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CITY OF NOTTINGHAM

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH.

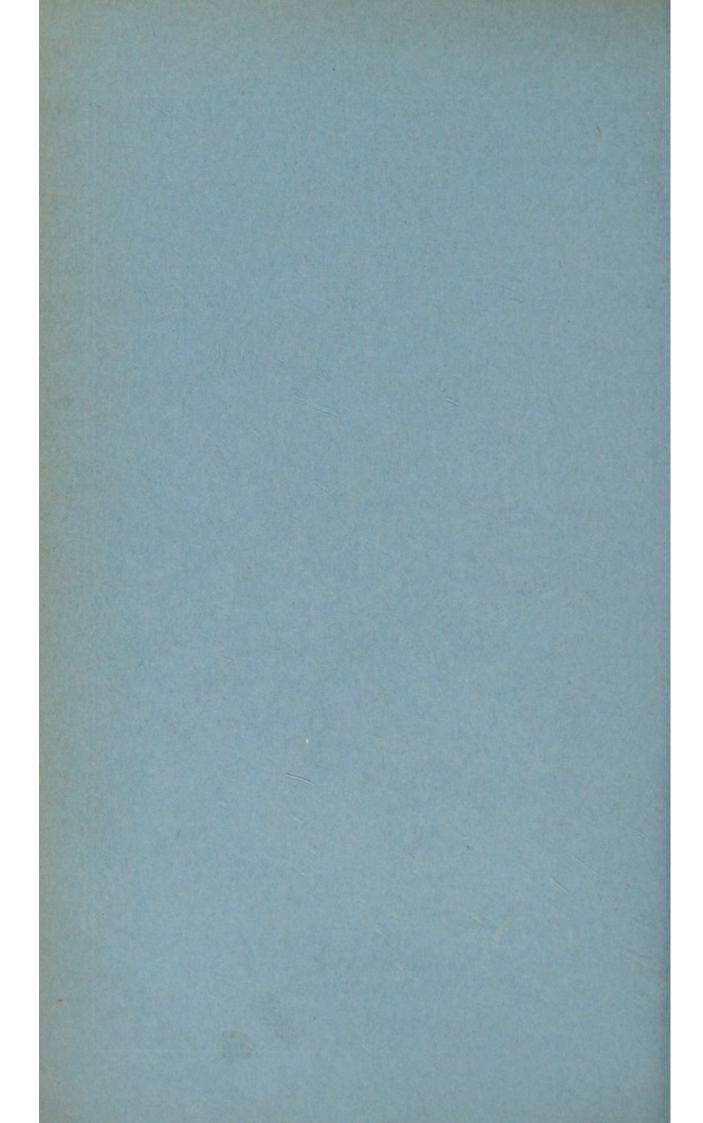
For the Year 1937.

CYRIL BANKS,

M.D., B.S.(LOND), D.P.H.(SHEFF.), MEDICAL OFFICER OF HEALTE.

Rottingbam :

DERRY AND SONS, LIMITED, PRINTERS.





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HEALTH COMMITTEE MEMBERS

1937 (mid-year).

LORD MAYOR: -COUNCILLOR ERNEST PURSER.

Chairman: —Councillor Ernest Purser.

Vice-Chairman: —Councillor B. Hallam (Bridge).

ALDERMAN H. BOWLES, J.P.	COUNCILLOR	J. L. Davies.
,, E. A. Braddock, J.P.	,,	H. O. Emmony.
,, W. Crane, J.P.	,,	(Mrs.) B. Hazard.
" J. B. Griffin.	,,	(Mrs.) E. F. HYATT, J.P.
,, A. Pollard, J.P.	,,	(Mrs.) S. James.
Councillor W. B. Blandy.	,,	A. E. Savage.
,, B. H. Brewill.	,,	R. Shaw, J.P.

SUB-COMMITTEES.

ISOLATION HOSPITAL AND CITY HOSPITAL.

CHAIRMAN.	Councillor Davies.
VICE-CHAIRMAN.	,, Emmony.
Alderman Braddock.	,, (Mrs.) Hazard.
,, Crane.	,, (Mrs.) Hyatt.
" Griffin.	,, R. Shaw.
Cormore on Program	

COUNCILLOR BLANDY.

The Chairman of this Sub-Committee is Councillor R. Shaw, and the Vice-Chairman, Councillor (Mrs.) Hazard.

TUBERCULOSIS AND VENEREAL DISEASES.

CHAIRMAN.	Councillor	BLANDY.
VICE-CHAIRMAN.	,,	Davies.
ALDERMAN CRANE.	,,,	(Mrs.) Hyatt.

MATERNITY AND CHILD WELFARE.

CHAIRMAN.

VICE-CHAIRMAN.

ALDERMAN CRANE.

COUNCILLOR BLANDY.

,, DAVIES.

Councillor (Mrs.) Hazard.

, (Mrs.) Hyatt.

, (Mrs.) James.

.. SAVAGE.

Co-opted Members :-

MISS W. GIBSON.

Mrs. Orton.

Mrs. D. Radford.

Mrs. Sansom.

SLAUGHTER-HOUSES.

CHAIRMAN.

VICE-CHAIRMAN.

ALDERMAN BOWLES.

,, Crane.

ALDERMAN GRIFFIN.
COUNCILLOR EMMONY.
,, R. SHAW.

OFFENSIVE TRADES.

CHAIRMAN. VICE-CHAIRMAN. COUNCILLOR BLANDY. ,, EMMONY.

HEALTH DEPARTMENT STAFF, 1937.

- Medical Officer of Health—
 Cyril Banks, M.D., B.S.(Lond.), D.P.H.(Sheff.).
- Consulting Tuberculosis Officer, and Resident Medical Officer City Isolation Hospital and Sanatorium— John Russell Edward, M.D., Ch.B.
- Temporary Medical Officer, City Isolation Hospital— T. A. Don, M.B., Ch.B., D.P.H.

(Lond.) (from 19/10/37).

- Tuberculosis Officer and Assistant Medical Officer of Health— John Vaughan Whitaker, M.B., Ch.B., D.T.M., D.P.H. (from 1/3/37).
- Assistant Tuberculosis Officer—

 Cyril Frederick Price, M.B., B.S., D.P.H. (up to 31/8/37).

 Frederick Henry W. Tozer, M.D., B.S.(Lond.), M.R.C.P.
- Assistant Medical Officers for Maternity and Child Welfare—
 ISABELLA McDougall Harkness, M.B., Ch.B., D.P.H.
 HENRIETTA MARY MACLEOD, M.B., B.S.(Lond.) (from 8/5/37).
- Medical Staff, Maternity and Child Welfare—

 J. Jean M. Morton, M.B., B.S., D.P.H.†

 Bernard R. B. Truman, B.A., M.B., Ch.B.†

 J. Wilkie Scott, M.C., M.D., Ch.B., F.R.C.P.† (up to 15/5/37).

 Percy Hardy, B.A., M.B., Ch.B.†

 Ethel Landon, M.B., Ch.B.†

 Marjorie A. Scott, M.R.C.S., L.R.C.P.†

Medical Staff, Venereal Diseases— Jas. C. Buckley, M.D., Ch.B.† (up to 20/4/37). Ethel M. D. N. Baker, M.D.† Aubrey D. V. Taylor, M.R.C.S., L.R.C.P.† Dorothea J. Mann, B.A., M.D.† Arthur Dewar Frazer, M.B., Ch.B., D.P.H.†

HERBERT SMITH WALLACE, M.B., CH.B.;

Medical Staff, Ultra-Violet Ray Clinic—

R. A. Clayton Rigby, L.R.C.P., L.R.C.S.†

Hy. Norman Jaffe, M.B., B.S.†

City Bacteriologist.—Elliott John Storer, M.R.C.S., L.R.C.P.

District Medical Officers (under Poor Law Acts)—

James Harvey Adam, M.B., Ch.B.†

EILEEN M. CLARKE, M.B., B.S.†

John R. Cox, M.R.C.S., L.R.C.P.†

ROBERT DAVIDSON, M.D., CH.B.;

Donald Duncan, M.B., Ch.B.†

THOMAS FOLEY, M.B., CH.B.;

Mary E. Houston, M.B., Ch.B.;

Harry G. Parker, M.B., Ch.B.†

WILLIAM HY. PEIRCE, L.R.C.P. & S., I., & L.M.†

Henry H. K. Sparrow, L.R.C.P. & S., I., & L.M.†

R. E. GORDON SMITH, M.R.C.S., L.R.C.P.†

Edna M. Stedeford, M.B., Ch.B.†

Chas. Coutts Wood, M.B., Ch.B.†

Public Vaccinators—

Donald Duncan, M.B., Ch.B.†

WM. Hy. Stewart Hodge, M.R.C.S., L.R.C.P.†

R. E. GORDON SMITH, M.R.C.S., L.R.C.P.†

Henry H. K. Sparrow, L.R.C.P. & S., I., & L.M.†

Chas. Coutts Wood, M.B., Ch.B.;

Public Analyst—William Wilders Taylor, B.Sc., F.I.C.†

Veterinary Surgeon—Lindsay Auchterlonie, M.R.C.V.S.†

Organizing Officer, Air Raid Precautions (First Aid Services)— Charles Wm. Jenkinson.†

Clerks (Central Office)—

H. Read (a) (Chief Clerk).

E. H. Cranmer (a)P. F. Carroll (up to 6/8/37).

C. Cooper.

G. ASTILL.

P. KIRKHAM.

F. H. LYMAN.

H. S. GREEN.

(Miss) W. M. Hickling.

R. L. R. Beswick.

F. Reeves (a) (up to 13/4/37). J. D. McDonald (from 26/4/37).

J. K. Edson.

D. G. Hatter (from 10/8/37).

Chief Sanitary Inspector—Alfred Wade, M.R.San.I. (a) (b) (i)

Deputy Chief Sanitary Inspector and Housing Inspector—

J. N. Hughes (a) (b)

Meat and other Food Inspectors—

W. Milns (a) (b)

F. Roworth (a) (b)

F. Richardson (a) (b)

G. J. Woodhouse (a) (b) (i)

Food and Drugs, Dairies and Cowsheds etc., Inspectors—

H. Leavers (a)

P. W. Watson (a)

Canal Boats Inspector, etc.—

A. Beresford (a)

Smoke Inspector—

E. B. Hocken (a) (b) (c)

District Sanitary Inspectors—

P. K. Bird (a)

B. Blayney (a)

H. Clarke (a)

H. N. EARDLEY (a) (b)

N. A. Helliwell (a) (b)

S. Hodgkinson (a) (b) (i)

(up to 17/4/37).

J. H. OLDHAM (a)

R. S. Porter (a) (b)

R. Young (a) (b) (from 13/4/37)

Assistant Sanitary Inspectors—

S. W. Burrill (a)

F. Reeves (a) (from 13/4/37).

R. Young (a) (b)

(up to 12/4/37).

Shops Acts Inspectors—

Miss A. G. Blayney (a)

Mrs. G. E. Gamble (a)

Women Housing Inspectors—

Mrs. E. E. Tomlinson (f) (g) Miss A. G. Mackay.

(up to 23/7/37).

MISS G. E. HALL (up to 31/7/37).

Miss C. Attewell.

Miss M. E. Nutt (from 6/12/37).

Vaccination Officers— Herbert Read†

THOMAS H. PALFREET

MATERNITY AND CHILD WELFARE.

Non-Medical Supervisor of Midwives-

Miss E. M. Cooper, A.R.R.C. (e) (f) (g)

Assistant Supervisors of Midwives-

Miss D. Backhouse (e) (f) (g) (h)

Miss S. M. Howard (f) (g) (h)

MISS E. MYCOCK (e) (f) (g) (h) (from 19/5/37 to 19/11/37).

Midwives (from 24/7/37)-36.

Superintendent Health Visitor—Miss W. M. Hudston (a)

Health Visitors-

Miss G. A. Arthur (f) (h)

Miss M. Bell (e) (f) (g) (h)

Miss C. Black (f)

MISS E. BOWLER (e) (f) (g) (h) (from 19/5/57).

Miss M. Fenwick (f) (g) (h)

Miss D. E. Foulds (e)

Miss W. E. Haynes (f) (g) (h)

Miss E. M. Kirkhope (e) (f) (g) (h)

Miss M. Lewis (e) (f) (g) (h)

Mrs. M. E. B. Morris (f) (g) (h)

Miss M. Palmer (a) (f)

MISS E. ROSS SERGEANT (a) (e)

Miss E. Storey (e) (f) (g) (h)

Miss R. M. Walters (e) (f) (g) (h)

Ophthalmic Nurse-Miss N. Elvidge (f) (g)

Clerks-

Miss M. L. Oswald.

Miss H. W. Attenborough (from 19/7/37).

Miss G. M. Searson (from 19/7/37).

MISS F. E. GOODBAND (from 15/11/35).

Miss F. B. Gunn (from 3/5/37).

Miss M. A. Lowndes.†

Miss E. L. Murray.† (up to 30/10/37).

Miss M. Oswald.†

Tuberculosis.

Visitors-

Miss E. Jackson (Superintendent) (f) (g) (h)

Mrs. E. Knighton (f) (g) (h) (up to 4/11/37).

Mrs. D. Moorhouse (e) (f) (g) (h)

Clerks-Miss C. Beardall.

Miss O. Clark (from 24/5/37).

Venereal Diseases.

Nurses-

Miss R. M. Mitchell (Superintendent and Matron) (f) (g) (h)

Miss R. Bewlay (f) (g) (h)†

Miss E. C. Ivall (f) (g) (h)

Miss M. Drabble (g) (h)

Miss A. S. Young (g) (h)

Orderlies-

R. Gamble.†

R. Pells.

W. J. Jones.

W. Pells.†

W. Milns.†

Clerks-

F. R. Hughes (a)

E. L. MEE.

Hostels for Unmarried Mothers (2).

Mrs. F. B. Bayley (Matron) (f) (g) (h)

Assistant Matron, 1.

House-Keeper, 1.

COOKS, 2; Nurse, 1; Nursemaid, 1; Housemaid, 1; Total, 8. Dr. Eileen M. Clarke in the visiting physician.

Ultra-Violet Ray Clinic-

Miss E. M. Heald (Clerk-Attendant).

Mrs. D. A. Morris (Attendant).

City Isolation Hospital and Sanatorium-

Matron, 1 (Miss M. E. Collington, D.12/3/38); Deputy Matron, 1; Sisters, 4; Nurses, 26; Female servants, 30; Male servants—including stokers, gardeners, ambulance drivers, porter, etc., 11; Clerk-Storekeeper, 1. Total, 74.

Small-pox Hospital—2 caretakers (man and wife).

Children's Sanatorium, Bulwell Hall-

Matron, 1 (Miss J. Hay); Sister, 1; Teachers, 2; Nurses, 3; Cook, 1; Maids, 7; Gardeners, 2; Total, 17.

V.D. Hospital-

Matron, 1 (Miss R. M. Mitchell), who also acts as Superintendent Nurse at V.D. Clinic; Nurses, 2; Maids, 2; Charwoman, 1; Total, 6.

Bacteriological Laboratory—

Assistants, 4; Clerk (f), 1; Cleaner and porter, 1.—Total 6.

Disinfecting Staff.—2.

Mortuary Attendants—2.

Office Porter-1.

Office Cleaners-12.

General Labourer—1.

CITY HOSPITAL.

Medical Superintendent:

(C. L. C. Crowe, M.D., Ch.B., appointed to this position to take up duty early in 1938).

Deputy Medical Superintendent:

S. B. Benton, M.R.C.S., L.R.C.P.

Assistant Medical Officers:

A. H. Johns, M.A., M.B., Ch.B., F.R.C.S.(Ed.).

G. L. BIRNIE, M.B., CH.B.

Assistant Surgical Officers:

Three appointments, held for 6 or 12 months.

†Consulting Physicians:

J. W. SCOTT, M.C., M.D., CH.B., F.R.C.P.

P. H. O'DONOVAN, M.D., B.S., M.R.C.P.

†Consulting Physician for Venereal Diseases:

J. C. Buckley, M.D., Ch.B. (up to 20/4/37).

A. D. V. Taylor, M.R.C.S., L.R.C.P. (from 21/4/37).

†Consulting Physician for Tuberculosis:

J. V. WHITAKER, M.B., CH.B., D.T.M., D.P.H. (Tuberculosis Officer).

†General Surgeons:

C. H. ALLEN, O.B.E., M.B., CH.B., F.R.C.S.(Ed.).

F. C. Hunt, M.B., B.S., F.R.C.S.(Ed.).

†Orthopædic Surgeon:

F. Crooks, M.B., M.Ch., F.R.C.S.(Ed.).

†Aural Surgeon:

E. J. G. Glass, M.B., Ch.B., F.R.C.S.(Ed.). (Also Aural Surgeon to the City Isolation Hospital).

$\dagger Radiologist$:

R. A. C. RIGBY, L.R.C.P., L.R.C.S.

†Radiographer: C. W. Eden.

†Visiting Anæsthetist: IAN R. SPARK, M.B., CH.B.

†Dental Surgeon: Geo. W. Harris, L.D.S.

Steward: G. W. GOULD.

Matron: Miss A. M. Rose, S.R.N., C.M.B.

Assistant Steward	1	Masseuses 4
Assistant Matron	1	Seamstresses 6
Ward Sisters	21	Clerks 3
Charge Male Nurses	2	Medical Superintendent's
Night Sisters	2	Secretaries 2
Tutor Sister	1	Scrubbers 77
Home Sister	1	Ambulance Nurses 4
Assistant Home Sisters		Linen Storekeeper 1
Theatre Sister	1	Sweep 2
X-Ray Sister	1	Messenger Boys 1
Staff Nurses	16	Sub-Probationers 1
Probationer Nurses	140	Assistant Tutor and Office
Cooks		61.
Assistant Cooks		m 1 1 0 0
Maids		
Male Nurses	10	
	0.1	
Hospital Porters		T 1
Pharmacist*	1	Labourers 9
Assistant Dispensers	2	Laboratory Attendant 1
Teachers	2	
† Part-time Officers. * This Officer also super		-f41 - Sh-1 St 4 Ti
		of the Shakespeare Street Dispensary. Institute or of Examination Joint
(a) Holds Certificate of It	oyar ountary	Board as Sanitary Inspector.
(b) ,, ,,	,,	,, as Inspector of Meat and
		Other Foods.
(c) ,, ,,	,	" as Smoke Inspector.
(d) Has had special train (e) Certificated Health V		mie work.
(e) Certificated Health V (f) Holds Certificate of C		es' Board
		nining in General Hospital.
100	tate registration	
(i) ,, ,, o.	f Royal Sanita	ry Institute for Sanitary Science.

REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1937.

INTRODUCTION.

To the Chairman and Members of the Health Committee.

The Annual Report for the year 1937 is set out in its usual form, in accordance with the wishes of the Ministry of Health, and, as in previous years, I provide an introduction which draws attention to special items of interest.

* * * * *

The salient features of the statistics of the year may briefly be summarised. The Registrar-General estimated a further decline of population by 600 to 278,800, apparently due to migration outwards, otherwise there would have been an increase, for the excess of births over deaths was 712. The birth-rate was a little higher than for some years past, being 15.96 per thousand population, and the marriage rate, 20.27, was the highest since 1920.

The death-rate varied from the previous year only by a fractional increase. The deaths below 65 years were fifteen less than last year, while the deaths above 65 years were seventy-two more than last year, showing a welcome trend of deaths to the older age-periods, which is, of course, to be desired.

The infant mortality rate showed a welcome decline from 89 to 80 per thousand live births. There is still room for improvement in this respect. Deaths of mothers in childbirth were down to a very satisfactory figure, being only 2.8 per thousand births (live and still). Nottingham has a good record in this respect, and investigation shows that the deaths from this cause among women who were healthy to begin with and were well cared for during pregnancy were very few indeed.

* * * * *

There was an invasion by influenza in January associated with an increase in respiratory diseases, the deaths from influenza, bronchitis and pneumonia being rather heavy, especially among the elderly. On the other hand, diphtheria exacted a lower toll than usual, there being only seven deaths compared with twenty-six in the previous year.

There was a widespread outbreak of bowel trouble towards the end of the year, the illness being classified as dysentery of the Sonne type. This is, fortunately, of non-fatal character, though troublesome for a few days. It was common at the time in many parts of the country, and the continent of Europe has experienced a great deal of it during recent years. Presumably due to infection of food by sufferers or carriers, the actual medium by which it was spread in Nottingham remained undiscovered though careful investigation of dietaries was made in a large number of cases.

* * * * *

One of the most notable administrative changes of the year was the operation of the Midwives Act 1936, under which municipal and county midwifery services came into being. It is of interest to recall that prior to the year 1902 the work of midwives was unregulated; any woman could call herself a midwife and many who did so were ignorant, dirty and in other ways a danger, though, of course, even in those days some had been properly trained in hospitals.

After 1902 none could practise midwifery except those admitted to the Register of the Central Midwives Board, either by virtue of having been in practice or of having passed an examination. Supervision of midwives by officers of local authorities was introduced. Improvement followed; the "handy woman" ceased to function in the prime duty of a midwife, though it took some time to suppress her. The standard of midwifery work was raised, especially when carried out by midwives who had also qualified themselves as fully-trained nurses.

The profession, however, remained a hazardous one, a reasonable income only being achieved by long hours and overwork, a circumstance which tended to defeat the pursuit of efficiency. Therefore the profession had little attraction to the more highly-qualified women, and very few of the many thousands of trained nurses who had qualified as midwives thought it worth while to practise as such. The advance in efficiency proceeded at too slow a rate and some of the older women carried on long after they were capable of good work.

* * * * *

With the passing of the Midwives Act of 1936 a new era began. Local Authorities were called upon to provide services of salaried midwives, and extremely generous terms of retirement were offered to induce or compel aged or infirm midwives to surrender their certificates. The salaries offered generally throughout the country were sufficient to attract into the services women who were qualified both as nurses and midwives.

In Nottingham it was decided that thirty-six women were needed for the municipal service, and many of those appointed were women previously practising locally, leaving only a few of them to practise privately.

In view of the short time available for organising, it is pleasant to record that the service opened on July 24th, and has proceeded to function successfully. The midwives provide their own living quarters but are required to live in prescribed areas. They are grouped in fours, so as to permit arrangements to be made for time off, week-end leaves, holidays and overlapping calls. Telephones and standard name-plates are provided.

They are under the able direction of Dr. Harkness, an assistant medical officer of health, and supervised by Miss Cooper and two nurse-inspectors. Poor people may be excused the fees wholly or in part, according to income, but generally speaking, the money is coming in very well indeed. There is free choice of midwife, in so far as the number of cases permits.

* * * * *

One result of the new midwifery scheme is the possibility of insisting that women shall receive adequate care throughout pregnancy and city midwives are obliged to attend the ante-natal clinics with their cases. This has the merit of allowing difficulties to be foreseen and guarded against. A close working arrangement with the City Hospital allows women requiring treatment for disorders

of pregnancy to be admitted forthwith to the ante-natal wards. Child-bearing should become safer in consequence of these measures.

* * * * *

The year witnessed the retirement of Dr. J. Wilkie Scott from his part-time appointment in the infant welfare centres, though fortunately his services as physician to the City Hospital are continued. Dr. Scott was first engaged in child welfare work as long ago as 1919, and has therefore assisted in the marvellous development of this service. It is a matter for regret that increased work in other directions caused the loss of his valued help in the infant welfare centres.

