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SOKE OF PETERBOROUGH COUNTY COUNCIL.

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ANNUAL REPORT OF THE COUNTY MEDICAL OFFICER

FOR THE YEAR

1937

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FRANKS & SEIBER  
COUNTY

BOOK OF FRANKS & SEIBER

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ANNUAL REPORT OF THE COUNTY BOARD

FOR THE YEAR

1887

SOKE OF PETERBOROUGH COUNTY COUNCIL

ANNUAL REPORT OF THE COUNTY MEDICAL OFFICER

FOR THE YEAR 1937.  
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List of Members of the Public Health, Housing, and  
Mental Deficiency Act Committee :-

H. Baynes.	J.T. Briggs
C. Day.	The Most Hon. The Marquess of Exeter, K.G. C.M.G.
G. Green	Mrs M.C. Cook
W.T.G.W. Fitzwilliam	J.R. Horrell
W. Neaverson	Mrs M. Pailing
G.T. Vawser	Miss E.J. Warwick.

Co-opted Members :- Mrs Mansfield  
The Hon. Mrs Pelham.  
Mrs M.H. Slater

----- \*\*\* -----

I present a typewritten Report on the health of the County during the year 1937.

AREA AND POPULATION

The acreage, and population of each district of the County as estimated by the Registrar-General, are as follows :-

<u>District</u>	<u>Acreage</u>	<u>Estimated population mid-year 1937.</u>
City of Peterborough	10,022	46,550
Peterborough Rural District	28,186	6,280
Barnack Rural District	15,256	2,510
Administrative County	53,464	55,340

This is an increase of 690 on last year's estimate of 54,650.

There is an increase of 700 in the City of Peterborough, an increase of 65 in the Peterborough Rural District, and a decrease of 75 in the Barnack Rural District. With the exception of the Barnack Rural District there is an increase, which is accounted for by the continued prosperity of engineering. It must, however, be remembered that these figures are only estimates made by highly trained statisticians in the Office of the Registrar-General in London.

BOOK OF PETROBOROUGH COUNTY COUNCIL

ANNUAL REPORT OF THE COUNTY MEDICAL OFFICER

FOR THE YEAR 1937.

List of Members of the Public Health, Housing, and  
Mental Deficiency Act Committee :-

J.T. Briggs The Hon. The Marquess of Exeter, K.G., G.M. Mrs M.G. Cook J.R. Kennell Mrs M. Lilling Miss E.L. Warwick	H. Payne C. Day G. Green W.T.G.W. Pizzaville W. Haveron G.T. Tawser
Co-opted Members :- Mrs Marshall The Hon. Mrs Polham Mrs M.H. Slater	

I present a typewritten Report on the health of the County during  
the year 1937.

AREA AND POPULATION

The acreage, and population of each district of the County as  
estimated by the Registrar-General, are as follows :-

District	Acreage	Estimated population mid-year 1937.
City of Petroborough	10,022	46,580
Petroborough Rural District	28,186	6,280
Barnack Rural District	18,285	2,210
Administrative County	58,484	55,040

This is an increase of 600 on last year's estimate of 54,580.  
There is an increase of 700 in the City of Petroborough, an increase  
55 in the Petroborough Rural District, and a decrease of 75 in the  
Barnack Rural District. With the exception of the Barnack Rural  
District there is an increase, which is accounted for by the continued  
prosperity of engineering. It must, however, be remembered that the  
figures are only estimates made by highly skilled statisticians in the  
Office of the Registrar-General in London.

In some quarters doubt has been expressed as to the correctness of these forecasts, and notably in the Report for East Suffolk. In that County the Medical Officer wittily remarks that in 1936 the Registrar-General spirited away 1,400 people. Not content with that he has taken away 1,420 in 1937 - more rapacious than the dragon in the fairy tale, his appetite can only be satisfied with four victims a day.

He further points out that the population has decreased in some mysterious way by 3,646 since 1933, although births exceed deaths, more persons are insured, and houses continue to be built.

In this County there has been a slight decrease in the number of births (31), and an increase of 78 in the number of deaths. On the other hand, owing to the courtesy of the Clerk to the Insurance Committee, I am able to state that the number of insured persons in the Soke of Peterborough has increased from 20,188 on December 31st 1931 to 22,338 on December 31st 1937 - an increase of 2,150. The number of insured persons is about 40 per cent of the whole, which gives a figure of 55,845 - a figure 505 more than that of the Registrar-General.

The corrected Census figures for each area of the County at the Census years of 1921 and 1931 are as follows :-

<u>District</u>	<u>1921</u>			<u>1931</u>		
	<u>Males.</u>	<u>Females.</u>	<u>Total.</u>	<u>Males.</u>	<u>Females.</u>	<u>Total</u>
Peterboro' City.	18,941	20,610	39,551	21,097	22,454	43,551
Peterboro' R.D.	2,780	2,734	5,494	3,036	2,921	5,957
Barnack R.D.	946	968	1,914	1,235	1,096	2,331
Admin. County	22,646	24,312	46,959	25,368	26,471	51,839

The Rateable Value of each District in the County, the County as a whole, and the sums represented by a penny rate are :-

<u>District</u>	<u>Rateable Value</u>	<u>Product of a 1d Rate</u>
Peterborough M.B.	£310,534	£1,223 - 2- 9d
Peterborough R.D.	£16,984	£70 -15- 4d
Barnack R.D.	£12,641	£51
Administrative County	£339,895 ( general purposes ) £29,361 ( special purposes )	£1,200 £95

The corrected Census figures for each area of the County at the Census years of 1921 and 1931 are as follows:-

The total value of each District in the County, the County as a whole, and the sums represented by a penny rate are:-

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County the Medical Officer withy remarks that in 1928 the Registrar-

these forecasts, and notably in the Report for past months. In that

in some quarters doubt has been expressed as to the correctness of

District	1931	1921	Total	Males	Females	Total
Peterborough City	18,641	20,810	39,451	21,027	18,424	39,451
Peterborough R.D.	2,760	2,734	5,494	2,885	2,609	5,494
Barnack R.D.	948	928	1,876	1,005	871	1,876
Admin. County	22,846	24,312	47,158	25,288	21,870	47,158
<b>Total</b>	<b>45,295</b>	<b>48,884</b>	<b>94,179</b>	<b>50,205</b>	<b>43,974</b>	<b>94,179</b>

District	Product of a 1s Rate	Product of a 1s Rate
Peterborough M.D.	£310,534	£310,534
Peterborough R.D.	£18,641	£18,641
Barnack R.D.	£9,480	£9,480
Administrative County	£439,805	£439,805
<b>Total</b>	<b>£878,460</b>	<b>£878,460</b>

EXTRACT FROM VITAL STATISTICS

<u>Births</u>	Legitimate	Males	387	Females	369	Total	756
	Illegitimate	"	20	"	20	"	40
	Total	"	407	"	389	"	796

BIRTH RATE 14.3

<u>Stillbirths</u>	Males	15.	Females	17.	Total	32
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Rate per 1000 total births 38.6

<u>Deaths</u>	Males	338	Females	359	Total	697
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DEATH RATE 12.0

Death rate of infants under 1 year of age per 1000 live births :-

Legitimate	48	Rate	63.6
Illegitimate	3	"	75.0
Total	51	"	64.0

Number of women dying in, or in consequence of, childbirth :-

From sepsis	1
From other causes	1
Deaths from Measles ( all ages)	2
" " Whooping Cough " "	2
" " Diarrhoea ( under 2 years)	7

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA

Midwives Act 1936

In addition to the Scheme fully described in my Report for 1936, it has been decided to appoint a Head Midwife.

The following are the conditions of her appointment :-

- (a) To act as a Midwife and Maternity Nurse at domiciliary confinements in any part of the County as occasion may require.
- (b) to supervise the work of six midwives employed by the Council as may be directed by the Medical Officer.
- (c) to report to the County Medical Officer of Health any cases of midwives who do not appear to be in good health.
- (d) to be present at confinements from time to time in order to ensure that the Council's midwives are carrying out their duties satisfactorily.



EXTRACT FROM VITAL STATISTICS

Legitimate Males	387	Females	805	Total	1192
Illegitimate Males	30	Females	60	Total	90
Total	407	Females	865	Total	1272

BIRTH RATE 14.8

Legitimate Males	15	Females	17	Total	32
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Rate per 1000 total births 38.6

DEATH RATE 12.0

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GENERAL PROVISIONS OF HEALTH SERVICES IN THE AREA

Midwives Act 1938

In addition to the Scheme fully described in my report for 1938, it

has been decided to appoint a Head Midwife.

The following are the conditions of her appointment:-

- (a) To act as a Midwife and Maternity Nurse at the County Maternity Hospital in any part of the County on occasion any request is made to her.
- (b) To supervise the work of six midwives employed by the Council and may be directed by the Medical Officer.
- (c) To report to the County Medical Officer of Health any cases of infectious diseases which may be notified to her.
- (d) To be present at confinements in the County in order to ensure that the Council's midwives are carrying out their duties satisfactorily.

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- (e) to re-arrange in cases of emergency, cases allotted to the midwives and to immediately report such re-arrangements to the County Medical Officer of Health.
  - (f) to act under the general direction and control of the County Medical Officer and to comply with all instructions which he may issue from time to time.
  - (g) to reside in such locality as may be allotted to her and to devote her whole time to the services of the County Council.
  - (h) to attend when directed post graduate courses which will be paid for by the County Council.
  - (i) to collect all fees due from patients attended by her and pay the same over to the County Council in accordance with regulations made by them from time to time.
1. Applicants must not be under 25 years of age and must be trained nurses holding a Certificate of General Hospital Training and the Certificate of the Central Midwives Board.
  2. The commencing salary of the person appointed, including travelling expenses and provision of uniform, will be at the rate of £200 per annum rising, subject to satisfactory service, by an annual increment of £5 and two annual increments of £10 to a maximum of £225 per annum.
  3. The appointment will be subject to the provisions of the Local Government and Other Officers' Superannuation Act 1922 and the person appointed will be required to pass a medical examination.
  4. Three weeks' annual holiday will be allowed.
  5. The appointment will be terminable by one month's notice in writing on either side.

Up to the time of writing no satisfactory applications have been received.

#### INFANT LIFE PROTECTION ACT

Number of persons on the Register who were receiving children for reward at the end of the year	2
Number of children on the Register at the end of year	7
Died	0
Left the County	0
Returned to parents	0

The work of health visiting under this Act is carried out by Nurse Mc'Phillips. All infants are seen at monthly intervals and all have good homes.

- (a) to re-arrange in cases of emergency, cases allotted to the midwives and to immediately report such re-arrangements to the County Medical Officer of Health.
  - (b) to act under the general direction and control of the County Medical Officer and to comply with all instructions which he may issue from time to time.
  - (c) to reside in such locality as may be allotted to her and to devote her whole time to the service of the County Council.
  - (d) to attend when directed such graduate courses which will be paid for by the County Council.
  - (e) to collect all fees due from patients attended by her and pay the same over to the County Council in accordance with regulations made by them from time to time.
1. Applicants must not be under 25 years of age and must be trained and holding a Certificate of General Hospital Training and the Certificate of the Central Midwives Board.
2. The commencing salary of the person appointed, including travelling expenses and provision of uniform, will be at the rate of £200 per annum rising, subject to satisfactory service, by an annual increment of £5 and two annual increments of £10 to a maximum of £285 per annum.
3. The appointment will be subject to the provisions of the Local Government and Other Officers' Superannuation Act 1932 and the person appointed will be required to pass a medical examination.
4. Three weeks' annual holiday will be allowed.
5. The appointment will be terminable by one month's notice in writing on either side.

Up to the time of writing no satisfactory applications have been received.

INFANT LIFE PROTECTION ACT

Number of persons on the register who were receiving children for reward at the end of the year	2
Number of children on the register at the end of year	7
Returned to parents	0
Left the County	0
Dead	0

The work of health visiting under this Act is carried out by nurses and health visitors. All infants are seen at health intervals and all have good health.

### MIDWIVES

The following midwives signified their intention to practice in the County during 1937. The figures after each name indicates the number of cases attended :-

<u>Midwife</u>	<u>Address</u>	Cases attended as :-	
		<u>Midwife</u>	<u>Maternity Nurse</u>
G.S. Clement	60, Russell St, Peterboro '	57	35
M. Ireland	80, Harris St. "	51	32
D.M. Battson,	5, Marholm Rd, Walton "	29	30
N.I. Jones	214, Padholme Rd "	13	41
E. Evans	2, London Road "	10	10
E.G. French	142, Mayors Walk "	9	48
J. Baker,	Alexandra Road "	14	16
L. Wilkinson,	158, Mountstephen Av. "	3	2
M. Wood,	101, Huntly Grove "	0	4
M. Rawlence,	172, London Road "	6	13
M. Gray	5, Geneva Street "	5	40
E.R. Notley,	17, St James' Avenue "	0	4
A.E. Bailey	129, Fletton Avenue "	0	0
F. Becken	26, Queens Road, Flotton	0	0
A.R. Stamper	Castor, Peterboro' )	28	9
M.E. Hartney	" " )		
A.A. Holloway	" " )		
K.M. Eads	" "		
R.P. Hebden	Barnack	6	6
A. Windross	Stibbington	5	0
J. Wilson	St John's Hospital, Peterboro' )	16	7
O.I. Homan	" " " " )		
E. Wignall	" " " " )		
D.A. Norton	" " " " )		
R.J. O'Hanlon	" " " " )		
<u>Totals :-</u>		<u>252</u>	<u>297</u>

During the year 1937 252 cases were attended by midwives, and 297 were attended in their capacities as maternity nurses. As there were 796 births in the County in 1937 this means that 549 women were attended by midwives in one or other of the midwives capacities in 1937, while as many as 247 were attended by doctors alone, assisted or not by women unqualified in the obstetric art.

During the year five midwives worked at St John's Hospital and undertook midwifery work in those parts of the County unprovided by Nursing Associations. 23 confinements were attended by these ladies, 16 in their capacities as midwives and 7 in their capacities as maternity nurses.

In six months of 1937 ( July to December) the six midwives employed by the County Council attended 107 cases in their capacities as midwives, and 148 in their capacities as maternity nurses.

MIDWIVES

The following midwives qualified their intention to practice in the County during 1937. The figures after each name indicates the number of cases attended as:-

Midwife	Address	Midwife	Nurse
G.S. Clement	60, Russell St., Peterboro	57	38
M. Ireland	" " "	51	32
D.M. Easton	5, Marlow Rd., Winton	29	30
H.I. Jones	" " "	18	41
E. Evans	" " "	10	10
E.O. French	142, Mayors Walk	9	48
J. Baker	Alexander Road	14	18
J. Wilkinson	152, Montpelier Av.	8	5
M. Wood	" " "	0	4
M. Kinnear	172, London Road	9	12
M. Gray	5, Gower Street	3	40
E.R. Hottel	17, St. James Avenue	0	4
A.R. Bailey	129, Pitton Avenue	0	0
F. Backen	22, Queens Road, Winton	0	0
A.R. Stanger	Gastor, Peterboro	28	9
M.E. Hartley	" " "		
A.A. Kellaway	" " "		
E.M. Eads	" " "		
H.F. Hedden	Barnack	9	8
A. Windsor	Elphinston	3	0
J. Wilson	St. John's Hospital, Peterboro	18	7
O.I. Homan	" " "		
E. Wignall	" " "		
D.A. Norton	" " "		
H.J. O'Hanlon	" " "		
Total :-		282	297

During the year 1937 282 cases were attended by midwives, and 297 were attended in their capacities as maternity nurses. As there were 792 births in the County in 1937 this means that 249 women were attended by midwives in one or other of the midwife capacities in 1937, while as many as 247 were attended by doctors also assisted or not by women registered in the obstetric art.

During the year five midwives worked at St. John's Hospital and midwife midwifery work in other parts of the County supervised by Nursing Associations. 28 examinations were attended by these ladies. 18 in their capacities as midwives and 7 in their capacities as maternity nurses.

In six months of 1937 (July to December) the six midwives employed by the County Council attended 107 cases in their capacities as midwives, and 48 in their capacities as maternity nurses.

The nurses employed at St John's Hospital attended 7 cases in their capacity as midwives and 3 in their capacity as maternity nurses. The nurses employed by the Voluntary Nursing Associations attended 34 cases as midwives, and 15 as maternity nurses. Midwives in private practice delivered 99 cases in domiciliary practice and 5 in nursing homes. In their capacity as maternity nurses they attended 91 cases in their homes and 40 in nursing homes. Altogether then, out of 710 domiciliary cases 494 were attended by qualified midwives.

### MATERNITY AND NURSING HOMES

Mrs Hart continues to take maternity cases at "Charnwood", London Road, Peterborough. 11 cases were treated during the year. She also receives medical, senile, and mentally defective patients.

Nurse Gray continues to receive maternity and medical cases at her Home at 5, Geneva Street, Peterborough. 42 of the former were in residence during the year.

Miss Warburton accommodates medical, senile, mentally defective, and maternity cases at 73, Lincoln Road, Peterborough. 9 confinements took place in 1937.

A considerable amount of abnormal midwifery finds its way to the Peterborough Memorial Hospital, and 25 such cases were treated in 1937. 13 children were delivered by Caesarean section. Ten confinements took place at the Peterborough Public Assistance Institution. They were attended by midwives.

Altogether then 87 cases were treated in Nursing Homes or Hospitals, as compared with 76 in 1936.

### VACCINATION

#### Summary of Vaccination Officers' Returns.

	<u>Peterboro' District</u>	<u>Barnack District</u>	<u>Eye District.</u>
Number of Births returned in Birth List Sheets 1936.	728	24	83
Successfully Vaccinated	129	4	31
Insusceptible of Vaccination	1	1	0
No: in respect of whom Statutory Declarations received	540	18	47
Died Unvaccinated	31	1	1
Postponement by Medical Certificate	4	0	1
Removed to Other Districts	3	0	0
Removed to places unknown	9	0	1
No: of births remaining on 31st Jan. 1937 neither duly entered in Register nor accounted for in " Report Book"	9	0	2
Total number of certificates and copies of Certificates of Vacc'n of children	145	0	24
No: of statutory declarations of conscientious objection rec'd in 1937	532	9	48

The nurses employed at St John's Hospital attended 7 cases in their capacity as midwives and 3 in their capacity as maternity nurses. The nurses employed by the Voluntary Nursing Associations attended 34 cases as midwives and 18 as maternity nurses. Midwives in private practice delivered 56 cases in domestic practice and 5 in nursing homes. In their capacity as maternity nurses they attended 51 cases in their homes and 40 in nursing homes. Altogether then, out of 710 domiciliary cases 486 were attended by qualified midwives.

MATERNITY AND NURSING HOMES

Mrs Hart continued to take maternity cases at "Charwood", London Road, Peterborough. 11 cases were treated during the year. She also receives medical, mental, and mentally defective patients.

Nurse Gray continues to receive maternity and medical cases at her home at 5, Geneva Street, Peterborough. 42 of the former were in residence during the year.

Miss Warburton accommodates medical, mental, and mentally defective and maternity cases at 78, Lincoln Road, Peterborough. 9 confinements took place in 1937.

A considerable amount of abnormal obstetric cases is referred to the Peterborough Memorial Hospital, and 25 such cases were treated in 1937. 13 children were delivered by Caesarean section. Ten confinements took place at the Peterborough Public Assistance Institution. They were attended by midwives.

Altogether then 87 cases were treated in Nursing Homes or Hospitals as compared with 76 in 1936.

VACCINATION

Summary of Vaccination Officers' Returns

Eye District	Barrow District	Peterborough District	
83	24	725	Number of Births returned in Birth List Books 1936.
31	4	125	Successfully Vaccinated
0	1	1	Incapable of Vaccination
47	18	540	Not in respect of whom Statutory Notifications received
1	1	31	Did not attend
1	0	4	Postponement by Medical Certificate
0	0	3	Removed to Other District
1	0	2	Removed to places unknown
			Not of births remaining on Birth List 1937 neither duly entered in Registrar's Report Book
2	0	2	Not accounted for in "Report Book"
24	0	145	Total number of certificates and copies of Certificates of Vaccination of children

## LABORATORY FACILITIES

The County Medical Officer examined :-

241 samples for tubercle bacilli,  
62 samples for the detection of gonococci, a total of  
303 samples, as compared with 271 in 1936, and 292 in 1935.

The Report of the City Medical Officer for 1937 is not to hand.

Samples from cases of venereal disease and samples for animal inoculation in cases of suspected tuberculosis are sent to the Public Health Laboratory of the University of Manchester.

The Peterborough Memorial Hospital Pathological Department has continued to work during the year, but the number of specimens examined is not stated in the Report.

A new Pathologist has been appointed.

The nett loss on this Department was £487- 4- 10d.

## GENERAL HOSPITAL SERVICES IN THE AREA

These were detailed in full in the Report for 1930.

### The Peterborough & District Memorial Hospital.

The figures in brackets refer to 1936.

During 1937 557 (502) medical cases, 56 (65) ophthalmic cases, and 1,812 (1,920) surgical cases were admitted to the wards - a total of 2,425. 101 of the surgical cases died, and 98 of the medical cases. 2,566 operations were performed, 1,083 being major and 1,483 minor.

Of interest to County Councils are 7 operations for cataract, and 2 for the needling of cataract; 11 operations for the removal of the breast are noted. 13 children were born by Caesarean section, and 21 operations for removal of the womb were performed. 124 operations for rupture are mentioned, of which 122 were cured, and 2 died. 159 operations for appendicitis were performed. 151 recovered and 8 died.

553 patients received ophthalmic treatment in the out-patient department, and 937 in the ear, nose and throat department.

432 operations on enlarged tonsils and adenoids were performed.

In 239 of these the tonsils were removed by the guillotine and in 193 the tonsils were dissected.

200 fractures were treated in the out-patient department.

174 manipulations and fixation of fractures were performed.

361 patients were treated in the dental department.

The continued appreciation of the work of the Throat, Nose & Ear Department is noteworthy.

### The Stamford, Rutland, and General Infirmary.

66 beds are available in this Institution.

1,273 cases were treated during the year 1937. Medical cases numbered 237, surgical cases 899, and 758 attended the X-ray department.

87 maternity cases were treated in 1937.

In the Fever Wards only 43 cases were admitted, consisting of 34 cases of scarlet fever and 9 of diphtheria.



LABORATORY FACILITIES

The County Medical Officer examined --

241 samples for infectious diseases  
62 samples for the detection of tuberculosis, a total of  
303 samples, as compared with 271 in 1935, and 202 in 1934.

The Report of the City Medical Officer for 1937 is not to hand.

Samples from cases of venereal diseases and samples for animal  
inoculation in cases of suspected tuberculosis are sent to the Public  
Health Laboratory of the University of Manchester.

The Peterborough Memorial Hospital Pathological Department has  
continued to work during the year, but the number of specimens  
examined is not stated in the Report.

A new Pathologist has been appointed.  
The next test on this Department was 1937-4-104.

GENERAL HOSPITAL SERVICES IN THE AREA

These were detailed in full in the Report for 1935.

The Peterborough & District Memorial Hospital

The figures in brackets refer to 1935.

During 1937 257 (202) medical cases, 56 (55) ophthalmic cases, and  
1,512 (1,230) surgical cases were admitted to the wards - a total of  
2,825. 101 of the surgical cases died, and 28 of the medical cases.  
2,568 operations were performed, 1,083 being major and 1,485 minor.

Of interest to County Councils are 7 operations for cataract, and 2  
for the needling of cataract; 11 operations for the removal of the pro-  
state gland were performed by Coarctation section, and 21 operations  
for removal of the womb were performed. 124 operations for rupture  
of the abdominal wall, of which 122 were cured, and 2 died. 139 operations for  
epididymitis were performed. 151 recovered and 8 died.

253 patients received ophthalmic treatment in the out-patient  
department, and 227 in the ear, nose and throat department.  
432 operations on enlarged tonsils and adenoids were performed.  
In 239 of these the tonsils were removed by the guillotine and in 193  
the tonsils were dissected.

230 fractures were treated in the out-patient department.  
174 manipulations and fixation of fractures were performed.  
281 patients were treated in the dental department.  
The continued operation of the ward of the Chest, Nose & Ear  
Department is noteworthy.

The Stamford, Rutland, and General Infirmary

66 beds are available in this Institution.  
1,728 cases were treated during the year 1937. Medical cases numbered  
287, surgical cases 206, and 235 attended the X-ray department.  
67 maternity cases were treated in 1937.  
In the lever beds only 43 cases were admitted, consisting of 34 cases

821 operations were performed. 161 were on the alimentary tract, 71 on the generative organs of women, and 199 on the ear, nose and throat. 7 tuberculous cases were admitted.

2,176 out-patients attended. 582 patients attended the casualty department. 115 received dental treatment, and 201 were treated by electricity and massage. 111 were treated in the ophthalmic department. 43 school children from the Soke of Peterborough were operated on for enlarged tonsils and adenoids under arrangements made with the County Education Committee.

It is interesting to observe that of £9,196 received, as much as £3,065 came from the Stamford Infirmary Contributory Scheme; £2,227 from contributions of patients, £1,033 from the District Councils for the treatment of infectious diseases, and £260 from Maternal and Child Welfare Authorities.

