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CITY AND COUNTY OF NEWCASTLE UPON TYNE

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

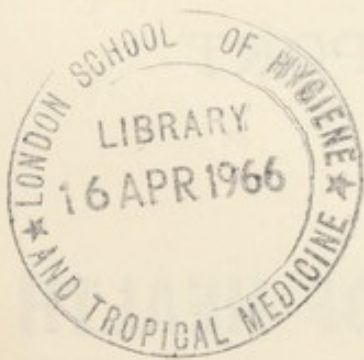
ON THE

Sanitary Condition of the City

DURING THE YEAR

1935.

63562



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Members of Council who served on the

HEALTH COMMITTEE.

The Lord Mayor (Alderman WILLIAM LOCKE, J.P.)

Alderman DAVID ADAMS, J.P., M.P., Chairman.

Councillor WALTER THOMPSON, J.P., Vice-Chairman.

Alderman J. CHAPMAN.

„ J. GRANTHAM, J.P.

„ J. MOORE, J.P.

Councillor CATHERINE A. AULD, J.P. Councillor MAY NEWTON.

„ W. C. PERCIVAL, J.P.

„ J. E. SCANLAN, O.B.E.,
J.P.

„ H. MOAT.

„ R. M. ROWE.

„ A. LOUVRE.

„ T. M. TAYLOR, J.P.

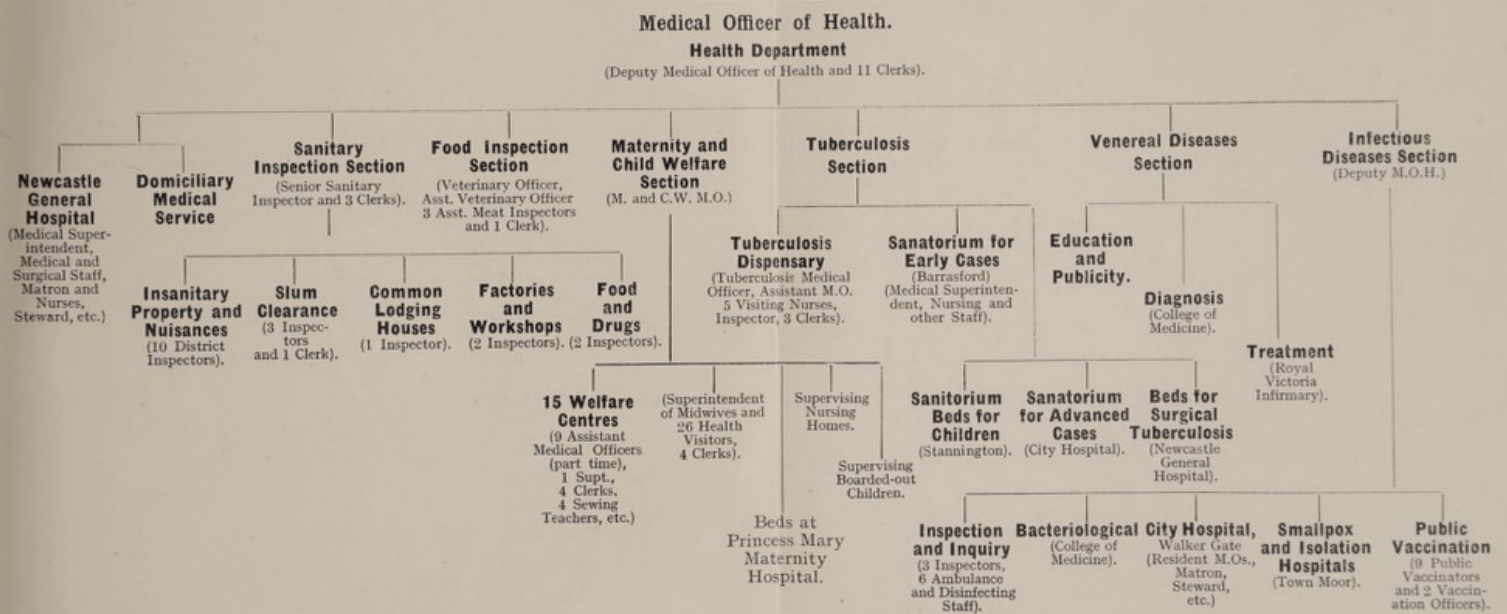
„ J. PEARSON, J.P.


„ FRANCES E. TAYLOR,
J.P.

„ A. E. BEDSON.

„ CATH. A. LOCKE, J.P.
(Lady Mayoress).

Table showing the various Sections of the Health Committee's work which is under the direct charge of the Medical Officer of Health.





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MATERNITY AND CHILD WELFARE COMMITTEE.

*Alderman JOHN CHAPMAN, Chairman.

*Councillor CATHERINE A. AULD, J.P., Vice-Chairman.

*Alderman DAVID ADAMS, J.P., M.P.

*Councillor WALTER THOMPSON, J.P. †Dr. R. P. RANKEN LYLE, J.P.

* „ H. MOAT. †Dr. J. C. SPENCE.

* „ J. E. SCANLAN, O.B.E., J.P. †Mrs. E. I. LEACH.

* „ MAY NEWTON. †Councillor JEANIE L. GIBBIN,
O.B.E., J.P.

* „ J. PEARSON, J.P. † „ FRANCES E.
TAYLOR, J.P.

* „ CATH. A. LOCKE, J.P.
(Lady Mayoress).

* Member of the Health Committee.

† Co-opted member.

‡ Appointed by City Council.

STAFF.

J. A. CHARLES, M.D., B.S., F.R.C.P., D.P.H., Medical Officer of Health and Medical Superintendent of the City Hospitals for Infectious Diseases.

E. F. DAWSON-WALKER, M.D., B.S., B.HY., D.P.H., Deputy Medical Officer of Health.

CHRISTOPHER RAIMES, Senior Sanitary Inspector (retired July).

WM. GRAY, Senior Sanitary Inspector (appointed August).

JAS. McNICHOL, Chief Assistant Inspector and Assistant Workshops Inspector.

ISAAC CLARK, Assistant Workshops Inspector.

JAS. HUNTER (retired July), **A. FLOCKHART** (appointed August) and **A. KIRSOP,** Assistant Inspectors under the Food and Drugs Acts.

JAS. MCKENDRY (retired September), **L. W. JOHNSON,** **WM. E. PERKINS,** **J. BROWN,** **L. WADE,** **M. SWALES,** **W. A. PILSON** (resigned July), **H. W. GRIEVES,** **R. G. SUDDICK,** **A. IBBITSON,** **W. M. PETTIGREW,** **R. S. COOPER,** District Inspectors.

W. STEWART, **F. GALTON,** **D. WILKINSON** (Temp. Sept.), Slum Clearance Inspectors.

E. BANKS, Assistant Inspector of Common Lodging Houses.

WM. BEAN, **R. CHAPMAN** (Temp. July), **T. SAYER** (Temp. July), Infectious Diseases Inspectors.

JAS. ROBSON, **JAS. BRUCE,** **JNO. R. CRAGIE,** **J. W. ROBSON,** **THOS. MOORE,** **J. ROBSON, JUN.,** Ambulance Drivers and Disinfectors.

***ALFRED HEDLEY, M.S.M., *GEO. CUTHBERTSON, *ALEC. M. WALKER, JOS. GILHESPY, H. G. OLIVER, *ROBT. LAWSON** (resigned March), ***D. H. MACPHERSON, *R. DOBBIN, H. G. COATES, *F. PELLATT, *L. SMALLEY, R. HALL** (resigned Nov.), **A. CAMPBELL** (appointed Dec.), **R. A. RIDLEY** (Temp.), **ALICE FENWICK, E. STOBART** (Temp. Dec.), (Typists), Clerks in the Health Department.

Those marked * hold the Sanitary Inspector's Certificate of the Royal Sanitary Institute.

THOS. PARKER, F.R.C.V.S., Veterinary Officer and Inspector of Provisions, **H. THORNTON, M.R.C.V.S., B.V.SC., D.V.H.,** Assistant Veterinary Inspector.

JAS. M. ANDERSON, W. COCKBURN, GEO. PHILLIPS, Assistant Inspectors of Provisions. ***NORMAN DICKSON,** Clerk.

A. F. G. SPINKS, M.D., Maternity and Child Welfare Medical Officer.

a **GEORGINA B. CAMERON, M.B.E.*,** Chief Health Visitor and Supt. of Midwives.

f **CATHERINE M. THEXTON†, b** **MARION MOODY*, c** **LIZZIE ISA PRITCHARD, c** **LOUISE SHELL, d** **FLORENCE MARTHA HATFIELD*, d** **NORAH B. WILLSON*, b** **E. HISCO*, b** **E. JOHNSON*, b** **N. E. CARR*, b** **T. MASON*, b** **E. M. HASTIE*, b** **N. LEWIS*, b** **M. A. SIMPSON*, b** **N. THOMPSON*, g** **C. N. PHILLIPS, b** **D. A. ATKINSON, b** **M. BATTY b** **A. CRAGGS, b** **M. W. LAING** (resigned March), **b** **P. E. PEARCE, b** **R. ROXBY, b** **M. SCORER, b** **E. G. SAYER, b** **L. YOEUELL, b** **A. BRADLEY, b** **C. BARRON*** (appointed May), Health Visitors. **EDITH RODGERS, AMY RODGERS** (died Nov.), **MARION S. BATT, BLANCHE DICKSON, A. DOUGAL** (Temp. Sept.), Clerks.

(Qualifications of those marked **a** C.M.B., General and Fever Nursing and R.S.I. Certificates. **b** C.M.B., General Nursing and R.S.I. **c** C.M.B. and R.S.I. **d** C.M.B. and General Nursing. **f** C.M.B., Fever Nursing and R.S.I. **g** C.M.B.).

* State Registered Nurse. † State Registered Fever Nurse.

IRENE COOK, Orthopædic Nurse (appointed June).

ANNIE G. BAINBRIDGE, Superintendent of Welfare Centres.

GLADYS PATTISON, IRENE GAWMAN, CATH. BARNES, MARY E. MUSE, Clerks.

H. GLEN DAVISON, M.D.	} Assistant Medical Officers (part time) Welfare Centres.
L. MABEL R. CAMPBELL, M.B., CH.B.	
H. HARVEY EVERS, M.B., F.R.C.S.	
GERTRUDE H. G. HICKLING, M.D., CH.B., B.SC., D.P.H.	
C. N. ARMSTRONG, M.B., B.S., M.R.C.P., B.HY., D.P.H.	
A. G. OGILVIE, M.B., B.S., M.R.C.P.	
ANNE FAIRWEATHER, M.D., B.S., B.HY., D.P.H., D.P.M. (Psych. and Ment. Def.)	
F. E. STABLER, M.D., B.S., F.R.C.S.	

G. HURRELL, M.D., B.S., B.HY., D.P.H., Tuberculosis Medical Officer.

N. V. HEPPLER, M.D., M.B., B.S., D.P.H. B.HY., Assistant Tuberculosis Medical Officer (appointed July).

WM. H. DICKINSON, O.B.E., M.D., CH.B., M.R.C.P.(ed.), D.P.H., Tuberculosis Medical Officer (part time).

c CONSTANCE M. BAYNE, **d** ANNIE BOOTH, **a** W. E. DALE*, **b** J. P. KENMIR*, **e** M. YOUNG, Tuberculosis Visiting Nurses.

(Qualifications of those marked **a** General Nursing. **b** General Nursing, C.M.B. and R.S.I. **c** General Nursing and Health Visitors and School Nurses Certificates of R.S.I. **d** Fever Nursing. **e** Fever Nursing and C.M.B.)

* State Registered Nurse.

N. G. MAYNE, Assistant Inspector (appointed July).

GEO. MAGNAY, GERTRUDE GILLENDER, M. PRINGLE, Clerks.

BARRASFORD SANATORIUM.

C. G. R. GOODWIN, M.R.C.S., L.R.C.P., Medical Superintendent.

HAZEL I. ASHFORD, M.B., CH.B., Assistant Medical Superintendent (appointed April).

FRANCES BAGULEY, A.R.R.C., Matron. Sisters, Nurses, Domestic Staff.

CITY HOSPITAL FOR INFECTIOUS DISEASES.

E. F. DAWSON-WALKER, M.D., B.S., B.HY., D.P.H., Deputy Medical Superintendent.

J. B. TILLEY, M.D., B.S., B.HY., D.P.H., Senior Resident Medical Assistant (resigned Nov.)

E. G. BREWIS, M.D., B.S., M.R.C.P., D.P.H., Resident Medical Assistant.

J. F. CAITHNESS, M.B., CH.B., D.P.H., Resident Medical Assistant (appointed Nov.)

W. FRANK WILSON, M.B., B.S., Consulting Oto-Rhinologist.

J. L. WATT, Matron.

H. PHILLIPS, Steward (appointed May).

JESSIE LAING, Assistant Matron. Sisters, Nurses, Clerks, Domestic Staff.

MAUD B. ELLIOTT, Dispenser.

GEO. COCKBURN, Engineer.

Lodge Keepers, Firemen, Porters, Gardeners, Joiner and Handyman.

SMALLPOX AND ISOLATION HOSPITALS.

JOS. W. and JANE STEPHENSON (resigned August), MATTHEW and ISABELLA ROBSON, Caretakers.

NEWCASTLE GENERAL HOSPITAL.

G. P. HARLAN, M.D., CH.B., B.H.Y., D.P.H., Medical Superintendent.

G. F. DUGGAN, M.B., B.CH., M.A.O., F.R.C.S. (Edin), Deputy Medical Superintendent.

JUNIOR RESIDENT HOUSE PHYSICIANS AND SURGEONS (6).

A. BARON, Matron.

S. LAKE and M. C. TAYLOR, Assistant Matrons. Sisters, Nurses, Domestic Staff.

N. H. HERDMAN, Dispenser.

JAMES MATTHEWS, Steward. Ambulance Drivers, Porters, Male Nurses, Clerks.

CONSULTING STAFF, Etc.

THOMAS BEATTIE, M.D., B.S., F.R.C.P., Medical Director.

F. J. NATTRASS, M.D., B.S., F.R.C.P., Physician.

ELSIE B. WRIGHT, M.D., B.S., M.R.C.S., L.R.C.P., Medical Registrar.

W. G. A. SWAN, M.B., B.S., M.R.C.P., Medical Registrar.

JOHN CLAY, C.B.E., M.B., B.S., F.R.C.S., Surgical Director.

J. C. STEWART, M.S., F.R.C.S., Surgeon.

W. E. WARDILL, M.B., B.S., F.R.C.S., Plastic and Genito Urinary Surgeon.

G. S. CLARK-MAXWELL, M.A., M.B., B.SC., Surgical Registrar.

A. LOGAN, M.B., CH.B., F.R.C.S. (Eng. and Ed.), Surgical Registrar.

A. R. D. PATTISON, M.B., B.S., F.R.C.S., L.R.C.P., Neurological Surgeon.

S. W. DAVIDSON, M.D., B.S., M.R.C.P., Radiologist.

A. MACRAE, M.A., M.D., CH.B., D.O.M.S., Consultant, Diseases of the Eye.

D. R. MACGREGOR, B.SC., M.B., CH.B., D.L.O. (R.C.P.S.), Consultant, Throat, Nose and Ear.

PHILIP AYRE, M.R.C.S., L.R.C.P., Anaesthetist.

W. J. PHILLIPS, M.B., B.S., Anaesthetist.

S. EVANS, M.SC., Radiotherapist (appointed January).

DISTRICT MEDICAL OFFICERS.

Dr. W. SIMPSON, Dr. R. W. NEVIN, Dr. T. J. RYAN.

PUBLIC VACCINATORS.

Drs. J. MACRAE, RICHARD DAGGER, T. J. RYAN, H. R. SMITH, A. M. PATERSON, J. A. BRAND, G. P. HARLAN (Newcastle General Hospital). H. L. TAYLOR, S. FULLERTON, H. R. KENDAL.

VACCINATION OFFICERS.

EASTERN DISTRICT—W. H. F. GARRETT.

WESTERN DISTRICT—W. W. CUMMINGS.

**To Alderman DAVID ADAMS, J.P., M.P., Chairman
of the Health Committee of the Corporation of
Newcastle upon Tyne.**

SIR,

I have the honour to present the sixty-third Annual Report of the Medical Officer of Health on the sanitary condition of the City.

The practice which has been followed in previous years whereby the detailed reports of the work of the several sections of the Health Department are submitted by the officers responsible has not been varied, and these documents constitute the major portion of the text.

In this letter, which is not intended either to summarise or to consolidate the reports of the sub-departments—for these of themselves are important contributions to our health records—some comment will be made on the outstanding features of the year 1935, and the more urgent of our many continuing problems will be reviewed.

Vital Statistics—Maternal, Infantile and General Mortality.

The year 1935 may be regarded as closing the first half of the present decade, and in view of this, an opportunity has been taken to construct a series of diagrams which show the movements and trends of the more important statistical rates over the period 1871–1935. These figures which require no great explanatory description are inserted as Appendix A of the report (pages 29–34).

The vital statistics of the year itself were in many ways remarkable and the more noteworthy details will now be referred to. Marriages were more numerous both actually and relatively than in any year since 1921. The total of 2,467 exceeds the preceding year by 155 and is equivalent to a marrying or marriage rate of 16.2 persons per 1,000 of the population.

The association of prosperity—expected and anticipated rather than present—with a high marriage rate has received some attention in these pages on previous occasions. For the year 1935 it should be remarked that this matrimonial increase goes hand in hand

with a reduction of 3,684 persons in the number of the male and female unemployed as compared with the record of 1934. These can be regarded as among the most encouraging achievements of the year.

The marriage rate has been increasing since 1931, but curiously enough the city birth rate does not as yet reflect this fact. After remaining stationary at 16.4 births per 1,000 population during 1933 and 1934, the birth rate declined to 16 per 1,000 in 1935. Nevertheless the total rate still exceeds the national birth rate of 14.7 per 1,000 population and is higher than the average experienced in 1935 by the 121 great towns, namely 14.8 per 1,000.

It remains to be seen whether a further extension of our industrial prosperity will help us to augment the natural increase. A glance at figure 1. Appendix A will show how far we have fallen from the fruitful years of last century.

Before dealing with the general death rate for the City some observations are required on those special death rates which deal respectively with infantile and maternal mortality. In neither case can the record be regarded as satisfactory.

The infantile mortality rate which in 1934 was 83 per 1,000 births has advanced still further to 86, and remains a matter of constant concern.

The maternal mortality rate has declined from 5.33 per 1,000 live and still births to 5.13. But this reduction which amounts to approximately 4% cannot be complacently regarded when it is realised that the national rate has fallen from 4.41 to 3.93 or by more than 10% during the same period.

On the suggestion of Professor E. Farquhar Murray of the Princess Mary Maternity Hospital, one further addition has been made to our armory of services, namely the establishment of an emergency service for combating shock and hæmorrhage in domiciliary confinements. This pioneer scheme which is based on the maternity hospital and is staffed by the honorary consultants and nursing personnel of that institution will undoubtedly be useful in preventing mortality in those cases for which it is specifically provided.

But the other causes of maternal death still remain and amongst these sepsis bulks largely. Our maternal death rate from puerperal sepsis in 1935 was 2.46 per 1,000 live and still births, the comparable national rate being 1.95 (1934).

The difference between our local and the national experience is not easy to account for.

With all our advantages, the presence of a large teaching maternity hospital, the facilities for post-graduate instruction of medical men, the carefully organised schemes for municipal and voluntary ante-natal centres—which happily are utilised more and more each year,* the large number of trained midwives, and the benefits of modern transportation, we should be able to do better.

But against these advantages we must array the intolerable housing conditions, the overcrowding, and the poverty which are such prominent features in many parts of the City. Until these failings and imperfections have been remedied any improvement in our maternal mortality will be slight and its maintenance doubtful.

Returning to the question of infantile mortality, a scrutiny of the individual causes of death shows that the fatal incidence of measles, whooping cough, bronchitis and broncho-pneumonia though still unduly high, was slightly lower in 1935 than in 1934.

The rise in the infantile mortality is to be attributed to an increase in the deaths from neo-natal conditions, congenital debility, premature births, malformations, etc. No fewer than 56.5% of the children who died in the first year of life, died within four weeks of their birth. In 1934 this proportion was 50.7%.

The following table records the infantile and neo-natal mortality during the past ten years and is of interest as demonstrating the changes which have taken place.

* 73 % of all expectant mothers had ante-natal supervision during 1935.

TABLE I.

Year.	Births.	Deaths under 1 year.	Deaths under 4 weeks.	Infantile Mortality Rate.	Neo-natal Mortality Rate.	Infantile Mortality Rate. 5th—52nd week.
1926	6,006	530	226	88	37.8	50.2
1927	5,395	474	222	88	41.4	46.6
1928	5,429	447	205	82	37.6	44.4
1929	5,126	438	207	85	40.1	44.9
1930	5,223	384	177	74	34	40.0
1931	5,056	467	180	92	35.2	56.8
1932	4,883	370	175	76	36.3	39.7
1933	4,712	359	177	76	37.2	38.4
1934	4,695	389	197	83	42.1	40.9
1935	4,666	400	226	86	48.6	37.4

In the Annual Report for 1934 the influence of overcrowding and bad housing conditions upon infantile mortality were briefly discussed, and it was shown that these factors although of importance between the beginning of the 5th week and the end of the 12th month of life were apparently not of such great moment during the first four weeks of the infant's existence.

In short, neo-natal mortality was little higher in the overcrowded districts of the town than in the residential areas. It was evident from this that our search for the general and predisposing causes of neo-natal mortality had to be directed elsewhere.

Our local enquiries during the past year have been concerned with obtaining the answer to a very simple question—whether children born in hospital are more likely to survive the neo-natal period than those born in home surroundings.

It is of course true that hospital cases comprise a larger proportion of difficult labours in which the risk to the child is greater, but this fallacy can be avoided by comparing the subsequent histories of children born of normal labours.

Contrary to common opinion it would appear that in Newcastle at any rate the chance of survival is greatest in the case of children born at home.

This does not mean that the care and attention which newly born children receive in hospital are lacking in any respect. It is more probably an indication that the environmental conditions of our maternity hospitals fall somewhat short of the ideal.

The general death rate for the City fell slightly to 12.6 per 1,000 of the population. By means of the comparability factors supplied by the Registrar General it is now possible to allow for those differences as regards age and sex distribution which are to be found in the populations of individual towns and counties. So adjusted, the death rates afford a more reliable indication of the relative healthiness of the various areas.

In Table II are recorded the crude and adjusted death rates for all cities in England with a population of 250,000 and over, together with similar information for certain local towns and counties. As regards the actual order of merit it will be noted that Newcastle is placed in the lower half of the table. Our position is not likely to promote any feelings of self-satisfaction, more particularly when we consider by how far we fall short of the record of the healthiest areas.

TABLE II.

Name of Town.	Population as estimated by Registrar General, Mid. 1935.	General Death Rate.	Death Rate adjusted by Comparability Factor.
Bristol	412,625	10.8	10.57
London County	4,185,200	11.4	11.66
Portsmouth	250,200	11.8	11.70
Leicester	261,000	11.6	11.84
Birmingham	1,033,000	10.9	11.99
West Ham	270,700	10.7	12.30
Nottingham	280,200	12.5	12.88
Hull	322,200	12.2	13.42
Sheffield	520,500	11.9	13.44
Leeds	487,200	13.2	14.12
NEWCASTLE UPON TYNE	292,700	12.6	14.24
Bradford	292,200	14.3	14.30
Manchester	776,028	12.9	14.72
Stoke-on-Trent	274,100	12.3	15.00
Liverpool	867,110	13.2	15.18
Northumberland County	406,100	11.7	12.37
Tynemouth	67,600	12.2	13.57
Durham County	908,300	12.0	13.80
Middlesbrough	140,000	13.2	14.13
South Shields	111,820	12.6	14.20
Sunderland	185,100	13.0	14.56
Gateshead	121,400	13.3	14.99

Turning now to the individual causes of death the six most important of these are set out in order below (Table III). The figures and positions for 1934 are reprinted for the purpose of comparison.

TABLE III.
INDIVIDUAL CAUSES OF DEATH.

No.	CAUSE OF DEATH.	1935.	
		Number.	Percentage of Total Deaths.
1	Diseases of the Heart	701	19.1
2	Cancer	433	11.8
3	Diseases of Veins and Arteries	406	11.1
4	Bronchitis and Pneumonia	358	9.7
5	Diseases of Nervous System.....	243	6.6
6	Tuberculosis—Pulmonary	240	6.5
No.	CAUSE OF DEATH.	1934.	
		Number.	Percentage of Total Deaths.
1	Diseases of the Heart	582	15.9
2	Cancer	442	12.1
3	Bronchitis and Pneumonia	375	10.3
4	Diseases of Veins and Arteries	353	9.7
5	Tuberculosis—Pulmonary	280	7.7
6	Diseases of Nervous System.....	266	7.3

There have been significant changes in this rating as compared with 1934 and the previous years.

Firstly, "diseases of the veins and arteries" have replaced "bronchitis and pneumonia" in the third position.

Secondly, and more notably, pulmonary tuberculosis which at one time headed the City's lists of mortality is no longer included amongst "the big five" but has fallen to the sixth place in the table.

It will be observed that "diseases of the heart" and "diseases of the veins and arteries" are together responsible for 1,107 deaths out of the total of 3,672 or no less than 30.2% of the total mortality. Yet there is no department of social medicine which has received less attention than the prevention and supervision of these conditions. Admittedly steps are taken to watch over child sufferers from congenital and rheumatic heart disease while they are under the care of the Education Authority, but there is no organised machinery, comparable in scope and effectiveness with the tuberculosis service, for dealing with the adult patient. Comprehensive and co-ordinated effort in this direction on the part of both national and local health authorities is long overdue.

As regards pulmonary tuberculosis, even though the City death rate is still 41% higher than the national average* it is a matter of some importance that the number of Newcastle deaths from the disease in 1935 was 240, the lowest annual total of which we have record. Ten years ago, in 1925, they numbered 343. Reference to Figure 4—Appendix A, will serve to indicate the the great reduction which has been effected in the tuberculosis mortality during the past 55 years.

* See Table IV where are contrasted a number of the average death rates for England and Wales and Newcastle during the past eight years.

TABLE IV.

Average Death Rates per 100,000 in England and Wales and Newcastle upon Tyne during the Eight Year Period 1927-1934. (Based upon the Registrar-General's Abridged List of Causes of Death.)

No.		England and Wales.	Newcastle upon Tyne.	Newcastle as a percentage of England and Wales.
	All causes	1,216	1,287	105.8
	*Infantile Mortality	65.3	82.3	126.0
1.	Typhoid and paratyphoid fevers....	0.76	0.88	115.8
2.	Measles	8.8	19.0	215.9
3.	Scarlet Fever	1.7	3.2	188.2
4.	Whooping Cough	7.9	11.1	140.5
5.	Diphtheria	7.7	3.6	46.7
6.	Influenza	37.7	28.6	75.9
7.	Encephalitis lethargica.....	2.4	3.3	137.5
8.	Cerebro-spinal fever.....	2.0	5.7	285.0
9.	Tuberculosis of respiratory system	73.0	103.1	141.2
10.	Other tuberculous diseases	21.8	25.1	115.1
11.	Syphilis	3.4	6.8	200.0
12.	General paralysis of the insane, tabes dorsalis	4.9	6.8	136.7
13.	Cancer, malignant disease	147.2	141.0	95.8
14.	Diabetes	14.4	14.4	100.0
15.	Cerebral haemorrhage, etc.	66.0	53.8	81.5
16.	Heart disease	236.9	222.6	94.0
17.	Aneurysm	3.3	3.5	106.0
18.	Other circulatory diseases	60.1	90.8	151.1
19.	Bronchitis	60.5	61.6	101.8
20.	Pneumonia (all forms)	82.0	91.0	111.0
21.	Other respiratory diseases	13.0	13.4	103.1
22.	Peptic ulcer	10.3	10.9	105.8
23.	Diarrhoea, etc. (under 2 years)	10.5	18.6	177.1
24.	Appendicitis	7.3	5.8	79.5
25.	Cirrhosis of liver	4.0	2.8	70.0
26.	Other diseases of liver, etc.	6.3	7.7	122.2
27.	Other digestive diseases	†	†	†
28.	Acute and chronic nephritis	38.6	44.1	114.2
29.	†Puerperal sepsis.....	1.7	1.8	105.9
30.	†Other puerperal causes	2.5	2.7	108.0
31.	*Congenital debility, premature birth, etc.	32.5	33.9	104.3
32.	Senility	47.4	29.9	63.1
33.	Suicide	13.1	11.7	89.4
34.	Other violence	41.8	39.4	94.3
35.	Other defined causes	†	†	†
36.	Causes ill-defined or unknown	†	†	†

* The rates for these headings are per 1,000 live-births.

† Not extracted.

‡ The rates for these headings are per 1,000 live-births for 1927 and per 1,000 live and still births 1928 and onwards.

Death rates which are equivalent to 125 per cent. or more of the similar rates for England and Wales are indicated in heavier type.

Infectious Diseases.

At one time the common infectious diseases, by which we mean scarlet fever, diphtheria, measles and whooping cough particularly, were amongst the most frequent agents of child mortality. Their fatality nowadays is much diminished, but they are still of great importance because of the legacy of ill-health which they so often leave behind them. During 1935 the sharp scarlet fever epidemic which had been with us since 1933 virtually came to an end. Though the number of cases notified, namely 1,282, was above the average of non-epidemic years, the case mortality rate of 0.2% is the lowest ever met with in the City.

Measles appeared in a mild epidemic form during the spring and summer months. In all 3,341 cases were notified and ascertained with 18 deaths attributable to the disease. This case mortality is similarly much lower than usual.

The main epidemiological feature of the year has again been provided by diphtheria. No fewer than 675 cases were notified, and amongst these 35 deaths occurred, equivalent to a case mortality rate of 5.2%.

The number of cases has not been exceeded in the City in any year of which we have knowledge. Fortunately the case mortality was slightly less than the average for the preceding ten years. The bacteriological typing of the various strains of diphtheria bacilli which was introduced in 1933 was continued during the year, and a note detailing the findings is given on page 103 of this report.

The immunisation clinics which were commenced in 1934 have maintained their good work of giving immunity to the susceptible and confidence to those entrusted with the care of children. Their scope was extended to include children of all ages of whom 1,826 were immunised during the year.

Nutrition.

The report of the Dietary Survey which was made in the City in 1934 has now been completed and will be made available at an early date.

A study of the document will serve to show why no apology is necessary for the delay in its appearance. The mathematical calculations which were essential before the various tables could be prepared, and the statistical investigation into the significance or otherwise of these data were obviously laborious undertakings. Our thanks are due to those exceedingly keen and competent, though anonymous collaborators to whom the major share of the credit for this work is due.

As a result we have an invaluable scientific record of the dietary, economic condition and nutritional state of a section of the Newcastle population in the early autumn of 1934. Apart from its immediate concern to ourselves, it is a document which future historians of our time may find of interest.

During 1935 no special investigations were undertaken, but a certain amount of work in the compilation of family budgets and the recording of market prices was continued as part of the routine of the Maternity and Child Welfare Department.

Venereal Diseases Services.

No previous reference has been made in the Annual Reports to the impending transfer of the Venereal Diseases Clinic from the Royal Victoria Infirmary to a site within the grounds of the Newcastle General Hospital.

It is a matter of common knowledge that the premises occupied by the joint clinic at the Infirmary not only left much to be desired, but had been the subject of unfavourable criticism by the Ministry of Health. Their replacement by a modern department was a matter of urgent necessity. Of recent years also, it has been felt that the co-operation of the clinic with the other activities of the various Health Departments would be facilitated if the controlling officer were a full time servant of the local authorities. Proposals along these lines, in which the financial interests of the hospital were adequately safeguarded were submitted to the Infirmary House Committee and were discussed over a prolonged period lasting from 1931 to 1934. In the first instance the House Committee found itself reluctant to accept either of the proposals outlined above, but ultimately agreed to a complete re-construction of the department at the cost of the local authorities, while rejecting the suggested appointment of a full time officer in charge of the clinic.

The negotiations continued, but in 1934 it became clear that the respective standpoints of the two parties were hardly capable of reconciliation. The local authorities accordingly approved a scheme to build, equip and maintain at the Newcastle General Hospital a clinic which would be administered by a Joint Committee of the participating authorities, duly established under Section 91 of the Local Government Act of 1933.

During 1935 further representations were received from the Infirmary intimating its complete acceptance of the terms already put forward by the local authorities, but the organization of the new clinic was at that time so far advanced as to prohibit any re-opening of the question.

At the time of writing the Joint Committee for the management of the clinic has been constituted, and the plans and proposals have received the confirmation of the Ministry of Health.

Domiciliary Medical and Nursing Services.

The development, organization and working of the "open choice" domiciliary medical service which now operates in eight of the ten medical relief districts of the City was discussed at length in the Annual Report for 1934 (Appendix B). In Appendix C of the same report the new basis of remuneration which had been accepted by the practitioners was described. It was agreed that these arrangements should be effective until March 31st, 1936, and should be subject to further review. The necessary statistical details for the period are now in course of preparation and will be considered by the Health Committee and the representatives of the panel practitioners.

It is noteworthy that complaints from practitioners operating the scheme have been practically negligible throughout the year, and it would appear that the present terms of remuneration though not perhaps ideal are more satisfactory than the previous ones.

The scheme obtains nothing but praise from those members of the population whom it serves, and is undoubtedly to their medical and social advantage. The dispensing arrangements in which the Newcastle Dispensary gives very helpful co-operation are satisfactory, though their extension may need to be considered to meet the increasing demands.

Progress of the most advantageous character has been possible in another direction. The nursing associations of the City, with only one exception, are now at the disposal of public assistance patients. The value of this alliance cannot be overstated.

General Hospital Services.

There has been no interruption in the growth of the Newcastle General Hospital and the most recent records shew that its work increased in every direction in 1935 (Table V).

TABLE V.

Year.	Admissions.	Discharges.	Operations.	Maternity Cases.
1930	3,048	3,099	596	97
1931	3,598	3,574	1,125	99
1932	4,522	4,447	1,428	161
1933	4,776	4,763	1,560	194
1934	5,544	5,555	2,076	225
1935	6,245	6,215	2,722	273

Furthermore, its achievements are beginning to be recognised by the visits of physicians and surgeons and their professional associations. The year 1935 was a year of consolidation rather than of renewed extension, but there have been a number of minor alterations, all directed to improving the amenities and increasing the efficiency of the institution. A number of additions have also been made to the nursing and domestic staff to keep pace with the steady clinical development of the hospital, and a scheme of training for male probationers has been inaugurated.

The commencement of the first year's programme under the Ministry of Health Survey Scheme was unfortunately delayed, largely owing to a fruitless request to the Commissioner for the Special Areas for a contribution towards its cost. Nevertheless, the work is now in hand, and there is no reason to believe that the second portion of the programme will be retarded. The range of buildings which will be brought into existence by the scheme now in train will go a considerable way towards modernising the hospital. But it is becoming increasingly obvious that a comprehensive planning of its future requirements should be the next objective of the Health Committee. Such a review must take into account not only the work of the General Hospital, but its association with the Royal Victoria Infirmary and the other hospitals of the City.

The great and never-ceasing needs of the City and the neighbouring areas for all forms of medical, surgical and obstetrical treatment cannot be met, either adequately or economically, without a greater measure of co-operation and co-ordination than exists at present.

Slum Clearance.

During the year two public enquiries under the Housing Act of 1930 were held and 30 Clearance Orders and one Compulsory Purchase Order were submitted for confirmation to the Minister of Health.

These orders comprised a total of 467 houses in which were accommodated 1,170 families, with a total population of 3,912 persons.

The actual amount of slum clearance accomplished was somewhat less than in 1934, but the slowing down of the five-year programme is only temporary. As soon as certain difficulties which have been experienced by the Housing Committee have been removed, progress should be continuous in every direction.

The following is a summary of the work which has been carried out in the campaign between 1931 and 1935.

Seventy-nine Clearance Orders and three Compulsory Purchase Orders have been made. These have necessitated the holding of nine public enquiries.

Sixty-nine Clearance and two Compulsory Purchase Orders have been confirmed by the Minister of Health, the remaining eleven Orders being at the moment under consideration by him.

The seventy-one Orders confirmed by the Minister dealt with 1,787 premises in which were housed 4,174 separate families, with a total population of 15,547. Of these 1,787 houses, 1,614 are to be demolished, necessitating the re-housing of 14,072 persons; 108 houses are to be re-conditioned or altered, 33 houses are to be converted for business purposes, and 32 were unconditionally excluded from the orders. The number excluded unconditionally represents no more than 1.8% of the whole 1,787.

Towards the end of the year steps were taken to organise the Census of Overcrowding which is required of every Local Authority under the Housing Act of 1935. This procedure which entailed the appointment of 20 enumerators and 2 clerks was scheduled to commence on 1st January, 1936, and by the decision of the Health Committee its purview was extended to embrace all inhabited property in the City, whether occupied by members of the working classes or by persons not commonly regarded as coming within that category.

Royal Commission on Tyneside Local Government.

These commentaries would be incomplete without a reference to the Royal Commission which was appointed in May, 1935, "to examine the system of Local Government in the areas north and south of the River Tyne; to consider what changes (if any) should be made in the existing arrangements with a view to securing greater economy and efficiency; and to make recommendations."

Under instructions from the City Council each separate Committee, whether statutory, standing or otherwise, proceeded to prepare statements of evidence for presentation to the Commission.

The City Council happily decided to forward these statements without confirmation or comment, and it was left to the individual committees to express freely and openly to the Royal Commission their opinions and proposals on the matters under review.

The importance of the occasion and the unique character of the opportunity were fully appreciated by the Health Committee. It was felt that the findings of the Commission might be reflected in profound alterations not only in the boundaries and functions of the constituent authorities of the Tyneside area, but in the entire sphere of English Local Government.

The evidence of the Health Committee was therefore prepared with great care and discrimination. It incorporated not only the experience of the individual members and officers of the Committee, but also the results of a detailed study of the organisation of local government in the City of Glasgow and the regional area which embraces the City of Aberdeen and the counties of Aberdeen and Kincardine.

This body of evidence, which represents the unanimous opinion of the Health Committee constitutes an attempt to formulate a broadly based and comprehensive scheme for the better government of the area, in so far as its Public Health Services are concerned. It is printed in full in the general Statement of Evidence submitted by the City Council to the Royal Commission and also in the Proceedings of the Council for the year ending November, 1935.

Mr. C. Raimes.

In July, 1935, after completing 44 years of service, Mr. C. Raimes, Chief Sanitary Inspector, retired on superannuation. The post which he occupied has multiplied its responsibilities within

recent years until it is now almost beyond the capacity of any single individual. But Mr. Raimes refused to recognise any limits to his own activities and his record of devotion to duty has never been surpassed in the department.

As a trainer and instructor of numberless sanitary inspectors he had a reputation which extended beyond the City.

For his loyalty and unflinching co-operation I can only acknowledge my indebtedness, and offer to him on behalf of the whole department our sincerest wishes for happiness and long life in his retirement.

Conclusion.

There remains, Sir, the very pleasant privilege of expressing my thanks to yourself, the vice-chairman and the members of the Health Committee for the constant encouragement and assistance which have been so liberally given to me.

To the members of the staff in every section of the department I am more than ever grateful for the team-work, the enthusiasm and the helpfulness which have characterised their labours.

I am, Sir,

Your obedient servant,

J. A. CHARLES,

Medical Officer of Health.

*Health Department,
Town Hall,
Newcastle upon Tyne,
June, 1936.*

SUMMARY OF STATISTICS, 1935.

Population (estimated mid. 1935)	292,700
Area of City (acres)	11,401
Estimated number of houses	77,536
Rateable value	£2,488,684
Sum produced by Id. rate	£9,836
Births	4,666
Birth rate (per 1,000 population)	16.0
Marriages	2,467
Deaths	3,672
Death rate (per 1,000 population)	12.6
" " " adjusted by comparability factor	14.24
Infantile Mortality (deaths under one year per 1,000 live births)	86
Natural increase in population (excess of births over deaths in the year)	994

CHIEF CAUSES OF DEATH.

Cause.	Number.	Percentage of total deaths.
Diseases of the Heart	701	19.1
Cancer	433	11.8
Diseases of the veins and arteries	406	11.1
Bronchitis and pneumonia	358	9.7
Tuberculosis (all forms)	303	8.2
Do. (Pulmonary)	240	6.5
Diseases of the nervous system	243	6.6
Diseases of the genito urinary system	197	5.4
Diseases of early infancy, and congenital malformations under 1 year	171	4.7

INFECTIOUS DISEASES.

Disease.	Cases notified.	Number of deaths.	Death rate per 1,000 population
Scarlet fever	1,282	3	0.010
Diphtheria	675	35	0.120
Enteric fever	7	....	....
Erysipelas	239	15	0.052
Cerebro-spinal fever	15	6	0.021
Measles	3,341	18	0.062
Tuberculosis (all forms)	640	303	1.041

(new cases)

Whooping cough, which is not notifiable, caused 22 deaths.

Influenza, which is not notifiable, caused 52 deaths.

APPENDIX A.
(Figure 1).



Fig. 1. Diagram shewing the average birth rate per 1,000 population in Newcastle upon Tyne for each quinquennium from 1871—1935.

APPENDIX A.
(Figure 2).

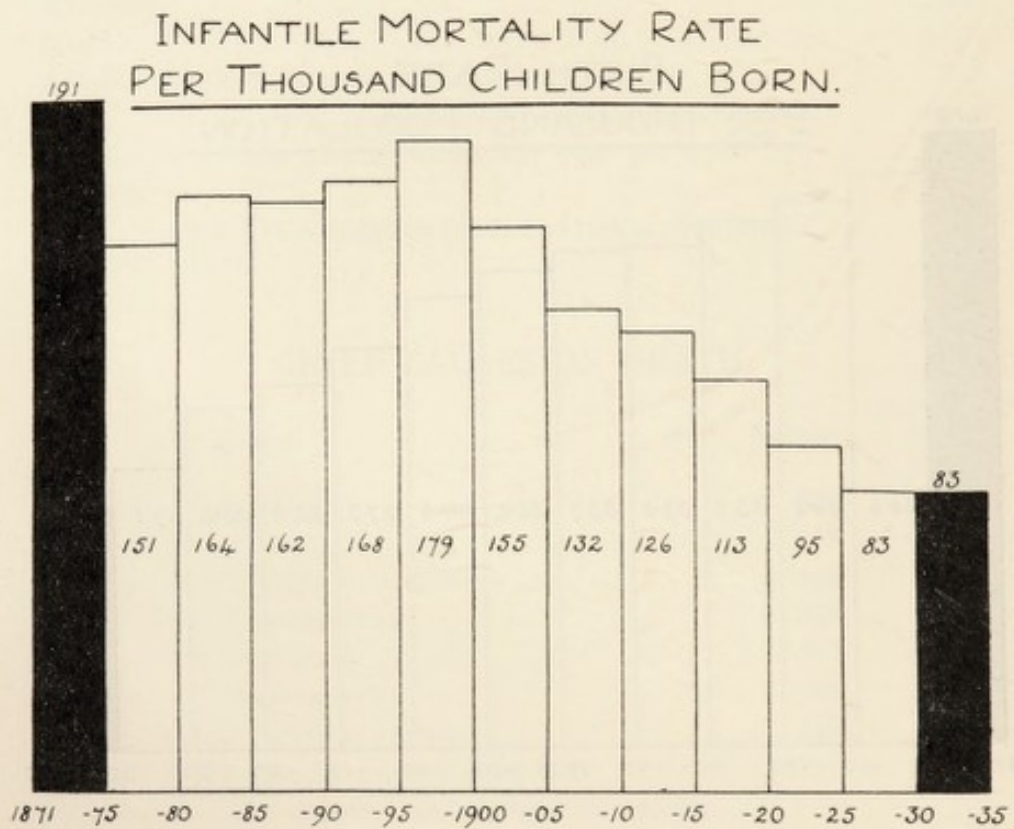


Fig. 2. Diagram shewing the average infantile mortality rate per 1,000 live births in Newcastle upon Tyne for each quinquennium from 1871—1935.

APPENDIX A.
(Figure 3).

