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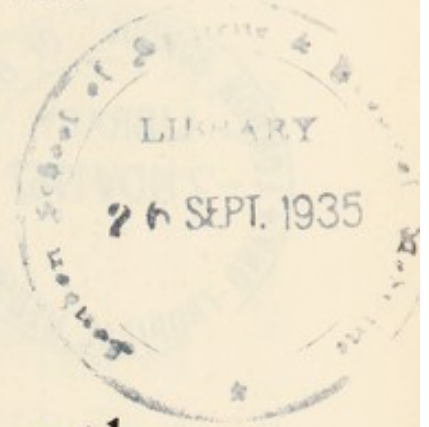
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"SALUS POPULI SUPREMA LEX"



City of Portsmouth

HEALTH REPORT

For the Year 1934

BY

A. B. WILLIAMSON

M.A., B.Sc., M.D., Ch.B., D.P.H., L.R.C.P., L.R.C.S., L.R.F.P.S.

Medical Officer of Health

Medical Officer of Health to the Port of Portsmouth

Chief Administrative Medical Officer to the City Council

INCLUDING

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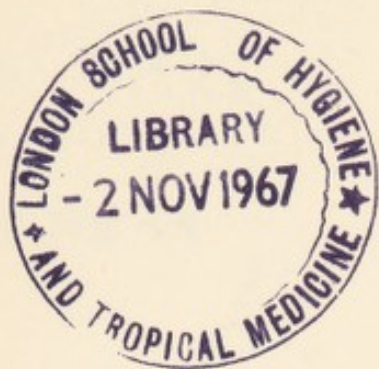



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Health Committee

1933-34.

The Right Worshipful the Lord Mayor :

ALDERMAN SIR HAROLD PINK, J.P.

Chairman :

COUNCILLOR A. E. ALLAWAY.

Vice-Chairman :

COUNCILLOR L. N. BLAKE.

Aldermen :

SIR JOHN TIMPSON, K.B.E., J.P.

J. W. PERKINS, J.P.

W. A. BILLING, J.P.

A. RICE.

Councillors :

F. J. SPICKERNELL.

S. A. WEBB.

A. KILLE.

W. H. ANDREWS.

J. A. GRIFFITHS.

J. C. JUNIPER.

MAJOR W. H. R. PREWER, O.B.E.

MRS. L. J. RAMSDEN.

F. W. WHITING, J.P.

T. STRIDE.

A. G. STAPLEFORD.

J. J. MAHONEY.

H. T. CLIFTON.

J. ELLIS-JONES.

The following ladies were co-opted to serve on the Sub-Health
(Maternity and Child Welfare) Committee :

MRS. WESTGARTH.

MISS E. R. LAPHORN.

MRS. TROWBRIDGE.

MRS. R. PARKER.

STAFF.

Medical Officer of Health :

A. B. WILLIAMSON, M.A., B.Sc., M.D., Ch.B., D.P.H.,
L.R.C.P., L.R.C.S., L.R.F.P.S. (from February)

Senior Assistant Medical Officer of Health and Tuberculosis Officer :

JOHN W. HUNTER, M.D., Ch.B., B.Hy., D.P.H. (from June).

Chief Sanitary Inspector :

C. W. HALL, Cert. R. San. I., Hons. Medallist City and Guilds, Lond.,
R.P.C. Lond.

Chief Clerk and Meteorological Observer :

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

Meat, Food and Sanitary Inspectors :

D. HOGG, Cert. R. San. I., Meat & Foods Cert. Inc. San. Assoc. of Scot. (to July)
R. SCOULAR, M.R.C.V.S. do. do. do. (from October)

Inspectors of New Buildings and Sanitary Inspectors :

A. F. PARDO, Cert. R. San. I., Hons. City and Guilds, Lond., R.P.C. Lond.
G. S. GATTRELL, Cert. R. San. I., Hons. City & Guilds, Lond., R.P.C. Lond.

Inspector of Workshops and Sanitary Inspector :

F. R. BELL, Cert. R. San. I.

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

E. J. SINNETT, Cert. R. San. I.

Housing Inspectors :

E. B. SHAW, Cert. R. San. I., Hons. City and Guilds, Lond., R.P.C. Lond.
C. J. COOKSLEY, Cert. R. San. I., Hons. City and Guilds, Lond.

Sanitary Inspectors :

F. H. MILLICAN, Cert. R. San. I. L. RICHARDS, Cert. R. San. I.
S. W. SMITH, Cert. R. San. I. A. C. HARRISON, Cert. S.I.B. (to May)
F. T. RIPPIN, Cert. S.I.B. and Meat and Foods Cert. (to April).
W. E. ANSTEE, Cert. S.I.B. W. J. SANDFORD, Cert. S.I.B.
K. HOLMES, Cert. S.I.B. (from Feb.). A. W. ARNOLD, Cert. S.I.B. (from Feb.)
R. CORBISHLEY, Cert. S.I.B., Meat & Foods Cert., Hons. City & Guilds
(from June).
F. JOHNSON, Cert. S.I.B., Hons. Medallist, City & Guilds (from June).
F. L. BARKER, Cert. S.I.B. and Meat & Foods Cert. (from February).

First Assistant Clerk : E. S. CHADWICK.

Assistant Clerks : H. S. WOODCOCK, G. COOPER and E. ALLWOOD.

Health Visitors :

*MISS D. POULSON. *MISS M. E. HANDLEY.
*MISS A. KNIGHT. *MISS L. CUDLIPP.
*MRS. M. SMEATON. *†MRS. R. D. GRINDROD.
*†MISS W. G. SHERBORNE.

Port Sanitary Inspector : F. BATCHELOR.

Disinfecter : B. J. HILLS. Messenger : G. PITT.

*Certified Midwife.

†Health Visitors Cert. R.S.I.

Public Vaccinators (part-time) :

C. J. MAYHEW, M.R.C.S. (Eng.), L.R.C.P. (Lond.)
 H. J. BELL, B.A., L.R.C.P., L.R.C.S. (Edin.)—(to March).
 O. GANGE, L.S.A., L.M.S.S.A. (Lond.)—(to March).
 A. B. DOYLE, L.R.C.P.I. & L.M., L.R.C.S.I. & L.M. (from April).

Vaccination Officer : L. T. McKINLAY.

Infant Life Protection Visitor : *MRS. B. MADDEN.

MUNICIPAL TUBERCULOSIS DISPENSARY.**Clinical Tuberculosis Officer :**

JOHN W. HUNTER, M.D., Ch.B., B.Hy., D.P.H. (from June).

Nurses :

MISS L. LAMB.	MISS V. F. WARDLAW.
*MISS S. M. MITCHELL.	*MISS H. M. NEVILL.

Secretary : *MISS E. HEALEY.

Almoner : *MISS N. O. ALLEN.

CHILD WELFARE CENTRES AND MUNICIPAL MATERNITY HOSPITAL.**Maternity and Child Welfare Officer :**

RUBY N. FOGGIE, M.B., Ch.B.

Matron : *MISS P. M. HUGHES.

Almoner : *MISS N. O. ALLEN.

Lecturer to Pupils : D. McASKIE, M.B., C.M. (Ed.)

MILTON HOSPITAL FOR INFECTIOUS DISEASES.**Medical Superintendent :**

R. W. REVELL, M.D. (Lond.), D.P.H., M.R.C.S., L.R.C.P., B.S. (Lond.)

Matron : MISS F. PETCHEY.

LANGSTONE SANATORIUM.**Medical Superintendent :**

JOHN W. HUNTER, M.D., Ch.B., B.Hy., D.P.H. (from June).

Matron : MISS J. S. BROWN.

PUBLIC ANALYST : R. P. PAGE, F.I.C.

Chief Assistant : C. M. BECKETT. **Assistant :** E. G. WHITTLE.

** Certified Midwife.*

SAINT MARY'S HOSPITAL.

Medical Superintendent :

R. C. MACPHERSON, M.B., Ch.B. (Glas.)

Deputy Medical Superintendent :

R. A. ZEITLIN, M.R.C.S., L.R.C.P. (Lond.)

Senior Assistant Medical Officers :

V. S. HUGHES-DAVIES, B.Sc. (Wales), M.B., Ch.B. (Liverpool),
M.R.C.S. (Eng.), L.R.C.P. (London).

A. L. GILBEY, M.B., Ch.B. (Edin.).

Junior Assistant Medical Officers :

J. C. H. BROWNE, L.R.C.P., M.R.C.S.

W. S. WOOLNER, B.Sc., M.D.C.M., L.M.C.C.

Dental Surgeon (part-time) : D. A. BEVIS, L.D.S., R.C.S. (Eng.)

Secretary : A. SCOTT GARNHAM (Barrister-at-Law).

Steward : S. H. OVER.

Asst. Steward : B. NICHOLLS.

Clerks : S. F. HIGGINS, A. SHERGOLD, W. RUMBOLD and G. TIPPING.

Part-time Visiting Medical Officers :

Physician : R. J. LYTLE, M.D., B.S., B.A.O.

Surgeon : O. S. HILLMAN, F.R.C.S., L.R.C.P., M.B., M.S.

Ear, Nose and Throat Specialist :

E. COWPER TAMPLIN, F.R.C.S. (E.), L.R.C.P. (Lond.), D.L.O.

Radiologist : R. S. MACHARDY, M.B., Ch.B., D.R.

VENEREAL DISEASES CLINIC.

Medical Officer (part-time) :

A. CAMBELL, M.B., Ch.B.

Pathologist (part-time) :

J. A. D. RADCLIFFE, M.B., B.Ch., B.A.O., R.U.I.

POLICE DEPARTMENT.

Police Surgeons (part-time) :

H. H. FISK, M.R.C.S. (Eng.), L.R.C.P. (Lond.).

R. HAMER HODGES, M.B., B.S. (Lond.), M.R.C.S., L.R.C.P. (Lond.).

Medical Referee, Workmen's Compensation Act,

Medical Examiner for New Corporation Appointments, and

Medical Officer, Corporation Tramways.

ROWAN W. REVELL, D.P.H., M.R.C.S., L.R.C.P., B.S. (Lond.), M.D. (Lond.)

VETERINARY SURGEON (part-time) :

H. GREEN, M.R.C.V.S.

DISTRICT MEDICAL OFFICERS (part-time) :

A. E. CLARK, M.B., Ch.B. (Glas.).
 C. H. BROWNE, L.R.C.P.I. & L.M., D.P.H.
 J. C. DAVIS, M.B., Ch.B., B.A.O. (Dub.).
 F. L. TITLEY, M.R.C.S. (Eng.), L.R.C.P. (Lond.).
 A. B. DOYLE, L.R.C.P., L.R.C.S. (I).
 S. GUYER, M.B., Ch.B. (Glasgow).

SCHOOL MEDICAL SERVICE.**School Medical Officer :**

T. ERNEST ROBERTS, M.B., B.S. (Lond.), M.R.C.S. (Eng.), D.P.H. (Camb.)

Assistant School Medical Officers :

ELIZABETH M. MARTIN, M.B., B.Ch. (Belfast), D.P.H.
 JOHN M. MOUNSEY, B.A., M.B., B.Ch., B.A.O. (Dublin).
 HARRY SMITH, M.R.C.S. (Eng.), L.R.C.P. (Lond.).

Ophthalmic Surgeon (part-time) :

W. S. INMAN, M.B. (Lond.).

Dental Surgeon :

P. G. D. WINTER, L.D.S., R.C.S. (Eng.).

Assistant Dental Surgeons :

L. J. THRELFALL, L.D.S., R.C.S. (Eng.).
 MISS M. C. LAUDER, L.D.S., R.C.S. (Eng.).
 EDWARD TRIBE, L.D.S., R.C.S. (Eng.).

Dental Clerk-Attendants :

MRS. F. N. BESFORD.	MISS M. FERBRACHE.
MRS. E. M. PAY.	MISS I. G. SMITH.

Nurse in Charge :

*MISS B. LILLEY, Cert. San. Inst., Cert. Hygiene B.E.

School Nurses :

MISS A. M. DAWKINS, Cert. Med. Psych.	
MISS M. DURMAN.	*MISS G. A. COOK.
*MISS M. McKENZIE.	*MISS O. G. HAWES.
*MISS K. PAGE, Cert. Med. Psych.	MISS M. A. RICE.
MISS E. V. SALMON, Cert. C.S., M.M.G.	
*MISS G. A. JONES.	*MISS A. M. KNAPP.

** Certified Midwife.*

Clerical Department :

R. W. HARVEY.	W. T. POOK.
---------------	-------------

CITY MENTAL HOSPITAL.**Medical Superintendent :**

THOMAS BEATON, O.B.E., M.D. (Lond.), B.S., F.R.C.P. (Lond.).

Assistant Medical Officers :

A. F. GRIMBLEY, M.A., M.D. (Dub.), B.Ch., B.A.O. (Dub.),
 D.P.M., R.C.P.S.
 G. G. BROWN, L.R.C.P.S. (Edin.), L.D.S., D.P.M.

Medical Officer's Report for 1934.

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

MADAM AND GENTLEMEN,

I have the honour to present the Sixty-second Annual Report on the health of the City. This is my first Annual Report, having been appointed to the office in February of the year under review.

The health statistics of the year 1934 were on the whole favourable. The outstanding achievement was the reduction of the infantile mortality from 51 per 1,000 births of the previous year to the unprecedented low figure of 44. In this connection Portsmouth was the lowest of the 20 large towns of England and Wales.

The general death-rate showed a slight reduction from 12.44 to 12.36 per 1,000 of the population, and coincidentally there were 84 more births and 77 more marriages.

As regards infectious diseases, the year was notable for an increased incidence of scarlet fever, for the visitation of a severe type of diphtheria which for the past few years has been ravaging the north and midlands of England, and for an outbreak of anterior poliomyelitis. More cases were admitted to the Infectious Diseases Hospital than during any year since it was opened in 1883.

The year has been one of reorganisation and development, mainly on the lines suggested by my distinguished predecessor in his report issued in January of the year under review. Schemes have been formulated for the extension of the maternity and child welfare services (including those for the benefit of the pre-school child), and for the further development of Saint Mary's Hospital on the lines of a general hospital—all of which are outlined in detail in the body of the Report.

As the first year of the Council's Five Years' Housing Programme, 1934 saw much activity in this direction, and it is pleasing to be able to record that by the end of the year the programme was up to time.

The work of a busy year has been much facilitated by the unfailing sympathy and support of the Chairman and Members of the Health Committee, and by the valuable assistance given willingly at all times by every member of my Staff.

I have the honour to be, Madam and Gentlemen,

Your obedient Servant,

A. B. WILLIAMSON,

Medical Officer of Health.

VITAL STATISTICS

VITAL STATISTICS.

SUMMARY FOR 1934.

Civil Population (estimated to middle of 1934) 248,900

1.—GENERAL STATISTICS.

Area in Acres (land and inland water)	.....	.....	9,217
Population (Census, 1931)	.....	.....	Total 249,283
Number of Inhabitated Houses	.....	.....	61,500
Rateable Value, 1934-35	.....	.....	£1,793,329
Sum represented by a Penny Rate	.....	.....	£6,975
Average number of persons in each house (Census, 1931)			4.5
Average number of persons per acre (Census, 1931)			31.3
Total Rainfall	.....	.....	29.85 inches 758.1 millimetres

2.—EXTRACTS FROM VITAL STATISTICS.

		Total	Male	Female	
LIVE BIRTHS :					
Legitimate	....	3,694	1,891	1,803	} Birth-rate 15.86
Illegitimate	....	254	132	122	
Total	....	3,948	2,023	1,925	

STILLBIRTHS :					
Legitimate	....	115	69	46	} Rate per 1,000 total births 30.9
Illegitimate	11	6	5	
Total	126	75	51	

DEATHS	3,077	1,512	1,565	} Rate per 1,000 population 12.3
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Deaths from diseases and accidents of pregnancy and childbirth :

From Puerperal Sepsis 8 From other Puerperal causes 11

Mortality rate per 1,000 total births :—

From Puerperal Sepsis	1.96	From other Puerperal causes	2.70
Total maternal mortality rate		....	4.66

Death Rate of Infants under one year of age :

All Infants per 1,000 live births	....	....	....	....	44
Legitimate Infants per 1,000 legitimate live births	....	....	....	....	43
Illegitimate Infants per 1,000 illegitimate live births	....	....	....	....	59

Population.—The estimated population of the City at mid-1934 according to the Registrar-General was 248,900, or 2,300 less than the previous year. Such a decrease was not expected in view of the facts :—

- (1) That there was a natural increase (excess of births over deaths) of 871 ;
- (2) That during the year a rapidly developing aircraft industry had established itself in the City from the north of England ; and
- (3) That the number of new houses erected had shown a definite increase.

The Registrar-General, however, has explained that the decrease is almost entirely due to the diminution in the number of non-civilians.

Births.—During the year there were 84 more births than during 1933, equivalent to a birth-rate of 15.86 as compared with 15.38 respectively.

Marriages.—The number of marriages during 1934 was 2,217, equivalent to an increase of 77 over those of the previous year.

The increase in the birth and marriage rates is doubtless associated with better economic conditions.

Deaths.—The general death-rate was 12.36. This is slightly lower than that of the previous year (12.4) and definitely lower than the average of the 20 largest towns (13.04). The death-rate for England and Wales was 11.8

Only 175 deaths occurred amongst infants under one year of age giving an infantile mortality rate of 44 per 1,000 births as compared with 59 for England and Wales. This is the lowest rate ever recorded in Portsmouth, and is practically half of that recorded ten years ago. Reference to Table VI will show that Portsmouth is the lowest among the 20 largest towns.

There was again a slight increase in the number of deaths from cancer.

COMPARISON WITH PREVIOUS YEAR.

		1933 Population Total—251,200		1934 Population Total—248,900	
		Number	Rate per 1000 living	Number	Rate per 1000 living
BIRTHS	.....	3,864	15.3	3,948	15.86
DEATHS	.....	3,125	12.4	3,077	12.36
„	Principal Zymotic Diseases	59	0.23	87	0.34
„	Small-pox	—	—	—	—
„	Measles	4	0.01	28	0.11
„	Scarlet Fever	10	0.03	10	0.04
„	Diphtheria	9	0.03	29	0.11
„	Whooping Cough	17	0.06	7	0.02
„	Fever (Typhoid & Para-typhoid)	—	—	1	0.00
„	Diarrhoea (under 2 years)	19	0.07	12	0.04
„	Pulmonary Tuberculosis	170	0.67	197	0.79
„	Cancer	390	1.55	420	1.68
„	Influenza	148	0.58	26	0.10
		Number	Rate per 1000 Births	Number	Rate per 1000 Births
„	Under 1 year of age	203	52	175	44

AVERAGE DEATH-RATE for previous Ten years (1924-1933) 12.37

TABLE II.

Table showing the Population, Marriages, Inhabited Houses, Births and Deaths, for the year 1934, 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
1934	248,900	61,500	2,217	3,948	3,077	175	282
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
Average 10 years 1924-33	238,640	55,976	2,055	4,478	2,940	259	398

TABLE III.

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	12.22	13.52	29	0.87
2. Portsea	480	21,339	*44.45	17.04	9.73	74	1.17
3. Nelson	235	15,739	66.97	14.29	10.09	44	1.02
4. North End	743	15,523	20.89	15.48	12.46	50	0.89
5. Buckland	189	14,493	76.68	18.28	12.56	30	0.75
6. Kingston	737	16,791	22.78	17.26	7.79	34	0.59
7. Highland	447	14,472	32.37	14.77	11.33	46	1.10
8. St. Simon	341	16,560	48.56	10.04	11.17	18	0.54
9. Havelock	196	15,772	80.47	13.84	16.06	32	1.01
10. St. Paul	183	15,717	85.88	14.93	15.94	63	1.46
11. Guildhall	172	16,500	95.92	15.61	10.84	62	0.90
12. Fratton	184	13,080	71.08	14.28	13.39	53	0.84
13. St. Mary	138	16,165	117.13	16.79	12.96	40	0.92
14. Charles Dickens	142	15,138	106.00	14.85	12.34	53	1.12
15. Cosham	3,167	11,233	3.54	25.72	11.21	37	1.42
16. Meredith	1,288	16,815	13.05	17.30	10.90	30	0.65
WHOLE CITY	9,217	252,425	27.39	15.86	12.36	44	0.96

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

TABLE IV.

Showing Births and Deaths Registered in Portsmouth during the four quarters ending 29th December, 1934.

