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"SALUS POPULI SUPREMA LEX"



City of Portsmouth

HEALTH REPORT

For the Year 1933

BY

A. MEARNS FRASER

M.D. (Edin. Univ.), D.P.H. (Camb. Univ.)

Medical Officer of Health


Medical Officer of Health to the Port of Portsmouth,

Medical Adviser to the Education Committee.

INCLUDING

The Report of the Public Analyst

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1932-33.

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Deputy Medical Officer of Health :

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L.R.C.P., L.R.C.S., L.R.F.P.S.

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R.P.C. Lond.

Chief Clerk and Meteorological Observer :

L. C. ROGERS, Cert. S.I.B.

Meat, Food and Sanitary Inspector :

D. HOGG, Cert. R. San. I., Meat and Foods Cert. Inc. San. Assoc. of Scotland.

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Inspector under the Food and Drugs (Adulteration) Act and Sanitary Inspector :

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Housing Inspectors :

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F. T. RIPPIN, Cert. S.I.B. and Meat and Foods Cert.

W. E. ANSTEE, Cert. S.I.B. W. J. SANDFORD, Cert. S.I.B.

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Disinfector : B. J. HILLS.

Messenger : G. PITT.

**Certified Midwife.*

†*Health Visitors Cert. R.S.I.*

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Assistant Dental Surgeons :L. J. THRELFALL, L.D.S., R.C.S. (Eng.)
MISS M. C. LAUDER, L.D.S., R.C.S. (Eng.).**Nurse in Charge :**

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Medical Examiner for New Corporation Appointments, and
Medical Officer, Corporation Tramways.**

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C. H. BROWNE, L.R.C.P.I. & L.M., D.P.H.

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J. C. DAVIS, M.B., Ch.B., B.A.O. (Dub.).

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A. B. DOYLE, L.R.C.P., L.R.C.S. (I).

Medical Officer's Report for 1933.

*To the Chairman and Members of the
Health Committee.*

MADAM AND GENTLEMEN,

I have the honour to submit for your consideration the Annual Report on the health of the City of Portsmouth for the past year. I had thought that the report for 1932 would have been the last that I should submit, but Dr. Williamson, my successor, unfortunately was taken seriously ill soon after taking up his appointment, and, being appointed to act during his enforced absence, I have been enabled to prepare this report.

One of the most important steps taken during the year was the adoption of a five-year programme for slum clearance. At the moment the housing question continues to be one of the most pressing public health problems, and the measures now decided upon should go a considerable way towards its solution in Portsmouth.

Another matter of importance, to which reference will be found in this report, is the effectual co-ordination of all the medical services of the City.

Satisfactory features in the health statistics of the past year are the very low maternal mortality, 1.9 deaths per 1,000 births; the infantile mortality rate of 52 per 1,000 births; and the lowest death rate from pulmonary tuberculosis ever recorded in Portsmouth, namely, 0.67 deaths per 1,000 population.

I may on this occasion record the fact that during the 38 years in which I have been Medical Officer of Health the City has more than doubled in size, and the population has increased by over 70,000. The great developments which the public health service has seen during this period are far too numerous to be discussed in this Report but a reference to some of the most important will be found on pages 46—53.

I have the honour to be, Madam and Gentlemen,

Your obedient Servant,

A. MEARNS FRASER,

Medical Officer of Health.

SUMMARY FOR 1933.

Civil Population (estimated to middle of 1933) 251,200

1.—GENERAL STATISTICS.

Area in Acres (land and inland water)	9,217
Population (Census, 1931)	Total 249,283
Number of Inhabitated Houses	60,529
Rateable Value, 1st April, 1933	£1,767,600
Sum represented by a Penny Rate	£6,880
Average number of persons in each house (Census 1931)	4.5
Average number of persons per acre (Census, 1931)	31.3
Total Rainfall	21.07 inches 535.5 millimetres

2.—EXTRACTS FROM VITAL STATISTICS.

	Total	Male	Female	
LIVE BIRTHS :				
Legitimate	3,640	1,830	1,810	} Birth-rate 15.3
Illegitimate	224	116	108	
Total	3,864	1,946	1,918	
STILLBIRTHS :				
Legitimate	149	81	68	} Rate per 1,000 total births 41.9
Illegitimate	13	8	5	
Total	162	89	73	
DEATHS	3,125	1,552	1,573	} Rate per 1,000 population 12.4
Deaths from diseases and accidents of pregnancy and childbirth :				
From Puerperal Sepsis	4	From other Puerperal causes	4	
Mortality rate per 1,000 total births :—				
From Puerperal Sepsis	0.99	From other Puerperal causes	0.99	
Total maternal mortality rate				1.98
Death Rate of Infants under one year of age :				
All Infants per 1,000 live births .....	.....	.....	.....	52
Legitimate Infants per 1,000 legitimate live births .....	.....	.....	.....	47
Illegitimate Infants per 1,000 illegitimate live births .....	.....	.....	.....	111

COMPARISON WITH PREVIOUS YEAR.

	1933 Population		1932 Population	
	Total—251,200		Total—253,100	
	Number	Rate per 1000 living	Number	Rate per 1000 living
BIRTHS	3,864	15.3	4,092	16.2
DEATHS	3,125	12.4	3,101	12.2
Principal Zymotic Diseases	59	0.23	91	0.36
Small-pox	—	—	—	—
Measles	4	0.01	48	0.19
Scarlet Fever	10	0.03	5	0.01
Diphtheria	9	0.03	2	0.00
Whooping Cough	17	0.06	6	0.02
Fever	—	—	—	—
Diarrhoea (under 2 years)	19	0.07	30	0.11
Pulmonary Tuberculosis	170	0.67	213	0.84
Cancer	390	1.55	362	1.43
Influenza	148	0.58	58	0.22
	Number	Rate per 1000 Births	Number	Rate per 1000 Births
Under 1 year of age	203	52	246	60

AVERAGE DEATH-RATE for previous Ten years (1923-1932) 12.22

VITAL STATISTICS.

According to the Registrar General's estimate the population of the City to the middle of 1933 was 251,200, or 1,900 less than in the previous year.

The death-rate was 12.4 and the death-rate for England and Wales was 16.2 deaths per 1,000 population.

Amongst the causes of death it is satisfactory to note that only 170 were due to pulmonary tuberculosis, this is the lowest number from this disease ever recorded in one year in Portsmouth.

Another satisfactory feature is that only 8 deaths occurred from Puerperal Sepsis and other causes of maternal mortality. This gives a maternal mortality rate of 1.98 and is 55 per cent lower than the rate for the whole country which was 4.23.

There were only 203 deaths under 1 year of age, this gives an infantile mortality rate of 52 deaths per 1,000 births. This is the lowest rate ever recorded in Portsmouth and compares favourably with the rate, 64, for England and Wales.

The deaths from cancer numbered 390, although the deaths from this disease have shewn a steady increase for many years there are many factors which indicate that this numerical increase in the number of deaths is not so alarming as the actual figures suggest.

There were 3,864 births during the year giving the lowest birth-rate ever recorded in Portsmouth, namely, 15.3 births per 1,000 population, this birth-rate is however slightly higher than that for the whole country which was 14.4.

The usual statistical tables are submitted and from these I think it will be seen that the health of the City during the past year may be reported as satisfactory. There have been no outstanding causes of illness needing special comment.

TABLE I.

Table showing the Population, Marriages, Inhabited Houses, Births and Deaths, for the year 1933, and the ten preceding years.

GROSS NUMBERS.

Year	Estimated Civil Population	No. of Inhabited Houses	Marriages	Registered Births	Total Number of Deaths		
					Total all ages	Under 1 year	Under 5 years
1933	251,200	60,529	2,140	3,864	3,125	203	306
1932	253,100	59,780	2,164	4,092	3,101	246	338
1931	228,900	58,106	2,067	4,454	2,950	239	336
1930	242,000	57,591	2,242	4,409	2,856	250	415
1929	242,000	56,861	2,017	4,519	3,345	293	438
1928	240,700	54,740	2,100	4,579	2,669	242	359
1927	232,100	54,068	1,981	4,349	2,877	235	410
1926	231,500	53,279	1,950	4,636	2,703	247	395
1925	232,900	52,649	1,958	4,857	2,802	296	447
1924	232,000	52,161	1,937	5,022	2,977	348	542
1923	230,718	51,692	1,924	5,314	2,524	276	433
Average 10 years 1923-32	236,591	55,092	2,033	4,612	2,879	266	410

TABLE Ia.

Table showing Population, Acreage, Density, Birth-rate, Death-rate, Infantile Mortality-rate and Tuberculosis Death-rate in each of the Wards of the City.

WARD	Area in Acres	Population Census 1931	Density per Acre	Birth Rate (Per 1000 Pop.)	Death Rate (Per 1000 Pop.)	Infantile Mortality Rate (Per 1000 Births)	Tuberculosis (All Forms) Death Rate (Per 1000 Pop.)
1. St. Thomas	575	17,088	29.71	14.0	13.6	37	0.88
2. Portsea	480	21,339	*44.45	12.6	13.1	93	0.89
3. Nelson	235	15,739	66.97	13.9	10.4	77	0.95
4. North End	743	15,523	20.89	15.4	12.7	45	0.70
5. Buckland	189	14,493	76.68	15.1	11.7	18	0.89
6. Kingston	737	16,791	22.78	13.0	6.0	34	0.35
7. Highland	447	14,472	32.37	12.4	13.3	55	0.34
8. St. Simon	341	16,560	48.56	10.8	12.9	63	0.60
9. Havelock	196	15,772	80.47	11.3	16.5	68	0.69
10. St. Paul	183	15,717	85.88	14.6	16.1	65	0.83
11. Guildhall	172	16,500	95.92	17.5	11.5	48	0.97
12. Fratton	184	13,080	71.08	12.9	13.1	41	0.83
13. St. Mary	138	16,165	117.13	16.7	14.2	70	1.24
14. Charles Dickens	142	15,138	106.00	19.8	14.0	56	0.99
15. Cosham	3,167	11,233	3.54	29.3	10.1	24	0.87
16. Meredith	1,288	16,815	13.05	18.5	8.3	37	0.47
WHOLE CITY	9,217	252,425	27.39	15.3	12.4	52	0.79

* The density of Portsea Ward excluding the Dockyard is 112.3.

TABLE II.

Showing Births and Deaths Registered in Portsmouth during the four quarters ending 30th December, 1933.

QUARTER	BIRTHS	STILLBIRTHS	DEATHS	Deaths of Infants under 1 year of age	Deaths from							Rate per 1,000 living		Death-rate per 1,000 living					Death-rate per 1,000 Births		
					Enteric Fever	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Diarrhoea and Enteritis (under 2 years)	Total Births	Total Deaths	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Diarrhoea and Enteritis (under 2 years)	Infants under 1 year	
1st Qtr.	1059	41	1171	76	—	—	3	8	1	132	3	16.8	18.6	—	0.05	0.13	0.02	2.09	—	2.8	72
2nd Qtr.	1041	44	605	40	—	—	—	4	—	5	3	16.5	9.6	—	—	0.06	—	0.08	—	2.9	38
3rd Qtr.	927	41	566	40	—	—	2	2	2	1	15	14.7	8.8	—	0.03	0.03	0.03	0.02	—	16.2	43
4th Qtr.	837	43	717	49	—	4	5	—	5	11	3	13.1	11.4	0.06	0.08	—	0.08	0.17	—	3.6	59
TOTAL	3864	169	3059	205	—	4	10	14	8	149	24	15.3	12.1	0.01	0.04	0.05	0.03	0.59	—	6.4	53

The above statistics have been taken from the Registrar General's Quarterly Returns, and have not been corrected.

TABLE III.

Table showing the Annual Birth-rate, Rate of Mortality, and Death-rates among children for the year 1933, and ten preceding years.

Year	Birth-rate per 1,000 of the Population	Annual Rate of Mortality per 1,000 living from all causes	Annual Rate of Mortality per 1,000 living from 7 Principal Zymotic Diseases	Deaths of Children under 1 year Percentage to total Deaths	Proportion of Deaths of Children under 1 year per 1,000 Registered Births	Deaths of Children under 5 years : Percentage to total Deaths
1933	15.38	12.44	0.23	6.4	52	9.7
1932	16.21	12.28	0.36	7.9	60	10.9
1931	17.49	12.88	0.31	8.1	55	11.3
1930	16.30	11.80	0.71	8.7	59	14.5
1929	16.80	13.82	0.49	8.7	66	13.0
1928	17.21	11.34	0.41	8.9	55	13.2
1927	17.08	12.68	0.52	7.9	55	13.9
1926	18.20	11.67	0.60	9.1	54	14.6
1925	19.07	12.30	0.52	10.3	62	15.5
1924	20.10	12.58	0.44	11.6	69	18.1
1923	21.06	10.93	0.61	10.9	52	17.1
Average of 10 yrs. 1923-32	17.95	12.22	0.49	9.1	58	14.1

TABLE IV.

Showing the Population, Birth-rates, Death-rates, Zymotic Death-rates, and Deaths under 1 year to 1,000 Births in 20 Large Towns for the year 1933.

NAME OF TOWN	Population as estimated by Registrar General Mid-1933	Per 1,000 living		DEATH-RATES PER 1,000 LIVING										Deaths of Children under 1 year of age to 1,000 Births
		Birth Rate	Death Rate	Small-pox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Enteric Fever	Diarrhoea & Enteritis under 2yrs.	Influenza	11		
													2		3	4	5	6	7	8	9	10	12
1. BIRMINGHAM	1,011,500	15.0	11.2	—	0.08	0.02	0.03	0.03	0.00	0.11	0.47	66		
2. CROYDON	239,960	13.1	11.3	—	0.05	0.00	0.02	0.07	—	0.07	0.43	47		
3. WEST HAM	282,900	15.6	11.8	—	0.00	0.02	0.17	0.19	—	0.15	0.52	64		
4. BRISTOL	410,870	13.7	12.0	—	0.04	0.01	0.04	0.05	0.00	0.07	0.69	55		
5. SHEFFIELD	511,820	14.0	12.0	—	0.00	0.01	0.04	0.04	—	0.07	0.61	63		
6. PORTSMOUTH	251,200	15.4	12.4	—	0.02	0.04	0.07	0.04	—	0.07	0.59	53		
7. LONDON	4,298,600	13.2	12.5	0.0	0.02	0.02	0.08	0.08	0.00	0.15	0.52	60		
8. NEWCASTLE	286,500	16.4	12.7	—	0.13	0.06	0.09	0.03	0.00	0.19	0.51	76		
9. LEICESTER	241,500	13.4	12.8	—	0.07	0.01	0.07	0.05	—	0.13	0.65	75		
10. STOKE-ON-TRENT	275,100	16.2	13.0	—	0.00	0.01	0.07	0.03	—	0.17	0.94	89		
11. HULL	319,900	17.9	13.1	—	0.13	0.00	0.04	0.28	—	0.23	0.57	77		
12. PLYMOUTH	206,200	15.7	13.2	—	0.07	0.02	0.07	0.09	0.00	0.04	0.36	58		
13. NOTTINGHAM	283,030	15.8	13.4	—	0.18	0.01	0.04	0.02	0.00	0.20	0.51	85		
14. SUNDERLAND	187,400	19.8	13.5	—	0.12	0.14	0.02	0.02	0.00	0.38	0.47	89		
15. CARDIFF	222,000	15.5	13.6	—	0.14	0.02	0.06	0.09	0.00	0.13	0.64	77		
16. MANCHESTER	758,140	14.7	13.6	—	0.06	0.02	0.06	0.11	0.00	0.13	0.70	75		
17. LEEDS	485,000	13.7	13.6	—	0.04	0.02	0.06	0.18	0.00	0.20	0.52	81		
18. SALFORD	217,000	15.2	13.9	—	0.01	0.00	0.09	0.11	—	0.08	0.56	80		
19. LIVERPOOL	859,200	19.7	14.5	—	0.35	0.03	0.11	0.20	0.00	0.37	0.39	98		
20. BRADFORD	295,100	13.2	14.7	—	0.09	0.02	0.04	0.05	—	0.10	0.63	80		

TABLE V.

CAUSE OF DEATH	AGES														WARDS																TOTAL			
	0 to 1	1 to 2	2 to 5	5 to 15	15 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 and over	St. Thomas	Portsea	Nelson	North End	Buckland	Kingston	Highland	St. Simon	Have-lock	St. Paul	Guilford	Fratton	St. Mary	Charles Dickens	Cocham	Meredith	M.	F.	T.				
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	T.			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	T.			
Measles	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Scarlet Fever	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Whooping Cough	2	5	1	3	1	4	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
Diphtheria	2	5	1	3	1	4	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
Infantia	2	5	1	3	1	4	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
Erysipelas	5	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Acute Polio-myelitis	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Encephalitis Lethargica	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Cerebro-spinal Fever	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Pulmonary Tuberculosis	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Other Tuberculous Disease	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Syphilis	1	2	3	1	3	2	3	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Other Infectious Disease	1	2	3	1	3	2	3	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
General Paralysis of Insane and Tabes Dorsalis	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Cancer, all forms	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Diabetes	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Cerebral Haemorrhage	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Heart Disease	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Aneurysm	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Other Circulatory Diseases	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Bronchitis	4	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Pneumonia (all forms)	16	12	18	12	8	8	4	2	5	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Other Respiratory Diseases	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Peptic Ulcer	13	5	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Dysentery and Enteritis	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Appendicitis	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Cirrhosis of Liver	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Other Diseases of Liver	4	2	2	2	4	3	3	2	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Other Digestive Diseases	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Acute and Chronic Nephritis	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Puerperal Sepsis	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Other Puerperal Cases	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Constitutional Debility, Premature Birth, Diseases of Early Infancy	57	48	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Old Age	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Suicide - Solid or Liquid Poison	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
" Poisonous Gas	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
" Hanging	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
" Drowning	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
" Cutting or Piercing Instruments	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
" Jumping from High Place	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
" Other means	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Homicide	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Other Violence, Accident, etc.	2	2	2	1	3	6	3	4	6	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
All other Defined Causes	9	2	1	1	3	6	3	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Ill-defined Causes	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
TOTALS	M.	114	28	25	41	56	65	86	126	277	359	325	110	147	87	98	79	65	97	102	115	115	102	87	116	98	51	83	1552	3125				
	F.	89	23	27	38	41	61	89	155	236	294	520	124	133	76	109	91	35	96	108	147	136	87	86	113	115	63	60	1573	3125				

TABLE VI.

Table showing the Numbers and Death-rates per 1,000 of Population from the Seven Principal Zymotic Diseases, from Lung Diseases (excluding Phthisis), from Phthisis, and from all causes, during each Quarter and for the whole year 1933.

Quarter ending	The Seven Principal Zymotic Diseases * All ages		Lung Diseases (excepting Phthisis) †		Phthisis		From all Causes	
	No.	Rate per 1000	No.	Rate per 1000	No.	Rate per 1000	No.	Rate per 1000
1933								
March 31st	15	0.23	201	3.20	70	1.11	1193	18.99
June 30th	10	0.15	30	0.47	38	0.60	620	9.87
September 30th	23	0.35	29	0.46	31	0.49	579	9.21
December 31st	21	0.33	72	1.14	31	0.49	733	11.67
Totals	59	0.23	332	1.32	170	0.67	3125	12.44

* Includes Small-pox, Measles, Scarlet Fever, Whooping Cough, Diphtheria, Enteric or Typhoid Fever and Diarrhoea.

† Includes Laryngitis, Emphysema, Asthma, Bronchitis, Pneumonia, Pleurisy, and other Diseases of the Respiratory System.

TABLE VII.

Showing the number of Deaths in the years 1861 to 1933 from the Seven Principal Zymotic Diseases.

Year	Popula- tion	DISEASES							TOTALS	
		Small- pox	Measles	Scarlet Fever	Diph- theria	Whoop'g Cough	Fever	Diarr- hoea	Numbers	Rate per 1000 living
1861	95220	1	3	5	6	11	111	152	289	3.06
1862	96960	....	42	225	20	36	128	71	522	5.39
1863	98731	12	80	134	24	16	37	68	391	3.96
1864	100531	228	6	17	17	48	72	118	506	4.95
1865	102363	3	14	20	7	50	74	122	290	3.09
1866	104230	1	16	34	26	46	85	117	325	3.16
1867	106130	....	82	15	4	23	74	140	338	3.18
1868	108064	....	46	107	18	57	119	117	464	4.86
1869	110034	1	57	295	18	26	105	100	602	5.47
1870	112040	1	39	119	13	46	91	121	430	3.83
1871	114083	39	42	30	10	66	72	100	359	3.28
1872	114970	514	52	5	21	17	112	113	834	7.25
1873	116380	45	16	12	15	19	97	106	310	2.66
1874	117810	2	56	36	19	104	101	149	467	3.90
1875	119260	....	54	47	18	8	103	141	371	3.11
1876	120730	1	109	457	11	42	71	131	822	6.80
1877	122210	....	12	36	5	59	87	153	352	2.63
1878	123710	....	36	16	1	92	96	170	411	3.32
1879	125250	....	10	11	4	9	62	73	169	1.35
1880	126830	....	42	9	20	48	70	192	381	3.00
1881	128691	....	7	25	205	66	60	73	436	3.38
1882	131535	....	156	40	106	36	107	111	556	4.22
1883	134441	1	10	16	20	54	93	80	274	2.03
1884	137412	....	164	9	41	9	58	116	397	2.88
1885	140448	....	7	5	42	44	93	123	314	2.23
1886	143552	1	197	18	65	102	124	191	698	4.86
1887	146724	3	8	26	47	41	53	151	329	2.34
1888	149966	....	50	12	17	27	27	98	231	1.53
1889	153279	2	8	11	33	92	32	122	300	1.95
1890	156667	....	4	19	47	39	50	105	264	1.69
1891	160167	....	223	9	23	38	33	73	399	2.49
1892	163628	....	38	18	26	87	42	99	310	1.89
1893	165153	....	120	32	29	36	54	247	518	3.13
1894	167878	4	139	14	34	41	29	93	554	3.18
1895	170672	....	39	7	18	64	37	238	403	2.36
1896	173565	....	126	19	20	60	28	157	410	2.36
1897	176497	....	35	11	22	65	44	286	463	2.62
1898	179500	....	73	31	54	42	44	183	427	2.38
1899	182576	....	50	22	120	62	75	316	645	3.35
1900	185725	....	3	11	104	87	93	159	457	2.46
1901	188885	....	82	15	70	21	43	311	542	2.87
1902	193969	....	70	14	62	92	54	159	451	2.32
1903	198049	....	17	27	75	34	23	115	291	1.46
1904	202171	....	1	22	71	76	34	213	417	2.06
1905	206336	....	218	11	69	45	18	173	534	2.58
1906	210546	....	8	3	60	63	17	226	377	1.79
1907	214797	....	169	4	61	57	30	60	381	1.77
1908	219095	....	14	8	49	55	26	48	200	0.91
1909	223436	....	104	19	66	27	33	54	303	1.35
1910	227821	....	64	30	56	52	39	54	295	1.29
1911	232221	....	28	21	72	40	26	290	477	2.05
1912	236732	....	95	29	124	52	22	57	379	1.60
1913	241256	....	25	20	87	16	23	112	283	1.17
1914	245827	....	39	5	79	50	29	71	273	1.11
1915	*202141	....	123	17	68	36	18	52	314	1.55
1916	*197843	....	15	3	52	46	10	65	191	0.96
1917	*198527	....	44	7	40	36	4	48	179	0.90
1918	*203396	....	52	4	48	43	5	40	192	0.94
1919	*224846	....	14	2	42	20	....	37	115	0.51
1920	*233805	....	32	3	40	41	1	22	139	0.59
1921	*233929	....	23	13	30	21	3	87	177	0.75
1922	*236630	....	12	12	48	42	3	32	149	0.61
1923	*230718	....	39	5	46	9	11	31	141	0.61
1924	*232000	....	16	8	18	38	4	21	105	0.44
1925	*232900	....	20	6	43	30	5	19	123	0.52
1926	*231500	....	11	7	66	17	3	36	140	0.60
1927	*232100	....	40	3	47	18	....	15	123	0.52
1928	*240700	....	9	3	53	12	2	22	101	0.41
1929	*242000	....	1	7	24	19	2	67	120	0.49
1930	*242000	....	101	9	16	6	1	40	173	0.71
1931	*228900	....	1	12	12	21	3	24	73	0.31
1932	253100	....	48	5	2	6	....	30	91	0.36
1933	251200	....	4	10	9	17	....	19	59	0.23

* Civil population only.