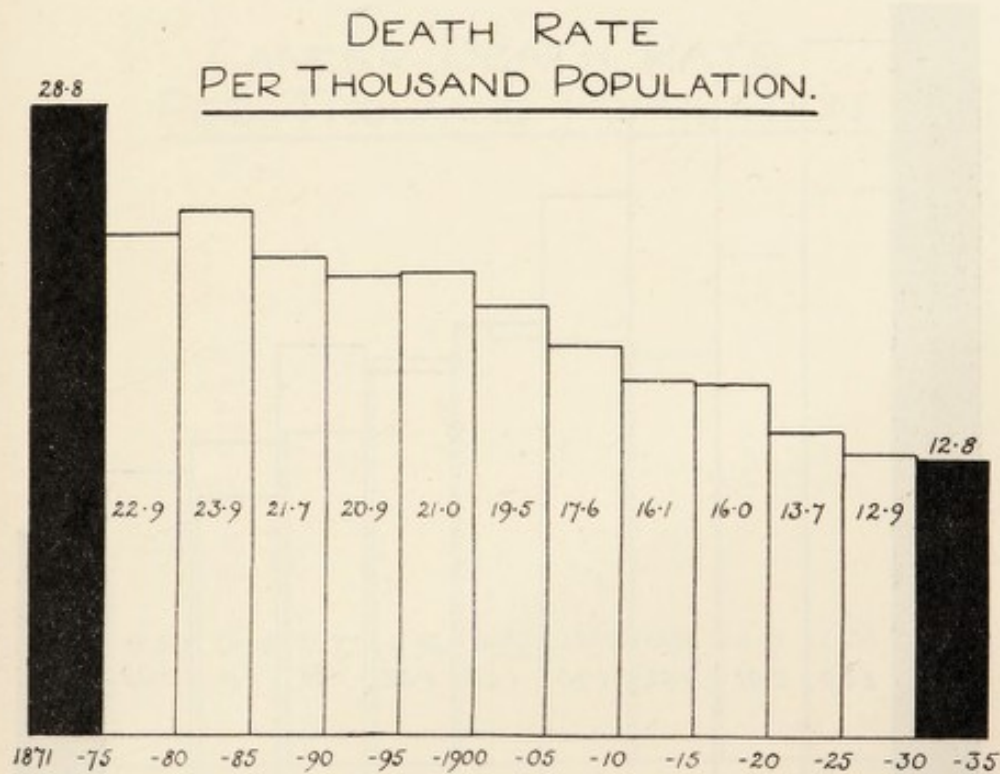


Fig. 3. Diagram shewing the average death rate per 1,000 population in Newcastle upon Tyne for each quinquennium from 1871—1935.

APPENDIX A.
(Figure 4).

PULMONARY TUBERCULOSIS
DEATH RATE PER THOUSAND
POPULATION.

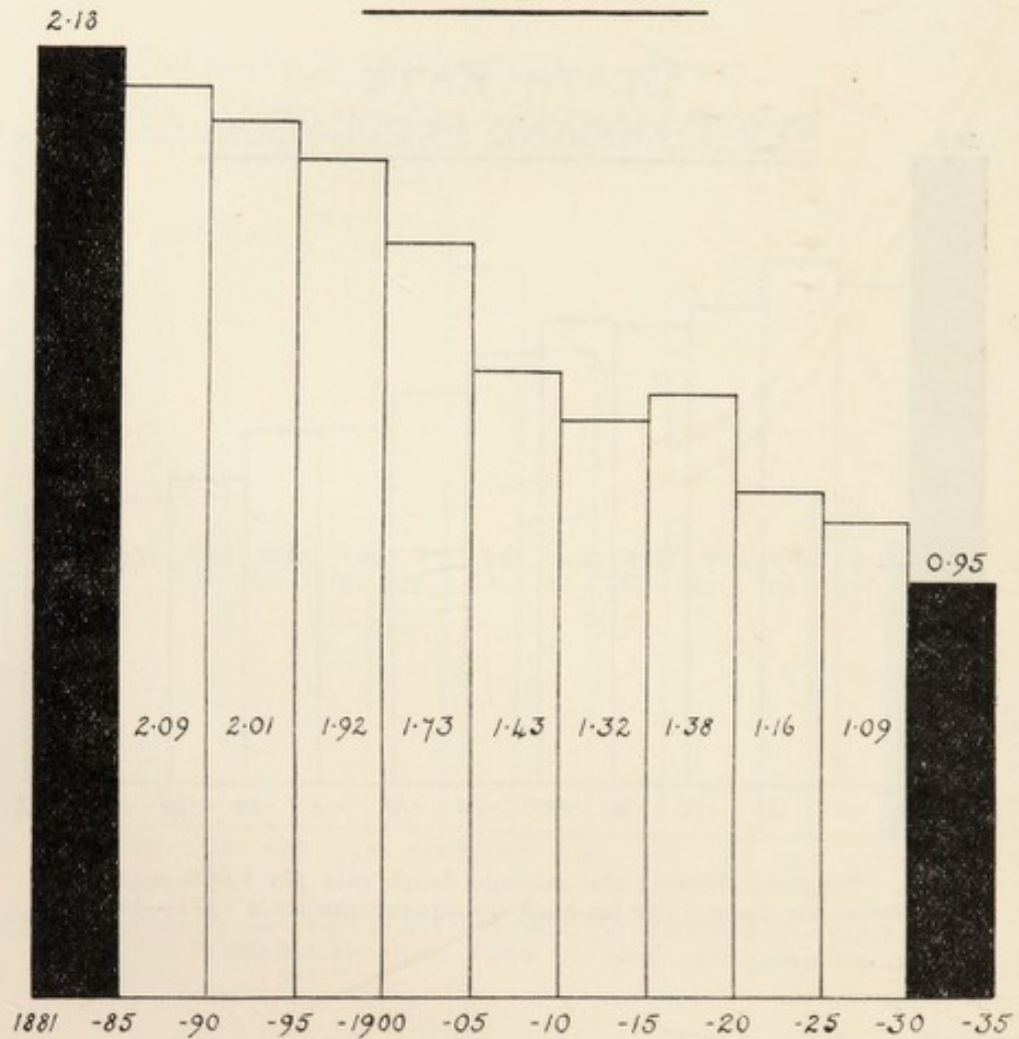


Fig. 4. Diagram shewing the average death rate per 1,000 population from pulmonary tuberculosis in Newcastle upon Tyne for each quinquennium from 1881—1935.

APPENDIX A.
(Figure 5).

CANCER DEATH RATE
PER THOUSAND POPULATION.

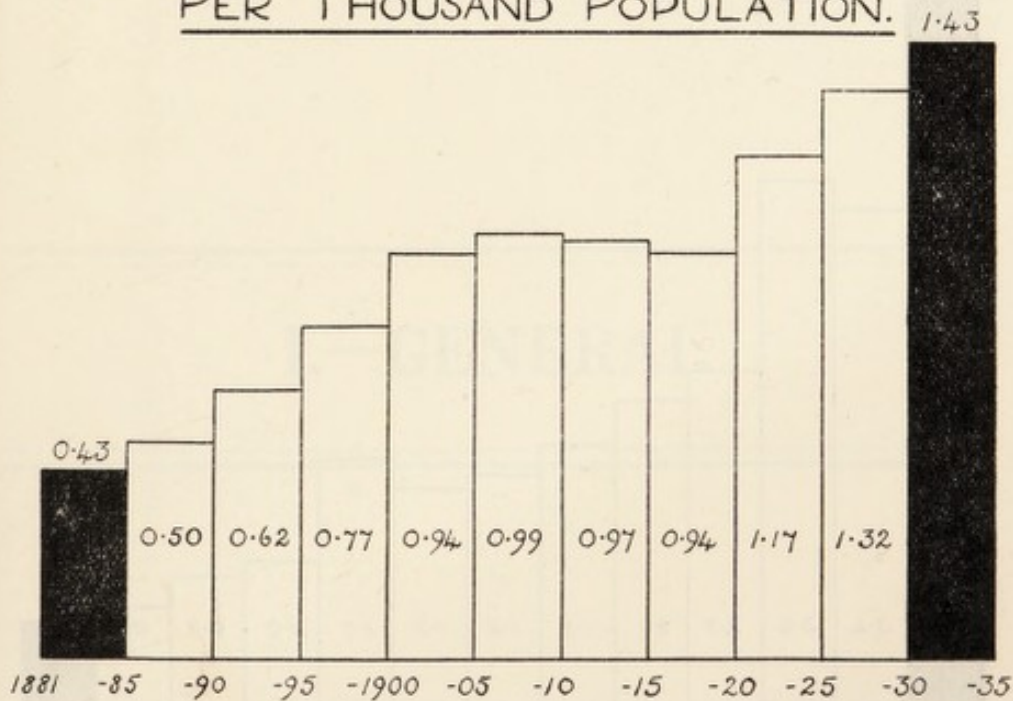


Fig. 5. Diagram shewing the average death rate per 1,000 population from cancer in Newcastle upon Tyne for each quinquennium from 1881—1935.

APPENDIX A.
(Figure 6).

ZYMOTIC DEATH RATE
PER THOUSAND POPULATION.

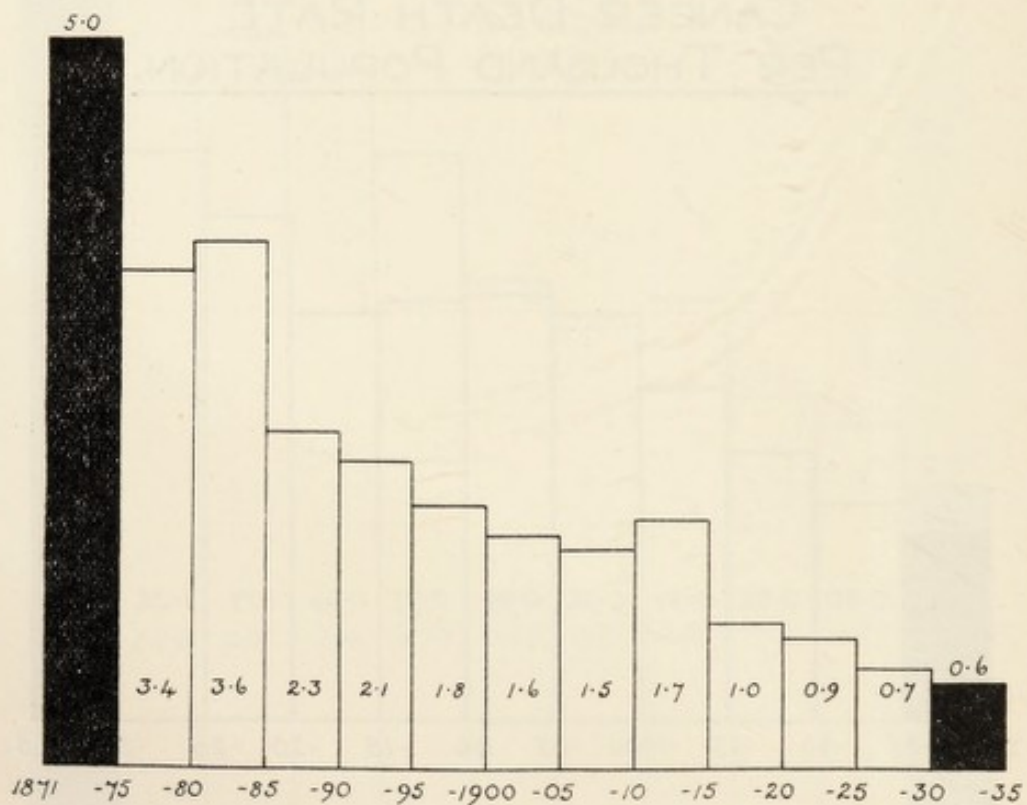


Fig. 6. Diagram showing the average zymotic death rate per 1,000 population in Newcastle upon Tyne for each quinquennium from 1871—1935. (Includes : smallpox, measles, scarlet fever, diphtheria, whooping cough, fever (typhus, simple continued, and enteric) and diarrhoea, all ages.)

CITY AND COUNTY OF NEWCASTLE UPON TYNE.

Health Report, 1935.

I.—GENERAL

MORTALITY TABLES,
SOCIAL CONDITIONS, CLIMATOLOGY,
WATER SUPPLY, DISPOSAL OF REFUSE.

CITY AND COUNTY OF LINCOLN, NEBRASKA

Health Report, 1935.

Prepared by the
Health Department

I. GENERAL

MONTHLY TABLE
SOCIAL ECONOMICAL CLASSIFICATION
WATER SUPPLY, DRAINAGE AND SEWERAGE

CITY AND COUNTY OF NEWCASTLE UPON TYNE.

Population, Birth Rate, and Special Mortality Rates during the period of the Notification of Infectious Diseases.

Year	Population	Males	Females	Births		Deaths		Special Mortality		Total Mortality		Infants		Children		Adults			
				No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate
1881	101,000	50,000	51,000	1,000	10.0	1,000	10.0	1,000	10.0	1,000	10.0	1,000	10.0	1,000	10.0	1,000	10.0	1,000	10.0
1882	102,000	51,000	51,000	1,000	9.8	1,000	9.8	1,000	9.8	1,000	9.8	1,000	9.8	1,000	9.8	1,000	9.8	1,000	9.8
1883	103,000	52,000	51,000	1,000	9.7	1,000	9.7	1,000	9.7	1,000	9.7	1,000	9.7	1,000	9.7	1,000	9.7	1,000	9.7
1884	104,000	53,000	51,000	1,000	9.6	1,000	9.6	1,000	9.6	1,000	9.6	1,000	9.6	1,000	9.6	1,000	9.6	1,000	9.6
1885	105,000	54,000	51,000	1,000	9.5	1,000	9.5	1,000	9.5	1,000	9.5	1,000	9.5	1,000	9.5	1,000	9.5	1,000	9.5
1886	106,000	55,000	51,000	1,000	9.4	1,000	9.4	1,000	9.4	1,000	9.4	1,000	9.4	1,000	9.4	1,000	9.4	1,000	9.4
1887	107,000	56,000	51,000	1,000	9.3	1,000	9.3	1,000	9.3	1,000	9.3	1,000	9.3	1,000	9.3	1,000	9.3	1,000	9.3
1888	108,000	57,000	51,000	1,000	9.2	1,000	9.2	1,000	9.2	1,000	9.2	1,000	9.2	1,000	9.2	1,000	9.2	1,000	9.2
1889	109,000	58,000	51,000	1,000	9.1	1,000	9.1	1,000	9.1	1,000	9.1	1,000	9.1	1,000	9.1	1,000	9.1	1,000	9.1
1890	110,000	59,000	51,000	1,000	9.0	1,000	9.0	1,000	9.0	1,000	9.0	1,000	9.0	1,000	9.0	1,000	9.0	1,000	9.0
1891	111,000	60,000	51,000	1,000	8.9	1,000	8.9	1,000	8.9	1,000	8.9	1,000	8.9	1,000	8.9	1,000	8.9	1,000	8.9
1892	112,000	61,000	51,000	1,000	8.8	1,000	8.8	1,000	8.8	1,000	8.8	1,000	8.8	1,000	8.8	1,000	8.8	1,000	8.8
1893	113,000	62,000	51,000	1,000	8.7	1,000	8.7	1,000	8.7	1,000	8.7	1,000	8.7	1,000	8.7	1,000	8.7	1,000	8.7
1894	114,000	63,000	51,000	1,000	8.6	1,000	8.6	1,000	8.6	1,000	8.6	1,000	8.6	1,000	8.6	1,000	8.6	1,000	8.6
1895	115,000	64,000	51,000	1,000	8.5	1,000	8.5	1,000	8.5	1,000	8.5	1,000	8.5	1,000	8.5	1,000	8.5	1,000	8.5
1896	116,000	65,000	51,000	1,000	8.4	1,000	8.4	1,000	8.4	1,000	8.4	1,000	8.4	1,000	8.4	1,000	8.4	1,000	8.4
1897	117,000	66,000	51,000	1,000	8.3	1,000	8.3	1,000	8.3	1,000	8.3	1,000	8.3	1,000	8.3	1,000	8.3	1,000	8.3
1898	118,000	67,000	51,000	1,000	8.2	1,000	8.2	1,000	8.2	1,000	8.2	1,000	8.2	1,000	8.2	1,000	8.2	1,000	8.2
1899	119,000	68,000	51,000	1,000	8.1	1,000	8.1	1,000	8.1	1,000	8.1	1,000	8.1	1,000	8.1	1,000	8.1	1,000	8.1
1900	120,000	69,000	51,000	1,000	8.0	1,000	8.0	1,000	8.0	1,000	8.0	1,000	8.0	1,000	8.0	1,000	8.0	1,000	8.0

2 All rates calculated on population of 1901. 3 Includes the hospital of Blenheim, Warley, included from 1899 onwards. 4 Includes the hospital of Blenheim, Warley, included from 1899 onwards. 5 Includes the hospital of Blenheim, Warley, included from 1899 onwards. 6 Includes the hospital of Blenheim, Warley, included from 1899 onwards. 7 Includes the hospital of Blenheim, Warley, included from 1899 onwards. 8 Includes the hospital of Blenheim, Warley, included from 1899 onwards. 9 Includes the hospital of Blenheim, Warley, included from 1899 onwards. 10 Includes the hospital of Blenheim, Warley, included from 1899 onwards.

GENERAL STATISTICS.

POPULATION.—As estimated by the Registrar General at the middle of the year 1935—292,700.

RETURN SHEWING THE ESTIMATED POPULATION OF THE DIFFERENT WARDS IN THE CITY, ACREAGE, POPULATION PER ACRE, ETC.

WARD.	Population (estimated).	Area prior to Boundary Extension (River area not included).	Added Areas. (1-4-1935)	River Areas.	Present Area (inclusive of Added Areas and River Areas).	Area of Public Open Spaces (exclusive of River Area).	Net Area (exclusive of Public Open Spaces and River Areas).	Population per acre (exclusive of River Areas).	
								Gross (Col. 3 & 4).	Net (Col. 8).
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
St. Nicholas'	1,839	127	.....	16	143	1	126	14	15
St. Thomas'	15,377	1,644	1,550	.....	3,194	1,102	2,092	5	7
St. John's	11,979	169	.....	12	181	2	167	71	72
Stephenson	17,944	212	.....	37	249	.....	212	85	85
Armstrong	14,540	176	.....	37	213	31	145	83	100
Elswick	13,326	250	.....	.....	250	18	232	53	57
Westgate	13,679	90	.....	.....	90	1	89	152	154
Arthur's Hill	9,392	142	.....	.....	142	6	136	66	69
Benwell	22,291	551	6	51	608	37	520	40	43
Fenham	25,907	1,190	318	.....	1,508	80	1,428	17	18
All Saints'	14,367	178	.....	15	193	2	176	81	82
St. Andrew's	10,629	174	.....	.....	174	2	172	61	62
Jesmond	11,196	443	.....	.....	443	49	394	25	28
Dene	18,805	821	764	.....	1,585	120	1,465	12	11
Heaton	13,373	225	.....	.....	225	28	197	59	68
Byker	14,681	139	.....	.....	139	.....	139	106	106
St. Lawrence	17,885	180	.....	17	197	7	173	99	103
St. Anthony's	15,691	598	.....	51	649	21	577	26	27
Walker	29,799	1,149	.....	69	1,218	43	1,106	26	27
CITY	292,700	8,458	2,638	305	11,401	1,550	9,546	26	31

INHABITED HOUSES.—77,536 inhabited houses, which, on the estimated population, shows an average of 3.77 persons per dwelling.

RATEABLE VALUE.—£2,488,684. A penny rate produced £9,836.

SOCIAL CONDITIONS.—The principal **Trades and Occupations** are of a healthy nature, being generally engineering and machine making; conveyance of men, goods, and messages; building and works of construction, *e.g.*, ship building; and connected with ships and boats, sea-faring and harbour work; food, tobacco, drink, and lodging; coal and shale mines; and commercial or business occupations.

The amount of **Public Assistance** granted during the year ended 31st March, 1935, was £381,654 for out-door relief, and £41,953 for indoor maintenance, making a total of £423,607, as compared with £359,187 in the previous year.

The number of registered male unemployed was 25,687 at the beginning of the year, and 21,848 at its close, whilst the figures for females were 2,956 and 2,341 respectively.

The City contains many **Hospitals** and other medical charities, but since wide surrounding districts are also served by them, figures as to patients treated are not of local value. A list of municipal and voluntary hospitals serving the city is given on page 47.

MARRIAGES.—2,467 marriages took place during the year, as compared with 2,312 in 1934, and 2,270 in 1933.

BIRTHS.—4,666, equivalent to a rate of 16.0 per 1,000 population.

DEATHS.—(All causes)—5,040, equivalent to a gross rate of 17.3 per 1,000 population, and, after deduction of the deaths of 1,489 non-citizens and addition of 121 Newcastle residents who died elsewhere, to a net rate of 12.6 per 1,000 population. In 1934 the death rate was 12.7.

24 *Orders for Burial* (Newcastle upon Tyne Improvement Act, 1882, Sec. 47) were made, 7 being in respect of bodies lying in inhabited rooms, and 17 being cases from hospital.

TOTAL DEATHS DURING RECENT YEARS FROM CERTAIN CLASSES OF DISEASE.
Classification in Table III. of Ministry of Health.

	Nervous System.	Circulatory.	Respiratory.	Digestive.	External Causes.
1912	410	435	603	204	152
1913	457	453	722	332	114
1914	448	505	863	465	142
1915	470	635	873	361	163
1916	477	448	856	281	117
1917	497	478	864	268	135
1918	498	503	957	252	135
1919	439	497	1,040	272	133
1920	384	534	861	275	124
1921	347	581	726	297	113
1922	363	689	913	181	92
1923	363	623	623	219	112
1924	376	667	749	206	110
1925	359	696	681	248	131
1926	335	742	596	220	158
1927	328	751	615	204	123
1928	331	796	480	247	153
1929	311	893	577	226	148
1930	256	874	469	227	137
1931	250	991	509	195	158
1932	232	976	413	201	161
1933	237	1,003	362	213	151
1934	266	935	405	215	134
1935	243	1,107	391	223	130

CANCER DEATHS IN AGES (MALE AND FEMALE), 1935.

Site.	Sex.	Under 1 Year.	1—2 Years.	2—5 Years.	5—15 Years.	15—25 Years.	25—45 Years.	45—85 Years.	Years and over.	Total.
Cancer of the buccal cavity and pharynx	M.	....	....	....	....	1	1	14	14	30
	F.	....	....	....	....	....	....	1	....	1
Cancer of the digestive system	M.	....	....	1	....	....	14	61	52	128
	F.	....	....	....	....	1	4	45	65	115
Cancer of the respiratory organs	M.	....	....	....	....	....	1	13	7	21
	F.	....	....	....	....	....	1	6	2	9
Cancer of the uterus	F.	....	....	....	....	....	7	22	8	37
Cancer of other female genital organs	F.	....	....	....	....	....	....	6	6	12
Cancer of the breast	M.	....	....	....	....	....	....	1	....	1
	F.	....	....	....	....	....	3	18	10	31
Cancer of the male genito-urinary organs	M.	....	....	....	....	....	1	8	6	15
Cancer of the skin	M.	....	....	....	....	....	....	1	2	3
	F.	....	....	....	....	....	....	....	3	3
Cancer of other or unspecified organs	M.	....	....	....	1	1	1	4	6	13
	F.	....	....	....	....	....	2	7	5	14
	M.	....	....	1	1	2	18	102	87	211
	F.	....	....	....	....	1	17	105	99	222
TOTAL	....	....	....	1	1	3	35	207	186	433

The average age at death for males was 61 and females 62.

INFANTILE MORTALITY.—400 infants died before completing the first year of life, representing a rate of 86 deaths per 1,000 live births.

ZYMOTIC DEATH RATE.—There were 159 deaths from the "Chief Zymotic Diseases"—smallpox, measles, scarlet fever, diphtheria, whooping cough, fever (typhus, simple continued, and enteric) and diarrhoea (all ages)—equivalent to 0.55 deaths per 1,000 population.

TUBERCULOSIS.—303 persons died from various forms of tuberculosis, 240 being from pulmonary, and 63 from non-pulmonary. The equivalent death rates are: *all forms* 1.04 *pulmonary* 0.82, and *non-pulmonary* 0.22, per 1,000 population.

For comparison of death rates with previous years see large table, page 37A.

For particulars of deaths as to site of disease, age, etc., see table page 43A.

GEOLOGY.—The geological formation of the area consists of heavy clay on the top of hard sandstone, which overlies coal seams.

CLIMATOLOGY.—The following is a brief summary of the main features of the weather in 1935, as recorded on the "Newcastle Chronicle's" instruments :—

The mean barometer reading was 29.6 inches. The mean maximum and minimum temperatures were 67.9 F. and 41.2 F. respectively.

The rainfall for the year was 25.60 inches, 1.08 inches more than that of 1934 (24.52).

The following table shows the frequency of the directions of the wind :—

W.	on	46	days.
N.W.	on	135	"
N.E.	on	41	"
E.	on	7	"
S.E.	on	57	"
S.W.	on	71	"
S.	on	6	"
N.	on	2	"

Sunshine.

Sunshine records have been available by the courtesy of Professors G. W. Todd and J. A. Hanley, of Armstrong College. The observations are taken at Cockle Park Farm (fifteen miles north of the City, and in a rural area), and at the College itself. During the year 1,133 hours of sunshine were registered in the City, as compared with 1,353 at Cockle Park.

WATER SUPPLY.—The City is served by the Newcastle and Gateshead Water Company with a plentiful supply of pure upland surface water, collected from large catchment areas at Catcleugh, close to the Cheviots, and in lower Northumberland. It is stored in large impounding reservoirs at Catcleugh, Hallington, and Whittle Dene, and passes through filters at Whittle Dene and Throckley. It was found, however, that filtration did not secure the degree of freedom from bacteria which was desirable, and during the last few years it has been supplemented by chlorination, with marked improvement.

In the vast majority of cases the household taps are served directly from the mains without intervening cisterns. A separate trade supply is piped to some of the great riverside works from a point above the filters.

The bacteriological reports upon the water are given on page 115.

SEWERAGE.—There are 366 miles of sewers in the City (before extension) and 14 miles (approximate) in added areas discharging directly into the Tyne, which is tidal, at various points along the $8\frac{1}{4}$ miles of river frontage.

CLEANSING AND SCAVENGING.—A weekly collection of refuse is made from 75 per cent. of premises and twice weekly from the remainder.

There are 78,833 dry ashtubs and galvanised iron bins, 134 dry ashpits, and 184 conservancy system closets in the City. The increase in these numbers is due to the extension of the City on 1st April, 1935. Conversions are proceeding steadily and, during 1935, 15 pail-closets, and one "cell" privy were removed and water closets substituted. 3 dry ashpits were also removed and dustbins substituted. All the schools are served by the water-carriage system.

ADOPTIVE AND LOCAL ACTS IN FORCE.

Adopted Acts.—Infectious Disease (Prevention) Act, 1890.
Section 4.

Public Health Acts Amendment Act, 1890.—Part III.—
Whole of ; Part IV.—Whole of.

Public Health Acts Amendment Act, 1907.—Part II.—Sec-
tions 20, 22, 23, 26, 27, 28, 29, 30, 31 and 33 ; Part III.—Sections
34, 35, 36, 37, 38, 43, 45, 48, 49, 50 and 51 ; Part IV.—Sections
52, 53, 56, 58, 59, 61, 62, 63, 64, 65 and 68 ; Part X.—Whole of.

Public Health Act, 1925.—Part II., Sections 15, 21, 22, 23,
24, 25, 26, 27, 28, 30, 31, 32, 33 and 35 ; Part III.—Whole of ;
Part IV.—Whole of ; Part V.—Whole of.

Local Acts.—Newcastle-upon-Tyne Improvement Act, 1837.

“	“	1846.
“	“	1853.
“	“	1865.
“	“	1870.
“	“	1882.
“	“	1892.

Newcastle-upon-Tyne Tramways and Improvement Act, 1899.

Newcastle-upon-Tyne Corporation Act 1911.

Newcastle-upon-Tyne Corporation Act 1926.

Newcastle-upon-Tyne Corporation (General Powers) Act, 1935.

VITAL STATISTICS, YEAR 1935, AND INFECTIOUS DISEASES.

COMPARISON WITH OTHER DISTRICTS.

DISTRICT.	Birth Rate.	General Death Rate.	Death Rate adjusted by Comparability Factor.	Infantile Mortality Rate.	Death Rate per 1,000 from Enteric Fever, Smallpox, Scarlet Fever, Measles, Whooping Cough, and Diphtheria.	Tuberculosis (all forms) Death Rate.	ATTACK RATE PER 1,000 POPULATION.						ATTACK RATE PER 1,000 BIRTHS, (live & still)
							Small-pox.	Typhus.	Scarlet Fever.	Diphtheria.	Enteric Fever and Continued Fever.	Erysipelas.		Puerperal Fever.
England and Wales	14.7	11.7	..	57	0.16	†	..	..	2.96	1.60	0.04	0.42	3.60
121 Great Towns (including London)	14.8	11.8	..	62	0.18	†	..	..	3.19	1.96	0.04	0.48	4.55
NEWCASTLE UPON TYNE ..	16.0	12.6	14.24	86	0.27	1.04	..	..	4.40	2.32	0.02	0.82	3.59
Hull	18.4	12.2	13.4	72	0.30	0.95	..	..	2.32	2.98	..	0.32	0.49
Leeds	14.8	13.2	14.1	64	0.24	0.89	..	..	4.27	2.74	0.01	0.62	7.29
Bradford	13.5	14.3	14.30	64	0.31	0.70	..	..	4.21	3.18	0.03	0.50	1.21
Sheffield	14.7	11.9	13.44	52	0.20	0.79	..	..	8.09	3.36	0.01	0.74	5.75
Manchester	14.5	12.9	14.72	71	0.28	1.04	..	..	3.60	1.16	0.00	0.53	0.16
Salford	15.0	13.0	15.34	78	0.28	1.02	..	..	2.8	3.29	0.4	0.54	5.84
Liverpool	20.0	13.2	15.2	83	0.43	1.08	..	0.0	2.19	3.11	0.03	0.96	2.65
Nottingham	15.7	12.5	12.88	81	0.15	0.98	..	..	3.36	1.07	0.01	0.44	2.85
Leicester	13.9	11.6	11.84	59	0.14	0.98	..	..	5.49	1.06	0.05	0.63	3.24
Stoke-on-Trent	16.6	12.3	15.0	83	0.18	1.05	..	0.0	4.44	1.44	0.01	0.47	3.74
Birmingham	15.4	10.9	12.0	64	0.21	0.79	..	..	3.48	1.69	0.03	0.61	6.32
Cardiff	15.2	12.3	13.0	59	0.27	1.19	..	..	1.70	1.57	0.03	0.30	17.16
Bristol	13.8	10.8	10.57	43	0.08	0.80	..	..	2.5	1.51	0.03	0.38	1.67
Portsmouth	14.8	11.8	11.7	46	0.10	0.84	..	..	2.46	1.68	0.03	0.28	4.69
London (County)	13.3	11.4	11.66	58	0.11	0.77	..	..	2.62	2.23	0.04	0.45	4.18
Gateshead	18.2	13.3	14.90	90	0.14	1.24	..	..	4.24	0.66	0.02	0.59	2.62
South Shields	17.2	12.6	14.2	80	0.31	1.43	..	..	4.29	0.87	0.01	0.54	2.00
Tynemouth	17.4	12.2	13.57	63	0.21	1.17	..	0.0	3.4	1.0	0.03	0.5	0.0
Sunderland	19.9	13.0	14.5	92	0.73	1.00	..	..	2.64	1.83	0.15	0.75	5.42
Middlesbrough	20.2	13.2	14.13	86	0.52	1.29	..	..	3.28	1.27	..	0.45	5.93
*County of Northumberland ..	15.6	11.7	12.37	71	0.33	0.73	..	..	5.3	2.07	0.09	0.61	2.42
*County of Durham	17.5	12.0	13.8	70	0.38	0.83	..	..	6.33	3.51	0.11	0.64	1.68

* Administrative County.

† Not available.

Vital Statistics of Whole District during 1935 and previous Years.

YEAR.	Population estimated to Middle of each Year.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS.		NET DEATHS BELONGING TO THE DISTRICT.			
		Uncorrected Number	Net.		Number	Rate.	of Non-residents registered in the District	of Residents not registered in the District	Under 1 Year of Age.		At all Ages.	
			Number	Rate.					Number	Rate per 1,000 Nett Births.	Number	Rate.
1	2	3	4	5	6	7	8	9	10	11	12	13
1911	267,261	7,089	7,082	26.5	4,667	17.5	448	165	973	137	4,384	16.4
1912	269,193	7,219	7,194	26.7	4,221	15.7	529	146	727	101	3,838	14.5
1913	271,295	7,480	7,460	27.5	4,611	17.0	560	141	908	122	4,192	15.5
1914	271,523	7,564	7,538	27.8	5,069	18.7	546	138	1,029	137	4,660	17.2
1915	278,107	7,575	7,545	27.8	5,257	18.9	693	207	1,007	133	4,771	17.2
1916	278,107	7,332	7,248	26.2	4,875	17.5	680	232	899	123	4,427	15.9
1917	278,107	6,548	6,495	23.4	4,646	16.7	718	246	732	113	4,174	15.0
1918	278,107	6,555	6,468	23.3	5,380	19.3	872	308	692	107	4,816	17.3
1919	275,099	6,793	6,674	23.3	5,358	19.5	737	234	806	120	4,855	17.6
1920	286,061	8,433	8,070	28.0	4,609	16.1	779	195	817	101	4,025	14.0
1921	278,400	7,720	7,284	26.2	4,602	16.5	817	142	699	96	3,927	14.1
1922	281,600	7,432	6,987	24.8	4,698	16.7	831	145	646	92	4,012	14.2
1923	283,800	6,961	6,367	22.4	4,298	15.1	789	150	623	98	3,659	12.9
1924	285,900	7,029	6,335	22.2	4,607	16.1	929	172	632	100	3,850	13.5
1925	286,300	7,031	6,215	21.6	4,732	16.5	989	165	550	88	3,908	13.6
1926	284,700	6,728	6,007	21.0	4,460	15.7	979	161	530	88	3,642	12.8
1927	288,500	6,215	5,395	18.7	4,468	15.5	1,058	178	474	88	3,588	12.4
1928	281,500	6,360	5,429	19.2*	4,683	16.6	1,178	179	447	82	3,684	13.1
1929	283,400	6,120	5,126	18.1	5,040	17.8	1,313	172	438	85	3,899	13.8
1930	283,400	6,190	5,223	18.4	4,665	16.5	1,232	133	384	74	3,566	12.6
1931	283,600	6,058	5,056	17.8	4,911	17.3	1,251	145	467	92	3,805	13.4
1932	285,100	6,006	4,883	17.1	4,579	16.0	1,174	134	370	76	3,539	12.4
1933	286,500	5,770	4,712	16.4	4,695	16.4	1,182	127	359	76	3,640	12.7
1934	287,050	5,848	4,695	16.4	4,823	16.8	1,322	145	389	83	3,646	12.7
1935	292,700†	5,895	4,666	16.0	5,040	17.3	1,489	121	400	86	3,672	12.6

* Calculated on a population of 282,200.

† Rates calculated on a population of 291,025.

Corrected Death Rates in different Wards, 1935.

St. Nicholas.	St. Thomas.	St. John's.	Stephenson.	Armstrong.	Elswick.	Westgate.	Arthur's Hill.	Benwell.	Fenham.	All Saints.	St. Andrew's.	Jesmond.	Dene.	Heaton.	Byker.	St. Lawrence.	St. Anthony's.	Walker.	City.
11.4	10.9	17.8	12.4	13.2	15.5	14.3	12.0	11.2	10.8	13.6	14.9	12.7	12.3	11.0	10.8	12.1	15.7	10.6	12.6

All deaths occurring in Public Institutions have been allotted to the Wards to which they properly belong.

**CAUSES OF DEATH AT DIFFERENT PERIODS
OF LIFE FOR 1935.**

(REGISTRAR GENERAL'S RETURN).

CAUSES OF DEATH.	Sex	All	0-	1-	2-	5-	15-	25-	35-	45-	55-	65-	75-
		Ages											
All Causes	M.	1958	231	32	34	53	82	78	101	224	385	417	321
	F.	1745	170	36	46	63	70	88	93	160	265	380	374
1—Typhoid and Paratyphoid Fevers	M.	....	....	....	....	....	....	....	....	....	....	....	....
	F.	....	....	....	....	....	....	....	....	....	....	....	....
2—Measles	M.	6	2	....	3	1	....	....	....	....	....	....	....
	F.	15	1	5	8	1	....	....	....	....	....	....	....
3—Scarlet Fever	M.	2	....	1	....	....	1	....	....	....	....	....	....
	F.	4	....	1	....	1	1	....	....	1	....	....	....
4—Whooping Cough	M.	8	4	1	2	1	....	....	....	....	....	....	....
	F.	15	7	5	3	....	....	....	....	....	....	....	....
5—Diphtheria	M.	19	1	1	7	9	1	....	....	....	....	....	....
	F.	14	....	....	3	11	....	....	....	....	....	....	....
6—Influenza	M.	33	2	....	....	1	5	2	2	3	5	8	5
	F.	21	1	1	1	....	....	1	3	2	2	5	5
7—Encephalitis Lethargica	M.	2	....	....	....	....	....	....	....	1	1	....	....
	F.	2	....	....	....	....	....	....	....	1	....	1	....
8—Cerebro-spinal Fever	M.	4	1	1	....	....	1	....	....	1	....	....	....
	F.	1	....	1	....	....	....	....	....	....	....	....	....
9—Tuberculosis of respiratory system	M.	142	....	....	1	3	27	31	23	29	21	6	1
	F.	97	1	1	1	4	28	27	13	10	8	3	1
10—Other Tuberculous diseases	M.	29	1	2	3	9	4	1	3	4	....	2	....
	F.	34	2	3	6	6	6	2	2	1	4	1	1
11—Syphilis	M.	16	4	....	....	....	....	....	....	4	6	2	....
	F.	4	1	....	....	....	....	....	....	1	1	1	....
12—General paralysis of the insane, tabes dorsalis	M.	10	....	....	....	....	1	....	....	5	4	....	....
	F.	6	....	....	....	....	....	....	3	....	2	1	....
13—Cancer, malignant disease	M.	222	1	....	1	2	2	2	19	29	77	64	25
	F.	223	....	....	....	....	1	3	14	45	60	66	34
14—Diabetes	M.	15	....	....	....	1	....	....	2	....	2	6	4
	F.	31	....	....	....	....	2	....	....	4	7	14	4
15—Cerebral hæmorrhage, etc.	M.	74	....	....	....	....	1	1	1	5	20	29	17
	F.	91	....	....	....	....	1	1	7	10	14	32	26
16—Heart disease	M.	391	....	....	1	2	8	8	8	45	87	127	105
	F.	366	....	....	1	4	5	13	12	30	72	106	123
17—Aneurysm	M.	7	....	....	....	1	....	....	....	....	3	3	....
	F.	5	....	....	....	1	1	....	1	1	1	....	....
18—Other circulatory diseases	M.	173	....	....	....	....	....	....	....	7	34	70	62
	F.	139	....	....	....	....	....	....	2	8	19	51	59

Causes of Death at different periods of life
for 1935—*continued.*

CAUSES OF DEATH.	Sex	All Ages	0-	1-	2-	5-	15-	25-	35-	45-	55-	65-	75-
19—Bronchitis	M.	46	10	....	....	....	1	1	2	2	7	8	15
	F.	44	7	....	....	....	1	1	1	1	4	10	19
20—Pneumonia (all forms)	M.	147	35	15	4	3	2	9	10	22	23	16	8
	F.	106	23	9	12	6	2	4	6	6	10	16	12
21—Other respiratory diseases	M.	22	2	1	2	....	....	1	1	3	4	4	4
	F.	18	2	....	1	1	1	2	1	2	2	4	2
22—Peptic ulcer	M.	28	....	....	....	....	....	2	4	12	6	3	1
	F.	8	....	....	....	....	....	....	1	1	3	3	....
23—Diarrhoea, etc.	M.	32	21	3	....	1	....	....	1	2	3	1	....
	F.	36	29	2	....	2	....	....	....	1	....	1	1
24—Appendicitis	M.	10	....	....	1	3	2	2	....	1	....	....	1
	F.	11	1	....	....	2	2	1	1	....	1	3	....
25—Cirrhosis of liver	M.	8	....	....	....	....	....	....	....	1	4	2	1
	F.	2	....	....	....	....	....	....	....	....	1	....	1
26—Other diseases of liver, etc.	M.	7	....	....	....	....	....	....	....	....	1	6	....
	F.	13	....	....	....	....	....	1	....	3	2	3	4
27—Other digestive diseases	M.	29	3	1	....	1	....	2	2	4	11	3	2
	F.	35	3	1	2	4	4	....	2	4	4	5	6
28—Acute and chronic nephritis	M.	64	....	....	....	2	....	....	4	12	16	14	16
	F.	77	....	....	1	2	2	4	2	9	18	18	21
29—Puerperal Sepsis	F.	13	....	....	....	....	3	9	1	....	....	....	....
30—Other Puerperal causes	F.	13	....	....	....	....	2	7	4	....	....	....	....
31—Congenital Debility, Premature Birth, Malformation, etc.	M.	125	124	....	1	....	....	....	....	....	....	....	....
	F.	79	78	....	....	1	....	....	....	....	....	....	....
32—Senility	M.	26	....	....	....	....	....	....	....	....	....	6	20
	F.	38	....	....	....	....	....	....	....	....	....	7	31
33—Suicide	M.	17	....	....	....	....	1	2	1	3	7	2	1
	F.	11	....	....	....	....	....	1	2	3	4	1	....
34—Other violence	M.	67	2	1	3	6	13	5	9	10	8	7	3
	F.	43	3	....	3	5	....	5	1	1	6	7	12
35—Other defined diseases	M.	175	18	5	5	7	12	9	9	19	35	26	30
	F.	127	11	6	4	12	8	6	14	15	19	20	12
36—Causes ill-defined, or unknown	M.	2	....	....	....	....	....	....	....	....	....	2	....
	F.	3	....	1	....	....	....	....	....	....	1	1	....

Resident Population 292,700.

UNDER 1 YEAR.

	<i>Legitimate.</i>	<i>Illegitimate.</i>
M.	219	12
F.	161	9

HOSPITALS.

Name.	Purpose.	No. of Beds.	For Newcastle Cases.	For Cases from outside City.
MUNICIPAL.				
City Hospital for Infectious Diseases	Infectious Diseases, Tuberculosis	338	338	....
Smallpox and Isolation Hospitals	Smallpox and Isolation	172	172	....
Newcastle General Hospital	Medical, Surgical and Maternity	Men 255 Women 306 Children 195	756	....
Barrasford Sanatorium, Barrasford	Tuberculosis	95	75	20
Newcastle Mental Hospital, Gosforth	Mental	1,067	1,067	....
Shotley Bridge Colony, Shotley Bridge	Mental Defectives	473	473	....
St. Mary Magdalene Hospital, Newcastle	Chronic Sick	96	96	....
VOLUNTARY.				
Royal Victoria Infirmary, Newcastle	General, Medical and Surgical, Venereal Diseases, etc.	708	208	500
Do.	Convalescents	45	....	....
Fleming Memorial Hospital, Newcastle	Children	80	30	50
Princess Mary Maternity Hospital, Newcastle	Maternity	86	30	56
Eye Infirmary, Newcastle	Eyes	35	11	24
Throat, Nose and Ear Hospital, Newcastle	Throat, Nose and Ear	35	....	....
Hospital for Diseases of the Chest, Newcastle	Diseases of the Chest	Out patients	only.	
Catherine House, Newcastle	Maternity	20	....	....
Babies' Hospital and Mothercraft Centre, Newcastle	Children	24	12	12
Stannington Sanatorium, Stannington	Tuberculosis (Children)	310	30	280
Dental Hospital, Newcastle	Dental.....	Out patients	only.	
Walker Accident Hospital	Shipyard Accidents	21	21	....
Newcastle Dispensary	General, Medical	Out patients	only.	
Hospital for Diseases of the Skin	Skin Diseases	6	....	....
Hospital for Women	Women	Out patients	only.	
Sanderson's Home for Crippled Children, Gosforth	Children	134	67	67

STATISTICS

Year	Population	Area	Notes
1870	100	100	
1880	150	150	
1890	200	200	
1900	250	250	
1910	300	300	
1920	350	350	
1930	400	400	
1940	450	450	
1950	500	500	
1960	550	550	
1970	600	600	
1980	650	650	
1990	700	700	
2000	750	750	
2010	800	800	
2020	850	850	

**REPORT OF THE
MATERNITY AND CHILD WELFARE
MEDICAL OFFICER.**

II.—THE CHILD.

**INFANTILE MORTALITY, MATERNITY AND
CHILD WELFARE, NURSING HOMES.**

REPORT OF THE
COMMISSIONER OF THE
BUREAU OF CHILD WELFARE

FOR THE YEAR 1924

II—THE CHILD

PRINTED AT THE
BUREAU OF CHILD WELFARE

INFANTILE MORTALITY.

SUMMARY OF BIRTHS AND DEATHS, 1935.

	LEGITIMATE.			ILLEGITIMATE.			Grand Total.
	M.	F.	Total.	M.	F.	Total.	
Total Births in the year	2,866	2,740	5,606	162	127	289	5,895
Net „ „ „ „	2,282	2,186	4,468	111	87	198	4,666
Net Deaths under 1 year	218	153	371	18	11	29	400
Death Rate per 1,000 births	96	70	83	113	126	146	86

BIRTHS AND DEATHS (NET), 1935.

WARD.	Births.	Deaths under 1 year of age.	Children under 1 year of age— Death rate per 1,000 births.	Birth rate per 1,000 population.
St. Nicholas'	10	—	—	5.4
St. Thomas'	147	10	68	9.6
St. John's	245	20	82	20.4
Stephenson	348	39	112	19.3
Armstrong	236	25	106	16.2
Elswick	197	21	107	14.8
Westgate	218	20	92	15.9
Arthur's Hill.....	65	7	108	6.9
Benwell	444	30	68	19.9
Fenham.....	416	33	79	16.1
All Saints'	254	28	110	17.7
St. Andrew's.....	187	15	80	17.6
Jesmond.....	88	5	57	7.9
Dene	212	17	80	11.3
Heaton	122	4	33	9.1
Byker	242	13	54	16.5
St. Lawrence.....	334	30	90	18.7
St. Anthony's	436	44	101	27.8
Walker	465	39	84	15.6
CITY	4,666	400	86	16.0

All births and deaths occurring in Public Institutions have been allotted to the Wards to which they properly belong.