The following villages in the Soke of Peterborough contributed a total of £215 - 14- 2d :- Ashton, Bainton, Barnack, Thornhaugh, Ufford, Wittering, and Wothorpe.

It should be noted with satisfaction the increasing appreciation of this Hospital, not only by Soke of Peterborough patients, but also by Rutland and Kesteven inhabitants.

Fever cases from the Rural District, ailing children, and maternity cases all find accommodation in its pleasant wards.

Unfortunately the Fever Wards will shortly be closed.

#### The Chronic Sick

The only Institution available is the Peterborough Public Assistance Institution's St John's Hospital.

The County Medical Officer is the Medical Officer and is non-resident. The Assistant Medical Officer is Dr Robertson-Wills.

The County Medical Officer attends to the cases of tuberculosis, while the rest of the work is done by Dr Robertson-Wills.

There is one trained nurse on the staff, and 8 assistant nurses.

Two of the eight possess the Diploma of the Central Midwives Board.

24 beds are provided for men, 28 for women, and 2 for maternity cases. The average number of beds occupied is 48, the highest number is 55, and the lowest 41.

The total number of admissions, including infants born in the Hospital was 212. The number of women confined in Hospital was 10, and the number of infants born alive was 10.

118 were in the hospital for under 4 weeks: 40 for four weeks and under 13 weeks, and 40 for thirteen weeks or more.

No operative work other than artificial pneumothorax induction and refills and aspiration of pleural fluids was performed.

77 cases died, 29 from circulatory disease, 7 from senile decay, and 9 from cancer. 135 individuals were discharged during the year, 18 being children and 117 adults.

851 operations were performed. 151 were on the alimentary tract, 71 on the genitive organs of women, and 122 on the ear, nose and throat. 7 tuberculous cases were admitted. 2,125 out-patients attended. 882 patients attended the casualty department. 115 received dental treatment, and 301 were treated by electricity and massage. 111 were treated in the ophthalmic department. 43 school children from the S.O. of Peterborough were operated on for enlarged tonsils and adenoids under arrangements made with the County Education Committee.

It is interesting to observe that of 42,166 received, as such as 23,082 came from the Stamford Infirmary County Infirmary, 23,227 from contributions of patients, 21,023 from the district Councils for the treatment of infectious diseases, and 4,200 from Hospital and Child Welfare Authorities. The following villages in the S.O. of Peterborough contributed a total of 4,115 - 14-24 - Ashby, Bainton, Barnack, Torrington, Ufford, Wittering, and Wothorpe. It should be noted with satisfaction the increasing appreciation of this Hospital, not only by S.O. of Peterborough patients but also by patients and Eastern residents. Fever cases from the Rural District, along children, and maternity cases all find accommodation in its pleasant wards. Unfortunately the fever wards will shortly be closed.

The Chronic Sick

The only Institution available in the Peterborough Public Assistance Institution's St John's Hospital. The County Medical Officer is the Medical Officer and is non-resident. The Assistant Medical Officer is Dr. Robertson-Willis. The County Medical Officer attends to the cases of tuberculosis, while the rest of the work is done by Dr. Robertson-Willis. There is one trained nurse on the staff, and 8 assistant nurses. Two of the eight possess the Diploma of the General Medical Board. 24 beds are provided for men, 28 for women, and 2 for maternity cases. The average number of beds occupied is 48, the highest number is 55, and the lowest 41. The total number of admissions, including infants born in the hospital was 212. The number of women confined in hospital was 10, and the number of infants born alive was 10. 118 were in the hospital for under 4 weeks; 40 for four weeks and under 12 weeks, and 40 for thirteen weeks or over. No operative work other than appendicitis, proctostomy, lithotomy and cystitis and operation of sigmoiditis was performed. 17 cases died, 29 from alimentary diseases, 7 from venereal disease, and 9 from cancer. 125 individuals were discharged during the year, 18 being children and 117 adults.

## BIRTHS AND BIRTH RATES

The number of live births, and the live birth rates in each district of the County are :-

				1936
City of Peterborough	648	Rate	13.9	( 15.2 )
Peterborough Rural District	118	"	18.7	( 15.7 )
Barnack Rural District	30	"	11.0	( 11.8 )
Administrative County	798	"	14.3	( 15.1 )

The number of births recorded in the County since 1907 are :-

1907 - 908; 1908 - 1000; 1909 - 925; 1910 - 954; 1911 - 884;  
 1912 - 930; 1913 - 942; 1914 - 828; 1915 - 948; 1916 - 966;  
 1917 - 801; 1918 - 800; 1919 - 746; 1920 - 1154; 1921 - 1009;  
 1922 - 872; 1923 - 858; 1924 - 767; 1925 - 777; 1926 - 788;  
 1927 - 792; 1928 - 801; 1929 - 819; 1930 - 830; 1931 - 786;  
 1932 - 738; 1933 - 687; 1934 - 738; 1935 - 760; 1936 - 827;  
 1937 - 798.

There is a slight diminution in the number of births, but with the exception of 1936 it is the highest since 1931. The Barnack Rural District has the lowest and the Peterborough Rural District has the highest rate. In England and Wales as a whole the birth rate was 14.9; for the 125 County Boroughs and Great Towns 14.9; in the 148 smaller towns ( of which Peterborough is one ) 15.3, and in London 13.3. As neither the Report of the Registrar-General or the Chief Medical Officer to the Ministry of Health are to hand, I am unable to state how this County compares with others. Owing to the courtesy of several County Medical Officers, however, I am able to give the birth rates in the following counties :-

Gloucestershire	14.9;	Northamptonshire	14.08;	Surrey	13.7;
Cumberland	16.0;	Leicestershire	14.9 ;	Cheshire	14.2;
West Suffolk	14.1;	East Suffolk	14.4 ;	Berkshire	14.10;
West Riding (Yorks)	15.2;	Holland (Lincs)	17.0 ;	Rutland	14.1.

It will be seen from these figures and from those of the country as a whole that the fall of the birth rate has been slightly checked, and this will be a source of consolation to the British Confectioners Association - a Body who, at their recent Annual Conference, has foretold bankruptcy in their trade if the fall in the birth rate continues.

BIRTHS AND BIRTH RATES

The number of live births, and the live birth rates in each district of the County are :-

District	Rate	1907	1908
City of Peterborough	648	13.9	13.3
Peterborough Rural District	118	13.7	13.7
Barack Rural District	30	11.0	11.8
Administrative County	796	14.3	13.1

The number of births recorded in the County since 1907 are :-

Year	Births	Year	Births
1907	808	1911	884
1908	800	1912	899
1909	825	1913	909
1910	828	1914	942
1911	748	1915	961
1912	757	1916	1000
1913	788	1917	1028
1914	801	1918	1038
1915	810	1919	1052
1916	788	1920	1077
1917	788	1921	1081
1918	788	1922	1087
1919	788	1923	1087
1920	788	1924	1087
1921	788	1925	1087
1922	788	1926	1087
1923	788	1927	1087
1924	788	1928	1087
1925	788	1929	1087
1926	788	1930	1087
1927	788	1931	1087
1928	788	1932	1087
1929	788	1933	1087
1930	788	1934	1087
1931	788	1935	1087
1932	788	1936	1087
1933	788	1937	1087
1934	788	1938	1087
1935	788	1939	1087
1936	788	1940	1087
1937	788	1941	1087
1938	788	1942	1087
1939	788	1943	1087
1940	788	1944	1087
1941	788	1945	1087
1942	788	1946	1087
1943	788	1947	1087
1944	788	1948	1087
1945	788	1949	1087
1946	788	1950	1087
1947	788	1951	1087
1948	788	1952	1087
1949	788	1953	1087
1950	788	1954	1087
1951	788	1955	1087
1952	788	1956	1087
1953	788	1957	1087
1954	788	1958	1087
1955	788	1959	1087
1956	788	1960	1087
1957	788	1961	1087
1958	788	1962	1087
1959	788	1963	1087
1960	788	1964	1087
1961	788	1965	1087
1962	788	1966	1087
1963	788	1967	1087
1964	788	1968	1087
1965	788	1969	1087
1966	788	1970	1087
1967	788	1971	1087
1968	788	1972	1087
1969	788	1973	1087
1970	788	1974	1087
1971	788	1975	1087
1972	788	1976	1087
1973	788	1977	1087
1974	788	1978	1087
1975	788	1979	1087
1976	788	1980	1087
1977	788	1981	1087
1978	788	1982	1087
1979	788	1983	1087
1980	788	1984	1087
1981	788	1985	1087
1982	788	1986	1087
1983	788	1987	1087
1984	788	1988	1087
1985	788	1989	1087
1986	788	1990	1087
1987	788	1991	1087
1988	788	1992	1087
1989	788	1993	1087
1990	788	1994	1087
1991	788	1995	1087
1992	788	1996	1087
1993	788	1997	1087
1994	788	1998	1087
1995	788	1999	1087
1996	788	2000	1087

There is a slight distinction in the number of births, but with the exception of 1936 it is the highest since 1931. The Barack Rural District has the lowest and the Peterborough Rural District has the highest rate. In England and Wales as a whole the birth rate was 14.9; for the 128 County Boroughs and Great Towns 14.0; in the 145 smaller towns (of which Peterborough is one) 13.3, and in London 13.3. As neither the report of the Registrar-General or the Civil Medical Officer to the Ministry of Health are to hand, I am unable to state how this County compares with others. Owing to the courtesy of several County Medical Officers, however, I am able to give the birth rates in the following counties :-

Gloucestershire	14.0	Northamptonshire	14.0
Cumberland	13.0	Leicestershire	14.0
West Suffolk	14.1	East Suffolk	14.4
West Riding (York)	13.5	Holland (Lincoln)	17.0
Nottinghamshire	14.0	Derby	13.7
West Yorkshire	14.1	Cheshire	14.3
West Midlands	14.1	Staffordshire	14.3
West Lancashire	14.1	Nottingham	14.1

It will be seen from these figures that from some of the counties as a whole that the fall of the birth rate has been slightly checked, and this will be a source of consolation to the British Conference Association - a body who, at their recent Annual Conference, had forecasted bankruptcy in their trade. It is to be hoped that the

Ratepayers have also expressed their concern, pointing out that per capita payment has risen from 19/1d per head in 1884-1885 to £4- 6- 3d per head in 1937-38. The expenditure on education, housing, police, and highways has not reached its height. If the population continues to drop and the various social services continue, the per capita burden will be high. The Education Rate has increased from 2/11d to 38/-, but the Government grant has decreased owing to the fall in the birth rate. In 15 years time the number of children will have decreased by a million, but new schools are still being erected which, according to some, will not be required. There is, however, no doubt that education will <sup>be</sup> extended to middle age or even beyond, as the earnest educationalist will be fully occupied in unteaching what he taught 10 years before. I am thinking especially of medicine, but no doubt similar remarks apply to the other professions.

Sir Francis Fremantle deplores the prospect of a decrease of population from 40 millions to 4 millions. Why? he does not explain. There is, I should imagine, no question that at the time of Queen Elizabeth the contribution of this country to the happiness of subsequent generations had reached a level never since excelled, but the population of this country was then under 5 millions.

The population of the Athenian Empire at its zenith of attainment was about a quarter of a million. In Germany, where the menace of war is a constant question, a great endeavour has been made to raise the birth rate to its pre-war level. In 1933 the number of births was 971,000; in 1937 it is returned as 1,275,000. Every young woman who marries and retires from work gets a grant of £80, and already 925,445 of these dowry loans have been granted. On the birth of the first child the amount to be repaid is reduced, and if 4 children are born within 10 years no money need be returned on the £80 lent.

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Parliament have also expressed their concern, pointing out that per capita payment has risen from 1971 per head to 1985 to 24-6-34 per head in 1987-88. The expenditure on education, housing, police, and highways has not reached the height. If the population continues to drop and the various social services continue, the per capita burden will be high. The Education Rate has increased from 2/11d to 36/-, but the Government grant has decreased owing to the fall in the birth rate. In 15 years time the number of children will have decreased by a million, but new schools are still being created which, according to some, will not be required. There is, however, no doubt that education will be extended to middle age or even beyond, as the current educationalist will be fully occupied in unteaching what he taught 10 years before. I am thinking especially of medicine, but no doubt similar remarks apply to the other professions.

Sir Francis Pym's speech deplores the prospect of a decrease of population from 40 million to 4 million. Why? He does not explain. There is, I should imagine, no question that at the time of Queen Elizabeth the contribution of this country to the happiness of subsequent generations had reached a level never since exceeded, but the population of this country was then under 3 million.

The population of the Athenian Empire at its zenith of attainment was about a quarter of a million. In Germany, where the sense of war is a constant question, a great endeavour has been made to raise the birth rate to its pre-war level. In 1933 the number of births was 271,000; in 1937 it is estimated at 1,737,000. Every young woman who marries and retires from work gets a grant of 130, and already 322,448 of these heavy loans have been granted. On the birth of the first child the amount to be repaid is reduced, and if 4 children are born within 10 years no money need be repaid on the 100,000.

The middle classes are also encouraged. If the parents earn less than £640 a year they can claim a bonus of 16/- a month for the third child, and 32/- a month for the fourth. On the other hand the selfish batchelor who refuses to aid in increasing the population is severely taxed. A single man with £250 a year pays £36 a year; his married brother only £17. If the batchelor has £800 a year he pays £160, as compared with a married man's contribution of £100, yet in spite of this the number of births has not reached the pre-war figure of 1,800,000.

During the year 32 stillbirths were notified - compared with 28 in 1936. 25 of these occurred in the City of Peterborough, 5 in the Peterborough Rural District, and 2 in the Barnack Rural District. Three of the 32 stillbirths occurred among illegitimate children - 2 in the City, and 1 in the Peterborough Rural District.

The number and rates of stillbirths per 1000 total births for each area of the County are :-

				1936
City of Peterborough	25	Rate	37.1	( 31.5 )
Peterborough Rural District	5	"	40.6	( 40.8 )
Barnack Rural District	2	"	62.5	( 64.5 )
Administrative County	32	"	47.4	( 33.8 )

Per 1000 of the population this is 0.67. The Barnack Rural District has the highest and the City of Peterborough the lowest still birth rate. In England and Wales the stillbirth rate was .60; for the 125 County Boroughs and Great Towns .67; for the 148 smaller towns .64; and for London .54. In Holland (Lincs) it was  $\sqrt{34}$  per 1000 total births: in Cumberland  $\sqrt{34}$ ; in Gloucestershire 42.5; in Cheshire 45.9; in Leicestershire 36.5; in Northamptonshire  $\sqrt{34}$ , and in West Suffolk 34.8. It will be seen therefore that the stillbirth rate in your County is considerably higher than in other areas.

During the year 726 of the 798 live and still births were notified to the County Medical Officer.



The middle classes are also encouraged. If the parents earn less than £340 a year they can claim a bonus of 10/- a month for the third child and 8/- a month for the fourth. On the other hand the working class who returns to aid in increasing the population is heavily taxed. A single man with £250 a year pays £20 a year his married brother only £12. If the father has £300 a year he pays £100 as compared with a married man's contribution of £100, yet in spite of this the number of births has not reached the pre-war figure of 1,800,000.

During the year 32 stillbirths were notified - compared with 28 in 1938. 26 of these occurred in the City of Peterborough, 5 in the Peterborough Rural District, and 1 in the Barnack Rural District. Three of the 32 stillbirths occurred among illegitimate children - 2 in the City and 1 in the Peterborough Rural District.

The number and rates of stillbirths per 1000 total births for each area of the County are:

Area	Rate	1938
City of Peterborough	37.1	( 31.5 )
Peterborough Rural District	40.8	( 40.8 )
Barnack Rural District	62.8	( 62.8 )
Administrative County	47.4	( 38.8 )

Per 1000 of the population this is 0.67. The Barnack Rural District has the highest and the City of Peterborough the lowest stillbirth rate in England and Wales the stillbirth rate was 60; for the 155 County Boroughs and Great Towns 47; for the 148 smaller towns 64; and for London 64. In Holland (1938) it was 64 per 1000 total births; in Cumberland 34; in Gloucestershire 4.5; in Glamorgan 45.9; in Lancashire 32.8; in Northamptonshire 34, and in West Yorkshire 34.5. It will be seen therefore that the stillbirth rate in your County is considerably higher than in other areas.

During the year 29 of the 78 live and stillbirths were notified to the County Medical Officer.

Forty children were born out of wedlock, an increase of 8 on last year's figure of 32. 30 of the 40 illegitimate births occurred in the City of Peterborough, 9 in the Peterborough Rural District, and 1 in the Barnack area.

The number and percentage of illegitimate births in the County since 1912 are as follows :-

1912 - 59	Rate 6.5;	1913 - 64	Rate 6.7;	1914 - 49	Rate 5.9;
1915 - 34	" 3.6;	1916 - 51	" 5.2;	1917 - 57	" 7.1;
1918 - 64	" 8.0;	1919 - 55	" 7.3;	1920 - 93	" 8.0;
1921 - 43	" 4.2;	1922 - 34	" 4.1;	1923 - 34	" 3.9;
1924 - 40	" 5.2;	1925 - 34	" 4.2;	1926 - 43	" 5.4;
1927 - 46	" 5.8;	1928 - 40	" 4.9;	1929 - 38	" 4.5;
1930 - 31	" 3.7;	1932 - 42	" 5.6;	1933 - 48	" 6.9;
1934 - 37	" 5.2;	1935 - 40	" 5.2;	1936 - 32	" 3.8;
1937 - 40	" 5.2.				

In Holland (Lincs) the percentage illegitimate birth rate to total births is 4.8; in Cumberland 6.2; in Northamptonshire 3.6; in Cheshire 2.8; in West Suffolk 4.0, and in East Suffolk 4.5. Our illegitimate birth rate per 1000 of the population is 0.71, as compared with 0.64 for England and Wales in 1936.

#### DEATHS AND DEATH RATES

There were 697 deaths in the County during the year 1937.

This is an increase of 78 on last year's figure of 619. The crude death rate is 12.4, but if allowance is made for age and sex the death rate is 10.9. The number of deaths and the death rates in each division of the County are as follows :-

City of Peterborough	600	Crude Rate	12.8;	Correcting Rate	11.5;
Peterborough R.D.	66	" "	10.5;	" "	8.8;
Barnack R.D.	31	" "	12.3;	" "	11.0;
Administrative County	697	" "	12.4;	" "	10.9.

The City of Peterborough has the highest rate, and the Peterborough Rural District the lowest. In England and Wales as a whole the death rate was 12.4 ( 12.7); in the 125 County Boroughs 12.5 ( 12.3) in the 148 smaller towns 11.9 ( 11.5), and in London 12.3 ( 12.5 ).

Last year's figures are given in brackets.

This year the number of births exceeds the number of deaths by 99.

Forty children were born out of wedlock, an increase of 8 on last year. There were 30 illegitimate births in the City of Peterborough, 9 in the Peterborough Rural District, and 1 in the Barnack area.

The number and percentage of illegitimate births in the County since 1915 are as follows:-

Year	Number	Percentage
1915	40	5.8
1916	37	5.3
1917	42	6.0
1918	48	6.9
1919	40	5.8
1920	45	6.5
1921	43	6.2
1922	44	6.3
1923	42	6.0
1924	40	5.8
1925	40	5.8
1926	40	5.8
1927	40	5.8

In Holland (lines) the percentage illegitimate birth rate was 4.8; in Cambridgeshire 5.2; in Northamptonshire 5.6; in Cheshire 5.8; in West Suffolk 4.0, and in East Suffolk 4.5. Our illegitimate birth rate per 1000 of the population is 6.7, as compared with 6.64 for England and Wales in 1926.

DEATHS AND DEATH RATES

There were 697 deaths in the County during the year 1927. This is an increase of 78 on last year's figure of 619. The crude death rate is 12.4, but if allowance is made for age and sex the death rate is 10.9. The number of deaths and the death rates in each division of the County are as follows:-

Division	Number of Deaths	Crude Rate	Corrected Rate
City of Peterborough	600	12.8	11.5
Peterborough R.D.	69	10.8	8.8
Barnack R.D.	81	10.8	11.0
Administrative County	697	12.4	10.9

The City of Peterborough has the highest rate, and the Peterborough Rural District the lowest. In England and Wales as a whole the death rate was 12.4 (12.7) in the 1926 County Boroughs (12.8) in the 128 smaller towns (11.6) and in London (12.8) (12.5). Last year's figures are given in brackets. This year the number of births exceeds the number of deaths by 67.

The crude death rates in other counties are as follows :-

Leicestershire	11.89;	Surrey	10.04;	Cumberland	14.4;
Northamptonshire	12.2 ;	Cheshire	12.2 ;	West Suffolk	13.6;
East Suffolk	13.01;	Rutland	14.3 ;	Holland -Lincs	10.9.

The distribution of the 697 deaths in age periods is as follows :-

<u>Age Period</u>	<u>Number 1937.</u>	<u>( 1936 )</u>
0 - 1 years	51	46
1 - 2 "	6	8
2 - 5 "	5	4
5 - 15 "	16	9
15 - 25 "	23	17
25 - 35 "	32	26
35 - 45 "	40	30
45 - 55 "	60	49
55 - 65 "	106	98
65 - 75 "	149	138
75 years and over	209	194

There has been an increase of 5 in the number of infants dying under the age of 1 year; a decrease of 2 in the deaths of children under 2 years of age, an increase of 1 in the deaths of children under 5, and an increase of 7 in the deaths of children between 5 and 15 years. There were no deaths of persons who had reached the age of 100 years, but there were 7 deaths of persons over the age of 90. 5 of these were women, one of whom died at the age of 96 from heart failure, another died at the age of 95 from fracture of the thigh, another from heart failure, and the fourth and fifth from senility. The two men died from bronchitis.

The Chief causes of the deaths were :-

	<u>1937</u>	<u>1936</u>
Heart Disease	164	142
Cancer	88	79
Cerebral Haemorrhage	46	38
Other Circulatory Diseases	32	30
Congenital Debility	31	30
Bronchitis	28	30
Pneumonia	19	20
Nephritis	29	19
Pulmonary Tuberculosis	31	21
Diabetes	14	17
Senility	26	32
Influenza	22	10
Deaths in Childbirth	2	5
Suicide	8	5
Deaths from Violence	34	28
Syphilis	3	-
Other Defined Diseases	51	61

The crude death rates in other countries are as follows :-

14.4	10.04	11.82	13.01
18.6	12.2	12.2	13.01
19.2	14.3	13.01	13.01

The distribution of the GWT deaths in age periods is as follows :-

Age Period	Number 1937	( 1936 )
0 - 1 years	51	48
" 2 - 3	6	8
" 4 - 5	5	4
" 6 - 7	16	2
" 8 - 9	28	17
" 10 - 11	32	25
" 12 - 13	40	30
" 14 - 15	60	45
" 16 - 17	109	88
" 18 - 19	149	138
20 years and over	309	194

There has been an increase of 5 in the number of infants dying under the age of 1 year; a decrease of 2 in the deaths of children under 2 years of age, an increase of 1 in the deaths of children under 5, and an increase of 7 in the deaths of children between 5 and 15 years. There were no deaths of persons who had reached the age of 100 years, but there were 7 deaths of persons over the age of 90. 5 of these were women, one of whom died at the age of 98 from heart failure, another died at the age of 95 from fracture of the thigh, another from heart failure, and the fourth and fifth from senility. The two men died from bronchitis.

The Chief causes of the deaths were :-

1937	1936	
164	142	Heart Disease
68	72	Cancer
45	38	Cerebral Haemorrhage
37	80	Other Circulatory Diseases
31	30	Congenital Defects
28	30	Bronchitis
19	20	Pneumonia
20	19	Hepatitis
31	21	Lung Cancer
14	17	Diabetes
29	32	Senility
22	10	Influenza
2	5	Deaths in Childbirth
6	5	Suicide
34	28	Deaths from Violence
3	-	Septic

Here, as in England and Wales as a whole, heart disease heads the list, followed by cancer, and then by other defined diseases. Cerebral Haemorrhage is fourth, followed closely by senility, other circulatory diseases, congenital debility, and bronchitis. There were 19 deaths from pneumonia, and 31 from tuberculosis of the lungs. There were 22 deaths from influenza, 8 from suicide, 34 from violence, 29 from acute and chronic nephritis, and 14 from diabetes. 136 of the deaths from heart disease occurred in the City of Peterboro', 67 being males and 69 females; 19 in the Peterborough Rural District, 8 being males and 11 females, and 9 in the Barnack area, 3 being males and 6 females. 67 of these 164 deaths occurred in persons over 75 years of age; 57 in persons over 65; 21 in persons over 55; 14 in persons over 45; 3 in persons over 35; 1 in a person over 25, and 1 in a boy aged 9 from rheumatic endocarditis.

The majority of these deaths are assigned to myocarditis or failure of the heart muscle, and in looking over the death certificates I notice that in a few the valves of the heart are mentioned. In 16 instances it was the mitral valve, in 6 the aortic valve, in 4 " valvular disease" is the term used, and in one both mitral and aortic valves were involved. In one of the cases attributed to aortic disease and rheumatism, syphilis was certainly present, as the patient had been under my care with ulceration of the palate for some time prior to his death. One person died from ulcerative endocarditis. There were two deaths from congenital heart disease.

The now fashionable diagnosis of coronary thrombosis, or plugging of the vessels supplying the heart, was the cause of death in 12 persons. Cancer accounts for 88 deaths, giving a rate of 1.5 per 1000 of the population, as compared with 1.2 in 1936 and 1.3 in 1935.