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.	987	39	948	61	—	16	5	2	8	7	7	15.71	15.09	0.24	0.08	0.03	0.13	0.12	7.3	61.80
2nd Qtr.	1052	32	747	45	—	11	1	1	4	6	1	16.75	11.89	0.18	0.02	0.02	0.06	0.09	1.0	42.77
3rd Qtr.	1007	27	604	29	—	1	2	—	11	3	4	16.03	9.61	0.02	0.03	—	0.18	0.05	4.1	28.79
4th Qtr.	981	30	752	42	1	—	2	4	6	8	2	15.62	11.97	—	0.03	0.06	0.09	0.13	2.0	42.81
TOTAL	4027	128	3051	177	1	28	10	7	29	24	14	16.03	12.13	0.11	0.04	0.03	0.11	0.09	3.6	44.04

The above statistics have been taken from the Quarterly Reports, and have not been corrected.

TABLE V.

Table showing the Annual Birth-rate, Rate of Mortality, and Death-rates among children for the year 1934, 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
1934	15.86	12.36	0.34	5.6	44	9.1
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
Average of 10 yrs. 1924-33	17.38	12.37	0.45	8.7	58	13.4

1900

TABLE VI.

Showing the Population, Birth-rates, Death-rates, Zymotic Death-rates, Maternal Mortality, etc., in 20 Large Towns for the year 1934.

NAME OF TOWN	Population as estimated by the Registrar General Mid-1934	Compara- bility Factor	Per 1,000 Population		Death Rate as adjusted by Factor	RATES PER 1,000 POPULATION FROM :—							Influenza	Tuberculosis		Infantile Mortality Rate	MATERNAL MORTALITY (per 1,000 Total Births)		
			Birth Rate	Crude Death Rate		Small- pox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Typhoid and Para- typhoid	Diarrhoea (under 2 years)		Pulmonary	Other Forms		From Sepsis	From Other Causes	Total
1. CROYDON	240,600	0.96	13.20	10.70	10.27	—	0.05	0.01	0.07	0.10	0.00	0.05	0.11	0.59	0.05	46	1.60	2.50	4.10
2. BRISTOL	410,500	0.98	13.92	10.86	10.64	—	0.03	0.00	0.04	0.04	—	0.04	0.04	0.73	0.13	46	1.34	2.85	4.19
3. PLYMOUTH	203,450	0.98	15.70	12.05	11.80	—	0.07	0.00	0.08	0.07	—	0.05	0.06	0.82	0.17	53	1.80	2.40	4.20
4. LEICESTER	241,100	1.01	14.17	11.74	11.85	—	0.04	0.00	0.02	0.08	0.00	0.08	0.10	0.92	0.08	52	2.13	2.40	4.53
5. BIRMINGHAM	1,028,000	1.10	15.30	11.00	12.10	—	0.01	0.01	0.11	0.08	0.00	0.13	0.18	0.71	0.08	68	1.78	1.91	3.69
6. PORTSMOUTH	248,900	0.99	15.86	12.36	12.23	—	0.11	0.04	0.02	0.11	0.00	0.04	0.10	0.79	0.17	44	1.93	2.70	4.63
7. WEST HAM	276,150	1.15	15.60	11.60	12.34	—	0.34	0.05	0.05	0.17	0.00	0.11	0.08	0.86	0.11	65	0.83	1.11	2.01
8. LONDON	4,230,200	1.02	13.87	12.22	12.46	0.00	0.20	0.01	0.03	0.11	0.00	0.17	0.12	0.76	0.10	67	1.39	1.41	2.80
9. NOTTINGHAM	281,850	1.03	16.24	12.31	12.67	—	0.06	0.02	0.08	0.02	0.00	0.10	0.09	0.78	0.11	69	1.53	0.87	2.40
10. SHEFFIELD	520,950	1.13	14.52	11.35	12.82	—	0.05	0.01	0.07	0.08	0.01	0.05	0.10	0.64	0.12	54	3.85	2.66	6.51
11. CARDIFF	221,050	1.06	15.80	12.30	13.03	—	0.03	0.02	0.06	0.09	0.00	0.15	0.07	0.93	0.22	74	3.20	4.10	7.30
12. BRADFORD	293,650	1.00	13.68	13.49	13.49	—	0.05	0.03	0.02	0.15	0.01	0.04	0.10	0.70	0.12	62	1.89	3.53	5.42
13. HULL	319,600	1.10	18.30	12.50	13.75	—	0.01	0.03	0.05	0.22	0.01	0.16	0.07	0.88	0.13	64	2.73	2.39	5.12
14. LEEDS	486,250	1.07	14.80	12.90	13.80	—	0.19	0.83	0.05	0.32	0.00	0.15	0.07	0.81	0.14	71	2.00	1.86	3.86
15. MANCHESTER	773,593	1.14	14.81	12.24	13.95	—	0.13	0.02	0.05	0.11	0.00	0.17	0.17	0.97	0.17	69	1.08	3.17	4.25
16. SUNDERLAND	186,650	1.12	20.10	12.50	14.00	—	0.15	0.10	0.06	0.06	0.02	0.24	0.16	0.92	0.18	82	2.93	2.67	5.60
17. STOKE-ON-TRENT	274,750	1.22	16.70	11.70	14.27	—	0.15	0.03	0.02	0.02	0.00	0.20	0.15	0.83	0.19	85	3.31	1.43	4.74
18. NEWCASTLE	287,050	1.13	16.40	12.70	14.35	—	0.28	0.08	0.06	0.08	0.00	0.18	0.13	0.97	0.18	83	1.44	3.90	5.33
19. LIVERPOOL	866,013	1.15	21.10	13.07	15.03	0.00	0.26	0.02	0.20	0.20	0.00	0.18	0.13	1.00	0.15	81	1.37	1.42	2.79
20. SALFORD	213,850	1.18	14.70	13.60	16.04	—	0.24	0.00	0.11	0.12	0.00	0.20	0.13	0.91	0.01	93	2.40	4.20	6.60

HOSPITAL AND OTHER SERVICES

HOSPITAL AND OTHER SERVICES.

SAINT MARY'S MUNICIPAL HOSPITAL.—The year 1934 was a busy one for the Governors of Saint Mary's Hospital. As stated in last year's Report this fine Hospital, built by the enterprise and foresight of the old Board of Guardians, was transferred to the Health Committee on April 1st, 1933, under the provisions of the Local Government Act, 1929, and during the year under review the process of developing it on the lines of a Municipal General Hospital was continued.

Four part-time Visiting Medical Officers, appointed at the end of 1933, commenced duty on January 1st, viz.: (1) a part-time visiting Physician; (2) a part-time visiting Surgeon; (3) an Ear, Nose and Throat Surgeon; and (4) a Radiologist, and the arrangement has worked satisfactorily. As all four officers hold honorary appointments at the Royal Portsmouth or Eye and Ear Hospitals, liaison between the Voluntary Hospitals and the Municipal Hospital is furthered.

In the scheme of development the Board of Governors found it necessary to increase the Resident Medical and Nursing Staffs. Plans for the erection of new Resident Medical Quarters were approved during the year.

As the X-ray apparatus was found insufficient to cope with the ever-increasing demands of the Hospital, one of the smaller wards was converted into an up-to-date X-ray Department. A new and powerful Victor X-ray Apparatus was installed, together with a Schall Mobile Unit which enables patients, too ill to be moved, to be X-rayed in the wards.

As was expected, the development of the Hospital has resulted in greater use being made of the Hospital by the rate-payers, the admissions showing an increase of 20 per cent. over those of the previous year. Although there were periods when

the accommodation was taxed to the utmost, no patients were refused admission, due to the more rapid turnover of patients made possible by the provision of better methods of diagnosis and the appointment of part-time visiting Medical Officers. The average stay per patient was 53.9 days during 1934, as compared with 58.8 days for the previous year.

CO-OPERATION WITH THE VOLUNTARY HOSPITALS.—In accordance with Section 13 of the Local Government Act, 1929, co-operation with the Voluntary Hospitals has been furthered. Arrangements were made whereby representatives of the Royal Hospital, Eye and Ear Hospital and Saint Mary's Hospital meet every quarter to discuss any proposed new developments in connection with any of the Hospitals. Two such matters, namely (1) the establishment of an Orthopaedic Department and a Skin Department at Saint Mary's Hospital; and (2) the inclusion of Saint Mary's Hospital in the two Voluntary Contributory Schemes were considered towards the end of the year, and it is hoped that a satisfactory agreement will be reached.

SAINT MARY'S MUNICIPAL HOSPITAL.

Medical Superintendent : R. C. MACPHERSON, M.B., Ch.B.

TABLE VIII.

Table showing the classification of the accommodation for Sick, Maternity and Mental cases and the number of beds occupied on the 31st December, 1934.

Classification of Wards (1)	Number of Wards (2)	BEDS							
		MEN		WOMEN		CHILDREN (under 16 years of age)		Total	
		Pro- vided (3)	Occu- pied (4)	Pro- vided (5)	Occu- pied (6)	Pro- vided (7)	Occu- pied (8)	Pro- vided (9)	Occu- pied (10)
Receiving Ward	1	—	—	—	—	—	—	5	—
1. Medical	2	49	47	43	36	6	6	98	89
2. Surgical	2	47	29	47	32	4	4	98	65
3. Chronic Sick	4	74	68	111	111	5	5	190	184
4. Children	2	—	—	—	—	80	75	80	75
5. Venereal	1	6	4	—	—	—	—	6	4
6. Tuberculosis	2	33	30	32	25	5	5	70	60
7. Isolation	1	—	—	—	—	—	—	31	—
8. Maternity	2	—	—	39	15	—	—	39	15
9. Mental Lunacy Act, 1890	5	22	22	56	45	—	—	78	67
(i) Short stay									
(ii) Long stay									
10. Mental Defectives	Part of 2 Wards	42	42	34	34	—	—	76	76
11. Skin and Cancer	2	49	49	45	45	4	4	98	98
TOTAL	24	367	334	515	433	140	133	1058	900

TABLE IX.

Statistics relating to In-Patients during the year ended 31st December, 1934.

1.	Total number of admissions (including infants born in hospital)	5166
2.	Number of women confined in Hospital	387
3.	Number of Live Births	379
4.	Number of Still-births	16
5.	Number of Deaths among the newly-born (<i>i.e.</i> under four weeks of age)*	12
6.	Total number of Deaths among children under one year (including those given under 5)	37
7.	Number of Maternal deaths among women confined in Hospital	2
8.	Total number of Deaths	852
9.	Total number of Discharges (including infants born in Hospital)	4226
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	3183
	(b) Exceeding four weeks, but under thirteen weeks	887
	(c) Thirteen weeks or more	1008
11.	Number of beds occupied—	
	(a) Average during the year	883
	(b) Highest on 27th April, 1934	938
	(c) Lowest on 1st January, 1934	812
12.	Number of Surgical operations under general anaesthetic (excluding dental operations)	1130
13.	Number of abdominal sections	242

* This figure relates only to children born in Hospital.

TABLE X.

Classification of In-patients who were discharged from or who died in the Hospital during the Year ended 31st December, 1934.

DISEASE GROUPS	Children (under 16 years of age)		Men and Women	
	Dis- charged	Died	Dis- charged	Died
1. Acute infectious disease	109	1	21	2
2. Influenza	1	—	1	—
3. Tuberculosis—				
Pulmonary	2	3	101	58
Non-pulmonary	7	3	11	10
4. Malignant disease	—	—	98	128
5. Rheumatism—				
(1) Acute rheumatism (rheumatic fever) together with sub-acute rheumatism and chorea	31	3	32	4
(2) Non-articular manifestations of so-called "rheumatism" (muscular rheumatism, fibrositis, lumbago and sciatica)	2	—	27	—
(3) Chronic arthritis	—	—	34	—
6. Venereal disease	—	—	23	—
7. Puerperal pyrexia	—	—	3	—
8. Puerperal fever { (a) Women confined in the hospital	—	—	—	1
(b) Admitted from outside	—	—	10	4
9. Other diseases and accidents connected with pregnancy and childbirth	—	—	111	5
10. Mental diseases { (a) Senile Dementia	—	—	15	1
(b) Other	9	—	154	—
11. Senile decay	—	—	104	209
12. Accidental Injury and Violence	22	2	136	47
<i>In respect of cases not included above :</i>				
13. Disease of the Nervous System and Sense Organs	99	9	268	51
14. " " Respiratory System	140	26	244	80
15. " " Circulatory System	39	6	275	126
16. " " Digestive System	63	7	183	28
17. " " Genito-urinary System	46	3	179	13
18. " " Skin	70	—	96	2
19. Other diseases	150	19	109	—
20. Mothers and infants discharged from Maternity Wards, and not included in above figures :				
Mothers	—	—	446	—
Infants	367	—	—	—
21. Any persons not falling under any of the above headings	363	1	25	—
TOTALS	1520	83	2706	769

The following Table summarises the Hospital Services, Voluntary and Municipal, in the City.

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 5 Resident Assistant Medical Officers <i>Consultants when reqd.</i>	130 Nurses 69 Atttdts.
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 the 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, 1932.

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.

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	600	3,474	4,074
Tuberculosis	464	1,281	1,745
Enteric Fever	6	20	26
Other Examinations	—	3	3
Totals	1,170	1,678	5,848

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, Saint Mary's Hospital, for general work.

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

PROFESSIONAL NURSING IN THE HOME.—

The nurses of the Victoria Nursing Association, of whom there are 20, attended on 2,257 patients in their own homes ; they paid altogether 66,613 visits, these included 4,616 visits to 302 patients at the request of the Health Department.

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, O.B.E., 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, 1935, was 171 (64 males and 107 females), excluding 18 defectives who were on licence from such Institutions.

In addition to the above there were on the 1st January, 1935, 60 mental defectives (18 males and 42 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.

The number of mental defectives under Statutory Supervision on 1st January, 1935, was 184 (90 males and 94 females), and the number under Voluntary Supervision was 423 (219 males and 204 females).

For those defectives who reside in their own homes, Occupation Centres and Handicraft Classes are held at Rivers Street, Southsea (two sections), the Institute, Cosham, and Highland Road School.

The work of the Senior Girls' Class at Rivers Street Centre comprises plain and fancy sewing, knitting, basketry and, barbola work, and the work taught at the Children's Class at this Centre consists of constructive stitchery, physical exercises, dancing, singing, games, knitting and basketry.

At the Cosham Centre, singing, dancing, physical exercises, painting, basketry, wool-work, etc., are carried out.

At the Senior Boys' Handicraft Class at Highland Road School, the lads are taught carpentry, play games, and carry out physical exercises.

The homes of the defectives under Statutory and Voluntary Supervision are visited periodically by the staff of the Mental Treatment Department, and during the year 1934, 1,459 visits were made.

In February, 1934, the Council adopted a report submitted to them by the Mental Treatment Committee, whereby the Council was asked to absorb the entire structure of the Portsmouth Voluntary Association for Mental Welfare, and itself carry out the duties under the Mental Deficiency Acts, and to unify the organisation which was being created to carry out the provisions of the Mental Treatment Act, 1930. A Mental Treatment Department has now been established, with separate offices situate in Anglesea Road, Portsmouth, the Department being under the control of the Mental Treatment Committee.

The duties undertaken by this Department include the carrying out of all the duties, other than Institutional, under the Mental Treatment Act, 1930, and the Mental Deficiency Acts, 1913-27, and the Department maintains a liaison with all other Departments of the Corporation and other bodies who deal with problems relating to mental deficiency or mental disorder."

VACCINATION.—During 1933, the last year for which statistics are available, 4,000 births were registered of whom 2,759, or 68.9 per cent. were successfully vaccinated; 16 cases were found to be insusceptible to vaccination, and statutory exemptions were issued in respect of 816.

The following table illustrates the growing tendency on the part of parents to neglect vaccination.

TABLE XII.
VACCINATION RETURNS FOR PAST THIRTY YEARS.

Year	No. of Births- turned in birth- sheets so regis- tered from 1st Jan. to 31st Dec.	Successfully Vaccinated	Insus- ceptible to Vaccin- ation	Had Small- pox	Dead Unvac- cinated	Postpone- ment by Medical Certificate	Removed to Districts the Vacc. Officer of which has been appraised	Removed to places unknown	No. of these births remain- ing	No. in respect of which certificates of conscientious objections have been received
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	4000	2759	16	...	164	133	46	44	22	816
*1934 (to June)	2040	1376	7	...	71	70	22	50	17	427

*6 months only.

TABLE XIII.

VACCINATION RETURNS—1st January to 30th June, 1934.

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, 1934	Number of these Births duly entered by 31st Jan., 1934 in Columns 1, 2, 4 and 5, of the Vaccination Register Birth List Sheets, viz.:				Number of these Births which on 31st January, 1935, remained unentered in the Vaccination Register on account (as shown by Report Book) of				Number of these Births remaining on 31st January, 1934, 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. 1 Success- fully Vaccin- ated	Col. 2 Insuscep- tible of Vaccin- ation	Had Small- Pox	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	
1	2	3	4	5	6	7	8	9	10	11
1. North End and Buckland	591	390	4	....	138	15	17	8	16	3
2. Kingston and East Southsea	543	356	1	....	120	23	16	6	14	7
3. Portsea and Landport	407	292	....	....	64	18	16	2	10	5
4. Portsmouth and Mid-Southsea	499	338	2	....	105	15	21	6	10	2
Totals	2040	1376	7	....	427	71	70	22	50	17
VACCINATION OF CHILDREN whose Births were registered in this District from Jan. 1st to Dec. 31st, 1933, inclusive.										
1. North End and Buckland	1187	795	3	....	268	46	39	15	14	7
2. Kingston and East Southsea	982	693	2	....	195	37	34	10	9	2
3. Portsea and Landport	819	580	3	....	147	41	23	4	11	10
4. Portsmouth and Mid-Southsea	1012	681	8	....	206	40	37	17	10	3
Totals	4000	2759	16	....	816	164	133	46	44	22

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

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

The outstanding features of the year under review were :—

- (a) the high incidence of scarlet fever with a low case mortality ;
- (b) an increase in the case mortality of diphtheria ; and
- (c) a small outbreak of infantile paralysis.

SCARLET FEVER.—The number of cases notified during 1934 was 1,349, the highest since 1921. This high incidence appears to have been general in the surrounding districts and was associated with a corresponding high incidence of erysipelas and puerperal sepsis, doubtless explainable by the fact that scarlet fever, erysipelas and puerperal sepsis are manifestations of different strains of the same micro-organism, *i.e.* the streptococcus haemolyticus. Table XIV, giving the number of notifications in respect of each of the three diseases during the past 10 years, clearly indicates this relationship.

The high attack rate of scarlet fever, which occurs periodically in this country, is related to the fact that every few years a fresh batch of children have grown up into the susceptible age groups.

From Table XVII it will be seen that the incidence rate was uniformly maintained throughout the year. Small outbreaks occurred in a few schools, but prompt measures were taken and in no case did the outbreak assume epidemic form. In one hospital, where a few cases were discovered, immediate investigation followed by the removal of cases to Hospital, the isolation of contacts, and passive immunisation by scarlet fever anti-toxin entirely prevented the spread of infection.

It is pleasing to note that with such a high incidence of scarlet fever there were only 10 deaths, equivalent to a case mortality of 0.74 as compared with 1.1 last year, attributable partly to the new serum treatment carried out at the Infectious Diseases Hospital.

TABLE XIV.

Comparison of the Number of Cases notified as suffering from Scarlet Fever, Erysipelas and Puerperal Sepsis during each of the years 1924-1934.

YEAR	Number of Notifications received in respect of Cases of		
	Scarlet Fever	Erysipelas	Puerperal Sepsis
1924	576	58	11
1925	984	61	5
1926	549	50	8
1927	593	61	8
1928	776	77	25
1929	787	74	24
1930	689	76	15
1931	601	72	8
1932	669	70	10
1933	864	74	13
1934	1349	104	17

DIPHTHERIA.—During the year 339 cases were notified as compared with 194 during 1933.

The deaths numbered 29 compared with 9 for the previous year. The number of deaths is the highest since 1928, when 53 deaths occurred. This high case mortality was due to a virulent strain of the micro-organism causing the disease. Recent research work has shown that there are at least two strains of the bacillus, namely, the mild strain, associated with a good deal of exudate and membrane and with little toxæmia, and the gravis strain, characterised by marked toxæmia and little membrane. The gravis strain first made its appearance on the Continent several years ago and more recently in the north and midlands of England where the case mortality became abnormally high.

The most disquieting feature about this severe type of the disease is that whereas in the ordinary form of diphtheria early administration of anti-toxin can be relied upon to neutralise the germ poisons, in the gravis type anti-toxin fails to give the same favourable results. The only safe method is active immunisation which has been practised in this country and in America since the war. The results obtained have shown that diphtheria immunisation has now passed the experimental stage and facilities should be given to parents to have their children immunised.

In Portsmouth, immunisation has been practised with much success in connection with the nursing staff at the Isolation Hospital, and with children living in various institutions in the City. In one such institution, where case after case had occurred and the ordinary methods of swabbing had failed to detect the source of infection, all the remaining children were tested by the Schick test and those who were found to be susceptible to the disease were immunised. No further cases occurred, and the institution has since been free from diphtheria. All new arrivals are, of course, tested and those found to be susceptible are protected against the disease.