ANALYSIS OF INFANTILE MORTALITY.

	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935
Death-rate of Infants <i>under</i> 1 year per 1,000 births	88	88	88	82	85	74	92	76	76	83	86
Death-rate of Infants <i>under</i> 3 months per 1,000 births	53.4	52.9	55.6	50.8	52.5	46.7	48.1	51.2	45.0	57.2	57.4
Death-rate of Infants from <i>Premature Birth</i> , per 1,000 births	19.0	20.6	22.6	20.6	24.5	17.8	20.2	20.7	20.4	21.5	21.9
Death-rate of Infants <i>under</i> 1 year per 1,000 births from <i>Premature Birth</i> , plus all <i>Congenital Causes</i> *	38.6	38.6	38.6	35.4	38.8	33.7	34.2	37.3	36.7	38.6	43.3
Death-rate of Infants <i>under</i> 1 year per 1,000 births, from <i>Diarrhoea</i> and all <i>other Digestive Diseases</i> † ..	11.6	13.1	9.3	13.4	15.0	11.3	12.5	9.2	12.9	13.4	13.7
Death-rate of Infants <i>under</i> 1 year per 1,000 births, from <i>Infantile Atrophy</i> , <i>Debility</i> and <i>Marasmus</i>	10.3	7.7	6.5	4.4	3.7	4.6	2.2	4.9	4.7	4.5	5.6
Death-rate of Infants <i>under</i> 1 year per 1,000 births, from <i>Measles</i>	1.9	1.7	0.6	2.2	3.7	0.5	5.7	0.8	1.5	1.9	0.6
Death-rate of Infants <i>under</i> 1 year per 1,000 births, from <i>Whooping Cough</i>	4.2	3.8	1.3	3.9	1.4	2.5	2.6	2.5	2.3	1.9	2.4
Death-rate of Infants <i>under</i> 1 year per 1,000 births, from <i>Respiratory Diseases</i>	22.7	18.1	27.1	16.6	16.4	16.8	24.7	16.0	12.9	15.5	15.9
Death-rate of Infants <i>under</i> 1 year per 1,000 births, from <i>Tuberculosis</i> (all forms)	0.6	2.0	2.4	1.3	1.0	1.1	2.0	0.8	1.3	0.9	0.9

For particulars of deaths, as to causes, etc., see Table on page 52A.

* "All Congenital Causes" includes Syphilis, Congenital Defects and Diseases of Early Infancy.

† "Diarrhoea and all other Digestive Diseases" includes Diarrhoea, Dysentery, Epidemic or Zymotic Enteritis, Rickets, Diseases of the Stomach, Enteritis, Obstruction of Intestine, Peritonitis and other Diseases of the Digestive System.

RETURN OF DEATHS UNDER ONE YEAR OF AGE DURING THE 52 WEEKS ENDED 28TH DECEMBER, 1935.

CAUSE OF DEATH.	AGE PERIODS.														Deaths in Institutions in the City of "Residents" or "Non-Residents."						
	GROSS.										NET (after allowing for transfers).										
	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-3 Months.	3-6 Months.	6-9 Months.	9-12 Months.	Total under 1 Year of Age.	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.		Total under 1 Month.	1-3 Months.	3-6 Months.	6-9 Months.	9-12 Months.	Total under 1 Year of Age.
EPIDEMIC, ENDEMIC AND INFECTIOUS DISEASES.																					
Measles						1	1		1	3						1	1		1	3	
Whooping Cough						1	2	6	2	11						1	2	6	2	11	4
Diphtheria						1				1						1				1	1
Influenza						1	3			4						1	2			3	2
Dysentery						1	1	1		2						1				2	2
Erysipelas	1				1	3	3	3		10						1	2	2		5	10
Polioencephalitis								1	1	1									1	1	1
Cerebro-Spinal Fever							1	2	1	4								2		2	4
Tuberculosis of the Respiratory System								2		2							1			1	2
Tuberculosis of the Central Nervous System							1	1	3	5							1	1	1	2	3
Disseminated Tuberculosis							1			1						1				1	1
TOTAL TUBERCULOSIS							4	1	3	8							2	1	1	4	6
Syphilis	2				2	1	2			5	2				2	1	1			4	4
Other Venereal Diseases		1			1					1										1	1
Pyæmia Septicæmia			2		2	2				4			1		1					1	3
RHEUMATISM, DISEASES OF NUTRITION AND OF ENDOCRINE GLANDS AND OTHER GENERAL DISEASES.																					
Chronic Rheumatism			1		1					1											1
Diseases of the Thymus						1	1			2							1			1	2
DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS.																					
Hæmorrhagic Conditions	2				2					2	2				2					2	2
DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS.																					
Encephalitis									1	1											1
Meningitis		1			1	1	3			5		1			1					1	5
Infantile Convulsions	1	3	1	1	6	2	1		1	10	1	3	1	1	6	1	1		1	9	1
Diseases of the Ear and Mastoid Sinus						2				2					1					1	2
DISEASES OF THE CIRCULATORY SYSTEM.																					
Diseases of the Lymphatic System						1				1											1
DISEASES OF THE RESPIRATORY SYSTEM.																					
Diseases of the Nasal Fossæ and Annexa							1	1		2							1	1		2	1
Diseases of the Larynx	1				1		1	1		3	1				1		1		1	3	1
Bronchitis		1		1	2	5	1	2	2	12		1		1	2	5	1	2	2	12	1
Broncho Pneumonia		4	4	2	10	11	15	13	10	59		3	3	2	8	7	14	11	9	49	28
Lobar Pneumonia				1	1		1		2	4				1	1		1		1	3	3
Pneumonia (not otherwise defined)							4		2	6						3			2	5	2
Other Diseases of the Respiratory System							1			1											1
<i>Carried forward</i>	6	11	8	5	30	31	48	30	26	165	6	8	5	5	24	20	33	25	21	123	90

RETURN OF DEATHS UNDER ONE YEAR OF AGE DURING THE 52 WEEKS ENDED 28TH DECEMBER, 1935.

CAUSE OF DEATH.	AGE PERIODS.																	Deaths in Institutions in the City of Residents or Non-Residents.				
	GROSS.								NET (after allowing for transfers).													
	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-3 Months.	3-6 Months.	6-9 Months.	9-12 Months.	Total under 1 Year of Age.	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-3 Months.	3-6 Months.		6-9 Months.	9-12 Months.	Total under 1 Year of Age.	
<i>Brought forward</i>	6	11	8	5	30	31	48	30	26	165	6	8	5	5	24	20	33	25	21	123	90	
DISEASES OF THE DIGESTIVE SYSTEM.																						
Diseases of the Buccal Cavity, Pharynx, etc.									1	1											1	
Other Diseases of the Stomach.....							2	1		3								2	1		3	
Diarrhoea and Enteritis.....		7	9	6	22	16	25	8	9	80		5	6	5	16	10	19	5	8	58	57	
Hernia, Intestinal Obstruction.....						1	4		2	7							1			1	7	
Acute Yellow Atrophy of Liver.....		1			1					1		1			1					1		
Peritonitis, without stated cause				1	1				1	2									1	1	2	
NON-VENEREAL DISEASES OF GENITO-URINARY SYSTEM AND ANNEXA.																						
Nephritis (not stated to be Acute or Chronic)....								1		1								1		1	1	
Other Diseases of the Kidney and Annexa			1		1		1	2	1	5			1		1		1		1	3	4	
DISEASES OF SKIN AND CELLULAR TISSUE.																						
Cellulitis, Acute Abscess		1		1	2	2			1	5		1		1	2					1	3	5
Other Diseases of the Skin and Annexa								1	1	2									1	1	2	
CONGENITAL MALFORMATIONS.																						
Congenital Malformations	19	9	7	2	37	13	5	1	4	60	12	7	3	2	24	2			3	29	45	
DISEASES OF EARLY INFANCY.																						
Congenital Debility	3	18	15	4	40	6	5	1		52	3	7	7	2	19	4	3			26	34	
Premature Birth.....	109	34	22	9	174	7		1		182	69	13	10	6	98	3	1			102	126	
Injury at Birth	23	11	7		41	1				42	6	5	3		14	1				15	37	
Atelectasis	21	3	2	2	28					28	9	1	2	1	13					13	22	
Icterus Neonatorum.....	2	1			3					3	2	1			3					3		
Other Diseases peculiar to Early Infancy.....	3	4	6	1	14	2	1			17	1	3	4	1	9	1				10	16	
DEATHS BY VIOLENCE.																						
Accidental Burns (Conflagration excepted).....									2	2									2	2	2	
Accidental Mechanical Suffocation				1	1					1					1	1				1		
Other or unstated Forms of Accidental Violence	1				1	1				2						1				1	1	
ILL-DEFINED DISEASES.																						
Causes of Death Unstated or Ill-defined	1				1		2			3	1				1		2			3		
TOTAL	188	100	77	32	397	80	93	46	48	664	109	52	41	24	226	42	62	32	38	400	452	

Report of the Maternity and Child Welfare Medical Officer.

TO THE MEDICAL OFFICER OF HEALTH.

SIR,

I have the honour to submit to you my sixteenth annual report.

Diphtheria Immunisation.

The diphtheria immunisation campaign was actively pursued during the year, and mothers attending the Centres were urged to have their children immunised. When the decision rested with the mothers consent was readily given, but when—as in the majority of instances—the matter had to be referred to the fathers, refusal was often the outcome. These refusals were based not so much on knowledge as on a disinclination to have their children submitted to what they thought would be a painful procedure. Every effort was made to correct this mistaken opinion.

No. of Clinics held :

Diana Street, Monday	40
Wharnccliffe Street, Tuesday	14
Byker, Wednesday	42
,, Thursday	31
Walker, ,,	10
Diana Street, Saturday	14
Byker, ,,	7
	158

TOTALS FOR 1935 (7-1-35 to 16-12-35).

Total No. of New Children sent for.	Total Atten- dances for 1st Treatment.	Total Atten- dances for 2nd Treatment.	Total Atten- dances for 3rd Treatment.	Total Atten- dances.
2,942	2,106	1,935	1,826	5,867

Dental Treatment.

The dental facilities previously arranged for children were extended so as to be available for nursing and expectant mothers. Sanction was also granted for the supply of dentures to such women, and arrangements with practising dentists were made accordingly. These benefits are restricted to women of limited means, and the economic conditions of all applicants are carefully investigated.

Whalton Rest Home.

Arrangements were made with the Authorities of the above Home by which a limited number of mothers referred from the Centres can be given two weeks' holiday once a year at Whalton free of any charge to them, other than the moderate cost of conveyance.

This amenity was much appreciated by those who were sent.

Midwives' Fees.

In spite of the fact that their duties entail working both night and day, and bearing responsibilities comparable to those borne by doctors, practising midwives are poorly remunerated, and in some cases are not remunerated at all. Resulting from an interview between the members of a deputation from the Midwives Association and the Maternity and Child Welfare Committee, the latter agreed to be responsible for and to pay the fees of midwives under the following conditions :—

1. Where a midwife in attendance on a case calls in the services of a medical practitioner who deems it necessary to have the patient removed to hospital, the sum of 15/- will be paid to the midwife for attendance at first confinements, and 12/6 for subsequent confinements.
2. Where a midwife is engaged by a patient who promises to pay for the midwife's services during pregnancy and labour, but who subsequently finds that she is not able to carry out her promise. In these cases all midwives practising in the City must, where possible, make application for the payment of their fees before the confinement takes place. Where it would appear probable that payment will not be forthcoming owing to the patient not being able to recover

Maternity Benefit, arrangements will be made to provide the patient with one of the following facilities :—

- (a) A bed in the Princess Mary Maternity Hospital.
- (b) „ „ Newcastle General Hospital.
- (c) A medical practitioner under the Domiciliary Medical Services.
- (d) A certified midwife.

If the services are rendered under the heading (d), the midwife will be paid 30/- for a primipara, and 25/- for a multipara.

3. Where a midwife attends a patient during pregnancy, and the patient, for some reason or other, is advised, perhaps by the medical officer of the local ante-natal centre, to go into hospital for her labour, the midwife will be paid a fee of 2/- for every visit to the patient's house during her pregnancy, with a maximum of 8/-.

No payment under any of the above headings will be made unless the poor economic conditions of the patient justifies it, and whenever possible particulars of every case must be submitted to the Medical Officer of Health for his discretionary consideration.

Orthopædia.

Although the Health Visitors, complying with instructions given years ago, have been specially watchful for any deformed or crippled children residing in their respective districts, there remained a discrepancy between the number of such children reported each week and the number found among school entrants. To rectify this, a nurse (Miss Irene Cook) with orthopædic qualifications and experience was appointed, and commenced her duties in June.

235 new cases have been visited during this period. Of these 85 have attended for examination by the Orthopædic Surgeon at the Education School Clinic. Of cases notified to attend for examination eight parents refused.

Attending twice weekly for treatment—Massage and Exercises	19
Admitted to the W. J. Sanderson Orthopædic Hospital School.....	9
Waiting for admission to the W. J. Sanderson Orthopædic Hospital School	5
Refused institutional treatment.....	4
X-Ray Examinations.....	6
Photographic Records.....	6

SURGICAL APPLIANCES :—

Plaster of Paris splints made in 3 cases (9 plasters).	
New splints supplied in	9 „
New boots supplied in	6 „
Alterations to boots in	15 „

Cases attending other institutions in the City for treatment include :—

Rickets.....	9 cases.
Tubercular Ankle	1 case.
Tubercular Hip	2 cases.
Congenital Club Feet.....	9 „
Congenital Dislocation of Hip	4 „
Poliomyelitis	4 „
Erb's Palsy	2 „
Congenital Abnormalities	2 „

Classification of Cases Visited.

CONGENITAL DEFORMITIES :—

Congenital Club Feet.....	12
Congenital Dislocation of Hip	4
Congenital Flat Feet	2
Congenital Abnormalities	4
Spastic Paralysis.....	16
Erb's Palsy	2
Bell's Palsy	1
Poliomyelitis	8
Ataxia	1
Mentally Defective and M.D. Paralysis	6
General Debility	6
Disparity in Growth of Legs.....	1
Torticollis	2
Old Septic Arthritis Hip.....	1
Tubercular Hip	2
Tubercular Ankle.....	1
Flat Feet.....	12
Rickets—Bow Legs	90
Knock Knees and Flat Feet.....	40
General	24
TOTAL.....	<u>235</u>

Home Helps.

Hitherto it has been customary to refer to the Citizens' Service Society those women who required the services of Home Helps. The Committee, however, felt that there was a place on the official part-time staff for such women, and six who reside in various parts of the City, and who have the necessary qualifications for such work were appointed. Their services are now available for all who require them, and those able to pay or contribute towards the cost are asked to do so. To others the services are gratis.

Assistant Medical Officer.

Dr. E. G. Brewis, M.D., M.R.C.P., B.Hy., D.P.H. was appointed to the above position in December, and is on duty at the Centres on three days in each week.

Sex Preponderance.

Death claims more males than females, and this is the probable explanation of the fact that most mothers are more anxious about their boys than they are about their girls. It is gratifying therefore to note that of the children brought to the Centres there were more boys than girls.

Spital Tongues Centre.

From its inception many years ago the above Centre was held in No. 11, Dunn's Terrace, but owing to the termination of the tenancy a change became necessary, and in February the Centre was moved to the Benson Memorial Chapel, Ancrum Street.

Maternity Hospital.

Free beds in the Princess Mary Maternity Hospital were placed at the disposal of 123 women during the year; in addition free outdoor attendance on the various districts by the Professional Staff of the Hospital was provided for 156 women. The necessary orders were given by the Medical Officers at the Centres.

Ante-Natal Centres.

During the year 2,036 women attended the Municipal Clinics, this being an increase of 40 over the corresponding figure for the previous year.

The following table shows the attendances at the ante- and post-natal clinics :—

CENTRE.	ANTE-NATAL		POST-NATAL.	
	Attendance.	Individuals.	Attendance.	Individuals.
Benwell	1,217	400	137	135
Byker	1,905	496	16	4
Fenham.....	550	156	2	2
Diana Street.....	816	250	1	1
Elswick	851	256	2	2
Walker	609	267	.....	.....
Wharnccliffe St. ..	976	211	4	2
	6924	2036	162	146

WOMEN ATTENDING ANTE-NATAL CENTRES.

The following details refer to the confinements of 1,597 expectant mothers who attended the municipal ante-natal centres during 1935, and whose children were born during that year.

Mothers were sent to the ante-natal centres by the following :—

	<i>Cases.</i>	<i>Percentage.</i>
Doctors	198	12.4
Midwives	315	19.7
Health Visitors on Districts.....	142	8.9
Welfare Centres and Voluntarily.....	942	59.0
	<hr/>	
	1,597	
	<hr/>	

The result of the subsequent confinements were :—

Type of Confinement.	Number of Cases.	Resulting in		
		Living Children.	Still-born Children.	Sets of Twins.
Normal.....	1,254	1,228	18	8
Instrumental.....	231	185	38	8
Cæsarian Section	13	12	1	....
Induction.....	11	10	1	....
Abortion	12	....	....	....
Not Pregnant.....	40	....	....	....
Left City.....	36	....	....	....
Total	1,597	1,435	58	16

Abnormalities were found in 70 or 4.3 per cent. of the cases, and the ultimate results were as follows :—

Abnormality.	No.	Normal Confinements.			Instrumental Confinements.			Cæsarian Sections.			Induced Labour.		
		No.	Living Children.	Still-born Children.	No.	Living Children.	Still-born Children.	No.	Living Children.	Still-born Children.	No.	Living Children.	Still-born Children.
Breach Presentation	45	34	34	..	11	9	2	..	..	..	..	..	..
Deformed Pelvis ..	19	2	2	..	7	7	..	10	10	..	..	..	..
Albuminuria.....	5	3	3	..	1	..	1	..	..	..	1	1	..
A.P. & P.P. Hæmorrhage	1	..	..	..	1	..	1	..	..	..	..	..	..

4 mothers subsequently died :—Hæmorrhage, 1 ; Embolism, 1 ; Ruptured Uterus, 1 ; Obstetric Shock, 1.

Notices for medical help sent to Local Authority by the midwives :—

FOR THE MOTHER.			
<i>During Pregnancy—</i>		<i>During Puerperium—</i>	
Ante Partum Hæmorrhage.....	25	Rise of Temperature.....	19
Abortions.....	6	Eclampsia	1
Illness	9	Undefined Illness of Mother	23
Albuminuria & Puffiness of hands and feet	5		<hr style="width: 50px; margin-left: auto; margin-right: 0;"/>
	<hr style="width: 50px; margin-left: auto; margin-right: 0;"/>		43
	45	Total calls for mother	<hr style="width: 50px; margin-left: auto; margin-right: 0;"/>
			373
 <i>During Labour—</i>		FOR CHILD.	
Uterine Inertia	94	Prematurity	28
Malpresentations	44	Discharging Eyes	14
Retained Placenta	6	Congenital Defects	7
Post Partum Hæmorrhage.....	12	Illness of Baby	15
Ruptured Perineum.....	129	Still-births	7
	<hr style="width: 50px; margin-left: auto; margin-right: 0;"/>	Rashes	23
	285		<hr style="width: 50px; margin-left: auto; margin-right: 0;"/>
		Total calls for mother and child	<hr style="width: 50px; margin-left: auto; margin-right: 0;"/>
			467

In 24.9 per cent. of the midwives' cases the services of a doctor were requisitioned.

Claims from doctors for fees in respect of calls from midwives :—

	<i>Cases.</i>
For forceps delivery	103
For post partum hæmorrhage.....	14
For ante partum hæmorrhage.....	7
For illness of mother	39
For illness of child	71
For premature birth.....	5
For discharging eyes	12
Other	106
Specialists called in.....	11
	<hr style="width: 50px; margin-left: auto; margin-right: 0;"/>
Total cases	<hr style="width: 50px; margin-left: auto; margin-right: 0;"/>
	368

There was a total number of 467 calls for medical aid from midwives.

25 claims for *payment of midwives' fees* were received.

Maternal Mortality.

4,666 live and 204 still-born births occurred in the City during the year. 25 women died as a result of childbirth, a mortality rate of 5.13 per 1,000 live and still births as compared with 5.33 in the previous year.

CAUSES.	1935	1934	1933	1932	1931	1930
Abortions (Septic) .....	.....	1	1	1	.....	.....
Abortions (Not Septic)	1	1	4	1	.....	1
Accidents of Pregnancy .....	.....	1	.....	.....	1	2
Puerperal Hæmorrhage	3	3	4	3	5	3
Other Accidents of Childbirth	2	2	2	4	2	4
Puerperal Fever	12	7	7	9	9	14
Other Toxæmias of Pregnancy	1	1	2	2	4	2
Puerperal Phlegmasia	4	1	.....	1	2	2
Puerperal Insanity .....	.....	.....	.....	.....	.....	.....
Puerperal Disease of Breast .....	.....	.....	.....	.....	.....	.....
Ectopic Gestation .....	.....	1	.....	1	.....	.....
Unspecified conditions of puerperal state .....	.....	2	2	.....	.....	.....
Puerperal Albuminuria and Convulsions	2	6	.....	.....	.....	.....
	25	26	22	22	23	28

Puerperal Septicæmia and Puerperal Pyrexia.

One hundred and seventy-seven cases were notified during the year—60 puerperal fever and 117 pyrexia. Details of these are embodied in the following table:—

	Total Cases Notified.	Newcastle Cases.	Extra Mural Cases.	Admitted to Hospital.	TOTAL DEATHS.	
Puerperal Septicæmia	60	16	44	167	Newcastle	12
					Extra Mural	25
Puerperal Pyrexia	117	31	86		Newcastle	0
					Extra Mural	0

Of the 47 City cases 43 were visited and the attendants at the confinements are indicated in the following table:—

	<i>Puerperal Septicæmia.</i>	<i>Puerperal Pyrexia.</i>
Doctors	4	3
Doctors and Midwives.....	2	4
Midwives	2	9
Princess Mary Maternity Hospital Staff	5	12
Newcastle General Hospital.....	1	.....
Gables Maternity Home	1	.....
	15	28

Consultants' Services have been available since 1927 for all cases of puerperal fever and pyrexia, and medical practitioners are authorised to obtain the services of a Consultant in any of the difficulties or complications which may occur in connection with labour or the puerperium.

Midwives Acts.

Fifty-seven midwives notified their intention to practise midwifery in the City. Three of these were registered as being in practice prior to the 1902 Act, and the remaining fifty-four qualified by examination and possessed the Certificate of the Central Midwives Board. Nine of them only did temporary work at Maternity Homes.

The standard of midwifery prevailing among the City's midwives was a good one, and they attended more than one-third of the total births taking place in the City. Midwifery bags, appliances, and records kept by practising midwives were examined as a routine, and all cases of ophthalmia neonatorum, puerperal pyrexia and septicæmia were carefully investigated and supervised. Clothing and appliances thought to be infected were disinfected—the owners being suspended from practice so long as was deemed necessary for the safety of others.

For these various purposes 757 visits were made; 187 visits to septic patients, and 337 to cases of ophthalmia neonatorum were also made.

Births attended by Midwives.—1,818 (net) living births (an increase of 116 on the previous year) and 58 (net) still-births (20 more than in 1934) were attended by midwives during the year. Midwives attended 39.4 per cent. of the net births in the City. In addition midwives attended in the capacity of maternity nurses with doctors in 298 cases, as compared with 350 in 1934.

Clinics.

Under the arrangements made with the Education Authority seventy-five nursing or expectant mothers and 283 children were referred for dental treatment. Of these 40 women and 224 children were treated.

Similarly 110 children were sent for aural treatment and of these 78 were treated.

Ultra-Violet Ray Therapy.

Those children who are brought to the Centres, and who are considered to be in need of artificial sunlight, are referred for such treatment to the Light Department of the Newcastle General Hospital, or to the Brinkburn Street Sun-Ray Clinic. 329 children were so referred during the year, and they received a total of 5,044 treatments.

Cookery Demonstrations.

These were given every week throughout the year in one or other of the Centres. The main object being to teach poor women how to spend economically on food the small sum available in so many homes, and how best to prepare and cook the food procured. They were fairly well attended, and were greatly appreciated by those interested.

Health Talks.

A lecture lasting about ten minutes and dealing with an appropriate subject—such as digestive disorders among children in the spring and summer, and the respirating diseases in the autumn and winter—is given by the Centre Health Visitor at every Centre. There is a complete syllabus of the subjects of these talks, and this is closely adhered to. It embraces everything conducive to maintaining good health in mothers and children, and the talks are listened to with interest.

Nursery Schools.

These were conducted by members of the Voluntary Association in Diana Street and Wharncliffe Street Centres, and were much appreciated and enjoyed by the parents and scholars respectively. It is a pleasure to pay public tribute to the ladies who are kind and interested enough to give their time and services every week for this praiseworthy object.

Births.

Of the 4,666 infants born alive in the City in 1935, and belonging to Newcastle residents, 2,393 were boys and 2,273 were girls. Of the former 96 per 1,000, and of the latter 70 per 1,000 died during their first year.

23.0 per cent. of the City's births occurred in institutions, as shown in the following table :—

Nursing Homes	125
Princess Mary Maternity Hospital.....	642
Gables Maternity Home.....	111
Newcastle General Hospital.....	257
Royal Victoria Infirmary.....	1
	1,136

Illegitimate Births.

One hundred and ninety-eight illegitimate children were born—this being 3 less than in the previous year. The death rate among these children is high everywhere, and in Newcastle in 1935 it was 146 per 1,000 compared with 83 per 1,000 legitimate children. Every effort is made to save these children, and when it is possible to get the mothers to bring the children regularly to the Centres the children's lives are practically secure. In all instances the single girl is provided with free milk for her infant when this is suitable and necessary.

Birth Rate.

The Birth Rate in the City for the year 1935 was 16.0 per 1,000 which is 0.4 less than the rate for 1934.

Deaths of Children.

	1931	1932	1933	1934	1935
Deaths of children during first week of life	120	133	126	112	109
Deaths of children during first month	180	175	177	197	117
Deaths from prematurity	102	101	96	101	104
Deaths of twins and triplets.....	42	32	39	33	29
Death-rate of illegitimate children (per 1,000 illegitimate births)	106	171	163	114	146

Toddlers.

As in previous years care and attention was bestowed on the children of toddling age, among whom health deteriorates rapidly unless it is closely watched. For the last sixteen years special efforts have been made in Newcastle to encourage mothers to

bring toddlers to the Centres, and it is gratifying to report that of the 104,174 attendances at the Centres last year, more than half were made by children of 1-5 years of age.

TODDLERS ATTENDING THE CENTRES.

<i>Year.</i>	<i>Number of Children.</i>
1930	3,418
1931	4,257
1932	4,422
1933	4,351
1934	4,198
1935	4,288

Ophthalmia Neonatorum.

The number of cases notified was 62, of which 58 were City cases. 55 of these were visited. The confinements were attended by :—

Doctors	12
Midwives	12
Princess Mary Maternity Hospital.....	29
Doctor and Midwife.....	2
	—
	55
	—

337 calls were made on the 55 visited cases in the City, and the ultimate results were :—

Recovered completely	52
Died	1
Removed from City.....	2
	—
	55
	—

The *ophthalmia incidence* per 1,000 births for the last five years has been as follows :—

1931	10.4
1932	9.2
1933	11.0
1934	11.5
1935	12.3

Children Acts, 1908-1933.

At the beginning of the year there were 68 nursed-out children in the City, and 118 at the close of the year, with foster mothers (private) 57, Institution 61. This increase was due to the handing back by the Education Authorities of the children between the ages of 5 to 9 years, and also to the opening of Miss Merz's Nursery for Nursed Out Children, viz. :—

CHILDREN IN INSTITUTIONS.

Nursery	16
Blind School	13
La Sagesse.....	10
Orphanage	11
Deaf and Dumb Institution.....	8
Nazareth Home.....	3
	—
	61
	—

All these children were regularly supervised and kept under observation. 2 children died, both in Hospital, and 1 child was removed from the care of its foster mother under Section 67 of 1932 Act.

Municipal Training Course for Health Visitors.

The fifth Training Course for Health Visitors commenced in September, 1934, and ended with the examination at the College of Medicine in April, 1935. Of the eight students enrolled five qualified in April and one in December. One student did not complete the course owing to illness.

The sixth Training Course commenced with 10 students in October, 1935.

Welfare Centres.

The following table shows the geographical position of the Centres in the City, together with details of Centre days :—

Centre.	Address.	Women and Children.	Medical Officer.	Health Visitor.	Ante-Natal Sessions.
Benwell	Y.W.C.A. Club, Buddle Road	Monday..... Thursday.....	Dr. Dorothy Hopkinson	Miss Willson.....	Friday, 2 p.m. Mr. Harvey Evers.
Byker	Corner of Dalton Street and Shipley Street	Monday..... Tuesday..... Tuesday.....	Dr. Anne Fairweather Dr. C. H. Armstrong Dr. A. F. G. Spinks ..	Miss Johnson	Friday, 2 p.m. Dr. Mabel Campbell. Thursday, 2 p.m. Mr. Harvey Evers.
City	Princess Mary Maternity Hospital, Jubilee Road	Wednesday (Afternoon only)	Dr. C. C. Ungley	Miss Pritchard.....	
Cowgate	Methodist Church Hall, Stamfordham Road			Miss Atkinson	
Diana Street, Westgate.....	25, Diana Street	Tuesday..... Friday.....	Dr. Elsie Wright	Miss Hastie	Wednesday, 10 a.m. Mr. Harvey Evers.
Elswick	Elswick Wesleyan Church Hall, Malvern Street	Monday..... Thursday..... Friday.....	Dr. A. G. Ogilvie..... Dr. Glen Davison.....	Miss Hatfield	Tuesday, 2 p.m. Mr. Harvey Evers.
Fenham	Church Hall, Grange Road		Dr. Gertrude Hickling	Miss Thompson	Monday, 10 a.m. Mr. Harvey Evers.
Heaton	St. Gabriel's Parish Hall, Chillingham Road	Wednesday	Dr. A. F. G. Spinks ..	Miss Lewis	Mr. Harvey Evers. (See Byker above).
Scotswood	Denton Road	Tuesday.....	Dr. Anne Fairweather	Miss Carr	Benwell (see above).
Shieldfield	St. Jude's Parish Hall, Dins- dale Road	Monday..... Thursday..... Tuesday..... (Afternoon only)	Dr. A. F. G. Spinks ..	Miss Mason	Byker (see above)
Spital Tongues	Dunn's Cottages		Dr. Mabel Campbell	Miss Simpson	Diana St. (see above). or Wharnclyffe Street (see below).
St. Lawrence	Harbottle Street.....	Wednesday	Dr. Gertrude Hickling	Miss Scorer.....	Byker (see above).
Walker	Presbyterian Church Hall, Church Street	Friday..... Monday..... Thursday..... Thursday.....	Dr. Glen Davison..... Dr. A. G. Ogilvie..... Dr. C. N. Armstrong Dr. Gertrude Hickling	Miss Youell..... Miss Hisco..... Miss Phillips.....	Tuesday, 10 a.m. Mr. Harvey Evers. Tuesday, 10 a.m. (see Walker above).
Walkergate	Conservative Assoc. Hall, Walpole Street, Walkergate			Miss Shell	Tuesday, 10 a.m. Dr. Mabel Campbell.
Wharnclyffe Street, Scots- wood Road	18, Wharnclyffe Street	Wednesday	Dr. Mabel Campbell		

MATERNITY AND CHILD WELFARE CENTRES, 1935.

CENTRE.	Ante-Natal Sessions.		Ante-Natal.		Post-Natal.		New Children.			Individuals.			Attendances.			Medical Sessions.		Illegitimate.		Individuals.	
	Individ- uals.	Attend- ances.	Individ- uals.	Attend- ances.	Under 12 months.	Over 12 months.	Total.	Under 12 months.	Over 12 months.	Total.	Under 12 months.	Over 12 months.	Total.	Number.	Average Attend- ance.	Boys.	Girls.				
Benwell	400	1217	135	137	245	41	286	357	370	727	4198	5741	9939	190	52.3	353	374	16			
Byker	496	1905	4	16	289	32	321	439	358	797	4292	5043	9335	185	50.5	404	393	23			
City	...	...	...	...	138	21	159	201	230	431	2171	2826	4997	93	53.7	216	215	8	
Cowgate	...	...	...	...	53	21	74	97	138	235	990	1306	2296	49	46.9	114	121	1	
Diana Street	250	816	1	1	277	49	326	407	419	826	4103	5465	9568	189	50.6	413	413	29			
Elswick	256	851	2	2	277	42	319	458	405	863	4982	3671	8653	190	45.5	432	431	37			
Fenham	156	550	2	2	214	18	232	316	216	532	3699	2268	5967	94	63.5	278	254	2			
Heaton	...	...	...	...	181	38	219	273	233	506	3145	2245	5390	96	56.1	267	239	6	
Scotswood	...	...	...	...	121	20	141	174	211	385	1681	2561	4242	93	45.6	198	187	11	
Shieldfield	...	...	...	...	253	26	279	384	369	753	4462	5333	9795	190	51.6	370	383	23	
Spital Tongues	...	...	...	...	78	11	89	122	96	218	1123	650	1773	46	38.5	109	109	2	
St. Lawrence	...	...	...	...	326	39	365	494	485	979	6074	5364	11438	194	59.0	532	447	20	
Walker	267	609	...	...	231	22	253	356	346	702	4208	4917	9125	190	48.0	359	343	15	
Walkergate	...	...	...	...	152	16	168	251	212	463	2878	2443	5321	98	54.3	234	229	7	
Wharnciffe Street	211	976	2	4	224	22	246	335	200	535	3564	2771	6335	98	64.6	257	278	34			
Total	2306	6924	146	162	3059	418	3477	4664	4288	8952	51570	52604	104174	1995	52.2	4536	4416	234			

Attendances at Maternity and Child Welfare Centres.

(CHILDREN ONLY.)

YEAR.	No. of Attendances.	No. of Individuals.	Average Attendance per Individual.	Average Attendance at each Session.
1920.....	22,596	3,751	6.0	44.2
1921.....	32,538	4,734	6.8	40.7
1922.....	36,020	4,835	7.4	44.9
1923.....	42,515	5,153	8.2	46.5
1924.....	45,766	5,587	8.2	45.5
1925.....	45,476	5,744	7.9	43.6
1926.....	50,697	6,467	7.8	46.2
1927.....	46,672	6,522	7.1	42.4
1928.....	53,960	6,532	8.3	49.3
1929.....	52,460	6,574	7.9	48.2
1930.....	67,626	7,776	8.7	44.2
1931.....	83,561	8,927	9.4	43.1
1932.....	100,658	9,251	10.9	51.5
1933.....	99,103	8,955	11.1	50.9
1934.....	107,717	8,872	12.1	54.6
1935.....	104,174	8,952	11.6	52.2

Dried Milk.

During the year 77,808 lb. cartons of dried milk were given gratis, and vouchers for 23,379 were given for cost price milk, the latter being distributed by the chemists as formerly. Approximately one-third of the children attending the Centres received free milk, and expectant mothers to the number of 432 also received it gratis.

The following table shows the quantity of dried milk distributed each month during the year 1935 :—

MONTH.	FREE.	AT COST PRICE.
	lbs.	lbs.
January.....	5,777	1,471
February.....	5,905	2,307
March.....	7,326	1,993
April.....	5,570	1,264
May.....	5,701	2,482
June.....	8,226	1,463
July.....	5,103	2,825
August.....	5,920	1,822
September.....	7,593	2,415
October.....	6,230	2,581
November.....	6,277	1,935
December.....	8,180	821
	77,808	23,379

Children attending Centres.....	8,952
Children given free milk.....	3,092
Percentage.....	34.5
Expectant mothers given milk.....	432
Free milk given to children (lbs.).....	74,487
Free milk given to expectant mothers (lbs.).....	3,321

NOTIFICATION OF BIRTHS ACTS.

Of the 5,895 live, and 357 still-births (gross) which were registered in the City in 1935, 5,472 or 87.5 per cent. were notified as follows :—

<i>Notified by.</i>	<i>Gross Living Births.</i>	<i>Gross Still Births.</i>
Medical Practitioners.....	225	9
Medical Practitioners and Midwives	289	11
Midwives	1,897	60
Princess Mary Maternity Hospital....	2,263	212
Newcastle General Hospital.....	243	18
Gables Maternity Home.....	235	8
Parent	1	.....
Royal Victoria Infirmary.....	1	.....
	<u>5,154</u>	<u>318</u>

Still-Births.—Of the total net notifications of births received, 164 were of still-births, which gives a rate of 40.1 per 1,000 of net live and still-births.

Still-births Registered (net).....	204	
Still-births Notified.....	164	
Percentage Notified.....	80.4	
Still-births Visited.....	180	
	<i>Percentage to Total.</i>	
<i>Duration of Pregnancy.</i>	<i>No.</i>	
At or under 7 months.....	23	12
At 7-8 months.....	35	19
At full time.....	122	69

Suggested causes of the still-births :—

	<i>Cases.</i>
(a) Ill-health of the mother.....	25
(b) Foetal deformities and malpresentations and uterine inertia.....	48
(c) Premature delivery, ante-partum hæmorrhage, etc.	27
(d) Other causes, including albuminuria and accidents	80

Syphilis was returned as the cause of death of four children below the age of 1 year.

Health Visiting.

With the exception of the so-called residential districts such as parts of Jesmond, every district in the City was visited regularly by members of the Health Visiting Staff.

For all purposes the Health Visiting Staff during the year 1935 made a grand total of 88,995 visits.

4,172 births were visited, and 22,537 re-visits were paid, an average of about 5 re-visits per child. These gave a total of 26,709 visits to children under 1 year.

SUMMARY OF VISITS.

	Primary.	Subsequent.	Total.
Births.....	4,172	22,537	26,709
Measles	2,952	3,391	6,343
Pneumonia	616	595	1,211
Diarrhœa	21	30	51
Children over 1 year.....			42,479
Hospital Cases.....			448
Expectant Mothers.....			1,759
Special Visits.....			820
Visits to Boarded-out or Nursed-out Children.....			545
Unsuccessful Visits (Ours and Removals)			7,942
Orthopædic Work			688
			88,995

173 treatments were carried out by Orthopædic Nurse.

Infants on Visiting List.

Of 4,430 children born in the City in 1934, 3,520 completed their first year in 1935 and of the remainder :

351 died,
216 left the City,
314 could not be traced,
29 were visited only once.

The following figures are therefore based on the 3,520 who completed the first year, *plus* the 351 who died, making in all a total of 3,871, and of that total 2,514, or 64.9 per cent., attended the Welfare Centres.

Of the number (2,514) attending the Centres 96 died, a rate of 38.2 per 1,000, as compared with 86 per 1,000 for the City.

Illnesses.—Among the children visited 227, or 5.9 per cent., contracted measles; 177, or 4.6 per cent., contracted whooping cough; 105, or 2.7 per cent., contracted diarrhoea; 373, or 9.6 per cent., contracted bronchitis or pneumonia.

The mortality per 1,000 births in 1935 was as follows :—

1 roomed dwellings	95.2
2 roomed dwellings	107.8
3 roomed dwellings	74.1
Dwellings over 3 rooms	80.9

Details as to the stated **Feeding** of the 3,871 children under supervision during the year are given in the following table :—

	FEEDING.					
	BREAST.		MIXED.		ARTIFICIAL.	
	No.	Per-centage.	No.	Per-centage.	No.	Per-centage.
At First Visit.....	3,401	87.9	143	3.7	327	8.4
Deaths in First Year of above Children.....	295	8.7	15	10.5	41	12.5
At time of Death	221	6.5	23	16.1	107	32.7
Surviving Children(3,520) at 9 months	1,375	39.1	585	16.6	1,560	44.3

Details as to children who should have attained the age of 5 years during 1935 :—

Well and attending school.....	2,731
Well and not attending school	2
Ill and not attending school	34
Left City or failed to trace.....	936
Died in 2nd year	102
Died in 3rd year	34
Died in 4th year	24
Died in 5th year	14
Total surviving.....	2,767
Total deaths.....	174
Total reported on.....	3,877

The addresses of 215 children who left the City were sent to the Medical Officers of Health for the districts to which they had gone.

Voluntary Workers.

As in other years the lady members of the Voluntary Association, under the presidency of Mrs. Leach, rendered valuable services, not only at the Centres, but also in the districts.

I am, Sir,

Your obedient servant,

A. F. G. SPINKS, M.D.,

Maternity and Child Welfare Medical Officer.

Health Department,

Town Hall,

Newcastle upon Tyne,

May, 1936.

MATERNITY AND NURSING HOMES.

The following copy of a report which was submitted by the Medical Officer of Health to the Health Committee states the position with regard to the Maternity and Nursing Homes in the City which are registered under the Nursing Homes Registration Act, 1927.

1.—In the early months of 1935, complaints were received both specific and general as to the condition of certain registered nursing homes in the City. In view of this it was felt that the ordinary annual inspection under the Nursing Homes Registration Act, 1927, might be extended with advantage and accordingly a Board composed of :—

DR. E. F. DAWSON-WALKER, Deputy Medical Officer of Health,

DR. A. F. G. SPINKS, Maternity and Child Welfare Medical Officer,

MISS J. L. WATT, S.R.N. (Matron, City Hospital for Infectious Diseases),

was entrusted with the task of carrying out a detailed and exhaustive survey of the Registered Nursing Homes. Upon the individual reports as to these various inspections, and a summary report prepared by Dr. E. F. Dawson-Walker, the following observations are based.

2.—Procedure.

During the inspection which was made at a time convenient to the Licensee, steps were taken to investigate the following points amongst others :—

- (a) Nursing staff—numbers, qualifications, salaries.
- (b) Domestic staff—numbers, salaries.
- (c) Nursing staff accommodation—sleeping and recreational.
- (d) Domestic staff accommodation—sleeping and recreational.
- (e) Equipment of the Nursing Home—furnishings, linen, sanitary arrangements, operating theatre and X-ray equipment.

- (f) Provision of Mortuary and Isolation accommodation—
fire equipment.
- (g) Keeping of records.
- (h) General management and cleanliness.

3.—Scope of the Inspection.

16 of the 18 registered homes in the City were inspected. The remaining 2 were excluded from the present enquiry for special and adequate reasons. In one case, the home was undergoing structural alterations and extensions ; in the other, the registration had only been granted a few weeks before the preparation of the report.

4.—Findings of the Board of Inspection.

The following paragraphs summarise under appropriate headings, the general findings of the Board as to certain of the matters referred to in Paragraph 2.

Nursing Staff.

The standard of staffing adopted was one Day Nurse to three patients and one Night Nurse to six patients. As regards the proportion of qualified nurses (*i.e.*, State Registered Nurses) to unqualified nurses, it was decided to work to the low standard of one qualified nurse to two unqualified, and to require that under any circumstances the qualified nursing staff should not number less than two, *i.e.*, one on day duty and one on night duty.

As a result of the enquiry it was ascertained that variation in the staffing of certain of the homes had been made subsequent to their registration with the apparent object of reducing the number of State Registered Nurses employed. One small home with 8 beds was found to have no state registered nurse on its staff. In three other homes of similar size there was only one state registered nurse in each.

These discrepancies in staffing are also found in the larger homes. One of the largest, undertaking both maternity and general work had only 3 state registered nurses amongst its general staff of 15.

Only 4 Nursing Homes had Nursing Staffs which could be regarded as satisfactory in every respect.

Domestic Staff.

As regards the Domestic Staff, nine homes appeared to be adequately staffed. Five of them were inadequately staffed, In the two remaining the work was carried out by resident inmates of the Institution.

Nursing Staff Accommodation.

An inspection of the sleeping accommodation provided for the Nursing Staff showed that eleven were satisfactory in this respect, while four were unsatisfactory. (In one case, the accommodation was provided in the religious institution adjacent, and was not subjected to inspection.) Single rooms were only available for about one-third of the total staffs.

In six homes separate sitting and dining rooms were provided for the nurses. In nine a combined sitting room and dining room was provided, though the size and comfort of these combined rooms varied very considerably, and in one home, no sitting room at all was available. Not infrequently these rooms were in the basement.

Domestic Staff Accommodation.

The sleeping accommodation for the Domestic Staff was found to be satisfactory in nine of the homes, unsatisfactory in six, and in one home, attached to a religious institution, it was not seen.

In four homes it was found that some of the Domestic Staff were being accommodated in bedrooms situated in the basements. While these rooms could not be legally objected to, it is open to question whether rooms situated in the basement of a house are really satisfactory for sleeping purposes.

Five homes provided a separate sitting room for the Domestic Staff. In the other homes, the only sitting room accommodation was in the kitchen.

General Equipment.

Under the heading "General Equipment," which includes Linen and Furnishings, ten homes were found to be satisfactory.

Sanitary Arrangements.

As regards sanitary arrangements, only four homes had a modern type of sluice installed. Four possessed an old-fashioned "grid" type of sluice without a flushing jet, and eight were using w.c.'s for this purpose.

Cleanliness.