* * * * *

It is with regret that record is made of the prolonged illness of Miss Mary Collington, who was appointed Matron of the Isolation Hospital in July 1936. Her death on 12th March 1938, robbed the hospital of an ideal matron. In spite of her suffering she was able in her short term of office to initiate valuable improvements and give advice to the Committee as to lines of future development. Following a wide experience in other places she was for some years Sister-Tutor at the City Hospital and was admirably fitted for the appointment which she held in the closing stage of her life.

* * * * *

It is now some years since your Medical Officer of Health decided that the moment was opportune to express his dissatisfaction with the local arrangements for the prevention and treatment of tuberculosis. This dissatisfaction had had to be stifled for some years previously in order that more pressing re-organisations in the health services could first be accomplished. It is pleasing to recall that once the attention of the Committee had been drawn to the extent to which the local scheme fell below standard, in staffing and institutional provision, the response was immediate, and word was given to proceed with the necessary adjustments. There are now two highly qualified medical officers engaged on this work, and their report, given on page 129 shows the great advances which are being made. The scheme will not be working to full advantage until the sanatorium is available; this, unfortunately, will be some time ahead, for the planning and erection of a large hospital is a lengthy business. Much work has been done by way of study and planning during the past year, and all concerned are most anxious to see the building erected.

In tuberculosis, prevention and treatment go hand in hand, and prevention cannot be achieved fully until adequate facilities exist for the hospital isolation and treatment of those already suffering. In the meantime the existing beds at the Isolation Hospital and City Hospital are being used to greater advantage than ever before because it is now possible to give active treatment on modern lines. Artificial pneumothorax treatment, controlled by x-ray examination at the City Hospital or at the Tuberculosis Clinic, is now the rule, whenever the state of the individual patient indicates that the procedure is likely to be beneficial. Nottingham is now quite up-to-date in this important feature.

* * * * *

Reference must be made to the retirement in May 1937 of Dr. J. C. Buckley from his position as Director of the Clinic for Venereal Diseases. When the Government decided to put up a strong fight against these serious ailments, which had spread so alarmingly as a result of the circumstances of war, Nottingham was fortunate in having Dr. Buckley ready with special knowledge and organising ability.

Dr. Buckley, with the help of colleagues, was entrusted with the formation of a clinic, housed in North Church Street, and this was opened in 1917. Since that time 26,449 patients have made over one million attendances, excluding out-patient attendances at the Greendale House Hospital.

It was said that such clinics should not be conducted separately but should be carried on as part of an ordinary hospital out-patient department, so that people could attend unnoticed. Attachment to one of the local hospitals was impossible, for reasons which are now of no interest, but the special clinic soon proved a complete success.

There is a disinclination to discuss venereal disease, probably a very wholesome mental attitude to take up, in general. But the ravages of syphilis and gonorrhœa cannot be neglected by those whose duty it is to safeguard public health. Syphilis, uncured, remains for a considerable period infectious; its victims may live, only to succumb later from diseases of the circulatory or nervous systems, or degeneration of other bodily structures. The period during which Dr. Buckley and his colleagues have been carrying on the work at the clinic has been marked by rapid advances in the cure of syphilis by means of substances prepared by the skill of laboratory chemists. As a result, many cases of syphilis have been completely cured and have no fear of drifting later into mental hospitals, or of suffering from any of the dreadful sequels

of the disease. Again, every case of syphilis cured means one more source of infection closed.

This has been a great work, of which Dr. Buckley and his colleagues may well be proud. Unfortunately gonorrhœa has not yielded so readily and is not declining to the same extent as syphilis, but here again much good has been done. Dr. Buckley should carry with him into his retirement the gratitude of the public.

* * * * *

It is deplorable that the state of international affairs has made it necessary to be prepared for war. Protection of the civil population against the effects of air-raids must be planned in advance.

Your Medical Officer of Health has been made responsible for the provision of ambulance and hospital services, two very important parts of the general scheme coordinated by the Chief Constable.

The St. John Ambulance Brigade has agreed to staff the first-aid posts and provide mobile first-aid parties, and to enable this to be done the Brigade is supplemented by an auxiliary service made up of volunteers of both sexes from the general public. Special training in anti-gas measures and first-aid has been continuously proceeding, not only for the recruits to the ambulance service, but also for air-raid wardens, fire brigade auxiliaries, Corporation servants and others, the classes being held at the special school, fitted with gas-chamber, at the Eastcroft.

As mentioned last year, Mr. C. W. Jenkinson came on to the Health Department staff to organise and teach, and his services have proved of great value. The organisation of so new a thing has proved difficult and at times disheartening, because it differs so completely from any form of established municipal service. The arrangements to be made cannot be framed according to past experience, because the problems set are new ones and no hard-and-fast rules exist. Gradually, however, the organisation is taking shape and, given time, may be expected to be reasonably capable of meeting an emergency.

Possibly we are only forming the foundations of a voluntary service which in future will be built up into a regular feature of community life, on lines which at present cannot be foreseen. One thing is certain; there is a need for many more volunteers, hundreds more, for training in ambulance and nursing work, to be attached to the St. John Ambulance Brigade Auxiliary Service or to the British Red Cross Society (the latter specialising on military hospital work). The public should realise that even if war never comes such training fits people to be more useful citizens, capable of dealing with the emergencies of ordinary life in the home or the factory, or upon the roads.

* * * * *

This Report would not be complete without a sincere expression of appreciation of the happy relations which exist between the Health Committee, as employers, and the staff (numbering over 600) of the Health Department and its associated hospitals and clinics. The determination of the Committee to extend and perfect its services is in keeping with the professional ideals and ambitions of the majority of the Committee's servants.

The Committee has proved to be considerate in its treatment of the staff, and I venture to say that in spite of the very heavy and increasing burden of work which falls on the Health Services in these days, the general tone in the various sections of the department is one of pleasure in trying to serve the public needs efficiently.

CYRIL BANKS,

Medical Officer of Health.

HEALTH DEPARTMENT,
HUNTINGDON STREET,
NOTTINGHAM.
June, 1938.

SECTION "A."

STATISTICS
and
SOCIAL CONDITIONS OF THE CITY.

STATISTICS AND SOCIAL CONDITIONS.

AREA (a	cres)				16,166	
POPULA	rion.—At	Census of	f 1881		186,575	
		,,	1891		213,877	
		,,	1901		239,753	
		,,	1911		259,904	
		"	1921	g ₂	262,624	266,400 as revised by Registrar- General.
		,,	1931		268,801	
Cen	districts extensio	included n of bound	1931 of Cit l in the daries (see Cables pub	1933 Census		
	1936)				276,189	
Registra	r-General	's estimat	es of popula	ation :-		
	Mid-yea:	r 1933			283,030	
	,, ,,	1934			281,850	
		1935			280,200	
		1936			279,400	
		1937			278,800	

It will be seen that the Registrar-General has again estimated the population as lower than in the previous year. According to his estimate there was a decrease of 600.

There were 712 more births than deaths, so the population should have increased by this number, except for migration. If the Registrar-General's estimate is correct it means that the people who went to live out of the city exceeded those who came to live in it by no less than 1,312. Last year the corresponding number was 1,356. There will be no certain method of checking these figures until the 1941 Census has been taken.

INHABITED HOUSES, Etc.		
Number of inhabited houses, Census, 1921		61,876
,, ,, ,, ,, 1931		68,889
,, ,, ,, March, 1937		79,769
Number of families or separate occupiers, Census	1921	63,621
,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,	1931	70,740
Rateable Value		£2,050,586
Sum represented by a penny rate (1937-38)		£7,902
Rates in the £ (1937-38)		14/4
BIRTHS.		
Legitimate Males 2,125 Females 2,069		Total 4,194
TII 111 1 101		205
Total Births		4,459
Birth-rate per 1,000 of population		15.96
Average 10 years 1891—1900		29.20
,, ,, 1901—1910		26.90
,, ,, 1911—1920		$21 \cdot 03$
,, ,, 1921—1930		18.97
1931		$17 \cdot 16$
1932		16.36
1933		15.82
1934		15.58
1935		15.69
1936		$15 \cdot 20$
1937	1931	15.96
STILLBIRTHS.		
Legitimate Males 91 Females 57		Total 148
Illegitimate ,, 6 ,, 4		,, 10
Total stillbirths		158

Rate per 1,000 births (live and still)

 $34 \cdot 22$

DEATHS.

Males, 1,9	48	Females, 1,7	799	!	Total 3,747
Death-ra	te per 1,0	000 of popula	ation		$13 \cdot 44$
Average	10 years	1891-1900			18.38
,,	,,	1901 - 1910			$16 \cdot 50$
,,	,,	1911—1920			15.55
,,	,,	1921—1930			$13 \cdot 24$
1931					13.56
1932					12.47
1933					$13 \cdot 35$
1934					12.31
1935					12.51
1936					13.21
1937					13.44

Note.—This is the crude death-rate after correcting for transfer outwards of the deaths of non-residents who died in Nottingham, and the transfer inwards of the deaths of Nottingham residents who died elsewhere. It is not a figure which enables a comparison to be usefully made between one city and another, because the populations of different towns vary considerably in their component parts as regards age and the proportions of the two sexes.

In order to provide a figure which can be used for comparison, the Registrar-General has calculated a "Comparability Factor." It is not possible in a few words to explain the method by which this is arrived at. The figure for Nottingham is 1.03.

The death-rate, when multiplied by the comparability factor is 13.84.

DEATHS FROM PUERPERAL CAUSES.

Rate per 1,000 (live and still) births.

	No.	Nottingham.	England & Wales.
Sepsis	 4	0.87	0.94
Other Causes	 9	$1 \cdot 95$	2.17
Total	 13	2.82	$\overline{3\cdot 11}$
		-	

The maternal death-rate per 1,000 births (live and still) during the last ten years is given in the following table :—

	1928	1929	1930	1931	1932	1933	1934	1935	1936	1937
Fever	8	4	7	13	4	7	7	4	5	4
Other causes	18	11	10	7	10	9	4	16	15	9
Per 1,000 births	5.5	3.3	3.7	4.1	3.0	3.5	2.4	4.4	4.5	2.8
DEATHS FRO	OM M	IEAS	LES	(all a	ges)					22
"					OUGH nder 2					9 49
"	1)IAN	THE	A (ui	nder 2	year	s or a	ge)		49
INFANT MORT	TALI	TY.								
Death	s of I	nfant	s und	ler 1	vear					358
Rate										80
					timat					
Avera	ge 10	year	s 1891	1-19	00					182
,,		,,	190	1-19	10					161
,,		,,	1917	1—19	20					125
,,		2.5	192	1—19	30					89
1931										82
1932										80
1933										85
1934										69
1935										81
1936										89
1937										80
MARRIAGES.										
Year.				Num	ber.				1	Rate.
1927				2,3	38				1	$7 \cdot 60$
1928				2,30	65				1	$7 \cdot 74$
1929				2,38	87					$7 \cdot 89$
1930				2,5						$9 \cdot 29$
1931				2,1						5.86
1932				2,50						8.52
1933				2,3						6.56
1934				2,4						$7 \cdot 34$
1935				2,6						9.04
1936				2,5						8.68
1937				2,8	26				2	$20 \cdot 37$

Birth-rates, Death-rates, Analysis of Mortality, Maternal Death-rates, and Case-rates for certain Infectious Diseases in the year 1937.

(England and Wales, London, 125 Great Towns and 148 Smaller Towns). (Provisional Figures based on Weekly and Quarterly Returns).

11.9 12.3 13.44 0.00 0.00 0.00 0.01 0.00 0.00 0.00 0.00 0.00	12.3 0.00
12.3 0.00 0.01 0.01 0.05 0.05 0.05 0.05 0.44 1.18	12.3 0.00 0.01 0.05 0.05 0.05 0.05 0.05 0.05
0.00 0.01 0.01 0.05 0.05 0.38 0.51 1.93 1.18	0.00 0.01 0.05 0.05 0.05 0.51 0.05 1.93 1.18
0.01 0.05 0.05 0.05 0.05 0.05 0.04 1.18	0.01 0.05 0.05 0.05 0.05 0.05 0.04 1.18
2.09 0.05 0.05 0.05 0.05 0.04 1.18	2.09 0.05 0.05 0.05 0.05 0.05 0.04 1.18
0.06 0.05 0.38 0.51 1.93 0.05 0.44 1.18	0.06 0.05 0.51 0.05 0.05 0.04 1.18
0.05 0.38 0.51 1.93 0.05 0.44 1.18	0.05 0.38 0.51 1.93 0.05 0.44 1.18
0.42 0.38 0.42 0.51 1.38 1.93 0.04 0.05 0.34 0.44 1.20 1.18	0.42 0.38 0.42 0.38 0.00 2.42 2.09 1.38 1.93 0.04 0.05 0.34 0.44 1.20 1.18
0.42 0.51 0.00 2.42 2.09 1.38 1.93 0.04 0.05 0.34 0.44 1.20 1.18	0.42 0.51 0.00 2.42 1.38 0.04 0.04 0.34 1.20 1.18 tes per 1,000 Live Births.
0.00 2.42 1.38 0.04 0.05 0.34 1.20 1.18	0.00 2.42 1.38 0.04 0.05 0.34 1.20 1.18 tes per 1,000 Live Births.
2.09 1.93 0.05 0.44 1.18	2.09 1.93 0.05 0.44 1.18
2:09 1:93 0:05 0:44 1:18	2.09 1.93 0.05 0.44 1.18
0.05 0.44 1.18	0.05 0.04 1.18
0.04 0.34 0.34 1.20 1.18	0.05 0.44 1.18 ve Births.
1.20 1.18	0.34 0.44 1.20 1.18 tes per 1,000 Live Births.
1.20 1.18	1.20 1.18 tes per 1,000 Live Births.
	tes per 1,000 Live Births.
1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	ates per 1,000 Lave Births.
99 99 80	

COMPARISON WITH LARGE CITIES.

In addition to the last table, compiled from figures supplied by the Registrar-General, it has been possible to secure figures relating to some of the large towns by means of a system of pooling information through the County Borough Group of the Society of Medical Officers of Health.

		RATES.								
Town.	Popula- tion.	Live Births.	Deaths (adjusted)	Infant Mortality.	Tubercu- losis Deaths.	Maternal Mortality				
Glasgow	1,119,863	19.8	16.4	104	1.06	4.96				
Birmingham	1,029,700	16.3	12.9	60	0.80	2.96				
Liverpool	836,300	19.3	15.2	82	0.92	2.31				
Manchester	736,500	14.3	15.4	76	1.03	4.19				
Sheffield	518,200	15.4	14.2	55	0.80	3.37				
Leeds	491,880	14.8	14.3	67	0.83	2.24				
Edinburgh	466,817	15.8	13.8	70	0.77	4.55				
Bristol	415,100	14.5	11.2	46	0.80	3.53				
Hull	319,400	18.2	13.8	77	1.12	2.48				
Newcastle	290,400	16.5	15.0	91	1.12	4.21				
Bradford	289,510	13.8	14.8	70	0.77	2.62				
Nottingham	278,800	16.0	13.8	80	0.99	2.82				
Stoke	278,200	16.7	16.0	81	0.94	4.59				
Leicester	262,900	14.5	12.7	63	0.96	1.27				
Portsmouth	256,200	14.9	11.4	44	0.62	1.51				
Cardiff	220,200	14.4	13.3	65	0.99	3.67				
Coventry	204,700	15.7	12.6	49	0.74	2.96				
Sunderland	182,900	19.7	15.7	85	1.03	3.45				
South'pton	178,700	15.9	12.2	49	0.83	1.76				
Dundee	177,711	17.6	15.0	87	0.82	5.12				
Aberdeen	177,317	17.1	_	72	0.55	4.13				
Bolton	170,400	12.7	15.4	61	0.63	6.11				
Swansea	161,750	15.1	14.3	56	0.94	4.08				

As pointed out in previous years Nottingham Statistics are not strictly comparable with those of the large cities which have been allowed by Parliament to extend their boundaries so as to include the suburbs in which their healthiest people live.

Birth-rate, General Death-rate, and Death-rates from the Principal Epidemic and from Tuberculous Diseases, per 1,000 of Population, and Infantile Death-rate per 1,000 Births.

NOTTINGHAM.

In Five Yearly Periods, 1856-1910, and in Single Subsequent Years.

	i.e	er		Death-rate per 1,000 living from								
	Birth-rate per 1,000 living.	Death-rate per 1,000 living.	Infantile Death-rate	7 principal Epidemic Diseases.	Small-pox.	Measles.	Scarlet Fever.	Diphtheria.	Whooping Cough.	"Fever" principally Enteric	Diarrhoea.	Phthisis & other Tuber culous
1856-1860 1861-1865 1866-1870 1871-1875 1876-1880 1881-1885 1886-1890 1891-1895 1896-1900 1901-1905 1906-1910 1911 1912 1913 1914 1915 1916 1917 1918 1919 1920 1921 1922 1923 1924 1925 1926 1927 1928 1929 1930 1931 1932 1933 1934 1935 1936 1937	36.8 34.8 31.3 34.1 34.6 36.6 30.4 29.5 28.9 27.7 26.1 24.5 23.7 22.6 23.2 20.6 19.9 15.9 15.9 15.9 19.3 19.1 18.4 17.7 17.1 17.7 17.1 17.7 17.1 17.0 17.2 16.4 15.8 15.6 15.7 15.2 16.0	$27 \cdot 2$ $24 \cdot 9$ $23 \cdot 8$ $24 \cdot 9$ $21 \cdot 7$ $20 \cdot 9$ $17 \cdot 9$ $18 \cdot 3$ $18 \cdot 5$ $17 \cdot 2$ $15 \cdot 8$ $16 \cdot 1$ $14 \cdot 4$ $14 \cdot 3$ $15 \cdot 4$ $15 \cdot 1$ $16 \cdot 0$ $13 \cdot 1$ $12 \cdot 3$ $12 \cdot 1$ $13 \cdot 0$ $13 \cdot 1$ $12 \cdot 3$ $12 \cdot 1$ $13 \cdot 0$ $13 \cdot 1$ $12 \cdot 3$ $12 \cdot 1$ $13 \cdot 0$ $13 \cdot 1$ $12 \cdot 3$ $12 \cdot 1$ $13 \cdot 0$ $13 \cdot 1$ $13 \cdot 0$ $13 \cdot 1$ $14 \cdot 1$ $12 \cdot 1$ $13 \cdot 1$ $13 \cdot 1$ $13 \cdot 1$ $13 \cdot 1$ $14 \cdot 1$ $13 \cdot 1$ 1	209 192 200 192 175 174 168 174 191 170 152 162 117 131 146 130 116 127 123 106 96 102 83 86 84 96 100 84 85 96 75 82 80 85 69 81 89 80	5.98 3.83 4.34 4.30 3.00 3.22 2.39 2.50 2.66 2.22 1.64 2.36 1.45 1.28 1.75 1.14 1.02 0.75 1.15 0.69 0.74 0.60 0.42 0.82 0.88 0.66 0.60 0.74 0.53 0.45 0.35 0.38 0.46 0.39	0·21 0·09 0·07 0·79 0·00 0·01 0·01 0·01 ··············	0.80 0.43 0.44 0.31 0.35 0.41 0.42 0.35 0.46 0.38 0.37 0.62 0.07 0.54 0.20 0.25 0.44 0.13 0.04 0.37 0.00 0.35 0.10 0.01 0.35 0.04 0.08 0.02 0.10 0.01 0.05 0.01	$\begin{array}{c} 1\cdot08\\ 0\cdot98\\ 0\cdot73\\ 0\cdot53\\ 0\cdot62\\ 0\cdot77\\ 0\cdot11\\ 0\cdot23\\ 0\cdot10\\ 0\cdot09\\ 0\cdot05\\ 0\cdot03\\ 0\cdot09\\ 0\cdot06\\ 0\cdot04\\ 0\cdot06\\ 0\cdot02\\ 0\cdot02\\ 0\cdot01\\ 0\cdot03\\ 0\cdot00\\ 0\cdot02\\ 0\cdot01\\ 0\cdot03\\ 0\cdot00\\ 0\cdot02\\ 0\cdot01\\ 0\cdot03\\ 0\cdot01\\ 0\cdot05\\ 0\cdot01\\ 0\cdot05\\ 0\cdot01\\ 0\cdot02\\ 0\cdot03\\ 0\cdot01\\ 0\cdot02\\ 0\cdot03\\ 0\cdot01\\ 0\cdot02\\ 0\cdot03\\ 0\cdot01\\ 0\cdot03\\ 0\cdot01\\ 0\cdot02\\ 0\cdot03\\ 0\cdot01\\ 0\cdot03\\ 0\cdot01\\ 0\cdot03\\ 0\cdot01\\ 0\cdot03\\ 0\cdot01\\ 0\cdot002\\ 0\cdot003\\ 0\cdot003\\$	0.13 0.12 0.09 0.02 0.03 0.12 0.06 0.08 0.10 0.19 0.13 0.12 0.10 0.15 0.13 0.05 0.06 0.07 0.20 0.26 0.34 0.10 0.04 0.04 0.04 0.04 0.04 0.04 0.04 0.09 0.26 0.23 0.16 0.21 0.13 0.02 0.03 0.02 0.03 0.02 0.03 0.02 0.03	0.76 0.51 0.26 0.43 0.46 0.45 0.41 0.36 0.31 0.27 0.15 0.24 0.26 0.09 0.28 0.10 0.09 0.16 0.10 0.13 0.14 0.11 0.25 0.03 0.06 0.12 0.09 0.04 0.12 0.09 0.04 0.09 0.04 0.09 0.04 0.09 0.09 0.09 0.09 0.09 0.09	1·02 0·78 0·92 0·84 0·34 0·31 0·26 0·32 0·20 0·11 0·11 0·05 0·03 0·02 0·02 0·03 0·02 0·00 0·01 0·01 0·01 0·01 0·01 0·01 0·00 0·00 0·01 0·00 0·00 0·01 0·01 0·01 0·01 0·01 0·01 0·01 0·01 0·00 0·01 0·01 0·00 0·00 0·01 0·01 0·01 0·01 0·01 0·00 0·00 0·01 0·01 0·00 0·00 0·00 0·01 0·00	$2 \cdot 00$ $1 \cdot 09$ $1 \cdot 57$ $1 \cdot 53$ $1 \cdot 06$ $1 \cdot 09$ $1 \cdot 04$ $1 \cdot 12$ $1 \cdot 01$ $0 \cdot 75$ $1 \cdot 58$ $0 \cdot 33$ $0 \cdot 77$ $0 \cdot 62$ $0 \cdot 58$ $0 \cdot 30$ $0 \cdot 37$ $0 \cdot 31$ $0 \cdot 30$ $0 \cdot 42$ $0 \cdot 22$ $0 \cdot 27$ $0 \cdot 22$ $0 \cdot 19$ $0 \cdot 31$ $0 \cdot 30$ $0 \cdot 25$ $0 \cdot 23$ $0 \cdot 18$ $0 \cdot 25$ $0 \cdot 15$ $0 \cdot 22$ $0 \cdot 18$ $0 \cdot 24$	3 · 22 3 · 19 2 · 78 2 · 44 1 · 86 1 · 76 1 · 76 1 · 70 1 · 53 1 · 63 1 · 56 1 · 79 1 · 12 1 · 14 1 · 12 1 · 14 1 · 13 1 · 19 1 · 14 1 · 10 1 · 10

Summary of Deaths at all ages from various causes, 1937. (R.G.'s International Short List).

