[Report 1935] / Medical Officer of Health, Portsmouth Borough.

Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
https://wellcomecollection.org

"SALUS POPULI SUPREMA LEX"

City of Portsmouth

HEALTH REPORT

For the Year 1935

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

The Report of the Public Analyst

CHARPENTIER LTD.,
PRINTERS AND PUBLISHERS
HIGH ST., PORTSMOUTH

TABLE OF CONTENTS.

Health Committee
1934-35.

The Right Worshipful the Lord Mayor :

COUNCILLOR FRANK J. PRIVETT, 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, O.B.E., J.P.
A. RICE.

Councillors :

F. J. SPICKERNELL.
S. A. WEBB.
A. KILLE.
W. H. ANDREWS.
J. A. GRIFFITHS, J.P.
J. C. JUNIPER.
MAJOR W. H. R. PREWER, O.B.E.
MRS. L. J. RAMSDEN.
F. W. WHITING, J.P.
J. P. D. LACEY, J.P.
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. LAPTHORN.
MRS. TROWBRIDGE.
MRS. R. PARKER, J.P.

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.

Senior Assistant Medical Officer of Health and Tuberculosis Officer :

JOHN W. HUNTER, M.D., Ch.B., B.Hy., D.P.H. (to September).
IAN M. McLACHLAN, M.D., Ch.B., B.Hy., D.P.H. (from October).

Chief Sanitary Inspector :

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

Chief Clerk to Health Services and Meteorological Observer :

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

Meat, Food and Sanitary Inspector :

R. SCOULAR, M.R.C.V.S., Meat & Foods Cert. Inc. San. Assoc. of Scot.

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.

Inspectors of New Buildings and Sanitary Inspectors :

S. W. SMITH, Cert. R. San. I. W. J. SANDFORD, Cert. S.I.B.

Sanitary Inspectors :

F. H. MILLICAN, Cert. R. San. I. L. RICHARDS, Cert. R. San. I.
G. S. GATTRELL, Cert. R. San. I., Hons. City & Guilds Lond., R.P.C. Lond.
W. E. ANSTEE, Cert. S.I.B. (to December).
K. HOLMES, Cert. S.I.B. A. W. ARNOLD, Cert. S.I.B.
R. CORBISHLEY, Cert. S.I.B., Meat & Foods Cert., Hons. City & Guilds (to June).
E. E. ROUGHTON, Cert. S.I.B., Hons. City & Guilds (from June).
F. JOHNSON, Cert. S.I.B., Hons. Medallist, City & Guilds.
F. L. BARKER, Cert. S.I.B. and Meat & Foods Cert. (to June).
J. L. CORT, Cert. S.I.B., Hons. City & Guilds (from December).
H. B. PARRY, Cert. S.I.B., Hons. City & Guilds (from July).

First Assistant Clerk : E. S. CHADWICK.

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

Health Visitors :

*MISS D. POULSON.
*MISS A. KNIGHT.
*MRS. M. SMEATON.
*†MISS M. H. FLINT (from Sept.)
*†MISS L. C. SESSIONS (from June)
*MISS M. E. HANDLEY.
*MISS L. CUDLIPP (to August).
*†MRS. R. D. GRINDROD.
*†MISS E. K. WILTON (from April).
*†MISS W. G. SHERBORNE.

Port Sanitary Inspector : F. BATCHELOR.

Disinfector : B. J. HILLS. **Messenger :** G. PITT.

Public Vaccinators (part-time) :

C. J. MAYHEW, M.R.C.S. (Eng.), L.R.C.P. Lond.) (to May).
P. HAYES, L.R.C.S., L.R.C.P., L.R.F.P. & S. (from May).
A. B. DOYLE, L.R.C.P.I. & L.M., L.R.C.S.I. & L.M.

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. (to September).
IAN M. McLACHLAN, M.D., Ch.B., B.Hy., D.P.H. (from October).

Nurses :

MISS L. LAMB.
*MISS S. M. MITCHELL.
MISS V. F. WARDLAW.
*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 (to April).

Almoner : *MISS N. O. ALLEN.

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

**Certified Midwife.* *†Health Visitors Cert. R.S.I.*

INFECTIOUS DISEASES HOSPITAL.

Medical Superintendent :

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

Senior Resident Medical Officer and Assistant Medical Officer of Health:

A. W. RUSSELL, M.D., Ch.B., D.P.H. (from September).

Junior Resident Medical Officer and Assistant Medical Officer of Health :

J. Q. MOUNTAIN, B.Sc., M.D., Ch.B., D.P.H. (from October).

Matron : MISS F. PETCHEY.

LANGSTONE SANATORIUM.

Medical Superintendent :

JOHN W. HUNTER, M.D., Ch.B., B.Hy., D.P.H. (to September).
IAN M. McLACHLAN, M.D., Ch.B., B.Hy., D.P.H. (from October).

Matron : MISS J. S. BROWN.

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

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

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) (to Sept.)

Steward : S. H. OVER (to October). **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.
Orthopaedic Surgeon : A. G. ORD, F.R.C.S., L.R.C.P. (from April).
Skin Specialist : A. MURRAY STUART, F.R.C.S., L.R.C.P. (from April).

VENEREAL DISEASES CLINIC.

Medical Officer (part-time) :

A. MURRAY STUART, F.R.C.S., L.R.C.P.

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) (to July).

A. W. RUSSELL, M.D., Ch.B., D.P.H. (from September).

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

* *Certified Midwife.*

Clerical Department :

R. W. HARVEY.
L. C. LEY.

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. GRIMBLY, 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.
G. A. BETTS, M.R.C.S., L.R.C.P. (Lond.)
J. P. McGUINNESS, L.R.C.P. & S. (Edin.), L.R.F.P.S.

Medical Officer's Report for 1935.

To the Chairman and Members of the Health Committee.

Madam and Gentlemen,

I have the honour to present my second Annual Report, which is the Sixty-third Annual Report on the health of the City.

HEALTH STATISTICS.—*The health statistics of the year* 1935 *were on the whole very favourable. The general death rate* (11.82) *was the lowest for the past five years, and considerably lower than the average of the previous ten years* (12.36). *Several new low records were made*—(a) *the number of deaths of children under five,* (b) *the number of deaths from non-pulmonary tuberculosis, and* (c) *the number of children attending the Venereal Diseases Centre for congenital syphilis, were each the lowest in the statistical annals of the City. The death rate from the seven principal zymotic diseases* (0.28) *was the second lowest on record.*

There were fewer deaths of children under one year, i.e. 171 *deaths as compared with* 175 *last year, which was the lowest on record, but owing to the fall in the number of births to the unprecedented low figure of* 3,707, *the infantile mortality rate, i.e. the number of deaths of infants per* 1,000 *live births occurring in the same year, was* 46 *as compared with* 44 *last year. The maternal mortality rate* (3.91) *showed a considerable reduction on that for the previous year* (4.66).

CONTROL OF INFECTIOUS DISEASES.—*Apart from a small outbreak of diphtheria in the infants' department of an elementary school, no epidemics of any note occurred. The year witnessed the launching of the diphtheria immunisation campaign mentioned in my last Report. Up to the end of the year the response had been disappointingly small and not commensurate with the effort expended.*

INSPECTION AND SUPERVISION OF FOOD.—*The percentage of samples of Food and Drugs found to be adulterated* (3 *per cent.*) *was more than that for the previous year* (1.9 *per cent.*), *but was still much lower than the figure for the country as a whole* (5.1). *Owing to the special measures taken last year there was considerable improvement in the quality of ice cream sold in the City.*

HOUSING.—*The Housing Act of* 1930 *gave Local Authorities an unprecedented opportunity, which is not likely to recur, of abolishing unwholesome housing conditions, and striking at the very roots of communal disease. The Government contribution has been most generous, amounting to* £2 5s. 0d. *for* 40 *years, for each person displaced from the Housing Areas, so that the charge upon the rates in respect of the Five Years Programme submitted by the Health Committee and adopted by the Council, was estimated by the City Treasurer to be only a* ¾d. *rate. It is pleasing to be able to report that the progress made by the Health Committee, who, on behalf of the Council, execute and perform the powers and frequently unpopular duties of the Act, has been very good and that the Programme at the end of the year was up to time.*

At the Public Inquiries presided over by the Ministry of Health's Inspector, every opportunity is given to objectors to state their case, and each house is visited by the Inspector after the Inquiry. So meticulous has been the care taken in scheduling each area, and so closely has the standard of unfitness laid down in the Act been interpreted, that out of 18 *areas with* 475 *houses dealt with to date, the classification of only* 4 *has been modified by the Minister, that is* 0.8 *per cent. of* 475 *houses.*

In August, 1935, *the Housing Act,* 1935, *came into force, by which extended powers are given to Local Authorities as regards compensation payable to owners in respect of their properties, and to business people who can prove that they have suffered on account of the provisions of the Act. The other sections of the Act contain provisions for the abatement and prevention of overcrowding. In this connection the first step was to ascertain the extent of overcrowding, for which a temporary staff of* 16 *enumerators and surveyors was appointed towards the end of the year.*