An attempt was made during the inspection to assess the standard of cleanliness maintained in each home. In twelve cases this was found to be satisfactory and in two cases moderate. In another home the patients' rooms were satisfactory, but the staff quarters were not clean, and in one home the standard of cleanliness throughout was poor.

Isolation.

Single rooms are provided for temporary isolation of patients in only four of the Nursing Homes inspected.

Mortuary.

Two homes provided a mortuary. In fourteen no special provision was made for this purpose.

Fire Equipment.

All the buildings in this report have been inspected at some period by the Superintendent of the Fire Brigade. It would, however, be advisable to ask for a complete re-inspection, since it is possible that changes may have been made in certain cases that would not meet with official approval.

Management.

Two of the homes are registered in the name of Medical Practitioners. In both cases a State Registered Matron is in charge.

Four of the homes are registered by religious bodies or non-profit-making associations. In three of these homes the Matrons are suitably qualified. In the remaining one the Matron though not State Registered is supported by a well qualified staff. Of the ten proprietary homes, six are registered in the names of, and are supervised by, State Registered Matrons. The remaining four are registered in the names of, and managed by, women who do not possess a State Registered Nursing qualification.

5.—Grading of Registered Nursing Homes.

An attempt was made to assess in general terms the efficiency of the 16 nursing homes inspected and to place them in the following categories :—

(a) *Satisfactory.*

These are nursing homes concerning which little or no criticism is offered. At most, certain minor additions to staff or equipment are necessary.

(b) *Moderately Efficient.*

These are nursing homes which are open to criticism on a number of points. They all require fairly considerable additions to the Nursing or Domestic Staffs and/or, in some cases, additional equipment.

(c) *Unsatisfactory.*

These are homes which possess marked defects in staff, equipment and/or management.

Under this scheme of assessment, only four Nursing Homes can be graded as satisfactory ; eight fall into the group of moderately efficient and four are classified as unsatisfactory.

6.—The Health Committee are reminded that their powers under the Nursing Homes Registration Act, 1927, provide for the cancellation of any registration. Before making such an order of cancellation, the Committee is required to give 14 days' notice to the registered person, stating therein the grounds on which it proposes to cancel the registration. The Committee is also required before making the order, to give the person concerned an opportunity of showing why the order should not be made. Any person aggrieved by an order cancelling the registration, may appeal to a court of summary jurisdiction.

7.—A schedule of the 18 Registered Nursing Homes in the City is attached hereto as Appendix 1. (page 78).

8.—The Medical Officer of Health desires to place on record his appreciation of the careful and tactful way in which the Board of Inspection carried out its duties.

J. A. CHARLES,

Medical Officer of Health.

APPENDIX I.

CITY AND COUNTY OF NEWCASTLE UPON TYNE.

NURSING HOMES REGISTRATION ACT, 1927.

LIST OF NURSING HOMES REGISTERED.

Ref. No.	Address.	Registered in the Name of
1.	26, Archbold Terrace	Misses Hawkes & Anderson
2.	10, Eslington Terrace	Miss M. Toyne
3.	1a, Clayton Road	Miss C. E. Balfour
4.	1, Park Terrace	Mr. R. J. Willan, F.R.C.S.
5.	5, Saville Place	Dr. H. Drummond
6.	4, Bentinck Terrace	Mrs. L. Newton
7.	10, Fernwood Road	Miss N. P. Hunter
8.	"The Minories," Jesmond Rd.	Mother Prioress
9.	"The Gables," Elswick Road.	The Matron
10.	24, Grosvenor Road	Miss Kirby and Miss Rooney
11.	6, Osborne Road	Miss M. H. Robertson
12.	"Elswick Lodge," Park Road	Thomas P. Parmeter (Chairman of Committee)
13.	5, Osborne Terrace	Miss H. W. B. Gordon
14.	9, Windsor Terrace	Miss I. M. Middleton
15.	"Catherine House," 63, Osborne Road	Salvation Army
16.	"The Cheviot," Grange Road	Mrs. M. I. Behn
17.	*"Cairney House," 10, Osborne Villas	Mr. J. Gilmour, F.R.C.S.
18.	†10, Collingwood Terrace	Miss E. M. Myers

* Not inspected owing to extensive alterations in progress.

† Not inspected. Registered on the 14th October, 1935.

INCLUDING REPORTS OF THE
DEPUTY MEDICAL SUPERINTENDENT OF THE
INFECTIOUS DISEASES HOSPITAL
AND THE BACTERIOLOGIST.

III.—INFECTIOUS DISEASE.

FEVERS, FOOD POISONING,
CITY HOSPITALS FOR INFECTIOUS DISEASES,
DISINFECTION, BACTERIOLOGY.

REPORTS OF THE
MEDICAL COMMISSIONERS OF THE
METROPOLITAN POLICE DISTRICT
AND THE BARRISTERS

III. INFECTIOUS DISEASE.

FEVER, FOOD POISONING,
AND BARRISTERS FOR DISTRICTS OF METROPOLIS
DIRECTION, BACTERIOLOGY.

DEATHS (CORRECTED) FROM NOTIFIABLE INFECTIOUS DISEASES
AND NON-NOTIFIABLE ZYMOTIC DISEASES.

WARD.	Diphtheria.	Erysipelas.	Scarlet Fever.	Enteric Fever.	Pneumonia.	Cerebro-spinal Fever.	Encephalitis Lethargica.	Polioencephalitis.	Poliomyelitis.	Measles, and Rubella.	Puerperal Fever.	Small-pox.	Whooping Cough.	Diarrhoea (under 2 years of age).	Dysentery.	Tuberculosis. All forms.
St. Nicholas	...	...	...	...	2	...	...	...	...	1	...	...	2	...	...	1
*St. Thomas'	...	1	...	...	10	1	...	...	...	3	...	...	1	2	...	10
St. John's	1	1	...	...	30	...	...	...	...	1	1	...	1	3	...	19
Stephenson	1	...	...	...	27	...	...	...	...	1	1	...	4	8	1	19
Armstrong	...	...	...	...	18	2	...	...	...	1	1	...	...	3	...	14
Elswick	...	1	...	...	18	...	1	...	...	...	1	...	2	1	...	12
Westgate	4	2	...	...	16	...	...	...	...	...	...	...	...	5	...	20
Arthur's Hill	...	1	1	...	4	...	1	...	...	...	...	...	2	...	...	6
Benwell	7	1	1	...	18	...	...	...	...	3	3	...	2	4	...	24
†Fenham	6	1	...	...	15	...	...	1	...	...	1	...	...	7	...	21
All Saints'	2	1	...	...	19	...	...	...	...	2	...	...	1	...	2	16
St. Andrew's	...	1	...	...	13	1	...	1	...	2	1	...	...	8	...	10
Jesmond	...	1	...	...	2	...	...	...	...	...	...	...	...	1	...	3
†Dene	1	...	...	...	3	...	1	...	...	...	1	...	...	...	...	19
Heaton	1	...	...	...	6	...	...	...	...	...	1	...	...	1	...	12
Byker	...	...	...	...	11	...	...	...	...	1	...	...	1	1	...	13
St. Lawrence	4	...	...	...	16	...	...	...	...	1	1	...	...	3	...	23
St. Anthony's	4	3	1	...	23	...	...	...	...	1	...	...	2	8	1	34
Walker	4	1	...	...	24	1	...	...	...	2	...	...	6	10	2	27
CITY	35	15	3	...	275	6	3	2	...	18	12	...	22	65	6	303

NOTE :—All deaths in Public Institutions have been allotted to the Wards to which they properly belong.

*Includes added area in Fawdon from 1st April.

† " " Newburn
 ‡ " " Benton

NOTIFIED CASES OF INFECTIOUS DISEASE AND DEATHS (GROSS).

EXCLUSIVE OF TUBERCULOSIS.

AGES OF CASES OF INFECTIOUS DISEASE NOTIFIED AND DEATHS REGISTERED DURING THE YEAR 1935.

NOTIFIABLE DISEASE.	AT AGES—YEARS.														GROSS TOTAL.				NET TOTAL.		Cases admitted to Hospital (Gross).			
	Under 1.		1 to 5.		5 to 15.		15 to 25.		25 to 45.		45 to 65.		65 and up-wards.		Ages not known.		1935.		1934.			Cases.*	Deaths.	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.						
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.				
Diphtheria (including Membranous Croup)	10	1	109	15	463	27	65	1	36	...	5	...	...	...	...	...	688	44	399	29	675	35	549
Erysipelas	16	10	8	2	13	...	20	...	75	...	96	...	3	...	...	...	257	20	258	26	239	15	127
Scarlet Fever	11	...	289	2	803	2	123	1	65	...	11	1	1	...	...	...	1304	6	1763	27	1282	3	1236
Enteric Fever .....	...	...	1	...	4	...	1	...	1	...	...	...	...	...	...	...	7	...	15	4	7	...	23
Cerebro-Spinal Fever	2	4	7	6	3	2	5	3	1	1	1	1	...	...	...	...	19	17	31	39	15	6	27
Acute Poliomyelitis .....	...	...	7	...	3	...	...	...	...	...	...	...	...	...	...	...	10	2	...	...	10	...	12
Acute Poliioencephalitis	1	1	2	1	...	...	...	...	...	...	...	...	2	...	...	...	3	2	...	...	3	2	...
Encephalitis Lethargica .....	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	3	...	...	...	3	1
Puerperal Fever .....	...	...	...	...	...	...	17	7	40	30	3	...	...	...	...	...	60	37	...	52	16	12	...
Puerperal Pyrexia .....	...	...	...	...	...	...	51	...	64	...	2	...	...	...	...	...	117	...	92	...	31	...	11
Ophthalmia Neonatorum	62	...	...	...	...	...	...	...	...	35	85	79	48	65	11	...	62	...	59	...	58	...	4
Pneumonia	87	69	224	65	134	10	55	8	90	35	85	79	48	65	11	...	734	331	879	322	690	275	125	
Malaria	2
Dysentery	8	2	39	3	20	2	4	...	8	1	1	2	3	...	...	...	83	10	66	1	80	6	82
Measles and Rubella	192	3	1758	16	1372	...	12	1	11	...	1	1	...	...	...	...	3346	20	8686	86	3341	18	88
Chickenpox	71	...	480	...	1309	...	29	...	7	...	1	...	...	...	...	...	1897	...	1447	...	1895	...	8
TOTAL	460	90	2924	110	4124	43	382	21	398	67	206	89	80	70	13	...	8587	490	13751	572	8342	375	2293	

* Cases from outside the City excluded for the purpose of calculating NET Death Rates.

† Ministry of Health Regulations, 1920. ‡ Temporarily notifiable.

WARD DISTRIBUTION OF INFECTIOUS DISEASES (NET).

WARD.	Diphtheria.	Erysipelas.	Enteric Fever.	Scarlet Fever.	Cerebro-Spinal Fever.	Poliomylitis.	Acute Polio-encephalitis.	Encephalitis Letargica.	Measles.	Rubella.	Puerperal Fever.	Puerperal Pyrexia.	Ophthalmia Neonatorum.	Acute Primary Pneumonia.	Acute Influenzal Pneumonia.	Smallpox.	Chickenpox.	Malaria.	Dysentery.	Tuberculosis (all forms).	Total.
St. Nicholas'	...	...	...	2	...	...	...	...	4	...	...	...	1	3	1	...	2	...	...	2	15
||*St. Thomas'	45	10	...	65	2	1	...	...	77	6	...	...	1	20	3	...	65	...	6	25	326
St. John's	17	16	...	26	...	...	...	...	207	4	1	...	5	63	4	...	62	...	5	24	434
Stephenson	27	9	...	55	...	2	...	...	168	2	1	2	2	61	2	...	159	...	3	37	530
Armstrong	20	14	...	100	1	...	...	...	130	14	1	...	1	41	5	...	173	...	...	23	523
Elswick	33	18	...	40	1	...	...	...	133	3	1	1	3	27	2	...	92	...	1	30	385
Westgate	38	8	...	34	2	1	...	...	225	9	...	...	4	45	3	...	38	...	1	28	436
†Arthur's Hill	18	18	...	1	38	1	...	...	89	6	1	1	2	10	...	...	26	...	38	7	256
Benwell	91	23	2	188	...	...	1	...	345	28	3	3	1	61	4	...	150	...	...	53	952
xFenham	93	23	2	190	...	2	1	...	319	45	1	1	1	42	8	...	152	...	2	65	944
All Saints'	20	9	...	29	1	1	...	...	88	26	3	7	9	34	2	...	92	...	2	15	338
St. Andrew's	20	9	1	34	...	2	1	...	125	9	...	3	2	27	1	...	47	...	1	18	300
Jesmond	11	4	...	32	2	...	...	...	53	3	...	1	...	4	4	...	39	...	1	10	164
§Dene	17	7	...	84	1	...	...	...	139	12	1	1	2	11	4	...	104	...	...	43	426
Heaton	21	12	...	37	1	...	...	...	140	8	1	1	3	13	3	...	63	...	...	31	334
Byker	24	8	...	34	1	1	...	...	74	9	...	...	4	17	1	...	66	...	1	36	276
St. Lawrence	38	9	...	44	...	...	...	...	101	20	2	5	7	21	3	...	124	...	...	35	409
St. Anthony's	73	19	...	111	2	...	...	...	260	21	...	5	5	67	2	...	150	...	5	67	787
‡Walker	69	23	3	139	...	...	...	...	424	15	...	1	6	64	7	...	291	...	14	91	1147
CITY	675	239	7	1282	15	10	3	...	3101	240	16	31	58	631	59	...	1895	...	80	640	8982

* Includes Royal Victoria Infirmary and Fleming Memorial Hospital for Sick Children.
 † Elswick Grange and Newcastle General Hospital.
 ‡ City Hospital for Infectious Diseases, Walker Gate.
 § Added area in Fawdon from 1st April.
 || Newburn
 x " "
 § Benton

HOUSEHOLDS AFFECTED WITH INFECTIOUS DISEASES
EXCLUSIVE OF TUBERCULOSIS, MEASLES AND CHICKENPOX.

DISEASES.	HOUSEHOLDS WITH						Mili- tary or Naval Cases.	Insti- tutions. *	TOTAL CASES (Gross).	Cases. from outside of City.	NET CASES.
	Single Cases.	2 Cases each.	3 Cases each.	4 Cases each.	5 Cases each.	6 Cases and over					
Diphtheria (including Membranous Croup) ..	480	57	8	2	...	2	...	49	688	13	675
Erysipelas	197	6	1	...	...	...	...	45	257	18	239
Scarlet Fever.....	976	93	19	5	...	...	...	65	1,304	22	1,282
Enteric (or Typhoid Fever)	5	...	...	...	...	...	...	2	7	...	7
Cerebro-Spinal Fever	13	...	...	...	...	...	...	6	19	4	15
Poliomyelitis	10	...	...	...	...	...	...	...	10	...	10
Encephalitis Lethargica ..	...	...	...	...	...	...	...	...	...	...	...
Polioencephalitis	3	...	...	...	...	...	...	...	3	...	3
Puerperal Fever	10	...	...	...	...	...	...	50	60	44	16
Puerperal Pyrexia.....	20	...	...	...	...	...	...	97	117	86	31
Ophthalmia Neonatorum..	51	1	...	...	...	...	...	9	62	4	58,
Pneumonia	649	16	3	...	...	...	...	44	734	44	690
Malaria .....	...	4	...	...	...	...	...	...	...	...	...
Dysentery.....	26	...	...	1	...	...	...	45	83	3	80
TOTAL	2,440	177	31	8	...	2 (6 & 7)	...	412	3,344	240	3,106

* See next page.

INFECTIOUS DISEASES.

Schools and Infectious Disease.—It was not found necessary to close any school on account of infectious disease during the year.

PUBLIC INSTITUTIONS AND INFECTIOUS DISEASE.

The following notifications were received during the year:—

INSTITUTIONS, &c.	Diphtheria.	Erysipelas.	Scarlet Fever.	Enteric Fever.	Encephalitis	Measles and Rubella.	Puerperal Fever.	Puerperal Pyrexia.	Pneumonia.	Chickenpox.	Ophthalmia Neonatorum.	Poliomylitis.	Polio-encephalitis.	Cerebro-Spinal Fever.	Smallpox.	Malaria.	Dysentery.	TOTAL.
Royal Victoria Infirmary	2	16	17	...	...	4	2	...	43	2	1	...	...	1	...	...	5	88
Fleming Memorial Hospital	17	3	11	...	...	1	...	...	1	...	...	...	...	2	...	...	5	40
Newcastle General Hospital	4	15	14	1	...	6	1	...	...	...	...	...	...	...	...	...	39	80
City Hospital for Infectious Diseases .....	...	2	2	...	...	2	1	...	...	...	6	...	...	1	...	...	...	5
Maternity Hospital	2	2	...	...	...	...	45	93	...	...	...	...	...	1	...	...	...	147
Military Barracks	2	1	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	5
Eye Infirmary .....	...	...	3	...	...	...	...	...	...	...	...	...	...	1	...	...	...	3
Deaf and Dumb Institution	13	...	1	...	...	1	...	...	...	...	...	...	...	1	...	...	...	15
National Children's Home .....	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	1
Throat, Nose and Ear Hospital .....	...	6	10	...	...	1	...	...	...	...	...	...	...	...	...	...	...	17
Common Lodging Houses .....	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Royal Victoria School for the Blind .....	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1
Rabies' Hospital, West Parade .....	...	...	...	...	...	1	...	...	...	...	...	...	...	1	...	...	...	1
St. Vincent's Home .....	...	...	2	...	...	1	...	...	...	...	...	...	...	...	...	...	...	3
Northern Counties Orphanage	10	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	11
Gables Maternity Home .....	...	...	...	...	...	...	1	3	...	...	1	...	...	...	...	...	...	5
Nursing Homes	1	...	2	...	...	...	...	1	...	...	1	...	...	...	...	...	...	5
Hostels, etc. ....	...	2	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	4
TOTAL	49	45	65	2	...	17	50	97	44	3	9	...	...	6	...	...	45	432

* Does not include any cases belonging to the City which could properly be assigned to their homes.

SCARLET FEVER.

Notifications of 1,282 cases were received during the year, and there were 3 deaths, equivalent to a mortality of 0.2 per cent.

DIPHTHERIA.

675 cases were notified during the year, and 35 died, a case mortality of 5.2 per cent., as compared with 5.6 in 1934.

MEASLES AND RUBELLA.

3,341 cases (including 240 of rubella) were notified, and there were 18 deaths (net) in 1935, representing a death rate of 0.06 per 1,000 population, as compared with 0.28 in 1934, and a case mortality of 0.5 per cent. of notified cases (net).

The following table shows the deaths in the various wards, and at different age periods :—

WARD.	Under 3 months.	3 and under 6 months.	6 and under 9 months.	9 and under 12 months.	1 and under 2 years.	2 and under 3 years.	3 and under 4 years.	4 and under 5 years.	5 and under 10 years.	Over 10 years.	TOTALS.
St. Nicholas'
St. Thomas'	1	....	....	....	....	....	....	....	....	....	1
St. John's	1	1	1	....	....	....	3
Stephenson	1	....	....	....	....	1
Armstrong	1	....	....	....	....	1
Elswick
Westgate
Arthur's Hill
Benwell	1	1	....	....	....	....	1	3
Fenham
All Saints'	1	....	....	1	....	....	2
St. Andrew's	1	....	....	1	....	....	....	....	....	2
Jesmond
Dene
Heaton
Byker	1	....	....	....	....	1
St. Lawrence	1	....	....	....	....	1
St. Anthony's	1	....	....	....	....	1
Walker	1	1	....	....	2
TOTAL	1	1	....	1	4	6	2	2	....	1	18

Each Health Visitor visited and re-visited selected cases occurring in her district. By this arrangement each case is seen immediately on receipt of the notification, and advice is given regarding the nursing and isolation of the patient. The cases are kept under supervision until they recover, and should subsequent cases occur in the family they are recorded.

Measles Cases, including Rubella, notified during 1935.

Cases notified by Medical Practitioners	2,732
Cases found by Health Visitors	598
Cases notified by Parents	15
Cases found from Returns of Deaths.....	1
	3,346 gross.
Less cases from outside of City.....	3,341 net.

Of the total number of measles cases notified, 2,952 in 2,327 households (or 88.2 per cent.) were visited by the Health Visitors, and 3,391 revisits were paid, a total of 6,343 visits.

The following particulars refer to the cases visited :—

	DWELLINGS OF					Total houses visited.
	1 room	2 rooms	3 rooms	4 rooms	More than 4 rooms	
Families	101	688	787	611	140	2,327
Children	201	1,712	1,831	1,706	386	5,836
Cases	132	885	985	780	170	2,952
Percentage of Cases to Children	65.7	51.7	53.8	45.7	44.0	50.6
Cases developing Pneumonia	7	35	12	20	3	77
Percentage of Cases developing Pneumonia.....	5.3	4.0	1.2	2.6	1.8	2.6
Deaths from Measles	2	8	2	3	1	16
Cases, notified Measles, Deaths certified Pneumonia...	....	3	....	4	....	7
Case Mortality per cent.	1.5	1.2	0.2	0.4	0.6	0.8

Total unvisited cases 394, including 378 better-class houses in which no deaths occurred, and 16 in institutions, with 4 deaths.

Medical Attendance.—In 97.6 per cent. of the cases visited a doctor was in attendance.

Condition of Patient.—In 89.8 per cent. of the cases visited the disease ran a normal course, but bronchitis, pneumonia or other complications developed in the remainder.

Attendance at Schools.—1,156, or 39.2 per cent., of the affected children had previously attended school, and 1,796, or 60.8 per cent., had never attended school. In connection with 1,029 of the latter cases, however, other children in the infected houses were scholars, equivalent to 34.9 per cent. of the total cases.

The following were the ages of visited children who were suffering from measles :—

Under 1 year	185
1-2 years	319
2-3 years	432
3-4 years	467
4-5 years	421
5-6 years	636
Over 6 years	492
	<u>2,952</u>

WHOOPING COUGH.

22 deaths occurred from whooping cough. The particulars are as follows :—

WARD.	YEARS OF AGE.						Total.
	0-1.	1-2.	2-3.	3-4.	4-5.	5-10.	
St. Nicholas' .....	.....	.....	.....	.....	.....	.....	.....
St. Thomas' .....	.....	.....	1	.....	.....	1	2
St. John's .....	.....	.....	.....	.....	1	.....	1
Stephenson .....	.....	1	.....	.....	.....	.....	1
Armstrong	2	2	.....	.....	.....	.....	4
Elswick .....	.....	.....	.....	.....	.....	.....	.....
Westgate	1	.....	1	.....	.....	.....	2
Arthur's Hill .....	.....	.....	.....	.....	.....	.....	.....
Benwell	2	.....	.....	.....	.....	.....	2
Fenham .....	.....	.....	.....	.....	.....	.....	.....
All Saints' .....	.....	.....	1	.....	.....	.....	1
St. Andrew's .....	.....	.....	.....	.....	.....	.....	.....
Jesmond .....	.....	.....	.....	.....	.....	.....	.....
Dene .....	.....	.....	.....	.....	.....	.....	.....
Heaton .....	.....	.....	.....	.....	.....	.....	.....
Byker .....	.....	1	.....	.....	.....	.....	1
St. Lawrence .....	.....	.....	.....	.....	.....	.....	.....
St. Anthony's	2	.....	.....	.....	.....	.....	2
Walker.....	4	2	.....	.....	.....	.....	6
CITY.....	11	6	3	.....	1	1	22

The death rate in 1935 was equivalent to 0.08 per 1,000 population, as compared with 0.06 in 1934.

FOOD POISONING.

There were no cases of food poisoning reported during the year.

ENTERIC GROUP OF FEVERS.

During the year 1935, 8 cases of the enteric group of infections were brought to notice. The distribution of these cases, according to the months in which they were notified, the type of infection (typhoid or para-typhoid), and their place of origin, is recorded in the following table :—

Distribution of Enteric Group Infections for 1935.

	EXTRA-MURAL.		NEWCASTLE.	
	Typhoid.	Para-typhoid B.	Typhoid.	Para-typhoid B.
January
February
March
April
May
June
July	2
August	2	2
September	1	....
October
November
December	1	....	....	....
Totals.....	1	....	3	4

It will be seen that one of the 8 patients came from without the City's boundaries, the remaining 7 being Newcastle cases proper. The one extra-mural case (a typhoid) was admitted to the City Hospital from an Institution in the City at the request of the Local Authority concerned. The seven city cases, which were all admitted to hospital, were made up of 3 cases of typhoid and 4 para-typhoid B. infections. There were no deaths among the enteric group of infections throughout the year. The cases were all of the sporadic type, and no connection could be traced between them.

In all there were 23 admissions to the City Hospital. Apart from the 8 patients mentioned above, these cases were all notified in the areas of neighbouring Local Authorities, and were admitted to the City Hospital at the request of the Local Authority concerned, either because they had no Infectious Diseases Hospital of their own, or because their available accommodation was already fully occupied. Seven of the patients admitted to hospital were

suffering from typhoid fever, while of the remainder two were suffering from para-typhoid fever and two were found to have a co-incident infection with dysentery of the Flexner type. There were no deaths among the enteric group of cases during the year.

DIARRHOEA.

There were in all 81 deaths from the disease, equal to a death rate of 0.28 per 1,000 population, and this number included 65 deaths of children under two years of age.

SMALLPOX.

No case of this disease occurred in the City during the year.

The following are the particulars of **Vaccination** during the last thirty-one years :—

Year.	Births Registered	Successful Vaccinations	Unsuccessful Vaccinations	Exemption Certificates.		Deaths, Removals and Post-ponements
				Number.	Percentage to Total Births.	
1905	7,958	7,264	27	65	0.8	....
1906	7,721	6,733	28	92	1.2	....
1907	7,610	6,702	16	94	1.2	....
*1908-12	35,265	27,240	114	3,398	9.6	....
1913-17	34,296	21,251	33	7,144	20.8	....
1918-22	34,372	19,011	95	9,262	26.9	....
1923-27	31,290	19,658	30	5,542	17.7	....
1928	5,780	4,320	19	912	15.8	....
1929	5,638	3,555	33	1,092	19.4	....
†1930	†6,195	3,897	31	1,264	20.4	1,003
1931	6,059	3,754	39	1,343	22.2	923
1932	6,009	3,600	27	1,395	23.2	889
1933	5,770	3,479	18	1,377	23.9	809
1934	5,890	3,467	27	1,449	24.6	874
§1935	5,900	3,002	30	1,333	31.1	....

* Vaccination Act, 1907, came into force.

† Walker District included.

‡ Supervision of Vaccination transferred from Guardians to Health Committee on 1st April, 1930.

§ Provisional figures only.

CHICKENPOX.

1,895 cases were notified. There were no deaths.

ERYSIPELAS.

239 cases of this disease were notified and there were 15 deaths.

PUERPERAL SEPTICÆMIA AND PUERPERAL PYREXIA.

47 cases were notified, with 12 deaths. Inquiries were made concerning 43 of these.

INFLUENZA AND PNEUMONIA.

These diseases accounted for 327 deaths as against 296 last year.

Total deaths at age periods.

Under 5 years.	5-15.	15-25.	25-45.	45-65.	65 and over.	Total.
108	11	7	37	81	83	327

As will be seen from the above figures, 108, or 33 per cent., of the deaths occurred below the age of 5 years.

690 cases of pneumonia, including influenzal-pneumonia, were notified. For the ages and ward distribution, see pages 82 and 83.

Of that number 616, or 83.9 per cent., were visited by Health Visitors. It was found that of these 616 visited cases, 132, or 21.5 per cent., were primary pneumonia, 100, or 16.2 per cent., were cases of influenzal-pneumonia, and 384, or 62.3 per cent., were cases of pneumonia following other diseases.

Sex.—58.9 per cent. of the cases were males.

Ages.—The ages of the 616 cases visited were as follows:—

Under 1 year	81
1-5 years	211
5-15 years	119
15-25 years	46
25-45 years	69
45-65 years	57
and over 65 years	33
	<hr/>
	616
	<hr/>

Housing.—40 cases occurred in 1 roomed dwellings, 212 cases occurred in 2 roomed dwellings, 183 cases occurred in 3 roomed dwellings, and 181 cases occurred in more than 3 roomed dwellings.

Type of House.—256 cases occurred in flats, 191 cases in tenements, and 169 in self-contained houses.

Previous History.—

There was a previous history of	Measles	in 270 cases.
“ “ “	Whooping Cough	in 212 cases.
“ “ “	Influenza	in 141 cases.
“ “ “	Frequent winter Coughs and Colds	in 609 cases.
“ “ “	Pneumonia	in 163 cases.
“ “ “	Tuberculosis	in 15 cases.

Hospital Treatment.—151 cases of pneumonia were treated in the Infectious Diseases Hospital. The majority of these were from houses where there was over-crowding or other unsuitable home conditions. 31 of these patients died, giving a case mortality of 20.5 per cent.

Deaths.—100, or 16.2 per cent., of the visited cases of pneumonia died.

ENCEPHALITIS LETHARGICA.

During the year 1935 there were no cases of encephalitis lethargica notified. There were 3 deaths.

All of these referred to patients in the post-encephalitic state of the disease. Each case was investigated and the approximate dates of the original attacks in this series were found to be as follows :—two in 1925 and one in 1934.

ACUTE POLIOMYELITIS.

10 cases of Poliomyelitis and three of polio-encephalitis were notified in the City during the year. In the latter group there were two deaths.

Twelve proved cases of poliomyelitis were admitted to the City Hospital. Six of these were notified from other institutions in the City, one being an extra-mural case. Two were admitted from extra-mural areas at the request of their own local authorities. One of the extra-mural cases died. The remainder were Newcastle cases admitted direct.

CEREBRO-SPINAL MENINGITIS.

During the last three years the incidence of cerebro-spinal fever, which for some years previous to 1932 had been steadily increasing, has somewhat declined, and during 1935 15 cases were notified in Newcastle. The figures for 1934 and 1933 were 31 and 51. Twenty-seven cases of this disease were nursed in the City Hospital during the year. Eight of these were Newcastle cases, while the remainder were admitted either direct, or through one of the hospitals in the City, from surrounding areas.

There were 12 deaths among these 27 cases, equivalent to a case mortality rate of 44.4 per cent. The corresponding figures for 1934 and 1933 were 52.9 per cent. and 42.5 per cent.

The distribution of these cases, according to the months in which they were admitted, and their places of origin, is recorded in the following table :—

	Newcastle.	Extra-Mural.	Totals.
January	1	1	2
February	1 (1)	1	2 (1)
March .....	....	5 (3)	5 (3)
April .....	....	1 (1)	1 (1)
May	1	5 (2)	6 (2)
June .....	....	....	....
July	1	....	1
August	1 (1)	2 (1)	3 (2)
September .....	....	2 (1)	2 (1)
October	1	1	2
November	1 (1)	....	1 (1)
December	1	1 (1)	2 (1)
Totals	8 (3)	19 (9)	27 (12)

The figures in parentheses, which are included in the numbers alongside which they stand, indicate fatal cases.

The circumstances of all the Newcastle cases have been carefully investigated, but in no case has it been possible to trace the source of the infection.

More than two-thirds of the cases of cerebro-spinal fever admitted to hospital came from extra-mural authorities in the neighbourhood, and wherever possible, it has been the policy of the Health Department to give assistance to authorities whose hospital accommodation is of such a character as to prevent them

from giving adequate treatment to patients suffering from this extremely dangerous disease. The following table shows the age and sex distribution of the 27 cases admitted to hospital :—

Ages.	0-1.	1-2.	2-5.	5-15.	15-25.	25-45.	45 and upwards.	Totals.
Male	3 (3)	3 (2)	3 (1)	2 (1)	4 (1)	3 (1)	....	18 (9)
Female .....	....	1 (1)	2 (1)	3 (1)	3	....	....	9 (3)
Totals.....	3 (3)	4 (3)	5 (2)	5 (2)	7 (1)	3 (1)	....	27 (12)

Figures in parentheses indicate deaths.

It will be noted that the attack rate and mortality rate are particularly high under the age of 5, and that young persons and adults from 15 to 25 have the best chance of recovery from the disease.

BACILLARY DYSENTERY.

Bacillary dysentery has been prevalent in the City since 1928, and during the past year 138 cases were notified. In 84 of these cases the diagnosis was confirmed bacteriologically, four of these being extra-mural cases, which had been admitted to one of the City's hospitals suffering from the disease.

Eighty-one proved cases of bacillary dysentery and one of amoebic dysentery were admitted to the City Hospital. Among these cases there were five deaths, one of which was the patient suffering from amoebic dysentery.

Two nurses were infected at the City Hospital, both with the Sonne type of organism, and two cases admitted suffering from other infections were cross-infected with dysentery while in hospital.

During the year 49 cases were notified from the Newcastle General Hospital. There were two outbreaks in this Institution ; the first occurred during the months of May, June and July, when 24 cases were involved, 14 of which were due to the Sonne organism and 10 to the Flexner type. A nurse in the hospital was infected in this outbreak. The second occurred during the months of September and October, and consisted of 25 cases, 19 of which were due to the Sonne organism and 6 to the Flexner type. Seven cases died in the Newcastle General Hospital before removal to the City Hospital.

Nine cases occurred in the Fleming Memorial Hospital during the year. The majority were of the sporadic type, except for a group of three cases due to the Sonne organism which occurred together in the late autumn. Of the total nine cases, two were due to the Flexner organism, one to the Newcastle type, and six to the Sonne organism, of which latter group two died. Four of the cases were extra-mural in origin.

Two fulminating cases occurred during September of such intensity as to arouse a suspicion of food-poisoning. The patients were brothers aged 10 and 5 years respectively. They were both taken suddenly ill at lunch time. The elder died at home that evening, and the younger was sent to the Royal Victoria Infirmary where he recovered. The Newcastle type of the bacillus was obtained from both cases.

The circumstances and history of all cases were carefully investigated with a view to obtaining information as to the probable sources of infection. The age, sex, and mortality incidence of the series of 96 cases are given in the following table :—

Ages.	0-1.	1-2.	2-5.	5-15.	15-25.	25-45.	45 and upwards.	Total.
Males.....	6 (1)	11 (1)	19 (2)	13 (1)	2	2	1 (1)	54 (6)
Females	4 (1)	3 (1)	11 (2)	9	5 (1)	6 (1)	4 (1)	42 (7)
Total	10 (2)	14 (2)	30 (4)	22 (1)	7 (1)	8 (1)	5 (2)	96 (13)

The figures in parentheses indicate fatal cases.

The distribution of these organisms among the cases is as follows :—

	FLEXNER.					Sonne Bacillus.	Newcastle	Not Typed	Totals.
	W.	X.	Y.	Z.	XZ.				
Total No. of Cases	15	12	1	1	5	54	5	3	96
Fatal Cases	4	.....	.....	.....	.....	7	1	1	13
Non-Fatal Cases	11	12	1	1	5	47	4	2	83

VENEREAL DISEASES.

Syphilis was certified as the cause of death in 16 cases.

The work of the treatment clinic has been continued successfully. 1,333 old and new cases attended 22,389 times as out-patients. 16 cases accounted for 278 in-patient days. Of the 780 new cases, 165 were syphilis, 417 gonorrhœa, 4 soft chancre, and 194 were conditions other than venereal. 72 per cent. were males.

2,490 doses of salvarsan substitutes, 3,757 doses of mercury and 1,133 doses of bisoxyl were administered to out-patients and in-patients.

1,241 Wasserman reactions were carried out by the College of Medicine, and 1,232 microscopical examinations of pathological material were made at the treatment clinic. The irrigation stations for males and for females in connection with the clinic have been in full use during the year.

55 medical practitioners in the City are qualified to receive free supplies of arseno-benzol compounds. 20 made application for these supplies during the year and 1,060 doses were given.

Newcastle Residents Notified as Attending other Centres.

Cases.—Syphilis, 2; gonorrhœa, 2; conditions other than venereal, 4.

Attendances.—303.

Doses of salvarsan substitute given to out-patients, 2.

In-patients.—In-patient days, Nil.

Information as to ophthalmia neonatorum will be found in Section II. (The Child).

CITY HOSPITALS FOR INFECTIOUS DISEASES.

Report of the Deputy Medical Superintendent.

Accommodation.

NAMES AND SITUATION OF HOSPITALS.	TOTAL AVAILABLE BEDS.
City Hospital for Infectious Diseases, Walker Gate—	
Fever Pavilions Beds. 232 (One of 30 beds temporarily appropriated for Tuberculosis)	
Tuberculosis Pavilions 106	
	338
Smallpox and Isolation Hospitals, Town Moor	172

City Hospital, Walker Gate.

YEAR.	Population of the City.	Number of Beds at Hospital for Fever Cases.	Total Admissions (exclusive of Pulmonary Tuberculosis and Smallpox).	Percentage of Scarlet Fever, Diphtheria and Enteric Fever Cases Admitted to Cases Notified.
1890	182,866	104	219	21.3
1900	213,039	104	290	38.6
1909	263,064	172	1,090	78.0
1910	265,077	172	912	83.0
1911	267,261	172	1,110	83.1
1912	269,193	172	1,542	86.4
1913	271,295	172	1,286	88.3
1914	271,523	172	1,835	78.9
1915	278,107	232	1,886	90.5
1916	278,107	232	1,380	87.0
1917	278,107	232	1,303	87.5
1918	278,107	232	1,245	87.5
1919	275,099	232	1,370	84.3
1920	286,061	232	1,710	86.4
1921	278,400	232	1,683	82.4
1922	281,600	232	1,032	86.3
1923	283,800	232	991	92.6
1924	285,900	232	1,502	90.5
1925	286,300	*232	1,711	86.4
1926	284,700	*232	1,397	89.1
1927	288,500	*232	1,493	89.7
1928	281,500	*232	1,294	92.9
1929	283,400	*232	1,713	89.1
1930	283,400	*232	1,649	96.4
1931	283,600	*232	2,347	95.6
1932	285,100	*232	2,143	96.4
1933	286,500	*232	3,040	96.3
1934	287,050	*232	3,292	95.3
1935	292,700	*232	2,881	97.2

* 30 of these beds temporarily appropriated for Tuberculosis patients.

CITY HOSPITAL, WALKER GATE.

(Fever Pavilions.)

Admissions during the year—2,881.

The *average daily number* of patients in the hospital was 251, exclusive of 108 cases of Phthisis.

RATE PER CENT. OF CASES REMOVED TO HOSPITAL TO CASES NOTIFIED.

	1890	1895	1900	1905	1910	1915	1920	1925	1930	1931	1932	1933	1934	1935
Scarlet Fever	18.4	33.0	35.0	50.1	84.5	91.3	85.7	85.0	95.9	95.2	96.3	96.1	94.5	96.3
Diphtheria	8.3	28.7	40.0	36.8	80.1	89.1	89.1	94.1	97.5	99.1	96.3	100.0	98.2	98.7
Enteric Fever.....	38.9	48.0	54.5	52.0	90.5	87.0	90.0	96.4	97.6	92.3	100.0	100.0	100.0	100.0
All cases of the above, } together with Con- } tinued and Typhus } Fever and Cerebro- } Spinal Fever, etc.	21.3	34.6	38.6	47.8	83.0	90.5	86.4	86.0	96.1	95.6	96.3	96.0	95.0	96.9

**Present Death Rates compared with those
of Previous Years.**

RETURN SHOWING THE NUMBER OF CASES OF
SCARLET FEVER, DIPHTHERIA AND ENTERIC FEVER ADMITTED TO HOSPITAL
AND MORTALITY RATES PER CENT.
1891-1900.

YEARS.	NUMBER OF CASES ADMITTED TO HOSPITAL.			NUMBER OF DEATHS.			CASE MORTALITY PER CENT.		
	Scarlet Fever.	Diph- theria.	Enteric Fever.	Scarlet Fever.	Diph- theria.	Enteric Fever.	Scarlet Fever.	Diph- theria.	Enteric Fever.
1891-1895	1,105	92	277	34	26	51	3.1	28.3	18.4
1896-1900	1,087	103	442	41	21	86	3.8	20.6	19.5
1915-1934.									
1915-1919	3,402	998	194	99	89	21	2.9	9.0	10.8
1920-1924	3,919	1,037	78	37	73	9	0.9	7.5	11.6
1925-1929	3,612	908	123	43	62	23	1.2	6.8	18.7
1930-1934	6,296	860	220	76	53	15	1.2	6.1	6.8
1935.									
1935	1,236	549	23	9	41	....	0.7	7.4	....

Admissions and Deaths, 1935.

DISEASE.	ADMISSIONS.												DEATHS.													
	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	TOTALS.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	TOTALS.
	Scarlet Fever	125	114	117	84	73	55	33	65	120	164	162	124	1236	1	3	1	2	2	2	2	2	2	4	1	1	9
Diphtheria	103	71	60	38	15	38	20	18	29	47	52	58	549	9	4	4	3	2	2	2	2	4	4	4	5	41
Diphtheria Carriers	44	29	15	6	6	2	2	5	24	19	15	20	187	1*	...	...	...	...	...	...	...	...	...	...	...	1
Enteric Group Fevers	1	...	3	3	...	9	3	4	1	2	1	...	23	...	...	...	...	...	...	1	1	1	...	...	...	5
Dysentery	4	...	10	15	19	13	4	8	10	26	1	2	82	...	...	...	2	3	1	...	1	...	...	...	...	7
Measles	3	7	2	...	1	...	...	1	1	2	...	...	17	...	...	...	...	...	...	...	...	...	...	...	...	...
Rubella	1	1	2	...	...	...	...	...	...	...	4	...	8	...	...	...	...	...	...	...	...	...	...	...	...	...
Varicella	1	1	2	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...
Mumps	1	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...
Pertussis	5	2	1	4	4	...	1	...	...	4	...	...	21	3	2	...	1	...	...	...	...	2	...	...	...	8
Epidemic Cerebro-Spinal Meningitis	2	2	5	1	6	...	1	3	2	2	1	2	27	...	1	3	1	2	2	2	2	1	...	1	1	12
Other forms of Meningitis	2	2	4	4	1	2	...	...	2	...	1	1	19	2	2	4	4	1	2	1	1	...	...	...	1	19
Poliomyelitis	1	...	...	...	1	3	1	5	1	...	...	...	12	...	...	...	...	...	...	...	...	...	...	...	...	...
Encephalitis Lethargica	9	8	6	21	10	8	5	8	9	9	23	9	125	2	3	1	5	...	...	...	1	2	3	2	5	24
Pneumonia .....	...	...	1	3	3	2	...	2	...	1	3	1	16	...	...	...	...	...	...	...	...	...	...	...	...	...
Bronchitis .....	...	...	1	1	5	...	...	...	...	...	3	...	10	...	...	...	...	...	...	...	...	...	...	...	...	...
Influenza	2	1	4	2	...	...	1	1	...	3	1	1	16	...	...	...	...	...	...	...	...	...	...	...	...	...
Respiratory Diseases	11	14	13	13	8	8	5	2	11	12	16	14	127	2	4	1	1	1	1	1	1	1	4	2	2	20
Erysipelas	1	...	3	2	2	2	...	4	2	3	8	4	31	...	...	...	...	1	1	1	1	1	1	1	1	4
Skin and Septic Conditions .....	...	...	...	1	2	...	1	2	2	2	...	1	11	...	...	...	...	1	...	...	...	...	...	...	...	2
Puerperal Pyrexia	19	12	9	7	7	9	8	4	10	11	11	18	125	...	...	...	...	...	...	...	...	...	...	...	...	...
Tonsillitis .....	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Gastro-Intestinal Diseases	3	...	1	...	3	5	3	10	6	8	2	1	42	1	...	...	...	...	...	...	2	...	...	...	...	3
Ophthalmia Neonatorum .....	...	...	1	...	1	...	...	...	1	1	...	...	4	...	...	...	...	...	...	...	...	...	...	...	...	...
General Diseases	1	...	1	...	...	1	...	3	...	...	...	1	7	1	...	1	...	...	...	2	...	...	...	...	...	5
Injuries .....	...	...	1	...	...	...	...	...	1	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...
Unclassified	13	7	9	4	10	6	4	8	12	11	9	18	111	...	1	...	1	...	...	...	...	1	...	...	...	4
TOTALS	351	270	271	209	180	173	107	153	246	328	316	277	2881	22	20	15	19	11	7	2	10	13	16	10	19	164

Length of Stay in Hospital of Early Fatal Cases.—The following cases died within a short period after their admission to hospital :—

	<i>Within 24 hours.</i>	<i>Within 48 hours.</i>
Scarlet Fever	2	....
Diphtheria	11	3
Dysentery	1	1
Measles	2	....
Pertussis	1	....
Epidemic Cerebro-spinal Meningitis.....	1	1
Other Forms of Meningitis	5	3
Pneumonia	7	4
Erysipelas	2	1
Sur Arachnoid Hæmorrhage	1	....
Skin and Septic Conditions	2	....
Gastro-Intestinal	2	....
Total	37	13

Average Stay in Hospital during the last Twenty-eight Years.