			200	1937.
TOTAL DEATHS				3,747
Deaths under 1 year				358
" 1— 5 years				96
,, 5-45 ,,				544
,, 45-65 ,,				991
,, 65—75 ,,				854
" over 75 "				904
Causes of Deaths:-				
Typhoid and Paratyphoid Feve	ers			2
Measles				22
Scarlet Fever				1
Whooping-Cough				9
Diphtheria				7
Influenza				121
Encephalitis Lethargica				7
Cerebro-Spinal Fever				2
Tuberculosis of Respiratory Sy	stem			234
Other tuberculous diseases				43
Syphilis				7
General Paralysis of the Insanc	e, tabes dor	salis		10
Cancer, malignant disease				437
Diabetes				50
Cerebral Hæmorrhage, etc				209
Heart Disease				915
Aneurysm				12
Other circulatory diseases				135
Bronchitis				170
Pneumonia (all forms)				339
Other respiratory diseases				30
Peptic Ulcer				35
Diarrhœa, etc				66
Appendicitis				19
Cirrhosis of Liver				14
Other diseases of liver, etc.				12
Other digestive diseases				43
Acute and chronic Nephritis				95
Puerperal Sepsis				4
Other puerperal causes	11 11 11 11			9
Congenital debility, premature	birth, malf	ormations	s, etc.	146
Senility				113
Suicide				45
Other violence				126
Other defined diseases				254
Causes ill-defined, or unknown				4

INFANT MORTALITY during the year 1937. Deaths from stated causes at various ages under One Year.

CAUSE OF DEATH.	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 DEATHS UNDER ONE YEAR.
CERTIFIED UNCERTIFIED	99	24	13	18	154 1	62	74 —	43 —	24	357 1
Small-pox		1111111111						- 1 - 1 - - - 1		- 4 - 3 - 3 1 1 1
Diseases	-	-	-	-	-	-	-	-	-	-
Tuberculous) Convulsions Laryngitis Bronchitis Pneumonia (all forms) Diarrhœa & Enteritis Gastritis Syphilis Rickets Suffocation (overlying) Difficulty or Injury at Birth Atelectasis Premature Birth Congenital Malformations Atrophy, Debility and Marasmus Other Causes		- 1 - 6 3 2 8 4		9 4 - - - - 2 2	- 4 - 22 7 17 77 16		1 — 4 33 25 — — — — — 2 1 3 —	1 - 3 24 5 1 - - - 4	4 - 12 - 1 - - - - - 3	6 6
TOTALS	100	24	13	18	155	62	74	43	24	358

SECTION "B."

GENERAL PROVISION OF HEALTH SERVICES IN THE CITY.

General Provision of Health Services in the City.

The staff engaged in Public Health work is set out at the beginning of this Report, while below is a summary of clinics and treatment centres provided by various agencies, recorded as required by the Ministry of Health.

The continued growth and increasing importance of Maternity and Child Welfare work have led to changes in premises. Increased number of sessions, especially antenatal, has been found essential.

The premises of Drayton Street United Methodist Chapel were given up towards the end of the year for more extensive premises at Edingley Avenue. These will be replaced later by an Infant Welfare Centre now in course of construction in Edward's Lane which will serve the Edward's Lane and Bestwood Estates.

New premises have not yet been found to replace the Forest Dene Centre and we still carry on temporarily Infant Welfare work at the General Dispensary, Gregory Boulevard.

Maternity and Child Welfare Centres.

Name and Situation. *†25 Wilford Road.	Adapted pr	dation.	By whom provided. By Local Authority
*†75 Radford Boulevard. (Dr. Wm. Scott Memorial Clinic).	Large adap house.	eted private	Do.
*City Mission Hall, Carlton Hall.		ral hall with ling offices.	Do.
†Jarvis Avenue, Oakdale Road.	Do.	Do.	Do.
Congregational Church Hall, Lenton Abbey Estate.		Do.	Do.
# A 1 (01: 1 1 11 .)	Charles		

^{*} Ante-natal Clinics held at Centres.
† Toddlers' Clinics held at Centres.

Name and Situation	Nature of Accommodation.	By whom provided.
*†Assembly Hall, A	spley. do. do.	By Local Authority
*24 Main St., Bulw	rell Infant Welfare and School Medical Clinic	Do.
Methodist Church David Lane, Basford.	n, Church Hall and rooms.	Do.
*†Health Departme Offices, Huntin Street.	ent Ground-floor rooms.	Do.
	te. Adapted combined to house and shop.	Do.
†General Dispensa Gregory Boule	ry, Out-patients' dispensar vard.	ry. Do.
* Ante-natal Clinics h † Toddlers' Clinics he		
	Day Nurseries.	
Nottingham Day Nursery, Heathcoat Street.	Accommodation for 40 children during mothers' working-day.	
Pearson Street, Basford.	Accommodation for 25 children during mothers' working-day.	Do.
95, Queen's Drive.	Accommodation for 15 children during mothers' working-day.	By Local Authority
	School Clinics.	
Chaucer Street.	Equipment for treatment of minor ailments, dental defects, eyesight examinations, surgical treatment of defects of nose and throat, X-Ray, Ultraviolet Ray, and Electrotherapeutic work.	Do.

Name and Situation.	Service on the service of the servic	By whom provided.
Leen Side.	Clinic for minor ailments, and Cleansing station and scabies treatment centre.	By Local Authority
Beaconsfield Street, Scotholme.	Clinic for minor ailments.	Do.
Joint Health and Education Committee Clinic, Main Street, Bulwell.	Clinic for minor ailments, refraction, and dental treatment.	Do.
Rose Hill, St. Matthias' Road.	Clinic for minor ailments, refraction, and dental treatment.	Do.
Temporary Clinic, Wm. Crane School, Aspley.	Clinic for minor ailments.	Do.
*Bulwell Hall School	l. ditto.	Do.
*Jesse Boot School.	ditto.	Do.
* For children attendi	ng these schools only.	
	Tuberculosis Clinic.	
" Forest Dene," Gregory Boulevard.	Large adapted private house.	Do.
Treatr	nent Centres.—Venereal Di	seases.
*29-35 North Church Street.	Four adapted private houses.	Do.
Greendale House, Hospital, Gregory Boulevard.	Large 15-roomed house equipped for both in- and out-patient treat- ment of women and children, including mat- ernity cases.	Do.

Orthopædic Clinic.

Name and Situation.

Name of Accommodation.

By whom provided.

Nottingham Cripples' Guild. 19, Park Row.

A modern out - patient orthopædic clinic, with gymnasium, exercise room, and apparatus workshops attached. Payments amounting to about £835 were made by the Corporation of Nottingham to the Guild during 1937.

By private guild or association.

Ultra-Violet Ray Clinics.

32, Heathcoat Street.

An out-patient clinic (for By Local Authority general public), furnished with 7 lamps.

Chaucer Street.

M.I. Clinic for children of school age, furnished with one lamp.

Do.

Hostels for Unmarried Mothers and their Children.

1, Queen's Drive.

10 beds (for mothers) and By Local Authority

10 cots (for children).

95, Queen's Drive.

8 beds (for mothers) and 8 cots (for children).

Do.

Ambulance Facilities.

The Health Department has two "Austin" ambulances which are kept at the garage of the Isolation Hospital. Both are used for the transport of patients suffering from infectious diseases, and no charge is made for such use within the city.

The City Hospital has its own fleet of ambulances, used jointly by the hospital and the adjacent Public Assistance Institution (Vale Brook Lodge).

The City Police have four "Commer" ambulances which are used for the conveyance of non-infectious, medical and surgical, and accident cases, principally to the local hospitals. These are kept at the Central Police Depot in the Guildhall Yard. A charge of 3/- is made for the use of the police ambulance within the city. For the use of these ambulances outside the city, an initial charge of 10/- is made, and a further payment required of 1/- a mile, out and in, for all distances beyond the city boundaries.

The St. John Ambulance Brigade has three ambulances, a "Ford," a "Vauxhall" and an "Austin." All are kept temporarily at Chester's garage, Wilford Crescent East, but they will shortly be based on the city's First-Aid and Medical Services Depot at the Eastcroft. The removal of all kind of cases, with the exception of "dangerous infectious diseases," is undertaken. A charge of 2/6d. per journey is made for removals inside the city boundaries, but where it is found that a patient is definitely too poor to pay, one journey is made without charge. For the removal of cases from outside the city boundaries, a charge is made of 9d. per mile between 9 a.m. and 6 p.m., and 1/- a mile from 6 p.m. to 9 a.m.: if a "stretcher" case the fee includes services of orderly.

Special arrangements have recently been made for conveying patients by air and sea as well as by road. Terms are settled according to requirements, the Brigade making all arrangements.

In connection with Air-Raid Precautions, vans belonging to private firms (who have responded to an appeal in regard to this matter) have been ear-marked for service in emergency, when they will be equipped with a fitting for carrying stretchers.

MATERNITY AND CHILD WELFARE.

Ante-Natal Department and Municipal Midwifery Service.

Non-Medical Staff:—Supervisor of Midwives.

Two Assistant Supervisors.

One Health Visitor with special ophthalmic and ante-natal duties.

Thirty-six Midwives.

(a) Supervision of Midwives—Midwives' Acts, 1902-26-36.

The Midwives' Act, 1936 has caused this department to be enlarged by the addition of 36 midwives who are engaged solely in domiciliary midwifery throughout the city. As a result inevitable changes have been brought about in the working of the department. There are very few midwives remaining in independent practice. This few is still inspected by the Supervisor of Midwives, as before the new act came into force, so far as matters of infection, disinfection, and adherence to the rules of the Central Midwives Board, are concerned.

Routine inspection of the city midwives is carried out by the Supervisor and her assistants. Many of these midwives were in independent practice before the midwifery service was begun. The relationship between the two is now closer than ever with, we hope, a resultant higher standard of midwifery than ever before which should tend towards a lowering of maternal morbidity and maternal mortality. Midwifery in Nottingham has been well done, but there always remains the abortion factor in the maternal mortality rate which baffles, so far, all efforts to reduce it. This is especially true of all big cities, Nottingham among them.

(b) Ante-Natal Work.

This is a most important part of the midwifery service and all midwives are required to take a large part in the performance of it. The duties of Health Visitors and midwives meet at the ante-natal clinic. Routine home-visiting to expectant mothers is also done by midwives. They also carry out special home-visiting, chiefly instructional in character, at the instigation of the various medical officers of the ante-natal clinics.

(c) The Assistant Supervisors and the Health Visitor with special duties investigate the following cases:—

Puerperal cases—including Pyrexia and Fevers.

Still-births and maternal deaths.

Pemphigus neonatorum.

Ophthalmia neonatorum.

(d) Municipal Midwifery Service.

This is dealt with fully in the Preface.

(e) Inspection of Maternity Homes.

This very important work is carried out by the Medical Officer of Health or a deputy at the time of registration or re-registration and at intervals thereafter upon his instructions.

Midwives.

Total No. of midwives who notified intention	to	
practice throughout the year 1937		80
Total No. practising in the area at the end of 1937		85
(a) No. employed by the Local Supervising Author	rity	41
(b) No. employed by other Welfare Councils		7
(c) No. employed by Voluntary Associations		15
(d) No. in private practice		22
No. of inspections of and visits to midwives		377

No. of notifications of liability to be a source of infection	55
Midwives fees (30/-) paid altogether, or in part, in necessitous cases until July 24th	
Compensation paid to midwives for compulsory loss of practice (Midwives' Act, 1902, Section 2)	£8/5/0
Compensation to midwives for loss of cases sent to hospital from ante-natal clinics	£10/10/0

Medical Assistance for Midwives.

Certain rules of the Central Midwives Board require midwives to call in a doctor in all cases of illness of mother or child as well as in any abnormality of the ante-natal period, labour, or lying-in period.

The number of cases in which assistance was sought was as follows:—

		Do	miciliary.		Nursing Home.
Assistance for mother			671		43
Assistance for child			105		6
Fees paid to medical midwives	practit	tioners fo	or assistar	ice to	£785/2/6
Amount of fees collecte	ed from	patients	during the	e year	£551/13/5

The fees paid to doctors, except in necessitious cases, are recovered wholly or partly. Arrangements are made to collect these fees by a system which every year brings the ratio collected higher.

Maternity Beds in the City.

The City Hospital has a maternity unit of fifty beds. These are available for ante-natal cases, normal and abnormal confinements.

The Collin Trust Maternity Hospital has 40 beds for cases admitted through its own ante-natal clinic. No emergency cases are admitted. An annual subsidy of £2,343 has been received by this hospital from the Corporation, returnable by the Ministry of Health in the "block grant." This is an increase of £373. 3s. 7d. over last year's grant.

Registered Maternity Homes. There are 10 registered maternity homes with a total of 48 beds.

Both the General Hospital and the Women's Hospital have no specially allocated maternity beds as in the City Hospital. Beds are available, however, for abnormal cases especially those requiring surgical interference.

X-Ray Facilities for Expectant Mothers.

Owing to the increase in the number of first patients attending the ante-natal clinics there is once more an increase in the number of cases sent for examination by X-Ray. Seventy-seven cases were examined in 1937 compared with forty-one in 1936.

Ophthalmia Neonatorum.

This disease (inflammation of the eyes of the new-born) is notifiable. Efficient ante-natal care and post-natal supervision does much to prevent the possible injury to sight, and resultant partial or complete blindness, which may follow such infection. Where necessary, a Health Visitor, specially experienced in ophthalmic work, visits and treats the case. More severe cases are treated at the Eye Infirmary. The increase in numbers notified this year is due in a measure to increased supervision under the Midwives Act 1936.

The notified cases of Ophthalmia Neonatorum are classified in the following table :—

	Cases.					
12	Trea	ited.	Vision Un-	Vision	Total	
Notified	At home.	In hospital			Blindness.	Deaths
67	64	3	65	2	0	0

938

Puerperal Fever and Pyrexia.

Each notified case is investigated by either the Supervisor of Midwives or one of her staff. The patient, where necessary, is removed to hospital. Hospital treatment of such cases is most desirable. Where the case has arisen in a maternity home removal is specially desirable and advocated. Facilities for disinfection of premises are always available and maternity homes are specially asked to make use of such facilities.

Since the beginning of the municipal midwifery service there has been a tendency to keep pyrexial cases at home. This not only holds up a midwife over a long period but prevents the patient from having the hospital facilities which are so very essential to ensure adequate treatment of maternal morbidity. These cases of maternal morbidity, if not treated adequately, may quite easily provide us with maternal mortality cases in future confinements.

It is to be noted that the Public Health Act 1936 provides for the abolition of any differentiation between puerperal pyrexia and puerperal fever.

From 1/10/37 all such cases are notifiable as puerperal pyrexia.

The notified cases are classified in the accompanying table:—

Puerperal Fever and Puerperal Pyrexia.

	Cases	Admitted	Cases arising in	The second second	Notification— Age Group.				
Disease.	Notified.	Commence of the Commence of			15-20	20-25	25-35	35-45	
Fever	7	6	3	4	-	1	6	-	
Pyrexia	67	44	18	_	3	13	41	10	

Provision of Consultants under the Notification of Puerperal Fever and Puerperal Pyrexia Regulations 1926.

One consultant was provided during 1937.

Ante-Natal Care of Expectant Mothers.

Clinics were held at the following Centres :-

- HEALTH DEPARTMENT, HUNTINGDON STREET, every Tuesday, 10 a.m. to 12 noon. alternate Thursdays (since 9/9/37) 10 a.m. to 12 noon.
- CITY MISSION, CARLTON ROAD, Tuesday (weekly since 25/5/37) 10 a.m. to 12 noon.
- 3. 25, Wilford Road, Thursday (weekly since 2/9/37) 10 a.m. to 12 noon.
- 4. 75, Radford Boulevard, Monday (since 31/5/37) 10 a.m. to 12 noon. Thursday, 2.30 p.m. to 5 p.m.
- Assembly Hall, Aspley Lane, Monday (weekly since 3/5/37) 2 to 5 p.m.
- 6. 24, Main Street, Bulwell, Friday, 3 to 5 p.m.
- Edingley Avenue, Sherwood, alternate Thursdays (since 25/11/37) 10 a.m. to 12 noon.

Additional ante-natal clinics are held by the Collin Trust Maternity Hospital as follows and are conducted by Dr. Morton and her assistant:—Monday mornings at the Hospital itself and at the Albert Hall Institute on Wednesday and Friday mornings. These clinics were attended by 854 expectant mothers who made 7,389 attendances. 683 women were confined in the hospital. This hospital also holds once weekly a post-natal clinic. 590 women attended and made 816 attendances.

The General Hospital, Women's Hospital, and the Nottingham General Dispensary give ante-natal advice. Private practitioners' cases are seen at the Municipal clinics when referred by the practitioners. Otherwise only patients who have not engaged a medical attendant for their confinement are dealt with.

Women referred from ante-natal clinics to the City Hospital for confinement attend a special clinic held at the hospital so that those who are to carry out the confinement may have knowledge of the course of pregnancy.

Attendances at Ante-Natal Clinics.

		Pati	Patients.		Average	
Centre.	No. of Sessions.	First Visit.	Return Visit.	Total Attend- ances.	Attend- ance per Session.	
Huntingdon St.	62	360	925	1,285	20.7	
City Mission	39	261	616	877	22.5	
Wilford Road	35	217	586	803	23.0	
Radford						
Boulevard	81	459	1,225	1,684	20.8	
Aspley	39	261	871	1,132	29.0	
Bulwell	50	382	843	1,225	24.5	
Edingley						
Avenue	3	9	25	34	11.3	
Total	309	1,949	5,091	7,040	22.8	

Once again there is an increase in the number of women availing themselves of the municipal clinics. So great has been the increase that provision has had to be made for new sessions at many of the centres. 309 sessions were held in 1937 as against 197 in 1936. The total attendances increased by 2,802 over last year's figures, while 681 more women attended.

It is hoped to increase the number of sessions held at certain centres and also to begin ante-natal clinics at centres not yet provided with such facilities for expectant mothers.

Maternal Mortality.

Maternal deaths during the year numbered 13. This number includes abortions other than criminal but not associated deaths—the latter are deaths not due primarily to pregnancy but occurring in pregnant women. This latter group numbered 3. In addition there was one death due to criminal abortion.

Of 13 deaths, 5 were due to abortion.

6 were due to hæmorrhage.

1 was due to septicæmia.

1 was due to uræmia, eclampsia, and nephritis.

Of the deaths due to Abortions:

3 were due to septicæmia.

1 was due to toxic jaundice.

1 was due to hæmorrhage.

Of the deaths due to hæmorrhage:

3 were due to antepartum hæmorrhage due to placenta prævia.

2 were due to postpartum hæmorrhage.

1 was due to concealed accidental hæmorrhage with albuminuria.

Of these 13 deaths:

3 cases attended ante-natal clinic.

1 paying one visit only.

2 paying two visits.

Of the 3 associated deaths the cause of death was as follows:

1 was due to lobar pneumonia.

1 was due to broncho-pneumonia.

1 was due to myocardial degeneration.

Of these cases 2 attended ante-natal clinics.

1 paying one visit.

1 paying five visits.

This latter case died of myocardial degeneration under spinal anæsthesia. Two cases of post-partum hæmorrhage died at home. All other deaths occurred in hospital.

Nottingham has for some time compared favourably with other large cities in regard to the numbers of deaths of mothers in childbirth. The rate per thousand births in 1937 was the lowest recorded with the exception of the year 1934. This is shown in the following table:—

	1928	1929	1930	1931	1932	1933	1934	1935	1936	1937
Fever	. 8	4	7	13	4	7	7	4	5	4
Other Causes .	. 18	11	10	7	10	9	4	16	15	9
Per 1,000 total births .	. 5.5	3.3	3.7	4.1	3.0	3.5	2.4	4.4	4.5	2.8

Comparison with certain other towns is shown on a table on page 29.

Attention is again drawn to the fact that of the thirteen women who died in childbirth only three had attended an ante-natal clinic during pregnancy, and of these three one had attended once only and the other two twice only. The death of a person who was believed to be carrying on the trade of abortionist is thought to have been a factor in the reduction of maternal mortality in 1937 compared with the previous year. The police and the health department continue to co-operate in the difficult task of suppressing criminal abortion.

Mothers Hostels.

Nos. 1 and 95 Queen's Drive.

The Matron reports:—

"On January 1st there were 8 mothers, 8 babies and 5 expectant mothers in residence at 1 and 95 Queen's Drive.

"During the year we admitted 17 mothers, 17 babies and 10 expectant mothers. 23 mothers have been discharged. 12 of these were expectant mothers—4 mothers and 4 babies went into rooms. 1 mother married; her child was nearly 2 years old. 2 mothers had their babies adopted and then returned to their parents. I expectant mother returned home before the birth of her baby. 1 baby was still-born (a monster) and this mother returned to her parents. 1 mother had an abortion, she too went back to her parents. 4 mothers and 4 babies went back to their relatives. 9 mothers with their babies returned to the Hostel from hospital. At the end of the year (December 31st) there were twelve mothers and twelve babies and two expectant mothers in residence and one mother and one baby in the City Hospital undergoing treatment in the V.D. ward, also one mother and her child at the City Hospital in the Sanatorium under observation.

"We have been unfortunate with illness and epidemics this year, having Measles twice, early and late in the year. This necessitated the closing of the crèche to non-resident children but in spite of every precaution taken the resident children were infected. In all 25 children had Measles. 16 of them were non-resident and 9 resident. 8 resident children went to the City Isolation Hospital and 2 non-resident, 1 entirely breast fed baby was nursed at Queen's Drive, mother and baby both being isolated.

[&]quot;No further infection arose from that case.

[&]quot;No cases of diarrhœa and sickness occurred.

"The measles cases were of a severe type and all children had bronchitis and were very poorly for some time after being discharged. This year has been the worst for colds and coughs I have known, in spite of extra vitamins in the shape of cod liver oil, extra milk, and fruit being added to their diet, which at all times is generous and varied.

"All expectant mothers have attended the ante-natal clinics and their health throughout has been good. The crèche was still closed at the end of the year. Attendances for 1937—2,243.

Health Visiting.

The following table shows the number of visits paid by Health Visitors to homes in which there were infants or in which infants were expected:—

		1936.	1937.
Primary visits	 	4,045	4,177
Revisits under 1 year	 	14,758	15,618
Revisits 1—5 years	 	34,288	33,577
Ante-Natal visits	 	3,697	3,003
Post-Natal visits (to mothers)	 	184	278
Other visits	 	591	115

Visiting was interfered with by shortness of staff.

Infant Welfare Centres.

During the year, to meet the needs of the growing population in Edwards Lane Housing Estate, it was found necessary to give up the clinic premises in Draycott Street, Sherwood, and open up a new and larger centre in Edingley Avenue, Sherwood. The results have been very satisfactory.

The following table gives the total attendances at Infant Welfare Centres during the year:—

	essions held weekly		19
Total at	tendances of new cases.		
(a)	Children up to 2 years		$\begin{vmatrix} 2,751 \\ 127 \end{vmatrix} = 2,878$
(b)	Children from 2—5 years		127 = 2,010
Total at	tendances of all babies up to 5	years	of age.
(a)	Children up to 2 years of age		56,557 = $58,295$
(b)	Children from 2—5 years		1,738 = $36,293$

Total number of sessions held during 1937.

(a) Infant clinics ... 1,034 = 1,158 (b) Toddlers clinics ... 124

The total attendances of all babies up to 5 years have again increased considerably—being 2,750 in excess of the figure for 1936. More children are being passed on from the Infant Clinic to Toddler clinic, which is most satisfactory. Toddlers clinics are most necessary as many parents with small families still do not desire nursery school until the child nears the age of four years.

 $64 \cdot 5\%$ of all babies born in the city attended a Welfare Centre at least once. In certain areas it is felt that the return visits are not so high as they might be. It is hoped to remedy this.