The number of deaths in each year in the County since 1904 are :-

There, as in England and Wales as a whole, heart disease leads the list, followed by cancer, and then by other defined diseases. General haemorrhage is fourth, followed closely by senility, other circulatory diseases, congenital debility, and bronchitis. There were 19 deaths from pneumonia, and 21 from tuberculosis of the lungs. There were 22 deaths from influenza, 5 from cholera, 24 from violence, 29 from acute and chronic nephritis, and 14 from diabetes. 136 of the deaths from heart disease occurred in the City of Peterborough, 67 being males and 69 females; 19 in the Peterborough Rural District, 8 being males and 11 females, and 9 in the Barnack area, 5 being males and 4 females. 67 of these 136 deaths occurred in persons over 75 years of age; 57 in persons over 65; 21 in persons over 55; 14 in persons over 45; 3 in persons over 35; 1 in a person over 25, and 1 in a boy aged 9 from rheumatic endocarditis. The majority of these deaths are assigned to myocarditis or failure of the heart muscle, and in looking over the death certificates I note that in a few the valves of the heart are mentioned. In 16 instances it was the mitral valve, in 8 the aortic valve, in 4 "valvular disease" is the term used, and in one both mitral and aortic valves were involved. In one of the cases attributed to aortic disease and rheumatism, syphilis was certainly present, as the patient had been under my care with ulceration of the palate for some time prior to his death. One person died from ulcerative endocarditis. There were two deaths from congenital heart disease. The new fashionable diagnosis of coronary thrombosis, or plugging of the vessels supplying the heart, was the cause of death in 15 persons. Census accounts for 66 deaths, giving a rate of 1.5 per 1000 of the population, as compared with 1.2 in 1930 and 1.3 in 1931. The number of deaths in each year in the County since 1904 is as follows:

1904 - 37; 1905 - 58; 1906 - 60; 1907 - 45; 1908 - 46; 1909 - 66;  
1910 - 59; 1911 - 56; 1912 - 64; 1913 - 58; 1914 - 49; 1915 - 76;  
1916 - 60; 1917 - 54; 1918 - 75; 1919 - 68; 1920 - 69; 1921 - 70;  
1922 - 82; 1923 - 78; 1924 - 69; 1925 - 49; 1926 - 99; 1927 - 85;  
1928 - 82; 1929 - 103; 1930 - 81; 1931 - 92; 1932 - 79; 1933 - 110;  
1934 - 90; 1935 - 72; 1936 - 79; 1937 - 88.

This is a slight increase on last year's figure of 79.

Thirty-six of the 88 deaths occurred in males, and 52 in females.

22 of the deaths occurred in persons over 75; 21 in persons over 65;

30 in persons over 55; 8 in persons over 45; 5 in persons over 35;

1 in a person over 25; 1 in a girl between 5 and 15 years.

Seventy-seven of the 88 deaths occurred in the City of Peterborough,

5 in the Peterborough Rural District, and 6 in the Barnack area.

The death rate in the City is 1.8 per 1000; in the Rural District of

Peterborough .79, and in the Barnack Rural District 2.3.

During the year the notification of all deaths has been sent to me.

On looking carefully through the death register, I find not 88 deaths

but 93 in which cancer is mentioned. 13 affected the stomach, 2 the

tongue, 3 the gullet, 2 the pancreas, 4 the liver, 2 the caecum,

21 the colon, 2 the rectum, 1 was described as affecting the abdomen,

4 the ovary, 1 the prostate, 9 the uterus, 9 the female breast, 4 the

lung, 2 the pharynx, 2 the nose, 2 the face, 1 the palate, 1 the lip,

1 the parotid gland, 1 the eye, and in one the locality was not stated.

There are certain points to which attention should be drawn.

In 49 of the 88 the alimentary tract from the tongue to the back

passage was affected. Another point of interest is the large number

of cases affecting the reproductive system - 9 affecting the womb,

4 the ovary, and 9 the female breast. Four cases affected the lungs.

These cases of malignant disease of the lungs come to my notice in my

capacity as Tuberculosis Officer. Three were sent to London for deep

X-ray treatment. One is still alive, but the growth appears to have

recurred; the others have died.



1904 - 90	1903 - 79	1902 - 68	1901 - 57	1900 - 46	1899 - 35
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1904 - 90	1903 - 79	1902 - 68	1901 - 57	1900 - 46	1899 - 35
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These cases of malignant disease of the lungs came to my notice in my

capacity as Tuberculous Officer. Three were sent to London for deep

X-ray treatment. One is still alive, but the growth appears to have

recurred; the others have died.

Treatment of cancer appears to me to be the most important task to be undertaken by local authorities.

I have examined the reports of other County Medical Officers and find that in Cumberland with 309 deaths from cancer 14 cases were dealt with by the County Council, 9 being sent to the Manchester Radium Institute and 5 to Edinburgh for deep X-ray treatment. In Cheshire with 1,158 deaths from cancer and a rate of 1.6, radium and operative treatment is provided in the Cheshire County Hospital. Some patients are sent to Manchester and £4- 4- 0 a week is paid for them, and if deep X-ray therapy is adopted £10- 10- 0 a case. Other patients were sent to Chester Royal Infirmary, where 8/- per day is paid for in-patient and 2/- a day for out-patient treatment. The charge for radium varies from £1- 1- 0 to £12- 12- 0. In the West Riding of Yorkshire with 2,417 deaths from cancer and a mortality rate of 1.6, 43 patients were treated in hospitals at a charge of 12/6d a day. 16 of these paid a small contribution. In Gloucestershire a fee of £1 per week is paid for patients undergoing radium treatment at Bristol. In West Suffolk the County Council pays the West Suffolk Hospital 7/6d a day. If patients require radium treatment they are transferred to a London Hospital. The Holland (Lincs) County Council with the very high mortality rate of 1.9 per 1000 is negotiating with Lindsey County Council as to a full scheme. The County Councils of Berkshire, Northamptonshire, East Suffolk and Leicestershire do not apparently take an active part in the campaign against cancer. Since my last Report, therefore, there is definite evidence that local authorities are realizing that with a yearly ageing of the population more and more cancer is to be expected. In the recently issued Report of the Ministry of Health it is stated that not more than 20 per cent of all cases come under the care of local authorities, most of them in such an advanced stage of the disease that little treatment is possible.

Treatment of cancer appears to me to be the most important task to be undertaken by local authorities.

I have examined the reports of other County Medical Officers and find that in Cumberland with 306 deaths from cancer 14 cases were dealt with by the County Council, 2 being sent to the Manchester Radium Institute and 2 to Edinburg for deep X-ray treatment. In Cheshire with 1,156 deaths from cancer and a rate of 1.6, radium and operative treatment is provided in the Cheshire County Hospital. Some patients are sent to Manchester and £4-4-0 a week is paid for them, and 11 deep X-ray therapy is adopted £10-10-0 a case. Other patients were sent to Chester Royal Infirmary, where 8/- per day is paid for in-patient and 2 a day for out-patient treatment. The charge for radium varies from £1-1-0 to £12-12-0. In the West Riding of Yorkshire with 2,417 deaths from cancer and a mortality rate of 1.6, 43 patients were treated in hospitals at a charge of 12/6d a day. 16 of these paid a small contribution. In Gloucestershire a fee of £1 per week is paid for patients undergoing radium treatment at Bristol. In West Suffolk the County Council pays the West Suffolk Hospital 1/6d a day. 17 patients require radium treatment they are transferred to a London Hospital.

The Holland (Lincs) County Council with the very high mortality rate of 1.8 per 1000 is negotiating with Lindsey County Council as to a full scheme. The County Councils of Berkshire, Northamptonshire, East Suffolk and Lancashire do not apparently take an active part in the campaign against cancer. Since my last Report, therefore, there is definite evidence that local authorities are realising that with a yearly victim of the population type and such a case it to be expected in the recently issued Report of the Ministry of Health it is stated that not more than 20 per cent of all cases come under the care of local authorities, most of them in such an advanced stage of the disease that

Presumably these 20 per cent are inmates of the once known Poor Law Infirmaries. The Radium Commission expressed the view that there is no possibility of a comprehensive and efficient treatment service being provided except as part of a national policy.

Certain interesting facts have again come to light as regards the geographical distribution of the disease. A high mortality of cancer of the tongue is shown in Northumberland, Durham, Cumberland, and Lancashire, contrasting with a low mortality in North West Wales, Shropshire, Worcestershire, and the West Riding of Yorkshire.

The geographical distribution of cancer of the tongue bears no resemblance to that of cancer of the gullet, nor to that of the stomach.

The geographical distribution of cancer of the larynx resembles that of cancer of the lung. A high mortality is shown in the Thames Valley, Hertfordshire, and Warwickshire. There is a similarity in the mortality incidence of cancer of the larynx, lung, and oesophagus.

The mortality rate of cancer of the bladder is high in the South East of England, and low in Wales and North and West of England. It is suggested that there is a relationship between the amount of rainfall and the distribution of cancer of the bladder. In the South East of England the rainfall is low. A similar distribution has been known for years to pertain as regards stone in the bladder. Where there is a high rainfall there is little calculus, for the skin acts less and the kidneys more, consequently the urine is more concentrated in districts where the rainfall is low.

As regards treatment, it appears that more and more patients are relying on radium. In eleven institutions mentioned in the Report of the Medical Research Council 5,452 cases, or 29.5 per cent, were treated by surgery alone, as compared with 7,355 cases, or 39.8 per cent, treated by radium alone. Radium treatment of cancer of the neck of the womb now gives a survival period of 5 years in 36.4 per cent of the cases.

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 part of the world now gives a survival period of 5 years in 35.4 per cent  
 of the cases.

Surgery still remains the main form of treatment in cancer of the body of the womb. Encouraging results are now being obtained in sarcoma of bone by means of 4 g. radium bomb and X-radiation given in combination.

Bronchitis accounts for 28 deaths, 10 being males and 18 females. One occurred in a child under 2 years of age; 18 in persons over 75; 4 in persons over 65; 2 in persons over 55; 1 in a person over 45; and 1 in a woman between 25 and 35 years of age.

Pneumonia levies a tribute of 20 lives, 10 being males and 10 females. 3 of the deaths occurred in persons over 75; 3 in persons over 65; 2 in persons over 55; 1 in a person over 45; 1 in a person over 35; 3 in persons over 25; 2 in persons over 15; 2 in persons over 5, and 3 in children between 1 and 5 years of age. These figures contrast markedly with those of bronchitis, in which most of the deaths occur in elderly persons. Only 6 of the 20 deaths from pneumonia occurred in elderly persons. It is therefore fortunate that in the newer compounds of the sulphonamide pyridine group we have what appears to be a cure for this disease.

Twenty-two persons died from influenza, double the number of the previous year. Two of these occurred in infants under 1 year of age; 4 in persons over 75, and 6 in persons over 65.

There were 14 deaths from diabetes; 11 of these occurred in the City of Peterborough, and 3 in the Peterborough Rural District. Two occurred in women over 75; 5 in persons over 65 ( 4 women and 1 man); 4 in persons over 55 ( 1 man and 3 women); 2 in persons over 45 ( 1 man and 1 woman); and 1 in a man aged 30. In 4 of these death was associated with gangrene. There was only one death from cirrhosis of the liver in a female of 34 years of age. There was one death from chronic alcoholism in a woman aged 79.

Violence, apart from suicide, accounts for 34 deaths, 30 being assigned to the City of Peterborough, 2 to the Peterborough Rural District, and 2 to the Barnack Rural District.

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Violence, apart from suicides, accounts for 34 deaths, 30 being assigned  
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Two of the deaths occurred in infants under 1 year of age; 4 in persons over 75; 5 in persons over 65; and 1 in a man of the age period 55-65 years. The others occurred in young persons or those in the prime of life. On looking at the death certificates I find that 21 deaths in Peterborough were caused by motor accidents. 11 of these deaths occurred in residents of this County. Two of these deaths were due to a motor overturning into the Forty-foot drain; death was due to drowning. Three of the 11 motor deaths occurred in Peterborough children aged 13, 14, and 15 years. An unusual death from violence occurred in a man aged 41 whose heart was ruptured during the erection of a refrigerator. Six deaths occurred among elderly persons, the oldest of these being 95 years old. One child of 6 injured her knee and died from tetanus or lockjaw in the City Sanatorium or Isolation Hospital. Burns and scalds accounted for 4 deaths, 2 in women aged 32 and 36 years, and 2 in children under 2 years of age. Two infants aged 4 months and 5 months respectively died from suffocation, one while in a separate cot, and the other in the parents' bed.

Among accidental deaths should be mentioned two deaths from peritonitis due in one case to swallowing a plum stone in a resident of Whittlesey, the second by swallowing a rabbit bone by a Peterborough resident. Overdoses of sleeping draughts were the cause of death in a man of 35, and in a woman of 69.

According to the Registrar-General there were only two deaths in childbirth, one from puerperal sepsis at the age of 27, and the other from eclampsia or kidney disease at the age of 37. This gives a satisfactory maternal mortality rate per 1000 live births of 2.5, as compared with 3.23 for England and Wales as a whole.

On looking through the registers of deaths, I find that two other women died either in childbirth or during pregnancy, one from pneumonia and influenza at the age of 21, and the other from broncho-pneumonia and the toxæmia of pregnancy at the age of 33.



Two of the deaths occurred in infants under 1 year of age; 4 in persons over 75; 5 in persons over 65; and 1 in a man of the age period 55-65 years. The others occurred in young persons or those in the prime of life. On looking at the death certificates I find that 21 deaths in Peterborough were caused by motor accidents. 11 of these deaths occurred in residents of this County. Two of these deaths were due to a motor overturning into the Forty-foot drain; death was due to drowning. Three of the 11 motor deaths occurred in Peterborough children aged 13, 14 and 15 years. An unusual death from violence occurred in a man aged 41 whose heart was ruptured during the erection of a refrigerator. Six deaths occurred among elderly persons, the oldest of these being 95 years old. One child of 6 injured her knee and died from tetanus or lockjaw in the City Sanatorium or isolation Hospital. Burns and scalds accounted for 4 deaths, 3 in women aged 32 and 38 years, and 2 in children under 5 years of age. Two infants aged 4 months and 5 months respectively died from suffocation, one while in a separate cot, and the other in the parents' bed. Among accidental deaths should be mentioned two deaths from peritonitis due in one case to swallowing a plum stone in a resident of Whitby, the second by swallowing a rabbit bone by a Peterborough resident. Overdose of sleeping draughts were the cause of death in a man of 35, and in a woman of 69. According to the Registrar-General there were only two deaths in childbirth, one from puerperal sepsis of the age of 27, and the other from eclampsia or kidney disease at the age of 27. This class is satisfactory maternal mortality rate for 1905 five deaths of 2.5, as compared with 8.23 for England and Wales as a whole. On looking through the registers of deaths, I find that 1 and other women died either in childbirth or during pregnancy, one from pneumonia and influenza at the age of 31, and the other from pneumonia at the age of 23.

Presumably these deaths were ascribed to pneumonia by the Registrar-General. This gives a total of 4 deaths - a maternal mortality figure of 5.0 per 1000 live births. All these 4 deaths occurred in the City of Peterborough, where the services of an ante-natal Consultant are available. In addition to these 4 cases of Soke of Peterborough residents 3 women died in the Peterborough Memorial Hospital from the following causes :- eclampsia, puerperal fever, and haemorrhage. They were residents of Yaxley, Whittlesey, and Alwalton ( Hunts). The following maternal mortality rates are culled from the reports of other County Medical Officers :-

West Riding ( Yorks)	3.92;	Surrey	3.23	East Suffolk	2.61;
Northamptonshire	2.17;	Cheshire	3.4	Berkshire	3.7 ;
Leicestershire	3.01;	Cumberland	1.23;	West Suffolk	1.98;
Gloucestershire	2.54;	Holland	2.9;		

The figure for Cumberland with only 4 deaths is noteworthy, but a warning note is made by the County Medical Officer which is especially applicable to the Soke of Peterborough. He says :-

" The classification of a death as maternal or otherwise is not always easy and is a matter for the expert medical statistician. Pregnancy and labour may often be complicated by other circumstances which of themselves might have led to a fatal result. Pregnancy may be complicated with tuberculosis in an advanced stage and tuberculosis may be the obvious cause of death, even though death may coincide more or less with the confinement of the patient."

He adds that from his own local knowledge he thinks that 5 deaths were due to pregnancy or labour and that two more were debatable.

His experience therefore is exactly similar to mine.

The Peterborough Memorial Hospital is now considering the erection of a maternity block. It is obvious that this hospital serves an area far more extensive than this County. There is, I think, evidence that the services of a medical man giving special attention to obstetrics and the diseases of women would be appreciated.

Whether such an appointment could be made from medical men resident in the area or from London or other large centre is a matter for careful consideration.

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 Alston (Hunts). The following maternal mortality rates are  
 compiled from the reports of other County Medical Officers -

West Riding (York)	3.22	Corby	8.23	East Suffolk	0.4
Northamptonshire	5.17	Claxton	5.4	Northampton	0.1
Leicestershire	3.01	Cambridgeshire	1.25	West Suffolk	1.1
Gloucestershire	2.54	Holland	2.21		

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Four deaths occurred from appendicitis, all in the City of Peterborough. Two occurred in adults between the ages of 25 and 35 years; one in a man between 35 and 45, and the last in a man between 55 and 65 years.

Five deaths occurred from syphilis according to the Registrar-General. Accordingly I have carefully scrutinized the death returns and find only four deaths. One occurred in a woman aged 33 at Rauceby Mental Hospital from general paralysis of the insane. She had never been under my care. Another occurred in the same Institution from cerebral syphilis. He had congenital syphilis and for some 8 years had been under my care, having repeated courses of "606" and Bismuth.

A third case had not been treated by me. His death was due to a syphilitic ulcer of the leg and sepsis. The fourth died from locomotor ataxia at the age of 44.

There were 8 deaths from suicide, 6 in the City of Peterborough, 1 in the Peterborough Rural District, and 1 in the Barnack area.

All the 8 occurred in males, 1 over 75; 1 over 65, 3 over 55; 2 over 45, and 1 over 35 years. Three were due to coal gas poisoning, 2 hanged themselves, 2 drowned themselves, and 1 shot himself.

It appears that five to six thousand persons commit suicide annually in Great Britain, and about the same number attempt it. This means that every week 200 persons take, or try to take, their lives.

Suicides have increased from 1861 onwards. The male rate per million has increased from 105 to 196, and the female rate from 35 to 80.

1,700 of every 5,000 persons who commit suicide use coal gas, 800 hang themselves; 500-600 use poisons, and 500 cut their throats. In 1910 there were only 131 suicides from gas, but in 1936 there were as many as 1,771. Holland has the lowest suicide rate, between 60 and 80 per million. Spain has remained stationary. France has increased from 190-200, and Germany from 226 to 280. Twice to thrice as many males as females commit suicide, but more females than males attempt suicide.

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there were only 131 suicides from gas, but in 1908 there were as many as 1,771. Holland has the lowest suicide rate, between 40 and 50 per million. Spain has remained stationary. France has increased from 100-200, and Germany from 225 to 280. With so many

cases as females commit suicide, but more females than males attempt

In Detroit, for instance, 637 females, but only 363 men attempted suicide. The Great War diminished the number of suicides in England and Wales for men by 27 per cent, and for women by 10 per cent, and in Germany by 24 per cent. This decrease in suicide affected men over military age. It was due to the national calamity diverting their attention. There is no direct relationship between the economic state of the country and the number of suicides. In Spain and Italy the suicide rate is far lower than in England and Wales.

The rate for the upper and middle classes is 1,156; for the intermediate classes 1,256; for skilled artisans 905; for the semi-skilled 889, and for the unskilled 975.

The five with the highest rates are :-

wool sorters with	3,214
tin and copper miners with	3,082
brewers with	2,652
publicans with	2,609
stevedores with	2,325

Strange to say the suicide rate among doctors is high, 2,012, for their work is of interest, and practically all qualified men can earn a living. The average professional income before the War was £500 a year gross, and in 1926 it was about £750 gross. In this it contrasts with the law, where the number of briefless barristers is high.

On the other hand it must be remembered that the work is harassing, often irregular, and when conducted outside institutions, often in unpleasant surroundings. The ready access to poisons and surgical instruments is another incentive which must weigh actively in the balance when a physician or surgeon knows that he is afflicted with incurable and painful disease. Music teachers have a low suicide rate of 356; Nonconformist ministers of 284, and best of all <sup>are</sup> Roman Catholic Priests, who never commit suicide.

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 state of the country and the number of suicides. In Spain and Italy  
 the suicide rate is far lower than in England and Wales.  
 The rate for the upper and middle classes is 1,150; for the  
 intermediate classes 1,250; for skilled artisans 1,650; for the un-  
 skilled 2,000, and for the unskilled 2,750.  
 The five with the highest rates are:-

2,814	wool workers with
2,082	tin and copper miners with
2,582	brewers with
2,622	publicans with
2,352	slaveworkers with

Strands to say the suicide rate among doctors is high, 2,012, for  
 their work is of interest, and practically all qualified men are over  
 a living. The average professional income before the war was £200 a  
 year gross, and in 1928 it was about £750 gross. In this it contrasts  
 with the law, where the number of British barristers is high.  
 On the other hand it must be remembered that the work is harassing,  
 often irregular, and when conducted outside institutions, often in  
 unpleasant surroundings. The ready access to poisons and surgical  
 instruments in another industry which is not so active in the  
 balance when a physician or surgeon knows that it is attended with  
 incurable and painful disease. Suicide is more a low suicide  
 rate of 350; Nonconformist ministers of 700, and that of the Roman  
 Catholic priests, who never commit suicide.

A curious point about suicide is the fascination which certain localities exercise. Beechy Head and the Clifton Suspension Bridge are favourite spots in this country, but the noteworthy example is the Mihara Yama Volcano in Japan on the island of Oshima. In February 1933 Miss Kiyoko Matsumoto aged 19 climbed the mountain, bowed to her friend, and jumped into the crater. In the next ten months 143 persons followed her example. In one day alone there were six suicides and twenty-five unsuccessful attempts. In 1934 167 suicides occurred on this mountain. Tourists began to flock to the crater, camels were imported for the ascent, and for the descent a chute-line was constructed. During the next two years 1,208 persons attempted suicide and policemen have now been appointed to guard the volcano.

It appears that in those communities where all persons think and act in accordance with a rigid system of ethics, and where a feeling of unity and solidarity exist, such as the Catholic Church and the Jews of the Ghetto, the suicide rate is low. In other communities where individual expression is allowed and encouraged the suicide rate is high.

#### INFANT MORTALITY RATE

By rate of infant mortality is meant the ratio of the annual number of deaths occurring in children under 1 year of age to every 1000 births. In the Soke of Peterborough 51 (46) infants died during the first year of life, giving a mortality rate of 64.0 ( 55.6).

The following table shows the number of deaths and the rates in each area of the County. Last year's figures are given in brackets:-

City of Peterborough	42	Rate	64.8	( 57.3 )
Peterborough Rural District	6	"	50.8	( 30.6 )
Barnack Rural District	3	"	100.0	( 96.6 )
Administrative County	51	"	64.0	( 55.6 )

The Barnack Rural District has again the highest infant mortality rate, and the Peterborough Rural District the lowest.



A curious point about suicide is the fascination which certain localities exercise. Besby head and the Clifton Suspension Bridge are favourite spots in this country, but the noteworthy example is the Mt. Fuji Volcano in Japan on the island of Honshu. In February 1933 Miss Eiyoko Matsumoto aged 19 climbed the mountain, joined to her friend, and jumped into the crater. In the next ten months 143 persons followed her example. In one day alone there were six suicides and twenty-five unsuccessful attempts. In 1934 107 suicides occurred on this mountain. Tourists began to flock to the crater, camps were imported for the ascent, and for the descent a chute-line was constructed. During the next two years 1,308 persons attempted suicide and policemen have now been appointed to guard the volcano. It appears that in those communities where all persons think and act in accordance with a rigid system of ethics, and where a feeling of unity and solidarity exist, such as the Catholic Church and the Jews of the Ghetto, the suicide rate is low. In other communities where individual expression is allowed and encouraged the suicide rate is high.

INFANT MORTALITY RATE

By rate of infant mortality is meant the ratio of the annual number of deaths occurring in children under 1 year of age to every 1000 births in the State of Pennsylvania 51 (48) infants died during the first year of life, giving a mortality rate of 64.0 (55.6).

The following table shows the number of deaths and the rates in each area of the County. Last year's figures are given in brackets.

City of Philadelphia	42	Rate	64.8	( 57.8 )
Philadelphia Rural District	8	"	50.8	( 40.5 )
Bucks Rural District	8	"	100.0	( 65.8 )
Administrative County	51	"	64.0	( 55.6 )

The Bucks Rural District has again the highest infant mortality rate, and the Philadelphia Rural District the lowest.

Forty-eight of the 756 legitimate infants died, giving a rate of 63.6, and 3 of the illegitimate infants, giving a rate of 75.0.

This is the highest mortality since 1931.

In England and Wales as a whole the infant mortality rate was 58; in the 125 County Boroughs and Great Towns 62; in the 148 smaller towns (including Peterborough) 55, and in London 60.