TABLE VIII.
VACCINATION RETURNS FOR PAST THIRTY YEARS.

Year	No. of Births returned in birth sheets so registered from 1st Jan. to 31st Dec.	Successfully Vaccinated	Insusceptible to Vaccination	Had Small-pox	Dead Unvaccinated	Postponement by Medical Certificate	Removed to Districts the Vacc. Officer of which has been appraised	Removed to places to unknown	No. of these births remaining	No. in respect of which certificates of conscientious objections have been received
1904	5609	4916	23	.....	556	28	23	17	1	45
1905	5637	5015	15	.....	477	25	35	26	....	44
1906	5891	5117	35	.....	552	43	47	28	2	67
1907	5863	5069	20	.....	495	40	63	25	2	149
1908	5998	5120	35	.....	473	37	43	24	....	266
1909	5861	4938	46	.....	430	40	33	26	2	346
1910	5809	4667	15	.....	449	40	50	21	5	562
1911	5788	4376	57	.....	510	41	43	42	6	713
1912	5658	4314	26	.....	389	33	57	34	5	800
1913	5874	4321	35	.....	409	44	48	27	12	978
1914	5749	4235	42	.....	409	59	74	31	9	890
1915	4997	3785	29	.....	288	47	50	18	11	769
1916	5208	3875	31	.....	321	39	56	29	9	848
1917	4613	3405	13	.....	256	32	54	37	6	810
1918	4810	3459	38	.....	263	38	118	30	5	859
1919	5195	3752	13	.....	302	26	76	38	4	984
1920	6600	4790	38	.....	303	30	116	29	5	1289
1921	5662	4083	18	.....	265	32	82	26	4	1152
1922	5528	4105	11	.....	269	23	61	18	2	1039
1923	5327	4243	28	.....	239	40	86	15	2	674
1924	5089	4004	21	.....	243	26	45	16	3	731
1925	4884	3772	15	.....	223	24	54	14	2	780
1926	4637	3673	42	.....	185	26	53	14	2	642
1927	4353	3418	35	.....	157	28	48	16	3	648
1928	4579	3541	38	.....	194	27	63	20	5	691
1929	4518	3395	86	.....	222	33	52	20	2	708
1930	4407	3232	28	.....	174	29	70	35	12	827
1931	4454	3152	36	.....	185	87	72	65	76	781
1932	4174	2872	22	.....	202	133	74	51	20	799
1933	2153	1458	7	.....	77	68	33	40	32	438

(to June)

TABLE IX.
VACCINATION RETURNS—1st January to 30th June, 1933.

Registration Sub-Districts comprised in the Vaccination Officer's District.	Number of Births returned in the Birth List Sheets as registered from 1st January to 30th June, 1933	Number of these Births duly entered by 31st Jan., 1933 in Columns 1, 2, 4 and 5, of the Vaccination Register Birth List Sheets, viz.:					Number of these Births which on 31st January, 1934, remained unentered in the Vaccination Register on account (as shown by Report Book) of				Number of these Births remaining on 31st January, 1933, neither duly entered in the Vaccination Register (columns 3, 4, 5, 6 & 7 of this Return) nor temporarily accounted for in the Report Book (columns 8, 9 and 10 of this Return).
		Col. 2		Col. 4 Number in respect of whom Certifi- cates of Con- scientious Objection have been received	Col. 5 Dead Unvac- cinated	Postpone- ment by Medical Certificate	Removal to Districts the Vaccination Officer of which has been duly apprised	Removal to places un- known, or which cannot be reached; and cases not having been found			
		Col. 1 Success- fully Vaccin- ated	Insuscep- tible of Vaccin- ation						Had Small- Pox		
1	2	3	4	5	6	7	8	9	10	11	
1. North End and Buckland	664	445	2	...	147	21	12	9	21	7	
2. Kingston and East Southsea	496	335	1	...	96	20	20	11	4	9	
3. Portsea and Landport	460	318	1	...	90	16	19	5	6	5	
4. Portsmouth and Mid-Southsea	533	360	3	...	105	20	17	8	9	11	
Totals	2153	1458	7	...	438	77	68	33	40	32	
VACCINATION OF CHILDREN whose Births were registered in this District from Jan. 1st to Dec. 31st, 1932, inclusive.											
1. North End and Buckland	1235	845	7	...	255	48	40	22	12	6	
2. Kingston and East Southsea	985	653	2	...	191	52	32	20	27	8	
3. Portsea and Landport	894	642	4	...	138	61	30	12	4	3	
4. Portsmouth and Mid-Southsea	1060	732	9	...	215	41	31	21	8	3	
Totals	4174	2872	22	...	799	202	133	75	51	20	

INFECTIOUS DISEASES.—The following cases of infectious diseases were notified during the year :—

Disease	Cases Notified*	Admitted to Hospital	Total Deaths
Diphtheria	194	185	9
Scarlet Fever	864	801	10
Enteric Fever	7	3	—
Puerperal Fever	13	9	4
Puerperal Pyrexia	14	—	—
Acute Primary and Influenzal Pneumonia	52	21	148
Cerebro-spinal Meningitis	9	8	8
Poliomyelitis	3	—	1
Encephalitis Lethargica	2	3	4
Erysipelas	74	41	8
Dysentery	1	1	—
Ophthalmia Neonatorum	15	1	—
Pemphigus Neonatorum	4	—	—
Tuberculosis	410	251	199

* An analysis of these cases into age groups is given in Table II of the Appendix.

All the premises on which the above cases occurred were visited and precautionary measures taken to prevent the spread of disease. No epidemics occurred.

The following particulars are given with regard to the 15 cases of ophthalmia neonatorum (inflammation in the eyes of new-born babies) at one time one of the most frequent causes of permanent blindness :—

OPHTHALMIA NEONATORUM.

Cases Notified	Treated		Vision Unimpaired	Vision Impaired	Total Blindness	Deaths
	At Home	In Hospital				
15	14	1	15	Nil	Nil	Nil

TABLE X.
WEEKLY RETURN of cases of Infectious Disease.

Week ending 1933	Small-pox	Scarlet Fever	Diphtheria	Enteric Fever	Pneumonia	Puerperal Fever	Puerperal Pyrexia	Cerebro-spinal Fever	Encephalitis Lethargica	Acute Poliomyelitis	Erysipelas	Ophthalmia Neonatorum	Dysentery	Pemphigus Neonatorum	Tuberculosis		Total
															Pul-monary	Non-Pul-monary	
Jan. 7	...	10	3	1	8	...	...	...	...	...	1	...	...	...	1	...	24
" 14	...	7	3	...	8	1	...	...	...	...	1	...	...	...	6	1	27
" 21	...	12	4	...	7	...	...	...	...	...	...	1	...	...	9	1	34
" 28	...	12	6	...	5	...	1	4	...	...	2	1	...	...	10	3	44
Feb. 4	...	7	...	1	7	...	...	...	...	...	2	...	...	...	7	1	25
" 11	...	6	7	...	2	1	...	1	...	...	1	...	...	...	9	3	30
" 18	...	13	6	...	4	...	...	...	...	...	1	...	...	...	9	1	34
" 25	...	13	2	...	2	2	1	...	...	...	2	1	...	...	5	...	28
Mar. 4	...	15	3	...	...	1	...	1	...	...	1	...	...	...	3	1	25
" 11	...	5	5	...	1	3	...	...	1	...	2	1	...	...	14	2	34
" 18	...	14	2	...	...	...	3	...	...	...	1	1	...	...	9	1	31
" 25	...	7	6	...	1	...	...	...	...	...	1	...	...	...	10	2	27
April 1	...	8	6	...	...	2	...	1	...	1	3	...	...	...	7	1	29
" 8	...	9	1	1	...	...	2	1	...	...	3	...	...	...	11	1	29
" 15	...	16	1	...	...	...	...	...	...	...	3	1	...	...	5	...	26
" 22	...	8	5	...	...	...	1	...	...	...	...	...	...	...	14	1	29
" 29	...	8	1	...	...	...	...	...	...	...	3	...	...	...	7	1	20
May 6	...	10	1	...	1	...	...	...	...	...	2	...	...	...	5	...	19
" 13	...	10	4	1	...	...	...	...	...	...	...	1	...	...	12	...	28
" 20	...	16	2	...	1	...	...	...	...	...	2	...	...	...	7	1	29
" 27	...	21	4	...	...	...	...	...	...	...	...	...	...	...	19	...	44
June 3	...	16	2	...	...	...	2	...	...	...	2	1	...	...	9	...	32
" 10	...	11	2	1	1	...	...	...	...	...	2	...	...	...	6	1	24
" 17	...	8	2	...	...	...	...	...	...	...	2	...	...	...	4	1	17
" 24	...	14	7	...	...	...	...	...	...	1	2	1	...	...	6	...	31
July 1	...	20	9	...	...	...	...	1	...	...	...	...	...	...	4	...	34
" 8	...	14	5	...	...	...	...	...	...	...	...	...	...	...	14	2	35
" 15	...	11	4	...	...	...	...	...	...	...	1	...	...	...	7	2	25
" 22	...	16	3	...	...	...	...	...	...	...	...	...	...	...	9	2	30
" 29	...	7	7	...	...	...	...	...	...	...	...	...	...	...	8	1	23
Aug. 5	...	6	2	...	...	...	...	...	...	...	1	...	...	...	1	...	10
" 12	...	5	4	...	...	...	...	...	...	1	1	...	...	...	4	...	15
" 19	...	7	3	...	...	...	...	...	...	...	1	...	...	...	4	...	15
" 26	...	20	...	...	...	...	...	...	...	...	1	1	...	...	3	...	25
Sept. 2	...	16	7	...	...	...	1	...	...	...	...	1	...	...	5	1	31
" 9	...	17	7	...	...	...	...	...	...	...	...	...	...	...	6	1	31
" 16	...	11	3	...	...	2	...	...	...	...	3	...	...	2	6	1	28
" 23	...	13	1	1	...	...	1	...	...	...	2	...	1	...	5	1	25
" 30	...	15	1	...	...	...	...	...	...	...	1	...	...	...	5	1	23
Oct. 7	...	17	5	...	...	...	...	...	...	...	1	1	...	...	12	3	39
" 14	...	25	4	...	...	...	1	...	...	...	1	...	...	...	6	...	37
" 21	...	30	4	...	...	...	...	...	...	...	4	...	...	...	8	2	48
" 28	...	33	6	...	1	...	...	...	...	...	1	...	...	...	5	1	47
Nov. 4	...	34	2	...	...	...	...	...	...	...	1	...	...	...	7	...	43
" 11	...	35	7	...	...	...	...	...	...	...	...	...	...	...	9	...	51
" 18	...	38	3	...	...	...	...	...	...	...	1	...	...	...	10	1	53
" 25	...	45	1	...	2	...	1	...	...	...	4	...	...	...	7	...	60
Dec. 2	...	28	2	...	...	...	...	...	...	...	4	...	...	...	5	1	40
" 9	...	32	1	1	...	...	...	...	...	...	1	2	...	...	5	1	43
" 16	...	32	6	...	...	...	...	...	...	...	1	...	...	2	3	...	44
" 23	...	30	7	...	1	...	...	...	...	...	3	...	...	...	2	...	43
" 30	...	32	4	...	...	1	...	...	1	...	2	...	...	...	2	...	42
TOTALS	...	864	194	7	52	13	14	9	2	3	74	14	1	4	366	44	1661

REPORT ON TUBERCULOSIS.

By A. B. WILLIAMSON, M.A., M.D., B.Sc., D.P.H., L.R.C.S., etc. (Ed. & Glas.)

(*Deputy Medical Officer of Health and Tuberculosis Officer.*)

A resumé of the work carried out in connection with the Tuberculosis Scheme will be found in Tables A to G.

Notifications.—Reference to Table A reveals a gratifying decrease in the number of notifications received during 1933, namely, 485 compared with 560 for the previous year. The decrease is noticeable chiefly in the age groups 5 to 15 years, and 15 to 25 years, in respect of both pulmonary and non-pulmonary forms of the disease, whilst in the sex classification the diminution is most marked amongst female pulmonary cases.

Deaths.—The total deaths from all forms of tuberculosis notified during 1933 numbered 199, equivalent to a death-rate for all forms of tuberculosis of 0.79, as compared with the corresponding rate of 1.00 for 1932, a reduction of 21 per cent. The diminution in deaths is most marked in the age groups 0 to 1 year, 1 to 5 years, and 5 to 15 years, although it is also manifest to some extent in the older groups. As regards sex, the decrease is greater amongst females, especially in non-pulmonary cases.

It is pleasing to note from Tables F and G that the pulmonary death rate of 0.67 and the non-pulmonary death rate of 0.11, are each the smallest on record. Since 1879, the pulmonary death rate in Portsmouth has been reduced to less than one-third, and the non-pulmonary death rate to exactly one-seventh of the corresponding rates in that year. In other words, if the death rate of 1879 had prevailed last year, 515 persons instead of 170 persons would have died of pulmonary tuberculosis, and 203 instead of 29 persons would have died of non-pulmonary tuberculosis.

It is difficult to assign a definite reason for this marked decline in our mortality rates last year; no doubt various factors have contributed, *e.g.* improved housing conditions, health education, but one is tempted to think that the special drive against the disease made in recent years in connection with the re-organisation of the dispensary work, *e.g.* the wholesale examination of contacts, and the "calling up" of old cases for examination, has not been in vain.

Dispensary Re-organisation.—The scheme for the re-organisation of the work of the Dispensary, described in last year's report, has been continued during 1933. Old dispensary patients have been systematically brought up for review and re-classification. One hundred such cases were marked off as recovered, whilst others were found to be potential reservoirs of infection although in apparently fair health and able to do light work. It is hoped that by the end of 1934 the Dispensary Register will be entirely brought up to date and be capable of being termed a "live" register.

Co-ordination.—For the effective control of so widespread a disease as tuberculosis, close liaison with all kindred forms of social service, official and otherwise, in the City, is undoubtedly necessary, and during the year under review every opportunity was taken to further co-operation with general practitioners, the School Medical Officer, the Maternity and Child Welfare Officer, the Medical Staff of the Royal Portsmouth Hospital, the Medical Superintendent of St. Mary's Hospital, the Naval Health Officer, the Public Assistance Officer and the Voluntary Associations.

The arrangements made last year with the Naval Health Officer, whereby Dockyard employees on the sick list suffering from tuberculosis are allowed to return to work on presenting a certificate of non-infectivity periodically from the Tuberculosis Officer, has worked well during the year.

The earlier the diagnosis, the greater is the chance of recovery and the less is the danger of spread of infection. As the patient who begins to experience early symptoms goes first to his doctor for advice, it follows that the closest co-operation must exist between the medical practitioners of the City and the Tuberculosis Officer. It is pleasing to note that during 1933 medical practitioners have taken fuller advantage of the services of the Dispensary, 760 cases having been referred by them as compared with 595 last year, an increase of 27.7 per cent. The number of consultations with medical practitioners, personal and otherwise, was 1,101.

Examination of Contacts.—The important procedure of examining contacts has been continued, and no fewer than 236 contacts were examined at the Dispensary, of which 3.8 per cent. were found to be definite cases, chiefly in the early stages of the disease, when there is a greater chance of cure.

Payment for Medicines.—The system adopted last year whereby a small charge was made for all medicines dispensed at the Dispensary, except in the case of poor patients, has justified the extra time and trouble expended on it. The estimated income of £50 per annum has been exceeded, the amount received during the first full year of the working of the scheme being £57 6s. 9d.

X-rays.—Under an existing arrangement, cases are sent to the Royal Portsmouth Hospital for X-ray, and during the year greater use than ever was made of the facilities offered by the Hospital; no fewer than 368 X-rays were taken, which is equivalent to 37 per 100 new cases and contacts seen. The rate is still below the average rate for the county boroughs of England and Wales.

X-ray technique has now become indispensable in the working of a Tuberculosis Scheme; it allows an early diagnosis to be made in doubtful cases, and obviates the expense of admitting cases to a sanatorium for observation, not to mention the saving of time and increased working efficiency at the Dispensary. In the examination of contacts X-rays are specially valuable, as they reveal a small early lesion which ordinary methods of examination would fail to detect.

Thanks are due to Dr. R. S. MacHardy, Honorary Assistant Radiologist at the Royal Portsmouth Hospital, for his able and willing services.

A Visiting Radiologist has now been appointed to St. Mary's Hospital, and, with the completion of the new X-ray Department, X-rays of all tuberculous patients will be taken there.

Bacteriological Diagnosis.—During 1933, 2,126 sputa were prepared and examined at the Dispensary compared with 1,923 during the previous year, an increase of 10.5 per cent.

Treatment.—The institutions for the treatment of tuberculosis are Langstone Sanatorium, for early ambulant cases, the Sanatorium Annexe, Infectious Diseases Hospital, and two wards in St. Mary's Hospital for the more advanced cases.

The precincts of Langstone Sanatorium have been improved during the year by the erection of a fence and the laying down of proper paths to enable graduated exercise to be carried out, so essential in the treatment of the disease.

Table D gives a resumé of the grade of exercise attained by adult patients on discharge.

The report of the Ministry of Health Inspector on his recent survey of the Health Services of the City made it clear that there was still considerable room for improvement in the accommodation and amenities of Langstone Sanatorium, and it is hoped that a further stage of the comprehensive Sanatorium Scheme, mentioned in last year's report, will be considered in the near future. The most urgent need is the erection of a proper mess-room and larger kitchen, and the provision of increased recreational facilities for the patients.

Artificial Pneumo-thorax.—As time goes on, it is becoming more apparent that treatment by artificial pneumo-thorax is giving the most promising results of any form of treatment hitherto tried. It is practicable, however, only in suitable cases. During 1933, the total number of inductions and refills in the Sanatorium and Hospitals, at the Dispensary and in the homes of the patients was 140. It is hoped to extend this valuable form of treatment during the present year.

After-Care Work.—The work of a Tuberculosis Dispensary is not complete without adequate arrangements for the after-care of the patients. It frequently happens that a patient, on being discharged from a Sanatorium, returns to a home, the circumstances of which militate against his recovery. In addition, he finds himself handicapped in competing in the industrial market with fit men. In Portsmouth there is no voluntary After-Care Committee, but such duties are undertaken by (1) The Charity Organisation Society, whose members work in conjunction with the Dispensary staff in visiting the patients in their homes and in rendering valuable assistance, *e.g.* provision of extra nourishment and clothing, obtaining employment, etc. ; (2) the Hospitals Sub-Committee, who supply milk to necessitous cases on the recommendation of the Tuberculosis Officer ; (3) the Public Assistance Committee, who grant extra nourishment on request to cases already in receipt of public assistance.

Thanks are due to all these organisations for the valuable services rendered by them during the year.

TUBERCULOSIS.

TABLE A.

NEW CASES AND MORTALITY DURING 1933.

Age Periods	* NEW CASES				DEATHS			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
0 to 1	1	—	1	—	—	—	2	1
1 „ 5	2	—	5	13	—	—	3	6
5 „ 15	7	7	9	11	—	4	2	2
15 „ 25	53	54	7	6	18	15	3	3
25 „ 35	52	55	1	3	23	26	1	—
35 „ 45	47	27	5	1	16	16	1	1
45 „ 55	50	13	1	1	18	5	1	—
55 „ 65	25	14	—	2	12	8	2	1
65 & upwards	8	4	—	—	7	2	—	—
TOTALS	245	174	29	37	94	76	15	14

* Includes primary notifications and new cases which came to the knowledge of the Medical Officer of Health by other means.

TABLE B.

Showing the work of the Dispensary during 1933.

