNDERLAND
Population (Registrar-General's estimate at mid-1945)	1,001,900	414,320	217,410	221,970	451,670	256,960	681,120	623,480	265,990	265,090	179,240	476,360	251,410	165,310
Birth Rate (per 1,000 population)	20.2	16.96	18.71	22.2	17.2	19.2	21.7	18.22	18.2	19.8	23.40	18.1	19.8	19.96
Death Rate (per 1,000 population)	11.2	11.60	13.01	10.5	14.2	12.2	14.0	14.41	13.0	12.9	13.80	12.5	11.9	12.86
Death Rate (per 1,000 population):														
Measles	0.03	0.02	0.03	0.01	0.05	0.019	0.02	0.01	0.008	0.02	0.03	0.01	0.04	0.04
Scarlet Fever	0.00	0.002	—	—	—	—	0.00	—	—	0.007	0.07	—	0.004	0.006
Whooping Cough	0.03	0.009	0.01	0.05	0.02	0.008	0.05	0.04	0.015	0.01	0.02	0.01	0.04	0.00
Diphtheria	0.02	0.009	0.01	0.02	0.00	0.004	0.04	0.02	0.053	0.03	0.01	0.02	0.008	0.03
Typhoid and Paratyphoid	—	—	—	—	0.00	—	0.00	0.00	—	—	—	—	0.004	0.00
Diarrhoea (under 2 years)	0.16	0.05	6.88	0.27	0.19	0.183	0.21	0.14	0.064	0.13	0.10	5.10	0.119	0.24
Influenza	0.06	0.05	0.07	0.05	0.05	0.078	0.10	0.07	0.023	0.03	0.05	0.06	0.105	0.05
Cancer	1.84	1.89	1.78	1.52	2.15	1.93	1.80	2.08	1.90	1.92	2.35	1.83	1.81	1.69
Tuberculosis—Pulmonary	0.68	0.61	0.82	0.79	0.63	0.58	0.88	0.80	0.83	0.67	0.65	0.56	0.600	0.72
Non-pulmonary	0.08	0.13	0.09	0.04	0.07	0.12	0.14	0.13	0.20	0.10	0.17	1.11	0.107	0.16
Infantile Mortality Rate	49	35	55	68.2	56	54.3	72	55.80	39.7	53	42.67	46	50	55
Maternal Mortality Rate (per 1,000 total births):														
From—Sepsis	0.49	0.42	0.71	0.4	0.50	0.20	0.46	0.25	1.40	0.57	0.23	0.34	0.98	0.29
Other causes	0.92	0.83	2.37	0.8	1.25	0.79	1.05	0.77	1.00	0.76	0.46	1.01	0.98	1.18
TOTAL	1.41	1.25	3.08	1.2	1.75	0.99	1.51	1.02	2.40	1.33	0.69	1.35	1.96	1.47

SECTION B.

General Provision of Health Services of the Area

City Ambulance Service

No change in administration has to be reported during 1945.

The analysis of calls dealt with during the year is as follows (1944 figures are given in brackets) :

Total number of calls :

			<i>Year ending 31st December, 1945</i>	
			<i>06.00—18.00</i>	<i>18.00—06.00</i>
			<i>hours</i>	<i>hours</i>
City .. ..	..	..	10,006 (8,968)	2,525 (2,694)
County .. ..	..	..	618 (454)	291 (355)
Totals ..			10,624 (9,422)	2,816 (3,049)
Journeys to accidents in factories ..			..	280 (338)
Journeys to accidents in streets ..			..	599 (694)
Journeys to sudden illness in streets ..			..	212 (172)
Journeys to D.O.A's and suicides, etc. ..			..	133 (147)
Journeys to cases where services were NOT required .. ..			..	82 (86)
Journeys to maternity cases, to hospitals, etc.			..	1,817 (2,110)
Journeys to remove patients to and from hospitals, etc. .. ..			..	10,317 (8,924)
Totals .. ..			..	13,440 (12,471)

Five hundred and sixty-seven calls from midwives for the gas and air analgesia service were dealt with in addition to the above.

My grateful thanks are due to the many volunteers who have assisted with this Service.

Scabies Clinic, Granby Halls

The incidence of this disease showed a substantial drop during 1945.

Scabies figures for the year 1945

Class of Patient	New Cases definite cases of Scabies	Contacts examined and found not to be suffering from Scabies	Attendances of patients for examination by Medical Officer and Treatment		Patients Dis- charged as cured
			Medical Officer	Treatment	
Health Committee					
Patients :					
Adult Males	244	166	773	1030	234
Adult Females	697	366	1498	2219	439
Children under 5 years of age	229	131	677	826	159
Education Committee					
Patients :					
Adult Males	350	150	1033	1402	279
Adult Females	370	143	1110	1781	297
GRAND TOTAL (1944)	1890 (2693)	956 (1218)	5091 (8123)	7258 (8034)	1408 (2276)

Chest Radiography Centre

On the 12th February, 1945, the Chest Radiography Centre was opened and the first of many thousands of patients dealt with during the year passed through the Unit.

Before describing the year's work, the first thing I want to do is to express my appreciation in the warmest possible terms of the hospitality accorded to us by Messrs. N. Corah & Sons, Ltd., of St. Margaret's Works, who have allowed us, free of rent and with many facilities, to establish the Unit on their premises until such time as a permanent home can be found for it. It is very pleasant to record such an example of public spirit. The various officers of the firm have been most helpful, and to them also we are very grateful.

At the commencement of the scheme the team operating the Unit consisted of two radiographers and a darkroom technician on the technical side, the secretary of the Unit and three clerks on the clerical side. The whole team has worked together in the most efficient and harmonious manner and very numerous expressions of thanks and congratulations have been received from firms and individuals.

Unfortunately, neither the Ministry of Health nor the Central Medical War Committee would permit the appointment of a Medical Director to the Unit. This duty has therefore fallen to Dr. J. C. H. Mackenzie, who was assisted in the latter part of the year by Dr. A. Scott. The lack of a whole-time Medical Director necessitated running the Unit at less than its optimum rate.

The normal procedure has been as follows :

Contact having been made with a firm whose employees might be willing to co-operate, a visit is made for the purpose of giving a short talk, often reinforced by a Ministry of Information film during the lunch hour in the firm's canteen. These visits are most fruitful of results and I would like to express my thanks to the many firms who have co-operated in this way.

Appointments are made for the individuals to come for the miniature X-ray, usually about 500 films being taken each week. On examination of these, a certain proportion, owing to various causes, are found to require further investigation, and so a notice asking the individual to come up for a large film is sent.

At all stages of the procedure emphasis is laid on the fact that the results of the investigation are entirely secret and will only be divulged to a third person with the full agreement of the individual. It is also emphasised that the whole procedure is free, no charge of any sort being made.

If, on examination of the large film, an interview with the doctor is considered necessary, this is arranged and the appropriate advice given to the patient.

Not only are employees of firms offered X-ray in this Service, but school-leavers receive it, with the permission of their parents, during their last term at school, and numerous individuals have been examined.

CHEST RADIOGRAPHY CENTRE
ANNUAL RETURN FOR THE YEAR ENDING 31st DECEMBER, 1945
 Total Number of Firms X-rayed . . 79

AGE GROUPS										
	14	15-19	20-24	25-34	35-44	45-54	55-64	65+	Total	
Number of persons X-rayed : Workers, etc. . . Men .. Women School Leavers : Boys .. Girls .. Totals	115	756	735	1,630	2,184	1,797	875	154	8,246	
	179	1,765	2,214	2,350	1,453	670	172	15	8,818	
	698	150	—	—	—	—	—	—	848	
	753	104	—	—	—	—	—	—	857	
	1,745	2,775	2,949	3,980	3,637	2,467	1,047	169	18,769	
Number of persons seen by Medical Director = 517 (Not all classified) Classification of Diseases of persons seen by M.D. :										
Abnormalities of Bony Thorax : . .Men .. Women Boys .. Girls .. Carried forward	1	—	—	—	1	1	1	—	4	
	—	3	3	2	1	—	—	—	9	
	—	—	—	—	—	—	—	—	—	
	2	—	—	—	—	—	—	—	2	
	3	3	3	2	2	1	1	—	15	

	AGE GROUPS							
	14	15-19	20-24	25-34	35-44	45-54	55-64	65+
								Total
Brought forward	3	3	3	2	2	1	1	15
Chronic Bronchitis and Emphysema : Men ..	-	-	-	1	3	5	3	12
Women ..	1	-	-	3	-	-	-	4
Boys ..	1	-	-	-	-	-	-	1
Girls ..	-	-	-	-	-	-	-	-
Consolidation of Unknown Cause : Men ..	-	-	1	1	1	-	-	3
Women ..	-	3	1	2	1	4	1	12
Bronchiectasis	1	-	1	-	2	2	-	6
Women ..	-	-	-	-	-	-	-	-
Boys ..	1	-	-	-	-	-	-	1
Girls ..	1	-	-	-	-	2	-	9
Pulmonary Fibrosis	-	-	1	1	1	2	4	3
Women ..	-	-	-	2	1	-	-	1
Boys ..	1	-	-	-	-	-	-	-
Girls ..	-	-	-	-	-	-	-	-
Pneumokoniosis	-	-	-	-	1	1	1	3
Women ..	-	-	-	-	-	-	-	-
Men ..	-	-	-	1	-	1	-	2
Basal Fibrosis	-	-	-	1	-	1	-	4
Women ..	-	-	-	1	-	-	-	1
Boys ..	1	1	-	-	-	-	-	2
Girls ..	-	-	-	-	-	-	-	-
Carried forward	9	7	7	14	12	16	12	77

	AGE GROUPS							
	14	15-19	20-24	25-34	35-44	45-54	55-64	65+
Brought forward ..	9	7	7	14	12	16	12	-
Pleural Thickening ..	-	1	2	4	6	2	1	-
Men ..	-	2	3	2	2	-	-	-
Women	-	-	-	-	-	-	-	-
Boys ..	-	-	-	-	-	-	-	-
Girls ..	-	-	-	-	-	-	-	-
Pleural and Interlobal Effusion : ..	-	-	-	-	-	1	-	-
Men ..	-	-	-	-	-	-	-	-
Women	-	-	-	-	1	-	-	-
Intrathoracic New Growth : ..	-	-	-	-	-	-	1	-
Men ..	-	-	-	-	-	-	-	-
Women	-	-	-	1	-	-	-	-
Cardiovascular Lesions, Congenital : ..	-	-	-	1	-	-	-	-
Men ..	2	2	2	1	2	1	-	-
Women	-	1	-	-	-	-	-	-
Boys ..	1	-	-	-	-	-	-	-
Girls ..	-	-	-	-	-	-	-	-
Cardiovascular Lesions, acquired : ..	-	-	2	5	4	2	3	2
Women	-	2	5	7	11	7	3	-
Boys ..	1	-	-	-	-	-	-	-
Girls ..	2	-	-	-	-	-	-	-
Miscellaneous Conditions : ..	-	1	1	2	-	4	3	-
Men ..	1	6	1	-	2	-	1	-
Women	-	1	-	-	-	-	-	-
Boys ..	-	-	-	-	-	-	-	-
Girls ..	3	3	1	2	2	-	1	-
Tuberculosis, Inactive Primary : ..	-	6	3	9	4	-	-	-
Men ..	2	-	-	-	-	-	-	-
Women	1	-	-	-	-	-	-	-
Boys ..	-	-	-	-	-	-	-	-
Girls ..	-	-	-	-	-	-	-	-
Carried forward ..	22	32	27	48	46	34	26	3
								238

	AGE GROUPS								
	14	15-19	20-24	25-34	35-44	45-54	55-64	65+	Total
Brought forward	22	32	27	48	46	34	26	3	238
Tuberculosis, Inactive, Post-Primary .. Men ..	-	1	6	23	23	26	12	-	91
.. Women ..	-	6	13	31	19	7	2	-	78
Tuberculosis, Active, Primary .. Men ..	-	-	-	-	-	-	-	-	-
.. Women ..	-	1	-	-	-	-	-	-	1
Boys ..	1	-	-	-	-	-	-	-	1
Girls ..	1	-	-	-	-	-	-	-	1
Tuberculosis, Active, Post-primary : Men ..	-	-	3	4	5	6	3	1	22
.. Women ..	-	5	10	4	3	1	1	-	24
Boys ..	-	-	-	-	-	-	-	-	-
Girls ..	1	-	-	-	-	-	-	-	1
Tuberculosis, Pleural Effusion : .. Boys ..	1	-	-	2	-	-	1	-	4
.. Women ..	-	4	-	-	1	-	-	-	5
Unclassified, still Under Observation .. Men ..	-	-	-	-	1	1	1	-	3
.. Women ..	-	-	1	-	-	-	-	-	1
Totals .. Men ..	4	9	17	48	48	57	39	4	226
.. Women ..	5	37	43	64	50	18	7	-	224
Boys ..	8	3	-	-	-	-	-	-	11
Girls ..	9	-	-	-	-	-	-	-	9
Grand Total	26	49	60	112	98	75	46	4	470

SUMMARY :	AGE GROUPS									Total	
	14	15-19	20-24	25-34	35-44	45-54	55-64	65+			
Non-Tuberculous Abnormalities of Chest Men ..	1	5	7	17	17	24	21	3	95	1.15%	
Women	5	15	16	20	23	10	4	—	93	1.05%	
Boys ..	4	3	—	—	—	—	—	—	7	0.83%	
Girls ..	6	—	—	—	—	—	—	—	6	0.7%	
Tuberculosis, Inactive .. Men ..	3	4	7	27	25	26	14	—	106	1.29%	
Women	—	14	16	40	23	7	2	—	102	1.15%	
Boys ..	3	—	—	—	—	—	—	—	3	0.35%	
Girls ..	1	—	—	—	—	—	—	—	1	0.11%	
Tuberculosis, Active .. Men ..	—	—	3	4	5	6	3	1	22	0.26%	
Women	—	8	10	4	4	1	1	—	28	0.31%	
Boys ..	1	—	—	—	—	—	—	—	1	0.11%	
Girls ..	2	—	—	—	—	—	—	—	2	0.23%	
Unclassified, under Observation Men ..	—	—	—	—	1	1	1	—	3	0.03%	
Women	—	—	1	—	—	—	—	—	1	0.01%	
	26	49	60	112	98	75	46	4	470	2.5%	

CIVIL DEFENCE

Now that the Second Great War has ended, it would appear desirable to include in this 1945 Report—the year during which both the European and Japanese conflicts were resolved—a short statement on the Civil Defence Casualty Services of Leicester.

Unfortunately, to do real justice to six years of untiring and devoted service would require a much more facile pen than mine and a book as large as the whole of this Report. My remarks will therefore be short.

In my Report for 1938, which was written in the early summer of 1939, in those far-off days when peace was slipping from our grasp and a way of life was disappearing for all time, I outlined, in brief description, the scheme that was then taking its shape and which was destined in the troublous years ahead to play no small part in the service of Leicester.

The organisation remained throughout the war years much the same as formed in 1938 and 1939. There were, however, certain major alterations that should be mentioned.

First Aid Posts. The ten main First Aid Posts remained the backbone of the City's casualty services, but Bond Street Post was replaced by first-class premises at St. Margaret's Works, Thames Street, and Swain Street Post by Telephone House and Chester Street Posts. In addition, a Point was established at Humberstone and Marriott Road Post transferred to more commodious premises at Southfields Drive.

First Aid Party Depots. In the early years of the war these were housed in 16 rather makeshift buildings, but gradually a policy of removal to the periphery took place and the more permanent Depots of Rushey Fields, Western Park, Humberstone and Aylestone housed the vast majority of the personnel and vehicles. Crusaders' Hall, Trinity Methodist and Abbey Park continued to house volunteer squads to the end.

Gas Cleansing Stations. No mention of these is made in my 1938 Report, but they were established, to the number of 59 or so, mainly in schools and similar buildings. The staff, specially trained for their duties, were affiliated with a parent Post.

In addition, six mobile gas cleansing units, mounted on lorries, were supplied ready to move either to a prearranged site or to relieve some particularly burdened area.

Personnel. At the time of mobilisation in the latter part of August, 1939, there was a magnificent response by personnel, both entirely voluntary and paid, and large numbers of part-time and whole-time workers were recruited and trained. By the end of 1939, however, during the "phoney war," as it was called, owing to the urgent necessity for conserving the nation's manpower and for other reasons, reliance came to be placed more and more on part-time volunteers who could report on an emergency and who, with a stiffening of whole-time personnel, working on a shift basis, could reasonably be expected to serve the City. Experience proved that this policy was correct for never was the service really extended. Of course, had Leicester suffered the fate of other more bombed cities, it might have been a different matter.

Miscellaneous. In recalling to one's mind the multitude of pictures of various aspects of the service that have indelibly impressed themselves on the memory, perhaps one of the clearest is of those early days of mobilisation and of the amazing keenness with which everyone did his or her bit. It is impossible to do more than mention one or two points :

Apart from the official Service, a happy arrangement was made with firms possessing suitable vans which could be used as auxiliary ambulances. To the end of the war, some of these vehicles and their devoted personnel turned up regularly for duty. Then there was the scheme for assistance from firms which had their own first aid squads, and the mutual assistance scheme whereby Leicester, at the request of Region, was to help a more pressed area. The ambulance train decanting scheme was formulated under the control of Region and Group Office and did excellent service, too ! Exercises, many of them most realistic with proper "faking" of casualties to resemble the real thing, kept the interest alive and helped to produce the necessary feeling of keenness in a service which was by its very nature subject to many periods of inactivity.

Operational. In all, there were eight raids on the City but, in addition to these, on three occasions casualties from nearby incidents in the County area were treated by our First Aid Posts. (See Table C.D.1.)

21st August, 1940. The first test came just after 10 o'clock in the morning of the 21st August, 1940, when a stick of bombs fell on Cavendish Road. Thirty-one casualties were caused, six of them fatal. Of these, 16 were treated at the Granby Halls Post (12), Broughton Road Post (3) and St. John's Post (1), of whom seven were taken on to the Royal Infirmary, which, with nine taken direct to hospital, made a total of sixteen treated in hospital.

Probably the chief lessons learnt by the service from this incident were the need for better incident control and not to send too many services.

28th August, 1940. Just a week later, on the 28th August, 1940, two slight casualties were treated at Cossington Street Post from an incident at Queniborough.

14th September, 1940. On the 14th September, 1940, the next stick of bombs fell, this time on the St. Ives Road area. Four persons were killed and five other casualties were caused, two of them serious.

14th November, 1940. The first large raid on the City of Coventry took place on the night of the 14th-15th November, 1940, and one bomber missing its mark, dropped a stick of bombs on the western part of Leicester—the Latimer Street incident. Here again, two fatal casualties were caused, two persons seriously injured and eight others slightly injured.

19th November, 1940. The main test of the City came on the 19th-20th November, 1940.

In this raid, when incidents occurred practically all over the City except for the western area, 324 casualties were caused, 111 of them being fatal. Forty-one casualties were classed as serious and 172 slight.

The First Aid Posts treated 203 casualties, transferring 60 to hospitals, which themselves dealt with, in addition, 24 further cases. Ninety-seven bodies were taken direct to the mortuary.

From the point of view of the Service, the following are the main matters of interest :

- (a) When the first incendiary bombs fell on the City, an exercise was in progress in Main Control. The exercise merged almost without comment into the real thing.
- (b) Within the first half hour of the raid, our only real mortuary, the Crumbie Stand, was on fire and had to be abandoned, alternative accommodation being provided at Aylestone Baths.
- (c) One of the Mobile Posts which had been sent to assist in the Highfield area, following the bombing of the Saxby Street Aiding Depot, was itself hit and burnt out. Very fortunately the personnel were practically entirely uninjured and with much courage continued their duties, first in an adjoining shelter and then at Swain Street Post.

For their share in this, Dr. Garrett, Medical Officer-in-Charge, and Miss Wells "were mentioned in dispatches."

- (d) The procedure whereby casualty service party organisers were sent out to incidents from Main Control was tried out for the first time and found most satisfactory.
- (e) Practically all the First Aid Posts and both Mobile Posts were in action and fully justified the confidence that had been placed in them. The work done was truly magnificent.
- (f) The system whereby medical officers were sent out to incidents to help first aid parties was also an unqualified success.
- (g) Headquarters staff, both at Main Control during the raid and afterwards at the duty of compiling lists of casualties—a very difficult task, for speed and the utmost accuracy (a rare combination) were both essential—worked most satisfactorily and without respite.
- (h) Mortuary personnel at their truly heartbreaking task, carried out their duties in an exemplary manner. The transfer of the mortuary from Crumbie Stand to Aylestone Baths was accomplished in a matter of minutes.
- (i) In addition to those names already given, Mr. L. Lee was "mentioned in despatches" for his services on this occasion.

20th November, 1940. The next night, two parachute mines fell on the City—one fortunately demolishing the pavilion on Victoria Park, but unfortunately causing a few slight casualties in doing so, and the other falling on business premises in Temple Road.

A total of 20 casualties was caused, two serious and none fatal.

9th April, 1941. Following this rather intense period, there was a lull of about five months, the next raid, a stick of bombs, falling on Ash Street and neighbourhood. Five casualties (one serious) were caused, all of them being treated at Spence Street Post and three being sent on to the City General Hospital. No fatality occurred.

16th May, 1941. The next raid occurred on the night of the 16th-17th May, 1941, when Cort Crescent Post had a lucky escape, one of a stick of bombs falling just outside the Post, another demolishing a house in Webster Road. Here one fatality occurred (although a person sleeping in the same bed was practically uninjured) and six slight casualties. Five of these were treated at Cort Crescent Post, one being sent direct to hospital and one from the Post to hospital.

TABLE C.D.1
ANALYSIS OF GRADE OF INJURY, SEX AND AGE GROUPS

Date of Raid	Killed			Seriously Injured			Slightly Injured			Totals			Totals
	M.	F.	Under 16	M.	F.	Under 16	M.	F.	Under 16	M.	F.	Under 16	
21.8.40	1	4	1	2	2	3	3	9	6	6	15	10	31
28.8.40 (County)	-	-	-	-	-	-	2	-	-	2	-	-	2
14.9.40	2	2	-	1	1	-	-	1	2	3	4	2	9
1.11.40 (County)	-	-	-	-	-	-	1	1	-	1	1	-	2
14.11.40/ 15.11.40	-	2	-	-	2	-	5	3	-	5	7	-	12
19.11.40/ 20.11.40	41	52	18	20	20	1	85	74	13	146	146	32	324
20.11.40/ 21.11.40	-	-	-	2	-	-	6	9	3	8	9	3	20
9.4.41	-	-	-	1	-	-	3	1	-	4	1	-	5
16.5.41/ 17.5.41	-	1	-	-	-	-	3	2	1	3	3	1	7
9.7.41 (County)	-	-	-	-	-	-	1	-	-	1	-	-	1
14.7.41	-	1	-	1	-	-	4	3	-	5	4	-	9
Various dates	1	-	-	-	-	-	4	3	-	5	3	-	8
	(casualties not directly due to enemy action)												
Totals	45 (126)	62	19	27	25 (56)	4	117	106 (248)	25	189	193	48	430

Total Killed 126

Total Injured 304

430

14th July, 1941. The last raid on the City occurred on the 14th July, 1941, when a stick of bombs obviously aimed at the L.M.S. Station fell on adjoining house property. One person was killed and eight others injured, one of them seriously. Of the eight, five were treated at First Aid Posts and three at hospitals. •

The attached Tables, C.D.1, C.D.2 and C.D.3 give an analysis of the various raids, degree of injury, sex and age of the injured and the part played by the First Aid Posts and Hospitals.

Welfare Work. Apart from the organisation required to deal with casualties occurring from actual air raids, the problem of welfare in all its branches occupied a major place in the City's war activities.

The first experience, apart from a few elderly and infirm persons in the early summer of 1940, Leicester had of evacuees was in the late summer of that year, when a party of Londoners, many of them hop-pickers, were dealt with. Detailed reception arrangements, including medical examination and bathing facilities—for many of the evacuees came direct from the hop fields—were made, and the difficult task of billeting proceeded satisfactorily.

Hostels for unbilletable cases, e.g., enuretics, cases of scabies, and problem children, were opened and staffed by volunteers, to whom, and especially to Miss M. Walker, Commandant, British Red Cross Society, my greatest thanks are due.

In 1944, during the flying bomb period, Leicester also received very large numbers of evacuees, earning the proud distinction of No. 1 Reception Area.

To deal with casualties occurring in raids, an elaborate organisation of Rest Centres was developed, and proved of the greatest service, not, fortunately, for its original purpose, but in connection with evacuation.

Summary. I realise that the above summary of Civil Defence activities from the Casualty Services aspect does scant justice to a service that deserves the highest possible praise and a wealth of description that is far beyond my powers.

It is impossible to single out individuals for special mention where all merit the deepest gratitude.

Medical Officers, First Aid Officers, Volunteers and Whole-timers at the Posts and Depots, Main Control and Mortuary Staffs, the Rest

TABLE C.D.2

ANALYSIS OF FIRST AID POSTS, HOSPITALS AND MORTUARIES

	21.8.40	28.8.40 (County)	14.9.40	1.11.40 (County)	14/15.11.40	19/20.11.40	20/21.11.40	9.4.41	16/17.5.41	9.7.41 (County)	14.7.41	Not directly due to enemy action. Various dates	TOTALS
Bond Street	-	-	-	-	-	26	-	-	-	-	-	-	26
Bond Street Mobile..	-	-	-	-	-	4	-	-	-	-	-	-	4
Broughton Road ..	3	-	-	-	-	-	-	-	-	-	-	1	4
Chester Street Point..	-	-	-	-	-	-	-	-	-	-	-	-	-
Cort Crescent	-	-	-	-	-	4	-	-	5	-	-	-	9
Cossington Street ..	-	2	-	-	-	26	-	-	-	-	-	-	28
Evington Village ..	-	-	-	-	-	-	1	-	-	-	-	-	1
Granby Halls	12	-	-	-	7	35	8	-	-	-	-	-	62
Holy Apostles	-	-	-	-	-	1	-	-	-	-	-	-	1
Humberstone Point..	-	-	-	-	-	-	-	-	-	-	-	-	-
Marriott Road	-	-	-	-	-	-	-	-	-	-	-	-	-
St. John's	1	-	-	-	-	26	-	-	-	-	-	2	29
St. Margaret's	-	-	-	-	-	-	-	-	-	-	1	-	1
St. Philip's	-	-	5	-	-	38	7	-	-	-	1	2	53
Southfields Drive ..	-	-	-	-	-	-	-	-	-	1	-	-	1
Spence Street	-	-	-	-	1	8	1	5	-	-	-	-	15
Spence Street Mobile	-	-	-	-	-	-	-	-	-	-	-	-	-
Swain Street.. ..	-	-	-	-	-	34	1	-	-	-	3	2	40
Telephone House ..	-	-	-	-	-	-	-	-	-	-	-	-	-
City General Hospital	-	-	5	-	-	36	-	3	1	-	-	-	45
Royal Infirmary ..	16	2	-	2	5	48	5	-	1	1	3	2	85
Aylestone Baths Mortuary	-	-	-	-	-	94	-	-	1	-	-	-	95
Crumbie Stand Mortuary	6	-	4	-	1	-	-	-	-	-	1	1	13
Police Mortuary ..	-	-	-	-	-	3	-	-	-	-	-	-	3
Body not found ..	-	-	-	-	-	1	-	-	-	-	-	-	1
Totals	38	4	14	2	14	384	23	8	8	2	9	10	516

The above figures should not be taken as the total number of casualties as some casualties were treated at a First Aid Post *and* a Hospital and are, therefore, duplicated.

Centre and Sick Bay, and Hostel personnel, and last but not least the administrative staff of 24 Halford Street, all worked as a team and without any regard for personal convenience.

War may be, and is, a horrible thing, but just as it brings out the worst in some people, so also it brings out the best in a large number of other people. The spirit of self-sacrifice and comradeship that were such obvious features of the City's Casualty Service will not be forgotten.

Health Propaganda

One of the main functions of a Health Department is to teach the people the healthy way of life. There is a risk that Health Officers may get too immersed in the day-to-day problems of administering a large and important City service and may forget this prime function of education. A City can provide the most excellent services, but unless they are used and used intelligently, they may as well not be provided. Health is such a personal matter too, a problem for the individual. Health must be cultivated, must be won and is not to be found haphazard.

The first requirement is a healthy stock which is one of the reasons why our services concentrate on the very young, but the way of health must be taught and it is therefore the responsibility of the Health Authority to include in its programme an adequate amount of propaganda—an ugly word; perhaps "health culture" would be better?

With this end in view we held in the spring of 1945 a four-week Health Exhibition.

The period was divided into four parts, giving a week each to the Maternity and Child Welfare Service, the School Medical Service, the Hospitals and, finally, a miscellaneous week, featuring the Public Analyst's, Sanitary Inspection and Water Departments, among others.

The main features of the displays were window demonstrations at the Municipal Buildings, Charles Street (through the courtesy of the Electricity and Estate Departments), 24 Halford Street (by kind permission of the Civil Defence Committee) and at the Museum. These attracted very large numbers of people and if the interest they aroused is any evidence of the information gained, they will have done much good.

The Electricity Theatre staged practically continuous film shows and lecturettes, and there was considerable publicity in press, local transport and through the churches and cinemas.

TABLE C.D.3
ANALYSIS OF PATIENTS TREATED AT FIRST AID POSTS,
HOSPITALS AND MORTUARIES

Date of Raid	Treated at First Aid Post	Treated at First Aid Post and Hospital	Treated at Hospital	Taken to Mortuary	Body not Found	Totals
21.8.1940 ..	9	7	9	6	—	31
28.8.1940 .. (County)	—	2	—	—	—	2
14.9.1940 ..	—	5	—	4	—	9
1.11.1940 .. (County)	—	—	2	—	—	2
14.11.1940/.. 15.11.1940	6	2	2	2	—	12
19.11.1940/.. 20.11.1940	142	60	24	97	1	324
20.11.1940/.. 21.11.1940	15	3	2	—	—	20
9.4.1941 ..	2	3	—	—	—	5
16.5.1941/.. 17.5.1941 ..	4	1	1	1	—	7
9.7.1941 .. (County)	—	1	—	—	—	1
14.7.1941 ..	5	—	3	1	—	9
Various dates Casualties not directly due to enemy action	5	2	—	1	—	8
Totals ..	188 (274)	86 (129)	43 ()	112	1	430

The Central Council for Health Education was of the greatest help in providing equipment and propaganda materials, and the Domestic Science College staged most interesting exhibits at Halford Street.