YEARS.	All Cases.		Scarlet Fever.		Diphtheria (including carriers).		Enteric Fever		Other Diseases.	
	Average No.	Average Stay in Days.	Average No.	Average Stay in Days.	Average No.	Average Stay in Days.	Average No.	Average Stay in Days.	Average No.	Average Stay in Days.
1908-12..	1,054	46.7	599	51.7	326	41.3	68	46.3	61	29.6
1913-17..	1,538	39.6	929	45.6	220	39.9	70	47.4	318	20.6
1918-22..	1,408	31.2	758	37.1	215	43.2	15	46.6	420	16.8
1923-27..	1,419	31.9	751	35.2	185	44.3	21	54.0	462	21.1
1928	1,294	22.5	452	29.3	205	33.6	25	44.5	612	12.9
1929	1,713	21.7	543	29.7	247	29.6	38	42.2	885	13.6
1930	1,649	23.9	584	32.5	194	34.7	66	44.3	805	13.5
1931	2,347	27.3	989	36.5	113	46.3	21	50.2	1,224	17.8
1932	2,143	30.3	1,120	35.2	162	57.5	33	47.0	828	17.7
1933	3,040	27.6	1,934	32.7	114	61.6	34	41.2	958	12.7
1934	3,292	30.1	1,669	35.0	503	41.1	66	40.0	1,054	15.5
1935	2,881	31.2	1,236	33.8	736	45.5	23	37.2	886	15.4

DIPHTHERIA.

The marked increase in the incidence of diphtheria in Newcastle and the surrounding area, which first became evident during the autumn of 1934, persisted through 1935, as is shown by the number of cases and carriers admitted to hospital. As the above table shows the combined figures for these cases, which since 1929 had never reached 200, in 1934 rose to 503, and in 1935 reached 736. Of these patients 427 were admitted in the first six months, and 309 in the last six months of the year.

549 true cases were admitted to hospital, and 187 carriers. 406 of these cases were of the simple faucial or tonsillar type, and in this group there were four deaths. Of these fatal cases, two were suffering from concurrent infections, in one case measles, and in the other pertussis, while the remaining two deaths were

due in one instance to a streptococcal sinusitis, which complicated the disease, and in the other to sudden collapse under anaesthesia for the purpose of performing tonsillectomy.

In 19 cases the infection was limited to the nose, and there was one case of aural diphtheria.

In a group of 97 faucio-pharyngeal cases, with varying degrees of nasal involvement, there were 28 deaths—equivalent to a case mortality of 28.9 per cent.

There were 26 cases of laryngeal or tracheal diphtheria of whom nine, or 34.6 per cent., died. In twelve of these cases the obstruction was so considerable that tracheotomy was performed shortly after admission to hospital, and of these four died. In three cases tracheotomy had been performed before admission to hospital, and of these one died.

The case mortality of the whole series of 549 cases was 7.4 per cent., compared with 7.6 per cent. in 1934, and 10.5 per cent in 1933.

It can therefore be said that, although a proportion of severe cases are being met with, the virulence of the infection does not seem to have increased with the incidence of the disease in this area to the same extent as it would appear to have done in certain other areas.

In seventy-five cases, where virulent organisms persistently remained in the throat after recovery from the disease, including also a number of healthy carriers, tonsillectomy was performed. In the majority of cases this procedure rendered the patient free from infection after a short period.

The increased number of cases necessitated the use of one spare ward throughout the year, and for five months of the year it was found necessary to requisition for diphtheria cases the pavilion at Walker Gate which usually accommodates thirty of the tuberculosis patients.

At the close of the year four wards were in use for nursing diphtheria cases instead of one which has usually sufficed in the past.

There was one Institutional outbreak of diphtheria in the City during the early part of the year. It occurred in a residential school for deaf and dumb children. The school contained 160 children between the ages of $4\frac{1}{2}$ and 16 years. Five cases occurred within a fortnight, all due to the gravis strain, but fortunately of a mild type.

The willing co-operation of the management of the school made possible the immediate schick testing and swabbing of the whole of the staff and children, with the result that the outbreak was quickly controlled. In the process of swabbing eleven carriers were discovered. All new entrants are now immunised on entering the Institution.

The scheme, inaugurated in June, 1934, whereby free immunisation against diphtheria of all children under the age of five was offered to parents, has been continued throughout 1935. The work has been carried out by a part-time officer, and four clinics have been held each week at certain Maternity and Child Welfare Centres. A number of children of school age, whose parents were anxious that they should be immunised, have been done. During the year 158 clinics were held, and 1,826 children completed treatment.

From an investigation commenced in 1934, and continued during 1935, by Dr. E. G. Brewis, into the incidence and clinical significance of the three types of diphtheria bacilli, Gravis, Intermediate and Mitis, the following facts are supplied. Wherever possible the organisms from each patient were isolated and classified by the Public Health Laboratory, and an intra-dermal virulence test performed.

In 630 patients—cases and carriers which were proven bacteriologically—the diphtheria bacilli isolated were subject to further examination in order to classify them into their respective types—Gravis, Intermedius, and Mitis.

Of these 14, or 2.22 per cent., whilst exhibiting virulence as determined by the intra-dermal guinea pig inoculation test, failed in their characteristics to conform to any of the three types.

A further 24, or 3.8 per cent., were capable of classification but were non-virulent to the intra-dermal test; 8 were Gravis, 3 were Intermedius, and 13 were Mitis in type.

Of the remaining 592 bacilli, which were both virulent and classified into their respective types, the following table shows their distribution amongst those types; and also for each type, the clinical severity of the cases from which they were isolated.

	No. of Cases.	Per-centage of Total.	CLINICAL CLASSIFICATION							
			Severe.		Moderate.		Mild.		Carriers.	
			No.	Percentage	No.	Percentage	No.	Percentage	No.	Percentage
Gravis	226	38.17	37	16.37	47	20.79	90	39.82	52	23.00
Intermedius	178	30.06	46	25.84	39	21.91	70	39.32	23	12.92
Mitis	188	31.75	11	5.85	29	10.63	97	51.59	60	31.91

The number of deaths and complications occurring in each group, together with a rough analysis of the cause of death where not directly attributable to diphtheria, are further appended :—

- GRAVIS 9 deaths, 8 due to diphtheria alone.
 1 complicated by haemolytic streptococcal sinusitis.
 15 had complications.
- INTERMEDIUS ... 9 deaths, 8 due to diphtheria alone.
 1 due to broncho-pneumonia, following tracheotomy.
 7 had complications.
- MITIS 5 deaths, 1 due to diphtheria in a marasmic baby of five weeks old.
 4 had complicating factors which assumed prior importance as a cause of death: whooping cough, appendix abscess, measles and purulent pericarditis respectively.
 2 had complications.

SCARLET FEVER.

The incidence of scarlet fever in the City which, as shown by the notification and admissions to hospital, had been gradually increasing since 1928, until it reached its peak in 1933, now appears to be on the wane, and in 1935 1,236 cases of scarlet fever were admitted to hospital, as against 1,669 in 1934 and 1,934 in 1933. This figure is, however, considerably in excess of what would be termed a normal year.

The Isolation Hospital on the Town Moor was in use until the end of May to accommodate convalescent cases, and was re-opened in October for the same purpose.

The prevailing type of scarlet fever remained mild, and the mortality rate was 0.7 per cent., as compared with 1.8 per cent. in 1934 and 1.4 per cent. in 1933. An analysis of the nine fatal cases shows that of the six cases which did not receive antitoxin three could be said to be entirely due to scarlet fever. Two developed a broncho-pneumonia and the third was admitted with a severe mastoiditis and subsequently developed a cerebral abscess. The remaining three non-anti-toxin cases were made up of a surgical scarlet fever with extensive scalds, burns, and broncho-pneumonia on admission, which died the following day; a case of advanced tuberculosis, who contracted scarlet fever while on the sanatorium; and a case admitted with intestinal obstruction due to a Meckel's diverticulum, who died the following day.

In the three cases which received antitoxin, the fatal issue could in each instance be attributed to scarlet fever. The first was a case of puerperal scarlet fever with a subsequent broncho-pneumonia. The second died suddenly from cardiac failure after broncho-pneumonia, while the third was a nurse from a local hospital who developed a streptococcal peritonitis. Six deaths were, therefore, entirely due to scarlet fever without any additional factor, giving a more accurate death rate of 0.48 per cent.

Scarlet fever antitoxin has been used to a slightly greater extent than last year, but to a lesser extent than in the six previous years. The numbers and relative proportions of patients receiving this form of treatment for the period 1926-1935, are as follows:—

	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935
Scarlet Fever Cases admitted	831	741	452	543	584	989	1,120	1,934	1,669	1,236
Number treated with Antitoxin	78	172	177	169	249	483	380	436	331	260
Percentage treated with Antitoxin	9.5	20.3	39.2	31.1	42.6	48.8	33.9	22.5	19.8	22.0

Scarlet fever antitoxin has now been in use for about ten years, and opinions as to its value and its limitations are becoming more definite.

It seems clear that while it is very efficacious in the treatment of severe cases showing signs of toxæmia, and of considerable value in true "toxic" cases, its power to prevent the onset of complications is negligible, and furthermore, it is of little value in the treatment of these complications or the septic sequelæ of scarlet fever.

The general consensus of opinion seems to be that it should be reserved for the treatment of the more severe cases, and that its routine use in mild cases of scarlet fever is not advisable.

In the following table is summarised the statistical information regarding all cases of scarlet fever treated during the year under review :—

SCARLET FEVER.	Number.	Percentage treated with Antitoxin.	Percentage with Complications.	Mortality Rate.	Return Case Rate.	Average stay in Days in Hospital.		
						All Cases.	Complicated Cases.	Non-complicated Cases.
All Cases.....	1,236	22.0	38.4	0.7%	4.2%	33.8	43.6	27.3
Antitoxin Cases	260	100	38.8	1.16%	5.0%	35.8	48.6	27.6
Non-Antitoxin Cases	976	Nil.	38.3	0.6%	4.0%	33.3	43.0	27.2

PERCENTAGE INCIDENCE OF COMPLICATIONS.

	Rhinorrhœa.	Otorrhœa.	Adenitis	Rheumatism.	Albuminuria.	Nephritis.	Cardiac.	Other Complications.
All Cases..	12.3	11.8	6.4	0.8	2.9	0.97	1.1	2.1
Antitoxin Cases	11.9	12.3	6.5	1.5	3.1	0.4	0.7	2.3
Non-Antitoxin Cases	12.4	11.7	6.3	0.6	2.9	1.1	1.1	2.1

Otorrhœa and Rhinorrhœa.—The work of the Consulting Oto-Rhinologist to the Hospital (Mr. W. Frank Wilson), in the treatment and supervision of scarlet fever cases complicated by otorrhœa or rhinorrhœa has been continued along lines developed in recent years.

The incidence of these complications was high and showed a slight increase on last year. 298 cases occurred in 1,236 admissions—a complication rate of 24.1 per cent., as contrasted with 23.6 per cent. in the previous year.

The distribution of these cases according to whether or not they were treated with scarlet fever antitoxin, and their respective stay in hospital, are shown in the following table :—

		Number of Cases.	Average Stay in Hospital (days).
Non-Antitoxin Cases	Rhinorrhœa	121	41.6
	Otorrhœa	114	52.4
Antitoxin Cases	Rhinorrhœa	31	45.0
	Otorrhœa	32	65.8
Total		298	48.7

The average stay per patient of cases in this group was 48.7 days, as contrasted with the figure given for 1934, namely, 57.5 days.

In the treatment of these patients it was found necessary to perform seventy-seven operations—twenty-seven for the removal of tonsils and adenoids, and fifty for mastoidectomy.

Subsequent Progress.—As in previous years, supervision of cases of rhinorrhœa and otorrhœa has been maintained wherever possible after their discharge from hospital, and 245 cases of this type have been visited at varying intervals. The result of these visits showed that amongst 132 cases of rhinorrhœa, three, or 2.3 per cent., still had slight nasal discharge, whilst six or 5.3 per cent., of 113 cases of otorrhœa had slight persisting deafness or discharge from the ear.

All the cases in which the nasal or aural discharge has persisted have been kept under observation by Mr. Frank Wilson at the Out-Patient Department of the Royal Victoria Infirmary.

“ Return ” Cases.—The year's total admissions of scarlet fever cases, which numbered 1,236, produced 52 “ Return ” cases, a percentage of 4.2. These arose from 48 “ Infecting ” cases, a percentage of 3.8.

SEASONAL OCCURRENCE.

QUARTER.	Total Scarlet Fever Admissions.	" Infecting " Cases.		" Return " Cases.	
		No.	Percentage.	No.	Percentage.
January to March	356	15	4.2	18	5.05
April to June	212	7	3.3	7	3.3
July to September	218	10	4.5	10	4.5
October to December	450	16	3.5	17	3.8

Of the 48 " Infecting " cases (a) 30 had no complications or discharges whilst in hospital, and remained " clean " after reaching home, (b) 4 had no complications whilst in hospital, but developed discharges after reaching home, while (c) 14 had complications whilst in hospital, but were " clean " on discharge.

The figure of 3.8 for the percentage of " Infecting " cases is high, and has only once been exceeded in recent years, but the high incidence of the disease, and the necessity for curtailing the normal period of detention in hospital, would both account, to some extent, for the large number of these cases.

" RETURN " CASES FOR YEARS 1906-1935.

YEARS.	Total Scarlet Fever Admitted.	" Infecting " Cases.		" Return " Cases.	
		No.	Percentage.	No.	Percentage.
1906-10	2,203	63	2.8	82	3.7
1911-15	5,185	217	4.2	251	4.8
1916-20	3,202	104	3.2	112	3.5
1921-25	3,850	93	2.4	105	2.7
1926-30	3,160	111	3.5	110	3.5
1931	989	37	3.7	39	3.9
1932	1,120	49	4.4	56	5.0
1933	1,934	96	5.0	107	5.5
1934	1,669	86	5.1	94	5.6
1935	1,236	48	3.8	52	4.2

ERYSIPELAS.

Of recent years erysipelas has shown a tendency to become one of the commoner and severer infectious diseases prevailing in the City. Its incidence and mortality approximate roughly to those of diphtheria, with the notable exception that while the latter is a disease of children and young people, erysipelas principally attacks the middle-aged and elderly.

In the following table the number of notifications of erysipelas, the deaths caused by the disease, and the case mortality rate are detailed for the years 1926-1935. In addition, similar information is given for such of these cases as were admitted to the City Hospital, together with the duration of their stay in hospital.

YEAR.	Total Notifica-tions.	Deaths.	Mor-tality Rate. Per cent.	CITY HOSPITAL.			
				Admis-sions.	Deaths.	Mor-tality Rate. Per cent.	Dura-tion of stay in Hospital. (days).
1935....	239	15	6.3	127	20	15.7	13.1
1934....	240	16	6.6	126	23	18.2	14.2
1933....	264	12	4.5	116	15	12.9	17.4
1932....	205	13	6.4	100	11	11.0	14.6
1931....	218	11	5.0	91	4	4.4	14.0
1930....	208	12	5.8	107	11	10.3	11.3
1929....	220	11	5.0	85	8	9.4	13.0
1928....	234	19	8.1	49	6	12.2	12.6
1927....	212	12	5.7	51	2	3.9	14.5
1926....	172	5	2.9	31	2	6.5	25.6

The mortality rate for these cases remains high. In 1935 this was 15.7 per cent. for all cases of erysipelas treated in hospital—as contrasted with 18.2 per cent. 1934 and 12.9 per cent. in 1933. Of the 127 cases admitted to hospital, 25 were given antitoxin, of which 8, or 32 per cent., died. Among the 102 non-antitoxin cases there were 12 deaths, giving a mortality rate of 11.7 per cent.

Mixed Infections.

46 patients, or 1.6 per cent., of those sent into hospital were found, on or shortly after admission, to be suffering from or incubating two distinct infectious diseases, as follows :—

Scarlet Fever with Diphtheria	3
Scarlet Fever with Measles.....	4
Scarlet Fever with Varicella	16
Scarlet Fever with Pertussis	1
Scarlet Fever with Erysipelas.....	1
Diphtheria with Scarlet Fever	3
Diphtheria with Dysentery.....	1
Diphtheria with Varicella	4
Diphtheria with Pertussis	1
Diphtheria with Erysipelas.....	1
Diphtheria with Measles.....	1
Para B. Fever with Dysentery	2
Para B. Fever with Diphtheria Carrier.....	1
Dysentery with Measles	1
Dysentery with Rubella.....	1
Measles with Varicella.....	1
Measles with Scarlet Fever.....	1
Meningitis with Diphtheria Carrier	1
Pneumonia with Varicella	1
Erysipelas with Diphtheria Carrier.....	1

Cross Infections.

During the year 78 patients, or 2.7 per cent. of the total admissions, contracted a second infection in the wards of the hospital. The details are as follows, the primary infection being stated first :—

Scarlet Fever with Diphtheria	2
Scarlet Fever with Measles.....	5
Scarlet Fever with Varicella	28
Scarlet Fever with Pertussis.....	1
Measles with Scarlet Fever.....	1
Scarlet Fever with Varicella and Pertussis.....	2
Diphtheria with Scarlet Fever	23
Diphtheria with Scarlet Fever and Varicella.....	1
Diphtheria with Rubella.....	1
Diphtheria with Pertussis	2
Diphtheria with Varicella	9
Pneumonia with Scarlet Fever.....	1
Pneumonia with Dysentery	2
Total.....	78

There were no deaths.

Staff Sickness.

The amount of sickness among the Nursing Staff showed a decline on the previous year. The pressure on the staff, though still considerable, was not so severe as in the two previous years, and this, together with the more satisfactory housing of the staff, may account for the improvement.

Nursing Staff.—56 of the nursing staff were off duty owing to sickness for a total of 1,036 days. Two nurses contracted dysentery, 1 scarlet fever, and 1 developed tonsillitis and was found to be a diphtheria carrier. One suffered from erysipelas, 7 influenza, 12 from tonsillitis, 5 from various skin and septic conditions, and 2 from minor accidents. The remainder were nursed in their own homes.

Domestic Staff.—68 were off duty through sickness for a total of 768 days. 2 suffered from influenza, 7 from tonsillitis, 1 from skin and septic conditions, 2 from diphtheria, and 6 from minor accidents. The remainder were nursed in their own homes.

During the year the practice of immunising the staff against scarlet fever, diphtheria, and the enteric group of fevers has been carried out as previously.

The nurse who contracted scarlet fever had only been in the hospital ten days when she contracted the disease. She had been tested and found to be susceptible, but had only commenced her

course of immunisation. She was working on the Sanatorium, and it is possible that the infection was acquired outside the hospital.

One nurse who contracted tonsillitis had previously been tested and found to be immune. Diphtheria organisms were isolated from her throat when swabbed, and as these remained persistently present it was found necessary to remove her tonsils in order to render her free from the organisms. The clinical appearances were not those of diphtheria.

Two nurses contracted dysentery while working among cases of this disease. These infections were fortunately mild, but indicate serious lapses from the standard of care and cleanliness required for good nursing.

The practice, started in 1930, of subjecting all nurses and members of the domestic staff to an intra-dermal tuberculin test to determine their susceptibility to tuberculosis, has been continued in the past year. In addition, an X-Ray photograph of the chest of each individual is taken and filed. Should any condition at all suspicious of tuberculosis be discovered, the affected person is not employed in the sanatorium pavilions.

SMALLPOX AND ISOLATION HOSPITALS, TOWN MOOR.

Owing to the disappearance of smallpox from the neighbourhood of Newcastle upon Tyne, it was not found necessary to bring the wards of the smallpox hospital into use for that disease at any time throughout the year.

The wards of both hospitals, however, were again utilised to accommodate convalescent cases of scarlet fever and diphtheria. The wards were in use from January to May and had to be re-opened in October, until the end of the year. Temporary nurses and domestics were engaged to staff the hospital.

E. F. DAWSON-WALKER, M.D.,

Deputy Medical Superintendent

City Hospital for Infectious Diseases,

Newcastle upon Tyne,

18th May, 1936.

DISINFECTION, Etc.

9,512 cases of notifiable infectious disease were inquired into by the Infectious Disease Inspectors, Health Visitors and Tuberculosis Nurses and, with the exception of measles and chickenpox, the houses or rooms connected therewith disinfected by spraying with formalin. In connection with cases of tuberculosis, 760 houses, including 924 rooms, were similarly disinfected. 785 visits were made, and disinfection was also carried out in 329 special cases.

INFECTED ARTICLES TREATED IN THE DISINFECTING APPARATUS AT THE CITY HOSPITAL FOR INFECTIOUS DISEASES, WALKER GATE.

ARTICLES FROM CITY.		ARTICLES—HOSPITAL PROPERTY.	
1935.	1934.	1935.	1934.
29,153	32,017	15,554	17,049

8,670 articles were also disinfected at the Smallpox Hospital.

The staff have thus dealt with 53,377 articles during the year.

Fluid disinfectant, in half-pint tins, was given out free on the order of the special inspectors, for home use in connection with infectious disease. Every precaution was taken to ensure that the disinfectant was properly and economically used.

DISINFECTANTS DISTRIBUTED—1935.

FROM	FOR INFECTIOUS DISEASES.	FOR PHTHISIS.
	FLUID ($\frac{1}{2}$ pint tins.)	FLUID ($\frac{1}{2}$ pints.)
Health Department.....	62	....
Tuberculosis Dispensary .....	....	640
Corporation Yard, Benwell	13	....
TOTAL.....	75	640

BACTERIOLOGICAL INVESTIGATIONS, 1935.

The following is a report of the bacteriological examinations carried out on behalf of the Health Department of the Newcastle Corporation, at the Public Health Laboratory (University of Durham College of Medicine), at Armstrong College, Newcastle upon Tyne.

A total of 12,071 examinations were made during the year. This is a marked increase on the previous year, when 9,737 was the total, while in 1933 the total was 6,393.

The nature of the investigations and the results obtained are given under the various sections and are as follows :—

BACTERIOLOGICAL EXAMINATIONS :—

	Swab for Diphtheria.		Sputum for Tubercle bacilli (microscopically).		Swabs for Hæmolytic Streptococci.	
	Total.	Positive.	Total.	Positive.	Total.	Positive.
Number of Examinations.....	5,114	606	571	47	45	32
Percentage Positive	11.8		8.2		71.1	

There has been a marked increase in the number of diphtheria swab examinations during this year. This increase started in September, 1934, and although there was a return to normal in June, July and August, 1935, there was a further rise at the end of the year. This increase is the main cause of the increase in the total examinations. During the last seven years the annual numbers were :—1928, 1,386 ; 1929, 1,634 ; 1930, 1,979 ; 1931, 1,309 ; 1932, 1,515 ; 1933, 1,265 ; 1934, 3,191 ; giving an average of 1,754 per annum.

AGGLUTINATION REACTIONS :—

i. *Enteric Fever.*

A total of 65 bloods were examined for Widal Reactions against *B. typhosus*, *B. paratyphosus* "A" and *B. paratyphosus* "B," 6 were positive and one was suspicious with *B. typhosus* "H" emulsions,

7 were positive and one was suspicious with *B. paratyphosus* B. "H" emulsions,

3 bloods gave indication of previous anti-typhoid inoculation,

45 were negative to all "H" emulsions, and

2 were negative to "O" emulsions.

ii. *Abortus Fever.*

3 bloods were examined for agglutination to *Brucella abortus* and *Brucella melitensis*, all were negative.

MILK EXAMINATIONS :—

i. For *tubercle bacilli* by animal inoculation :—

Total 347 milks were inoculated and 15 positives were obtained, equals 4.3 per cent.

NOTE.—Owing to the fact that from July 1st records and accounts were modified so that specimens are only recorded after the completion of the examination and not on arrival at the laboratory, the figures given will not compare exactly with the figures of the previous years.

ii. *Routine milks* for examination for *B. coli* and total count.

When *B. coli* is taken as indicator we found :—

B. coli not found in	1.0 ml. or less	60	} 133
B. coli found in	1.0 ml. but not in less	33	
B. coli ..	0.1 ml. ,,	20	
B. coli ..	0.01 ml. ,,	20	
<hr/>			
B. coli found in	0.001 ml. but not in less	12	} 21
B. coli ..	0.0001 ml. ,,	4	
B. coli ..	0.00001 ml. ,,	5	
Total		154	

Thus, 133 were considered satisfactory and 21 unsatisfactory. With these samples a total count of the number of organisms able to grow on agar medium at 37°C. was also made. Taking 200,000 organisms per ml. as the standard (as in Grade "A" milk) we find that,

117 of the samples gave totals below 200,000 and thus satisfactory and 37 of the samples above 200,000 and unsatisfactory.

iii. *Graded Milks.*

401 samples of "Graded Milks" were examined during the year in accordance with the scheme of the Ministry of Health under the Milk and Dairies (Amendment) Act, 1922, and Milk (Special Designations) Order, 1923.

The following results were obtained :—

	Total.	Satisfied the test.	Failed to satisfy test.
Certified Milk	70	53	17
Grade "A" (T.T.)	180	150	30
Grade "A"	122	103	19
Pasteurised Milk	29	21	8
Totals	<u>401</u>	<u>327</u>	<u>74</u>

WATER EXAMINATIONS :—

- i. Routine samples gave the following results in a total of 196 examinations :—

Class I.	B. coli not found in 100 ml. or less	118
Class II.	„ found in 100 ml. but not in less	47
Class III.	„ „ 10 ml. „	24
Class IV.	„ „ 1 ml. „	7
		<u>196</u>

- ii. During the months of July, August, September, October and November, 34 samples of water from various Swimming Baths in the City were examined. Detailed reports were sent and the following is a summary of the results, taking only the presence of B. coli as the indicator :—

Class I.	B. coli not found in 100 ml. or less	29
Class II.	„ found in 100 ml. but not in less	2
Class III.	„ „ 10 ml. „	1
Class IV.	„ „ 1 ml. „	2
		<u>34</u>

- iii. In addition some special waters were examined and detailed reports were returned :—

During May, from Barrasford Sanatorium, 2 samples.

During December, 4 samples taken from different localities from the River Tyne.

These last samples were examined in addition for organisms of the enteric group. From one sample a Salmonella group organism, later identified as bac. morbificans bovis, was isolated.

VENEREAL DISEASES :—

	Total.	Serological reactions.	Microscopical examinations.
From Treatment Centres	1,266	1,266	....
From Private Practitioners..	1,653	1,500	153
Total	2,919	2,766	153

OTHER EXAMINATIONS :—

(a) **Diphtheria.**—The typing of diphtheria bacilli according to the types of Anderson, McLeod and others and intra-dermal virulence tests have been continued. Subcutaneous virulence tests have also been done on a number of cultures mostly from convalescents. The following results were obtained during the year :—

Total.	Diphtheria types.				B. Hofmanni.	Saccharose fermenters.	No diphtheria bacilli isolated.
	Gravis.	Mitis.	Intermediate	Atypical.			
756	233	221	196	42	48	16	65
Total....692							

VIRULENCE TESTS.

Intra-dermal.		Subcutaneous.	
Positive.	Negative.	Positive.	Negative..
638	62	111	25
Total.....700		Total.....136	

The total of 62 negative intra-dermal tests were obtained from the following types :—Gravis 9, Mitis 18, Atypical 30, B. hofmanni and Saccharose fermenters 5.

(b) **Enteric Fevers.**—The following specimens of fæces were received and examined for organisms of the enteric group :—

		Positive.
From the City Infectious Diseases Hospital	83	43
From the City Health Department	9	2
From the Newcastle General Hospital.....	6	...
	—	—
Total.....	98	45
	—	—

From this total of 98 specimens, 45 positive results were obtained :—

B. typhosus " H " being isolated	...	8 times.
B. paratyphosus B. " H " being isolated	36	„
Salmonella aertrycke being isolated	...	once.

Dysentery bacilli were also isolated from 2 enteric cases :—

- (1) B. dysenteriae Flexner XZ.
- (2) „ „ X.

Various non-pathogenic non-lactose fermenting organisms such as B. paracolon, B. Morgan No. 1, B. Proteus and B. pyocyaneus were also isolated a number of times.

Specimens of urine were also similarly examined :—

From the City Infectious Diseases Hospital.....	24
From the Newcastle General Hospital.....	1
	—
Total.....	25
	—

From these B. typhosus was isolated twice and B. paratyphosus B. once, all these positives being from the City Infectious Diseases Hospital, the remaining 23 specimens were negative.

(c) **Bacillary Dysentery and Food Poisoning.**—The examination of fæces for dysentery bacilli and organisms of the food poisoning group has been continued. A total of 425 specimens being submitted as follows :—

	Specimens.	Positive.
From the City Infectious Diseases Hospital	246	75
From the City Health Department	12	4
From the Newcastle General Hospital.....	167	51
	—	—
Totals.....	425	130
	—	—

From these 130 giving positive results the following organisms were isolated :—

B. dysenteriae Flexner.....	44
B. dysenteriae Sonne.....	73
B. dysenteriae Newcastle	12
Salmonella ærtrycke	2
Salmonella Gærtner	1
Atypical non-lactose fermenters	3

The Flexner dysentery bacilli isolated were of the following types :—

Type V. 0, W. 23, X. 15, XZ. 4, Y. 0, Z. 2.

One case showed what appeared to be a double infection, both B. dysenteriae Flexner W. and Newcastle dysentery bacilli being present.

(d) Cerebro-spinal Fluids.

(i) A total of 27 cerebro-spinal fluids were received for bacteriological examination ; detailed reports were returned and the following is a summary of the results :—

(1) Tubercular	3
(2) Meningococcal (Group I. 2 ; atypical 3).....	5
(3) Other organisms—Streptococci	2
Influenza bacilli.....	1
(4) Results inconclusive	14
(5) Normal Fluids	2
	—
Total.....	27
	—

(ii) 14 specimens of cerebro-spinal fluids from cases of C.S. meningitis were received for typing. Results were as follows :—

Group I.	4
Group II.	3
Atypical Gram-negative cocci	2
No Meningococci grown	5
	—
Total.....	14
	—

(e) Miscellaneous Examinations.

Throat swabs for Diphtheria from Shotley Bridge Colony	8
Various specimens from Barrasford Sanatorium....	7
Direct examinations of throat swabs for Diphtheria bacilli or Vincent's angina	14

From the City Health Department.

(a) Oysters } Mussels }	for general examination	2
(b) Specimens from a suspected case of Food-poisoning— Winkles	} Fæces from a case and post-mortem specimens }	6
Fæces from a case and post-mortem specimens }		
(c) Samples of water from various localities on the River Tyne for organisms of the Enteric Group		4

From the City Hospital, Walker Gate.

Urines for bacteriological examination.....	2
Urines for Guinea-pig inoculation.....	1
Blood cultures	2
Blood for agglutination for Dysentery.....	1
Pus or pleural fluids for organism.....	3
Fæces for Tubercle bacilli.....	1
	— 10
	—
Total.....	51
	—

(f) **Measles Serum.**—One batch was put up at the beginning of March.

(g) **Newcastle General Hospital.**—A number of bacteriological examinations for the Hospital have been carried out and the following is a summary :—

CHARACTER OF EXAMINATION.	
Autogenous Vaccines	5
Blood cultures for organism	9
Cerebro-spinal fluids for bacteriological examinations	2
Fæces for tubercle bacilli.....	3
Pus from various sources.....	4
Urines for bacteriological examinations	3
Urines for animal inoculation for tubercle bacilli or Leptospira	8
Blood for inoculation for Leptospira.....	1
Blood from pleura for organism.....	1
Fatty tissue for bacteriological examination.....	1
Swabs (nose, throat or mouth) for organisms.....	11
	—
Total.....	48
	—

**REPORTS OF THE
TUBERCULOSIS MEDICAL OFFICER
AND
MEDICAL SUPERINTENDENT,
BARRASFORD SANATORIUM.**

IV.—TUBERCULOSIS.

**TUBERCULOSIS DISPENSARY,
BARRASFORD SANATORIUM.**

Contacts.—In April Dr. C. G. R. Goodwin, Medical Superintendent of Barrasford Sanatorium, took over the two afternoon clinics per week at the Dispensary, thus relieving me for domiciliary visiting and contact inspection. Since then it has been possible to pay more attention to this work.

The details of the contacts seen, which number 447, are set out in the following table.

161 were seen during domiciliary visiting and 56 at the Sanatorium Pavilions, City Hospital, Walker Gate, on relatives' Visiting Afternoons. As was mentioned in last year's Report many of the patients' visitors are contacts.

CONTACTS EXAMINED DURING THE YEAR 1935.
(First Schedule, Part A., Memo. 37/T., Revised).

Diagnosis.	Males.		Females.		Totals.
	Over 15 yrs.	Under 15 yrs.	Over 15 yrs.	Under 15 yrs.	
Pulmonary Tuberculosis	17	10	24	4	55
Non-Pulmonary Tuberculosis .....	.....	5	2	5	12
Diagnosis not completed	6	4	6	4	20
Non-Tuberculosis	62	75	146	77	360
TOTALS	85	94	178	90	447

209 cases, who had been seen previously and discontinued, returned for re-examination. The details are given below :—

CASES DISCONTINUED IN PREVIOUS YEARS, AND RETURNED DURING THE YEAR 1935 (INCLUDED IN PREVIOUS TABLES 1 AND 2.)

Diagnosis.	Males.		Females.		Totals.
	Over 15 yrs.	Under 15 yrs.	Over 15 yrs.	Under 15 yrs.	
Pulmonary Tuberculosis	23	2	16	3	44
Non-Pulmonary Tuberculosis .....	.....	.....	4	2	6
Diagnosis not completed	4	5	3	5	17
Non-Tuberculosis	40	20	59	23	142
TOTALS	67	27	82	33	209

The following table gives further details of patients and cases who attended the Dispensary or were visited in their homes :—

	Number of Patients and Cases who attended the Dispensary (or were visited in their homes), during the Year 1935.			
	Total.	Males.	Females.	Under 15 years of age.
" Sputum Positive Cases ".....	791	477	294	20
" Negative Cases "	1,920	561	646	713
TOTALS	2,711	1,038	940	733

Cases and patients written off the Dispensary register during the year.

CASES AND PATIENTS WRITTEN OFF THE DISPENSARY REGISTER DURING THE YEAR 1935.
(First Schedule, Part A., Memo. 37/T., Revised).

DIAGNOSIS.	MALES.		FEMALES.		TOTALS.
	Over 15 yrs.	Under 15 yrs.	Over 15 yrs.	Under 15 yrs.	
Pulmonary Tuberculosis, Recovered	16	3	19	....	38
Non-Pulm. Tuberculosis, Recovered	15	9	17	8	49
Non-Tuberculosis	231	180	364	169	944
Left district, lost sight of, or will not attend Dispensary	69	13	70	18	170
TOTALS	331	205	470	195	1,201

At the end of the year the number of patients and cases on the Dispensary register was 1,830. These are tabulated below :—

NUMBER OF CASES AND PATIENTS ON DISPENSARY REGISTER AT END OF YEAR 1935.
(First Schedule, Part A., Memo. 37/T., Revised).

DIAGNOSIS.	MALES.		FEMALES.		TOTAL.
	Over 15 yrs.	Under 15 yrs.	Over 15 yrs.	Under 15 yrs.	
Pulmonary Tuberculosis (T.B. in Sputum)	424	4	261	12	701
Pulmonary Tuberculosis (no T.B. in Sputum)	249	60	188	51	548
Non-Pulmonary Tuberculosis	119	136	105	116	476
Diagnosis not completed	34	22	25	24	105
TOTALS	826	222	579	203	1,830

The two tables (pages 124A and 124B) are self-explanatory and are required by the Minister of Health under Memo. 37/T (revised).

Domiciliary Visits.—During the year I made 421 domiciliary visits to 260 patients and 161 contacts, of these 99 were examined.

Relations with other Departments and Hospitals.—The closest co-operation has existed between the Tuberculosis Dispensary and all the various departments of the Health Department. Constant interchange of information and patients has taken place between the School Medical Service and the Tuberculosis Dispensary. The relation between it and the other Medical Services in the City has, as formerly, been most satisfactory. Special mention should be made of the work of the Voluntary Tuberculosis Care Council.

Voluntary Tuberculosis Care Council.—The Tuberculosis Care Council itself issues an Annual Report. This can be obtained from the Secretary, Mr. F. Girling, 17, Ellison Place, Newcastle-upon-Tyne. During 1935, 176 patients were referred to the Voluntary Tuberculosis Care Council for consideration. The assistance given was as follows :—

	Number of Patients.
Loan of bed and bedding	66
Total number of beds and bedding on loan	132
Milk	110
Outfits of clothing	81
Eggs	117
Surgical Appliances	11
Other assistance.....	44

Nurses' Visits to Patients.—769 new patients were seen and 9,577 subsequent visits made. A total of 1,797 were upon their lists on December 31st, 1935, comprising of 783 males, 600 females and 414 children. As there are four nurses constantly visiting in the City, each has approximately 449 patients upon her books. The infectious cases of pulmonary tuberculosis were visited once a month. The others at longer intervals.

X-ray Examinations.—If the diagnosis of a case is uncertain an X-ray examination gives valuable assistance. This is carried out either at the Sanatorium Pavilions, City Hospital, Walker Gate, or at Newcastle General Hospital. During the year a total of 1,273 films were taken in connection with Dispensary patients, 729 at the City Hospital, Walker Gate, and 544 at Newcastle General Hospital.

Sputum Examinations.—An effort is made to examine the sputum from every possible case and in many instances repeated examinations are necessary. 1,164 specimens of sputum were examined at the Dispensary, of these 215 contained tubercle bacilli. In addition 571 sputum examinations were carried out at the University of Durham Bacteriological Laboratory in the City, to which medical practitioners may send specimens. 47 of these were positive.

The Sanitary Inspector.—Disinfection has been carried out by the Sanitary Inspector as necessary in houses after a death, or change of address of a person suffering from pulmonary tuberculosis. Bedding and clothing have been removed and disinfected also and attention has been given to overcrowding and sanitary defects.

Notifications.—673 notifications were received during the year, but some were duplicates, so that the total number of new cases was 640, of whom 464 were certified to be suffering from "pulmonary" and 176 from "non-pulmonary" tuberculosis.

The details as regards sex and age are given in the accompanying table:—

SUMMARY OF NOTIFICATIONS DURING THE PERIOD, 1ST JANUARY TO 31ST DECEMBER, 1935.

(THE PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1930.)

AGE PERIODS.	Primary Notifications.											TOTAL.	Total Notifications (including Cases previously notified by other doctors).
	0 to 1.	1 to 5.	5 to 10.	10 to 15.	15 to 20.	20 to 25.	25 to 35.	35 to 45.	45 to 55.	55 to 65.	65 and upwards.		
Pulmonary—													
Males.....	.....	6	15	13	32	23	54	31	39	20	7	240	254
Females	1	8	21	14	37	37	53	27	11	11	4	224	232
Non-Pulmonary--													
Males.....	3	13	21	19	7	3	5	5	4	1	2	83	90
Females	3	13	29	13	11	6	4	5	3	5	1	93	97
TOTALS	7	40	86	59	87	69	116	68	57	37	14	640	673

As far as possible every notified case is visited by the nurses and urged to visit the Dispensary for examination and classification with a view to treatment.

Of the 640 cases notified, 546 attended the Dispensary and 26 others were visited in their homes by the Health Visitors in the course of the year. The names of the patients certified to have died from tuberculosis, but not previously notified, are entered in the notification register, so that if the 28 patients in this category, and 20 who died within one week of notification and were not known to the Dispensary be deducted, it will be seen that the Dispensary gets into touch with nearly all of the known cases of tuberculosis.

With reference to the 20 cases not accounted for in the above, some were living in institutions and others did not wish to be visited.

A table has been prepared to illustrate these points and also to show the nature of the institutional treatment afforded to the cases notified during 1935. 313 of the 464 patients notified as suffering from pulmonary tuberculosis were treated in beds belonging to, or controlled by the City Council, and 80 out of a total of 176 patients notified as suffering from forms of tuberculosis other than pulmonary were treated in such beds.

The number of patients dying in the year of notification is also given, and it will be seen that 142 (equal to 22.2 per cent.) of all the new cases died in the same year as they were notified.

NOTIFICATIONS OF TUBERCULOSIS DURING 1935.

Part Affected.	Notifi- cations.	Attended Dispensary	Visited by Nurse but not attended Dispensary.	Received Institutional Treatment.				Totals.	Died during the Year.
				Barras- ford Sana- torium.	Sanat- orium Pav. Walker Gate.	Stann- ington Sana- torium.	New- castle Gen. Hosp.		
Pulmonary—									
Male	240	221	3	56	114	7	....	177	43
Female	224	201	9	44	89	3	....	136	45
Non-Pulmonary—									
Male	83	57	8	....	....	4	32	36	27
Female	93	67	6	....	....	13	31	44	27
TOTALS	640	546	26	100	203	27	63	393	142

Cases re-admitted to the Sanatorium Pavilions, Walker Gate, and those transferred to Barrasford Sanatorium during the year are counted as only receiving treatment on one occasion.

During the year 227 cases (35.5 per cent. of the total) were notified by the Dispensary Medical Staff.

Practitioners were written to by the Medical Officer of Health when notification appeared to have been neglected.

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1930.
NUMBER OF CASES OF TUBERCULOSIS REMAINING ON THE NOTIFICATION
REGISTER AT THE END OF YEAR.

Year.	PULMONARY.			NON-PULMONARY.			Total Cases.
	Males.	Females.	Total.	Males.	Females.	Total.	
1925.....	855	608	1,463	340	312	652	2,115
1926.....	744	515	1,259	297	263	560	1,819
1927.....	644	441	1,085	236	204	440	1,525
1928.....	720	443	1,163	294	254	548	1,711
1929.....	744	501	1,245	319	270	589	1,834
1930.....	737	495	1,232	316	264	580	1,812
1931.....	767	501	1,268	298	251	549	1,817
1932.....	801	513	1,314	292	240	532	1,846
1933.....	795	531	1,326	294	270	564	1,890
1934.....	792	538	1,330	292	237	529	1,859
1935.....	799	569	1,368	283	236	519	1,887

Deaths.—There were 303 deaths from tuberculosis of Newcastle-upon-Tyne residents. 240 pulmonary and 63 non-pulmonary, giving a death rate per 1,000 population—

	Number of Deaths.	Death Rate per 1,000 Population.
Pulmonary Tuberculosis	240	0.82
Non-Pulmonary	63	0.22
All forms of Tuberculosis	<u>303</u>	<u>1.04</u>

Page 43A in the Report of the Medical Officer of Health gives further particulars of deaths from tuberculosis.

Of the 240 persons who died from pulmonary tuberculosis 92.5 per cent. were known to the Dispensary staff, 214 having visited the Dispensary and an additional 8 having been attended in their homes by the visiting nurses.

47.6 per cent. of the persons who died from " non-pulmonary " tuberculosis were attended at or from the Dispensary. This is much lower than the pulmonary cases; the main reason being that 31.7 per cent. of the non-pulmonary cases were not notified before death.

Of 240 deaths from pulmonary tuberculosis the diagnosis was verified bacteriologically in 188 instances, *i.e.*, 78.3 per cent.

Three other Dispensary patients who were known to be suffering from pulmonary tuberculosis, and in whose sputum tubercle bacilli had been found, died during the year. The cause of death being registered as: bronchitis and myocardial degeneration, 1; broncho pneumonia, 1; cerebral haemorrhage, 1.

Duration of Illness.—Whenever possible, in pulmonary cases, enquiry was made as to the length of time the deceased had been ill, and the average duration of illness was found to be 43.8 months. As in previous years, important differences were discovered when age and sex were considered, the figures being 53.3 months for adult males, 33.6 months for adult females and 9 months for those below 15 years of age (both sexes).

The period between notification and death was, as one would expect, longer in the adult males than in the adult females and children, but averaged 32.3 months for all cases.

24.5 per cent. of the patients had either not been notified prior to death (3.3 per cent.) or died within 3 months of notification (21.2 per cent.)

Further details and comparative figures for previous years are submitted in the following table:—

RETURN OF DEATHS FROM PULMONARY TUBERCULOSIS OCCURRING IN:—

	Deaths which occurred in these years.									
	Average for 1913-17.	Average for 1918-22.	Average for 1923-27.	Average for 1928-32.	1933	1934	1935.			Total
							M.	F.	CHD	
Persons not notified	43	51	33	23	17	25	6	2	..	8
" notified under 1 mth.	35	47	50	38	29	33	14	6	3	23
" between 1 and 3 "	94	48	44	45	24	22	10	13	4	27
" between 3 and 6 "	53	30	38	36	26	36	12	13	5	30
Total under 6 months	226	183	166	140	96	116	42	34	12	88
Persons notified between—										
6 and 12 months	47	46	40	36	31	32	13	9	..	22
" 12 and 18 "	28	21	25	22	27	18	13	11	..	24
" 18 and 24 "	15	15	17	17	17	15	7	9	..	16
" 2 and 3 years	20	18	22	21	25	24	14	11	..	25
" over 3 years	21	47	53	59	66	75	50	15	..	65
TOTALS	357	331	324	296	262	280	139	89	12	240

The figures for non-pulmonary forms of tuberculosis show that in 20 instances out of 63 deaths, the disease had not been notified prior to death; 3 of the 8 fatal unnotified cases of pulmonary tuberculosis, and 13 of the 20 fatal unnotified cases of non-pulmonary tuberculosis, died in hospitals; included in the 13 "other forms" were 8 cases of tuberculosis meningitis.

Family History.—In 78 instances amongst the 231 cases of pulmonary tuberculosis known to the Dispensary who had died during the year, *i.e.*, in 34 per cent., there was a history that some near relation was suffering from, or had died of pulmonary tuberculosis. The figures were 30.4 per cent. for males and 38.5 cent. for females.