The following table gives the attendance at each centre:—

Centre.		No. of Sessions.	New Cases.	Attendances.	Average Attend- ance per Session.
Aspley		102	339	9,082	89
Aspley (Toddlers)		24	13	507	21
Basford		48	152	3,450	72
Bulwell		99	233	4,787	48
Huntingdon St		152	254	4,554	30
Huntingdon St. (Toddlers)	23	18	189	8
Hyson Green		99	224	4,599	46
Hyson Green (Toddlers)		13	3	146	11
Jarvis Avenue		52	173	3,534	68
Jarvis Avenue (Toddlers)		13	33	249	19
Lenton Abbey		52	52	1,928	37
Radford		166	462	8,293	50
Radford (Toddlers)		23	26	304	13
Sherwood		79	181	4,156	53
Sherwood (Toddlers)		2	2	10	5
Sneinton		97	384	6,074	63
Wilford Road		88	297	6,100	69
Wilford Road (Toddlers)		26	32	333	13

Infant Mortality.

There was a pleasing reduction in the number of deaths of children under one year of age, compared with the previous year, the rate per thousand births being 80 as against 89 in 1936. This is still too high, though among the best years recorded in Nottingham. Infant mortality has been halved during the last thirty years, but there are still people who say they cannot see what good is done by social services! In the table on page 29 it is seen that Nottingham's rate does not yet compare very well with some of the other centres of population, but unpublished figures kept in the Health Department lead to the belief that further improvement will follow the continued demolition of the slums and the removal of the population of those areas to good housing estates. On those estates the people not only live in better houses, but their habits of life tend to improve, with resultant benefit to the health of the families. This is contributed to by the social services which are being established in those communities.

The improvement in the infant mortality was noticeable in the neo-natal rate, that is, the deaths in the first month of life. This rate is more closely bound up with the events of pregnancy and labour than the rate for the following eleven months which is associated more with environmental and dietary conditions, and which also showed an improvement.

The following tables are of interest:—

Deaths of infants under 1 month		 	155
Total deaths of infants und	ler 1 year	 	358
Infant mortality rate		 	80.3
Neo-natal mortality rate		 	34.8

Taking the figures for the total deaths under one year, we find that—

Pneumonia (all forms) ac	coun	ted for	31.6% 0	f all	deaths.
Prematurity	,,	,,	24.0%	,,	,,
Diarrhœa and Enteritis	,,	"	13.4%	,,	,,

The following Table gives the ages at which deaths occurred:—

Deaths under 1 week	 	 100
,, 1—2 weeks	 	 24
Total under 1 month	 	 155
Deaths 1—3 months	 	 62
,, 3—6 ,,	 	 74
,, 6—12 ,,	 	 67
Total deaths under 1 year	 	 358

The following Table gives the number of deaths from the undermentioned causes under 1 month:—

Convulsions		 	4
Pneumonia (all forms)		 	22
Diarrhœa and Enteritis		 	7
Atelectasis		 	17
Congenital malformation		 	16
Premature Birth		 	77
Atrophy, Debility and Mar	rasmus	 	7
Other causes		 	5
			155

Premature birth accounted for $49 \cdot 7\%$ of deaths under one month; Congenital malformation for $10 \cdot 3\%$; Atelectasis for $10 \cdot 9\%$; and Debility etc., for $4 \cdot 5\%$. Thus, $75 \cdot 4\%$ of deaths under one month were attributable

to causes probably operating before birth. The following Table gives the number of deaths from the undermentioned causes from one month to one year:—

Measles			 	4
Whooping Cough			 	3
Cerebro-spinal Fe	ever		 	1
Influenza			 	3
Tuberculous Men	ingitis		 	1
Non-tuberculous	Meningitis		 	6
Convulsions			 	2
Bronchitis			 	10
Pneumonia (all fe	orms)		 	91
77 . 1			 	1
Diarrhœa and Er	nteritis		 	41
Prematurity			 	9
Congenital Malfo	rmations		 	10
Atrophy, Debility		smus	 	10
Gastritis			 	2
Syphilis			 	1
Other causes			 	8
				203

Notwithstanding the improvement, infant mortality continues to cause concern. The rate of neo-natal deaths is still high and may be taken to have a direct bearing upon the still-birth rate and vice versa. There is a somewhat larger proportion of infant deaths due to respiratory causes. Beyond a doubt a doctor is not called in soon enough to prevent death in many of these cases. Frequently, too, parents give remedies such as the mixture known locally as "four ha'p'orths" over too long a period with disastrous results to the child.

This mixture, containing as it does two very powerful expectorant and emetic drugs, is too dangerous to permit of indiscriminate and prolonged administration by lay people. Towards the end of last year the number of infants born with deformity of some kind was higher than usual. Deaths among many of these helped to swell the infant mortality rate. The reason why so many deformed infants are born is hard to assess. Failed attempts at abortion early in pregnancy may, however, be counted as among the causes. This factor in infant mortality cannot be controlled until the sale of certain drugs is more closely supervised, and until women realise the dangers associated with abortion.

Special Treatment.

Aural.

The arrangement by which ear disease in children under school-age is treated at the School Clinic, Chaucer Street, continues to operate very helpfully.

No. of cases still under trea	tment	at end of	1936	3
No. of cases referred during	1937			25
No. cured and not recurred				22
No. recurred				2
No. withdrawn				1
No. discharged—cured				24
No. on register at end of 19	37			3

Ultra-Violet Light.

Cases found suitable for ultra-violet light therapy are referred to the Special Light Clinic in Heathcoat Street. The treatment is given free to all children attending the various centres.

No. of cases contin	uing treatme	nt from 1936	29
No. of cases sent	from Infant	Welfare Centres	
during 1937			120

Free Milk Scheme.

Expectant mothers who are necessitious, as well as infants under 18 months and nursing mothers and certain toddlers up to the age of 5 years, are supplied with dried milk free. Expectant mothers now receive dried milk from their first clinic attendance where it is deemed necessary.

One condition of this scheme is attendance at ante-natal clinics of the mothers and at infant welfare clinics of the babies. Routine weighing and examination is carried out.

Total No. of individuals (e	xpectant	and nu	ırsing	
mothers and babies) to	whom a su	apply of	f milk	
was granted				606
No. of new applications dur	ring 1937			465
No. of re-applications durin			2,338	
Total applications				2,803
Applications granted				2,714
Applications refused				89
Cost of milk supplied			£5	72/3/11

Applications were 763 less than in 1936 and the cost of the Scheme is £188/13/10 less. The most probable explanation is more employment.

Orthopædic Treatment.

Orthopædic treatment is given for infants and children under school age by arrangement with the Nottingham District Cripples' Guild. Part or all of the expense of appliances is borne in cases of necessity by the Corporation. From 1st April 1938 the payment per attendance to the Guild will be increased. Where hospital care is necessary cases are sent to Harlow Wood Orthopædic and Gringley-on-the-Hill Hospitals.

Out-Patient Treatment (at Cripples' Guild).

	New Cases.	Total Attendances.	Appliances provided.	X-Ray Exams.
Maternity & Child Welfare patients	155	1,604	19	11

The cost of treatment of out-patients was £120. 6s. 0d. Costs of splints and X-Ray was £24. 19s. 6d.

Individual attendances numbered 260.

In-Patient Treatment (at Hospital).

	In Hospital 1/1/37.	Admitted.	Dis- charged.	Remaining in Hospital 31/12/37.
Maternity & Child Welfare Patients	1	2	2	1

The cost of this in-patient treatment was £134. 10s. 7d.

The City Hospital also provides excellent facilities for the treatment of orthopædic cases. Teachers are provided by the Committee in this institution which is recognised as a special residential school by the Board of Education.

Voluntary Workers at Infant Welfare Centres.

It would be difficult to carry on the centres without the help of a devoted band of voluntary women workers, many of whom have given their services year after year for a long period. They engage in various simple tasks, thus releasing the professional staff for the more technical part of the work. This helps, in dealing with the large crowds who fill the Clinics. Recognition of their valued services must be freely accorded. More voluntary workers will be required as time goes on, and the suggestion is made to young women with time on their hands that an afternoon a week given up to work in a Clinic may prove a valuable preparation for their own married lives later on. Offers of service will be cordially received by the Assistant Medical Officer in charge of Maternity and Child Welfare, at the Health Department.

Infant Life Protection.

(Public Health Act, 1936).

This work aims at the protection of children placed out with foster-mothers.

The record of the work done in	1937 is	as follo	ows :
Cases on register 31/12/36			83
Cases registered during 1937			102
Cases removed from register			63
Cases on register $31/12/37$			122
The 63 cases removed are const	ituted	as follo	ows :
Given into care of relatives			39
Adopted			4
To Public Assistance Committee			2
To other Local Authorities			5
Died			1
Removed from register on attaining	9 years	of age	12
			63
No. of visits paid to homes by Heal	th Visi	tors in	
connection with the above Act			711
No. of interviews at Health Departr	nent		224
No. of foster mothers on register			100

Work under this Act has increased because the Act now applies to the child boarded out by day or by night as well as the foster-child.

Voluntary organisations, such as Dr. Barnardo's Homes and the Society for the Prevention of Cruelty to Children, are in frequent touch with the Department concerning children to whom the Act applies. Other bodies closely associated are the Public Assistance Committee and Adoption Societies.

Maternity and Nursing-Homes.

On 31st December, 1936, there were twenty Homes on the register providing fifty beds for Maternity cases, nineteen beds for Ear, Throat and Nose cases, forty-nine beds for general cases and twenty-three for chronic infirm cases.

During 1937 two registrations of Maternity Homes and one registration for chronic infirm cases were cancelled.

On 31st December, 1937, there were seventeen Homes on the register providing forty-eight beds for maternity cases, nineteen beds for Ear, Throat and Nose cases, thirty-seven for general cases, twelve for surgical cases and twenty-one for chronic infirm.

Members of the public are warned not to enter into residence in any so-called nursing-home, or home for the infirm aged, unless they are satisfied that the home displays in a prominent position (as required by law) the certificate of registration as a nursing home, granted by the City Council. The Medical Officer of Health will be glad to receive information of any place purporting to be a nursing home which does not comply with the regulations in this respect.

MATERNITY AND CHILD WELFARE DEPARTMENT.

DAYS AND HOURS OF CLINICS AND INFANT WELFARE CENTRES.

CLINIC.	75, Radford Boulevard.	Assembly Hall, Aspley Lane.	25, Wilford Road.	24, Main Street, Bulwell.	Hyson Green, Gregory Boulevard.	City Mission, Carlton Road.	Huntingdon House.	Edingley Avenue, Sherwood.	David Lane, Basford.	Jarvis Avenue, Sneinton Dale.	Wensor Avenu Lenton Abbey
MONDAY	. ANTE-NATAL 10 a.m.—12 noon. INFANTS 2.30—5 p.m. Dr. H. MACLEOD.	Ante-Natal 2—5 p.m. Dr. I. Harkness.		Infants 3—5 p.m. Dr. E. Landon.	Infants 3—5 p.m. Dr. J. Morton.						
TUESDAY		Toddlers (Alternate weeks) 2.30—5 p.m. Dr. I. Harkness				ANTE-NATAL 10 a.m.—12 noon Dr. H. MACLEOD INFANTS 3—5 p.m. Dr. B. Truman	ANTE-NATAL 10 a.m.—12 noon Dr. J. Morton	Infants 10 a.m.—12 noon Weighings Infants 3—5 p.m. Dr. P. Hardy	Infants 2.30—5 p.m. Dr. H. Macleod		
WEDNESDAY	. Infants 3—5 p.m. Dr. J. Morton	Infants 2.30—5 p.m. Dr. I. Harkness	Toddlers (alternate weeks) 10 a.m.—12 noon INFANTS 2.30—5 p.m. Dr. H. Macleod	Weighings 2—5 p.m.			Toddlers each 4th Wed. 10 a.m.—12 noon Dr. H. Macleod Weighings 2—5 p.m.	TODDLERS each 4th Wed. 10 am.—12 noon Dr. H. Macleod			
THURSDAY .	. Ante-Natal 2-5 p.m. Dr. H. Macleod		ANTE-NATAL 10 a.m.—12 noon Dr. H. MACLEOD		Toddlers each 4th Thursday 10 a.m.—12 noon Dr. I. Harkness Weighings 2—5 p.m.	Infants 3—5 p.m. Dr. B. Truman	ANTE-NATAL (Alternate weeks) 10 a.m.—12 noon Dr. E. Landon	Ante-Natal (Alternate weeks) 10 a.m.—12 noon Dr. E. Landon		Toddlers each 4th Thursday 10 a.m.—12 noon Dr. I. Harkness Infants 3—5 p.m. Dr. J. Morron	Infants (Alternate week 3—5 p.m. Dr. P. Hardy Weighings Weekly 3—5 p.m.
FRIDAY .	. TODDLERS (Alternate weeks) 10 a.m.—12 noon Dr. H. MacLeod WEIGHINGS 2—5 p.m.	Infants 2.30—5 p.m. Dr. I. Harkness	Infants 3—5 p.m. Dr. M. Scott	Ante-Natal 3—5 p.m. Dr. E. Landon			Infants (Alternate weeks) 10 a.m.—12 noon Weighings Weekly Dr. H. Macleod Infants 3—5 p.m. Dr. B. Teuman	INFANTS 2:30—5 p.m. Dr. H. Macleod			

CITY HOSPITAL.

In case any confusion still exists as to which institution is called the City Hospital, it may be explained that what was the Poor Law Institution, known generally as "Bagthorpe", has for some years been separated into two parts; the Public Assistance Institution, now known as Vale Brook Lodge, is the property of the Public Assistance Committee, while the portion reserved for the sick is known as the City Hospital and is the property of the Health Committee. Certain of the services such as laundry, bakery, lighting and heating are common to both.

The task of the Hospital Sub-Committee of the Health Committee in managing the hospital is an enormous one, and is made more so by the great increase in the call for beds which has been witnessed since the character of the place has been changed into that of a hospital for acute cases instead of being chiefly for the reception of the chronic sick and infirm aged.

That this change in character continues to take place is evident from the figures in the following tables, from which it will be seen that the number of persons with short acute illnesses necessitating a stay of less than four weeks, increased from 2,947 in 1936 to 3,386 in 1937, a difference of 439.

The number of cases staying from four weeks to three months showed little difference between the two years, but the number staying over three months was slightly less than before. The last fact is due to the policy of sending into the excellent infirm wards at Vale Brook Lodge those elderly infirm people requiring ordinary care and attention as distinct from medical and surgical treatment.

The general increase in the work of the hospital is shown by the admissions, which increased from 4,793 in 1936 to 5,274 in 1937, while the number of births in the wards increased by 100 to 413. The daily average of admissions was 15.58 against 13.95, and the average daily occupation of beds was 887, an increase of 50.

When the total number of beds is given as 981 and the maximum number of beds occupied on any one day (February 20th) is given as 968, it may appear that the hospital was never overcrowded, until one reminds one-self that male patients cannot be put in female wards, that a rush of pneumonia cases cannot be put among acute surgical patients, and that empty beds in a venereal ward are not suitable for normal midwifery purposes. Actually considerable overcrowding did occur at times.

The Committee and its officials have therefore given very much attention to the needs of the near future by way of extensions. Work was commenced on two more wards to take about 100 cases and these are in occupation as this report is written.

Consideration of schemes for adding balconies at the south end of certain wards and for a general programme of increasing the height of ward blocks to three storeys instead of two has occupied much time and thought.

Work has continued on the new nurses' home to provide sleeping accommodation for 100 nurses and 22 maids. Until this is finished the resident staff of nurses cannot be augmented, and, for the present, increases can only be made by a sleeping-out system. The new home includes an improved training-school for probationers, and better kitchen and dining-room accommodation for all the staff.

The residential accommodation for nurses in the City Hospital never has been of the unsatisfactory character existing in some hospitals referred to by those who are, quite rightly, trying hard to raise the standards of life of the nursing profession. When the new home is ready the conditions will be better still and ought to attract new-comers to the staff, though the shortage of nurses required throughout the country will be hard to overcome.

Further building work going on is to be seen at the site of the future entrance in Hucknall Road, where an entrance block, with clothing-store and a new mortuary with electric chilling devices are being erected.

Changes in medical staffing and ward personnel (including a system of assistant-nurses and ward orderlies) have required constant review.

Favourable reference should be made to the excellent work of the Deputy Medical Superintendent, Dr. Sidney B. Benton, who was in charge of the hospital most of the year, and until the new Medical Superintendent, Dr. C. L. C. Crowe, took up his duties early in 1938.

The Medical Superintendent presents the following statistics for 1937:—

Medical Staff.

Resident-

- 1 Medical Superintendent.
- 1 Deputy Medical Superintendent.
- 2 Senior Medical Officers.
- 3 Assistant Surgical Officers.

Visiting-

- 1 General Surgeon.
- 1 Orthopædic Surgeon.
- 1 Ear, Nose and Throat Surgeon.
- 1 Assistant Surgeon—in charge of Radium.
- 1 Dental Surgeon.
- 2 Physicians.
- 1 Physician for Venereal Disease.
- 1 Physician for Tuberculosis.
- 1 Radiologist.
- 1 Anæsthetist.

(The names of the occupants of the above positions are set out on page 10).

Beds.

Beds allotted to men, women and children are as follows:-

 	233
 	109
 	294
 	96
 	143
 	56
 	50
	981

Averages for the year.

Beds—average daily number occupied		887
Admissions—average daily number		15.58
Duration of stay of patients:—		
Under 4 weeks		3,386
4 weeks and under 13 weeks		1,559
13 weeks or more		659
Maximum number of beds occupied—February 20th	h	968
Minimum ,, ,, September 4th	h	795

Statistical Table for the year ended December 31st, 1937.

Remaining in hos	pital Ja	nuary 1s	t, 1937		830	
Admitted					5,274	
Born in hospital					413	
						6,517
Discharged					4,449	
Died					1,155	
Patients treated to	a conc	lusion du	ring the ye	ear		5,604
Remaining in hos	pital De	ecember 3	31st, 1937			913

Deaths.

Ages.		Males.	Females.	Total.
Under 1 year	 	70	67	137
1-5	 	16	19	35
5—10	 	- 6	6	12
10—15	 	6	5	11
15-20	 	6	7	13
20-30	 	24	26	50
30-40	 	35	33	68
40-50	 	38	42	80
50-60	 	81	53	134
60-70	 	146	102	248
70-80	 	141	115	256
Over 80	 	. 51	60	111
		. —		
		620	535	1,155

Comparative table for three years.

Admissions			1935. 4,920	1936. 4,793	1937. 5,274
Births			274	313	413
Deaths			955	998	1,155
Admissions—aver	rage da	aily			
number			$14 \cdot 2$	$13 \cdot 95$	15.58
Operations perfor	med		874	937	1,107

Maternity Department.

Confined in Hospital:	16721				
Normal				363	
Complicated				83	
*					
				446	
Com	plicated	Labours			
Cæsarean Section					35
Tabulated as follows:-	_				
Contracted Pelvis				9	
Extended Breech				12	
Placenta Prævia				8	
Prolonged Labour				1	
Mitral Stenosis				1	
Disproportion				4	
Forceps					16
Perforation and Craniotomy	y				3
Placenta Prævia					4
Extended Breech			:		9
Prolapse Cord					2
Hydramnios					2
Concealed Hæmorrhage					1
Adherent Placenta					1
Blood transfusions					2
Twins					8
					83
Ante-Natal Clinic.					
	37 (3				
Total number of Expectant	Mothe	ers seen			341
", ", attendance	es				567
Number of Maternal Death	s				4
Cause of death in each case	:				
(1) Myocardial D		ation due	to the etr	ain impo	end by
a Cæsarean					2 C.C.
Duracaine (ch	ma an	ve). Inqu	iest neid		

- (2) Ante-partum hæmorrhage, Placenta Prævia (Cæsarean).
- (3) Broncho-pneumonia, Myocardial Degeneration, Chronic Asthma, Pregnancy.
- (4) Hæmorrhage and Shock. Ante-partum hæmorrhage, Placenta Prævia (delivered at home).

Puerperal Pyrexia	 	 	 10
The second of the second			-

Theatre Department.

Appendicectomy		 	 	100
Appendicostomy		 	 	3
Cholecystectomy		 	 	12
Colostomy and Cæ	costomy	 	 	12
Cæsarian Section		 	 	35
Exploratory Lapar	otomy	 	 	32
Gastro-enterostomy		 	 	8
Gastrostomy		 	 	1
Gastrectomy		 	 	2
Perforated ulcers		 	 	8
Anastomosis of gut	,	 	 	7
Hysterectomy		 	 	17
Myomectomy		 	 	2
Salpingectomy		 	 	11
Ovarian Cyst		 	 	7
Intussusception		 	 	4
Phrenic Avulsion		 	 	2
Phrenic Crush		 	 	1
Excision of Rectun	a	 	 	2
Excision of Scrotur	n	 	 	1
Sigmoidoscopy		 	 	4
Circumcision		 	 	6
Cystoscopy		 	 	17
Dilatation and Cur	ettage	 	 	68
Hæmorrhoids)			42
Anal fistulæ, etc.	1	 	 	42
Nephrectomy		 	 	2
Nephrotomy		 	 	4

Orchidectomy		 	 1
Colpo-perineorrhaphy		 	 19
Supra-pubic Prostatectomy		 	 1
Supra-pubic Cystotomy		 	 7
External Urethrotomy		 	 1
Ventrifixation		 	 2
Amputation of Limbs		 	 12
Bones and joints		 	 35
Sympathectomies		 	 2
Cartilages—internal and ex	ternal	 	 22
Plasters		 	 84
Teeth extractions		 	 2
Smith-Peterson nails		 	 3
Plastic Operations		 	 2
Blood vessels		 	 3
Gas-Gangrene and Cancrun	n Oris	 	 4
Glands of neck		 	 1
Blood transfusions		 	 18
Abscesses etc		 	 45
Amputation of Breast		 	 13
Lumbar Puncture		 	 11
Urethral Dilatation		 	 8
Hernia and Hydrocele		 	 91
Thyroidectomy		 	 4
Radium Treatments		 	 56
Block dissection axillary gla	ands	 	 2
Resection of Rib		 	 9
Myringotomy		 	 2
Bronchoscopy		 	 19
Oesophagoscopy		 	 4
Laryngoscopy		 	 8
Intra-nasal		 	 26
Mastoidectomy		 	 20
Tonsil Dissection		 	 37
Tonsils and Adenoids		 	 53
Tracheotomy		 	 5
Trephine for Cerebral Tume	our	 	 2
Unclassified		 	 63
			1 107

Massage Department.

	Massage	Department			
Number of treatments	given :-	. In Bulk			
Massage					13,510
Electrical and rad					11,209
Ultra Violet Light	t				3,515
Infra Red Light					2,122
					30,356
	X-Ray	Department.			
In-patients investigate	ed				2,849
Tuberculosis Clinic					872
Ante-natal Clinic					78
					3,799
Oesophagus, s Urinary syste Biliary passag Generative Sy Chests, includ Bones and Jon	m, includinges, includingstem, including Lipioda	g Pyelographi ng Cholecystog ding cystogra	graphies ms	371 106 84 85 1,239 964 2,849	
	athologie	al Danartma	n#		
		al Departme			
Sputa					1,223
Pus					17
Urines		4			509
Smears					126
Blood Counts, etc					801
Cerebro-spinal fluids					35
Fæces					16
Permanent Specimens					8
Temporary ,,					57
					2,792

Dental Department.

number of paul	ents treated	d	 		344
Treatments			 		636
Extractions und	der :—				
General Ar	næsthetic		 		200
Local	,,		 		2,030
Gas			 		4
Without A	næsthesia		 		_
Total number of	of teeth ext	racted	 		2,234
Full dentures s	upplied		 	9	
Dentures repair	ed:—				
Upper			 	5	
Lower			 	5	
			 	4	

Classification of Patients who were Discharged from or who Died in the Hospital during the Year ended 31st December, 1937.

