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ANNUAL REPORT

OF THE

Medical Officer of Health for the YEAR 1923.

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Leicestershire County Council

ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE YEAR

1923.

Officers of the Medical Department 1923.

T. ROBINSON, M.R.C.S., L.R.C.P., D.P.H. (Camb.)

County Medical Officer.
Chief School Medical Officer.
Administrative Tuberculosis Officer.
Chief Medical Officer for Maternity and Child Welfare.

J. A. FAIRER, M.D., CH.B., D.P.H. (Man.), Senior Assistant County Medical Officer. Senior Assistant School Medical Officer. Venereal Diseases Medical Officer. Bacteriologist.

N. A. COWARD, O.B.E., M.D., CH.B. (Edin.), D.P.H. (Oxon.)

Assistant County Medical Officer.

Senior Tuberculosis Medical Officer.

Medical Officer for Maternity and Child Welfare.

H. CARPENTER, M.B., B.S., D.P.H., M.R.C.S., L.R.C.P. (Lond.)
Second Tuberculosis Medical Officer.

M. E. WESTON, M.B., B.S. (Lond.)
Assistant School Medical Officer.
Assistant Infant Welfare Medical Officer.

HEALTH VISITORS:

Warren, Mrs. A. (Superintendent Health Visitor.)

Antrobus, Mrs. A. D.
Bailey, Miss A. J.
*Balderston, Miss O. M.
Brunsdon, Mrs. P.
Butler, Miss G. E.
Cole, Miss R.
*Corbett, Miss A.
*Dennis, Miss S.
Fay, Miss M.
Fox, Miss L.

*Gourlay, Mrs. J.
Griffiths, Miss T. M.
Kennedy, Miss A. M.
Marsh, Miss K. A.
Poxon, Miss M.
*Taylor, Miss A. E.
*Warn, Miss M.
Wright, Mrs. E. E.
(Two vacancies)

^{*} Left.

The County Sanitary and Housing Committee. 1923.

J. W. Black, Esq. M.P. (Chairman).

Bastard, W.

Forsell, J. T.

Goodacre, C.

Goodman, J. A.

Hazlerigg, Sir A. G., Bt.

(ex-officio)

Hubbard, B.

Jacques, J. T.

Kinton, G.

Levers, G. T.

Martin, Lt.-Col. R. E.

(ex-officio)

McCarthy, M.

Pickard, A.

(Vice-Chairman)

Shields, J.

Squirrell, E. A.

Stubbs, W.

Tandy, E. W.

Timms, R.

Ward, G., M.P.

Whitwell, H. J.

Wilson, C.

Wright, W. H.

REPORT.

17, FRIAR LANE,

LEICESTER,

APRIL, 1924.

To the County Council of Leicestershire.

MR. CHAIRMAN, MY LORD DUKE, AND GENTLEMEN,

I have the honour to present my 26th Annual Report on the Health of Leicestershire.

From the chief vital statistics which have already been submitted to the County Council it will be seen that the Health of the County has on the whole been entirely satisfactory, with the possible exception of an increase in the number of deaths from Zymotic Diseases.

The most noticeable feature is the low Infantile Mortality Rate of 62, which is the lowest ever recorded in the County.

The Death Rate of 10.9 also equals the lowest previous rate which was recorded in 1920. This Death Rate is .7 per 1,000 less than the rate for the rest of the Country.

The Birth Rate is .1 above that for Rural England and Wales.

With reference to the Zymotic Diseases the increase in the number of deaths, viz., 138 as against 76 last year, is accounted for chiefly by 26 more from Measles, 18 more from Whooping Cough, and 16 from Infantile Diarrhœa.

With regard to the deaths from Infantile Diarrhœa the Death Rate is 1.31 lower than that for the rest of the Country.

Unfortunately at the end of the year an outbreak of Small Pox occurred on the borders of the County, infection having been conveyed into Leicestershire from an adjoining County. Further particulars of this are given in my report.

The work of the Infant Welfare Centres is well maintained, and two additional Centres have been opened. It is largely due to the zeal and enthusiasm of the Local Infant Welfare workers that these Centres are such a success.

I have the honour to be,

Mr. Chairman, My Lord Duke, and Gentlemen,

T. ROBINSON, County Medical Officer.

REPORT.

NATURAL AND SOCIAL CONDITION OF THE COUNTY.

Population.— The estimated population as supplied by the Registrar General for 1923 is 268,600 for both the Birth Rate and Death Rate. The figures last year were 265,813 for the Birth Rate, and 265,619 for the Death Rate.

This year the natural increase of the population is 2,391 as compared to 2,583 and 2,741 in the years 1922 and 1921 respectively.

The decennial average previous to 1921 was 2,133.

PHYSICAL FEATURES AND GENERAL CHARACTER OF THE DISTRICT.

The administrative County has an area of 524,197 acres, of which 39,801 acres form the 12 Urban Districts, and 484,396 the 13 Rural Districts.

The highest part of the County is Bardon Hill, in the Charnwood Forest Range, being 853 feet above sea level.

The chief River is the Soar, which rises in the South of the County, with several heads, and flows northerly till it reaches the Trent, on the North West border. Many streams run into the Soar, the largest being the Wreake, which, under the name of the Eye, rises near Pickwell, and flows through Melton Mowbray.

Leicestershire on a whole is well watered, healthy, and mild, and is 39 miles from north to south, and 38 from east to west.

Industries.

Leicestershire is chiefly a grazing County. Hinckley, Earl Shilton and Barwell are the chief centres for the manufacture of hosiery and boots and shoes, whilst Loughborough is chiefly noted for its engineering works. Colleries in the north-west and iron mines in the north-east parts of the County are largely worked, and brick making is also undertaken. Near Melton Mowbray there are many Cheese Factories; this district is noted for its Stilton Cheese.

VITAL STATISTICS FOR 1923.

A summary of the chief statistical information relating to both the Urban and Rural Districts, and to the County as a whole is given below.

The respective figures for Rural England and Wales are given as a comparison.

The system of inquiry as to the transferable Death Returns remain the same, whereby a correct record of deaths of persons actually belonging to the County, and to each individual parish is ensured.

The principle feature of this return is that all the rates, with the exception of Diphtheria, Enteric Fever, and Whooping Cough, are better than the respective rates for the rest of the Country.

	L	EICESTE	RSHIRE	COUNT	Y, 192	3.	Е	NGLANI	D
	Urb	an.	Ru	ral.	Wh		1	WALES	
Population	112	,000	156,	600	268,	600		_	
	No.	Rate,	No.	Rate.	No.	Rate.		Rates.	
Births	2274	20:30	3045	19:44	5319	19.8		19.7	
Deaths (all causes and all		10:61	1739	11.10	2928	10.9		11.6	
ages)	1189	10.61	181	*59.44	328	*62		*69	
, (under one year)	147 59	*64.64 0.53	79	3.20	138	0.2			
Deaths from—					-	0.00		0.00	
¬ ≈ Small Pox	0	0.00	0	0.00	0	0.02		0.01	
Enteric Fever	2	0.03	4	0.03	6 36	0.13		0.14	
Measles	21	0.19	15	0.10	30	0.11		0.10	
Whooping Cough	15	0.13	15 28	0.18	30	0.11		0.02	
Diphtheria	2	0.00	20	0.01	2	0.01		0.03	
Scarlet Fever	0	0.00	-	0.01	-				
Enteric Fever Measles	19	*8.36	15	*4.93	34	*6:39		*7 7	
							Percen	tage of 1	[otal
							Urban.	Rural.	Whole County
(Heart Disease	143	1.58	204	1:30	347	1.29	12.03	11.73	11.85
	137	1.55	179	1.14	316	1.18	11.52	10.59	10.79
Cancer Cerebral Hæmorr- hage Phthisis Congenital Debility Bronchitis	91	0.81	132	0.84	223	0.83	7.65	7.59	7.62
hage	85	0.76	120	0.77	205	0.76	7.15	6.90	7:00
Congenital Debility	73	0.65	97	0.62	170	0.63	6.14	5.28	5 81
Bronchitis	78	0.70	86	0.55	164	0.61	6:56	4.95	5.60
Pneumonia	55	0.49	103	0.66	158	0.20	4.63	5 92	5'40

Notes.—*The Rates are calculated per thousand of the population except where marked (*) which are per thousand registered births.

† The Diarrhæa Rates per thousand of the population are: Urban, 0.17; Rural, 0.10; Whole County, 0.13

Births.

There are 203 less births this year as compared to last, so that the Birth Rate for 1923 is 19.8 as against 20.8 last year. Comparing the Birth Rate for these two years with those for Rural England and Wales there is an increase of .1 per thousand this year as against .2 per thousand last year.

The large number of births registered in 1920, viz., 6,333 will be observed. Since 1910, with the exception of 1920 the births have always been below 6,000.

	URB.	AN.	RURA	11	COUN	TY.	Rate for Rural England
YEAR.	Net No. Registered	Rate	Net No. Registered	Rate	Net No Registered	Rate	and Wales,
1919	1800	16.22	2508	16.63	4308	16 5	18:5
1920	2700	24.4	3033	24.1	6333	24.2	25.4
1921	2477	22.6	3232	21.1	5709	21.7	22.4
1922	2419	21.8	3103	20.0	5522	20.8	20.6
1923	2274	20.3	3045	19.4	5319	19.8	19.7

The highest Birth Rate recorded since 1900 was 28.1 in 1901 (6,344 births), and the lowest 16.5 in the year 1919 (4,308 births). It will be seen by the above table that the Birth Rate for the County has fallen slightly since 1920, but even then it is still much above the rates prevailing during the war, when as was only natural, a great decrease took place. The Births are now practically up to the pre-war level.

Of the 5,319 births notified by the Registrar General, 2,689 were males and 2,630 were females, including 208 illegitimate births, comprising 104 males and 104 females.

The percentage of the illegitimate births in the County was 3.9, which compares favourably with the percentage for the previous year of 4.5.

The figures for 1920 and 1921 were 4.2 and 4.0 respectively. This percentage of 3.9 shows a welcome decrease in the illegitimacy in the County.

In all previous years the illegitimate births have shown a preponderence of females as compared to males (last years figures were 100 females to 88 males) whilst legitimate births practically always show more males as compared to females. This proportion has been observed for the last 5 years.

Deaths.

The steady fall in the number of deaths in the previous two years has been maintained during 1923. The total number of deaths was 2,928, giving a rate of 10.9, which compares more than favourably with that for Rural England and Wales of 11.6, the difference being 0.7.

The actual number of deaths this y	vear was 11	less than in 1922.
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	URB	AN.	RUR.	AL.	COUN	TY	Rate for Rural
YEAR	Net No. Registered	Rate	Net No. Registered	Rate	Net No. Registered	Rate	England and Wales
1919	1343	12.6	1880	13.0	3223	12.8	13.8
1920	1193	10.8	1667	11.1	2860	10.9	12.4
1921	1240	11.3	1728	11.3	2968	11.3	12.1
1922	1237	11.2	1702	10.9	2939	1111	12.9
1923	1189	10-61	1739	11.10	2928	10.9	11.6

Last year the 7 chief causes of death in the County were Heart Disease 12.9%, Cancer 10.6%, Cerebral Hæmorrhage 7.8%, Phthisis 7%, Congenital Debility 6%, Bronchitis 7.2% and Pneumonia 6%.

This year the corresponding figures are:—Heart Disease 11.9%, Cancer 10.8%, Cerebral Hæmorrhage 7.6%, Phthisis 7%, Congenital Debility 5.8%, Bronchitis 5.6%, and Pneumonia 5.4%.

It will be seen that the rates for all these diseases, with the exception of Phthisis and Cancer, are lower than last year. With reference to the former disease the rates and deaths are the same as last year (both years show 205 deaths), whilst there is a slight increase in the number of deaths from Cancer (5 more).