From the economic point of view it will be appreciated that immunisation has great advantages; for a sum of a few shillings a child can be protected against diphtheria, whereas if the child is allowed to contract the disease the average cost to the City of maintenance at the Isolation Hospital would be about £25.

Towards the end of the year the Committee approved of a general scheme of diphtheria immunisation, and it is hoped that parents will make full use of the facilities available.

Immunisation consists merely in injecting a few drops of liquid under the skin on two separate occasions. The operation is practically painless and there is no subsequent disturbance to health. Furthermore, the operation is absolutely safe. Protection develops slowly and is complete in about two months, lasting for many years, possibly for life. The best time is between one and three years, but it may be done at any time up to five years of age and beyond.

ANTERIOR POLIOMYELITIS (INFANTILE PARALYSIS).—Hampshire and the surrounding district suffered during the summer months from an outbreak of infantile paralysis. In Portsmouth there were 27 cases from May until October, the majority of them occurring during the month of August. The ages ranged from $1\frac{1}{4}$ to 22 years, the average age being $6\frac{1}{2}$. Nineteen cases, or 70%, occurred under the age of 7 years. There was a slight preponderance of males. The average symptoms consisted of headache, temperature and sometimes vomiting and shivering, resembling those from an overdose of the sun, and a few days later paralysis of one or more of the limbs became manifest. In some cases the paralysis was the first sign which induced a parent to call in a doctor.

In 9 of the cases the paralysis was of a severe type and subsequent enquiries have shown that varying degrees of permanent paralysis have resulted. In 10 cases the paralysis was of a limited nature and the patient made a complete recovery. Three of the patients died, giving a case mortality of 11.1, which is about the average for this disease.

Each case was thoroughly investigated, but as usual no clue as to the source of infection could be traced. The cases were distributed evenly throughout the City, and in no instance did more than one case occur in the same family or in the same class at school. The spread of infection was undoubtedly by carriers, apparently healthy, who are immune to the disease but who, by means of droplet infection from the nose and throat, are capable of transmitting the virus to susceptible persons.

MEASLES.—Measles claimed 28 victims during the year, equivalent to a rate of 0.11 per 1,000 population. It will thus be seen that measles shares with diphtheria the distinction of being one of the chief killing diseases of childhood. In measles the dreaded complication is broncho-pneumonia which requires skilled nursing, and the modern tendency is to admit more and

more of these cases to the Infectious Diseases Hospital. Few mothers appreciate what a dangerous disease measles is.

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

Disease					Cases Notified*	Admitted to Hospital	Total Deaths
Diphtheria	....	....	....	....	339	332	29
Scarlet Fever	....	....	....	....	1349	1232	10
Enteric Fever	....	....	....	....	6	4	1
Puerperal Fever	....	....	....	....	17	9	8
Puerperal Pyrexia	....	....	....	....	21	6	—
Acute Primary and Influenzal Pneumonia					28	1	26
Cerebro-spinal Meningitis	....	....	....	....	12	10	7
Poliomyelitis	....	....	....	....	27	10	3
Encephalitis Lethargica	....	....	....	....	1	1	5
Erysipelas	....	....	....	....	104	35	4
Malaria	....	....	....	....	3	—	—
Ophthalmia Neonatorum	....	....	....	....	13	5	—
Pemphigus Neonatorum	....	....	....	....	1	—	—
Tuberculosis	....	....	....	....	376	454	240

*An analysis of these cases into age groups is given in Table XVIII.

OPHTHALMIA NEONATORUM.—The following particulars are given with regard to the 13 cases of ophthalmia neonatorum (inflammation in the eyes of new-born babies) at one time one of the most frequent causes of permanent blindness :

Cases Notified	Treated		Vision Unimpaired	Vision Impaired	Total Blindness	Deaths
	At Home	In Hospital				
13	8	5	10	3	Nil	Nil

TABLE XV.

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 1934.

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
1934								
March 31st	36	0.57	110	1.79	57	0.91	956	15.36
June 30th	18	0.29	66	1.06	57	0.91	753	12.10
September 30th	18	0.29	33	0.53	27	0.43	610	9.80
December 31st	15	0.24	75	1.20	56	0.89	758	12.58
Totals	87	0.34	284	1.14	197	0.79	3077	12.36

* 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 XVI.

Showing the number of Deaths in the years 1861 to 1934 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
1934	248900	.....	28	10	29	7	1	12	87	0.34

* Civil population only.

TABLE XVII.
WEEKLY RETURN of cases of Infectious Disease.

Week ending 1934	Small-pox	Scarlet Fever	Diphtheria	Enteric Fever	Pneumonia	Puerperal Fever	Puerperal Pyrexia	Cerebro-spinal Fever	Encephalitis Lethargica	Acute Poliomyelitis	Erysipelas	Ophthalmia Neonatorum	Malaria	Pemphigus Neonatorum	Tuberculosis		Total
															Pul- monary	Non- Pul- monary	
Jan. 6	18	5	....	2	....	....	....	....	....	4	....	....	....	2	....	31
" 13	19	5	1	1	....	....	....	....	....	1	....	....	....	4	....	31
" 20	25	13	....	1	....	....	....	....	....	3	....	....	....	12	....	54
" 27	31	4	....	....	....	....	....	....	....	4	....	....	....	13	8	60
Feb. 3	30	10	....	1	....	....	....	....	....	4	1	....	....	4	....	50
" 10	31	6	....	....	....	....	....	....	....	1	....	....	....	4	2	44
" 17	32	7	....	....	1	....	....	....	....	4	....	....	....	....	....	44
" 24	29	4	....	....	1	....	1	1	....	3	....	....	....	8	....	47
Mar. 3	33	9	....	2	....	....	....	....	....	2	....	....	1	5	....	52
" 10	29	3	....	1	....	....	1	....	....	1	....	....	....	17	8	60
" 17	26	7	....	2	1	....	....	....	....	1	....	....	....	5	4	46
" 24	31	10	....	2	1	....	....	....	....	2	....	....	....	10	2	58
" 31	19	12	....	3	....	1	....	....	....	5	....	....	....	10	1	51
April 7	25	4	....	2	3	2	1	....	....	2	....	....	....	7	....	46
" 14	22	3	....	....	1	3	1	....	....	....	1	....	....	5	1	37
" 21	31	5	1	....	....	....	....	....	....	....	....	2	....	12	2	53
" 28	33	6	....	1	....	1	1	....	....	1	....	....	....	2	....	45
May 5	30	9	....	....	....	....	....	....	....	2	1	....	....	6	....	48
" 12	18	7	....	1	....	....	1	....	....	....	....	....	....	7	3	37
" 19	24	4	....	1	....	....	....	....	1	....	1	....	....	5	3	39
" 26	17	6	....	....	2	....	....	....	....	2	2	....	....	4	....	33
June 2	18	11	....	....	....	....	....	....	....	....	....	....	....	3	....	32
" 9	23	1	....	....	....	....	....	....	....	1	....	....	....	14	....	39
" 16	34	7	....	....	....	....	1	....	....	6	....	....	....	8	1	57
" 23	33	8	....	1	....	....	....	....	....	3	....	....	....	5	....	50
" 30	23	2	....	....	....	....	....	....	....	2	....	....	....	5	1	33
July 7	25	5	1	....	....	....	1	....	....	1	....	....	....	4	....	37
" 14	25	18	....	....	1	....	....	....	....	....	....	....	....	1	....	45
" 21	22	10	1	....	....	....	....	....	....	....	1	....	....	3	1	38
" 28	23	14	....	....	1	2	....	....	5	2	....	....	....	2	2	51
Aug. 4	30	8	....	1	....	1	....	....	....	1	....	....	....	5	1	47
" 11	23	6	....	1	....	1	....	....	5	1	....	....	....	6	....	43
" 18	31	5	....	....	....	1	....	....	3	5	....	....	....	3	....	48
" 25	21	2	....	....	1	....	....	....	5	1	....	....	....	7	2	39
Sept. 1	36	7	....	....	....	1	1	....	1	....	1	....	....	5	....	52
" 8	34	4	1	....	1	....	1	....	2	3	....	....	....	1	....	47
" 15	31	5	....	....	1	....	....	....	2	1	1	....	....	7	1	49
" 22	30	8	....	3	....	....	....	....	....	1	....	....	....	8	4	54
" 29	28	7	....	....	....	1	....	....	....	1	....	....	....	6	3	46
Oct. 6	20	7	....	....	....	....	1	....	1	1	....	....	....	2	2	34
" 13	38	2	....	1	....	1	1	....	....	2	....	....	....	12	1	58
" 20	31	3	....	....	....	2	....	....	....	....	....	....	....	10	1	47
" 27	21	7	....	....	....	....	....	....	1	3	1	....	....	5	1	39
Nov. 3	29	2	....	....	1	1	....	....	....	3	....	....	....	5	2	43
" 10	24	4	....	....	....	....	....	....	....	2	....	....	....	5	....	35
" 17	29	9	....	....	....	....	....	....	....	3	....	....	....	3	3	47
" 24	22	9	....	....	....	1	....	....	....	3	1	....	....	4	3	43
Dec. 1	23	7	....	....	....	1	....	....	....	6	....	....	....	2	1	40
" 8	14	4	1	1	1	....	....	....	....	....	....	....	....	9	1	31
" 15	20	5	....	....	....	1	....	....	1	4	1	1	....	7	3	43
" 22	15	10	....	....	....	....	....	....	....	....	....	....	....	6	1	32
" 29	20	3	....	....	....	....	....	....	....	6	1	....	....	2	....	32
TOTALS	1349	339	6	28	17	21	12	1	27	104	13	3	1	307	69	2297

TABLE XVIII—Cases of Infectious Diseases notified during the Year 1934.

Notifiable Disease	CASES NOTIFIED IN WHOLE DISTRICT													TOTAL CASES NOTIFIED IN EACH WARD.													Total Cases Removed to Hospital			
	At Ages—Years													1	2	3	4	5	6	7	8	9	10	11	12	13		14	15	16
	At all Ages	Under 1	1 to 2	2 to 3	3 to 4	4 to 5	5 to 10	10 to 15	15 to 20	20 to 35	35 to 45	45 to 65	65 and over																	
Small-pox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria (including Membranous Croup)	339	4	9	12	22	29	168	52	12	23	7	1	—	16	25	13	46	15	5	13	39	52	16	16	15	15	13	332	332	332
Erysipelas	104	2	—	3	2	1	3	2	5	13	15	46	12	14	11	4	5	12	1	6	3	3	7	11	5	6	4	6	35	35
Scarlet Fever	*1349	10	31	79	102	101	616	229	56	83	31	11	—	40	113	105	88	75	40	35	40	79	105	103	96	128	84	139	1232	1232
Enteric Fever	6	—	—	—	—	—	—	—	2	3	1	—	—	—	—	—	3	—	1	—	—	—	—	—	—	—	—	—	4	4
Influenzal Pneumonia	28	2	1	1	—	—	1	—	3	7	4	6	3	—	3	1	1	5	—	3	2	2	1	2	3	2	2	1	1	1
Puerperal Fever	17	—	—	—	—	—	—	—	—	15	2	—	—	2	1	1	—	4	1	1	1	1	—	—	2	—	2	—	9	9
Puerperal Pyrexia	21	—	—	—	—	—	—	—	—	19	2	—	—	3	1	—	1	1	—	2	—	1	2	2	3	3	3	1	6	6
Poliomyelitis	27	—	3	1	4	2	12	2	2	1	—	—	—	1	5	1	2	4	2	2	2	1	2	2	—	1	1	—	10	10
Encephalitis Lethargica	1	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1
Ophthalmia Neonatorum	13	13	—	—	—	—	—	—	—	—	—	—	—	2	2	1	—	—	—	—	1	1	3	—	—	1	1	—	5	5
Cerebro-spinal Meningitis	12	1	—	1	1	1	2	2	2	1	—	—	1	—	4	—	—	6	—	—	1	1	—	—	—	—	—	—	10	10
Malaria	3	—	—	—	—	—	—	—	—	1	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	—	—	—
Pemphigus Neonatorum	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pulmonary Tuberculosis	307	—	—	—	—	—	1	4	34	126	47	83	12	15	24	27	19	12	16	13	28	16	22	14	20	24	15	14	397	397
Other forms of Tuberculosis	69	7	1	6	4	8	17	5	6	8	4	3	—	3	10	12	6	3	5	3	3	6	3	2	5	1	3	1	57	57
TOTALS	2297	40	45	103	135	142	820	296	122	301	115	150	28	96	199	168	138	131	180	82	71	90	151	195	155	181	134	175	2099	2099

Isolation Hospitals or Sanatoria—1. Milton Hospital for Infectious Diseases.
 2. Small-pox Hospital at Elson (by arrangement with Gosport and Alverstoke U.D.C.)
 3. The Langstone Sanatorium.

* Includes one case occurring in the Port Sanitary District

Infectious Diseases Hospital, Milton

Medical Superintendent:—ROWAN W. REVELL, M.D. (Lond.), D.P.H., etc.

The number of admissions was 1,771, compared with 1,123 for the previous year. The number of deaths was 72, the number discharged 1,740, and the number remaining 143.

SCARLET FEVER.—Remaining at end of previous year 152. Admitted 1,232, last year 798; discharged 1,293; died 12; remaining 79. The fatality rate was 0.9 per cent.

DIPHTHERIA.—Remaining at end of previous year 26. Admitted 332, last year 182; discharged 292; died 30; remaining 36. The fatality rate was 9.3 per cent.

ENTERIC FEVER.—Admitted 4, last year 3; discharged 3; died 1; remaining nil. The fatality rate was 25 per cent.

TUBERCULOSIS.—Admitted 108, last year 86; discharged 65; died 18; remaining 25. The fatality rate was 16.6 per cent.

MEASLES.—Admitted 15, last year 1; discharged 13; died 2; remaining nil. The fatality rate was 13.3 per cent.

CEREBRO-SPINAL MENINGITIS.—Admitted 10, last year 8; discharged 7; died 3; remaining nil. The fatality rate was 30 per cent.

ERYSIPELAS.—Remaining at end of previous year 3. Admitted 35, last year 25; discharged 34; died 2; remaining 2. The fatality rate was 5.5 per cent.

ENCEPHALITIS LETHARGICA.—Remaining at end of previous year 1. Admitted 1, last year 3; discharged 2; remaining nil.

INFLUENZA.—Remaining at end of previous year 2. Admitted 1, last year 6; discharged 3; remaining nil.

PNEUMONIA.—Admitted 1; discharged nil; remaining 1.

SEPTIC THROAT.—Admitted 6, last year 2; discharged 5; died 1; remaining nil. The fatality rate was 16.6 per cent.

POLIOMYELITIS.—Admitted 10; discharged 8; died 2; remaining nil. The fatality rate was 20 per cent.

PAROTITIS.—Admitted 1, last year 3; discharged 1.

LARYNGITIS.—Admitted 1; discharged 1.

CELLULITIS.—Admitted 1; discharged 1.

SEPTIC MENINGITIS.—Admitted 1; died 1. The fatality rate was 100 per cent.

TONSILLITIS.—Admitted 4, last year 2; discharged 4.

SCARLET FEVER CONTACT.—Admitted 1; discharged 1.

URTICAEMIA.—Admitted 1; discharged 1.

RUBELLA.—Admitted 4; discharged 4.

CHICKEN-POX.—Admitted 2; discharged 2.

Further details are given in the two following Tables.

TABLE XIX.

MILTON HOSPITAL.

NUMBER OF PATIENTS ADMITTED
during the Year 1934.

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	6	312	752	87	41	22	9	3	1232
Diphtheria	5	69	220	21	12	4	1	—	332
Tuberculosis	—	—	3	40	30	19	14	2	108
Erysipelas	1	4	5	4	1	2	6	12	35
Enteric Fever	—	—	—	1	2	1	—	—	4
Measles	3	7	3	1	1	—	—	—	15
Cerebro-spinal Meningitis	2	2	5	1	—	—	—	—	10
Encephalitis Lethargica	—	—	—	1	—	—	—	—	1
Measles and German Measles	—	2	3	—	1	—	—	—	6
Influenza	—	—	—	1	—	—	—	—	1
Parotitis	—	1	—	—	—	—	—	—	1
Laryngitis	—	—	—	1	—	—	—	—	1
Cellulitis	—	1	—	—	—	—	—	—	1
Tonsillitis	—	—	2	2	—	—	—	—	4
Poliomyelitis	—	3	6	1	—	—	—	—	10
Pneumonia	—	1	—	—	—	—	—	—	1
Septic Meningitis	—	—	1	—	—	—	—	—	1
Septic Throat	—	—	2	1	—	1	1	1	6
Urticaria	—	—	1	—	—	—	—	—	1
Scarlet Fever Contact	—	1	—	—	—	—	—	—	1
TOTALS	17	403	1003	162	88	49	31	18	1771

TABLE XX.

NUMBER OF PATIENTS ADMITTED TO THE MILTON HOSPITAL
(Small-pox Patients—Langstone Hospital) for the years 1883 to 1934.

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
1934	....	1232	4	332	15	188	1771

REPORT ON TUBERCULOSIS

By J. W. HUNTER, M.D., B.Hy., D.P.H.

(Tuberculosis Officer and Senior Assistant M.O.H.)

Notifications.—There has again been a decrease in the total notifications of persons diagnosed during the year as suffering from some form of tuberculosis, namely from 485 in 1933, to 430 during 1934. The decrease has been most marked in the pulmonary form of the disease, which is all the more gratifying, since this is the most infectious form. There has been in fact an increase in the age groups below 15, of the non-pulmonary forms.

Deaths.—The total deaths during the year from all forms of tuberculosis numbered 240, equivalent to a death-rate for all forms of tuberculosis of 0.96. The increase in death-rate was noted in pulmonary and non-pulmonary forms of the disease.

Dispensary.—The re-organisation which had been in progress during the previous two years has now been completed.

This has facilitated the control of the disease, supervision of cases and their environment, as there is now a "live" register in operation.

Table XXII gives the statistics as to the work of the Dispensary. It will be noted that there is a definite increase of supervision by nurses as to home visits, which has been made possible by the re-organisation of the register. The decrease in the number of attendances at the Dispensary was compensated for by the increase in number of Insured Persons who are under Domiciliary treatment, and are reported on by their own private doctors to the Tuberculosis Officer under the Insurance regulations.

There was also a definite increase in the use of the X-ray facilities, and nearly 73 reports per 100 new cases and contacts; this has also been a factor in enabling the Tuberculosis Officer

to give a definite opinion on a case earlier, and so reducing unnecessary attendances at the Dispensary.

The examination of contacts is still much below that which is desired, especially as the incidence of those found to be definitely suffering from tuberculosis is one in ten, and as they are persons attending not on account of symptoms, but simply because they are in contact with a known case.

Institutional.—Tables XXIII and XXV give statistical details of cases referred for Hospital, Sanatorium or Colony supervision.

During the period, various forms of treatment are instituted, and the Tuberculosis Officer is able to keep in touch with the case by routine weekly consultative visits to the Hospitals and Sanatorium.

TUBERCULOSIS.

TABLE XXI.

NEW CASES AND MORTALITY DURING 1934.

Age Periods	* NEW CASES				DEATHS			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
0 to 1	—	—	1	1	—	—	—	1
1 „ 5	1	—	11	14	—	—	5	8
5 „ 15	3	5	16	23	1	2	4	3
15 „ 25	42	53	4	9	17	24	2	5
25 „ 35	52	41	5	6	23	21	6	1
35 „ 45	32	20	3	1	27	10	1	3
45 „ 55	46	17	—	1	29	11	—	1
55 „ 65	25	11	1	1	11	6	1	2
65 & upwards	10	8	—	—	10	5	—	—
TOTALS	211	155	41	56	118	79	19	24

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

N.B.—Of the total number of 240 deaths registered from all forms of tuberculosis, 41, or 17 per cent., had not been notified during life as suffering from the disease.

TABLE XXII.

Showing the work of the Dispensary during 1934.