My thanks are due to all, to the Lord Mayor, who performed the Opening Ceremony at a special meeting in the Co-operative Hall, Belgrave Gate, to the various Committees and Officers who assisted us in so many ways, to the Ministry of Information and the Central Council for Health Education, to local clergy and cinemas and not least to the staff of the Health and allied Departments who worked so well.

SECTION C.

Sanitary Circumstances of the Area

Water Supplies

I am indebted to the courtesy of the Water Engineer and Manager (Mr. T. S. Griffin, M.Inst.C.E.) for the following information relative to the water supplies :

- (i) The supply of water in the statutory water area of the Leicester City Corporation has been satisfactory during the year 1945, both as regards (a) quality, (b) quantity.
- (ii) The following are the number of samples from the Local Reservoirs, submitted for bacteriological examination to the City Analyst during 1945 :

<i>Cropton Reservoir</i>	12	samples of filtered water only.
	10	„ chlorinated water.
<i>Swithland Reservoir</i>	13	„ filtered water only.
	13	„ chlorinated water.
<i>Thornton Reservoir</i>	14	„ filtered water only.
	14	„ chlorinated water.

All the chlorinated samples were passed as satisfactory and the filtered samples as satisfactory, subject to adequate chloramination.

Apart from the above, samples of water for both chemical and bacteriological examination have been taken at random from various points within the area regularly during the year, both by officers of the Health Department and the Water Department. All samples have been passed as satisfactory for drinking purposes.

- (iii) The raw water from the Derwent Valley, being a soft moorland water, is liable to cause plumbo-solvency, but a continuous

treatment by the addition of lime has been carried out by the Derwent Valley Water Board under Section 58 of the Derwent Valley Water Board Act, 1899, as an obligation, and similar treatment has also been carried out by the Leicester Corporation. One sample from each source has been specially examined for plumbo-solvency, but in each case no lead whatever was found. Apart from these special samples no lead has been found in any sample submitted to the City Analyst and no report has been received of any contamination due to this cause.

(iv) Any suspected form of contamination has been investigated by the City Analyst and the necessary action taken by the Water Engineer.

(v) The number of houses in the Authorized Water Area of the Leicester Corporation with a piped water supply is approximately 110,240. Of this number, approximately :

(a) 108,240 are supplied direct to the house.

(b) Approximately 2,000 are supplied by taps in yards, etc. The population supplied at the present time is estimated to be 382,000 and apportioning this figure between the number of houses supplied direct and from taps in yards, it may be estimated that approximately 375,000 persons receive a supply direct to the house and 7,000 people receive a supply from taps in yards.

No standpipes are allowed in the Water Area of the Corporation.

(vi) Leicester is affording an adequate supply of high quality soft water both in and beyond the authorised area of supply and, as further demands will undoubtedly be made on the Water Undertaking due to new housing and rehousing, together with the anticipated increase in domestic consumption, also by reason of requests for bulk supplies from authorities in the County, the Corporation are taking steps to seek a new source of supply in the Manifold Valley, the water from which source will be soft and of a high standard of purity similar to that which is now being obtained from the Derwent Valley. It is the avowed intention of the Water Committee to ensure that Leicester shall always have sufficient water resources to enable the Corporation to give a full supply throughout the 24 hours of the day, no matter what drought conditions may occur.

SECTION D.

HOUSING

The year 1945 showed a slight stirring among the dry bones of the housing enterprise. I have already commented, in previous reports, on the serious dysgenic effects of the war on the provision of new houses, and further comment is perhaps needless.

It is therefore all the more satisfactory to be able to report some evidence, even though it is at present very slight, that there is to be a renewal of housing activities.

During the year under review the Corporation erected 28 temporary houses, all of the pre-fabricated type, and all in Hughenden Drive.

Private enterprise completed seven ordinary houses in the same period.

Those who have not been inside one of the Hughenden Drive "pre-fabs." will probably think they are ugly and uninspiring, and so they are, from the outside. But, in my opinion, the inside of the house, and particularly the kitchen and bathroom equipment, is an entirely different matter.

For a small family of, say, four persons—father, mother and two children—a "pre-fab." of this type must be simply heaven after several years in rooms or lodgings with nowhere to call their own. To the housewife the kitchen arrangements must be simply marvellous.

In the past, too little thought has been given to the amenities of the house, to the installation of labour-saving devices, to the provision of adequate heating. It is therefore very satisfactory to know that all these matters, so important to the family which has to occupy the house, have received considerable attention.

There is one very important Public Health problem which is still not getting, in my opinion, the attention that it deserves—I refer to district heating.

Everyone who really knows anything about district heating agrees that it is a good thing, and yet we are still awaiting concrete plans for its provision in our new housing estates. Apparently the main difficulty is the heavy initial cost, but after the enormous sums of money that were spent during the war, it is not easy to take such an objection very seriously. The provision of adequate domestic hot water supply and central heating, the removal of a certain number of domestic chimneys which would otherwise add their quota of smoke to our atmosphere, the better utilisation of the coal stocks that remain to us, are not matters that can be disregarded lightly.

Slum Clearance

Three houses were demolished during the year. With the present extreme shortage of houses it is obviously impossible to proceed with the slum clearance scheme. The main activity of the Department has been to bolster up reparable property (and some irreparable, too) so as to keep as much property as possible in a reasonable state of repair.

Table 4 shows what has been done.

TABLE 4.
HOUSING STATISTICS

For year ended 31st December, 1945.

1.—Unfit Dwelling Houses—Inspection.

(1) (a) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	7395
(b) Number of inspections made for the purpose	11382
(2) (a) Number of dwelling houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	88
(b) Number of inspections made for the purpose	1528
(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ..	Nil.
(4) Number of dwelling houses (exclusive of those referred to under the preceding sub-heading) found to be not in all respects reasonably fit for human habitation	1746

2.—Remedy of Defects without Service of Formal Notices.

Number of defective dwelling houses rendered fit in consequence of informal action by Local Authority or their officers	1307
---	------

3.—Action under Statutory Powers.

A—Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936 :

(1) Number of dwelling houses in respect of which notices were served requiring repairs	16
(2) Number of dwelling houses which were rendered fit after service of formal notices :	
(a) By owners	2
(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	9
(2) Number of dwelling houses in which defects were remedied after service of formal notices :	
(a) By owners	2
(b) By Local Authority in default of owners	Nil.

C—Proceedings under Sections 11 and 13 of the Housing Act, 1936 :

(1) Number of dwelling houses in respect of which Demolition Orders were made	Nil.
(2) Number of dwelling houses demolished in pursuance of Demolition Orders	Nil.

D—Proceedings under Section 12 of the Housing Act, 1936 :

(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	Nil.
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	Nil.

TABLE 5.

Statement shewing Inhabited Houses at 1st January, 1946, together with information shewing how the figures are made up.

Ward Number	No. of Houses in Ward at 1st Jan., 1945	Houses Demolished during 1945	New Houses Built during 1945	Total No. of Houses at 1st Jan., 1946	Empty Houses at 1st Jan., 1946	No. of Un- inhabitable Houses at 1st Jan., 1946	Inhabited Houses at 1st Jan., 1946
No. 1 or St. Margaret's Ward	5,701	7	—	5,694	9	119	5,566
" 2 " Latimer Ward ..	5,464	5	—	5,459	1	8	5,450
" 3 " Charnwood Ward ..	4,846	—	—	4,846	7	8	4,831
" 4 " Spinney Hill Ward ..	5,090	—	—	5,090	5	3	5,082
" 5 " Wycliffe Ward ..	4,535	1	—	4,534	15	34	4,485
" 6 " The Castle Ward ..	4,258	4	—	4,254	11	49	4,194
" 7 " Westcotes Ward ..	6,631	—	—	6,631	13	9	6,609
" 8 " Newton Ward ..	3,085	—	—	3,085	6	2	3,077
" 9 " The Abbey Ward ..	4,534	—	—	4,534	1	4	4,529
" 10 " Belgrave Ward ..	6,115	—	1	6,116	7	18	6,091
" 11 " Humberstone Ward..	4,897	—	—	4,897	10	3	4,884
" 12 " Evington Ward ..	3,482	—	—	3,482	7	1	3,474
" 13 " Knighton Ward ..	5,627	—	—	5,627	25	4	5,598
" 14 " De Montfort Ward ..	5,269	—	2	5,271	4	—	5,267
" 15 " Aylestone Ward ..	5,049	—	30	5,079	18	2	5,059
" 16 " N. Braunstone Ward	4,969	—	—	4,969	1	—	4,968
	79,552	17	33	79,568	140	264	79,164

NOTE.—Uninhabitable Houses are those which have been empty for some time and which will not be re-let, but for which assessments still appear in the Valuation List.

APPENDIX I.

Report on the Tuberculosis Dispensary for 1945

By

A. SCOTT, M.A., B.Sc., M.B., Ch.B.

FOREWORD BY THE MEDICAL OFFICER OF HEALTH

The year 1945 saw a major change in the work of the Tuberculosis Dispensary of Leicester. Dr. W. S. Thomson retired and Dr. A. Scott took over his duties. We welcome Dr. Scott and wish him many years of happy service in Leicester. I have referred to Dr. Thomson's retirement in my last Report.

Dr. Scott's first report is well worth study, for it is written, in a way, with the eye of a critical newcomer and therefore his satisfactory appraisal of the Service is all the more helpful and pleasing.

The number of deaths during 1945 was a low record and yet, reference to Dr. Scott's last paragraph indicates clearly that we cannot repose on our laurels (such as they are!), and that if tuberculosis, Captain of the Men of Death, is not to rise, Phoenix-like, from the ashes, constant vigilance is needed.

Report on the Tuberculosis Dispensary for 1945

by

A. SCOTT, M.A., B.Sc., M.B., Ch.B.

Premises : No change.

Staff : Dr. A. Scott succeeded Dr. W. S. Thomson in September, 1945.

Number of Cases of Tuberculosis in the City (31st Dec., 1945).

PULMONARY.		NON-PULMONARY.		TOTAL CASES
Males	Females	Males	Females	
880	707	209	215	2,011

New Cases notified during 1945

Four hundred and fifteen new cases of Tuberculosis were notified in 1945, as compared with 444 in 1944—a total decrease of 29. The pulmonary cases decreased by 37 (355, as compared with 392), but the non-pulmonary increased by eight (60, as compared with 52). Included in the 415 cases are 50 (48 men and two women) who have been discharged from the services on account of Tuberculosis (49 pulmonary and one non-pulmonary).

The following table gives the number of new cases since 1918 :

1918	....	Pulmonary, 746 ;	Non-pulmonary, 82 ;	Total, 828
1919	....	„ 658 ;	„ 47 ;	„ 705
1920	....	„ 572 ;	„ 59 ;	„ 631
1921	....	„ 497 ;	„ 105 ;	„ 602
1922	....	„ 566 ;	„ 43 ;	„ 609
1923	....	„ 692 ;	„ 71 ;	„ 763
1924	....	„ 725 ;	„ 65 ;	„ 790
1925	....	„ 606 ;	„ 77 ;	„ 683
1926	....	„ 650 ;	„ 77 ;	„ 727
1927	....	„ 700 ;	„ 80 ;	„ 780
1928	....	„ 668 ;	„ 117 ;	„ 785

NEW CASES SINCE 1918—continued

1929	....	Pulmonary, 657 ;	Non-Pulmonary 77 ;	Total 734
1930	....	582 ;	66 ;	648
1931	....	511 ;	61 ;	572
1932	....	442 ;	69 ;	511
1933	....	438 ;	74 ;	512
1934	....	331 ;	72 ;	403
*1935	...	460 ;	100 ;	560
1936	....	355 ;	79 ;	434
1937	....	345 ;	88 ;	433
1938	....	310 ;	84 ;	394
1939	....	299 ;	84 ;	383
1940	....	343 ;	101 ;	444
1941	....	390 ;	75 ;	465
1942	....	365 ;	85 ;	450
1943	....	359 ;	93 ;	452
1944	....	392 ;	52 ;	444
1945	....	355 ;	60 ;	415

*City Boundary extended and population increased by 20,000. The figure given for 1935 included 139 pulmonary and 23 non-pulmonary taken over from the County.

The following table gives the sex and age periods of those notified during 1945 :

Age Periods	0-1	1-5	5-10	10-15	15-20	20-25	25-35	35-45	45-55	55-65	65 & up.	Total
Pulmonary												
Males ..	1	5	5	4	11	28	48	36	29	22	10	199
Females ..	1	2	1	7	27	38	42	19	13	5	1	156
Non-pulmonary												
Males ..	1	3	4	2	4	2	7	2	4	1	1	31
Females ..	—	2	5	1	2	5	3	3	5	1	2	29

The following table gives the number of young adults notified in the age periods 15-19 and 20-24 during the past six years :

Pulmonary Tuberculosis in Young Adults (Notifications) (15-24) during the past 6 years												
Ages.	1940		1941		1942		1943		1944		1945	
	15-19	20-24	15-19	20-24	15-19	20-24	15-19	20-24	15-19	20-24	15-19	20-24
Males	17	20	27	24	31	24	15	23	12	35	11	28
Females	28	25	33	32	29	37	28	32	32	36	27	38
Total	45	45	60	56	60	61	43	55	44	71	38	66
Total bothsexes	90		116		121		98		115		104	

This table shows that for the year 1945 there has been a decrease of 11 young adults notified, as compared with 1944, but is six more than in 1943.

DEATHS

Deaths due to Pulmonary Tuberculosis 153

Deaths due to Non-pulmonary Tuberculosis 30

The figure of 183 for the total deaths for 1945 is the lowest ever recorded and is a reduction of 11 on the preceding year, the previous lowest. The figure is 12 less than in 1938—the last pre-war year. The pulmonary deaths (153) are 21 less than in 1944. The non-pulmonary deaths (30) are 10 more than in 1944.

Place of death :

City General Hospital. 9

Groby Road Sanatorium 69

Other institutions 16

In patients' own homes 89

183

Pulmonary Tuberculosis in Young Adults (Notification)		(15-24) during the past 6 years					
		1940		1941		1942	
		1943		1944		1945	
		1946		1947		1948	
		1949		1950		1951	
		1952		1953		1954	
		1955		1956		1957	
		1958		1959		1960	
		1961		1962		1963	
		1964		1965		1966	
		1967		1968		1969	
		1970		1971		1972	
		1973		1974		1975	
		1976		1977		1978	
		1979		1980		1981	
		1982		1983		1984	
		1985		1986		1987	
		1988		1989		1990	
		1991		1992		1993	
		1994		1995		1996	
		1997		1998		1999	
		2000		2001		2002	
		2003		2004		2005	
		2006		2007		2008	
		2009		2010		2011	
		2012		2013		2014	
		2015		2016		2017	
		2018		2019		2020	
		2021		2022		2023	
		2024		2025		2026	
		2027		2028		2029	
		2030		2031		2032	
		2033		2034		2035	
		2036		2037		2038	
		2039		2040		2041	
		2042		2043		2044	
		2045		2046		2047	
		2048		2049		2050	
		2051		2052		2053	
		2054		2055		2056	
		2057		2058		2059	
		2060		2061		2062	
		2063		2064		2065	
		2066		2067		2068	
		2069		2070		2071	
		2072		2073		2074	
		2075		2076		2077	
		2078		2079		2080	
		2081		2082		2083	
		2084		2085		2086	
		2087		2088		2089	
		2090		2091		2092	
		2093		2094		2095	
		2096		2097		2098	
		2099		2100		2101	
		2102		2103		2104	
		2105		2106		2107	
		2108		2109		2110	
		2111		2112		2113	
		2114		2115		2116	
		2117		2118		2119	
		2120		2121		2122	
		2123		2124		2125	
		2126		2127		2128	
		2129		2130		2131	
		2132		2133		2134	
		2135		2136		2137	
		2138		2139		2140	
		2141		2142		2143	
		2144		2145		2146	
		2147		2148		2149	
		2150		2151		2152	
		2153		2154		2155	
		2156		2157		2158	
		2159		2160		2161	
		2162		2163		2164	
		2165		2166		2167	
		2168		2169		2170	
		2171		2172		2173	
		2174		2175		2176	
		2177		2178		2179	
		2180		2181		2182	
		2183		2184		2185	
		2186		2187		2188	
		2189		2190		2191	
		2192		2193		2194	
		2195		2196		2197	
		2198		2199		2200	
		2201		2202		2203	
		2204		2205		2206	
		2207		2208		2209	
		2210		2211		2212	
		2213		2214		2215	
		2216		2217		2218	
		2219		2220		2221	
		2222		2223		2224	
		2225		2226		2227	
		2228		2229		2230	
		2231		2232		2233	
		2234		2235		2236	
		2237		2238		2239	
		2240		2241		2242	
		2243		2244		2245	
		2246		2247		2248	
		2249		2250		2251	
		2252		2253		2254	
		2255		2256		2257	
		2258		2259		2260	
		2261		2262		2263	
		2264		2265		2266	
		2267		2268		2269	
		2270		2271		2272	
		2273		2274		2275	
		2276		2277		2278	
		2279		2280		2281	
		2282		2283		2284	
		2285		2286		2287	
		2288		2289		2290	
		2291		2292		2293	
		2294		2295		2296	
		2297		2298		2299	
		2300		2301		2302	
		2303		2304		2305	
		2306		2307		2308	
		2309		2310		2311	
		2312		2313		2314	
		2315		2316		2317	
		2318		2319		2320	
		2321		2322		2323	
		2324		2325		2326	
		2327		2328		2329	
		2330		2331		2332	
		2333		2334		2335	
		2336		2337		2338	
		2339		2340		2341	
		2342		2343		2344	
		2345		2346		2347	
		2348		2349		2350	
		2351		2352		2353	
		2354		2355		2356	
		2357		2358		2359	
		2360		2361		2362	
		2363		2364		2365	
		2366		2367		2368	
		2369		2370		2371	
		2372		2373		2374	
		2375		2376		2377	
		2378		2379		2380	
		2381		2382		2383	
		2384		2385		2386	
		2387		2388		2389	
		2390		2391		2392	
		2393		2394		2395	
		2396		2397		2398	
		2399		2400		2401	
		2402		2403		2404	
		2405		2406		2407	
		2408		2409		2410	
		2411		2412		2413	
		2414		2415		2416	
		2417		2418		2419	
		2420		2421		2422	
		2423		2424		2425	
		2426		2427		2428	
		2429		2430		2431	
		2432		2433		2434	
		2435		2436		2437	
		2438		2439		2440	
		2441		2442		2443	
		2444		2445		2446	
		2447		2448		2449	
		2450		2451		2452	
		2453		2454		2455	
		2456		2457		2458	
		2459		2460		2461	
		2462		2463		2464	
		2465		2466		2467	
		2468		2469		2470	
		2471		2472		2473	
		2474		2475		2476	
		2477		2478		2479	
		2480		2481		2482	
		2483		2484		2485	
		2486		2487		2488	
		2489		2490		2491	
		2492		2493		2494	
		2495		2496		2497	
		2498		2499		2500	
		2501		2502		2503	
		2504		2505		2506	
		2507		2508		2509	
		2510		2511		2512	
		2513		2514		2515	
		2516		2517		2518	
		2519		2520		2521	
		2522		2523		2524	
		2525		2526		2527	
		2528		2529		2530	
		2531		2532		2533	
		2534		2535		2536	
		2537		2538		2539	
		2540		2541		2542	
		2543		2544		2545	
		2546		2547		2548	
		2549		2550		2551	
		2552		2553		2554	
		2555		2556		2557	
		2558		2559		2560	
		2561		2562		2563	
		2564		2565		2566	
		2567		2568		2569	
		2570		2571		2572	
		2573		2574		2575	
		2576		2577		2578	
		2579		2580		2581	
		2582		2583		2584	
		2585		2586		2587	
		2588		2589		2590	
		2591		2592		2593	
		2594		2595		2596	
		2597		2598		2599	
		2600		2601		2602	
		2603		2604		2605	
		2606		2607		2608	
		2609		2610		2611	
		2612		2613		2614	
		2615		2616		2617	
		2618		2619		2620	
		2621		2622		2623	
		2624		2625		2626	
		2627		2628		2629	
		2630		2631		2632	
		2633		2634		2635	
		2636		2637		2638	
		2639		2640		2641	
		2642		2643		2644	
		2645		2646		2647	
		2648		2649		2650	
		2651		2652		2653	
		2654		2655		2656	
		2657		2658		2659	
		2660		2661		2662	
		2663		2664		2665	
		2666		2667		2668	
		2669		2670		2671	
		2672		2673		2674	
		2675		2676		2677	
		2678		2679		2680	
		2681		2682		2683	
		2684		2685		2686	
		2687		2688		2689	
		2690		2691		2692	
		2693		2694		2695	
		2696		2697		2698	
		2699		2700		2701	
		2702		2703		2704	
		2705		2706		2707	
		2708		2709		2710	
		2711		2712		2713	
		2714		2715		2716	
		2717		2718		2719	
		2720		2721		2722	
		2723		2724		2725	
		2726					

**Number of Deaths from Tubercular Diseases
in Leicester in past years.**

Year.	Phthisis.		Other Tuberculous Diseases.		Total Tuberculous Deaths.	
	Deaths.	Rate per 100,000 Population.	Deaths.	Rate per 100,000 Population.	Deaths.	Rate per 100,000 Population.
(1)	(2)	(3)	(4)	(5)	(6)	(7)
1932	240	100	33	14	273	113
1933	269	111	32	14	301	125
1934	223	92	19	8	242	100
1935	234	91	18	7	252	98
1936	202	77	28	11	230	88
1937	216	82	35	13	251	95
1938	174	66	21	8	195	74
1939	183	70	25	9	208	79
1940	200	77	34	13	234	90
1941	197	74	39	15	236	89
1942	166	64	37	14	203	78
1943	179	70	27	11	206	81
1944	175	68	20	8	195	76
1945	153	60	30	12	183	71

The following Tables give the Age, Sex Distribution and Occupations of those dying from Pulmonary Tuberculosis during 1945 :—

Age and Sex Distribution of Deaths from Phthisis in 1945.

Age Period.	Males.	Females.	Total.
0—1	—	1	1
2—4	—	—	—
5—9	—	—	—
10—14	—	—	—
15—19	—	6	6
20—24	9	13	22
25—34	12	15	27
35—44	20	17	37
45—54	24	7	31
55—64	12	4	16
65 and upwards ..	10	3	13
All ages ..	87	66	153

Occupations of Persons Dying from Phthisis in 1945.

	M.	F.		M.	F.
SHOE TRADE :					
Finishers	2	—	Army Pensioners	—	—
Clickers	2	—	Boxmakers	1	1
Rivettors	—	—	Porters	—	—
Pressmen	1	—	Licensed Victuallers	2	—
Machinists	—	3	Shop Assistants	4	2
Various	8	2	Warehousemen	1	—
			Various	34	2
Total in Shoes ..	13	5	Occupations not stated (includes Married Women, Widows, Children and Per- sons of no occupa- tion)	2	47
*Hosiery Trades ..	7	6			
Labourers	12	—	Grand Total ..	87	66
Clerks	4	1			
Tailoring Trade ..	2	1			
Vanmen	—	—			
Soldiers	—	—			
Engineers	5	1			
Painters	—	—			
Dressmakers	—	1			

* A large number of *married* women are engaged in the Hosiery Trade, but these are not included, for in the case of deaths of married women and widows, only the husband's occupation is registered.

ANALYSIS OF DEATHS.

PULMONARY CASES HAVING HAD INSTITUTIONAL TREATMENT.										
Stage when first examined	Died within one month of notification	Within two months	Within three months	Within six months	Within twelve months	Within 18 months	Within two years	Within three years	Lived three years or over	
T.B. - ve cases 5	1	—	—	—	1	—	—	—	3	
T.B. + ve Stage I. 34 ..	—	—	—	—	2	1	2	6	23	
T.B. + ve Stage II. 70 ..	1	1	3	13	13	10	5	4	20	
T.B. + ve Stage III. 13 ..	3	2	1	2	1	2	—	—	2	
Total 122	5	3	4	15	17	13	7	10	48	

Of the total 122 recorded in this table, 15 were treated at both Groby Road Sanatorium and the City General Hospital, 99 were treated at Groby Road Sanatorium only and eight at the City General Hospital only.

PULMONARY CASES NOT HAVING HAD INSTITUTIONAL TREATMENT.										
Stage when first examined				Died within one month of notification	Within two months	Within three months	Within six months	Within twelve months	Within 18 months	Lived three years or over
T.B. - ve cases.	4	..	..	—	—	1	—	—	1	2
T.B. + ve Stage I.	3	..		—	—	—	—	—	—	2
T.B. + ve Stage II.	6	..		2	2	—	—	1	—	1
T.B. + ve Stage III.	6	..		4	1	1	—	—	—	—
Total	19	..	..	6	3	2	—	1	1	5

PULMONARY CASES NOT EXAMINED AT OR IN CONNECTION WITH THE DISPENSARY.

TOTAL	Died within one month of notification	Within two months	Within three months	Within six months	Within twelve months	Within 18 months	Within two years	Within three years	Lived three years or over
4	4	—	—	—	—	—	—	—	—

These tables account for 145 deaths. In addition, there were eight deaths of patients who had never been notified as suffering from Tuberculosis. This gives a total of 153 pulmonary deaths.

Deaths from Pulmonary Tuberculosis in Children (0-14)
During the past six years.

Ages.	1940			1941			1942			1943			1944			1945		
	-4	-9	-14	-4	-9	-14	-4	-9	-14	-4	-9	-14	-4	-9	-14	-4	-9	-14
Males ..	1	—	—	3	—	1	1	—	1	1	—	—	—	—	1	1	—	—
Females ..	—	—	—	—	1	—	—	—	1	3	—	—	2	—	1	—	—	—
Total ..	1	—	—	3	1	1	1	—	2	4	—	—	2	—	2	—	—	—
Total each year ..	1			5			3			4			4			1		

One death of a male child under four years of age from Pulmonary Tuberculosis has occurred during 1945.

Deaths from Pulmonary Tuberculosis in Young Adults (15-24) during the past six years.

Ages.	1940		1941		1942		1943		1944		1945	
	15-19	20-24	15-19	20-24	15-19	20-24	15-19	20-24	15-19	20-24	15-19	20-24
Males ..	2	7	7	7	6	5	4	6	2	7	1	8
Females ..	9	11	10	12	11	15	3	11	5	11	6	13
Total ..	11	18	17	19	17	20	7	17	7	18	7	21
Total ..	29		36		37		24		25		28	

There have been three more deaths from pulmonary tuberculosis in young adults in 1945 as compared with 1944. One of these young adult deaths was of an ex-serviceman aged 19.

Non-Pulmonary Tuberculosis Deaths.

Bones & Joints	Glands	Renal	Abdominal	Meninges	Miliary	Total
5	—	4	1	15	5	30

Of the 30 non-pulmonary deaths, eight are known to have been in contact with one or more persons suffering from pulmonary tuberculosis. Meningitis is again responsible for the greatest proportion of these deaths.

Deaths from Tuberculous Meningitis in Children (0-14) during the past six years

	1940	1941	1942	1943	1944	1945
Males ..	5	10	6	2	4	3
Females ..	3	11	5	3	4	8
Total ..	8	21	11	5	8	11

Eleven deaths of children occurred from meningitis, which is three more than in 1944.

Recovered Cases

During the past year the names of 166 patients were removed from the register as having "recovered." Of these, 91 were pulmonary and 75 non-pulmonary. Of the pulmonary cases, 23 had at one time been open positive sputum cases.

ANALYSIS OF CASES ON DISPENSARY REGISTER.

DIAGNOSIS	Pulmonary				Non-Pulmonary				Total				Gr'd T'ls.	
	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 ..	170	129	12	12	17	15	6	2	187	144	18	14	363	
(b) Diagnosis not completed ..	—	—	—	—	—	—	—	—	17	16	19	23	75	
(c) Non - Tuberculous ..	—	—	—	—	—	—	—	—	338	469	70	64	941	
B. Contacts examined during the year:—														
(a) Definitely Tuberculous ..	2	5	5	2	—	—	—	—	2	5	5	2	14	
(b) Diagnosis not completed ..	—	—	—	—	—	—	—	—	—	1	9	6	16	
(c) Non - Tuberculous ..	—	—	—	—	—	—	—	—	100	196	70	73	439	
C. Cases written off Dispensary Register:—														
(a) Recovered ..	39	42	6	4	32	22	13	8	71	64	19	12	166	
(b) Non - Tuberculous ..	—	—	—	—	—	—	—	—	520	742	191	189	1642	
D. Number of Cases on Dispensary Register on December 31st:														
(a) Definitely Tuberculous ..	805	625	50	44	144	153	54	52	949	778	104	96	1927	
(b) Diagnosis not completed ..	—	—	—	—	—	—	—	—	17	15	11	17	60	
1. Number of cases on Dispensary Register on January 1st				2,183	2. Number of cases transferred from other areas and cases returned after discharge				35					
3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of" ..				98	4. Cases written off during the year as dead (all causes)				158					
5. Number of attendances at the Dispensary ..				9,815	6. Number of Insured Persons under Domiciliary Treatment on December 31st				54					
7. Number of consultations with medical practitioners. (a) Personal (b) Other				14 898	8. Number of visits by Tuberculosis Officers to homes of patients for the purpose of examination				270					
9. Number of visits by Nurses to homes for Dispensary purposes ..				6,759	10. Number of : (a) Specimens of sputum (b) X-ray examinations made in connection with Dispensary work				1,500 2,934					
11. Number of "recovered" cases restored to the Dispensary Register ..				3	12. Number of "T.B. plus" cases on Dispensary Register on December 31st				832					

Visits

Visits paid by Tuberculosis Officers for purpose of examination						270
Ditto	Dispensary Nurses	..	..	..	..	6,859
Ditto	District Nurses..	..	..	..	..	3,098

Additional Nourishment

Free milk—generally one pint daily—has been granted to necessitous patients whose income falls below a certain scale. During the year, three patients were assisted in this way, at a total cost of £19 9s. 6½d.

Certificates were granted to many cases with active Tuberculosis in order to enable them to obtain an additional allowance of milk for which they were able to pay.

Tuberculosis Allowances

280 cases received grants under the Government Scheme during the year, at a cost of £10,973 4s. 4d.

97 cases received assistance under the Local Scheme during the year, at a cost of £3,546 2s. 9d.

After-Care

After-Care work has been carried on as previously, and a close contact is maintained with every patient as long as his name remains on the Dispensary Register. £13 6s. 8d. has been spent on clothing, dentures, etc., for necessitous patients undergoing institutional treatment.

Tuberculosis Dispensary as the "Centre for Diagnosis"

Notes from 98 doctors requesting an opinion on 912 patients were received and dealt with during the past twelve months. In addition, many patients, not under medical attention, called on their own initiative desiring to know whether they had consumption.