CO-ORDINATION OF HEALTH SERVICES.—*The Local Government Act of* 1929 *gave to Local Authorities a direct and ample opportunity of closely and effectively co-ordinating all the varied medical services in their area. It enabled them to bring together the disconnected collateral medical services and weave them into a single unified service for the benefit of the whole community with resultant elimination of wasteful overlapping and duplication of effort. The Medical Officer of Health of the Local Authority was "made the chief medical adviser of the Authority and its various Committees in all matters relating to the co-ordination and general medical administration of public health services provided by the Local Authority under whatever Committee they may be administered." Throughout the year under review my energies were directed towards continuing the work of co-ordination of the Medical Services so ably begun by my predecessor, and the following is a resumé of the progress made as a result of collaboration between the Special Committee as to Constitution of Committees and Organisation of Corporation Departments, the Education Committee, Public Assistance Committee and the Health Committee.*

1. HOSPITAL SERVICES.—*By arranging for all cases, with certain exceptions, to be admitted to Saint Mary's Hospital through the Health Department instead of through the Relieving Officers, the Hospital has been enabled to play a greater part in the hospital and health services of the City. By placing the municipal hospital services under one Sub-Committee of the Health Committee instead of two, and by simplifying the administrative machinery, it has been possible to co-ordinate more closely the various branches of the health services.*

For example, it is now possible to co-ordinate completely the facilities for the training of nurses in both Saint Mary's Hospital and the Infectious Diseases Hospital. Some of the lectures and practical demonstrations laid down in the two courses of instruction, i.e. the Certificate of General Nursing and the Certificate of Fever Nursing, can be shared and, in addition, it is practicable for nurses to combine the training for both Certificates if they so desire.

The arrangements mentioned in my Report of last year whereby representatives of the Voluntary Hospitals and Saint Mary's Hospital meet every quarter to discuss any proposed new developments in connection with any of the Hospitals, have worked amicably and well during the year. There is now effective and cordial co-operation between the Municipal and the Voluntary Hospitals.

One of the main objects of the Local Government Act, 1929, *was to concentrate medical services in the larger centres of population where better facilities are available for diagnosis and specialised treatment. During the year under review the development of Saint Mary's Hospital and the Infectious Diseases Hospital led to applications being received from the Hampshire County Council and from neighbouring local authorities for the admission of certain cases, e.g. difficult obstetric cases, cases of puerperal sepsis and cases of infectious disease requiring operations, etc. Towards the end of the year a further request was received from the Havant and Waterloo Urban District Council for the reception of all the Council's cases of infectious disease, the intention being to close down the existing*

Infectious Diseases Hospital at Havant. The Council, on the recommendation of the Health Committee, have granted all the above applications subject to certain provisos.

2. SCHOOL MEDICAL SERVICE.—*The need for complete unification of the School Medical Service with the Health Services of the City has been advocated by the Ministry of Health and Board of Education on more than one occasion. After long deliberations by the Committees concerned in which various difficulties were discussed, the Council finally approved a Scheme, which, while it will not give that unification of Medical Services now enjoyed by all but a very small minority of County Boroughs, is undoubtedly a step in the right direction. In the Scheme, among other provisions, the School Medical Service is placed under the general administration of the Medical Officer of Health, who is recognised by the Education Committee as Medical Officer of Health and Chief Administrative Medical Officer for all the Medical Services of the Council. The School Medical Officer is designated "School Medical Officer and Senior Assistant Medical Officer of Health," and his assistants as "Assistant Medical Officers of Health and Assistant School Medical Officers." In view of the seniority in the service of the present School Medical Officer, he is recognised as the senior of the Senior Assistant Medical Officers of Health, and he will deputise for the Medical Officer of Health in certain branches of the Department during the latter's absence.*

The new arrangements come into force on January 1st, 1936, and every effort will be made to make the Scheme a success, with resultant benefit to the child life in the City.

3. INFECTIOUS DISEASES.—*During the year an opportunity was taken to reorganise the work of the Infectious Diseases Hospital, the Tuberculosis Dispensary, and the section in the Health Department for the investigation of Infectious Diseases, whereby all matters relating to Infectious Diseases including Tuberculosis, come directly under the control of a Senior Assistant Medical Officer of Health, who is responsible to the Medical Officer of Health. The advantages of this scheme are obvious. The former is now able to supervise every phase pertaining to a case of infectious disease, i.e. his home conditions, the need for the examination of contacts, progress of the patient in hospital and the follow-up after discharge.*

4. MATERNITY AND CHILD WELFARE.—*During the year the small, uneconomical maternity unit at the Maternity Hospital, Fratton, was closed down, and the services were transferred to the new maternity section at Saint Mary's Hospital, with consequent economy and greater efficiency. Towards the end of the year the Council approved the appointment of a consulting obstetrician to visit the wards of the Hospital and to hold a consulting ante-natal clinic.*

5. GENERAL.—*As a member of the Executive Committee of the Portsmouth Division of the British Medical Association, I have been able to consult periodically with the elected representatives of the medical profession in the City in regard to new developments.*

Close liaison has also been maintained with all the voluntary associations in the City which are connected directly or indirectly with health services.

Finally, friendly co-operation exists between the Naval Health Officer, Portsmouth Command, and the Assistant Director of Medical Services, Wessex Area, especially as regards infectious diseases.

MEDICAL INSPECTION AT THE MUNICIPAL AIRPORT.—*Since my appointment, on the recommendation of the Docks and Airports Committee, as Medical Officer of the Municipal Airport, nothing of outstanding*

moment has taken place. A medical inspection room has been fitted out at the Airport, and all the necessary stores required by the Regulations of the International Convention for Aerial Navigation have been obtained. An arrangement has been made with the Customs Officer at the Airport whereby I am notified of any passengers arriving from foreign countries who are suspected of having been in contact with infectious disease.

REORGANISATION.—*It will be obvious that with the increase in the responsibilities of the Health Department as laid down by numerous Acts of Parliament, circulars and memoranda of the Ministry of Health during the past few years, reorganisation was necessary. As an indication of the enormous increase in the work I may state that during the past few years the letters and reports sent out by the Department have nearly doubled. In his final report in* 1934, *my predecessor, Dr. A. Mearns Fraser stated, "that the personnel of the department was insufficient to carry out all the demands made upon it, and that if the department were to carry out effectively all the duties which are generally accepted as the responsibility of a modern Health Department, it would be necessary to augment it by two additional full time Assistant Medical Officers of Health." During the year under review in response to representation made by the special Committee for Constitution of Committees and Organisation of Corporation Departments, and by the Health Committee, the Council agreed to a scheme to modernize the office administration, augment the clerical staff and provide more adequate office accommodation at the Guildhall. An opportunity was taken to increase the medical staff with little extra cost* (see page 55). *Despite these changes, which have done much to relieve the congestion of work, the staff complement, medical and clerical, is still proportionately below that of modern Health Departments in County Boroughs of similar size.*

COST OF THE HEALTH SERVICES.—*The development of the Health Services on the lines indicated above has been achieved so far with the minimum of expenditure, and it is pleasing to be able to record that the rate expended for Health Services in the City is the lowest of the* 20 *largest towns in the country. It will be appreciated that wise expenditure on health, while the results may not be immediately manifest, will ultimately bring in a rich dividend expressed in lower mortality and morbidity rates and increased health and happiness of the citizens.*

Further particulars regarding the schemes and changes outlined ab[illegible] are given in the body of the Report, which has been divided into sections for p[illegible] boses of clarity and easier reference. At the beginning of each section I have summ[illegible]rised the important changes and indicated their bearing on the work of the Depar[illegible]ment as a whole. Thereafter follows a brief description of the routine work of the sub-department by the Senior Medical Officer in charge.

The work of a particularly 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 help given most willingly at all times by every member of my staff. I desire also to express my appreciation of the courtesy extended to me by the chief officers of the Corporation and the various Committees with which I have been associated during the year.

I have the honour to be, Madam and Gentlemen,

Your obedient Servant,

A. B. WILLIAMSON,
Medical Officer of Health.

SUMMARY FOR 1935

Civil Population (estimated to middle of 1935) 250,200

1.—GENERAL STATISTICS.

Area in Acres (land and inland water)	9,217
Population (Census, 1931)	Total 249,283
Number of Inhabitated Houses	62,150
Rateable Value, 1935-36	£1,815,128
Sum represented by a Penny Rate	£7,279
Average number of persons in each house (Census, 1931)	4.5
Average number of persons per acre (Census, 1931)	31.3
Total Rainfall	36.29 inches 922.1 millimetres

2.—EXTRACTS FROM VITAL STATISTICS.