DIAGNOSIS	PULMONARY				NON-PULMONARY				TOTAL				GRAND TOTAL	
	Adults		Children		Adults		Children		Adults		Children			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
A.—NEW CASES examined during the year (excluding contacts) :—														
(a) Definitely tuberculous	127	93	4	4	6	11	5	4	133	104	9	8	254	
(b) Diagnosis not completed	....	....	....	....	....	....	....	....	2	3	....	1	6
(c) Non-tuberculous	....	....	....	....	....	....	....	....	150	190	102	58	500
B.—CONTACTS examined during the year :—														
(a) Definitely tuberculous	1	3	1	3	....	....	1	....	1	3	2	3	9
(b) Diagnosis not completed
(c) Non-tuberculous	....	....	....	....	....	....	....	....	13	47	90	77	227
C.—CASES written off the Dispensary Register as :—														
(a) Recovered	20	22	11	11	6	10	10	10	26	32	21	21	100	
(b) Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous)	....	....	....	....	....	....	....	....	165	239	195	137	736
D.—NUMBER OF CASES ON Dispensary Register on December 31st :—														
(a) Definitely tuberculous	598	526	76	63	55	54	88	86	653	580	164	147	1546	
(b) Diagnosis not completed	....	....	....	....	....	....	....	....	2	3	....	1	6
1. Number of cases on Dispensary Register on January 1st					1542				2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years				41	
3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of"					106				4. Cases written off during the year as Dead (all causes)				85	
5. Number of attendances at the Dispensary (including Contacts)					7449				6. Number of Insured Persons under Domiciliary Treatment on the 31st December				75	
7. Number of consultations with medical practitioners :— (a) Personal (b) Other					81 1020				8. Number of visits by Tuberculosis Officers to homes (including personal consultations)				260	
9. Number of visits by Nurses or Health Visitors to homes for Dispensary purposes					2999				10. Number of :— (a) Specimens of sputum, etc., examined (b) X-ray examinations made in connection with Dispensary work				2125 358	
11. Number of "Recovered" cases restored to Dispensary Register, and included in A(a) and A(b) above					—				12. Number of "T.B. plus" cases on Dispensary Register on December 31st				295	

TABLE D.

LANGSTONE SANATORIUM.

Grade of Exercise attained by Adult Cases before discharge.

Grade	Badge	Exercise	Males	Females	Total
I.	White	Up 4, 6 or 8 hours. Quiet games, except billiards.	2	—	2
II.	Yellow	Up all day. Specified light ward duties. Limited slow walking exercise.	4	1	5
III.	Green	Up all day. Specified ward duties, requiring more exertion. Further walking exercise (1 mile).	12	6	18
IV.	Red	Up all day. Specified ward duties, requiring still more exertion. Long distance walking, increasing.	46	21	67

100 Patients were discharged, but 8 were bed cases (not graded).

TABLE E.
Total Number of Patients treated at various Sanatoria, Hospitals
and Colonies during 1933.

SANATORIUM, HOSPITAL OR COLONY	Resident at beginning of year	Admitted during year	Discharged during year	Remaining end of year	Totals
Langstone Sanatorium	18	101	100	19	119
Beach Lodge	9	38	42	5	47
Milton Hospital	30	85	115	closed	115
Royal National Sanatorium, Bournemouth	0	8	8	0	8
Royal National Hospital for Consumption, Ventnor	7	1	7	1	8
Lord Mayor Treloar Cripples' Hospital	17	12	8	21	29
Papworth Village Settlement	0	2	0	2	2
King George V Sanatorium for Sailors, Bramshott	0	4	2	2	4
Totals	81	251	282	50	332

TABLE F.
 Chart showing Deaths from Pulmonary Tuberculosis per 10,000 population since 1885.

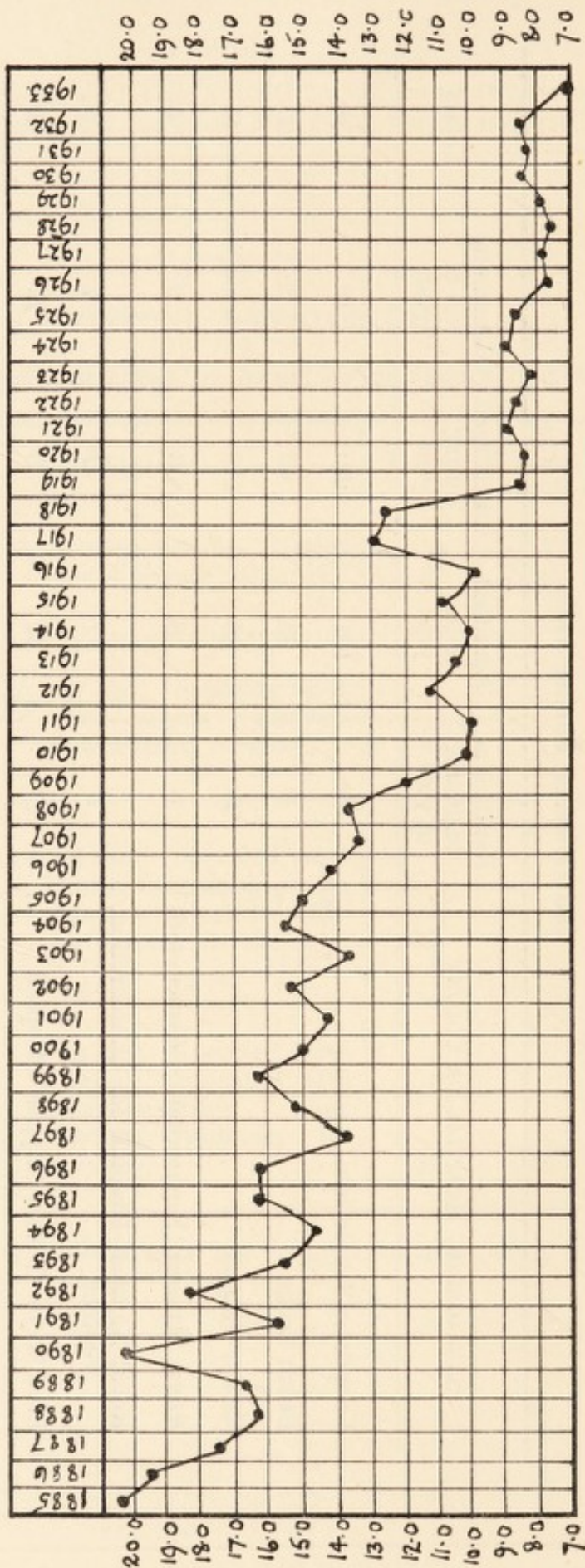


TABLE G.

Table showing the number of Deaths and Death-rates per 1,000 living from TUBERCULAR DISEASES for Fifty-Five Years (1879 to 1933).

Year	(1) Pulmonary Tuberculosis		(2) Tubercular Meningitis Hydrocephalus Deaths	(3) Other Forms of Tuberculosis Deaths	Totals of Cols. 2 and 3	
	Deaths	Rate			Deaths	Rate
1879	271	2.05	44	58	102	.77
1880	234	1.74	49	81	130	.96
1881	275	2.14	44	61	105	.81
1882	269	2.07	33	67	100	.76
1883	262	1.96	41	72	113	.84
1884	292	2.12	34	62	96	.69
1885	290	2.06	36	54	90	.64
1886	285	1.98	38	85	123	.86
1887	261	1.77	41	95	136	.92
1888	240	1.60	38	90	128	.85
1889	251	1.63	35	93	128	.83
1890	319	2.03	37	57	94	.60
1891	252	1.57	41	86	127	.79
1892	308	1.89	31	51	82	.50
1893	254	1.53	32	59	91	.55
1894	241	1.43	21	50	71	.42
1895	280	1.64	43	50	93	.54
1896	283	1.63	51	55	106	.61
1897	245	1.38	39	33	72	.39
1898	277	1.54	37	57	94	.52
1899	295	1.61	40	64	104	.57
1900	286	1.53	42	53	95	.51
1901	278	1.47	37	91	128	.67
1902	308	1.58	31	51	82	.42
1903	269	1.35	35	34	69	.34
1904	321	1.58	44	32	76	.37
1905	314	1.52	42	25	67	.32
1906	306	1.45	38	36	74	.35
1907	282	1.31	47	36	83	.38
1908	300	1.36	39	38	77	.35
1909	272	1.21	41	33	74	.33
1910	249	1.09	40	23	63	.28
1911	239	1.02	36	23	59	.25
1912	267	1.13	30	46	76	.32
1913	264	1.08	41	40	81	.33
1914	249	1.01	33	52	85	.34
*1915	233	1.15	51	69	120	.59
*1916	188	0.95	39	48	87	.43
*1917	269	1.35	38	62	100	.50
*1918	261	1.28	23	45	68	.33
*1919	197	0.88	25	37	62	.27
*1920	197	0.84	19	36	55	.23
*1921	211	0.90	22	26	48	.20
*1922	207	0.87	17	38	55	.23
*1923	191	0.82	21	16	37	.16
*1924	222	0.93	18	36	54	.23
*1925	204	0.87	27	23	50	.21
*1926	183	0.79	18	20	38	.16
*1927	182	0.78	27	24	51	.22
*1928	179	0.74	26	23	49	.20
*1929	192	0.79	26	9	35	.14
*1930	208	0.85	26	14	40	.16
*1931	189	0.82	17	21	38	.16
1932	213	0.84	22	18	40	.15
1933	170	0.67	17	12	29	.11

* Calculated on estimated civil population.

VENEREAL DISEASE.—Dr. A. Cambell reports as follows on the work carried out at the Treatment Centre for Venereal Diseases, at the Royal Portsmouth Hospital :—

There was a slight diminution in the number of new patients and attendances in 1933 in comparison with the previous year. The figures show that this decrease is concerned with those attending for diagnosis and examination, and who were subsequently found not to be suffering from venereal disease. The number of new cases attending with gonorrhoea remained on the same level, but there was an increase in patients reporting with recently acquired syphilis.

It is satisfactory to note there was a decrease in new patients attending with congenital syphilis. As in previous years more females attended than males in this class. It is of the utmost importance that children coming under treatment should continue their attendance at the Clinic regularly, and all means are adopted to ensure that they receive systematic treatment, and only one child failed to complete one course of treatment during 1933.

Again a record was kept of male patients, occupations, and as in previous years the highest group was those classified as labourers.

48 men of the Mercantile Marine attended for the first time, and in nearly every case where treatment had been received at another Treatment Centre, the International Agreement Card was brought showing that the system of transferring these patients from one Clinic to another is being practised more efficiently than in previous years.

The following Table, prepared for the Ministry of Health, gives details of the work carried out at the Centre during the year :—

RETURN RELATING TO ALL PERSONS WHO WERE TREATED AT THE TREATMENT CENTRE DURING THE YEAR ENDED 31st DECEMBER, 1933.

	Syphilis		Soft Chancre		Gonorrhoea		Conditions other than Venereal		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Total
1. Number of cases on 1st January under treatment or observation	208	162	—	1	124	20	14	4	346	187	533
2. Number of cases removed from the register during any previous year which returned during the year under report for treatment or observation of the same infection	16	22	—	—	14	2	13	8	43	32	75
3. Number of cases dealt with for the first time during the year under report (exclusive of cases under Item 4) suffering from :—											
Syphilis, primary	3	1	—	—	—	—	—	—	3	1	4
" secondary	18	8	—	—	—	—	—	—	18	8	26
" latent in 1st year of infection	—	—	—	—	—	—	—	—	—	—	—
" all later stages	51	37	—	—	—	—	—	—	51	37	88
" congenital	8	14	—	—	—	—	—	—	8	14	22
Soft Chancre	—	—	3	—	—	—	—	—	3	—	3
Gonorrhoea, 1st year of infection	—	—	—	—	126	44	—	—	126	44	170
" later	—	—	—	—	12	—	—	—	12	—	12
Conditions other than venereal	—	—	—	—	—	—	206	144	206	144	350
4. Number of cases dealt with for the first time during the year under report known to have received treatment at other Centres for the same infection	12	5	—	—	27	6	2	—	41	11	52
TOTALS OF ITEMS 1, 2, 3 AND 4	316	249	3	1	303	72	235	156	857	478	1335
5. Number of cases discharged after completion of treatment and final tests of cure (see Item 15)	38	27	3	—	106	33	208	148	355	208	563
6. Number of cases which ceased to attend before completion of treatment and were, on first attendance suffering from :—											
Syphilis, primary	1	—	—	—	—	—	—	—	1	—	1
" secondary	6	4	—	—	—	—	—	—	6	4	10
" latent in 1st year of infection	—	—	—	—	—	—	—	—	—	—	—
" all later stages	22	19	—	—	—	—	—	—	22	19	41
" congenital	1	8	—	—	—	—	—	—	1	8	9
Soft Chancre	—	—	—	1	—	—	—	—	—	1	1
Gonorrhoea, 1st year of infection	—	—	—	—	17	10	—	—	17	10	27
" later	—	—	—	—	3	—	—	—	3	—	3
7. Number of cases which ceased to attend after completion of treatment but before final tests of cure (see Item 15)	20	22	—	—	19	1	—	—	39	23	62
8. Number of cases transferred to other centres or to institutions, or to care of private practitioners	25	18	—	—	55	10	—	—	80	28	108
9. Number of cases remaining under treatment or observation on 31st December	203	151	—	—	103	18	27	8	333	177	510
TOTALS OF ITEMS 5, 6, 7, 8 AND 9	316	249	3	1	303	72	235	156	857	478	1335

	Syphilis		Soft Chancre		Gonorrhoea		Conditions other than Venereal		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Total
10. Number of cases in the following stages of syphilis included in Item 6 which failed to complete one course of treatment :—											
Syphilis, primary	—	—	—	—	—	—	—	—	—	—	—
„ secondary	3	2	—	—	—	—	—	—	3	2	5
„ latent in 1st year of infection	—	—	—	—	—	—	—	—	—	—	—
„ all later stages	12	7	—	—	—	—	—	—	12	7	19
„ congenital	—	1	—	—	—	—	—	—	—	1	1
11. Number of attendances :—											
(a) for individual attention of the medical officers	1884	1486	18	—	1703	443	666	401	4271	2330	6601
(b) for intermediate treatment, e.g. irrigation, dressing	514	366	97	—	8835	1946	989	540	10435	2852	13287
TOTAL ATTENDANCES	2398	1852	115	—	10538	2389	1655	941	14706	5182	19888
12. In-patients :—											
(a) Total number of persons admitted for treatment during the year	6	4	—	—	5	6	3	—	14	10	24
(b) Aggregate number of "In-patient days" of treatment given	10	14	—	—	76	157	3	—	89	171	260
13. Number of cases of congenital syphilis in Item 3 above classified according to age periods											
	Under 1 year		1 and under 5 years		5 and under 15 years		15 years and over		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
	1	4	—	—	4	6	3	4	8	14	
14. Chief preparations used in treatment of Syphilis :—											
(a) Names of preparations	Neo-Salvarsan						—		Chlorostab		
(b) Total number of injections given (out-patients and in-patients)	1301						—		1059		
(c) Number of injections included in (b) given to patients who on first attendance at this Centre were suffering from primary and secondary syphilis	320						—		272		
15. Are the tests recommended in Memo. V21 as amended by Memo. V21A followed in deciding as to the discharge of the patient after treatment and observation for syphilis and gonorrhoea ?											
	Yes, with one exception.										
If not, in what way are they modified ?	Complement Fixation Test not done.										

MATERNITY AND CHILD WELFARE.—Excellent work in this branch of public health has again been carried out by Dr. R. N. Foggie and the Health Visitors, and each year the work steadily increases. The total attendances at the Child Welfare Centres numbered 39,928, and were as follows :

CENTRES	Attendances	New Patients	Seen by the Medical Officer
Fratton (2 afternoons a week)	14,525	959	4,331
Eastney (1 afternoon a week)	6,912	430	1,932
Portsea (1 afternoon a week)	5,743	299	2,187
Stamshaw (1 afternoon a week)	7,014	359	1,881
Cosham (1 afternoon a week)	4,724	228	894
Totals	38,928	2,275	11,225

At the Ante-Natal Clinic held at the Municipal Maternity Hospital, the average attendance was 28, and the total number of mothers who sought advice was 582.

The Health Visitors paid 28,214 visits during the year ; 3,670 were first visits to infants under one year of age, and 5,223 were to children between the ages of one and five years. The visits also included those to 13 cases of puerperal fever, to 15 cases of puerperal pyrexia, and to 4 cases of pemphigus neonatorum.

Food to necessitous cases was issued, either at cost price, part cost, or free, to 1,962 infants ; the total cost of the food was £3,499, and the amount received in part payment was £1,109.

MATERNITY HOMES AND HOSPITALS.—The following table gives statistics in connection with maternity work at the Municipal Maternity Hospital, the Maternity Wards of St. Mary's Hospital, and at the Royal Naval Maternity Home. The total number of confinements in these institutions numbered 892 as against 823 in the previous year.

	Municipal Maternity Home	St. Mary's Hospital	Royal Naval Maternity Home
No. of Maternity beds (exclusive of isolation and labour)	16	39	15
No. of Patients admitted	320	278	294
Average duration of stay	14 days	14 days	14 to 16 days
No. of cases delivered by : (a) Midwives (b) Doctors	299 21	— 278	257 21
Cases in which medical assistance was sought by midwife	90	(Doctor always present)	(Doctor sees all Cases)
No. of cases notified as :			
(a) Puerperal Fever	Nil	2	Nil
(b) „ Pyrexia	3	Nil	1
No. of cases of pemphigus neonatorum	4	Nil	Nil
No. of infants not entirely breast-fed while in institution	22	2	23
No. of cases notified as ophthalmia neonatorum	Nil	Nil	3
Result of treatment	—	—	Recovered
No. of Maternal deaths	Nil	2	Nil
Cause of death	—	1. Toxic Myocarditis Empyema, Lobar Pneumonia 2. Died under anaesthetic— Inquest	—
No. of foetal deaths :			
(1) Stillborn	7	20	11
(2) Within 10 days of birth	2	10	2
(3) Causes of death	Strangulation—1 Prematurity—1 Atelectasis—2 Anencephalus—3 Hydrocephalus—2	Prematurity—11 Placenta praevia—1 Atelectasis—2 Ante-partum haemorrhage—4 Pre-eclamptic state—1 Torn tentorium—1 Mal-presentation—1 Caesarean Section—2 Eclampsia—1 Twin pregnancy—1 Anencephalus—1 Toxaemia of pregnancy—4	Prematurity—6 Maceration—1 Difficult breech—1 Ante-partum haemorrhage—1 Diagnosis not complete—1 Hydrocephalus and Meningocele—2 Intracranial haemorrhage—1

MIDWIVES.—The number of midwives practising in the City was 72, and they attended 3,063 out of the 3,974 births, or 79 per cent. Of these confinements they attended 2,835 in the capacity of midwives and 228 as maternity nurses. Generally speaking, the practice of the midwives has been satisfactory. Dating from the passing of the Midwives' Act of 1902, there has been a continuous and very marked improvement in the methods and personnel of the midwifery profession. Also through the operation of the Insurance Scheme under the Midwives' Act there is no difficulty in patients obtaining the services of a medical man when required. Medical assistance was sent for in 1,081, or 38 per cent. of midwives' cases. The total amount paid by the Local Authority to medical men called in by midwives was £1,262, out of this £485 was received from patients and premiums under the Insurance Scheme. Midwives sent for medical assistance in 45.6 per cent. of their cases when the patient was insured under the Scheme, and in 13.0 per cent. where not insured.

MATERNAL MORTALITY.—It must be regarded as satisfactory that there were only 8 maternal deaths during the year, which gives a maternal mortality rate of 1.98 deaths in childbirth per 1,000 births. This is an exceptionally low rate and is 52.2 per cent. below the maternal mortality rate for the whole country which was 4.23. Of the 8 deaths recorded, 4 were due to puerperal sepsis and 4 to other causes. Careful enquiries are made into all cases of puerperal fever and puerperal pyrexia.

CHILDREN'S ACT, 1908.—Under this Act 120 persons had notified the Local Authority at the beginning of the year that they had undertaken the maintenance of infants apart from their parents, and the number of infants so maintained was 148. At the end of the year the figures were 105 persons and 136 children. During the year 1,573 visits were paid by the Infant Protection Visitor to the various homes, which were generally speaking found to be satisfactory and the children well cared for. A number of applications to maintain children under the Act were refused for reasons such as old age, uncleanliness and overcrowding. There were 232 more visits paid than last year, accounted for partly to the raising of the age of supervision of foster children from 7 to 9 years, and partly by the extension of the City boundaries.

Chart showing the number of Deaths under 1 year of age to 1,000 Births in Portsmouth, 1886 to 1933.

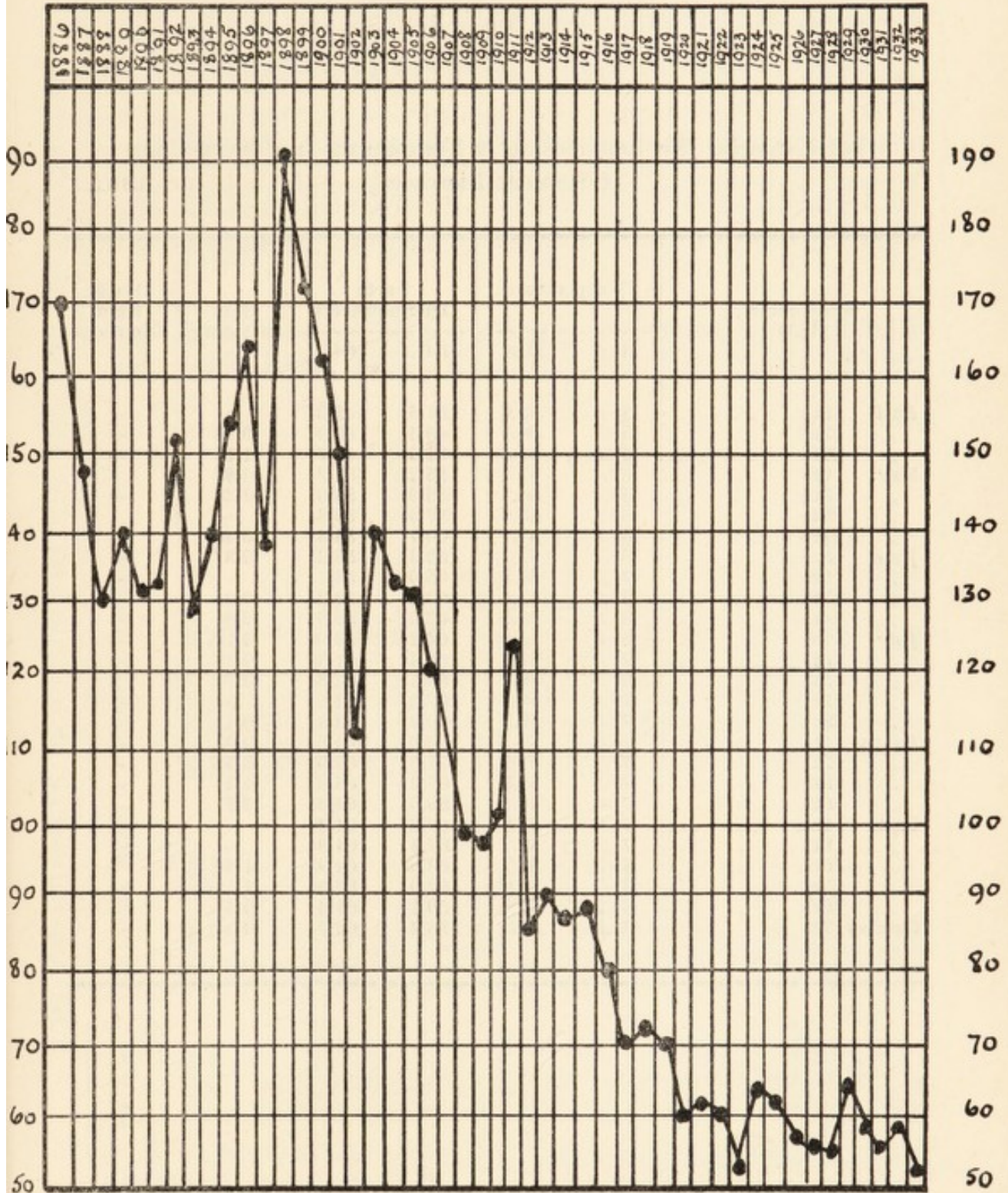


Table showing the Relationship of Temperature and Fatal Cases of Summer Diarrhoea.