The following table shows the 7 chief causes of death for 1922 and 1923, together with the percentage for the whole County:—

Disease.		URBAN.	N.			RUI	RURAL.			WHOLE COUNTY.	OUNTY	
Z	19	1922	19	1923	19	1922	1923	23	18	1922	16	1923
	No.	Per cent.	No.	Per cent.	No.	Per cent.	No.	Per cent.	No.	Per cent.	No.	Per cent.
Heart Disease 1	148	11.96	143	12.03	231	13.57	204	11.73	379	12.89	347	11.85
Cancer 1	128	10.35	137	11.52	183	10.75	179	10.29	311	10.58	316	10.79
Cerebral 9	95	7.68	91	7.67	133	7.81	132	7.59	228	7.76	223	7.62
Phthisis	95	7.68	30	7.15	110	6.46	120	6.90	205	6.97	205	7.00
Congenital Bebility	85	6.87	73	6.14	92	5.41	26	5.58	177	6.02	170	5.81
Bronchitis	100	8.08	78	6.56	114	6.70	98	4.95	214	7.28	164	5.60
Pneumonia	74	5.98	55	4.63	101	5.93	103	5.92	175	5.95	158	5.40

Birth-rate, Death-rate, and Analysis of Mortality during the year 1923.

towns have been calculated on populations estimated to the middle of 1922. The mortality rates refer to the whole population as regards England (Provisional Figures. The Rates for England and Wales have been calculated on a population estimated to the middle of 1923, while those far the and Wales, but onty to civilians as regards London and the groups of towns.)

PER RTHS.	Total Deaths under one year,	69	72	69	62
RATE P	Distribes and Enteritis (under two Years).	7.7	6.6	10.2	6.39
	Violence.	0.44	0.40	0.38	0.31
	Influenzi	0.22	0.22	0.21	0.22
ATION.	Diprheda.	70.0	0.09	0.06	0.11
1,000 POPUI	Whooping. Cough.	0.10	0.12	0.10	0.11
ANNUAL DEATH-RATE PER 1,000 POPULATION	Searlet	0.03	0.03	0.02	0.01
AL DEATH-	Mensles.	0.14	0.15	0.19	0.13
ANNU,	Small-pox.	0.00	0.00	0.00	0.00
	Enteric Fever	0.01	0.01	0.01	0.05
	Ail Causes.	11.6	11.6	10.6	10.9
BIRTH-	RATE PER 1 000 TOTAL POPULA- TION.	19.7	20.4	19.8	19.8
		England and Wales	105 County Boroughs and Great towns, including London	157 Smaller Towns (1921 Adjusted Populations 20,000—50,000) London	Leicestershire

Infantile Mortality.

The Rate this year is the lowest yet recorded in the history of the County, being only 62, and is 7 per thousand lower than the rest of the Country.

Since the year 1909 the Mortality of Leicestershire has been below that for Rural England and Wales. In 1910 the Health Visitors were appointed, and during the 13 years, from 1910 to 1922, the average Infantile Mortality Rate for this County has been 82 as compared to 92 for the rest of the Country.

This decline in Infant Mortality proves to be one of the greatest achievements of public health, and also that the work of the Health Visitors and Infant Welfare Centres is not in vain.

	URI	BAN.	RUK	RAL.	COU	NTY	Rate for Rural
YEAR.	No.	Rate.	No.	Rate.	No.	Rate.	England and Wales
1919	156	86	199	78	355	82	89
1920	196	72	212	58	408	64	80
1921	202	81	204	63	406	71	83
1922	168	69	199	64	367	66	77
1923	147	65	181	59	328	62	69

The deaths of illegitimate children numbered 31, and as there were 208 illegitimate births this gives a mortality rate of 149. (Last year the rate was 144, and 95 in 1921).

Amongst the legitimate children the mortality was 64, showing that the death rate of illegitimate infants greatly exceeds that of the legitimate death rate.

Diseases of the Respiratory Organs.

The deaths recorded from these diseases are as follows: Bronchitis 164, Pneumonia 158, and other Respiratory Diseases 36, making a total of 358. This is a welcome decrease on the figure 422 for last year and also on the years 1921 (380), and 1920 (377).

Last year Bronchitis accounted for 214, Pneumonia for 175, and Other Respiratory Diseases for 33 deaths, which shows that the decrease mentioned above is almost entirely due to the lessened number of deaths from Bronchitis. This disease claimed 92 male and 72 female victims. The corresponding figures for Pneumonia were 93 and 65.

In my report for 1922 it was noticed that Bronchitis was more fatal to the females than to the males, whilst Pneumonia was vice-versa. This year the male deaths from Bronchitis exceed those of the females, whilst the proportion of male to female deaths from Pneumonia remains about the same.

The age incidence of these diseases was as follows :-

Deaths from Diseases of the Respiratory Organs.

RY	ole olty.	14	-	67	-	-	:	:	5	7	17	36
ATO S.	Whole County.	M	-	1	-	:	:	:	9	10	19	60
PIR		(II	:	-	1	:	:	:	1	9	6	23
RESPIRA DISEASES.	Rural.	M	-	-	:	:	:	:	9	9	14	61
OTHER RESPIRATORY DISEASES.	in.	[14	-	1	:	-	:	:	4	1	œ	13
OT	Urban.	M	:	:	-	:	:	:	:	4	10	1
	ele ty.	[I]	17	61	œ	60	63	50	15	13	65	00
1	Whole County.	M	13	6	4	_	4	14	25	23	93	158
PNEUMONIA.		(I)	13	63	9	63	:	ಣ	7	11	4	
CUMC	Rural.	M	7	1	4	П	61	00	14	16	59	103
PNE	i	(I)	4	:	63	_	67	63	œ	63	21	10
	Urban.	M	9	67	:	:	67	9	11	1	34	55
	ole ity.	[4	7	9	:	:	:	:	55	54	72	-
100	Whole County.	M	12	65	:	:	1	ಣ	15	59	92	164
BRONCHITIS.	1	(II	4	1	:	:	:	:	1	30	36	
NCE	Rural.	M	9	1	:	:	:	П	5	37	20	98
BRC		(II	ಣ	5	1	:	:	:	4	24	36	~
	Urban.	M	9	67	:	:	:	23	10	55	42	78
			-	:	:	-:	-:	-	:	:		:
			:	:	:	:	:	:	:	:	:	:
1	-1									qs		
	AGE.		٥			20	20	20	10	65 and upwards	1	Grand Totals
			On	22	5	15	25	45	65	dn		To
			ler	to	to	to	to	to	to	and	Totals	pun
			Under One	1	2	ũ	15	25	45	65	Tot	Gre

Organic Heart Disease.

Heart Disease continues to hold the premier place as the chief cause of death from any one disease in the County.

This year 347 deaths are recorded, giving a rate of 1.29, again 379, and a rate of 1.43 for 1922. In 1920 and 1921 the deaths totalled 342 and 322 respectively.

As will be noticed there is a slight but welcome decrease in the deaths from Organic Heart Disease this year as compared to last, but even then 11.85% of the total deaths are claimed by this disease.

Of the 347 deaths 162 were in males and 185 in females (190 males and 189 females in 1922).

Cancer.

The second highest number of deaths is again claimed by this disease, to which cause 316 are credited. This is an increase of 5 on last year's figure, and is equal to 10.79% of the total number of deaths registered.

The death rate this year is 1.18 as against 1.17 for the year 1922.

During the last 5 years this terrible disease has accounted for no less than 1,485 deaths as follows:—1919 (250), 1920 (297), 1921 (311), 1922 (311), 1923 (316).

Of the 316 deaths this year 136 were males and 180 females. This higher mortality among the female population as compared to the male has been emphasised in several of my previous reports.

The lowest death rate from this disease recorded since 1900 was 0.66 in 1902 when 151 deaths were registered, and from then onwards the numbers have been steadily increasing.

I would like, not only to emphasise this alarming increase in the number of deaths occurring from Cancer in the County, but to point out that this higher mortality is not only peculiar to Leicestershire, but is general throughout the Country, and in fact throughout most civilised Countries.

In my last year's report I strongly urged that steps should be taken to combat the ravages of this disease, not only by research work but by Local Authorities themselves. Various Health Committees have issued a leaflet setting forth the elementary facts about Cancer. As in the case of other diseases propaganda would undoubtedly rouse the public interest in this vitally important matter.

The knowledge obtained by the lay mind of the early symptoms and the urgency of seeking medical advice would undoubtedly help to lessen the number of deaths.

Neglect to seek medical aid because the initial lesion is not painful must be deprecated. Often the general practitioner is only consulted when the disease causes pain, and then too often the growth has so widely spread that an operation is of no avail.

Education of the people into the suspicious symptoms and the probable localities for Cancer growth would be beneficial.

Cerebral Hæmorrhage.

This disease ranks third out of the seven chief causes of death in the County, it having been the cause of 223 deaths as compared to 228 last year.

The male deaths totalled 99, whilst the female deaths were 124.

The deaths occur in the older portion of the population, and it will be seen that out of the 223 deaths over 70% occurred in persons over the age of 45.

Congenital Debility.

The number of deaths this year is 170 as compared to 177 last year. Included in this section are Malformation and Premature Births, and the mortality was slightly higher amongst the male than the female infants (99 male and 78 female).

Cirrhosis of the Liver.

The total number of deaths from this disease is 13, which figure is identical with last year. In 1920 and 1921 the number of deaths was 14 and 18 respectively. Of the 13 deaths, 6 occurred in males and 7 in females.

Nephritis and Brights Disease.

15 less deaths were recorded from these diseases this year, viz., 65 against 80 in 1922. In 1920 and 1921 the deaths reported were 62 and 58. Of the 65 deaths 33 were in males and 32 in females.

HOSPITAL ACCOMMODATION.

Hospital Accommodation is practically the same as in my report of 1922, with the exception of the addition of a further wing to the Leicester Royal Infirmary.

Poor Law Institutions.

Particulars of these Institutions were given in my last year's Annual Report.

Isolation Hospitals.

The County Isolation Hospitals Committee provide Isolation Hospitals at Blaby, Coalville, Hinckley, Ibstock, Loughborough, Melton Mowbray, Moira, and Swannington.

The total number of beds available in these Hospitals is 85.

The two Small Pox Hospitals, unfortunately, had to be opened towards the close of the year owing to an outbreak of this disease—further particulars are given later in this Report.

I regret that during the year no further steps have been taken with relation to the isolation of Advanced cases of Tuberculosis. The scheme for the provision of special wards in the grounds of the present Isolation Hospitals has not yet matured.

The following table shows the number of patients isolated in the various Hospitals during the year:—

		Admi	ited Du	ring th	ne Year.	
DISTRICT.	Dip.	S.F.	E.F.	Ch. P,	C.S.M.	Total.
Urban	34	42	2	1	1	80
Rural	92	64	13	1	2	172
Whole County	126	106	15	2	3	252

PREVALENCE AND CONTROL OVER INFECTIOUS DISEASES.

Zymotic Deaths.

The seven Zymotic Diseases are Small Pox, Enteric Fever, Measles, Whooping Cough, Diphtheria, Scarlet Fever, and Diarrhœa (under 2 years).

The number of deaths from Zymotic Diseases this year was 138, as compared to 76 last year. This is an increase of 62, and gives a rate of 0.5 against 0.3 for 1922.

This increase is mostly accounted for by the greater number of deaths from Measles and Whooping Cough this year as compared to last. The former which accounted for 10 deaths last year is now credited with 36, and the latter, which in 1922 claimed 12, has this year been responsible for 30 deaths.

Deaths from Diarrhoeal Diseases have also increased this year from 18 to 34, a difference of 16, and this, together with the increased number of deaths from Measles and Whooping Cough, accounts for this higher Zymotic Diseases Death Rate.