Disease Groups.			Discharged.	Died.
Acute Infectious Disease			66	1
Influenza			27	7
Tuberculosis—				
Pulmonary			132	86
Non-pulmonary			26	9
Malignant disease			81	146
Rheumatism—				
(1) Acute rheumatism (rhe	umatic	fever)		
together with sub-acute	rheun	natism		
and chorea			55	_
(2) Muscular rheumatism, fibr	ositis, lu	mbago		
and sciatica			97	_
(3) Chronic arthritis			16	-
Venereal Disease			65	1
Puerperal pyrexia			_	-
Puerperal pyrexia (a) Women con (b) Other cases	fined in l	nospital	10	_
therperal pyrexia (b) Other cases			30	1
Other diseases and accidents co	onnected	with		
pregnancy and childbirth			316	9

Disease Groups.			Discharge	d. Died.
Senile decay			95	31
Mental diseases $\begin{cases} (a) \text{ Senile dementia} \\ (b) \text{ Other } \dots \end{cases}$			_	_
Mental diseases (b) Other			56	_
Accidental injury and violence			141	24
In respect of other cases not	INC	LUDED AB	OVE :	
Disease of the Nervous System and S	ense	Organs	152	89
,, ,, Respiratory System			543	257
,, ,, Circulatory ,,			236	259
,, ,, Digestive ,,			508	63
" ,, Genito-urinary System	1		164	52
,, ,, Skin			247	4
Other diseases			521	116
Mothers and infants discharged fr	om			
Maternity Wards and not include	led			
in above figures		Mothers	420	_
		Infants	359	_
Any persons not falling under any o	of th	e above		
headings			86	_
			4,449	1,155

Motor Transport.

(figures supplied by Mr. Gould).

			Mile	age.	Average m gallon of Petr	
			Year ended 1938.	March 31st 1937.	Year ended 1938.	March 31st 1937.
Austin	Ambulance	No. 2	_	1,410	_	11.015
,,	,,	No. 3	6,568	8,865	$12 \cdot 929$	$12 \cdot 295$
,,	33	No. 4	8,230	9,010	$10 \cdot 274$	9.944
,,	,,	No. 5	* 3,869	_	10.929	_
			18,667	19,285	Gen.————————————————————————————————————	Gen. ————————————————————————————————————
				-		-

^{*} Purchased October, 1937.

The cost per car mile was $12 \cdot 009$ pence against $12 \cdot 097$ pence in 1937.

Number of patients removed to City Hospital by Ambulance—

		Year	Year ended March 31st		
			1938.	1937.	
Number of Journeys	 		2,501	2,408	
" ,, Cases	 		3,269	3,196	

District Medical Officers.

The service of District Medical Officers attending to the sick poor in their homes and at the Shakespeare Street and Basford Dispensaries, is supervised by the Health Committee on behalf of the Public Assistance Committee.

No change occurred during the year.

The Care of the Blind.

The number of persons in the city on 31st December 1937 who were so blind as to be unable to perform any work for which eyesight is essential was, so far as is known, in accordance with the following summary of the register:—

Blind trainees (maintained by Education Committee)		15
Blind workshop employees, including blind persons	on	
staff of institution		67
Home workers		11
Unemployable Blind receiving assistance		275
Blind Persons not in receipt of any form of financial he	elp	
from City Council		156
Blind home teachers paid by City Council		2
		526

The total is 26 more than a year ago.

The Health Committee is the statutory committee for the care of the blind, while the Education Committee maintains blind trainees.

The Royal Midland Institution for the Blind, Chaucer Street, has continued to carry out the duties associated with the welfare of the blind, on behalf of the Corporation. The Health Committee has provided its share of the overhead expenses of this excellent institution, as well as all the necessary financial relief payable to the individual blind persons. A satisfactory working arrangement exists by which the City Treasurer and the Medical Officer of Health maintain close touch with the Institution.

The Health Committee makes the following provision for the blind:—

- Augmentation of wages earned by blind employees in the Institution's workshops.
- Augmentation of earnings of blind home-workers.
- 3. The provision of home-teachers for the blind.
- Weekly relief to necessitous (unemployable) blind to ensure a minimum income of 22/6d. per week.
- 5. Temporary grants to urgent and special cases.
- Grant towards administrative and other expenses of the Institution; provision of social centres for the blind.
- 7. Contribution to the National Library for the Blind.
- Contribution to the Midland Counties Association for the Blind.
- 9. Contribution to the National Institute for the Blind.

It should here be mentioned that from 1st April 1938 the Health Committee has increased augmentation in the case of item (2) by 5/- a week, and in the case of item (4) increased relief from 22/6d. to 27/6d. a week to the necessitous (unemployable) blind person, and to 50/- a week to man and wife, both being blind.

The cost of these services for the year ended 31st March 1938 stands at about £14,510, subject to certain adjustments.

The Institution lost by retirement its Superintendent, Mr. Miles Priestley, to whom a tribute must be paid for his long and valued work for the sightless. His place was taken by Mr. A. C. V. Thomas.

Changes in administration will result from the operation of the Blind Persons Act 1938. The principal alterations are—

- (a) A reduction in the age at which pensions may be paid to blind persons under the Old Age Pensions Act 1936, from 50 to 40 years.
- (b) That all assistance to blind persons by Local Authorities (other than institutional or medical assistance) be given under the Blind Persons Act and not by way of poor relief.
- (c) Provision for recovery of cost of assistance by one English local authority from another in certain circumstances.

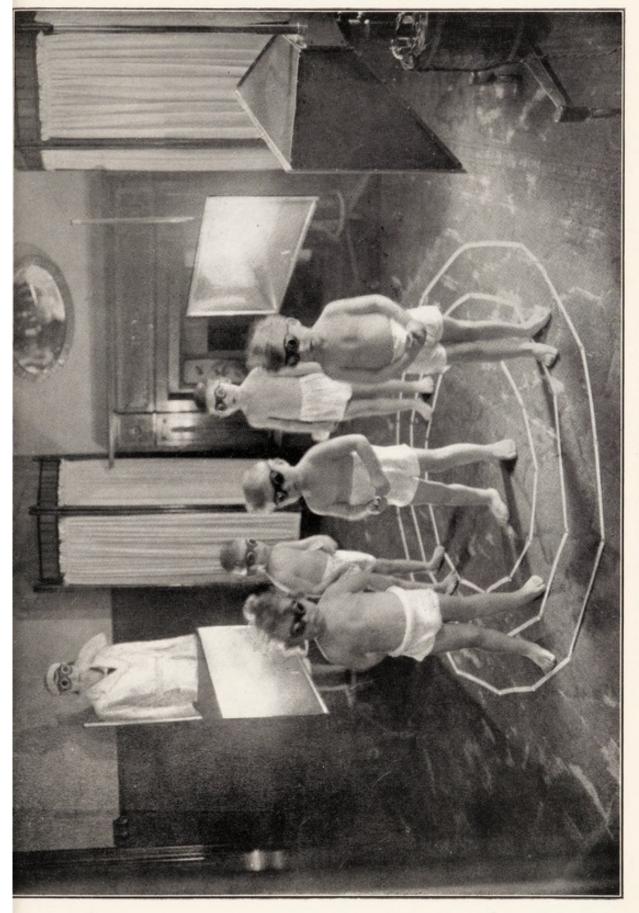
ULTRA-VIOLET RAY CLINIC, 32, Heathcoat Street.

The Health Department continues to provide treatment by ultra-violet and infra-red rays to persons for whom either of these courses has been prescribed by medical advisers.

The treatment is administered under medical supervision. Great value is reported in the case of weakly children referred from the infant welfare centres, particularly those suffering, or likely to suffer from rickets.

The following statistics refer to 1937:—

Total number of patients tr	eate	ed-			
Males 156; Females 20	04				360
Total number of treatments	s ad	minister	ed		6,765
Number of paying patients	(a)	City		138	
	(b)	County		9	
					147
Free patients					213



A TYPICAL SCENE AT THE ULTRA-VIOLET.RAY CLINIC.



This is an increase over the previous year, probably resulting from the decision of the Health Committee to make no charge for children under five years of age referred from infant welfare centres.

BIRTH CONTROL.

The arrangement continues by which the Corporation gives official recognition to a privately managed organisation under the name of The Women's Welfare Centre, 15 Market Street. Information regarding this body may be obtained on application to the Secretary.

Women attending municipal clinics and needing birth control instruction on the grounds that further pregnancies would be detrimental to health are referred to the organisation, and financial assistance arranged for.

During the year 83 women were referred from Maternity and Child Welfare Clinics and from the Tuberculosis and Venereal Disease Clinics, also from the City Hospital. 58 of them took advantage of the arrangement.

CREMATION.

The Medical Officer of Health is the Medical Referee for the Wilford Hill Crematorium, which is owned and managed by the Public Parks & Burial Grounds Committee of the Council.

During the year 240 certificates were issued, classified as follows:—City cases 88; Notts. County cases 71 (including West Bridgford 32); from other areas 81.

In view of the fact that there were in the city alone no fewer than 3,747 deaths in the year, it is surprising that so little use was made of the Crematorium. This method of disposal of the dead has so much to recommend it that one would think fuller use would be made of the facilities available.

Cremation is a clean and sanitary method of dealing with human remains; it does away with the need for using large tracts of land for burial purposes; the ceremony is simple and less harrowing to the feelings than the graveside ordeal, and being indoors does not expose tired mourners to the rigours of bad weather in a muddy graveyard.

It is true that the advantages of the system are becoming better known, as is shown by the gradual increase in the numbers, but progress is slow.

Here are the figures year by year since the Crematorium, with its beautiful Garden of Rest, was opened:—

1931	 	 70
1932	 	 74
1933	 	 90
1934	 	 136
1935	 	 125
1936	 	 184
1937	 	 240

PUBLIC MORTUARIES

The Public Mortuaries of the City are situated near the Police Stations at Leen Side; Gregory Boulevard, Hyson Green; and at Bulwell.

The following table shows the number of bodies removed to the mortuaries during each month of the year:—

Month	Leen Side.	Hyson Green	Bulwell	Monthly Totals
January	 20	_		20
February	 21			21
March	 21	_	cy.	21
April	 13		ren	13
May	 14	_	None. Used only in emergency	14
June	 11	_	em	11
July	 16		None.	16
August	 17		lly J	17
September	 10	1	0	11
October	 12	5	sed	17
November	 18	_	Ď	18
December	 35	_		35
Totals	 208	6	_	214

In addition, the bodies of 248 persons dying in various City Hospitals, Institutions, etc., were prepared for inquests by the mortuary attendants.

The electrical cooling and refrigerating plant installed at the Leenside mortuary in 1936 has proved a great boon. Usually the bodies are kept at a cool tempreature, but for decomposed bodies from the Trent, actual freezing is carried out in the smaller chamber. Now that the advantages from the sanitary point of view are so obvious, it seems remarkable that the method was not more generally brought into use years ago, and equally remarkable that its use is not more widespread than it is even to-day throughout the country.

From the table above it will be seen that the work has been concentrated almost entirely at Leenside where the cool chambers are, the Hyson Green mortuary being used only when Leenside was closed down for a few days for re-decoration. The Hyson Green mortuary continues to be retained in case extraordinary need should at any time arise through a calamity or large epidemic.

SECTION "C."

SANITARY CIRCUMSTANCES OF THE CITY.

(Note.—The Report furnished by the Chief Sanitary Inspector under Article 19 of the Sanitary Officers' Order 1926 is included in Sections "C", "D" and "E".)

SANITARY CIRCUMSTANCES OF THE CITY.

(a) Water.

Water supplies from private wells have been sampled from time to time, and, where analyses have proved unsatisfactory, appropriate action has been taken. There are now very few houses in the city without piped water supplies, and they are in remote situations where watermains are not available.

Constant co-operation exists between the City Water Engineer and the Medical Officer of Health with a view to safeguarding the purity of the municipal water supply.

(b) Drainage and Sewerage.

The drainage of houses situated in the areas which were added to the city in 1933 is now completed in all areas where sewers are available.

(c) Closet Accommodation.

Practically the whole of the closet accommodation of the city is on the water-carriage system, the few exceptions being in outlying situations where conversion is impracticable. Twenty additional water-closets were provided during the year in cases where there was less than one closet per house.

(d) Sanitary Inspection of the Area.

During 1937 notices respecting 6,685 nuisances or defects were served by the District Sanitary Inspectors. For the purposes of general sanitary and housing inspections, the city is divided into eight areas, each of which is supervised by a qualified Sanitary Inspector.

(i) Number of Inspections.

The Number of inspections made by the District Sanitary Inspectors during the year was:—

Total nu	mber o	f inspection	ons	37,844
Re-visits				23,332
First visits				14,512

(ii) NUMBER OF NOTICES SERVED AND COMPLIED WITH.

Notices in respect of premises:— OUTSTANDING (1st January 1937) Served Complied with	ig 192 814 861	Sumo X 165 943 941	Kanana 273 546 615		in display in the second secon	The state of the s	137 921 876	138 887 846	Tigotal 1,404 6,685 6,672
OUTSTANDING (1st January 1938)	145	167	204	203	181	156	182	179	1,417

(iii) DETAILS OF NOTICES SERVED AND COMPLIED WITH.

			Served.	Complied with.
Housing Act 1936, Section 9			2,291	1,576
Public Health Acts			4,394	5,096
Defective Houses			3,222	3,225
Housing repairs—Roofs			1,309	1,032
Walls			3,789	2,296
Floors and ceil	ings		2,214	1,559
Windows			2,010	1,399
Fireplaces			1,308	1,071
Coppers			395	371
Sinks provided			11	31
Sinks, repair o	r renewa	al of	275	324
Internal water	r suppli	es		
provided			19	37
Repairs to wat	er suppl	у	53	35
Rainwater con	nductors	,		
repair or ren	ewal of		1,185	976
Others			3,590	2,570

	Served.	Complied with.
Houses, cleansing of	371	321
Houses, overcrowding of	40	50
Drains, clearance of	638	639
Drains, repair, trapping or improvement of	864	765
Panterpits, abolition of	47	34
Additional water-closets, provision of	-8	20
Water-closets, clearance of	61	58
Water-closets, repair of	1,364	1,167
Closets, cleansing and limewashing of	47	37
Courts and yards, paving of	44	57
Courts and yards, cleansing of	21	28
Courts and yards, repair or paving	1,161	986
Nuisances from pigs	2	4
Nuisances from fowls	18	17
Nuisances from other animals	19	17
Nuisances from offensive trades	69	81
Manure pits, repair of	2	2
Manure pits, abolition of	12	11
Offensive accumulations, removal of	160	122
Dustbins, provision of	538	516
Tents, vans and sheds	12	11
Houses-let-in-lodgings	44	48
Common Lodging Houses	_	_
Factories and Workshops	283	271
Pail-closets, conversion of	_	3
Privy-middens, conversion of	_	_
Miscellaneous	901	793
(iv) STATUTORY ACTION.		0 1: 1
37 .: 1 .7 D 11: 17 1/1 4 . 1085	0 1	Complied
Notices under the Public Health Act 1875.		with.
Section 91 (a) Houses	149	293
(b) Others	46	73
Section 36 (ashbins)		96
Section 41 (drains)	35	22
Section 49 (manure)	1	1
Notices under the Public Health Acts Amendment Act 1890.	t	
Section 22	1	. 2

Notices under the 1 Act 1907.	Public Health Ac	ts Amer	ndment	Served.	Complied with.
Section 3	.,			1	1
Notices under the	Public Health Ac	ct 1936.			
Section 9	2 (a) Houses			22	7
	(b) Others			4	4
Section 7	5 (dustbins)			39	24
Section 3	39 (drains)			13	1
Section 4	6 (sanitary con	venienc	es in		
	factories)			1	_
Section 5	66 (paving)			7	
Section 2	287 (Notice of er	itry)		3	1
Notices under the 1 1923.	Nottingham Corp	oration	Act		
Section 6	4 (repair of pav	ing)		79	87
	3 (repair of wat	-	ets)	66	81
Notices under the 1935.	Nottingham Co.	rporatio	m Act		
Section 1	9 (cleansing and drains, water				
	soil-pipes)	er-close	ts and	413	413
	Borr Pripes)			110	110
Housing Act 1936,	Section 9			417	270

Work done by Corporation in default—63.

Informations laid—2.

 $Work\ done\ after\ information\ laid {--} 2.$

Work done after Justice's Order-nil.

(e) Shops Acts 1912 to 1934.

(i) HEALTH AND COMFORT OF SHOP-WORKERS.

Action commenced during 1935 and 1936 under the provisions of the Shops Act 1934 was continued during the year under review. This Act was designed to

improve the conditions under which shop-assistants work, and deals with such matters as ventilation, lighting and temperature, and the provision of sanitary conveniences and facilities for washing and for taking meals.

Details of action taken is given below:-

Number of notices served and complied with.	Served.	Complied with.
Total number of premises	35	137
Types of premises for which notices were served and complied with,	Served.	Complied with.
Retail Shops	25	121
Wholesale shops	2	4
Warehouses	8	12
Details of Notices served and complied with.		
Want of ventilation	3	3
,, heating	2	45
,, lighting	_	_
,, washing facilities	7	21
,, facilities for taking meals	2	2
Sanitary (Insufficient	5	24
Accommo- Unsuitable or defective	- 8	19
dation. Not separate for the		
sexes	-	29
Absence of forms required under the		
Shops Acts	5	12
Miscellaneous nuisances	15	21

Statutory Notices served—17.

Statutory Notices complied with-10.

(ii) Employment of Young Persons.

Under the Act of 1934 it is now illegal to employ persons under the age of 18 years for more than 48 hours per week. A person under 16 years of age cannot be employed over-time in any circumstances, and the over-time worked by persons between the ages of 16 and 18 years is limited. Particular attention is given to the provisions regarding young persons but it was not found necessary to institute legal proceedings in any case.

(iii) Hours of Closing of Shops.

Visits and re-visits have been made during the year to all classes of shops, hotels, restaurants and retail business premises in the city. Sixty-six offences were reported to the Health Committee, and legal proceedings were taken in twelve cases:—

Trade.		No. of Offences.	Result.
Butcher	٠.	4	Fined 10/-, 10/-, 10/-, and one dismissed.
Beer-Off and General		2	Fined 10/- and 5/
Fruit and General		2	Fined 5/- and 10/
Boot and Shoe		2	Fined 10/- and 10/
Café and Restaurant		2	Fined 20/ One dismissed under Probation of Offend- ers Act.

In thirty-five cases cautionary letters were sent to the offenders:—

Trade.	(No. of Offences.
Butcher	 	3
Beer-Off and General	 	11
Cycle	 	1
Draper	 	4
Confectioner	 	1
Fish and General	 	1
Fruit and General	 	5
Hawker	 	9
		35

(f) Smoke Abatement.

Public Health Act 1936.

The following statement summarises the year's work in connection with smoke abatement :—

No. of half-hourly observations of chimneys		1,533
,, minutes' dense smoke emitted		3,659
Average minutes of dense smoke per chimney		2.3
No. of intimation notices served		172
" advisory visits (including verbal cautions)		344
" statutory notices served		71
" complaints investigated		119
" cases where work has been executed for sm	noke	
abatement		17
Estimated cost of the work to owners		£2,428
No. of prosecutions		3

The chimneys of industrial premises in the city have been kept under observation throughout the year. In 172 cases it was found necessary to serve intimation notices confirming the existence of smoke nuisances. Where excessive emissions of smoke were recorded, the firms were visited with a view to an opinion being formed as to the cause and to advice being given for the abatement of the nuisances.

In three instances it was found necessary to take legal proceedings with the following results:—

- Defendant ordered by magistrates to abate the nuisance and to pay costs.
- (2) Defendant fined £3. 0s. 0d. and costs for disobeyal of a Magistrate's Order to abate the nuisance.
- (3) Defendant ordered by magistrates to abate the nuisance and fined £5 0s. 0d. and costs. Later the same defendant was fined £5 0s. 0d. (maximum penalty) for disobeyal of the Magistrate's Order.

In case No. 3 a vertical boiler was the source of the nuisance, and with such a plant it is extremely difficult to keep down smoke emissions except when a smokeless fuel is used.

The standard of smoke emission in Nottingham is three minutes of dense smoke in the aggregate during a continuous period of thirty minutes, and any emission in excess of that limit is deemed to be a nuisance. The monthly averages of the emission of dense smoke are given below and it will be seen that throughout the year, except during the months of March and November, the average figures were less than three minutes. The high averages for those two months can be attributed to the large number of excessive emissions of dense smoke recorded from the chimneys of heating apparatus. These installations, as a rule, are designed to burn coke, but in practice it is found that coal is often used in them, with the result that exceedingly dense smoke is emitted after stoking for periods varying from ten to twenty-five minutes.

January	 2.8 minutes.	July	 1.9 minutes.
February	 2.6 ,,	August	 $2 \cdot 0$,,
March	 3.0 ,,	September	 $2 \cdot 3$,,
April	 1.8 ,,	October	 2.1 ,,
May	 2.2 ,,	November	 3.2 ,,
June	 2.3 ,,	December	 2.5 ,,

(g) Factories and Workshops.

Factory and Workshop Act 1901.

(a) Factories—in 66 instances, defects remediable under the Public Health Acts were reported by H.M. Inspector of Factories, and in each case suitable action was taken.

(b) Workshops—The number of workshops is 1,133.

The following table gives particulars of administrative action taken under the Factory and Workshop Act 1901:

1.—Inspection of Factories, Workshops and Workplaces.

	Number of			
Premises. (1)	Inspections (2)	Written Notices. (3)	Occupiers prosecuted. (4)	
Factories (including Factory Laundries).	220	179	-	
Workshops (including Workshop Laundries).	752	326	-	
Workplaces (other than outworkers' premises).	62	49	/	
Total	1,034	554	_	

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

Particulars. Found. Remedied. Referred to whom the content of the properties	Number of offences in	Number of Defects.				
Nuisances under the Public Health Acts* Want of cleanliness	respect of which Prose- cutions were instituted. (5)	H.M. Inspector.				
Want of cleanliness	(0)	(*)	(0)	(2)		(1)
Want of cleanliness						
Want of ventilation					Health Acts*	
Overcrowding —	-	_		163		
Want of drainage to floors	-	-	3	3		Want of ventilation
Other nuisances	_	-	-	-		Overcrowding
Sanitary accommodation Sanitary accommodation Sanitary accommodation Sanitary accommodation Sanitary accommodation Insufficient Unsuitable or defective 77 90 — Not separate for sexes 2 2 — Offences under the Factory and Workshop Acts:— Illegal occupation of underground Bakehouses (Sec. 101) — 1 — Other offences — — — — — — — — — — — — — — — — —	_	_	_	_		Want of drainage to floors
Sanitary accommodation Sanitary accommodation Offences under the Factory and Workshop Acts:— Illegal occupation of underground Bakehouses (Sec. 101) — 1 — Other offences — — — (Excluding offences relating to outwork and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factory and Workshops Transfer of Powers)	_	_	81	58		Other nuisances
Sanitary accommodation defective 77 90 — Not separate for sexes 2 2 — Offences under the Factory and Workshop Acts:— Illegal occupation of underground Bakehouses (Sec. 101) — 1 — Other offences — — — — — — — — — — — — — — — — —	-	_	13	15		
Offences under the Factory and Workshop Acts:— Illegal occupation of underground Bakehouses (Sec. 101) — 1 — Other offences — — — — — — — — — — — — — — —	-	-	90	77	defective	Sanitary accommodation
Offences under the Factory and Workshop Acts:— Illegal occupation of underground Bakehouses (Sec. 101) — 1 — Other offences — — — (Excluding offences relating to outwork and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factory and Workshops Transfer of Powers)	1		9	9	The second secon	
Acts:— Illegal occupation of underground Bakehouses (Sec. 101)			2	-		Offeness under the Factory
Illegal occupation of underground Bakehouses (Sec. 101)					nu worksnop	
Bakehouses (Sec. 101)					nomound	
Other offences			1			
(Excluding offences relating to outwork and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factory and Workshops Transfer of Powers)			1			
and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factory and Workshops Transfer of Powers)						
mentioned in the Schedule to the Ministry of Health (Factory and Workshops Transfer of Powers)						
Ministry of Health (Factory and Workshops Transfer of Powers)						
Workshops Transfer of Powers)						
						The state of the s
Older 1921)						Order 1921)
Totals 318 332 —			220	219		Totals

^{*}Including those specified in Sections 2, 3, 7 & 8 of the Factory and Workshop Act 1901, as remediable under the Public Health Acts.