Week ending 1933				Temperature		Earth Thermometers		Rain in inches	Deaths from Diarrhoea
				Max.	Min.	1-ft.	4-ft.		
April	15th	....	....	59.0	43.5	51.5	49.2	—	—
"	22nd	....	....	53.7	36.4	49.5	50.0	0.13	—
"	29th	....	....	56.5	46.8	51.5	49.7	1.15	—
May	6th	....	....	60.4	47.7	55.2	51.7	0.86	1
"	13th	....	....	59.5	46.2	55.6	53.0	0.28	—
"	20th	....	....	63.5	48.8	57.0	53.8	—	1
"	27th	....	....	67.2	51.1	60.7	55.8	0.46	—
June	3rd	....	....	65.7	52.1	59.3	56.2	0.37	—
"	10th	....	....	77.2	57.8	65.0	58.1	—	—
"	17th	....	....	67.2	53.0	62.3	59.4	0.36	—
"	24th	....	....	64.8	52.0	62.0	59.5	0.65	—
July	1st	....	....	69.8	55.0	64.2	59.9	0.18	—
"	8th	....	....	74.4	61.2	69.4	61.5	0.19	—
"	15th	....	....	67.5	59.1	66.1	62.8	0.70	2
"	22nd	....	....	75.1	58.1	67.2	62.5	—	—
"	29th	....	....	77.8	59.7	70.2	63.9	0.41	—
August	5th	....	....	75.8	60.1	69.0	64.8	0.06	—
"	12th	....	....	77.8	61.1	71.0	65.5	0.06	—
"	19th	....	....	73.1	59.0	67.2	65.2	0.25	—
"	26th	....	....	71.0	54.1	66.0	64.6	0.27	—
Sept.	2nd	....	....	76.0	57.8	67.2	64.2	—	—
"	9th	....	....	76.3	57.7	67.4	64.9	—	4
"	16th	....	....	69.3	53.7	63.0	64.3	1.84	7
"	23rd	....	....	67.7	55.6	62.0	62.9	1.11	—
"	30th	....	....	66.2	54.0	59.1	61.4	0.55	2
October	7th	....	....	63.8	52.2	58.4	60.7	0.24	—

ROLL OF MIDWIVES PRACTISING WITHIN THE CITY OF PORTSMOUTH.

SURNAME	CHRISTIAN NAME	ADDRESS	No. of Cert.	Date of Certificate	Date of Notice 1933
1. Ainsley	Clarissa Mary	23, Outram Road	51397	14th Aug., '20	12th January
2. Bampton	Dorothy Vera	31, Collins Road	68136	25th Feb., '26	1st January
3. Barnes	Eliza	109, Church Road	23295	26th April, '06	3rd January
4. Barnes	Elizabeth	109, Church Road	27020	15th Oct., '08	3rd January
5. Blake	Ellen M.	12, Haslemere Road	27693	16th Dec., '08	3rd January
6. Bragg	Sarah	118, St. Augustine Road	42180	1st May, '18	9th January
7. Brassfield	Frances Mary	26, Besant Road	47125	11th May, '18	4th January
8. Bricknelle	Muriel A. L. P.	121, Goldsmith Avenue	84024	28th May, '32	2nd January
9. Brinn	Rosina	46, Wadham Road	29590	30th Oct., '09	2nd January
10. Brockett	Ellen	23, Outram Road	45581	7th May, '17	20th January
11. Caton	Kathleen	" Roseview," First Ave., Farlington	64753	10th Dec., '24	1st January
12. Clarke	Gertrude	16, Second Avenue, Cosham	17540	25th Mar., '05	3rd January
13. Collins	Mabel	28, Victoria Road North	74387	24th Nov., '28	13th July
14. Cowell	Mary A.	57, St. Piran's Avenue	69902	16th Dec., '26	12th January
15. Crafts	Elizabeth	14, Alexandra Road	39421	17th Dec., '13	3rd January
16. Cratchley	Leah Diana	66, Marmion Road	82182	Nov., '31	20th April
17. Dowse	Mabel Coles	15, Sheffield Road	28319	7th April, '09	31st Dec., 1932
18. Dunsford	Clara H.	18, St. George's Square	21629	27th April, '08	5th January
19. Elliott	Mary Ann Leah	128, Prince Albert Road	5487	30th June, '04	3rd January
20. Farnell	Marion	454, Commercial Road	8755	27th Oct., '04	2nd January
21. Farr	Mary	6, Longs Road	52338	10th Nov., '20	31st Dec., 1932
22. Field	Ethel Fanny	126, Devonshire Avenue	54222	11th June, '21	3rd January
23. Foley	Louisa	8, Thurbern Road	37918	28th April, '13	9th January
24. Foot	Alice Maud Mary	21, Essex Road	54229	11th June, '21	5th January
25. French	Louisa	11, Halsea Market, London Road	47980	19th Nov., '18	5th January
26. Goldsmith	Muriel	" Roseview," First Ave., Farlington	83033		20th February
27. Godwin	Julia	3, Dean Road, Cosham	65151	29th Jan., '25	30th January
28. Goodman	Lucy Ann	3, Derby Road	26437	21st May, '08	31st Dec., 1932
29. Heard	Mabel Vosper	28, Victoria Road North	34559	28th Oct., '11	1st January
30. Hebington	Eliza	31, Curzon Howe Road	50981	12th May, '20	1st January
31. Hebington	Aileen Mary	63, Margate Road	70015	16th Dec., '26	2nd January
32. Hewerson	Mary J.	Municipal Maternity Hospital	49754	10th Nov., '19	14th September
33. Hodge	Ada	73, King Street, Southsea	50992	12th May, '20	1st January
34. Horton	Winifred	Naval Welfare Centre	66858	15th Aug., '25	3rd January
35. Howard	Lydia	49, Wisborough Road	63413	14th June, '24	31st Dec., 1932
36. Jack	Emma	11, Shaftesbury Road	47280	11th May, '18	10th January

ROLL OF MIDWIVES—continued.

SURNAME	CHRISTIAN NAME	ADDRESS	No. of Cert.	Date of Certificate	Date of Notice 1933
37. Jago	Clara Sara	24, Elphinstone Road	23268	6th Feb., '06	31st Dec., 1932
38. Johnson	Marjorie Kathleen	Royal Naval Maternity Home	83133	27th Feb., '32	15th June
39. Jones	Effie	79, Madeira Road	72206	24th Nov., '27	9th June
40. Jones	Elsie	11, Ashburton Road	85299	25th Nov., '32	20th February
41. Kean	Lucey Rowe	133, Eastfield Road	31908	30th Sept., '10	8th January
42. Lamb	Eileen Audrey	Municipal Maternity Hospital	87636	12th Aug., '33	8th Septemb'r
43. Langstreeth	Maria	113, St. Vincent Street	14211	23rd Feb., '05	11th October
44. Lee	Ethel Eliza	23, Derby Road	60963	11th Aug., '23	22nd January
45. Lovett	Ellen	14, Shearer Road	48431	10th Feb., '19	9th January
46. Malyon	Marion	200, Stamshaw Road	46160	11th Aug., '27	5th January
47. Martin	Daisy Maud	Military Families' Hospital	69651	14th Aug., '26	2nd January
48. Martin	Elizabeth Amy	22, Milton Road	56977	16th April, '22	10th January
49. McNeish	Alice	"Sunnicote," London Road	56968	10th April, '22	4th January
50. Moore	Emma Lilian K.	23, Oliver Road	48077	9th Nov., '18	1st January
51. Morgan	Agnes	68, Montgomery Road	44981	31st Oct., '16	24th July
52. Owen	Jane Ann	22, Besant Road	43020	1st Nov., '15	1st January
53. Paul	Margaret	12, Northern Parade	35805	2nd May, '12	2nd January
54. Pavier	W. G.	Royal Naval Maternity Home	78458	30th May, '30	1st February
55. Packer	Mabel Elizabeth	7, St. Andrew's Road	48091	9th Nov., '18	4th January
56. Phillips	Edith	80, Methuen Road	3388	24th May, '04	3rd January
57. Richards	Annie Kathleen	Naval Maternity Home	35480	23rd Feb., '12	26th January
58. Rumbold	Edith	20, First Avenue, Cosham	49421	9th Aug., '19	3rd January
59. Rust	Jane	204, Powerscourt Road	40133	28th April, '14	6th January
60. Salmon	N. K.	Municipal Maternity Hospital	85531	26th Nov., '32	6th January
61. Sansom	Maud Mary	2, Clydesdale Terrace	40572	22nd June, '14	1st January
62. Stallworthy	Lydia H.	454, Commercial Road	64077	24th Aug., '24	16th Septemb'r
63. Stevens	Johanna	"Glenlyn," Stubbington Avenue	55569	10th Oct., '21	3rd January
64. Stock	Dorothea Helena	7, Wyndcliffe Road	70517	24th Feb., '27	15th February
65. Street	Beryl	9, Clovelly Road	38035	8th April, '13	7th January
66. Taylor	Florence Mary	"Balmoral," Portchester	29219	10th Aug., '09	5th January
67. Taylor	Lily May	3, Posbrooke Road	18246	27th April, '05	28th January
68. Trowbridge	Edith Mary	1, Collins Road	22860	28th Nov., '05	4th January
69. Upfield	Gertrude Eleanor	25, Oliver Road	62132	12th Dec., '23	28th January
70. Waikon	Lilian Mary	Municipal Maternity Hospital	77928	22nd Feb., '20	15th Dec., 1932
71. Weller	Marion Edith	45, Catisfield Road	46669	10th Nov., '17	28th January
72. Willcocks	May Julia	174, Chichester Road	57158	10th April, '22	8th January

HOSPITAL	SITUATION	DESCRIPTION	Number of Beds	MANAGEMENT	AREA SERVED	MEDICAL STAFF	NURSING STAFF
Royal Portsmouth Hospital	Commercial Road	General	205	Voluntary Committee	Portsmouth and surrounding district	5 Resident Medical Officers 26 Honorary Medical and Surgical Staff	80
Portsmouth and Southern Counties Eye & Ear Hospital	Pembroke Road	Diseases of the Eye, Ear, Nose & Throat	47	Voluntary Committee	Portsmouth and surrounding district	No resident Medical Officer 14 Honorary Medical and Surgical Staff	12
St. Mary's Hospital	Milton Road	General	1168	*Health Committee of City Council	Portsmouth	1 Resident Medical Superintendent 3 Resident Assistant Medical Officers <i>Consultants when reqd.</i>	130 Nurses 69 Attnds.
City Mental Hospital	Locksway Road, Milton	For Patients of Unsound Mind	1014	Committee of City Council	Portsmouth	1 Resident Medical Superintendent 3 Resident Assistant Medical Officers	89 male 121 female
Milton Hospital	Milton Road	City Infectious Diseases Hospital (excluding smallpox)	206	Health Committee of City Council	Portsmouth	1 Resident Medical Officer	45
Municipal Maternity Hospital	Trafalgar Place Fratton Road	Lying-in Cases	16	Health Committee of City Council	Portsmouth	1 Part-time non-resident Medical Officer	11
Royal Naval, Maternity Home	Clifton Road, Southsea	Lying-in Cases. (Limited to the wives of men in the Royal Navy and Royal Marines)	15	Voluntary Committee	Portsmouth and District	1 Non-resident Medical Officer 2 Hon. Consultant Medical Officers	11
Military Families' Hospital	London Road, Hilsea	Lying-in Cases. (Limited to the wives of men in the Army and Royal Air Force)	9	Army Authorities	Portsmouth and District	1 Non-resident Medical Officer	8
Langstone Sanatorium and Beach Lodge	Locksway Road, Milton	Tuberculosis, early cases and Children	20 and 9 children	Health Committee of City Council	Portsmouth	1 Non-resident Medical Officer	4

* St. Mary's Hospital was appropriated as a Municipal Hospital by the Council on December 6th 1937

GENERAL PROVISION OF MEDICAL SERVICES.

One of the last matters upon which I was called to advise was the unification and co-ordination of all the Health Services of the Council. My views are embodied in the following special Report.

MEDICAL SERVICES.

1. In accordance with your instructions, I submit a final report on the unification of the Health Services of the City.

2. The establishment of public health departments dates back to the great consolidating Public Health Act, 1875, and at first the duties of Local Authorities were principally concerned with the prevention of infectious and epidemic diseases. To-day, however, by virtue of successive Statutes and Orders, the duties of Local Authorities have been enormously extended and include not only the prevention of disease, but also the responsibility for providing adequate treatment for all the sick inhabitants of their districts. For instance, the activities of the City Council now include, amongst others :—

- (a) Provision for the care of pregnant women, before, during and after childbirth. (The first Maternity Hospital was established in 1920 in Elm Grove.)
- (b) The maintenance of Child Welfare Centres with a staff of Medical Officers and Health Visitors for the care of babies and infants. (The first Health Visitor was appointed in 1905, and the first Child Welfare Clinic was opened at Fratton Road in 1916).
- (c) The treatment of all persons suffering from tuberculosis. (The first Tuberculosis Dispensary was opened in 1911, and Langstone Sanatorium established in 1911.)
- (d) The medical inspection of all children attending the public Elementary Schools. (A School Medical Officer was first appointed in 1908 and the School Clinic was opened in 1912.)
- (e) Provision for the treatment and prevention of venereal diseases. (A Medical Officer was appointed and a V.D. Clinic was opened in 1917.)
- (f) The care of persons of unsound mind and mental defectives.
- (g) The home supervision of adopted children.
- (h) The supervision of all midwives and their practice. (Midwives' Act, 1902.)
- (i) The registration and supervision of all nursing homes in the City. (Nursing Homes Registration Act, 1927.)
- (j) The provision and maintenance of an Ambulance Service, and lastly,
- (k) The provision of general hospital treatment for all the sick inhabitants of the City.

3. These various services have been established from time to time to meet special needs ; they have formed separate units of public health work ; have been provided with separate staffs of medical officers, health visitors and nurses ; and they deal with different classes of the population as defined

by age, disease and other conditions. Already every endeavour is made to see that these services are co-ordinated one with the other, but with the passing of the Local Government Act, 1929, and the still further extension of the activities of the Health Department the time is opportune to weld them into one harmonious whole, with less specialisation of staffs and more economical distribution of the work.

4. The many increased responsibilities which during the past thirty years have been placed upon Local Authorities have naturally necessitated an increase in the medical staff, and connected with the Health Department there are now the following full-time Medical Officers :—

Medical Officer of Health,

Deputy Medical Officer of Health and Tuberculosis Officer,

Maternity and Child Welfare Medical Officer,

School Medical Officer,

3 Assistant School Medical Officers,

Superintendent of the Milton Hospital for Infectious Diseases,

Medical Superintendent, Saint Mary's Hospital,

Deputy Superintendent and Resident Surgeon, Saint Mary's Hospital,

2 Senior Assistant Medical Officers, and

2 Junior Assistant Medical Officers, Saint Mary's Hospital.

In addition to the above there are also a number of part-time Medical Officers.

5. This indicates a very different state of affairs from the year 1896 in which, when I was appointed Medical Officer of Health, I was the only Medical Officer connected with the Health Department ; but large though the staff is compared with what it was 38 years ago, it is even now numerically considerably below the strength of those of other large towns, and its personnel is not yet sufficient to carry out all the demands which are made upon it. If the Department is to carry out effectively all the duties which are generally accepted as the minimum responsibilities of a modern Health Department, it will be necessary to augment it by the appointment of two additional full-time Medical Officers.

6. For instance, for some years I have advised that an additional Maternity and Child Welfare Medical Officer should be appointed. At the present time there are often over 100 patients to see the Medical Officer in one afternoon, a number to which one Medical Officer cannot possibly give proper individual attention. Moreover, the Medical Officer's time is so fully occupied with the Child Welfare Centres that very little can be done in regard to ante-natal and post-natal work, which is regarded as essential in connection with the prevention of maternal mortality and maternal morbidity.

7. Also, in connection with the prevention and treatment of tuberculosis, there is urgent need for further assistance. Formerly, there were two Tuberculosis Officers, during the war the number was reduced to one, but owing to modern methods of treatment which entail far more time, and to the increase generally in the work, it is no longer practicable to carry on without assistance. The appointment of an assistant Tuberculosis Officer is also necessary because it will permit of some help being given by the Chief Tuberculosis Officer to the Medical Officer of Health in the ordinary routine work of the Department which, owing to its rapid development in recent years, is more than one man can deal with.

8. With regard to the medical staff of the Health Department, I think it is desirable that in future all medical officers who are appointed should possess a public health qualification, and this applies also to officers appointed to the School Medical Service. By this means every Medical Officer would be qualified to undertake duties in any branch of the public health service in which his services might be required and not limited to one particular Department. All officers then appointed would be given the title of Assistant Medical Officer of Health, and though each would be assigned special duties, such as tuberculosis work, school medical work, maternity and child welfare work, etc., yet each would be transferable as the occasion demanded from one to another department of the public health service. The Senior Medical Officers at the head of special departments, such as the Tuberculosis Service, the School Medical Service, etc., would be termed Senior Assistant Medical Officers of Health, and would, if qualified, act as Deputy for the Medical Officer of Health when required.

9. The whole-time Medical Staff of the Health Department, apart from the staff of Saint Mary's Hospital, would then be as follows :—

- The Medical Officer of Health and Chief Administrative Officer.
- Senior Assistant Medical Officer of Health and Tuberculosis Officer,
- Senior Assistant Medical Officer of Health and School Medical Officer,
- Senior Assistant Medical Officer of Health and Maternity and Child Welfare Officer,
- Senior Assistant Medical Officer of Health and Superintendent of Hospital for Infectious Diseases,
- Assistant Medical Officer of Health and Assistant Tuberculosis Officer,
- 3 Assistant Medical Officers of Health and Assistant School Medical Officers,
- Assistant Medical Officer of Health and Assistant Maternity and Child Welfare Officer.

10. Of the above, the Senior Assistant Medical Officer in the Tuberculosis Department would assist the Medical Officer of Health in the general health services of the City, and in view of the present day great extension of the work he should, similarly to the Deputies in other Departments, be given an office adjoining that of the Medical Officer of Health in the Guildhall.

11. All the above officers would be under the administrative control of the Medical Officer of Health whose duties are defined by statute, and whose relation to the City Council is laid down in the Appendix to the Ministry of Health Circular No. 1095, which states :—“ The Medical Officer of Health of the County Council or of the County Borough Council will be Chief Medical Advisor of the Authority and its various Committees in all matters relating to the co-ordination and general medical administration of the public health services (including all transferred medical services under the Local Government Act, 1929) provided by the Local Authority under whatever committee they may be administered. Subject to the instructions of the Authority, and in the closest possible communication with the Clerk, as the principal Administrative Officer, and acquainted with the whole of its work and policy, the Medical Officer of Health should exercise general supervision over the work of the public health and medical staff of the Authority engaged in those various services, though, obviously, some members of the medical staff will be called upon to advise the appropriate committees on the clinical aspect of their work, or will be entrusted with the routine administration of the various institutions in accordance with the policy and instructions of the Council.”

12. With regard to co-ordination between the following services, namely, the Tuberculosis, the School Medical, the Maternity and Child Welfare and the Venereal Diseases, it may be stated that at the present time the actual work of all is closely co-ordinated, and arrangements are in force so that patients are transferred from one department to any other special department that the nature of their case renders desirable. I may add, that although the School Medical Service is under the control of the Education Committee, effective co-operative measures are in force, and also that all the above services are working in connection with Saint Mary's Hospital and its resident and visiting medical staff.

HEALTH VISITORS AND NURSES.

13. I suggest that certain re-organisation in connection with the staff of Health Visitors and Nurses employed by the Council would result in more economical and at the same time more efficient service. As I have already stated, the Tuberculosis, Maternity and Child Welfare, and School Medical Services have each been organised as separate units, and each has its own staff of nurses or Health Visitors. Of these only those appointed as Health Visitors are required by the Ministry of Health to hold a Health Visitor's certificate; this certificate is not required by those appointed as Tuberculosis Nurses, School Nurses or Infant Protection Visitors. I suggest, however, that in future no nurse should be appointed to either the School Medical or Tuberculosis Services unless she holds the Health Visitors' Certificate, by this means the Council would in the course of time possess a staff of Health Visitors each of whom would be fully qualified to carry out any of the duties which are now performed by the nurses of the various special departments.

14. The advantage of this proposal will be evident from a realisation of the present position of affairs. The boundaries of the City are now so extensive that several miles have to be traversed to reach the outlying parts of the district. Suppose, for instance, as may readily happen, there should be a maternity case, a tuberculosis patient, a school child who needs visiting, and an adopted infant, in one of the outlying districts, this would involve a visit from four different officials. Similarly, it is quite possible that in one single family there may be three or four officials from various departments visiting different members of that family at the same time. This is obviously an uneconomic and unsatisfactory arrangement.