YEAR	UR	BAN.	RUR	AL.	COU	NTY.
	No.	Rate.	No.	Rate.	No.	Rate.
1919	36	0.3	55	0 3	91	0.3
1920	89	0.8	74	0.2	153	0.6
1921	45	0.4	88	0.2	128	0.2
1922	38	0.3	38	0.5	76	0 3
1923	59	0.2	79	0.2	138	0.2

Notifications.

The Schedule below gives the numbers of each disease notified in the Urban and Rural Districts, together with the total for the whole County during the year under review.

DISEASE.	URBAN DISTRICTS.	RURAL DISTRICTS.	Administrative County,
Diphtheria (including Membranous Croup)	64	203	267
Scarlet Fever	96	120	216
Pneumonia	88	83	171
Chicken Pox	47	12	59
Erysipelas	21	34	55
Enteric Fever	6	20	26
Ophthalmia Neonatorum	14	8	22
Small Pox	17	-	17
Puerperal Fever	2	3	5
Encephalitis Lethargica	-	5	5
Cerebro Spinal Fever	1	1	2
Poliomyelitis	1	-	1
Tuberculosis (Lungs)	185	161	346
,, (Other)	38	46	84
Totals	580	696	1276

The total notifications this year show a decrease of 93 on last year's figure of 1,369.

During the five years 1918 to 1922 the average number of notifications was 2,272. This difference of nearly a thousand between the five yearly average and the totals of the last two years is accounted for by the fact that during 1918 Measles was notifiable. In that year no less than 4,882 notifications were received, of which 3,640 were credited to Measles alone.

The above table shows only 17 cases of Small Pox notified during 1923, but actually 21 cases occurred, the notifications of the other 4 not being received until January, 1924.

Small Pox.

An outbreak of this disease occurred at Ashby Woulds in December, infection having undoubtedly been brought into Leicestershire from an adjoining County.

With the exception of two cases in 1921, no case of this disease had been reported in the County since 1910.

The first cases of the above outbreak were detected on December 17th, and on the same day were isolated at Snarestone Small Pox Hospital. When it is mentioned that one child was actually in attendance at School with the rash of Small Pox well developed on that date it was not surprising to find that before the end of the month it was necessary to admit 21 patients to Hospital.

All necessary precautions to allay the spread of the disease were taken by Dr. Logan, the Medical Officer of Health for the Ashby Woulds Urban District.

Dr. Logan reports as follows:-

"On December 15th I was notified of a case of Small Pox in the adjoining district of Hartshorn and Seals in Derbyshire. I found on visiting this case that a servant, named H., was employed in the house who came from Albert Village.

On visiting this house on December 17th I found Mrs. H. and her two daughters suffering from typical eruptions of Small Pox. This Mrs. H. and one of her daughters had been visiting a Miss S.—neighhours—and on enquiry I learnt that this person had had an illness in early November, which was accompanied by an outbreak of "spots all over her."

I am quite unable to trace the history of the infection of the S. family, but it is evident that the H. family were infected from them, and I am also of opinion that the boy L. S. took the infection into the School."

At the end of the year it was considered that the epidemic would assume considerable proportions, and on January 4th Dr. Shaw, of the Ministry of Health, visited the infected area (Albert Village) with Dr. Logan and myself.

The result of this visit was that Dr. Shaw advised the opening of Syston Hospital also. This Hospital was accordingly opened on 31/12/23, and 4 patients admitted.

At a special meeting of the Smali Pox Hospital Committee, it was decided that when both Hospitals were full any further cases should be admitted to the Nottingham Small Pox Hospital, with whom special arrangements had been made.

It was also decided that subject to the approval of the Ministry of Health extension should be made to the Snarestone Hospital, and that a Motor Ambulance be instantly obtained, and that the Horse Ambulance be kept in reserve.

All the 21 cases, affecting 10 families in all, were reported from the same district—Albert Village—and the source of infection seems to have been from a case occurring about three miles away in the County of Derby.

None of the cases proved fatal, and most of them were of a mild type. Several, however, showed a very marked pustular eruption, and it was surprising to find that the general physical condition of these patients was not affected to a more marked degree. The mildness of the prodromal symptoms and the scanty eruptions in several cases possibly allowed several of the patients to continue their daily routine without seeking medical advice. This undoubtedly played a large part in the spread of the disease, and at the end of the year it was recognised that although every precaution was being taken there was a probability of many more cases being notified.

Of the 21 cases admitted, up to the end of 1923, only 4 had been vaccinated. These were two children who were contacts of cases already isolated, and two patients, aged 35 and 36, who were vaccinated in infancy. 16 of the cases admitted were children under 15 years of age, whilst the remaining 5 were adults. The youngest child was 3 years of age, and the oldest patient was 50.

The most noticeable feature is that 19 of the patients were females, the remaining two being youths of 17 and 19.

In my last report I gave particulars of the percentage of children found to be vaccinated amongst 1,000 examined in the different school age groups. These figures briefly are 4 to 6 years of age 6.6%, 8 to 9 years 14%, and 11 to 12 years 26.6% vaccinated.

Diphtheria.

The Death Rate for the County this year from Diphtheria is slightly above that for Rural England and Wales, viz., 0.11 as compared to 0.07.

With the exception of 1921 and 1922 the Death Rate for the County has nearly always exceeded that for the rest of the Country.

Although the Death Rate is 0.4 above that for the rest of the Country only two more deaths were recorded this year than last. The Death Rate of 0.11 is only 0.1 above the lowest recorded since 1900, viz., 0.10. The highest was 0.23 in 1902.

Of the 30 deaths, only two occurred in the Urban Districts, and the remainder in the Rural Districts.

The deaths were reported from:—Shepshed and Wigston Magna Urban Districts 1 each, and in the Rural Districts, Ashby-de-la-Zouch 16, Blaby 5, Market Bosworth 4, Barrow-on-Soar 2, and Lutterworth 1.

The male deaths totalled 17, and the female 13.

The notifications of Diphtheria totalled 267, against 311 for the year 1922—a slight decrease.

As will be seen by the following table, the number of notifications have decreased, and the number of deaths increased. This accounts for the higher case fatality per cent. of 11.24 against 9.00 last year.

64 notifications were received from the Urban and 203 from the Rural Districts, as compared to 110 and 201 last year. The majority of the Notifications in the Urban Districts came from Coalville 24, Wigston 19, and Loughborough 12.

With the exception of Wigston (19 as against 36) the number of cases notified from the above districts are practically the same as last year.

In the Rural Districts Ashby-de-la-Zouch again supplied the greater number of cases of Diphtheria, viz., 102 against 67 last year, and the village of Measham once more accounted for the majority of them. In all 57 cases were notified from this village, which has a population of only 2,422, whilst the villages around it supplied another 31 cases.

During the year the schools at Measham were visited twice for the purpose of taking swabs of all children, with the object of detecting "carriers." In March 40 swabs were taken, of which two proved positive, and at the end of August nine were found to be positive out of a total of 83...

Reference to the insanitary condition of this village has been made in my last two reports.

Market Bosworth Rural District was responsible for 52 notifications. The majority of these were reported from Ibstock 38, Bagworth 4, and Newbold Verdon and Barlestone 3 each. The outbreak at Ibstock occurred in November, and at the end of that month 61 swabs were taken from the children attending the schools, but only 1 was found to be positive.

From the Barrow-on-Soar Rural District 16 cases were notified:— Sileby 5, Anstey 3, and Seagrave 3, accounting for 11, and the remainder were reported from isolated villages.

Only 12 cases were reported from Blaby Rural District as follows:—Glen Parva 5, Blaby 2, Enderby 2, and Narborough, Whetstone, and Thurlaston 1 each. Last year 40 notifications were received from this district.

The remaining Rural Districts were responsible for 21 notifications as follows:—Hinckley R.D. 5, Lutterworth R.D. 5, Melton R.D. 5, Castle Donington R.D. 2, Loughborough R.D. 2, and Market Harborough R.D. 2.

In addition to the swabs taken at Measham and Ibstock Schools, Gaddesby Council School was visited on October 11th, when 40 were obtained—2 proved positive.

No patient is discharged from the Isolation Hospitals until throat swabs from such patients have proved negative.

716 swabs have been examined in the County Laboratory this year against 1,093 in 1922.

DIPHTHERIA.—The following Table gives the Statistics of this disease.

* Death Rate for Rural	Whole England and County Wales.	0.13	0.15	0.12	0.11	0.07
	Whole	0.17	0.19	0.11	0.10	0.11
* Death Rate.	Rural	0.15	0.17	0.12	0.12	0.18
De	Urban	0.21	0.23	80.0	0.07	0.02
, ×	Whole	12.18	10.75	6.93	9.00	11.24
Case Fatality Per Cent.	Rural	10.67	10.87	9.27	9.95	13.79
Cas	Urban	14.19	10.64 10.87	4.54	7.27	3.13
	Whole	1.44	1.77	1.54	1.17	0.99
* Attack Rate.	Rural	1.42	1.52	1.34	1.30	1.30
Att	Urban	1.45	2.12	1.82	0.99	0.57
	Rural County	44	20	28	28	30
No, of Deaths.	Rural	25	25	19	20	28.
	Urban	22	25	6	œ	22
	Rural County	361	465	404	311	267
No. of Notifications.	Rural	206	230	205	201	203
No	Urban	155	235	199	110	64
	Year.	1919	1920	1921	1922	1923

* Per 1,000 of Population.

Scarlet Fever.

Only two deaths occurred from this disease this year, being 3 less than 1922.

As will be seen by the foregoing table the Death Rate for Leicestershire is still below that for the rest of the Country, and also 0.1 less than last year.

Both the deaths occurred in males. One was reported from Ashbyde-la-Zouch Rural District and the other from the Hinckley Rural District.

The notifications of this disease are still decreasing. This year 216 were received against 298 in 1922 and 502 in 1921.

The majority of these notifications came from the following Districts:—Coalville 29, Loughborough 18, Market Harborough 13, Wigston 12, and Hinckley 7; and in the Rural Districts: Ashby-de-la-Zouch 34, Market Bosworth 23, Barrow-on-Soar 13, Hinckley 11, Market Harborough 11, Billesdon 9, and Blaby 8.

SCARLET FEVER.—The statistical information relating to Scarlet Fever is as follows:—

Vear	Ž	No. of Notifications.	ns.		No, of Deaths.		A	* Attack Rate.	ie.	S	Case Fatality per cent.	ity	Ω	* Death Rate.	Ü	* Death Rate
	Urban	Rural	Whole	Urban	Rural	Whole	Urban	Rural	Whole County	Urban	Rural	Whole County	Urban	Urban Rural	Whole	Fingland and Wales,
1919	197	196	393	63	1	65	1.85	1.35	1.56	1.01	0.51	0.76		0.02 0.007	0.011	0.03
1920	268	195	463	4	-	ĭĠ	2.42	1.29	1.77	1.49	0.51	1.08	0.04	0.01	0.05	0.04
1921	225	277	502	-	4	52	2.06	1.81	1.91	0.44	1.44	1.00	1.00 0.01	0.03	0.02	0.03
1922	129	169	298	63	ಣ	5	1.17	1.09	1.12	1.55	1.77	1.67	0.02	0.05	0.05	0.04
1923	96	120	216	0	63	67	0.86	0.77	08.0	0.00	0.00 1.67	16:0	A STATE OF THE STA	0.00 0.01	0.01	0.03
							* Per 1	000 of Pe	* Per 1000 of Population.							

Typhoid Fever.

The Deaths from this disease have increased from 3 in 1922 to 6 this year, but it will also be noticed from the following table that the notifications have increased in the same proportion.

The deaths were reported from the following Districts:—Loughborough and Coalville Urban Districts 1 each, and Barrow-on-Soar, Belvoir, Blaby, and Lutterworth Rural Districts 1 each (3 males, 3 females).