3.—Outwork in Unwholesome Premises, Section 108.—Nil.

(h) Houses-let-in-Lodgings.

Bye-laws under the Housing Act.

There are 148 registered houses-let-in-lodgings in the city and these premises are inspected from time to time.

The bye-law regarding the cleansing and decoration of such premises during the month of April was enforced where necessary.

It is becoming increasingly common for houses of large type situated near the centre of the city to be used as houses-let-in-lodgings. These buildings were formerly good-class residences, but their owners now find it difficult to let them as private dwellinghouses. Premises used for lodgings in this way soon deteriorate and what were excellent buildings a few years ago, are being transformed into "slums."

Owners should consider whether it would not be more satisfactory from all points of view to convert large houses, for which there may be little demand, into good-type selfcontained flats, rather than allow the buildings to be used unsatisfactorily as lodging-houses.

(i) Common Lodging-houses.

Bye-laws under the Public Health Act.

Visits at all hours of the day and night are made to the common lodging-houses, and the provisions of the Public Health Act and the bye-laws made thereunder have been operated as necessary.

As a result of the slum-clearance scheme, all the unsatisfactory common lodging-houses should disappear during the year 1938. There will then be two privately owned houses, and Sneinton House, the Corporation's model hostel, for the accommodation of male lodgers.

(j) Tents, Vans, Sheds and Similar Structures.

Nottingham Corporation Act 1929.

Public Health Act 1936.

In twelve instances it was necessary to serve notices respecting offences in connection with the use for human habitation of tents, vans, sheds, etc.

The position in Nottingham as regards these temporary forms of dwellings is reasonably satisfactory, as many sites have been cleared following the operation of the provisions of the Nottingham Corporation Act 1929. One unsatisfactory feature, however, is the exemption from these provisions of vans, etc., occupied by travelling showmen, which makes it possible for such people to park their vans on unsuitable sites for long periods.

(k) Offensive Trades.

Nottingham Corporation Act 1923.

Public Health Act 1936.

The establishments in which offensive trades are carried on are kept under supervision and, generally, are well conducted. The question of making available a suitable site upon which these trades may be established is now receiving consideration.

(I) The Destruction of Rats and Mice.

Rats & Mice (Destruction) Act 1919.

Advice on the destruction of rats and mice is always available at the Health Department. It is the aim of the Health Department not merely to destroy rats but to deal with the sources of infestations. In this connection a great many rat nuisances in built-up areas are traced to defective drains.

In accordance with the wishes of the Ministry of Agriculture and Fisheries, Rat Week was again organised in Nottingham from the 1st to the 6th November 1937.

(m) The Eradication of Bed Bugs.

Public Health Act 1936.

The problem of verminous premises is receiving the close attention of the Health Department. Owners and their agents are usually willing to co-operate with the Department in order to secure efficiency in disinfestation work.

The method employed in the disinfestation of buildings is the use of contact insecticides. Wherever possible, arrangements are made for all mouldings and removable woodwork to be taken down, and for cracks and crevices in internal plaster to be opened up before the application of insecticides. At least two treatments are recommended with an interval of about seven days between each.

In order to ensure that bed-bugs are not transferred from condemned properties to council houses, removals are actually carried out by the Corporation and supervised by women housing officers, who are attached to the staff of the Health Department.

All furniture and effects are treated with a high concentration of Hydrogen Cyanide (Prussic Acid) Gas. The treatment takes place in gas-tight removal-vans and is entrusted to a firm of contractors who specialise in this somewhat dangerous type of fumigation.

With a view to preventing the infestation or reinfestation of properties provided for the re-housing of displaced persons, the women housing officers make periodic visits and give advice as may be necessary. The disinfestation of council houses is carried out by the Estates Department and figures as to such houses dealt with during the year are not available. Other houses are dealt with by the Health Department and 212 were found to be verminous and were disinfested.

(n) Measures to prevent the breeding of Mosquitoes.

For some years mosquito-control work has been practised in Nottingham. Attention is given to accumulations of stagnant water on low-lying, swampy land, and in other situations where mosquitoes may find favourable breeding-places. When mosquito larvæ are found they are destroyed by spraying oil on the water, thereby covering the surface with an oil film which enters the breathing-tubes of the embryos and suffocates them.

Large numbers of mosquitoes may breed in small accumulations of stagnant water, and common breeding-places are troughs, rainwater storage tanks, bird-baths, etc. It has been established that mosquitoes may breed in street gullies during dry spells when the water is not frequently displaced.

In certain cases investigated last summer it was found that mosquitoes were actually breeding in the premises of persons who complained, the complainants being of opinion that distant swamps or stagnant waters were responsible and having overlooked their own water-butts and greenhouse storage-tanks.

It is important, therefore, that occupiers of premises should see that any stagnant water does not become a breeding-ground for mosquitoes.

(o) Canal Boats.

Public Health Act 1936.

Canal Boats Regulations.

The canals and other navigable waters within the city have been visited on fifty-four occasions during the year and 133 boats were inspected. Frequent visits were made at various times during the hours laid down by the Acts, and the Inspector has at all times been allowed free access to the cabins of the boats inspected.

The number of women carried on the boats inspected was ninety-three, the number of children under five years of age was forty, and the number of children between five and twelve years of age was fifty-eight.

Eight notices were issued against owners of boats in connection with the following ten infringements of the Acts and Regulations:—

Not lettered, marked or numbered	 2
Failure to produce Registration Certificate	 4
Cabins in need of repair or painting	 3
Overcrowding	 1

It was not necessary in any case to resort to legal proceedings.

No case of infectious disease on a canal-boat was reported during the year nor was it necessary to detain any boat for cleansing or disinfection. There were no new boats registered during the year.

The total number of boats now in use and registered by this Authority is forty-five. The Education Authority was notified on seven occasions during the year with regard to twenty-two children of school-age who were living on canal-boats and who were visiting the city for periods longer then two days.

(p) Cleanliness of Rag Flock.

Rag Flock Acts 1911 & 1928.

Six samples of rag flock were taken and submitted to the Public Analyst during 1937 and none was reported against.

SECTION "D."

HOUSING.

HOUSING.

A.-STATISTICS.

.—In	spection of Dwelling-houses during the year.	
(1)	(a) Total number of dwelling-houses inspected for housing defects (under Public Health or	
	Housing Acts)	6,371
	(b) Number of inspections made for the purpose	11,505
(2)	(a) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated	
	Regulations, 1925	2,437
	(b) Number of inspections made for the purpose	3,350
(3)	Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	146
(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	6,685
2.—R	emedy of defects during the year without the Service of Formal Notices.	
	Number of defective dwelling-houses rendered fit in consequence of informal action by the Local	
	Authority or their officers	6,102
3.—A	ction under Statutory Powers during the year.	
A.— <i>I</i>	Proceedings under Sections 9, 10 & 16 of the Housing Act, 1936.	
(1)	Number of dwelling-houses in respect of which notices were served requiring repairs	417
(2)	Number of dwelling-houses which were rendered fit after service of formal notices :—	
	(a) By Owners	254
	(b) By Local Authority in default of owners	16

B.— <i>P</i>	roceedings under Public Health Acts.	
(1)	Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	171
(2)	Number of dwelling-houses in which defects were remedied after service of formal notices:—	
	(a) By owners	253
	(b) By Local Authority in default of owners	47
C.—P	roceedings under Secs. 11 & 13 of the Housing Act, 1936,	
(1)	Number of dwelling-houses in respect of which Demolition Orders were made	91
(2)	Number of dwelling-houses demolished in pursuance of demolition orders	368
D.— <i>P</i>	Proceedings under Section 12 of the Housing Act, 1936.	
(1)	Number of separate tenements or underground rooms in respect of which Closing Orders were made	29
(2)	Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	Nil.
4 —H	ousing Act, 1936. Part IV—Overcrowding.	
(a)		
	the year	717
		32
		735
	(5,060 uni	its)
(b)	Number of new cases of overcrowding reported during the year	107
(c)	(1) Number of cases of overcrowding relieved during	
	the year	577
	(2) Number of persons concerned in such cases 4,0	
	$(3,364\frac{1}{2} \text{ uni})$	ts)
(d)	Particulars of any cases in which dwelling-houses have again become overcrowded after the Local Authority have taken steps for the abatement of	
		Vil.

B.-HOUSING ADMINISTRATION.

(i) Demolition and Closure of Unfit Houses.

The five-year programme of slum clearance is proceeding satisfactorily and at the end of the year the number of houses demolished under the scheme was:—

	No.	demolished.	No. of Persons displaced.
Houses in Clearance Areas		1,518	5,493
Individual unfit houses		1,818*	5,567
		3,336	11,060

Includes houses abolished and those closed by undertakings of owners under the provisions of the Housing Act.

In addition, there was a large number of houses standing vacant and awaiting demolition under the scheme, so that the number of persons displaced was in fact considerably larger than that given above.

In consequence of the clearances now taking place, the standard of housing of the working-classes is improving considerably. It should be borne in mind, however, that slum clearance will not end with the present scheme. Houses continually deteriorate and some do so more rapidly than others, particularly when not efficiently maintained. Consequently, many of the houses which at the time of the last Survey were on the border-line of being unfit, will, by the time of the next Survey, be in such a condition as to warrant their inclusion in a clearance scheme. If the higher standard of housing is to be maintained, this work must go on indefinitely, though not perhaps on so large a scale as at present.

(ii) Overcrowding.

When the Overcrowding Survey was completed in the early part of 1936, there were 1,015 cases of overcrowding. In December 1936 there were 1,187 known cases.

From the statistics given under heading (4) on page 97 it will be observed that at the end of 1937 only 717 cases were on record. In order to keep informed of the position, all cases of overcrowding, and those on the border-line of being overcrowded at the time of the 1935-36 Survey, were visited during 1937, and it was found that 577 cases had been relieved, and 107 new cases had arisen. Of the 1,015 cases recorded in 1935-36, only about 50% remained overcrowded at the end of 1937.

These figures show the remarkable extent to which the population moves about. The movement is probably more marked in the case of overcrowded families than in other households, and may be due to the publicity which the law of overcrowding has received in recent years. Nevertheless the position thus created is of considerable importance to Local Authorities in that it will be necessary to make frequent surveys of all working-class houses if overcrowding is to be kept under control.

SECTION "E."

INSPECTION AND SUPERVISION OF FOOD AND FERTILIZERS AND FEEDING STUFFS.
THE PHARMACY AND POISONS ACT.
THE DISEASES OF ANIMALS ACTS.

INSPECTION AND SUPERVISION OF FOOD.

(a) Milk Supply.

Milk & Dairies (Consolidation) Act 1915.

Milk & Dairies (Amendment) Act 1922.

Milk & Dairies Order 1926.

(1) Cow-keepers and Purveyors of Milk.

No. of cow-keepers on register 1st January 1937	 21
,, ,, ,, 31st December 1937	 20
No. of cowsheds on register 31st December 1937	 61
No. of dairy-cows kept (average)	 483
No. of milk-purveyors on register 1st January 1937	 414
,, ,, ,, 31st December 1937	 387
No. of applications for registration refused	 _
No. of milk-purveyors removed from register	 27

All dairies and cowsheds are regularly inspected to ensure that the provisions of The Milk & Dairies Order 1926, etc., are complied with, and notices respecting the following matters were served and complied with during the year:—

Cowsheds—clear	sing and	l limewashi	ng	 	120
Cowsheds—repair	irs			 	20
Dairies, Milksho	ps, etc.,	cleansing		 	85
Dairies, Milksho	ps—repa	irs		 	33
Drains—chokage				 	15
Offensive accum	ulations	removed		 	20
Miscellaneous				 	75
					000

368

Legal proceedings were instituted against a dairyman for carrying on the trade without being registered and the case was adjourned generally.

(2) MILK (SPECIAL DESIGNATIONS) ORDERS 1923 AND 1936.

During the year 1937 the following licences were granted under the provisions of the above Orders:—

Licence to bottle Tuberculin Tested Milk	 1
Dealers' Licences to sell Tuberculin Tested Milk	 5
Supplementary Licences to sell Tuberculin Tested Milk	 2
Licensed to produce Accredited Milk	 4
Supplementary Licence to sell Accredited Milk	 2
Dealers' Licences to sell Pasteurised Milk	 3
Supplementary Licences to sell Pasteurised Milk	 2
Licensed to pasteurise and sell Pasteurised Milk	 6

Tuberculin Tested Milk.

Thirty-five samples of Tuberculin Tested milk were obtained during the year for bacteriological examination. Thirty-one of these complied with the standards laid down in The Milk (Special Designations) Order and four were unsatisfactory. Appropriate action was taken with regard to the latter.

Accredited Milk.

Eleven samples of this milk were obtained for bacteriological examination and all were satisfactory.

Pasteurised Milk.

Seventy-one samples of Pasteurised Milk sold under licence were obtained for bacteriological examination, sixty-three were satisfactory and eight otherwise.

(3) Examination of Milk for Bacterial Count and for Tubercle Bacilli.

Ungraded Milk.

One hundred and ten samples of milk were taken and submitted for examination for bacterial count and B.Coli test. Ninety-two of them gave results which complied with the standard for Accredited milk from a bacterial point of view and eighteen did not reach this standard.

Examination of Milk for Tubercle Bacilli.

During the year 114 samples of milk were examined for tubercle bacilli and thirteen of these gave positive results on biological testing. These cases were followed up and appropriate action taken. Four of the positive results were from control samples, i.e. samples taken in consequence of an earlier positive result.

(b) Meat and Other Foods.

The number of private slaughter-houses in the city is now fifty-five, a reduction of one on last year's total. The large number of private slaughter-houses in conjunction with their scattered disposition renders difficult the examination of all the carcases and organs of animals slaughtered in the City. Whilst the actual number of animals slaughtered cannot be given accurately, it is estimated that at least 90% of those slaughtered are inspected, and in the case of cattle and pigs, this percentage is probably higher.

Four Meat and Food Inspectors visit the slaughter-houses at all hours, both on week-days and Sundays; in the course of the year the number of such visits was 7,991. A high standard of meat inspection is maintained in accordance with the recommendations contained in the Ministry of Health's memoranda Nos. 62 and 62A (Foods).

Number of animals killed and of carcases inspected and number confiscated either wholly or in part on account

85,609 Total. 3.29 619 360 2,464 291 1.01 34,675 Pigs. 4.98 8 9 1,666 69.0 161 32,205 Total. 115 45 0.49 Sheep and Lambs. Lambs. 00 0.12 3,228 Sheep. 28,977 112 44 0.53 1 Calves. 15 3,406 35 01 0.44 0.99 Cows. of disease. 6,213 51 3.89 518 11.89 191 221 Total. 9,110 13 180 64 280 3.77 2.11 Cattle excluding Cows. Heifers. 00 30 3,807 74 2.05 116 3.86 on page 104. Bull'ks. 5,055 00 86 2.09 53 3.22 134 See note Bulls. 248 63 00 4.03 10 14.11 30 ease other than tuberculosis Carcases in which some part All Diseases except Tuberculosis. Carcases in which some part Percentage of number inspected affected with dis-Number of Carcases inspected Percentage of number in-Whole Carcases affected spected affected with Number of Animals killed or organ was affected Whole carcases affected or organ was affected Tuberculosis only. Tuberculosis

Tuberculosis in Food Animals.

		Fats.	4	16	101	18	1	376
		Intestines.	4	Ξ	50	œ	1	346
		Udders.	1	1	42	9	1	1
is.		Stomachs.	4	13	63	12	1	381
erculos		Spleens.	10	12	59	10	1	œ
d Tube		Skirts.	60	12	90	6	1	-
ocalise		Kidneys.	5	10	20	7	1	61
Parts and organs affected in Localised Tuberculosis.		Livers.	10	42	155	30	1	921
ffected		Hearts.	10	40	143	32	1	920
gans a		Lungs.	119	87	332	62	1	948
and or	'sət	Heads and Tongr	18	84	229	64	1	1,419
Parts		Whole of Organs only.	1	00	99	5	1	-
	Hindquarters.	Part.	1	1	1	1	1	1
	Hindqu	Whole,	4	4	44	1	1	67
	arters.	Part.	1	7	35	1	1	1
	Forequarters.	Whole.	2	20	98	23	21	1
imals		Total	35	163	739	146	15	1,726
Number of Animals affected.		Localised Tuberculosis	30	134	518	116	1	1,666
Numbe		Generalised Tuberculosis.	5	59	221	30	15	09
			:	:	:	:	:	:
		Class of Animal.	Bulls	Bullocks	Cows	Heifers	Calves	Pigs

Incidence of Diseases other than Tuberculosis in Food Animals which necessitated the confiscation of part or the whole of the carcase and organs.

	CLASS OF ANIMAL,		sulls.	-	sullocks.		ows.		deliers.		alves.		deep.	1	amos.		
		(a)	(9)	(a)	(9)	(a)	(<i>q</i>)	(a)	(9)	(a)	(9)	(a)	(q)	(a)	(9)	(a)	(9)
-	Abscesses.	:	9	:	50	:	69	:	32	-	1:	:	ಣ	-:		:	00
-	Actinomycosis.	:	-	:	4	:	4			1							
-	Angiomatosis.	:	:	:		:	13	:	:	1		:	:		:	:	:
-	Anæmia.	:	:	:	:	1		:	:	1:		-			:	1:	1
L	Bruising.	:	:	6.1	6.1	6.1	12	1	6	1	-	1		:	:	:	:
'8	Cancerous Growth	1	:	:	:	:		:					:	:		:	6.1
-	Cirrhosis.	:	:	:	9	:	15	:	10	:	:	:	. 12	:	:	:	34
	Cysticerci.	:	:	:	:	:	- 1	:	:	1	:	:	67	:	:	:	00
	Decombosition.	:	:	:	6.1	:	:	:	:	:	:	50	00	:	-	63	-
	Distomatosis.	:	1	:	16	:	27	:	-	:	:	:	20	:	:	:	1
	Dropsy.	:	:	:	:	-	00	:	:	6.3		14	:	6.1	:	63	:
	Echinococcus,	:	:	:	6.1	:	8	:	:	:	:	:	:	:	:	:	4
	Emaciation.	:	1:	-	:	:	:	:	:	:	:	4.1	:	:	:	:	:
	Emphysems.	:	:	:	:	:	9	:	-	:	:	:	:	:	:	:	10
	Enteritis.	-	:	:	:	4	:	:	:	:	:	:	:	:	:	-	1:
	Fatty Infiltration.	:	:	:	-	:	:	:	:	:	:	:	:	:	:	:	1
	Fever.	:	:	:	-	1-	4	-	:	6.1	:	63	:	:	:	28	9
	Filatia.	:	:	:	:	:	:	:	:	:	-	:	1	:	:	:	:
	Hydramia.	:	:	:	:	03	:	:	:	:	:	:	:	:	:	:	:
	Immaturity.	:	:	:	:	:	:	:	:	19	:	:	:	:	:	:	1:
	Inflammation.	:	:	:	-	:	4	:	63	:	:	:	-	:	:	1	37
	Johne's Disease.	:	:	:	:	-	:	:	-	:	:	:	:	:	:	:	:
	Jaundice,	:	:	:	:	:	:	:	:	:	:	-	:	:	:	:	:
	Mammitis.					:	00	:	:	:	:	:	:	:	:	:	:
-	Melanosis.	:	:	:	:	:	:	:	-	:	:	:	-	:	:	:	:
	Moribund.	:	:	-	:	0.1	:		:	60	:	30	:	-	:	15	:
	Necrosis.	:		:	-	:	-		-			:	:	:	:	:	65
-	Nephritis.	:	:	_		6.1	50	:	:	-	:	:				:	:
	Parturient Fever,	:				6	:		:		:	65				63	
	Peritonitis.	:	:	:	63	:	20	:	-	:	:	:	:			4	63
	Pleurisy.	:	-	:	10	÷	1-	:	10	:	-	:	:	:			44
-	Pneumonia.	:			:		1				-:			•		1	5
-	Pyæmia.	-			10	-	e0	:	60	-		9	-	-		. 9	-
	Sapræmia.					4			-:			1 5		- :	-:	-	-
-	Septicamia, Septic Metritis,	-			-	4 1		c.1								1	-:-
- 5	Septic Pericarditis					7						6.1				1	
	Swine Erysipelas.			-	-					-			-	:		60	
-	Suffocation.	:		-								-				_	
- 6	Umbilical Pyæmia				-:	:		:		6.1		:		:		4	
-	Uræmia.	:	:	:		C.1	:	:	-:	:		:	:		:		-
	Urticaria.	:	:	:	:	:	:		:	:	:	:	:	:		:	6.1
			-	-	-	-	-	-					-	-	-	-	-

(a) Means involving the destruction of the whole carcase.
 (b) Means involving the destruction of an organ or organs, or part of carcase.

All places in which meat is stored, sold or prepared for sale, including slaughter-houses, butchers' shops, making-up rooms, stalls, etc., are visited and inspected frequently, the number of visits totalling 780.

The following is a summary of the meat confiscated during the year as being diseased, unsound, unwholesome or unfit for the food of man:—

(a) Surrendered voluntarily.

HOME-KILLED MEAT:

Beef		 	 $18,120\frac{1}{2}$	stones.
Mutton		 	 $522\frac{1}{4}$,,
Lamb		 	 $9\frac{1}{2}$,,
Pork		 	 $2,974\frac{1}{2}$,,
Veal		 	 $242\frac{1}{4}$	22
Offals		 	 $6,427\frac{1}{2}$,,
			$28,296\frac{1}{2}$,,
Imported	MEAT:		Stones.	Lbs.
Beef		 	 285	2
Kidneys	3	 	 1	_
Mutton		 	 4	
Pigs' Ma	aws	 	 20	
			310	21

(b) Seized.

Beef	 	 	20 s	tones	12	lbs.
Mutton	 	 	4	,,	10	,,

Police Court proceedings were taken in three cases involving seizure of meat, the butchers concerned being fined £20, £2. 10s. 0d., and £5 respectively.

A knackery at the Eastcroft Depot under the constant supervision of the Local Authority, disposes of carcases of animals which, on account of injury, disease or other cause (except where notification is required by the Diseases of Animals Acts), are unfit for human food. The approximate amounts dealt with in 1937 were:—

Beef	 	 	11,653	stones.
Mutton	 	 	55	,,
Pork	 	 	410	,,
Veal	 	 	108	,,
			12,226	,,

Infringements by butchers of the various regulations and bye-laws prescribing the manner in which meat must be prepared were recorded and letters of caution were sent. The following list shows in what manner traders offended:—

	No. of Occasions.
Use of dirty vehicle for conveyance of meat	1
Failure to notify presence of disease in animals intended for human food (in slaughter-houses)	4
Use of slaughter-houses for purposes other than those of killing and dressing food animals	1
Slaughtering at other than regular times without previous notice	4
Failure to provide proper covered receptacles for trimmings and refuse	15
Exposure of meat in vehicles to contamination by	
dust, etc	2
Making-up rooms needing repair	3
Dirty making-up rooms	12
Dirty slaughter-houses	4
Slaughter-houses in need of repair	2
Dirty equipment in slaughter-house	1

Legal proceedings were instituted against a butcher on account of dirty premises in which food was being stored. The magistrates inflicted a penalty of £2. 10s. 0d.