	Total	Male	Female	
LIVE BIRTHS :				
Legitimate	3,484	1,791	1,693	Rate per 1,000 population 14.81
Illegitimate	223	121	102	
Total	3,707	1,912	1,795	
STILLBIRTHS :				
Legitimate	115	58	57	Rate per 1,000 total births 32.67
Illegitimate	10	5	5	
Total	125	63	62	
DEATHS	2,959	1,489	1,470	Rate per 1,000 population 11.82

Deaths from diseases and accidents of pregnancy and childbirth :

From Puerperal Sepsis .... 11 From other Puerperal causes 4

Mortality rate per 1,000 total births :

From Puerperal Sepsis .... 2.87 From other Puerperal causes 1.04

Total maternal mortality rate 3.91

Death Rate of Infants under one year of age :

All Infants per 1,000 live births	46
Legitimate Infants per 1,000 legitimate live births	43
Illegitimate Infants per 1,000 illegitimate live births	89

NATURAL AND SOCIAL CONDITIONS

POPULATION.—The estimated population of the City at mid-1935 according to the Registrar-General, was 250,200, or 1,300 more than the previous year. The increase is doubtless partly due to the excess of births over deaths (748) and to immigration consequent upon the rapidly developing aircraft industry in the City.

MARRIAGES.—The number of marriages during 1935 was 2,298, which is 81 more than last year. Reference to Table II shows the general upward trend in the number of marriages.

BIRTHS.—Despite the increase in the number of marriages for the past two years, there were 242 less births during 1935 than during the previous year. The total number of live births was 3,707, equivalent to a birth rate of 14.81, as compared with 3,949 births and a birth rate of 15.86 for the previous year. This is the lowest birth rate ever recorded in the City. It is, however, still slightly higher than that for England and Wales (14.7). The falling birth rate has been an outstanding feature of the vital statistics of this country for more than half a century, and may be ascribed to many factors, amongst which are later marriages, economic stress, over civilisation, intellectual advancement, etc.

DEATHS.—The general death rate was 11.7, which is considerably lower than last year (12.36) and is the lowest during the past five years. The general death rate for England and Wales was exactly similar. From Table VI it will be seen that Portsmouth takes fourth place among the twenty large towns.

Only 171 deaths occurred amongst infants under one year of age, giving an infantile mortality rate of 46 per 1,000 births as compared with 57 for England and Wales.

There was a welcome decrease in the number of deaths from cancer (see page 78).

COMPARISON WITH PREVIOUS YEAR.

	1934 Population Total—248,900		1935 Population Total—250,200	
	Number	Rate per 1000 living	Number	Rate per 1000 living
Births	3,948	15.86	3,707	14.81
Deaths	3,077	12.36	2,959	11.82
,, Principal Zymotic Diseases....	87	0.34	71	0.28
,, Small-pox	—	—	—	—
,, Measles	28	0.11	—	—
,, Scarlet Fever....	10	0.04	6	0.02
,, Diphtheria	29	0.11	39	0.15
,, Whooping Cough	7	0.02	9	0.03
,, Fever (Typhoid & Para-typhoid)	1	0.00	1	0.00
,, Diarrhoea (under 2 years)	12	0.04	16	0.05
,, Pulmonary Tuberculosis	197	0.79	192	0.76
,, Cancer	420	1.68	410	1.63
,, Influenza	26	0.10	45	0.17
	Number	Rate per 1000 Births	Number	Rate per 1000 Births
,, Under 1 year of age	175	44	171	46

Average Death-rate for previous Ten years (1925-1934) 12.29

TABLE I. Vital Statistics of Whole District during 1935 and previous years.

Year	Population estimated to Middle of each Year	Births			Total Deaths Registered in the District.		Transferable Deaths		Nett Deaths belonging to the District			
		Uncorrected Number	Nett.				of Non-residents registered in the District	of Residents not registered in the District	Under 1 Year age		At all Ages	
			Number	Rate	Number	Rate			Number	Rate per 1,000 Nett Births	Number	Rate
1910	227,821	5801	....	25.41	2995	13.14	....	....	603	104	....	....
1911	232,221	5787	5775	24.99	3101	13.40	106	72	734	127	3067	13.20
1912	236,732	5605	5570	23.60	3141	13.31	97	81	466	85	3125	13.24
1913	241,256	5989	5966	24.34	3096	12.63	98	82	545	91	3080	12.57
1914	245,827	5714	5678	23.17	3176	12.96	125	98	486	85	3149	12.81
1915	202,441	4975	4949	24.44	3405	16.81	176	55	433	87	3284	16.24
1916	197,848	5186	5184	24.09	2987	15.09	112	62	418	80	2937	14.84
1917	198,527	4613	4584	20.71	3081	15.51	197	58	326	71	2902	14.81
1918	203,396	4778	4774	20.90	3730	18.33	190	107	361	75	3647	17.93
1919	224,846	5300	5139	21.94	3006	13.37	118	93	383	74	2981	13.26
1920	233,805	6520	6520	25.85	2705	11.10	120	55	393	60	2640	11.29
1921	233,929	5662	5651	22.90	2704	11.55	142	50	355	63	2612	11.20
1922	236,630	5465	5529	22.10	2920	12.34	108	62	349	63	2874	12.14
1923	230,718	5338	5314	21.06	2540	11.00	81	65	276	52	2524	10.93
1924	232,000	5096	5022	20.10	3003	12.94	94	68	348	66	2977	12.58
1925	232,900	4888	4770	19.07	2912	12.50	110	64	297	61	2866	12.30
1926	231,500	4636	4496	18.20	2746	11.86	108	65	257	54	2703	11.67
1927	232,100	4352	4230	17.08	3006	12.95	121	60	234	55	2845	12.68
1928	240,700	4579	4445	17.21	2864	11.89	134	57	245	55	2730	11.34
1929	242,000	4519	4394	16.80	3429	14.16	153	69	293	66	3345	13.82
1930	242,000	4409	4261	16.30	2927	12.09	142	71	250	59	2856	11.80
1931	228,900	4454	4336	17.49	3035	13.25	153	68	239	55	2950	12.88
1932	253,100	4192	4092	16.21	3150	12.48	145	96	246	60	3101	12.28
1933	251,200	4001	3864	15.38	3171	12.62	133	87	203	52	3125	12.44
1934	248,900	4041	3948	15.86	3140	12.61	150	87	175	44	3077	12.36
1935	250,200	3861	3707	14.81	3003	12.00	114	70	171	46	2959	11.82

TABLE II.

Table showing the Population, Marriages, Inhabited Houses, Births and Deaths, for the year 1935, 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
1935	250,200	62,150	2,298	3,707	2,959	171	220
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
Average 10 years 1925-34	240,330	56,909	2,083	4,370	2,950	231	372

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	11.82	17.55	45	0.64
2. Portsea	480	21,339	*44.45	14.02	11.17	64	0.84
3. Nelson	235	15,739	66.97	16.83	10.16	38	0.95
4. North End	743	15,523	20.89	15.61	9.60	37	0.52
5. Buckland	189	14,493	76.68	16.70	12.77	32	1.04
6. Kingston	737	16,791	22.78	15.77	8.33	26	0.77
7. Highland	447	14,472	32.37	12.37	12.92	73	1.04
8. St. Simon	341	16,560	48.56	10.63	12.34	40	0.60
9. Havelock	196	15,772	80.47	11.98	12.89	53	0.82
10. St. Paul	183	15,717	85.88	14.93	12.60	38	0.83
11. Guildhall	172	16,500	95.92	13.86	11.93	83	0.85
12. Fratton	184	13,080	71.08	13.30	11.77	23	0.92
13. St. Mary	138	16,165	117.13	13.89	10.33	54	0.50
14. Charles Dickens	142	15,138	106.00	15.77	13.46	71	0.92
15. Cosham	3,167	11,233	3.54	26.26	13.17	27	1.34
16. Meredith	1,288	16,815	13.05	14.64	18.15	45	1.01
Whole City	9,217	252,425	27.39	14.81	11.82	46	0.84

* *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 31st December, 1935.

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.	934	39	828	41	—	—	2	5	15	14	6	14.87	13.18	—	0.03	0.08	0.24	0.22	6.6	43.80
2nd Qtr.	991	30	759	48	—	—	2	3	8	25	3	15.92	12.19	—	0.03	0.04	0.12	0.40	3.0	48.43
3rd Qtr.	1022	30	594	44	—	—	2	—	3	1	8	16.42	9.54	—	0.03	—	0.04	0.00	7.8	43.05
4th Qtr.	894	34	753	39	1	—	—	—	13	2	4	14.36	12.10	—	—	—	0.20	0.03	4.4	44.74
Total	3841	133	2934	172	1	—	6	8	39	42	21	15.43	11.79	—	0.02	0.03	0.15	0.17	5.4	44.78

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 1935, 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
1935	14.81	11.82	0.28	5.7	46	7.4
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
Average of 10 yrs. 1925–34	16.95	12.29	0.44	8.1	55	12.5

TABLE VI.

Showing the Population, Birth-rates, Death-rates, Zymotic Death-rates, Maternal Mortality, etc., in 20 Large Towns for the year 1935.