Clinical Examinations :

	<i>Men</i>	<i>Women</i>	<i>Children</i>	<i>Total</i>
First examinations ..	634	818	356	1,808
Re-examinations ..	1,375	1,232	408	3,015
"Contact" Examinations :		1943	1944	1945
Number of "contacts" examined		465	485	469
Number found to be definitely tuberculous		22	14	14

Bacteriological Examinations

Nature of Specimen	Positive	Negative	Total
Specimens of Sputum :			
From Practitioners ..	32	251	283
From Patients examined at the Dispensary ..	306	947	1,253
Specimens other than sputum ..	—	10	10
Total	338	1,208	1,546

Radiological Examinations

1944 1945

Radiological examinations carried out at

Groby Road Sanatorium 3,513 2,934

Attendances

Total number of attendances 9,815

At the outset, in this my first annual report, I should like to pay tribute to my predecessor. When I arrived I found the Dispensary and field work admirably organised with none of the essential features of this type of work omitted. It was obvious that everything had been kept abreast of the times, with the possible exception of rehabilitation. The provision of this has unfortunately not been an obligation on the Local Authorities, and only a few have made any serious attempt to tackle what is now one of the largest problems remaining in tuberculosis work. The Disabled Persons Employment Act opens up new possibilities in this field by making the rehabilitation of all persons, disabled from whatever cause, a national matter.

Naturally, one of the first things I did was to go through the Annual Reports from the beginning of the scheme, particularly when it became obvious that during 1944 and 1945 there had been a drop in the death rate from pulmonary disease to below the pre-war level. The table showing deaths from tuberculosis between the ages of 15 and 24 during the past six years does not show any marked change. A very rapid falling off occurred, however, between the years 1932 and 1939, from 136 in the former year to 26 in the latter. Further investigation revealed that the falls in the deaths generally has been almost entirely in the under 45 age group in the case of men, and in the under 35 group in the case of women. Comparison of the years 1934 and 1935 taken together,

with 1944 and 1945 taken together, shows that in the earlier period 155 men under the age of 45 died, whereas in the later period only 77 died. The corresponding figures for men over the age of 45 are 117 and 110. In the case of women, where the bulk of disease occurs at an earlier age than in men, during the earlier years 116 women under the age of 35 died, whereas in the later years only 66 died, but corresponding figures for women over that age were 69 and 63 respectively.

This is not due to any decrease in the proportion of notifications in the respective age groups, as during the former years 331 men under the age of 45 were notified, whereas in the later years 288 were notified. The corresponding figures for men over the age of 45 were 114 and 127. In the case of women under 35, in the earlier years, 144 were notified, and in the later 133 were notified, corresponding figures over the age of 35 being 155 and 149 respectively. These figures reflect the excellence of the work done at the Tuberculosis Dispensary and at the Isolation Hospital. The commencement of the fall corresponds roughly with the institution of routine use of X-rays in the examination of patients, and also the institution of collapse therapy as a routine measure in treatment. The fact that every new patient is X-rayed seems to have inspired the confidence of general practitioners, so that the number of new cases referred to the Dispensary by doctors is more than twice the number seen ten years ago, the figures in 1935 being 446 and in 1945, 912. This enables us to pick up more cases in the early stages of the disease when they are more likely to be cured, either by conservative treatment or, more often, by collapse therapy. The picking up of symptomless cases by the Mass X-ray Unit should still further improve these figures in future years.

A serious problem still to be tackled, therefore, seems to be the diagnosing of patients in the later age groups at an earlier stage of their illness when they may be still curable by purely conservative treatment—surgical collapse therapy not being often satisfactory over the age of 45 in men and 40 in women. Unfortunately, the disease in the later age groups usually comes on in a more insidious fashion than in the younger ones and is usually past the stage when cure is possible by conservative measures before the patient is referred for diagnosis.

The ideal solution is the compulsory X-ray of all the population of all ages at regular intervals of not more than a year, but as this is not at present practicable, all that can be done is to emphasize the importance of older people coming forward when the opportunity is given to any particular group of individuals to go through the Mass X-ray Unit.

Since I took up duty, the position as far as available beds is concerned has deteriorated markedly and we are now faced with having to keep

highly infectious cases at home—often in over-crowded conditions—patients who have never received the training they get in a Sanatorium as to the best methods of preventing the spread of infection, no advice from the doctors or Health Visitors being likely to instil this so thoroughly as if they had had to carry it out in practice in the Sanatorium. One is afraid that if this state of affairs persists, the incidence of the disease and also, unfortunately, the death rate, are likely to rise again.

A. SCOTT

APPENDIX II.

Report on the Isolation Hospital and Sanatorium for the year 1945

By

J. C. HAMILTON MACKENZIE, M.D.(Glas.), D.P.H.(Lond.),
Medical Superintendent

FOREWORD BY THE MEDICAL OFFICER OF HEALTH

Dr. Mackenzie's report takes the form this year of a review of the work of the hospital during the war years—an interesting record.

Throughout the report, with an increasing tempo, runs the story of nursing and domestic shortage, not unique to this hospital of course, but in its accumulative effect nearly paralysing the work of the hospital.

In spite of this, an enormous volume of good work continues to be done with special concentration on the tuberculous sufferer, and yet even here the waiting-list is assuming alarming proportions.

I would draw special attention to Dr. Mackenzie's remarks on the changing character of the work of the sanatorium. This hospital is no longer a "sanatorium," but more and more is becoming a hospital for chest diseases.

On the infectious diseases side, the reference to the control of hæmolytic streptococcal infections and allied conditions by chemotherapy brings to the fore one of the most amazing advances in medical science that has ever been evolved.

Report on the Isolation Hospital and Sanatorium for the year 1945

By

J. C. HAMILTON MACKENZIE, M.D.(Glas.), D.P.H.(Lond.),
Medical Superintendent

In presenting my report for the year 1945 I take the opportunity of reviewing the work of the hospital during the war years.

From the outbreak of war, the hospital had to submit to the difficulties of rationing, black-out conditions and staff shortage. The black-out struck at the basis of good nursing conditions for fevers and tuberculosis—adversely affecting our treatment and increasing the incidence of staff sickness.

During the war years the Civil Nursing Reserve was vital to the maintenance of the hospital, and the cessation of this body has seriously affected our nursing staff position. Staff shortage is a chronic state in all sanatoria, it is a national concern, and unfortunately a remedy has not yet been found.

Bed Accommodation

1938 The hospital was handicapped by insufficient beds.

1939 A building extension scheme was completed giving bed accommodation as follows :

<i>Fevers :</i>		<i>Tuberculosis :</i>	
	180	Pulmonary (Adults) ..	156
Nursery Cots..	12	„ (Children) ..	26
		Non-pulmonary ..	26
<i>Total Beds</i> ..	388, plus 12 Nursery Cots		

In the latter part of the year, Anstey Lane Hospital was evacuated until satisfactory A.R.P. precautions could be taken.

1940 Due to an epidemic of Scarlet Fever and Diphtheria, the new Assembly Hall had to be converted into a Ward, and by courtesy

of the Committee of the Leicester Frith, the use of two Wards was obtained in that hospital.

1941 Working against a background of nursing and domestic staff shortage, it became necessary to :

- (a) Limit admissions of Scarlet Fever to selected cases.
- (b) Close the wards loaned from Leicester Frith.
- (c) Utilise 26 beds from the Fever side for male pulmonary tuberculosis, due to an increase in waiting list of this disease.

1942 Lack of staff continued to govern bed accommodation. Anstey Lane Hospital (26 beds) was re-opened and staffed with nurses from First Aid Posts : 26 Fever beds (Ward 1) were closed on account of staff shortage.

1943 A further 38 Fever beds had to be closed due to staff shortage, but a slight improvement in the nursing staff position at the end of the year enabled us to allot 26 Fever beds (Ward 4) to Tuberculosis. The waiting list for the latter disease had continued to increase, due to the fact that the Health Committee decided to admit no cases of Pulmonary Tuberculosis to the City General Hospital.

1944 On "D" Day, 40 Tuberculosis beds (Ward XI) were taken over to form a regional E.M.S. Chest Unit and 26 Fever beds (Ward 1) were allotted to Tuberculosis—this operation was made possible by the drafting of nursing staff to the E.M.S. Chest Centre by the Regional Nursing Officer.

1945 A building scheme was commenced to increase Tuberculosis accommodation by 82 beds.

The E.M.S. Chest Unit was closed at the end of the year, and governed by staff shortage, accommodation was re-allocated as follows :

Fevers	..	..	..	..	..	52
Pulmonary Tuberculosis (adults)	..	..	..	..	..	156
Children and Non-Pulmonary Tuberculosis	..	..	..	..	..	52
TOTAL ..						260

Nursing and Domestic Staff

The following Table gives the average Staff figures each year from 1938 to 1945 :

			<i>Nursing Staff</i>		<i>Domestic Staff</i>
1938	..	..	72½	..	52½
1939	..	..	85	..	57½
1940	..	..	86½	..	62½
1941	..	..	100	..	59
1942	..	..	101	..	59½
1943	..	..	109	..	55½
1944	..	..	133	..	64½
1945	..	..	112½	..	63½

The number of staff required to maintain the hospital at capacity, i.e., 388 beds is as follows :

Nursing Staff	..	..	144 minimum
Domestic Staff	..	..	74 „

From the above Table it will be seen that in 1941 when the 48-hour working week came into operation, it was impossible to maintain the hospital at full occupancy, hence the necessity for reducing bed accommodation.

Unfortunately, with the cessation of the Civil Nursing Reserve, the nursing staff position will continue to deteriorate until some national solution is found. Up to the present the solution is not apparent.

In the early years of the war it was anticipated that the sickness incidence in staff would increase, due to the difficult working conditions.

Every possible effort was made to protect our nursing and domestic staff and the following routine was instituted.

- (1) Entrance medical examination with chest X-ray, mantoux test (for tuberculin sensitivity), and schick test (diphtheria immunity test).
- (2) Protection against diphtheria, typhoid fever and smallpox by suitable inoculation.
- (3) Routine chest X-ray at six-monthly intervals, and recheck of mantoux negative reactors at three-monthly intervals.
- (4) Weight records of nursing and domestic staff at monthly intervals.

I record my appreciation of the excellent work which was performed by the staff during the war, and the satisfactory position of the hospital throughout these years was due, in no small part, to the co-operation of the nursing and domestic staff in overcoming innumerable difficulties.

ADMISSION AND DISCHARGE TABLE

Year	Infectious Diseases			Tuberculosis		
	<i>Admitted</i>	<i>Discharged</i>	<i>Died</i>	<i>Admitted</i>	<i>Discharged</i>	<i>Died</i>
1938	1,413	1,377	28	331	245	28
1939	1,432	1,379	41	384	319	43
1940	2,616	2,410	88	375	343	47
1941	1,830	1,900	66	364	257	64
1942	1,275	1,228	44	456	388	45
1943	1,137	1,154	34	476	427	45
1944	1,416	1,299	50	500	442	58
1945	1,209	1,245	35	513	490	59

INFECTIOUS DISEASES

Diphtheria

An epidemic of severe diphtheria commenced in the City in 1937 associated with the "gravis" type of organism. The epidemic reached its peak in 1941 when 799 cases were admitted to hospital, and 662 verified cases discharged.

The highest mortality rate in this decade was recorded in 1940 (7.7 per cent.). The lowest mortality rate ever recorded in this hospital is that of the current year (.97 per cent.).

A glance at the Table showing classification of types of infecting organism clearly demonstrates that there has been a fall of the "gravis" and "intermedius" types, and a relative rise in the "mitis" type ; this alteration in the prevalent type of organism is associated with a decline in the clinical severity of the disease.

Looking to the years ahead, unless active immunisation is actively pursued, an epidemic of the "gravis" type of diphtheria, such as that of 1937, may again commence with equally malignant severity.

The war years brought no change in our treatment of clinical diphtheria. Treatment by antitoxin in the dosage worked out in this hospital in 1928 is still orthodox. Penicillin may be a weapon in combating malignant cases, but sufficient experience has not yet been gained to assess results.

Scarlet Fever

An epidemic of scarlet fever commenced in 1938 and was maintained throughout 1939 ; it reached its highest level in 1940 when 627 cases were discharged.

Since 1941 it has been possible to admit only the severe and complicated cases of scarlet fever, fortunately in recent years the disease has been mild in character.

Chemotherapy by sulpha drugs and penicillin has given us a control of hæmolytic streptococcal infections which approaches the miraculous.

Established scarlet fever must still be treated by antitoxin to relieve toxic symptoms, but complications, particularly sepsis of the middle ear, can be controlled by penicillin.

It is important, therefore, that morbid complications of streptococcal infection should be avoided by the early exhibition of penicillin therapy.

Other Infectious Diseases

Measles and whooping cough were admitted during the war years, unfortunately admissions had to be limited to severe and complicated cases.

The year of highest incidence in measles was 1940, when 219 patients were discharged.

Whooping cough admissions remained fairly stable from 1938 to the present year—an average of 40 cases being discharged each year.

I cannot yet report any specific agent for the control of measles and whooping cough ; in selected cases the use of immune serum may either prevent or attenuate measles, but a suitable vaccine has yet to be elaborated for the prevention of whooping cough.

Unfortunately, these two diseases produce a considerable amount of chest damage in child life. It should be our policy to admit to the Fever Hospital all cases of complicated measles and whooping cough, in order that such damage should be minimised by appropriate treatment. We are fortunate in this hospital in possessing modern facilities for suitable assessment and treatment of all such chest complications.

Various forms of infective meningitis were admitted during the war years. The most outstanding fact was the great increase in meningococcal meningitis in 1940, when 144 cases were discharged. The mortality rate for that year was 12 per cent., a rate which is in sharp contrast to that of 50 per cent., which was a common mortality rate 10 years ago.

The reduction in the mortality rate in meningococcal meningitis is another triumph of chemotherapy. The use of sulpha drugs and

penicillin has given us a measure of control in all infective forms of meningitis except tuberculous.

Enteric infections remained remarkably few throughout the war years. A noteworthy feature was a small epidemic of paratyphoid B due to infected food in 1941.

In recent years Sonne dysentery has been endemic, occasionally reaching mild epidemic proportions.

The Puerperal Fever Unit in the hospital continued to play its important role in the reduction of maternal mortality. The use of chemotherapy has greatly minimised the dangers from infective maternal complications.

The function of the Fever Hospital for the future, when adequate nursing and domestic staff is available, will not only be the admission of all infective conditions for treatment by specific drugs to reduce mortality, but our energies will be concentrated in the prevention of complications which produce so much morbidity in child life.

Tuberculosis

From our experience of the 1914-18 war it was anticipated that there would be an increase in tuberculosis.

An actual increase did occur in the early years of the war, but the tendency was quickly arrested.

The national developments in the combat against tuberculosis have been :

- (1) Mass Radiography, to ascertain the incidence of tuberculosis in industry, to detect early cases, and institute measures to control infection.
- (2) Allowances under Memo No. 37/T to assist the economic state of the tuberculous individual.

The developments in treatment of tuberculosis, and the modern concept of a sanatorium are reflected in the work of this hospital. The noteworthy features may be summarised as follows :

- (1) Increase in the field of surgical measures for the treatment of pulmonary tuberculosis.

The undermentioned Table shows clearly the developments on this side of the hospital work.

	1938	1939	1940	1941	1942	1943	1944	1945
Artificial Pneumothorax, new cases	54	87	57	91	102	91	118	148
Oleo thorax	—	3	—	—	—	—	—	—
Adhesion Section ..	—	20	19	20	28	31	47	65
Phrenic	—	11	15	13	24	25	28	50
Monaldi Operation ..	—	—	—	5	10	12	5	3
Pneumoperitoneum ..	—	—	—	—	—	—	12	10
Thoracoplasty ..	—	3	8	12	20	31	41	24

This hospital was in the fortunate position of having anticipated the field of chest surgery ; the necessary equipment and surgical team had been set up prior to the war, and on account of our experience and facilities, we had the honour of being selected as the Regional E.M.S. Chest Centre from "D" Day.

Provision has been made for the future expansion of the surgical treatment of chest disease by the appointment of Mr. Cruickshank as Chest Surgeon to a joint scheme for Leicester, Leicestershire and Derby City.

Mr. T. Holmes Sellors, who was appointed our Thoracic Surgeon in 1938, will act as consulting Chest Surgeon to the scheme. Under the new scheme this hospital will be the centre for all major operative work for chest diseases, and it is hoped that the scheme will come into operation by September, 1946.

(2) It is a logical development that the Sanatorium will become a hospital for the treatment of chest diseases, and the transition stage in this change has already been accomplished.

A Physiotherapy Department for the treatment of chest disease was commenced in January, 1945, under the charge of Miss Johnson. Coincident with the establishment of this Department the out-patient and follow-up clinics had to be set up for the care of bronchiectasis, asthma, and post-operative cases.

It is obvious that the volume of the out-patient hospital work is increasing ; the increased work is reflected in the following Table for the out-patient pneumothorax refill clinic.

	1938	1939	1940	1941	1942	1943	1944	1945
Artificial Pneumo- thorax Refills	2,260	2,167	2,598	2,620	3,233	3,447	3,292	3,133
Aspirations, Air Replacements and Pleural Washouts	64	24	11	33	48	87	162	83

(3) As the scope of the work in this hospital increased, it became necessary to set up an additional form of lung examination, namely, bronchoscopy. A clinic for bronchoscopy was established, and such examinations were performed, not only for this hospital, but for the City General Hospital and Leicester Royal Infirmary. 100 such examinations were performed at the clinic during the year 1945.

As mentioned previously in this report, an additional ward of 82 beds will be provided in 1946 to accommodate cases of pulmonary tuberculosis. It is an unfortunate fact that, if the present shortage of nurses continues, we shall be unable to staff this ward, and for the time being the developments we have envisaged for the improvements in the treatment of chest diseases will be nullified.

X-Ray Department

Films :	1938	1939	1940	1941	1942	1943	1944	1945
In-patients	1,555	1,650	1,567	1,621	2,140	2,571	2,367	2,632
Out-patients	2,313	2,206	1,927	2,235	3,093	3,735	4,928	3,806
Staff	44	103	77	129	183	298	475	344
Other Hospitals and								
Medical Boards ..	9	7	25	452	307	239	340	293
Medical Practitioners	—	—	—	—	—	—	192	238
Bronchograms ..	41	38	60	52	69	86	70	126
Pleurograms	—	—	—	—	—	—	—	175
Chest Clinic	—	—	—	—	—	—	286	120
E.M.S.	—	—	—	—	—	10	585	412

Screen Examinations :

In-patients	1,355	2,314	2,559	2,397	2,465	2,505	2,754	2,741
Out-patients	2,411	2,376	2,670	2,682	3,362	3,629	2,411	2,762

The above Table again reflects the increasing work of the hospital ; apart from the X-ray films which were taken through the Tuberculosis Dispensary, a new service was provided to medical practitioners giving chest X-ray facilities to all patients who required such examinations.

Laboratory

In 1940 the Emergency Public Health Laboratory Service took over all the bacteriological work of this hospital.

I put on record my grateful appreciation to Dr. Knox, the Director of the Laboratory for his excellent work and helpful co-operation throughout some difficult times during the war years.

"Home Place," Holt

This beautiful Sanatorium, situated in the lovely surroundings of Norfolk, has continued during the war years to render excellent service to our tuberculosis patients.

As formerly, the sanatorium was used for the convalescent treatment, particularly, of patients who required prolonged stay in hospital.

"Home Place" was only closed for a short time at the beginning of the war, but it was soon appreciated that its particular function was eminently desirable during the war years.

The work of the Home in its peaceful surroundings contributed greatly to the recovery of many individual patients.

J. C. H. MACKENZIE.

STATISTICAL TABLES FOR 1945

SCARLET FEVER

Verified cases discharged	236
Deaths	Nil
Concurrent double infections :	
Sonne Dysentery	1
Scabies	1
Impetigo	1
Chickenpox	1
Cross Infections	Nil
Complications :	
Otorrhoea	17
Secondary Adenitis	9
Abscesses	2
Rheumatism	2
Empyema	1
Secondary Tonsillitis	3
Nephritis	1
Arthritis	1
Mastoiditis	2
Serum reactions	9
Return Cases	3
Operations :	
Mastoid operation	2

DIPHTHERIA

Verified cases discharged	103
Deaths	1
Mortality rate .. .. .	.97%
Number of cases in which diagnosis altered	79

Concurrent infections :

Measles	1
Pneumonitis	1
Streptococcal infections	3

Cross infections	Nil
--------------------------	-----

Complications :

Paralysis of heart (slight)	6
„ palate	4
„ ciliary muscles	1
„ pharynx	1

Grouping of cases according to severity

A = Severe B = Moderately severe C = Mild

Group of Disease	Number of Cases	Deaths	Mortality rate of the Group
A	2	—	—
B	10	—	—
C	72	—	—
Laryngeal	1	1	100%
Nasal	4	—	—
Bacteriological	14	—	—

Classification of types of infecting organism :

	1940	1941	1942	1943	1944	1945
Gravis	359	407	338	82	59	28
Intermediate	8	104	78	59	23	18
Mitis	10	44	55	62	53	57
Atypical	8	—	15	2	—	—

Operations :

Suction and Intubation	1
Tonsillectomy for carriers	21

Table of verified cases and mortality rate in the past decade :

Year	Verified Cases	Mortality
1936	235	2.5%
1937	323	5.2%
1938	509	5.8%
1939	334	6.2%
1940	530	7.7%
1941	662	3.6%
1942	492	1.6%
1943	205	1.5%
1944	135	4.4%
1945	103	.97%

PUERPERAL PYREXIA

Total verified cases discharged	..	..	..	117
Admitted as Puerperal Pyrexia	..	..	..	68
Admitted as Septic Abortion	..	..	..	49
Deaths	..	..	..	1

Puerperal Cases :

Uterine Sepsis due to hæmolytic streptococci	..	..	..	22
Uterine infection due to Staph. Aureus.	..	..	..	3
Uterine infection (no organisms isolated)	..	..	..	23
Puerperal Mastitis	..	..	..	5
Perineal Sepsis	..	..	..	1
Salpingitis	..	..	..	1
Thrombophlebitis	..	..	..	1
Puerperal Scarlet Fever	..	..	..	1
Puerperal Pyelitis (B. Coli)	..	..	..	1
Infected Hæmatoma of Vulva	..	..	..	1
Dermatitis of Breast	..	..	..	1
Influenza	..	..	..	1
Pneumonia	..	..	..	1
Severe Microcytic Anæmia	..	..	..	1
Chickenpox	..	..	..	1
Normal cases for isolation	..	..	..	3
Intra-partum Pyrexia	..	..	..	1

Septic Abortions :

One death occurred from general peritonitis.

Hæmolytic Streptococcal Infection	..	..	..	4
B. Coli Infection	..	..	..	1
No organism isolated	..	..	..	14
Incomplete Abortion	..	..	..	30

Treatment	Puerperal		Abortion
Sulphonamides only	..	50	41
Sulphonamides and Penicillin	..	3	2
Curettage	28

MEASLES

Verified cases discharged ..	..	..	..	85
Deaths ..	..	..	..	Nil
Complications :				
Bronchopneumonia ..	..	..	..	21
Pleurisy ..	..	..	..	1
Laryngitis ..	..	..	..	1
Mastoiditis ..	..	..	..	1

WHOOPIING COUGH

Verified cases discharged ..	..	..	..	12
Deaths ..	..	..	..	Nil
Complications :				
Bronchopneumonia ..	..	..	..	3
Impetigo ..	..	..	..	1

MENINGITIS

Verified cases discharged ..	..	..	..	37
Deaths ..	..	..	..	13
Meningococcal Meningitis ..	..	..	..	19
T.B. Meningitis ..	..	..	..	10
Pneumococcal Meningitis ..	..	..	..	1
Meningism ..	..	..	..	3
Benign Lymphocytic Meningitis ..	..	..	..	4

TUBERCULOSIS

Classified cases admitted ..	..	..	..	427
Classified cases discharged ..	..	..	..	420
Deaths ..	..	..	..	59
Observation cases admitted ..	..	..	..	86
Observation cases discharged ..	..	..	..	70

THEATRE

Operations by Thoracic Surgeon

Nature of Operation	City Cases	County Cases	Derby Cases	E.M.S. Chest Unit	Total
Pneumonectomy ..	1	—	—	—	1
Thoracotomy	1	—	—	5	6
1st stage Thoracoplasty	9	1	—	—	10
2nd „ „	7	—	—	—	7
3rd „ „	1	1	—	—	2
Anterior Rib removal ..	4	—	1	—	5
Phrenic Operations ..	45	4	—	1	50
Adhesion Section ..	49	15	—	1	65
Bronchoscopy	7	1	—	2	10
Rib Resection	6	—	—	2	8
Lobectomy	—	—	—	3	3
Drainage of Abscess ..	—	—	—	5	5
Decortication	—	—	—	10	10
Reopening of Sinus ..	—	—	—	6	6
Removal of foreign bodies from chest ..	—	—	—	20	20
Toilet of wounds ..	—	—	—	2	2
Laparotomy—Ileostomy	—	—	—	1	1
Removal of foreign body from throat	1	—	—	—	1
Totals ..	131	22	1	58	212
Other Operations :					
Laparotomy	2	—	—	—	2
Tonsillectomy ..	20	—	—	—	20
Mastoidectomy ..	5	—	—	—	5
Antrum Wash-out ..	2	—	—	—	2
Monaldi operation ..	3	—	—	—	3
Bronchoscopies ..	100	—	—	—	100
Bronchograms under G.A.	8	—	—	—	8
Incision of finger ..	1	—	—	—	1
	141	—	—	—	141

X-RAY DEPARTMENT

Patients	In- patients	Out- patients	E.M.S.	Total
Chest Films—Sanatorium ..	2,513	734	—	3,247
„ „ T.B. Dispensary ..	—	2,900	—	2,900
„ „ St. Margaret's ..	—	168	—	168
„ „ Staff ..	316	—	—	316
„ „ „ C.N.R. ..	—	28	—	28
Medical Practitioner cases ..	—	238	—	238
Chest Unit—E.M.S. ..	—	—	412	412
Leicester Frith ..	—	3	—	3
Leicester Frith—E.M.S. ..	—	—	4	4
M.O.H.A. ..	—	7	—	7
N.S.M.B. ..	—	119	—	119
City Mental Hospital ..	—	137	—	137
City General Hospital ..	—	17	—	17
Royal Infirmary ..	—	3	—	3
Hill Crest Hospital ..	—	2	—	2
School Clinic ..	—	1	—	1
Surgical Cases (Bones and Joints)	76	4	4	84
Sinuses ..	34	—	—	34
Mastoids ..	2	—	—	2
Dental Films ..	7	—	—	7
Bronchograms ..	2,948	4,361	420	7,729
Pleurograms ..	105	10	11	126
Sinograms ..	24	—	141	165
	9	—	1	10
	3,086	4,371	573	8,030
Routine Screen Examinations ..	2,741	2,371	31	5,503
M.S. Clinic Screen Examinations	—	120	—	120
Grand Total ..	5,827	7,222	604	13,653

PHYSIOTHERAPY DEPARTMENT

Patients treated January 1st to December 31st, 1945

Military Patients	48	Rheumatoid Arthritis ..	1
Staff	8	Scoliosis	1
Thoracoplasty	38	Hemiplegia	1
Bronchiectasis	46	Infantile Hemiplegia ..	1
Anstey Lane Children		Pneumonectomy	1
(Bronchiectasis) ..	21	Mastitis	1
Asthma	4	Wry neck	1
Empyema	7	After removal, foreign body ..	1
Pleural Effusion ...	4	Post-Diphtheritic weakness ..	3
Post-natal Exercises ..	2	Ultra-Violet Light	6

Total number of treatments given, January to December, 1945 = 4,690

ISOLATION HOSPITAL AND SANATORIUM

PATIENT DAYS

	For 12 months, Jan., 1945, to Dec., 1945	For 12 months, April, 1945, to March, 1946
Scarlet Fever	4,120	3,958
Diphtheria	5,993	4,898
Puerperal Fever.. .. .	1,550	1,322
Measles	1,710	578
C.S.M.	622	530
Whooping Cough	876	1,390
Erysipelas	278	220
Typhoid	26	33
Pneumonia	1,597	1,457
T.B. Meningitis.. .. .	74	39
Dysentery	134	276
Pemphigus	264	426
Other Diseases	3,239	3,387
	20,483	18,514
Tuberculosis :		
Adults	60,645	55,872
Children	12,306	12,061
Observation	5,092	6,700
	78,043	74,633
E.M.S.	7,694	3,836
GRAND TOTAL	106,220	96,983
Holt	6,993	7,093

Report on the City General Hospital, Leicester, for the year 1945

By

A. P. M. PAGE, M.D., B.S.(Lond.), M.R.C.P.(Lond.),
D.C.H. (R.C.P. & S.)

Medical Superintendent and Physician

FOREWORD BY THE MEDICAL OFFICER OF HEALTH

Perusal of the City General Hospital Report for 1945 will indicate that there has been a change in the method of presentation of the report. In the past the whole report has been presented by the Medical Superintendent, but, this year, with the increasing tendency to improve the status of the clinician, each of the officers responsible for a department of the hospital has presented his own report.

I welcome this innovation as it denotes a real advance in the method of staffing the hospital. One of the criticisms of the past has been that, in Municipal Hospitals, the "junior" staff, i.e., everyone except the Medical Superintendent, was on the staff of the Medical Superintendent who alone was responsible to the Committee of Management for the care of the patients. With increasing medical knowledge and specialisation such a state of affairs had become an absurd anachronism and, if perpetuated, would simply mean that senior clinicians of repute would boycott the service. The senior clinician in full charge of a patient can have no senior clinical officer, though for administrative purposes some degree of non-clinical control may be necessary. Thus it is logical that each Departmental Officer should report directly as to the clinical results of his department during the year.

I would draw attention only to one or two particular aspects of the reports :

- (a) The number of beds daily occupied (viz., 511) is a record.

- (b) Out-patient clinics, strictly of a consultative character, were started in May, another sign of the healthy development of the hospital service.
- (c) The Pathological Department again shows a marked increase. Since 1938, the last year of peace, there has been an increase of 250 per cent. in the specimens examined, i.e., the work done in 1945 is three-and-a-half times that done in 1938.
- (d) Other departments also show increased activity.

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I herewith submit a report covering the activities of the various departments of the hospital during 1945.

Owing to the transition from war to peace-time activities, there was a slight decline in the number of patients admitted—7,172, compared with the record total in 1944 of 7,850.