(2) Other Foods.

Premises where food other than butchers' meat is stored or sold, were visited systematically, a total of 524 visits being made. These visits are exclusive of those paid daily to wholesale and retail markets.

The following quantities of foodstuffs other than meat confiscated on account of disease or unsoundness were destroyed:—

(a) Surrendered voluntarily.

CANNED G	oods.			Stones.	Lbs.
Meat			 	433	_
Fruit			 	672	$10\frac{1}{2}$
Milk			 	213	
Fish			 	177	_
Vegetable	es		 	645	$3\frac{1}{2}$
Soup			 	17	$3\frac{1}{2}$
Provision	as (eggs)	 	14	7
Wet Fish	١		 	1,203	
Dry Fish	1		 	270	-
Shell-fish			 	1,248	$10\frac{1}{2}$
Rabbits			 	474	7
Poultry			 	23	7
Game			 	12	7
Fruit			 	1,436	$10\frac{1}{2}$
Vegetable	es		 	6,549	7
Nuts			 	5	_
Mushroon	ms		 	9	_
				13,405	31/2

(b) Seized.

Rabbits 20 Lbs.

The fishmonger from whom the rabbits were seized was ordered by the magistrates to pay a sum of £1. 0s. 0d. in costs.

Shell-fish.

Shell-fish from layings in various parts of Great Britain and Ireland are received into the Wholesale Fish Market. These consignments are carefully supervised and at regular intervals samples are obtained for bacteriological examination.

(3) Manufacture and Sale of Ice-Cream.

Nottingham Corporation Acts 1923 and 1935.

The Nottingham Corporation Act 1935 provides for the compulsory registration with the Sanitary Authority of persons carrying on the manufacture and sale of ice-cream and of premises used for such purpose.

During 1937, 104 premises and persons were placed on the register.

There were at the end of 1937, 692 on the register of persons carrying on the manufacture or sale of ice-cream.

Four samples of ice-cream were submitted for bacteriological examination. Three of these were satisfactory.

(c) Adulteration, etc.

The Food & Drugs (Adulteration) Act, 1928.

During the year the following samples were obtained:—

Formal Samples ... 600 (analysed by Public Analyst).

Informal Samples . . 250 (,, ,, ,,).

Informal milk samples .. 458 (tested by Inspectors).

Total .. 1,308

The following table shows the nature of the samples taken, together with the results of the Public Analyst's examination:—

Article	No	of Sampl	es	No	o. Genuin	e	No	. Adultera	ited
	Formal	Informal	Total	Formal	Informal	Total	Formal	Informal	Total
Milk	. 305	11	316	284	8	292	21	3	24
Sep. Milk	. 1	_	1	1	_	1	-	-	_
Condensed Full-Crean	1								
Milk		4	4	_	4	4	_	-	_
Condensed Skimmed									
Milk	. 3	5	8	3	5	8	-	_	_
Dried Full-Cream Mill	- 1	3	3	_	3	3	_	_	_
Butter	. 53	28	81	53	28	81	_	_	
Cl	. 13	3	16	13	3	16	-	_	_
Lard	. 25	6	31	25	6	31	_	_	_
Managaina	. 17	2	19	17	2	19	_	_	
D	. 18	3	21	17	3	20	1	_	1
Const	. 16	2	18	16	2	18	-	-	-
Claffin	. 16	2	18	16	2	18	_		-
0.00	. 3	2	5	3	2	5	-	_	
D 1: D 1	. 12	2	14	12	2	14	_	_	
35 / 1	. 16	2	18	16	2	18	_	_	
C1 Di	. 9	2	11	9	2	11	_	_	
C 10 TO TH	. 8	2	10	8	2	10	_	_	-
D 10	. 2	1	3	2	1	3	_	_	-
Decel Decles	. 4	1	5	4	1	5	_	_	
D 44 1 M + D +	. 4	1	5	3	1	4	1	_	- 1
Calsa Flann	. 1	_	1	1	_	1	_		_
C	. 6	2	8	6	2	8	_	_	_
Comm Mustand	. 2	_	2	2		2	_	_	_
Custard Powder .	. 2		2	2	_	2	_	_	_
Shredded Suet with	1		_						
Dies Flour	. 2	1	3	2	1	3	_	_	_
Daied Fault	. 8	1	9	8	1	9	_	_	
Compling	. 1	1	2	1	1	2	_	_	_
Cream	. 2	9	11	2	9	11	_		_
Ground Ginger .	. 8		8	8	_	8	_	_	_
Icing Sugar .	. 3	1	4	3	1	4	_	_	_
Coffee and Chicory			100						
Extract	. 2	4	6	1	2	3	1	2	3
Classes	. 2	13	15	î	10	11	1	3	4
D-1	1	3	4	1	3	4	_	_	_
D: 1 0.1	2	1	3	2	1	3	-	_	_
0-0-01	. 2	3	5	_	2	2	2	1	3
Carried forward .	. 569	121	690	542	112	654	27	9	36

Article,		No.	of Sampl	es.	N	lo. Genuin	e	No	. Adulter	ited
Article,		Formal	Informal	Total	Formal	Informal	Total	Formal	Informal	Total
Brought forward		569	121	690	542	112	654	27	9	36
Epsom Salts		_	5	5	-	5	5	_	-	
Glauber Salts		-	5	5	-	5	5	-	-	-
Honey		1	4	5	1	4	5	_	-	_
Compd. Liquorice										
Powder		1	7	8	1	7	8	-	-	-
Whisky		-	28	28	-	25	25	-	3	3
Cod Liver Oil		_	2	2	-	2	2	_	-	-
Olive Oil		2	8	10	2	8	10	-	-	_
Treacle		_	2	2	-	2	2	_	-	_
Wrapped Cheese		1	4	5	1	4	5	-	-	-
Bread-and-Butter		-	2	2	-	2	2	-		_
Zinc Ointment		_	2	2	_	2	2	_	-	_
Sulphur Ointment		_	3	3	_	3	3	_		_
Glycerine		_	4	4	_	4	4	_	_	
Salmon-Creme		_	1	1	_	1	1	_		_
Arrowroot		4	3	7	4	3	7	_	_	
Brawn		_	1	1	_	1	1		_	_
Cooked Ham		_	3	3	_	3	3			
Cheshire Cheese		1	1	2	1	1	2	_		
Beer	• •	_	1	1		î	1	_		_
Lemonade Powder		_	1	1	_	î	1	_		_
m i		_	1	1	_	1	1	_		
Borie Acid			4	4	-	4	4	_		_
Pork Dripping			1	1	_	1	1	_		
Cheddar Cheese		1	1	1	1	1	1			
		1	1	2	1	1	2			
Tea		1	1	1	1	1	1			
Horehound Beer		9	2	5	3	2	5			
Jam			2			2	120			
Stilton Cheese		1		1	1		1			
Iodised Table Salt		1	-	1	1		1			
Sauce		1	_	1	1	0	1			-
Sweets		3	2	5	3	2	5	-		
Cakes	٠.	1		1	1	_	1	_	-	_
Flowers of Sulphur		1	3	4	1	3	4	-	-	_
Ground Almonds		2	-	2	2	_	2		_	_
Golden Syrup		1	_	1	1	-	1	-	-	_
Mincemeat		1	1	2	1	1	2		-	_
Glacé Cherries		1	_	1	1	_	1	-		-
Peas		1	_	1	1	-	1	-	-	-
Tapioca		1	-	1	1	_	1		-	-
Dressed Crab		-	1	1	-	1	1		-	-
Tinned Cherries		-	1	1	_	1.	1	-		_
Carried forward		600	225	825	573	213	786	27	12	39

Article.	No.	oi Sampl	les.	No	o. Genuine		No.	Adultera	ted.
	Formal	Informal	Total	Formal	Informal	Total	Formal	Informal	Total
Brought forward	 600	225	825	573	213	786	27	12	39
Sal Volatile	 _	3	3	_	3	3	-	_	_
Aspirin Tablets	 -	1	1	-	1	1	-	-	_
Camph. Oil	 _	2	2	-	2	2		-	_
Parrish's Food	 _	1	1	-	1	1		-	-
Jellies	 _	1	1	-	1	1	-	_	_
Liquid Paraffin	 -	2	2	-	2	2	-	-	-
Cream of Tartar	 -	1	1		1	1	-	-	_
Boric Ointment	 -	3	3	-	3	3	-	-	_
Potted Meat	 -	1	1	-	1	1	-	-	-
Sardines in Oil	 -	1	1	-	1	1	-	-	-
Tinned Peas	 -	1	1	-	1	1	-	-	-
Non-alcoholic Wine	_	1	1	-	1	1	-	-	-
Ice-cream Powder	 -	3	3	-	3	3	-	-	-
Hydrogen Peroxide	 -	1	1	-	1	1	-	-	-
Prawns	 -	1	1	-	1	1	-	-	-
Pickles	 -	1	1	-	1	1	-	-	-
Horseradish Cream		1	1	-	1	1	-	-	-
TOTAL	 600	250	850	573	238	811	27	12	39

The following table shows the average percentage of fat and solids not fat in milk samples (formal and informal) analysed each month during 1937 by the Public Analyst:

Month	No. of Samples	Average Percentage of Fat	Average Percentage of Solids-not- Fat
January	 31	$3 \cdot 468$	8.717
February	 37	$3 \cdot 443$	8.843
March	 26	$3 \cdot 261$	8.890
April	 36	3.558	8.989
May	 24	3.465	9.056
June	 19	3.136	9.101
July	 25	3.608	8.895
August	 23	3.667	8.899
September	 27	3.603	9.046
October	 19	3.658	8.921
November	 23	3.708	8.870
December	 26	3.519	9.003
	_		
Average	 26.3	$3 \cdot 507$	8.935

The standard for milk under the Sale of Milk Regulations 1901 is Fat $3 \cdot 0\%$ and Solids not Fat $8 \cdot 5\%$.

Of the 458 informal samples of milk which were tested by the Inspectors during the year by the Gerber process, 70 or 15% were found to be adulterated. This informal work is most valuable in the administration of the Food and Drugs (Adulteration) Act.

Samples taken formally and found to be not genuine.

```
1 Milk deficient 23% and containing added water 18.7%.
                  11%
                                                       16%.
3 Milk deficient in fat 12½%.
1
          do.
                         14%.
2
                          9%.
          do.
                          8%.
2
          do.
1
                          6%.
          do.
1
          do.
                          5\frac{1}{2}\%.
          do.
                          5%.
          do.
                        16\frac{1}{2}\%.
1
                        23%.
           do.
                                     40%.
  Milk containing added water
                                  22.4%.
                do.
                                      6%.
2
                do.
                                      5%.
                do.
1
                                    1.7%.
                do.
```

- 1 Potted Meat Paste containing excess water 12.1%.
- 1 Coffee and Chicory Extract containing sulphur dioxide 106.8 parts per million.
- 1 Sausage containing sulphur dioxide 191.8 parts per million.
- 2 Soft Cheese with 93% of fat not derived from milk.
- 1 Pepper containing 1% of starch.

SAMPLES TAKEN INFORMALLY AND FOUND TO BE NOT GENUINE.

1 Milk containing added water 26%.

1 do. 20.7%.

1 Milk deficient in fat 1½%.

1 Whi	sky	conta	aining	added	water	1.53%.
-------	-----	-------	--------	-------	-------	--------

1.29%. 1 do.

1 do. 1.15%.

1 Coffee and Chicory Extract containing sulphur dioxide 565 parts per million.

1 Coffee and Chicory Extract containing sulphur dioxide 120.5 parts per million.

1 Sausage containing sulphur dioxide 383.6 parts per million.

1 $315 \cdot 1$ do. do. do.

1 do. do. $246 \cdot 6$ do.

1 Soft Cheese with fat present not derived from milk.

ACTION IN THE CASE OF ADULTERATED SAMPLES, ETC.

(a) Legal Proceedings.—In the following instances legal proceedings were instituted with the results shown:

Sale of milk deficient in fat 23% and containing added water 18.7%. Sale of milk deficient in fat 11% and con-

taining added water 16%.

Aiding and abetting in the sale of above milk. Sale of milk deficient in fat 16½%.

> 23%. do.

Sale of milk containing added water 5%.

do. 6%. 5.8%. do. 40%. do.

do. 22.4%.

Sale of milk deficient in fat $12\frac{1}{2}\%$.

Using unregistered premises as manufactory of Margarine Cheese.

Exposing for sale Margarine Cheese not properly labelled.

Sale of Margarine Cheese in wrapper not properly marked

Sale of Buttacream Cheese containing fat other than milk fat.

Case withdrawn.

Fined £2/0/0.

Fined £1/0/0.

Case dismissed.

Fined £3/0/0.

Ordered to pay £2/2/0 costs.

Fined £3/0/0.

Fined £1/0/0. Fined £5/0/0.

Fined £5/0/0.

Fined 10/-.

Fined £2/0/0.

Fined £2/0/0.

Fined £2/0/0.

Case withdrawn.

(b) Other Action.—In the following instances legal proceedings were not instituted, but the persons concerned were cautioned by the Health Committee:—

Sale of milk deficient in fat 12%.

do. 8%.

do. 9% (two instances).

do. 6%.

do. 5½%.

do. 5%.

Sale of milk containing added water 1.7%.

Sale of sausage containing sulphur dioxide 191.8 parts per million.

Artificial Cream Act, 1929.

No offences against this Act were detected during the year. No applications for registration of premises under Section 2 were received during 1937.

Public Health (Condensed) Milk Regulations 1923.

Public Health (Dried Milk) Regulations 1923.

During 1937 twelve samples of condensed milk and three samples of dried milk were obtained under the above Regulations. These proved on analysis to be genuine and also complied with the regulations as to declaratory labels, etc.

Public Health (Preservatives, etc. in Food) Regulations 1925-27.

All articles of food sampled under The Food and Drugs (Adulteration) Act, were examined for the presence, nature and amount of preservatives.

FERTILIZERS AND FEEDING STUFFS ACT 1926.

The table below shows the samples taken under the above Act during 1937:—

Feeding Stuffs.

Article.	(denuine.	Adulterated.	Total.
Weatings	 	3		3
Ground Oats	 	2	_	2
Rolled Oats	 	1	_	1
Maize Meal	 	4	_	4
Wheaten Meal	 	_	1	1
Bran	 	1	_	1
Biscuit Meal	 	1	1	2
		-	_	_
		12	2	14
		_	_	_

Fertilizers.

Article.	(denuine.	Adulterated.	Total.
Basic Slag		2	_	2
Blood Fertilizer		1	_	1
Sulphate of Ammonia		4	_	4
Nitrate of Soda		6	_	6
Superphosphate of Lime		2	-	2
General Fertilizer		5	2	7
Compound Fish Manure		1	_	1
Sulphate of Iron		1	_	1
Sulphate of Potash		1	_	1
Bone Meal		3	_	3
		—	_	_
		26	2	28
			_	-

The Health Committee issued a caution in connection with the exposure for sale of organic Fertilizer deficient in potash 27%.

During the year visits of inspection to warehouses in which fertilizers and feeding-stuffs are stored and sold have been made to ensure that the provisions of the Act with regard to labelling and keeping of registers are being complied with.

THE PHARMACY AND POISONS ACT 1933.

This Act permits the sale of poisons specified in Part 2 of the Poison List by persons whose names and premises are entered in the Local Authority's list.

During 1937, eight applications for entry on the list were received, and, after inquiry and inspection, were approved.

In two cases legal proceedings were instituted for infringements of the Act as follows:—

Sale of poisons by unauthorised person — ordered to pay 10/- costs.

Exposing for sale poisons not in accordance
with Rule 23 of the Poisons Rules — do.

DISEASES OF ANIMALS ACTS 1894 to 1935.

(a) Swine Fever.

Of six cases of suspected Swine Fever which were notified to this department, notices Form "B" were served in four cases. In two cases Swine Fever was confirmed. As precautionary measures, notices (Form "B") were served upon the occupiers of the remaining premises.

(b) Parasitic Mange.

No case was reported.

- (c) Glanders and Farcy. No case was reported.
- (d) Anthrax.

No case was reported.

(e) Tuberculosis.

Four cases were reported within the city and in each case the animals were slaughtered and compensation paid in accordance with the provisions of the Tuberculosis Orders.

- (f) Foot-and-Mouth Disease.
 No case was reported.
- (g) Sheep Scab.

One suspected case was reported but was not confirmed.

Movement Licences.

The numbers of Movement Licences issued by the department were as follows:—

		Issued	from—		
		Cattle Market.	Central Offices.	Total.	No. of Animals affected.
Under the Swine Fever Orders.	Pigs. Fat Stock Stores	3,799 1,193	102	3,901	24,106 9,474
Under the Importation of Animals Acts.	Irish Cattle. Fat Stores	335	9	344	4,848
Under the Footand-Mouth Disease Orders.		Nil.	Nil.	Nil.	-

SECTION "F."

PREVALENCE OF, AND CONTROL OVER INFECTIOUS AND OTHER DISEASES.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

Notifiable Diseases (other than Tuberculosis) during the year.

						Ac	E PERI	ods.				1			
	Under 1	1-	2-	3-	4-	5-	10-	15-	20-	25-	35-	45-	55-	65-	Tot
Small-pox Cases Deaths	::	::		::	::	::	::						::	.:	
Typhoid Cases Fever Deaths	::	::	::	::	::	1 1	4	3	2		::		1	::	
Scarlet Fever Cases Deaths	3	11	17	32	35	220 1	102	68	23	30	15	1	2	::	5
Diphtheria Cases Deaths	6	3	12 1	13	14 2	78 1	44	18	15	16 1	11	1		::	2
Puerperal Cases Fever Deaths	::	::	::		::	::	.:		1 1	6	1	::	::	::	
uerperal Cases Pyrexia . Deaths			::				::	3	13	41	10	::		::	
Crysipelas Cases Deaths	3		1	1			2	3	3	6	20	30 1	23 1	25 4	
Phthalmia Cases Neonatorum Deaths	67				::	::									
Incephalitis Cases Lethargica Deaths					::	::			2		1	1		::	
oliomyelitis Cases Deaths		1	::	::											
cute Polio- Cases encephalitis Deaths							::								
erebro-spinal Cases Fever Deaths	1	1				1	1								
neumonia Cases Deaths	72 113	38 19	36 8	24 5	22 2	56 3	22 5	18 2	24	39 5	52 12	55 28	68 57	60 79	-
falaria Cases Deaths	::			::	::		::		::	::	1	1	2	::	
Dysentery Cases Deaths	1	3	2	7	1	10	4	1	1	3	3	3	1	2	-
Total Notifications , Deaths	100000	57 20	68 9	77 6	72 4	366 6	179 5	114	82	141	112 15	91 30	97 58	87 83	1,6

For numbers of cases admitted to Hospital see Hospital Section of Report, page 128.

For notes on the above figures see following pages.

NOTIFIABLE INFECTIOUS DISEASES.

Small-pox.

There were no cases of Smallpox in Nottingham in 1937.

Typhoid Fever.

Eleven cases of this infectious disease were notified during the year, ten of which were treated within the isolation hospital. The eleventh case was too ill to be removed from another hospital, and died less than 24 hours after the diagnosis was finally made. Out of the eleven notified cases, it may be stated here that 5 belonged to one family, and all were children between the ages of 8 and 16 years. One member of this family died in the isolation hospital. This death, together with the one recorded above makes a total of two deaths due to typhoid fever during the year. In spite of searching investigation the source of infection in the case of this family remained undiscovered.

Of the six other cases, two were members of one family and although it was not definitely proved, there were very strong suspicions of the infection having been contracted at a sea-side resort. Two of the cases appear to have been contracted in Nottingham, or District, but here again the source of infection was not definitely discovered.

Another case contracted her illness outside Nottingham, and was sent into a hospital in the City for diagnosis. When the true nature of it was revealed she was transferred to the isolation hospital for treatment. One of the eleven cases notified was proved not to be suffering from typhoid fever at all.

It is interesting to record that all the above true cases were due to bacillus typhosus infection, there being no cases of paratyphoid fever, which is akin to typhoid fever, but usually milder. Although the incidence of typhoid fever has greatly diminished with the progress of sanitation, sporadic cases keep cropping up, due to the presence of carriers (2%—3% of cases become chronic carriers of the bacillus). One carrier may cause an epidemic outbreak to occur (vide the recent Croydon outbreak) unless prompt measures are taken, or even in spite of these.

In the main, prevention of the disease depends on protecting food and drink from contamination, and the isolation of known "Carriers."

Scarlet Fever.

There were 559 notifications compared with 730 in the previous year. The type was again mild, and only one death falls to be recorded. This occurred within the isolation hospital and was due to another condition.

Although the mortality from scarlet fever has diminished considerably during the last half century or so, it must be stated that certain complications, which are still common, particularly ear conditions (Otitis Media, etc.) can cause hardship (e.g. Deafness, etc.). Children (pre-school and school) are more liable to such complications. To facilitate the recovery from such complications, specialised treatment is required and in some cases surgical means have to be resorted to.



AMBULANCES AND VANS. CITY ISOLATION HOSPITAL.



As the mortality is now very low, and as many very mild cases occur which are never seen by a doctor, or never recognised as scarlet fever, it is debatable whether it is worth while to attempt hospital isolation of all the notified (mostly mild) cases of scarlet fever, to the exclusion of more serious diseases (e.g. diphtheria). Each case should be considered on its own merits, certainly where unhealthy home conditions, or any tendency to overcrowding exists, or where one or more members of the household is connected with the preparation of foodstuffs or drink, removal to hospital should be insisted upon.

Diphtheria.

There were 231 notifications, and 7 deaths were registered as due to this disease. All these occurred within the isolation hospital. Two of these were however in children from outside the City. It is significant that all except one of the deaths took place within a period of one to three days after admission to hospital. This means that there was in many instances delay either in calling in a doctor, or in the recognition of the nature of the illness.

Diphtheria, if it is to be combatted with hope of success, must be discovered and got under treatment early. The first symptom is not usually soreness of throat; the child is pale, weary and may complain of headache, faintness, or feeling generally unwell. Medical advice should be sought early in any illness of childhood with a view to detecting diphtheria or any other diseases in a curable stage. The tragedies of undiscovered diphtheria are many. It cannot be too

widely known that diphtheria is a "Preventable" disease. By a simple process of injection, a child can be "immunised" so that it is no longer liable to contract diphtheria. Any family doctor can do this at a small cost. It would be a good thing if the entire childhood population would submit to the process, for diphtheria would cease to cause tragedies. Certain residential schools in the City have already been dealt with in this way.

In the routine of immunisation against diphtheria it is only necessary to deal with the pre-school and school-children, as with increasing age most adults tend to develop a more or less natural immunity. However, in the case of adults specially liable to exposure (e.g. nurses in isolation hospitals), who are found to be susceptible, by means of a simple skin test, similar methods of "Active" immunisation by injections can be employed.

Dysentery.

During 1937, there occurred many cases of an extremely mild type of dysentery (bacillus Sonne infection). The mortality was nil. The disease was prevalent all over the country as well as on the Continent of Europe. Efforts to trace the source of infection and the mode of spread were fruitless, but as in the case of other more severe types of Bacillary Dysentery, the infection almost certainly was spread through the medium of food or drink.