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.		
I.—NEW CASES examined during the year (excluding contacts) :—														
(a) Definitely tuberculous	141	93	2	2	6	8	14	11	147	101	16	13	277	
(b) Diagnosis not completed .....	.....	.....	.....	.....	.....	.....	.....	.....	3	7	2	2	14	
(c) Non-tuberculous .....	.....	.....	.....	.....	.....	.....	.....	.....	94	126	46	38	304	
II.—CONTACTS examined during the year :—														
(a) Definitely tuberculous	3	3	.....	.....	.....	.....	1	6	3	3	1	6	13	
(b) Diagnosis not completed .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	1	1	
(c) Non-tuberculous .....	.....	.....	.....	.....	.....	.....	.....	.....	6	41	37	38	122	
III.—CASES written off the Dispensary Register as :—														
(a) Recovered	17	34	13	19	1	2	30	22	18	36	43	41	138	
(b) Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous) .....	.....	.....	.....	.....	.....	.....	.....	.....	104	172	84	78	438	
IV.—NUMBER OF CASES ON Dispensary Register on December 31st :—														
(a) Definitely tuberculous	495	396	55	46	21	22	68	75	516	418	123	121	1178	
(b) Diagnosis not completed .....	.....	.....	.....	.....	.....	.....	.....	.....	3	7	2	3	15	
1. Number of cases on Dispensary Register on January 1st			1552		2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years								31	
3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of"			362		4. Cases written off during the year as Dead (all causes)								183	
5. Number of attendances at the Dispensary (including Contacts)			6040		6. Number of Insured Persons under Domiciliary Treatment on the 31st December								130	
7. Number of consultations with medical prac- titioners :— (a) Personal			72		8. Number of visits by Tuberculosis Officers to homes (including personal consultations)								72	
(b) Other			1187											
9. Number of visits by Nurses or Health Visitors to homes for Dispensary purposes			5169		10. Number of :— (a) Specimens of sputum, etc., examined								1745	
					(b) X-ray examinations made in connection with Dispensary work								532	
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								355	

Showing the immediate results of treatment of definitely Tuberculous Patients discharged during the year from Institutions approved for the treatment of Tuberculosis.

Classification on admission to the Institution		Condition at time of discharge.	Duration of Residential Treatment in the Institution.															Grand Totals
			Under 3 months			3-6 months			6-12 months			More than 12 months			Totals			
			M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	
PULMONARY TUBERCULOSIS	Class T.B. minus	Quiescent	12	11	....	7	3	1	3	3	....	....	....	....	22	17	1	40
		Not quiescent	11	8	2	4	2	....	2	3	....	....	....	....	17	13	2	32
		Died in Institution	2	....	....	....	1	....	....	....	....	....	....	....	2	1	....	3
	Class T.B. plus Group I	Quiescent	15	5	....	6	2	....	1	2	....	....	....	....	22	9	....	31
		Not quiescent	9	5	....	3	2	....	2	2	....	....	....	....	14	9	....	23
		Died in Institution	2	....	....	2	....	....	1	1	....	....	....	....	5	1	....	6
	Class T.B. plus Group II	Quiescent .....	....	....	....	5	4	....	1	2	....	....	....	....	6	6	....	12
		Not quiescent	19	8	1	4	5	....	1	2	....	....	....	....	24	15	1	38
		Died in Institution	1	....	....	2	1	....	1	1	....	1	1	....	5	3	....	8
	Class T.B. plus Group III	Quiescent .....	....	1	....	2	....	....	....	1	....	....	....	....	2	2	....	4
		Not quiescent	14	4	1	3	5	1	3	....	....	1	....	....	21	9	2	32
		Died in Institution	14	7	1	6	4	....	....	2	1	....	....	....	20	13	2	35
NON-PULMONARY TUBERCULOSIS	Bones and Joints	Quiescent	1	....	....	....	....	1	1	....	3	1	1	9	3	1	13	17
		Not quiescent ....	....	....	3	1	1	1	....	1	2	....	....	....	1	2	6	9
		Died in Institution ....	....	....	1	....	....	....	....	2	1	....	....	....	....	2	2	4
	Abdominal	Quiescent .....	....	....	1	....	1	1	....	....	2	....	....	....	....	1	4	5
		Not quiescent ....	....	....	1	....	....	1	....	....	....	....	....	....	....	....	2	2
		Died in Institution ....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....
	Other Organs	Quiescent .....	....	....	1	1	....	....	....	....	....	....	....	....	1	....	1	2
		Not quiescent ....	....	....	....	1	....	....	....	....	....	....	....	....	1	....	....	1
		Died in Institution ....	....	....	1	....	....	....	....	1	....	....	....	....	....	2	....	2
	Peri- pheral glands	Quiescent .....	....	....	1	....	....	2	....	....	1	....	....	....	....	....	4	4
		Not quiescent ....	....	....	....	....	....	2	....	....	....	....	....	....	....	....	2	2
		Died in Institution ....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....

TABLE XXIV.
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.	—	—	—
II.	Yellow	Up all day. Specified light ward duties. Limited slow walking exercise.	10	2	12
III.	Green	Up all day. Specified ward duties, requiring more exertion. Further walking exercise (1 mile).	8	3	11
IV.	Red	Up all day. Specified ward duties, requiring still more exertion. Long distance walking, increasing.	36	18	54

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

TABLE XXV.
Total Number of Patients treated at various Sanatoria, Hospitals
and Colonies during 1934.

SANATORIUM, HOSPITAL OR COLONY	Resident at beginning of year	Admitted during year	Discharged or died during year	Remaining end of year	Totals
Langstone Sanatorium	19	80	81	18	99
Beach Lodge	5	28	27	6	33
Milton Hospital	—	95	70	25	95
Saint Mary's Hospital	55	225	217	63	280
Royal National Sanatorium, Bournemouth	—	5	4	1	5
Royal National Hospital for Consumption, Ventnor	1	3	2	2	4
Lord Mayor Treloar Cripples' Hospital	21	13	14	20	34
Papworth Village Settlement	2	1	3	—	3
King George V Sanatorium for Sailors, Bramshott	2	3	4	1	5
Brompton Hospital Sanatorium, Frimley	—	1	—	1	1
Totals	105	454	422	137	559

TABLE XXVI.

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

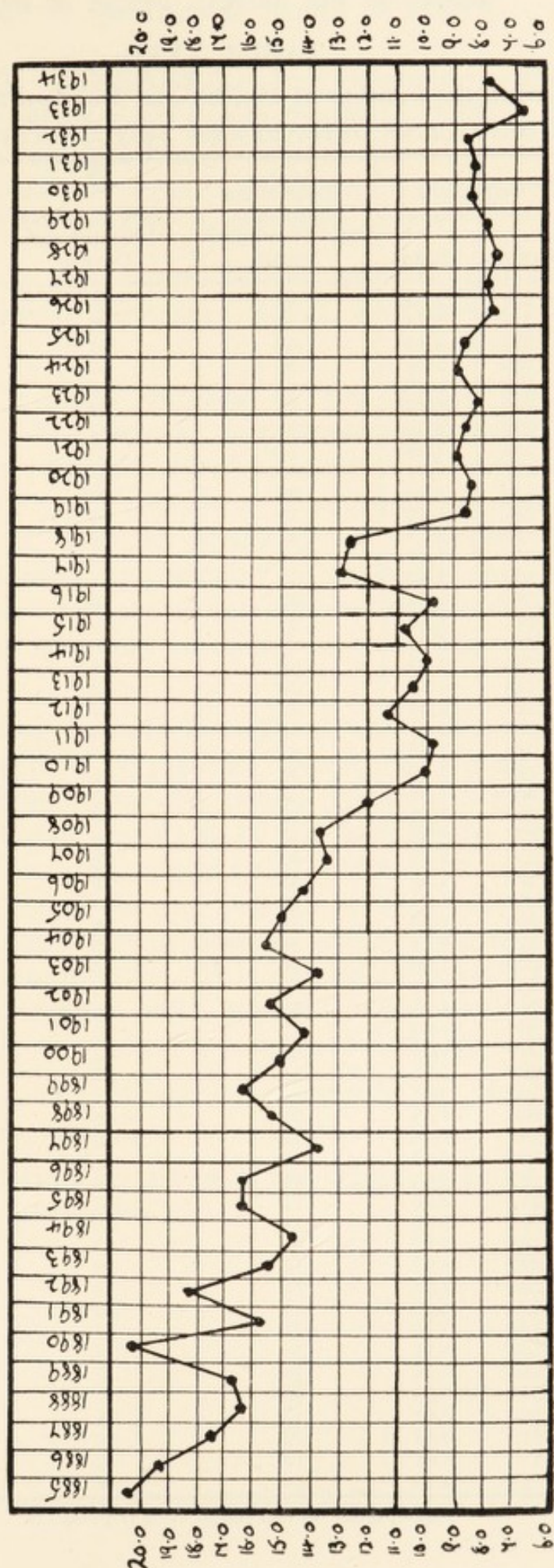


TABLE XXVII.

Table showing the number of Deaths and Death-rates per 1,000 living from TUBERCULAR DISEASES for Fifty-Six Years (1879 to 1934).

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
1934	197	0.79	15	28	43	.17

* Calculated on estimated civil population.

VENEREAL DISEASES.—In December, 1934, the Corporation suffered a serious loss in the death of Dr. A. Cambell, who had been Venereal Diseases Officer since the inception of the Venereal Diseases Scheme in 1917, and to whose efforts the high efficiency of the present department is due.

The following is a report on the work of the Treatment Centre for Venereal Diseases, Royal Portsmouth Hospital, during 1934 :—

There was a slight increase in the number of patients attending for the first time in comparison with the figures for the previous year, but the total number of attendances of all patients showed a slight decrease. There was again an increase in the number of patients reporting with recently acquired syphilis, and although the number of male patients attending for the first time with acute gonorrhoea increased by 41, the number of female patients classified in this class was reduced by 18.

It is gratifying to note that there was a reduction in the number of congenital syphilitics attending. Most of these cases are sent direct from the School Clinic and the Eye and Ear Hospital. Other members of the families to which these children belong are also requested to attend for examination and treated if found to be necessary, thus ensuring them immunity from symptoms in later life and making them healthy members of the community. It is pleasing to record that these children again attended with marked regularity, the figures showing that only two failed to complete a course of treatment.

Three cases of gonorrhoeal vaginitis in children were treated during the year.

Statistical details are given in the following table, prepared for the Ministry of Health.

TABLE XXVIII

RETURN RELATING TO ALL PERSONS WHO WERE TREATED AT THE TREATMENT CENTRE DURING THE YEAR ENDED 31st DECEMBER, 1934.

	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	203	151	—	—	103	18	27	8	333	177	510
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	17	11	—	—	13	7	—	—	30	18	48
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	11	1	—	—	—	—	—	—	11	1	12
" secondary	18	15	—	—	—	—	—	—	18	15	33
" latent in 1st year of infection	1	—	—	—	—	—	—	—	1	—	1
" all later stages	45	33	—	—	—	—	—	—	45	33	78
" congenital	13	6	—	—	—	—	—	—	13	6	19
Soft Chancre	—	—	1	—	—	—	—	—	1	—	1
Gonorrhoea, 1st year of infection	—	—	—	—	167	26	—	—	167	26	193
" later	—	—	—	—	7	—	—	—	7	—	7
Conditions other than venereal	—	—	—	—	—	—	220	135	220	135	355
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	15	4	—	—	35	8	—	—	50	12	62
TOTALS OF ITEMS 1, 2, 3 AND 4	323	221	1	—	325	59	247	143	896	423	1319
5. Number of cases discharged after completion of treatment and final tests of cure (see Item 15)	33	25	—	—	91	27	232	131	356	183	539
6. Number of cases which ceased to attend before completion of treatment and were, on first attendance suffering from:—											
Syphilis, primary	—	—	—	—	—	—	—	—	—	—	—
" secondary	8	4	—	—	—	—	—	—	8	4	12
" latent in 1st year of infection	—	—	—	—	—	—	—	—	—	—	—
" all later stages	32	18	—	—	—	—	—	—	32	18	50
" congenital	13	11	—	—	—	—	—	—	13	11	24
Soft Chancre	—	—	—	—	—	—	—	—	—	—	—
Gonorrhoea, 1st year of infection	—	—	—	—	31	10	—	—	31	10	41
" later	—	—	—	—	5	—	—	—	5	—	5
7. Number of cases which ceased to attend after completion of treatment but before final tests of cure (see Item 15)	19	22	—	—	27	1	—	—	46	23	69
8. Number of cases transferred to other centres or to institutions, or to care of private practitioners	45	9	—	—	74	8	—	—	119	17	136
9. Number of cases remaining under treatment or observation on 31st December	173	132	1	—	97	13	15	12	286	157	443
TOTALS OF ITEMS 5, 6, 7, 8 AND 9	323	221	1	—	325	59	247	143	896	423	1319

	Syphilis		Soft Chancre		Gonorrhoea		Conditions other than Venereal		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Total
0. Number of cases in the following stages of syphilis included in Item 6 which failed to complete one course of treatment :—											
Syphilis, primary	—	—	—	—	—	—	—	—	—	—	—
„ secondary	5	1	—	—	—	—	—	—	5	1	6
„ latent in 1st year of infection	—	—	—	—	—	—	—	—	—	—	—
„ all later stages	9	7	—	—	—	—	—	—	9	7	16
„ congenital	2	—	—	—	—	—	—	—	2	—	2
1. Number of attendances :—											
(a) for individual attention of the medical officers	2074	1488	9	—	1849	243	680	380	4612	2111	6723
(b) for intermediate treatment, e.g. irrigation, dressing	511	121	16	—	9349	915	901	482	10777	1518	12295
TOTAL ATTENDANCES	2585	1609	25	—	11198	1158	1581	862	15389	3629	19018
2. In-patients :—											
(a) Total number of persons admitted for treatment during the year	7	2	—	—	1	2	2	—	10	4	14
(b) Aggregate number of "In-patient days" of treatment given	130	114	—	—	34	51	2	—	166	165	331
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	1	1	—	5	3	6	2	13	6	
14. Chief preparations used in treatment of Syphilis :—	Arsenobenzene Compounds										
	Mercury										
	Bismuth										
(a) Names of preparations	Novostab — Chlorostab										
(b) Total number of injections given (out-patients and in-patients)	1378 — 1241										
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

MATERNITY AND CHILD WELFARE

MATERNITY AND CHILD WELFARE.

INFANTILE MORTALITY.—During the year the outstanding achievement, and one of which the City may be proud, was the reduction of the infantile mortality rate to 44 per 1,000 live births from that of 51 for the previous year. This is the lowest ever recorded in Portsmouth. Reference to Table VI (p. 21A) will show that it is also the lowest of the 20 large towns in England and Wales. During 1934 the infantile mortality rate for England and Wales was 59. Details of the various causes of infant deaths are given on page 63 in Table XXIX, and comparisons of the rates for past years are given on pages 64 and 67, Tables XXX and XXXI.

THE PRE-SCHOOL CHILD.—The above satisfactory record relates only to infants under one year of age. For children between one and 5 years of age little provision has been made due to the insufficiency of medical and nursing staff. Children of this age group frequently develop defects, *e.g.* eye, ear, nose, throat and postural defects, etc., many of which are easily remediable in the early stages, but which, if undetected and untreated, may produce permanent damage and crippling by the time the child enters school.

A complete scheme for the inspection and visitation of children between one and 5 years of age has now been approved, and will come into operation next year. The scheme provides for the services of two additional health visitors, the part-time services of another medical officer and the establishment of more child welfare clinics. The extra expenditure will be more than compensated by the benefit to the child life of the City in preventing permanent defects and by the saving in the cost of treating these defects by the School Medical Service when the child enters school.

TABLE XXIX.

Infant Mortality.

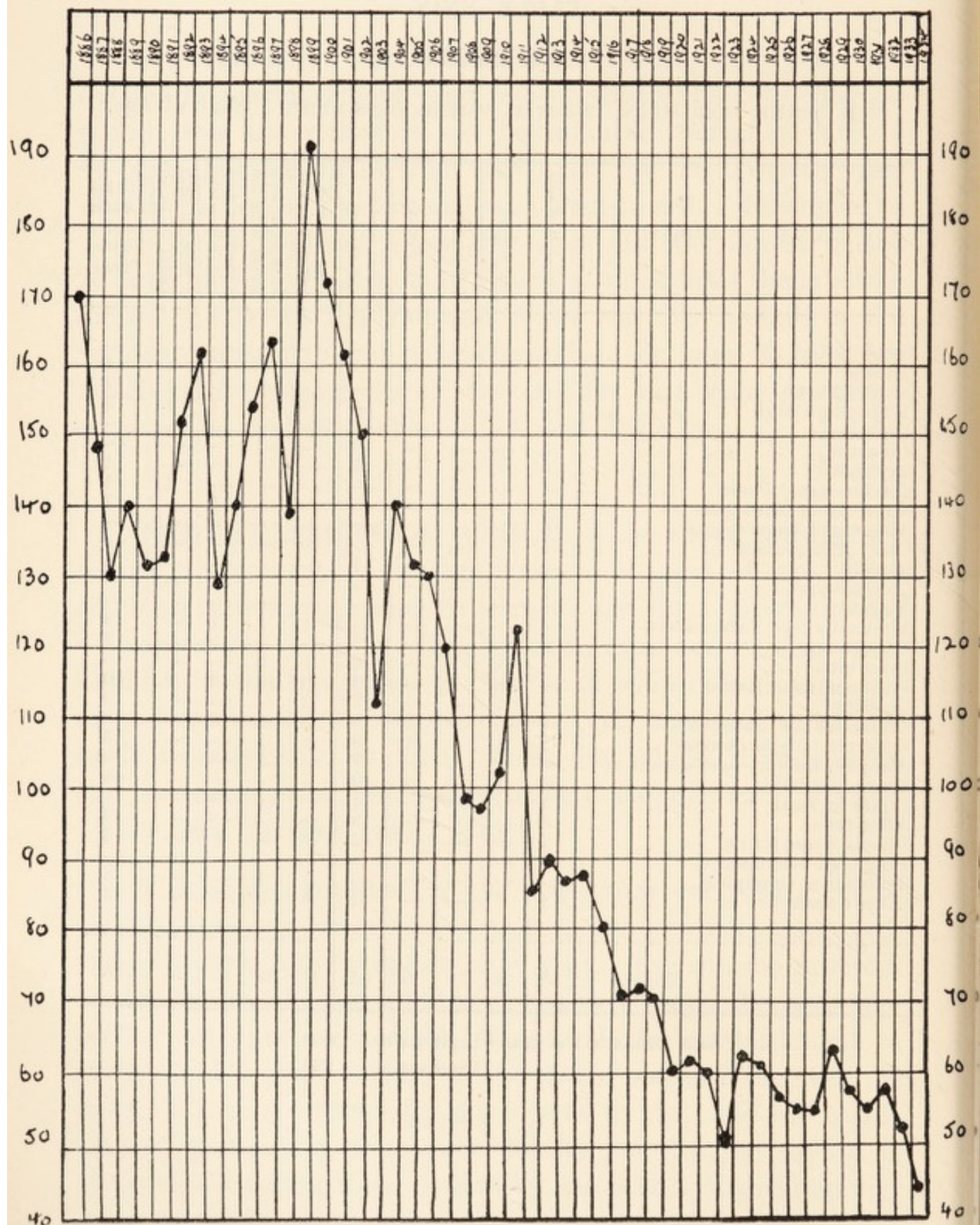
Nett Deaths from stated causes at various Ages under 1 Year of Age.

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	—	—	—	—	—	—	—	2	4	6
Scarlet Fever	—	—	—	—	—	—	—	—	1	1
Whooping Cough	—	—	—	—	—	1	—	1	1	3
Diphtheria	—	—	—	—	—	—	—	—	—	—
Influenza	—	—	—	—	—	—	—	—	—	—
Erysipelas	—	1	—	—	1	—	—	—	—	1
Cerebro-spinal Fever	—	—	—	—	—	—	—	—	1	1
Tuberculous Meningitis	—	—	—	—	—	—	1	1	—	2
Abdominal Tuberculosis	—	—	—	—	—	—	—	—	—	—
Other Tuberculosis	—	—	—	—	—	—	—	—	—	—
Syphilis	—	1	—	—	1	—	—	—	—	1
Chicken-pox	—	—	—	—	—	—	—	—	—	—
Rickets	—	—	—	—	—	—	—	—	—	—
Meningitis (not Tuberculous)	—	—	—	—	—	1	1	1	—	3
Convulsions	2	—	—	—	2	—	—	1	—	3
Bronchitis	—	1	1	—	2	1	3	—	—	6
Pneumonia (all forms)	—	—	2	—	2	9	10	10	9	40
Gastritis	—	1	—	—	1	2	—	—	—	3
Diarrhoea and Enteritis	—	—	3	2	5	3	2	3	—	13
Congenital Malformations	5	1	1	1	8	4	1	—	—	13
Atrophy, Debility and Marasmus	5	1	1	—	7	—	2	—	—	9
Premature Birth	34	1	3	2	40	4	—	—	—	44
Injury at Birth	1	—	—	—	1	—	—	—	—	1
Atelectasis	8	—	—	—	8	—	—	—	—	8
Icterus Neonatorum	2	—	—	—	2	—	—	1	—	3
Pemphigus Neonatorum	—	—	—	—	—	—	—	—	—	—
Suffocation, Overlying	—	—	—	—	—	1	1	—	—	2
Other Causes	1	1	—	—	2	5	3	2	—	12
TOTALS	58	8	11	5	82	31	24	22	16	175

Nett Births in the year—Legitimate 3694
 Illegitimate 254

TABLE XXX

Chart showing the number of Deaths under 1 year of age
to 1,000 Births in Portsmouth, 1886 to 1934.