The liberation of great numbers of our own prisoners of war, suffering from various types of malnutrition, gave the medical and nursing staffs the opportunity of dealing with types of illness which do not normally fall to the lot of a British hospital. The results obtained with the modern methods used to combat malnutrition were excellent and gave great satisfaction to all concerned.

During the latter half of the year there was a considerable decline in the number of patients admitted under the Emergency Medical Service scheme, but there was a steady rise in the number of ordinary civilian patients admitted and the figure of 511 beds occupied daily was a record. Therefore, it will be seen that the year 1945 was a very heavy one for all staffs of the hospital and especially the nursing staff, who were always extremely short-handed, but carried out their duties with efficiency and enthusiasm. Towards the end of the year a steady decline in the number of nurses available began to make itself felt and it became obvious that the situation would probably come to some sort of crisis in the following year, when decisions for the curtailment of patients' admissions might have to be taken.

In spite of these difficulties, it was recommended to the Hospital Committee that an Out-patient Consultation Scheme for Medical, Surgical and Gynæcological cases, was now a great need. Consultative Out-patient Clinics were therefore started in May and have steadily increased and appear to be much appreciated by the local medical practitioners and patients.

There have been few major changes in the staff: Dr. E. Kelen replaced Dr. Dobrashian as Assistant Pathologist.

I would like to take this opportunity of expressing my thanks to all the members of the various departments of the staff for their valuable services, and especially to thank all the voluntary workers and friends of the hospital for their continued assistance.

GENERAL STATISTICS.					1944	1945
Accommodation of Hospital expanded is 700 Beds.						
Admissions	...	...	...	...	7,850	7,172
Discharges	...	...	...	...	7,413	6,678
Deaths	...	...	...	...	371	488
Deaths occurring within seven days of admission	...	...	...	...	155	213
Number of Patient Days	...	...	...	...	181,808	186,678
Average duration of residence (in days)	...	...	...	...	23.16	26
Average number of beds occupied	...	...	...	...	496.74	511.45
Highest—On 14.8.44	...	...	...	...	597	—
On 20.5.45	...	...	...	...	—	586
Lowest—On 23.5.44	...	...	...	...	384	—
On 26.7.45 & 25.12.45	...	...	...	...	—	468

STATISTICAL TABLE.

Showing progress in Special Departments in the past nine years.

	1937	1938	1939	1940	1941	1942	1943	1944	1945
Admissions ..	4,065	4,182	4,581	6,142	6,497	6,130	6,540	7,850	7,172
Average stay in Hospital	46.7 days	36.98 days	30.86 days	26.99 days	26.83 days	28.59 days	26.99 days	23.16 days	26 days
Confinements	339	552	728	895	1,091	906	946	1,034	966
Operations Performed ..	621	852	1,001	1,082	1,158	1,244	1,532	1,929	1,947
X-Ray Cases									
Filmed ..	2,744	2,139	1,999	2,802	3,198	3,788	3,996	4,167	5,832
Pathology ..	6,486	8,521	8,794	12,750	21,294	22,720	24,430	23,077	29,855
Physiotherapy (cases)	—	160	240	300	380	448	485	600	345
Average No. of beds filled ..	427	423	386	453	478	480	484	497	511

SUMMARY OF YEARLY RETURN OF CASES.

	Remaining on 31/12/44	Admitted	Discharged	Died	Remaining on 31/12/45
Men	270	2,630	2,458	199	243
Women ..	90	2,800	2,591	172	127
Children (under 16 years) ..	149	1,742	1,624	117	150
Totals	509	7,172	6,673	488	520

DEPARTMENT OF MEDICINE

(Dr. A. P. M. PAGE)

CLASSIFICATION OF MEDICAL CASES TREATED DURING 1945

I. General Infections and Diseases

	Adults	Children
Chorea	1	14
Coryza	5	6
Diphtheria	—	3
Dysentery	—	1
Erythema Nodosum	2	3
Erysipelas	—	1
Glandular Fever	2	1
Hepatitis	1	—
Influenza	1	—
Malaria	4	—
Measles	1	10
Miliary Tuberculosis	—	1
Pertussis	—	3
Pyrexia (undetermined)	1	1
Respiratory Infection, Acute	—	1
Rheumatism, Acute	15	25
Rheumatism, Sub-acute	5	7
Scarlet Fever	—	2
Septicæmia, Staphylococcal	1	—
Tonsillitis, Acute	28	13
Virus Infection	4	1
Weil's Disease	1	—

II. Disorders of Alimentary System and Peritoneum

	Adults	Children
Mouth :		
Dental Sepsis	—	1
Stomatitis	—	5
Vincent's Infection	2	—
Pharynx :		
Pharyngitis	2	1
Oesophagus :		
Ulcer	1	—

Stomach :				Adults	Children
Achlorhydria	..	..	..	1	—
Dyspepsia	..	..	..	3	1
Emesis Neonatorum	..	..	..	—	3
Gastric Erosion	..	..	..	2	—
Gastritis	..	..	..	2	—
Gastric Ulcer	..	..	..	22	—
Gastric Carcinoma	..	..	..	15	—
Gastro-enteritis	..	..	..	16	40
Hæmatemesis	..	..	..	11	1
Peptic Ulcer	..	..	..	—	—
Pyloric Stenosis, congenital	..	..	..	—	4
Pyloro-spasm	..	..	..	—	2
Duodenum :					
Duodenitis	..	..	..	1	—
Duodenal Ulcer	..	..	..	18	—
Investigations	..	..	..	2	—
Small Intestine :					
Diarrhœa	..	..	..	—	2
Enteritis	..	..	..	30	2
Intestinal Colic	..	..	..	2	3
Mesenteric Thrombosis	..	..	..	1	—
Large Intestine :					
Colitis (a) Simple	..	..	..	5	1
(b) Ulcerative	..	..	..	2	1
Diverticulitis	..	..	..	1	—
Constipation	..	..	..	2	1
Polyposis Coli	..	..	..	1	—
Miscellaneous :					
Investigation	..	..	..	1	1
Melæna	..	..	..	1	—
Regurgitation	..	..	..	—	1
Tapeworm	..	..	..	1	—
Visceroptosis	..	..	..	2	—
Peritoneum :					
Carcinomatosis	..	..	..	8	—
Peritonitis, Tuberculous	..	..	..	—	1

Liver :				Adults	Children
Carcinoma	..	..	..	1	—
Cirrhosis ..	..	..	..	12	—
Hepatic failure	..	..	..	—	1
Hepatitis, Acute Arsenical	..	..	..	1	—
Suppurative	1	—
Toxic	—	1
Nodular Hyperplasia	1	—

III. Disorders of Bone

Myeloma of skull	1	—
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IV. Disorders of Endocrine System

Pituitary :

Diabetes Insipidus	—	0
Pituitary Tumour	2	—

Pancreas :

Carcinoma	..	..	..	3	—
Diabetes Mellitus ..	..	..	..	34	1
Diabetic Coma	..	..	..	1	—
Glycosuria	..	..	..	1	—
Hypoglycæmia	..	..	..	1	—
Pancreatic insufficiency	..	..	..	3	—
Pancreatitis	..	..	..	1	—

Thyroid :

Toxic adenoma	..	..	..	1	—
Simple adenoma	..	..	..	1	—
Myxoedema	..	..	..	3	—
Retrosternal Goitre	..	..	..	1	—
Thyrotoxicosis	..	..	..	5	—

V. Disorders of Genito-urinary System (Medical)

Kidneys :

Amyloid Disease of Kidney ..	..	..	..	1	—
Congenital Hypoplasia	..	..	..	1	—
Nephritis (a) Acute	..	..	..	7	18
(b) Chronic	..	..	..	12	3
Pyelitis (Pyelo-cystitis)	..	..	..	17	5
Pyelonephritis	..	..	..	3	—
Pyuria ..	..	..	..	—	1
Sulphapyridine anuria	..	..	..	—	1
Uræmia ..	..	..	..	8	—
Urinary Infection ..	..	..	..	9	8

Bladder :				Adults	Children
Cystitis (a) Acute .. ..	..	..	..	3	—
(b) Chronic .. ..	..	..	..	1	—
(c) Tuberculosis .. ..	..	..	..	1	—
Dysuria .. ..	..	..	..	1	—
Enuresis .. ..	..	..	..	—	1
Scrotum :					
Gangrene .. ..	..	..	..	1	—
Urinary Investigation .. ..	..	..	..	4	1

VI. Disorders of Glands

Adenitis, Simple .. ..	..	..	..	2	5
Hilar Adenitis .. ..	..	..	..	—	1
Hodgkin's Disease (Lymphadenoma) ..	..	..	..	1	—
Mesenteric Adenitis .. ..	..	..	..	3	1

VII. Disorders of Heart and Circulatory System

Heart :

Angina Pectoris .. ..	..	..	..	3	—
Apical Systolic Murmur .. ..	..	..	..	—	1
Auricular Fibrillation .. ..	..	..	..	40	—
Cardiac Failure .. ..	..	..	..	4	—
Congenital Heart Abnormality .. ..	..	..	..	2	6
Congestive Heart Failure .. ..	..	..	..	39	—
Coronary Thrombosis .. ..	..	..	..	14	—
Coronary Sclerosis .. ..	..	..	..	10	—
Endocarditis (a) Rheumatic .. ..	..	..	..	1	2
(b) Infective .. ..	..	..	..	10	4
Extra Systoles .. ..	..	..	..	1	—
Hyperpiesia (Hypertension) .. ..	..	..	..	25	—
Essential Hypertension .. ..	..	..	..	9	—
Hypertensive Heart Failure .. ..	..	..	..	26	—
Hypotension .. ..	..	..	..	1	—
Mitral Stenosis .. ..	..	..	..	22	2
Myocardial Degeneration .. ..	..	..	..	13	—
Myocarditis .. ..	..	..	..	—	1
Pericarditis, Simple .. ..	..	..	..	1	—
Rheumatic Pancarditis .. ..	..	..	..	3	1
Præcordial Pain .. ..	..	..	..	1	—
Tachycardia .. ..	..	..	..	3	—

Arteries :				Adults	Children
Aneurysms	..	..	..	2	—
Aortic Aneurysm	..	..	..	1	—
Aortic Regurgitation (Incompetence)	..	..	..	6	—
Aortic Stenosis	..	..	..	2	—
Arteriosclerosis	..	..	..	3	—

Veins :					
Peripheral Circulatory Failure	..	..	..	1	—
Thrombosis (Femoral)	..	..	..	1	—
Thrombophlebitis	..	..	..	1	—

Miscellaneous :					
Syncope	..	..	..	2	—

VIII. Disorders of Joints, Fibrous Tissues

Arthritis :					
Rheumatoid	..	..	..	20	—
Osteoarthritis, Knee	..	..	..	4	—
Shoulder	..	..	..	1	—
Spine	..	..	..	1	—
General	..	..	..	2	—
Acute Infective Arthritis	..	..	..	1	—
Polyarticular Arthritis	..	..	..	1	—
Spondylitis	..	..	..	—	—
Fibrositis	..	..	..	9	—
Backache	..	..	..	1	—

IX. Disorders of Metabolism and Nutrition

Asthenia	..	..	..	1	—
Debility	..	..	..	3	—
Feeding difficulty	..	..	..	—	9
Gout	..	..	..	2	—
Malnutrition	..	..	..	—	1
Marasmus	..	..	..	—	4
Obesity	..	..	..	2	—
Pink Disease	..	..	..	—	1
Prematurity	..	..	..	—	41
Rickets	..	..	..	—	1
Teething	—	1
Baby for Feeding Purposes	—	6

X. Disorders of Muscular System

Myalgia	2	—
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XI. Disorders of the Nervous System

Brain :				Adults	Children
Abscess	1	—
Cerebrum :					
Birth injury .. .. .	..	..	..	—	2
Cerebral Diplegia (Little's) ..	..	..	..	—	—
Encephalitis, Acute .. .. .	..	..	..	3	2
Embolism .. .. .	..	..	..	2	—
Hydrocephalus .. .. .	..	..	..	—	1
Hæmorrhage .. .. .	..	..	..	25	—
Hemiplegia .. .. .	..	..	..	3	—
Oedema .. .. .	..	..	..	—	1
Syphilis .. .. .	..	..	..	1	—
Cerebellum :					
Abscess .. .. .	..	..	..	1	—
Tumour .. .. .	..	..	..	2	—
Thrombosis .. .. .	..	..	..	1	—
Pons :					
Pontine Hæmorrhage .. .. .	..	..	..	1	—
„ Thrombosis .. .. .	..	..	..	1	—
Bulbar Palsy .. .. .	..	..	..	—	—
Miscellaneous :					
Epilepsy .. .. .	..	..	..	3	1
Nervous Tic .. .. .	..	..	..	—	1
Stupor .. .. .	..	..	..	1	—
Vertigo .. .. .	..	..	..	1	—
Spinal Cord :					
Adhesive Arachnoiditis .. .. .	..	..	..	1	—
Paraplegia .. .. .	..	..	..	1	—
Sub-acute Combined Degeneration ..	..	..	..	1	—
Tabes Dorsalis .. .. .	..	..	..	3	—
Tabo-Paresis .. .. .	..	..	..	1	—
Traumatic Spinal Cord Lesion ..	..	..	..	1	—
Disseminated Sclerosis .. .. .	..	..	..	6	—
Peripheral Nerves :					
Neuritis .. .. .	..	..	..	2	—
Paralysis, Facial .. .. .	..	..	..	1	—
Polyneuritis, Acute .. .. .	..	..	..	1	—
Sciatica .. .. .	..	..	..	4	—

Meninges :				Adults	Children
Meningioma	..	..	..	1	—
Meningismus	..	..	..	1	—
Meningitis, Influenzal	..	..	..	—	1
Meningococcal	..	..	..	3	1
Pneumococcal	..	..	..	3	—
Tuberculous	..	..	..	1	2
Lymphocytic	..	..	..	3	—
Subarachnoid Hæmorrhage	..	..	..	4	—
Extradural Hæmorrhage	..	..	..	—	1

XII. Disorders of Respiratory System

Trachea —

Bronchus :

Asthma	..	..	..	31	3
Bronchitis, Acute	..	..	..	21	35
Chronic	..	..	..	20	—
Bronchiectasis	..	..	..	6	1
Carcinoma	..	..	..	21	—

Lungs :

Abscess	..	..	..	5	1
Atelectasis (and collapse)	..	..	..	2	2
Carcinoma	..	..	..	1	—
Congenital Cystic Lung	..	..	..	1	—
Embolism	..	..	..	4	—
Emphysema	..	..	..	3	—
Fibrosis	..	..	..	5	—
Hæmoptysis	..	..	..	1	—
Infarction	..	..	..	1	—
"Pancoast" Tumour	..	..	..	1	—
Pneumonia, Lobar	..	..	..	70	28
Broncho	..	..	..	42	54
Hypostatic	..	..	..	1	—
Atypical	..	..	..	3	1
Pneumonitis	..	..	..	9	—
Thrombosis	..	..	..	1	—
Tuberculosis	..	..	..	8	2

Pleura :				Adults	Children
Pleurisy .. .. .	..	..	..	8	—
Pleural Effusion, Simple ..	..	..	..	14	3
Tuberculous .. .. .	..	..	..	5	—
Malignant .. .. .	..	..	..	1	—
Empyema .. .. .	..	..	..	3	2
Interlobar .. .. .	..	..	..	1	—
Encysted .. .. .	..	..	..	1	—
Spontaneous Pneumothorax ..	..	..	..	2	—
Pleurodynia .. .. .	..	..	..	2	—
Investigation .. .. .	..	..	..	—	1

XIII. Disorders of Reticulo-endothelial System

Anæmia, Aplastic .. .. .	..	..	..	1	—
Hæmolytic of Newborn ..	..	..	..	—	4
Hypochromic .. .. .	..	..	..	7	1
Hyperchromic .. .. .	..	..	..	3	—
Pernicious .. .. .	..	..	..	17	—
Agranulocytosis .. .. .	..	..	..	2	—
Hæmorrhagic Disease of Newborn ..	..	..	..	—	4
Hepatomegaly and Splenomegaly ..	..	..	..	1	—
Henoch's Purpura .. .. .	..	..	..	—	1
Polycythæmia .. .. .	..	..	..	3	—
Reticulosis .. .. .	..	..	..	4	—
Myelocytic Leukæmia .. .. .	..	..	..	1	—
Chronic Lymphatic Leukæmia ..	..	..	..	—	1
Acute Monocytic Leukæmia .. ..	..	..	..	3	—

XIV. Disorders of Skin

Burns of Shoulder .. .. .	..	..	..	1	—
Carbuncle .. .. .	..	..	..	4	—
Epidermophytosis .. .. .	..	..	..	1	—
Dermatitis, Simple .. .. .	..	..	..	7	1
Toxic .. .. .	..	..	..	1	—
Medicamentosis .. .. .	..	..	..	2	—
Seborrhæic .. .. .	..	..	..	5	2
Herpetiform .. .. .	..	..	..	2	—
Septic .. .. .	..	..	..	3	1
Exfoliative .. .. .	..	..	..	2	—
Sulphanilamide .. .. .	..	..	..	2	—
Eczema .. .. .	..	..	..	23	20
Eczema, Seborrhæic .. .. .	..	..	..	2	—
Dysidrosis .. .. .	..	..	..	2	—
Folliculitis of Scalp .. .. .	..	..	..	2	1
Erythema Multiforme .. .. .	..	..	..	—	1

Disorders of Skin—continued				Adults	Children
Furunculosis	..	..	..	2	1
Herpes Ophthalmicus	..	..	..	1	—
Herpes Zoster	..	..	..	2	—
Ichthyosis	..	..	..	—	1
Impetigo	..	..	..	2	33
Lichen Planus	..	..	..	1	—
Pemphigus	..	..	..	1	—
Pruritus Ani	..	..	..	1	—
Psoriasis	..	..	..	3	2
Pyodermia	..	..	..	2	1
Scabies	..	..	..	4	17
Sycosis Barbæ	..	..	..	1	—
Tuberculous Ulceration of Leg	..	..	..	1	—
Urticaria	..	..	..	2	3
Varicose Ulcer	..	..	..	3	—
„ Eczema	..	..	..	2	—
Verruca (Warts)	..	..	..	—	—
Xerodermia	..	..	..	—	1

XV. Mental Disorders

Acute Confusional State	..	..	..	3	—
Anxiety State	..	..	..	2	1
General Paralysis of Insane	..	..	..	1	—
Hypertensive Encephalopathy	..	..	..	1	—
Hypomania	..	..	..	1	—
Hysteria	..	..	..	3	2
Mania	..	..	..	1	—
Melancholia	..	..	..	6	—
Mental Deficiency	..	..	..	—	1
Mongolism	..	..	..	—	1
Psychoneurosis	..	..	..	8	—
Psychosis	..	..	..	1	—

XVI. Poisonings

Aspirin Overdose	..	..	..	1	—
Carbolic Acid	..	..	..	1	—
Chronic Lead Poisoning	..	..	..	1	—
Morphinism	2	—
Phenobarbitone Poisoning	3	—

XVII. Congenital Defects

Hydrocephalus	—	1
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XVIII. Venereal Diseases

Primary Syphilis	2	—
Acute Gonococcal Arthritis	1	—
Neuro-Syphilis	1	—
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Electrocardiographic Examinations	109
Physiotherapy (Massage) Department—cases treated	345

DEPARTMENT OF SURGERY

(Mr. T. M. J. d'OFFAY, F.R.C.S.)

The work of the Surgical Department has further widened its scope during the year under review. Out-patients' consultations are now a regular feature. This has proved not only a popular innovation, but a real contribution to the internal organisation of the day-to-day work.

Recent advances in certain branches of surgery have been pursued in this hospital with some happy results. Certain forms of cancer (œsophagus and pancreas) hitherto considered incurable have been successfully eradicated. Credit for these achievements must go to the whole staff of the surgical side. The fight against cancer of the stomach has been carried one stage further by more radical operation.

In all this, modern methods of diagnosis such as gastroscopy and peritoneoscopy have been of invaluable assistance.

In the preparation of patients for operation, but more especially in the immediate post-operative treatment, the intravenous administration of protein hydrolysates has been of inestimable value. This method of temporary feeding represents one of the great advances in the art and science of healing; and we in this hospital have been among the first in the field in the development of this work in this country.

Increased supply of penicillin continue to make some aspects of our work easier, to accelerate recoveries in many cases, and to cure a few cases that would have proved fatal a few years ago.

"General" Surgical Operations for the year 1945

ALIMENTARY TRACT

Mouth and Tongue :

Removal of Metallic F.B. from Mouth	..	..	1
Total Excision of Tongue for Carcinoma	1

Salivary Glands :

Excision of Submaxillary Cyst	2
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Pharynx, Larynx and Oesophagus :

Pharyngo-Oesophagectomy and Laryngectomy for Carcinoma	2
Partial Oesophagectomy for Carcinoma Oesophagus ..	2
Partial Oesophago-Gastrectomy and Splenectomy for Carcinoma Oesophagus	1
Oesophago-Gastrostomy for Cardiospasm	1
Thoracotomy for Carcinoma Oesophagus	1
Construction of Artificial Cervical Oesophagus ..	1
Closure of Fistula of Artificial Oesophagus	2

Stomach and Duodenum :

Gastroscopy	24
Partial Gastrectomy for both G.U. and D.U. ..	2
" " " D.U.	36
" " " G.U.	27
" " " Carcinoma Stomach ..	4
Total Gastrectomy for Carcinoma of Stomach ..	1
Total Gastrectomy, Splenectomy and Partial Pancreatotomy for Carcinoma of Stomach	1
Gastro-jejunostomy for Chronic D.U. (Stenosis) ..	2
" " " Stomach Carcinoma ..	4
Rammstedt's Operation	4
Gastrostomy for Carcinoma of Oesophagus	2
Closure of Perforated Gastric Ulcer	5
" " " Duodenal Ulcer	10
Gastrotomy + Suture Bleeding G.U.	3
Duodenotomy + Suture Bleeding D.U.	2

Gall Bladder and Bile Ducts :

Cholecystectomy for Cholecystitis + Stones	15
Cholecystectomy and Choledocholithotomy	8
Choledocholithotomy	1
Cholecystostomy	6
Cholecyst-jejunostomy	2
Cholecystectomy + Partial choledochectomy for Carcinoma of C.B.D.	1

Liver

Biopsy of Liver	1
Drainage of Liver Abscess	2

Spleen :

Splenectomy for Splenic Cyst	1
" " Acholuric Jaundice	1

Jejunum and Ileum :

Jejunostomy	3
Release of Obstruction (Division of Band)	1
Resectomy of Ileum for Strangulation	1
Ileostomy	1

Appendix Vermiformis :

Appendicectomy for Acute Appendicitis	50
" " " " with Peritonitis	14
" " Sub-Acute Appendicitis	36
Drainage of Appendix Abscess	5

Colon :

Release of Sigmoid Volvulus	1
Transverse Colostomy for Carcinoma	9
" " " Fistula	1
Pelvic " " Carcinoma	10
Right Hemi-colectomy for Carcinoma	3
Bloch-Paul-Mikulicz Resection for Carcinoma	11
Closed Aseptic Anastomosis for Carcinoma	7
Resection (Open) for Gangrene due to Intussusception	1
Reduction of Intussusception	1
Closure of Cæcostomy (G.S.W.)	3
" " " (Ulc. Colitis)	1
" " Colostomy (Carc.)	6
Dilation of Colostomy	1

Rectum :

Excision Rectal Polyposis	1
Perineal Excision for Carcinoma	1
Abdomino-Perineal Excision for Carcinoma	3
Procto-Sigmoidectomy for Prolapse	1
Sigmoidoscopy	38

Anus :

Hæmorrhoidectomy	32
Excision Fissure-in-Ano	9
Injection Fissure-in-Ano	2
Injection Hæmorrhoids	1
Drainage Ischio-rectal Abscess	6
" Peri-anal Abscess	2
Excision of Post-anal Cyst	4
Cauterization Anal Warts	1

Peritoneum and Peritoneal Cavity :

Peritoneoscopy	9
Laparotomy n.a.d.	10
„ Inoperable Carcinoma	10
„ and Biopsy Sarcoma	1
„ and Biopsy Liver	1
„ and Div. Adhesions	1
„ Ruptured Cæcum (Carc. Pelv. Colon)	1
„ for Mesenteric Thrombosis	1
„ Excision Strang. Omentum	1
Drainage of Pelvic Abscess	3
„ for Pneumococcal Peritonitis	3
„ of Subphrenic Abscess	1
„ of Abscess Abdominal Wall	1

Inguinal Hernia :

Excision of Sac only (children)	10
„ „ and closure Internal Ring	14
„ „ and repair Internal Ring	66
„ „ and repair Internal Ring (bilateral)	3
„ „ and Fascial Graft repair	7
„ „ and Orchidectomy	3
Release of Strangulation	3
„ „ „ and Ileostomy	1

Femoral Hernia :

Excision of Sac and repair Femoral Ring	8
Release of Strangulation	4
„ „ „ and Enterectomy	1

Umbilical Hernia :

Repair of Umbilical Hernia	7
Release of Strangulation	1

Incisional Herniae :

Silk repair Incisional Hernia	6
Fascial Graft repair Incisional Hernia	1
Release Strangulated Incisional Hernia	1

Other Herniae :

Repair Para-Oesophageal Diaphragmatic Hernia	1
Release Strangulation and repair Diaphragmatic Hernia	1
Repair Epigastric Hernia	2
„ Bilateral Sciatic Hernia	1

GENITO-URINARY TRACT

Kidneys :

Nephrectomy for Hydronephrosis	4
„ „ Pyonephrosis	2
„ „ Papilloma Kidney	1
Heminephrectomy for Pyonephrosis	1
Nephro-Lithotomy	1
Drainage Pyonephrosis	2
„ Peri-nephric Abscess	4

Ureters :

Ureterectomy for Pyo-ureter	1
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Bladder :

Cystoscopy	42
„ and Retrograde Pyelography	7
„ „ Ureteric Catheterisation for Sulph. Anuria	1
Cystoscopic Diathermy for Papilloma	4
Suprapubic Cystostomy for Prostatic Adenoma	11
„ „ „ Carc. Prostate	2
„ „ „ Urethral Fistula	1
„ „ „ Rupture Urethra	1
„ Excision Papilloma of Bladder (Diathermy)	8
Partial Cystectomy for Carcinoma	2
Suprapubic Lithotomy	1

Prostate :

One-stage Suprapubic Prostatectomy	23
Second-stage Suprapubic Prostatectomy	2
Biopsy of Prostate	1
Control of Sec. Hæmorrhage after Prostatectomy	1

Urethra :

Dilatation of Stricture	16
External Urethrotomy	1
Repair of Urethral Fistula	3

Spermatic Cord, Testicles and Epididymis :

Excision Varicocele	1
„ T.V.T. for Hydrocele	4
Orchidopexy	2
Orchidectomy for Tuberculosis	1
Epididymectomy for Tuberculosis	1
Orchidectomy for Carcinoma	1
Excision for Epididymal Cyst	1

Scrotum :

Incision Scrotal Abscess	2
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Penis:

Dorsal Slit	1
Circumcision	1
Cautery Warts	1

RESPIRATORY SYSTEM**Pleural Cavity :**

Closed Intercostal Drainage for Empyema	3
Transcostal Drainage for Empyema	9
Dilatation of Pleural Fistula	2

CIRCULATORY SYSTEM**Arteries :**

Prox. and Distal Ligation of Brachial Aneurysm	1
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Veins :

Ligature and Division Great Saphenous Vein	17
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NERVOUS SYSTEM

Bilateral Lumbar Sympathectomy	1
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LYMPHATIC SYSTEM**Lymph. Nodes and Vessels :**

Drainage Inguinal Abscess	5
„ Popliteal Abscess	1
„ Axillary Abscess	3
„ Cervical Abscess	12
Biopsy Axillary Nodes	2
„ Cervical Nodes	1
„ Inguinal Nodes	2
Excision Post-auricular Nodes	1

LOCOMOTOR SYSTEM**Limbs :**

Amputation Leg for G.S.W.	2
„ „ „ Gangrene	4
Secondary Suture Stump	2

Joints and Bones :

Manipulation of Ankle and Splinting	1
Plaster for Osteomyelitis	4
Reduction of Colles' Fracture	1
Sequestrectomy	1

Muscles and Tendons :

Drainage Intramuscular Chest Abscess	1
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ENDOCRINE SYSTEM

Thyroid Gland :

Partial Thyroidectomy for Thyrotoxicosis	10
Excision Cyst-Adenoma	6

MAMMARY GLANDS

Drainage Acute Abscess	19
Biopsy Tumour	4
Excision Fibro-adenoma	3
Simple Amputation for Carcinoma	1
Radical Amputation for Carcinoma	6

SKIN AND SUBCUTANEOUS TISSUES

Drainage of Miscellaneous Abscesses	7
Plastic Excision of Scars	3
Excision of Skin Warts	4
„ Sebaceous Cyst	6
„ Bursa (Prepatellar)	3
„ Fibroma	1
„ Lipoma	2
„ Ganglion Foot	1
Biopsy of Ulcers	3
„ Umbilicus	1
Secondary Suture of G.S.W.	7
Intermediate Skin Grafts for Burns	2
„ „ „ „ Mastectomy	1
„ „ „ „ G.S.W.	3
„ „ „ „ Ulcers	1
Excision of Toe Nail for Paronychia	4
Plaster to Leg for Sepsis	4

HAND AND FINGERS

Kanavel's Operation for Paronychia	3
Incision of Septic Fingers	9
Amputation Distal Phalanx for Sepsis	4
„ of Finger for Sepsis	1
Removal of Glomus Tumour	1
„ Embedded Ring	1
„ Splinters	2
„ Nail for Hæmatoma	1
„ Warts	5
Drainage of Fascial Spaces of Hand	6
Miscellaneous, Plasters, etc.	19

Total 1,021

Operations on Ear, Nose and Throat, and Eyes ..	67
Orthopaedic Operations (Mr. L. Morris, F.R.C.S.)	394
Dental Extractions, etc. (Mr. J. A. T. Rowlett, L.D.S.)	136
Anæsthetics administered	1,851

CLASSIFICATION OF SURGICAL CASES TREATED IN 1945

ALIMENTARY SYSTEM

Mouth :

Carcinoma of Tongue	1
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Pharynx :

Peritonsillar Abscess	1
Acute Pharyngitis	1
Chronic Tonsillitis	1

Oesophagus :

Carcinoma of Oesophagus	5
Dysphagia	3
Mutton Bone impacted in Oesophagus	1
Achalasia of Cardia	1

Stomach :