Owing to the fact that neither the Report of the Chief Medical Officer or the Registrar-General are to hand, I am unable to state how your County compares with others. Owing to the courtesy of some of the County Medical Officers, however, I am able to give the rates in their counties, viz :-

Cumberland	61;	Holland ( Lincs)	51;	Gloucestershire	45;
Northamptonshire	43;	Cheshire	51;	West Suffolk	40.6;
East Suffolk	41;	Berkshire	43.5;	Surrey	41.9;
West Riding (Yorks)	60;	Rutland	52.0;	Leicestershire	49.

It will be observed that our results compare unfavourably with all of the other counties mentioned. Most of them, with the exception of East and West Suffolk, Leicestershire, and the West Riding of Yorkshire show an increased mortality as compared with last year.

The number of infants succumbing in each year in the Soke of Peterborough since 1907, and the rates are as follows :-

1907 - 75	Rate	78.0;	1908 - 83	Rate	92.8;	1909 - 66	Rate	71.0;
1910 - 68	"	71.2;	1911 - 86	"	97.2;	1912 - 104	"	111.8;
1913 - 83	"	88.1;	1914 - 68	"	75.7;	1915 - 82	"	87.2;
1916 - 75	"	77.5;	1917 - 65	"	81.1;	1918 - 54	"	67.6;
1919 - 70	"	93.8;	1920 - 72	"	62.1;	1921 - 71	"	70.3;
1922 - 49	"	66.1;	1923 - 38	"	44.2;	1924 - 46	"	60.0;
1925 - 49	"	63.0;	1926 - 39	"	49.4;	1927 - 48	"	60.6;
1928 - 39	"	48.6;	1929 - 47	"	57.3;	1930 - 57	"	69.5;
1931 - 55	"	69.9;	1932 - 30	"	40.6;	1933 - 34	"	49.4;
1934 - 38	"	51.4;	1935 - 45	"	59.2;	1936 - 46	"	55.6
1937 - 51	"	64.0.						

The causes of the 51 deaths in the Soke of Peterborough according to the Registrar-General are :-

Congenital Debility	30	Whooping Cough	1
Pneumonia	2	Violence	3
Diarrhoea	7	Other Digestive	
Influenza	2	Diseases	2
Measles	1	Other Defined Diseases	3

Forty-eight of the 756 legitimate infants died, giving a rate of 63.6 and 8 of the illegitimate infants, giving a rate of 75.0.

This is the highest mortality since 1881. In England and Wales as a whole the infant mortality rate was 56; in the 125 County Boroughs and Great Towns 65; in the 148 smaller towns (including Peterborough) 55, and in London 60.

Owing to the fact that neither the Report of the Chief Medical Officer or the Registrar-General are to hand, I am unable to state how your County compares with others. Going to the contrary of some of the County Medical Officers, however, I am able to give the rates in their counties, viz :-

West Riding (York) 60	West Yorkshire 52	West Yorkshire 52	West Yorkshire 52
West Yorkshire 52	West Yorkshire 52	West Yorkshire 52	West Yorkshire 52
West Yorkshire 52	West Yorkshire 52	West Yorkshire 52	West Yorkshire 52
West Yorkshire 52	West Yorkshire 52	West Yorkshire 52	West Yorkshire 52

It will be observed that our results compare unfavourably with all of the other counties mentioned. Most of them, with the exception of East and West Yorkshire, Lancashire, and the West Riding of Yorkshire show an increased mortality as compared with last year.

The number of infants attending in each year in the Home of Peterborough since 1907, and the rates are as follows :-

Year	Rate	Year	Rate
1907 - 75	78.0	1908 - 83	62.8
1910 - 68	71.5	1911 - 88	67.8
1912 - 68	68.1	1914 - 68	78.7
1915 - 68	77.5	1917 - 68	61.1
1919 - 70	68.8	1920 - 72	62.1
1922 - 49	69.1	1923 - 38	44.5
1925 - 49	69.0	1926 - 32	49.4
1928 - 39	48.9	1929 - 47	37.8
1931 - 35	61.2	1932 - 39	40.5
1934 - 39	61.4	1935 - 45	52.8
1937 - 51	64.0		

The causes of the 51 deaths in the Home of Peterborough according to the Registrar-General are :-

1	Other Infant Diseases
2	Diarrhoea
3	Convulsions
4	Other Diseases
5	Other Infant Diseases
6	Other Infant Diseases
7	Other Infant Diseases
8	Other Infant Diseases
9	Other Infant Diseases
10	Other Infant Diseases

It is interesting to note that 2 infants died from congenital heart disease; one was aged 3 days, and the other 7 months. Prematurity accounted for 12 deaths. One lived 1 hour; one 3 hours; one 6 hours; two 8 hours; one 1 day; one 2 days; one a week; two 2 weeks, and two a month. Two of these premature children were born by Caesarean section. Eight died from congenital debility. One lived an hour; one 8 hours; one a day; two 2 days; one 3 days; one 7 days, and one 3 months. One child died from hydrocephalus, or water on the brain. Two died from injury to the brain after difficult labour, aged 7 days and 23 hours respectively. Two died after operations, one for intussusception causing intestinal obstruction at the age of 5 months, and another from an embolus of the lung occurring after an operation for the cure of hernia. Two died from influenza aged 4 months and 5 months respectively. Six died from enteritis, aged 2 weeks, 1 month, 2 months, 4 months, 4 months, and 8 months respectively. Two died from jaundice aged 1 week and 1 month respectively. One child died from failure of the lungs to expand at the age of 5 hours, and another from pulmonary stenosis or obstruction of the blood vessels of the lung at the age of 1 month. A child aged 9 hours was certified as having died from inanition, and another aged 1 day from meningitis. One child died from rickets complicated by pericarditis aged 10 months. Two children died from suffocation, one in a cradle and the other in the parents bed, aged 4 and 5 months respectively.

34 of the 51 deaths occurred at so early an age and from such gross deformity or defects in vitality that no attendance at any welfare centre could have saved them.

The Report of the City Medical Officer for 1937 is not yet to hand, and I am therefore unable to state how many cases attended the City Welfare Centres during that year. In the Report for 1936 it appears that 11,165 attendances were made. 272 children attended for the first time under 1 year of age, and 45 between the ages of 1 and 5 years.

Altogether 442 children attended.

It is interesting to note that 2 infants died from congenital heart disease; one was aged 8 days, and the other 7 months. Irregularly accounted for 12 deaths. One lived 1 hour; one 2 hours; one 2 hours; one 1 day; one 2 days; one 2 weeks; one 2 months. Two of these premature children were born by Caesarian section. Eight died from congenital debility. One lived an hour; one 2 hours; one 2 days; one 2 days; one 7 days; and one 8 months. One child died from hydrocephalus, or water on the brain. Two died from injury to the brain after difficult labour, aged 7 days and 23 hours respectively. Two died after operations, one for intussusception causing intestinal obstruction at the age of 2 months, and another from an embolus of the lung occurring after an operation for the cure of hernia. Two died from influenza aged 4 months and 2 months respectively. Six died from enteritis, aged 2 weeks, 1 month, 2 months, 4 months, 4 months, and 8 months respectively. Two died from jaundice aged 1 week and 1 month respectively. One child died from failure of the lungs to expand at the age of 2 hours, and another from pulmonary stenosis or obstruction of the blood vessels of the lung at the age of 1 month. A child aged 9 hours was certified as having died from inanition, and another aged 1 day from meningitis. One child died from rickets complicated by pericarditis aged 10 months. Two children died from suffocation, one in a cradle and the other in the parents' bed, aged 4 and 5 months respectively.

24 of the 31 deaths occurred at so early an age and from such gross deformity or defects in vitality that no attendance at any welfare centre could have saved them.

The Report of the City Medical Officer for 1927 is not yet to hand, and I am therefore unable to state how many cases attended the City Welfare Centres during that year. In the Report for 1926 it appears that 11,162 attendances were made, 275 children attended for the first time under 1 year of age, and 45 between the ages of 1 and 5 years.

## HEALTH VISITING

During the year the health visiting in the Soke of Peterborough ( outside the City) was efficiently performed by Miss M. Mc'Phillips. She made 120 first visits to infants under one year of age, and the total number of visits to infants amounted to 598. 124 visits were paid to expectant mothers, 74 of these being first visits. 798 visits were paid to children between 1 and 5 years of age. Altogether 1,510 visits were made, as compared with 1,655 last year.

It should be noted that Nurse Mc'Phillips is School Nurse, Visitor to mental defectives, and assists for about 6 hours a week at the Venereal Diseases Clinic.

The cards of the 120 infants visited for the first time during the year were examined in detail. It appears that 2 of these were stillborn. One of these was prematurely born. One hundred of the live born infants were brought up on the breast, 8 on the bottle, 6 were first fed on the breast and then on the bottle, and in 4 no record was made. Of the bottle fed babies, 3 were brought up on cows' milk, 3 on Nestle's milk, 1 on Allenbury's Food, and 1 on "Cow & Gate" Food. 103 of the live born infants were healthy, sturdy youngsters, 10 were not thriving, and 5 died. One died of congenital heart disease, 1 of jaundice, 1 of whooping cough, 1 of general debility, and one died after Caesarean birth. Eight of the 10 infants who were not thriving were breast fed, or 8 per cent of the total breast fed, and 2 were brought up first on the breast and then on the bottle, or 33 per cent of the total breast and bottle fed. One of the delicate children had whooping cough, 1 eczema, and one had a Hare Lip which was operated on at a London Hospital. Comforters or dummy teats were used in 10 cases, they were not used in 101, and in 7 no record was made. 104 of the 118 living babies had a separate cot, 5 slept in the same bed as their parents, and in 9 cases no record was made on this point.

HEALTH VISITING

During the year the health visiting in the State of Pennsylvania (outside the City) was efficiently performed by Miss M. McPhillips. She made 130 first visits to infants under one year of age, and the total number of visits to infants amounted to 238. 124 visits were paid to expectant mothers, 74 of these being first visits. 708 visits were paid to children between 1 and 5 years of age. Altogether 1,810 visits were made, as compared with 1,532 last year.

It should be noted that Nurse McPhillips is School Nurse, Visitor to mental defectives, and attends for about 5 hours a week at the Venereal Disease Clinic.

The cards of the 130 infants visited for the first time during the year were examined in detail. It appears that 2 of these were stillborn. One of these was prematurely born. One hundred of the five first infants were brought up on the breast, 8 on the bottle, 5 were first fed on the breast and then on the bottle, and in 4 no record was made. Of the bottle fed babies 3 were brought up on cows' milk, 2 on Maltin's Milk, 1 on Allenbury's Food, and 1 on "Cow & Calf" Food.

103 of the five born infants were healthy, sturdy youngsters, 10 were not thriving, and 5 died. One died of congenital heart disease, 1 of jaundice, 1 of whooping cough, 1 of general debility, and one died also. Eight of the 10 infants who were not thriving were German birth. One per cent of the total presented, and 2 were brought up first on the breast and then on the bottle, or 23 per cent of the total breast and bottle fed. One of the 110 children had whooping cough, 1 colic, and one had a hernia which was operated on at the London Hospital. Children on heavy feeds were found in 10 cases, they were not used in 101, and in 7 no record was made. 104 of the 118 living babies had a separate note, 5 sleep in the same bed as their parents, and 12 were in the same bed as their parents.

The infants' clothing was found to be satisfactory in 99 cases: in 11 it was described as poor or only fair, and in 8 no record was made. An enquiry was made into the state of the mothers' health. In 14 cases it was not satisfactory. 11 mother had bad teeth, 2 were anaemic, 1 suffered from pulmonary tuberculosis, 1 from spinal curvature, and one had had puerperal septicaemia. Two mothers were described as dirty and slovenly.

Limited sleeping accommodation was reported in 6 cases, viz.,

10 persons sleeping in 3 bedrooms	1 case
9 " " " 2 "	1 "
7 " " " 2 "	2 cases
6 " " " 2 "	2 "

One house was very dark, one was damp, and two houses were dirty and illkept.

#### Milk Grants

During the year 4 infants and 6 mothers were supplied with a free grant of cows' milk.

The supplies are granted for a month, and at the expiration of that period the cases are reviewed by the Public Health Committee. Milk is only granted in necessitous cases.

The County Council has continued to supply maternity outfits free of charge to necessitous cases.

#### ANTE-NATAL EXAMINATIONS

Twenty, or 13.5 per cent, of the mothers in the Rural Districts were examined antenatally.

Seven were examined by one practitioner, 4 by another, 3 each by two practitioners, and one by each of three practitioners.

18 of the 20 cases were sent by the nurses of the Castor Association, 1 by the Barnack Nurse, and 1 by Nurse Battson of Marholm Road, Peterborough, one of the County Council Midwives.

Eleven of the 20 cases were normal in every respect. Three suffered from varicose veins, and in 3 the position of the child was abnormal. Hydramnios, or excess of the waters, was diagnosed in one mother, excessive function of the thyroid gland was found in one, serious dental decay in another, and a chronic discharge in a fourth. A slight degree of pelvic contraction was found in one case.

In Berkshire, with 3,195 births, 939 women were examined antenatally, a percentage of 29. In addition a post-natal examination was made in 108 women.

In Cheshire with 10,238 births 2,052 women were examined antenatally, or 20 per cent.



The infants' clothing was found to be satisfactory in 69 cases; in 11 it was described as poor or only fair, and in 2 no record was made. An enquiry was made into the state of the mothers' health. In 14 cases it was not satisfactory. 11 mothers had had teeth, 2 were anemic, 1 suffered from pulmonary tuberculosis, 1 from spinal curvature, and one had purpura aplastica. Two mothers were described as dirty and slovenly. Limited electric accommodation was reported in 2 cases, viz.,

10 persons sleeping in 3 bedrooms	1 case
" " " " " "	1 "
" " " " " "	2 cases
" " " " " "	2 "

One house was very dark, one was damp, and two houses were dirty and

Milk Grants

During the year 4 infants and 8 mothers were supplied with a free grant of cows' milk. The supplies are granted for a month, and at the expiration of that period the cases are reviewed by the Public Health Committee. Milk is only granted in exceptional cases. The County Council has continued to supply maternity outlets free of charge to exceptional cases.

ANTE-NATAL EXAMINATIONS

Twenty, or 18.8 per cent, of the mothers in the Rural Districts were examined antenatally. Seven were examined by one practitioner, 4 by another, 3 each by two practitioners, and one by each of three practitioners. 18 of the 20 cases were sent by the nurses of the County Association, 1 by the Barnack Nurse, and 1 by three Midwives of Keston Road, Peterborough, one of the County Council Midwives. Eleven of the 20 cases were noted in every respect. Three suffered from varicose veins, and in 3 the position of the uterus was abnormal. Hydronephrosis or excess of the uterus was diagnosed in one mother, excessive tension of the abdominal wall was found in one, nervous dental decay in another, and a chronic discharge in a fourth. A slight degree of pelvic contraction was found in one case. In Peterborough with 2,165 births, 689 women were examined antenatally, a percentage of 32. In addition a special antenatal examination was made in 102 women. In Cambridge with 10,238 births, 2,022 women were examined antenatally, or 20 per cent.

Excellent results were again obtained in Cumberland. 1,299 mothers were examined ante-natally out of 3,131 births, a percentage of 40. In Leicestershire there is a scheme similar to ours, whereby general practitioners examine cases, and a second scheme undertaken by Medical Officers of the County Council. 4,488 births were registered and 925 women were examined ante-natally, or 20%. 352 were examined by general practitioners, and 573 by assistant medical officers. In Northamptonshire with 3,104 births, 789 women were examined ante-natally; 555 in clinics administered by public authorities, and 234 by hospitals or maternity homes - a percentage of 25%. In Gloucestershire with 5,061 births 2,709 were examined ante-natally, or 53%. In addition 37 women were examined post-natally. In East Suffolk with 2,964 births 410 mothers were examined, or 13.8%.

It is obvious that our results are unsatisfactory. As a first step midwives should be asked to refer all their cases to the doctor.

#### CASES OF ABNORMAL CHILDBIRTH

Three cases were admitted to Hospital during the year. One case of phlebitis was admitted to Stamford Infirmary. She did well. The second was admitted for Caesarean section. The operation was successful, but the child died. The third was admitted for severe pain. She had an unsatisfactory home. She had a normal confinement.

Two cases were referred to your Consultant, Dr Lilley. In one the pelvis was small and the doctor asked for Dr Lilley's advice. Caesarean section was not advised and the confinement was normal. The second case had been delivered previously by Caesarean section. The question was whether a second Caesarean section was necessary. Dr Lilley thought not, and the child was delivered normally.

I have searched the reports of other County Medical Officers and find that Consultants are not often called in. The figures are as follows :-

In Gloucestershire only 11 consultations out of 5,061 births were obtained. In Leicestershire consultants were called in in 17 cases out of the 4,488 confinements, or 0.3 per cent. In Holland ( Lincs) there were 1,620 confinements and the Consultant was called in to see 30 women, or 1.8 per cent. In Berkshire with 3,195 confinements the Consultants were called in to see 21 patients, or 0.6 per cent of the women confined. In 1937 in Cumberland a Consultant Obstetrician had not been appointed. In East Suffolk consultants have been appointed, but I have failed to find the number seen by them. In West Suffolk consultants had not been appointed.

It appears, therefore, that you are doing as much as other counties in this matter.

Excellent results were again obtained in Cumberland. 1,292 mothers were examined ante-natally out of 2,181 births; a percentage of 40. In Lancashire there is a scheme similar to ours, whereby general practitioners examine cases, and a second scheme undertaken by Medical Officers of the County Council. 4,488 births were registered and 928 women were examined ante-natally, or 20.8%. 355 were examined by general practitioners, and 573 by assistant medical officers. In Northamptonshire with 2,104 births, 789 women were examined ante-natally; 555 in clinics administered by public authorities, and 234 by hospitals or maternity homes - a percentage of 25%. In Gloucestershire with 2,051 births 2,709 were examined ante-natally, or 132%. In addition 37 women were examined post-natally. In East Suffolk with 2,064 births 410 mothers were examined, or 19.8%.

It is obvious that our results are unsatisfactory. As a first step midwives should be asked to refer all their cases to the doctor.

CASES OF ABNORMAL CHILDREN

Three cases were admitted to hospital during the year. One case of phibilia was admitted to Stamford Infirmary. She did well. The second was admitted for Caesarian section. The operation was successful, but the child died. The third was admitted for severe pain. She had an unsatisfactory home. She had a normal confinement.

The cases were referred to your Consultant, Dr Lilley. In one the pelvis was small and the doctor asked for Dr Lilley's advice. Caesarian section was not advised and the confinement was normal. The second case had been delivered previously by Caesarian section. The question was whether a second Caesarian section was necessary. Dr Lilley thought not, and the child was delivered normally.

I have searched the reports of other County Medical Officers and find that Consultants are not often called in. The figures are as follows:-

In Gloucestershire only 11 consultations out of 2,051 births were obtained. In Lancashire consultants were called in in 17 cases out of the 4,488 confinements, or 0.3 per cent. In Bedfordshire (lines) there were 1,520 confinements and the Consultant was called in to see 30 women, or 1.9 per cent. In Berkshire with 2,165 confinements the Consultant was called in to see 21 patients, or 0.9 per cent. In Devon the same result. In East Cumberland a Consultant was called in but not seen. In East Suffolk consultants have been consulted, but I have failed to find the number seen by them. In West Suffolk consultants had not been consulted.

It appears, therefore, that you are doing as well as other counties in this matter.

## ORTHOPAEDIC CLINIC

During the year 1937 no children of pre-school age received in-patient treatment at the Manfield Orthopaedic Hospital, and no infants attended the out-patient Clinics held at the Peterborough Memorial Hospital by the Manfield Hospital Staff.

## MIDWIVES

During the year 1937 twenty-five midwives notified their intention to practice in the County. All of them were fully trained. 14 resided in the City of Peterborough, 4 at Castor, 1 at Barnack, 1 at Stibbington ( Hunts), and 5 were nurses at St John's Hospital, Peterborough.

252 cases were attended by the midwives, and 297 in their capacities as maternity nurses.

Medical aid was summoned by the midwives on 80 occasions for the following reasons :- ruptured perineum 28; difficult and prolonged labour 12; post and ante-partum haemorrhage 8; discharge from the baby's eyes 5; raised temperature 3; contracted pelvis 3; premature birth 3; breech presentation 2; abortion 2; pains in legs 2; disproportion 2, and for one of each of the following conditions :- feebleness of infant, placenta praevia, rash on body, abdominal pains, pyelitis, oedema of legs, severe headache and sickness, transverse presentation, general debility and rapid pulse, and septic blisters.

Fifty-eight claims were paid to doctors under the Midwives Act 1918. In 22 cases the amounts so paid were wholly recovered, and in 19 cases they were partially recovered. In 17 cases no recovery was considered advisable.

## ORTHOPAEDIC CLINIC

During the year 1937 no children of pre-school age received in-patient treatment at the Mansfield Orthopaedic Hospital, and no infants attended the out-patient Clinics held at the Peterborough General Hospital by the Mansfield Hospital staff.

## MIDWIVES

During the year 1937 twenty-five midwives notified their intention to practice in the County. All of them were fully trained. 14 resided in the City of Peterborough, 4 at Ganton, 1 at Burnack, 1 at Stibington (hunts), and 5 were nurses at St John's Hospital, Peterborough.

222 cases were attended by the midwives, and 207 in their capacities as maternity nurses.

Medical aid was summoned by the midwives on 80 occasions for the following reasons:- ruptured parturient 26; difficult and prolonged labour 12; post and ante-partum haemorrhage 8; discharge from the baby's eyes 2; raised temperature 2; contracted pelvis 2; premature birth 2; breech presentation 2; abortion 2; pains in legs 2.

Disproportion 2, and for one of each of the following conditions:- foetal distress of infant, placenta praevia, rash on body, abdominal pains, pyelitis, oedema of legs, severe headache and blindness, transverse presentation, general debility and rapid pulse, and cordic distorsion.

Fifty-eight cases were held in hospital, and 14 midwives and 1916. In 22 cases the midwives were held in hospital, and in 16 cases they were partially recovered. In 17 cases no recovery was considered advisable.

## PULMONARY TUBERCULOSIS

There were 31 deaths from pulmonary tuberculosis, distributed as follows among the sanitary districts. ( The figures in brackets refer to 1936 ).

City of Peterborough	24	Rate	0.51	( 0.43 )
Peterborough Rural District	5	"	0.79	( 0.16 )
Barnack Rural District	2	"	0.79	( .0 )
Administrative County	31	"	0.55	( 0.38 )

In the following counties the death rates from pulmonary tuberculosis were as follows :-

Leicestershire	.54;	Berkshire	.38;	Cumberland	.62;
Northamptonshire	.42;	Cheshire	.44;	Holland (Lincs)	.50;
East Suffolk	.42;	Gloucestershire	.50;	West Suffolk	.29;
Surrey	.45;	Rutland	.39.		

The Soke of Peterborough has had an unfortunate year as regards pulmonary tuberculosis.

The number of deaths from pulmonary tuberculosis, and the rates per 1000 of the population in each year since 1912 are as follows :-

1912 - 31	Rate	.68;	1913 - 30	Rate	.66;	1915 - 48	Rate	.87;
1915 - 37	"	.80;	1916 - 36	"	.79;	1917 - 48	"	1. 0;
1918 - 52	"	1.11;	1919 - 38	"	.87;	1920 - 26	"	.57;
1921 - 45	"	.96;	1922 - 32	"	.67;	1923 - 32	"	.60;
1924 - 24	"	.49;	1925 - 30	"	.61;	1926 - 21	"	.42;
1927 - 32	"	.64;	1928 - 26	"	.51;	1929 - 27	"	.52;
1930 - 19	"	.36;	1931 - 23	"	.44;	1932 - 27	"	.50;
1933 - 17	"	.32;	1934 - 24	"	.45;	1935 - 13	"	.24;
1936 - 21	"	.38;	1937 - 31	"	.55.			

One of the deaths occurred in the street from a sudden attack of haemorrhage. He had never been seen by me. A girl died of galloping consumption in the Hospital. She was not notified. A woman died in Hospital and was notified on the same day as her death. A youth died at Papworth 1½ years after notification. Three months later his sister died of pulmonary tuberculosis. The mother refused to have her examined as a contact when her brother was taken ill.

A printer had for years struggled against ill health. I found him in a very advanced stage of the disease. He died on the same day as that of notification. Another case died suddenly of blood spitting in Stamford Infirmary. He had never been notified.

PULMONARY TUBERCULOSIS

There were 31 deaths from pulmonary tuberculosis, distributed as follows among the sanitary districts. (The figures in brackets refer to 1938.)

City of Peterborough	24	Rate	0.31	{	0.43
Peterborough Rural District	3	"	0.79	{	0.16
Farnack Rural District	2	"	0.79	{	0
Administrative County	31	"	0.33	{	0.38

In the following counties the death rates from pulmonary tuberculosis were as follows:-

Leicestershire	1.54	Northamptonshire	1.42
Northamptonshire	1.42	East Suffolk	1.42
East Suffolk	1.42	Gloucestershire	1.39
Gloucestershire	1.39	Bedford	1.38
Bedford	1.38	West Suffolk	1.37
West Suffolk	1.37	Cambridgeshire	1.30
Cambridgeshire	1.30	Lincoln (Urban)	1.29
Lincoln (Urban)	1.29	Lincoln (Rural)	1.28
Lincoln (Rural)	1.28	Derbyshire	1.27
Derbyshire	1.27	Derbyshire	1.26
Derbyshire	1.26	Derbyshire	1.25

The rate of Peterborough has had an unfortunate year as regards pulmonary tuberculosis.