House Accommodation.—The home conditions of the working classes are intimately associated with occupation and family history as predisposing to tuberculosis. The numbers of rooms in the dwellings occupied by the above 231 persons were as follows :—

Rooms in Dwelling.	1	2	3	4	More than 4	Common Lodging Houses.	Not Known.	Total.
Deaths	28	52	49	46	39	6	11	231

As regards the type of house occupied, 99 were flats, 52 tenements, 63 self-contained, 6 were common lodging houses, and in 11 cases the particulars were not known.

It is noteworthy that of the 220 patients suffering from pulmonary tuberculosis who attended the Dispensary and died in 1935, 206, or 94 per cent., had received institutional treatment, on one or more occasions. This is a high percentage and shows what a large proportion of the cases visiting the Dispensary avail themselves of the accommodation provided.

INSTITUTIONAL TREATMENT.

Approximately 76 beds were provided at Barrasford Sanatorium for Newcastle-upon-Tyne patients suffering from pulmonary tuberculosis and 136 hospital beds at the Sanatorium Pavilions, City Hospital for Infectious Diseases, Walker Gate; 60 beds at Newcastle General Hospital for the treatment of non-pulmonary tuberculosis, and 30 beds at Stannington Sanatorium for children for both surgical and medical cases.

Barrasford Sanatorium.—The report of the Medical Superintendent of Barrasford Sanatorium, which will be found under a separate heading, contains details and statistics of Newcastle patients treated in that Institution.

Sanatorium Pavilions, City Hospital, Walker Gate.—485 patients were admitted (289 males and 196 females) and included 47 transferred from Newcastle General Hospital who were found to be suffering from pulmonary tuberculosis.

Details of the number of patients admitted and discharged are given in the accompanying table :—

PATIENTS WHO RECEIVED TREATMENT IN THE SANATORIUM PAVILIONS, WALKER GATE, DURING THE YEAR 1935.

		Sex	In Institution on 1st January, 1935.	Admitted during the Year.	Discharged during the Year.	Died in Institution during the Year.	In Institution on 31st Dec., 1935.
Number of Patients.	Adults	M.	47	203	144	53	53
	Do.	F.	28	118	105	20	21
	Children....	M.	....	8	4	1	3
	Do.	F.	4	15	9	1	9
Observation Cases.	Adults	M.	13	66	62	14	3
	Do.	F.	6	42	37	8	3
	Children....	M.	1	12	12	1	....
	Do.	F.	3	21	19	3	2
TOTALS.....	....	....	102	485	392	101	94

N.B.—30 patients were re-admitted and are counted as 60 admissions.

Of the 156 patients discharged who had been under observation 80 were found to be suffering from tuberculosis. The total number of days of those who received treatment was 38,786, giving an average length of stay as 79 days.

101 patients died in the Institution ; the conditions of the other patients on discharge is given in the table below :—

	Males.	Females.	Total.
Improved	180	134	314
Without Improvement	42	36	78
Died in Hospital	69	32	101
TOTALS	291	202	493

Many of those discharged "improved" were fit for light work; 43 were transferred to Barrasford Sanatorium and 1 to Stannington Sanatorium. 12 patients were sent to the Newcastle General Hospital for surgical treatment.

Treatment has been on Sanatorium lines, modified to some extent in view of the type of patient; the essentials are the same, however, namely, rest and good food under satisfactory hygienic conditions, with exercise graduated to the patient's tolerance.

X-ray Examinations.—During the year 1,292 thoracic films were taken. These included 729 Dispensary patients, 334 inmates of the Sanatorium Pavilions, 92 patients from the City Hospital for Infectious Diseases, 89 in connection with artificial pneumothorax treatment and 48 nurses and maids belonging to the staff of the Hospital. In addition, 1,050 routine screen examinations were made.

Artificial Pneumothorax.—There were 42 initial inductions of artificial pneumothorax and 1,532 refills performed at the Sanatorium Pavilions, City Hospital, Walker Gate, during the year. Since the year 1922, 357 patients have received this form of treatment.

From 30th May, 1922, to the 31st December, 1933, 238 cases of Artificial Pneumothorax were attempted. Of these, 127 were successful and 111 were failures.

A failure indicates that the induction was not possible because of adherent pleura or that it was impossible to maintain the pneumothorax for more than three months.

Of the 238 cases at the present time there remain 70 alive.

33.8 per cent. of patients in which the pneumothorax had been successful and 24.3 per cent. of those in which it had not been successful are alive, showing that the treatment improves the outlook of the tuberculosis patient.

It must be remembered that many of these 238 patients were very ill at the commencement of the treatment and in some instances it was done with the full knowledge that cure was impossible, but with the object of prolonging life.

Further statistical details of these cases are available at the Dispensary if they are required.

Sanoerysin.—This was administered in 2 cases.

Lipiodol has been used to assist with diagnosis in 2 cases.

NEWCASTLE GENERAL HOSPITAL.

107 patients were admitted (59 males and 48 females). Details are given in the following table :—

PATIENTS SUFFERING FROM NON-PULMONARY TUBERCULOSIS WHO RECEIVED TREATMENT IN NEWCASTLE GENERAL HOSPITAL DURING THE YEAR 1935.

	Sex	In Institution on 1st Jan., 1935.	Admitted.	Discharged.	Died in Institution.	In Institution on 31st Dec., 1935.
Pulmonary.... Adults	M.	4	3	3	....	4
Do. Do.	F.	1	2	3	....	....
Non-Pulmonary Do.	M.	17	38	30	7	18
Do. Do.	F.	13	28	25	6	10
Do. Children	M.	17	18	10	6	19
Do. Do.	F.	9	18	14	5	8
TOTALS.....		61	107	85	24	59

The results of the treatment received are given in the table below :—

	Males.	Females.	Children.	Totals.
Improved	29	24	20	73
Without Improvement	4	4	4	12
Died in Hospital	7	6	11	24
TOTALS	40	34	35	109

The total number of days of those who received treatment was 22,746, giving an average length of stay of 209 days.

Thoracic Surgery.—The Chest Clinic, under G. Mason, Esq., F.R.C.S., at Newcastle General Hospital, has continued to operate upon cases as and when necessary.

One case of artificial pneumothorax had cauterisation of adhesions performed; one case of bronchiectasis had a lobectomy carried out and three cases of pulmonary tuberculosis have had a thoracoplasty done.

All these patients are well and improving at the present time.

STANNINGTON CHILDREN'S SANATORIUM.

The 30 beds maintained in this Institution for the treatment of Newcastle-upon-Tyne patients were kept fully occupied throughout the year and 57 children completed treatment. The details appear below :—

CHILDREN WHO RECEIVED TREATMENT IN STANNINGTON SANATORIUM
DURING YEAR 1935.

	In Sanatorium on 1st Jan., 1935.	Admitted during the Year.	Persons who completed Treatment during the year.			In Sanatorium on 31st Dec., 1935.
			Number	Total Number of Days.	Average length of stay in Days.	
Pulmonary Males	6	13	11	3,444	313	8
Do. Females	11	16	20	3,946	197	7
Non-Pulm. Males	8	13	16	3,530	221	5
Do. Females	5	15	10	1,664	166	10
TOTALS.....	30	57	57	12,584	221	30

In every case except two benefit accrued to the patient, as is shown in the following returns :—

	Males.	Females.	Total.
Disease quiescent	9	22	31
Improved	18	6	24
Without Improvement .....	.....	2	2
TOTALS	27	30	57

No action has been taken under the Public Health Act of 1925 (compulsory removal of patients to hospital) or under the Public Health Prevention of Tuberculosis Regulations, 1925, dealing with milk.

I wish to acknowledge the loyal support and interest of my staff.

Yours faithfully,

GEORGE HURRELL, M.D., D.P.H.,

Tuberculosis Medical Officer.

Tuberculosis Dispensary,

91, New Bridge Street,

Newcastle upon Tyne, 2,

18th April, 1936.

BARRASFORD SANATORIUM.

Report of the Medical Superintendent.

TO THE MEDICAL OFFICER OF HEALTH.

SIR,

I beg to submit a report on the work at Barrasford Sanatorium during the year 1935.

General.—The Sanatorium is situated 25 miles by road from Newcastle upon Tyne to the west by north of the City. It is reached by road in well under the hour, and by train in 52 minutes to Barrasford Station, from where the journey is completed in about 15 minutes by motor vehicle. The building stands at a height of about 600 feet above sea level, and faces south. A plantation of fir trees runs down the east boundary of the grounds, whilst on other sides there is heather and open moorland.

The optimum number of patients accommodated is 95, with which number a few single rooms are available on the ground floor for sick patients.

This number of beds is in excess of those required at present for Newcastle cases alone, and some of the surplus beds are rented to neighbouring local authorities as follows :—

Gateshead Corporation	10 beds for male cases.
West Hartlepool Corporation ...	6 beds—3 for each sex.
Tynemouth Corporation.....	2 beds for female cases.

For a short period during 1935, Tynemouth Corporation cases occupied 4 beds.

The appointment of an assistant resident medical officer was first made during the year, and Dr. Hazel I. Ashford took up the duties in April, 1935. Her assistance has facilitated the working of the institution to a great degree and has allowed of additional work of much usefulness to be undertaken.

During the year the laying out of the grounds around the Nurses' Hostel has been completed, and the appearances in front of the west end improved immeasurably by the sowing of grass and the planting of shrubs.

Amongst other work completed was the macadamising of a further length of the roads around the Sanatorium, and although much remains to be done, steady progress has been made in this work year by year of late.

X-Ray Plant.—The original plant laid down in 1923 is still in use, but it is understood that it is likely to be replaced in due course by a more modern set.

Each patient has had a radiograph taken on admission to the Sanatorium and during treatment when it seemed that useful information would be produced by further films. With additional medical staff, the radiographical work has been undertaken more intensively than previously, and during the year 364 films were completed and the interpretations entered up in the patients' notes. All artificial pneumothorax cases are "screened" as a routine, and the screenings numbered 684, and the appearances were reproduced by diagram in the patients' records.

Dental Clinic.—The majority of patients have some carious teeth, and a smaller number have such a number decayed, together with infected gums, as to be incompatible with good health. An attempt is made to improve the state of the mouth in all cases in which the above conditions are present. Clinics are held each fortnight, when treatment is in the hands of Mr. G. Hutchinson, L.D.S.

During 1935 the following work was completed :—

Extractions	244
Fillings	51
Temporary fillings	25
Scalings	35
Dressings	4
Attention to dentures.....	17
Examinations	15

The total attendances numbered 360.

Occupational Therapy.—No change has been made in this phase of sanatorium routine, which is of the greatest value to the person undergoing a treatment which is often prolonged, and from the very nature of the surroundings apt to be tedious and monotonous, especially to town dwellers. Occupational therapy offers to patients something practical and constructive, to occupy some of their time. It is applicable both to the more robust type of patient who has completed the long walks, and those who through their disability are unable to walk far and on whose hands time is likely to hang heavily.

It is divided into two main types, the one is the following of crafts, and the other is woodwork combined with suitable sorts of estate work. The former is carried out in workshops where the patients are instructed by a handicrafts instructor (Mr. J. A. Caughey). The crafts are leather, raffia and cane work, rug and basket making, poker work, and the making of other articles requiring concentration and care.

The standard of the finished articles is remarkably good, and the bulk of the goods made are sold and there is very little wastage of material. The attendances numbered 6,595; the women worked 5,936 hours and the men 7,254.

The woodworking section is housed in a separate workshop under the control of the joiner (Mr. F. C. Gerdes). Men only are employed, and as far as possible patients who normally earn their livings by the use of tools are given the opportunity of keeping in practice whilst under treatment. Here suitable woodwork is undertaken, and patients also are able to help in repairs and improvements about the estate.

In addition, men patients assist the gardener in suitable weather, in the maintenance and development of the garden and grounds.

Admissions.—The total number of cases admitted to the Sanatorium during 1935 was 195, 37 more than in the previous year. The number of Newcastle admissions was 145, as against 120 in 1934. Gateshead Corporation had 27, Tynemouth Corporation had 4, and West Hartlepool Corporation had 17. There were 2 admissions of private cases.

Of the 195 admitted cases, 20 had been in the Sanatorium previously, and were disposed as follows :—

1 case had been admitted twice previously.....	in 1932 and 1935
1 " " " " " "	in 1926 and 1928
1 " " " " " "	in 1933 and 1934
1 of the re-admitted cases was first admitted in.....	1924
1 " " " " " "	1925
2 " " " were " "	1926
1 " " " was " "	1928
1 " " " " " "	1929
1 " " " " " "	1930
3 " " " were " "	1932
4 " " " " " "	1933
3 " " " " " "	1934

Of these 20 re-admitted cases, 17 had had at some time or other tubercle bacilli demonstrated in the sputum, and in 3 cases tubercle bacilli had never been seen.

ADMISSIONS TO THE SANATORIUM DURING 1935.

Authority.	Male.	Female.	Total.
*Newcastle Corporation	83	62	145
Gateshead Corporation	27	....	27
Tynemouth Corporation	1	3	4
West Hartlepool Corporation	10	7	17
Private	2	....	2
	123	72	195
During 1934.....	104	54	158
During 1933.....	108	51	159
During 1932.....	114	54	168
During 1931.....	125	60	185
During 1930.....	121	65	186
During 1929.....	124	54	178

*One patient was admitted twice during the year and is counted as 2 admissions.

NOTE.—Figures relating to the years 1921-1928 are given in the Report for the year 1932.

Discharges.—There were 205 discharges during 1935, as compared with 144 in 1934. No case died in the Sanatorium during the year. There were no summary dismissals during the year, and the total of these is only 7 since 1921 when the Corporation acquired the Sanatorium.

DISCHARGES FROM THE SANATORIUM DURING 1935.

Authority.	Male.	Female.	Total.
Newcastle Corporation	92	60	152
Gateshead Corporation	28	....	28
Tynemouth Corporation	1	3	4
West Hartlepool Corporation	14	5	19
Private	2	....	2
	137	68	205
During 1934.....	97	47	144
During 1933.....	108	57	165
During 1932.....	111	60	171
During 1931.....	124	60	184
During 1930.....	131	59	190
During 1929.....	115	54	169

NOTE.—Figures relating to the years 1921-1928 are given in the Report for the year 1932.

SUMMARY OF MOVEMENTS OF PATIENTS DURING 1935.

Authority.	In residence night of Dec. 31st, 1934.	Admitted during 1935.	Discharged during 1935.	In residence night of Dec. 31st, 1935.
Newcastle Corporation	66	145	152	59
Gateshead Corporation	10	27	28	9
Tynemouth Corporation	2	4	4	2
West Hartlepool Corporation	7	17	19	5
Private .....	....	2	2	....
	85	195	205	75

Details in connection with Discharged Cases.

The particulars of patients and the results of their treatment, which are set out later, are based on the completed cases discharged. Of these 205, 14 exhibited no definite signs or symptoms of clinical tuberculosis, and were discharged as soon as this fact was established, and are excluded from the particulars and results of treatment which follow. The details (*c* to *f*) are, therefore, based on the 191 cases of definite tuberculosis.

(a) Length of stay—

The average duration of treatment of all cases was 174.89 days.

Excluding the 14 non-tuberculous cases, 182.46 days.

The 152 Newcastle cases alone averaged 186.98 days.

The longest stay was 672 days, the shortest 2 days.

(b) Beds occupied and patient days—

Average number of beds occupied, 86.84. 51.86 by males, and 34.95 by females.

Total number of patient days was 31,697. 18,930 male, and 12,767 female.

Below is given an analysis of the average number of beds occupied, and the number of patient days.

Authority.	Average Beds occupied daily.	Patient Days.
Newcastle Corporation	67.62	24,684
Gateshead Corporation	9.84	3,592
Tynemouth Corporation.....	2.52	922
West Hartlepool Corporation	5.94	2,171
Private .....	.89	328

(c) Social Status—

	Male.	Female.	Total.
Single	68	47	115
Married	52	16	68
Widowers.....	5	.....	5
Widows .....	.....	3	3
TOTAL	125	66	191

(d) Age—

Years.	Male.	Female.	Total.
16-20	18	18	36
20-25	29	17	46
25-30	15	18	33
30-35	17	7	24
35-40	14	3	17
40-45	14	2	16
45-50	9	1	10
50-55	6	.....	6
55-60 .....	.....	.....	.....
60-65	3	.....	3
TOTAL	125	66	191

(e) Occupations of 125 Male Patients—

Engineering and metal workers	18
Clerks	14
Motor drivers and mechanics	7
Labourers	6
Grocers.....	6
Seamen (Mercantile)	3
Ex-naval ratings	3
Electrical engineers	3
Salesmen	3
Railway workers (outside)	2
Barmen	2
Ex-soldiers.....	2
Commercial travellers	2
Printing workers	2
Draughtsmen	2
Chemists	2
Miners	2
Watchmakers	2
Joiners	2
Boot repairers	2

and one each of the following :—photographer, insurance inspector, angle-smith's striker, inspector to water company, builder's foreman, electrician, telephone worker, page boy, postman, butcher, warehouseman, shop assistant, carter, plasterer, machinist, cashier, school teacher, tailor's presser, baker, jeweller, telegraphist, blacksmith, bricklayer, hawker, bank clerk, canvasser, bottle blower, accountant, bicycle mechanic, sawyer, plumber, journalist, publican, coal hawker, shipwright, docker, dock labourer, and 3 had no occupation. Total 125.

(f) Occupations of 66 Female Patients—

Housewives	18
Domestic workers at home	13
Domestic servants	4
Shop assistants.....	4
Tailoresses	3
Tracers	2
Schoolgirls	2
Barmaids	2
Clerks	2
Bakeresses	2
Hairdressers	2

and one each of the following :—printer's feeder, book-keeper, leather worker, tobacco stripper, nurse, buffet maid, bank machinist, waitress, office cleaner, milliner, drug packer, ticket agent. Total 66.

Diagnosis.

The diagnosis of pulmonary tuberculosis was confirmed bacteriologically either before admission or during residence in 127 cases (95 males and 32 females). 47 patients (28 males and 19 females) were apparently without tubercle bacilli in the sputum, and 17 patients (2 males and 15 females) said they had no expectoration; making 64 cases of tuberculosis in whose sputa tubercle bacilli had never been demonstrated. The clinical findings in all sputum negative cases can be divided as follows:—

Not suffering from clinical tuberculosis	14
Definite pleural tuberculosis without evidence of lung tuberculosis	18
Definite physical signs and X-ray evidence of lung tuberculosis without demonstrable bacilli.....	46

In the cases of the 46 patients in the last group, the radiographs all showed appearances suggesting the presence of deposit in the pulmonary situation for which tuberculosis shows a predilection. 241 sputum examinations were made in connection with these 46 cases, and as 17 had no sputum the average examinations in those that had was 8 each. 1,289 sputum examinations were made at the Sanatorium during the year; of these 491 were positive as regards the presence of tubercle bacilli, and 798 were negative. 961 complete examinations of the chest were made during the year, together with routine examinations of the larynx and urine on admission of the patient, and subsequently when necessary.

During the year 14 cases were discharged as not suffering from pulmonary tuberculosis, and the diagnosis in those cases were as follows:—

Bronchiectasis.....	4
New growth of lung.....	3
Trauma of chest.....	1
Pulmonary fibrosis of unknown origin.....	1
Chronic bronchitis and emphysema.....	1
No pathological condition detected.....	3
Diagnosis not established—transferred to hospital	1

These 14 non-tuberculosis cases were included in the 17 patients sent for observation for the purpose of making a diagnosis. One was found to be suffering from pleural tuberculosis, and two from pulmonary tuberculosis—inactive.

The period of observation for the purpose of diagnosis is set out below :—

	Under 1 week.		1 to 2 weeks.		2 to 4 weeks.		More than 4 weeks.	
	M.	F.	M.	F.	M.	F.	M.	F.
Tuberculous	1	....	1	....	....	....	....	1
Non-tuberculous	....	....	5	....	4	1	3	1
Doubtful.....	....	....	....	....	....	....	....	....

Lipiodol was employed when necessary in diagnosis, and 7 lipiodol bronchograms were produced. Of these, 4 showed the characteristic appearances of bronchiectasis, and 1 those of bronchial stenosis, which was proved by biopsy to be due to bronchial carcinoma. In 2 other cases the lipiodol showed no abnormal appearances.

A second case of new growth of lung died soon after discharge with signs which left no doubt as to the diagnosis. One other case of new growth of lung was diagnosed. A female case continued to show a raised temperature for a long period, but there were no signs to suggest pulmonary tuberculosis, nor could any other diagnosis be established. She was transferred to the Newcastle General Hospital.

Treatment.

Rest, diet, graduated exercise going on to occupation, are the points regarded as most important in routine treatment. It is essential, however, on admission and subsequently, to be certain that the bodily temperature is ranging normally. Unless there is any cause other than lung tuberculosis, a raised temperature is usually an indication of active disease, and rest in bed is essential until it has been reduced by bedrest alone or in conjunction with some form of special treatment.

99 of the 191 definite cases of tuberculosis were found to have normal temperatures during the whole of their residence, whilst 92 patients were feverish at some time or other of their treatment in the Sanatorium.

Afebrile throughout Treatment.	Febrile on Admission, Afebrile on Discharge.	Febrile Intermittently.	Febrile throughout Treatment.	Afebrile on Admission, Febrile on Discharge.
99	42	33	15	2

Lung collapse or artificial pneumothorax was used to a considerable extent as in previous years. It continues to give effective results in a large group of cases, which would probably not be attained by any other means. It controls symptoms and restores working capacity in successful cases, and is by far the most useful and widely used form of special treatment at the command of the tuberculosis worker. The rest provided by successful lung collapse allows stable healing to occur if the treatment is kept up sufficiently long.

38 of the 191 cases discharged in 1935 were considered to be suitable for treatment by lung collapse, but in 10 of them changes in the chest in the course of the disease on the chosen side, prevented the treatment from being carried out.

Of the 28 discharged cases treated, 12 were right sided and 16 were left. In addition to these, 17 cases had had an artificial pneumothorax induced before admission, bringing the number treated during the year to 45 (20 right, and 25 left).

In connection with all the above cases, all of whom were discharged during the year, 610 insufflations of air were performed, whilst during the year the total number of such operations was 602.

In 32 cases the induction of lung collapse seemed to be effective in controlling symptoms—in the remaining 13 the procedure was ineffective and was abandoned.

On discharge, the lung collapse is maintained by the Tuberculosis Medical Officer in most cases.

Since 1922, 417 cases have been treated by lung collapse at Barrasford, exclusive of those cases where it was induced before admission, which total 68.

Phrenic Crushing.—In one case a phrenic crushing was performed (at the Newcastle General Hospital) to terminate an artificial pneumothorax where an effusion had caused considerable basal thickening.

Gold Salts.—15 cases were treated with gold salts, but in 10 cases the use of the drug was given up on account of reactions which developed early in the course of treatment; in 3 cases there was albuminuria, in 4 gastric-intestinal disturbance, and other manifestations in 3.

Of the 5 cases who survived an adequate dosage of between 4 and 5 grams without reaction of note, 3 cases seemed to benefit in that tubercle bacilli previously present in the sputum disappeared. In the remaining 2 cases there was no apparent effect.

It has been observed at this Sanatorium in the past, that reactions have arisen so frequently and so early in the course of treatment with gold salts, regardless of attention to the size of the doses and the intervals, that the use of this drug is being employed less and less.

Ultra Violet Radiation.—No case was treated by ultra violet radiation during the year.

Results of Treatment.

It is unfortunate that in the great proportion of cases with tubercle bacille in the sputum, there is little direct relation between the apparent improvement in general health after a period of Sanatorium treatment, and the state of the disease in the lung. In the absence of treatment by lung collapse, it is not an exaggeration to say that the majority of working class cases with tubercle bacilli in the sputum, remain sputum positive cases all their days.

A case of pulmonary tuberculosis with tubercle bacilli in the sputum is a source of danger to others, and although in the appearance of good health, is in constant danger of spread of disease and relapse.

There is little doubt that spread of disease from one part of the lung to another, or to the other lung, is due to the projection by cough of bacilli to other parts of the lungs.

It is for this reason that the outlook in cases without bacilli in the sputum is usually so much better. In sputum positive cases the most significant evidence of improvement is the abolition of sputum, or the sustained disappearance of bacilli from such sputum as remains. As stated previously, 64 of the 191 cases diagnosed as definitely suffering from tuberculosis of the lungs or pleura, had no sputum or were without tubercle bacilli in the sputum after repeated search. The remaining 127 cases had bacilli demonstrated in the sputum either before admission or after. Of these 127 T.B. + cases, 53 became negative before discharge, the remaining 74 having bacilli in the sputum up to leaving. A case is regarded as T.B. — who has had absence of sputum for a month, or where serial examinations of sputum have been negative for at least this period.

It is interesting to compare the sputum results of the 32 cases where an effective artificial pneumothorax was obtained, with those of the 23 cases in which an artificial pneumothorax was desirable but could not be induced, or only partially induced and abandoned.

	32 effective A.P. Cases.	23 comparable cases with no A.P.
Sputum T.B. — throughout	4	3
„ T.B. + „ „	10	16
„ T.B. + on admission, } T.B. — on discharge .. }	16	4
Stayed less than 1 month	2	....

With effective artificial pneumothorax, 16 of 26 T.B. + cases (= 61%) lost their bacilli, whilst in comparable cases without artificial pneumothorax, only 4 of 20 T.B. + cases (= 20%) lost their bacilli. The numbers of cases are very small, but they tend to show the value of artificial pneumothorax in treatment.

During the latter part of the year the estimation of the blood sedimentation rate has been carried out regularly as a routine. The Westergren method, employing a 200 m.m. tube, has been used. It would be an immense advantage if the technique of this estimation could be standardised, so that the work of different observers could be compared, and it is hoped that the Joint Tuberculosis Council, who are considering the matter, will succeed in doing this.

323 estimations have been made during the year since June.

The following are the weight records of the 191 definite cases of tuberculosis and the 14 non-tuberculous cases.

		Gained up to 7 lbs.	Gained 7 to 14 lbs.	Gained over 14 lbs.	Remained station- ary.	Lost up to 7 lbs.	Lost over 7 lbs.	Not weighed on dis- charge.	Tot
191 definite cases.	{ Gained weight...	57	71	43	....	....	....	....	171
	{ Lost weight .....	....	....	....	....	11	4	....	15
	{ Stationary .....	....	....	....	3	....	....	....	3
	{ Not weighed on discharge .....	....	....	....	....	....	....	2	2
Total		57	71	43	3	11	4	2	191
14 non- tuber- culous cases.	{ Gained weight...	4	5	2	....	....	....	....	11
	{ Lost weight .....	....	....	....	....	3	....	....	3
	{ Stationary .....	....	....	....	....	....	....	....	....
	{ Not weighed on discharge .....	....	....	....	....	....	....	....	....
Total		4	5	2	....	3	....	....	14

Under the classification of cases introduced by the Ministry of Health, patients suffering from pulmonary tuberculosis are divided into :—

Class T.B. Minus, or those cases in which tubercle bacilli have never been demonstrated in the sputum, and,

Class T.B. Plus, viz., cases in which tubercle bacilli have at any time been found.

The latter class is further divided into three groups :—

Group 1.—Cases with slight constitutional disturbance, if any, and in which the obvious physical signs are of very limited extent.

Group 3.—Cases with profound systemic disturbance or constitutional deterioration, with marked impairment of function, and with little or no prospect of recovery.

Group 2.—All cases which cannot be placed in Groups 1 or 3.

To indicate results of treatment, the following terms are laid down :—

“ Quiescent.”—Cases which have no symptoms of tuberculosis and no signs of tuberculous disease, except such as are compatible with a completely healed lesion, and in which the sputum, if present, is free from tubercle bacilli.

“ Arrested.”—In pulmonary cases the term should be applied only to cases which have been “ quiescent ” for a period of at least 2 years.

“ Improved.”—Cases short of “ quiescent,” in which the general health is fair and the symptoms of tuberculosis have materially diminished.

“ No Material Improvement.”—All other patients who are alive.

When considered in these terms, the results of treatment of the 191 cases of lung or pleural tuberculosis can be set out as follows :—

T.B. Minus.			
	M.	F.	Total.
Quiescent	12	26	38
Improved	17	8	25
No Material Improvement..	1	....	1
T.B. Plus.			
	M.	F.	Total.
G.1 { Quiescent .....	....	....	....
{ Improved	1	....	1
{ No Material Improvement..	....	....	....
G.2 { Quiescent	1	....	1
{ Improved	60	21	81
{ No Material Improvement..	10	8	18
G.3 { Quiescent .....	....	....	....
{ Improved	6	1	7
{ No Material Improvement..	17	2	19

The number of T.B. minus cases which improved to the stage of quiescence is made up of cases of pleural tuberculosis which had no evidence of disease in the lung itself.

It is pleasing to record the great assistance rendered by Dr. Ashford in the clinical work, and to acknowledge the administrative efficiency and help of the Matron (Miss F. Baguley, A.R.R.C.) The loyalty and work of the rest of the staff, both nursing and lay, is very much appreciated.

Yours faithfully,

CECIL G. R. GOODWIN, L.R.C.P., M.R.C.S.,

Medical Superintendent.

*Barrasford Sanatorium,
Northumberland,*

28th February, 1936.

**REPORT OF THE
MEDICAL SUPERINTENDENT,
NEWCASTLE GENERAL HOSPITAL.**

**V.—GENERAL DISEASES
HOME AND HOSPITAL.**

**DOMICILIARY MEDICAL SERVICE,
NEWCASTLE GENERAL HOSPITAL.**

NEWCASTLE GENERAL HOSPITAL
A - GENERAL DISEASES
HOME AND HOSPITAL

NEWCASTLE GENERAL HOSPITAL
CONSULTANT MEDICAL SERVICE

DOMICILIARY MEDICAL SERVICES.

This work was originally carried on by District Medical Officers, each of whom was in charge of a specified district in the City, and gave both medical attendance and medicines. These officers were remunerated by the payment of a salary and bonus.

By resolution of the City Council dated 20th September, 1933, an "open choice" method for the provision of Domiciliary Medical Services was introduced into six of the Medical Relief Districts as from 8th November, 1933.

An additional district which became vacant on the 1st September, 1934, was subsequently added to the six already referred to, and the seven districts are now designated the Joint Medical Relief District.

It is proposed to add to the Joint Medical Relief District any other districts which may become vacant.

Domiciliary Medical Services in the Joint Medical Relief District are given by a panel of medical practitioners who have contracted with the City Council to provide the required services. Medicines, etc., for patients in the area of the Joint Medical Relief District are supplied from two municipal dispensaries which have been established at the Newcastle General Hospital and the Newcastle Dispensary, New Bridge Street.

The following table gives particulars of the work carried out during 1935 of the remaining District Medical Officers whose areas are not included in the Joint Medical Relief District.

District No.	District Medical Officer.	Number of Cases Treated.	Attendances by the M.O. at the Homes of the Patients.	Attendances by the Patients at the M.O.'s Surgery.
7	Dr. W. Simpson	1,227	3,892	1,887
8	Dr. R. W. Nevin.....	2,475	2,976	3,901
10	Dr. T. J. Ryan.....	1,498	3,946	5,871

NEWCASTLE GENERAL HOSPITAL.

TO THE MEDICAL OFFICER OF HEALTH.

SIR,

It affords me much pleasure to submit for your consideration this report on the year's work in the **Newcastle General Hospital**.

Again I have to report an increased activity in all departments of the Hospital, the admissions having increased by 701 and the discharges by 660. As will be seen by a study of the figures accompanying this report the increase in the number of female patients, already noted, has been maintained and the increased cases have been chiefly surgical ones, so that the additional accommodation taken over in 1934 has been very necessary.

During the year 2,441 letters were sent out to doctors, of these 772 were medical and 1,669 surgical. Expressions of appreciation of this service are very frequently received.

The Sunday Morning Lectures were continued, attendance at these being very well maintained, an outstanding feature being the relative large number of practitioners coming from a distance.

Arrangements were completed with the College Authorities to receive Undergraduates in their final year for teaching in certain selected subjects. The course extended over five weeks with two meetings per week. The average attendance was approximately 25, and the subjects dealt with were "The Senile State," "Advanced Carcinoma," "Surgical Tuberculosis" and "Psychological Medicine." Advantage was also taken of studying the work of the Diabetic and Pernicious Anæmia Clinic. I have had no expression of appreciation or otherwise as regards the course, but, judging from the attitude of the Students attending, it was appreciated.

Cases of pulmonary tuberculosis continue to be admitted to Hospital, many of them not recognised as such, but, working in close co-operation with the Tuberculosis Medical Officer, they are, without much loss of time, transferred to the City Hospital. Medical practitioners would not appear to be aware of the fact that these cases should be sent direct to the City Hospital, after communicating with the Tuberculosis Dispensary. The Relieving Officers, however, are aware of the fact and usually seek advice before issuing an admission order.

Thoracic surgery has continued during the year and the opinion expressed last year, as regards the hospital outlook in such cases, has been fully borne out. The recommendation of the Committee to appoint a thoracic surgeon is undoubtedly a step in the right direction, in the first place on account of the patient and in the second on account of the Hospital. It very much increases the scope and the position of any hospital.

This year's work in the Maternity Ward has again been a record one, 273 cases having been treated, compared with 225 in 1934. The new Labour Ward with the new equipment has very much facilitated the work, but I wish to report that it is going to be difficult to undertake many more cases with the present accommodation, and, judging from the numbers dealt with this year already, the 1935 record will again be exceeded. A scheme is at present in hand to double the number of beds and it will be necessary that this should be expedited.

The number of patients admitted to the Mental Wards was a record one, viz., 418. It was found necessary to certify 24.01% of the males and 41.8% of the females, the remainder being discharged or transferred to other departments.

The question of the transfer of the Mental Wards to the Hospital is still under discussion and I would again take this opportunity of expressing my opinion as to the advantage to be gained by such a change.

The most prevalent infectious diseases were dysentery, measles and whooping cough, the first of these causing considerable worry before being eradicated. A number of cases also occurred in the adult wards and several members of the nursing staff were infected. It emphasizes the absolute necessity of a quarantine block into which children can be admitted. A small number of post encephalitis lethargica cases were admitted and a number remain permanently in the Hospital and in the Institution.

The number of operations performed in the theatres was 2,722, an increase in the year of 646. This means that the theatres are being used almost to the fullest possible extent and throws a very heavy task on the nursing staff. Many of the brain and chest cases involve very lengthy operations and also require special anæsthesia. This has necessitated making more and more use of the special anæsthetists, so that the appointment of a resident

anæsthetist is to be recommended. The number of patients admitted for treatment following miscarriage was higher than last year and I have no doubt that in many cases the miscarriage had been induced by artificial means, although in no case was it possible to obtain any definite evidence. All the patients made good recoveries.

The introduction of shadowless lamps in the operating theatres will facilitate the work of the surgeons.

The great increase in the number of patients admitted for dental treatment is creating a serious problem, which will have to be dealt with in the very near future. The majority of these come through the Relieving Officer on medical certificates. Owing to the shortage of accommodation only a limited number of them can be admitted each week. On account of the anæsthetic it is necessary to keep them in one night, so that beds which could be more usefully employed are taken up. It is also undesirable to have them in general wards beside other patients. The number dealt with each week is not sufficient to clear off the number desiring admission, the result being the creating of a steadily growing "waiting list." In a word the arrangements for dental treatment, as at present carried out, are most unsatisfactory, and, in my opinion, we should either do it properly or leave it alone.

Continued use of the radio-therm during the year has given results sufficient to justify its continued operation. Without entering into details as regards individual diseases it is sufficient to say that the results obtained have been very encouraging. That being so, the apparatus has been re-constructed on a permanent basis and has been installed in a suitable room, the result being a department which is an asset to the Hospital.

It will be noted that 183 more children were admitted last year, the incidence of disease being very similar. Four children suffering from malignant disease were admitted. The number of children passing through Louisville Convalescent Home was 89, a reduction of 35 on the previous year.

The number of paying patients admitted for treatment continues to increase, as will be seen from the following returns for the last six years :—

Year.	Number of Paying Patients.	Year.	Number of Paying Patients.
1930.....	67	1933.....	124
1931.....	63	1934.....	170
1932.....	105	1935.....	218

The provision of accommodation of a more private nature, at an increased fee, is at present under discussion, and, as I have already stated, would be likely to fill an urgent need.

The two Ward Laboratories on the medical side are in the course of construction and should prove valuable adjuncts in the scientific treatment of the patients.

The Diabetic and Pernicious Anæmia Clinics continue to be taken advantage of by an increasing number of patients.

As will be seen from the statistical return accompanying this report a notable increase of work has been done in the X-Ray and Massage Departments and also in the Laboratory. As regards the massage this has probably reached its highest point for one person, so that the employment of additional help is urgently needed.

The structural alterations in the Medical Wards have now been completed and the only thing now required is the provision of a number of side wards. I think that it is possible that these could be found by making certain alterations to the existing day rooms. These latter are being used less and less as time goes on as day rooms, so that they would be usefully employed as side wards.

The outstanding structural alteration during the year was the conversion of the Old Hospital Kitchen into offices for the Steward and clerical staff. The result has been highly satisfactory and all that is required now is the gradual acquisition of some necessary office furniture. I would like to take this opportunity of mentioning the extra work devolving on the clerical staff on account of the great increase in the number of patients admitted and treated. It has involved many late hours, but I have not had a single complaint from one of the clerks.

Another department in which there has been a great increase in the amount of work is the dispensary. Naturally, the increased number of patients admitted, the increased number of operations and the Diabetic and Pernicious Anæmia Clinics all throw extra work on the dispensary staff. The dispensing for domiciliary patients alone requires practically the whole time of a dispenser. During the year the number of these patients was 26,071, and the number of Diabetic Clinic patients with prescriptions 750.

The arrangements for the admission of patients belonging to other Local Authorities has been functioning fairly well, particularly as regards those requiring special treatment. It would be an

advantage, however, if the process could be expedited. As will be seen from the return accompanying this report there has been a decided increase in the numbers admitted, particularly as regards Gateshead Public Assistance Committee and Northumberland and Durham County Councils. Of the cases admitted to the Mental Wards 14.5% did not belong to the City and were accounted for the most part by patients sent from the Royal Victoria Infirmary and the Princess Mary Maternity Hospital.

During the year it was necessary to admit 47 nurses to the sick wards for treatment, and of these ten were under treatment on more than one occasion. As usual the most prevalent sickness was septic throat, and again with a few exceptions occurred in Probationers during the first six months of their training. The outstanding illnesses were as follows :—

Scarlet Fever	3	Measles	1
Dysentery.....	2	Appendicitis.....	1
Diphtheria	1	Throats	14
Erysipelas.....	1		

An excessive number of septic fingers seemed to have occurred, one of these being very serious, due to an extent to her going home and not returning. It has been found necessary to amputate the right index finger.

An improvement has been made in the accommodation for the Resident Medical Staff, and steps are at present in progress to increase that for the Nursing Staff.

I would like to take this opportunity of thanking you and your staff for their valuable co-operation, and also to place on record my appreciation of the work done by the Hospital Staff during what still continues to be a very strenuous and difficult period, although it is possible to look back with a certain amount of satisfaction and to feel that something has been accomplished.

ADMISSIONS AND DISCHARGES, ETC., FOR THE YEAR
ENDED 31st DECEMBER, 1935.

	<i>Males.</i>	<i>Females.</i>	<i>Children.</i>	<i>Total.</i>
Admissions	2,227	2,720	1,298	6,245
Discharges	2,238	2,684	1,293	6,215
Of the Discharges—Cured			1,873	
Relieved.....			3,402	
Died.....			940	
			<hr/>	
			Total.....	6,215
				<hr/>

(There were also 23 deaths in the Elswick Grange.)

TABLE OF AGES OF PATIENTS TREATED.

Men over 60.....	741
Women over 60.....	598
Men under 60.....	1,491
Women under 60.....	2,092
Boys, 3-16.....	327
Girls, 3-16.....	300
Children under 3.....	666
	<hr/>
	6,215
	<hr/>

TRANSFERS FROM OTHER HOSPITALS, HOMES AND UNIONS.

Royal Victoria Infirmary	41
Cottage Homes.....	2
Gateshead P.A.C.....	23
Shotley Bridge Colony	2
South Shields	5
Prudhoe Hall Colony.....	3
Northumberland County Council.....	32
West Riding of Yorks.....	1
Durham County Council.....	59
Tynemouth	5
Middlesbrough	1
Sunderland	4
Cumberland	1
Birkenhead	1
Gaintord Homes	1
PRIVATE CASES ADMITTED	218
INQUESTS HELD :—	
Hospital cases (34); Elswick Grange cases (11)	45

OPERATIONS

FOR YEAR ENDED 31ST DECEMBER, 1935.

Abdominal	570
Gynæcological	243
Thoracic	122
Orthopædic	159
Genito-Urinary	179
Nose, Throat, Ear and Eye.....	182
Blood Vessels	84
Rectum	11
Brain and Special Cases.....	95
Skin and Subcutaneous Tissues.....	411
Examination under anæsthetic	146
Examination without anæsthetic	42
Teeth	457
Neck	5
Radium Cases	4
Teeth extracted under local anæsthetic.....	12
	<hr/>
Total.....	2,722
	<hr/>
Major Operations.....	1,639
Minor Operations.....	614
Teeth	469
	<hr/>
	2,722
	<hr/>

RETURN OF CASES TREATED IN MASSAGE DEPARTMENT.

	<i>Massage.</i>	<i>Medical Electricity.</i>	<i>Sunlight.</i>	<i>Total.</i>
Treatments	2,989	1,677	1,980	6,646

X-RAY DEPARTMENT.

Cases X-rayed.....	1,980	Exposures	3,562
" " T.B. Dispensary	546	" T.B. Dispensary....	546
" " Babies' Hospital	91	" Babies' Hospital ..	91
" " Wrists (Dr. Spinks)	114	" Wrists (Dr. Spinks)	114
<hr/>		<hr/>	
Total cases X-rayed....	2,731	Total exposures.....	4,313
	<hr/>		<hr/>

RETURN OF MENTAL CASES, 1935.

	<i>Men.</i>	<i>Women.</i>	<i>Total.</i>
Under treatment, January 1st, 1935....	4	7	11
Admitted during 1935	225	182	407
	<hr/>	<hr/>	<hr/>
	229	189	418
	<hr/>	<hr/>	<hr/>
Discharged during 1935 :—			
Cured.....	27	3	30
Improved	41	40	81
I.S.Q.	5	4	9
Transferred to :—			
Mental Hospital	53	79	132
General Hospital	59	35	94
A. and I. Wards	5	8	13
House (Able-bodied)	6	7	13
" (Chronic)	20	2	22
Deaths	6	5	11
Under treatment, December 31st, 1935	7	6	13
	<hr/>	<hr/>	<hr/>
	229	189	418
	<hr/>	<hr/>	<hr/>

PATHOLOGICAL DEPARTMENT.

SPECIMENS EXAMINED :—

Sputum	418
Fæces	368
Blood Sugar.....	123
Blood Urea	422
Blood Cell Counts.....	163
Blood Vandenberg.....	4
Gastric Analyses	1,094
G.C. Smears	74
Pus and Effusions	103
Cerebro-Spinal Fluid	103
Complete Urinary examinations.....	1,517
Urea Concentration tests.....	13
Blood Sedimentation tests.....	5
	<hr/>
Total.....	4,407
	<hr/>
Diabetic Clinic Urines.....	851
Blood Examinations (P.A. Clinics).....	83
G.C. Smears	214
	<hr/>
Total.....	1,148
	<hr/>

TOTAL REPORTS FOR HOSPITAL LABORATORY 5,555.

BY ARRANGEMENT WITH OTHER LABORATORIES :—

Wassermann Reactions	605
Bacteriological Examinations	300
Histological Sections	256
	<hr/>
Total.....	1,161

ADULTS.—CLASSIFIED LIST OF DISEASES TREATED.

MEDICAL.

RESPIRATORY.

Bronchitis	158	Gangrene of Lung.....	1
Asthma	49	Broncho pneumonia	69
Pleurisy.....	20	Lobar pneumonia.....	66
Bronchiectasis.....	23	Hypostatic pneumonia	2
Bronchitis and Emphysema	20	Others	3

DIGESTIVE.

Gastritis	47	Dyspepsia.....	18
Gastric Ulcer	38	Gastro-Enteritis	19
Constipation	30	Cirrhosis of Liver	6
Duodenal Ulcer.....	13	Jaundice	2
Colitis	9	Others	14

NERVOUS.

Cerebral Hæmorrhage.....	109	Neuritis	7
Cerebral Thrombosis	45	Neurasthenia	67
Functional	31	General Paralysis	26
Disseminated Sclerosis.....	11	Mental.....	42
Epilepsy	30	Neuralgia	8
Locomotor Ataxy	28	Others	19
Paralysis Agitans	4		

DEFICIENCY DISEASE.

Scurvy	1
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INFECTIOUS DISEASES.

Encephalitis Lethargica	11	Diphtheria.....	1
Influenza	14	Paratyphoid.....	1
Erysipelas	4	Cerebro-Spinal Meningitis	1
Dysentery	9	Malaria	2
Scarlet Fever	3		

CIRCULATORY.

Valvular Disease of Heart	135	Aneurism	7
Myocarditis	114	Pernicious Anæmia	31
Pericarditis	2	Leukæmia	5
Arterio-sclerosis	58	Secondary Anæmia	14
Acute Endocarditis	8	Senility	54
Hyperpyæsia	35	Debility	36
Angina Pectoris	5	Others	5
Coronary Thrombosis	12		

RHEUMATIC.