Carcinoma of Stomach	19
Chronic Gastric Ulcer	32
Perforated Gastric Ulcer	2
Gastro-jejunal Ulcer	1
Perforated Peptic Ulcer	1
Gastro-jejuno-colic Fistula	1
Chronic Gastritis and Enteritis	2

Duodenum :

Chronic Duodenal Ulcer	50
Perforated Duodenal Ulcer	17

Small Intestine :

Sectional Strangulation Ileum	1
Volvulus	1
Meckel's Diverticulum	1

Appendix Vermiformis :

Acute Appendicitis	81
Chronic Appendicitis	3
Perforated Appendix	1
Appendix Abscess	2
Appendix Mass	2

Large Intestine :

Carcinoma of Pelvic Colon	..	..	..	7
„ Ascending Colon	..	..	..	2
„ Transverse Colon	..	..	..	3
„ Colon	..	..	..	8
„ Cæcum	..	..	..	3
Diverticulitis	..	..	..	2
Acute Cæcitis	..	..	..	2
Ulcerative Colitis	..	..	..	3
Acute Colitis	..	..	..	1
Entero-Colitis	..	..	..	2
Intussusception	..	..	..	2
Intestinal Obstruction	..	..	..	1
Stricture of Ileostomy opening	..	..	..	1
Volvulus of Pelvic Colon	..	..	..	1
Spastic Large Bowel Obstruction	..	..	..	1

Rectum :

Carcinoma of Rectum	..	..	..	13
Carcinoma of Pelvi-Rectal Junction	..	..	..	2
Fæcal Fistula	..	..	..	1
Hæmorrhoids	..	..	..	30
Ischio-rectal Abscess	..	..	..	8
Prolapse of Rectum	..	..	..	1
Rectal Polyp	..	..	..	1

Anus :

Fissure-in-Ano	..	..	..	3
Fistula-in-Ano	..	..	..	9
Peri-anal Abscess	..	..	..	1
Post-anal Cyst	..	..	..	4

Liver :

Carcinoma of Liver	..	..	..	3
Cirrhosis of Liver	..	..	..	1
Abscess of Liver	..	..	..	1
Obstructive Jaundice	..	..	..	1
Polycystic Disease	..	..	..	1

Pancreas :

Carcinoma Head of Pancreas	..	..	..	6
Acute Pancreatitis	..	..	..	2

Gall Bladder and Ducts :

Carcinoma of Gall Bladder	..	..	..	3
„ Common Bile Duct	..	..	..	1
Acute Cholecystitis	..	..	..	3
„ „ and Stones C.B.D.	..	..	..	9
Gangrenous Cholecystitis	..	..	..	2
Chronic Cholecystitis	..	..	..	8
Cholelithiasis	..	..	..	2
Biliary Colic	..	..	..	1

Peritoneum :

Acute Peritonitis	..	..	..	1
Pneumococcal Peritonitis	..	..	..	2
Carcinomatosis	..	..	..	3
Retro-peritoneal Sarcoma	..	..	..	1
Abscess of Abdominal Wall	..	..	..	1
Ileo-cæcal Adenitis	..	..	..	1
Mesenteric Thrombosis	..	..	..	1
Torsion of Mesenteric Cyst	..	..	..	1
Sarcoma	..	..	..	3
Fæcal Impaction	..	..	..	1
For Observation	..	..	..	1
Investigation	..	..	..	13

HERNIAE

	Adults	Children
Inguinal	77	6
Strangulated Inguinal	6	1
Femoral	7	—
Strangulated Femoral	10	—
Umbilical	11	—
Incisional or Scar	5	—
Diaphragmatic	—	—
Sciatic	1	—
Epigastric	2	—
Lipoma of Inguinal Canal	2	—

RESPIRATORY SYSTEM

Lungs :

Lung Abscess	1
Neoplasm	1

Pleural Cavity :

Empyema	12
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Mediastinum :

Acute Abscess of Chest Wall	1
Chronic Abscess of Chest Wall	1

CIRCULATORY SYSTEM

Veins :

Varicose Ulcer	..	..	..	..	6
„ Veins	..	..	..	..	9
Left Sapheno Varix	..	..	..	..	1

LYMPHATIC SYSTEM

Ileo-cæcal Adenitis	..	..	..	..	3
Cervical Adenitis	..	..	..	..	1
Lymphadenitis ..	..	..	..	..	1

LOCOMOTOR SYSTEM

Bones :

Second Deposit Vertebra	..	..	..	..	1
Osteomyelitis ..	..	..	..	..	12
Fractured Tibia and Fibula	..	..	..	..	1

Joints :

Infective Arthritis of Knee	..	..	..	..	2
Popliteal Abscess	..	..	..	..	1
Staphylococcal Arthritis of Knee	..	..	..	..	1
Sprained Tarsal Joint ..	..	..	..	..	1
Acute Prepatellar Cellulitis	..	..	..	..	1

Muscles and Tendons :

Ganglion of Foot	..	..	..	..	1
Tenosynovitis of Foot	1
Chronic Myositis	1

Bursa :

Acute Prepatellar Bursitis	5
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ENDOCRINE SYSTEM

Thyroid :

Adenoma of Thyroid	3
Cyst of Thyroid	3
Nodular Goitre	3
Toxic Goitre ..	..	..	..	..	7
Thyrotoxicosis	..	..	..	..	4
Calcified Foetal Adenoma	..	..	..	..	1

Spleen :

Splenic Infarction	..	..	..	..	1
Acholuric Jaundice	..	..	..	..	1

NECK

Tuberculous Glands of Neck	..	..	..	1
Cervical Abscess	..	..	..	1
Adherent Neck Scar	..	..	..	1
Carbuncle of Neck	..	..	..	1

MAMMARY GLANDS

Carcinoma of Breast	..	..	..	14
Breast Abscess	..	..	..	18
Acute Mastitis	..	..	..	3
Cellulitis of Breast	..	..	..	1
Cyst of Breast	..	..	..	1
Fibro-Adenoma of Breast	..	..	..	2
Fibroma of Breast	..	..	..	1

SKIN AND SUBCUTANEOUS TISSUES

Cellulitis of Leg	..	..	..	10
Furuncle of Face	..	..	..	2
Subcutaneous Abscess Left Thigh	..	..	..	3
Ulcer Sole of Foot	..	..	..	3
Cellulitis Forearm	..	..	..	3
Cellulitis of Finger	..	..	..	1
Submaxillary Abscess	..	..	..	2
Inguinal Abscess	..	..	..	2
Ulcer of Leg	..	..	..	10
Carbuncle of Neck	..	..	..	1
Syphilitic Ulcer of Leg	..	..	..	1
Burn of Foot	..	..	..	1
Furuncle of Arm	..	..	..	1
Septic Umbilicus	..	..	..	1
Gangrene of Foot	..	..	..	4
Burns of Shoulder	..	..	..	1
Abscess of Scalp	..	..	..	1
Scald of Thigh	..	..	..	1
Sub-clavicular Abscess	..	..	..	1

HAND AND FINGERS

Paronychia Finger	..	..	..	4
Epithelioma of Hand	..	..	..	1
Cellulitis Thumb	..	..	..	1
Sub-inguinal Phlegmon	..	..	..	3
Hæmatoma	..	..	..	1
Lacerated Finger	..	..	..	2

Carbuncle Finger	1
Septic Finger	1
Phlegmon Terminal Phalanx Thumb	2

GENITO-URINARY SYSTEM

Kidney :

Chronic Pyelitis	3
Ruptured Kidney	2
Renal Colic	2
Carcinoma of Kidney	1
Polycystic disease of Kidney	1
Tuberculous Kidney	2
Papilloma of Kidney	1
Hydronephrosis	1
Acute Nephritis	1
Calculus Pyonephrosis	1
Renal Calculus	1
Perinephritis	3
Laceration of Kidney	1
Pyonephrosis	1
Stone Rt. Kidney	1
Rt. Double Kidney	1

Ureter :

Stone Rt. Ureter	1
Ac. Ureteritis.. .. .	1

Bladder :

Carcinoma of Bladder	5
Papilloma of Bladder	10
Retention of Urine	1
Fibrosis Bladder Neck	1

Prostate :

Enlarged Prostate	35
Fibrous Prostate	4
Adenoma of Prostate	1
Carcinoma of Prostate	3

Urethra :

Carcinoma of Urethra	1
Stricture of Urethra	1
Fistula	1

Testicle :

Partially Descended Testicle	..	..	..	2
Hydrocele T.V. Testis	..	..	..	3
Acute Balanitis	..	..	..	1

Epididymis :

Varicocele	..	..	..	2
Tuberculous Epididymis	..	..	..	2
Cyst of Epididymis	..	..	..	2
Epididymitis	..	..	..	2
Epididymo-orchitis	..	..	..	2

Penis :

Carcinoma of Penis	..	..	..	2
Urinary Investigation	..	..	..	6

MISCELLANEOUS

Abdominal Investigation	..	..	..	63
Sub-pericranial hæmatoma	..	..	..	1
Laceration of Scalp	..	..	..	1
Concussion	..	..	..	1
Ulcer of Abdominal Wall	..	..	..	1
Actinomycosis Chest and Buttock	..	..	..	1
Abscess Rt. Groin	..	..	..	3
Scar of Nose	..	..	..	1
Fracture of Skull	..	..	..	1
Septic Laceration of Foot	..	..	..	1
Rodent Ulcer Ear	..	..	..	1
Septic Ankle	..	..	..	1
Bruise Chest	..	..	..	1
Bruise Face	..	..	..	1
Carbuncle of Back	..	..	..	2
Traumatic Infective Gangrene of Leg	..	..	..	1
Carbuncle of Neck	..	..	..	1
Ruptured Thoracic Aorta	1

EAR, NOSE AND THROAT AND EYE CASES

Total treated for Year	136
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ORTHOPAEDIC CASES

Total Treated for Year (excluding Service cases)	178
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DEPARTMENT OF OBSTETRICS AND GYNAECOLOGY

(Mr. D. R. CAIRNS, M.R.C.O.G.)

The policy of limiting the number of confinements in hospital to approximately 1,000 per annum has had to be continued, so that many expectant mothers who wished to be delivered in hospital have had to be refused.

Nine hundred and sixty-six cases were delivered. There was one maternal death, giving a satisfactorily low maternal death rate, considering the fact that in hospital the percentage of abnormal cases is above the average. It must be pointed out, however, that one case of Septicæmia probably owes her life to penicillin, and during the year other cases have benefitted from its administration.

Throughout this year the analgesic, Trilene, has been employed to alleviate the pains of labour. This is a great advance on the methods hitherto in use.

The number of gynæcological cases continues to increase. This is particularly noticeable at the out-patient clinic. The number of operations has steadily risen from 144 in 1941 to 465 in 1945.

Ante-Natal Clinic :		1944	1945
Total number of sessions	—	—	206
Total number of first examinations ..	1,065	1,031	
Total number of attendances	8,424	8,019	

Post-Natal Clinic :			
Total number of sessions	—	—	52
Total number of attendances (includes Gynaecological Out-patients) ..	—	—	1,148

Maternity Department :			
Number of Maternity Beds provided ..	45	45	
Number of cases delivered	1,034	966	
Number of cases notified as Puerperal Pyrexia	13	10	
Number of cases notified as Ophthalmia Neonatorum	Nil	Nil	
Maternal deaths	2	1	

Cause of Maternal Deaths :			
Surgical Shock ; Cæsarean Section :			
Stillbirths	44	44	
Neo-natal deaths	38	39	

Abnormal Deliveries :			1944	1945
Breech Presentation .. .. .	..	..	28	33
Forceps Deliveries .. .. .	..	..	57	48
Cæsarean Sections .. .. .	..	..	25	28
Retained Placenta .. .. .	..	..	9	12
Ante-natal cases admitted for treatment ..			133	131

Gynaecology :

Total number of patients admitted ..			389	415
Abortions .. .. .	..	..	119	
Miscellaneous .. .. .	..	..	296	

Operations :

Cæsarean Sections .. .. .	..	..	25	28
Total Hysterectomy .. .. .	..	..	—	26
Sub-total Hysterectomy .. .. .	..	..	—	14
Wertheim's Hysterectomy .. .. .	..	..	—	1
Myomectomy .. .. .	..	..	—	10
Removal of Ovarian Cyst .. .. .	..	..	—	15
Salpingectomy .. .. .	..	..	—	11
Pre-sacral Neurectomy .. .. .	..	..	—	1
Colpo-perineorrhaphy .. .. .	..	..	—	33
Amputation of Cervix .. .. .	..	..	—	14
Radical Vulvectomy .. .. .	..	..	—	1
Evacuation of Uterus .. .. .	..	..	—	92
Diagnostic Dilatation and Curettage ..	..	..	—	47
Miscellaneous .. .. .	..	..	—	190
Total .. .. .	..	..	376	465

DEPARTMENT OF PATHOLOGY

(LABORATORY REPORT)

(Dr. R. S. WALE, M.D.)

Dr. Kelen joined the staff as Assistant Pathologist on January 1st. Further appointments of junior and senior technicians have been made during the course of the year.

The Department continued to dispense penicillin and to maintain the blood bank.

General Examinations	29,855
Blood Transfusions given	350
Blood Donors used	1,111
Histological Examinations	973
Post-mortem Examinations performed	218
Wasserman Reactions	2,216
Specimens examined at Outside Laboratories for the Area Laboratory	547

DEPARTMENT OF RADIOLOGY

(Dr. D. FORBES LAWSON, M.A., M.B., D.M.R.E.)

	1944	1945
Number of cases radiologically diagnosed..	4,167	5,832
Number of cases treated (Superficial X-ray Therapy)	75	80

ANALYSIS OF CAUSES OF DEATH

Disorders of Alimentary System	105
„ „ Bones and Joints	2
„ „ Circulatory System	107
„ „ Ear, Nose and Throat	3
„ „ Genito-Urinary System	40
„ „ Hæmopoietic System	7
„ „ Metabolic and Endocrine System	8
„ „ Nervous System	63
„ „ Respiratory System	91
„ „ Skin	—
General Infections	8
Maternity and Gynæcological	8
Mental Disorders	—
Nutritional and Congenital Defects	39
Orthopædic	3
Poisonings, Intoxications, etc.	—
Miscellaneous	4
Total	488

Report on Maternity and Child Welfare for the year 1945.

By

E. B. BERENICE HUMPHREYS, M.B., Ch.B.(Edin.)

Maternity and Child Welfare Medical Officer.

COMMENTS BY THE MEDICAL OFFICER OF HEALTH

The work of the Maternity and Child Welfare Department, as outlined in Dr. Humphreys' report, has continued during 1945, though under difficulties.

Shortage of staff, particularly of Health Visitors and Midwives, has been of outstanding importance during the year, affecting the work of the whole Department. Unfortunately, this situation is not unique, and in most parts of the Annual Report I have to record similar difficulties. The staff has worked manfully to maintain the service but it is sincerely to be hoped that the position will soon be eased and the strain relieved.

The infant mortality rate (at 54.3) shows a fairly substantial rise over recent years. It is worth noting that of the total deaths under one year, viz., 268, no less than 123, or nearly half, were due to causes operating before birth, an obvious line for research and attack.

Forty-three deaths were caused by "diarrhœa." This figure has shown an unwelcome tendency to increase of late years. "D and V" used to be one of the great killing agencies of early childhood, but with the advent of the motor car and the removal of much of the horse-drawn traffic from the streets, with its coincident accumulations of fly-infested manure, the incidence of this condition was much reduced.

Is the picture changing, and, if so, what is the cause? On all hands we hear complaints of an increased fly nuisance and unless the food of the infant is scrupulously looked after, flies mean disease. While we can accept the pig-bin as a necessary war evil and an evil that in these times of "peace" must still be borne, undoubtedly it should cease at the

earliest possible moment. Unless the greatest care is exercised—and who among us has not seen the overturned bin, the bin with lid off inviting the visit of that deadly enemy of mankind, the domestic housefly—any accumulation of foodstuffs is bound to breed pestilence and perhaps death. The frequent spraying of the pig-bin by D.D.T. spray should be of great help.

Two other matters merit mention. The illegitimate birth-rate indicates that one birth in eight in 1945 was illegitimate—a very high percentage.

The Pre-Nursing Scheme, whereby it was hoped to encourage early entrance to a nursing career, has proved disappointing, only 13 students having enrolled.

The above comments on some of the difficulties of the Service must not be allowed to obscure the enormous volume of really excellent work this Department undertakes. The foundation of the Leicester of the future is being well and truly laid.

Report on Maternity and Child Welfare

for the year 1945.

By

E. B. BERENICE HUMPHREYS, M.B., Ch.B.(Edin.)

Maternity and Child Welfare Medical Officer.

STAFF

Medical Staff

During the absence on active service of Dr. Margaret D. Hird and Dr. Annys M. Cusack, the medical work of the Department has been maintained by the employment of part-time Medical Officers on a sessional basis.

Health Visitors

During 1945, the following Health Visitors left the Department :

Miss C. M. Casson, on the 30th April, 1945, owing to the retirement of her father, who then moved to Cumberland.

Miss E. Mycock, on the 10th September, 1945, on being appointed Superintendent Health Visitor at Warrington.

Miss M. D. Lloyd, on the 31st October, 1945, on being appointed Superintendent Health Visitor at Coventry.

Miss A. M. Williams, who has been on sick leave since August, 1944, is not likely to return to the Department and is seeking other work.

Midwives

Miss K. Hatley joined the staff in November, 1944, replacing Mrs. Faiers, who had resigned and has since returned to the Channel Islands.

Miss I. M. Watt commenced duties in the Department in December, 1944, replacing Mrs. Margaret Howard, who had resigned. Miss Watt left the Service on 30th November, 1945, to join the Colonial Nursing Service.

Miss K. Clarke resigned and left the Service on 30th August, 1945, in order to commence training as a Health Visitor.

Miss Grace Biggin left the Service on 20th December, 1945, to be married.

Miss M. M. Newell was appointed to replace Miss K. Clarke and commenced duties on 8th October, 1945.

Day Nursery Staff

Miss I. R. Cutler, Matron of St. Martin's Day Nursery and Supervisor of the War-time Nurseries, left the Department on the 14th September, 1945, to take up an appointment in a Residential Nursery in Surrey. She was replaced by Miss M. I. Clark, who commenced duties on the 3rd December, 1945.

Health Exhibition

In March of the year under review, a Health Exhibition was arranged for four weeks.

The first week was devoted to Maternity and Child Welfare and included exhibits and cinema films on subjects related to mother and child. A gas and air analgesia demonstration was a popular feature of the Exhibition.

Health Visiting

(Corresponding figures for the previous year are shown in brackets)

Number of first visits to children under one year old	4,865	(5,049)
„ „ revisits to children under one year old ..	14,665	(17,920)
„ „ visits to children one to five years old ..	20,510	(22,827)
„ „ visits to cases of Ophthalmia Neonatorum	42	(32)
„ „ first visits to ante-natal cases	658	(1,145)
„ „ other visits to ante-natal cases	54	(122)
„ „ visits to children under Infant Life Protection Act	991	(854)
„ „ other visits (no access)	7,144	(7,875)
„ „ „ „ (not classified)	2,494	(1,947)
Totals	51,423	(57,771)

The total figures show a very marked decrease in the amount of district work, which was anticipated in view of the continued loss of staff without replacement during the year. With depleted staff, it is the district visiting which inevitably has to suffer. An attempt was made to redistribute the work during the year and Health Visitors concentrated on first visits to newly-born infants, arranging their revisits to these children and visits to older children according to the home circumstances.

The Health Visitors ceased to staff the 11 Vitamin Distributing Centres during the year in order to devote themselves to district work, otherwise the decrease in the amount of this work would have been even greater.

Attendance of Health Visitors at Clinic sessions :—

Infant Welfare Centres	2,212	(2,299)
Ante-Natal Clinics	1,194	(1,078)
Post-Natal Clinics	50	(70)
Birth Control Clinic	98	(103)

The attendances of Health Visitors at Clinics has been maintained, but it has not been possible to ensure that two Health Visitors attended each clinic throughout the year.

ANTE-NATAL CLINICS

The number of ante-natal sessions held and the attendances during 1945 was as follows :

(Corresponding figures, where available, for the previous year are in brackets)

Clinic	No. of Sessions	ATTENDANCES			
		First Visits	Re-Visits	Total	Avg. per Session
Cort Crescent	51 (51)	183 (202)	965 (923)	1148 (1125)	23
13 Crescent Street	48 (49)	266 (365)	1116 (1210)	1382 (1575)	29
119 Highcross St.—Wed.	51 (51)	255 (407)	989 (1640)	1244 (2047)	24
—Friday	51 (44)	214 (133)	1253 (592)	1467 (725)	29
Belgrave Hall—Monday	47 (48)	136 (271)	558 (997)	694 (1268)	15
—Wednesday	51 (51)	204 (197)	868 (879)	1072 (1076)	21
Newby Street—a.m.	51 (51)	192 (358)	687 (1529)	879 (1887)	17
—p.m.	51 (18)	133 (42)	716 (253)	849 (295)	17
St. Christopher's—a.m.	51 (51)	100 (125)	609 (811)	709 (936)	14
—p.m.	51 (51)	184 (193)	777 (828)	961 (1021)	19
Braunstone	47 (48)	144 (221)	787 (1010)	931 (1231)	20
Totals	550 (513)	2011 (2514)	9325 (10672)	11336 (13186)	21
Municipal Maternity Home	99 (101)	353 (377)	1848 (1880)	2201 (2257)	22
City General Hospital	206 (156)	1031 (1065)	6988 (7359)	8019 (8424)	39
Leicester and Leicestershire Maternity Hosp.	146 (153)	1068 (925)	5671 (6834)	6739 (7759)	46
Royal Infirmary	52 (104)	296 (350)	165 (160)	461 (510)	9
Totals	1053 (1027)	4759 (5231)	23997 (26905)	28756 (32136)	27

The following are particulars concerning the source of the new patients who attended the *district* clinics :

(The corresponding figures for the previous year are in brackets)

CLINIC	Referred by								Totals
	Health Visitors	Mid-wives	Doctors	Ex-patients or friends	City General Hosp.	Other Sources	Other Clinics	Came of own accord	
Cort Crescent ..	31 (27)	64 (38)	1 (2)	25 (10)	1 (2)	1 (11)	3 (2)	57(110)	183 (202)
13 Crescent Street ..	6 (21)	123 (105)	7(24)	9 (15)	6 (9)	16(43)	7 (4)	92 (84)	266 (365)
119 Highcross St.— Wed.	9 (14)	88 (152)	19(15)	29 (31)	21(20)	13(49)	8 (1)	68(125)	255 (407)
Friday	10 (8)	103 (65)	11 (4)	32 (2)	2 (8)	3(20)	11(2)	42 (24)	214 (133)
Belgrave Hall ..	13 (36)	182 (206)	7 (20)	16 (44)	17(22)	5(28)	7 (9)	93(103)	340 (468)
Newby Street ..	35 (32)	116 (167)	12(23)	44 (34)	22(20)	15(53)	8(12)	73 (59)	325 (400)
St. Christopher's ..	15 (47)	203 (224)	5 (4)	5 (3)	7(15)	6 (3)	1 (5)	42 (17)	284 (318)
Braunstone ..	3 (11)	116 (143)	1 (9)	1 (3)	3 (3)	4(29)	6(10)	10 (13)	144 (221)
Totals ..	122(196)	995(1160)	63(101)	161(142)	79(99)	63(236)	51(45)	477(535)	2011(2514)

The attendance at the district clinics shows that the excessive work of the previous year has decreased and has now reverted to the level of former years.

The clinic work at the various sessions has now been somewhat equalised since the opening of additional sessions during the previous year.

MIDWIVES

During the year 1945, 99 midwives notified their intention to practise. Of these, 22 were Municipal Midwives, one relief Municipal Midwife, 16 were midwives in independent practice, and the remaining 60 were practising in maternity hospitals or maternity homes.

THE MUNICIPAL MIDWIFERY SCHEME

The organisation of this service, which was summarised in the Annual Report for 1938, remains essentially the same. Twenty-one midwives serve the city, which is divided into eight areas, each served by a team of one to four midwives.

The figures for 1945 show that there was a considerable decrease in the number of cases attended by Municipal Midwives, 186 less than in 1944, but still about 100 more than in 1943 when it was noted that this was in excess of the optimum number.

1945 was a difficult year for the Service because the staff, in general, had been overworked and owing to the difficulty of equalising the work in certain areas, there has been a gross overloading of some midwives.

A considerable amount of sick leave amongst midwives occurred, probably accentuated by the strain of working and the war years. Owing to the impossibility of obtaining relief when a midwife is on

sick leave, other members have the extra work to accomplish and this tends to lower their resistance to illness, thus a vicious circle is set up.

There was also an increase of infective conditions for which midwives had to be suspended from duty.

Attempts to obtain temporary relief midwives were not successful.

SUMMARY OF WORK DONE BY MUNICIPAL MIDWIVES IN 1945

Area	No. of Midwives	Cases Attended	Gas and Air Administered	VISITS		
				Post-Natal	Ante-Natal	Total
1	4	252	125	6,855	1,260	8,115
2	4	296	178	7,655	1,749	9,404
3	2	183	48	4,939	1,327	6,266
4	2	200	38	5,368	621	5,989
5	4	267	150	6,663	950	7,613
6	2	133	2	3,178	440	3,618
7	2	178	22	3,513	471	3,984
8	1	76	10	1,782	352	2,134
Relief	1	48	—	2,333	40	2,373
Grand Total		1,633	573	42,286	7,210	49,496

During the year it was decided to appoint an additional full-time midwife to do relief work anywhere in the City and also a whole-time midwife to serve in the Area No. 4 (Central). These appointments have not yet been made owing to shortage of midwives, and one midwife, who has left the Service, has not yet been replaced.

Analgesia

There is an increase in the number of cases for which gas and air analgesia was administered, from 219 in 1944 to 573 in 1945.

This was to be expected as midwives became more used to the new arrangements.

The latest scheme of obtaining the apparatus and, if necessary, the "second person" from the City Ambulance Service, is working well.

Analgesia could be used much more often if the midwives were not working under such pressure.

It is to be noted that in Area No. 2, where most use was made of the analgesia, each midwife usually has a student-midwife and is, therefore, not under such pressure of work.

Circular 20/44 of the Ministry of Health, dated 22nd March, 1944

In accordance with the above Circular, detailed information is now obtained concerning any infant whose birth weight was $5\frac{1}{2}$ lbs. or less.

Particulars are included in the Maternity and Child Welfare return and show that there were 423 such infants born in 1945, of whom 328 were known to have survived their birth up to four weeks.

OBSTETRIC CONSULTANTS

During 1945, a consultant was called in to two emergencies only namely, one case of continued pyrexia and one of primary uterine inertia.

PUERPERAL PYREXIA

During the year there were 157 notifications of Puerperal Pyrexial and the following table shows the place of confinement and of treatment, with the results of treatment. The figures include 53 cases of abortion. The policy of removal of all cases of potential sepsis to the puerperal fever unit of the City Isolation Hospital has been maintained and the results obtained fully justified the procedure.

OPHTHALMIA NEONATORUM

The following details show the incidence and results of treatment of this disease of the new-born during 1945 :

OPHTHALMIA NEONATORUM 1945

Cases notified during year	25
Visited by Health Visitors	25
Removed to hospitals	10
Treated in hospital	10
Result of Treatment :	
Vision unimpaired	24
,, impaired	—
,, lost	—
Still under treatment at end of year	—
Patients died	1
Removed from district	—
Total	25

Notifications and Result of Treatment.
1945.

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TABLE 5.

LIST OF REGISTERED NURSING HOMES

(INCLUDING MATERNITY HOMES.)

ADDRESS.						NO. OF BEDS.
9 Mere Road	..	..	..	..	..	1
66 Uppingham Road	..	..	..	..	..	4
56 Clarendon Park Road	..	..	..	..	..	17
348 Aylestone Road	..	..	..	..	..	15
306 Aylestone Road	..	..	..	..	..	2
Stoneygate Nursing Home, Stoneygate Road	..					10
39 Scraftoft Lane	..	..	..	..	..	8
"Broadview," Goodwood Road	..	..				5
337 Fosse Road North	..	..	..	..	..	14
"Clifton Nursing Home," 58 Fosse Road Central	..					7
Central Nursing Home, 6 University Road	..					15
350 Aylestone Road	..	..	..	..	..	8
The Laurels, 185 Uppingham Road	..	..				8
Sundial Nursing Home, Aylestone Road	..					17
85 Narborough Road	..	..	..	..	..	10
St. Francis Private Hospital, 362 London Road	..					26
St. Mary's Nursing Home, 71 Abbot's Road	..					4
Springfield Nursing Home, 271 London Road	..					8
The Woodlands Nursing Home, Uplands Road, Groby Road	..	..	..	..	..	3
Springfield Road Rest Home, 35 Springfield Road	..					4

REGISTERED NURSING HOMES

Concerning the ascertainment of Homes which may not be registered, this matter is kept constantly in mind and all domiciliary births which take place at addresses other than home addresses are carefully scrutinised and then followed up by the Health Visitor.

During the year, many births took place at the homes of friends and neighbours owing to lack of domestic help in the homes and the absence of husbands on active service.

MUNICIPAL MATERNITY HOME

The number of confinements at the Home during 1945 was 419, as compared with 428 during the previous year. The corresponding figures for the previous five years were :

1940	1941	1942	1943	1944
358	353	416	420	428

The ante-natal clinic is held twice weekly in the centre of the City, as facilities at the Home proved inadequate.

Staff

Dr. T. W. Allen continues as Medical Officer on call for the Home on a part-time salaried basis.

TRAINING OF PUPIL MIDWIVES

The scheme for the training of pupil midwives remains the same as that described for the year 1938, and the number of pupils accepted for training during the year under review was :

		Part I.	Part II.
Number of Pupils in training at beginning of 1945	..	52	15
„ „ „ accepted for training during 1945	..	77	24
„ „ „ who commenced training	..	69	24
„ „ „ who completed training and successfully passed examination at first attempt	..	66	20
„ „ „ who failed to pass examination, but re-sat and passed	..	7	4
„ „ „ who completely failed	..	6	—
„ „ „ in training at end of 1945	..	32	12
„ „ „ who did not complete training	..	8	1

TABLE 6. MUNICIPAL MATERNITY HOME

Return relating to Maternity Homes maintained or subsidised by the Council, as required by the Ministry of Health, for year 1945.

FORM M.C.W. 96a.