Of the 26 notifications received, Syston was responsible for 6, Loughborough 4, Knossington 2, and 1 each from Measham, Donisthorpe, Cotesbach, Swannington, Blaby, Kegworth, Bottesford, Croft, Sileby, Thurmaston, Coalville, Branston, Castle Donington, and Desford.

The six cases at Syston formed the subject of a special report, copies of which were sent to the Ministry of Health.

32 Widal's Tests were performed in the County Laboratory, and 7 examinations were made of faeces for the presence of Bacillus Typhosus. Of the former 15 were positive and of the latter 1 proved to contain Bacillus Typhosus.

TYPHOID FEVER.—The statistics relating to Typhoid Fever are given below.

* Death Rate for Rural	England and Wales.	0.01	0.01	0.02	0.01	0.01	
	Whole County	0.05	0.023	0.01	0.01	0.05	
* Death Rate.	Rural	0.03	0.003	0.01	0.01	0.03	
Ď	Urban	0.00	25.00 0.009	0.00	0.01	0.05	
×	Whole	12.50	25.00	7.69	23.08	23.08	
Case Fatality per cent.	Rural	0.00 17.24 12.50	23.81	9.09	33.33	20.00	
Cas	Urban	0.00	33.33	0.00	14.29	33.33	* Per 1000 of Population.
	Whole County	0.16	0.09	0.10	0.05	0.10	
* Attack Rate.	Rural	0.20	0.14	0.14	0.04	0.13	
AL	Urban	0.10	0.03	0.03	90.0	0.05	Par 100
	Whole	5	9	63	ಣ	9	
No. of Deaths.		5	5	22	61	4	
	Urban Rural	0	-	0	-	6.1	
si si	Whole	40	24	26	13	26	
No. of Notifications.		29	21	22	9	20	
No	Urban Rural	11	ಣ	4	-	9	
	Year:	1919	1920	1921	1922	1923	

Erysipelas.

55 notifications were recorded of this disease during the year, a decrease of 8 on 1922. 21 were reported from the Urban Districts and 34 from the Rural Districts.

Puerperal Fever.

3 deaths were reported and 5 notifications of this disease received during the year under review, as against 3 deaths and 6 notifications last year.

The deaths were recorded in the Rural Districts of Barrow-on-Soar, Billesdon, and Hinckley.

No case occurred during the year through the negligence of a midwife. All midwives are inspected periodically by the Health Visitors, who are Inspectors of Midwives.

Measles.

This year 36 deaths were reported from Measles against 10 last year and 10 in 1921, whilst in 1920 there were 64 deaths recorded.

24 of the deaths were in males and 12 in females.

The Death Rate for the County is 0.13 as against 0.14 for Rural England and Wales.

Whooping Cough.

The deaths from this disease this year number 30 against 12 last year, and 23 in 1921. The Death Rate is 0.11 against 0.10 for the rest of the Country.

The male deaths totalled 11 and the female 19.

Poliomyelitis.

Only one case of this disease was notified this year, from Market Harborough Urban District. This did not prove fatal.

Encephalitis Lethargica.

3 deaths (1 male, 2 females) were recorded from this disease; 1 each from the Rural Districts of Ashby, Barrow, and Lutterworth.

5 cases were notified—one each from Thringstone, Mountsorrel, Syston, Kilby, and Dunton Bassett.

In 1922 the deaths totalled 3 (all females), whilst in 1921 7 cases were notified and all proved fatal.

Cerebro Spinal Fever.

There were two deaths last year from this disease and 2 in 1921, 3 in 1920 and 7 in 1919, whilst this year only one death was reported.

2 cases were notified, one from Newbold Verdon and the other from Melton—this latter proved fatal.

With reference to the case at Newbold Verdon, a baby girl, aged 6 months, examination of the contacts were made and throat swabs taken from 8 contacts, but none proved to be positive. All contacts were kept under observation for a time, but no further case was reported from this district.

Ophthalmia Neonatorum.

The number of cases notified this year total 22 against 26 in 1922, 16 in 1921, and 30 in 1920. 14 were received from the Urban Districts and 8 from the Rural Districts.

Immediately upon the receipt of a notification of this disease the Health Visitor is communicated with, and she visits the case and makes a special report. If a case occurs where any blame devolves on a certified midwife through her being neglectful in the course of her duties, the facts of the case are at once reported to the Central Midwives Board.

During the year a Midwife holding the Central Midwives' Board certificate was reported to the Sanitary Committee for a breach of the rules in failing to send for Medical help in two cases of this disease. After careful consideration of the case the Committee decided to send this midwife a letter of censure.

Later in the year the same midwife was again cautioned for the same offence, and informed that if at any future date she fails to comply with the rules of the Central Midwives' Board she will at once be reported to that Authority.

	Cases.						
	Tres	ted	Vision Un-	Vision	Total Blindness	Deaths	
Notified	At Home	Iu Hospital	impaired	Impaired Blindnes			
22	16	6	17	3*	1	2	

^{* 1} case resulted in total blindness in one eye and sight slightly impaired in the other.

Malaria, Pneumonia, Dysentery, and Trench Fever.

No cases of Malaria, Dysentry, or Trench Fever were notified during the year.

171 notifications were received of Pneumonia, 88 from the Urban and 83 from the Rural Districts. The deaths recorded totalled 158. The Urban and Rural Districts were credited with 55 and 103 respectively.

The male deaths totalled 93 and the female 65.

The age incidence of the deaths from this disease can be found on page 14.

Influenza.

A large decrease is recorded in the deaths from Influenza during the year, only 58 deaths being reported as compared to 117 last year. 27 of these deaths were in males and the remainder females.

Diarrhœal Diseases.

During the year under review the deaths from this disease have, unfortunately, increased from 18 in 1922 to 34. The Death Rate has risen from 3.26 to 6.39, but even this is below the figure 7.7 for Rural England and Wales.

Of the 34 deaths 14 occurred in males and 20 in females. In former years the higher proportion of deaths has always been noticed in the males. During the 5 years 1918 to 1922 the male deaths from this disease have totalled 95 against 54 females. This year, however, it will be seen that the female deaths outnumber the male, but only to the extent of 6.

DIARRHEAL DISEASES.

	England and Wales	Rate per 1000 Births.	9.59	8.3	11.5	6.2	7.7
		Whole County.	4.41	4.26	10.51	3.26	6.39
ige.	Rate per 1000 Births.	Kural.	3.99	3.03	9.90	2.53	4.93
Deaths under Two Years of Age-	- 00	Urban.	5.00	5.93	11.30	4.13	8.36
fer Two 1	-	Whole County.	0.08	0.10	0.23	0.02	0.13
eaths und	Rate per 1000 Population,	Rural.	0.07	20.0	0.21	0.02	0.10
Q	1000	Urban.	0.08	0.14	0.26	0.09	0.17
		Whole County.	19	27	09	18	34
	Number.	Rural.	10	=	32	∞	15
		Urban.	6	16	25.8	10	19
	Year.		1919	1920	1921	1922	1923

The following Schools were closed on account of Infectious Illness during the year:—

Disease.	No. of Departments Closed.	Average Period of Closure in Weeks.	No. of Children Affected.
Chicken Pox	3	2 3 4	207
Colds	2	2	93
Impetigo	I	2	186
Impetigo and Measles	1	434	193
Influenza	2	11/4	117
Measles	53	3 3 4	5437
Measles and Whooping Cough	1	61	70
Mumps	2	2 1/2	152
Scarlet Fever	I	τ1/2	74
Small Pox	2	2	282
Whooping Cough	28	4	1981
Whooping Cough and Colds	3	61	244
Totals	99	$3\frac{1}{2}$	9036

Tuberculosis.

(a) Details of Scheme.

Details of the scheme for the treatment of Tuberculosis are as in 1922, and the beds in all the Institutions have been almost fully occupied throughout the year.

The nursing of cases of the advanced type continues to be carried out by the District Nurses under the supervision of the County Nursing Association.

There are now 41 shelters, which have been fully occupied, mainly by advanced cases, and the need for a greater number of shelters is felt. Beds for advanced cases in Institutions are still very urgently needed.

During the year consequent on a visit to Mowsley Sanatorium of an Inspector from the Ministry of Health, the Ministry urge that educational facilities for the children should be provided. The matter is receiving attention.

Ancillary Food grants were made in four cases to poor patients where extra nourishment was necessary as part of the treatment, and approximately £18 was expended on milk and eggs on their behalf.

(b) Home Visitation.

During the year 252 domiciliary visits were made by the Tuberculosis Medical Officers, and the examination of contacts has proceeded as heretofore.

(c) After-Care Work.

There is no organised scheme for the after-care of patients, but all cases of Tuberculosis are visited by the Health Visitors every three months, and 3,349 visits were paid.

(d) Prevalence of Tuberculosis.

There has been an increase of 17 in the number of notifications of Pulmonary Tuberculosis this year, whilst the number of deaths is the same as recorded in the previous year.

The figures for 1923 are: Notifications 346, Deaths 205, Death Rate .76; whilst the corresponding figures of the yearly average of the five previous years are 331, 219, and .86.

There is a slight increase over the average of the five previous years of cases notified both of Lung and Surgical Tuberculosis. The Death Rate from Pulmonary Tuberculosis is practically the same as the previous year, but is .1 lower than the average of the five previous years.

It would be well to point out that a large number of cases notified never apply for any treatment under the Council's Scheme, and that many die very shortly after notification.

The early notification of all cases is essential if the mortality rate is to be substantially reduced, and the maximum amount of benefit obtained from the scheme for the treatment of Tuberculosis.

T.B. 1. STATEMENT OF WORK carried out in connection with the Intitutional Dec., 1923, and sundry particulars in connection with the Scheme of Treatment. Treatment of Tuberculosis during the period from 1st Jan. 1923, to the 31st

I.—DISPENSARIES.

Situation of Dispensary	Number of persons, including contacts, who were examined for the first time during the period from 1st January, 1933, to the 31st December, 1933, at or in connection with the Dispenary or Visiting Station and were:—	Number of persons, including contacts, ho were examined for the first time during the period from 1st January, 1923, to he 31st December, 1923, at or in connection with the Dispenary or Visiting Station and were:—	Number of persons, including contacts, who were examined for the first time during the period from 1st January, 1923, to the 31st December, 1923, at or in connection with the Dispenary or Visiting Station and were :-	Number of persons diagnosed to be suffering from Tuberculosis who were treated or supervised at or in connection with the	sons diagnos- lering from s who were pervised at or on with the	No. of O Atten	No. of Out-Patient Attendances.
Dispensary, or Visiting Station.	0 00	Total number Examined.	r Examined.	Station during the year,	or visiting ng the year.		
	Tuberculosis,	Insured	Uninsured	Insured	Uninsured	Insured	Uninsured
COALVILLE, Residential and Visiting Wed., 10 a.m.	57	09	Ü	67	523	214	156
HINGKLEY, Residential and Visiting Mon. and Thurs. 10 a.m.	65	66	24	126	67	431	75
MELTON MOWBRAY, Visiting only Tuesdays, 10 a.m.	355	35	19	80	43	533	112
LOUGHBOROUGH, Visiting only Thursdays, 10 a.m.	75	65	36	149	53	573	153
Visiting only Friday, 2 p.m. Pensioners:—Tuesdays 10 a.m.	131	66	82	221	96	459	277
Totals	365	358	230	643	266	1910	773

T.B. 2. II.—SANATORIA, HOSPITALS, AND OTHER RESIDENTIAL INSTITUTIONS, FOR THE TREATMENT OF TUBERCULOSIS (including Observation Beds at Dispensaries.)