15. If, however, the suggestion as to the appointment of Health Visitors be adopted a far better system could be arranged. Each Health Visitor would then be given one particular district and she would carry out all the visiting which was needed from any cause in that area. The work would be simplified, much time in travelling would be saved, each family unit would rely upon one health visitor only for advice, and the confusion which may arise from different officials visiting and giving advice to the same household would be avoided. The many advantages of this proposal are too obvious to need stressing.

16. The number of Health Visitors and Nurses at present employed by the Council in connection with various public health services is 22, namely :

- 7 Health Visitors
- 4 Tuberculosis Nurses
- 10 School Nurses
- 1 Infant Protection Visitor.

17. This does not mean that the City could be divided into 22 districts, because part of the time of the Health Visitors is occupied at the Child Welfare Centres, the Tuberculosis Nurses have also to attend at the Tuberculosis Dispensary, and the School nurses have to spend a good deal of time at the Schools and School Clinic. But, after making allowance for the time which must be spent at various institutions, it is only a matter of arrangement to allot districts to the remainder of the staff, each of which will be within the capacity of one Health Visitor to carry out all the visits now paid by several officials.

18. The adoption of the above measure of co-ordination must, I think, appeal strongly on the grounds of economy and on that of increased efficiency of service.

HOSPITAL SERVICES.

19. I now come to Saint Mary's Hospital, which is the principal centre of institutional treatment provided by the Council. This fine building, with over 1,100 beds, is, since it was appropriated as a general municipal hospital, being gradually brought up to the standard of the best type of modern voluntary hospital. The resident medical staff, under the Superintendent, Dr. Macpherson, has been increased to five, the nucleus of a staff of visiting consultants and specialists has been formed, and the scope of its work is gradually being enlarged.

20. In the co-ordination of medical services it is advisable that the services of the medical and surgical staff at Saint Mary's should be available as required for any other hospital and institution under the Council's control. They should perform all operations which may be required at the City Mental Hospital, at the Milton Hospital for Infectious Diseases, or in connection with the School Medical Service. Equally, the services of specialists appointed to other Departments should be available for patients at Saint Mary's, *e.g.* mental patients should benefit from the advice of the specialist staff at the City Mental Hospital, tuberculous patients from the services of the Tuberculosis Officer, venereal diseases patients from the services of the Medical Officer in charge of the Venereal Diseases Clinic, and so on. The preliminary steps for bringing this about are now under consideration.

21. The accommodation for acute cases at Saint Mary's Hospital will, it is hoped, shortly be further increased by the proposed removal of about 180 persons, who are simply aged and infirm and not in need of active medical treatment, to the reconstructed Children's Home under the care of the Public Assistance Committee. When this has been effected, and when the new wards at the Royal Portsmouth Hospital are completed, there should be no question of any sick inhabitant of the City having to take his turn on a waiting list for any form of hospital treatment which he may be in need of.

22. In developing the resources of Saint Mary's Hospital, the provision already made at the Royal Portsmouth Hospital will be kept in mind and the aim will be to satisfy those demands which the Royal Hospital is unable to meet. Saint Mary's is not intended as a rival establishment, there is ample work for both institutions, and the most benefit to the inhabitants of this City will be secured only through the cordial co-operation of the governing bodies of both Hospitals; it is a hopeful sign that a joint committee of the representatives of the voluntary hospitals and of Saint Mary's Hospital has already been appointed with this end in view.

MATERNITY SERVICES.

23. One of the first developments to be put in hand may well be the concentration of all maternity and obstetrical services at Saint Mary's Hospital. Some years back, in order to meet urgent demands, the Council provided a Maternity Hospital with 17 beds. At that time, apart from the provision made by the Poor Law, there was no institution of this kind for the poorer inhabitants of the City, and the hospital supplied an urgent need. Now, however, there are 74 beds available for maternity cases at Saint Mary's Hospital, this is sufficient for the needs of the City, and there is no reason for the continuance of the Maternity Hospital in Trafalgar Place. It will be better, therefore, to close down the latter and treat all maternity cases at Saint Mary's Hospital where there is ample accommodation, all the equipment necessary, and a resident medical and surgical staff on the spot to deal with any emergency. The advantages of this step from the points of view of economy and efficiency of administration are indisputable. Further, this is also a branch of medical service, which, from past experience, the Medical Superintendent of Saint Mary's is specially qualified to undertake.

24. A use might be found for the Maternity Hospital in Trafalgar Place by utilising it for infants attending the Child Welfare Centres who are found to be suffering from nutritional defects or marasmatic or other conditions which call for special nursing and attention. The special apparatus and equipment now at the Hospital could with advantage be transferred to the Maternity Department at Saint Mary's.

25. An alternative suggestion which, provided the accommodation is sufficient, has much to recommend it is to transfer the School Clinic to the vacated premises. These are in a central position, and I think might possibly be made to provide more suitable accommodation for the School Clinic than the existing premises. If this is practicable it would be an economical measure because the three houses in Victoria Road North now used for the Clinic might be sold for a sum which would more than cover the cost of adopting the building in Trafalgar Place for use as a School Clinic.

MAINTENANCE CHARGES IN SAINT MARY'S HOSPITAL.

26. A matter which arises in connection with Saint Mary's Hospital is the amount which patients should be required to pay towards their maintenance. According to the provisions of the Local Government Act, 1929, (Sec. 16) it is the duty of the Council to recover from any person the whole of the expenses of his maintenance in hospital, or such part as, in the opinion of the Council, he is able to pay; provided that, if there is an association for providing hospital benefits to its members, the Council may accept in respect of such members a sum agreed upon between the Council and the governing body of such association.

27. First, in regard to a person not belonging to any contributory scheme who is admitted to Saint Mary's Hospital, it is the duty of the Council to recover the full amount of maintenance, or such proportion of the full amount as the person is able to pay. In order to assess the charges for maintenance it is advisable that the Council should appoint an Almoner, who should enquire into the financial circumstances of the patient in order to enable the Governors to determine what amount he should be called upon to pay. Such Almoner should also visit the Hospital weekly for the purpose of collecting the charge fixed. The necessary enquiries are now being made by the Relieving Officers, but this is not a suitable practice seeing that the Hospital is not now connected with the Poor Law.

28. Secondly, there is in Portsmouth the Hospitals' Contributory Scheme, the members of which, on payment of a small amount weekly, are entitled to free treatment at the Voluntary Hospitals in Portsmouth. This does not, however, entitle contributors to treatment at Saint Mary's Hospital. It has happened in the past, and will doubtless happen in the future, that a person who is a member of the Contributory Scheme has been unable to gain admission to a Voluntary Hospital and has had to be admitted to Saint Mary's Hospital, or possibly has been transferred from a Voluntary Hospital to Saint Mary's Hospital, when, in view of his previous payments to the Contributory Scheme, he has naturally objected to being called upon to pay for his maintenance in this Hospital.

29. The principle of a Contributory Scheme by means of which those in limited circumstances can make provision for the heavy costs of hospital treatment is a sound one, it is advantageous to the patient, of great value to the Voluntary Hospitals, and it would be a pity to permit of anything which would injure it. If, however, a contributor to the scheme realises that in the event of his needing hospital treatment he is liable to be sent to Saint Mary's Hospital and so lose the benefit of his contributions, it is bound to have an injurious effect on the membership of the scheme. On the other hand, if the contributors were assured that their weekly payments would cover treatment also at Saint Mary's Hospital, it would tend to increase the attractiveness of the Contributory Scheme. I think, therefore, it is most desirable that the Scheme should be amended to include treatment at Saint Mary's Hospital. The question is, how can it best be arranged? At the present time the Contributory Fund pay ninety per cent. of their funds to the Voluntary Hospitals; it would be very difficult to assess a percentage that should be paid to Saint Mary's Hospital in respect of the treatment of their contributors, but I think an equitable method to adopt would be for the Contributory Fund to pay a fixed sum to Saint Mary's Hospital in respect of each of their contributors who is admitted to that institution. This sum might be some amount between 20/- and 30/- per case, but it should be understood that this payment would not cover more than four weeks' treatment, and that after that period the contributor would have to pay for his maintenance in accordance with his means. It is quite obvious that there must be a time limit to the amount of service rendered for the lump sum contributed because it will often happen that a chronic invalid, possessed of a certain amount of income, may remain as an in-patient for months, or years, and his maintenance ought not to be a charge upon the ratepayers. The matter is one which might well be discussed between the Council and the Governing Body of the Hospitals' Contributory Scheme with a view to a satisfactory arrangement being concluded.

OTHER MEDICAL SERVICES.

30. Several of the recommendations made in my Report of January 1st, 1931, have since been carried out, others are receiving attention. One matter connected with all medical services of the City which has not yet been discussed is the arrangements for the carrying out of pathological and bacteriological work.

31. There is now a well-equipped bacteriological laboratory, in charge of a most competent Bacteriologist, at the Royal Portsmouth Hospital, and, seeing that one laboratory is sufficient for the needs of the City, it would be wasteful duplication to establish another at Saint Mary's Hospital or elsewhere. In addition to the requirements of private practitioners there is a large amount of bacteriological investigation necessary in connection with the Council's

hospitals, the prevention of infectious disease, food poisoning, and other matters, and I strongly advise that an agreement be entered into with the Governors of the Royal Hospital for all these investigations to be carried out there. Payment might be by an annual contribution to include all examinations, or according to an agreed scale of charges for each examination and report. I think the Council would find an inclusive payment to be the more satisfactory arrangement.

32. Before, however, many of the investigations which we require can be carried out at the Royal Hospital Laboratory, it will be necessary for it to be licenced for animal inoculation. At the present time there is no place licenced in the City, and the result is that any investigations which involve animal inoculation have to be carried out in London or elsewhere. This increases the expense and, what is more important, it entails a delay which may be of vital importance. The medical services of this City cannot be regarded as efficient until provision is made for prompt bacteriological reports to be obtained when necessary, and it is unfortunate that in a City of this size no such provision exists at the present time.

CONCLUSION.

33. Other matters in connection with the unification of the medical services have been dealt with in my Reports of January, 1931 and April, 1932. I would only point out in conclusion that there is a great need of further accommodation for the staff of the Health Department; there has been very little addition to that provided when the Town Hall was erected in 1890, since when there has been an enormous increase in the duties and personnel of the Department.

This Report was presented on the instructions of the Special Committee as to Constitution of Committees and Organisation of Corporation Departments. Up to the present no action has been taken upon it, but I do strongly suggest that the unification of all the Health Services of the Council upon the lines which I have indicated will lead, not only to increased efficiency, but to more economical administration.

HOSPITALS.—Particulars of the various hospitals in the City are given on Page 45. A notable event was the conversion of St. Mary's Hospital into a general Municipal Hospital, the actual date of transference to the Health Committee being April 1st, 1933. At the end of the year the medical staff of St. Mary's was increased by the appointment of four part-time visiting Medical Officers. Statistical details are given in the following three tables.

ST. MARY'S HOSPITAL.

TABLE I.

Table showing the classification of the accommodation for Sick, Maternity and Mental cases and the number of beds occupied on the 31st December, 1933.

Classification of Wards (1)	Number of Wards (2)	BEDS							
		MEN		WOMEN		CHILDREN (under 16 years of age)		Total	
		Pro-vided (3)	Occu-pled (4)	Pro-vided (5)	Occu-pled (6)	Pro-vided (7)	Occu-pled (8)	Pro-vided (9)	Occu-pled (10)
1. Medical	2	45	43	43	30	10	10	98	83
2. Surgical	2	47	20	47	29	4	4	98	53
3. Chronic Sick	5	76	72	156	95	—	—	232	167
4. Children	2	—	—	—	—	84	63	84	63
5. Venereal	1	6	1	—	—	—	—	6	1
6. Tuberculosis	2	29	29	35	20	6	6	70	55
7. Isolation	1	—	—	—	—	—	—	35	—
8. Maternity	2	—	—	39	17	—	—	39	17
9. Mental Lunacy Act, 1890									
(i) Short stay	} 5	25	22	54	43	—	—	79	65
(ii) Long stay		49	44	108	87	33	33	190	164
10. Mental Defectives	Part of 2 Wards	38	38	33	33	—	—	71	71
11. Skin and Cancer	2	49	49	46	21	3	3	98	73
TOTAL	24	364	318	561	375	140	119	1100	812

TABLE II.

Statistics relating to In-Patients during the year ended 31st December, 1933.

1.	Total number of admissions (including infants born in hospital)	4302
2.	Number of women confined in Hospital	274
3.	Number of Live Births	254
4.	Number of Still-births	20
5.	Number of Deaths among the newly-born (<i>i.e.</i> under four weeks of age)*	11
6.	Total number of Deaths among children under one year (including those given under 5)	49
7.	Number of Maternal deaths among women confined in Hospital	2
8.	Total number of Deaths	788
9.	Total number of Discharges (including infants born in Hospital)	3,557
10.	Duration of stay of Patients included in 8 and 9 above. Number of cases whose total stay was for the following periods—	
	(a) Four weeks or less	3,104
	(b) Exceeding four weeks, but under thirteen weeks	926
	(c) Thirteen weeks or more	315
11.	Number of beds occupied—	
	(a) Average during the year	831
	(b) Highest on 11th January, 1933	929
	(c) Lowest on 22nd October, 1933	751
12.	Number of Surgical operations under general anaesthetic (excluding dental operations)	721
13.	Number of abdominal sections	111

* *This figure relates only to children born in Hospital.*

TABLE III.

Classification of In-patients who were discharged from or who died in the Hospital during the Year ended 31st December, 1933.

DISEASE GROUPS	Children (under 16 years of age)		Men and Women	
	Dis- charged	Died	Dis- charged	Died
1. Acute infectious disease	79	1	31	2
2. Influenza	5	—	28	12
3. Tuberculosis—				
Pulmonary	3	1	67	44
Non-pulmonary	4	2	13	5
4. Malignant disease	—	—	73	84
5. Rheumatism—				
(1) Acute rheumatism (rheumatic fever) together with sub-acute rheumatism and chorea	8	—	20	—
(2) Non-articular manifestations of so-called “rheumatism” (muscular rheumatism, fibrositis, lumbago and sciatica)	—	—	30	1
(3) Chronic arthritis	—	—	27	2
6. Venereal disease	3	—	16	2
7. Puerperal pyrexia	—	—	—	—
8. Puerperal fever { (a) Women confined in the hospital	—	—	2	—
(b) Admitted from outside	—	—	2	1
9. Other diseases and accidents connected with pregnancy and childbirth	—	—	66	2
10. Mental diseases { (a) Senile Dementia	—	—	12	—
(b) Other	6	—	146	—
11. Senile decay	—	—	77	167
12. Accidental Injury and Violence	20	6	113	33
<i>In respect of cases not included above :</i>				
13. Disease of the Nervous System and Sense Organs	26	11	152	18
14. “ “ Respiratory System	122	31	236	66
15. “ “ Circulatory System	27	6	252	200
16. “ “ Digestive System	56	18	156	9
17. “ “ Genito-urinary System	28	1	217	41
18. “ “ Skin	60	1	111	2
19. Other diseases	251	19	212	—
20. Mothers and infants discharged from Maternity Wards, and not included in above figures :				
Mothers	—	—	338	—
Infants	243	—	—	—
21. Any persons not falling under any of the above headings	151	—	68	—
TOTALS	1092	97	2465	691

PROFESSIONAL NURSING IN THE HOME.—

The nurses of the Victoria Nursing Association, of whom there are 16, attended on 2,303 patients in their own homes; they paid altogether 61,259 visits, these included 4,035 visits to 255 patients at the request of the Health Department.

MATERNITY AND NURSING HOMES.—There are 48 Maternity and Nursing Homes registered under the provision of the Nursing Homes Registration Act, 1927. Applications for registration during the year were as follows:—

- | | |
|--|-----|
| (1) Number of applications for Registration : | |
| (a) As Nursing Homes | 4 |
| (b) As Maternity Homes | 2 |
| (2) Number of Homes registered : | |
| (a) As Nursing Homes | 4 |
| (b) As Maternity Homes | 2 |
| (3) Number of orders made refusing registration | Nil |
| (4) Number of applications for exemption from registration | Nil |
| (5) Number of applications for registration withdrawn | Nil |

All registered nursing and maternity homes have been periodically inspected and found to be maintained in good order.

AMBULANCE FACILITIES.—The following ambulances are provided by the Local Authority, namely:—

- 2 Ambulances kept at the Milton Hospital for cases of infectious disease ;
- 2 Police ambulances at the Police Station for street accidents ;
- 4 Ambulances at the Ambulance Station, St. Mary's Hospital, for general work.

Ambulances may be obtained at any time, day or night, on application to the Health Department, or to St. Mary's Hospital.

INSTITUTIONAL PROVISION FOR THE CARE OF MENTAL DEFECTIVES.—The powers and duties of the Mental Deficiency Act, are referred to the Mental Treatment Committee, and are administered by Dr. Thomas Beaton, the Superintendent of the City Mental Hospital, to whom I am indebted for the following particulars.

No additional accommodation for the reception of mental defectives has been provided by the Local Authority during the past year. A portion of Saint Mary's Hospital is approved by the Board of Control under Section 37 of the Mental Deficiency Act, 1913, for the reception of 60 defectives (29 males and 31 females) of all classes within the meaning of the Mental Deficiency Acts, being cases over the age of 16 years, but, owing to urgent cases arising, this number has been exceeded.

The number of mental defectives maintained by the Local Authority under Orders in various Certified Institutions on the 1st January, 1934, was 155 (56 males and 99 females), excluding 12 defectives who were on licence from such Institutions.

In addition to the above there were on the 1st January, 1934, 43 mental defectives (12 males and 31 females) under guardianship, in respect of whom the Local Authority contribute towards the cost of their maintenance.

Plans for the provision of a Colony to accommodate 500 mental defectives are still under consideration by the Board of Control.

LABORATORY FACILITIES.—There has been no change during the year in the provision made for bacteriological examinations in connection with the diagnosis and prevention of disease. Previous reference to the subject will be found on pages 52 and 53 in this Report.

The following table gives particulars of various bacteriological examinations carried out during the year. Bacteriological examinations in connection with the water supply and milks were also carried out by the City Analyst.

DISEASE	Result		TOTAL
	Positive	Negative	
Diphtheria	237	2,135	2,372
Tuberculosis	375	1,750	2,125
Enteric Fever	7	22	29
Cerebro-spinal Meningitis	—	3	3

WATER SUPPLY.—There is nothing to add to my previous reports in respect of the water supply. It is most satisfactory to note that in spite of the prolonged drought, the Portsmouth Water Company have been able to maintain an unrestricted supply from their abundant springs at Havant and Bedhampton. Periodical analysis by the City Analyst, the results of which are given on page 103, show that the usual high standard of purity is maintained.

PUBLIC CLEANSING.—The process of re-organisation of the Refuse Collection Service has been continued by the purchase of additional motor vehicles of the "Pactum" type to replace the old high loading vehicles and many of the horses previously employed. This has brought about a great improvement in the service, together with substantial reduction in the collection costs.

There are now 17 new vehicles in use and a further six 10 cubic yard machines are on order for immediate delivery.

Such horse carts as are now in use for refuse collection are of the low loading type, with slatted canvas covers and pneumatic tyres, a great improvement on the old iron tyred high loading type.

Controlled Tipping is the only method of disposal in use, and the closing down of the destructor has given added impetus to the reclamation of derelict land, which is in great demand for recreation grounds and playing fields, etc.

MUNICIPAL DISINFECTING FLUID.—9,970 gallons of electrolysed sea-water disinfecting fluid were manufactured at the Municipal Disinfecting Fluid plant during the year. Of this amount 3,667 gallons were issued to the public, 1,930 gallons to the public elementary schools, 2,040 gallons to the Public Swimming Baths, 400 gallons to the Children's Home Swimming Bath, 510 gallons to Langstone Sanatorium, 1,020 gallons to the Municipal Maternity Hospital, 110 gallons to St. Mary's Hospital, 40 gallons to St. Mary's Institution, and 70 gallons to the Eye and Ear Hospital.

FACTORIES AND WORKSHOPS.—The following tables give particulars of inspections, defects discovered, and action taken in connection with the supervision of factories, workshops and workplaces :—

Premises	Number of		
	Inspections	Written Notices	Occupiers Prosecuted
Factories (including Factory Laundries)	95	7	Nil
Workshops (including Workshop Laundries)	338	25	Nil
Workplaces (other than Outworkers' premises)	100	4	Nil
TOTAL	533	36	Nil

HOUSING.—912 dwelling-houses were erected in the City during the year, these include Brunel House, consisting of 12 flats, built by the Council on the site of Taylor's Court in Britain Street, Portsea. Considerable progress was made in the Council's scheme for 150 working-class houses and flats at Wymering, on the south side of Southampton Road, but none were completed by the end of the year.

SLUM CLEARANCE.—In September a comprehensive scheme for "Slum Clearance" under the powers of The Housing Act, 1930, was adopted by the City Council. The proposed action will extend over the five years 1934-1939, during which period 13 Clearance Areas, including 1,277 dwelling-houses will be dealt with; in addition, 481 single houses, which are unfit for human habitation, will be demolished.

The above scheme will involve the displacement of 6,528 persons to re-house whom the Council propose to erect 1,429 houses or flats. The scheme provides that persons who are displaced shall so far as is practicable be re-housed in the same district in which they previously lived.

The particulars of the various Clearance Areas with which it is proposed to deal, and of the proposed new houses, are set out in the following programme, which shows amount of work to be carried out in each of the five years.

HOUSING ACT, 1930.

Proposed Programme and Time Table of Action to be taken in the 5-year Period.

Year ending March 31st	DISPLACEMENTS				REHOUSING			
	Scheme	Number of Houses to be dealt with	Number of Persons to be displaced	Number of Persons to be rehoused	Number of Dwellings to be erected	Scheme	Remarks	
1933-4	Individual Unfit Houses	27	150	150	30	1. York Place	Flats	
1934-5	Britain Street—Sun Street	14	67	} 740 361				
1934-5	Britain Street—Little Britain Street	10	49					
1934-5	King Street—North Street—Chatham Row	40	169					
1934-5	Aylward Street—The Dell—Bishop Street	20	104		146	2. Southampton Road Contract No. 1	Houses	
1934-5	Kent Street—St. George's Passage	3	17		954	3. Southampton Road Contract No. 2	Houses	
1934-5	Blossom Alley	21	127					
1934-5	Daniel Street—Cross Street	51	207					
	Individual Unfit Houses	159 64						
	TOTALS for Year ending March 31st, 1935	223	1101	1100	240			

HOUSING ACT, 1930. Proposed Programme and Time Table of Action—*continued*.