The number of deaths from pulmonary tuberculosis, and the rates per 1000 of the population in each year since 1913 are as follows:-

1913 - 21	Rate	1.98	1913 - 20	Rate	1.98
1913 - 27	"	1.94	1913 - 28	"	1.94
1913 - 28	"	1.11	1913 - 29	"	1.11
1913 - 29	"	1.11	1913 - 30	"	1.11
1913 - 30	"	1.11	1913 - 31	"	1.11
1913 - 31	"	1.11	1913 - 32	"	1.11
1913 - 32	"	1.11	1913 - 33	"	1.11
1913 - 33	"	1.11	1913 - 34	"	1.11
1913 - 34	"	1.11	1913 - 35	"	1.11
1913 - 35	"	1.11	1913 - 36	"	1.11
1913 - 36	"	1.11	1913 - 37	"	1.11
1913 - 37	"	1.11	1913 - 38	"	1.11
1913 - 38	"	1.11	1913 - 39	"	1.11
1913 - 39	"	1.11	1913 - 40	"	1.11
1913 - 40	"	1.11	1913 - 41	"	1.11
1913 - 41	"	1.11	1913 - 42	"	1.11
1913 - 42	"	1.11	1913 - 43	"	1.11
1913 - 43	"	1.11	1913 - 44	"	1.11
1913 - 44	"	1.11	1913 - 45	"	1.11
1913 - 45	"	1.11	1913 - 46	"	1.11
1913 - 46	"	1.11	1913 - 47	"	1.11
1913 - 47	"	1.11	1913 - 48	"	1.11
1913 - 48	"	1.11	1913 - 49	"	1.11
1913 - 49	"	1.11	1913 - 50	"	1.11
1913 - 50	"	1.11	1913 - 51	"	1.11
1913 - 51	"	1.11	1913 - 52	"	1.11
1913 - 52	"	1.11	1913 - 53	"	1.11
1913 - 53	"	1.11	1913 - 54	"	1.11
1913 - 54	"	1.11	1913 - 55	"	1.11
1913 - 55	"	1.11	1913 - 56	"	1.11
1913 - 56	"	1.11	1913 - 57	"	1.11
1913 - 57	"	1.11	1913 - 58	"	1.11
1913 - 58	"	1.11	1913 - 59	"	1.11
1913 - 59	"	1.11	1913 - 60	"	1.11
1913 - 60	"	1.11	1913 - 61	"	1.11
1913 - 61	"	1.11	1913 - 62	"	1.11
1913 - 62	"	1.11	1913 - 63	"	1.11
1913 - 63	"	1.11	1913 - 64	"	1.11
1913 - 64	"	1.11	1913 - 65	"	1.11
1913 - 65	"	1.11	1913 - 66	"	1.11
1913 - 66	"	1.11	1913 - 67	"	1.11
1913 - 67	"	1.11	1913 - 68	"	1.11
1913 - 68	"	1.11	1913 - 69	"	1.11
1913 - 69	"	1.11	1913 - 70	"	1.11
1913 - 70	"	1.11	1913 - 71	"	1.11
1913 - 71	"	1.11	1913 - 72	"	1.11
1913 - 72	"	1.11	1913 - 73	"	1.11
1913 - 73	"	1.11	1913 - 74	"	1.11
1913 - 74	"	1.11	1913 - 75	"	1.11
1913 - 75	"	1.11	1913 - 76	"	1.11
1913 - 76	"	1.11	1913 - 77	"	1.11
1913 - 77	"	1.11	1913 - 78	"	1.11
1913 - 78	"	1.11	1913 - 79	"	1.11
1913 - 79	"	1.11	1913 - 80	"	1.11
1913 - 80	"	1.11	1913 - 81	"	1.11
1913 - 81	"	1.11	1913 - 82	"	1.11
1913 - 82	"	1.11	1913 - 83	"	1.11
1913 - 83	"	1.11	1913 - 84	"	1.11
1913 - 84	"	1.11	1913 - 85	"	1.11
1913 - 85	"	1.11	1913 - 86	"	1.11
1913 - 86	"	1.11	1913 - 87	"	1.11
1913 - 87	"	1.11	1913 - 88	"	1.11
1913 - 88	"	1.11	1913 - 89	"	1.11
1913 - 89	"	1.11	1913 - 90	"	1.11
1913 - 90	"	1.11	1913 - 91	"	1.11
1913 - 91	"	1.11	1913 - 92	"	1.11
1913 - 92	"	1.11	1913 - 93	"	1.11
1913 - 93	"	1.11	1913 - 94	"	1.11
1913 - 94	"	1.11	1913 - 95	"	1.11
1913 - 95	"	1.11	1913 - 96	"	1.11
1913 - 96	"	1.11	1913 - 97	"	1.11
1913 - 97	"	1.11	1913 - 98	"	1.11
1913 - 98	"	1.11	1913 - 99	"	1.11
1913 - 99	"	1.11	1913 - 100	"	1.11

One of the deaths occurred in the street from a sudden attack of haemorrhage. He had never been seen by me. A girl died of pulmonary tuberculosis in the Hospital. She was not notified. A woman died in Hospital and was notified on the same day as her death. A youth died at Peterborough 1/2 years after notification. Two months later his sister died of pulmonary tuberculosis. The mother refused to have her examined as a contact when her daughter was notified. A printer had for years attended contact ill health. I found him in a very advanced stage of the disease. He died on the same day as that of notification. Another case died suddenly of blood spitting in Stamford Infirmary. He had never been notified.

The serious danger of these cases to others can be appreciated if the prolonged nature of the disease is realised. Thus one of my patients died in 1937 eighteen years after notification; another died 13 years after notification. It is probable from the long history of ill health suffered by patients who have died shortly after notification that they were in an infectious condition for years. It seems to me that the only way of obviating this is the regular examination and re-examination of the whole population throughout the course of life instead of confining the examination to children under 14 years of age. The following table shows the number of cases of tuberculosis notified, and the deaths classified in age periods, during 1937 :-

Age Period	New cases				Deaths			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
1 - 5	1	-	-	-	-	-	-	-
5 - 10	1	-	2	-	-	-	-	-
10 - 15	-	-	-	3	-	-	-	-
15 - 25	2	7	2	1	3	3	1	2
25 - 35	5	4	2	-	5	4	2	1
35 - 45	9	2	-	-	8	2	1	1
45 - 55	6	2	-	2	2	2	-	-
55 - 65	-	1	-	2	-	1	-	1
65 and over	-	-	-	-	1	-	-	-
Totals :-	24	16	6	8	19	12	4	5

Altogether 40 new cases of pulmonary tuberculosis were notified to me during the year, 24 being males and 16 females. This is the largest number recorded since 1929. 37 of these cases were seen by me in my capacity as Tuberculosis Officer. Three died before notification was received. Of these 40 notified cases you provided institutional treatment for 3 of the early, 2 of the intermediate, and 10 of the advanced cases. In one of the advanced cases sanatorium treatment was refused. One went to an Institution for an hour, and then returned home, and another for a day, when he discharged himself.



The serious danger of these cases to others can be appreciated if the prolonged nature of the disease is realized. Thus one of my patients died in 1937 eighteen years after notification; another died 13 years after notification. It is probable from the long history of ill health suffered by patients who have died shortly after notification that they were in an infectious condition for years. It seems to me that the only way of obviating this is the regular examination and re-examination of the whole population throughout the course of life instead of confining the examination to children under 14 years of age.

The following table shows the number of cases of tuberculosis notified, and the deaths classified in age periods, during 1937 :-

Age Period	New cases		Deaths	
	Pulmonary	Non-pulmonary	Pulmonary	Non-pulmonary
	M.	F.	M.	F.
1 - 5	1	-	-	-
5 - 10	1	-	-	-
10 - 15	-	3	-	-
15 - 25	2	7	3	1
25 - 35	5	4	5	3
35 - 45	2	2	3	1
45 - 55	2	1	2	-
55 - 65	1	-	-	-
65 and over	-	-	1	-
Totals	24	16	19	4

Altogether 40 new cases of pulmonary tuberculosis were notified to me during the year, 24 being males and 16 females. This is the largest number recorded since 1932. 57 of these cases were notified to my capacity as Tuberculosis Officer. Three died before notification was received. Of these 50 notified cases you provided institutional treatment for 2 of the early, 2 of the intermediate, and 10 of the advanced cases. In one of the advanced cases treatment was refused. One went to an institution for an hour, and then returned home, and another for a day, when he discharged himself.

The exact number of cases notified in each year since 1912 are :-

1912 - 116; 1913 - 85; 1914 - 57; 1915 - 54; 1916 - 72; 1917 - 80;  
 1918 - 83; 1919 - 63; 1920 - 81; 1921 - 86; 1922 - 64; 1923 - 93;  
 1924 - 73; 1925 - 73; 1926 - 57; 1927 - 41; 1928 - 38; 1929 - 62;  
 1930 - 31; 1931 - 32; 1932 - 35; 1933 - 29; 1934 - 18; 1935 - 28;  
 1936 - 39; 1937 - 40.

At the end of December 1937 the number of persons suffering from pulmonary tuberculosis on the Registers of the District Medical Officers was 170. The numbers in each locality were :-

	<u>Males.</u>	<u>Females.</u>	<u>Total</u>
City of Peterborough	82	73	155
Peterborough Rural District	6	5	11
Barnack Rural District	1	3	4
Administrative County	89	81	170

During the year 7 males and 8 females recovered from the disease.

24 persons ( 15 males and 9 females) died.

#### NON-PULMONARY TUBERCULOSIS

There were 9 deaths from non-pulmonary tuberculosis in the County during 1937. Eight occurred in the City of Peterborough, and one in the Barnack Rural District. One death occurred from knee joint disease in a man aged 25. He was resident at Creaton Sanatorium at the time of his decease. Another death occurred from spinal caries in a man aged 37 who had had various periods of institutional treatment at Peterborough and other Hospitals. Two deaths were assigned to tuberculosis of the peritoneum. One death was ascribed to tubercular meningitis, one to tuberculosis of the peritoneum and pleura in a woman of 33 while a resident at Creaton Sanatorium, and 3 others to generalized tuberculosis, all of whom had had hospital treatment.

Fourteen new cases of non-pulmonary tuberculosis were notified to me during the year. 6 affected the glands, 2 the spine, 2 the knee, 1 the ankle, 1 the hip, 1 the peritoneum, and 1 the wrist.

Notification of non-pulmonary tuberculosis came into force in the year 1914, and the numbers reported in the County in each year since that date are as follows :-

1914 - 32; 1915 - 17; 1916 - 19; 1917 - 40; 1918 - 18; 1919 - 24;  
 1920 - 30; 1921 - 27; 1922 - 35; 1923 - 28; 1924 - 13; 1925 - 15;  
 1926 - 14; 1927 - 22; 1928 - 10; 1929 - 11; 1930 - 4; 1931 - 9;  
 1932 - 8; 1933 - 14; 1934 - 9; 1935 - 8; 1936 - 17; 1937 - 14.

The number of cases of non-pulmonary tuberculosis on the Registers at the end of the year 1937 was 84, 73 being resident in the City, 10 in the Peterborough Rural District, and 1 in the Barnack area.

The exact number of cases notified in each year since 1912 are :-

1912 - 116	1913 - 67	1914 - 87	1915 - 24	1916 - 78	1917 - 60
1918 - 83	1919 - 58	1920 - 81	1921 - 88	1922 - 64	1923 - 98
1924 - 78	1925 - 78	1926 - 87	1927 - 41	1928 - 38	1929 - 53
1930 - 81	1931 - 88	1932 - 33	1933 - 24	1934 - 18	1935 - 28
1936 - 34	1937 - 40				

At the end of December 1937 the number of persons notified from pulmonary tuberculosis on the registers of the District Medical Officer was 170. The numbers in each locality were :-

City of Peterborough	82	73	155
Peterborough Rural District	9	8	17
Barsock Rural District	1	3	4
Administrative County	78	81	170

During the year 7 cases and 8 females recovered from the disease.

24 persons ( 15 males and 9 females) died.

NON-PULMONARY TUBERCULOSIS

There were 9 deaths from non-pulmonary tuberculosis in the County during 1937. Eight occurred in the City of Peterborough, and one in the Barsock Rural District. One death occurred from knee joint disease in a man aged 25. He was resident at Greaton manufacturing at the time of his decease. Another death occurred from spinal caries in a man aged 40 who had had various periods of institutional treatment at Peterborough and other hospitals. Two deaths were assigned to tuberculosis of the peritoneum. One death was assigned to tubercular meningitis, one to tuberculosis of the peritoneum and spine in a woman of 32 who was resident at Greaton manufacturing, and 3 others to unspecified tuberculous all of whom had had hospital treatment.

Fourteen new cases of non-pulmonary tuberculosis were notified to me during the year. 6 affected the kidneys, 2 the spine, 2 the lungs, 1 the testis, 1 the hip, 1 the peritoneum, and 1 the ovary.

Notification of non-pulmonary tuberculosis has been lower in the year 1937, and the numbers reported in the County in each year since 1912 are as follows :-

1912 - 22	1913 - 17	1914 - 19	1915 - 40	1916 - 18	1917 - 24
1918 - 30	1919 - 27	1920 - 32	1921 - 25	1922 - 18	1923 - 15
1924 - 14	1925 - 22	1926 - 10	1927 - 11	1928 - 10	1929 - 11
1930 - 8	1931 - 14	1932 - 9	1933 - 5	1934 - 19	1935 - 11

The number of cases of non-pulmonary tuberculosis on the registers at the end of the year 1937 was 24, 73 being resident in the City of Peterborough, 9 in the Barsock Rural District, and 1 in the Administrative County.

## REPORT OF THE TUBERCULOSIS OFFICER

This Report deals with the period extending from January 1st 1937 to December 31st 1937.

The Tuberculosis Dispensary is held twice weekly, in the mornings of Wednesdays and Saturdays from 11- 12 o'clock, and in the afternoons of the same days from 3-30 to 6 p.m.

The total number of patients examined or treated by me was 374, as compared with 348 in 1936; 306 in 1935; 337 in 1934; 324 in 1933; 432 in 1932, and 441 in 1931. 250 new cases, including contacts, were examined during the year, and 124 had been seen in previous years.

Owing to the kindness of my colleagues I am able to compare the amount of work done in other counties with that undertaken in the Soke of Peterborough.

In Gloucestershire ( pop. 330,000) 1,242 new cases and contacts were examined. In Northamptonshire ( pop. 220,400) 827 new cases and contacts were examined. In Leicestershire ( pop. 300,700) 887 new cases were seen by two whole-time Tuberculosis Officers. In Holland ( Lincs) ( pop. 95,490) 367 new cases and contacts were examined.

In Berkshire ( pop. 226,400) 475 new cases were seen. In Cumberland ( pop. 196,080) 1,085 new patients and contacts were seen. In East Suffolk ( pop. 205,680) 290 new patients and contacts were examined.

With the possible exception of Cumberland the amount of work in proportion to the population is considerably more than that in other counties.

Forty-five adults were found to be suffering from pulmonary tuberculosis, 26 of these being males, and 19 females. Two boys were also found to be suffering from pulmonary tuberculosis. 143 persons presented themselves for examination and were found not to be suffering from tuberculosis.

REPORT OF THE TUBERCULOSIS OFFICER

This Report deals with the period extending from January 1st 1937

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The Tuberculosis Dispensary is held twice weekly, in the mornings of Wednesdays and Saturdays from 11-12 o'clock and in the afternoon of the same days from 3-5 to 5 p.m.

The total number of patients examined or treated by me was 374 as compared with 348 in 1936; 308 in 1935; 327 in 1934; 394 in 1933; 432 in 1932, and 441 in 1931. 350 new cases, including contacts, were examined during the year, and 124 had been seen in previous years.

Owing to the kindness of my colleagues I am able to compare the amount of work done in other counties with that undertaken in the State of Fife.

In Gloucestershire (pop. 338,000) 1,242 new cases and contacts were examined. In Northamptonshire (pop. 350,400) 837 new cases and contacts were examined. In Lancashire (pop. 300,700) 887 new

cases were seen by two whole-time Tuberculosis Officers. In Holland (pop. 28,400) 397 new cases and contacts were examined. In Berkshire (pop. 228,400) 475 new cases were seen. In Cumberland

(pop. 198,080) 1,085 new patients and contacts were seen. In East Suffolk (pop. 205,880) 290 new patients and contacts were examined. With the possible exception of Cumberland the amount of work in

proportion to the population is considerably more than that in other counties.

Forty-five adults were found to be suffering from pulmonary tuberculosis 28 of these being males, and 17 females. Two boys were also found to be suffering from pulmonary tuberculosis. 143 persons presented

themselves for examination and were found not to be suffering from

103 of these were adults, 40 being males and 63 females. 40 were children, 24 boys and 16 girls. Included in the 143 were 50 contacts, 13 being adult males, 19 adult females, 11 boys and 7 girls.

The number of medical examinations at or in connection with the Dispensary was 2,707, as compared with 2,631 in 1936; 2,130 in 1935; 1,871 in 1934; 2,156 in 1933; 2,196 in 1932, and 2,224 in 1931.

Ten patients were found to be suffering from tuberculosis of organs other than the lungs, 8 being adults ( 3 men and 5 women), and 2 children - 1 boy and 1 girl. 371 operations for the production and maintenance of artificial pneumothorax were performed by the Tuberculosis Officer, as compared with 343 in 1936; 187 in 1935; 154 in 1934; 167 in 1933; 182 in 1932, and 270 in 1931. In Leicestershire 860 such operations were performed; in Northamptonshire 251, and in Holland ( Lincs) 423.

241 samples of expectoration, urine, pus and pleural fluid were examined for the tubercle bacillus. In 50 samples the specimens contained the tubercle bacillus, and in 191 the result was negative. 197 of the examinations were made on patients attending the Dispensary, and 44 were sent by doctors. 120 X-ray photographs were taken.

117 consultations were held with medical men, 19 in the homes of the patients, and 98 otherwise. The nurses made 250 visits to the homes of tuberculous patients in 1937. Included in these visits were many for the nursing of advanced cases. Many visits were also paid to contacts who hesitate to submit themselves to examination.

Nurse Bean has now completed 21 years of service at your Dispensary, and her services are more and more appreciated both by the patients and the Tuberculosis Officer.

140 of the 371 patients examined by me were suffering from pulmonary tuberculosis. 23 of these were in the first or favourable stage of the disease, 27 were in the second stage, and 90 in the third stage of the malady.

108 of these were adults, 40 being males and 68 females. 40 were children, 24 boys and 16 girls. Included in the 148 were 50 contacts of 13 being adult males, 19 adult females, 11 boys and 7 girls.

The number of medical examinations at or in connection with the dispensary was 2,707, as compared with 2,481 in 1935; 2,130 in 1936; 1,871 in 1937; 2,166 in 1938; 2,106 in 1939; and 2,024 in 1940.

Ten patients were found to be suffering from tuberculosis of organs other than the lungs, 5 being adults (3 men and 2 women), and 5 children - 1 boy and 1 girl. 371 operations for the production and maintenance of artificial pneumothorax were performed by the Tuberculosis Officer, as compared with 843 in 1935; 187 in 1936; 154 in 1937; 167 in 1938; 1 in 1939; and 270 in 1940. In total 660 such operations were performed: in Northamptonshire 251, and in Holland (Lincs) 409.

241 samples of expectoration, urine, pus and pleural fluid were examined for the tubercle bacillus. In 50 samples the specimens contained the tubercle bacillus, and in 191 the result was negative. 127 of the examinations were made on patients attending the dispensary, and 24 were sent by doctors. 130 X-ray photographs were taken.

117 consultations were held with medical men, 19 in the homes of the patients, and 98 otherwise. The nurses made 280 visits to the homes of tuberculous patients in 1937. Included in these visits were many for the nursing of advanced cases. Many visits were also paid to patients who hesitate to submit themselves to examination.

There has now completed 21 years of service at your dispensary, and her services are now and have appeared both by the patients and the Tuberculosis Officer.

140 of the 371 patients examined by me were suffering from pulmonary tuberculosis. 22 of these were in the first or second stage of the disease, 27 were in the second stage, and 91 in the third stage of the

Taking the last mentioned group first, the 90 in an advanced stage of the disease, in as many as 84 the tubercle bacillus had been discovered during the period of observation at the Dispensary, and in 6 the germ had never been detected. In 8 the disease was arrested; in 5 it was quiescent, in 20 there was definite improvement, 4 were unchanged, 29 were worse, and 24 were dead. 20 were at work and 46 were not at work.

27 cases were diagnosed as being in the second stage of the disease. In 22 of these the tubercle bacillus had been discovered and in 5 it had never been found. Three were arrested, 8 were quiescent, 11 were improved, 3 were unchanged, 1 was worse, and 1 was dead.

14 were at work and 12 were not at work.

23 were diagnosed as being in the first stage of the disease.

11 were arrested, 7 quiescent, and 5 improved. 22 were at work and 1 was not at work. In 6 the tubercle bacillus had been found, and in 17 it had never been discovered.

To sum up, of 140 cases of pulmonary tuberculosis under Dispensary supervision or treatment, as many as 66 or 47 per cent were at work; 42 of the 140 are arrested or quiescent, 36 are very much improved, 7 are unchanged, 30 patients are worse, and 25 died.

#### Non-Pulmonary Tuberculosis

Eighteen cases of tuberculosis affecting organs other than the lungs were seen at or in connection with the Dispensary. They comprised :-

5 of tuberculous glands;	1 of tuberculous knee
4 of tuberculous peritonitis;	1 of tuberculous kidney
2 of lupus	1 of tuberculous fingers
1 of tuberculous shoulder joint	1 of tuberculous meningitis
1 of tuberculous hip.	1 of tuberculous abdomen.

Eleven were improved, 3 were worse, and there were 4 deaths.

The deaths occurred in 2 patients suffering from tuberculous peritonitis, 1 from tuberculous meningitis, and 1 patient with knee joint disease. 8 patients were at work, and 6 were not at work.



Thinking the last mentioned group first, the 50 in an advanced stage of the disease, in as many as 64 the tubercle bacillus had been discovered during the period of observation at the Dispensary, and in 5 the germ had never been detected. In 8 the disease was arrested in 5 it was quiescent, in 20 there was definite improvement, 4 were unchanged, 20 were worse, and 24 were dead. 20 were at work and 40 were not at work.

27 cases were diagnosed as being in the second stage of the disease. In 22 of these the tubercle bacillus had been discovered and in 5 it had never been found. Three were arrested, 8 were quiescent, 11 were improved, 3 were unchanged, 1 was worse, and 1 was dead. 14 were at work and 13 were not at work.

23 were diagnosed as being in the third stage of the disease. 11 were arrested, 7 quiescent, and 5 improved. 22 were at work and 1 was not at work. In 6 the tubercle bacillus had been found, and in 17 it had never been discovered.

To sum up, of 140 cases of pulmonary tuberculosis under Dispensary supervision or treatment, as early as 56 or 47 per cent were at work; 42 of the 140 are arrested or quiescent, 26 are very much improved, 7 are unchanged, 30 patients are worse, and 23 died.

Non-pulmonary tuberculosis

Eighteen cases of tuberculosis affecting organs other than the lungs were seen at or in connection with the Dispensary. They comprised:

- 5 of tuberculous glands
- 4 of tuberculous peritonitis
- 2 of lupus
- 1 of tuberculous shoulder joint
- 1 of tuberculous hip
- 1 of tuberculous abscess
- 1 of tuberculous abscess
- 1 of tuberculous abscess
- 1 of tuberculous abscess
- 1 of tuberculous abscess

Eleven were improved, 3 were worse, and there were 4 deaths. The deaths occurred in 2 patients suffering from tuberculous peritonitis, 1 from tuberculous meningitis, and 1 from tuberculous abscess. 8 patients were at work, and 5 were not at work.

### Institutional Treatment

On January 1st 1937 ten adult patients and one child were resident in Institutions under your Tuberculosis Scheme. During the year 1937 19 patients were sent by you to residential institutions ( 16 adults and 3 children). Altogether then 30 persons received treatment in sanatoria or hospitals, as compared with 25 last year. In addition 18 persons received treatment at St John's Hospital, Peterborough during the year.

The 30 persons were accommodated in the following sanatoria :-

Northamptonshire Sanatorium, Creaton	10
Eversfield Chest Hospital, St Leonards-on-Sea	7
Manfield Orthopaedic Hospital, Northampton	9
Papworth Tuberculosis Colony, Cambridge	3
City of London Chest Hospital, London	1

Eleven patients were still resident in Sanatoria on January 1st 1938. Sixteen were discharged during the year, and 3 died while inmates of the Sanatoria. Five cases of pulmonary tuberculosis were discharged from Sanatoria in whose sputa tubercle bacilli had never been found. All 5 were discharged as quiescent. One early case with tubercle bacilli in the sputum was treated in Sanatoria, and was discharged as not quiescent. Two cases of moderately advanced disease with tubercle bacilli in the sputum were treated in the Sanatorium. One was discharged as not quiescent, and the other died in the Institution. Seven advanced cases received institutional treatment. Six were discharged as not quiescent, and 1 died in the Sanatorium. Eight cases of non-pulmonary tuberculosis were in Sanatoria during the year. Three of these 8 were in residence on January 1st 1938. They consisted of 2 cases of hip joint disease in adults, and 1 of spinal disease in a child. Two of the bone cases admitted during the year were cases of tuberculous disease of the knee in adults, one of tuberculous spinal disease in a girl, one of tuberculous disease of the ankle, and one of hip joint disease.