Name and Situation of Institution.		Number of Beds available for patients sent by the Council	who w	r of patients the Council ere under ent on the ec. 1924:	Conneil year Decen	of patients by the during the ended iber 31st,	sent by t who were or die Institut the yea 31st D	of Patients the Council discharged d in the ion during ar ended ecember,	Patients in colur were resi	nber of days which the referred to nns 7 & 8 dent in the tution	which the referred to 7 and 8 w	number of ays e Patients in columns ere resident estitution.	who w treatm 31st I	r of Patients the Council, ere under eent on the December,
(1)		(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9	(10)	(11)	(12)	(13)	(14)
			Insured	Uninsured	Insured	Uninsured	Insured	Uninsured	Insured	Uninsured	Insured	Uninsured	Insured	Uninsure
Mowsley Sanatorium, Husbands Bosworth, Rugby	Female Adults Children	50	24	2 17	54	27 23	60	15 33	8865	1512 5443	147.7‡	100.8† 168	18	14
Goalville Residential Dispensary, Bakewell St., Coalville, Leicester	Female Adults Girls	8	6		51	24 10	53	24	1543	597 148	29.1	24.5	4	
Hinckley Residential Dispensary, Manor House, Bond St., Hinckley	Male Adults	14	11		86	4	85	3	4417	333	52	111	12	1
	Boys Surgical Children			7		19		6		276 2061		46 108.5		 7x
Leicester City Sanatorium, Groby Road, Leicester	Male Adults		14				14		1898		135.5			
Craatan Canatanium	Boys								•••					
Creaton Sanatorium, Northampton	Male Adults	20-30	13		79	2	66	2	8574	214	129.9*	107	26	
	Boys					2		2		213		106.5		
Preston Hall, Training Colony, Aylesford, Kent.	Male Adults	3	1		8		1		305		365		8	
City Hospital, Birmingham.	Male Adults.	?			1		1		75		75			
Grosvenor Sanatorium, Kent.	Male Adults	?			1		1		78		78			***
Hermitage Sanatorium, Whitwell, I.O.W.	Male Adults	?			1		1		84		84			
Royal National Sanatorium, Bournemouth.	Male Adults	?			1		1		84		84			
Stamford General Infirmary.	Male Adults	?	1				1		42		42			
East Anglian Sanatorium, Nayland.	Male Adults	?			2								26	
Delamere Training Colony, Frodsham.	Male Adults				1								16	
Totals			70	28	285	115	284	114	25965	10797			71	29

4	patients sta	yed les	s than	6 weeks-	Average	stay of	remainder was	136	days.	x Surgical Tuberculosis.
3	"		2.7	- 11	"		1)	157	.,,	b Vocational Training.
1	"	"	**		**	.,	,,	123		
î	"	"	**	**	**	11	"	169	,,	
•	11	**						144		

All the cases referred to in this Table are of Pulmonary T.B. except the cases which occupied the 8 beds at Hinckley which were cases of Surgical T.B. (children) of a convalescent type and the case at the Stamford General Infirmary, that of an ex-soldier T.B. Knee.

rodes that, Training Unions, A.			
Downson			

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T.B 2a. CONDITION ON DISCHARGE FROM SANATORIA.

	Mowsley	Leicester City	Creaton	Total
Very much improved	59	1	21	81
Much improved	30		12	42
Improved	12	4	21	37
Stationary	6	5	9	20
Worse	1	4	7	12
	108	14	70	192

T.B. 3. TUBERCULOSIS (Pulmonary and Other.)

		Not	Number of Notifications.		Z	Number of Deaths.		Ĭ,	Death Kate.	
Year.		Urban	Rural	Whole County.	Urban	Rural	Whole County.	Urban	Rural	Whole County.
1918	Lungs Other	161 25	161 24	322	135	166	301	1.4 0.19	1.2	1.3
1919	Lungs	203	133	336	103	122	225 54	0.97	0.84	0.89
1920	Lungs	159	135	294 75	81 30	82 41	163	0.73	0.54	0.62
1921	Lungs	188	190	378	94	107	201	0.86	0.70	0.77
1922	Lungs	162 26	167	329	95	110	205	0.86	0.71	0.77
Average for above 5 years.	Lungs	174	157	331 62	102 27	117	219 58	0.96	0.79	0.86
1923	Lungs	185	161 46	346	85 13	120	205	0.76	0.77	0.76

the Public Health (Tuberculosis) Regulations 1912, during the last 3 years.

	Males and Females	1923	63	14	38	40	99	73	16	52	32	14	00	430
	Males and Females	1922	63	00	41	36	54	64	112	45	18	12	63	391
	Males and Females.	1921	67	10	20	42	63	75	102	90	22	15	œ	449
FORMS.	es.	1923	-	6	18	23	39	47	47	23	Ξ	9	ಣ	227
ALL F	Females.	1922	:	4	14	18	31	43	89	21	6	9	:	214
A	H	1921	:	4	20	24	38	42	50	59	14	9	60	230
	.,	1923	-	5	20	17	27	26	44	29	21	00	5	203
	Males.	1922	63	4	27	18	23	21	44	21	6	9	67	171
		1921	63	9	30	18	25	60	52	31	00	6	ĬĊ.	219
	S.	1922 1923	:	00	10	00	9	9	ಣ	1	1	:	:	43
KY.	Females.	1922	:	60	10	10	4	က	4	ಣ	;	1	:	28
ONA	F	1921	:	ಣ	4	10	10	70	:	1	63	:	-	26
PULM		1923	-	4	16	10	ಣ	63	67	:	67	-	:	41
Non-Pulmonary.	Males.	1922	63	4	10	9	3	:	50	60	:	-	:	34
-	N	1921 1922	П	23	13	00	5	5	7	Т	1	63	:	45
	S.		-	-	00	15	33	41	44	22	10	9	ಣ	184
	Females.	1922	i	-	6	13	27	40	64	18	6	20	:	981
PULMONARY	Fe	1921 1922 1923 1921 1922 1923	:	-	91	19	33	37	20	28	12	9	63	162 204 186 184 45
]LMO		1923	:	1	4	7	24	24	42	59	19	7	10	162
P	Males.	1922	:	:	17	12	20	21	39	18	6	20	63	174 143 162
		1651	-	4	17	10	20	28	45	30	7	7	10	174
AGE Deprone	urs).		-		01	91	20	25	35	45		65	and upwards	:
T Dr	(Years).		to	to	to]	to	to 5	to	to	to 4	to !	to (and	TOTAL
A	ď		0	-	9	10	15	20	25	35	45	55	65	T

1922. Ditto 1923. Ditto

ditto

es notified by other Doctors) ditto ditto

: :

621. 696. 681.

T.B. TUBERCULOSIS (Lungs and Other), DEATHS in 1923 and Rates.

URBAN.

District.	Lungs	Rate	Other	Rate	Popu- lation.
Ashby-de-la-Zouch	1	.197	2	.394	5,077
Ashby Woulds	2	.580			3,448
Coalville	18	.833	2	.093	21,600
Hinckley	13	.906			14,350
Loughborough	19	.718	1	.038	26,480
Market Harborough	8	.913	3	.343	8,758
Melton Mowbray	12	1.255	2	.209	9,560
Oadby	2	.643			3,112
Quorn	1	.407	1	.407	2,457
Shepshed	2	.348			5,746
Thurmaston	2	.833			2,400
Wigston Magna	5	.555	2	.222	9,012
	85	.76	13	.116	112,000

RURAL.

District.	Lungs	Rate	Other	Rate	Popu- lation
Ashby-de-la-Zouch	14	.792	2	.113	17,670
Barrow-on-Soar	18	.695	4	.154	25,910
Belvoir	5	1.523	1	.305	3,282
Billesdon	5	.655			7,639
Blaby	11	.616	3	.168	17,850
Castle Donington	7	1,105	1	.158	6,332
Hallaton					1,748
Hinckley	21	1,392	1	.066	15,090
Loughborough	1	.220	1	.220	4,546
Lutterworth	8	.774	2	.194	10,330
Market Bosworth	18	.752	9	.376	23,950
Market Harborough	4	.526	1	.132	7,603
Melton Mowbray	8	.546	2	.137	14,650
	120	0.77	27	.172	156,600

Venereal Diseases.

The arrangements for the treatment of Venereal Diseases in the County are the same as last year.

Particulars of the work performed are given in the Reports of the respective Medical Officers of the Clinics.

I.—Work of the Loughborough Clinic.

My previous reports gave a general outline of the work of this Clinic, but again the chief difficulty is that several patients discontinue treatment as soon as the acute symptoms have subsided, and before they are completely cured.

I would again emphasise the fact that more propaganda work is necessary.

The bacteriological work in connection with this Clinic is still carried out in the County Laboratory with the exception of the Wassermann Tests, which are forwarded to the Leicester Royal Infirmary.

New Cases.

During the year 1923 there were 36 new cases (20 males and 16 females), as compared with 43 (27 males and 16 females) in 1922.

Of the 20 male patients 6 were Syphilis, 11 Gonorrhœa, and 3 Non-Venereal. The 16 female patients were 9 Syphilis, 4 Gonorrhœa, and 3 Non-Venereal. The Non-Venereal patients were doubtful cases sent by the General Practitioners for diagonsis and treatment if necessary. These patients attend several times before being finally discharged as Non-Venereal.

In addition to these 36 new cases, there were 21 patients under treatment from the previous year (14 males and 7 females), so that during the year the actual number of patients attending was 57 (34 males and 23 females).

Since the commencement of the Clinic in February 1920, 166 patients have attended, but as 11 of these had a double infection (Syphillis and Gonorrhæa) the number of diseases which have been, or are now under treatment is 177.

Renewed Attendances.

The total attendances for the year was 559 as against 439 in 1922. Of these 333 were males and 226 females.

The attendances were Syphilis 364 (186 males and 178 females), Gonorrhœa 160 (133 males and 27 females), and Non-Venereal 35 (14 males and 21 females).

Seventy-seven injections of approved Arseno-Benzol Compounds were given (41 males and 36 females), and 58 intramuscular injections of Mercury (35 males and 23 females). In connection with the treatment of Gonorrhæa 133 irrigations were administered; 76 other forms of treatment, vaccines, etc., were also given. The total number of treatments administered was 324.

Pathological Examinations During the Year.

During the year 92 Pathological Examinations were performed in connection with the diagnosis and progress of disease. Of this number 46 were Wassermann Tests, specimens for which were collected at the Clinic and forwarded to the Leicester Royal Infirmary. In the County Laboratory 45 films were examined for the presence of Gonococci, and one film for the detection of Spirocheata Pallida. In addition to these specimens collected at the Clinic the following have been forwarded by General Practitioners:—Blood for Wasserman Tests 54, and Films for Gonococci 20.

Adequacy of the Provision Made.

The Clinic provides for the needs of Loughborough and the immediate vicinity. Many of the patients are sent by the General Practitioners in the district; several of the patients, however, proceed direct to the Leicester Royal Infirmary, on account of secrecy, preferring to attend a larger Clinic.

No action has been taken in the County under the Venereal Diseases Act of 1917.

General Practitioners possessing the necessary qualifications are supplied with approved Arseno-Benzol Compounds for the treatment of Syphilis.

The number of Practitioners availing themselves of this supply, which is free, was 4, and the number of doses sent to them was 75.

The following table gives a summary of the activities of the Clinic since its commencement in February 1920:—

Loughborough Clinic.

	1923.	1922	1921.	1920.	Totals.
New Cases	M. F.	M. F.	M. F.	M. F.	M. F.
	36	43	28	59	183
Rewewed					
Attendances (including	333 226	270 169	210 88	291 211	1249 756
First Visits)	559	439	298	502	2005
"606"	41 36	37 35	34 0	59 50	187 129
000	77	72	34	109	316
Pathological					
Examinations	97	169	183	325	817
"606" to G.1	P.s 75	137	100	157	469

It will be seen that whereas the number of new cases this year is 7 less than in 1922 the renewed attendances have increased by 120. This shows that the patients are making more attendances than previously, which indicates that the patients are recognising the desirability of continued treatment.