CHILD WELFARE CENTRES.—The various child welfare centres showing the number of new patients, attendances, etc., are set out below :—

CENTRES		Attendances	New Patients	Seen by the Medical Officer
Fratton (2 afternoons a week)	....	14,711	1,065	4,169
Eastney (1 afternoon a week)	....	8,097	418	1,975
Portsea (1 afternoon a week)	....	5,352	377	2,273
Stamshaw (1 afternoon a week)	....	5,744	350	2,253
Cosham (1 afternoon a week)	....	4,099	244	890
Totals		38,003	2,454	11,560

HOME VISITING.—The Health Visitors paid 21,044 visits during the year ; 3,686 were first visits to infants under one year of age, and 7,977 were to children between the ages of one and five years. The visits also included those to 17 cases of puerperal fever, to 21 cases of puerperal pyrexia, and to 13 cases of ophthalmia neonatorum.

MEASURES AGAINST MATERNAL MORTALITY AND MORBIDITY.—In accordance with Ministry of Health Circular 1167, supplemented by Circular 1433 of 1934, issued to Local Authorities, efforts were directed during the year towards making the maternity services more complete.

Amongst other improvements the scheme, formulated by my predecessor, to transfer the maternity services of the Municipal Maternity Hospital (where the maintenance costs were necessarily very high by reason of the smallness of the unit) to Saint Mary's Hospital was approved. When this scheme comes into operation on April 1st of next year, the City will have a complete maternity unit of 70 beds at Saint Mary's Hospital with all the facilities offered by an up-to-date general hospital, thus conforming with the recommendations of the Departmental Committee on Maternal Mortality and Morbidity that "maternity accommodation should, where possible, be associated with general hospitals."

MATERNAL MORTALITY.—The maternal mortality rate for 1934 was 4.66 per 1,000 total births as compared with 4.41 for England and Wales. This rate is the highest since 1928. The increase was due partly to more deaths from puerperal sepsis which, as stated on page 36, was associated with a greatly increased incidence of scarlet fever and erysipelas. A comparison of the rates for the last 11 years is given on page 67 in Table XXXI.

The strictest measures are taken to prevent the spread of septic infection. Any rise of temperature during the puerperium, notified by the midwife in her form of sending for medical aid or by the doctor under the Public Health (Puerperal Fever and Puerperal Pyrexia) Regulations, is immediately investigated. The doctor and midwife are communicated with and on the least suspicion of sepsis, swabs are taken from the nose and throat of the attendant and from the cervix uteri and nose and throat of the patient. These are examined for haemolytic streptococci and forwarded to the Ministry of Health Laboratory for typing. Meantime, the midwife is suspended from practice and other precautions taken. The spread of infection is almost invariably found to be due to "carriers."

TABLE XXXI.

Comparison of the Maternal and Infantile Mortality Rates in Portsmouth and England and Wales during the past 11 years.

Year	MATERNAL MORTALITY*			INFANTILE MORTALITY*	
	Portsmouth		England & Wales	Portsmouth	England & Wales
	From Sepsis	Total	Total		
1924	1.19	3.98	3.90	66	74
1925	0.63	2.51	4.08	62	75
1926	—	3.11	4.12	55	70
1927	2.12	4.49	4.11	55	70
1928	3.15	5.4	4.42	55	65
1929	1.59	3.4	4.33	66	74
1930	1.64	2.3	4.40	59	60
1931	0.44	2.3	4.11	55	66
1932	0.93	2.34	4.04	60	65
1933	0.99	1.98	4.23	51	64
1934	1.96	4.66	4.41	44	59

* The Maternal Mortality Rate is calculated per 1,000 total births, and the Infantile Mortality Rate per 1,000 live births.

PUERPERAL PYREXIA.—During the year 21 cases were notified, of which 9 were midwives' cases where a doctor was called in, 4 were doctors' cases, while the remaining 8 were hospital maternity cases. Five of the above cases were nursed in Saint Mary's Hospital, 2 in the Royal Hospital, and the others were treated at home.

PUERPERAL FEVER.—Seventeen cases were notified during the year. Of these, 14 were midwives' cases where a doctor was called in, 2 were doctors' cases, and the other was a hospital maternity case.

ANTE-NATAL CLINICS.—There is one ante-natal clinic held weekly at the Municipal Maternity Hospital, Trafalgar Place, mainly for the supervision of expectant mothers who intend to be confined in the Hospital. The total number of mothers who sought advice was 436, the total number of attendances being 2,592.

In addition, 6 ante-natal clinics are held weekly at Saint Mary's Hospital for expectant mothers who are to be confined in the Hospital.

There is need to establish branch ante-natal clinics to which midwives can refer cases for advice, *i.e.* one at Portsea and another at Cosham, especially in the latter district which is rapidly increasing. A consultative clinic is also necessary, as recommended by the Ministry of Health, to be conducted by an obstetric specialist to whom difficult cases can be referred for opinion by the Child Welfare Officer and by general practitioners.

POST-NATAL CLINICS.—The examination of the mother at the end of the first and third months respectively after confinement is advisable if gynaecological conditions, which may result in permanent ill-health, are to be prevented.

During the year under review very little post-natal supervision of mothers was possible owing to deficiency of medical and nursing staff, but with the appointment of the additional medical officer and the two health visitors mentioned above, it is expected next year to have a post-natal scheme in operation. In such a scheme it is hoped that provision will also be made for the giving of advice and practical instruction to those mothers whose condition of health is such as to make further pregnancy dangerous, in accordance with the recent Ministry of Health Circular on Birth Control.

ASSISTED WELFARE CENTRES.—There is one assisted Maternity and Child Welfare Centre, viz. the Royal Naval and Royal Marine Child Welfare Centre at 45-49, Commercial Road. During the year 344 new cases were seen by the Medical Officer, Dr. A. Erskine Clarke, the total attendances being 3,063.

Excellent work is being carried out, and acknowledgment is made of the contribution made by this Voluntary Association in the reduction of the infantile and maternal mortality rates of the City.

DENTAL TREATMENT.—The necessity for dental treatment in expectant mothers cannot be over-estimated. All carious teeth and sepsis of the gums should be carefully treated, otherwise they may become a source of infection to the mother later with tragic results. Moreover, the septic absorption from carious teeth is detrimental to the health of the nursing mother and in turn leads to lowered vitality in the infant.

Apart from one or two cases treated at Saint Mary's Hospital, there is at present no provision for the dental treatment of expectant and nursing mothers.

INSTITUTIONAL PROVISION FOR MOTHERS.—The following table gives statistics in connection with maternity work at the Municipal Maternity Hospital, the Maternity Wards of Saint Mary's Hospital, and at the Royal Naval Maternity Home. The total number of confinements in these institutions numbered 958 as against 892 in the previous year.

TABLE XXXII

	Municipal Maternity Home	St. Mary's Hospital	Royal Naval Maternity Home
No. of Maternity beds (exclusive of isolation and labour)	16	39	19 (Maternity) 3 (Ante-natal)
No. of Patients admitted	292	387	293 (Deliveries 279)
Average duration of stay	14 days	14 days	15 to 16 days
No. of cases delivered by : (a) Midwives	269	—	241
(b) Doctors	23	387	38
Cases in which medical assistance was sought by midwife	109	(Doctor always present)	134
No. of cases notified as :			
(a) Puerperal Fever	Nil	1	Nil
(b) „ Pyrexia	3	2	3
No. of cases of pemphigus neonatorum	Nil	Nil	Nil
No. of infants not entirely breast-fed while in institution	21	4	26
No. of cases notified as ophthalmia neonatorum	2	Nil	2
Result of treatment	Recovered	—	Recovered
No. of Maternal deaths	Nil	2	Nil
Cause of death	—	1. Puerperal Sepsis 2. Eclampsia	—
No. of foetal deaths :		Pregnancy	
(1) Stillborn	5	16	9
(2) Within 10 days of birth	4	11	5
(3) Causes of death	Strangulation—1	Prematurity—7	Prematurity—7
	Prematurity—3	Placenta praevia—4	Degenerate placenta—1
	Convulsions—1	Atelectasis—3	
	Macerated—1	Ante-partum haemorrhage—1	Difficult breech—1
	Meningocele—1	Torn tentorium—1	
	Prolapsed Cord—1	Mal-presentation—3	Atelectasis—2
	Prolonged Labour—1	Eclampsia—1	
		Twin pregnancy—1	Broncho-pneumonia—1
		Anencephalus—2	
		Breech delivery—1	
		Prolapsed cord—1	
		Postpartum haemorrhage—1	Hydrocephalus—1
		Specific Pemphigus—1	Difficult labour—1

MATERNITY AND NURSING HOMES.—There are 43 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 | 1 |
| (b) As Maternity Homes | 3 |
| (2) Number of Homes registered : | |
| (a) As Nursing Homes | 1 |
| (b) As Maternity Homes | 3 |
| (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.

MIDWIVES.—The number of midwives practising in the City was 80, and they attended 2,834 out of the 3,948 births, or 80 per cent. Of these confinements they attended 2,411 in the capacity of midwives, and 423 as maternity nurses. Generally speaking, the practice of the midwives has been satisfactory. 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 1,078, or 44 per cent. of midwives' cases. The total amount paid by the Local Authority to medical men called in by midwives was £1,384 11s. 0d., out of this £478 18s. 0d. was received from patients and premiums under the Insurance Scheme. Midwives sent for medical assistance in 49.8 per cent. of their cases when the patient was insured under the Scheme, and in 11.3 per cent. where not insured. The inspection of the midwives' bags, books and appliances was carried out regularly during the year.

TABLE XXXIII.
ROLL OF MIDWIVES PRACTISING WITHIN THE CITY OF PORTSMOUTH.

SURNAME	CHRISTIAN NAME	ADDRESS	No. of Cert.	Date of Certificate	Date of Notice 1934
1. Ainsley	Clarissa Mary	25, Outram Road	51397	14th Aug., '20	6th January
2. Amsden	Anne Winifred	11, Tangier Road	62675	9th April, '24	3rd January
3. Bampton	Dorothy Vera	31, Collins Road	68136	25th Feb., '26	8th January
4. Barnes	Eliza	109, Church Road	23295	26th April, '06	3rd January
5. Barnes	Elizabeth	109, Church Road	27020	15th Oct., '08	6th January
6. Bishop	Henrietta Catherine	28, Victoria Road North	87325	19th Aug., '33	4th January
7. Bishop	Mildred Grace	Royal Naval Maternity Home	63232	14th Sept., '34	15th Sept.
8. Blake	Ellen M.	12, Haslemere Road	27693	16th Dec., '08	3rd January
9. Bragg	Sarah	118, St. Augustine Road	42180	1st May, '15	10th January
10. Brassfield	Frances Mary	26, Besant Road	47125	11th May, '18	8th January
11. Brinn	Rosina	63, Ophir Road	29590	30th Oct., '09	
12. Brockett	Ellen	23, Outram Road	45584	7th May, '17	12th January
13. Butcher	Dorothy M.	Royal Naval Maternity Home	86522	27th May, '33	25th Sept.
14. Caton	Kathleen	1, First Avenue, Farlington	64753	10th Dec., '24	2nd January
15. Clarke	Gertrude	16, Second Avenue, Cosham	17540	23rd Mar., '05	2nd January
16. Collins	Mabel	28, Victoria Road North	74387	24th Nov., '28	2nd January
17. Cowell	Mary A.	57, St. Piran's Avenue	69902	16th Dec., '26	4th January
18. Crafts	Elizabeth	14, Alexandra Road	39421	17th Dec., '13	3rd January
19. Elliott	Mary Ann Leah	128, Prince Albert Road	5487	30th June, '04	3rd January
20. Evans	Annie Ellen E.	28, Victoria Road North	85911	10th Mar., '33	2nd January
21. Farr	Mary	6, Longs Road	52338	10th Nov., '20	3rd January
22. Field	Ethel Fanny	126, Devonshire Avenue	54222	11th June, '21	3rd January
23. Foley	Louisa A.	8, Thurbern Road	37918	28th April, '13	9th January
24. Foot	Alice Maud Mary	21, Essex Road	54229	11th June, '21	6th January
25. French	Louisa	11, Hilsea Market, London Road	47980	9th Nov., '18	2nd January
26. Gemmell	Jane Frances	15, Edgerley Gardens, Cosham	88265	25th Nov., '33	2nd January
27. Godwin	Julia	3, Dean Road, Cosham	65151	29th Jan., '25	3rd January
28. Goodman	Lucy Ann	3, Derby Road	26437	21st May, '08	30th Dec., 1933
29. Greatback	Marjorie	Municipal Maternity Hospital	90642	14th Sept., '34	14th Sept.
30. Heard	Mabel Vosper	28, Victoria Road North	34558	28th Oct., '11	3rd January
31. Hebington	Aileen Mary	63, Margate Road	70015	16th Dec., '26	2nd January
32. Hebington	Eliza	31, Curzon Howe Road	50981	12th May, '20	3rd January
33. Heycock	Ann Elizabeth	Municipal Maternity Hospital	90686	16th Sept., '34	16th Sept.
34. Hodge	Ada J.	73, King Street, Southsea	50992	12th May, '20	5th January
35. Horton	Winifred	Naval Welfare Centre	66858	15th Aug., '25	2nd January
36. Howard	Lydia	49, Wisborough Road	63413	14th June, '24	2nd January
37. Howell	Gwendoline Mary	Municipal Maternity Hospital	83828	28th May, '32	2nd January
38. Howell	Mary G. C.	Royal Naval Maternity Home	88381	25th Nov., '33	1st April
39. Jack	Emma	11, Shaftesbury Road	47280	11th May, '18	4th January
40. Jago	Clara Sara	102, Hawthorn Crescent	23268	6th Feb., '06	5th January

ROLL OF MIDWIVES—continued.

SURNAME	CHRISTIAN NAME	ADDRESS	No. of Cert.	Date of Certificate	Date of Notice 1934
41. Jones	Doris Isabel	Municipal Maternity Hospital	86847	27th May, '33	2nd January
42. Jones	Elsie	11, Ashburton Road	85299	25th Nov., '32	2nd January
43. Kean	Lucy Rowe	133, Eastfield Road	31908	30th Sept., '10	3rd January
44. Keen	Maud A.	Royal Naval Maternity Home	75237	10th Nov., '27	12th Sept.
45. Lamb	Eileen Audrey	Municipal Maternity Hospital	87636	12th Aug., '33	28th January
46. Langstreeth	Maria	63, Belmont Street	14211	23rd Feb., '05	
47. Lanham	I. E.	Municipal Maternity Hospital	87639	10th Aug., '33	19th Sept.
48. Lee	Ethel Eliza	23, Derby Road	60963	11th Aug., '23	6th January
49. Lovett	Ellen	14, Shearer Road	48431	10th Feb., '19	3rd January
50. McNeish	Alice	"Sunnycote," London Road	56968	10th April, '22	3rd January
51. Malyon	Marion	200, Stamshaw Road	46160	11th Aug., '17	5th January
52. Martin	Daisy Maud	Military Families' Hospital	69651	14th Aug., '26	3rd January
53. Martin	Elizabeth Amy	22, Milton Road	56977	10th April, '22	9th January
54. Moir	Annie M. L.	28, Victoria Road North	78420	24th May, '30	18th May
55. Moore	Emma Lilian K.	23, Oliver Road	48077	9th Nov., '18	2nd January
56. Morgan	Agnes	68, Montgomery Road	44981	31st Oct., '16	2nd January
57. Nobes	Mary E.	28, Victoria Road North	86201	15th Feb., '33	7th Nov.
58. Packer	Mabel Elizabeth	7, St. Andrew's Road	48091	9th Nov., '18	4th January
59. Paul	Margaret	12, Northern Parade	35805	2nd May, '12	5th January
60. Pavier	W. G.	Royal Naval Maternity Home	78458	24th May, '30	5th February
61. Phillips	Edith	80, Methuen Road	3388	24th Mar., '04	2nd January
62. Richards	Annie Kathleen	Royal Naval Maternity Home	35480	23rd Feb., '12	15th January
63. Ricketts	Marion F.	454, Commercial Road	8755	27th Oct., '04	18th January
64. Rumbold	Edith	"Burcott," Northern Road, Cosham	49421	9th Aug., '19	5th January
65. Rust	Jane	204, Powerscourt Road	40133	28th April, '14	4th January
66. Sansom	Maud Mary	46, Tottenham Road	40572	22nd June, '14	3rd January
67. Smith	E. A.	"Fairthorne," Copnor Road	87842	12th Aug., '33	22nd June
68. Stedman	M. E.	Municipal Maternity Hospital	66001	9th April, '25	18th June
69. Stevens	Johanna	"Glenlyn," Stubbington Avenue	55569	11th Oct., '21	3rd January
70. Stock	Dorothea Helena	7, Wyndcliffe Road	70517	24th Feb., '27	4th January
71. Street	Beryl	9, Clovelly Road	38035	28th April, '13	3rd January
72. Taylor	Florence Mary	17, Portsdown Road, Portchester	29219	10th Aug., '09	3rd January
73. Taylor	Lily May	3, Posbrooke Road	18246	27th April, '05	15th January
74. Trowbridge	Edith Mary	1, Collins Road	22860	23rd Nov., '05	2nd January
75. Upfield	Gertrude Eleanor	25, Oliver Road	62132	12th Dec., '23	15th January
76. Weller	Marion Edith	45, Catfield Road	46669	10th Nov., '17	6th January
77. Westgarth	Muriel Kathleen	St. Mary's Hospital	88777	25th Nov., '33	5th March
78. Willcocks	May Julia	174, Chichester Road	57158	10th April, '22	10th January
79. Winfield	Gladys Irene	58, Lyndhurst Road	74978	23rd Feb., '29	15th January
80. Wynn	Amelia	Solent Road, Drayton	35371	19th Feb., '12	3rd January

CHILDREN'S ACTS, 1908—1932.—Under these Acts, 105 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 136. At the end of the year the figures were 113 persons and 158 children. During the year 1,622 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, uncleanness and overcrowding. There were no deaths among children under the care of foster mothers, but there was one prosecution under Section 65 (1) of the 1932 Act, for failing to notify the Local Authority of intention to undertake the nursing of an infant. The defendant was convicted and a fine of £2 imposed.

SANITARY CIRCUMSTANCES

SANITARY CIRCUMSTANCES.

METEOROLOGICAL CONDITIONS, Etc.

Summary of Meteorological Statistics, 1934.

Barometer.—The mean barometer pressure for the year was 30.043 inches. The highest observed reading corrected to sea-level was 30.982 on February 16th, and the lowest 28.784 on December 15th.

Temperature.—The mean temperature in the shade was 52.4°, or 1.6° above the normal.

MAXIMUM.—The mean maximum temperature in the shade was 58.6°, the highest being 85.0° on July 18th.

MINIMUM.—The mean minimum temperature was 46.3°, the lowest being 25° on February 3rd.

MINIMUM ON GRASS.—The mean minimum temperature on the grass was 40.7°, the lowest being 18° on February 3rd.

EARTH TEMPERATURE.—The mean temperature at 1 foot below the ground was 53.1°, and that at 4 feet 53.5°.

Bright Sunshine.—1818.6 hours of sunshine were registered by the Campbell-Stokes Recorder. The greatest amount registered on one day was 15.2 hours, viz., on July 10th.

Frosts.—The minimum thermometer in the shade, four feet above the ground fell to and below freezing point on 35 days, and that on the ground on 61 occasions.

Humidity.—The mean humidity of the air (Saturation 100) was 84.2.

Rainfall.—The total rainfall was 29.85 inches, or 0.09 inches above the normal. The greatest fall of rain in 24 hours was 1.35 inches, on November 9th.

Hail.—Hail occurred on 1 occasion.

Thunder.—Thunder occurred on 9 occasions.

Snow.—Snow or Sleet fell on 1 occasion.

Fogs.—Fogs occurred on 16 occasions.

Gales.—Gales occurred on 14 occasions.

Averages for the Past Ten Years, 1925 to 1934.

<i>Rainfall</i>	<i>Hours of Bright Sunshine</i>	<i>Mean Temperature</i>	<i>Humidity (Saturation 100)</i>
29.50	1783.2	51.5°	82.4

TABLE XXXIV.
MONTHLY WEATHER SUMMARY FOR THE YEAR 1934.