DISPLACEMENTS				REHOUSING			
Year ending March 31st	Scheme	Number of Houses to be dealt with	Number of Persons to be displaced	Number of Persons to be rehoused	Number of Dwellings to be erected	Scheme	Remarks
1935-6	Orange Street—Unicorn Street	134	738	119	26	4. Britain Street—Sun Street	Flats
1935-6	New Row—Chalton Street	68	286	144	36	5. Britain Street— Little Britain Street	Flats
1935-6	Individual Unfit Houses	202	1024	75	15	6. King Street—North Street —Chatham Row	Flats
		98	553	90	18	7. Aylward Street—The Dell— Bishop Street	Flats
				66	24	8. Kent Street—St. George's Passage	Flats
				975	201	9. Daniel Street—Cross Street	Houses
				1574	344	10. North Street—Blossom Alley—Prince George St.	Flats
				1577	344	11. Wymering Housing Site	Houses
	TOTALS for Year ending March 31st, 1936	300	1577	420	90	12. Unicorn Street—Orange Street	Flats
1936-7	Church Path North N.—Church Path North S.	205	788	198	42	13. Chalton Street	Flats
1936-7	Individual Unfit Houses	95	539	708	150	14. Wymering Housing Site	Houses
	TOTALS for Year ending March 31st, 1937	300	1327	1326	282		

HOUSING ACT, 1930. Proposed Programme and Time Table of Action—continued.

		DISPLACEMENTS				REHOUSING			
Year ending March 31st	Scheme	Number of Houses to be dealt with	Number of Persons to be displaced	Number of Persons to be rehoused	Number of Dwellings to be erected	Scheme	Remarks		
1937-8	Havant Street	35	163	810	186	15. Church Path North	Flats		
1937-8	Oxford Street	24	107						
1937-8	Providence Place	17	92						
1937-8	Sussex Street	100	484						
TOTALS for Year ending March 31st, 1938		176	846	810	186				
1938-9	Sussex Street	54	261	60	30	16. Havant Street	Flats		
1938-9	Individual Unfit Houses	224	1266	90	18	17. Oxford Street	Flats		
				210	45	18. Providence Place	Flats		
				1104	228	19. Sussex Street	Flats		
				104	26	20. Wymering Housing Site	Houses		
TOTALS for Year ending March 31st, 1939		278	1527	1568	347				
GRAND TOTALS		1304	6528	6528	1429				

The first steps toward putting into execution the foregoing scheme were taken in September, when I submitted Official Representations as to the conditions existing in the following areas, viz. :—

- Britain Street and Sun Street Area.
- Britain Street and Little Britain Street Area.
- Kent Street and St. George's Passage Area.
- King Street, North Street and Chatham Row Area.
- Aylward Street, The Dell and Bishop Street Area.

After consideration of these representations the Council declared the above to be Clearance Areas within the meaning of the Housing Act, 1930, and applied to the Minister of Health for the confirmation of Compulsory Purchase Orders to enable them to acquire the land included in these areas.

HOUSE INSPECTION.—The following particulars, tabulated in accordance with the instructions of the Minister of Health, are given as to the particulars of house inspection :—

1.—INSPECTION OF DWELLING-HOUSES DURING THE YEAR.

(1)	(a)	Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	9519
	(b)	Number of inspections made for the purpose	24471
(2)	(a)	Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	140
	(b)	Number of inspections made for the purpose	420
(3)		Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	16
(4)		Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	48

2.—REMEDY OF DEFECTS DURING THE YEAR WITHOUT SERVICE OF FORMAL NOTICES.

	Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	1316
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3.—ACTION UNDER STATUTORY POWERS DURING THE YEAR.

A.—Proceedings under sections 17, 18 and 23 of the Housing Act, 1930 :

(1)	Number of dwelling-houses in respect of which notices were served requiring repairs	45
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(2) Number of dwelling-houses which were rendered fit after service of formal notices :	
(a) By owners	25
(b) By local authority in default of owners	Nil
B.—Proceedings under Public Health Acts :	
(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	1592
(2) Number of dwelling-houses in which defects were remedied after service of formal notices :	
(a) By owners	166
(b) By local authority in default of owners	Nil
C.—Proceedings under sections 19 and 21 of the Housing Act, 1930 :	
(1) Number of dwelling-houses in respect of which Demolition Orders were made	16
(2) Numbers of dwelling-houses demolished in pursuance of Demolition Orders	23
D.—Proceedings under section 20 of the Housing Act, 1930 :	
(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	2
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	Nil
E.—Proceedings under section 3 of the Housing Act, 1925 :	
(1) Number of dwelling-houses in respect of which notices were served requiring repairs	Nil
(2) Number of dwelling-houses which were rendered fit after service of formal notices :	
(a) By owners	Nil
(b) By local authority in default of owners	Nil
(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close	Nil
F.—Proceedings under Sections 11, 14 and 15 of the Housing Act, 1925 :	
(1) Number of dwelling-houses in respect of which Closing Orders were made	Nil
(2) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit	Nil
(3) Number of dwelling-houses in respect of which Demolition Orders were made	Nil
(4) Number of dwelling-houses demolished in pursuance of Demolition Orders	Nil

METEOROLOGICAL REPORT.

MONTHLY WEATHER SUMMARY FOR THE YEAR 1933.

Month	Mean Barometer ins.	Mean Temp. °F.	ABSOLUTE		MEAN		Mean Daily Range °F.	SUNSHINE		RAINFALL		Relative Humidity (Saturation 100)	
			Max. °F.	Min. °F.	Max. °F.	Min. °F.		Total No. of hours	Days of 0.5 hrs. or more	Total m.m.	Total ins.		Days of 0.01 ins. or more
January	30.158	38.6	54	23	43.2	34.1	9.1	65.1	20	52.7	2.07	12	89
February	30.014	41.6	54	27	46.4	36.8	9.6	88.6	19	83.7	3.29	14	90
March	29.987	47.6	63	32	53.7	41.2	12.5	203.6	26	72.9	2.87	12	82
April	30.152	49.7	67	32	57.3	42.2	15.1	193.4	27	32.6	1.28	7	78
May	30.017	55.9	78	41	63.0	48.8	14.2	208.3	29	49.3	1.94	12	77
June	29.916	62.1	82	48	69.3	54.9	14.4	268.0	30	29.9	1.18	9	76
July	30.138	66.4	83	52	73.5	59.0	14.5	284.0	30	35.0	1.36	9	78
August	30.135	66.6	85	51	74.9	58.4	16.5	291.1	31	15.0	0.58	6	77
September	30.102	63.0	79	46	70.4	55.6	14.8	209.0	28	85.9	3.41	13	80
October	29.973	53.7	68	33	59.2	48.2	11.0	125.6	24	47.2	1.86	13	82
November	29.987	44.7	58	30	49.4	40.1	9.3	88.8	22	15.7	0.62	9	85
December	30.211	36.0	45	25	40.3	31.7	8.6	60.9	15	15.6	0.61	8	88
TOTAL	—	—	—	—	—	—	—	2086.4	301	535.5	21.07	124	—
MEAN	30.066	52.0	68.0	36.6	58.2	45.8	12.4	173.8	25.0	44.6	1.75	10.3	81.4

TABLE SHOWING SUNSHINE, RAINFALL AND EXTREMES OF TEMPERATURE SINCE 1890.

Year	Total Sunshine	Total Rainfall in ins.	Highest Maximum in Shade of	Date	Lowest Maximum in Shade of	Date	Lowest Minimum in Shade of	Date	Lowest Minimum on Grass of	Date
1890	1350	21.71	77	May 24th	30	Dec. 16th	18	Dec. 31st	10	Jan. 7th
1891	1247	31.43	78	May 16th, Sept. 12th	31	Jan. 6th	19	Jan. 18th	8	Jan. 10th, 11th
1892	1371	22.27	77	July 27th	29	Jan. 9th	19	Jan. 10th	13	Dec. 27th
1893	1412	23.14	85	June 18th	29	Jan. 2nd	20	Jan. 2nd	12	Jan. 5th
1894	1600	35.89	82	July 1st	25	Jan. 4th	14	Jan. 5th, 6th	13	Jan. 5th, 6th
1895	1811	27.26	79	Sept. 28th	25	Feb. 6th	17	Feb. 6th, 7th	5	Feb. 13th
1896	1566	25.79	81	July 21st	32	Feb. 25th	24	Feb. 26th	19	Feb. 26th
1897	1569	28.48	86	July 16th	32	Jan. 23rd	24	Jan. 24th	16	Dec. 4th
1898	1454	22.67	81	Aug. 16th	37	Feb. 21st	27	Feb. 21st	19	Feb. 21st
1899	1929	25.26	84	Aug. 3rd	30	Dec. 14th	22	Dec. 14th	16	March 25th
1900	1608	25.96	85	July 25th	35	Feb. 3rd	22	Feb. 10th	16	Feb. 8th, 10th
1901	1843	23.41	84	July 19th	30	Jan. 7th	20	Jan. 9th	14	Jan. 9th
1902	1501	25.27	82	July 19th	32	Dec. 6th	23	Dec. 7th	15	Feb. 12th, 13th, 16th
1903	1702	34.88	80	June 1st, July 9th	32	Jan. 12th	23	Jan. 15th	12	Dec. 3rd
1904	1732	26.64	79	July 17th	30	Jan. 2nd	25	Jan. 1st	13	Jan. 21st
1905	1685	24.05	80	July 21st, 26th	35	Jan. 1st, Nov. 17th	24	Nov. 24th	15	Jan. 9th, Nov. 21st
1906	1705	28.74	79	Sept. 1st	34	Dec. 26th	25	Jan. 24th	13	Feb. 14th
1907	1594	25.33	79	July 16th	29	Jan. 23rd, 24th	20	Jan. 24th	14	Jan. 25th
1908	1951	20.53	83	July 2nd	35	Jan. 11th	17	Dec. 30th	11	Jan. 6th
1909	1902	32.28	85	Aug. 12th	34	Mar. 3rd	20	March 3rd	10	Jan. 27th
1910	1691	31.66	76	May 23rd	35	Jan. 26th	21	Jan. 27th	13	Jan. 16th
1911	2108	30.06	90	Aug. 14th	35	Jan. 15th	25	Jan. 16th	17	Feb. 3rd
1912	1561	31.94	89	July 15th	32	Feb. 2nd	20	Feb. 3rd	12	Dec. 25th
1913	1584	29.96	81	June 29th	36	Dec. 29th, 30th	29	Jan. 13th, April 13th	19	Jan. 24th
1914	1914	33.13	79	Aug. 13th, 14th	33	Jan. 19th	25	Dec. 29th, 31st	14	Nov. 27th
1915	1776	37.41	79	July 2nd	36	Jan. 28th	27	Jan. 23rd	18	Dec. 17th
1916	1628	28.48	82	Aug. 2nd	34	Feb. 25th	25	Feb. 26th	17	Dec. 17th
1917	1718	25.93	78	July 16th, 17th	31	Feb. 25th	20	Feb. 25th	17	Feb. 3rd
1918	1874	25.80	83	Aug. 22nd	36	Jan. 26th, 27th	20	Feb. 5th	13	Feb. 18th
1919	1784	29.06	82	Aug. 10th, 13th	31	Jan. 3rd, 4th	23	Jan. 9th	16	Dec. 17th
1920	1584	28.00	78	May 24th	31	Jan. 31st	24	Jan. 25th, Feb. 8th, 9th	17	Dec. 16th
1921	2065	14.00	89	July 19th	38	Dec. 12th	22	Jan. 7th	22	Dec. 16th
1922	1809	30.24	79	May 23rd, 24th	37	Feb. 7th	26	Jan. 15th	18	Nov. 13th
1923	1770	29.54	89	July 12th	34	Feb. 6th	26	Nov. 15th	19	Nov. 13th
1924	1760	36.59	77	July 12th	37	Dec. 25th	23	Jan. 24th, 25th	19	Jan. 18th
1925	1923	38.10	82	June 7th	35	Feb. 20th, 27th	27	Nov. 26th	17	Nov. 16th
1926	1688	26.40	85	July 14th	32	Dec. 14th	26	Feb. 18th, 29th	21	Feb. 15th
1927	1653	34.00	80	July 10th	32	Jan. 14th	22	March 19th	17	Nov. 14th
1928	1923	32.51	88	July 15th	37	Dec. 19th	24	Jan. 15th, 17th	18	Jan. 15th, 17th, Dec. 28th
1929	1986	28.00	87	Sept. 5th	36	Dec. 14th	25	Mar. 12th, 14th, Dec. 15th	15	Jan. 20th
1930	1730	30.65	83	August 28th	38	Feb. 13th	16	Feb. 15th	17	Dec. 9th, 15th
1931	1503	27.76	77	August 3rd, 5th	33	Dec. 5th	24	March 20th	16	Feb. 15th
1932	1512	26.77	84	August 18th	31	Jan. 8th, March 9th	21	March 10th	16	Nov. 17th
1933	2086	21.07	85	August 7th	33	Feb. 10th	26	Jan. 1st, Feb. 11th, Mar. 13th	18	Jan. 1st
						January 24th	23	January 27th	19	December 9th

SUMMARY OF METEOROLOGICAL STATISTICS, 1933.

Barometer.—The mean barometer pressure for the year was 30.066 inches. The highest observed reading corrected to sea-level was 30.813 on December 23rd, and the lowest 28.981 on December 28th.

Temperature.—The mean temperature in the shade was 52.0°, or 1.2° above the normal.

MAXIMUM.—The mean maximum temperature in the shade was 58.2°, the highest being 85.0° on August 7th.

MINIMUM.—The mean minimum temperature was 45.8°, the lowest being 23° on January 27th.

MINIMUM ON GRASS.—The mean minimum temperature on the grass was 40.9°, the lowest being 19° on December 9th.

EARTH TEMPERATURE.—The mean temperature at 1 foot below the ground was 52.0°, and that at 4 feet 53.1°.

Bright Sunshine.—2086.4 hours of sunshine were registered by the Campbell-Stokes Recorder. The greatest amount registered on one day was 14.7 hours, viz., on June 7th.

Frosts.—The minimum thermometer in the shade, four feet above the ground fell to and below freezing point on 53 days, and that on the ground on 80 occasions.

Humidity.—The mean humidity of the air (Saturation 100) was 81.

Rainfall.—The total rainfall was 21.07 inches, or 8.69 inches below the normal. The greatest fall of rain in 24 hours was 1.82 inches, on September 12th.

Hail.—Hail occurred on 4 occasions.

Thunder.—Thunder occurred on 11 occasions.

Snow.—Snow or Sleet fell on 4 occasions.

Fogs.—Fogs occurred on 13 occasions.

Gales.—Gales occurred on 16 occasions.

Averages for the Past Ten Years, 1924 to 1933.

<i>Rainfall</i>	<i>Hours of Bright Sunshine</i>	<i>Mean Temperature</i>	<i>Humidity (Saturation 100)</i>
30.18	1777.4	51.4	81.8

APPENDIX.—TABLE 1. Vital Statistics of Whole District during 1933 and previous years.

YEAR	Population estimated to Middle of each Year	BIRTHS		TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS		NETT DEATHS BELONGING TO THE DISTRICT				
		Un-corrected Number	Nett.	Number	Rate	of Non-registered residents in the District	of Resi-dents not regis-tered in the District	Under 1 Year age	Rate per 1,000 Nett Births	At all Ages	Number	Rate
1910	227,821	5801	25.41	2995	13.14	...	...	603	104	...	...
1911	232,221	5787	24.99	3101	13.40	106	72	734	127	3067	13.20	
1912	236,732	5605	23.60	3141	13.31	97	81	466	85	3125	13.24	
1913	241,256	5989	24.34	3096	12.63	98	82	545	91	3080	12.57	
1914	245,827	5714	23.17	3176	12.96	125	98	486	85	3149	12.81	
1915	202,441	4975	24.44	3405	16.81	176	55	433	87	3284	16.24	
1916	197,848	5186	24.09	2987	15.09	112	62	418	80	2937	14.84	
1917	198,527	4613	20.71	3081	15.51	197	58	326	71	2902	14.81	
1918	203,396	4778	20.90	3730	18.33	190	107	361	75	3647	17.93	
1919	224,846	5300	21.94	3006	13.37	118	93	383	74	2981	13.26	
1920	233,805	6520	25.85	2705	11.10	120	55	393	60	2640	11.29	
1921	233,929	5662	22.90	2704	11.55	142	50	355	63	2612	11.20	
1922	236,630	5465	22.10	2920	12.34	108	62	349	63	2874	12.14	
1923	230,718	5338	21.06	2540	11.00	81	65	276	52	2524	10.93	
1924	232,000	5096	20.10	3003	12.94	94	68	348	66	2977	12.58	
1925	232,900	4888	19.07	2912	12.50	110	64	297	61	2866	12.30	
1926	231,500	4636	18.20	2746	11.86	108	65	257	54	2703	11.67	
1927	232,100	4352	17.08	3006	12.95	121	60	234	55	2845	12.68	
1928	240,700	4579	17.21	2864	11.89	134	57	245	55	2730	11.34	
1929	242,000	4519	16.80	3429	14.16	153	69	293	66	3345	13.82	
1930	242,000	4409	16.30	2927	12.09	142	71	250	59	2856	11.80	
1931	228,900	4454	17.49	3035	13.25	153	68	239	55	2950	12.88	
1932	253,100	4192	16.21	3150	12.48	145	96	246	60	3101	12.28	
1933	251,200	4001	15.38	3171	12.62	133	87	203	52	3125	12.44	

APPENDIX.—TABLE III. Infant Mortality.

Nett Deaths from stated causes at various Ages under 1 Year of Age.

CAUSE OF DEATH	Under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total under 4 weeks	4 weeks and under 3 m'ths	3 months and under 6 m'ths	6 months and under 9 m'ths	9 months and under 12 m'ths	Total Deaths under One Year
Small-pox	—	—	—	—	—	—	—	—	—	—
Measles	—	—	—	—	—	—	—	—	1	1
Scarlet Fever	—	—	—	—	—	—	—	—	—	—
Whooping Cough	—	—	—	—	—	2	1	2	2	7
Diphtheria	—	—	—	—	—	—	—	—	—	—
Influenza	—	—	—	—	—	—	1	1	1	3
Erysipelas	—	—	—	—	—	2	1	—	—	3
Cerebro-spinal Fever	—	—	—	—	—	—	1	—	1	2
Tuberculous Meningitis	—	—	—	—	—	—	1	1	1	3
Abdominal Tuberculosis	—	—	—	—	—	—	—	—	—	—
Other Tuberculosis	—	—	—	—	—	—	—	—	—	—
Syphilis	—	1	—	—	1	1	—	1	—	3
Chicken-pox	—	—	—	—	—	—	—	—	—	—
Rickets	—	—	—	—	—	—	—	—	—	—
Meningitis (not Tuberculous)	—	—	—	—	—	—	—	1	—	1
Convulsions	—	—	—	—	—	1	—	—	—	1
Bronchitis	—	—	—	—	—	1	2	2	3	8
Pneumonia (all forms)	—	1	—	1	2	6	7	5	8	28
Gastritis	1	—	—	—	1	1	1	1	—	4
Diarrhoea and Enteritis	—	2	—	2	4	2	6	6	—	18
Congenital Malformations	6	2	—	—	8	1	2	2	1	14
Atrophy, Debility and Marasmus	7	—	—	3	10	4	5	1	—	20
Premature Birth	49	6	—	1	56	4	—	—	—	60
Injury at Birth	3	—	—	—	3	—	—	—	—	3
Atelectasis	4	1	—	—	5	—	—	—	—	5
Icterus Neonatorum	1	1	1	—	3	—	—	—	—	3
Pemphigis Neonatorum	—	3	1	—	4	—	—	—	—	4
Suffocation, Overlying	—	—	—	—	—	—	—	—	—	—
Other Causes	2	—	1	1	4	2	1	2	3	12
TOTALS	73	17	3	8	101	27	29	25	21	203

Nett Births in the year—Legitimate 3640

Illegitimate 224

Port Sanitary Authority.

To the Chairman and Members of the Port Sanitary Authority.

MADAM AND GENTLEMEN,

There has again been no case of infectious disease in the vessels arriving at the Port.

The number of vessels arriving at the Port during the year was 6,549, of these 589 were from coastwise ports, 154 from foreign ports, and 5,806 from the Solent.

The Port Sanitary Inspector inspected 468 vessels, and in 36 cases insanitary conditions were found, all of which were remedied before the vessels left.

I have the honour to be,

Madam and Gentlemen,

Your obedient Servant,

A. MEARNS FRASER,

Medical Officer of Health.

Milton Hospital

REPORT OF THE MEDICAL SUPERINTENDENT.

To the Chairman and Members of the Hospitals Committee.

MADAM AND GENTLEMEN,

I beg to submit my Annual Report for the year ending 31st December, 1933.

The number of admissions was 1,123, compared to 984. The number of deaths was 43, the number discharged 1,050, and the number remaining 184.

SCARLET FEVER.—Remaining at end of previous year 89. Admitted 798, last year 600; discharged 728; died 7; remaining 152. The fatality rate was 0.95 per cent.

DIPHThERIA.—Remaining at end of previous year 30. Admitted 182, last year 228; discharged 175; died 11; remaining 26. The fatality rate was 5.9 per cent.

ENTERIC FEVER.—Remaining at end of previous year 2. Admitted 3, last year 10; discharged 5; remaining nil. There were no deaths.

TUBERCULOSIS.—Remaining at end of previous year 29. Admitted 86, last year 105; discharged 100; died 15; remaining nil. The fatality rate was 15 per cent.

MEASLES.—Remaining at end of previous year, nil. Admitted 1, last year 12; discharged 1; remaining nil. There were no deaths.

CEREBRO-SPINAL MENINGITIS.—Remaining at end of last year 1. Admitted 8, last year 4; discharged 3; died 6; remaining nil. The fatality rate was 66.6 per cent.

ERYSIPELAS.—Remaining at end of last year 1. Admitted 25, last year 8; discharged 20; died 3; remaining 3. The fatality rate was 13 per cent.

ENCEPHALITIS LETHARGICA.—Admitted 3; discharged 1; died 1; remaining 1. The fatality rate was 33 $\frac{1}{3}$ per cent.

PAROTITIS.—Admitted 3 ; discharged 3.