J. A. FAIRER, Assistant County Medical Officer.

LEICESTER ROYAL INFIRMARY,

15TH FEBRUARY, 1924.

II.—Work of the Leicester Royal Infirmary—Male Clinic.

To the City and County Councils of Leicester and Leicestershire.

Ladies and Gentlemen,-

I beg to report on the work of the Male Venereal Clinic at the Royal Infirmary under your control, and that of the Ministry of Health for the year ending December 31st, 1923. During this period 411 new patients presented themselves for treatment; 142 were suffering from Syphilis and 242 from Gonorrhæa, 27 were not venereal disease. Of these patients 294 were from the City and 90 were from the County.

10,464 attendances were made by the patients on the books; 4,425 were treated for Syphilis, 5,968 for Gonorrhæa, and 71 attendances were made by non-venereal patients for proof of their condition. 8,589 were from the City and 1,875 from the County.

In all cases the Blood and Discharges were submitted to Pathological and Bacteriological examination on one or more occasions for the purpose of diagnosis, aid to treatment, test of progress towards, and proof of recovery.

To patients suffering from Syphilis 1,802 injections of Salvarsan substitutes were administered, and 1,093 intramuscular injections of Mercury. Of these 2,077 were from the City and 818 from the County.

To patients suffering from Gonorrhœa 5,258 intraurethral irrigations were administered. In a large proportion of these instrumentation, instillation, vaccines, prostatic and urethral massage was given.

In-patients.

83 were admitted to the wards, 41 from the City and 42 from the County. Of these 12 were highly infective, 37 were for operation under anæsthesia, and 2 were for intraspinal injection of Salvarsanised blood serum.

The number of patients who ceased attendance before completing the first course of treatment were:—Syphilis 26, Gonorrhœa 53.

Ceased attendance after completing one or more courses, but before completion of treatment and final test:—Syphilis 108, Gonorrhœa 112.

The number who completed treatment and submitted themselves to repeated tests and were discharged cured:—Syphilis 12, Gonorrhœa 46.

The tests for cure are very stringent and in accord with the rules laid down by the Ministry of Health.

Dr. Raffan, the Clinical Inspector of the Ministry of Health, visited the Clinic on January 10th and November 21st, 1923, and Dr. Millard, the Medical Officer for the City, has on several occasions visited the Clinic officially.

Every effort is made to persuade and encourage patients to persevere with treatment until their recovery is complete—which can only be proved after repeated examinations and tests have been made after all apparent symptoms have disappeared.

The Board of Governors of the Royal Infirmary have afforded every facility possible for the carrying on of the Clinic.

My thanks are due to all who have worked in this department for their efficient assistance and loyal support during the past year.

I am, Ladies and Gentlemen,

Yours faithfully,

HENRY J. BLAKESLEY,

F.R.C.S., Eng.

Medical Officer in Charge of Male Venereal Clinic.

Leicester Royal Infirmary.

III.—Work of the Leicester Royal Infirmary—Female Clinic.

The number of new patients from the County applying for treatment during the year has been 66 (out of a total of 262).

Of these 49 were suffering from Syphilis, 15 from Gonorrhæa, and 2 showed no signs of venereal disease.

The attendances at the Clinics of patients suffering from Syphilis has numbered 1,151, Gonorrhœa 205.

The total number of attendances being 1,356 (out of a total of 5,854).

In the treatment of Syphilis intravenous injections have been given whenever possible, and during the past year 535 injections have been given.

The special arsenical compounds used have been Neo-kharsivan, sulfarsenal and stabilarsan.

Mercury or potassium iodide, or both, are given by mouth at the same time.

For Gonorrhea, local dressings are given as frequently as possible, and disinfectants have been given to the patient herself to use daily. At present the only method of really curing the disease seems to be frequent skilled treatment, and as the distances and expenses of travel are too great, very little but disinfection can be hoped for. By far the most satisfactory cases are those who have been admitted to the ward in the early stages of disease.

This year the pathological test for the Deviation of Compliment for Gonorrhœa has been used for the first time. It has been found of use and indicates to a certain degree the presence or absence of the gonococcal poison in the blood.

Special efforts are made to get children under treatment as soon as possible.

Pregnant mothers showing signs of disease have been treated as thoroughly as possible.

Intravenous injections have been given to all mothers who have suffered or who are suffering from Syphilis, and after confinement they are advised to bring the babies up for at least a year after birth.

No cases of congenital syphilis in the children of mothers so treated have yet been found, and no case of gonorrhœal ophthalmia. Every infected mother is questioned about her children, and in a few instances families of 2, 3, and 4 children are being brought up regularly.

In the ward containing 6 beds and 2 cots the number of patients from the County admitted has been 77.

The number of days of treatment given is 759.

To those suffering from Syphilis 426.

To those suffering from Gonorrhœa 254.

To those with both infections 79.

After treatment in the ward all patients are urged to attend the Clinics, and if the distance prevents regular treatment communication is made, if possible, with the patient's own doctor.

BESSIE W. SYMINGTON, M.D., B.S. (Lond.),

Medical Officer of Female Venereal Clinic.

IV.—Work of St. Mary's Home.

The work of this department is entirely set aside for the treatment of unmarried girls under the age of 23.

It consists of two parts:-

- (1) Work in the Hostel.
- (2) Work at the Weekly Clinic.

There are 11 beds in the Hostel, four of which are used for pregnant girls or young mothers and babies. All girls are seen weekly by the Medical Officer, and there is a qualified Nurse in charge, who treats them during the week as prescribed. The number of County girls admitted to the Hostel during the year is 7, with one baby (out of a total of 48).

Two were in residence at the commencement of the year.

Of the 7 residents:-

- 3 were suffering from Syphilis.
- 3 from Gonorrhœa.
- 1 from both infections.

The child showed no sign of disease.

- 6 girls have been discharged during the year.
- 3 were in residence on December 31st, 1923.

The total number of days in residence in the Hostel of girls during 1923 has been 350.

The work of the weekly Clinic has increased somewhat, more girls availing themselves of the opportunity for treatment.

12 girls have attended at regular intervals.

23 injections for Syphilis have been given.

105 attendances have been made.

No patient has been definitely discharged as cured, all are asked to report once or twice in the year after cessation of all treatment.

Next year the Centre for treatment is to be moved to 1, Ashleigh Road, Narborough Road, Leicester.

BESSIE W. SYMINGTON, M.D., B.S. (Lond.),

Medical Officer of Female Venereal Clinic.

V.—V.D. Educational Propaganda.

Mrs. Brittan, the Honorary Secretary, has kindly supplied the following information of the work carried out in regard to Propaganda in the County during the year 1923.

At Lutterworth and Market Harborough lectures on Hygiene were given by Miss Hazel to good and appreciative audiences. Medical lectures were also given in these two towns, together with Wigston, and all were well attended.

The film, "Damaged Goods" was exhibited three times at Market Harborough, and twice at Coalville, Rothley, and Wigston. A Medical Lecture was also given each time the film was shown, and considerable propaganda was carried out beforehand.

In each town the Cinemas were crowded, many persons having to be turned away.

COUNTY LABORATORY.

The following is a summary of the investigations carried out dur-

ing the year:-	D .		
	Posi- tive.	Nega- tive.	Total
Sputa for Tubercle Bacilli	267	707	974
Throat Swabs for Diphtheria	110	606	716
Hair for Ringworm	222	145	367
Sewage and Water Analyses	_	_	252
Urine (General and Bacteriological)	_	_	116
Wassermann Tests (collection of blood only)	36	64	100
Milk (complete Bacteriological examination)	_	_	71
Films for Gonococci	25	40	65
Widal Tests for Typhoid Fever	15	17	32
Blood Counts	_	_	12
Throat Swabs for Meningococci	_	10	10
Cerebro Spinal Fluid (General and			
Cytological)	-	_	9
Faeces for B. Typhosus	1	6	7
Cerebro Spinal Fluid for Meningococci		0	5
(Spotted Fever)	3	2	
Pus for Organisms	_	_	5
Urine for Tubercle Bacilli	2	3	5
Swabs for Organisms	_	_	5
Faeces for Organisms	_	_	3
Pleuritic Fluid for Organisms	_	_	2
Blood Cultures	_	-	2
Water for B. Typhosus	_	2	2
Air Examinations		_	2
Pus for Tubercle Bacilli	1	1	2
Serum for S. Pallida	1 -	_	1
Vaccines	-	_	1
Throat Swabs for Vincent's Angina	_	1	1
Throat Swabs for Bacillus Anthracis	_	1	1
Sputum for Bacillus Anthracis	_	1	1
Swab ,, ,,		1	1
Urine for B. Typhosus	-	1	1
Sputum for Actinomycosis	-	1	1
Pus ,, ,,	-	1	1
Blood for Malaria Parasites	_	1	1
			2,774

It will thus be seen that the number of investigations was 2,774, which shows a steady increase each year since the Laboratory was first started. The investigations during the previous three years were: 1920, 2,449; 1921, 2,397; and 1922, 2,531; so that the number of investigations carried out in the County Laboratory has now passed the 10,000 mark.

The Laboratory is always open for the reception of specimens, Sundays and holidays included. Any specimens received at the weekend, are, in cases of urgency, examined, and the results communicated to the General Practitioners on Sunday morning.

As in previous years, with the exception of Wassermann re-actions and histological examinations, the whole of the bacteriological work in the County is performed in the Laboratory, and in addition chemical analyses are made of drinking water and sewage effluents collected or forwarded from various parts of the County.

Tuberculosis.

974 specimens of sputa were examined during the year for the presence of Tubercle Bacilli, and 267 of these were positive.

Of the 974 specimens, the Tuberculosis Medical Officers have forwarded 380, General Practitioners 473, and the remaining 121 were from the Local Pensions Board.

This is a marked increase in the number examined during the previous year (625), and is mostly accounted for by the larger number received from the General Practitioners in the County who are availing themselves fully of the facilities afforded by the Laboratory as an aid to diagnosis.

Diphtheria.

Of the 716 swabs examined for the presence of the Diphtheria Bacillus, 110 were found to be positive and the remainder negative. The large number of negative results is accounted for by the "swabbings" which have taken place at Schools during epidemics of Diphtheria and specimens from convalescent cases in the Isolation Hospitals prior to their discharge. These 716 were received as follows:—

General Practitioners	in	the	County	 	261
Isolation Hospitals				 	231
School "Swabbings"				 	224

A summary of the epidemics and number of swabs taken at Schools during the year is given below:—

Date.	Schools.			No. of swabs taken	Positive.	Nega- tive.
15/3/23	Measham (3 Schools)			40	2	38
30/7/23	Measham C.E. Mixed and	Council	Infs.	83	9	74
11/10/23	Gaddesby Council			40	2	38
30/11/23	Ibstock C.E			-61	1	60
				224	14	210
				-	-	

From this table it will be seen that the number of "carriers" found in a total of 224 apparently healthy children was 14, a percentage of 5.3. These "carriers" when found are immediately excluded from school, the District Medical Officer of Health is notified, and the children are treated at home with antiseptic gargles until a negative swab is obtained. This elimination of "carriers" has in all cases been followed by an abatement of the epidemic.

With reference to swabs forwarded by General Practitioners, reports on them within 24 hours of receipt are very much appreciated by them, as doubtful cases are definitely diagnosed and the necessary treatment administered in the very early stages of the disease.

Ringworm.

The number of specimens of hair received for the presence of the spores of Ringworm was 367, an increase on the previous year of 158. 222 were positive and 145 negative. They were all received from the School Medical Officers and School Nurses; many of them being brought from the School Clinics to ascertain whether the children were fit to return to school.