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	30.211	40.0	51	26	44.4	35.6	8.8	65.5	17	58.2	2.29	20	89
February	30.515	39.3	56	25	45.7	33.0	12.7	97.2	18	0.6	0.02	2	90
March	29.767	43.7	59	28	50.3	37.2	13.1	141	27	76.2	3.00	17	89
April	29.816	49.0	66	34	55.7	42.3	13.4	167.7	25	53.2	2.10	15	86
May	30.150	55.1	78	38	63.9	46.4	17.5	260.8	31	30.4	1.20	7	75
June	30.104	61.9	81	47	69.7	54.2	15.5	231.2	29	25.0	0.98	6	74
July	30.111	67.4	85	55	75.8	59.1	16.7	312.3	30	22.7	0.89	5	75
August	29.973	62.7	79	45	69.4	56.1	13.3	201.8	30	71.9	2.83	17	83
September	30.067	61.9	79	47	68.3	55.5	12.8	183.7	29	55.4	2.18	15	80
October	30.085	54.1	65	35	58.8	49.4	9.4	69.5	19	46.7	1.84	14	84
November	30.091	45.4	56	30	49.7	41.1	8.6	44.9	13	94.7	3.73	14	93
December	29.630	49.2	55	35	52.3	46.2	6.1	43.0	12	223.4	8.79	27	93
TOTAL	—	—	—	—	—	—	—	1818.6	280	758.4	29.85	159	—
MEAN	30.043	52.4	67.5	36.2	58.6	46.3	12.3	151.5	23.3	63.2	2.48	13.2	84.2

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

Year	Total Sunshine	Total Rainfall in ins.	Highest Maxi- mum in Shade of	Date	Lowest Maxi- mum in Shade of	Date	Lowest Mini- mum in Shade of	Date	Lowest Mini- mum 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. 3rd
1917	1718	25.93	78	July 16th, 17th	31	Jan. 26th, 27th	20	Feb. 5th	13	Feb. 18th
1918	1874	25.80	83	Aug. 22nd	36	Jan. 3rd, 4th	23	Jan. 9th	16	Dec. 17th
1919	1784	29.06	82	Aug. 10th, 13th	31	Jan. 31st	24	Jan. 25th, Feb. 8th, 9th	17	Dec. 16th
1920	1584	28.00	78	May 24th	31	Dec. 12th	22	Jan. 7th	22	Dec. 16th
1921	2065	14.00	89	July 19th	38	Feb. 7th	26	Nov. 15th	18	Nov. 13th
1922	1809	30.24	79	May 23rd, 24th	37	Feb. 6th	26	Jan. 24th, 25th	19	Nov. 18th
1923	1770	29.54	89	July 12th	34	Dec. 25th	23	Nov. 25th	17	Nov. 16th
1924	1760	36.59	77	July 12th	37	Feb. 20th, 27th	27	Feb. 18th, 29th	21	Feb. 15th
1925	1923	38.10	82	June 7th	35	Dec. 14th	26	March 19th	17	Nov. 14th
1926	1688	26.40	85	July 14th	32	Jan. 14th	22	Jan. 15th, 17th	18	Jan. 15th, 17th, Dec. 28th
1927	1653	34.00	80	July 10th	29	Dec. 19th	24	Dec. 19th	15	Jan. 20th
1928	1923	32.51	88	July 15th	37	Dec. 14th	25	Mar. 12th, 14th, Dec. 15th	17	Dec. 9th, 15th
1929	1986	28.00	87	Sept. 5th	26	Feb. 13th	16	Feb. 15th	7	Feb. 15th
1930	1730	30.65	83	August 28th	38	Dec. 5th	24	March 20th	16	Nov. 17th
1931	1503	27.76	77	August 3rd, 5th	33	Jan. 8th, March 9th	21	March 10th	16	March 9th
1932	1512	26.77	84	August 18th	31	Feb. 10th	26	Jan. 1st, Feb. 11th, Mar. 13th	18	Jan. 1st
1933	2086	21.07	85	August 7th	33	January 24th	23	January 27th	19	December 9th
1934	1818	29.85	85	July 18th	38	Jan. 21st, Feb. 2nd	25	February 3rd	18	February 3rd

WATER SUPPLY.—There is nothing to add to 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 125, show that the usual high standard of purity is maintained.

PUBLIC CLEANSING.—I am indebted to Mr. S. Allchurch, Transport Superintendent, for the following Report—

“ Continuing the process of mechanisation of the vehicles used for the collection of Domestic and Trade Refuse, six new 10 cubic yard vehicles of the “ Pactum ” type have been added to the fleet, bringing the total to twenty-three.

A further improvement has been the introduction of a container system for the Hospitals and Institutions.

This system is also being used for collection in the Church Path and similar areas where the vehicle formerly had to wait at the end of the passage. The container is now drawn through the passage and the bins emptied direct.

Few horse-drawn refuse vehicles now remain in the service, these being of the low-loading pneumatic tyre type.

The Controlled Tipping method still provides ample and suitable means of disposal, and the areas recovered amount to approximately 25 acres per annum at Wymering, Salterns, Baffins and Langstone.”

MUNICIPAL DISINFECTING FLUID.—9,530 gallons of electrolysed sea-water disinfecting fluid were manufactured at the Municipal Disinfecting Fluid plant during the year. Of this amount 3,170 gallons were issued to the public, 2,110 gallons to the public elementary schools, 2,000 gallons to the Public Swimming Baths, 440 gallons to the Children's Home Swimming Bath, 510 gallons to Langstone Sanatorium, 1,020 gallons to the Municipal Maternity Hospital, 150 gallons to St. Mary's Hospital, 60 gallons to St. Mary's Institution, and 50 gallons to various other institutions.

SANITARY INSPECTION.

Report by C. W. HALL, *Chief Sanitary Inspector.*

(Cert. R.S.I., Hons. Medallist, City & Guilds, Lond., R.P.C., Lon.)

1,794 Informal and 112 Statutory Notices were served for the abatement of nuisances under the Public Health Act.

47 Notices were also served under Section 17 of the Housing Act, 1930, to render houses in all respects fit for habitation.

95 Inspections were made of the sanitary arrangements of places of public entertainment.

The following summary shows the particulars of the work carried out :—

DRAINAGE DEFECTS.

Drains cleared	313
Drains cleared in Workshops	—
Drains repaired or relaid	231
Drains ventilated or ventilating shafts repaired	42
New water-closet pans provided	64
New Pedestal closet pans provided	41
Water-closet fittings repaired	232
Flushing apparatus to water-closets provided	34
“ “ “ “ in Workshops	—
Separate and additional sanitary accommodation provided	—
Water-closets disconnected from Workshops	2
“ Screened from Workshops	—
“ Ventilated	10
“ Cleansed	10
Gratings provided to gully traps	36
Glazed stoneware sinks provided	27
Sink waste-pipes repaired, trapped or renewed	129

OTHER DEFECTS.

Rain-water spouting cleansed or repaired	449
Roofs repaired	656
Weather slating repaired or external walls protected	355
Floors, stairs or doors repaired	666
Sashes, lines, sills, glazing or sash frames repaired	1223
Damp courses provided or repaired	39
Houses or parts of houses cleansed or distempered	527
“ “ “ repaired	757
Sanitary dustbins provided	6
Dust chutes cleansed or repaired	2
Space beneath floors ventilated	81
Yards, stables, sties, etc., repaved	293
Overcrowding in dwelling-houses abated	15
Foundation of house concreted	11
Water supply laid on or water services repaired	45
Workshops cleaned or distempered	14
Workshop floors repaired	5

OTHER DEFECTS.—*continued.*

Workshop roofs repaired	1
Workshops or parts of Workshops repaired	13
Cooking ranges or firegrates repaired or renewed	327
Coppers repaired or renewed	92
Other nuisances in dwelling-houses abated....	233

OFFENSIVE MATTER, &c.

Manure and refuse removed	11
Stagnant water removed	10
Animals removed	4
Bedding cleansed or destroyed	10

SLAUGHTERHOUSES, STABLES, &c.

Yards, stables, sties, etc., cleaned	16
Bakehouses cleansed	16

BYELAWS.

Notices under Nuisance Bye-laws complied with	3
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GENERAL INSPECTION.

DWELLING-HOUSES.—8,851 dwelling-houses were inspected, and 13,525 re-inspections were made whilst work ordered to be carried out was in progress.

COMPLAINTS.—1,814 complaints were made at the office and received attention.

COMMON LODGING HOUSES.—114 visits were made to the six registered Common Lodging Houses.

WORKSHOPS.—610 visits were made to the Workshops, which have been well kept, and 219 visits to out-workers' premises. 7 complaints were received from H.M. Inspector of Factories, all of which received attention.

OLD DRAINS.—2,261 old drains were tested or re-tested.

NEW DRAINS AND FITTINGS.—4,640 new drains were tested or re-tested and 2,644 sanitary fittings were examined.

OCCUPATION CERTIFICATES.—1,362 Occupation Certificates were issued with respect to new buildings.

SANITARY CERTIFICATES.—11 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, four certificates relating to dwelling-houses not being kept in a reasonable state of repair were granted to tenants.

RATS AND MICE (DESTRUCTION) ACT.—500 visits were made to rat infested premises, and 6 notices were served.

INFECTIOUS DISEASES.—1,868 cases of infectious diseases were visited and investigated, and 2,034 rooms were disinfected by the disinfecter.

PROSECUTIONS AND FINES.—During the year proceedings were taken in several cases under various Acts, Orders and Bye-laws, and the details of such proceedings are given below :—

<i>Date</i>	<i>Proceedings taken under</i>	<i>Reason for which Proceedings were taken</i>	<i>Result</i>
3rd Jan.	Article 5, Merchandise Marks (Imported Goods) No. 5 Order, 1928, and Section 8, Merchandise Marks Act	Selling eggs without indication of origin Obliterating indication of origin	Fined £2 for each offence and Costs, £7 7s. in all
12th Jan.	Slaughterhouse Byelaws	For failure to remove offal, cleanse slaughterhouse, and provide bin for refuse	For failure to remove offal, fined £1. Other information dismissed.
21st Feb.	Food and Drugs (Adulterate) Act, 1928 Article 30, Milk and Dairies Order, 1926	Milk, 11% deficient in fat Milk, 9% deficient in fat Not marking vessel containing separated milk	Fined £2 Fined £1 Fined £1
21st Feb.	Articles 17 & 20, Regulation of Movement of Swine Order, 1922	For failure to deliver licence to nearest Police Station after removing swine	Dismissed under Probation of Offenders Act on payment of Costs, 7/6
28th Feb.	Section 117, Public Health Act, 1875	For being in possession of unsound meat	Fined £5, and 10/- Costs
28th Feb.	Articles 9 & 20, Regulation of Movement of Swine Order, 1922	For removing pigs from Cosham Market without a licence	Fined £5
14th Mar.	Food and Drugs (Adulterate) Act, 1928	Milk 9% deficient in fat	Dismissed on payment of Costs
11th July	Section 117, Public Health Acts, 1875	For being in possession of unsound vegetables	Fined £5
9th Aug.	Section 39 (1), Housing Act, 1930	To obtain possession of 3 houses, viz. Nos. 47, 49 and 55, Buckland St.	Order for possession made
21st Nov.	Section 41, Public Health Act, 1875	To recover costs in respect of drainage at 19, 23 and 25, Bramble Rd.	Order for payment made
19th Dec.	Section 39 (1), Housing Act, 1930	To obtain possession of No. 39, Prince George Street	Order for possession made
19th Dec.	Food and Drugs (Adulterate) Act, 1928 (Two cases)	Milk deficient in fat	One case fined 10/- and Costs, other dismissed on payment of Costs

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 :—

TABLE XXXVI.

Premises	Number of		
	Inspections	Written Notices	Occupiers Prosecuted
Factories (including Factory Laundries)	149	8	Nil
Workshops (including Workshop Laundries)	758	26	Nil
Workplaces (other than Outworkers' premises)	133	3	Nil
TOTAL	1040	37	Nil

DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORKPLACES.

Particulars	Number of Defects.			Number of offences in respect of which Prosecutions were instituted
	Found	Remedied (3)	Referred to H.M. Inspector	
(1)	(2)		(4)	(5)
<i>Nuisances under the Public Health Acts :—</i>				
Want of Cleanliness	26	25	—	—
Want of Ventilation	—	—	—	—
Overcrowding	—	—	—	—
Want of Drainage of Floors	1	1	—	—
Other Nuisances	19	17	—	—
Sanitary accommodation { insufficient	—	—	—	—
{ unsuitable or defective	5	5	—	—
{ not separate for sexes	—	—	—	—
<i>Offences under the Factory and Workshops Acts</i>				
Illegal occupation of underground bake-house (s. 101)	—	—	—	—
Other Offences	1	1	—	—
(Excluding offences relating to out-work and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921				
TOTAL	52	49	—	—

INSPECTION AND SUPERVISION OF FOOD

INSPECTION AND SUPERVISION OF FOOD.

MILK SUPPLY.—During the year 1,226 visits were made to the registered Dairies, Cowsheds and Milkshops. There are 1,190 retail purveyors, 16 wholesale dealers in milk, and 5 cowkeepers carrying on business in the City, and these premises have been well kept.

558 Samples were taken, of which 14 were found to be deficient in milk fat. Fines were imposed in three cases, two were dismissed on payment of costs, while one was cautioned.

Under the Milk (Special Designations) Order, 1923, 31 licences for the sale of Certified, Grade A (Tuberculin tested), Grade A and Pasteurized Milk were issued.

During the year 118 samples of milks of special designation were examined by the Public Analyst, details of which are contained in his Annual Report (pages 117-119). In only four samples did the milk fail to pass the "Bacillus Coli" Test.

MEAT AND OTHER FOODS.

MEAT REGULATIONS, 1924.

To ensure strict observance of the Regulations in regard to the handling of meat, it has been necessary in a few instances to recommend the provision of more racks. While persons employed to carry meat at wholesale stores are invariably wearing suitable overalls, several have been warned for failure to wear a clean and washable head covering as laid down in the Regulations.

The following articles of food have been destroyed as unfit for the food of man, *viz.* :

Beef.				Ox Kidney Knob	....	....	1
Carcases of	....	....	67	„ Tongues	....	....	1
Forequarters	....	....	40	„ Tripe	.... lbs.	....	33
Hindquarters	....	....	4	„ Suet	.... lbs.	....	294
Pieces of	.... lbs.	....	7136 $\frac{3}{4}$	Mutton.			
Ox Livers	....	....	168	Carcases of	....	....	2
„ „	.... lbs.	....	40	Pieces of	.... lbs.	....	694
„ Lungs	.... sets	....	187	Sheeps' Lungs	sets	....	5
„ Heads and Tongues	....	....	142	„ Livers	....	....	8
„ Hearts	....	....	118	„ „	.... lbs.	....	120
„ Kidneys	....	....	50	„ Plucks	....	....	10
„ Kidneys	.... lbs.	....	125 $\frac{1}{2}$				

Veal.

Carcases of	....	....	3
Pieces of	....	lbs.	268
Calves' Lungs	sets	....	4
" Livers	....	....	16
" "	....	lbs.	10

Pork.

Carcases of	....	....	62
Pieces of	....	lbs.	611½
Pigs' Lungs	sets	....	75
" Livers	....	....	54
" "	....	lbs.	50
" Heads	....	....	121½
" "	....	lbs.	22
" Hearts	....	....	51
" Kidneys	....	lbs.	18
" Plucks	....	....	39
" Tails	....	....	31

Fish.

Bloaters	....	lbs.	160
Bream	....	lbs.	267
"	....	cases	2
Brill	....	....	4
Cod	....	lbs.	789
"	....	box	1
Dabs	....	lbs.	310
Dogfish	....	lbs.	172
Dories...	....	lbs.	28
Fillets	....	lbs.	5295
"	....	boxes	67
Smoked Fillets	....	lbs.	91
" "	....	boxes	6
Grilse	....	lbs.	60½
Gurnet	....	boxes	2
Haddock	....	lbs.	990
"	....	boxes	61
"	....	barrels	3
Hake	....	lbs.	120¼
Halibut	....	lbs.	102
Herrings	....	lbs.	1218
"	....	boxes	15
Kippers	....	lbs.	364
"	....	boxes	79
Lemon Soles	....	lbs.	136
Mackerel	....	lbs.	1446
"	....	boxes	15
Meagrims	....	lbs.	78
"	....	boxes	14
Monkfish	....	lbs.	84
Mullet...	....	lbs.	18½
Plaice	....	lbs.	725

Pollack	....	lbs.	6
Roes	....	lbs.	116
"	....	boxes	3
Saltfish	....	lbs.	100
Salmon	....	....	1
"	....	lbs.	64
Skate	....	lbs.	243
Smelts	....	lbs.	28
"	....	box	1
Soles	....	lbs.	506
Sprats...	....	lbs.	260
"	....	boxes	6
Trout	....	....	1
Turbot	....	lbs.	148
Whiting	....	lbs.	574
"	....	box	1
Witches	....	lbs.	552
Crabs	....	....	184
"	....	lbs.	54½
"	....	kits	8
"	....	barrels	2
Cockles	....	bushels	6
Escallops	....	bag	1
Lobsters	....	....	6
"	....	lbs.	33¼
"	....	cases	4
Prawns	....	lbs.	658
"	....	tins	74
"	....	bag	1
Shrimps	....	lbs.	276
"	....	boxes	2
"	....	gallons	34
Whelks	....	gallons	30

Miscellaneous.

Bacon	....	lbs.	1342
Cauliflowers	....	bins	5
Chickens	....	....	6
Cooked Meat	....	lbs.	3
Eggs	....	....	256
Ham	....	lbs.	4715¾
Onions	....	barrels	6
Pears	....	boxes	2
Potatoes	....	cwt.	762
Poultry	....	lbs.	20
Quail	....	boxes	2
Rabbits	....	....	289
"	....	lbs.	138
Sweetbreads	....	lbs.	4½
Tinned Goods	....	....	1670
" "	....	lbs.	50½
" "	....	case	1
Turkeys	....	....	14

Proceedings were taken in two cases under Section 117 of the Public Health Act, 1875, for the possession and exposure for sale of unsound meat and vegetables. In both cases fines of £5 were imposed.

SLAUGHTERHOUSES.—1,610 visits were made to the slaughterhouses. There were 60 in actual regular use on December 31st, 12 being annual licences; these have been well kept.

SAUSAGE MANUFACTORIES.—344 visits were made to these premises, which were kept in a satisfactory manner.

BAKEHOUSES.—288 visits were made to the different bakehouses, most of which were found to be kept in a cleanly condition.

FOOD & DRUGS (ADULTERATION) ACT, 1928.—The total number of samples taken for analysis during the year was 1,253, of which 19, or 1.5 per cent. were adulterated. Details are given by the Public Analyst in Tables A and B of his Report (pages 114-115).

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, Frozen or Chilled Salmon or Sea Trout, Butter, Dead Poultry (ducks, fowls, geese or turkeys, whether dressed or undressed), Bacon and Hams. During the year 1,416 visits were paid to various shops to ensure compliance with the provisions of the above Orders. A large number of traders were cautioned. There was one prosecution for selling eggs without indication of origin, and for obliterating indication of origin. A fine of £7 7s. 0d. was imposed.

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—

85 Persons were registered as vendors.

8 Persons were registered as manufacturers.

During the months of June and July, thirteen samples of Ice Cream were taken from carriers on cycles and from shops throughout the City. With two exceptions, bacteriological examination by the Public Analyst showed an unsatisfactory standard of purity (*vide* Report of the Public Analyst, pages 120-121).

As a result "Instructions on the Prevention of Bacterial Contamination of Ice Cream," couched in simple language, were forwarded by the Medical Officer of Health to each manufacturer and vendor of ice cream in the City, and District Inspectors were directed to pay particular attention to all registered premises in their districts.

The following are some of the points stressed in the above "Instructions" :—

ICE CREAM.

Prevention of Bacterial Contamination.

"Ice cream, like milk, forms a most favourable breeding ground for bacteria. Bacteria, also called germs or microbes, are living organisms, many of which cause disease. They are so small that they must be enlarged many hundred times to make them visible to the naked eye. They gain ready access to the ingredients of the "mix" and to the ice cream product through contact with unclean hands, through the medium of spray from the coughing or sneezing of the attendant, through dirty plant and equipment and through dust and splashings from unclean surroundings.

Bacteria contaminated ice cream is not only a source of danger to the public health and the cause of many fatal epidemics, but from the commercial point of view contamination produces off-flavours and odours and impairs the keeping qualities of ice cream.

The following instructions on the prevention of bacterial contamination embody the results of the most recent scientific investigation and research.

I.—Personal Cleanliness.

This cannot be too strongly emphasised; the hands and nails of the attendant should be scrubbed and *kept scrupulously clean*. Bacteria normally live in large numbers on the skin of the hand, and a few of them transferred to the ice cream may multiply into millions in a comparatively short time.

The most dangerous bacteria live in the nose and throat, from which they pass to the ice cream through the medium of the hands (after touching the nose and mouth) or in the tiny droplets of moisture discharged during coughing or sneezing. Several epidemics, resulting in many deaths, have been traced to the contamination of ice cream in this way. *No one suffering from sore throat or with a temperature should engage in the manufacture, storage or retailing of ice cream.*

A clean white apron should be worn by the attendant during the stages of manufacture,

II.—Place of Manufacture and Storage.