Several such cases were admitted to the isolation hospital from other hospitals (suffering from other conditions). In most instances, all these cases recovered from the dysenteric symptoms from a few days to a week, though a few remained "convalescent" carriers for a few weeks or more.

A small outbreak of this bacillus Sonne dysentery occurred in a scarlet fever ward in the isolation hospital. The infection in this case was found to have been imported by a patient who came in suffering from scarlet fever. Measures to prevent spread soon proved effective.

Cerebro-Spinal Fever.

There were 4 cases notified with 2 deaths, compared with 7 notifications and 7 deaths last year.

Non-Notifiable Infectious Diseases.

Measles.

There occurred a minor epidemic of measles during the first half of the year, with quite a considerable mortality. Over 80 cases were treated within the isolation hospital, and the accommodation there at one time was rather taxed. These cases were selected, on account of over-crowding or unsuitable home conditions. Altogether 8 deaths due to a complication of measles (viz. broncho-pneumonia) took place in the isolation hospital.

Measles must be regarded as a serious disease on account of the frequency with which broncho-pneumonia occurs as a complication (particularly in the cases of children under 5 years of age).

Whooping-Cough.

There were fewer deaths due to this disease, compared with the previous year.

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CITY ISOLATION HOSPITAL-1937.

Disease			ning at 1936.	end	Admitted 1937.			uring	nally n	during	ty % 1937	Day: aver reside	age	the s7
	0,00	Sex. No of Patients	Recovered	Died	No. of Patients	Recovered	Died	Total cases during 1937	Total cases finally dealt with in 1937	Total deaths during 1937	Case mortality % of total cases 1937	Non-Fatal	Fatal	Remaining at the end of 1937
Scarlet Fever .	. 1	M. 25 F. 31	25 31		221 253	195 214	·i	246 284	220 246	1		::		26 38
Totals .		56	56		474	409	1	530	466	1	·21	32.4	23	64
Enteric Fever .		M F	::	::	4 7	2 6		4 7	2 7	· · · · · · · · · · · · · · · · · · ·	::	::	::	2
Totals .					11	8	1	11	9	1	11-1	45	7	2
Diphtheria .	. 1	M. 8 F. 12	7 12	1	97 98	82 89	6 2	105 110	96 103	7 2	::	::	::	9
Totals .		20	19	1	195	171	8	215	199	9	4.52	35.4	3.5	16
Small-pox .		M F			::	::		::					::	
Totals .														
Other Cases .		M. 2 F. 1	2 1		71 104	63 90	6 7	73 105	71 98	6 7		::	::	2 7
Totals .		3	3		175	153	13	178	169	13	7.6	20.9	8.6	5
TOTALS .		79	78	1	855	741	23	934	843	24	2.8	31.1	7.1	9

Cleansing Stations.

Although a station exists at Eastcroft for the cleansing of verminous persons, it is rarely required. For Scabies (Itch) it is found rather more convenient and useful to admit the patients (preferably the entire family) to the Isolation Hospital for a few days. They can be adequately treated there (when sufficient isolation accommodation is available), and in the meantime the whole of the infected bedding and clothing from the home can be collected and disinfected.

Disinfection.

The disinfecting staff carry out the spraying or fumigation of houses or other premises which have been exposed to acute infectious disease or tuberculosis, whenever such a course appears to be called for. Modern ideas on the spread of acute infectious disease throw more responsibility upon the infected person than upon inanimate articles with which he has been in contact. Therefore disinfection, so-called, is less practised now than formerly, especially in the case of Scarlet Fever. It is not now usual to spray or fumigate after Scarlet Fever, except in very dirty houses. In all, some 994 rooms were disinfected, and 13,743 articles of bedding and clothing; also 962 library books were subjected to such treatment as is possible with such things.

Outworkers.

There was another slight increase in the number of outworkers employed during the present year as compared with 1936. The addresses were recorded and action taken whenever necessary on account of infectious disease occurring in the homes.

TUBERCULOSIS.

[The following report has been contributed jointly by the tuberculosis officers, Dr. J. V. Whitaker and Dr. F. H. W. Tozer].

We who are engaged in anti-tuberculosis work in Nottingham are presented with an interesting opportunity—that of obtaining results which shall compare favourably with those obtained in other cities of similar size. There is no doubt that hitherto Nottingham has been comparatively backward as regards its tuberculosis scheme and that this has been a consequence of inadequate staffing and insufficient accommodation and equipment.

The year 1937 has seen a continuation and an intensification of that revival of the tuberculosis scheme which was initiated early in 1936. When assessing the results of this more intensive scheme it will be important to remember that as regards statistical returns good results may not make themselves evident for a number of years to come. Indeed, during an initial temporary period the results may seem to be worse than hitherto. To use an analogy we may say that we are in the early stages of spring cleaning a dusty house and that the very process of spring cleaning in itself gives rise to clouds of dust which were not apparent before the process began.

During the past year this contention appears already to have been borne out. Thus, for the first time in its history, Nottingham has had long waiting lists of cases of pulmonary tuberculosis eager for admission to sanatorium. Also a senior member of the controlling staff of one large local firm has remarked to one of us: "Doctor, why have there been so many cases of tuberculosis among the members of our staff during the last year or two? We do not seem to have had so many cases in previous years and we had always thought that our work was of a disinfectant nature and therefore very healthy."

The two main sources of tuberculosis are (a) infection from persons suffering from the disease and (b) contaminated milk derived from diseased cows. When one recalls that the relationship of tubercle tainted milk to disease of glands, bones and joints has been acknowledged for over thirty years, one has food for thought in the fact that such milk is still widely exposed for sale in parts of the British Isles.

Each of these two sources of the disease is important, but it is necessary to remember that the former is decidedly the more so. Thus, in considering "surgical" tuberculosis it may not be generally appreciated that approximately three quarters of all cases of bone and joint tuberculosis are not of milk origin. The proportions are very similar in the case of genito-urinary tuberculosis. In Nottingham in the earlier days of our revised scheme and prior to the erection of the proposed new sanatorium, staffing and accommodation will still tend to be limited. Hence the necessity of adopting as far as possible the Aesopian principle of conserving the golden coins to the exclusion of the silver and copper ones. In other words we must for the present concentrate our efforts upon the former of the two main sources—the infective human patient.

"Find, isolate, educate and treat the adult positive case"—this is the main objective in most tuberculosis schemes. At the present time in Nottingham this especially is the policy, the adoption of which will pay us best. It should be emphasised, however, that in large scale measures against tuberculosis prevention should be looked upon as being probably more important than treatment.

During several months of the past year we have encountered a waiting list of patients—especially female patients—for admission to the sanatorium. At the time of writing this report we still have a fairly long waiting list in the case of both sexes. It will readily be appreciated that this fact of a waiting list runs entirely counter to the spirit of the remarks made above. In modern times a waiting list is an abomination which cannot be

tolerated. It implies the presence of uncontrolled—and indeed untreated—infective patients scattered at random in various parts of the city and possibly living in conditions of overcrowding. Each one of these patients tends to be a menace to his neighbours and therefore tends also to the maintenance of a vicious circle. This difficulty will of course be met by the erection of the proposed new sanatorium.

During 1937 the "Forest Dene" Clinic has been partly re-furnished and additional heating plant has been installed. A modern single valve X-ray installation has been erected in one of the first floor rooms. This is fed with current from a rotary converter housed in the basement. One room has been completely equipped as a dark room for developing films. Another room has been adapted for use as a pneumothorax refill clinic and has been equipped with a Cutbill's pneumothorax outfit and the necessary accessory apparatus. Each of the two medical officers' rooms has been furnished with two viewing boxes for the examination of films.

At "Forest Dene," in addition to the day-time sessions, two evening sessions are held each week for patients and contacts unable to attend for examination during the day. Two pneumothorax refill clinics and three X-ray sessions are also held each week.

At the City Sanatorium each ward has been provided with a viewing box for examining films and with a new Cutbill's pneumothorax outfit and complete accessory apparatus. Case records and temperature charts are now kept in "East-Light" files in the nurses' room. In consequence of this a patient not doing well is at least not continually confronted with his own gloomy graphic

record suspended by his bedside and affording an easy comparison with the records of other patients progressing more favourably.

The tuberculosis officers visit the City Sanatorium on five mornings each week. A number of cases are continually being treated by artificial pneumothorax. Gold salts are also to some extent used in treatment. The sanatorium beds are usually maintained filled to capacity, especially on the female side, in which case during several months of the past year there has been a waiting list of cases for admission.

The City Hospital has been visited by the tuberculosis officer once each week for the purpose of consulting with the resident staff and also for the purpose of maintaining registers.

Bulwell Hall continues to serve its most useful purpose as a preventorium for delicate children and for contacts. A few non-infective tuberculous cases are treated there. The tuberculosis officer visits once each week.

Home visits are constantly being paid by the tuberculosis officers at the request of practitioners who are furnished with reports.

Five lectures to adult schools in various parts of the city were given during the year by members of the clinic staff. It is felt that this is the most effectual method of propagating an awareness of the disease amongst the public without at the same time instilling fear in the public mind.

Our thanks are due to the Chairman and members of the Nottingham and Nottinghamshire After-Care Committee whose continual collaboration has been a most valuable factor in alleviating distress and hardship amongst our patients and their families. Help may be given both before and after entry into sanatorium, but in addition to this the help given has frequently been the means of enabling a patient to remain in the sanatorium longer than would otherwise have been the case.

Notification Figures.

	Pulmonary.	Non- Pulmonary.	Total.
No. of primary notifications during the year 1937	349	68	417
No. extracted from Death returns	9	11	20
No. of Deaths transferred from other areas by Registrar-General	_		_
No. of Posthumous Notifications	1	2	3
No. of transferred cases from other areas	9	2	11
Total	368	83	451
No. of cases on Notification Register on 31/12/37	993	248	1,241
No. of deaths of notified cases during 1937	229	24	253
No. of registered deaths from tuberculosis	234	43	277

The percentage of non-notified deaths to registered deaths was 7 per cent.

Tuber	RCULOSI	S DEATH-RATE.		
Period.		Respiratory only.	All forms.	
10 years average 1927-36		0.90		
1937		0.84	0.99	

The following table shows the ages of the cases at the time of notification and at death:

					ULOSIS					
		*New	Cases.			Deaths.				
	Pulmonary.		No Pulmo		Pulm	onary.	Non- Pulmonary			
E Hotel	М.	F.	M.	F.	M.	F.	М.	F.		
Under 1 year	_	_	_	1	_	_	_	1		
1 to 5 years	2	1	13	10	_	1	9	5		
5 to 10 "	6	7	10	8	_	3	2	3		
10 to 15 "	8	6	4	8	1	2	1	2		
15 to 20 "	16	26	2	7	7	14	1	2		
20 to 25 "	31	32	4	2	11	24	2	2		
25 to 35 "	41	47	4	4	35	27	6	-		
35 to 45 ,,	32	34	1	3	23	14	1	3		
45 to 55 "	25	9	-	1	17	10	-	_		
55 to 65 "	22	11	-	-	23	6		_		
65 and upwards	9	3	1	_	11	5	1	2		
Totals	192	176	39	44	128	106	23	20		

^{*}Includes primary notifications, cases not notified during life but first intimated by death returns, and transfers from other areas.

Public Health (Prevention of Tuberculosis) Regulations, 1925.

No action appeared to be called for under the above Regulations relating to tuberculous employees in the milk trade.

Public Health Act 1925—Section 62:

Public Health Act 1936-Section 172.

No action was taken under these powers.

Treatment of Tuberculous Conditions of Bones and Joints is carried out in conjunction with the Cripples' Guild, Park Row, where patients are seen by Mr. S. A. S. Malkin, who arranges the necessary in- or out-patient treatment.

Work of The Tuberculosis Clinic—"Fores	t Dene	."	
No. of persons on clinic register on 1/1/37 New cases examined during year, excludi			853
contacts		995	
Contacts examined during year		252	
Cases returned after having been lost sight	of,		
and cases transferred from other areas		11	
	100	—— add	1,258
			2,111
Cases written off register as cured		57	
	on-		
tuberculous, or notified in error		866	
Transferred to other areas or lost sight of		91	
Died		187	
		subtra	ct 1,201
No. of persons on clinic register $31/12/37$			910
		N	
Pu	lmonary	Non- Pulmonary	. Total.
A.—New cases (excluding contacts):			
(a) Definitely tuberculous	343	27	370
(b) Diagnosis not completed	-	_	8
(c) Non-tuberculous	_	_	617

B.—Contacts:		
(a) Definitely tuberculous 3	-	3
(b) Diagnosis not completed —		_
(c) Non-tuberculous —	_	249
C.—Cases written off register as:		
(a) Recovered 33	24	57
(b) Non-tuberculous, including cases notified in error and		0.00
cancelled —	_	866
D.—No. of cases on clinic register 31/12/37:		
(a) Definitely tuberculous 815	87	902
(b) Diagnosis not completed —	_	8
No. of cases on clinic register on $1/1/37$		853
No. of cases transferred from other areas and or returned after discharge in previous years		11
No. of cases transferred to other areas, cases not des further assistance under the scheme, and cases		
sight of		91
Cases written off as dead (all causes)		187
No. of attendances at the clinic		2,151
No. of insured persons under domiciliary treatmen	t on	
31/12/37		186
No. of consultations with medical practitioners—		
(a) Personal		23
(b) Other		643
No. of visits by Tuberculosis Officers to homes, inclu	ding	
personal consultations at home		142
No. of visits by Nurses or Health Visitors to home clinic purposes	s for	3,182
No. of :—(a) specimens of sputum, etc., sent to labora	atory	810
(b) X-ray examinations made in connec		
with clinic work		863
No. of "T.B. Plus" cases on clinic register 31/12/37		448

Return showing the extent of Residential Treatment and Observation in Institutions during the year.

			In Insti- tutions Jan. 1st.	Admitted during the Year	Discharged during the Year	the	In Institu- tions on Dec. 31st
Number of patients suffering from pulmonary tuberculosis.	Adults	М. F.	49 47	209 149	140 111	53 33	65 52
	Children		15	19	12	4	18
Number of patients suffering from non-pulmonary tuberculosis.	Adults	М. F.	16 9	3 8	9	3 2	7 9
	Children		33	20	14	5	34
Number of doubt- fully tuberculous cases admitted for observation.	Adults	M. F.	3 4	13 3	12 4	-	4 3
	Children		44	28	26	-	46
Totals			220	452	334	100	238

The above table includes cases in City Isolation Hospital Sanatorium, City Hospital, Bulwell Hall, Harlow Wood, Gringley, and other Sanatoria.

Grouping of Pulmonary Cases admitted to the Sanatorium at the City Isolation Hospital during the year 1937.

GROUP.	Males.	Females.	Children.	Total.
T.B. Minus	 31	31	5	67
T.B.—Plus—Early	 3	8	_	11
T.B. Plus—Intermediate	 29	26	_	55
T.B. Plus—Advanced	 2	2	_	4
Totals	 65	77	5	137

During 1937 artificial pneumothorax treatment was attempted in twenty-seven cases. The treatment was successful in twenty-two of these, but was unsuccessful in the remaining five. Fifteen patients were treated with injections of gold salts.

Grouping of Cases of Tuberculosis admitted to the City Hospital during the year 1937.

Pulmonary.					Non-Pulmonary.					
GROUP.	M.	F.	Ch.	Total	GROUP.		М.	F.	Ch.	Total
T.B. Minus	17	11	2	30	Bones and Joints		2	4	8	14
T.B. Plus— Early	5	2	4	11	Abdominal .		_	-	2	2
T.B. Plus— Intermediate	51	33	2	86	Peripheral Glands .		_	1	1	2
T.B. Plus— Advanced	68	32	3	103	Other Organs .		1	2	5	8
Totals	141	78	11	230	Totals .		3	7	16	26

BULWELL HALL.

The fifty available beds were kept practically full throughout the year.

Number in residence on 1st January, 1937 = 49.

	Tuberculous	Contacts.	Observation	Total.
Children admitted during 1937	8	3	14	25
Children discharged during	5	6	13	24

Number in residence on 31st December 1937 = 50.

Average Length of Stay and Weight gained of Children discharged in 1937.

		Length of stay.	Weight gained	
Definite tuberculous cases	 	26·4 weeks.	6.9 lbs.	
Contact cases	 	80·1 weeks.	19·8 lbs.	
Observation cases	 	57·8 weeks.	11 · 0 lbs.	

VENEREAL DISEASES.

The clinic is open every week-day from 9 a.m. to 8 p.m., and the following figures show the attendances:—

Patients:	Males	1,765;	Females	568
Attendances:	,,	46,356	,,	18,627

These patients were drawn from the city and from the Notts. County area, as well as from other counties, the city cases averaging about two-thirds of the whole.

930 Examinations of specimens were carried out at the Treatment Centre by one of the staff of the Pathological Laboratory.

The Greendale House Hospital is for women and children, and admits both in-patients and out-patients. In the out-patient department, 436 patients made 4,536 attendances. These patients were from Nottingham, Notts. and Derbys. The number of in-patients was 68; the total number of in-patient days being 3,084.

The year 1937 was the last year of occupation of the clinic in North Church Street; as the year ended it was known that the need for Guildhall extensions would result in demolition of the small houses which had been run together to form this, the first Venereal disease clinic in Nottingham. Preparations were made for a quick transformation of property in Postern Street, near the General Hospital, and the City Engineer was able to make suitable alterations so as to enable the removal to be made on 27th March 1938. These, it is hoped, will be temporary premises only, and it is intended to build a permanent and satisfactory clinic, capable of dealing with the large attendances, so that this important work may be carried out in suitable surroundings. retirement of Dr. J. C. Buckley from the directorship of the service is referred to in the preface.

CITY PATHOLOGICAL LABORATORY.

During the year 23,177 specimens were examined by the staff of the Laboratory, as compared with 23,143 in 1936.

For purposes of comparison the figures for the past three years are given, classified according to nature of investigation:—

31 11,493	11,831
21 9,780	8,851
23 1,870	2,495
75 23,143	23,177
	23 1,870

Venereal Disease Work.

Specimens examined were derived from the following sources, those from outside the city being charged for :—

City Venereal Disease Clinic	 	7,299
,, Hospitals and Institutions	 	2,009
" Medical Practitioners	 	705
County Venereal Disease Clinic	 	970
,, Hospitals and Institutions	 	294
" Medical Practitioners	 	450
Holland County Council	 	50
Practitioners in other towns	 	54

Infectious Disease, Foods, Milk, Water, etc.

Specimens coming within these categories were derived from the following sources:—

City Hospital		 271
Other City Institutions and Clir	nics	 2,914
City Voluntary Hospitals		 297
" Medical Practitioners		 1,846
County Health Department		 418
" Hospitals		 1,157
" Medical Practitioners		 1,937
Lincoln Health Department		 11

The above included 5,759 swabs for diphtheria investigation, and 2,588 samples of sputum examined for the tubercle bacillus.

Clinical Pathology work, carried out on behalf of the City Hospital and some other hospitals, and practitioners, consisted of examination of blood, cerebro-spinal fluid, stomach contents and various other chemical and bacteriological investigations to the total of 2,495 specimens.

VACCINATION.

Particulars relating to the administration of the Vaccination Acts are given below and show the number of births registered during 1936 and how these were dealt with during 1936-37:—

Registered births (1936)=4,576.

Of these, 1,341 were successfully vaccinated;

290 died unvaccinated;

1 was found to be insusceptible to vaccination; 257 were not finally accounted for;

and, in respect of 2,687 certificates of "conscientious objection" were granted.

No vaccinations under the Public Health (Small-pox) Regulations 1917 were carried out during the year by the Medical Officer of Health or his deputy.

CANCER.

There were 437 deaths from Cancer, which is about the usual number.

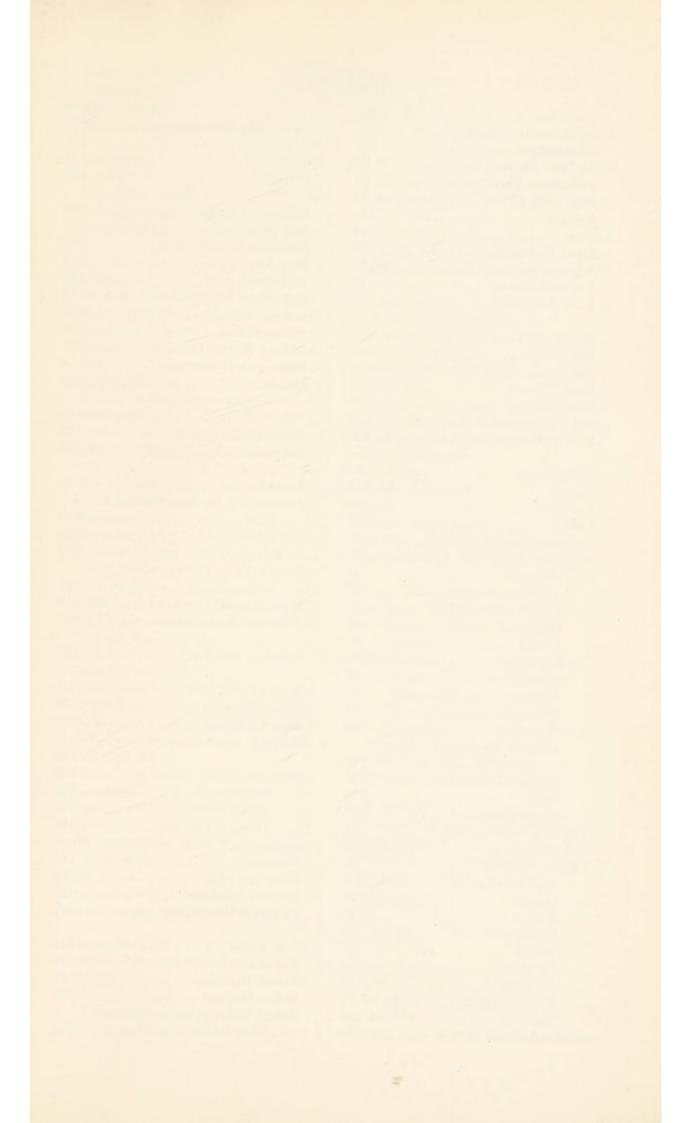
The arrangements for the diagnosis and treatment of this disease remain as recorded in the report for the previous year, except for continuous improvement in the work of the Nottinghamshire Council of the British Empire Cancer Campaign. This body provides ample Radium for treatment, and it is placed freely at the disposal of the various hospitals who need it. Deep X-ray treatment is similarly provided, by an outfit at the General Hospital, maintained by the Campaign Council.

CANCER.

NOTTINGHAM DEATHS, 1937. (International Classification).

SHOWING AGE PERIOD AT DEATH.

		20-	25—	35—	45—	55—	65—	75—	Total
Buccal cavity and Pharynx	m. f.	=	=	=	3	4	4	1 1	12 2
Digestive Organs and Peritoneum	m. f.	=	2	4 6	20 12	38 26	47 40	22 30	133 114
Respiratory Organs	m. f.	1 -	1 -	7 2	12 4	19 3	6 2	=	46 11
Uterus	f.	1	_	6	4	9	3	3	26
Other Female Genital Organs	f.	_	_	1	6	2	3	3	15
Breast	f.	-	1	10	5	14	9	3	42
Male Genito-urinary Organs	m.	_	_	2	2	4	7	1	16
Skin	m. f.	_	=	1	_ 1	2	1	1 1	5 3
Other or Unspecified Organs	m. f.	=	_	_	1 1	1 4	1 3	<u>_</u>	3 9



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