Name of Town	Population as estimated by the Registrar General Mid-1935	Comparability Factor	Per 1,000 Population		Death Rate as adjusted by Factor	Rates per 1,000 Population from :—										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)	Influenza	Tuberculosis			From Sepsis	From Other Causes	Total
														Pulmonary	Other Forms				
1. CROYDON	242,100	0.96	13.60	10.10	9.69	—	—	—	0.00	0.04	—	0.08	0.09	0.61	0.09	45	2.06	1.18	3.24
2. BRISTOL	412,625	0.98	13.85	10.79	10.57	0.00	0.03	0.02	0.00	0.03	0.00	0.04	0.08	0.71	0.09	43	0.84	1.67	2.51
3. LONDON	4,185,200	1.02	15.32	11.43	11.65	—	0.00	0.01	0.04	0.06	0.00	0.01	0.11	0.68	0.09	58	1.13	1.39	2.52
4. **PORTSMOUTH**	250,200	0.99	14.81	11.82	11.70	—	—	0.02	0.03	0.15	0.00	0.05	0.17	0.76	0.08	46	2.87	1.04	3.91
5. LEICESTER	261,000	1.02	13.94	11.61	11.84	—	0.04	0.00	0.06	0.03	0.00	0.09	0.10	0.91	0.07	59	2.24	3.92	6.16
6. BIRMINGHAM	1,033,000	1.10	15.40	10.90	11.99	—	0.05	0.01	0.06	0.08	0.00	0.01	0.15	0.71	0.08	64	1.40	2.00	3.40
7. PLYMOUTH	203,600	0.98	15.00	12.25	12.00	—	0.02	0.00	0.01	0.11	—	0.08	0.04	0.55	0.14	59	2.85	2.15	5.00
8. WEST HAM	270,700	1.15	15.50	10.70	12.30	—	0.02	0.02	0.04	0.10	0.00	0.06	0.06	0.82	0.09	45	1.39	1.84	3.23
9. NOTTINGHAM	280,200	1.03	15.69	12.51	12.88	—	0.07	0.02	0.02	0.05	0.00	0.18	0.14	0.84	0.14	80	0.88	3.50	4.38
10. CARDIFF	221,400	1.06	15.20	12.30	13.03	—	0.12	0.01	0.05	0.08	0.00	0.09	0.14	0.97	0.22	59	2.81	1.69	4.50
11. HULL	322,200	1.10	18.40	12.20	13.42	—	0.09	0.02	0.08	0.10	0.00	0.24	0.06	0.76	0.19	72	0.97	1.62	2.59
12. SHEFFIELD	520,500	1.13	14.747	11.89	13.44	—	0.02	0.01	0.02	0.14	—	0.05	0.16	0.69	0.09	52	2.08	2.48	4.56
13. LEEDS	487,200	1.07	14.80	13.20	14.12	—	0.01	0.01	0.10	0.12	—	0.01	0.21	0.73	0.16	64	1.06	2.12	3.18
14. NEWCASTLE	292,700	1.13	16.00	12.60	14.23	—	0.06	0.01	0.08	0.12	—	0.22	0.18	0.82	0.22	86	2.67	2.46	5.13
15. BRADFORD	292,200	1.00	13.55	14.30	14.30	0.00	0.03	0.03	0.04	0.20	—	0.08	0.19	0.63	0.07	64	1.69	0.97	2.66
16. SUNDERLAND	185,100	1.12	19.90	13.00	14.56	0.00	0.23	0.03	0.27	0.17	0.03	0.28	0.33	0.83	0.17	92	1.63	3.26	4.88
17. MANCHESTER	776,028	1.14	14.53	12.91	14.71	—	0.13	0.02	0.06	0.07	0.00	0.11	0.28	0.92	0.14	71	2.03	1.61	3.64
18. STOKE-ON-TRENT	274,100	1.22	16.60	12.30	15.00	0.00	0.00	0.00	0.25	0.05	0.00	0.17	0.28	0.89	0.16	83	1.66	2.70	4.36
19. LIVERPOOL	867,110	1.15	20.00	13.20	15.18	—	0.19	0.00	0.07	0.18	0.00	0.23	0.18	0.94	0.14	83	1.62	1.64	3.26
20. SALFORD	210,000	1.18	15.97	13.09	15.44	—	0.02	—	0.07	0.16	0.00	0.10	0.20	0.90	0.10	78	0.9	3.9	4.8

TABLE VII.

Deaths registered at several groups of ages and in the several wards of the City from different diseases during the year 1935.

AGES.

CAUSE OF DEATH	0 to 1		1 to 2		2 to 5		5 to 15		15 to 25		25 to 35		35 to 45		45 to 55		55 to 65		65 to 75		75 and over	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Typhoid and Para-Typhoid	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—
Measles	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	—	—	—	2	2	1	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough	2	3	2	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria	—	—	—	—	5	1	20	13	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Influenza	—	1	1	—	—	—	—	1	1	—	1	—	2	1	3	2	3	5	2	6	6	10
Erysipelas	1	—	—	—	—	—	—	—	1	—	1	—	1	—	1	—	1	—	—	—	—	—
Acute Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Encephalitis Lethargica	—	—	—	—	—	—	—	1	3	1	—	—	—	1	1	—	—	—	1	—	—	—
Cerebro-spinal Fever	—	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pulmonary Tuberculosis	—	1	1	1	—	—	—	—	17	18	22	25	28	13	26	7	12	9	7	4	—	1
Other Tuberculous Disease	7	—	—	1	3	—	2	1	1	—	2	—	—	1	—	—	—	1	—	—	—	—
Syphilis	—	1	—	—	—	—	—	—	—	—	—	—	—	1	3	—	5	1	4	—	1	—
Other Infectious Disease	—	—	—	—	—	—	—	—	1	1	1	—	—	1	3	—	2	—	2	—	—	1
General Paralysis of Insane and Tabes Dorsalis	—	—	—	—	—	—	—	—	—	—	—	—	2	—	4	—	2	—	3	—	1	—
Cancer, all forms	—	—	—	—	—	—	—	1	2	1	2	5	7	12	21	38	60	63	61	67	36	34
Diabetes	—	—	—	—	—	—	—	—	2	—	—	—	—	—	1	4	5	5	6	8	5	6
Cerebral Haemorrhage	—	—	—	—	—	—	—	—	—	—	—	—	2	2	3	7	10	21	20	25	15	40
Heart Disease	—	—	—	—	—	—	—	3	4	2	2	4	7	12	29	30	55	54	111	132	108	124
Aneurysm	—	—	—	—	—	—	—	—	2	—	—	—	—	—	1	1	5	2	1	2	1	—
Other Circulatory Diseases	—	—	—	—	—	—	—	—	—	—	1	—	2	1	3	3	9	10	12	25	24	13
Bronchitis	1	2	1	—	—	1	—	—	—	1	—	—	1	1	4	2	9	3	6	13	13	19
Pneumonia (all forms)	17	10	3	7	3	1	5	2	3	8	3	3	9	9	8	10	12	6	13	9	11	6
Other Respiratory Diseases	—	—	—	—	—	—	—	—	—	—	—	—	4	1	5	2	4	2	1	4	1	5
Peptic Ulcer	—	—	—	—	—	—	—	—	—	—	2	—	—	1	5	3	12	2	3	3	1	1
Diarrhoea and Enteritis	9	7	—	—	1	—	—	—	—	—	—	1	—	2	—	2	1	—	1	—	—	3
Appendicitis	—	—	—	—	—	—	2	—	1	1	—	—	—	—	2	3	1	—	—	—	—	—
Cirrhosis of Liver	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	2	1	3	2	—	1
Other Diseases of Liver	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	2	2	2	2	4
Other Digestive Diseases	2	3	1	—	1	—	3	2	3	—	3	2	1	3	2	—	5	2	7	4	1	5
Acute and Chronic Nephritis	—	—	—	—	—	—	2	3	1	1	4	2	1	2	5	10	16	12	28	20	13	20
Puerperal Sepsis	—	—	—	—	—	—	—	—	—	2	—	8	—	1	—	—	—	—	—	—	—	—
Other Puerperal Causes	—	—	—	—	—	—	—	—	—	2	—	2	—	—	—	—	—	—	—	—	—	—
Congenital Debility, Premature Birth, Diseases of Early Infancy	57	32	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—
Old Age	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	9	14	54	109
Suicide: Solid or Liquid Poison	—	—	—	—	—	—	—	—	—	—	1	1	1	1	1	1	2	—	—	—	1	—
" Poisonous Gas	—	—	—	—	—	—	—	—	3	—	—	1	2	3	5	2	—	—	2	—	1	—
" Hanging	—	—	—	—	—	—	—	—	2	—	—	—	—	—	3	—	1	—	—	—	—	—
" Drowning	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
" Cutting or Piercing Instruments	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
" Other means	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
Homicide	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
Other Violence, Accident, etc.	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
All other Defined Causes	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
Ill-defined Causes	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
TOTALS M. / F.	105	66	11	13	19	6	48	34	59	43	67	65	79	80	161	141	282	223	341	371	337	428

WARDS.