1.	Name and address of Institution :	
	Municipal Maternity Home, Westcotes Drive, Leicester.	
2.	Number of beds in the Institution (exclusive of isolation and labour beds) at 31st December, 1945	25
2a.	Number of beds, if any, included under item 2 which have been allocated to, and reserved for, expectant mothers in need of Hospital treatment	3
3.	Number of maternity cases admitted during the year :	
	Patients	419
3a.	Number of women treated during the year in the beds shown against item 2a. (These women should be included also against item 3)	21
3b.	Average duration of treatment of Expectant Mothers in beds shown against item 2a	4.05 days
4.	Average duration of stay of cases included against item 3. .	14.5 days
5.	Number of cases delivered by :	
	(a) Midwives	346
	(b) Doctors	73
6.	Number of cases in which medical assistance was sought by a midwife in emergency	211
7.	Number of cases admitted after delivery	1
8.	Number of cases notified as :	
	(a) Puerperal Fever	—
	(b) Puerperal Pyrexia	4
9.	Number of cases of pemphigus neonatorum	—
10.	(a) Number of infants who have at any time received a supplementary or complementary feed while in the Institution	37
	(b) Number of infants wholly breast-fed on leaving Institution	365
11.	(a) Number of cases notified as ophthalmia neonatorum. .	—
	(b) Result of treatment in each case	—
12.	(a) Number of maternal deaths	1
	(b) Cause of death in each case "Obstetric Shock" ..	
13.	(a) Number of stillbirths	12
	(b) Cause of death in each case and results of post-mortem examination (if obtainable) :	
	Prematurity	2
	Intra Cranial Haemorrhage	2
	Asphyxia Pallida	1
	Macerated	1
	Anencephalic	1
	Breech (Twins)	5
14.	(a) Number of infant deaths within 10 days of birth ..	3
	(b) Cause of death in each case and results of post-mortem (if obtainable) :	
	Intra Cranial Haemorrhage	1
	Congenital Malformation Heart	1
	Prematurity	1

POST-NATAL CLINIC

The only Post-Natal Clinic, opened in 1938, is limited to women confined in the Municipal Maternity Home.

The following figures give details of attendances during 1945 and of treatment carried out when found necessary :

Number of new patients invited	354
Number of new patients attending (i.e., first visits) ..	252
Number of patients who paid second visit	25
Number of patients who paid third visit	38
Total attendances (first and subsequent visits) ..	342

Of the new patients examined at first visit :

Found to be normal	162
Found to be abnormal	90
Not examined	—

Treated and advised at Clinic :

Cauterised	54
Advised at Clinic re future treatment	12
Referred to own doctor re treatment	16
Failed to return	8

Of patients referred to own doctor :

Referred back for surgical treatment in hospital ..	2
Referred back for treatment at Clinic and pessary fitted at own doctor's request	7
No report available	1
Treated by own doctor	6
Total	16

A written report and request for treatment at the clinic is sent to the patient's own doctor before this is undertaken. The figures show that this method is acceptable to the private doctor.

BIRTH CONTROL CLINIC

The following figures refer to the year 1945 :

	<i>City</i>	<i>County</i>	<i>Total</i>
Number of patients who sought advice ..	156	66	222
" " were accepted for advice	140	62	202
" " were refused advice ..	16	4	20

Concerning the 202 women accepted for advice, the following are the medical reasons for which the advice was given :

Husband :				City	County	Total
Active Tuberculosis	..	..	..	3	1	4
Other diseases	..	..	..	5	2	7
Patient :						
Nervous debility	..	..	..	8	1	9
General debility	..	..	..	43	20	63
Anaemia	..	..	..	5	4	9
Pulmonary Tuberculosis	..	..	..	11	5	16
Heart disease	..	..	..	4	2	6
Kidney Trouble	..	..	..	3	—	3
Albuminuria of pregnancy	..	..	..	1	1	2
Toxaemia of pregnancy	..	..	..	9	9	18
Obstetric complications	..	..	..	19	8	27
Gynaecological conditions	..	..	..	9	3	12
Various other conditions	..	..	..	20	6	26

Cases in which advice was refused

Advice was refused to 20 women (16 City and four County). In 17 of the women there were no medical grounds for contraception, one woman was advised re sterility, one was advised concerning a gynaecological condition, and one was advised concerning pregnancy.

SCHOOLS FOR MOTHERS AND INFANT WELFARE CENTRES

An additional session was established at Evington Village in June, in response to requests from the mothers in the district, but after ten months' trial the attendance was so poor that the session was discontinued.

The appointment basis continues and, in general, has worked well.

Medical staffing has been maintained by using part-time medical practitioners in place of whole-time staff called up for military service.

By this means, out of 1,185 sessions held, only 62 did not have the services of a doctor.

(Corresponding figures for the previous year in brackets)

Number of Infant Welfare Centres	23	(22)	
" " Medical Weekly Sessions	25	(24)	
Number of Sessions held ..	1,185	(1,199)	
Total attendances of Mothers	55,064	(60,647)	
Total attendances of Children :			
Under one year old ..	41,809	57,567	(47,298) } (64,067)
Over one year old ..	15,758		
First visits of Children :			
Under one year old ..	3,708	4,289	(4,460) } (5,207)
Over one year old ..	581		
Number of Children attending :			
Under one year old ..	3,176	8,720	(3,999) } (9,452)
Over one year old ..	5,544		
Number of Sessions at which a doctor was present ..	1,123		(1,173)
Number of children seen by a doctor	22,897		(25,475)

The figures show :

- (1) That the number of sessions and the medical staffing have been maintained.
- (2) That the total attendances of mothers have decreased by 5,583 and have assumed a more usual figure. The increase in 1944 was due largely to evacuees.
- (3) The total first visits and re-visits show a corresponding reduction for the same reason.
- (4) The absence of a doctor from only 62 sessions out of 1,185 sessions is satisfactory.
- (5) The average number of children seen by a doctor at each session was 20, as compared with 22 during the previous year.

Diphtheria Immunisation

Facilities are available at all Infant Welfare Centres and also at one Central Clinic each week for Diphtheria Immunisation.

In addition, during the year, it was decided to offer a "boosting" dose to all immunised children when they entered school. This has led to an increase in the work and additional sessions are held at school premises or elsewhere as required.

INFANTS' MILK DEPOT

The work of this Depot at 13 Crescent Street continues unchanged. Vitamin products are distributed from this Centre.

PROMOTION OF CLEANLINESS AND GOOD HABITS AND THE ELIMINATION OF VERMINOUS CHILDREN

(Circular 2,831 of the Ministry of Health, dated July, 1943)

Ascertainment

Since the receipt of this Circular, Health Visitors now include the examination of children's heads as part of their routine work, both in the homes and at clinics.

The Health Visitor's approach is on individual and family lines rather than by the method of collective teaching.

The classification used is that any child who on three or more occasions is found to have vermin or many nits in the hair is considered to be verminous.

It was not anticipated that the number of such children, under 5 years of age, would be large, but to ensure the inclusion of all such children, collaboration is maintained with the School Medical Service Department, who supply particulars of persistently verminous school children so that special attention is paid to any children under 5 years in such families.

The number of children under five years of age known to the Department to be persistently verminous during the year under review was 16. and, in general, they belonged to families where the mother was not unduly concerned about the presence of head lice.

The Method of Cleansing

Comparative methods were undertaken by the School Medical Service Department where the problem was of greater magnitude and the recommendation of the School Medical Officer as to the most satisfactory method was adopted for the children under five years of age, viz., mechanical removal of lice and nits by a steel comb.

A stock of steel combs is therefore kept in the Department and combs are available on demand.

No Cleansing Station, as such, has been provided in the area as it has been considered that the onus of cleansing the child should be placed on the parents, but in selected cases where domestic difficulties have been present, the Cleansing Centre established under the Scabies Order has been used for certain verminous children.

TREATMENT AT SCHOOL CLINICS

No change except as shown hereunder.

Dental Clinic

Details of the work done during the previous year are set out below :

(The corresponding totals for the previous year are shown in brackets)

		<i>Children under 5 years</i>	<i>Adults</i>	<i>Total</i>	
Number of cases treated ..	48	167	215	(330)	
Number of attendances ..	54	685	739	(1,267)	
Extractions—Permanent teeth ..	—	941	941	(1,753)	
Temporary teeth	68	—	68	(77)	
Anaesthetics—Local ..	38	195	233	(384)	
Gas ..	1	18	19	(32)	
Fillings—Permanent teeth ..	—	30	30	(111)	
Temporary teeth ..	—	—	—	(3)	
Scalings ..	—	22	22	(30)	
Dentures ..	—	136	136	(205)	
Prosthetic dressings, etc. ..	2	299	301	(498)	
Repairs, etc. ..	—	7	7	(7)	
Consultations ..	13	43	56	(86)	
Number of sessions held ..	—	—	89	(145)	

Artificial Sunlight

There were 185 children treated, 92 completed treatment, and 37 children were still under treatment.

Results of treatment :

		<i>Good Results</i>		<i>Fair or Unchanged</i>		
		<i>Boys</i>	<i>Girls</i>	<i>Boys</i>	<i>Girls</i>	<i>Total</i>
Debility ..	14	18	2	—	34	
Anaemia ..	4	5	—	—	9	
Rickets ..	19	10	—	—	29	
Bronchial Catarrh ..	6	4	—	—	10	
Various ..	4	6	—	—	10	
	—	—	—	—	—	
Totals ..	47	43	2	—	92	
	—	—	—	—	—	

Orthopaedic Clinic. No change.

Other School Clinics

There were 141 children under five years of age admitted to the Ear, Nose and Throat Clinic, 161 to the Eyes Clinic, and 139 to the Skins and Minor Ailments Clinic.

DAY NURSERIES

The war-time Day Nursery Scheme was outlined in my report for 1941. Later, the Ministry of Health recommended the establishment of three additional hutted Nurseries. During the year two of these were completed and opened, namely, Bedford Street in October, and Sparkenhoe Street in December. Consequently, the Nurses' Home at 100 Welford Road has proved inadequate and is frequently overcrowded.

Before the third hutted Nursery could be opened, additional accommodation for staff would be necessary.

The attendances at each Nursery are detailed below :

Attendances :			<i>Whole Day</i>	<i>Half Day</i>	<i>Daily Average</i>
St. Martin's	..	..	12,041	1,452	48
Glen Street	..	..	11,283	980	40
Humberstone Road	..	..	7,729	1,032	31
Fosse Road	..	..	7,039	858	28
Narborough Road	..	..	6,982	664	27
Fairway	..	..	7,803	879	31
New Walk	..	..	6,539	604	26
Bradgate Street	..	..	7,560	504	29
College Street	..	..	6,819	683	27
Belgrave House	..	..	9,620	853	38
Bedford Street (opened 8th October, 1945)	..	..	1,827	205	28
Sparkenhoe Street (opened 10th December, 1945)	..	..	219	19	15

All existing Nurseries are working to capacity and many have waiting lists which there is no hope of reducing.

The question of the staffing of the Nurseries has been precarious, but it has been possible to maintain a State Registered Nurse and Nursery Trained Nurses and Student Nurses at all the Nurseries.

There is a shortage of Nursery Assistants on the educational side and some Nurseries have been without an educational worker throughout the year.

The Educational Supervisor has not been replaced. This aspect of the work in the Nurseries will require attention in view of the new training scheme for Nursery Nurses under the Ministry of Health and Ministry of Education which will supersede the existing National Association of Children's Nurseries in the Autumn of 1946.

PRE-NURSING SCHEME

This scheme has been in operation for a year and, on the whole, the response has been disappointing. The total number of students accepted for the Course was 13.

Residential Nursery

During the year, premises were secured and the equipment has been ordered so that it is hoped that the opening of this very necessary service will not be delayed.

CHILD LIFE PROTECTION

The work is carried on by one Health Visitor only and it occupies most of her time.

The following is a summary of the work :

Visits	991
Applications for registration ..	123
Applications refused	4
Legal proceedings	Nil
Number on register at 31st December, 1945	68 persons (72 children)

The cases in which registration was refused were followed up and alternative provision found for the child, without legal proceedings being necessary. This may mean that the child remains for some considerable time with the foster parent who has been refused registration, but the interests of the child are safeguarded in all cases.

CIRCULAR 2866 OF THE MINISTRY OF HEALTH, dated October, 1943

The Care of Illegitimate Children

In accordance with the provisions of the above Circular, a scheme has been in operation since 1st April, 1944, in collaboration with the Diocesan Moral Welfare Association.

Full particulars were given in last year's report.

Analysis of work done for the year 1945 is as follows :

Number of illegitimate births notified to the Moral Welfare Association	654
Number of girls sent to Homes and Hostels prior to the birth of their children	18
	<hr/> 672 <hr/>
1. At present living in their own homes with their children	134
Helped in various ways : Legal help and advice given. Some applicants reconciled after quarrels with family. Thirteen had been in lodgings, but are now at home. Fifteen are receiving grants from voluntary societies.	
2. Living in Lodgings with their children ..	12
Thirteen others had been in lodgings during the year. Three received temporary financial help from the Health Department. Twenty-four children from Categories 1 and 2 have had accommodation in Day Nurseries.	
3. Sent to Maternity Homes and Hostels ..	19
Eighteen before and one after birth of babies. Health Department paid for four.	
4. Foster Homes. Children at present accommodated	5
Seven others had been boarded out during the year.	
5. Institutions. Children admitted	5
6. Adoption—Through Adoption Society ..	40
Privately arranged	21
	<hr/> 61 <hr/>
Seven previously <i>boarded out</i> .	
7. Domestic Work with Baby	3
Posts found for mothers, one mother returned to her parents with the child when baby ten months old.	
8. Did not belong to the City of Leicester and were transferred elsewhere	58
9. Children died	34
10. Health Visitor reported "No help required at present"	315
11. Offers of help and advice made by Moral Welfare Association, but not accepted by applicants. Cases in abeyance	26
Total	<hr/> 672 <hr/>

It is noteworthy that the amount of material help given is comparatively small.

This branch of the work would be greatly assisted by the opening of a Residential Nursery.

ADOPTION OF CHILDREN (REGULATION) ACT, 1939

The Leicester Diocesan Moral Welfare Association continues as the Registered Adoption Society for the City and County.

Details of the work of the Society during 1945 are as follows :

Applications from persons wishing to adopt a child ..	86
Number of children offered to the Society with a view to adoption	96
Number of children awaiting adoption orders at the end of 1944	24
Number of children placed with a view to adoption ..	71
Number of orders made in respect of children placed ..	62
Number of children placed and awaiting orders at end of year	33

Private Adoptions

The Act permits of adoptions being undertaken privately, information to be supplied to the Department seven days prior to reception.

As the provisions of the Act became more widely known so did notifications, there being 52 in 1945, as compared with three in 1944.

Such children remain under the supervision of the Child Life Protection Visitor until the adoption has been legalised or the child attains the age of nine years.

STATISTICS

Birth Rate

There were 2,509 male births, 2,431 female births, a total of 4,940, giving a birth rate of 19.2 per 1,000 population.

Of the total births, 4,940, 610 were illegitimate (322 males and 288 females), giving an *illegitimate birth rate* of 2.4.

Stillbirths

There were 132 stillbirths, 65 males and 67 females.

Infant Mortality Rate

Number of deaths in infants under 1 year	268
Corrected number of births	4,940
Infant death rate	54.3

The rates for England and Wales and the Great Towns were 46 and 54 respectively.

The total deaths of infants under one year were 268, 140 males and 128 females.

This gives an infant death rate of 54.3 per 1,000 live births.

The main causes of deaths in infants were :

	Males	Females
Pneumonia	26	34
Diarrhoea	28	15
Prematurity	32	28
Congenital causes	34	29
	<hr/> 120	<hr/> 106

Arrangements, as detailed in previous reports, for continuity of supervision throughout the puerperium for those infants and mothers who return home before the 14th day have continued.

Special attention is given to premature infants in accordance with Circular 20/44 of the Ministry of Health.

MATERNAL MORTALITY

Number of deaths during the year	5
From puerperal sepsis	1
From other accidents and diseases of pregnancy and parturition	4
	<hr/>
Total	5

	1945	1944
Rate per 1,000 live and stillbirths	0.99	0.93
Puerperal Sepsis rate	0.2	0.56
Figures for England and Wales :		
Maternal mortality rate .. .. .	..	1.79
Puerperal sepsis rate .. .. .	..	0.49

The above figures agree with the Registrar-General and indicate a satisfactory Maternal Mortality Rate.

E. B. BERENICE HUMPHREYS

July, 1946

TABLE 7. City of Leicester.

INFANT MORTALITY DURING THE YEAR 1945.

Net Deaths from stated Causes at various Ages under 1 year of Age.

CAUSE OF DEATH.	Under 1 Week	1 to 2 Weeks	2 to 3 Weeks	3 to 4 Weeks	Total under 1 Month	1 to 3 Months	3 to 6 Months	6 to 9 Months	9 to 12 Months	Total Deaths under 1 Year
All Causes Certified.	90	11	20	3	124	48	50	30	16	268
Congenital Malformations..	10	1	3	1	15	2	5	3	—	25
Birth Injuries	10	—	2	—	12	1	—	—	—	13
Atelectasis	11	1	—	—	12	—	—	—	—	12
Atrophy, Debility and Marasmus	1	—	—	—	1	1	—	1	—	3
Premature Births	48	3	8	—	59	1	—	—	—	60
Diarrhoea, etc.	—	2	—	—	2	9	19	8	5	43
Convulsions	1	—	—	—	1	—	—	—	—	1
Icterus Neonatorum	—	—	—	—	—	—	—	—	—	—
Pemphigus	—	1	—	—	1	—	—	—	—	1
Rickets	—	—	—	—	—	—	—	—	—	—
Pink Disease	—	—	—	—	—	—	—	—	—	—
Tuberculous Meningitis	—	—	—	—	—	—	—	—	—	—
Abdominal Tuberculosis	—	—	—	—	—	—	—	—	—	—
Other Tuberculous Diseases	—	—	—	—	—	—	—	—	1	1
Meningitis. (Not Tuberculous)	—	—	—	—	—	—	—	—	1	1
Bronchitis	—	—	—	—	—	1	1	1	—	3
Pneumonia (all forms)	2	1	4	1	8	17	14	14	7	60
Whooping Cough	—	—	—	—	—	—	—	1	—	1
Measles	—	—	—	—	—	1	—	1	—	2
Cerebro-spinal Fever	—	—	—	—	—	—	1	—	—	1
Erysipelas	—	—	—	—	—	—	—	—	—	—
Diphtheria	—	—	—	—	—	—	—	—	—	—
Suffocation	—	—	—	—	—	4	2	—	—	6
Other Causes	7	2	3	1	13	11	8	1	2	35

Net Births in the Year { legitimate, 4,330.
illegitimate, 610.

Net Deaths in the Year of { legitimate infants, 234.
illegitimate infants, 34.

Report of the City Analyst

For the Year 1945.

By F. C. BULLOCK, B.Sc., F.R.I.C., P.A.Inst.W.E.,
Public Analyst and Official Agricultural Analyst

FOREWORD BY THE MEDICAL OFFICER OF HEALTH

Once again, Mr. Bullock has to refer to the difficult circumstances under which the work of his department is carried out—difficult by reason of staff changes and difficult because of inadequate laboratory provision. It is to be hoped that both these vexatious questions will soon be resolved with more staff becoming available now that the war is over and with more rooms at Grey Friars becoming devoted to laboratory purposes with the removal of the Maternity and Child Welfare Department to Halford Street.

The results of the Phosphatase test on milk (99.5% correct) are outstanding and a great testimony to the co-operation between Trade and Department.

I would draw special attention to Mr. Bullock's remarks about ice cream. Ice cream is assuming a position of major importance in the nation's dietary and standards of cleanliness and quality are long since overdue. The problem appears to me to resolve itself into two headings: (1) the chemical composition of the article and, more important, (2) its bacterial purity.

Although the question of the chemical quality is primarily not the concern of the Health Department, I cannot agree that we should not be interested. While acknowledging wholeheartedly the difficulties through which the trade is passing, what possible objection could there be to the imposition *now* of a standard for the chemical content of ice cream? What does the phrase "ice cream" mean to the average member of the public? Surely that the article reasonably resembles in fat content the substance known as cream, which is prepared solely from cow's

milk! Why, then, should an article be sold as "ice cream" when it contains perhaps 1/50th of the amount of fat that ordinary cream contains and less than 1/3rd of the much lower percentage of fat that is found in ordinary milk? To me, such an article should be described as a water ice and certainly not as ice cream. I suggest that no ice should be described as ice cream unless it contains at least 8 per cent. of milk fat.

The question of bacterial purity is rather more difficult because there is no known test that can be applied to the finished product that will give a clear indication of the processes through which it has gone, as, for example, the Phosphatase test for pasteurised milk. Research is urgently needed into this problem.

The best thing to do, therefore, until such a test is forthcoming, is to insist on adequate heat treatment of the mix, followed by immediate freezing, with prolongation of the low temperature until the mix is sold to the individual. In this way, pathogenic organisms will be destroyed and re-infection become very difficult.

Report of the City Analyst

For the Year 1945.

By F. C. BULLOCK, B.Sc., F.R.I.C., P.A.Inst.W.E.

Public Analyst and Official Agricultural Analyst

To the Chairman and Members of the Health Committee.

I beg to submit the Annual Report of the work carried out in the City Laboratory, Health Department, for the year 1945.

A total of 4,270 examinations were carried out, as set out in Table A. This, and a number of other tables, are grouped together at the end of the report.

Staff

There are several changes to record during the year under review. Mr. J. V. Smart, A.R.I.C., having obtained his Royal Institute of Chemistry qualification, left the Department in February to take up a responsible position in industry.

Mr. H. M. Bee, having made progress towards his B.Sc. degree, was put on the permanent staff on the resignation of Smart. Later in the year Bee was called up for service in the Royal Air Force.

Mr. T. W. Toseland was engaged as a junior in September on leaving school, in anticipation of the Department losing the services of Bee on his joining the Forces.

Miss M. J. Sowden was engaged as a full-time shorthand typist in January, and resigned as Mrs. Latham in October, soon after her marriage.

After making do with part-time temporary help for some time, we appointed Miss E. Holmes as shorthand-typist in November.

The more progressive and enterprising one's staff, the more one must expect these changes. Such comings and goings, however, do not make for stability and continuity in the work of the Department, and it must be pretty obvious that the year's work was carried through under somewhat unsettled conditions. At the time of writing, Mr. N. Heron,

F.R.I.C., awaits confirmation of his appointment as Deputy to the City Analyst at Portsmouth, and will, therefore, no doubt be leaving the Department in the near future.

Quite recently, also, a letter of resignation was received from Mr. P. G. Wright, another member of the staff away on service. Wright came to me in 1936 at the age of 16, and had become a very useful member of the staff when he was called up to join the Navy in 1941. He is now a much-travelled Lieut. R.N.V.R., and has good prospects elsewhere.

While it is a pleasure to record in these staff notes throughout the years, examination successes, promotions and weddings, knowing their importance to the individuals concerned, one rather hopes that our current experiences are only a temporary phase, and that a state of greater permanence will ensue in the future. Obviously, salary conditions will continue to be an important factor in the future as they have been, presumably, in the past.

Accommodation

Remarks made under this heading in last year's report hold good with one year's added urgency. One or two schemes were considered during 1945, but no change or improvement in accommodation was achieved during the year.

Legal

The year 1945, like the preceding year, produced a number of S. R. & O's controlling the composition and labelling of foodstuffs. The Labelling of Food (No. 2) Order, 1944, S. R. & O. 1447, came into force in various sections between January 1st, 1945, and November 1st, 1945. It provided, among other things, that pre-packed goods must be described in such a manner, both in advertisements and on labels, as to indicate their true nature. Where the quantitative disclosure of the ingredients was not made, the ingredients had to be named in the order of the proportion in which they were used.

The minimum quantity of food had to be stated, and there were special provisions for the declaration of vitamins and minerals.

The following are among the chief other S.R. & O's which came into force during the year :

No. 109. Beef sausage to contain not less than 7% and not more than 8% of low fat soya product. Altered by No. 1491 to contain no soya product at all.

No. 216. Pork sausage to contain no soya product.

No. 238. Uncooked pastry to contain not less than 25% oils and fats.

No. 331. Coffee mixture to contain at least 51% by weight of pure coffee.

No. 389. Liquid coffee essence shall contain not less than 0.5% weight in volume of caffeine derived from coffee, and liquid coffee and chicory essence shall contain not less than 0.25% weight in volume of caffeine derived from coffee.

No. 1177. Salad cream, mayonnaise and any other salad dressing to contain not less than 25% by weight of edible vegetable oil and not less than 1.35% by weight of egg yolk solids.

No. 1491. Beef sausage to contain 40% meat content.

No. 627. This Order prohibits, except under licence, the use of dried egg by way of trade or business in the manufacture (i) of certain specified goods, namely ice cream, synthetic cream and baker's cream filling, and (ii) of products sold in a wet state for use in the manufacture of those foods. The Order also requires manufacturers who include dried egg in a dry mixture intended for the manufacture of any specified food to declare the fact in a prescribed form on the container.

No. 798. Pork sausage to contain 50% of meat, of which at least 80% by weight shall consist of pork.

Milk

A total number of 248 milk samples were received under the Food and Drugs Act for chemical analysis. Of these, 29, or nearly 12%, were reported against—17 for the presence of water, four for fat deficiency, six for inefficient pasteurisation and two for being supplied in dirty bottles. The non-genuine samples are tabulated in Table C. The highest amount of added water detected in any sample was 17%, and the vendor in this case (No. 1749) was fined £15 and £2 2s. 0d. costs. The most serious fat deficiency was 24% (Sample No. 1765). The vendor of No. 401, in which the fat deficiency was 19%, was prosecuted, convicted and fined £5. No preservatives were detected in any of the milk samples tested. In addition to the above official milk samples, 617 others, being samples submitted for bacteriological examination were also examined chemically. When these samples were at fault it was usually fat deficiency in samples of morning milk, due to milking being carried out at unequal intervals, and inefficient bulking of the morning and evening milk together.

The results of bacterial examination of milk samples carried out under the Milk (Special Designations) Order, 1936, are set out in Table E. The results were, on the whole, comparable with those obtained in previous years, except for the high percentage of Accredited milk samples which failed in the Coliform test.

Recent Governments have all been sufficiently enlightened to pay a good deal of attention to measures intended to improve the quality and quantity of the country's milk supply. Even during the difficulties of war-time, production was well maintained; and distribution between the different sections of the community was put on a better footing than hitherto, in that those who needed milk most got most, irrespective of income. While it is common ground that, taking a long view, the basis of a sound milk policy is well-bred, healthy dairy herds, with the utmost use of scientific measures for production and distribution of milk under clean conditions, the stop-gap process of heat treatment still has to be very widely resorted to for most of the supplies to big cities, to ensure at least a safe condition of all milk.

Where heat treatment is applied to destroy any disease germs which may have gained access to the milk, it is very important that the process should be well carried out, or the last state of the milk is more dangerous than the first. We have, therefore, for many years freely applied the Phosphatase test, which is the most convenient method of checking the efficiency of heat treatment. Table L gives, I think, a very satisfactory picture of the thoroughness with which heat treatment is carried out in this city. Three dairies achieved 100% satisfactory samples. The other three only slipped up to the extent of one sample each. The nett result on all samples of 1,640 satisfactory out of 1,649, gives a percentage of 99.5%, the highest standard attained so far, and a remarkable improvement over the figure of 37% recorded in 1937.

Table D gives a list of the miscellaneous samples other than milk upon which adverse reports were issued. In the case of most of the items there is no need further to amplify the bare statement made in the Table. The following are items of interest:

Ginger Kup

This article, purchased from a local grocer, cost 3s. 3d. for a 26-oz. bottle, and was packed to look like a typical soft drink. The label described the article as "a pleasant, warming, stimulating and appetising winter drink with tonic effect." After purchasing, and not until the bottle was examined in the laboratory, a small label about the size of a postage stamp was found stuck underneath the base of the bottle with

the following formula : Active ingredients : Sod. Iod. 0.10%, Tinct. Capsic. 0.25%, Acid. Benz. 0.01%, Acid. Cit. 0.25%, Aq. Chlorof. 50.00%, Inf. Quass. Rec. 0.25%, Flavour Q.S., Aqua ad. 100.00%.

Analysis showed the composition to be 99.6% water. The preparation was essentially a coloured, flavoured and preserved solution of red pepper and its composition was in reasonable compliance with the declared formula. The principle involved seemed to be to supply something with a very pronounced taste to give the impression of good value for money, and to incorporate a trace of sodium iodide to justify the status of the preparation as that of a drug. We reported that the position and the size of the type used on the label did not meet with the requirements of the Pharmacy and Medicines Act, 1941, Section 11, which requires the statutory declaration to be "clearly legible." It was thus only possible to condemn the sample on a minor technical point, whereas in actual fact the article was a catch-penny line, serving no really useful purpose. The present state of nutrition in this country must indeed be precarious if the public have to rely on such preparations for their iodine intake. In correspondence with the manufacturers we were surprised to learn that the Board of Trade and the Ministry of Food had made full investigation some time previously and approved the article.

Brandy Mint

This article turned up again and as before, consisted of tap or rain water with a trace of Oil of Peppermint added. It was found to be "manufactured" and sold from door to door by a local van dweller ; the perpetrator had gone out of town when the Inspector called to investigate the matter.

Ice Cream

A short write-up on this commodity was given in my Annual Report for 1938. Ice cream was then consumed in enormous quantities, and for many people it formed an integral part of occasional meals. For sections of the working classes, a wafer of ice cream following a bag of fish and chips taken al fresco formed a pleasant meal, requiring no home preparation beforehand, nor washing up afterwards ; in another stratum of society an ice was taken to give the stomach a new lease of life halfway through a nine-course meal.

Although, like milk, an excellent medium for the growth of bacteria, including some undesirable ones, and although occasional epidemics of

typhoid, paratyphoid, etc., led, on investigation, to ice cream as the suspected cause, no standards of purity were ever laid down by the Ministry of Health. Many Health Authorities took occasional samples and, by peaceful persuasion or bluff, kept a useful local control. A real difficulty in enforcing any definite standard of bacteriological purity rested in the fact that no standards existed for the raw materials composing ice cream, including non-designated milk and, as we suspected was more often used, skimmed milk. Neither have standards for chemical composition ever been imposed in this country.

Section 14 of the Food and Drugs Act, 1938, made compulsory the registration of premises used in connection with the manufacture or sale of ice cream. Section 37 gave Medical Officers of Health considerable powers in the prevention of the spread of disease by the use of ice cream of doubtful quality. Section 11 defined ice cream somewhat unhelpfully as follows: "ice cream" includes any similar commodity'.