Sewage and Water.

During the year 252 samples of water and sewage effluent were examined. Here again, a marked increase is shown on last year, when only 91 samples were received. This increase is to some extent due to the fact that on July 17th, 48 specimens were collected and analysed in connection with the Government Hydrographical Survey of the Trent Water-shed. The remainder were specimens of Drinking water from Public supplies, effluents from Sewage Farms and specimens from rivers and brooks into which sewage effluent flows.

Cerebro Spinal Fever.

During the year 5 specimens of Cerebro-Spinal Fluid were examined for the causative organism of this disease. Three of these were found to be positive (all from one case), and 2 negative.

The positive case was a baby girl, aged 6 months, living at Newbold Verdon, and occurred in December. In connection with this, throat swabs were taken from 8 contacts, who were all found to be free from the germ.

Typhoid Fever.

32 Widal Tests were carried out during the year, of which 15 were found to be positive and 17 negative. The positive ones were received from Cotesbach, Syston, Loughborough, Knossington, and Sileby.

7 specimens of faeces and 1 of urine were examined for the presence if Bacillus Typhosus, and 1 of these was found to be positive. These specimens were mainly from the Isolation Hospitals in the County to ascertain the fitness of patients for discharge.

Milk Examinations.

The total number of samples of milk examined this year was 71, as compared with 36 in the previous year.

Specimens have been collected from different dairy supplies; some from the farms themselves, and others as the milk was actually delivered to the consumer. The majority of these samples show a distinct improvement on similar specimens collected last year. Apart from the estimation of the number of Micro-organisms in one cc of milk, tests are carried out for the presence of absence of Bacillus Coli in quantities of 1/10, 1/100, and 1/1000 cc.

To illustrate the difference in the milk supplies of the County—one specimen contained, as delivered to the consumer, over two million Micro-organisms per cc, whilst another sample collected under the same conditions from a different milk supply only contained two thousand. One specimen of milk collected at a farm showed only 300 Micro-organisms per cc.

Venereal Diseases.

The total number of examinations made in connection with Venereal Diseases was 166; of these 100 were specimens of blood for the Wassermann Test. 65 were films for the presence of Gonócocci and 1 an ex-

amination of serum for the presence of Spirochaeta Pallida. In connection with the Wassermann Test the blood is collected and forwarded via the Laboratory to the Leicester Royal Infirmary.

25 of the films for Gonococci and 36 of the blood specimens for the Wassermann Test were positive as also was the specimen of serum for S. Pallida.

The Clinic at Loughborough was responsible for 92 specimens, and the remainder were from General Practitioners in the County.

Each Local Medical Officer of Health in the County has received a detailed report on the work relating to his particular district.

J. A. FAIRER, M.D.,

Bacteriologist.

Maternity and Child Welfare.

Full particulars of the Maternity and Child Welfare Scheme for the County were given in my Annual Report for 1919.

Two further Infant Welfare Centres were opened during the year making a total of 33 in the County.

All the Centres are under Medical Supervision, and the number of visits made by the Medical Officers was 239.

The following is a record of visits:-

Dr. M. E. Weston	 	 	127
Dr. N. A. Coward	 	 	90
Dr. J. A. Fairer Dr. J. B. Dalton			11
Dr. T. Robinson	 	 ***	6 5
			239

Last year the total number of visits was 192.

Every endeavour is made that all Centres which are held weekly receive a visit from the Medical Officer once in each month, and those that are open every fortnight have a visit at least once in two months.

The benefits of the Centres are shown by the Mortality Rate being 62 as compared with 97, and the number of deaths of children under one year of age only totalling 328 against 530 in the year 1915, when no Baby Centres were in vogue.

In my last year's report I gave a list of the 31 Centres in the County, together with their meeting place. This list remains the same, with the exception of two additional Centres opened at Glenfield (Village Institute), and Enderby (Mission Room).

All the Centres are provided by the Leicestershire County Council.

The County Council still provide milk for necessitous mothers, and approximately £65 has been spent in this direction.

The number of claims submitted from Doctors for fees under the Midwives Act 1918 (Section 14) was 93, involving a sum of £123. During the year £18 3s. 6d. was recovered from patients whose Doctor's fees had been paid.

Children's Convalescent Home.

The 15 beds at this home are still available for the use of County Council patients. During the year 67 children were admitted; 52 through the Education Authority, and the remaining 15 through the Maternity and Child Welfare Committee.

The former stayed 2,267 days, giving an average of 43.6, and the latter 1,077 days with an average of 71.8 days.

Inspection of Midwives.

The County Health Visitors still undertake the supervision of Midwives, under the 1902 and 1918 Acts.

The number of Midwives who notified their intention to practise in this County during the year was 155. Of these 2 ceased to practise before the end of the year, and I left the County. Of the 155 who notified, 121 hold the certificate of the Central Midwives Board, 8 the London Obstetrical Society Certificate, and 26 were bona-fide.

The following returns were received from the Midwives in the County during the year:—Medical Help 405, Still Birth 42, Laving out of the Dead 33, Artificial Feeding 24, Liability to be a source of Infection 8, and Death of Mother or Child 5.—Total 517.

The causes for sending for Medical Help were:—For the Mother:—Prolonged Labour 94, Ruptured or torn Perineum 77, Abnormal 1, Presentations 25, Abortion 21, Hæmorrhage 18, Adherent Placenta 17, Still Births 14, Premature Births 11, and other causes 60.—Total 337.

For the Child:—Babies Eyes 26, Feeble or Delicate Baby 24, and other causes 18.—Total 68.

The Midwives records at the County Health Office show that 2,554 births have been attended during the year. Of these 632 were Doctors' cases where a Midwife was also in attendance, and 1,922 were cases attended by Midwives alone.

Health Visitors.

The Health Visitors duties were outlined in my report of 1922, and the following is a statement of the work carried out during 1923:—

Visits	to Births		25,479
,,	,, Tuberculous Patients	Homes	3,349
,,	" Pre-natal Cases		691
,,	,, Midwives		316
,,	re Still Births		99
,,	,, Children's Act		94
,,	,, Premature Births		20
,,	for Ministry of Pensions		4
	Total	Visits	30,052
Attenda	nces at Infant Welfare Cent	res	1,183
Lectures	s at Women's Institutes		10
		Tot	al 1,193
			-

The total number of visits made during the year for all causes was 31,245, the number of parishes visited 4,037, whilst the total mileage cycled was 13,158 miles.

Notification of Births Act 1907.

The home visiting of Births is still carried out by the Health Visitors with the exception of those occurring in the Loughborough and Market Harborough Urban Districts.

The total number of Births notified was 4,797. Of these 411 were reported to me by the Registrars. The Midwives in the County notified 1,922, the Doctors 2,243, and the remainder were cases where both Doctor and Midwife were in attendance.

SANITARY CIRCUMSTANCES OF THE DISTRICT.

Water Supply.

The following are extracts from, and the reports of, the Medical Officers of Health on the Water Supply of their particular districts:—

Coalville Urban District:—"One hundred and five more houses have been connected up to the Council's supply during the present year, including 16 under the Housing Scheme, making the total number of houses supplied 4.011. The half-yearly analysis of the town water show it to be of its usual excellent quality. The amount of water pumped during 1923 was 103,936,033 gallons, a decrease of 4,988,435 gallons on 1922."

Market Harborough Rural District:—"The district is entirely dependent for its water supply (except the village of Lubenham) on public or private wells; nearly all these are shallow wells."

Melton Mowbray Rural District:—"Arrangements have been made with the Duke of Rutland whereby the village of Eastwell will receive an improved water supply. The east end of Asfordby Village and Asfordby Valley are still very deficient in the supply of drinking water, and it is advisable that steps be taken at an early date to provide an adequate supply, as this defficiency is undoubtedly a menace to the health of the inhabitants. In other parts of the district the existing wells were sufficient to supply the needs of the inhabitants throughout the year."

Blaby Rural District:—"Last August I furnished a special report recommending extension of the Leicester Corporation mains to the village of Whetstone Cosby, Littlethorpe, and Huncote. Part of this work has already been completed, and the sanitary gain more particularly to Whetstone should be a great acquisition. In this connection I have now to recommend that application be made for the following extensions of mains: Narborough, Huncote, Countesthorpe, Cosby, Whetstone and Glenn Parva.

Drainage and Sewage.

The following are extracts from the reports of the Medical Officers of Health on the drainage and sewage in their various districts:--

- Coalville Urban District:—"Thirty-six house properties have been re-drained and 171 water closets provided to take the place of previous privies. New constructional work has accounted for the provision of 47 further water closets, including 12 under Housing Scheme."
- Wigston Magna Urban District:—"The motive power at the Crow Mills Pumping Station has been changed from gas to electricity, with a view to a reduction in the cost of running of the machinery. A further extension of the Sewer in Newton Lane has taken place at a cost of £275. This will enable the sewage from a number of new houses to be dealt with."
- Hinckley Urban District:—"No change in the treatment of sewage and trade waste has yet taken place, but the experiments which have been carried out, have now shown that the trouble-some mixture can be treated satisfactorily after precipitation on percolating bacteria beds. A scheme is now being prepared for the treatment of the whole of the sewage and trade wastes from the town and neighbouring Dye Works on such beds. It is hoped that 1924 will see the scheme in progress, and that this problem, which has occupied the attention of the Council for so long will be solved."
- Market Harborough Rural District:—"Fleckney Sewage Works are still working satisfactorily. Improvements have been carried out to the subsoil drainage at Kibworth Sewage Works and new channels cut, but nothing has yet been decided as to the new disposal system to be installed. Arising out of a complain as to the sewage disposal arrangements at Foxton, a scheme has been prepared for treating the sewage in septic tanks, and a percolating filter lower down the stream and further from the village. The only new work carried out during the year was the construction of 440 yards of nine-inch sewer in the portion of Lubenham parish which has now been taken over by the Urban District."
- Melton Mowbray Rural District:—"The various sewage farms have been kept in a satisfactory condition, and the sewage tanks regularly cleaned out. The lease of the land for Somerby Sewage Outfall Works terminated, but an extension of the lease has been arranged, and the works are being put into

proper order. New sanitary pipe-sewers have been laid during the year, viz., 180 yards of 9-inch pipes at Harby, 190 yards of 6-inch pipes at Saxby, and short lengths of 6-inch pipes at Burton Lazars and Asfordby. Schemes are being prepared for new sewers and methods of sewage disposal at Nether Broughton, Long Clawson, Twyford, and Welby Lane (Sysonby)."

Billesdon Rural District:—"A great deal of time and attention has been devoted to the preparation of a comprehensive scheme for the sewering of the parishes of Humberstone and Evington. The rapid development of an estate in the former parish has made the completion of a scheme a matter of urgency. It is now awaiting definite settlement with the Leicester Corporation."

Market Harborough Urban District:—"During the year 462 inspections of drains were made, resulting in the remedy of 137 defects. The whole district (with the exception of 3 privies) is drained and sewered on the water carriage system, the latter having been maintained in efficient order."

Shepshed Urban District:—"Attention has been given to the street manholes and the detritus chamber at the farm when required. Four connections were made with the main sewers during the year, viz., 2 in Loughborough Road, 1 in Kirkhill Street, and 1 in Belton Street. On April 10th an enquiry was held into the application of the Council to borrow £8,400 for the extension and improvement of the Sewage Disposal Works. Provisional sanction for the work was given and tenders invited. Work was started in November, and it is hoped to have it completed in July."

Blaby Rural District:—"Building developments have rendered increasingly necessary the provision of sewers in the following localities: Kirby Muxloe, Lubbesthorpe, and Knighton."

"The following sewerage schemes are also needed: Glen Hill-Glen Parva, and South End of Lutterworth Road, Lubbesthorpe, the parish of Countesthorpe and Glenfield, North End."