CAUSE OF DEATH	St. Thomas		Portsea		Nelson		North End		Buckland		Kingston		Highland		St. Simon	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Typhoid and Para-Typhoid	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough	—	—	3	1	—	—	—	—	1	1	—	—	—	—	—	—
Diphtheria	—	—	2	3	3	1	1	—	3	3	2	1	3	2	—	1
Influenza	2	2	—	1	—	—	1	2	1	2	—	—	3	6	1	4
Erysipelas	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—
Acute Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Encephalitis Lethargica	—	—	1	—	—	—	—	—	—	—	1	—	—	—	—	—
Cerebro-spinal Fever	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—
Pulmonary Tuberculosis	6	5	11	5	7	7	4	3	9	6	9	4	8	4	7	2
Other Tuberculous Disease	—	—	2	—	—	1	—	1	—	—	—	—	2	1	1	—
Syphilis	1	—	4	1	—	—	1	—	1	—	—	—	—	1	2	—
Other Infectious Disease	3	—	2	1	—	—	—	—	—	—	1	—	1	—	1	2
General Paralysis of Insane and Tabes Dorsalis	2	—	2	—	—	—	—	—	—	—	1	—	—	—	—	—
Cancer, all forms	13	10	18	10	14	8	8	12	10	17	8	15	11	14	11	19
Diabetes	2	—	2	2	2	—	2	2	1	1	1	—	1	1	1	2
Cerebral Haemorrhage	5	6	4	3	2	5	3	3	5	6	5	8	2	10	3	10
Heart Disease	28	28	25	24	17	20	21	17	18	23	12	17	15	21	19	26
Aneurysm	1	—	1	—	—	—	—	—	2	—	1	—	1	1	3	1
Other Circulatory Diseases	7	5	5	3	2	3	1	2	3	1	3	3	4	4	6	6
Bronchitis	3	2	2	2	2	1	1	4	3	2	3	—	1	3	2	3
Pneumonia (all forms)	6	9	11	5	6	5	5	6	4	5	4	2	3	5	3	4
Other Respiratory Diseases	1	1	1	1	—	1	1	1	1	1	—	1	—	1	2	1
Peptic Ulcer	1	1	1	—	3	1	2	1	—	1	—	—	2	1	—	1
Diarrhoea and Enteritis	1	—	2	2	1	2	—	—	—	—	1	—	1	1	1	1
Appendicitis	—	—	1	—	—	—	2	1	—	—	—	1	1	2	—	—
Cirrhosis of Liver	—	—	—	—	1	1	—	1	1	—	—	—	—	—	1	1
Other Diseases of Liver	—	3	1	1	—	1	—	1	—	1	—	1	—	—	1	—
Other Digestive Diseases	2	2	3	1	1	1	2	1	2	1	1	1	—	1	—	1
Acute and Chronic Nephritis	6	11	9	6	5	4	2	6	6	4	1	1	5	4	5	2
Puerperal Sepsis	—	2	—	1	—	1	—	1	—	1	—	—	—	1	—	—
Other Puerperal Causes	—	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—
Congenital Debility, Premature Birth, Diseases of Early Infancy	1	4	5	1	4	1	3	2	3	1	2	2	6	2	4	1
Old Age	4	4	6	10	3	4	3	3	1	10	1	3	2	4	5	12
Suicide: Solid or Liquid Poison	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	1
" Poisonous Gas	—	—	—	—	—	—	1	—	—	—	1	—	3	—	2	—
" Hanging	—	—	2	—	—	—	1	—	—	—	1	—	—	—	—	—
" Drowning	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
" Cutting or Piercing Instruments	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
" Other means	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
Homicide	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
Other Violence, Accident, etc.	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
All other Defined Causes	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
Ill-defined Causes	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
TOTALS M. / F.	105	105	143	95	85	78	72	77	90	95	70	70	86	101	95	109

CAUSE OF DEATH	Havelock		St. Paul		Guildhall		Fratton		St. Mary		Charles Dickens		Cosham		Meredith		TOTAL		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M	F.	T.
Typhoid and Para-Typhoid	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1	—	1
Measles	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	—	—	1	—	—	—	—	—	1	1	—	1	—	1	—	—	3	3	6
Whooping Cough	1	—	—	—	—	—	—	—	—	—	1	1	—	—	—	—	6	3	9
Diphtheria	5	—	—	1	3	1	3	1	—	—	—	—	—	—	—	—	25	14	39
Influenza	1	3	—	1	3	—	—	1	3	3	—	—	1	—	3	1	19	26	45
Erysipelas	—	—	—	—	1	—	—	—	1	—	2	—	1	—	—	—	6	—	6
Acute Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Encephalitis Lethargica	—	1	1	—	—	—	1	—	—	—	1	1	—	1	—	—	5	3	8
Cerebro-spinal Fever	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	2	2
Pulmonary Tuberculosis	7	6	5	6	7	6	7	3	4	3	7	7	9	5	6	7	113	79	192
Other Tuberculous Disease	—	—	2	—	1	—	2	—	—	1	—	—	1	—	4	—	15	4	19
Syphilis	1	—	—	—	1	—	1	—	1	—	—	—	—	—	—	1	13	3	16
Other Infectious Disease	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	9	3	12
General Paralysis of Insane and Tabes Dorsalis	1	—	—	—	1	—	1	—	1	—	1	—	2	—	—	—	12	—	12
Cancer, all forms	11	21	5	12	18	12	16	10	10	13	9	12	8	12	19	24	189	221	410
Diabetes	1	4	1	2	1	2	1	2	—	1	2	1	1	1	—	2	19	23	42
Cerebral Haemorrhage	—	8	1	4	3	8	2	1	3	—	2	7	4	5	6	11	50	95	145
Heart Disease	24	18	17	36	15	29	7	20	21	19	23	36	20	13	34	14	316	361	677
Aneurysm	—	—	—	—	—	1	—	—	1	—	—	1	—	1	—	—	10	5	15
Other Circulatory Diseases	4	1	4	6	3	5	4	7	—	2	1	2	2	2	2	—	51	52	103
Bronchitis	4	4	5	4	1	2	1	3	1	4	2	3	2	2	2	3	35	42	77
Pneumonia (all forms)	5	—	4	5	7	4	4	1	5	5	4	3	7	3	9	6	87	68	155
Other Respiratory Diseases	1	1	3	1	—	1	2	1	—	1	—	1	2	—	1	—	15	14	29
Peptic Ulcer	—	1	1	—	2	—	2	1	2	1	3	1	1	—	3	—	23	10	33
Diarrhoea and Enteritis	1	2	1	—	1	1	1	1	—	3	1	2	—	—	—	—	12	15	27
Appendicitis	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1	—	6	4	10
Cirrhosis of Liver	—	—	1	—	—	—	—	—	1	—	1	1	—	—	1	—	7	4	11
Other Diseases of Liver	—	—	1	—	—	—	—	—	—	1	1	1	—	—	—	—	4	10	14
Other Digestive Diseases	4	2	3	2	2	2	1	2	2	1	1	1	2	1	3	1	29	21	50
Acute and Chronic Nephritis	4	6	5	3	5	5	3	2	4	6	4	5	2	1	4	4	70	70	140
Puerperal Sepsis	—	1	—	—	—	1	—	1	—	1	—	—	—	—	—	—	—	11	11
Other Puerperal Causes	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	4	4
Congenital Debility, Premature Birth, Diseases of Early Infancy	5	3	6	—	4	3	1	1	1	4	6	3	3	2	4	2	58	32	90
Old Age	6	14	7	9	5	9	4	14	5	6	7	9	2	3	3	9	64	123	187
Suicide: Solid or Liquid Poison	—	—	1	—	—	—	—	—	1	—	2	—	—	—	1	1	6	3	9
" Poisonous Gas	—	2	3	3	1	1	1	—	—	—	—	—	1	—	—	—	13	6	19
" Hanging	—	—	—	—	1	—	—	—	—	—	1	—	—	—	—	—	6	—	6
" Drowning	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	2	3	5
" Cutting or Piercing Instruments	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	1	—	1
" Other means	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	4	—	4
Homicide	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	—	—	—
Other Violence, Accident, etc.	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	55	33	88
All other Defined Causes	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	127	100	227
Ill-defined Causes	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	3	—	3
TOTALS M. / F.	95	108	92	106	93	104	78	76	84	83	96	108	84	64	121	94	1489	1470	2959

NATURAL CONDITIONS.

The following extract from the description of Southsea inserted by the Council in the Official Handbook of the British Health Resorts Association, briefly summarises the natural conditions.

"Sheltered from the north by the Portsdown Hills, a range of the South Downs, Southsea has a southern aspect, facing the Isle of Wight, from which it is separated by Spithead and the Solent.