### Institutional Treatment

On January 1st 1937 ten adult patients and one child were resident in institutions under their tuberculosis scheme. During the year 1937 19 patients were sent by you to residential institutions (15 adults and 3 children). Altogether then 30 persons received treatment in sanatoria or hospitals, as compared with 28 last year. In addition 18 persons received treatment at St John's Hospital, Westminster during the year.

The 30 persons were accommodated in the following sanatoria:-

10	Northamptonshire Sanatorium, Cratton
7	Warrington Chest Hospital, St Lawrence-on-the-Hill
6	Manfield Orthopaedic Hospital, Northampton
3	Papworth Tuberculosis Colony, Cambridge
1	City of London Chest Hospital, London

Eleven patients were still resident in sanatoria on January 1st 1938. Sixteen were discharged during the year, and 3 died while inmates of the sanatoria. Five cases of pulmonary tuberculosis were discharged from sanatoria in whose sputa tubercle bacilli had never been found. All 5 were discharged as pulmonary. One early case with tubercle bacilli in the sputum was treated in sanatoria, and was discharged as not pulmonary. Two cases of moderately advanced disease with tubercle bacilli in the sputum were treated in the sanatoria. One was discharged as not pulmonary, and the other died in the institution. Seven advanced cases received institutional treatment. Six were discharged as not pulmonary, and 1 died in the sanatorium. Eight cases of non-pulmonary tuberculosis were in sanatoria during the year. Three of these 8 were in residence on January 1st 1938. They consisted of 2 cases of hip-joint disease in adults, and 1 of spinal disease in a child. Two of the last cases admitted during the year were cases of tuberculous disease of the hip in adults, one of tuberculous spinal disease in a girl, one of tuberculous disease of the spine, and one of hip joint disease.

Of the 18 cases treated at St John's Hospital, Peterborough 16 were discharged during the year, and 2 died in the Institution.

The Council retains 3 beds at the Northamptonshire Sanatorium, Creaton ( 2 males and 1 female), and 2 male beds at the Eversfield Chest Hospital, St Leonards-on-Sea. It also has accommodation for 6 patients at St John's Hospital, Peterborough.

#### Artificial Pneumothorax Treatment

During the year I have continued to carry out artificial pneumothorax treatment, and as far as possible I have kept in touch with cases treated since the year 1916, notes of which are appended :-

- E.B. Ex-soldier. Aged 19 at commencement of treatment in 1919. He had severe disease in the right lung, which broke down into a cavity. Treatment was continued for 6 years. He has now been in work for some years. He is married and is the father of one healthy child.
- C.H. An artificial pneumothorax was started in October 1921 and continued till May 1925, when a slight amount of disease was noted in the opposite lung. He went to live in Huntingdonshire. He had a relapse, and was re-admitted to a Sanatorium, but is now again at work and in excellent health.
- D.L. A married woman aged 32, weight 9 stone. On examination in April 1920 she was found to have extensive right sided disease with a high temperature and rapid pulse. She was put to bed but the temperature did not subside, and on 12- 6- 1920 an artificial pneumothorax was induced. By the end of the month the temperature was normal. The inductions were continued up till Feb. 1924 - a period of 3 years and 8 months. Her weight was then 10 st. 7 lbs; it is now over 11 stone, and her health is now excellent.
- O.X. An artificial pneumothorax was induced in March 1919 for extensive right sided disease, and continued till 1922. The right lung is extensively fibrosed, but there is no active disease. Her health is good and she is able to work.
- M.S. Was first seen in July 1920, when disease was noted at both apices, especially the left. She had a period of 6 months rest, and was then sent for 3 months to a Sanatorium. In July of the following year tubercle bacilli appeared in the sputum, and in Feb. 1923, as the patient was getting weaker, an artificial pneumothorax was induced, and continued till June 1926. She is now married, has no cough or phlegm, and remains in good health.
- X.P. An artificial pneumothorax was produced in June 1919 and was maintained for 3 years. For years she was in full work as a domestic servant. She is now married and is in perfect health.

of the 18 cases treated at St John's Hospital, Peterborough in 1930  
 discharged during the year, and 5 died in the institution.  
 The Council retains 8 beds at the Northamptonshire Sanatorium, Greaton  
 (2 males and 6 female), and 2 male beds at the Westfield Chest  
 Hospital, St Leonards-on-Sea. It also has accommodation for 8 patients  
 at St John's Hospital, Peterborough.

Artificial Pneumothorax Treatment

During the year I have continued to carry out artificial  
 pneumothorax treatment, and as far as possible I have kept in touch  
 with cases treated since the year 1916, notes of which are appended:-

B.B. Ex-actor. Aged 47 at commencement of treatment in July  
 He had severe disease in the right lung, which broke down into a  
 cavity. Treatment was continued for 6 years. He has now been in  
 work for some years. He is married and is the father of one  
 healthy child.

G.H. An artificial pneumothorax was started in October 1921 and  
 continued till May 1925, when a slight amount of disease was noted  
 in the opposite lung. He went to live in Huntingdonshire. He had  
 a relapse, and was re-admitted to a Sanatorium, but is now again  
 at work and in excellent health.

D.L. A married woman aged 35, weight 9 stone. On examination in April  
 1920 she was found to have extensive right sided disease with a  
 high temperature and rapid pulse. She was put to bed but the  
 temperature did not subside, and on 12-6-1920 an artificial  
 pneumothorax was induced. By the end of the month the temperature  
 was normal. The inductions were continued up till Feb. 1924 - a  
 period of 3 years and 8 months. Her weight was then 10 st. 7 lbs;  
 it is now over 11 stone, and her health is now excellent.

O.K. An artificial pneumothorax was induced in March 1919 for extensive  
 right sided disease, and continued till 1922. The right lung is  
 extensively fibrosed, but there is no active disease.  
 Her health is good and she is able to work.

M.S. Was first seen in July 1920, when disease was noted at both apices,  
 especially the left. She had a period of 6 months rest, and was  
 then sent for 3 months to a Sanatorium. In July of the following  
 year tubercle bacilli appeared in the sputum, and in Feb. 1923  
 as the patient was getting better, an artificial pneumothorax was  
 induced, and continued till June 1925. She is now married, has  
 no cough or phlegm, and remains in good health.

K.F. An artificial pneumothorax was produced in March 1919 and was  
 maintained for 3 years. For years she was in full work as a  
 domestic servant. She is now married and is in perfect health.

- W.S. An artificial pneumothorax was induced for severe right sided disease in October 1916. She developed pleurisy 9 years after the first operation. She lived in very fair health until January 1938, when she died *of empyema & pneumonia*.
- C.K. An artificial pneumothorax was induced in Oct. 1920 and was continued for 4 years. She is now married, and 14 years after the cessation of operations she remains in good health. She has one healthy child, and no recrudescence of the disease is noted.
- H.P. An artificial pneumothorax was induced in Kent 13 years ago, and refills were performed by me for 5 years. He continues to do fairly well. His sputum is negative, and his lung has now expanded. He is at work.
- E.G. An artificial pneumothorax was produced in June 1919 for very extensive disease in the right lung. A hopeless prognosis was given by the Army Medical Officer. 19 years after that he is in good health and gaining weight. He is able to perform a fair amount of work on a small holding. He is married and has one healthy child.
- M.R. Had extensive disease in the left lung with tubercle bacilli in the sputum. She had sanatorium treatment, but relapsed shortly after her return. An artificial pneumothorax was induced in Sept. 1922 and was continued till March 1924, when the lung expanded. She has remained in excellent health ever since, had one child who unfortunately died from whooping cough, and has had four healthy children since.
- A.K. Girl of 18, who was extremely emaciated and affected with extensive disease of the left upper lobe. An artificial pneumothorax was maintained for over 4 years. She came back to Peterborough early in 1938. She had some cough, but the phlegm was negative for tubercle bacilli and the X-ray showed no signs of disease.
- L.L. An artificial pneumothorax was induced in Sept. 1920 and was maintained for over 4 years. Some time after cessation of treatment a haemorrhagic pleurisy developed. She has now left the district, but is in good health and has had one healthy child.
- C.C. This patient was discharged from another County Sanatorium as incurable. He had extensive disease in the right lung, and slight laryngeal disease. An artificial pneumothorax was induced over 13 years ago. He is now in excellent health and is at work on the railway.
- P.P. An artificial pneumothorax was induced in August 1921 for disease on the right side, with much fever, a rapid pulse, and high temperature. The pneumothorax was maintained for nearly 6 years. He has been at work as an engineer for some 13 years. Recently he developed tubercular disease of the testicle, but is back again at work.

W.E.  
An artificial pneumothorax was induced for severe right sided disease in October 1918. She developed pleurisy 9 years after the first operation. She lived in very fair health until January 1938, when she died.

C.K.  
An artificial pneumothorax was induced in Oct. 1920 and was continued for 4 years. She is now married, and 14 years after the cessation of operation she remains in good health. She has one healthy child and no recrudescence of the disease is noted.

H.P.  
An artificial pneumothorax was induced in Sept. 1919 for very bad disease in the right lung. A pleurisy pneumonia was given by the Army Medical Officer. 19 years after that he is in good health and gaining weight. He is able to perform a fair amount of work on a small holding. He is married and has one healthy child.

S.D.  
Had extensive disease in the left lung with tubercle bacilli in the sputum. She had sanatorium treatment, but relapsed shortly after her return. An artificial pneumothorax was induced in Sept. 1922 and was continued till March 1924, when the lung expanded. She has remained in excellent health ever since, and has one child who unfortunately died from whooping cough, and has had four healthy children since.

H.R.  
Girl of 16, who was extremely emaciated and affected with extensive disease of the left upper lobe. An artificial pneumothorax was maintained for over 4 years. She came back to Peterborough early in 1928. She had some cough, but the phlegm was negative for tubercle bacilli and the X-ray showed no signs of disease.

A.K.  
An artificial pneumothorax was induced in Sept. 1920 and was maintained for over 4 years. Some time after cessation of treatment a haemorrhagic pleurisy developed. She has now left the district, but is in good health and has had one healthy child.

J.L.  
This patient was discharged from another County Sanatorium as incurable. He had extensive disease in the right lung, and slight paragonal disease. An artificial pneumothorax was induced over 13 years ago. He is now in excellent health and is at work on the railway.

C.G.  
An artificial pneumothorax was induced in August 1917 for disease on the right side, with much fever, a rapid pulse, and high temperature. The pneumothorax was maintained for nearly 6 years. He has been at work as an unskilled laborer for 13 years. Recently he developed tubercular disease of the testicles, but is back again at work.

F.P.  
An artificial pneumothorax was induced in August 1917 for disease on the right side, with much fever, a rapid pulse, and high temperature. The pneumothorax was maintained for nearly 6 years. He has been at work as an unskilled laborer for 13 years. Recently he developed tubercular disease of the testicles, but is back again at work.

- B.S. Army Pensioner. Had prolonged treatment in Sanatoria prior to coming to Peterborough. He had extensive disease in the left upper lobe, with tubercle bacilli in the sputum, and severe haemorrhage. He has been under treatment since November 1926. The treatment has now ceased, the lung has expanded well, and the patient is in good health and is doing light work.
- W.M. School girl, aged 14. Had been absent from school for some months with cough. Tubercle bacilli were present in the sputum, and there was extensive disease of the left lung. An artificial pneumothorax was induced in March 1926. There is now no cough or phlegm. She has since married, and has 2 children and is expecting another. She remains in excellent health.
- W.F. A right sided pneumothorax was induced in March 1925 for haemorrhage. He has done fairly well and has undergone an operation for stone on the kidney, from which most severe operation he made an uneventful recovery. Disease appeared on the other side and tubercle bacilli were present in the sputum. His general condition is very good, and his sputum was negative when last examined in Sept. 1932. He is in full work.
- E.V. Police Constable. First seen on 14- 8- 1931. An artificial pneumothorax had been induced at the Winsley Sanatorium on 22- 4- 31. The left lung was well collapsed. The treatment was continued for the Lincoln Borough Authority till 5- 9- 34. The course was uneventful and the sputum was negative. In Sept. 1938 he wrote to say that he was in good health.
- K.K. Patient had been in a Sanatorium during the War. She had signs of an old cavity in the left upper lobe. She became pregnant and haemoptysis set in. Tubercle bacilli had never been found either in Peterborough or at the Sanatorium. The lung was collapsed and she passed through an easy confinement. She has had slight haemorrhages since, but her sputum is negative and her weight is stationary.
- A.S. Aged 18. First seen Aug. 4th 1929. Had been ailing for about two months. She lived in a poor home where one brother had already died from pulmonary tuberculosis. She presented signs of extensive disease in the left lung. Tubercle bacilli were present in the sputum. She was put to bed on absolute rest as the temperature was 101. Signs of disease were found in the right lung and it was decided to try Sanatorium treatment. She went to the Eversfield Chest Hospital on 21- 10- 1929, and returned on 28- 6- 30 much improved, but with tubercle bacilli still present. An X-ray examination revealed scattered infiltration over the whole of the left lung, but the right lung was free. An artificial pneumothorax was induced on 23- 7- 1930. The last refill was on 27- 6- 34. Tubercle bacilli disappeared from the sputum in Sept. 1930 and have never been detected since. She is now in full work and doing well.



B.E. Army Pensioner. Had prolonged treatment in Sanatorium prior to coming to Peterborough. He had extensive disease in the left upper lobe, with tubercle bacilli in the sputum, and severe haemorrhage. He has been under treatment since November 1935. The treatment has now ceased, the lung has expanded well, and the patient is in good health and is doing light work.

W.M. School girl, aged 14. Had been absent from school for some months with cough. Tubercle bacilli were present in the sputum, and there was extensive disease of the left lung. An artificial pneumothorax was induced in March 1936. There is now no cough or phlegm. She has since married, and has 2 children and is expecting another. She remains in excellent health.

W.F. A right sided pneumothorax was induced in March 1935 for haemorrhage. He has done fairly well and has undergone an operation for stone on the kidney, from which most severe operation he made an uneventful recovery. Disease appeared on the other side and tubercle bacilli were present in the sputum. His general condition is very good, and his sputum was negative when last examined in Sept. 1936. He is in full work.

E.V. Police Constable. First seen on 14-6-1931. An artificial pneumothorax had been induced at the Winsley Sanatorium on 22-4-31. The left lung was well collapsed. The treatment was continued for the Lincoln Borough Authority till 3-9-34. The course was uneventful and the sputum was negative. In Sept. 1936 he wrote to say that he was in good health.

K.K. Patient had been in a Sanatorium during the War. She had signs of an old cavity in the left upper lobe. She became pregnant and died from pulmonary tuberculosis. Tubercle bacilli had never been found either in Peterborough or at the Sanatorium. The lung was collapsed and she passed through an easy confinement. She has had slight haemorrhages since, but her sputum is negative and her weight is stationary.

A.S. Aged 18. First seen Aug. 4th 1932. Had been ailing for about two months. She lived in a poor home where one brother had already died from pulmonary tuberculosis. She presented signs of extensive disease in the left lung. Tubercle bacilli were present in the sputum. She was put to bed on absolute rest as the temperature was 101. Signs of disease were found in the right lung and it was decided to try Sanatorium treatment. She went to the Everafield Chest Hospital on 21-10-1932, and returned on 28-6-33 much improved, but with tubercle bacilli still present. An X-ray examination revealed scattered infiltration over the whole of the left lung, but the right lung was free. An artificial pneumothorax was induced on 27-7-1933. The first result was on 27-9-34. Tubercle bacilli disappeared from the sputum in Sept. 1933 and have never been detected since. She is now in full work and doing well.

I.W. Aged 23. First seen on 31- 5- 1930. Had been ailing for 3 months. She had extensive disease in the right lung. Tubercle bacilli were present in the sputum. She had decreased in weight from 8 st. 7 lbs to 6 st. 13 lbs. An artificial pneumothorax was induced on 7- 6- 1930, and was continued till 11- 7- 34. As is so often the case, pleurisy ensued and puriform fluid was removed on 19 separate occasions from May 1931 to Sept. 1932, 5,250 c.c. of fluid being removed by aspiration and replaced by gas. She had no fever with this complication and she now weighs over 8 stones. She is now happily married.

M.S. Aged 20. Began to feel run down in the summer of 1930. In October 1930 she went to a Sanatorium where an artificial pneumothorax was induced in November 1930. She had an uneventful course of treatment both at Peterborough and Boston. She is now in perfect health.

M.H. Aged 26. First attacked in June 1929. She went to a Sanatorium where an artificial pneumothorax was produced in January 1930. Pleurisy supervened in May 1930. On admission to the Peterborough Dispensary in November 1930 breath sounds were well suppressed over the left lung, with dullness over the lower third of the left lung. Numerous tubercle bacilli were found in the sputum. Refills were continued until August 1933. The sputum has been negative since July 1931. She is able to do clerical work.

K.R. Was first seen by me in Oct. 1932. The whole of the right lung was extensively infiltrated, and tubercle bacilli were present in the sputum. An artificial pneumothorax was induced on 19- 10- 1932 and continued till 30- 9- 1936. In addition 16 aspirations and gas replacements were performed between 8- 7- 33 and 27- 1- 34, the amount varying from a pint to a few cubic centimetres. She is now married and in excellent health.

In addition to these, 18 cases are now under treatment.

Nine are at work, one as a journalist, one on the railway, one as a carpenter, four in domestic duties, one on the land, and one in a factory. During the year two cases were sent to the City of

London Hospital with a view to a thoracoplasty being performed.

In one this was thought inadvisable. In the other it was performed, but the result is not satisfactory, as the lung has not collapsed and tubercle bacilli are still present in the sputum.

M.S. Aged 23. First seen on 31-5-1930, and been ill for 3 months. She had extensive disease in the right lung. Tubercle bacilli were present in the sputum. She had decreased in weight from 8 st. 7 lbs to 6 st. 13 lbs. An artificial pneumothorax was induced on 7-6-1930, and was continued till 11-7-34. As is so often the case, pleurisy ensued and purulent fluid was removed on 19 separate occasions from May 1931 to Sept. 1932, 5,250 c.c. of fluid being removed by aspiration and replaced by gas. She had no fever with this complication and she now weighs over 8 stones. She is now happily married.

M.S. Aged 30. Began to feel run down in the summer of 1929. In October 1930 she went to a Sanatorium where an artificial pneumothorax was induced in November 1930. She had an unsuccessful course of treatment both at Peterborough and Boston. She is now in perfect health.

M.H. Aged 26. First attacked in June 1929. She went to a Sanatorium where an artificial pneumothorax was induced in January 1930. Pleurisy supervened in May 1930. On admission to the Peterborough Dispensary in November 1930 breath sounds were well suppressed over the left lung, with dullness over the lower third of the left lung. Numerous tubercle bacilli were found in the sputum. Bacilli were continued until August 1932. The sputum has been negative since July 1931. She is now in excellent health.

K.R. Was first seen by me in Oct. 1928. The whole of the right lung was extensively infiltrated; and tubercle bacilli were present in the sputum. An artificial pneumothorax was induced on 19-10-1928 and continued till 30-9-1932. In addition 19 aspirations and gas replacements were performed between 8-7-28 and 27-1-34, the amount varying from a pint to a low cubic centimetres. She is now married and in excellent health.

In addition to these, 18 cases are now under treatment. Mine are all work, one as a journalist, one on the railway, one as a carpenter, four in domestic duties, one on the land, and one in a factory. During the year two cases were sent to the City of London Hospital with a view to a thoracoplasty being performed. In one this was thought inadvisable. In the other it was performed but the result is not satisfactory, as the lung has not collapsed and tubercle bacilli are still present in the sputum.

## VENEREAL DISEASES

During the year 1937 the number of attendances at the Clinic was 7,567, as compared with 9,703 in 1936. The decrease was due to the opening of a Venereal Diseases Clinic at Boston, which now treats cases among the residents of the Holland Division of Lincolnshire.

The number of new cases diminished from 219 to 202.

During the year eight medical practitioners were qualified to receive a free supply of arsenical compounds, but none of them applied for these drugs. 13 doses of "606" were supplied, however, to the Peterborough Memorial Hospital.

Only 24 specimens from patients were sent by private practitioners. 15 of these were sent by one practitioner, 6 by another, 2 by a third, and 1 by a fourth. No samples were received from the Infant Welfare or ante-natal Clinics. All but one were for the Wassermann test for syphilis, and one was for the Complement Fixation Test for Gonorrhoea.

I have again had striking cases of unrecognised syphilis.

The following examples show how neglect of this precaution, <sup>Blood testing</sup> causes unnecessary suffering and expense.

A highly respected lady had suffered from severe eruption on the head for some years and had been treated by ultra-violet light for a year or two. She was losing weight, and was suffering from illhealth.

She went to a Specialist in London, who at once sent her to me for treatment for syphilis. She has recovered her health and the lesions have healed. Another lady had been treated for a year or two for an ulcer extending from the knee to the ankle. It seems never to have occurred to the physician in charge that the case might have been syphilitic. She came to me and the large ulcer healed completely. The case illustrates the fact that the younger generation of doctors rarely see late results of syphilis in the hospitals where they are trained.

VENEREAL DISEASES

During the year 1937 the number of attendances at the Clinic was 7,367, as compared with 9,703 in 1936. The decrease was due to the opening of a Venereal Diseases Clinic at Boston which now treats cases among the residents of the Holland Division of Massachusetts.

The number of new cases diminished from 212 to 202. During the year eight medical practitioners were qualified to receive a free supply of arsenical compounds, but none of them applied for these drugs. 13 doses of "606" were supplied, however, to the Peterborough Memorial Hospital.

Only 24 specimens from patients were sent by private practitioners. 15 of these were sent by one practitioner, 6 by another, 2 by a third, and 1 by a fourth. No samples were received from the Infant Welfare or ante-natal Clinics. All but one were for the Wassermann test for syphilis, and one was for the Complement Fixation Test for gonorrhoea.

I have again had striking cases of unrecognized syphilis. The following examples show how neglect of this prescriptive course unnecessarily, collection and expense.

A highly respected lady had suffered from severe eruption on the head for some years and had been treated by ultra-violet light for a year or two. She was losing weight, and was suffering from ill-health. She went to a specialist in London, who at once sent her to me for treatment for syphilis. She has recovered her health and the lesions have healed. Another lady had been treated for a year or two for an ulcer extending from the nose to the ear. It seems never to have occurred to the physician in charge that the case might have been syphilitic. She came to me and the same ulcer healed completely. The case illustrates the fact that the younger generation of doctors rarely see late results of syphilis in the hospitals where they are

A widow was found by her physician to have a sore throat and diphtheria was suspected. No germs of diphtheria were found and she was discharged from medical care. Apprehensive of the nature of her ailment she consulted me, when definite lesions of syphilis were found in other parts of the body.

It should, however, be noted that it is absolutely essential that the Wassermann tests should be carried out by a Laboratory of repute and by an experienced Serologist. I have known cases of congenital syphilis where the blood was been returned as negative, whereas at subsequent examinations it has been returned as strongly positive. I have also known cases returned as positive, which upon re-testing and after frequent clinical examination, have proved to be absolutely free from disease.

Summary of the Work performed at the Venereal Diseases Clinic, Peterborough during the year 1937.

On January 1st 1937, 161 patients were in receipt of treatment, as compared with 172 on the corresponding date in 1936, 194 in 1935, 176 in 1934, 182 in 1933, and 152 in 1932.

85 of these were males and 76 females.

In addition 18 persons ( 10 males and 8 females) who, from one cause or another had left off treatment or had been transferred to other centres, re-applied for treatment. Altogether then 179 old cases ( 95 males and 84 females) were under treatment during 1937.

78 of these were suffering from syphilis, and 101 from gonorrhoea.

During the year 1937, 202 persons applied for treatment or advice for the first time, as compared with 219 in 1936; 237 in 1935; 272 in 1934; 215 in 1933, 228 in 1932, and 204 in 1931.

121 of the new cases were males and 81 females.

40 of the new cases were suffering from syphilis, 70 from gonorrhoea, and 92 from conditions other than venereal disease.

30 of the cases dealt with for the first time during the year were known to have received treatment for the same infection at other Centres. 7 of these were cases of syphilis, and 23 cases of gonorrhoea.

Altogether then 381 persons ( 216 males and 165 females) passed through my hands during the year, as compared with 410 in 1936; 449 in 1935; 470 in 1934, and 419 in 1933.

92 of these suffered from conditions other than venereal, but such cases necessitate a considerable amount of investigation and expenditure of time.

A video was found by her physician to have a sore throat and  
diphtheria was suspected. No other of diphtheria were found and she  
was discharged from medical care. Apprehensive of the nature of her  
illness she consulted me, when definite lesions of diphtheria were found  
in other parts of the body.