In this series of Annual Reports two samples of ice cream are recorded in 1942, and none again until the present year, 1945. Underlining these facts is one of the minor tragedies of the war; for over two years the children had to forego one of their favourite sweets. The Ice Cream (Prohibition of Manufacture and Sales) Order, S. R. & O., 1942, No. 1962, stopped the production of ice cream as from October 1st, 1942. This Order was not revoked until November 16th, 1944. Since the latter date manufacturers have used considerable ingenuity to stretch to the utmost the limited supplies of ingredients available in producing adequate supplies of ice cream; and by all appearances the general public have made a valiant effort to make up for lost time in its consumption.

Table N sets out chemical and bacteriological particulars of the samples examined in 1945. In view of the difficulties which manufacturers are still having to overcome, and in view of the patent fact that the public are glad to pay almost any price for anything that resembles ice cream, it is perhaps undesirable to read too closely into the information set out in the Table. The quality is obviously very variable, but there is no outstanding evidence that any great harm is being done to consumers. It is high time, however, in view of the tremendous consumption of ice cream today, that some control of composition and standard of purity should be imposed. The practice of "ripening" the mix in zinc buckets for twenty-four hours prior to freezing seems now to be almost universal with small-scale manufacturers, and the merits or otherwise of this practice ought to be considered when alternative material for vessels is available.

DRUGS

Only 86 samples of Drugs were received throughout the year. As far as this permitted of an examination of drugs on sale locally, the general quality was found to be satisfactory.

Acetic Acid

Three samples were submitted privately (Nos. S 33, 34 and 35) and were alleged to have a peculiar flavour on dilution with water. The acid was used in the manufacture of Rollmop Herrings, which were stated to be unpalatable on account of the foreign flavour introduced by the acid. Customers were rejecting the herrings. The acid looked normal and complied with the specification for Acetic Acid (33%) of the B.P. : on dilution with four parts of water to one of acid, a slight smell like T.C.P. did appear and the flavour was unmistakable. Apparently in the original strength the smell of the Acetic Acid itself was sufficient to cover up the foreign odour, which had been taken up in the shop on storage in close proximity to some volatile substance. We reported to the vendor that, while on a rigid interpretation of the requirements of the B.P. the article was genuine, this only held good if the drug was intended for purposes of external application. If intended for edible purposes the aromatic smell and taste rendered it not of the quality expected by the average purchaser. The vendor accepted this and destroyed his stock, and recompensed the original complainant for the value of the herrings destroyed.

Antacid Powder

A proprietary brand of antacid powder costs 1s. 3d. an ounce, plus 2d. purchase tax. The article was quite in order and a label as follows : "Pharmacy and Medicines Act, 1941. Chemical Formula, $3 \text{MgCO}_3 \cdot \text{Mg}(\text{OH})_2 \cdot 4 \text{H}_2\text{O}$. Approximating to B.P. Codex : MAG. CARB. LEV. 100%" kept it in complete conformity with the requirements of the Pharmacy and Medicine Act, 1941. The information on the above label is, of course, advanced chemistry to the general public, and had they asked for Light Magnesia, which is what the formula on the label means, they would have obtained the same amount of the same chemical for a total price about equal to that of the purchase tax. The old Latin tag "Caveat emptor" has been used ad nauseam in previous reports, and is perhaps getting stale, but it is so apt, and so much disregarded by the general public, that it perhaps ought to be used as a general text of all such reports as the present one.

Bronamalt

A sample of Bronamalt (No. 961) was labelled as a "tonic nutrient" and "not a medicine." It contained, besides malt, cinchona alkaloid, 8% alcohol. Extract of malt is a nutrient and cinchona is a tonic. The description therefore was warranted by the composition. Had the article been described as a "nutritive tonic" a declaration of composition under the Pharmacy and Medicines Act, 1941, would have been required. Since the label however insisted that the preparation was a food, a declaration of composition should have been given under the Labelling of Food (No. 2) Order, 1944. No such declaration was given. The 8% of alcohol was also a complication. The article was sold by a grocer who did not hold a licence to sell wines and spirits. We understood from the Excise Department that they regarded the article as a drug, and no duty was charged thereon. There appeared to be certain points that needed clearing up, and the matter was referred to the Ministry of Food and the Pharmaceutical Society respectively.

Samples Submitted by the Public

The number of samples submitted by the public under Section 69 tends to increase slightly. Miscellaneous articles submitted are shown in Table J. The pudding mixtures (Nos. S41 and S42) were all heavily infested with mites, and the complaint made considered justified.

The sample of Cake submitted (No. S37) was rather unusual. A schoolboy, on eating this cake, found that his face suddenly became dyed an intense blue colour and he became frightened. The cake was decorated with a granular material, green in colour, known as "Dekit." This consisted of granular farinaceous material dyed green. On closer inspection, however, it was found that one or two of the granules consisted of solid dye. It was one or more of these which, when moistened with saliva, had brought about the unexpected chromatic effect on the boy's face. The colouring matter was harmless, however, but the confectioner agreed to destroy his current stock of this material since, on examination of the main bulk, we found there were occasional fragments of solid dye material present.

Two of the samples of Milk submitted (Nos. S31 and S32) were in dirty containers. On microscopic examination of the detached material, considerable growth of mould, usually associated with milk, was found. The matter was taken up strongly with the dairies concerned.

The sample of Blackcurrant Flavoured Cordial (No. S27) was submitted because of its unusual appearance. The beverage was found to be infected with a mould growth, and was free from any trace of

preservative. Otherwise, its chemical composition was in compliance with the Soft Drinks Order.

A sample of Tinned Herrings was submitted because of its blown condition. The gas obtained from this sample consisted entirely of hydrogen, and the contents of the tin were sound ; it was an ordinary "Hydrogen Swell." An interesting point about this sample was that from the amount of hydrogen liberated the tin contamination of the contents was calculated to be equivalent to 12 grains per lb. The actual tin contamination was less than two grains per pound. On close inspection of the container the appearance suggested that some tin had been re-deposited on the surface.

The sample of Lemonade (No. S28) had a phenolic taste. On emptying out the contents, the bottle, and particularly the screw stopper, smelt strongly of phenol. This was evidently a case where some previous holder of the bottle had misused it for containing disinfectant, and the bottle washing process had been inadequate to remove all traces of the odorous contaminant.

Swimming Bath Waters

The results of analyses of samples of swimming bath waters are set out in Table F. On the whole a very satisfactory condition of the water was maintained at all the baths throughout the year. At one of the Corporation baths some difficulty was experienced with the sterilising plant when the bath was first re-opened after having been out of action throughout the war years for Civil Defence purposes. By temporary expedients, however, the water was maintained in a reasonably safe condition until the plant was repaired.

The poor summer weather was in favour of the condition of the water at the two outdoor swimming baths, as the pools were never overloaded ; and all the samples taken there were satisfactory.

Drinking Waters

Regular samples representing the individual supplies from Thornton, Cropston and Swithland reservoirs and the Derwent Valley respectively were taken from consumers' taps by the Water Engineer and submitted for analysis. All the local supplies were efficiently chloraminated after filtration and regular samples of the filtered water were analysed to assist in regulating this final treatment correctly. Regular samples were also taken of raw reservoir water for microscopic examination in order to anticipate and prevent trouble from algal growths. All samples

representing water in actual supply to the public were found to be satisfactory and safe for drinking purposes.

Many special samples were taken throughout the year from the Rivers Dove and Manifold, and from other suggested rivers, in connection with the Leicester Corporation Bill to obtain a further water supply.

Fertilisers and Feeding Stuffs

A miscellaneous range of fertilisers and feeding stuffs were examined. (See Table G.) No serious infraction of the regulations was experienced. One sample, described as Flax Offal Pig Meal, contained 28% of Fibre, but this was declared. We put it to the supplier, however, that a feeding stuff with such a high fibre content was almost certainly unsuitable for pigs except when mixed with a much larger bulk of meal with a lower fibre content. The supplier agreed to sell it thereafter as simply "Flax Meal."

Miscellaneous

Miscellaneous samples examined during the year are set out in Table 1. Many of them were from private sources for which fees were charged for examination. Only two items of interest can be referred to :

Glass Wool

A sample of material resembling glass wool, used for filling the space between the sheets of plaster board forming the walls of pre-fabricated houses, was submitted for examination.

The enquiry was whether this material was harmful to the work-people engaged in using it. The sample consisted of long and short fibres of glass-like material of average diameter 0.0005 inches. It was extremely brittle and "flew" as an irritating dust when handled.

The material yielded very little soluble silica to water when digested at blood heat (0.1% was dissolved in 24 hours at a pH value of lung tissue), but the opinion was expressed that, owing to the extreme irritation caused by the particles, protective measures for the eyes and nose of workpeople should be adopted.

Dead Fowl

From the stomach contents of a dead fowl received for examination, a strongly positive test for phosphorus was obtained. The circumstances suggested that the bird had succumbed from eating poison intended for rats.

A number of stomach wash-outs and samples of meals were received in connection with suspected poison, but no positive results were obtained.

Atmospheric Pollution

One Standard Deposit Gauge located on the Town Hall roof and three Lead Peroxide Candles for measuring sulphur impurity in the atmosphere, sited on the Town Hall roof, Grey Friars and Westcotes Maternity Home respectively, were maintained throughout the year, and regular readings obtained from them.

The work formed part of an investigation carried out over the whole country. The results are of some local interest however.

The average monthly weight of material in the form of soot, ash, etc., derived mainly from the combustion of coal, deposited on the Town Hall roof amounted to 23.7 tons per square mile. Table P sets out the summary of the results obtained from the Standard Deposit Gauge during the last six years. It would appear that a steady improvement has taken place regularly during this period.

Table O gives the amounts of sulphur impurity in the atmosphere measured month by month at the above three sites. The results confirm those obtained previously; that the level of sulphur impurity in the atmosphere is very much higher in winter than in summer, and in the centre of the town than on the outskirts.

F. C. BULLOCK,

B.Sc., F.R.I.C., P.A.Inst.W.E.,

Public Analyst and Official Agricultural Analyst.

TABLE A.

Summary of Samples Analysed during 1945.				
Food and Drugs Act, 1938 :				
Samples submitted by Sanitary Inspectors				641
" " " The Public	..			26
Shellfish (Bacteriological Samples)	..			12
				<hr/>
Total	..	..	..	679
Bacteriological Milk samples examined for chemical composition				
	..	..	..	615
Fertilisers and Feeding Stuffs Act, 1926 :				
Samples submitted by Sanitary Inspectors				18
Rag Flock Act, 1911				
	..	..	..	3
Milk (Special Designations) Order, 1936				
				811
Milk (Phosphatase Test)	..	..	..	1,312
Reference Samples	..	..	..	10
Atmospheric Pollution Samples	..	..	..	48
Miscellaneous Samples from other sources :				
Health Department	..	..	..	135
Water Department	..	..	..	476
Miscellaneous	..	..	..	163
				<hr/>
Total	..	..	..	774
				<hr/>
Grand Total	..	..	..	4,270
				<hr/>

TABLE B
FOODS AND DRUGS ANALYSED DURING 1945
(Sampled by Sanitary Inspectors under the Food and Drugs Act)

Foods Analysed.

Sample	No.	Sample	No.
Milk	292	Malt Vinegar	5
Arrowroot	4	Margarine	6
Barley	1	Meat and Fish Pastes	12
Beer	4	Mustard	6
Brandy Mint	1	Pepper	5
Bronomalt	1	Piccalilli	1
Butter	7	Port Wine	1
Cakes	9	Prepared Mustard	2
Cake and Pudding Mixtures	5	Preserves	9
Cheese	8	Rice	1
Christmas Pudding	1	Rose Hip Syrup	3
Coffee	5	Salad Cream	2
Coffee and Chicory	2	Salt Petre	6
Coffee Essence	1	Sauce Powder	1
Cocktails	1	Sauces	2
Cocoa	3	Sausage	8
Cordials	9	Semolina	3
Dried Eggs	4	Soda Water	2
Dried Fruit	13	Soup Powder	2
Dried Milk	1	Soups	5
Egg Substitute	1	Soya Flour	1
Fish Cakes	2	Soyagetti	1
Flour	14	Spirits	3
Fruit Drink ("Kik")	1	Stuffing	8
Gelatine	11	Sugar	3
Ginger Kup	2	Sweets	7
Ground Ginger	3	Tea	5
Hors d'Oeuvres, etc.	15	Yeast	3
Ice Cream	17		
Ice Cream Powder	1		
Lard	3		
		Total	555

Drugs Analysed.

Antacid Powder	1	Gregory Powder	3
Aspirin Tablets	7	Hydrogen Peroxide	3
Bismuth Tablets	3	Liquorice Powder	3
Borax	2	Paregoric Elixir	1
Camphorated Oil	5	Saccharine Tablets	1
Castor Oil	3	Sod. Bicarbonate	4
Cod Liver Oil	4	Tincture of Iodine	9
Cod Liver Oil and Malt	9		
Cream of Tartar	3	Total Drugs	86
Epsom Salts	7	Total Foods	555
Friars Balsam	6		
Glauber Salts	6	Total Food and Drugs	641
Glycerine	6		

TABLE C. Milk Samples reported "Not Genuine"

Sample No.	Article	Formal, Informal or Bacterial	Nature of Offence	Action taken
1735	Pasteurised ..	Formal	24% deficient of fat ..	Further sample taken Cautioned £15 fine and £2 2s. 0d. costs
2106	Pasteurised ..	"	2% added water ..	
1749	Pasteurised ..	"	17% added water ..	
1748	Pasteurised ..	"	35.0 Lovibond Blue Units. Improperly pasteurised	
1765	Milk ..	"	22% deficient of fat ..	Cautioned by interview Cautioned by interview
2146	Pasteurised ..	"	9.8 Lovibond Blue Units ..	
1949	T.T. Milk ..	Bacterial	5.2% deficient in solids-not-fat. 2.8% added water	
1699	Milk ..	Formal	5% added water	
2167	Milk ..	Informal	9.8% deficient in solids-not-fat. 4.8% added water	
2168	Milk ..	"	7.9% deficient in solids-not-fat. 3% added water	
2169	Milk ..	"	10% deficient in solids-not-fat. 5.7% added water	
2170	Milk ..	"	16% deficient in solids-not-fat. 10% added water	
2210	Pasteurised ..	Formal	1.2% deficient in solids-not-fat. 4% added water	
2171	Milk ..	Informal	25% deficient in fat	
2224	Milk ..	"	4.7% deficient in solids-not-fat. 4.6% added water	
2226	Milk ..	"	3.5% deficient in solids-not-fat. 2.4% added water	
2246	Milk ..	"	2.9% deficient in solids-not-fat. 7% added water	

TABLE C.—continued

Sample No.	Article	Formal, Informal or Bacterial	Nature of Offence	Action taken
2247	Milk ..	Informal	3.1% deficient in solids-not-fat.	
2250	Milk ..	"	6.3% added water	
2179	Pasteurised ..	Formal	3.1% deficient in solids-not-fat.	
900	Milk ..	Informal	7.4% added water	
88	Accredited ..	Bacterial	1.7% deficient in solids-not-fat..	
90	Tuberculin Tested ..	"	12.6% deficient in solids-not-fat.	
311	T.T. Certified ..	"	9.3% added water	
401	Milk ..	Formal	10% deficient in fat ..	Cautioned by M.O.H.
402	Pasteurised ..	"	11% deficient in fat ..	Cautioned by M.O.H.
404	Pasteurised ..	"	6.7% deficient in fat ..	Cautioned by M.O.H.
406	Pasteurised ..	"	19% deficient in fat ..	Conviction, 3.7.45; £5 fine, £1 ls. 0d. costs
348	Accredited ..	"	5.2 Lovibond Blue Units	Cautioned by M.O.H.
235	Milk ..	"	14.5 Lovibond Blue Units	Cautioned by M.O.H.
552	T.T. Certified ..	Bacterial	4.0 Lovibond Blue Units	Cautioned by M.O.H.
587	T.T. Certified ..	"	6.6% deficient in fat ..	Cautioned by M.O.H.
588	T.T. Certified ..	"	3% added water	
589	T.T. Certified ..	"	10% deficient in fat	
637	Accredited ..	"	1% deficient in solids-not-fat.	
746	Pasteurised ..	Formal	3% deficient in fat	
1053	T.T. Certified ..	Bacterial	2.3% deficient in solids-not-fat	
1063	Tuberculin Tested ..	"	2.7% deficient in solids-not-fat	
			43% deficient in fat	
			6.0 Lovibond Blue Units	
			3.3% deficient in fat	
			6.7% deficient in fat	

TABLE D. Food and Drug Samples other than Milk reported "Not Genuine"

Sample No.	Article	Formal, Informal or Private	Nature of Offence	Action taken
S24	Gravy Thickening and Browning ..	Private	Labelling offence ..	All stock withdrawn from sale
1740	Saccharin Tablets ..	Formal	Labelling offence ..	All stock withdrawn from sale
2104	Pork Sausage ..	"	Deficient of 1.8% meat and 100% soya ..	Cautioned by interview
1771	Sardines and Tomato ..	Informal	14% deficient of fish..	Follow-up
1787	Swedish Hors d'Oeuvres ..	"	Sulphuretted hydrogen present	Reported abnormal and stocks confiscated
2137	Mixed Hors d'Oeuvres ..	"	In state of fermentation ..	
2135	Herring Fillets ..	"	In state of fermentation ..	
2141	Rollmop Herrings ..	"	In state of fermentation ..	Cautioned
2143	Smoked Herrings ..	"	In state of fermentation ..	
2219	Pork Sausage ..	Formal	23% deficient of meat	Communicated with manufacturers
S27	Blackcurrant Flavoured Cordial ..	Private	Mouldy ..	
2266	Ice Cream ..	Informal	Unsatisfactory bacterially	Plant investigated by Sanitary Inspector
2267	Ice Cream ..	"	Unsatisfactory bacterially	
2268	Ice Cream ..	"	2.5 gr. zinc per gallon	Cautioned by M.O.H.
2273	Mild Beer ..	"	0.6 p.p.m. lead ..	
2297	Carrot Soup ..	"	20% deficient protein ..	

TABLE D—continued

Sample No.	Article	Formal, Informal or Private	Nature of Offence	Action taken
211	Ice Cream ..	Informal	1.17 gr. zinc per gallon ..	Plant investigated by Sanitary Inspector
214	Ice Cream ..	"	1.33 gr. zinc per gallon ..	
215	Ice Cream ..	"	Unsatisfactory bacterially ..	
242	Ice Cream ..	"	2 gr. zinc per gallon ..	
251	Ice Cream ..	"	2 gr. zinc per gallon, 0.40% fat ..	
S28	Lemonade ..	Private	Traces of phenolic substances ..	Wrote to bottler
S29	Tinned Herrings in Tomato Sauce ..		Blown tin ..	
441	Lime Flavoured Cordial	Informal	Deficient of approximately 13.0% Sugar.	Old stock ; no action taken Manufacturer cautioned by Public Analyst.
469	Lime Flavoured Cordial	"	12% deficient of sucrose ..	
S31	Milk Bottle ..	Private	Dirty ..	Manufacturer cautioned by Medical Officer of Health
489	Soda Water ..	Informal	95% deficient Sod. bicarbonate	
490	Fish Cakes ..	Private	Deficient of at least 13.8% fish..	Distributor cautioned at interview Manufacturer cautioned Formal sample taken
S32	1-pt. Bottle Milk		Bottle dirty inside ..	
S33-4-5	Acetic Acid ..	"	Foreign taste on dilution ..	Distributor cautioned at interview Vendor told to destroy stock Vendor told to destroy stock
S37	Cake ..	"	Blue dye present ..	
722	Ice Cream ..	Informal	Chemical composition poor and bacterial quality low ..	Referred to Town Clerk
723	Ice Cream ..	"		
724	Ice Cream ..	"		

TABLE D.—*continued.*

Sample No.	Article	Formal, Informal or Private	Nature of Offence	Action taken
960	Mussels ..	Informal	10% Clean ..	Consignment confiscated Referred to Ministry of Food
913	Ginger Kup ..	"	Reported infringement of Pharmacy and Medicines Act, 1941	
923	Brandy Mint ..	"	False label	Supply destroyed Supply destroyed
S41	Creamola Pudding ..	Private	Infested with mites ..	
S42	Creamola Pudding ..	"	Infested with mites ..	Supply destroyed Referred to Ministry of Food
928	Master Mix Cake and Pudding Mixture ..	Informal	Infested with mites ..	
929	Pure Malt Vinegar ..	Formal	Reported presence of salt	Referred to Ministry of Food
933	Pudding Mixture, Marshall's ..	Informal	Labelling offence ..	
934	Marshall's Butter Flavoured Sauce ..	"	Labelling offence ..	Referred to Ministry of Food Stock destroyed
935	Gelatine ..	"	70 p.p.m. lead ..	
946	Gelatine ..	Formal	30 p.p.m. lead ..	Stock destroyed Referred to Pharmaceutical Society
961	Bromomalt ..	Informal	Labelling offence ..	

TABLE E.
Results of Bacteriological Examinations of Milk, 1945

Grade	Total No. examined	Passed as satis- factory	No. which failed Mc. Blue Test	Total count too high	B. Coli too numerous	% satisfactory		
						1943	1944	1945
Tuberculin Tested (Certified)	66	61	1	—	8	93.3	93.6	92.5
Tuberculin Tested	209	168	32	—	29	—	64.9	80.4
Tuberculin Tested (Pasteurised)	48	46	—	2	—	88.8	97.6	96.0
Accredited	107	49	37	—	47	77.8	61.3	45.8
Pasteurised	300	283	14	11	—	89.9	95.4	94.3
School Milk (Pasteurised) ..	73	64	5	5	—	94.2	89.1	87.7
Total	803	671	89	18	84	87.8	83.8	83.6

TABLE F. Swimming Bath Waters Examined during 1945

Bath	No. examined	No. having satisfactory bacteriological quality	Unsatisfactory		% passed as bacteriologically satisfactory
			Total organisms too numerous	B. Coli too numerous	
Vestry Street	22	21	1	—	95.5
Cossington Street	12	10	2	2	83.3
Aylestone	5	5	—	—	100.0
Spence Street	4	3	—	1	75.00
Total (Corporation Baths) ..	43	39	3	3	90.6
Kenwood Pool	7	7	—	—	100.0
Humberstone Lido	5	5	—	—	100.0
Total (all Baths)	55	51	3	3	92.5

TABLE G. Fertilisers and Feeding Stuffs Analysed under the Fertilisers and Feeding Stuffs Act during 1945

Sample	Number Examined	Number Satisfactory	Number Unsatisfactory		
			Composition Incorrect	Statutory Declaration Defective	Total Unsatisfactory
Basic Slag	1	1	—	—	—
Sulphate of Ammonia	2	2	—	—	—
Garotta Manure Maker	1	1	—	—	—
Vegetable Fertiliser	1	1	—	—	—
Fertiliser	3	1	1	1	2
Dried Blood	2	2	—	—	—
Concentrated Liquid Manure	1	1	—	—	—
Balance Meal	4	4	—	—	—
Concentrated Stable Manure	1	1	—	—	—
Wood Charcoal	1	1	—	—	—
Flax Offal Pig Meal	1	1	—	—	—
Biscuit Dust	1	1	—	—	—
Bailey's Iodised Organic Fertiliser	1	1	—	—	—
Feeding Stuff	1	1	—	—	—
Flax Meal	1	1	—	—	—
Total	22	20	1	1	2

TABLE J. Samples submitted by members of the Public.

Article	No.	Article	No.
Acetic Acid	3	Gravy Browning	1
Blackcurrant Flavoured Cordial	1	Lemonade	1
Brandy	1	Meat	1
Bread	1	Milk	3
Cake	1	Pudding Mixtures	3
Cocktail	1	Semolina	5
Cream Cheese	1	Sweets	1
Feeding Stuff	1		
Canned Herrings	1	Total	26

TABLE H. Miscellaneous Samples examined for various Committees

	Health Department		City Mental Hospital	
Sulphur Cylinders ..	..	36	Chloral Hydrate ..	.. 1
Rain Waters ..	..	12	Faeces ..	.. .. 5
		— 48	Paraldehyde ..	.. . 1
Waters—Chemical :			Paraldehyde cum Chloral Hydrate ..	.. . 1
City Supply ..	..	4	Vomit ..	.. .. 6
Cellar Water ..	..	7		—
Well Water ..	..	2		14
Pond Water ..	..	1		
		— 14		
Waters—Bacteriological :			City General Hospital	
City Supply ..	..	20	Finger Nails ..	.. 2
		— 20	Hair ..	.. .. 2
Bath Waters ..	..	55		- 4
Milks (Human) ..	..	19		
Milks (Phosphatase)	..	1312	City Surveyor	
Milks (Dried) ..	..	7	Froidine ..	.. . 1
Milks (Chemical) ..	..	2		- 1
Biscuits ..	..	1		
Cornflour ..	..	2		
D.D.T Preparations ..	..	2		
Gelatine ..	..	1	Education Department	
Ice Cream Mixture ..	..	6	Mashed Potatoes ..	.. 1
Ice Cream Powder ..	..	1	Meat ..	.. . 1
Margarine ..	..	1		- 2
Sugar ..	..	2		
Turkey and Ham Galantine		1		
White Powder ..	..	1		
		——		
		1,495		
			Water Department	
City Isolation Hospital			Water (Chemical) ..	277
Cheese ..	..	1	Water (Bacteriological) ..	144
Vinegar ..	..	1	Water (Biological) ..	48
		—	Brass Elbow Joints ..	2
		2	Sub-soil ..	. 1
			Watermain ..	. 1
			Sand ..	. 3
				— 476
			Total ..	1,994

TABLE I. Miscellaneous Samples examined from various other sources.

Article	No.	Article	No.
Altar Wine	1	Milk	9
Beans	1	Manure	2
Cake	1	Paint	1
Cake Decorations	2	Pickle	1
Christmas Puddings	1	Porridge	1
Condensed Milk	1	Rag Flocks	3
Dead Fowl	1	Raisins	1
Dried Blood	1	Sausage	15
Drug	1	Spam	1
Duck	1	Stomach Washout	1
Edible Oil	1	Tinned Cherries	1
Egg Powder	1	Soft Drinks	15
Feeding Stuff	1	Water (Chemical)	43
Fertiliser	2	Water (Bacteriological)	25
Fish Paste	3		
Glass Wool	1		
Human Milk	1	Total	140

TABLE K

Summary of Samples examined by Bacteriological Methods in 1945

Milk	739
Pasteurised Milk supplied to Schools	72
Reservoir and other Waters (for Water Committee)	144
Waters (for Health Committee)	20
Swimming Bath Waters	55
Miscellaneous Waters	25
Ice Cream	17
Shellfish (for Health Committee)	12
Total	1,084

TABLE L.
Samples of Milk examined by the Phosphatase Test, 1945.

Dairy	Number Examined	No. giving less than 2.3 Blue Units, Efficiently Pasteurised	% of Total Satisfactory 1945	% Satisfactory in previous years		
				1944	1943	1942
1 ..	216	216	100.0	96.0	95.6	98.4
2 ..	224	223	99.6	100.0	100.0	100.0
3 ..	240	240	100.0	100.0	99.6	98.3
4 ..	193	193	100.0	100.0	99.5	98.9
7 ..	193	192	99.6	99.5	97.5	92.2
8 ..	243	242	99.8	97.6	99.6	100.0
Miscellaneous (mainly samples submitted for Bacteriological Tests.)	340	334	98.3	99.0	97.2	—
Total ..	1649	1640	99.5	98.6	98.3	96.8

TABLE M.

B. Coli Content of Reservoir Water, 1945

Reservoir	No. of Samples	Probable Number of B. Coli per 100 mls.				
		B. Coli Absent	0—2	3—10	11—25	More than 25
Swithland						
Filtered Water	13	3	6	4	—	—
Filtered and Chloraminated Water ..	12	12	—	—	—	—
Cropston						
Filtered Water	13	8	—	3	1	1
Filtered and Chloraminated Water ..	10	10	—	—	—	—
Thornton						
Filtered Water	13	—	1	7	4	1
Filtered and Chloraminated Water ..	13	13	—	—	—	—
Derwent ..			—	—	—	—
City Supply ..	69	69	—	—	—	—

TABLE N
Ice Cream Samples examined during 1945

Sample No.	Fat %	Total Solids %	No. of Organisms per ml. on Agar in 48 hrs. at 37° C.	B. Coli			Metals Zn ppm.
				.1 ml.	.01 ml.	.001 ml.	
2266	3.45	26.06	5,530,000	—	—	—	10
2267	14.26	35.40	32,000	+	+	+	0
2268	2.36	25.95	10,635,000	—	—	—	36
2196	—	—	4,300	—	—	—	—
2197	—	—	24,000	+	+	+	—
211	2.86	25.02	—	—	—	—	16.7
212	1.06	21.95	—	—	—	—	—
213	10.75	31.25	—	—	—	—	—
214	1.20	20.38	30,000,000	+	—	—	—
215	5.68	23.90	2,360,000	+	+	+	—
242	1.99	22.78	18,000	—	—	—	31
251	0.39	26.19	2,790,000	+	—	—	34
433	0.99	13.94	890,000	+	+	+	5
434	6.36	27.90	5,000,000	+	+	+	7
722	2.27	24.91	5,000,000	+	+	+	13
723	0.30	23.22	4,000,000	+	+	+	Nil
724	0.33	21.10	2,000,000	+	+	+	13

TABLE O
Atmospheric Pollution

Lead Peroxide Method for SO₂ Average Monthly Figures for 1945.
Results expressed in mgms. of SO₂ per 100 sq. cm. per day.

Month			Town Hall Station	Westcotes Station	Grey Friars Station
January	..	..	7.11	3.23	4.04
February	..	..	5.52	1.65	3.87
March ..	..	..	4.43	1.89	3.18
April ..	..	..	2.76	1.18	2.04
May ..	..	..	2.10	0.74	1.56
June ..	..	..	1.99	0.41	1.25
July ..	..	..	1.63	0.42	1.06
August	..	..	1.60	0.64	1.30
September	..	..	2.36	0.44	1.55
October	..	..	4.00	1.47	2.80
November	..	..	5.5	2.05	4.30
December	..	..	5.97	2.84	4.25

TABLE P. Atmospheric Pollution

Figures obtained from Standard Deposit Gauge, 1940-1945

Site of Gauge : Town Hall Roof, Leicester

Average deposit in tons per square mile per month

Year	Average Monthly Rainfall, inches	Insoluble Deposit				Soluble Deposit	Total Deposit
		Tar	Soot	Ash	Total		
1940	2.14	0.15	4.62	16.48	21.76	8.31	30.07
1941	2.41	0.17	4.23	16.12	20.54	7.94	28.48
1942	1.76	0.15	4.02	17.25	21.44	7.05	28.49
1943	1.72	0.13	3.63	17.19	20.96	6.63	27.59
1944	2.39	0.12	3.65	15.45	19.23	6.29	25.52
1945	1.79	0.19	3.80	13.56	17.55	6.18	23.73
Aver. for six years	2.03	0.15	4.00	16.01	20.24	7.07	27.31

Report on the Sanitary Inspection Department

for the year 1945

By

F. G. McHUGH, F.R.San.I., F.S.I.A.,

Chief Sanitary Inspector

FOREWORD BY THE MEDICAL OFFICER OF HEALTH

At first glance this report may appear dull and uninteresting because it is largely tabular in form, but, on reading it, imagination must be used, for only then can the enormous importance of the Sanitary Inspectors' work become really evident.