CLIMATE.—The climate is sunny, equable and dry. The atmosphere is exceptionally clear and bright, and there is but little fog or mist. Snow is rarely seen. The meteorological records 1926-35, show average maximum temperature 59.3°, annual sunshine 1,767.4 hours, annual rainfall 29.31 inches. The Invalids' Winter (November to March) is very sunny, averaging 2.73 hours per day, or 29 per cent. of the possible duration; very mild with average maximum temperature of 47.9° and rainfall only 13.65 inches.

SEA BATHING.—There is a long beach of sand and shingle suitable for bathing. Bathing shelters, with sun huts and tents are provided. There are no strong currents. The average sea temperatures are May, 53°, June, 56°, July, 60°, August, 66°, September, 60°. A covered sea water swimming bath at a temperature of 75° is provided by the Corporation. In 1935, a large and up-to-date sea water pool (220 feet by 60 feet) was opened for bathers and water sports at Hilsea. The Corporation have recently approved a scheme for the erection of up-to-date Medical Baths, including Vichy and Aix Douches, medicated baths, etc.

INDICATIONS.—The climate is found beneficial to delicate children and elderly persons, and to those suffering from anaemia and debility, rheumatism, asthma, bronchial catarrh and chronic phthisis, for whom sunshine in a warm and equable climate is desired. Persons suffering from diseases of the circulatory system also do well in this locality, where the absence of hilly ground enables such cases to get fresh air and exercise without undue fatigue. The temperate nature of the climate makes Southsea a very popular resort for people who have resided in the tropics, or for patients suffering from tropical ailments or their after-effects. The extreme purity of the water supply reduces the tendencies to digestive diseases, and summer diarrhoea in children is almost unknown."

METEOROLOGICAL CONDITIONS, Etc.

Summary of Meteorological Statistics, 1935.

Barometer.—The mean barometer pressure for the year was 29.949 inches. The highest observed reading corrected to sea-level was 30.717 on January 20th, and the lowest 28.712 on February 25th.

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 57.9°, the highest being 86.0° on July 14th.

MINIMUM.—The mean minimum temperature was 46.7°, the lowest being 24° on December 21st.

MINIMUM ON GRASS.—The mean minimum temperature on the grass was 41.1°, the lowest being 20° on December 21st.

EARTH TEMPERATURE.—The mean temperature at 1 foot below the ground was 53.0°, and that at 4 feet 53.8°.

Bright Sunshine.—1764.4 hours of sunshine were registered by the Campbell-Stokes Recorder. The greatest amount registered on one day was 14.8 hours, viz. on June 29th.

Frosts.—The minimum thermometer in the shade, four feet above the ground fell to and below freezing point on 20 days, and that on the ground on 61 occasions.

Humidity.—The mean humidity of the air (Saturation 100) was 83.4.

Rainfall.—The total rainfall was 36.29 inches, or 6.53 inches above the normal. The greatest fall of rain in 24 hours was 1.69 inches, on October 3rd.

Hail.—Hail occurred on 7 occasions.

Thunder.—Thunder occurred on 9 occasions.

Snow.—Snow or Sleet fell on 7 occasions.

Fogs.—Fogs occurred on 8 occasions.

Gales.—Gales occurred on 11 occasions.

Averages for the Past Ten Years, 1926 to 1935.

Rainfall	*Hours of Bright Sunshine*	*Mean Temperature*	*Humidity (Saturation 100)*
29.31	1767.4	51.6	82.6

TABLE VIII.

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

Year	Total Sunshine	Total Rainfall in ins.	Highest Maximum in Shade °F	Date	Lowest Maximum in Shade °F	Date	Lowest Minimum in Shade °F	Date	Lowest Minimum on Grass °F	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 Dec. 29th, 31st	19	Jan. 24th
1914	1914	33.13	79	Aug. 13th, 14th	33	Jan. 19th	25	Jan. 23rd	14	Nov. 27th
1915	1776	37.41	79	July 2nd	36	Jan. 28th	27	Feb. 26th	18	Dec. 17th
1916	1628	28.48	82	Aug. 2nd	34	Feb. 25th	25	Feb. 25th	17	Feb. 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	Nov. 13th
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	Jan. 18th
1923	1770	29.54	89	July 12th	34	Dec. 25th	23	Nov. 26th	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
1935	1764	36.29	86	July 14th	33	December 20th	24	December 21st	20	December 21st

TABLE IX.

MONTHLY WEATHER SUMMARY FOR THE YEAR 1935.

Month	Mean Barometer ins.	Mean Temp. °F.	Absolute		Mean		Mean Daily Range	Sunshine		Rainfall			Relative Humidity (Saturation 100)
			Max. °F.	Min. °F.	Max. °F.	Min. °F.	°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	30.288	42.6	55	30	46.5	38.7	7.8	79.5	18	16.5	0.65	10	87
February	29.778	44.3	57	28	48.7	40.0	8.7	67.1	18	96.7	3.81	16	89
March	30.182	44.9	61	26	51.1	38.8	12.3	131.9	25	20.9	0.82	11	89
April	29.840	49.2	63	33	55.2	43.2	12.0	170.2	28	74.4	2.92	17	82
May	30.076	53.7	77	36	61.9	45.6	16.3	195.0	29	20.0	0.79	12	77
June	29.934	60.9	85	46	66.4	55.4	11.0	218.9	29	57.5	2.26	19	80
July	30.132	67.0	86	54	74.6	59.5	15.1	284.0	30	39.0	1.54	5	73
August	30.026	64.2	82	46	71.9	56.6	15.3	221.2	27	83.1	3.27	11	75
September	29.902	60.3	70	42	65.7	54.9	10.8	173.5	26	106.8	4.20	22	80
October	29.887	52.9	64	32	58.3	47.5	10.8	111.9	24	123.4	4.85	21	88
November	29.701	47.6	61	30	51.9	43.3	8.6	60.3	20	196.3	7.73	25	91
December	29.649	41.1	51	24	44.9	37.3	7.6	50.9	19	87.5	3.45	17	90
TOTAL	—	—	—	—	—	—	—	1764.4	293	922.1	36.29	186	—
MEAN	29.949	52.4	67.6	35.5	57.9	46.7	11.3	147.0	24.4	76.8	3.02	15.5	83.4

HOSPITAL AND OTHER SERVICES

HOSPITAL AND OTHER SERVICES.

SAINT MARY'S MUNICIPAL HOSPITAL.

The process of developing this fine Hospital, built by the enterprise and foresight of the old Board of Guardians, along the lines of a Municipal General Hospital was continued during the year. Many changes took place—all directed towards extending the usefulness of the hospital by bringing it into closer touch with the voluntary hospitals in the City, and with the other health services of the City Council in accordance with the intention of the Local Government Act, 1929.

Change in Method of Admission.—The Minister of Health in a recent Annual Report stated that the Local Government Act of 1929 gave clear indication that, as a matter of policy, as soon as circumstances permit, any service which could as a matter of law be performed by a Local Authority either under the Poor Law, or any other powers, should be entirely separated from the Poor Law. Accordingly, the question as to the change in the method of admission was discussed by the Special Committee as to Constitution of Committees and Organisation of Corporation Departments, by the Health Committee and the Public Assistance Committee, and as a result the City Council approved a joint report by the two last Committees that with certain exceptions, all cases should be admitted to Saint Mary's Hospital through the Health Department instead of through the Relieving Officers. A new Hospitals sub-section, consisting of two investigating officers has been set up for the purpose of interviewing patients, or the representatives of patients, at the Health Department. Miss Allen, who had been acting as Almoner under the Tuberculosis and Maternity Scheme, has been designated "Hospitals Almoner" for all the Hospitals of the Health Department.

Simplification of Administrative Machinery.—At the same time an opportunity was taken to simplify the procedure of hospital administration, and the Council approved the proposal to place all the Hospitals of the Council under one Sub-Committee to be known as the Sub-Health (Hospitals Governors) Committee.

Co-operation with Voluntary Hospitals.—There is very close co-operation between Saint Mary's Hospital and the two Voluntary Hospitals of the City, *i.e.* the Royal Hospital and the Eye and Ear Hospital. Representatives of each hospital meet every three months to discuss any new developments contemplated in any of the hospitals. After free and frank discussion an amicable arrangement has invariably

been reached with the object of preventing unnecessary and wasteful duplication of hospital services.

Two matters which were discussed by this joint committee were the establishment of an Orthopaedic Department and of a skin department at Saint Mary's Hospital.

ESTABLISHMENT OF AN ORTHOPAEDIC DEPARTMENT.—With a view to reducing the waiting list of orthopaedic cases at the Royal Hospital, it was arranged that an Orthopaedic Department be established at Saint Mary's Hospital. The orthopaedic surgeon appointed was Mr. Ord, who already holds the honorary appointment at the Royal Hospital, and thus close liaison between the two hospitals was assured.