It should, however, be noted that it is absolutely essential that the  
Wassermann tests should be carried out by a laboratory of repute and  
by an experienced serologist. I have known cases of gonorrhoea  
diphtheria where the blood has been returned as negative, whereas at  
subsequent examinations it has been returned as strongly positive.  
I have also known cases returned as positive, which upon re-testing  
and after frequent clinical examination, have proved to be absolutely  
free from disease.

Summary of the work performed at the Venereal  
Disease Clinic, Liverpool, during the year 1937.

On January 1st 1937, 151 patients were in receipt of treatment,  
as compared with 172 on the corresponding date in 1936, 194 in 1935,  
176 in 1934, 182 in 1933, and 181 in 1932.  
86 of these were males and 65 females.  
In addition 18 persons (10 males and 8 females) who from one cause  
or another had left off treatment or had been transferred to other  
centres, re-applied for treatment. Altogether then 179 old cases  
(96 males and 84 females) were under treatment during 1937.  
78 of these were suffering from diphtheria, and 101 from gonorrhoea.

During the year 1937, 205 persons applied for treatment or advice  
for the first time, as compared with 212 in 1936; 287 in 1935; 272 in  
1934; 219 in 1933; 222 in 1932, and 204 in 1931.  
191 of the new cases were males and 14 females.  
49 of the new cases were suffering from diphtheria, 70 from gonorrhoea,  
and 72 from conditions other than venereal disease.  
30 of the cases dealt with for the first time during the year were  
known to have received treatment for the same infection at other  
centres. 7 of these were cases of diphtheria and 23 cases of  
gonorrhoea.

Altogether then 381 persons (216 males and 165 females) passed  
through my hands during the year, as compared with 416 in 1936;  
446 in 1935; 470 in 1934, and 419 in 1933.  
49 of these suffered from conditions other than gonorrhoea, and such  
cases necessitate a considerable amount of laboratory and  
examination of time.

172 of the 202 new cases had never been treated before at other Centres, and their places of residence were as follows :-

Soke of Peterborough	93
Huntingdonshire	40
Isle of Ely	20
Holland ( Lincs)	6
Kesteven "	6
Northamptonshire	3
Travellers	3
Other Areas	1

Forty-five cases ( 10 of syphilis and 35 of gonorrhoea) were transferred to other centres during the year. 43 cases were discharged as cured - 3 for syphilis, and 40 for gonorrhoea. Three persons died - all cases of syphilis. 49 persons ( 15 cases of syphilis and 34 of gonorrhoea) left off treatment before cure was established. Included in these figures are 3 cases of gonorrhoea who ceased attendance after completion of treatment, but before final tests of cure.

At the end of the year 1937, 149 persons were still under treatment at the Clinic, viz., 87 cases of syphilis, and 62 cases of gonorrhoea, as compared with 74 cases of syphilis and 87 cases of gonorrhoea at the end of the previous year.

The 381 men, women, and children examined or treated by me made 7,567 attendances, as compared with 9,703 attendances in 1936; 10,481 in 1935; 9,601 in 1934; 9,417 in 1933; 9,055 in 1932; 8,432 in 1931, and 8,886 in 1930.

3,365 attendances were made by male patients, and 4,202 by female patients. 1,473 of these 7,567 were classified as intermediate attendances for irrigation and douching, 1156 being made by women and 317 by men. 6,094 were classified as attendances for treatment other than by irrigation or douching; 3,048 of these were made by men and 3,046 by women.

The following are the number of attendances from the various County areas :-

Soke of Peterborough	4,676
Huntingdonshire	1,022
Isle of Ely	858
Holland ( Lincs)	482
Kesteven "	313
Northamptonshire	80
Travellers	74
Other Areas	62

1,289 doses of approved arsenobenzene compounds were given at the Clinic during the year, as compared with 1,188 in 1936; 1,457 in 1935; 1,485 in 1934; 1,538 in 1933, and 1,461 in 1932.

1,890 doses of Bismuth preparations were also given, as compared with 1,708 last year, and 1,619 in 1935.



172 of the 202 new cases had never been treated before at other Centres, and their places of residence were as follows :-

38	Sole of Tetbury
40	Huntingdonshire
20	Isle of Ely
6	Holland (Lincoln)
6	"
3	Northamptonshire
3	Travelers
1	Other Areas

Forty-five cases (10 of syphilis and 35 of gonorrhoea) were transferred to other centres during the year. 43 cases were also treated as cured for syphilis, and 40 for gonorrhoea. Three persons died - 11 cases of syphilis. 42 persons (15 cases of syphilis and 27 of gonorrhoea) left off treatment before cure was established. Included in these figures are 3 cases of gonorrhoea who ceased attendance after completion of treatment, but before final tests of cure.

At the end of the year 1937, 142 persons were still under treatment at the Clinic, viz., 87 cases of syphilis, and 55 cases of gonorrhoea, as compared with 74 cases of syphilis and 87 cases of gonorrhoea at the end of the previous year.

The 321 men, women, and children examined or treated by us made 7,507 attendances, as compared with 9,702 attendances in 1936; 10,481 in 1935; 9,601 in 1934; 8,417 in 1933; 7,032 in 1932; 6,432 in 1931, and 8,888 in 1930. 8,368 attendances were made by male patients, and 4,302 by female patients. 1,473 of these 7,507 were classified as intermediate attendances for irrigation and douching, 1188 being made by women and 317 by men. 6,034 were classified as attendances for treatment other than by irrigation or douching; 3,048 of these were made by men and 3,046 by women.

The following are the number of attendances from the various County areas :-

4,078	Sole of Tetbury
1,022	Huntingdonshire
888	Isle of Ely
482	Holland (Lincoln)
313	"
250	Northamptonshire
174	Travelers
102	Other Areas

1,387 doses of approved arsenic compounds were given at the Clinic during the year, as compared with 1,182 in 1936; 1,467 in 1935; 1,482 in 1934; 1,588 in 1933; and 1,401 in 1932. 1,700 doses of British preparations were also given, as compared with 1,700 last year, and 1,619 in 1935.

719 samples of material obtained from patients attending the Clinic were submitted to pathological examination at the Public Health Laboratory, Manchester, as compared with 746 in 1936. 10 of these were for the detection of spirochaetes, the organism which causes syphilis; 324 for the detection of gonococci, the organism which causes gonorrhoea; 231 for the Wassermann reaction of the blood or cerebro-spinal fluid, 143 for the Complement Fixation Test for Gonorrhoea, and 11 for the Gold Curve Test of the cerebro-spinal fluid. In addition the County Medical Officer examined 62 samples for the detection of gonococci. Altogether, therefore, 781 laboratory examinations were made, as compared with 825 in 1936.

It should be added that in addition to the work performed at Peterborough, 15 patients from the Soke of Peterborough made 210 attendances at the Ketton Clinic of the Rutland County Council, of which I am Medical Officer. I have no information of attendances of Peterborough patients at other Clinics.

In Holland ( Lincs) ( pop. 95,490) 98 new cases were seen and 4,790 attendances were made. In Berkshire ( pop. 226,460) 135 new cases were treated, and 4,964 attendances were made. In West Suffolk ( pop. 103,890) at the County Clinic at Bury St. Edmunds only 9 new cases were seen and only 261 attendances were made and 32 doses of "606" were given. In East Suffolk ( pop. 205,680) 150 new cases were seen, and 3,727 attendances were made. In Northamptonshire ( pop. 220,400) 197 new patients attended, and 3,268 attendances are recorded. In Cumberland ( pop. 196,080) 413 new patients were seen and 7,376 attendances were made. 1,163 doses of approved arsenical compounds were given. In Devon ( pop. 458,664) 370 new patients attended and 13,843 attendances were made. In Cornwall ( pop. 308,994) 219 new patients were seen, 2,090 attendances made, and 482 doses of "606" administered. In Lindsey ( Lincs) ( pop. 270,700) 416 new cases were seen, 4,424 attendances were made, and 554 injections of "606" were given.

The above figures demonstrate that the amount of work performed at your Clinic is in excess of counties five to six times greater in population, and accounts for the fact that the expenses per unit of population is so much greater than in all other areas, with the exception of Rutland.

During the year the Ministry of Health has continued to subsidize the British Social Hygiene Council with £2,508 of the taxpayers money. It is satisfactory, however, that every year the contribution is less.

#### New Cures for Gonorrhoea

During the year several preparations have been brought forward as a cure for gonorrhoea. They are of the Sulphonamide group of drugs. In some quarters they are heralded as a speedy and certain cure of the disease; in others the opinion expressed is less laudatory.

I tried the Prontosil preparation in several cases, but the results were not very encouraging. In Cumberland, however, wonderful results have been obtained.

The disease disappears in a few hours or a few days.

719 samples of material obtained from patients attending the Clinic were submitted to pathological examination at the Public Health Laboratory, Manchester, as compared with 765 in 1935. 10 of these were for the detection of epidermal, the organisms which cause syphilis; 824 for the detection of gonococci, the organisms which cause gonorrhoea; 281 for the examination of the blood or cerebro-spinal fluid, 143 for the Complement fixation test for Gonorrhoea, and 11 for the Gold Curve Test of the cerebro-spinal fluid. In addition the County Medical Officer examined 82 samples for the detection of gonococci. Altogether, therefore, 761 laboratory examinations were made, as compared with 825 in 1935.

It should be added that in addition to the work performed at Peterborough, 15 patients from the Box of Peterborough made 210 attendances at the Public Health Clinic of the Public Health Council, of which I am Medical Officer. I have no information of attendances at Peterborough patients at other Clinics.

In Holland (Lincoln) (pop. 25,450) 28 new cases were seen and 4,720 attendances were made. In Berkshire (pop. 226,480) 185 new cases were treated, and 4,024 attendances were made. In West Suffolk (pop. 108,850) at the County Clinic at Bury St. Edmunds only 9 new cases were seen and only 221 attendances were made and 22 doses of "909" were given. In East Suffolk (pop. 208,680) 180 new cases were seen, and 2,727 attendances were made. In Northamptonshire (pop. 270,400) 127 new patients attended, and 2,265 attendances were recorded. In Cumberland (pop. 199,000) 413 new patients were seen and 7,328 attendances were made. 1,158 doses of approved medicinal compounds were given. In Devon (pop. 428,622) 270 new patients attended and 12,648 attendances were made. In Cornwall (pop. 365,000) 210 new patients were seen, 2,000 attendances were made, and 482 doses of "909" administered. In Lindsey (pop. 270,700) 419 new cases were seen, 4,428 attendances were made, and 524 injections of "909" were given.

The above figures demonstrate that the amount of work performed at your Clinic is in excess of counties five to six times greater in population, and accounts for the fact that the expense per unit of population is so much greater than in all other areas, with the exception of Rutland.

During the year the Ministry of Health has continued to subsidize the British Social Hygiene Council with £2,508 of the taxpayer's money. It is satisfactory, however, that every year the contribution is less.

New Cases for Gonorrhoea

During the year several progress reports have been brought forward as a cure for gonorrhoea. The first of these was the "Gonorrhoea group of drugs" in your patients. It is a pity and a disappointment that the results in other cases are not so good as in your laboratory.

I tried the "Protonol" preparation in several cases, but the results were not very encouraging. In Cumberland, however, excellent results have been obtained. The disease disappears in a few hours or a few days.

Further, cases thought to be chronic and incurable clear up as quickly as recent infections. Its action, the Cumberland report continues, is comparable to the arseno-benzene treatment of syphilis. Quite recently a new preparation " M-B. 693 " , which is sulphonamide combined with pyridine, has been tried. The results have been more striking. Cases of epididymitis which usually mean three weeks of discomfort clear up in a few days, and the ordinary cases are even more satisfactory.

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#### MENTAL DEFICIENCY ACTS

This Act continues to be administered by the Public Health Committee with the help of three co-opted ladies, and at the request of the Board of Control the names of the members of the Committee are given on the first page of this Report.

On January 1st 1938 there were 91 persons ( 54 males and 37 females) on the Register under Statutory Supervision. Five of these ( 4 men and 1 woman) were awaiting removal to Institutions.

All the defectives under Statutory Supervision are visited at quarterly intervals by Nurse Bean and Nurse Mc'Phillips, and as occasion requires by the County Medical Officer.

Thirteen persons were under Guardianship, 8 being males and 5 females. One female and two males were in " places of safety".

During the year 61 defectives were lodged in the following institutions: Thirty-six ( 19 males and 17 females) in the Peterborough Public Assistance Institution; 3 females at Whittington Hall; 7 males and 6 females at Stoke Park Colony; 1 female at the Mary Dendy Home, Sandlebridge, Cheshire; 2 males at Besford Court Institution, Worcs; 2 females and 2 males are in the State Institution for violent and criminal defectives at Rampton, Notts.

Further, cases thought to be chronic and intractable clear up as quickly as recent infections. The action, the laboratory report continues, is comparable to the arseno-bismuth treatment of syphilis. This recently a new preparation "N-B-508", which is sulphamide combined with pyridine, has been tried. The results have been more striking. Cases of epithelioma which usually mean three weeks of discomfort clear up in a few days, and the ordinary cases are even more satisfactory.

MENTAL DEFECTIVES

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All the defectives under Statutory Supervision are visited at quarterly intervals by Nurse Bean and Nurse McPhillips, and on occasion referred by the County Medical Officer.

Thirteen persons were under Guardianship, 8 being males and 5 females. One female and two males were in "places of safety".

During the year 61 defectives were lodged in the following institutions: Thirty-six (19 males and 17 females) in the Letchworth Public Assistance Institution; 3 females at Millington Hall; 7 males and 5 females at Stone Hill Colony; 1 female at the New Darts House; 2 males at Bedford Court Institution; 2 males and 2 females at 21 Lanes and 2 males at the State Institution for violent and criminal defectives at Hampton, Kent.

In addition, one female is on licence from Whittington Hall and is resident at the Eagle House Hostel, Mitcham.

Turning to the cases under Guardianship, the following notes are appended :-

One male defective is in a nursing home under the Guardianship of the Proprietors. The home was considered unsuitable and he was ( in 1938 ) removed to Thorpe Road Institution. Another defective sleeps at the Public Assistance Institution, but owing to the kindness of Mr Baker is gainfully employed as a gardener. A third defective is under the guardianship of friends, but works at the Public Assistance Institution as an assistant porter. Two of the defectives are earning fair wages on the land. Another is employed sometimes in loading tiles, and at other times on the golf links. One boy who was attending school caught diphtheria when away on holiday and since then has been away from school on the doctor's orders. Another suffers from epilepsy. He is under the care of the County Medical Officer but is now unable to do any work. The last of the males is also unemployed, but takes considerable interest in the local sporting fixtures.

Three female defectives are under the Guardianship of their parents and are engaged in domestic duties. The fourth is under the care of the Brighton Guardianship Society, and I am pleased to say that her relatives are satisfied with her surroundings. She is afflicted with spinal disease, is defective in her habits, and is not able to walk to any extent. She goes out in a wheeled chair provided by you. She amuses herself by reading. The last case is a Catholic, aged 31 years, and is under the Guardianship of St Elizabeth's School, Exeter Road, Salisbury. The following report has recently been received :-

" Feeble minded female. Occupied in laundry work, which is done very erratically. Recreations; free each evening at 5-30 and the weekends from Saturday 12-30 until Monday morning. Conduct fairly good. Character, very obstinate and erratic. Religious instruction; the usual instructions which are given to the inmates of Convents. "

In addition, one female is on license from Springfield Hall and is

resident at the Earl's Road Hotel, Milton.

Turning to the cases under Guardianship, the following notes are

appended :-

The male defective is in a nursing home under the Guardianship of the

Procurators. The home was considered unsuitable and he was ( in 1938 )

removed to Thorpe Road Institution. Another defective lives at the

Public Assistance Institution, but owing to the kindness of Mr. Baker

is gainfully employed as a gardener. A third defective is under the

Guardianship of friends, but works at the Public Assistance Institution

as an assistant porter. Two of the defectives are earning fair wages

on the land. Another is employed sometimes in loading fish, and at

other times on the golf links. One boy who was attending school caught

diphtheria when away on holiday and since then has been away from school

on the doctor's orders. Another suffers from epilepsy. He is under

the care of the County Medical Officer but is now unable to do any work

The last of the males is also unemployed, but takes considerable

interest in the local sporting fixtures.

Three female defectives are under the Guardianship of their parents

and are engaged in domestic duties. The fourth is under the care of

the Brighton Guardianship Society, and I am pleased to say that her

relatives are satisfied with her surroundings. She is afflicted with

spinal disease, is defective in her habits, and is not able to walk to

any extent. She goes out in a special chair provided by you. She

cannot be helped by reading. The last case is a Catholic, aged 31 years

and is under the Guardianship of St. Vincent's School, Exeter Road.

The following report has recently been received :-

"Female blind (total) aged 17 January 1937, which is how very  
mentally defective and has been assessed at 1/20 and the records  
from January 1930 until 1937. General health good.  
Character, very obedient and quiet. Retention Institution for  
mental defectives which are given to the Institute of Convents."

Considering the cases under supervision, as many as ten are employed on the land, another 17 help their parents in household duties, 2 work as day domestics, 2 men are gainfully employed in the Brickyards, another man is an apprentice to an engineering firm, and another works in the office of a large engineering firm. One woman is a cinema attendant. One man who formerly worked for a butcher is now in receipt of unemployment pay. Two men are employed as hawkers, one is a baker's roundsman, and another works in a bulb factory. A young woman has fairly steady employment as a charwoman. Six are still at school, 5 at Council or non-provided schools, and one at a private school. Three are prevented from doing any work by epileptic fits, and the rest by reason of mental or physical defect.

The following reports from the various institutions show how your Defectives under institutional care are faring :-

- E.A. Whittington Hall. Aged 38. Imbecile; low grade.  
Can do simple industry work under supervision. Health good. Appears to be deteriorating mentally. She is not quite so obstinate as formerly, but at times is self-willed and sullen. She has few interests and needs constant supervision.
- A.L. Whittington Hall. Aged 38. Imbecile. Health fair.  
Makes no noticeable progress. She is fairly helpful in the house. She is fairly good tempered but simple and irresponsible and requires constant supervision.
- M.C. Stoke Park Colony. Aged 25. Low-grade feeble minded; mental age 8 years. Health good. Can read and write. Industrial progress - rug making and needle work. Fair worker under supervision. Bad tempered. She attends Wesleyan services.
- K.W. Stoke Park Colony. Aged 25. Imbecile verging on idiocy. Health fair but is epileptic. Cannot read or write. Industrial progress, low grade industries. Kept occupied with simple handwork. Troublesome at times. Destructive with clothing. She attends Church of England services.
- A.T. Whittington Hall. Aged 51. Feeble minded and very deaf, otherwise health is fair. Makes no noticeable progress. Can only manage simple house and industry work under supervision. Usually good tempered and well behaved, but apathetic & dull and simple. At times dirty in habits. Requires constant supervision.



Consider the cases under supervision, as many as ten are employed in the land, another 17 help their parents in household duties, 5 work as day domestics, 2 are occasionally employed in the fields, another man is an apprentice to an engineering firm, and another works in the office of a large engineering firm. One woman is a class attendant. One man who formerly worked for a butcher is now in receipt of unemployment pay. Two men are employed as barbers, one is a baker's roundman, and another works in a pulp factory. A young woman has fairly steady employment as a charwoman. Six are still at school, 2 at Council or non-provided schools, and one at a private school. These are prevented from doing any work by epileptic fits, and the rest by reason of mental or physical defect.

The following reports from the various institutions show how your

Defectives under institutional care are faring:-

- A.A. Whittington Hall.** Agent 38. Imbecile; low grade. Can do simple industry work under supervision. Health good. Appears to be deteriorating mentally. She is not quite so obstinate as formerly, but at times is self-willed and sulky. She has few interests and needs constant supervision.
- A.L. Whittington Hall.** Agent 36. Imbecile. Health fair. Makes no noticeable progress. She is fairly helpful in the house. She is fairly good tempered but simple and irresponsible and requires constant supervision.
- M.C. Stoke Park Colony.** Agent 25. Low-grade feeble minded; mental age 8 years. Health good. Can read and write. Industrial progress - the making and mending work. Fair worker under supervision. Had tempered. See attendants Westman services.
- E.R. Stoke Park Colony.** Agent 22. Imbecile; very low grade. Health fair but is epileptic. Cannot read or write. Industrial progress, few words, but none. She is constant with mending work. Tempered, but not violent. See attendants with clothing. She attends Church on Sundays.
- A.L. Whittington Hall.** Agent 37. Imbecile; low grade. Health fair but is epileptic. Cannot read or write. Industrial progress, few words, but none. She is constant with mending work. Tempered, but not violent. See attendants with clothing. She attends Church on Sundays.

- J.S. Stoke Park Colony. Aged 29. Low grade imbecile; mental age 4.8 years. Health good. Cannot read or write. He prepares blocks for mattresses. Conduct good. Attends C.E. services.
- M.S. Stoke Park Colony. Aged 12. Imbecile; mental age 3.1 years. Father and mother were brother and sister. Health good. She cannot read or write. Industrial progress - is learning simple handwork. She attends Church of England services and is taking more interest.
- G.K. Stoke Park Colony. Aged 12½. Imbecile; mental age 4.7 years. Health good. He can read and spell and write from dictation and is making slight progress. He does not make much progress in handwork, knitting, modelling or gardening. He is well behaved.
- H.W. Stoke Park Colony. Aged 16. Low grade feeble minded; mental age 6.8 years. Health good. Cannot read or write. Industrial progress - he is making satisfactory progress in leather work and mat making. General he is well behaved, but needs constant supervision. Attends Church of England services.
- F.T. Stoke Park Colony. Aged 12. Imbecile; mental age 5½ years. Health fair, epilepsy, right hemiplegia. Cannot read or write. He is occupied in simple handwork. He attends C.E. services.
- H.W. Stoke Park Colony. Aged 24. Imbecile; mental age 6.3 years. Health good. Cannot read or write. He works steadily on the land and is generally well behaved.
- D.H. Stoke Park Colony. Aged 13. Low grade feeble minded girl. She can read simple words and write from copy. She knits, sews, models and can draw. Attends Church of England services.
- J.H. Stoke Park Colony. Aged 13. Twin sister to D.H. Low grade feeble minded girl. She reads simple words and writes from copy. She knits, sews, models, and can draw. She is well behaved and attends Church of England services.
- J.C.F. Stoke Park Colony. Aged 16. Is feeble minded with an intelligence quotient of 3.3. He cannot read or write, but is well behaved. He works at painting and decorating.
- J.F. Stoke Park Colony. Aged 15. Imbecile, his mental age being 6.6 years. He can read and write a little from copy. He is employed in the sewing room learning to machine.
- W.R. Besford Court. Aged 19. Is making progress in his work as a shoemaker. He is unruly, is addicted to bad and indecent language, and is very noisy.
- J.K. Besford Court. Aged 19. Is capable of hard and continuous work as a gardener if kept under constant supervision. He does not, says the report, appreciate the seriousness of existence and is only interested in his meals. He is careless in habits, manners, and dress, is untruthful, and will not co-operate.
- E.W. Sandlebridge Institution. Aged 25. She is feeble minded and is only capable of simple domestic duties such as dusting and sweeping of floors under supervision. She plays ball games, and takes walks in the country. She attends religious services.

Stoke Park Colony. Aged 27. Low grade imbecile, mental age 4.8 years. Health good. Cannot read or write. He performs little for maintenance. Attends G.E. services.

Stoke Park Colony. Aged 18. Imbecile, mental age 3.1 years. Father and mother were brother and sister. Health good. Cannot read or write. Industrial progress - is learning simple handwork. Attends Church of England services and is taking more interest.

Stoke Park Colony. Aged 17. Imbecile, mental age 4.7 years. Health good. He can read and write from dictation and is making slight progress. He does not make much progress in handwork, knitting, modelling or gardening. He is well behaved.

Stoke Park Colony. Aged 16. Low grade feeble minded; mental age 5.8 years. Health good. Cannot read or write. Industrial progress - he is making satisfactory progress in leather work and hat making. Generally he is well behaved, but needs constant supervision. Attends Church of England services.

Stoke Park Colony. Aged 15. Imbecile; mental age 5.7 years. Health fair, epilepsy, right hemiplegia. Cannot read or write. He is occupied in simple handwork. He attends G.E. services.

Stoke Park Colony. Aged 14. Imbecile; mental age 5.3 years. Health good. Cannot read or write. He works steadily on the land and is generally well behaved.

Stoke Park Colony. Aged 13. Low grade feeble minded girl. She can read simple words and write from copy. She knits, sews, models and can draw. Attends Church of England services.

Stoke Park Colony. Aged 13. Twin sister to D.H. Low grade feeble minded girl. She reads simple words and writes from copy. She knits, sews, models, and can draw. She is well behaved and attends Church of England services.

Stoke Park Colony. Aged 12. Is feeble minded with an intelligence quotient of 3.3. He cannot read or write, but is well behaved. He works at painting and decorating.

Stoke Park Colony. Aged 12. Imbecile, his mental age being 6.8 years. He can read and write a little from copy. He is employed in the sewing room learning to machine.

Bealton Court. Aged 12. Is making progress in his work as a shoemaker. He is usually, is addicted to card and tobacco playing, and is very noisy.