Scavenging.

In the Coalville Urban District during the year, 6,163 loads of midden refuse and rubbish were removed, and 2,699 loads of dustbin refuse. The refuse, where it has any manurial value, is disposed of upon agricultural land. The dry ash and dustbin refuse generally is carted to suitable tips.

The scavenging in the Market Harborough Rural District has been carried out regularly in the parishes of Fleckney, Kibworth Beauchamp, Kibworth Harcourt, and Smeeton. Arrangements have been made to rent the tip at Kibworth, and it it hoped that under the Council's contract it can be kept in better condition.

The Medical Officer of Health for the Melton Mowbray Rural District reports as follows:—

"Scavenging has been carried out at Asfordby for many years, but not always in an entirely satisfactory manner. In other villages ashes are taken to arable land or allotments and dug in. In a large number of villages bunkers are provided for the reception of old tins and similar things, and these are periodically removed and buried. No refuse destructor is available."

Rivers and Streams.

Examinations have been made of the various Rivers and Streams in the County during the year. Most of the samples for these examinations and analyses have been collected above and below the points where sewage effluents join. Analyses have also been made of the actual sewage effluents passing into the Rivers.

Numerous specimens have been collected from the River Soar above and below the City of Leicester.

Samples were taken from the River Soar and the whole of its tributaries during the Hydrographical Survey of the River Trent watershed.

The following Rivers have been analysed at various times during the year:—Soar, Eye, Wreake, Tweed, Sence and Welland, also the following Brooks: Huncote, Broughton Astley, Whetstone, Twyford, Anstey, Wash, Garendon, Sketchley, Rothley, Hermitage, Mowsley, Salterford and Blackbrook.

Samples have been examined from Wanlip Outfall and further down the River, extending past Cossington and Sileby, and these have shown that pollution of the Soar has occurred, due to sewage passing down this Outfall from the City of Leicester.

This Authority are contemplating extensive additions to their present sewage farm so as to remedy this condition of affairs.

The County Sanitary Committee reported pollutions to the following District Councils during the year:—Castle Donington Rural, Market Bosworth Rural, Hinckley Rural, Market Harborough Rural, Melton Mowbray Rural, Billesdon Rural and Quorn Urban.

An enquiry was held at Hinckley, and steps have been taken to remedy the condition of the Sketchley Brook, and a scheme is being undertaken to treat the Dye Waste, which is the main cause of the condition of this stream.

DAIRIES, COWSHEDS, AND MILKSHOPS.

When the Milk and Dairies (Amendment) Act, 1922, and the Milk (Special Designations) Order 1922, came into operation I submitted a special report thereon with which was included some of the principal administrative clauses of the Dairies, Cowsheds, and Milkshops Order, 1885, and the Model Regulations thereunder.

Tuberculous Milk.

With reference to the sale of tuberculous milk I submitted a scheme for the employment of whole-time Veterinary Inspectors for the examination of all the cows in the County.

The proposal was to appoint four whole-time Veterinary Surgeons at a commencing salary of £400 a year, rising by £20 a year to £600. Four inspections to be made in the year.

Tests by animal inoculation to be carried out in all cases where tubercular disease of the udder was found or suspected.

The report drew attention to the large amount of surgical tuberculosis attributed to bovine tubercle, and the great expense the country was put to in treating these cases, and the enormous suffering of children in consequence of these complaints. The cost of such treatment must materially exceed the estimated cost of the proposed Veterinary Inspection scheme, which was £4,200 a year.

A new Committee to be appointed to consist of representatives from all the Urban and Rural Districts and of the County Council for the administration of this scheme, who would in the first instance consider the reports of the Inspectors and then pass them on to the Authority concerned where administrative action was required.

Without committing themselves to the scheme the County Sanitary Committee convened a meeting of all the Local Authorities in the County to consider the same. At that meeting the following resolution was almost unanimously carried:—

"That in the opinion of this meeting the duties of the Sanitary Authorities under the Milk and Dairies (Amendment) Act, can be more economically carried out by the local Authorities than under the scheme suggested by the County Medical Officer."

It remains to be seen whether the local Authorities will carry out such an efficient scheme.

Clean Milk.

In the special report I also drew attention to the fact that since 1855 the Local Sanitary Authorities have had sufficient powers under the Dairies, Cowsheds and Milkshops Order, and the model regulations to practically enforce the production of clean milk.

There is only one fault in this Order, and that is that the administration thereof is in the hands of the wrong Authority—brewers are not allowed to sit on the licensing bench.

Graded Milks.

During the year the Ministry of Health reported that they had granted to three producers licenses to sell "Certified" and "Grade A (Tuberculin Tested)" milk.

The County Council issued to three producers licenses to sell "Grade A" milk during the year, but in one instance the producer ceased to use his licence on account of his inability to find a market for the commodity.

HOUSING.

The Census 1921 figures give the total population of the Administrative County as 260,326; the total families who are separate occupiers, private, or otherwise, 60,560; tenements with more than two occupants per room 1,135, population therein 9,607. In the Urban Districts:—Population 107,903; tenements with more than 2 persons per room 424, population therein 23,593. In the Rural Districts: Population 152,423; tenements with more than 2 persons per room 711, population therein 6,014.

As previously stated in my special reports the standard of two persons per room is, in my opinion, far too low. The floor space and air space per person in the bedrooms is the all-important consideration. In order to obtain a reasonable floor space and air space in the bedrooms I am satisfied that a standard of one-and-a-half persons per room, will have to be adopted. This standard of one-and-a-half persons per room, curiously enough, if applied to houses in modern housing schemes, gives approximately the necessary floor and air space per person in the bedrooms.

After very careful consideration I am satisfied that the type of house required is the 4 or 5-roomed house, i.e., two rooms downstairs with two or three bedrooms. It is the smaller house that is most necessary. The Census figures show that 73 per cent. of the 5 and 6-roomed houses in Leicestershire are occupied by families of 5 persons or less.

It is the "excess" persons (i.e., the number of people in a house over and above the standard adopted—whether 2 or 1½ persons per room) which have to be provided for.

In the early part of the year 1924 I issued a special report which gave certain figures for the whole County in an endeavour to arrive at the number of houses still required to be built. The figures for the whole County were as follows:—

On the standard of 2 persons per room at the Census there was an "excess" population of 1,951 persons, and allowing 4 persons per house these would require 488 houses. Add to this the number of unfit houses which require to be replaced 1,818; add also 825 houses for the increase of the population since the Census, making a total of 3,131 houses; deduct from these the 1,991 houses occupied since the Census and the 824 now building or arranged for—total 2,815, and this leaves the deficit necessary of 316.

Taking the standard of $1\frac{1}{2}$ persons per room the "excess" population at the Census was 8,502 requiring 2,125 houses. Allowing for the unfit houses, the increase in the population, and the houses in building as above the net requirement is 1,637 houses.

Therefore, on the two persons per room basis, assuming that the 1,818 have been replaced, only 316 houses are required, but as only very few of the unfit houses have been closed it appears that at the present time more houses have been built in Leicestershire than are necessary, which, of course, is absurd.

The influence of trade has been entirely left out of consideration in these estimates.

This is an influence which can only be considered locally. In some cases the requirements of the individual district ought to be considered jointly with the requirements for the adjoining districts, as it is a common custom for workers to live in one area and work in the other. The

latter when seeking to house all the workers will naturally leave houses vacant in the adjoining districts.

Four districts in the County, viz., Loughborough Borough, Coalville Urban, and Ashby-de-la-Zouch and Market Bosworth Rural Districts are undoubtedly in need of most houses, and the estimated minimum requirement of these four districts at the present time is well over 1,000. The most over-crowded parishes in the Rural Districts are those in the coal-mining area.

Sale of Food and Drugs Acts.

These Acts are administered by the Police in this County, and the following is the record of the work done during 1923, under the Public Health (Milk and Cream) Regulations 1912 and 1917.

County of Leicester, 1st January, 1923, to 31st December, 1923.

Milk and Cream not sold as "preserved cream."

(a)		(b)
Number of samples the presence of a		Number in which Preservative was reported to be present, and percent- age found in each sample.
Milk	144	None
Cream	0	None

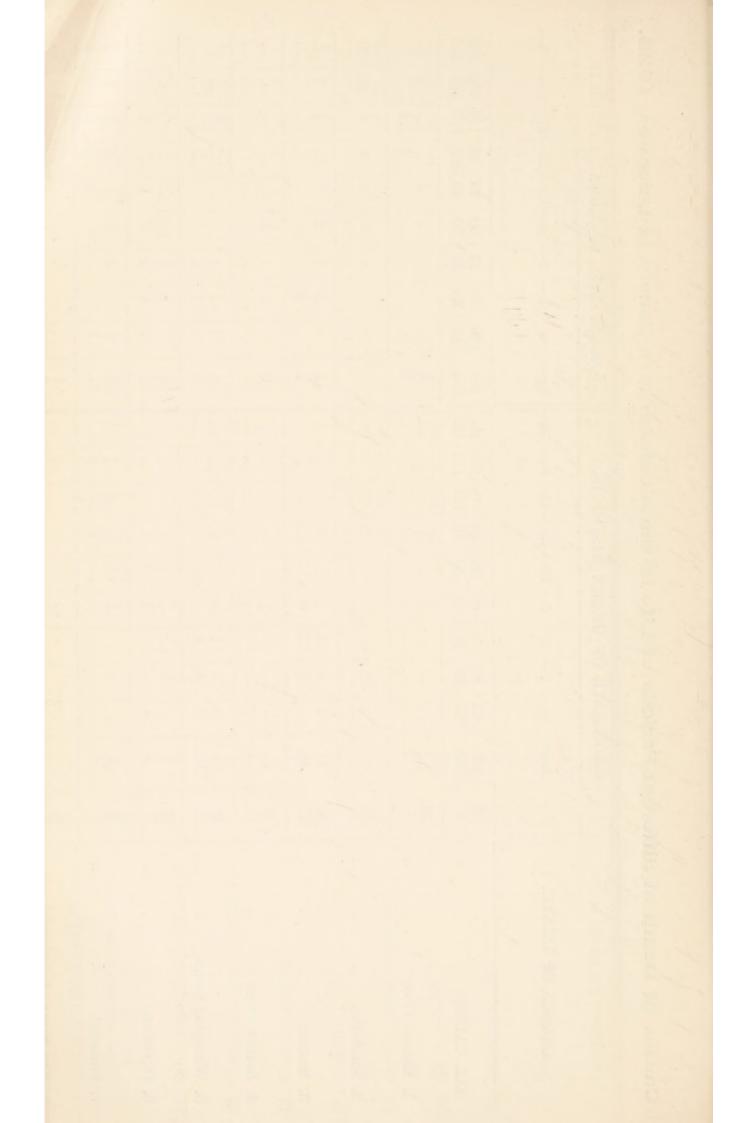
Cream sold as "preserved cream"

None.

All samples were taken with the usual formalities under the sale of Food and Drugs Acts.

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12. Cancer, malignant disease	EM	18 8	111	1::	1::	111	-	101-	6.5	16 1	12 81 98		111			-	9 11	46	30	2 2
13. Rheumatic Fever	MH	09 00	11		11		:-	:-	- :	1 : :	-	- 6			01	01		01 -	01.01	04 :
14. Diabetes	×	10	11	1:	1::	1::	111	: 00	100 m	01-	01 01	91		:-	111	: 01		4 10	t- 00	-
15. Cerebral hæmorrhage, &c	MH	44	111	1::	111	1::	:-	- 01	8 2	9 16	18				1		- :	6.81	88	128
16. Heart disease	MH	5 55	111	111	1::	00 00	1 : :	4 61	25	23 12	_				1::	61 :	8 01	228	32.33	2.8
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