ESTABLISHMENT OF A SKIN DEPARTMENT.—As there was no proper provision for the treatment of in-patients suffering from skin diseases, it was agreed to make Saint Mary's Hospital the centre for skin treatment. A part-time visiting Medical Officer who was on the staff of the Royal Hospital was appointed as a skin specialist.

Both the above departments were opened on the 1st April in the year under review, and the results obtained by the end of the year fully justified the extra expense involved.

VOLUNTARY CONTRIBUTORY SCHEMES.—Another step towards increasing the usefulness of Saint Mary's Hospital was the inclusion of the Hospital in the two voluntary contributory schemes of the City. Hitherto contributors, or their dependents, on admission to Saint Mary's Hospital were assessed in the usual way, resulting in considerable hardship. Meetings between Saint Mary's Hospital, the Voluntary Hospitals and the two Contributory Schemes were held, and as a result an amicable arrangement was reached whereby contributors and their dependents would be entitled to in-patient treatment at Saint Mary's Hospital for the first eight weeks; thereafter they would be assessed by the Hospitals Governors Sub-Committee in the usual way.

Mental Patients.—The arrangement reached between the Health Committee and the Mental Treatment Committee, whereby mental patients are supervised by the Medical Superintendent of the Mental Hospital, has worked well during the year. I should like to record here my appreciation of the excellent services rendered by Dr. Beaton and his staff, and of the happy spirit of co-operation existing between the Medical Superintendents and the staffs of each hospital. During the year the Committee adopted a joint report presented by Dr. Beaton and myself in regard to the present position and the future requirements of mental patients in Saint Mary's Hospital.

TABLE X. SUMMARY OF HOSPITALS SERVICES—VOLUNTARY AND MUNICIPAL.

Hospital	Situation	Description	Number of Beds	Management	Area Served	Medical Staff	Nursing Staff
Royal Portsmouth Hospital	Commercial Road	General	250	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
Saint Mary's Hospital	Milton Road	General and Lying-in	1050	*Health Committee of City Council	Portsmouth	1 Resident Medical Superintendent 5 Resident Assistant Medical Officers 6 Part-time Visiting Medical Officers	130 Nurses 69 Attdts.
City Mental Hospital	Locksway Road, Milton	For Patients of Unsound Mind	1014	Committee of City Council	Portsmouth	1 Resident Medical Superintendent 2 Resident Assistant Medical Officers	89 male 121 female
Infectious Diseases Hospital	Milton Road	City Infectious Diseases Hospital (excluding smallpox)	206	Health Committee of City Council	Portsmouth	2 Resident Medical Officers 1 Non-resident Medical Officer *Consultants when reqd.*	45
Royal Naval, Maternity Home	Clifton Road, Southsea	Lying-in Cases. (Limited to the wives of men in the Royal Navy and Royal Marines)	15	Voluntary Committee	Portsmouth and District	1 Non-resident Medical Officer 2 Hon. Consultant Medical Officers	11
Military Families' Hospital	London Road, Hilsea	Lying-in Cases. (Limited to the wives of men in the Army and Royal Air Force)	9	Army Authorities	Portsmouth and District	1 Non-resident Medical Officer	8
Langstone Sanatorium and Beach Lodge	Locksway Road, Milton	Tuberculosis, early cases and Children	20 and 9 children	Health Committee of City Council	Portsmouth	1 Non-resident Medical Officer	4

* Saint Mary's Hospital was appropriated as a Municipal Hospital by the Council on December 6th, 1932.

REPORT ON THE WORK OF SAINT MARY'S HOSPITAL.

By R. C. MACPHERSON, M.B., Ch.B., *Medical Superintendent.*

The outstanding feature of the year's work during 1935 has been the continued advance and improvement of the facilities given to the public for treatment at Saint Mary's Hospital. The new Radiological Department has become an asset of great value to the Hospital, and is one of the finest of its type in any Municipal Hospital.

Saint Mary's Hospital now possesses a well organised and up-to-date Maternity Department, which is being used more and more by the public. The work of this department is increasing with great rapidity, and the character of the work done, and its extent, are shown by the figures in the statistical returns of the Hospital.

Year ending	Births	Maternal Deaths	Still Births	Neonatal Deaths	Ante-Natal Dept.	
					Cases	Att'dances
31st Dec., 1929	136	4 (2.94%)	9 (6.61%)	4 (2.94%)	—	—
31st Dec., 1930	159	1 (.63%)	16 (10.06%)	5 (3.15%)	67	201
31st Dec., 1931	201	2 (.99%)	13 (6.46%)	9 (4.47%)	110	648
31st Dec., 1932	238	4 (1.68%)	14 (5.89%)	8 (3.36%)	138	980
31st Dec., 1933	278	2 (.72%)	20 (7.2%)	10 (3.6%)	287	1445
31st Dec., 1934	387	3 (.77%)	16 (4.13 %)	11 (2.84%)	315	2545
31st Dec., 1935	614	2 (.32%)	28 (4.56%)	22 (3.58%)	751	3604
					*64	*77

* Post-Natal (3 months only)

The addition of a Skin Department with facilities for the treatment of Skin Disease cases, both as in-patients and as out-patients, under the supervision of Mr. Murray Stuart, F.R.C.S., Ed., is

another outstanding feature of the year's progress. The progressive increase in the number of patients admitted, in the attendances at the Massage and Light departments, and in the Maternity and Ante-Natal departments, has been maintained.

The Laboratory of the Hospital is doing excellent work. New and modern apparatus has been added to the equipment. The increasing work of the Hospital during 1935 has necessitated increases in the Staff in practically all of its various departments, and the continued advances in its work has been met by the addition of many items of modern surgical and medical equipment.

Various additions to, and improvements of, the dietary of patients were authorised by the Governors of the Hospital during the year, and these were put into effect. The year has been one of progress and increased activity. The Visiting Consulting Staff, the Resident Medical Staff, Matron and Nursing Staffs, and the Steward and Clerical Staffs have worked efficiently, harmoniously and well, to give to the patients of the Hospital a medical service of high quality and of value.

The surgical operative work of the Hospital continues to advance in both the number of operations performed and the number of major abdominal operations performed.

The addition of an Orthopaedic Surgeon to the Staff has also led to the performance of a number of major operations on the spine and hip joints.

The equipment of the theatre has been kept consistent with modern technique. A complete set of electrical orthopaedic instruments was added during the year.

TABLE XI.

Table showing the classification of the accommodation for Sick, Maternity and Mental cases and the number of beds occupied on the 31st December, 1935.

Classification of Wards	Number of Wards	BEDS							
		MEN		WOMEN		CHILDREN (under 16 years of age)		Total	
		Provided	Occupied	Provided	Occupied	Provided	Occupied	Provided	Occupied
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
Receiving Ward	1	—	—	—	—	—	—	5	—
1. Medical	2	46	44	44	36	8	8	98	88
2. Surgical	2	48	42	47	40	3	3	98	85
3. Chronic Sick	4	65	43	96	84	—	—	161	127
4. Children	2	—	—	—	—	105	105	105	105
5. Venereal	1	6	3	—	—	—	—	6	3
6. Tuberculosis	2	28	27	32	22	10	10	70	59
7. Isolation	—	—	—	—	—	—	—	—	—
8. Maternity	3	—	—	66	30	—	—	66	30
9. Mental Lunacy Act, 1890									
(i) Short stay	5	23	23	56	43	—	—	79	66
(ii) Long stay		46	46	110	86	36	29	192	161
10. Mental Defectives	Part of 2 Wards	40	40	32	32	—	—	72	72
11. Skin and Cancer	2	49	49	45	45	4	4	98	98
TOTAL	24	351	317	528	418	166	159	1050	894

TABLE XII.

Statistics relating to In-Patients during the year ended 31st December, 1935.

1.	Total number of admissions (including infants born in hospital)	5282
2.	Number of women confined in Hospital	614
3.	Number of Live Births	593
4.	Number of Still-births	28
5.	Number of Deaths among the newly-born (*i.e.* under four weeks of age)*	30
6.	Total number of Deaths among children under one year (including those given under 5)	51
7.	Number of Maternal deaths among women confined in Hospital	2
8.	Total number of Deaths	851
9.	Total number of Discharges (including infants born in Hospital)	4437
10.	Duration of stay of Patients included in 8 and 9 above. Number of cases whose total stay was for the following periods—	
	(*a*) Under four weeks	3336
	(*b*) Four weeks, but under thirteen weeks	861
	(*c*) Thirteen weeks or more	1091
11.	Number of beds occupied—	
	(*a*) Average during the year	884
	(*b*) Highest on 20th April, 1935	960
	(*c*) Lowest on 25th December, 1935	854
12.	Number of Surgical operations under general anaesthetic (excluding dental operations)	1015
13.	Number of abdominal sections	156

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

TABLE XIII.

Classification of In-patients who were discharged from or who died in the Hospital during the Year ended 31st December, 1935.