Bealton Court. Aged 12. Is capable of hard and continuous work as a shoemaker. He is a quiet and obedient worker. He does not play cards or tobacco. He is a very good worker and is very intelligent in his work. He is a very good worker and is very intelligent in his work. He will not play cards and does not smoke.

Bealton Court. Aged 12. The patient is a quiet and obedient worker. He is a very good worker and is very intelligent in his work. He will not play cards and does not smoke. He is a very good worker and is very intelligent in his work. He will not play cards and does not smoke.

The following notes are appended with regard to the Defectives in the Peterborough Public Assistance Institution :-

<u>Sex</u>	<u>Age</u>	<u>Classification.</u>	<u>Occupation</u>
Female	50	Medium Grade	Laundry
Female	42	High Grade	Kitchen
Female	52	High Grade	Light housework
Female	26	Medium Grade	Light Housework
Female	53	Medium Grade	Light Housework
Female	43	High Grade	Laundry
Female	39	Medium Grade	Kitchen
Female	51	Medium Grade	Kitchen
Female	60	Medium Grade	Housework
Female	31	High Grade	"
Female	32	Medium Grade	"
Female	51	High Grade	"
Female	48	Low Grade	"
Female	42	Medium Grade	"
Female	53	Low Grade	"
Female	29	High Grade	"
Female	50	Medium Grade	"
Female	51	Low Grade	Nil

According to their ability and desire the recreation of these patients is knitting, fancy needlework, reading, walks, and an occasional motor ride or trip out. Wireless is provided in their day room. Those who are able attend religious services in the institution Chapel and the two Chaplains visit weekly.

Male	27	High Grade	Housework
Male	57	Medium Grade	"
Male	32	High Grade	"
Male	26	Medium Grade	"
Male	46	Medium Grade	"
Male	51	Medium Grade	"
Male	35	Low Grade	"
Male	31	Low Grade	"
Male	67	Medium Grade	"
Male	35	Low Grade	Unemployable
Male	25	Low Grade	"
Male	49	Low Grade	"
Male	52	Low Grade	"
Male	54	Low Grade	"
Male	33	Low Grade	"
Male	25	High Grade	On pass to daily employment - gardening
Male	18	Medium Grade	Housework
Male	16	High Grade	"
Male	20	High Grade	"
Male	29	Medium Grade	Encephalitic case)
Male	56	High Grade	Housework.

Recreations :- walks, a football or cricket bat and ball in the yard, wireless in the day rooms and some indoor games, with reading for the few who can. Physical training was started in 1936 and the good effect on those who take it is very marked.

There is a Church of England and a Nonconformist Service in the Chapel each Sunday and the two Chaplains attend weekly.

The following notes are appended with regard to the Delinquent in the Peterborough Public Assistance Institution:

Occupation	Classification	Age	Sex
Laundry	Medium Grade	50	Female
Kitchen	High Grade	48	Female
Light housework	High Grade	52	Female
Light housework	Medium Grade	58	Female
Light housework	Medium Grade	58	Female
Laundry	High Grade	48	Female
Kitchen	Medium Grade	39	Female
Kitchen	Medium Grade	51	Female
Housework	Medium Grade	60	Female
"	High Grade	51	Female
"	Medium Grade	52	Female
"	High Grade	51	Female
"	Low Grade	48	Female
"	Medium Grade	48	Female
"	Low Grade	53	Female
"	High Grade	59	Female
"	Medium Grade	50	Female
Nil	Low Grade	51	Female

According to their ability and desire the recreation of these patients is knitting, fancy needlework, reading, writing, and an occasional motor ride or trip out. Welfare is provided in their day room. Those who are able attend religious services in the Institution Chapel and the Chaplain visits weekly.

Housework	High Grade	37	Male
"	Medium Grade	37	Male
"	High Grade	32	Male
"	Medium Grade	38	Male
"	Medium Grade	48	Male
"	Medium Grade	51	Male
"	Low Grade	35	Male
"	Low Grade	31	Male
"	Medium Grade	37	Male
Unemployed	Low Grade	35	Male
"	Low Grade	35	Male
"	Low Grade	49	Male
"	Low Grade	35	Male
"	Low Grade	34	Male
"	Low Grade	33	Male
On pass to daily employment - gardening	High Grade	35	Male
Housework	Medium Grade	18	Male
"	High Grade	18	Male
"	High Grade	20	Male
Epileptic (case)	Medium Grade	39	Male
Housework	High Grade	38	Male

Exercises -- walks, a football or cricket ball and ball in the yard, and other in the day room and out in the garden with reading for the day. Physical training was started in 1935 and the good effect on those who take it is well known. There is a Church of England and a Roman Catholic Chapel in the Chapel room Sunday and the two Chaplains visit weekly.

### BLIND PERSONS ACT

There were 90 blind persons on the Register of the Peterborough Association for the Blind on March 31st 1938.

35 of these were men and 55 women. 44 of these were over 70 years of age. The Secretary Home-Teacher has paid 1,142 visits, compared with 1,241 visits in the previous year. There are now ten Braille readers, all of whom belong to the National Library, and for whom the Association pays £1 per head each year. Two otherx persons are learning Braille. There are also three readers of Moon type. Thirty-six persons are in receipt of a weekly allowance. The total sum spent on this is £600. £27-12-11d has been spent on the upkeep of wireless sets. The County Council contributed £900 towards the expenses of the Association, £50 of this being spent in respect of mentally defective persons, who receive instruction from Miss White. During the year 8 new cases were registered ( 3 males and 5 females). Three women were transferred to other areas, and 7 blind persons died, ( 2 men and 5 women). Over £5 has been spent on the provision of glasses for cases of partial blindness.

### SALE OF FOOD AND DRUGS ACT

The Report of the Medical Officer for the City of Peterborough is not to hand, so I am unable to state what was done in 1937 in the City, but in 1936 95 samples ( 28 being formal and 67 informal) were reported on. 34 were samples of milk. One informal sample of milk was reported on; five follow-up samples were taken within 48 hours and these were reported to be genuine. Another sample was found to contain 13.41 per cent of extraneous matter. In this case the vendor was seen to empty his serving bucket over the garden of his customer, but that in the churn remained and was found to be polluted to the extent just described. The vendor and his partner were fined £5 each.

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Association for the Blind on March 31st 1938.

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all of whom belong to the National Library, and for whom the

Association pays £1 per head each year. Two other persons are

learning Braille. There are also three readers of Moon type.

Thirty-six persons are in receipt of a weekly allowance. The total

sum spent on this in 1937-1938 was £1,215-15-0. £200 towards the

expenses of the Association, £30 of this being spent in respect of

mentally defective persons, who receive instruction from Miss White.

During the year 8 new cases were registered (3 males and 5 females).

Three women were transferred to other areas, and 7 blind persons died

(3 men and 4 women). £1,000 has been spent on the provision of

glasses for cases of partial blindness.

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City, but in 1936 25 samples (28 being formal and 67 informal) were

reported on. 34 were samples of milk. One formal sample of milk

was reported on; five follow-up samples were taken within 48 hours

and these were reported to be genuine. Another sample was found to

contain 18.41 per cent of extraneous matter. In this case the vendor

was found to empty his weighing bucket over the kitchen of the customer,

but that in the future the bucket should be washed before use.

Other samples were found to contain 12.5 per cent of extraneous matter.

Eleven samples of butter and 11 of sausages were submitted to analysis. Alcoholic drinks came in for considerable attention, 9 samples being submitted to analysis, 3 of whisky, 2 of brandy, 1 of gin, 1 of rum, and 1 of alcoholic wine.

In the Liberty of Peterborough during the year 1937 fifteen samples were taken under the Sale of Food and Drugs Act. Five samples were taken informally and consisted of :- milk 2, potted meat 1, margarine 1, and lard 1. Ten samples of milk were taken formally. None of the samples were reported against.

#### EPIDEMIC DISEASES

The principal epidemic diseases are small-pox, measles, scarlet fever, diphtheria, whooping cough, enteric fever, and diarrhoea under 2 years of age. From these ailments there were 17 deaths, 7 from diarrhoea under 2 years of age; 6 from diphtheria; 2 from whooping cough, and 2 from measles. This gives an epidemic death rate of 0.30 per 1000 of the population, as compared with 0.109 in 1936; 0.09 in 1935; 0.31 in 1934; 0.17 in 1933, and 0.03 in 1932. There were no deaths from small pox; scarlet fever, or the typhoid and paratyphoid fevers.

#### INFECTIOUS DISEASES

The following are the infectious diseases notified in each area :-

<u>Disease</u>	Peterborough M.B.	Peterboro' R.D.	Barnack R.D.	Administrative County
Small-pox	0	0	0	0
Scarlet Fever	33	2	2	37
Diphtheria	134	8	0	142
Enteric Fever	1	1	0	2
Puerperal Fever	4	0	0	4
Puerperal Pyrexia	8	1	0	9
Erysipelas	8	0	0	8
Pneumonia	57	0	0	57
Totals :-	245	12	2	259



Eleven samples of butter and 11 of cheese were submitted to analysis. Alcoholic drinks came in for considerable attention, 9 samples being examined to analysis, 8 of whisky, 8 of brandy, 1 of gin, 1 of rum, and 1 of alcoholic wine.

In the liberty of Peterborough during the year 1937 fifteen samples were taken under the Sale of Food and Drugs Act. Five samples were taken informally and consisted of: milk 8, bottled meat 1, margarine 1, and lard 1. Ten samples of milk were taken formally. None of the samples were reported against.

EPIDEMIC DISEASES

The principal epidemic diseases are small-pox, measles, scarlet fever, diphtheria, whooping cough, enteric fever, and diarrhoea under 5 years of age. From these ailments there were 17 deaths, 7 from diarrhoea under 5 years of age; 6 from diphtheria; 2 from whooping cough, and 2 from measles. This gives an epidemic death rate of 0.30 per 1000 of the population, as compared with 0.109 in 1936; 0.09 in 1935; 0.31 in 1934; 0.17 in 1933, and 0.08 in 1932. There were no deaths from small pox, scarlet fever, or the typhoid and paratyphoid fevers.

INFECTIOUS DISEASES

The following are the infectious diseases notified in each area:-

Disease	M.B.	R.D.	R.D.	County	Administrative
Small-pox	0	0	0	0	0
Scarlet Fever	38	2	0	0	37
Diphtheria	134	8	0	0	142
Enteric Fever	1	1	0	0	2
Paratyphoid Fever	4	0	0	0	4
Paratyphoid Pyrexia	5	1	0	0	6
Erysipelas	8	0	0	0	8
Leptosmosis	57	0	0	0	57
Totals:-	245	12	0	0	257

These returns show a complete change from the previous year, when scarlet fever was prevalent and diphtheria at a low ebb. In 1937 diphtheria was very prevalent and 6 children and young persons died of the disease. The City Medical Officer says in his Report that parents do not accept immunization for diphtheria readily and there is no clinic in the City for this purpose. The County Council are, however, considering a scheme for the Rural Districts for children under school age. Dr Hawes reports 8 cases of diphtheria in the Peterborough Rural District. Four cases occurred in one house at Northborough, 1 at Helpston, 1 at Marholm, and 2 at Ailesworth. 3 of the 8 suffered from nasal diphtheria, did not feel ill, and were walking about. In one family a nasal case infected the mother, one sister and a brother who died. The five cases which affected the throat were of a serious character, the organism being of the Gravis type. Many of the cases were not notified to their doctors until the second, third, or fourth day. In the Barnack District there were only two cases of scarlet fever. All notified cases in the Peterborough and Barnack Districts were removed to hospital.

The Report of the City Medical Officer for 1937 is again not to hand, but during 1936 160 cases were admitted to the Isolation Hospital, 148 from the City, 11 from the Peterborough Rural District, and one from other districts.

In the near future the Isolation Blocks at Stamford Infirmary will be closing down, which will make it necessary to provide accommodation for cases from the Barnack Rural District.

These returns show a marked change from the previous year, when  
scarlet fever was prevalent and diphtheria of a low order. In 1937  
diphtheria was very prevalent and 3 children and young persons died of  
the disease. The City Medical Officer says in his report that parents  
do not accept immunisation for diphtheria readily and there is no plan  
in the City for this purpose. The County Council are, however,  
considering a scheme for the rural districts for children under school  
age. Dr Haver reports 8 cases of diphtheria in the Metropolitan Rural  
District. Four cases occurred in one house at Northborough, 1 at  
Hopton, 1 at Marlow, and 2 at Aldenham. 2 of the 8 entered from  
neural diphtheria, 519 not local ill, and were seeking about. In one  
family a neural case infected the mother, one sister, and a brother who  
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In the near future the Isolation Blocks at the Isolation Hospital will be  
closing down, which will also be necessary to provide accommodation  
for cases from the Barnack Rural District.

## H O U S I N G

### City of Peterborough

The 1936 Report for the City is to hand, but not that for 1937. No houses were built by the Local Authority, but as many as 423 by private enterprise.

1,238 houses were inspected in the City in 1936. 10 were inspected under Part 1 of the Housing Act 1930 in connection with slum clearance. 168 were partially unfit. One Demolition Order was made and executed. 181 houses were rendered fit in consequence of informal action.

### Peterborough Rural District

Forty-six houses have been built, 7 at Eye, 14 at Glinton, 8 at Northborough, 5 at Deeping Gate, 1 at Etton, 3 at Helpston, 4 at Peakirk, 2 at Newborough, and 2 at Castor.

The Council is building 30 more houses spread over the district.

173 houses were inspected. In 62 defects were remedied.

A timber framed bungalow was demolished.

### Barnack Rural District

In the Barnack Rural District 121 houses were inspected.

Eight houses were built by the Council during the year, 4 at Barnack, and 4 at Wittering. One house was erected privately at St Martin's Without.

### Overcrowding

The Report of the City Medical Officer for 1937 is not to hand, but that for 1936 is now in my possession.

108 houses were overcrowded, 42 of these being Corporation property, and the remainder being privately owned.

It appears that 940 houses are owned by the Corporation, and 10,620 by private owners. In addition 5 caravans and huts were overcrowded.

In the Rural District of Peterborough the survey and measurement of all working class cottages in the district was completed during the year. 30 houses were definitely overcrowded, and 30 houses were at the end of the year in course of construction.

In the Barnack Rural District only 8 houses were definitely overcrowded, and this includes the 5 cases mentioned last year.

8 new houses have been erected by the Council.

### Housing ( Rural Workers ) Act.

The response to the Government offer to give assistance to owners by means of grants or loans in the reconditioning of houses has, says the Sanitary Inspector to the Peterborough Rural District, been very poor. Only one application was received during the year for 3 houses at Newborough.

In the Barnack Rural District 2 applications were received. A loan was made for a house at Barnack. A grant was made for reconditioning a house at Ashton, but at the end of the year the work had not begun.

I have regretted that you did not see your way as a County Council to undertake this work. In Rutland the work has been carried out by the Public Health Committee of the County Council and has been very successful, the results in proportion to the size of the County being second to none.

HOUSING

City of Peterborough

The 1938 Report for the City is to hand, but not that for 1937. No houses were built by the Local Authority, but as many as 423 by private enterprise. 1,338 houses were inspected in the City in 1938. 10 were inspected under Part I of the Housing Act 1930 in connection with slum clearance. 168 were partially unfit. One Demolition Order was made and executed. 181 houses were rendered fit in consequence of informal action.

Peterborough Rural District

Forty-six houses have been built, 7 at Eye, 14 at Glinton, 8 at Northborough, 5 at Redden Gate, 1 at Eton, 3 at Hopton, 4 at Park, 2 at Newborough, and 5 at Ouse. The Council is building 30 more houses spread over the district. 178 houses were inspected. In 63 defects were remedied. A timber framed bungalow was demolished.

Barnack Rural District

In the Barnack Rural District 121 houses were inspected. Eight houses were built by the Council during the year, 4 at Barnack and 4 at Wittering. One house was erected privately at St Martin's Without.

Overcrowding

The Report of the City Medical Officer for 1937 is not to hand, but that for 1938 is now in my possession. 106 houses were overcrowded, 45 of these being Corporation property, and the remainder being privately owned. It appears that 240 houses are owned by the Corporation, and 10,820 by private owners. In addition 5 caravans and flats were overcrowded. In the Rural District of Peterborough the survey and measurement of all working class cottages in the district was completed during the year. 30 houses were definitely overcrowded, and 30 houses were at the end of the year in course of construction. In the Barnack Rural District only 8 houses were definitely overcrowded, and this included the 5 cases mentioned last year. 8 new houses have been erected by the Council.

Housing (Rural Workers) Act

The response to the Government offer to give assistance to owners by means of grants or loans in the remedial work of houses has, says the Secretary Inspector to the Peterborough Rural District, been very poor. Only one application was received during the year for 8 houses at Northborough. In the Barnack Rural District 2 applications were received. A loan was made for a house at Barnack. A grant was made for remedial work on a house at Ashton, but at the end of the year the work had not begun.

I have regretted that you did not see your way as a County Council to undertake this work. In Barnack the work has been carried out by the Public Health Committee of the County Council and has been very successful; the results in proportion to the size of the County being second to none.

## SANITARY CIRCUMSTANCES OF THE AREA

In the Peterborough Rural District Eye is the only village where there is a satisfactory scheme of sewage disposal, and only two villages - Castor and Ailesworth - had during 1937 a scavenging system. A scheme for the proper disposal of house refuse has now been started for the whole district. The work is carried out by contract. With the co-operation of the County Council, the old stone drains are being replaced by sanitary pipes.

In the Barnack Rural District there is a systematic collection by the Council scavenger of the pail closets and dry house refuse throughout the district.

Additional remarks on the proposed sewage scheme are contained in the City Medical Officer's Report for 1936.

Flooding occurs in Midgate and in the Oundle Road. Midgate will be relieved by constructing an overflow sewer from St John's Street. The storm water will be discharged into the Nene to the east of the Bridge. In the case of Oundle Road a short length of sewer will be relaid to obviate back flow. Further the Car Dyke will be diverted into the existing outfall sewer. The southern outfall sewer will be abandoned and several new rider sewers will replace it.

In 1936, as mentioned in my Report for that year, the swimming baths and pools were provided for the public. The pool for adults is 55 yards long and 60 feet wide; that for children 70 feet by 24 feet. Sun bathing accommodation is provided. The water is rendered sterile after filtration by means of a chlorine ammonia plant.

### Water Supply

In the Barnack area the new supply from Barnack has now been extended to Ashton. A piped supply from a spring in Thornhaugh supplies the villages of Wansford and Thornhaugh. There are now only two villages in the Barnack area without a conducted supply - Wittering and Southorpe

In the Peterborough Rural District the supply from the Peterborough Corporation Water mains has been well maintained. The following villages obtained the amounts mentioned below :-

Eye	7,363,000 gallons as against 6,931,000 in 1936.		
	The increase is due to extension of mains and the erection of new houses.		
Marholm	1,504,000	( 1,278,000 )	1936.
Glington	568,000	( 276,000 )	"
Northborough	94,000	( 48,000 )	"

The total quantity is 9,529,000 gallons as against 8,540,000 in 1936.

During the year a scheme for the supply of all the villages in the district from the City of Peterborough supply was completed. It is stated that 40 miles of main have been provided. No remarks about the water supply of the City of Peterborough are made in the City Medical Officer's Report for 1936.

SANITARY CIRCUMSTANCES OF THE AREA

In the Peterborough Rural District the only villages where there is a satisfactory scheme of sewage disposal, and only two villages - Garsor and Ailsworth - had during 1937 a sewerage system. A scheme for the proper disposal of house refuse has now been started for the whole district. The work is carried out by contract. With the co-operation of the County Council, the old drains are being replaced by sanitary pipes.

In the Barnack Rural District there is a systematic collection by the Council scavenger of the pig manure and dry house refuse throughout the district.

Additional remarks on the proposed sewage scheme are contained in the City Medical Officer's Report for 1935. Flooding occurs in Kibbale and in the Gards Road. A bridge will be relieved by constructing an overflow sewer from St John's Street. The storm water will be discharged into the River to the east of the Bridge. In the case of Gards Road a short length of sewer will be laid to relieve the flow. Further the Gar Dike will be diverted into the existing outfall sewer. The southern outfall sewer will be abandoned and several new lines will replace it.

In 1935, as mentioned in my report for that year, the swimming baths and pools were provided for the public. The pool for adults is 55 yards long and 25 feet wide; that for children 70 feet by 24 feet. Sun bathing accommodation is provided. The water is rendered sterile after filtration by means of a chlorine ammonia plant.

Water Supply

In the Barnack area the new supply from Barnack has now been extended to Ashton. A piped supply from a spring in Thoroughpenny supplies the villages of Wansford and Thoroughpenny. There are now only two villages in the Barnack area without a conducted supply - Wittering and Southby.

In the Peterborough Rural District the supply from the Peterborough Corporation Water mains has been well maintained. The following villages obtained the amounts mentioned below:

Village	1935	1936
Northborough	24,000	42,000
Claydon	58,000	58,000
Northorpe	1,504,000	1,578,000

The total quantity is 2,582,000 gallons as against 2,540,000 in 1935. During the year a scheme for the supply of all the villages in the district from the City of Peterborough supply was completed. It is stated that 40 miles of main have been provided. No remarks about the water supply of the City of Peterborough are made in the City Medical Officer's Report for 1935.

## INSPECTION AND SUPERVISION OF FOOD

In the Peterborough Rural District there are 8 registered slaughter-houses. 352 inspections were made. A slaughter-house at Newborough has been demolished and a new up-to-date building provided. The following amounts of meat were condemned or surrendered :- 400 lb of beef; 6 stone of pork, and 1 lamb.

In the Barnack Rural District there are 3 slaughter houses; 126 inspections were made. No meat was condemned.

In 1936 in the City of Peterborough 22 licensed slaughter houses were on the Register. Five slaughter houses were improved. The yards were repaired in 4, and four new offal bins were provided. The following were surrendered on account of tuberculosis :- 1,131 stones of beef; 7 cows; 9 ox beasts, and 9 heifers. 3 pigs were destroyed for tuberculosis, 1 pig for pneumonia, 6 pigs for erysipelas, 2 steers for dropsy, and 1 cow for general bruising.

### Milk and Dairies Order

In the Peterborough Rural District there were at the end of 1937 81 producers and 2 purveyors of milk. Three new cowsheds and 3 new dairies and can washing sheds have been erected during the year. 514 inspections were made.

In the Barnack Rural District 21 licences are held and 137 inspections were made.

In the City of Peterborough in 1936 there were 24 retail producers, and 13 wholesale producers. There were 41 retail purveyors in the City, and 21 more with premises outside the City. 78 shopkeepers sold bottled milk. 206 visits were paid. 21 samples of milk were sent to Cambridge for microscopical and biological examination. In one of these the tubercle bacillus was found. There is one licence for pasteurised and two for Grade A. T.T.

### Veterinary Inspection

Since my last Report was written and up till the end of August 1938, 1,120 examinations of cows were made and reported on by Captain W.K. Townson. It appears that 7 cases of tuberculosis were found, compared with 27 last year, and 10 cases of mastitis.

The Tuberculin Tested herds seem to be in a very satisfactory state; only 2 reactors were found and these were at once removed from the herd.

Several microscopical examinations were made by Captain Townson.

In 4 samples no tubercle bacilli were found, and in 6 cases of mastitis streptococci were found in 4.



INSPECTION AND SUPERVISION OF FOOD

In the Peterborough Rural District there are 5 registered slaughterhouses. 322 inspections were made. A slaughterhouse at Newborough has been demolished and a new up-to-date building provided. The following amounts of meat were condemned or surrendered: 400 lb of beef; 5 stone of pork; and 1 lamb.

In the Barnack Rural District there are 3 slaughterhouses: 128 inspections were made. No meat was condemned.

In 1938 in the City of Peterborough 82 licensed slaughterhouses were on the Register. Five slaughterhouses were improved. The yards were repaired in 4, and four new oil bins were provided. The following were surrendered on account of tuberculosis: 1,131 stone of beef; 7 cows; 2 oxen; and 2 calves. 3 pigs were destroyed for tuberculosis, 1 pig for pneumonia, 6 pigs for erysipelas, 2 steers for drupey, and 1 cow for general malingering.

Milk and Dairy Order

In the Peterborough Rural District there were at the end of 1937 61 producers and 2 purveyors of milk. There are now 60 producers and 2 new dairies and one washing sheds have been erected during the year. 614 inspections were made.

In the Barnack Rural District 51 producers are held and 187 inspections were made.

In the City of Peterborough in 1938 there were 24 retail producers and 13 wholesale producers. There were 41 retail purveyors in the City, and 21 more with premises outside the City. 78 shopkeepers sold bottled milk. 208 cattle were paid. 21 samples of milk were sent to Cambridge for microbiological and biological examination. In one of these the tubercle bacillus was found. There is one licence for pasteurised and two for Grade A. T. found.

Veterinary Inspection

Since my last Report was written and up till the end of August 1938, 1,130 examinations of cows were made and reported on by Captain W.K. Townson. It appears that 7 cases of tuberculosis were found, compared with 27 last year, and 10 cases of mastitis. The tuberculin tested herds seem to be in a very satisfactory state; only 2 reactors were found and these were at once removed from the herd. Several microbiological examinations were made by Captain Townson. In 4 samples no tubercle bacilli were found, and in 6 cases of mastitis streptococci were found in 4.