DYSENTERY.—Admitted 1 ; discharged 1.

INFLUENZA.—Admitted 6 ; discharged 4 ; remaining 2.

PERTUSSIS.—Admitted 1 ; discharged 1.

DIPHThERIA AND SCARLATINA (One admitted as Diphtheria and one as Scarlatina).—Remaining at end of last year 1 ; admitted 2 ; discharged 3.

SEPTIC THROAT (admitted as Diphtheria).— Admitted 2 ; discharged 2.

TONSILLITIS (admitted as Scarlet Fever).—Admitted 2 ; discharged 2.

I have the honour to be, Madam and Gentlemen,

Your obedient Servant,

ROWAN W. REVELL, M.D.,

Medical Superintendent.

MILTON HOSPITAL.

NUMBER OF PATIENTS ADMITTED
during the Year 1933.

DISEASES	AGES								TOTAL
	0 to 1	1 to 5	5 to 15	15 to 25	25 to 35	35 to 45	45 to 55	55 and over	
Scarlet Fever	11	164	546	42	21	15	2	—	801
Typhoid and Para-Typhoid Fever	—	—	1	1	—	1	—	—	3
Diphtheria	4	33	108	21	11	3	2	3	185
Cerebro-spinal Fever	1	3	3	—	1	—	—	—	8
Measles and German Measles	—	—	1	—	—	—	—	—	1
Tuberculosis	—	—	2	26	28	16	10	4	86
Erysipelas	1	3	5	1	2	3	6	4	25
Pertussis	—	1	—	—	—	—	—	—	1
Encephalitis Lethargica	—	—	3	—	—	—	—	—	3
Parotitis	—	—	2	1	—	—	—	—	3
Influenza	—	—	1	4	—	1	—	—	6
Dysentery	—	—	—	—	1	—	—	—	1
TOTALS	17	204	672	96	64	39	20	11	1123

NUMBER OF PATIENTS ADMITTED TO THE MILTON HOSPITAL
(Small-pox Patients—Langstone Hospital) for the years 1883 to 1933.

Year	Small-pox	Scarlet Fever	Enteric or Typhoid	Diphtheria	Measles	Other Diseases	Totals
1883	5	1	....	....	1	....	7
1884	1	13	2	4	2	....	22
1885	8	16	6	6	1	....	37
1886	7	29	66	11	11	1	125
1887	20	56	37	27	4	3	147
1888	4	120	35	23	8	8	198
1889	6	278	48	18	5	8	363
1890	1	384	114	69	1	7	576
1891	....	180	51	52	22	18	323
1892	....	532	81	27	....	5	645
1893	6	503	94	12	6	5	626
1894	22	238	53	38	22	9	382
1895	....	177	83	46	15	25	346
1896	6	354	76	38	10	17	501
1897	....	413	102	37	6	11	569
1898	....	436	92	118	6	10	662
1899	1	333	96	225	....	2	657
1900	....	198	157	211	1	....	567
1901	1	270	101	170	....	....	542
1902	8	339	105	197	....	....	649
1903	3	572	70	211	....	2	858
1904	....	340	73	220	....	3	636
1905	10	274	57	198	....	....	539
1906	1	243	72	239	....	....	555
1907	....	202	109	235	....	....	546
1908	....	343	102	284	1	1	731
1909	....	631	96	354	1	....	1082
1910	....	850	114	336	....	....	1300
1911	....	635	70	436	....	....	1141
1912	....	702	71	782	....	....	1555
1913	....	730	55	652	....	....	1437
1914	....	469	110	615	....	....	1194
1915	....	630	33	684	....	27	1374
1916	....	340	47	589	....	35	1011
1917	....	383	21	340	4	48	796
1918	....	277	15	483	25	27	827
1919	....	250	10	520	10	156	946
1920	....	382	12	598	16	105	1113
1921	....	1010	26	482	8	71	1597
1922	....	996	14	555	6	41	1612
1923	....	595	24	669	6	98	1392
1924	....	518	29	477	5	108	1137
1925	....	834	23	754	8	89	1708
1926	....	489	12	924	10	73	1508
1927	....	539	16	723	4	99	1381
1928	....	684	13	848	3	102	1650
1929	....	702	6	727	1	70	1506
1930	....	609	32	570	6	94	1311
1931	....	530	5	340	7	126	1008
1932	....	600	12	233	14	125	984
1933	....	801	3	185	1	133	1123

OTHER DEFECTS.

Rain-water spouting cleansed or repaired	....	....	....	....	....	371
Roofs repaired	....	....	....	....	....	609
Weather slating repaired or external walls protected	....	....	....	....	....	488
Floors, stairs or doors repaired	....	....	....	....	....	729
Sashes, lines, sills, glazing or sash frames repaired	....	....	....	....	....	1041
Damp courses provided or repaired	....	....	....	....	....	22
Houses or parts of houses cleansed or distempered	....	....	....	....	....	555
" " " repaired	....	....	....	....	....	1062
Sanitary dustbins provided	....	....	....	....	....	13
Dust chutes cleansed or repaired	....	....	....	....	....	—
Space beneath floors ventilated	....	....	....	....	....	71
Yards, stables, sties, etc., repaved	....	....	....	....	....	182
Overcrowding in dwelling-houses abated	....	....	....	....	....	2
Foundation of house concreted	....	....	....	....	....	2
Water supply laid on or water services repaired	....	....	....	....	....	36
Workshops cleaned or distempered	....	....	....	....	....	13
Workshop floors repaired	....	....	....	....	....	1
Workshop roofs repaired	....	....	....	....	....	—
Workshops or parts of Workshops repaired	....	....	....	....	....	4
Cooking ranges or firegrates repaired or renewed	....	....	....	....	....	195
Coppers repaired or renewed	....	....	....	....	....	77
Other nuisances in dwelling-houses abated	....	....	....	....	....	112

OFFENSIVE MATTER, &c.

Manure and refuse removed	....	....	....	....	....	31
Stagnant water removed	....	....	....	....	....	5
Animals removed	....	....	....	....	....	4
Bedding cleansed or destroyed	....	....	....	....	....	13

SLAUGHTERHOUSES, STABLES, &c.

Yards, stables, sties, etc., cleaned	....	....	....	....	....	7
Bakehouses cleansed	9

BYELAWS.

Notices under Nuisance Bye-laws complied with	4
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The following articles of food have been destroyed as unfit for the food of man, *viz.*:

MEAT.

Beef.				Ox Heads and Tongues	....	86
				,, Hearts	....	61
Carcases of (including offal)	33			,, Kidneys	....	1½
Forequarters	....	....	56	,, Kidneys	.... lbs.	308
Hindquarters	....	....	3	,, Kidney Knobs	....	33
Pieces of	....	lbs.	8562	,, Tails	....	7
Ox Livers	....	....	116	,, Tails	.... lbs.	37
,, Lungs	....	sets	122	,, Suet	.... lbs.	12

Mutton

Carcases of	....	....	16
Pieces of	.... lbs.	....	669 $\frac{1}{4}$
Sheeps' Lungs	sets	....	11
" Livers	....	....	17
" Livers	lbs.	....	20
" Heads	....	....	2
" Hearts	....	....	2
" Hearts	lbs.	....	64
" Kidneys	....	....	2

Pork.

Carcases of	....	....	24
Forequarter	....	....	1
Pieces of	.... lbs.	....	412 $\frac{1}{2}$
Pigs' Lungs	sets	....	94
" Livers	....	....	56
" Livers	lbs.	....	38
" Heads	....	....	182 $\frac{1}{2}$
" Kidneys	lbs.	....	32 $\frac{1}{2}$
" Hearts	....	....	51
" Plucks	....	....	7

Fish

Bloaters	.... lbs.	....	254
Bream	.... lbs.	....	32
Cod	.... lbs.	....	187
" ....	.... boxes	....	69
Dabs	.... lbs.	....	197
Dogfish	.... lbs.	....	126
Eels	.... box	....	1
" ....	.... lbs.	....	14
Fillets	.... lbs.	....	2638
" ....	.... boxes	....	157 $\frac{1}{2}$
Flounders	.... lbs.	....	168
Haddock	.... lbs.	....	859
" ....	.... boxes	....	131
Hake	.... lbs.	....	125
Halibut	.... lbs.	....	28
Herrings	.... lbs.	....	484
" ....	.... roes	....	11
Kippers	.... lbs.	....	42
" ....	.... boxes	....	145
Lemon Soles	.... lbs.	....	134
Mackerel	.... lbs.	....	28
" ....	.... boxes	....	10
Meagrims	.... lbs.	....	1404
" ....	.... boxes	....	13

Milts	.... lbs.	....	12
Mullet	.... lbs.	....	280
Plaice	.... lbs.	....	1232
" ....	.... boxes	....	4
Periwinkles	.... bags	....	3
Roes	.... lbs.	....	110
Salmon	.... lbs.	....	195
Skate	.... lbs.	....	585 $\frac{3}{4}$
Soles	.... lbs.	....	223
" ....	.... boxes	....	2
Sprats	.... lbs.	....	1389
Turbot	.... lbs.	....	40
Whitebait	.... lbs.	....	19
" ....	.... boxes	....	6
Whiting	.... lbs.	....	572
" ....	.... boxes	....	4
Witches	.... lbs.	....	343
Cockles	.... gallons	....	18
" ....	.... lbs.	....	226
Crabs	....	....	248
" ....	.... lbs.	....	321 $\frac{1}{2}$
" ....	.... kits	....	5
Lobsters	....	....	36
" ....	.... lbs.	....	12 $\frac{3}{4}$
Prawns	.... tins	....	96
" ....	.... lbs.	....	210
Shrimps	.... gallons	....	2 $\frac{1}{2}$
" ....	.... baskets	....	3
" ....	.... boxes	....	72
" ....	.... hamper	....	1
Whelks	.... bag	....	1

Miscellaneous.

Apples	.... barrels	....	1 $\frac{1}{2}$
Bacon	.... lbs.	....	1139 $\frac{1}{4}$
Chickens	....	....	13
Custard Powder	box	....	1
Ducks	....	....	2
Eggs	....	....	1758
Ham	.... lbs.	....	7 $\frac{1}{2}$
Pears	.... boxes	....	39 $\frac{1}{2}$
" ....	.... lbs.	....	8
Rabbits	....	....	304
Suet	.... lbs.	....	12
Turkeys	....	....	5
Tinned Goods	....	....	931
Tomatoes	.... lbs.	....	72

GENERAL INSPECTION.

DWELLING-HOUSES.—9,519 dwelling-houses were inspected, and 14,952 re-inspections were made whilst work ordered to be carried out was in progress.

COMPLAINTS.—1,556 complaints were made at the office and received attention.

SLAUGHTERHOUSES.—2,381 visits were made to the slaughterhouses. There were 62 in actual regular use on December 31st, 13 being annual licences; these have been all well kept.

DAIRIES, COWSHEDS AND MILKSHOPS.—1,799 visits were made to the registered Dairies, Cowsheds and Milkshops. There are 1,083 retail purveyors, 16 wholesale dealers in milk, and 5 cowkeepers carrying on business in the City, and these premises have been well kept.

Under the Milk (Special Designations) Order, 1922, 20 licences for the sale of Certified, Grade A (Tuberculin tested), Grade A and Pasteurized Milk were issued.

COMMON LODGING HOUSES.—81 visits were made to the six registered Common Lodging Houses.

WORKSHOPS.—533 visits were made to the Workshops, which have been well kept, and 70 visits to out-workers' premises. 17 complaints were received from H.M. Inspector of Factories, all of which received attention.

BAKEHOUSES.—276 visits were made to the different bakehouses, most of which were found to be kept in a cleanly condition.

SAUSAGE MANUFACTORIES.—699 visits were made to these premises, which were kept in a satisfactory manner.

OLD DRAINS.—2,070 old drains were tested or re-tested.

NEW DRAINS AND FITTINGS.—2,841 new drains were tested or re-tested and 1,861 sanitary fittings were examined.

OCCUPATION CERTIFICATES.—910 Occupation Certificates were issued with respect to new buildings.

SANITARY CERTIFICATES.—8 Sanitary Certificates with respect to the sanitary condition of the drains and fittings of old dwelling-houses have been issued.

INCREASE OF RENT AND MORTGAGE INTEREST (RESTRICTIONS) AMENDMENT ACT, 1933.—Under this Act, two certificates relating to dwelling-houses not being kept in a reasonable state of repair were granted to tenants.

MERCHANDISE MARKS ACTS, 1926, AND AGRICULTURAL PRODUCE (GRADING AND MARKING) ACT, 1928.—Under the above Acts, Orders in Council have been made in relation to the marking of the following imported foodstuffs:—Fresh Apples, Raw Tomatoes, Eggs (hen or duck eggs in shell), Dried Eggs, Oat Products (Oatmeal, Rolled Oats, Oat Flour and Groats), Currants, Sultanas, Raisins and Honey. During the year 1,537 visits were paid to various shops to ensure compliance with the provisions of the above Orders. A large number of traders were cautioned.

RATS AND MICE (DESTRUCTION) ACT.—503 visits were made to rat infested premises, and 3 notices were served.

INFECTIOUS DISEASES.—1,178 cases of infectious diseases were visited and investigated, and 1,294 rooms were disinfected by the disinfecter.

PROSECUTIONS AND FINES.—During the year three informations were laid against owners of property to recover the costs of repairs carried out by the Corporation, under Section 17, Housing Act, 1930. Orders for payment were made in each case.

Proceedings were taken in two cases against dairymen for filling milk bottles in a public highway, this being a contravention of Article 31 (2), Milk and Dairies Order, 1926, which requires filling of bottles to be done on registered premises. One case was dismissed on payment of costs, and in the other a fine of £1 was imposed.

Proceedings were taken in one case under Section 117, Public Health Act, 1875, for the possession and exposure for sale of diseased meat, the defendant being fined £10.

REGULATION OF MANUFACTURE AND SALE OF ICE-CREAM.—
Under the provisions of Section 92 of the Portsmouth
Corporation Act, 1931, and Section 115 of the Portsmouth
Corporation Act, 1920—

113 Persons were registered as vendors.

15 Persons were registered as manufacturers.

5 Applications for registration as manufacturers and
vendors were refused, the premises and conditions
not complying with the regulations.

I am, Madam and Gentlemen,

Your obedient Servant,

C. W. HALL,

Chief Sanitary Inspector.

Report of Meat Inspector and Inspector under the Diseases of Animals Acts.

A. MEARNs FRASER, EsQ., M.D.,
Medical Officer of Health.

SIR,

I beg to present my report for the year ending 31st December, 1933.

The following is a list of animals brought into the City of Portsmouth.

By Boat from the Isle of Wight :

Cattle	.....	.....	.....	595
Sheep	.....	.....	.....	1,254
Swine	.....	.....	.....	7,145
Calves	.....	.....	.....	1,944
Horses	.....	.....	.....	167

At Cosham Market :

Cattle	.....	.....	.....	16
Sheep	.....	.....	.....	419
Calves	.....	.....	.....	472
Swine	.....	.....	.....	3,131
Horses	.....	.....	.....	7

At Fratton Railway Cattle Docks :

Cattle	.....	.....	.....	4,299
Sheep	.....	.....	.....	13,956
Calves	.....	.....	.....	555
Swine	.....	.....	.....	4,327
Horses	.....	.....	.....	21

At Cosham Railway Cattle Docks :

Cattle	.....	.....	.....	962
Sheep	.....	.....	.....	496
Calves	.....	.....	.....	23
Horses	.....	.....	.....	229

CATTLE DOCKS AND FERRY-BOATS.—These have been found kept in a satisfactory manner during the year.

CATTLE TRUCKS.—I have warned workmen, employed by the Southern Railway Company, in the cleansing of trucks after transport of cattle, for failing to move and clean parting boards, as I have on several occasions found them in a filthy condition when ticketed as clean.

COSHAM MARKET.—This weekly market has been kept satisfactorily during the year 1933. All stock exposed for sale has been inspected, and cleansing of the pens takes place immediately after termination of sales.

SWINE FEVER ORDER, 1922.—620 licences were issued for movement of 3,214 swine, and 2,288 licences were issued for movement of 24,306 swine into Portsmouth. One prosecution took place under the above order, when pigs were caused to be moved without a licence from Cosham Market to Hambleton, and a fine inflicted. There were no outbreaks of swine fever, and piggeries were well maintained throughout the year.

IMPORTATION OF DOGS AND CATS ORDER.—16 notifications were received from the Customs referring to 15 dogs and 4 cats. One dog was permitted to be moved under Ministry's licence to kennels at Southampton for isolation period.

CONVEYANCE OF LIVE POULTRY ORDER.—Boxes, crates, etc. used for conveyance of live poultry were inspected and found kept in a satisfactory state.

TUBERCULOSIS ORDER, 1925.—I have regularly visited all cowsheds within the City, and found them kept in a cleanly condition. The cows appeared healthy, and no notifications were necessary under the above order.

TRANSIT OF ANIMALS ORDER, 1930.—Vehicles used for conveyance of animals within Portsmouth have been kept fairly satisfactorily during the last 12 months. In several instances warnings have been given for failure to cleanse thoroughly.

FOOT AND MOUTH DISEASE.—Owing to numerous outbreaks of the above disease in January in the South of England, a standstill order was issued, and necessitated licensing all animals within the area prior to movement. Under the order 474 licences were issued for movement of 3,416 animals into Portsmouth. No outbreaks of foot and mouth disease occurred within the City.

MEAT REGULATIONS, 1924.—Meat is still being carried without being adequately protected. I have warned a number of persons for this offence, and have cautioned several butchers for placing meat beyond the level of their premises.

SLAUGHTERHOUSES.—These premises have been kept in a satisfactory manner with a few exceptions. In these cases I have warned the occupiers regarding the dirty condition, and failure to remove manure and offal within the time specified in the local slaughterhouse bye-laws. One prosecution took place for this offence and a fine imposed. Killing takes place at all hours of the day and night, so that approximately one-third of the carcasses are inspected prior to sale for human consumption.

PUBLIC HEALTH ACT, 1875.—Two prosecutions took place under this act, and both offenders were fined. In the first case diseased beef had been placed in a shop for sale, after an attempt had been made to remove tubercular lesions. In the second case tubercular pork was found on a butcher's premises. This pork had been brought into Portsmouth from an outside area.

I am, Sir,

Your obedient Servant,

D. A. HOGG.

The Public Analyst's Report.

THE CHEMICAL LABORATORY,

16, ARUNDEL STREET,

PORTSMOUTH.

*To the Chairman and Members of the
Health and Housing Committee.*

Madam and Gentlemen,

I beg to submit my Report on the work carried out in my Department during the year ending 31st December, 1933.

The total number of samples and specimens is slightly less than in the previous year, which is accounted for by the fewer number of specimens of Diphtheritic Material submitted for examination.

It will be noticed, however, that a large number of analyses have been made on behalf of the Police Department of the Corporation.

In November of the year under review I was instructed to make weekly examinations of the Sewage and Sewage Effluents from the works at Cosham and Farlington. Seventy-two such analyses appear in this report, but in a full year it is expected that at least 600 samples will have been examined, and this has caused a certain amount of reorganisation of the work of the Department.

I have to record my appreciation of the help given at all times by my two Assistants, Mr. C. M. Beckett and Mr. E. G. Whittle, B.Sc., A.I.C., without whose loyal co-operation it would be impossible to cope with the work, and also to record my appreciation of the very tactful manner in which Inspector Sinnett carries out his duties at all times.

I remain, Madam and Gentlemen,

Your obedient Servant,

REGINALD P. PAGE,

Public Analyst.

REPORT OF THE PUBLIC ANALYST.

During the year ending 31st December, 1933, the number of samples and specimens examined was 3,929, which may be briefly summarised as follows :—

	1933	1932
Food and Drugs Act.....	1,246	1,233
“ Graded ” Milks	110	116
Water and Sewage	97	26
Paints, Soaps, etc.	10	12
Police and Coroner	49	—
Miscellaneous	38	42
Diphtheritic Material	2,379	2,634
Total	3,929	4,063

The number of samples taken in connection with the Sale of Food and Drugs Act is 1,246. This gives an average of one sample for every 201 persons in the City, or a “ Sample Rate ” of 4.9 samples per 1,000 persons.

The nature of the samples analysed and the number adulterated or of inferior quality is shown in the following table :—

TABLE A.

Nature of Sample	Number Examined	Number Genuine	Number Inferior	Number Adulterated	Percentage Adulteration
Milk	580	543	9	28	4.8
Cream	6	6			
Cream Ice	4	4			
Ice Cream	7	7			
Butter	112	112			
Margarine	52	50		2	3.8
Lard	3	3			
Coffee	45	44		1	2.2
Coffee and Chicory	3	3			
Cocoa	49	49			
Tea	25	25			
Pepper	32	32			
Mustard	23	23			
Ground Ginger	8	8			
Ground Rice	11	11			
Rice	22	22			
Pearl Barley	12	11		1	8.3
Sugar	10	10			
Baking Powder	6	4		2	33.3
Self-Raising Flour	3	3			
Dried Fruits	31	31			
Fruit Salad	11	11			
Sauce	5	5			
Canned Peas	2	2			
Tinned Sardines	2	2			
Tinned Salmon	1	1			
Raisins	10	10			
Sultanas	10	10			
Mixed Candied Peel	7	7			
Mincemeat	4	4			
Ground Almonds	3	3			
Preserved Fruits	4	4			
Crystallised Fruits	6	6			
Sausages	4	4			
Gin	17	15		2	11.7
Whiskey	47	41		6	12.7
Olive Oil	3	3			
Gregory Powder	3	3			
Tincture of Iodine	8	8			
Liquorice Powder	3	3			
Bismuth Lozenge	2	2			
Sweet Spirits of Nitre	2	2			
Camphorated Oil	8	8			
Cod Liver Oil	3	3			
Glauber Salts	3	3			
Chinosol Solubles	1	1			
Ammoniated Tincture Quinine	3	3			
Bicarbonate of Soda	3	3			
Boracic Powder	3	3			
Cream of Tartar	3	3			
Epsom Salts	3	3			
Tartaric Acid	3	3			
Non-Alcoholic Wines	3	3			
Cydrax	1	1			
Orange Squash	1	1			
Lime Juice Cordial	1	1			
Lemon Squash	1	1			
Beer	4	4			
Vinegar	4	4			
TOTAL	1246	1195	9	42	3.2

TABLE B.
ADULTERATED SAMPLES.