The floors, walls and ceiling of the place used for the manufacture or storage of ice cream should be composed of materials easily washed down and cleansed, and should be kept scrupulously clean and free from dust. Where there is dust there is always danger from bacteria.

Flies are covered with bacteria, many of them pathogenic (disease producing) and great care should be taken to protect the ingredients of the "mix" and ice cream product from them.

III.—Plant and Equipment.

(A) DESIGN, MATERIALS, ETC. As regular sterilisation is necessary, it is important to use plant and equipment of sound and simple design, capable of thorough cleansing and sterilisation. Piping, fittings, valves, etc. should permit of easy dismantling so that brushes can be used on every surface touched by the product.

Stainless steel is one of the best materials for ice cream plant, being strong, easily cleaned, and can be made with extremely smooth surfaces.

(B) CLEANING AND STERILISATION.

(i) *Cleaning of Plant, Equipment, etc.* A microscopic film of fat and curd covers metal surfaces which have been in contact with ice cream, and experiments have shown that this film forms a favourite culture medium for bacteria and protects them from the action of sterilising agents. *Sterilisation, therefore, must always be preceded by a thorough cleansing and scrubbing of the surfaces by a suitable detergent, e.g. soap and hot water; sodium phosphate, 5 per cent. solution in hot water; sodium carbonate.*

(ii) *Sterilisation of Plant, Equipment, etc.* By sterilisation is meant the destruction of all bacterial life. This can be effected by three main methods:—

- (a) Physical methods;
- (b) Chemical methods; and
- (c) A combination of (a) and (b).

(a) *Physical Methods, e.g.* by steam or by hot water, which must not be less than 180° F. (82.2°C.) when run away.

(b) *Chemical Methods, e.g.* sodium hypochlorite, supplied in a solution containing 10 to 15 per cent. of available chlorine, and used in strength, 200 parts per million available chlorine has given excellent results. There are several other reliable preparations in the market.

(c) *Combination of Physical and Chemical Methods, e.g.* after thorough preliminary cleansing, sodium hypochlorite is brushed round and is followed by hot water or steam.

IV.—Principal Sources of Contamination during Manufacture, Storage and Retailing.

(1) RAW MATERIALS. The largest sources of contamination are the milk products, particularly milk, cream and butter. Therefore, use only the freshest and purest ingredients.

(2) PASTEURISATION. *It is absolutely necessary that the "mix" be pasteurised if anything like the low bacterial count is to be obtained in the finished product. Pasteurisation should be at not less than 150° F. for 30 minutes, that is, at a slightly higher temperature than that employed for milk, because certain ingredients of the "mix" exert a protective influence against the heat.*

(3) HOMOGENISATION. To prevent a growth of bacteria, homogenisation should be at a temperature as near to that of pasteurisation as possible.

(4) COOLING. Rapid cooling of the "mix" to nearly freezing point should be the next step. Especially between the temperature range of 110° F. and 70° F. should cooling be rapid, for it is within this range that bacterial multiplication is most likely to occur.

(5) AGEING AND MATURING PROCESS. The temperature during this process should be maintained at 35° F., and the process should not be unnecessarily prolonged.

(6) FREEZING. Provided a simple type of freezer is used, capable of easy sterilisation, there should not be any risk of contamination during this process.

(7) RETAILING. The most hygienic method of retailing ice cream is by package provided the storage and equipment are efficient and are maintained in a clean condition. *Packaged goods must not be opened and sold in parts by the retailer.*

In the case of ice cream retailed from bulk, the portioners and containers in which they are stored must be frequently sterilised, steam or boiling water being the most suitable method.

Carriers, especially those used to retail from bulk, should be periodically cleansed and the container itself should be protected from road dust. Needless to say, the hands and nails of the attendant using the portioner must be kept scrupulously clean. Care should be taken that the ice cream is not allowed to melt, as the raising of the temperature will allow bacteria to multiply rapidly.

It will thus be seen that in the manufacture, retailing and storage of ice cream, bacteria may gain access at any stage, and that *contamination can only be prevented by exercising the utmost care and vigilance from the selection of the raw materials until the finished product reaches the consumer.*

It is satisfactory to be able to record that the desired improvement has taken place, and that subsequent samples taken have shown that ice cream sold in Portsmouth is of a high standard of purity.

Report on Meat Inspection and Duties under the Contagious Diseases of Animals Acts.

By R. SCOULAR, *Meat Inspector.*

(M.R.C.V.S., Meat and Foods Cert., Inc. San. Assoc. of Scotland.)

The following is a list of animals brought into the City of Portsmouth during the year 1934 :—

By Boat from the Isle of Wight :

Cattle	.....	.....	.....	674
Sheep	.....	.....	.....	1,840
Swine	.....	.....	.....	6,257
Calves	.....	.....	.....	2,569
Horses	.....	.....	.....	177

At Cosham Market :

Cattle	.....	.....	.....	2
Sheep	.....	.....	.....	65
Calves	.....	.....	.....	419
Swine	.....	.....	.....	1,634
Horses	.....	.....	.....	8

At Fratton Railway Cattle Docks :

Cattle	.....	.....	.....	3,871
Sheep	.....	.....	.....	11,842
Calves	.....	.....	.....	533
Swine	.....	.....	.....	2,777
Horses	.....	.....	.....	13
Mules	.....	.....	.....	4
Goats	.....	.....	.....	2

At Cosham Railway Cattle Docks :

Cattle	.....	.....	.....	1,155
Sheep	.....	.....	.....	92
Calves	.....	.....	.....	38
Horses	.....	.....	.....	79

COSHAM MARKET.—This market has been held weekly and conducted in a satisfactory manner. The livestock exposed for sale has been regularly inspected and found healthy. There has been no outbreak of disease.

SWINE FEVER ORDER, 1922.—379 licences were issued for movement of 1,690 swine, and 2,629 licences were received for movement of 25,320 swine into Portsmouth. There was no outbreak of Swine Fever.

IMPORTATION OF DOGS AND CATS ORDER.—31 notifications were received from the Customs, relating to 30 dogs and one African lioness. The lioness was allowed to land at Whale Island under Licence of the Ministry of Agriculture.

CONVEYANCE OF LIVE POULTRY ORDER.—Boxes, crates, etc. used in the transit of live poultry were kept in a satisfactory condition.

TUBERCULOSIS ORDER, 1925.—I visited one cowshed in the City, and found it kept in a cleanly condition. The livestock appeared healthy and well-cared for.

TRANSIT OF ANIMALS ORDER, 1930.—The vehicles I have inspected have been in a cleanly and satisfactory condition.

FOOT AND MOUTH DISEASE.—There has been no outbreak of this disease in the City.

SLAUGHTERHOUSES.—In a few instances it was necessary to warn occupiers regarding the unsatisfactory condition of their premises.

HOUSING AND SLUM CLEARANCE

HOUSING AND SLUM CLEARANCE.

HOUSING.—During the year 1,362 dwelling-houses were erected in the City. This figure includes 440 working-class houses and flats erected by the City Council, of which 30 were built on the site of York Place, Primrose Alley and Collins Court, and the remaining 410 on the Southampton Road Housing Site.

SLUM CLEARANCE.—The progress made during the period April 1st, 1934 to March 31st, 1935 in connection with the Council's Five Years Housing Programme is shown in the schedule which appears on the following page. A comparison of the proposed Programme and Time-table for the corresponding period as set out in last year's Report, shows that the Programme is up to time.

Programme completed during the Year 1934-35.

DISPLACEMENTS				REHOUSING			
Year ending March 31st	Scheme	Number of Houses dealt with	Number of Persons displaced	Number of Persons rehoused	Number of Dwellings erected	Scheme	Remarks
1934-5	Britain Street—Sun Street	14	67				
1934-5	Britain Street—Little Britain Street	10	49				
1934-5	King Street—North Street—Chatham Row	42	169				
1934-5	Aylward Street—The Dell—Bishop Street	20	104				
1934-5	Kent Street—St. George's Passage	3	17	1222	240	Southampton Road Housing Site	Houses
1934-5	Prince George Street—North Street—King Street	24	180				
1934-5	Daniel Street—Cross Street	6	24				
1934-5	Cross Street—Daniel Street—Bonfire Corner	45	220				
-	Individual Unfit Houses	119	392				
	TOTALS for Year ending March 31st, 1935	283	1222	1222	240		

UNHEALTHY AREAS.—During the year official representations were submitted in respect of the following areas :—

- (i) Cross Street—Daniel Street—Bonfire Corner Area ;
- (ii) Daniel Street—Cross Street Area ; and
- (iii) Prince George Street—North Street—King Street Area ;

and Clearance Orders and Compulsory Purchase Orders were made by the City Council.

Public Inquiries were conducted by Ministry of Health Inspectors in regard to :—

- (i) Britain Street—Sun Street Area ;
 - (ii) Britain Street—Little Britain Street Area ;
 - (iii) Kent Street—St. George's Passage Area ;
 - (iv) King Street—North Street—Chatham Row Area ;
 - (v) Aylward Street—The Dell—Bishop Street Area ;
 - (vi) Cross Street—Daniel Street—Bonfire Corner Area ;
- and (vii) Daniel Street—Cross Street Area.

(Total number of houses affected, 140)

The Minister of Health made Confirmation Orders in respect of all seven Areas, in two of them without alteration, and in the remaining five with slight modification only.

INDIVIDUAL UNFIT HOUSES.—Demolition Orders were made by the City Council in regard to 119 dwellings represented by the Medical Officer of Health as unfit for human habitation and incapable of being rendered so fit at a reasonable cost. Of this number, 81 have been demolished. In addition to the above, undertakings were accepted in 11 instances to the effect that the premises would cease to be used as dwellings until the necessary work had been executed to the satisfaction of the Local Authority.

On the 4th October, an Appeal against a Demolition Order made in respect of No. 55, Stone Street was heard at the County Court under Section 22 of the Housing Act, 1930, and the appeal was dismissed.

FUMIGATION BEFORE REHOUSING.—To prevent the infestation of Council houses and the subsequent expense of disinfection (about £5 per house), a scheme was devised whereby the entire household effects of tenants to be removed

from unhealthy areas to Council houses are fumigated. The furniture is collected in special vans and taken to the Corporation Yard where the contents are subjected to a certain concentration of gas for a period of four hours; thereafter aeration takes place, and when all traces of the gas have dispersed, the furniture is conveyed direct to the new dwelling. Upholstered articles, *e.g.* bedding, mattresses, etc. are retained overnight to ensure that all the cyanide gas is removed. Chemical tests are carried out by way of confirmation. The tenants are given the loan of mattresses and bedding for use until their own bedding is returned the following day. The scheme has worked very satisfactorily.

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)	8898
(b) Number of inspections made for the purpose	26694
(2) (a) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	447
(b) Number of inspections made for the purpose	1341
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	—
(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	47

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	1307
--	------

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	47
(2) Number of dwelling-houses which were rendered fit after service of formal notices:	
(a) By owners	35
(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	....	....	....	1794
(2) Number of dwelling-houses in which defects were remedied after service of formal notices :				
(a) By owners	....	....	....	55
(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	....	....	....	....	119
(2) Numbers of dwelling-houses demolished in pursuance of Demolition Orders	....	....	....	....	56

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	....	....	....	Nil
(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

HEALTH EDUCATION

HEALTH EDUCATION.

"I see more and more that we shall work no deliverance until we teach people a little more of the laws of health."

—CHARLES KINGSLEY.

It is useless to pass laws on health, no matter how wise and far-seeing, unless the people are able to understand and appreciate these laws and have the will to put them into effect. Further progress in the reduction of sickness and death will depend on the part played by the individual citizen in applying the knowledge which science has already furnished. The dissemination of this knowledge in an attractive and easily understood form is the aim of the Health Department, and during the year under review efforts were made to further public education in health.

VERBAL PUBLICITY.—Many lectures to various social and educational organisations were delivered by the medical staff. Moreover, continuous educative work was carried out by the Medical Officers at the clinics and by the Health Visitors in the course of home visitation.

PRINTED PUBLICITY.—Towards the end of the year two of the former Empire Marketing Boards were acquired through the kindness of the Piers, Beach and Publicity Committee, and the following series of posters have been or will be exhibited in prominent places throughout the City.

"Tuberculosis is Preventable"	....	<i>Issued by National Association for Prevention of Tuberculosis.</i>
"Smoke Abatement"	....	<i>Issued by National Smoke Abatement Society.</i>
"Healthy Childhood"	....	<i>Issued by National Council for Maternity and Child Welfare.</i>
"Drink More Milk"	....	<i>Issued by National Milk Publicity Council.</i>
"Venereal Diseases"	....	<i>Issued by British Social Hygiene Council.</i>

" Cleanliness and Health "	Issued by Health and Cleanliness Council.
" Care of the Teeth "	Issued by Dental Board of the United Kingdom.
" No Needless Noise "	Issued by The Anti-Noise League.
" Do you use the Health Services ? "	Issued by Central Council for Health Education.

Advantage was taken of the distribution scheme of the Central Council for Health Education for the display of posters and leaflets pertaining to health subjects in the Child Welfare Centres and Tuberculosis Dispensary.

RAT WEEK PUBLICITY.—During Rat Week (first week in November) a special effort was made to bring home to occupiers their responsibility under the Rats and Mice (Destruction) Act, 1919, and the valuable services of the local Press were taken advantage of in making the subject more widely known. In addition, the following special leaflet was compiled and distributed to occupiers by the district inspectors.

CITY OF PORTSMOUTH.

RATS and their Extermination.

R
A
T
S

Rats and mice are carriers of disease and filth.
Rats cause damage to the Nation's property and food supplies to the extent of about £50,000,000 annually.
Rats should be immediately destroyed.
Responsibility for their destruction is YOURS under the Rats and Mice (Destruction) Act, 1919, which lays a statutory obligation upon OCCUPIERS of all lands or buildings to take such steps as may from time to time be necessary and reasonably applicable to exterminate rats. In default you are liable to a £20 fine.

Appreciate the fact that rats will not remain or increase in places where food is not easily procured; therefore
Avoid throwing food scraps on the yard or street, and
Always burn garbage and waste food in kitchen fire.
Attention should be given to any holes in floors, walls and/or roofs, to ensure that all buildings are rendered as rat-proof as possible.

Tenants of allotments and keepers of poultry, pigs and horses should make a combined effort with their neighbours for the destruction of rats and mice.
Trapping, poisoning by Barium Carbonate, Red Squills, etc. (obtainable from any chemist), and hunting by animals are the most effective methods of extermination.
Take precautions, when using poisons, to avoid injury to other animals or human beings.

Starving out the rats is a sure preventative against infestation.
Store all food in rat-proof receptacles.
Stop and call at the Public Health Department, The Guildhall, Portsmouth, for further information and advice regarding your particular difficulty. Ask for Leaflet No. 244, issued by the Ministry of Agriculture and Fisheries.

PUBLIC HEALTH DEPARTMENT,
GUILDHALL.

It is hoped that next year an increase in the Health Department Staff will enable a Health Week to be organised.

PORT SANITARY REPORT

Port Sanitary Authority.

To the Chairman and Members of the Port Sanitary Authority.

MADAM AND GENTLEMEN,

I have the honour to present to you a report on the work of the Port Sanitary Authority of Portsmouth during the year 1934. The report is presented in the form and sequence desired by the Ministry of Health.

With one exception there has been no case of infectious disease in the Area. The case in question was one of Scarlet Fever, which was removed to the Infectious Diseases Hospital. The patient's quarters were disinfected and the ship allowed to leave the Port on the same day, the Medical Officer of the Port of destination being notified.

During the year the King's Harbour Master made available an inner mooring station in the upper reaches of Portsmouth Harbour for the use of unhealthy ships other than those with Cholera, Plague, Yellow Fever, Typhus Fever and Smallpox and those not within a standing exemption, in accordance with Article 10 of the Port Sanitary Regulations,

Jurisdiction of the Port Sanitary Authority.

The limits of the jurisdiction of the Port Sanitary Authority are as follows :—

“ So much of the Port of Portsmouth as lies to the east of a line drawn due south from the most southerly point of the pier of the L. & S.W. Railway Co. at Stokes Bay to a point $50^{\circ} 45' \text{ N. Lat.}$; to the west of a line drawn due south to the same parallel of latitude from the south-eastern extremity of the common boundary of the Parishes of Havant and Warblington ; and to the north of a line drawn due west along the same parallel of latitude from the point at which the line lastly hereinbefore mentioned meets the said parallel to the point secondly hereinbefore mentioned ;

Together with the waters of the said Port of Portsmouth within such limits, and the place which may from time to time be appointed for the Customs Boarding Station for such part of the said Port, and the place which may from time to time be appointed for the mooring and anchoring of ships for such part of the said Port, under any Regulations for the prevention of the spread of diseases issued under the Authority of the Statutes in that behalf, and the place which may from time to time be appointed, with Our Consent, for the mooring or anchoring of any floating hospital provided by the said Sanitary Authority ; and, for the purpose of any such Regulations as aforesaid, shall also extend to any ship which, in pursuance thereof, or of any directions given thereunder, shall be moored or anchored at the place appointed thereunder as aforesaid, or which shall be on its way thither, together with the docks, quays, wharves, rivers, creeks, streams, channels, roads, bays, and harbours within the aforesaid limits.”

I. Amount of Shipping entering the Port during the Year.

TABLE A.

—	Number	Tonnage	Number inspected		Number reported to be Defective	Number of vessels on which defects were remedied	Number of vessels reported as having, or having had, during the voyage infectious disease on board
			By the Medical Officer of Health	By the Sanitary Inspector			
FOREIGN	Steamers	77	36,091	1	33	18	
	*Motor	57	6,086		19	10	
	Sailing	2	353		2	1	
	Fishing	0	0		0	0	
Total Foreign	136	42,530	1	54	29	29	Nil
COASTWISE	Steamers	541	243,818		217	5	
	*Motor	136	16,433		55	2	
	Sailing	8	680		1	0	
	Fishing	0	0		0	0	
Total Coastwise	685	260,931		273	7	7	Nil
Total Foreign and Coastwise	821	303,461	1	327	36	36	Nil

* Includes mechanically propelled vessels other than steamers.

II. Character of Trade of Port.

TABLE B.

There was no passenger traffic with foreign ports during the year.

Cargo Traffic. The principal imports were timber, cement and slates, chiefly from Frederikstad, Abo, Oslo, Antwerp, Calais, St. Malo, Roscoff, Jersey and Dunkirk.

III. Sources of Water Supply.

The water used in the docks is supplied by the Portsmouth Water Company. Vessels in dock are supplied from hydrants from the same source. There are two water boats in use, which are periodically inspected and maintained in a clean and hygienic condition.

IV. Port Sanitary Regulations, 1933.

1. Arrangements for dealing with Declarations of Health.

Declarations of Health, which must be filled in and signed by the Master of every ship arriving from a foreign port are obtained—

- (a) in respect of vessels from non-infected ports, by the Customs Officer, who forwards them to the Port Medical Officer.
- (b) in respect of vessels from infected ports by the Port Medical Officer. Vessels are visited in dock by the Port Sanitary Inspector as soon as possible after docking.

2. Telegraphic Address.

To avoid delay in notifying inward vessels requiring special attention, the telegraphic address "Portelth," suggested by the Ministry of Health, has been adopted by the Port Sanitary Authority.

3. Mooring Stations.

Under Article 10 of the Port Sanitary Regulations, 1933, the following mooring stations have been established, with the concurrence of the King's Harbour Master and the Commissioners of Customs and Excise, viz.—

(a) OUTER MOORING STATION.

An area about half a mile north-west of Mother of Bank Spit.

(b) INNER MOORING STATION.

The upper reaches of Portsmouth Harbour.

This agreement is subject to the following understandings:—

(1) That the mooring place referred to at (a) above is for ships with cholera, plague, yellow fever, typhus fever or smallpox on board, and that at (b) for all other unhealthy ships not within a standing exemption.

(2) That a standing exemption from detention under Article 14 has been granted by the Medical Officer of the Port Sanitary Authority in respect of any ship which—

- (i) has called at a Port or seaboard included in the weekly return of infected or suspected ports or seaboard, but reports "all well" during the voyage or arrives with no sickness on board, unless a

written notice to the contrary has been delivered to the Customs Officer by or on behalf of the Medical Officer of the Port Sanitary Authority.

- (ii) has on board a case of minor infectious disorder, namely, chickenpox, measles, scarlet fever, diphtheria, enteric fever, erysipelas, malaria, dysentery, pneumonia, tuberculosis, mumps or cerebro-spinal fever.

(3) That when necessary the Port Sanitary Authority will convey the Customs Officers to the mooring place referred to as (a) above, free of expense to the Crown.