Acute Rheumatism	34	Sciatica	19
Chronic Rheumatism	33	Acute Arthritis	9
Rheumatoid Arthritis	23	Chorea.....	3
Lumbago	10	Others	5
Gout	3		

EXCRETORY.

Acute Nephritis	16	Uraemia.....	8
Chronic Nephritis	44	Cystitis	5
Pyelitis.....	25	Others	12

INTERNAL SECRETORY.

Myxœdema	10	Diabetes Mellitus	54
Goitre	5	Others	4

FOR OBSERVATION.

Cases for Observation.....	21
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TUBERCULOSIS.

Pulmonary.....	60	Non-Pulmonary.....	77
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ADULTS.—CLASSIFIED LIST OF DISEASES TREATED.
SURGICAL.

Carcinoma	248	Other Diseases, Male Organs	8
Rodent Ulcer	3	Septic conditions.....	48
Sarcoma	5	Ulcers.....	33
Hernia	136	Cellulitis	20
Appendicitis	179	Abscess	51
Cholecystitis	78	Gangrene	21
Gastric Ulcer	50	Mastitis.....	27
Duodenal Ulcer.....	36	Carbuncle	23
Intestinal Obstruction	14	Varix.....	8
Diverticulitis	3	Phlebitis	4
Jejunal Ulcer	1	Hæmorrhoids.....	66
Brain	56	Empyema.....	12
Gastroptosis	2	Diseases of Bone	10
Peritonitis.....	1	Diseases of Rectum	32
Plastic cases	16	Cystitis	18
Renal Calculus	20	Displaced Cartilage.....	18
Floating Kidney	1	Bursitis	17
Perinephritic Abscess	2	Deformities	21
Fractures	91	Post operative	3
Dislocations	7	Simple Tumours	18
Injuries, Wounds, etc.	66	Glands.....	15
Burns	12	Teeth	261
Prostate	50	Toxic Goitre	6
Hydrocele	8	Osteo Arthritis	10
Varicocele	4	Intestinal Colic	12
Undescended Testicle	3	For Observation	35
Urethral Stricture	9	Others	24
Retention of urine	4		

PREGNANCY AND DISEASES OF WOMEN.

Pregnancy	288	Ovarian Cyst	9
Albuminuria of Pregnancy	7	Salpingitis	10
Hyperemesis Gravidarum	10	Uterine Fibroid	14
Pyelitis of Pregnancy	14	Pelvic Cellulitis	4
Placenta Prævia	3	Diseases of Uterus	80
Retained Placenta	2	Disorders of Menstruation	25
Miscarriage	121	Nursing.....	4
Puerperal Pyrexia.....	2	Menopause	9
Ectopic Pregnancy	3	Others	29
Puerperal Sepsis	9		

DISEASES OF THE SKIN.

Dermatitis	27	Scabies	6
Psoriasis	2	Impetigo	6
Erythema	2	Eczema	21
Sycosis	2	Others	11

VENEREAL DISEASES.

Syphilis	7	Gon. Rheumatism	2
Gonorrhœa	19	Late Syphilis	16
Congenital Syphilis	7	Soft Sore.....	1

DISEASES OF THE EYE.

Conjunctivitis	1	Others	6
Corneal Ulcer	1		

DISEASES OF THROAT, NOSE AND EAR.

Tonsillitis	25	Laryngitis	7
Tonsils and Adenoids	73	Mastoid	9
Otitis Media	7	Others	8
Deflected Septum	3		

CHILDREN.—CLASSIFIED LIST OF DISEASES TREATED.

MEDICAL.

Bronchitis	77	Stomatitis	5
Pleurisy.....	9	Constipation	2
Asthma	3	Catarrhal Jaundice	1
Lobar Pneumonia.....	54	Diabetes Mellitus	2
Broncho Pneumonia	39	Epilepsy	9
Bronchiectasis	4	Prematurity	14
Endocarditis.....	9	Marasmus	4
Acute Nephritis	6	Rickets	4
Acute Rheumatism	19	Nursing	328
Chorea	26	For Observation	24
Gastro-Enteritis	42	Others	36

SKIN.

Impetigo	81	Tinea	7
Scabies	22	Verminous	1
Dermatitis	6	Congenital Syphilis	3
Eczema	9	Others	8
Pemphigus	2		

DISEASES OF THE EYE.

Conjunctivitis	2	Blepharitis	2
Keratitis	1		

DISEASES OF THE THROAT, NOSE AND EAR.

Otitis Media	13	Tonsils and Adenoids	50
Tonsillitis	5	Others	6
Mastoid	14		

SURGICAL.

Appendicitis	44	Malignant Disease	4
Hernia	6	Abscess	32
Intussusception.....	2	Septic conditions	16
Intestinal Obstruction	1	Cellulitis	3
Empyema	9	Deformities	7
Enlarged Glands	6	Osteomyelitis	11
Fractures	6	Phimosi s	3
Brain Tumours	11	Teeth	9
Burns and Scalds	5	Others	14
Injuries, Wounds, etc.	23		

INFECTIOUS.

Scarlet Fever	7	Meningitis	4
Influenza	2	Erysipelas	3
Pertussis	12	Dysentery	34
Measles	16	Diphtheria.....	7
Acute Anterior Poliomyelitis.....	2	Encephalitis Lethargica	1
Varicella.....	7		

TUBERCULOSIS.

Pulmonary.....	8	Non-Pulmonary.....	35
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GEO. P. HARLAN, M.D.,

*Medical Superintendent.**Newcastle General Hospital,**28th February, 1936.***MAINTENANCE IN OTHER INSTITUTIONS.**

Nine persons were maintained in various special institutions in different parts of the country during the year. The details are as follows :—

Institution.	M.	F.	Type of Case.
Home for Epileptics, Maghull	*2	1	Epileptic.
St. Elizabeth's School for Epileptics, Much Hadham .....	....	1	Epileptic.
St. Vincent's Hospital for the Dying, Liverpool .....	....	1	Advanced Phthisis.
St. John's Institution for the Deaf and Dumb, Boston Spa .....	....	1	Blind, Deaf and Dumb.
St. John's Home, Birmingham .....	....	1	Deformity.
Hospital of St. John of God, Scorton.....	2	....	Cripples.
TOTAL	4	5	

* 1 Case admitted 17th April, 1935.

**REPORTS OF THE VETERINARY OFFICER
AND INSPECTOR OF PROVISIONS,
AND OF THE INSPECTOR UNDER THE FOOD AND
DRUGS ACTS (CHIEF SANITARY INSPECTOR).**

VI.—FOOD.

**BOVINE TUBERCULOSIS.
INSPECTION OF MEAT AND PROVISIONS.
INSPECTION OF FOOD AND DRUGS.**

REPORTS OF THE DEPARTMENT OF AGRICULTURE

AND INSPECTOR OF PATENTS

AS OF THE INSPECTION UNDER THE FOOD AND

DRUG ACTS (1906) (GENERAL INVESTIGATION)

REPORTS OF THE DEPARTMENT OF AGRICULTURE

AND INSPECTOR OF PATENTS

AS OF THE INSPECTION UNDER THE FOOD AND

DRUG ACTS (1906) (GENERAL INVESTIGATION)

VI—FOOD.

BOVINE TUBERCULOSIS

INSPECTION OF MEAT AND BROTHERHOOD

INSPECTION OF FOOD AND DRUGS

**BOVINE TUBERCULOSIS,
AND THE INSPECTION OF MEAT
AND PROVISIONS
AND FOOD AND DRUGS.**

TUBERCULOUS MILK.

During the year 378 samples of milk were taken for bacteriological examination, 13 of which were reported by the Bacteriologist to contain tubercle bacilli. The positive samples were from the supplies of five different farms, four of which were situated in the County of Northumberland, and one in the County of Durham.

The following table shows the percentage of milk samples found to contain tubercle bacilli during the past 16 years :—

Year.	Percentage of Samples found Tuberculous.
1920.....	6.3
1921.....	5.5
1922.....	7.0
1923.....	4.5
1924.....	3.2
1925.....	8.0
1926.....	4.0
1927.....	3.7
1928.....	3.7
1929.....	8.7
1930.....	4.2
1931.....	3.7
1932.....	1.8
1933.....	2.0
1934.....	2.6
1935 ..	3.4

NOTE :—Figures relating to the years 1907–1919 are given in the Annual Report for the year 1932.

Report of the
Veterinary Officer, Inspector of Meat, etc.

TO THE MEDICAL OFFICER OF HEALTH.

I have pleasure in submitting the following report which includes the work of inspection under the Public Health Acts during the year 1935.

Tuberculosis.

During the year, six animals, housed in registered cowsheds within the City, were found affected with one of the forms of the disease which required them to be dealt with under the Tuberculosis Order of 1925.

The animals, three of which were giving tuberculous milk, were subsequently slaughtered and the owners compensated according to the valuation before slaughter, as agreed upon by the Veterinary Officer, on behalf of the Corporation, and the owners, in accordance with the Order. Upon examination of the carcasses and internal organs, the disease in each of two cases was found to come within the category of "tuberculosis not advanced," as defined by the Order, whilst in the remaining four, the animals were found to have been suffering from "tuberculosis advanced," necessitating the condemnation and destruction of the entire carcass and organs of each as unfit for human consumption.

When the amount paid as compensation to the owners, costs for cartage and slaughtering, commission on sales, etc., were deducted from the amount obtained through the disposal of the carcasses, hides, offals, etc., together with the amount recoverable from the Ministry of Agriculture, there remained a balance of £8 5s. 5d. in favour of the Corporation on the administration of the Tuberculosis Order during the year.

In the course of milk and meat inspection within the City during the year, 1,147 animals were found on slaughter to be affected with the disease, this being an increase of 8.5 per cent. as compared with the number found diseased during the previous year.

In 929 cases some part of the carcass or internal organs of each was condemned and destroyed as diseased, whilst in the case of each of the remaining 218 animals it was found necessary, owing to the extent and distribution of the disease, to destroy the entire carcass and internal organs.

The Milk and Dairies Order of 1926.

Within the City there are 23 cow-keepers, registered as occupying 23 premises; and on the registered premises there is a total of 38 cowsheds in which are housed 504 milch cows.

During the year, 220 visits were made to the cowsheds and dairies for the purpose of inspecting the animals, buildings, conditions as to cleanliness, etc.

When the administration of new areas was taken over consequent upon the City's boundary extension during the year under report, the number of registered cow-keepers was increased from 14 to 23, and the number of cows from 223 to 504.

In addition to the six tuberculous animals previously referred to, five milch cows within the registered sheds were found suffering from mastitis and other illnesses. As with the tuberculous animals, it was found necessary in three cases, immediately the presence of disease was detected clinically, to adopt precautionary measures by excluding the milk in question from the public supply. In each case the animal was found suffering from mastitis, this being demonstrated, by microscopical examination of samples of milk drawn from each, to be due to streptococcal infection.

The Milk (Special Designations) Order of 1923.

At the end of the first quarter of the year under report the Milk Marketing Board put into operation a scheme which has for its object the inducement of cow-keepers to produce milk of Grade A standard as prescribed in the Milk (Special Designations) Order of 1923, by paying a bonus for every gallon produced under the terms of a licence granted by the local authority. Prior to the Milk Marketing Board's scheme, there were two cow-keepers within the City licensed for the production of Grade A milk.

Further, although it is an offence for any person to sell or offer or expose for sale milk as Grade A or to describe or advertise it as such unless he holds a licence for the purpose, in several instances the milk produced by cow-keepers within the City was

found, from time to time, by an examination of the herds, premises and samples of milk, to be of a standard equal to Grade A, thus enabling them to obtain a licence to dispose of it as such, had they felt so inclined. Since the scheme came into operation, however, an additional seven have been so licensed.

Before the local authority grants a licence in response to the cow-keeper's or producer's application, the necessary inquiries are completed by examining :—

- i. The dairy herd as to its fitness to produce milk of Grade A standard ;
- ii. the conditions of the premises, dairy, utensils, etc. ;
- iii. the register of animals kept ; and
- iv. the milk as to its bacterial content.

When a cow-keeper has qualified—by the condition of his cows, premises and milk—and obtained a licence, an examination of the herd, premises and samples of milk is carried out periodically for the purpose of ensuring that the milk produced is maintained at the required standard. For the purpose of licensing, the cows must be examined at least once in every three months. Within the City, however, it has long been the practice to endeavour to examine all milch cows at least once in every two months besides exercising supervision over the premises and the handling of the milk, with the view of securing cleanliness.

DISEASED COWS FOUND IN REGISTERED PREMISES WITHIN THE CITY.

Year.	No. of Cow-keepers.	No. of Registered Premises.	No. of Registered Cowsheds.	No. of Milch Cows in City.	No. of Diseased Cows.				Destroyed (under the Tuberculosis Order, 1925)*
					Tuberculosis.		Other Diseases.		
					Of Udder.	Other than Udder.	Udder.	Other than Udder.	
*1920	26	26	40	565	....	....	....	....	....
1921	25	25	38	575	....	....	....	....	....
1922	25	25	39	489	....	....	....	....	....
1923	25	25	39	484	2	....	8	....	1
1924	22	22	34	436	3	2	2	....	4
1925	21	21	33	337	9	....	1	....	4*
1926	20	20	31	410	5	2	1	3	5*
1927	18	18	29	334	2	4	2	3	6*
1928	19	19	31	308	3	1	1	3	4*
1929	19	19	30	258	4	1	1	2	4*
1930	17	17	28	251	2	3	1	4	4*
1931	16	16	27	243	4	7	1	3	9*
1932	16	16	27	246	4	2	7	3	6*
1933	16	16	27	243	1	....	5	4	1*
1934	14	14	22	223	3	2	6	4	5*
1935	23	23	38	504	3	3	3	2	6*

* Figures relating to the years 1907–1919 are given in the Annual Report for the year 1932.

Anthrax.

The City has been fortunate in remaining free from this most dangerous disease for a considerable period, for no case has been encountered since 1925 until the year under report, when an outbreak occurred involving three animals, as follows :—

On Wednesday morning, 23rd January, in response to a telephone message from a wholesale meat trader within the City to the effect that amongst live stock within his lair, some distance west of the Cattle Market, two fat cattle had been found dead, the premises were visited, when the following conditions were found to exist :—

Within the lair, besides the two dead animals there was a total of 67 cattle and 41 sheep. As the conditions presented by the dead animals (a roan heifer and a white bullock) were typically suspicious of anthrax, specimens of blood were obtained from each. All these, on microscopical examination, revealed the presence of anthrax bacilli. The lair premises were then promptly placed under movement restrictions by a Notice served upon the occupier, declaring and defining the premises as an infected place in accordance with the requirements of the Anthrax Order of 1928. During the same day, the carcass and offal of a heifer, which had originated from the same lot of cattle and had been slaughtered early in the morning, were inspected. Although the carcass appeared practically normal, it was deemed advisable as a precautionary measure to examine, microscopically, specimens of blood, etc., from the carcass and internal organs. This examination also disclosed the presence of anthrax bacilli. It was found that the three affected animals had come from a farm in Northumberland, and the Local Authority of that area was informed. The outbreak was notified to the Medical Officer of Health who promptly arranged for the necessary preventive treatment respecting the butchers who had dressed the infected carcass. The necessary information, as required by the Anthrax Order, was also forwarded to the Ministry of Agriculture and Fisheries. Further, after arranging for and supervising the removal and cremation of the two dead animals, dressed carcass, offal and other material exposed to contamination, all the premises concerned were thoroughly cleansed and disinfected. Finally, besides tracing the hide from the infected carcass to the place of destination for the purpose of its destruction being supervised,

arrangements were made for the inspection of the carcasses of the animals which had previously been in contact with the diseased animals, at their places of destination.

Within Great Britain, 386 outbreaks of the disease were confirmed, in which 443 animals were attacked, as compared with 395 outbreaks during the previous year, in which 453 animals were attacked.

INSPECTION OF MEAT AND OTHER FOODS.

The number of animals slaughtered within the City for food purposes during the year was 254,926. Of the different classes of animals comprising this total, in every instance there was an increase as compared with the previous year, *e.g.*, there were 5,863 more cattle, 2,773 more calves, 9,925 more sheep and 7,134 more pigs slaughtered, as indicated in the following table :—

ANIMALS SLAUGHTERED ON LICENSED PREMISES WITHIN THE CITY.

YEAR 1935.	1934.	1933.	1932.	1931.	
Horses	1,610	982	950	1,266	1,983
Cows 2,318	27,486	21,623	20,278	18,895	18,246
Heifers.. 14,470					
Bulls 708					
Bullocks 9,990					
Calves	7,478	4,705	3,475	2,976	2,895
Sheep	173,481	163,556	167,653	186,662	127,106
Pigs	44,871	37,737	41,281	48,642	33,160
Total Animals....	254,926	228,603	233,637	258,441	183,390

Four hundred and seventeen and one half animal carcasses, together with 3,170 lbs. of meat (excluding offal, etc.) were condemned and destroyed as being unfit for human consumption, as compared with 463 $\frac{1}{4}$ animal carcasses and 2,519 lbs. of meat condemned and destroyed during the previous year. Of the 417 $\frac{1}{2}$ carcasses, 219 $\frac{1}{2}$ were condemned on account of tuberculosis, as compared with 218 $\frac{1}{2}$ carcasses condemned on account of that disease out of the previous year's total of 463 $\frac{1}{4}$ carcasses.

Of the 44,871 pigs slaughtered, 704 were found affected with tuberculosis, which proportion—approximately 16 per 1,000—is practically the same as that of the pigs found tuberculous amongst those slaughtered during the previous year. As occurred during the previous year, the percentage of cases in which lesions of the disease were found confined to the region of the throat was high, for, out of the 704 found affected, in 593, or 84.23 per cent., were the lesions so localised.

Meat Prepared within the City for Surrounding Areas.

Besides being one of the largest live fat stock distributing centres within the country, the City has the distinction of being perhaps the largest distributing centre within the three or four northern counties of England so far as home-killed and imported meat is concerned.

Of the 253,316 cattle, sheep and pigs slaughtered during the year, approximately 71 per cent., or 179,878, were slaughtered by wholesale firms, the remaining 29 per cent. being slaughtered by retail butchers.

Of the wholesale firms supplying meat to retailers both within and outside the City, eight deal exclusively in home killed and six in imported, whilst the remaining five deal in both home killed and imported meat.

Of the whole of the meat (home killed and imported) dealt with by these wholesalers, 42 per cent. was disposed of to traders within the City and 58 per cent. to traders outside.

The 58 per cent. of meat disposed of to traders outside the City was distributed as follows :—

34 per cent., comprising home killed and imported, to.....	}	Wallsend ...	4%
		North Shields...	5%
		Gateshead ...	11%
		Jarrow ...	3%
		Hebburn ...	2%
		South Shields...	9%

24 per cent., comprising home killed and imported, to other areas, including Alnwick, Ashington, Bedlington, Darlington, Hexham, Morpeth, Sunderland, Whitley Bay, etc.

From the carcasses, etc., of animals slaughtered by the wholesalers within the City, approximately 45 tons of diseased and unsound meat were condemned and destroyed. Therefore, as 58 per cent. of these products was sent to outside districts, the consumers received some measure of protection through the City's meat inspection services inasmuch as, before distribution, approximately 26 tons, found diseased and unsound, were excluded.

It should be noted, however, that owing to slaughtering taking place in separate establishments in various parts of the City, many carcasses escape inspection. Were slaughtering confined to a municipal abattoir, this would not occur. Therefore, just as carcasses intended for consumption within the City commonly pass on to the Market without previous inspection, so will uninspected carcasses and offal from animals slaughtered within the City be included, from time to time, in the meat supplied to surrounding districts. For these reasons it will be obvious that local authorities must not relax their efforts in the direction of reasonable supervision so that, in the event of a diseased or unsound carcass having escaped inspection while in the hands of the wholesaler, it may, before reaching the consumer and while in the possession of the retailer, be detected, notwithstanding the fact that the latter had purchased it in good faith and was quite unaware of its condition.

Cattle, Calves and Pigs Slaughtered within the City. (See also previous Table).	Number of Animals found Diseased, Unsound or otherwise unfit for Human Consumption.		Number of Animals found Tuberculous.		
	Whole Carcasses Condemned.	Parts or Organs Condemned.	Whole Carcasses Condemned.	Parts or Organs Condemned.	
Year 1935.	Year 1935.				
Cows	2,318	99	118	90	97
Heifers.....	14,470	43	106	37	82
Bulls	708	7	9	6	6
Bullocks	9,990	32	65	25	42
Sex not known....	.....	.....	352	.....	49
Totals	27,486	181	650	158	276
Calves	7,478	7	19	8	1
Pigs	44,871	99	1,703	52	652

CARCASSES OF BEEF CONDEMNED WITHIN THE CITY DURING THE
PAST FIFTEEN YEARS.

Total condemned.		Numbers condemned on account of Tuberculosis.	Percentage Tuberculous.
Year.	Carcasses.	Carcasses.	Per Cent.
*1920	198	171	86.36
1921	90	78	86.66
1922	85	79	92.94
1923	69	58	84.05
1924	66	61	92.42
1925	157	130	82.80
1926	126	102	80.95
1927	123	107	86.99
1928	115	109	94.78
1929	124	118	95.16
1930	147	124	84.35
1931	117	94	80.34
1932	135	120	88.89
1933	128	116	90.62
1934	186	158	84.94
1935	182	159	87.35

NOTE.—The above refers to whole carcasses and quarters, but does not indicate the total number of animals found tuberculous, and therefore does not include those carcasses in which only the organs or parts were found diseased and condemned. See preceding table.

*Figures relating to the years 1907-1919 are given in the Annual Report for the year 1932.

Public Health (Meat) Regulations of 1924.

For the purposes of these Regulations, 6,948 visits were made to meat and provision shops, restaurants, stalls, vehicles, etc., and as a result, 30 contraventions were found requiring to be dealt with, but in no instance, after the offender's attention had been drawn to the matter, were further proceedings necessary.

INSPECTION OF CARCASSES SENT INTO THE CITY FROM OUTSIDE DISTRICTS DURING THE YEAR 1935, INCLUDING THE CARCASSES OF ANIMALS TAKEN UNDER THE TUBERCULOSIS ORDER, 1925, BY OTHER LOCAL AUTHORITIES AND SLAUGHTERED WITHIN THE CITY.

Material Examined.	Condition Found.	How Dealt with.
*11 Cow Carcasses & Organs	Tuberculosis	Carcasses and organs condemned.
*1 Cow Carcass and Organs	Normal	Passed.
*1 " "	Tuberculosis	Head, lungs, mesenteric fat and udders condemned.
*1 " "	"	Lungs, mesenteric fat and udders condemned.
*1 " "	"	Udders condemned.
*1 " "	"	Lungs, liver, mesenteric fat and udders condemned.
*1 " "	"	Head and lungs condemned.
*1 " "	Septic Pericarditis	Carcass and organs condemned.
1 Cow, 4 qrs & Organs	Tuberculosis	Head and lungs condemned.
1 Heifer, 4 qrs. and Organs	"	Head condemned.
1 Heifer, Carcass and Organs	Normal	Passed.
1 " "	Traumatism	Knee condemned.
1 Bullock Carcass and Organs	Septic Pneumonia	Lungs condemned.

* Slaughtered under the Tuberculosis Order, 1925, certificate of examination in each case being sent to the local authority concerned.

Imported Foodstuffs.

During the year, 217 vessels carrying meat and other foods from Denmark, Holland, America, Canada, Australia, Sweden and Norway, arrived at the Quayside, this being a decrease of twenty-five as compared with the number of arrivals during the previous year.

Three hundred and forty-five visits were made to the wharves and vessels alongside, 2,863 packages, containing meat, etc., being opened and examined. Regarding these visits, two were in response to official notices received from the Customs House concerning foodstuffs detained by the Customs Officials for our inspection and certification. Both before and while being dis-

charged from the vessel, it is not practicable to make more than a general survey or superficial inspection of frozen beef quarters and carcasses of mutton, but these, as well as imported meat arriving by rail within the City, are subjected to supervision and inspection within the cold storage depots and wholesale meat shops.

Caseous Lymphadenitis.

During the year, of 17,225 carcasses of mutton, comprising six separate consignments arriving at the Quayside direct from Australia, 505 were examined, two being found affected with the disease, as compared with the arrival of 38,716 Australian carcasses, comprising eight separate consignments, during the previous year, of which 927 were examined, one being found diseased.

Foreign Meat, etc., arriving by Vessel.

Salted Meat, Offals, etc. (Packages).

PORK.—45 barrels.

Offal.—1,212 feet, 1,200 maws, 539 heads, 23 tongues and 23 casings.

Frozen Meat.

BEEF.—21,862 fore and hind quarters and 14,528 crops.

(Packages).—1,213 boneless and 270 shin beef.

Offal (Packages).—10,259 tails, 1,406 kidneys, 1,403 livers, 753 hearts, 425 skirts, 278 cheeks, 100 (mixed) offals, 40 tripes, 39 tongues, and 5 sweetbreads.

VEAL.—93 packages.

Offal (Packages).—35 kidneys, 27 hearts, 25 livers, 4 tongues and 1 tail.

MUTTON AND LAMB.—17,225 carcasses and 214 hind quarters.

Offal (Packages).—75 livers, 50 hearts, 10 tongues and 7 sweetbreads.

PORK.—5,368 carcasses. (Packages).—396 loins.

Offal (Packages).—13 hearts.

Total Weight of Meat and Other Foodstuffs Condemned.

The approximate total weight of meat and other foodstuffs condemned during the year was 85 tons 19 cwts. 2 qrs. 3 lbs., comprising :—

	tons.	cwts.	qrs.	lbs.
Beef, Mutton, Veal, Pork	64	4	0	20
Offal and Provisions.....	21	15	1	11
	85	19	2	3

Microscopical Examinations.

During the year, microscopical examinations were carried out as an aid to, or confirmation of, diagnosis in connection with 32 cases under investigation.

The material examined comprised specimens of milk, blood, pus, tissues and swabs taken from the throats of cows. Of the samples of milk examined for tuberculosis, three were found positive and seven negative ; and of the throat swabs examined for the same disease, four were positive and two negative. Of the specimens of blood and other tissues examined for anthrax three were found positive and ten negative. Of material other than milk or throat swabs examined for tuberculosis and other conditions, one was found positive ; and of the specimens of milk examined for organisms other than tuberculosis, two were found positive.

MICROSCOPICAL EXAMINATIONS.

	Specimens Examined.	Result of Examination.	
		Positive.	Negative.
Samples of Milk examined for Tuberculosis	10	3	7
Throat Swabs examined for Tuberculosis..	6	4	2
Smears made from Tissues and examined for Tuberculosis and other Organisms....	1	1	....
Blood examined for Anthrax	13	3	10
Milk examined for Organisms other than Tuberculosis	2	2	....
	32	13	19

Slaughterhouses.

During the year, 74 separate premises were licensed for slaughtering purposes, this being one fewer than during the previous year. Two licensed slaughterhouses in the Stepney group, together with one previously used for gut scraping, were reconstructed and are being used as a tripery. Further, owing to the extension of the City's boundary, an additional slaughterhouse is now included in the list of those within the City.

Of the 74 licensed premises, 12 were vacant during part of the year and 22 were occupied by wholesale firms, the remainder being occupied by retail butchers.

Licensed Slaughtermen.

Under the Slaughter of Animals Act, 1933, slaughtermen's licences were granted during the year to 12 persons whose applications were approved by the Health Committee.

Rats and Mice (Destruction) Act, 1919.

During the year, 189 visits were made to premises in respect of 142 complaints received, 247 premises, including others than those complained of, being inspected and dealt with.

Of the 247 separate premises, rats were found infesting 167, the remaining 80 being found free from any evidence of infestation. As will be seen in the following table, the premises most frequently invaded by the pests were dwellings and shops, these accounting for a little more than 85 per cent. of the whole.

As pointed out in previous reports, many occupiers have the impression that it is only necessary to lay poison bait to solve the problem, no attention being given to the question of prevention. The rat problem, so far as buildings are concerned, is one that invariably involves the question of construction and repair. With the view of obtaining successful results and efficient administration, it has always been the practice—within the City, at least—to place before the public, so far as possible, the best known means of prevention, besides educating the individual occupiers as to the advantages of rendering premises independent, structurally, one from the other, and of operating simultaneously.

RATS AND MICE (DESTRUCTION) ACT, 1919.

Complaints received	142
Number of premises inspected and dealt with in connection with the above	247
Number of premises infested with rats.....	167
Number of visits	189
KIND OF PREMISES DEALT WITH.	
Dwellings.....	183
Shops	29
Warehouses	6
Workshops	4
Public Houses	3
Restaurants	3
Offices.....	3
Stables	3
Waste ground	3
Storeyards	2
Playing fields	2
Halls	2
Hospital	1
School	1
Sewage Farm	1
Allotments	1
Total.....	247

CONTRAVENTIONS.

Offence.	No. of Cases.	Action taken, etc.
<i>Newcastle upon Tyne Slaughterhouse Byelaws.</i>		
Dirty Slaughterhouses, etc.	6	Offenders cautioned.
<i>Public Health (Meat) Regulations of 1924.</i>		
Meat conveyed in dirty vehicles	11	Offenders cautioned.
Blowing mutton carcasses with the breath	6	Offenders cautioned.
Gut scraping in slaughterhouses	5	Offenders cautioned.
Meat improperly covered during transport	3	Offenders cautioned.
Meat exposed outside shop windows...	2	Offenders cautioned.
Meat carried by persons not wearing head covering.....	2	Offenders cautioned.
Dirty meat wrappers.....	1	Offender cautioned.

THOMAS PARKER, F.R.C.V.S.,

*Veterinary Officer.**Town Hall,**Newcastle upon Tyne,**5th March, 1936.*

Samples taken for Analysis during the Year 1935.

ARTICLE.	No. of Samples obtained.			Result of Analysis.		Action Taken.			REMARKS.
	Formal.	Informal.	Total.	Genuine.	Not Genuine.	Prosecutions.	Convictions.	Cases Dismissed.	
New Milk.....	743	13	756	743	13	5	3	2	In the remaining 8 cases (of the 13 samples "not genuine") the vendors were cautioned by order of the Health Committee. The sample "not genuine" was deficient in non-fatty solids 2.6%, respecting which the vendor was cautioned.
Skimmed Milk	10	.....	10	9	1	.....	.....	.....
Condensed Milk	9	9	9	.....	.....	.....	.....
Cream (Tinned and Fresh).....	11	11	11	.....	.....	.....	.....
Butter	17	17	17	.....	.....	.....	.....
Margarine	11	11	11	.....	.....	.....	.....
Cocoa	1	1	1	.....	.....	.....	.....
Tea	6	6	6	.....	.....	.....	.....
Coffee (including "mixtures").....	6	6	6	.....	.....	.....	.....
Sugar (including "Icing Sugar").....	11	11	11	.....	.....	.....	.....
Baking Powder	1	1	1	.....	.....	.....	.....
"Custard," Custard Powder and Blancmange Powder	1	4	5	4	1	The sample "not genuine" ("Custard") was purchased informally and consisted entirely of substance usually known as "Custard Powder." A subsequent (formal) sample being genuine, no further action was taken.
Jams, Jellies and Marmalade	9	9	9	.....	.....	.....	.....
Honey	3	3	3	.....	.....	.....	.....
Dried Fruits (including Currants, Raisins, Cherries and Prunes)	27	27	27	.....	.....	.....	.....
Candied Peel	11	11	11	.....	.....	.....	.....
Ground Almonds	5	5	5	.....	.....	.....	.....
Mince-meat	4	4	4	.....	.....	.....	.....
Vinegar	2	2	2	.....	.....	.....	.....
Mustard	1	1	1	.....	.....	.....	.....
Sauce and Pickles	3	3	3	.....	.....	.....	.....
Suet and Frying Fat	2	2	2	.....	.....	.....	.....
Meat, Fish, and/or Vegetable Pastes, "Rolls," etc.	9	9	9	.....	.....	.....	.....
Bacon	1	1	1	.....	.....	.....	.....
Tripe	6	6	6	.....	.....	.....	.....
Sausage	8	16	24	13	11	4	2	2	Of the samples "not genuine," 10 contained preservative (sulphur dioxide) either undeclared or in excess of the limit allowed, and 1 contained no preservative, though "declared" to do so. (See also page 186.)
"Groats" and Patent Barley.....	2	2	2	.....	.....	.....	.....
"Vitacup" (Food Beverage)	1	1	1	.....	.....	.....	.....
Confectionery ("Italian Cream")	3	3	3	.....	.....	.....	.....
Oil of Almonds	1	1	1	.....	.....	.....	.....
Table Jellies (Gelatine)	11	11	11	.....	.....	.....	.....
Wine Essence	1	1	1	.....	.....	.....	.....
Wines (Non-alcoholic)	5	5	5	.....	.....	.....	.....
Whisky	4	4	4	.....	.....	.....	.....
Rum	3	3	3	.....	.....	.....	.....
Gin	2	2	2	.....	.....	.....	.....
Sherry	1	1	1	.....	.....	.....	.....
Household Drugs:— (Including Gregory Powder, Compound Liquorice Powder, Cascara Sagrada, Syrup of Figs, Castor Oil, Camphorated Oil, Syrup of Rhubarb, Tincture of Rhubarb, Paregoric, Syrup of Squills, Glycerine, Cream of Tartar, Tartaric Acid, Liquid Paraffin, Chemical Food, Com- position Essence, Crushed Lin- seed, Oil of Almonds, Eucalypt- us Oil, Sulphur, Zinc, and Boracic Ointments.)	1	61	62	60	2	The 2 samples "not genuine" (Cream of Tartar), purchased informally and formally respectively, from the same vendor, consisted entirely of Rochelle Salt. The article, having been supplied by mistake, the case was met by a caution.
Cod Liver Oil and Halibut Oil, with Malt ("Extracts," etc.)	10	10	10	.....	.....	.....	.....
TOTALS.....	763	294	1,057*	1,029	28	9	5	4	Amount of Penalties:—£15 10s. 0d.†

* Includes 204 samples taken in course of delivery (at railway stations, hospitals, etc.).

† Including £1 0s. 0d. in respect of "Offences other than Adulteration." (See page 187.)

FOOD AND DRUGS ADULTERATION, Etc.

Total Samples.—The number of samples of foods and drugs obtained for analysis during the year was 1,057, as against 1,142 in 1934. They were of a varied nature, and included most articles in common use in the household. Of this number 599 were submitted to the Public Analyst, the remainder being samples of milk which were tested in the office and found to be genuine.

Informal Samples.—294 informal samples were taken, as against 196 last year. Legal proceedings cannot be taken if these samples are found not genuine; this method is, however, a useful guide to the general quality of foodstuffs sold in any particular district. Any adulterated samples are followed up by "formal" or "official" samples, so that legal proceedings may be taken if necessary.

Milk Samples.—As usual, the greatest number of samples obtained has been of milk, one of the most important articles of food, and one which unfortunately lends itself to fraudulent practices. 756 samples were taken, and of these 13 were certified to be below the minimal limits fixed by the "Sale of Milk Regulations, 1901." Of this number 7 were deficient in non-fatty solids, 5 in milk-fat and 1 in both. The percentage of deficiency in fat varied from 1.0 to 33.3 (the average being 8.86), and of solids not fat from 1.1 to 25.2 (average 7.96).

"Appeal to Cow" Samples.—In no case was it found necessary to visit a farm for the purpose of obtaining samples direct from the cows.

Notwithstanding the large number of samples (1,057) of over 70 different articles of foods and drugs, it was only necessary to institute legal proceedings in 9 cases.

Samples not Genuine, etc.—The percentage of all samples not genuine to the total number taken was 2.65 (compared with 2.89 for the previous year). The percentage of non-genuine milk samples to the total number of milk samples obtained was 1.72 (as against 2.44 in 1934). The total number of samples taken was at the rate of 3.63 per 1,000 of the population (estimated) of the City for the year 1935. This is in excess of the number suggested by the Ministry of Agriculture (viz., 3 per 1,000 of the population).

Margarine.—11 samples of margarine were purchased and analysed. All were genuine, free from preservatives, and in compliance with the requirements of the Act in all other respects.

Margarine Warehouses.—60 visits were made to the registered margarine warehouses in the City. The packages were examined as regards proper marking, and all found to comply with the Act.

Preservatives in Food.—Of the total samples obtained for analysis (1,057), only 35 contained preservative, the quantity being in most instances well within the limit allowed.

Preservatives in Food.—19 samples of sausage contained preservative (sulphur dioxide), the quantity in 16 instances being within the permissible limit. Of the 3 remaining samples, 2 (informal and formal, respectively, from one vendor) were met by a caution. In the other instance the vendor was summoned and fined 20/- in respect of the excess quantity and 10/- for failing to declare the presence of the preservative.

Three other vendors were summoned in respect of failure to give the necessary declaration; one fined 20/-, two cases dismissed.

One sample contained no preservative, though declared to do so; no further action was taken in this case.

In the 16 samples other than sausage, the quantities of preservative were well within the permissible limits.

OFFENCES OTHER THAN ADULTERATION.

Offence.	No. of Cases.	Action Taken, etc.
<i>Milk and Dairies (Consolidation) Act, 1915 ; Section 6.—</i> Selling milk from vehicles and/or vessels not properly inscribed with the names and addresses of the vendors.	3	Offenders cautioned.
<i>Milk and Dairies (Amendment) Act, 1922 ; Section 2.</i> <i>Milk and Dairies Order, 1926 ; Section 6.—</i> Selling milk without being registered for the purpose.	2	Offenders cautioned.
<i>The Milk (Special Designations) Order, 1923 ; Third Schedule, Part I, A (3).—</i> Paper caps attached to bottles containing "Certified" milk not marked with the actual date of production (but with that of the day following).	1	Offender cautioned.
<i>The Milk (Special (Designations) Order, 1923 ; Third Schedule, Part iii. (7).—</i> "Grade A (Tuberculin Tested)" milk consigned from dairy where produced in unsealed cans.	1	Offender cautioned.
<i>Milk and Dairies Order, 1926 ; Section 28.—</i> Milk vessels not properly cleansed before being returned.	8	In 7 instances offenders cautioned, and in 1 summoned and fined 20/-.
<i>Section 30.—</i> Selling skimmed milk from vessels not properly marked with the words "Skimmed Milk."	2	Offenders cautioned.
TOTALS	17	Amount of Penalties, 20/-

The Public Health (Condensed Milk) Regulations, 1923-1927.

Nine samples of condensed milk were obtained. All were genuine and in compliance with the Regulations.

Artificial Cream Act, 1929.

Two applications for registration under the above Act were received during the year. Both were granted.

BACTERIAL IMPURITY OF MILK AND WATER.

Milk.—347 samples were examined by the Bacteriologist for the presence of tubercle bacilli, which were found in 15, or 4.3 per cent. This is an increase on last year's figures, which were 10 and 2.6 per cent., respectively.

Action taken is described on page 167.

154 samples were examined for evidence of excremental pollution, which was found to an undesirable degree in 21, or 13.6 per cent. In every case the Medical Officer of Health of the district from which the milk originated was informed, with the result that steps were taken to secure more cleanly methods of production.

Cleanliness of Milk Churns.—During the year 19,156 churns awaiting return to the farmers were examined at the various railway stations in the City. Of this number, 32 (from 8 dealers) were found in an uncleansed condition. In one instance (concerning 12 churns) the offender was summoned and fined 20/-. The other cases were met by cautions.

In addition, 4,392 churns in course of transit through the City were examined ; all were found to have been rinsed as required.

Water.—Samples were collected from all parts of the City and at the water works, and examined for the presence of *bacillus coli*.

The results are described on page 115.

PREMISES ON WHICH FOOD IS PREPARED.

Bakehouses.—There are in the City 264 bakehouses, of which 30 are factories (*i.e.*, places in which mechanical power is used), and 234 are workshops.

The number of "domestic" bakehouses, or private dwelling houses in which the occupier makes bread for sale amongst the neighbours, is 78, a decrease of 14 as compared with 1934. Domestic bakehouses are under the same supervision as when the business is carried on in an ordinary bakehouse, and, generally speaking, are kept in a cleanly state. It is seldom that any contraventions are found.

Restaurant Kitchens (which include hotels, cafés, and dining rooms). The number on the register is 115. They are regularly inspected. 12 notices were served during the year (principally for lime-washing, which was overdue). These were all complied with without reporting to the Health Committee for statutory action. Strict supervision is exercised over these places in order to ensure the preparation of food under the most hygienic conditions.

Fried Fish Shops.—The number of these is 161 (as against 160 in the previous year). For comments see "Offensive Trades" (Section VII.).

Ice Cream Manufactories and Retail Shops.—20 applications were received during the year for permission to make and/or sell this commodity. Four were refused, the general sanitary conditions of the premises not being up to the required standard.

The number of makers of ice cream is 105, as compared with 121 in 1934, whilst the number of retailers only has decreased from 155 to 149.

The Milk and Dairies (Amendment) Act, 1922, Sec. 2, and The Milk and Dairies Order, 1926, Sec. 6.—During the year 29 applications were received for permission to retail milk, 26 being granted and 3 refused on sanitary grounds. At the close of the year there were 647 retail milk-shops in the City, including 68 belonging to the 10 larger dairy companies. Of the total, 66 were shops in which only dairy products and like commodities were retailed, 546 were shops selling other articles, and 35 were hawkers. All milk-shops and dairies were regularly inspected, and the conditions generally found to be satisfactory.

W. GRAY,

Inspector under the Food and Drugs Acts, etc.

Health Department,

Town Hall,

1st May, 1936.

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**REPORT OF THE
CHIEF SANITARY INSPECTOR.**

**VII.—THE HOME AND THE
WORKSHOP.**

**NUISANCES, HOUSING, FACTORIES AND
WORKSHOPS, Etc.**

DEPARTMENT OF THE
GENERAL INVESTIGATION

ALL THE HOME AND THE
WORKSHOP.

WORKSHOP IN
INDUSTRIAL HOUSEHOLD AND

**NUISANCES, HOUSING, FACTORIES AND WORKSHOPS,
ETC.**

**The following is the
Report of the Chief Sanitary Inspector.**

TO THE MEDICAL OFFICER OF HEALTH.

SIR,

I have the honour to submit the following report on the work carried out by my section of the Department during the year ended 31st December, 1935.

The Northumberland Review Order, 1935, came into operation on the 1st April and enlarged the City by 2,638 acres, in a north-east and north-west direction. This added area, mostly of a rural character, has brought its own problems, of which the numbers of slum houses amidst the pre-war type and the privy closets to be dealt with are outstanding.

Slum clearance activities are having a marked effect in certain areas of the City. Districts which were formerly densely populated are now nearly void of dwelling-houses; on the other hand, areas which were open spaces are now fully built up to accommodate the displaced tenants. The speculative builder has also assisted in the change by filling up most of the land available to him within the old boundary lines.

In view of the foregoing, it became imperative to recast into a more convenient shape the 10 Sanitary Districts which were made 12 years ago to secure an equitable division of the ever growing work and ensure adequate supervision of each district.

A new Local Act, *The Newcastle upon Tyne Corporation (General Powers) Act, 1935*, received the Royal Assent and became operative in August.

Briefly, the principal sanitary provisions of this Act are :—

The compulsory registration of ice-cream (or similar commodity) manufacturers, vendors and dealers, together with the premises used.

The provision of sanitary conveniences for workmen engaged in the erection of buildings, etc.

Choked and defective drains, w.c.'s, waste-pipes and soil-pipes, if not remedied within 24 hours, work may be done by the Corporation and costs recovered from the persons responsible.

Food storage accommodation to be provided to existing houses.

Neglected structures and sites to be made safe, or demolished and sites cleared up.

Covered receptacles for manure, etc., to be provided to stables and other places.

NUISANCES.

The number of nuisances reported upon and dealt with during the year was 19,110, which is an increase of 636 upon the previous year.

There is no outstanding item to record. Analysis reveals, however, that the variation is much in accord with previous years. It is satisfactory to note that less action has had to be taken against the dirty class of tenant, whose actions and lack of action create so much trouble to all.

It is particularly noted, in the complaints received at the Department, the increasing number of tenants of poor type property who desire Council houses.

Notices Served.

The following are the numbers of notices and letters issued during the year :—

Number of notices served :—	
Informal.....	4,197
Statutory	215
	———— 4,412
Number of special letters sent	2,042
Number of circular letters sent	2,020
	————
Total.....	8,474
	————

Magisterial Proceedings.

It was necessary to report 56 cases of statutory "Notices not complied with" to the Health Committee, who ordered legal proceedings to be taken, but in only 2 cases were summonses issued. The work in the other instances was carried out before making application for summonses.

The details of this part of the work are given on pages 206-207.

The Rent and Mortgage Interest Restrictions Acts.

No application was received from tenants under the above Acts.

Conversion of "Dry" Closets to Water-closets.

The conversion of these closets to water-closets, under Sec. 36, Public Health Act, 1875, shows fairly steady progress. During the year 15 pail-closets have been converted, also one cell-privy situate in the added area of Benton. Ten years ago over 2,500 were in existence, whereas to-day only 50 remain within the boundaries of the City as before the recent extension. These remaining closets are generally in a good structural condition. It is hoped, however, to be able to record a decreased number in the next report.