No.	Nature of Sample	Nature of Adulteration	Observation
6	Milk	37.4% Deficient in Solids-not-Fat	Test Sample
10	Milk	34.2% Deficient in Solids-not-Fat	Fined £2 and 16/6 Costs
197	Milk	5% Deficient in Solids-not-Fats	Cautioned by M.O.H.
214	Milk	5% Deficient in Milk Fat	Test Sample
215	Milk	5% Deficient in Milk Fat	Test Sample
218	Milk	5% Deficient in Milk Fat	Test Sample
221	Milk	5.5% Def. in Solids-not-Fat	Test Sample
222	Milk	4.9% Def. in Solids-not-Fat	Test Sample
225	Milk	4.7% Def. in Solids-not-Fat and 5.6% Def. in Milk Fat	Fined £3
226	Milk	5.1% Def. in Solids-not-Fat and 5.3% Def. in Milk Fat	Fined £3 and £1 1s. Costs
227	Milk	20.3% Def. in Solids-not-Fat	Fined £1
228	Milk	14.0% Def. in Solids-not-Fat	Fined £1
229	Milk	26.0% Def. in Solids-not-Fat	Fined £1
233	Milk	8.2% Def. in Solids-not-Fat	Fined £1
234	Milk	7.5% Def. in Solids-not-Fat	Fined £1
274	Baking Powder	26.0% Deficient in available Carbon Dioxide	Test Sample
324	Milk	6.6% Def. in Milk Fat	Private Test Sample
407	Milk	5.0% Def. in Milk Fat	Test Sample
423	Milk	5.0% Def. in Milk Fat	Cautioned by M.O.H.
500	Milk	6.6% Def. in Milk Fat	Test Sample (Certified Milk)
532	Milk	5.0% Def. in Solids-not-Fat	Case proved, Summons dismissed on payment of Costs, 4/-.
553	Coffee	At least 40% of Chicory	Test Sample
580	Pearl Barley	Consists of Sago	Test Sample
587	Baking Powder	32% Def. in available Carbon Dioxide	Test Sample
603	Milk	2.5% Def. in Solids-not-Fat	Cautioned by M.O.H.
780	Margarine	25% Butter Fat	Test Sample
792	Milk	11.6% Def. in Milk Fat	Test Sample (Certified Milk)
797	Milk	8% Def. in Solids-not-Fat	Test Sample
806	Milk	7.5% Def. in Solids-not-Fat	Cautioned by M.O.H.
811	Milk	6.8% Def. in Solids-not-Fat	Test Sample
812	Milk	7.7% Def. in Solids-not-Fat	Test Sample
813	Milk	8.2% Def. in Solids-not-Fat	Test Sample
822	Margarine	12% Butter Fat	Test Sample
915	Milk	8.3% Def. in Milk Fat	Test Sample (Grade A "TT")
1023	Gin	7.7% of Added Water	Test Sample
1026	Whiskey	10.7% of Added Water	Test Sample
1032	Whiskey	4.6% of Added Water	Test Sample
1033	Whiskey	9.2% of Added Water	Test Sample
1035	Whiskey	10.7% of Added Water	Dismissed on payment of Costs, £2 10s.
1036	Gin	7.6% of Added Water	Dismissed on payment of Costs, £2 10s.
1037	Whiskey	10.7% of Added Water	Fined £2, and £2 2s. Costs
1038	Whiskey	6.1% of Added Water	Fined £2, and £2 2s. Costs

The Fines including Costs amounted to £27 17s. 6d.

FARMERS' SAMPLES.

One hundred and fifty-one samples of Milk were taken during the year, representing the milk supplied to Retailers in the City, and of these, sixteen were found to be adulterated. Legal proceedings were instituted in eight cases, and fines with costs amounting to £16 19s. 6d. were inflicted. The other eight cases were Test Samples.

MILK SUPPLIED TO LOCAL INSTITUTIONS.

Seventy-six samples were obtained from St. Mary's Hospital and various Hospitals and Institutions in the City. All were returned as genuine.

TABLE C.

Showing the number of samples analysed, and the number adulterated during the last five years :—

	Year	Samples Examined	Number Adulterated	Percentage Adulterated
PORTSMOUTH	1929	1,240	54	4.3
do.	1930	1,239	45	3.6
do.	1931	1,233	43	3.5
do.	1932	1,233	40	3.2
do.	1933	1,246	41	3.2
ENGLAND AND WALES	1932	137,981	7,019	5.2

MILK.

The following table gives the statistics of the adulteration of Milk during the last five years :—

TABLE D.

	Year	Samples Examined	Number Adulterated	Percentage Adulterated
PORTSMOUTH	1929	583	30	5.1
do.	1930	606	32	5.2
do.	1931	615	27	4.3
do.	1932	580	20	3.4
do.	1933	580	28	4.8
ENGLAND AND WALES	1932	72,940	5,307	7.3

TABLE E.

Showing the average amount of Milk Fat and of Solids-not-Fat in samples of Milk for each month during the year :—

Month	Milk Fat	Solids-not-Fat	Total Solids	Number of Samples examined
January	3.92	8.89	12.81	45
February	3.78	8.91	12.69	36
March	3.78	8.74	12.52	36
April	3.89	8.88	12.77	36
May	3.56	8.96	12.52	38
June	3.46	8.82	12.28	50
July	3.72	8.85	12.57	35
August	3.71	8.72	12.43	29
September	3.64	8.85	12.49	37
October	4.12	9.00	13.12	36
November	4.28	9.06	13.34	26
December	4.08	9.11	13.19	18
Average 1933	3.83	8.90	12.73	422
„ 1932	3.75	8.81	12.56	531
„ 1931	3.79	8.88	12.67	580

CERTIFIED MILK.

(Examined 41 ; Passed 40 ; Rejected 1.)

This Milk is produced by herds that contain no cows which re-act to the Tuberculin Test. The Milk is bottled on the Farm where it is produced, and it must not contain, at any time before delivery to the consumer “ more than 30,000 Bacteria per cubic centimetre, and ‘ Bacillus Coli ’ must be absent from one-tenth part of a cubic centimetre of the Milk.”

The 41 samples examined contained an average of 1,609 Bacteria per cubic centimetre, and one of the samples failed to comply with the “ Bacillus Coli ” test.

The average amount of Fat was 3.86 per cent., and of Solids-not-Fat 9.09 per cent.

The average retail price of Certified Milk for the year was 1/0½ per quart.

The results show that a very high standard of quality has been maintained for the year, and represents almost the ideal in Milk production.

Whilst there will always be a market for Certified Milk, it is feared that the high price will be a limiting factor to its sale.

GRADE A. (TUBERCULIN TESTED) MILK.

(Examined 49 ; Passed 42 ; Rejected 7.)

This Milk is produced by cows which have been certified free from disease, and which are subjected to the Tuberculin Test at intervals of six months. It must not contain "more than 200,000 Bacteria per cubic centimetre, and the 'Bacillus Coli' must be absent from one-hundredth of a cubic centimetre." The Milk must not be treated by heat at any stage.

Grade A. (Tuberculin Tested) Milk is delivered to the Retailer in sealed churns and bottled locally.

The 49 samples gave an average of 3,703 Bacteria per cubic centimetre, and on 7 occasions the milk was found to contain "Bacillus Coli" in one-hundredth of a cubic centimetre.

The average amount of Fat was 3.87 per cent., and of Solids-not-Fat 8.75 per cent.

The average price throughout the year was 8½d. per quart.

GRADE A. MILK.

(Examined 20 ; Passed 17 ; Rejected 3.)

Grade A. Milk is produced from cows which are inspected by a Veterinary Surgeon at three-monthly intervals, and the milk is to be produced and treated in such a manner that a sample, taken at any time between Production and Delivery to the consumer, shall not contain "more than 200,000 Bacteria to the cubic centimetre, and 'Bacillus Coli' shall be absent from one-hundredth part of a cubic centimetre of the Milk." The milk shall not be subjected to heat at any stage.

In other words, it is milk produced from apparently healthy cows under normally clean conditions, and it is delivered to the Retailer in sealed churns and bottled locally.

The 20 samples examined during the year, contained an average of 6,475 Bacteria per cubic centimetre, and on three occasions the Milk failed to pass the "Bacillus Coli" Test. The average amount of Fat was 3.61 per cent., and of Solids not-Fat 8.90 per cent.

The price was one penny per quart higher than that charged for milk of commercial quality.

FREEZING POINT TEST.

One of the great difficulties connected with the adulteration of Milk has been the detection, with certainty, of small quantities of added water.

The Milk Regulations *presume* that, where the Solids-not-Fat fall below 8.5 per cent., water has been added, and the onus lies with the vendor to prove that this is not so. The difficulty is due to the wide range through which the Solids-not-Fat vary in normal milk, whereas the average figure for all genuine milks in Portsmouth is 8.87 per cent., in some cases the Solids-not-Fat are as high as 9.4 per cent. It follows then that to such a genuine milk considerable quantities of water could be added before as low a figure as 8.5 per cent. is reached, and yet the milk would have to be passed as genuine according to the Milk Regulations. That such cases have occurred is an undoubted fact. On the other hand, there are cases where the milk as drawn from the cow shows that the Solids-not-Fat are below the standard of 8.5 per cent.

For some years it has been known that the Freezing Point of Milk, as of other body fluids varies between very narrow limits, but owing to the somewhat complicated and expensive apparatus necessary for, and the practical difficulties attending, the determination of the Freezing Point, it has not been possible to determine Freezing Points as a matter of routine.

Experience in other laboratories throughout the country has shown that the Freezing Point of Milk as determined by the Hortvet Cryoscope has a value varying between -0.523°C and -0.555°C , with an average figure of -0.54°C as compared with water, which is 0°C .

It would appear then that by the determination of the Freezing Point, a method has been evolved by means of which it is possible to detect the additions of small quantities of water with certainty.

If the Freezing Point of Milk be taken as -0.54°C , and that of Water as 0°C , it follows that the Freezing Point of a mixture of milk and water will have a value intermediate between -0.54°C and 0°C .

In cases where adulterated or doubtful samples have been obtained in the City, the samples have been traced back to their source, and the Freezing Point determined of the milk from the cows. In every case so far recorded, the Freezing Point of the milk taken at the Farm has fallen within the limits for genuine milk.

The following tables give some of the results obtained with the Hortvet apparatus, and include the extreme values found in this Laboratory.

It will be noticed that, in some cases, the figure for the Solids-not-Fat fall below the presumptive standard of 8.5 per cent., and yet according to the Freezing Point determination there is no evidence of added water.

GENERAL RESULTS.

Samples of Milk from known sources which gave normal figures for Solids-not-Fat and Freezing Point :—

Number	Solids-not-Fat	Freezing Point °C
291	8.90	— 0.545
292	8.90	— 0.555
293	8.95	— 0.535
289	9.25	— 0.545
319	8.95	— 0.543
325	8.71	— 0.537
393	8.78	— 0.545
402	8.68	— 0.537
403	8.62	— 0.540

Samples falling below the presumptive standard of 8.5 per cent. for Solids-not-Fat, but known to be genuine Milk :—

Number	Solids-not-Fat	Freezing Point °C
237	8.42	— 0.545
391	8.30	— 0.538
394	8.35	— 0.545
405	8.16	— 0.534

A few examples of adulterated samples are shown in the following columns :—

Number	Solids-not-Fat	Freezing Point °C
6	5.32	— 0.315
197	8.07	— 0.490
225	8.09	— 0.497
226	8.09	— 0.497
234	7.86	— 0.485

The average Freezing Point of all milks as determined in this Laboratory is — 0.540 °C, which agrees with the average figure found in other laboratories throughout the country.

HUMAN MILK.

It was decided to determine the Freezing Point of other types of Milk, and with the assistance of Dr. Foggie, samples of Human Milk were obtained from the Municipal Maternity Hospital.

The following results represent the figures obtained for samples, all of which were taken at 10 a.m. immediately after the infant had been fed :—

No.	Fat	Solids-not-Fat	Ash.	Acidity	Protein	Lactose	Freezing Pt. °C
1	4.36	9.32	0.37	0.4 c.c.	—	—	— 0.557
2	3.49	8.95	0.37	0.4 c.c.	—	—	— 0.542
3	3.17	9.75	0.39	0.4 c.c.	—	—	— 0.537
4	2.53	9.17	0.33	0.5 c.c.	—	—	— 0.543
5	1.14	9.40	0.36	0.5 c.c.	—	—	— 0.566
6	1.17	10.02	0.32	0.5 c.c.	2.54	7.16	— 0.553
7	1.33	9.04	0.37	0.4 c.c.	3.17	5.50	— 0.545
8	1.75	8.94	0.31	0.3 c.c.	2.93	5.65	— 0.549
9	1.81	8.31	0.40	0.2 c.c.	2.26	5.65	— 0.552
10	3.36	8.80	0.29	0.4 c.c.	—	—	— 0.540
11	1.50	9.48	0.28	0.4 c.c.	—	—	— 0.562
12	1.77	8.81	0.25	0.4 c.c.	—	—	— 0.543
13	1.47	8.93	0.28	0.4 c.c.	—	—	— 0.532
14	2.87	9.49	0.24	0.4 c.c.	—	—	— 0.543
15	3.00	8.90	0.32	0.5 c.c.	—	—	— 0.537
16	2.07	10.59	0.36	0.6 c.c.	4.43	5.80	— 0.550
17	1.79	9.93	0.22	0.5 c.c.	3.81	5.90	— 0.540
18	2.01	9.15	0.22	0.5 c.c.	3.28	5.65	— 0.553
19	2.10	8.92	0.26	0.6 c.c.	3.01	5.65	— 0.534
20	1.64	8.48	0.20	0.4 c.c.	—	—	— 0.547
21	4.13	8.67	0.30	0.5 c.c.	—	—	— 0.536
22	2.04	8.16	0.36	0.4 c.c.	—	—	— 0.554

The results of the 22 samples examined show that the average Freezing Point is — 0.540 °C, a figure which is identical with the average figure given for genuine milk from the cow.

GOAT'S MILK.

Four samples of the Milk from the goat were obtained from various parts of the county. These gave the following results :

No.	Fat	Solids-not-Fat	Ash.	Acidity	Sp. Gr.	Freezing Pt. °C
1	4.7	8.52	0.77	1.25 c.c.	1.0291	— 0.571
2	4.8	8.28	0.8	1.35 c.c.	1.0302	— 0.567
3	4.7	8.32	0.77	1.2 c.c.	1.0301	— 0.569
4	6.6	9.23	0.74	2.0 c.c.	1.0306	— 0.553

BUTTER.

Butter should contain no Fat other than that derived from milk, not more than 16 per cent. of water, and should not contain any preservatives other than salt.

112 samples of Butter have been analysed, all of which complied with the foregoing conditions.

The following table giving the number of samples of Butter analysed and the number adulterated during the last five years shows that the adulteration of Butter either with "Foreign Fat" or "Excessive Water" has almost ceased.

TABLE F.

	Year	Samples Examined	Number Adulterated	Percentage Adulterated
PORTSMOUTH	1929	118	0	—
do.	1930	109	0	—
do.	1931	112	2	1.7
do.	1932	108	0	—
do.	1933	112	0	—
ENGLAND AND WALES	1932	9,707	84	0.8

MARGARINE.

Fifty-two samples were examined and of these fifty were reported genuine and free from preservatives.

Two samples, both from the same vendor contained Foreign Fat and were therefore illegal mixtures. Both of these samples were taken informally, but it was subsequently found impossible to repeat the purchase of the same mixture officially.

All of the samples were correctly labelled as required by the Sale of Food and Drugs Act.

DRUGS.

Fifty-four samples of Drugs have been examined, all of which were of good quality when judged by the standards laid down in *The British Pharmacopoeia*.

GROCERIES.

All of the samples of Groceries have been returned as satisfactory with one exception, namely, that of a sample of Pearl Barley, which turned out to be Sago, and which obviously was a mistake on the part of the Assistant who sold it.

SPIRITS.

Forty-seven samples of Whiskey were examined, and of these six were found to be diluted beyond the legal limit of 35 Degrees Under Proof as laid down in The Finance Act.

Seventeen samples of Gin were analysed, of which two were found to be watered below the legal limit.

The percentage of detected adulteration is much greater than that found for any other class of food or drink, as will be seen in the following table :—

Year		Samples Examined	Samples Adulterated	Percentage of Adulteration
1926	....	38	6	16
1927	....	68	14	20
1928	....	84	5	5.9
1929	....	51	13	25.4
1930	....	69	5	7.2
1931	....	57	11	19.3
1932	....	46	3	7.1
1933	....	64	8	12.5

BEER.

Four samples of Beer gave the following figures on analysis :—

Number	Extract	Alcohol by Weight	Ash	Acidity as Acetic Acid	Original Gravity
726	4.11	4.6	0.35	0.2	1055
727	2.68	3.5	0.2	0.1	1039.2
728	3.73	3.3	0.2	0.1	1041.4
729	3.83	4.02	0.2	0.1	1047.4

None of the samples contained Sulphite Preservative or Arsenic.

POLICE WORK.

Forty-eight samples have been submitted by the Criminal Investigation Department of the City Police.

Some of these are interesting and may be worthy of notice here.

COUNTERFEIT COINS.

Specimens of counterfeit Shillings and Sixpences were submitted which had been found in Automatic Machines in various parts of the City. There were analysed and subsequently on premises occupied by the persons arrested, similar coins were discovered in addition to pieces of metal of similar composition with that used in the making of the coins.

RAT POISON.

In consequence of a complaint, it was discovered that there was being sold from door to door in Portsmouth a substance for the purpose of destroying Rats, Mice and other vermin.

The material was sold in ordinary disused Cocoa tins marked "Non-Poisonous."

Analysis proved that the poison consisted of Barley Meal mixed with White Arsenic—many times the minimum fatal dose of Arsenic being present in each tin.

A notice was inserted in the Press pointing out the poisonous nature of the article, and asking all persons having it in their possession to return it to the Guildhall.

Twenty-three tins were brought in, all of which proved to be the same admixture of Barley Meal and Arsenic, containing about 3 per cent. of Arsenic, and each tin was labelled "Non-Poisonous."

The Poisons and Pharmacy Act, 1908, Part I, states that Arsenic and its preparations may only be sold by Registered Chemists under certain conditions amongst which are the following :—

The Box, Vessel or Wrapper in which the poison is sold must be distinctly labelled with—

1. The name of the Poison and the proportion it bears to the other ingredients ;
2. The word " Poison " ;
3. The name and address of the Seller.

None of these conditions had been carried out, and the Vendor was subsequently fined £20.

The remaining specimens refer to two cases of attempting to obtain money by false pretences, and six cases of various forms of indecency.

One poisoning case was received from the City Coroner in connection with a death from an overdose of Dial.

Dial is one of the Barbituric Acid group of sleep-producing drugs.

MISCELLANEOUS.

Thirty-eight samples, which cannot properly be classified under any particular heading, have been analysed. There being no other practising Analytical Chemist in the City a certain amount of work for private individuals is undertaken which come under this heading, and for which the Corporation has received £23 in Fees during the year.

One sample of Eggs sold as "English New Laid" taken under the Agricultural Produce (Grading and Marking Act) were found to be foreign eggs, from which the mark of the country of origin had been removed.

In this case the use of the newly-acquired Mercury Vapour Lamp was indispensable, for whereas it was almost impossible to differentiate the foreign eggs by other means, with the Ultra Violet lamp the portion of the egg-shell which had received treatment to remove the foreign mark was clearly and definitely shown.

The Vendor was subsequently prosecuted and fined.

DIPHTHERIA EXAMINATIONS.

Swabs have been received for examination from the various sources as follows :—

	<i>Negative</i>	<i>Positive</i>	<i>Total</i>
Medical Practitioners	1,124	76	1,200
School Clinic	400	62	462
Infectious Diseases Hospital	618	99	717
Totals	2,142	237	2,379

WATER AND SEWAGE.

The monthly examination of the City Water Supply has shown that the excellent quality of the water has been maintained.

In addition, fifteen samples of water have been examined which include samples of water from the Swimming Bath at St. Mary's Hospital, and a Mineral Analysis of the water at the Mental Hospital in connection with the erection of a new Boiler Plant.

In November last, the Drainage Committee decided that a weekly examination of the Crude Sewage, Dosing Chamber and Effluent, before and after filtration from the works at Cosham and Farlington should be carried out. Consequently, during the six weeks of the year 72 samples were received and examined.

It is expected that many interesting problems will arise from time to time in connection with these sewage works, indeed, such has been the case already, for the Department was able to assist the City Engineer in identifying and tracing to its source a certain type of objectionable trade waste which was causing damage to the pumps at Copnor.

TABLE OF ANALYSES OF PUBLIC WATER SUPPLY DURING 1933
BY THE PUBLIC ANALYST.

(Results expressed in parts per 100,000).

Date 1933	Source	Total Solid Residue	Volatile Solid Residue	Chlorine	Nitrogen as Nitrates	Total Hardness	Free or Saline Ammonia	Albiminoid or Organic Ammonia	Oxygen absorbed in 4 hours at 37° C.	Remarks
Jan. 26	Co.'s Main, 16, Arundel Street	30.5	2.5	1.7	0.34	22.5	Nil	0.003	Nil	Bacillus Coli absent from 50 cc. Water.
Feb. 22	do.	30.0	2.5	1.7	0.40	22.5	Nil	0.002	Nil	do.
Mar. 22	do.	32.5	1.5	1.7	0.47	22.8	Nil	0.003	Nil	do.
April 25	do.	32.5	2.5	1.8	0.41	23.0	Nil	0.001	Nil	do.
May 23	do.	31.0	2.5	1.7	0.37	23.0	Nil	0.001	Nil	do.
June 26	do.	31.5	2.0	1.6	0.36	23.0	Nil	0.001	Nil	do.
July 17	do.	31.0	1.5	1.6	0.32	22.5	0.0005	0.003	Nil	do.
Aug. 25	do.	31.0	1.5	1.7	0.37	22.5	Nil	0.003	Nil	do.
Sept. 27	do.	31.0	2.0	1.6	0.42	23.0	Nil	0.002	Nil	do.
Oct. 27	do.	30.6	2.2	1.6	0.30	22.0	0.001	0.001	Nil	do.
Nov. 23	do.	31.5	2.5	1.7	0.33	23.0	Nil	0.003	Nil	do.
Dec. 18	do.	31.0	1.5	1.6	0.34	22.0	Nil	0.002	Nil	do.

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