4. Arrangements for dealing with cases of Infectious Diseases, etc.

Cases of dangerous infectious disease are removed to the smallpox hospital at Elson.

All other cases of infectious disease are removed to the City Infectious Diseases Hospital by means of the Corporation Motor Ambulance Service.

Contacts of Infectious Diseases Cases.

(a) LIVING IN THE CITY. If not removed to hospital they are kept under observation by the Sanitary Inspector.

(b) PROCEEDING TO AN ADDRESS OUTSIDE THE CITY. The Medical Officer of Health of the place of destination is advised.

A consulting room and waiting room are available at the docks for medical examination.

Personnel and clothing are disinfected at the Infectious Diseases Hospital. Provision can be made for the temporary accommodation of persons who may have to be detained pending further examination.

Bacteriological and pathological examination of rats can be carried out by the Pathologist of the Royal Portsmouth Hospital.

Arrangements are made at the Venereal Diseases Clinic, the Royal Portsmouth Hospital, for the diagnosis and treatment of venereal diseases among sailors.

TABLE C.
Cases of Infectious Diseases landed from Vessels.

Disease	No. of cases during the year		No. of Vessels concerned	Average number of cases for previous 5 years
	Passengers	Crew		
Scarlet Fever	—	1	1	—

TABLE D.

There were no cases of infectious disease occurring upon the voyage but disposed of prior to the vessel's arrival.

V. Measures against Rodents.

All vessels arriving from abroad are examined soon after arrival by the Sanitary Inspector, and in the event of the discovery of sickness among rats aboard, specimen rats are taken for examination for rat plague. There was no occasion to send any rats for plague examination during the year.

When necessary, rat guards are placed on ropes between the ships and the quays. A trained rat-catcher is employed when required.

TABLES E. and F.

No rats were destroyed during the year on vessels or in the docks.

VI. Hygiene of Crews' Spaces.

TABLE J.

CLASSIFICATION OF NUISANCES.

Nationality of Vessel	No. inspected during the Year	Defects of original construction	Structural defects through wear and tear	Dirt, vermin and other conditions prejudicial to health
British	66	Nil	Nil	8 Dirty
Other Nations	261	Nil	Nil	28 Dirty

VII. Food Inspections.

The importations of food stuffs are small in amount, these being chiefly potatoes from the Channel Islands, Scotland and Ireland, and flour, sugar and tinned foods from Liverpool, London, etc.

During the year no adverse reports were made by the Meat Inspector.

I have the honour to be,

Madam and Gentlemen,

Your obedient Servant,

A. B. WILLIAMSON,

Port Medical Officer of Health.

**REPORT OF THE
PUBLIC ANALYST**

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, 1934.

There is an actual increase of 2,141 in the total number of samples and specimens received for examination during the year. This is almost entirely due to an additional 600 samples of Sewage and Sewage Effluents, and to an increase of 1,585 in the number of Swabs received for Bacteriological examination.

The Staff in the meantime has increased by the appointment of one Pupil Assistant, so that the Department has had a very busy year and many extra hours have been worked.

It is satisfactory to record that the percentage of detected adulteration in all samples taken under the Sale of Food and Drugs Act, is lower than last year.

I have to record my appreciation of the help given at all times by my 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 I have to express my satisfaction with the very tactful and efficient 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, 1934, the total number of samples and specimens examined was 6,070, which may be briefly summarised as follows :—

	1934	1933
Food and Drugs Act	1,253	1,246
Graded Milk	123	110
Water and Sewage	656	97
Soaps, Paints, etc.	9	10
Police and Coroner	14	49
Miscellaneous	51	38
Diphtheritic Material	3,964	2,379
Total	6,070	3,929

The number of samples taken in connection with the Sale of Food and Drugs Act is 1,253. This gives an average of one sample for every 204 persons in the City, or a "Sample Rate" of 4.9 samples for 1,000 persons.

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

TABLE A.

Nature of Sample	Number Examined	Number Genuine	Number Inferior	Number Adulterated	Percentage Adulterated
Cream	5	5	—	—	—
Milk	558	522	22	14	2.5
Separated Milk	4	4	—	—	—
Butter	111	108	—	3	2.7
Margarine	49	49	—	—	—
Tea	27	27	—	—	—
Coffee	48	48	—	—	—
Cocoa	36	36	—	—	—
Rice	20	20	—	—	—
Ground Rice	12	12	—	—	—
Pepper	31	31	—	—	—
Mustard	13	13	—	—	—
Pearl Barley	16	16	—	—	—
Ground Ginger	8	8	—	—	—
Lard	7	7	—	—	—
Dried Fruits	49	49	—	—	—
Baking Powder	3	2	1	—	—
Honey	5	5	—	—	—
Lemon Curd	8	8	—	—	—
Sugar	15	15	—	—	—
Cheese	9	9	—	—	—
Sauce	4	4	—	—	—
Sausages	4	4	—	—	—
Ice Cream	15	15	—	—	—
Self-Raising Flour	3	3	—	—	—
Jam	4	4	—	—	—
Mincemeat	5	5	—	—	—
Ground Almonds	7	7	—	—	—
Meat Paste	2	2	—	—	—
Fish Paste	2	2	—	—	—
Corned Beef	1	1	—	—	—
Raisins	11	11	—	—	—
Sultanas	11	11	—	—	—
Candied Peel	7	7	—	—	—
Glacé Cherries	3	3	—	—	—
Crystallised Cherries	3	3	—	—	—
Crystallised Fruits	4	4	—	—	—
Arrowroot	2	2	—	—	—
Dripping	1	1	—	—	—
Vinegar	3	1	—	2	66.6
Fruit Cordials	3	3	—	—	—
Non-Alcoholic Wines	3	3	—	—	—
Gin	6	6	—	—	—
Whiskey	57	57	—	—	—
Brandy	1	1	—	—	—
Olive Oil	4	4	—	—	—
Ammoniated Tincture of Quinine	3	3	—	—	—
" " " Tablets	3	3	—	—	—
Boracic Ointment	3	3	—	—	—
Zinc Ointment	4	4	—	—	—
Health Salts	6	6	—	—	—
Glauber Salts	2	2	—	—	—
Epsom Salts	3	3	—	—	—
Tartaric Acid	2	2	—	—	—
Bicarbonate of Soda	3	3	—	—	—
Camphorated Oil	3	3	—	—	—
Castor Oil	4	4	—	—	—
Cod Liver Oil	2	2	—	—	—
Friar's Balsam	3	3	—	—	—
Cinnamon Powder	3	3	—	—	—
Purified Borax	3	3	—	—	—
Cream of Tartar	3	3	—	—	—
Tincture of Iodine	3	3	—	—	—
TOTAL	1253	1211	23	19	1.5

TABLE B.
ADULTERATED SAMPLES.

No.	Nature of Sample	Nature of Adulteration	Observation
50	Milk	11.0% Deficient in Milk Fat	Fined £2
56	Milk	9.0% Deficient in Milk Fat	Fined £1
96	Milk	9.0% Deficient in Milk Fat	Dismissed on payment of Costs £1 5s.
163	Milk	10.0% Deficient in Milk Fat	Test Sample, Private Person
327	Milk	8.0% Deficient in Milk Fat	Test Sample
387	Milk	13.3% Deficient in Milk Fat	Test Sample
405	Milk	11.0% Deficient in Milk Fat	Cautioned by M.O.H.
516	Milk	5.0% Deficient in Milk Fat	Test Sample
577	Milk	8.0% Deficient in Milk Fat	{ Summons dismissed, Magis- trates satisfied that milk sold was as drawn from the Cow
578	Milk	8.0% Deficient in Milk Fat	
586	Milk	10.0% Deficient in Milk Fat	Test Sample
738	Milk	5.0% Deficient in Milk Fat	Test Sample, Grade A "TT" Milk
832	Butter	7.0% of Water in excess of Legal Limit of 16.0% of Water	Test Sample
887	Butter	5.8% of Water in excess of Legal Limit of 16% of Water	Test Sample
888	Butter	8.1% of Water in excess of Legal Limit of 16% of Water	Case proved, Information dis- missed on payment of Costs, £1 5s.
1089	Milk	11.0% Deficient in Milk Fat	Case proved, Information dis- missed on payment of Costs, 4/-
1090	Milk	24.0% Deficient in Milk Fat	Fined 10/-
1156	Vinegar	10.0% Deficient in Acetic Acid	Case proved, Information dis- missed on payment of Costs, 4/-
1158	Vinegar	35.0% Deficient in Acetic Acid	Fined 10/-

The Fines including Costs amounted to £6 18s. 0d.

FARMERS' SAMPLES.

One hundred and twenty-two samples of Milk were taken during the year, representing the milk supplied to Retailers in the City. All were returned as genuine.

MILK SUPPLIED TO LOCAL INSTITUTIONS.

Eighty-six samples were obtained from St. Mary's Hospital, Kingston Prison, and various Hospitals and Institutions in the City, and of these one was found to be adulterated. Legal proceedings were instituted. The case was proved. The information was dismissed on payment of Costs, £1 5s. 0d.

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	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
do.	1934	1,253	23	1.9
ENGLAND AND WALES	1933	138,171	7,601	5.5

MILK.

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

TABLE D.

	Year	Samples Analysed	Number Adulterated	Percentage Adulterated
PORTSMOUTH	1930	606	32	5.2
do.	1931	615	27	4.3
do.	1932	580	20	3.4
do.	1933	580	28	4.8
do.	1934	522	14	2.5
ENGLAND AND WALES	1933	75,545	5,760	7.7

TABLE E.

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

Month	Milk Fat	Solids-not-Fat	Total Solids	Number of Samples examined
January	4.04	9.09	13.13	32
February	4.05	8.90	12.96	30
March	4.13	8.94	13.07	43
April	3.78	8.95	12.73	32
May	3.68	9.12	12.80	20
June	3.92	9.01	12.93	20
July	3.97	8.89	12.86	18
August	4.05	8.93	12.98	35
September	3.87	8.96	12.83	36
October	4.05	9.12	13.17	52
November	4.10	9.12	13.22	20
December	4.15	9.03	13.18	22
Average 1934	3.98	9.00	12.98	360
„ 1933	3.83	8.90	12.73	422
„ 1932	3.75	8.81	12.56	531

MILKS OF SPECIAL DESIGNATION.

The following results show that a very high standard, both of cleanliness and quality, has been maintained throughout the year. All of this milk is produced within a short radius of Portsmouth, and great care is taken both by the Producers and Retailers in its production and delivery. From my own personal observation and from the results obtained on examination in the Laboratory, I have no hesitation in saying that there is no better Raw Milk produced to-day than is available to the Citizens of Portsmouth, if they will only pay the small additional price.

CERTIFIED MILK.

(Examined 38 ; Passed 38 ; Rejected 0.)

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 38 samples examined contained an average of 1,240 Bacteria per cubic centimetre, and none of the samples failed to comply with the "Bacillus Coli" test.

The average amount of Fat was 4.3 per cent., and of Solids-not-Fat 9.19 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 67 ; Passed 63 ; Rejected 4.)

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 67 samples gave an average of 3,066 Bacteria per cubic centimetre, and on 4 occasions the milk was found to contain "Bacillus Coli" in one-hundredth of a cubic centimetre.

The average amount of Fat was 4.15 per cent., and of Solids-not-Fat 9.03 per cent.

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

GRADE A. MILK.

(Examined 13 ; Passed 13 ; Rejected 0.)

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 13 samples examined during the year, contained an average of 6,747 Bacteria per cubic centimetre, and on no occasion did the Milk fail to pass the "Bacillus Coli" Test. The average amount of Fat was 3.74 per cent., and of Solids-not-Fat 9.16 per cent.

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

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 preservative other than Salt.

111 samples of Butter have been analysed, of which 3 contained excessive Water. These samples, all of which were purchased at the same shop, contained excessive Water to the extent of 7, 5.8 and 7.1 per cent. in excess of the Legal Limit of 16 per cent.

They represented samples of Farmhouse Butter which had been badly worked.

In no case has the addition of Boron or other Preservative been detected.

The following table gives the number of samples of Butter analysed, the number adulterated and the percentage of adulteration during the last five years :—

TABLE F.

	Year	Samples Examined	Number Adulterated	Percentage Adulterated
PORTSMOUTH	1930	109	0	—
do.	1931	112	2	1.7
do.	1932	108	0	—
do.	1933	112	0	—
do.	1934	111	3	2.7
ENGLAND AND WALES	1933	8,903	83	0.9

MARGARINE.

Forty-nine samples of Margarine were examined, all of which were passed as genuine.

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

ICE-CREAM.

Thirteen samples of Ice-Cream were taken during the months of June and July, and are representative of this commodity as sold in Shops or from Carriers on Cycles.

The following table gives the results of the Chemical and Bacteriological examination of these samples :—

Sample No.	Total Solids	Fat	Mineral Matter	Starch	Bacteria on Agar in 1 c.c.	Bacillus Coli Test
1	35.0	14.3	0.6	Absent	800,000	Positive for 1/1000th c.c.
2	38.7	13.4	0.8	Absent	29,100	Positive for 1/10th c.c.
3	34.2	10.8	1.1	Absent	122,400	Positive for 1/1000th c.c.
4	35.6	8.0	1.1	Absent	4,900	Absent from 1 c.c.
5	39.7	12.0	0.8	Absent	310,500	Positive for 1/100th c.c.
6	35.0	14.3	0.6	Absent	42,000	Positive for 1/1000th c.c.
7	35.0	14.3	0.6	Absent	310,000	Positive for 1/1000th c.c.
8	24.3	3.6	0.7	Present	113,000	Positive for 1/1000th c.c.
9	30.3	13.1	0.5	Present	160,000	Positive for 1/1000th c.c.
10	26.9	2.8	0.6	Present	40,000	Positive for 1/1000th c.c.
11	26.7	4.0	0.6	Present	432,000	Positive for 1/1000th c.c.
12	24.0	1.4	0.3	Present	Uncountable	Positive for 1/1000th c.c.
13	28.2	2.9	0.5	Present	156,000	Positive for 1/1000th c.c.

REPORT OF THE EXAMINATION OF
ICE CREAM.

It will be seen from the foregoing table of analyses that there are two varieties of Ice Cream sold in Portsmouth.

The better kind of Ice Cream is made from Milk, or Milk Powder, Sugar, Butter or Cream, with a small percentage of Gelatin. These materials, when blended together form the "Mix," which should then be pasteurised before being frozen. An Ice Cream prepared in this manner usually contains 10-15 per cent. of Fat and has an undoubted food value when prepared under hygienic conditions. Samples Nos. 1—7 are types of this Ice Cream.

The other variety of Ice Cream is prepared by heating Milk with Cornflour which is then suitably flavoured and coloured and then frozen. The final product contains a small percentage of Fat, and sells at a cheaper price. Samples Nos. 8—13 are of this type.

There is no Government Standard for what an Ice Cream may contain, but it will be noticed that the samples analysed are approximately uniform in composition according to their type.

Bacteriological examination of the samples shows that there is much room for improvement in the hygienic quality of the Ice Cream sold in Portsmouth.

In the absence of any legislation on the subject it would appear that only rigorous inspection of the premises where Ice Cream is made, together with the education of persons handling this very perishable product can help matters, as there is no Bacteriological Standard by which the finished product can be judged.

Too much stress must not be laid on the numbers of Organisms present as such high numbers are, unfortunately, not at all unusual in Ice Cream. They could, however, be greatly reduced by preliminary pasteurisation of the "Mix."

The presence of Coliform Bacilli is, however, a much more objectionable feature.

The Government Standard for Grade A. Milk, which is Milk produced under normally hygienic conditions, is 200,000 Organisms growing on Agar at 37° C, and the "Bacillus Coli" Test negative for 1/100th part of a cubic centimetre.

If we judge the above samples by this standard, which in practice has been found to be a very lenient one, it will be seen that samples Nos. 1, 5, 7, 11 and 12 have an excessive number of Bacteria, and that only samples Nos. 2 and 4 would pass the Bacillus Coli test.

Therefore, I think that the position is unsatisfactory regarding Ice Cream, and I do not think that until pasteurisation of the "Mix," together with sterilisation of all utensils used in the preparation of the Ice Cream, the position will be materially improved.

VINEGAR.

Three samples of Vinegar were taken. Two of which were found to be deficient in Acetic Acid to the extent of 10 per cent. and 35 per cent., respectively.

The samples in question were of so-called "Artificial" Vinegar and, admittedly, had been made by diluting a strong and suitably coloured solution of Acetic Acid with Water. It is the practice of some wholesale establishments to sell to small shopkeepers, bottles of the strong solution of Acetic Acid bearing instructions as to how to dilute it to the necessary strength of Table Vinegar. The result is that, either by accident or design, too much water is added and the resulting "Artificial" Vinegar falls below the minimum strength of 4 per cent. of Acetic Acid, which is the recognised minimum strength of Malt Vinegar.

DRUGS.

Fifty-seven samples of Drugs were examined, all of which were in accordance with the various standards laid down in *The British Pharmacopoeia*.

SPIRITS.

Sixty-four samples of Spirits have been examined during the year, with the gratifying result that no case of adulteration has been detected.

This is the more satisfactory because the records show that the percentage of detected adulteration has been higher in the case of Spirits than in any other class of food or beverage. This is very evident from the following table, showing the record of Spirits analysed during the last five years :—

Year	Samples Examined	Samples Adulterated	Percentage Adulterated
1930	69	5	7.2
1931	57	11	19.3
1932	46	3	7.1
1933	64	8	12.5
1934	64	0	—

POLICE WORK.

Eight cases, involving the analysis of twelve articles, were investigated for the City Police during the year.

The majority of these cases were in connection with criminal assaults.

Human Viscera were submitted by the City Coroner in connection with two cases of suspected death by poisoning. In one case Hydrocyanic (Prussic) Acid was found, and in the other case Morphine.

Two further investigations were undertaken for the City Coroner in connection with the deaths of the persons concerned.

MISCELLANEOUS.

Fifty-one samples have been analysed under this heading, submitted by the Medical Officer of Health, the City Engineer and various other Departments of the Corporation.

Under this heading are also included samples submitted by Ratepayers in a private capacity, and for the analysis of which a fee is paid.

The fees from this source have amounted to £30 0s. 6d., and this sum has been paid to the Corporation during the year under review.

BACTERIOLOGICAL EXAMINATIONS:
DIPHTHERIA.

Diphtheritic Material has been received for examination from various sources, as follows :—

	<i>Negative</i>	<i>Positive</i>	<i>Total</i>
Medical Practitioners	1,633	164	1,797
School Clinic	576	93	669
Infectious Diseases			
Hospital	1,155	343	1,498
Totals	3,364	600	3,964

The Laboratory has been open on every Sunday throughout the year.

WATER AND SEWAGE.

The monthly examination of the City Water Supply has shown that the excellent quality of the water has been maintained. This is shown by the results of analysis on page 14.

A weekly examination of the Sewage and Sewage Effluents from the works at Cosham and Farlington has been carried out comprising the analysis of over 600 samples from these sources.

The results show that all of the three systems have worked satisfactorily, and that a high grade Effluent has been produced.

TABLE OF ANALYSES OF PUBLIC WATER SUPPLY DURING 1934
BY THE PUBLIC ANALYST.

(Results expressed in parts per 100,000).

Date 1934	Source	Total Solid Residue	Volatile Solid Residue	Chlorine	Nitrogen as Nitrates	Total Hardness	Free or Saline Ammonia	Albu- minoid or Organic Ammonia	Oxygen absorbed in 4 hours at 37° C.	Remarks
Jan. 24	Co.'s Main, 16, Arundel Street	33.0	2.0	1.7	0.29	22.5	Trace	0.0015	Nil	Bacillus Coli absent from 50 cc. Water.
Feb. 21	do.	32.5	2.5	1.7	0.33	22.4	Trace	0.001	Nil	do.
Mar. 23	do.	30.0	2.5	1.7	0.38	22.6	0.001	0.003	Nil	do.
April 25	do.	31.5	2.0	1.7	0.32	23.0	Nil	0.0015	Nil	do.
May 16	do.	30.0	1.5	1.7	0.33	22.0	0.001	0.002	Nil	do.
June 27	do.	31.0	1.0	1.6	0.28	22.0	Traces	0.003	Nil	do.
July 23	do.	29.0	1.0	1.7	0.28	22.0	Traces	0.002	0.013	do.
Aug. 22	do.	30.0	1.5	1.7	0.32	22.0	Traces	0.002	Nil	do.
Sept. 27	do.	30.0	2.0	1.7	0.28	21.0	Traces	0.002	Nil	do.
Oct. 24	do.	31.0	2.5	1.7	0.28	21.0	Traces	0.002	Nil	do.
Nov. 26	do.	31.5	3.0	1.7	0.24	22.0	Traces	0.002	Nil	do.
Dec. 19	do.	30.0	2.0	1.9	0.23	21.0	Traces	0.003	0.076	do.