The areas added to the City in April last have increased the numbers by a further 134 privies and ashpits, "cell" privies and pail-closets. Of these, approximately one-third will remain on account of no sewer being available within the prescribed distance, whilst action has already commenced, in priority of urgency, in the other two-thirds.

In addition 13 "waste-water" closets have been abolished and replaced by up-to-date conveniences. These "waste-water" closets simply consist of a trapped stoneware shaft of 12" to 18" diameter in the w.c., and from 4-ft. to 9-ft. deep.

The solids in the trap are flushed away by slop- and rain-water from the yard drains, the shafts (usually caked with excreta) being only cleansable by scraping. Unfortunately, this type of closet, which is never free from effluvia, is deemed to be, in existing law, on the "water-carriage" system. The conversion of these into proper water-closets must of necessity be slow.

Three dry ashpits were also removed and replaced by regulation dustbins (the first of which was supplied free of charge). 18 free bins were supplied during the year.

RETURN OF PRIVIES, ETC., IN THE VARIOUS WARDS OF THE CITY.

WARDS.	Total No. Privies.	Pail-Closets.	" Cell " Privies.	Combined Privies and Ashpits.
St. Nicholas'	.....	.....	.....	.....
St. Thomas'	57	9	.....	48
St. John's	.....	.....	.....	.....
Stephenson	.....	.....	.....	.....
Armstrong	.....	.....	.....	.....
Elswick	.....	.....	.....	.....
Westgate	.....	.....	.....	.....
Arthur's Hill	.....	.....	.....	.....
Benwell	5	2	3	.....
Fenham	59	5	.....	54
All Saints'	.....	.....	.....	.....
St. Andrew's	.....	.....	.....	.....
Jesmond	.....	.....	.....	.....
Dene	23	.....	21	2
Heaton	.....	.....	.....	.....
Byker	17	17	.....	.....
St. Lawrence	.....	.....	.....	.....
St. Anthony's	20	20	.....	.....
Walker	2	.....	.....	2
Total in City.....	183	53	24	106

Smoke Abatement.

This branch of our work receives constant attention. 511 observations were made of 81 factory and other chimneys, the results being somewhat similar to last year. In addition there were 103 observations of the chimney at the City Hospital for Infectious Diseases, Walker Gate.

New bye-laws concerning smoke abatement are under consideration and will, presumably, come into operation next year.

13 informal and 2 statutory notices were served during the year. In addition, the drivers of 5 steam wagons were verbally cautioned about the quantity of black smoke given off; all of these were strangers to the district.

The following table gives details as to smoke inspection:—

No. of chimneys watched.	No. of observations made.	No. of chimneys from which black smoke issued in such quantity as to be a nuisance.	No. of times when smoke issued so as to be a nuisance.	No. of notices served for the abatement of smoke nuisances.		No. of Prosecutions.
				Informal.	Statutory.	
81	511	17	55	13	2	.....

NOTE.—Not including 103 observations and 67 excessive emissions at the City Hospital, Walker Gate.

ATMOSPHERIC POLLUTION.—NEWCASTLE RECORDS, 1935.

TOWN MOOR GAUGE.

MONTH.	RAIN (Millimetres).	METRIC TONS OF DEPOSIT PER SQUARE KILOMETRE PER MONTH.									
		Insoluble Matter.			Soluble Matter.		TOTAL SOLIDS.	Included in Soluble Matter.			
		Tar.	Other Car- bonaceous.	Ash.	Loss on Ignition.	Ash.		Sulphate as S.O ₃ .	Chlorine as Cl.	Ammonia as N.H ₃ .	Sulphate as S.O ₄ .
January ..	92.3	0.20	0.52	1.11	2.77	3.69	8.29	1.52	1.83	0.10	1.82
February	71.0	0.27	0.21	1.22	1.99	2.70	6.39	1.07	0.65	0.07	1.28
March	17.0	0.23	0.62	1.99	1.08	1.50	5.42	0.98	0.33	0.06	1.18
April	107.9	0.45	0.91	1.83	2.60	3.66	9.45	1.48	0.77	0.09	1.78
May	32.7	0.28	0.33	1.12	1.31	0.91	3.95	0.50	0.37	0.11	0.60
June	98.0	0.18	1.90	1.18	3.92	4.50	11.68	2.02	0.48	0.10	2.41
July	17.0	0.26	1.32	1.02	0.95	1.09	4.64	0.61	0.24	0.03	0.74
August	99.4	0.11	1.49	1.25	1.39	2.78	7.02	1.09	0.36	0.06	1.31
Sept.	99.4	0.06	2.34	1.58	0.60	2.18	6.76	0.61	0.36	0.10	0.73
October ..	Gauge out of order.										
Nov.	127.8	0.18	1.58	2.12	2.04	5.37	11.29	2.54	1.09	0.13	3.06
Dec.	56.8	0.23	1.11	1.57	1.59	2.61	7.11	1.25	0.53	0.07	1.50
Total, 11 months....	819.3	2.45	12.33	15.99	20.24	30.99	82.00	13.67	7.01	0.92	16.41
Average per month	74.5	0.22	1.12	1.45	1.84	2.82	7.45	1.24	0.64	0.08	1.50

An average of 7.45 metric tons per square kilometre per month=7.1 cwts. per acre per annum, or 229 tons per square mile per annum, as compared with 7.8 cwts. per acre, or 249 tons per square mile in 1934.

WESTGATE CEMETERY GAUGE.

MONTH.	RAIN (Millimetres).	METRIC TONS OF DEPOSIT PER SQUARE KILOMETRE PER MONTH.									
		Insoluble Matter.			Soluble Matter.		TOTAL SOLIDS.	Included in Soluble Matter.			
		Tar.	Other Carbonaceous.	Ash.	Loss on Ignition.	Ash.		Sulphate as S.O ₃ .	Chlorine as Cl.	Ammonia as N.H ₃ .	Sulphate as S.O ₄ .
January ..	94.9	0.27	2.23	2.54	3.42	3.98	12.44	2.02	1.87	0.15	2.42
February	46.9	0.25	0.79	1.90	2.07	2.06	7.07	1.25	0.79	0.04	1.50
March	17.4	0.27	2.15	3.20	0.69	1.95	8.26	1.00	0.33	0.03	1.20
April.....	84.2	0.28	2.22	3.73	1.18	2.86	10.27	0.87	0.60	0.04	1.04
May	28.1	0.32	1.72	3.17	1.12	1.12	7.45	0.79	0.40	0.09	0.94
June	70.8	0.25	3.19	3.45	2.41	3.11	12.41	1.31	0.51	0.17	1.58
July	16.0	0.32	1.02	2.20	0.90	0.77	5.21	0.61	0.23	0.07	0.73
August	72.1	0.51	1.95	3.02	0.85	2.46	8.79	0.90	0.41	0.04	1.07
Sept.	106.9	0.08	2.95	2.89	0.64	2.14	8.70	0.73	0.45	0.05	0.88
Oct.	120.2	0.07	2.38	3.04	1.44	2.89	9.82	1.32	0.86	0.19	1.59
Nov.	93.5	0.17	2.26	2.57	2.06	3.55	10.61	1.92	0.87	0.11	2.51
Dec.	53.4	0.60	3.71	4.16	1.71	2.99	13.17	1.39	0.45	0.07	1.67
Total, 12 months....	804.4	3.39	26.57	35.87	18.49	29.88	114.20	14.11	7.77	1.05	17.13
Average per month	67.0	0.28	2.21	2.99	1.54	2.49	9.51	1.18	0.65	0.09	1.43

An average of 9.51 metric tons per square kilometre per month=9.2 cwts. per acre per annum, or 295 tons per square mile per annum, as compared with 9.1 cwts. per acre, or 293 tons per square mile in 1934.

WELBECK RESERVOIR GAUGE.

MONTH.	RAIN (Millimetres).	METRIC TONS OF DEPOSIT PER SQUARE KILOMETRE PER MONTH.									
		Insoluble Matter.			Soluble Matter.		TOTAL SOLIDS.	Included in Soluble Matter.			
		Tar.	Other Carbonaceous.	Ash.	Loss on Ignition.	Ash.		Sulphate as S.O ₃ .	Chlorine as Cl.	Ammonia as N.H ₃ .	Sulphate as S.O ₄ .
January ..	37.8	0.25	0.44	1.20	0.83	1.97	4.69	0.98	0.51	0.04	1.17
February	65.4	0.33	2.15	3.13	1.31	1.83	8.75	0.99	0.65	0.16	1.19
March	13.0	0.46	0.69	1.52	1.15	1.35	5.17	0.61	0.44	0.04	0.73
April.....	75.5	0.16	1.05	2.73	0.61	1.81	6.36	0.73	0.86	0.16	0.87
May	26.0	0.09	1.00	2.25	1.46	1.25	6.05	0.64	0.56	0.12	0.77
June	69.0	0.13	1.45	2.21	1.80	2.49	8.08	1.13	0.39	0.21	1.35
July	11.7	0.06	0.59	1.46	0.85	1.03	3.99	0.39	0.23	0.04	0.47
August	52.1	0.56	2.15	2.72	0.94	1.56	7.93	0.64	0.30	0.09	0.77
Sept.	95.0	0.12	1.11	2.35	0.77	2.65	7.00	0.86	0.53	0.14	1.03
October ..	91.1	0.09	1.78	2.75	0.73	3.28	8.63	1.25	0.91	0.14	1.50
Nov.	84.6	0.42	0.91	1.99	1.52	3.24	8.08	1.28	0.90	0.01	1.54
Dec.	39.1	0.14	1.61	2.53	1.17	2.11	7.56	0.94	0.49	0.07	1.12
Total, 12 months....	660.3	2.81	14.93	26.84	13.14	24.57	82.29	10.44	6.77	1.22	12.51
Average per month	55.0	0.23	1.24	2.24	1.10	2.05	6.86	0.87	0.56	0.10	1.04

An average of 6.86 metric tons per square kilometre per month=6.5 cwts. per acre per annum, or 207 tons per square mile, per annum, as compared with 7.4 cwts. per acre, or 237 tons per square mile in 1934.

TOTAL IN THREE GAUGES IN THE CITY, 1935.

MONTH.	RAIN (Millimetres).	METRIC TONS OF DEPOSIT PER SQUARE KILOMETRE PER MONTH.									
		Insoluble Matter.			Soluble Matter.		TOTAL SOLIDS.	Included in Soluble Matter.			
		Tar.	Other Carbonaceous.	Ash.	Loss on Ignition.	Ash.		Sulphate as S.O ₃ .	Chlorine as Cl.	Ammonia as N.H ₃ .	Sulphate as S.O ₄ .
Total, 12 months*	2284.0	8.65	53.83	78.70	51.87	85.44	278.49	38.22	21.55	3.19	46.05
Average per month	195.8	0.74	4.61	6.75	4.45	7.32	23.87	3.28	1.85	0.27	3.95
Average per gauge 12 mths.*	783.1	2.97	18.46	26.98	17.78	29.29	95.48	13.10	7.39	1.09	15.79
Average per gauge per month	65.3	0.25	1.54	2.25	1.48	2.44	7.96	1.09	0.62	0.09	1.32

* One of the gauges was out of order for one month.

An average of 7.96 metric tons per square kilometre per month=7.6 cwts. per acre per annum, or 244 tons per square mile per annum, as compared with 8.1 cwts. per acre, or 260 tons per square mile in 1934.

For comparison with the foregoing, the following returns of sunshine recorded at the Armstrong College, Newcastle, and at Cockle Park, near Morpeth (about 15 miles from the City), are given :—

Month.	Armstrong College. Sunshine (hours).	Cockle Park. Sunshine (hours).
January	41.7	39.2
February	41.2	51.2
March.....	61.8	94.6
April	81.4	118.2
May	156.7	181.5
June	137.0	139.9
July	218.4	253.6
August	150.2	166.2
September	110.7	140.0
October.....	67.6	76.6
November	28.6	37.1
December	37.4	55.3
Total for year	1132.7	1353.4
Average per month	94.4	112.8

CINEMAS, THEATRES, AND OTHER PLACES OF PUBLIC ENTERTAINMENT.

By a Ministry of Health Circular issued in 1920, Sanitary Authorities are required to give particular attention to premises holding a licence for music, dancing, etc., special regard having to be given to sanitary conveniences, dressing rooms, ventilation, and means of escape in case of fire.

In pursuance of this order, 4 applications were received for certificates of sanitation which must be submitted to the Licensing Justices before a music or dancing licence is granted or renewed. After a careful inspection of the premises all were granted.

The number of places so certified is now 4 theatres and music halls, 38 cinemas, and 113 concert halls, billiard rooms, cafés, etc., 198 visits were made both during the day and night time to inspect the sanitary arrangements, dressing rooms, etc., which were generally found to be in order.

Testing (with the "Kata" thermometer) of the air and ventilating system of all theatres, music halls and cinemas has been carried out. Generally, the results were satisfactory.

In addition, tests for demonstration purposes were made at the Durham University College of Medicine and at the Rutherford College.

OFFENSIVE TRADES.

15 applications for permission to establish the trade of a fish fryer were received during the year. Of that number 6 were granted and 5 refused, the proposed premises not being suitable for the purpose, whilst 4 applications were withdrawn.

This class of "offensive trade" still predominates, there being now 161 on the register (against 160 last year). As compared with the previous year there is an increase of 1 fish fryer and 1 gut scraper.

The fried fish shops are inspected both by day and night, and only in 2 cases was it necessary to serve notices for the abatement of nuisances.

With the exception of a few minor contraventions, all the offensive trades have been conducted in a satisfactory manner. There still remains, however, the need of Bye-laws regulating these trades.

The number of offensive trades now on the register is :—

Fish fryers	161
Rag and bone dealers.....	9
Tripe boilers	7
Gut scrapers	6
Dealers in hides and skins.....	4
Bone boilers.....	3
Fat melters and extractors.....	1
Glue and size makers.....	2
Soap boiler	1

These are systematically inspected, 1,550 such visits being made during the year.

A shopkeeper was found to be carrying on an offensive trade (curing of rabbit skins) in premises which were totally unsuitable. The offender was warned, but persisted in the trade. Prosecution and conviction followed, a fine of 20/- being imposed.

SUMMARY OF NUISANCES, ETC., FOR THE ABATEMENT OF WHICH NOTICES
WERE SERVED DURING 1935.

Foul pail-closets (to replace with water-closets).....	35
Foul privies and ashpits (to replace with water-closets).....	2
Defective waste-water closets (to replace with fresh-water closets with flushing cisterns, etc.).....	17
Foul or defective ashpits not connected with privies (to remove and provide dust bins).....	5
Defective pail-closets (to repair, provide new pails, etc.).....	2
Insufficient water-closet accommodation (additional water- closets ordered)	15
Defective or insufficient dust bins (for houses)	1,354
" " " (for business premises)	54
Defective water-closets	1,262
Water-closets without adequate water supply	24
Choked water-closets (mostly served on tenants)	20
Dirty water-closets (all served on tenants)	5
Defective drains (to repair, or construct new drains)	485
Insufficient means of drainage	32
Choked drains, etc.	227
Defective, want of, or choked sinks, waste-pipes, etc.	569
No sink provided	77
Defective or choked soil-pipes, vent shafts, etc.	34
Sink waste-pipes not trapped	208
Want of or defective pavement in yards, passages, etc.	688
Dirty rooms.....	23
Dirty bedding	1
Damp rooms	688
Dirty yards, passages, stairs, etc.	42
Animals, pigeons, and fowls improperly kept	8
Offensive accumulations	42
Accumulations of manure	15
Want of or defective manure pits	4
Broken roofs and want of or defective or choked spouting.....	1,958
Want of water (other than in tenements—see below).....	120
Smoke nuisances.....	17
Want of proper ventilation to rooms (including to floor space), broken window cords, etc.	964
Structural defects—internal and external—(broken plaster, floors, stairs, walls, fireplaces, etc.).....	8,397
Cisterns supplying water to sinks, etc., dirty or defective.....	3
Stables (unsuitable, defective, etc.)	2
Piggeries (" ")	5
Gut scrapers' premises—want of cleanliness.....	2
Food manufactured or stored for sale under improper conditions....	2
Bakehouses—Dirty, etc.	118
Fried fish shops—(Smoke from range, defective roof, spouting, etc.)	2
Council Schools—(Sink waste-pipe choked)	1
Cellar dwellings illegally occupied.....	1
Inadequate accommodation for :—	
Storage of food (other than in tenements)	410
Cooking of food (" ")	56
Washing of clothes (" ")	197
Carried forward.....	18,197

SUMMARY OF NUISANCES, ETC.—Continued.

Brought forward.....	18,197
Tenements—Limewashing not done	18
No adequate accommodation for washing of clothes....	90
" " " storage of food.....	216
" " " preparation and	
" " " cooking of food.....	50
Water supply and sinks not adequate, conveniently	
accessible, etc.....	54
Water supply (only) not adequate, conveniently	
accessible, etc.....	67
Insufficient number of water-closets provided	14
Inadequate lighting of common staircases—	
Natural	42
Artificial	68
Staircases without proper handrails, etc.	44
Houses converted to "tenements" without the Bye-laws being	
complied with	7
Cinemas—(Dust bins required)	2
Other places of entertainment—(Sanitary accommodation in-	
sufficient).....	1
Tents, vans, sheds, and similar structures—(Sanitary arrange-	
ments unsatisfactory)	1
Ice cream—(Name and address of vendor not inscribed upon barrow)	
Name and address of owner and of M.O.H. not properly inscribed	
upon tenants' rent books	2
Shops Act, 1934; Sec. 10—(Defects and contraventions).....	8
"Offensive trades" established without consent.....	4
Unclassified minor nuisances	224
TOTAL	19,110

DETAILS RELATING TO CERTAIN WORKS CARRIED OUT IN THE ABATEMENT OF NUISANCES AND TO INSPECTIONS MADE DURING 1935.

Length (in yards) of old drains removed	1,419
Length (in yards) of new drains constructed	2,002
New trapped gullies provided to drains.....	384
"Cell" privies removed (Benton District).....	1
Pail-closets removed	15
Defective water-closets removed.....	129
Water-closets provided (in place of the foregoing privies and	
defective water-closets removed, also in 39 cases where the	
accommodation was previously insufficient).....	183
Dry ash-pits removed and replaced by galvanised iron dust bins....	3
Dust bins substituted for dry ash-pits where water-closets	
existed, and provided in cases where privies have been	
replaced by water-closets.....	*18
No. of drains tested	866
No. of tests of above drains made by smoke and water.....	891
No. of inspections from complaints made at office (verbally or by	
letter)	5,007
No. of tenement inspections made.....	10,854
No. of contraventions of Tenement Bye-laws for which notices	
have been served to obtain remedy.....	410

DETAILS RELATING TO CERTAIN WORKS, ETC.—*Continued.*

Inspections of houses made from complaints received outdoors or nuisances discovered in the districts, including a large number of minor nuisances, such as choked drains and dirty yards, the abatement of which was accomplished at the time of visit, and without legal notice.....	3,100
Inspections to learn if works ordered were in progress.....	12,818
Supervisions of work in progress.....	8,263
Common yards and courts in the worst localities specially visited on Friday afternoons and Saturday mornings to obtain weekly cleansing	22,276
Inspections after infectious disease.....	1,778
Inspections of milk shops and ice creameries (including retail shops)	1,403
.. bakehouses.....	† 1,585
.. offensive trades	1,550
.. wholesale margarine warehouses	60
.. as to limewashing of tenements.....	1,204
.. of schools	166
.. under Housing Acts.....	10,502
Inspection of cinemas, etc. (day visits, 133 ; night visits, 65).....	198
Tents, vans, sheds and similar structures.....	26
Miscellaneous visits	3,201

* Dust bins supplied free by Corporation.

† Including 1,263 inspections made under the Factory and Workshop Acts by the Assistant Inspectors of Workshops.

SUMMARY OF LEGAL PROCEEDINGS ORDERED TO BE TAKEN BEFORE THE
MAGISTRATES FOR THE ABATEMENT OF NUISANCES, ETC.,
DURING THE YEAR 1935.

NATURE OF COMPLAINT.	No. of Cases.	Work done and Nuisances abated without the Summons ordered being applied for.	Summons issued.	
			Work done and Summons withdrawn.	Other Results.
<i>Public Health Acts :—</i>				
Roofs and spouting defective	15	15	....
Scullery sinks. — Woodwork rotted, waste-pipe defective, and sink displaced	4	4	....
Yard pavement defective	4	4	....
Drains choked or defective.....	3	3	....
Drain vent shafts broken.....	2	2	....
Dampness of rooms, etc.	3	3	....
Rooms inadequately ventilated (broken sash-cords, etc.)	5	5	....
House in a filthy condition....	1	1	....
"Offensive trade" established without the consent of the Sanitary Authority	1	....	....	Offender summoned, fined 20/-.
<i>Public Health Act, 1875, Section 36, and Newcastle upon Tyne Improvement Act, 1892, Section 53 :—</i>				
Water-closets defective	3	3	....
<i>Factory and Workshop Act, 1901, Section 98 :—</i>				
Bakehouse in such a state as to be unfit on sanitary grounds	1	1	....
<i>Newcastle upon Tyne Corporation Act, 1911, Section 55 :—</i>				
Want of or defective dustbins for house refuse	2	2	....
<i>Bye-laws with respect to Tenemented Houses :—</i>				
Water-closets defective	1	1	....
(No. 11)				
Common staircases not kept in proper repair (No. 18, a)	1	1	....
Common staircases not provided with adequate means of artificial light (No. 18, c)	2	2	....
Carried forward	48	47	....	1

SUMMARY OF LEGAL PROCEEDINGS ORDERED TO BE TAKEN BEFORE THE
MAGISTRATES FOR THE ABATEMENT OF NUISANCES, ETC.,
DURING THE YEAR 1935—*Continued.*

NATURE OF COMPLAINT.	No. of Cases.	Work done and Nuisances abated without the Summonses ordered being applied for.	Summonses issued.	
			Work done and Summonses withdrawn.	Other Results.
Brought forward	48	47	....	1
Rooms not adequately ventilated (broken sash-cords, etc.) (No. 26, c)	1	1	....
Limewashing of passages, staircases, etc..... (No. 28, a)	1	1	....
Yard pavement defective (No. 28, b)	1	1	....
Water supplies and sinks inadequate, not conveniently accessible, etc..... (No. 28, d)	2	2	....
No water supply for the use of the occupants of the house.... (No. 28, d)	1	....	1	
Inadequate accommodation for :—				
(a) Washing of clothes (No. 28, f.i)	1	1	....
(b) Storage of food (No. 28, f.ii)	1	1	....
TOTALS.....	56	54	1	1

HOUSING.

Overcrowding.

This grave problem, with its concomitant evils, now appears within measurable distance of being, if not eradicated, at least very considerably alleviated. The Housing Act, 1935, which became law on the 2nd August, repeals, amends, and extends parts of the previous Housing Acts. One of the important new provisions (Section 1) briefly states: It shall be the duty of every local authority to ascertain what working class dwellings in their district are overcrowded, and to submit reports (in June, 1936) stating the number of new houses required to be built in order to abate such overcrowding.

The standard set out by the Minister of Health as to when a house is to be deemed to be overcrowded is in two tables, as follow :—

NUMBER OF PERSONS PERMITTED TO USE A HOUSE FOR SLEEPING.

TABLE I.

Where a house consists of :—

(a) One room	2 persons.
(b) Two rooms	3 „
(c) Three rooms	5 „
(d) Four rooms	7½ „
(e) Five rooms or more	10 persons, with an additional 2 in respect of each room in excess of five.

TABLE II.

Where the floor area of a room is :—

(a) 110 sq. ft. or more.....	2 persons.
(b) 90 sq. ft. or more, but less than 110 sq. ft.	1½ „
(c) 70 sq. ft. or more, but less than 90 sq. ft.	1 person.
(d) 50 sq. ft. or more, but less than 70 sq. ft.	½ „
(e) Under 50 sq. ft.	Nil.

Further, persons of opposite sexes over 10 years of age and not living together as husband and wife must not sleep in the same room.

Apart from Council houses, it is estimated that over 60,000 houses, containing over 70,000 dwellings, will be visited, and, for this purpose, a temporary staff of 20 enumerators, with clerical assistance, has been appointed to carry out the overcrowding survey. Their duties commenced in the beginning of January, 1936.

The Housing Acts, 1925 to 1935.

The number of inspections under the Housing Acts was 10,502. This number is a considerable decrease as compared with the previous year. It is inevitable that this fluctuating total will appear. The variation of the work involved in the houses, new legislation year by year, and other calls upon the District Inspectors' time all have their effect.

MINISTRY OF HEALTH TABLE.

1.—*Inspection of Dwelling Houses during the Year :—*

(1) (a) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts).....	6,700
(b) Number of inspections made for the purpose.....	20,200
(2) (a) Number of dwelling houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	3,107
(b) Number of inspections made for the purpose.....	10,502
(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	*1,219
(4) Number of dwelling houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	3,172

(* Dealt with as Clearance Areas or as Individual Unfit Houses).

2.—*Remedy of Defects during the year without Service of formal Notices :—*

Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers	851
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3.—*Action under Statutory Powers during the Year :—*

(a).—Proceedings under Sections 17, 18 and 23, of the Housing Act, 1930—

(1) Number of dwelling houses in respect of which notices were served requiring repairs	747
(2) Number of dwelling houses which were rendered fit after service of formal notices :—	
(a) By owners	736
(b) By Local Authority in default of owners.....	.....

(b).—Proceedings under Public Health Acts :—

(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied	1,574
(2) Number of dwelling houses in which defects were remedied after service of formal notices :—	
(a) By owners	1,569
(b) By Local Authority in default of owners.....	.....

(c).—Proceedings under Sections 19 and 21 of the Housing Act, 1930 :—

(1) Number of dwelling houses in respect of which Demolition Orders were made	19
(2) Number of dwelling houses demolished in pursuance of Demolition Orders.....	† 22

(d).—Proceedings under Section 20 of the Housing Act, 1930 :—

(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	25
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit .....	.....

† 19 of these dealt with in previous years.

Housing Act, 1930 ; Section 17.

Systematic inspection under this section has been carried out during the year of 1,598 houses within the 10 Sanitary Districts, the properties all being of the self-contained or flat type. The value of this section is that the works or repairs required by notice ensure that the owner makes the house fit for habitation. The costs involved vary from a nominal sum to a very considerable figure.

Despite the number of notices served and the difficulties experienced with certain owners, it has not been necessary to make report of any cases for statutory action.

The nature and number of the defects so dealt with are shown in the following summary :—

HOUSING ACT, 1930 ; SECTION 17.

DETAILS OF WORKS CARRIED OUT UNDER NOTICE.

No. of houses involved	1,598
Roofs repaired (including chimney stacks).....	905
Spouting repaired, renewed, etc.	775
External walls repaired, re-pointed, etc.	1,165
Under-floor ventilation provided.....	288
Yard pavements repaired or renewed	641
Dampness remedied (from causes other than those defined above)	472
Drains repaired, reconstructed, etc.	398
Water-closets repaired	931
„ ; additional conveniences provided.....	41
Dustbins provided	201
Accommodation for washing clothes, provided, repaired, etc.	360
Coalhouses repaired	425
Ceiling- and wall-plaster repaired or renewed.....	1,585
Floors repaired or renewed.....	577
Window sash-cords renewed or repaired.....	525
Windows repaired or renewed	312
Doors repaired or renewed.....	819
Cooking accommodation provided.....	52
Fireplaces repaired or renewed.....	609
Ventilated food stores provided.....	518
Water supply and/or sinks provided, waste-pipes repaired, etc....	721
Staircases.—Stairs, handrails, etc., repaired or renewed	456
Light (natural and/or artificial) provided.....	95
Ventilation of rooms, etc., improved.....	59
Rooms, staircases, etc., cleansed	11
Minor repairs (not included in the above)	908
TOTAL.....	<u>13,849</u>

Housing Act, 1930 ; Sections 19 and 20.**Individual Unfit Houses.**

These sections give a local authority power to order the demolition (Sec. 19) or closure as dwellings (Sec. 20) of insanitary houses. The owner has the right to appear before the Health Committee and, if aggrieved by their decision after hearing his case, may appeal to the County Court.

Houses are reported monthly, the numbers dealt with and the results are given in the following table :—

	Number of		Popula- tion.
	Houses.	Separate Holdings (or Families).	
Demolition Orders made	19	46	143
Closing Orders made	11	25	76
Premises retained for business purposes (owners finding alternative accommo- dation for tenants displaced)	7	16	39
Otherwise dealt with	6	8	26
(negotiations pending, undertakings to repair, not to occupy as dwellings, etc.)			
TOTALS	43	95	284

Housing Act, 1930 ; Section 55.

This new section affords the owner of a working class dwelling the opportunity of submitting to the local authority a schedule of proposed improvements to his property. When the works are agreed and completed, a certificate is issued to the owner, covering a period of from 5 to 10 years, during which time no action can be taken against the house as a "slum" house. This section does not apply to houses already inquired into by the Minister of Health, but can apply to scheduled houses to be dealt with ; in this case, the proposals are submitted to the Minister of Health.

One application has been received concerning a house outside of any slum areas, and the proposals agreed.

Clearance Areas.

In April and July the Minister of Health held Inquiries into 31 areas. The April Inquiry, in respect of 13 clearance areas and 1 compulsory purchase order, concerned 268 houses, 671 separate

families, and a population of 2,332 persons. The July Inquiry comprised seventeen areas, of 199 houses, 499 separate families, and a population of 1,580 persons.

22 areas were fully confirmed by the Minister and 9 with slight modifications.

The first Inquiry lasted 3 days, the second 2 days. Both were largely attended by the owners and others acting for them, the opposition to the action of the Corporation being particularly strong in respect of 25 areas; to the other 6, no objection was offered.

Details of the confirmations are appended in the following tables:—

AREA.	(a) (As originally represented).			(b) (As confirmed by the Minister of Health).		
	Houses.	Dwell- ings.	Popu- lation.	Houses.	Dwell- ings.	Popu- lation.
Edgware Road.....	8	19	77	8	19	77
Byron Terrace.....	27	66	259	16	44	162
Bell's Court	6	19	53	6	19	53
Carloli Street	12	26	84	9	19	68
Trafalgar Street	5	13	48	5	13	48
" " (Back)	6	6	23	6	6	23
Picton Terrace	14	38	88	14	38	88
Chatham Place	23	45	156	23	45	156
Pottery Bank No. 1	3	6	17	3	6	17
" " No. 2	39	94	391	39	94	391
" " No. 3	3	10	35	3	10	35
" " No. 4	4	12	43	4	12	43
Bedford Street	18	52	186	17	52	186
Bedford Street (Compulsory Purchase Order)	100	265	872	89	243	790
Stepney Street No. 1	9	23	69	9	23	69
" " No. 2	5	31	107	5	31	107
Stepney Bank	12	33	110	10	30	103
Albion Row No. 1	4	12	30	4	12	30
" " No. 2	2	8	25	2	8	25
" " No. 3	7	8	27	7	8	27
Princess Street.....	6	13	44	6	13	44
Prudhoe Street	5	18	55	.....	.....	.....
Prudhoe Place.....	15	58	171	15	58	171
Percy Street	8	19	56	2	5	18
Percy Place	25	64	216	11	31	120
Monk Street	11	38	120	11	38	120
Friar Street	8	15	58	8	15	58
Stowell Street No. 1	7	32	98	7	32	98
" " No. 2	15	38	113	12	29	93
Kirsop Street	5	16	51	5	16	51
Brandling Village	55	73	230	55	73	230
TOTAL	467	1,170	3,912	411	1,042	3,501

EXCLUSIONS.

	Houses.	Dwellings.	Population.
Subject to Formal Action under			
(a) Section 19 or 20, Housing Act, 1930	29	80	222
(b) Re-conditioning	11	22	97
(c) Conversion to business premises	2	1	3
(d) Unconditionally	14	25	89
TOTAL.....	56	128	411

The houses in all the areas were very old, damp, dilapidated, congested, and quite beyond repair or reconstruction.

Amongst the outstanding defects may be mentioned :—

Structures.—Defective brick or stone work, cracked and bulging walls, damp-proof courses either defective or non-existent, chimney stacks and pots displaced and in many cases in danger of falling.

Roofs.—Slates and tiles broken, loose and missing ; flashings and spouts defective.

Floors.—Broken, rotted, worn and out of level.

Staircases.—Treads broken, worn, out of level, handrails loose and broken, dark, badly ventilated, and difficult of access.

Windows.—Rotting and perished frames and sashes, broken sash-cords and fasteners.

Doors.—Dilapidated, badly fitting, warped, and hinges broken.

Grates and Stoves.—Badly set, defective, fire-bars missing, ovens out of order.

Sanitary accommodation.—W.C.'s used in common by several tenants, dark, dirty, and in bad structural condition.

Water supplies and Sinks.—Insufficient and not conveniently accessible to all the tenants.

Overcrowding.—Both in the houses and on space, prevalent in every area.

Houses Demolished, etc.—Apart from action by the Health Committee, 19 self-contained houses, 1 flat and 8 tenemented houses (of 24 holdings) have been demolished, or have ceased to be used as dwellings, for various reasons (conversion to business premises, estate development, dilapidations, etc.)

Houses built during the year 1935.—The City Engineer reports that there were 1,105 self-contained houses, and 349 houses in flats (698 tenancies), built privately during the year under report. In addition, 707 dwellings were provided under housing schemes.

Tents, Vans, Sheds and Similar Structures.

There now remain only 3 vans in the City occupied as dwellings. These are on isolated plots of land, are in a clean state, and comply with the bye-laws.

Tenemented Houses.

A decided change is taking place in these houses. The old-fashioned rambling houses and hovels which were located near the riverside and housed people in "warrens" have practically disappeared, due to slum clearance work, but in place thereof and in good residential districts, comprising excellent large family houses, conversion of these is rapidly taking place. The houses which are notified officially by submission of plans, etc., are generally well adapted for the use of the tenants; unfortunately, in others which are "discovered" the only aim appears to be to house the maximum number of families possible without regard to anything else.

In one 2-storeyed terraced house with basement rooms were found 16 separate families, who all used the ordinary amenities originally provided in the house. Misguided ingenuity in converting the biggest rooms of the house into 2 or 3 separate rooms made this possible.

The number of tenemented houses in the City at the end of the year was 3,065, consisting of:—

2,498	....	One-room holdings.
5,196	....	Two-room holdings.
1,004	....	Three-room holdings.
122	....	Four-room holdings.
6	....	Five-room holdings.

A total of 8,826 separate holdings. During the year 10,854 inspections have been made of this type of dwelling.

Tenement Bye-laws.

In addition to the Clearance Areas already reported upon, 53 tenemented houses, comprising 203 separate holdings, have been inspected and reported upon in detail during the year, with a view to the Bye-laws being put in force. It was found necessary to report for legal proceedings in only 1 case, as against 11 in 1934.

New Buildings and Sanitary Alterations.

397 plans were examined by the Medical Officer of Health before their submission to the Town Improvement and Streets Committee and, where necessary, suggestions forwarded to the City Engineer for his consideration, as compared with 371 during the previous year.

Common Lodging Houses.

At the end of the year there were on the Register 18 common lodging houses, as compared with 23 in 1934, six having been closed and removed from the register, owing to slum clearance, ill-health of keepers, lack of lodgers, etc. This latter is alleged to be chiefly due to the action of the Public Assistance Committee, who will not grant relief to any able-bodied person under the age of 60 residing in a house of this description.

One new house was registered during the year.

The total number of lodgers for which the houses are registered is 614, showing a decrease of 153 from last year, due to the removals and additions above-mentioned and a re-arrangement in another house. 3,631 inspections during the day time and 112 at night time have been made, and it is satisfactory to note that it was unnecessary to resort to legal proceedings to remedy contraventions of the bye-laws governing the management of the houses.

The average number of lodgers per night was 406, the highest number being 457, and the lowest 352.

The following summary shows in detail the accommodation as at the end of the year :—

Description of Lodgers.	No. of			Accommodation.			
	Houses.	Single Beds.	Double Beds.	Married Couples.	Single Women.	Single Men.	Total.
Married couples and single women	2	60	10	10	60	....	80
Women only	1	18	....	....	18	....	18
Men only	15	516	....	....	....	516	516
TOTAL	18	594	10	10	78	516	614

(20 persons)

Summary of inspections, contraventions found, etc. :—

Number of houses on the register at the end of the year.....	18
Applications for registration (Newcastle Corporation Act, 1911, Sec. 63) ; 24 granted, 1 refused	25
Houses ceased to be occupied as common lodging houses.....	6
Inspections made in the day-time	3,631
Inspections made in the night-time.....	112
Notices served { <i>re</i> washing of bed clothes, 84, { <i>re</i> lime-washing of houses, 42}	126
Contraventions of Bye-laws, etc. :—	
Structural defects in houses.....	8
Defective water-closets.....	12
Defective roofs and defective or choked spouting.....	15
Choked W.C.'s and drains.....	10
Sink waste-pipes defective	3
Dust bins defective or insufficient.....	2
Lack of efficient ventilation (broken sash-cords, etc.).....	2
Unclassified minor nuisances (burst water-pipes, etc.).....	2
Deaths reported.....	2
Cases of infectious disease reported (measles 1, tuberculosis 2).....	3

Factories and Workshops.

The inspection of these has been well maintained during the year, the total number of inspections being 9,055. These included visits to workshops, domestic workshops, workplaces, laundries and bakehouses, also to factories on receipt of complaint from H.M. Inspector. Generally speaking, their condition as regards sanitary accommodation, ventilation, cleanliness, water supply, and other matters of a hygienic nature, was found satisfactory.

During the year 41 lists of outworkers were received, 13 employers having sent in their lists in February and August, as required by the Factory and Workshop Act, 1901, and 15 employers only once. Included in the lists were the names and addresses of four outworkers residing in another town, and these, in accordance with the requirements of the Act, were forwarded to the Local Authority of the district concerned. No contravention of the Act was found in any of the 50 outworkers' premises inspected.

25 notices as to insanitary conditions in factories and workshops were received from H.M. Inspector of Factories, 20 of which related to factories (which are visited by the Health Department staff only on receipt of a complaint from H.M. Inspector), and 5 to workshops. Some of the latter had, however, been found and dealt with by the District Inspectors prior to receipt of the complaint. The others received due attention and the necessary works were carried out without having to resort to legal proceedings.

ADMINISTRATION OF THE FACTORY AND WORKSHOP ACT, 1901, IN
CONNECTION WITH FACTORIES, WORKSHOPS AND WORKPLACES,
DURING THE YEAR 1935.

Home Office Tables.

1.—INSPECTION OF FACTORIES, WORKSHOPS AND WORKPLACES.

INCLUDING INSPECTIONS MADE BY SANITARY INSPECTORS.

PREMISES. (1)	NUMBER OF		
	Inspec- tions. (2)	Written Notices. (3)	Occupiers Prosecuted (4)
Factories (Including Factory Laundries.)	415	248	....
Workshops (Including Workshop Laundries.)	7,138		
Workplaces..... (Other than Outworkers' premises.)	1,500		
TOTAL	9,053	248	....

2.—DEFECTS FOUND IN FACTORIES, WORKSHOPS AND
WORKPLACES.

PARTICULARS. (1)	NUMBER OF DEFECTS.			Number of Offences in respect to which Prosecutions were instituted. (5)
	Found. (2)	Re-medied. (3)	Referred to H.M. In-spector. (4)	
<i>*Nuisances under the Public Health Acts :—</i>				
Want of cleanliness	266	266	....	....
Want of ventilation.....	5	5	....	....
Overcrowding .....	....	....	....	....
Want of drainage of floors .....	....	....	....	....
Other nuisances	85	84	....	....
Sanitary } insufficient	23	23	....	....
accommo- } unsuitable or defective	133	132	....	....
dation } not separate for sexes	9	9	....	....
<i>Offences under the Factory and Workshop Acts :—</i>				
Illegal occupation of underground bakehouse (s. 101) .....	....	....	....	....
Other offences .....	....	....	16	....
(Excluding offences relating to out-work and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Work- shops Transfer of Powers Order, 1921.)				
TOTAL	521	519	16	....

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

OUTWORK IN UNWHOLESOME PREMISES, SECTION 108.

NATURE OF WORK. (1)	Instances. (2)	Notices served. (3)	Prosecutions. (4)
As per Home Office List	None.	None.	None.

TRADES.

Particulars as to the number and nature of the various trades carried on in the workshops of the City :—

TRADES.	Work-shops.	Domestic Work-shops.	Work-places.
Athletic Outfitters, etc.	12	....	....
Bacon Curing, Pickles, etc.	48	1	....
Bags, Waterproofs, etc. (making and repairing)	19	2	2
*Bakehouses.....	264	....	....
Blacksmiths, Plumbers, etc.	122	....	2
Bouquets and Wreaths (making, etc.)	13	....	....
Boots, etc. (making and repairing).....	136	18	....
Dressmaking, Underclothing, etc.	257	17	....
Drysalters, Cleaning & Packing Fruit, Tea, etc.	32	1	97
Furniture Making, Joiners, etc.	224	10	....
Harness, etc. (making and repairing).....	21	....	....
Jewellery, Watches, etc. (making & repairing)	78	2	....
Laundries.....	16	....	....
Machines and Tools (making and repairing)....	147	....	3
Painters, Engravers, Photographers, etc.	81	5	13
Restaurant Kitchens, etc.....	....	....	115
Tailoring, Shirts, etc.....	249	13	....
Miscellaneous	110	....	116
TOTALS	1,829	69	348

* Includes 30 " Factory " and 78 " Domestic " Bakehouses.

Inspection of Council and other Schools.

During the year 166 inspections were made. In only one case was any defect found, and this (of a minor character) was remedied on the attention of the Education Authorities being drawn to the matter.

Rag Flock Acts, 1911 and 1928.

There are no manufacturers of rag flock in the City, the principal users being upholsterers and bedding makers. The number of these who use (or are likely to use) rag flock is 24, in 13 workshops and 11 factories. To the former (which are also inspected under the Factory and Workshop Acts) 60 visits were made, factory premises being only visited on receipt of complaint from H.M. Inspector.

Eight samples of rag flock were purchased and submitted for analysis. 4 were found to conform to the standard of cleanliness prescribed by the Regulations, 2 slightly exceeded the

permissible quantity of chlorine, respecting which the vendors were cautioned, and 2 were considerably in excess of the limit allowed. In these cases, proceedings were instituted, one case being dismissed (each side paying its own costs), whilst in the other a fine of 20/- was imposed.

Exhumations.

Three exhumations were carried out under the supervision of the Department during the year, all being authorised by Home Office Licence. The operations were carried out in the early morning in a sanitary and reverent manner and with due regard to the conditions set out in the Licence.

Fertilisers and Feeding Stuffs Act, 1926.

In pursuance of this Act, 28 visits were made to factories, warehouses, and retail shops where fertilisers or feeding stuffs were prepared or stored for sale, for the purpose of seeing that the requirements were carried out as to the marking of packages, inspection of registers, etc.

Eighteen samples of fertilisers and 1 of feeding stuffs were obtained (mostly informally) and submitted for analysis to the Agricultural Analyst. Offences were disclosed in 7 cases, respecting which the vendors were cautioned.

Merchandise Marks Act, 1926.

In the administration of this Act, 283 inspections and personal visits were made to shopkeepers, stall-holders, hawkers, etc., in order to ascertain whether imported goods were properly marked with the "indication of origin" required by the Act and the Orders made thereunder. Attention was drawn to the requirements where necessary, in 65 instances there was left a copy of a printed notice to traders (setting out the principal provisions of the Act), and in 74 cases cautions were administered (47 verbally and 27 by special letter).

Agricultural Produce (Grading and Marking) Act, 1928.

91 inspections of markets, shops and stores, were made as to the grading and marking of eggs. No contravention of the Regulations was found.

Shops Act, 1934.

Only a few inspections have been made under this Act during the year. Routine inspection of the premises concerned was commenced in January, 1936.

Conclusion.

I have to record a number of Staff changes. Mr. Christopher Raimes, Chief Sanitary Inspector from 1923, retired on superannuation in July, after 44 years' service with the Corporation. About the same time, and for similar reason, Mr. James Hunter, Senior Assistant Food and Drugs Inspector, left after 34 years' service. District Inspectors James McKendry and W. A. Pilson also left, the former on pension, after 31 years' service, and the latter to take up a similar appointment with the Bermondsey Borough Council. The consequent vacancies have been filled by internal promotions and the appointment of 4 new Inspectors in Messrs. Mayne, Sayer, Chapman and Wilkinson.

I wish to express to you, Sir, my sincere appreciation of your invaluable assistance, and to the whole of the Staff for their loyal co-operation and unswerving attention to their various duties.

I am, Sir,

Your obedient servant,

W. GRAY,

*Chief Sanitary Inspector,
Inspector of Common Lodging Houses, etc.*

*Health Department,
Town Hall,
1st May, 1936.*

1911

I have the honor to acknowledge the receipt of your letter of the 10th inst. in relation to the proposed extension of the term of office of the members of the Board of Directors of the National Bank of Commerce, New York, and in reply to inform you that the same has been referred to the Board of Directors for their consideration.

Sincerely,
Your obedient servant,

Very truly yours,
John D. Rockefeller
President

Enclosed for you are the minutes of the meeting of the Board of Directors held on the 10th inst. in relation to the proposed extension of the term of office of the members of the Board of Directors of the National Bank of Commerce, New York.

I am, Sir, very respectfully,
Your obedient servant,
John D. Rockefeller

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President

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