As an example of what I mean, let me draw attention to one set of figures only, those which relate to the work at the abattoir. Over 90,000 animals were slaughtered for human food in the year. Every one was carefully inspected in the interests of Leicester citizens, and with what result? Over 2,000 cases of partial infection with tuberculosis, and in 185 instances the whole carcase so riddled with the disease that it had to be condemned entirely. But for the unceasing vigilance of your Inspectors this diseased meat would have found its way on to our tables, with perhaps the direst effects.

At the beginning of his report, Mr. McHugh refers to two officers whose combined service for the Committee totalled 86 years, truly an unusual record. To Mr. Price and Mr. Poynor the Department wishes all happiness in their well-deserved retirement.

Report on the Sanitary Inspection Department

for the year 1945

By

F. G. McHUGH, F.R.San.I., F.S.I.A.,

Chief Sanitary Inspector

STAFF

Sanitary Inspectors

In December, Mr. A. T. Price, the Deputy Chief Sanitary Inspector, retired on superannuation after 32 years' service with the Leicester Corporation. Mr. Price had been Deputy Chief Inspector for 10 years.

Mr. H. Elkington was appointed to succeed Mr. Price.

Mr. J. Yates resigned in October to take up an appointment with the Uppingham Rural District Council.

Mr. F. W. Murray was released in January to enable him to take up a temporary appointment with the United Nations Relief and Rehabilitation Administration in Europe.

Return from War Service

Messrs. A. McCartney and G. V. Penn returned to duty in December after demobilisation from the Royal Air Force and Royal Artillery respectively. Mr. Penn was called up for military service in August, 1939.

Clerks

Mr. T. P. Poynor, the senior clerk, retired in June on superannuation after 54 years' service ; he was appointed a junior clerk in the Department in June, 1890.

Mr. R. Fieldman returned to duty in October after demobilisation from the Royal Air Force and was appointed to the position of senior clerk.

Mr. D. Boughton, on his return from H.M. Forces, resigned, having secured another appointment.

Mrs. M. Ward and Miss N. Dunn resigned, and Miss E. M. Edwards and Miss A. Astle were appointed to fill the vacancies.

REPAIRS TO HOUSES

Building Materials and Components

The serious shortage of building materials and components has made the work of your Sanitary Inspectors very difficult. Our policy has been, during the war years, to have only the urgent and necessary repairs done, but nevertheless the progress has been extremely slow in spite of all our efforts.

The arrears of repairs have increased enormously and it will be many years before these can be overtaken.

SYNOPSIS OF SANITARY INSPECTION WORK.

An "inspection" is the first visit paid to premises.

A "re-inspection" is a visit made after notice has been given for the remedying of a defect.

	Inspections	Re-inspections	Total
Re Accumulations	307	51	358
Agricultural Produce (Grading and Marking) Act	1	4	5
Re Animals, Poultry, Swine, etc. ..	201	45	246
Ashpits and Ashbins	217	19	236
Bakehouses—Factory	110	3	113
Non-Factory	37	7	44
Canal Boats	7	6	13
Cesspools	102	12	114
Closets—Water	824	298	1122
Privies	9	6	15
Pails	60	5	65
Cold Stores	28	—	28
Common Lodging Houses—Day ..	101	—	101
Night ..	1	—	1
Complaints Received	3211	2457	5668
Complaints Confirmed	2945	9504	12449
Cowsheds	124	4	128
Dairies and Milkshops	733	65	798
Dangerous Structures	51	6	57
Drains Inspected—Smoke Tests ..	546	27	573
Chemical Tests ..	16	—	16
Colour Tests ..	170	3	173
Drains Inspected	2360	2500	4860
Ditches and Watercourses	47	63	110
Entertainment Houses	3	4	7
Factories	131	15	146
Fish Frying Premises	55	5	60
Food Manufacturing Premises ..	324	7	331
Carried forward	12721	15116	27837

	Inspections.	Re-inspections.	Total.
Brought forward	12721	15116	27837
Food Warehouses	893	8	901
Houses re Contagious Disease ..	2278	34	2312
Contagious Disease Contacts ..	931	13	944
Disinfection	301	4	305
Overcrowding	140	20	160
Vermin	446	19	465
Housing Acts—Houses	49	1379	1428
Other Buildings	1	—	1
Housing Acts (Slum Clearance): ..			
Section 25—Houses	2	60	62
Other Buildings	—	—	—
Section 11—Houses	—	1	1
Special Visits	36	—	36
Houses Let in Lodgings—Day ..	45	2	47
Hotel and Restaurant Kitchens ..	100	1	101
Ice Cream Premises	133	15	148
Location of Retail Businesses Order, 1941	300	—	300
Markets—Retail Meat	357	7	364
Fish and Fruit	449	4	453
Wholesale Fish and Fruit	517	—	517
Wholesale Meat	80	—	80
Wholesale Tripe	44	—	44
Meeting with Owner or Tradesman ..	3541	15	3556
Merchandise Marks Act	100	—	100
Offensive Trade Premises	261	1	262
Piggeries	64	—	64
Shops—Meat	546	4	550
Fish	190	1	191
Fruit	68	—	68
Other Food Shops	564	1	565
Shops Acts	325	—	325
Slaughterhouses—Corporation ..	78	—	78
Private	240	1	241
Schools	10	9	19
Smoke Observations	52	—	52
Special Visits re Smoke	433	—	433
Special Visits	2648	277	2925
Sewers, etc.	18	3	21
Street Gullies	362	—	362
Streets or Back Roads	32	2	34
Stables	42	1	43
Tips	20	1	21
Urinal—Public	69	26	95
Private	35	3	38
Van Dwellings	24	—	24
Workshops and Workplaces (excluding Bakehouses)	54	8	62
Yards and Courts	271	55	326
Grand Totals	29870	17091	46961
(Comparative figures for 1944)	(27829)	(16583)	(44412)
Notices—Served—Informal			1852
Formal			25
Complied with—Informal			865
Formal			4
Samples—Food and Drugs Act			653
Bacteriological			811
Shell Fish			12
Milk for T.B.			35
Rag Flock Act			3
Fertiliser and Feeding Stuffs Act ..			18

CANAL BOATS

Although visits have been made as usual to the wharves, no canal boats have been found there. It appears that no boats have docked at the wharves during the year, and that is partly due to the insufficiency of water for the satisfactory working of the boats through the locks and partly due to the transference of boats to other areas by the Ministry of Transport.

COMMON LODGING HOUSES

At the beginning of the year a common lodging house, numbered 2A Lee Street, containing 98 beds for men, was closed down voluntarily.

On my request the premises were fumigated with Hydrogen Cyanide for the destruction of vermin.

There are now only two common lodging houses remaining in the City, containing 98 and 78 beds respectively, all for males. Although both of these buildings were erected specially for use as common lodging houses, I do not regard either of them as being of satisfactory construction and arrangement.

Twenty years ago there were 15 common lodging houses in the City with a total of 720 beds, 89 for women and 631 for men, but our night inspections of the existing common lodging houses throughout the year show that 35 to 40 per cent. of the beds are vacant.

There is a very serious shortage of bed sheets, pillow slips, etc., and the keepers seem unable to obtain fresh supplies.

TABLE OF CESSPOOLS, PRIVIES AND PAIL CLOSETS IN CITY.

	Cesspools.	Privies.	Pail Closets.	Chemical Closets.
No. remaining December, 1944	93	—	108	1
No. abolished during year 1945	—	—	17	—
No. remaining December, 1945	93	—	91	1

COWSHEDS.

Number of Dairy Farms in city at end of 1945 ..	20
Number of Cows in city at end of 1945	402

DISINFECTION.

No. of articles disinfected	1700
Houses or parts of houses disinfected ..	794

DISINFESTATION. *Council.* *Other.*

Houses.	1.	Infested	99	425
		Disinfested	99	425
	2.	No change.		
	3.	No change.		
	4.	No change.		

Personnel. Nil.

Clothing and Bedding. From 7 houses.

DRAINS.

Voluntary Cleansing of Stopped Drains by Health Department.

Seventy-two drains were attended to and of these 56 were unstopped immediately. In the remaining 16 cases the owners' attention had to be called to them.

IMPROVEMENTS TO HOUSES. No. of Houses.

Separate internal water supply in place of taps in common yards	10
Additional water closets	79

SUMMARY OF FOODSTUFFS CONDEMNED.

	Tons	Cwts.	Qrs.	Lbs.		
Meat ..	203	8	3	10	Rabbits ..	239
Fish ..	19	15	1	24	Rolled Oats ..	603 lbs.
Fruit ..	-	1	1	4	Crabs ..	1,281 "
Vegetables ..	51	19	3	21	Tea ..	200 "
Preserved Foods					Skimmed Curd ..	240 "
(Tinned Goods)	19,574				Jam ..	372 "
Poultry ..		50			Sugar ..	77 "
Eggs ..		56			Brawn ..	80 "
Lobsters ..		4			Tomatoes ..	480 "
Mussels ..		16,136	lbs.		Semolina ..	5,520 "
Cheese ..		252	"		Macaroni ..	552 "
Sausage ..		36	"		Cake ..	56 "
Butter ..		8	"		Chocolate ..	27 cartons
Cereals ..		418	"		Pykelets ..	1,380
Sweets ..		202	"		Rooks ..	144
Bacon ..		55	"		Fish Cakes ..	576
Dried Fruit ..		1,888	"		Fish Paste ..	104 jars
Biscuits ..		302	"		Sauce ..	323 bottles

TABLE A. Total Weights of Meat Condemned

	British Meat			Imported Meat			British Offal			Imported Offal			Totals		
	T.	C.	Qrs. Lbs.	T.	C.	Qrs. Lbs.	T.	C.	Qrs. Lbs.	T.	C.	Qrs. Lbs.	T.	C.	Qrs. Lbs.
Ministry of Food Central Slaughterhouses ..	94	6	2 19	-	-	-	46	12	1 18	-	-	-	140	19	0 9
Other Diseases ..	29	11	3 18	3	18	2 0	28	19	0 2	-	-	1 9	62	9	3 1
Total ..	123	18	2 9	3	18	2 0	75	11	1 20	-	-	1 9	203	8	3 1

TABLE B. Total Number of Animals Slaughtered, 90,382, comprising :

	Bulls	Bullocks	Heifers	Cows	Calves	Sheep & Lambs	Pigs	Totals
Casualties ..	216 71	8,902 136	2,801 217	2,175 537	13,011 131	41,854 406	19,514 411	88,475 1,909
Totals ..	287	9,038	3,018	2,712	13,142	42,260	19,925	90,382

TABLE C. Number of Animals, Parts and Offals affected with Tuberculosis and other Diseases

	Tuberculosis			Tuberculosis Order			Tuberculosis Casualties			Other Diseases			Casualties		
	Carcass	Part	Offal	Carcass	Part	Offal	Carcass	Part	Offal	Carcass	Part	Offal	Carcass	Part	Offal
Bulls ..	-	27	22	-	-	-	6	9	5	3	5	5	1	2	1
Bullocks ..	6	600	470	-	-	-	8	13	2	1	94	2,078	5	11	5
Heifers ..	14	164	158	-	-	-	9	14	3	1	19	227	6	7	11
Cows ..	121	446	530	4	3	4	76	50	41	29	42	818	34	18	55
Calves ..	3	-	-	-	-	-	5	-	-	223	6	9	23	1	1
Sheep and Lambs ..	-	-	-	-	-	-	-	-	-	83	14	1,328	81	8	1
Pigs ..	41	897	79	-	-	-	5	26	-	13	39	122	47	8	15
Total ..	185	2,134	1,259	4	3	4	109	112	51	353	219	4,587	197	55	89

Percentage of all Animals affected with Disease = 10.35%

TABLE D. Percentage of Animals affected with Tuberculosis and other Diseases

	Bulls	Bullocks	Heifers	Cows	Calves	Sheep & Lambs	Pigs
Tuberculosis	24.9	12.15	11.9	46.6	.006	—	5.22
Other Diseases	5.92	24.27	8.9	36.7	2.0	3.58	1.2

Of Animals sent in for slaughter under the Tuberculosis Order, 100% (all cows) were found to be infected with Tuberculosis ; of these in 36.3% of cases the whole carcass was condemned.

TABLE E. Percentages of Whole Carcasses rejected

	Bulls	Bullocks	Heifers	Cows	Calves	Sheep & Lambs	Pigs
Tuberculosis	2.0	.15	.76	7.29	.06	—	.23
Other Diseases	1.39	.06	.23	2.32	1.87	.38	.2

TABLE F

Tabulated List of other defined Diseases and their incidence in Carcasses rejected

Disease	Cows	Bulls	Heifers	Bullocks	Calves	Sheep	Lambs	Pigs	Total
Malignant Neoplasm ..	1	-	-	2	-	2	-	-	5
Dropsy ..	9	1	2	1	33	106	-	12	164
Fever—Acute ..	7	-	1	1	19	15	-	28	71
Septic Peritonitis ..	5	1	-	-	4	1	-	4	15
Pneumonia ..	2	-	-	-	7	12	-	1	22
Dead Animals ..	1	-	-	-	3	16	-	5	25
Immaturity ..	-	-	-	-	165	1	-	-	166
Bruising—Extensive ..	-	-	1	-	3	1	-	2	7
Pyæmia ..	-	-	-	-	4	1	-	-	5
Septic Metritis ..	5	-	-	-	-	2	-	1	8
Gangrene ..	-	-	-	-	-	1	-	-	1
Johnnes' Disease ..	22	-	1	1	1	-	-	-	25
Jaundice ..	-	-	1	-	1	-	-	-	2
Swine Erysipelas ..	-	-	-	-	-	-	-	3	3
Acute Enteritis ..	-	-	-	-	2	-	-	3	5
Joint Ill ..	-	-	-	-	1	-	-	-	1
Septic Mastitis ..	3	-	-	-	-	3	-	-	6
Uraemia ..	4	1	-	-	3	1	-	1	10
Septic Conditions ..	4	1	1	1	-	2	-	-	9
Total ..	63	4	7	6	246	164	-	60	550

Inspection of Dairy Cows

Summary of reports received from local office of Ministry of Agriculture and Fisheries :

Non-Designated Herds

"One hundred and thirty-nine animals in non-designated herds were examined under the Milk and Dairies Order, 1926 ; five were found affected with mastitis. No animals were slaughtered under the Tuberculosis Order.

Tuberculin Tested Herds

There is one producer in the City holding a tuberculin tested licence, this producer also holds an Attested licence. Other Attested herds are:

The Leicester Frith Institution Farm

The Leicester Mental Hospital

Accredited Herds

There are six producers holding accredited licences. Three hundred and fourteen animals were examined ; five were found affected with mastitis. No animals were slaughtered under the Tuberculosis Order."

Milk Traders—Licensing and Registration.

		Number
Milk and Dairies Order 1926	Application for registration of persons as "dairymen"	32
Milk (Special) Designations) Order 1936	Application from cowkeeper to use designation "Tuberculin Tested"	1
	Application from cowkeepers to use designation "Accredited"	6

Food and Drug Act, 1938
NUMBER OF SAMPLES TAKEN FOR CHEMICAL ANALYSIS.

1941	1942	1943	1944	1945
1093	783	737	622	653

Number of Samples taken under Fertilisers and Feeding Stuffs Act, 1926 18

Milk (Special Designations) Order, 1936.
NUMBER OF SAMPLES TAKEN FOR BACTERIOLOGICAL EXAMINATION.

1941	1942	1943	1944	1945
574	621	719	753	811

**ADMINISTRATIVE ACTION REGARDING SAMPLES
NOT REPORTED TO BE 'GENUINE.'**

(For details of analysis, see Report of the Public Analyst, page 133)

MILK SAMPLES REPORTED 'NOT GENUINE.'

				Formal	Informal
Milk	..	..	..	4*	11
Pasteurised Milk	..	..	..	11*	-
T.T. Milk	..	..	..	-	1

**SAMPLES OTHER THAN MILK REPORTED
'NOT GENUINE.'**

				Formal	Informal
Brandy Mint	..	..	..	-	1
Cordial (Blackcurrant)	..	..	..	-	1 (private)
Cordial (Lime Flavour)	..	..	..	-	2
Carrot Soup	..	..	..	-	1
Fish Cakes	..	..	..	-	1
Gravy Browning	..	..	..	-	1 (private)
Ginger Kup	..	..	..	-	1
Gelatine	..	..	..	1	1
Hors d'Oeuvre (Mixed)	..	..	..	-	2
Hors d'Oeuvre (Swedish)	..	..	..	-	1

Samples other than Milk reported 'Not Genuine'—continued

				Formal	Informal
Herring Fillets	..	..	..	—	1
Herring (Smoked)	..	..	..	—	1
Herring (Rollmop)	..	..	..	—	1
Ice Cream ..	..	..	..	—	11
Lemonade ..	..	..	..	—	1 (private)
Mild Beer ..	..	..	..	—	1
Malt Vinegar	..	..	..	1	—
Master Mix Cake and Pudding Mixture..				—	1
Pudding Mixture	..	..	..	—	1
Pork Sausage	..	..	..	2	—
Saccharin Tablets	..	..	..	1	—
Soda Water	..	..	..	—	1
Sardine and Tomato..	..	..	..	—	1
Sauce Butter Flavour	..	..	..	—	1
Bronomalt ..	..	..	..	—	1

* For result to Legal Proceedings in two cases, see page 133. In all cases where proceedings were not taken, written cautions were sent or "follow-up" samples were immediately obtained.

EXAMINATION OF MILK FOR PRESENCE OF TUBERCLE BACILLI.

Milk and Dairies (Consolidation) Act, 1915.

Number of Samples of Milk taken for microscopical and biological examination for Tubercle Bacilli—

Year.	1941	1942	1943	1944	1945
Number taken ..	54	87	54	52	35
Percentage containing Tubercle Bacilli	5.55	5.75	—	3.84	Nil.

Details respecting samples taken, 1945.

	Number of Samples taken.	Number reported containing Tubercle Bacilli.	Number reported negative.	Number unsatisfactory although negative as regards Tubercle Bacilli.
Cowkeepers with registered premises within City boundaries ..	17	—	17	—
Cowkeepers with premises outside City boundaries ..	18	—	17	1
Totals ..	35	—	34	1

OFFENSIVE TRADES.

Particulars of all offensive Trades in the City.

Number of Tripe Dressers	8 (1944, 12)
„ Marine Store Dealers	9 (1944, 14)

A complete survey of the City has shown a marked reduction in the number of these establishments.

SLAUGHTERHOUSES.

Particulars of all Slaughterhouses in the City.

Private Slaughterhouses	34*
Licensed Private Slaughterhouses (includes two Knackers' Yards)	3
Corporation Slaughterhouses situated at Cattle Market and let off as Private Slaughterhouses	19
Corporation Slaughterhouses situated at City Hospitals :	
City Mental Hospital	1
City General Hospital	1
	—
Total Slaughterhouses	58
	—

* No slaughtering is being done in these slaughterhouses at present.

LEGAL PROCEEDINGS.

Food and Drugs Act	2
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LEGAL PROCEEDINGS

Acts, Bye-laws or Regulations under which proceedings were instituted	Default or Offence	Result	Fines			Costs		
			£	s.	d.	£	s.	d.
Food and Drugs Act, 1938	Milk not properly pasteurised	Conviction	15	0	0	2	2	0
Food and Drugs Act, 1938	Milk 19 per cent. deficient in fat	ditto	5	0	0	1	1	0

F. G. McHUGH, F.R.San.I., F.S.I.A., *Chief Sanitary Inspector*

Report on the Venereal Diseases Scheme

For the Year 1945

By

C. HAMILTON WILKIE, M.D., Ch.B., B.Sc.(Glas.),
Director of Venereal Diseases Services

FOREWORD BY THE MEDICAL OFFICER OF HEALTH

In my Report for 1943, on page 86, I outlined the procedure for following-up contacts under Regulation 33B. The appointment of Mrs. Grainger, as Social Worker, has improved the follow-up arrangements considerably.

The following Table shows the results of the working of the Regulation in Leicester during 1945 :

	M.	F.	Total
1. Total number of contacts in respect of whom Form 1 was received ..	—	107	107
2. Number of cases in 1 in which attempts were made during the current period outside the scope of the Regulation to persuade the contact to be examined before the latter had been named on a second Form 1 :			
Contacts found	—	58	58
Contacts examined	—	46	46
3. Number of those in 1 in respect of whom two or more Forms 1 were received ..	—	26	26

	M.	F.	Total
4. Number of those in 3 who were			
(a) found	—	20	20
(b) examined after persuasion or already under treatment	—	11	11
(c) served with Form 2	—	9	9
(d) examined after service with Form 2	—	6	6
(e) prosecuted for failure to attend for, and submit to, medical examina- tion	—	1	1
(f) transferred to other areas ..	—	3	3

In 25 cases insufficient information of name and/or address was given, and ten cases (in addition to those in 4(f) above) were transferred to other areas.

Annual Report on the Venereal Diseases Scheme

for the Year 1945

By

C. HAMILTON WILKIE, M.D., Ch.B., B.Sc.(Glas.),
Director of V.D. Services

The following is a report on the Venereal Disease Scheme for the year 1945.

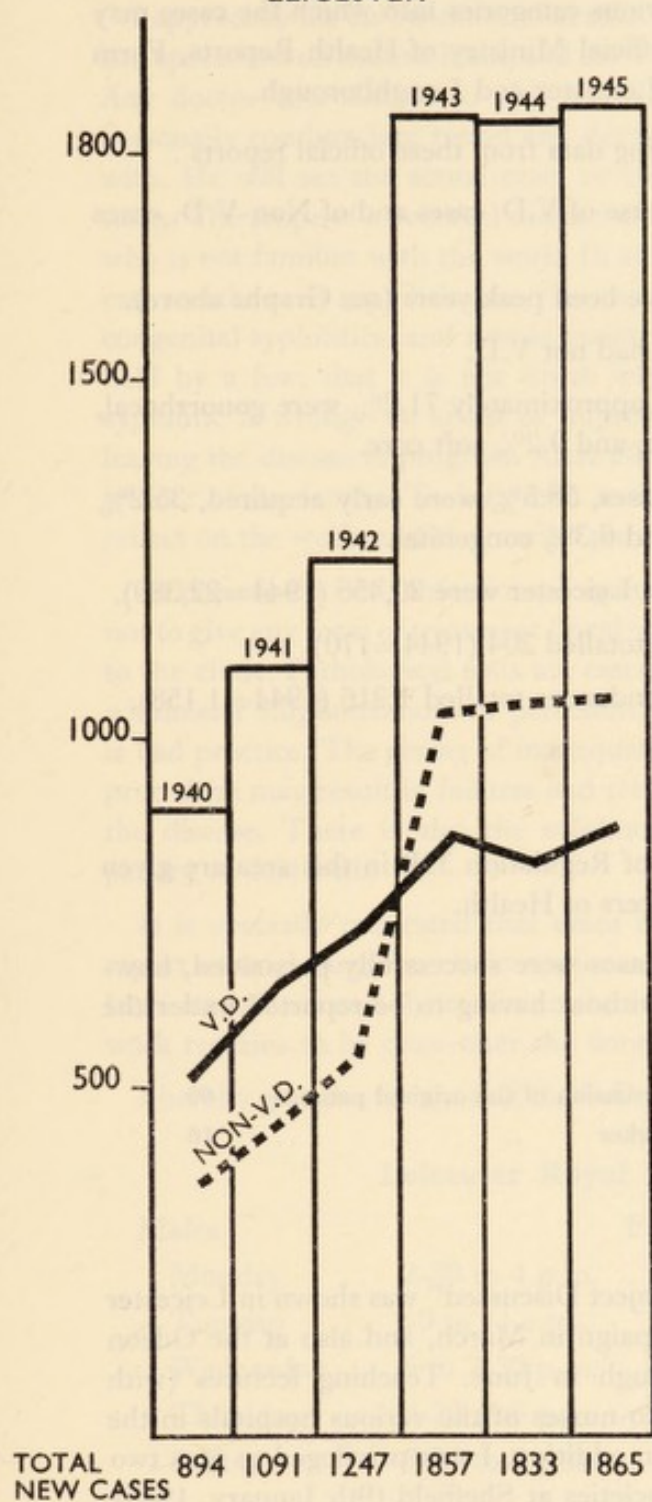
The main V.D. Centre is at the Leicester Royal Infirmary. A subsidiary centre is held at the Loughborough General Hospital. The days and times of the V.D. Clinics remain the same as for the previous year except that an additional Female Clinic was opened at Leicester on Tuesday, 29th May. The times of the clinics are given later in this report. The new Female Clinic would have been of more service had it been timed to take place in the evening, but staffing difficulties (chiefly nursing) prevented a new evening session. Nevertheless, this new clinic (staffed only by myself, the ward sister and one nurse) has proved a valuable necessary addition to the service.

The Loughborough clinics (begun in 1941) are now well established. They have, however, a disadvantage in that the male clinic follows immediately on the female clinic on the Monday evenings. Limited building accommodation also is a marked handicap. The ideal would be to have the male clinic on a different day from the female clinic to avoid the possibility of male patients seeing female patients leaving the centre. I advise that this change is made when possible.

Statistics

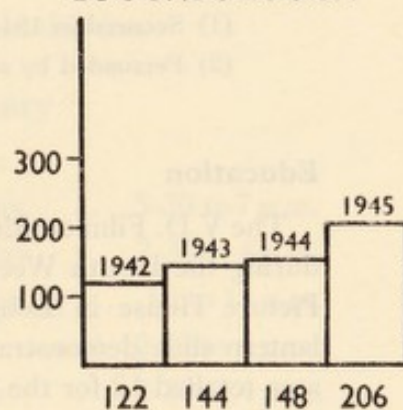
The following graphs show the new cases in recent years.

LEICESTER



NON-V.D.	372	451	542	1017	1025	1027
V.D.	522	640	705	840	808	838

LOUGHBOROUGH



55	97	101	123
67	47	47	83

To avoid confusion I have kept the figures in the graphs as few as possible. Details of all the various categories into which the cases may be divided are given in the official Ministry of Health Reports, Form V.D. (R) (revised 1945), for Leicester and Loughborough.

I hereby give some interesting data from these official reports :

- (a) There was a slight increase of V.D. cases and of Non-V.D. cases in 1945.
- (b) The last three years have been peak years (see Graphs above).
- (c) About 60% of all cases had not V.D.
- (d) Of the new V.D. cases, approximately 71.2% were gonorrhoeal, 28.6% were syphilitic, and 0.2% soft core.
- (e) Of the new syphilitic cases, 58.5% were early acquired, 35.2% were late acquired, and 6.3% congenital.
- (f) The total attendances at Leicester were 20,456 (1944=22,389).
- (g) In-patients at Leicester totalled 204 (1944=170).
- (h) The Loughborough attendances totalled 1,216 (1944=1,158).

Regulation 33B

The results of the working of Regulation 33B in this area are given elsewhere by the Medical Officers of Health.

A considerable number of cases were successfully persuaded, however, to report to the clinics without having to be reported under the Regulation.

(1) Secured in 1945 by persuasion of the original patients	69
(2) Persuaded by social worker	16

Education

The V.D. Film entitled "Subject Discussed" was shown in Leicester during the Health Week Campaign in March, and also at the Odeon Picture House in Loughborough in June. Teaching lectures (with lantern slide demonstrations) to nurses of the various hospitals in the area totalled 12 for the year. In addition, I was privileged to give two teaching lectures to Dental Societies at Sheffield (9th January, 1945), and Swansea (21st June, 1945). The title of the latter lectures was, "Venereal Diseases with special reference to conditions met with in the Dental Surgery." I also served in London as extern examiner to nurses taking a special examination in venereal diseases.

The V.D. Clinics and the General Practitioner

I appreciate the co-operation that exists between general practitioners and specialists on the one hand, and the V.D. Departments on the other. Any doctor who desires to visit the V.D. clinics is welcome. I will personally conduct him round and demonstrate the types of cases met with. He will see the actual cases or coloured lantern slides of clinic cases. The scope of a venereal disease scheme usually surprises a doctor who is not familiar with the work. In addition to the acute gonococcal case and the early syphilitic case, there are many non-venereal infections, congenital syphilitics, and a wide variety of late syphilitics. The belief, held by a few, that it is not worth while to treat the advanced late syphilitic is wrong. To arrest or improve the condition is better than leaving the disease to progress. After all, the patient may be the breadwinner of the family. To keep him as such is an achievement. It may reflect on the welfare of the marital partner and the family.

As regards the early infections, I again appeal to general practitioners not to give any form of treatment (local or general) before sending a case to the clinic. Pathological tests are essential for accurate diagnosis. To administer sulphonamides or penicillin, etc., before accurate diagnosis is bad practice. The giving of inadequate dosage is even worse. Such a procedure may result in failures and relapses and subsequent spread of the disease. There is also the sulphonamide and penicillin resistant patient to deal with.

It is specially requested that cases being sent to the clinic should report early during the clinic session. At present these clinics have a large attendance and the strain on the staff may be considerable. Much work remains to be done after the doors are officially closed.

I hereby give the times of all the V.D. clinics in this area.

Leicester Royal Infirmary

Males :

Monday .. 2-30 to 4 p.m.
Tuesday .. 10 to 11 a.m.
Wednesday .. 6 to 7-30 p.m.
Thursday .. 4-30 to 6 p.m.
Friday .. 5-30 to 7 p.m.

Females :

Monday .. 5-30 to 7 p.m.
Tuesday .. 2-30 to 4 p.m.
Wednesday .. 10 to 11 a.m.
and 2.30 to 4 p.m.
Friday .. 2-30 to 4 p.m.

Loughborough General Hospital

Females :

Monday .. 6 to 7 p.m.

Males :

Monday .. 5 to 6 p.m.

In addition to the above clinics, intermediate treatment is given every weekday at the Leicester centre at times specially arranged to suit individual cases. Patients requiring in-patient treatment are admitted into one of the V.D. Wards at Leicester Royal Infirmary. These wards (male and female) accommodate a total of 14 in-patients.

C. HAMILTON WILKIE.

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