DISEASE GROUPS	Children (under 16 years of age)		Men and Women	
	Discharged	Died	Discharged	Died
1. Acute infectious disease	40	3	9	8
2. Influenza	6	—	16	1
3. Tuberculosis—				
Pulmonary	7	—	93	49
Non-pulmonary	10	1	8	3
4. Malignant disease	—	—	69	122
5. Rheumatism—				
(1) Acute rheumatism (rheumatic fever) together with sub-acute rheumatism and chorea	33	—	17	1
(2) Non-articular manifestations of so-called "rheumatism" (muscular rheumatism, fibrositis, lumbago and sciatica)	—	—	13	—
(3) Chronic arthritis	—	—	29	—
6. Venereal disease	1	—	19	10
7. Puerperal pyrexia	—	—	19	—
8. Puerperal fever (*a*) Women confined in the hospital	—	—	—	1
(*b*) Admitted from outside	—	—	7	2
9. Other diseases and accidents connected with pregnancy and childbirth	—	—	76	2
10. Mental diseases (*a*) Senile Dementia	—	—	21	—
(*b*) Other	9	—	160	2
11. Senile decay	—	—	71	121
12. Accidental Injury and Violence	23	1	90	37
In respect of cases not included above :				
13. Disease of the Nervous System and Sense Organs	42	7	238	29
14. ,, ,, Respiratory System	100	26	206	89
15. ,, ,, Circulatory System	43	4	329	197
16. ,, ,, Digestive System	73	13	145	22
17. ,, ,, Genito-urinary System	55	1	187	62
18. ,, ,, Skin	101	—	88	6
19 Other diseases	49	20	165	11
20. Mothers and infants discharged from Maternity Wards, and not included in above figures :				
Mothers	—	—	675	—
Infants	571	—	—	—
21. Any persons not falling under any of the above headings	422	—	102	—
TOTALS	1585	76	2852	775

TABLE XIV.

Table shewing the Number of Sessions held by the part-time Visiting Medical Officers and the number of patients and attendances at the Out-patient Department and Ante-natal Clinic at Saint Mary's Hospital during the year.

Number of Sessions held by Visiting Medical Officers :

Physician	65	
Surgeon	72	
Ear, Nose and Throat Specialist	124	
Radiologist	153	
Skin Specialist	50	
Orthopaedic Surgeon	80	
Total		544

Number of Patients attending Out-patient Department	1317
Number of Attendance at Out-patient Department	3861
Number of Patients attending Ante-natal Clinic	1144
Number of Attendances at Ante-natal Clinic	3604

LABORATORY FACILITIES.—There has been no change during the year in the provision made for bacteriological examinations.

The following table gives particulars of various bacteriological examinations in connection with the diagnosis and prevention of infectious diseases carried out during the year.

Disease	Result		Total
	Positive	Negative	
Diphtheria	992	5,340	6,332
Tuberculosis	440	1,147	1,587
Enteric Fever	16	64	80
Totals	1,448	6,551	7,999

In addition, the Pathologist made 126 examinations of specimens submitted in connection with the investigation of cases of Puerperal Pyrexia and Puerperal Fever, 32 examinations of specimens submitted from the Infectious Diseases Hospital, and 394 examinations of specimens submitted from Saint Mary's Hospital.

Bacteriological examinations in connection with the water supply and milks were also carried out by the City Analyst.

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

1 Ambulance kept at the Milton Hospital for cases of infectious disease ;
2 Police ambulances at the Police Station for street accidents ;
5 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 19, attended on 2,367 patients in their own homes ; they paid altogether 71,475 visits, these included 6,102 visits to 336 patients at the request of the Health Department (Maternity and Child Welfare Section).

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.

"ACCOMMODATION.—During the past year considerable progress has been made towards the completion of the final plans for the provision of a Colony on Portsdown Hill for accommodating 500 mental defectives. The only accommodation for mental defectives provided by the Local Authority is a portion of Saint Mary's Hospital, which 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 over the age of 16 years.

The number of mental defectives maintained by the Local Authority under Orders in various Certified Institutions on the 1st January, 1936, was 166 (60 males and 106 females), excluding 23 defectives who were on licence from such Institutions, and 13 defectives in Rampton State Institution.

In addition to the above there were on the 1st January, 1936, 86 mental defectives (28 males and 58 females) under guardianship, in respect of whom the Local Authority contribute towards the cost of their maintenance.

CARE AND TRAINING.—The number of mental defectives under Statutory Supervision on 1st January, 1936, was 168 (83 males and 85 females), and the number under Voluntary Supervision was 514 (249 males and 265 females).

For those defectives who reside in their own homes, Occupation Centres and Handicraft Classes have been held at Rivers Street, Southsea (two sections), The Institute, Cosham, and Highland Road School. The tenancy of the Institute at Cosham ceased at the end of October, and arrangements were made for the children to attend two whole-day sessions each week at the Rivers Street Occupation Centre. In addition to these Centres, classes are held under the direction of the Mental Treatment Department at Saint Mary's Hospital on two mornings and two afternoons each week.

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 Senior Boys' Handicraft Class at Highland Road School, the lads are taught carpentry, basketry and rug making, and they 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 1935, 2,580 visits were made."

VACCINATION.—During 1934, the last year for which statistics are available, 4,042 births were registered, of whom 2,813, or 69.5 per cent. were successfully vaccinated ; 16 cases were found to be insusceptible to vaccination, and statutory exemptions were issued in respect of 824.

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

TABLE XV.

VACCINATION RETURNS FOR PAST THIRTY YEARS.

Year	No. of Births returned in birth sheets so registered from 1st Jan. to 31st Dec.	Successfully Vaccinated	Insusceptible to Vaccination	Had Small-pox	Dead Unvaccinated	Postponement by Medical Certificate	Removed to Districts the Vacc. Officer of which has been apprised	Removed to places unknown	No. of these births remaining	No. in respect of which certificates of conscientious objections have been received
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	4042	2813	16	....	132	130	60	46	21	824
*1935 (to June)	1917	1326	14	....	70	36	27	25	9	410

*6 months only.

TABLE XVI.

VACCINATION RETURNS—1st January to 30th June, 1935.

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, 1935	Number of these Births duly entered by 31st Jan., 1935 in Columns 1, 2, 4 and 5, of the Vaccination Register Birth List Sheets, viz. :					Number of these Births which on 31st January, 1936, remained unentered in the Vaccination Register on account (as shown by Report Book) of			Number of these Births remaining on 31st January, 1935, 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 Successfully Vaccinated	Col. 2 Insusceptible of Vaccination	Col. 2 Had Small-Pox	Col. 4 Number in respect of whom Certificates of Conscientious Objection have been received	Col. 5 Dead Unvaccinated	Postponement by Medical Certificate	Removal to Districts the Vaccination Officer of which has been duly apprised	Removal to places unknown, 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	581	404	5	....	122	20	11	14	5	....
2. Kingston and East Southsea	452	299	2	....	100	24	10	3	10	4
3. Portsea and Landport	336	238	2	....	61	17	8	4	4	2
4. Portsmouth and Mid-Southsea	548	385	5	....	127	9	7	6	6	3
Totals	1917	1326	14	....	410	70	36	27	25	9
VACCINATION OF CHILDREN whose Births were registered in this District from Jan. 1st to Dec. 31st, 1934, inclusive.										
1. North End and Buckland	1199	816	10	....	270	29	30	19	18	7
2. Kingston and East Southsea	1072	728	3	....	226	42	33	14	18	8
3. Portsea and Landport	757	564	....	....	113	31	30	10	6	3
4. Portsmouth and Mid-Southsea	1014	705	3	....	215	30	37	17	4	3
Totals	4042	2813	16	....	824	132	130	60	46	21

THE CORPORATION SWIMMING BATHS.—During the year the City Council approved a scheme (*a*) for the erection of a large and up-to-date swimming bath in Anglesea Road, (*b*) for the construction of medical baths adjoining the new swimming bath, and (*c*) for the modernization of the filtration plant of the old swimming bath in Park Road.

The following is an extract from a report which I submitted to the Health Committee in regard to Medical Baths.

"**I.—NEED FOR MEDICAL BATHS.**

(1) *For the treatment of persons resident in Portsmouth suffering from rheumatic conditions.* It is calculated that in Portsmouth no less than 8,000 insured persons consult their doctors each year on account of rheumatic conditions, not to speak of many hundreds of the non-insured population who are martyrs to rheumatism in one form or another.

Appropriate treatment consists in (*a*) detecting and removing the infecting food, the toxins of which are the cause of the condition ; (*b*) applying general and localised treatment, *e.g.* medical bath treatments ; general, local and electrical treatments ; drugs, vaccine and other injection therapy ; correction of deformities. Hydro-therapy is based on sound physiological principles and has proved to be a most valuable adjunct to the treatment of rheumatic conditions.

To ensure proper diagnosis and treatment it is essential that there should be available the services of the radiologist, bacteriologist, orthopaedic surgeon, ear, nose and throat surgeon, gynaecologist and dentist.

(2) *For the treatment of persons who come to Southsea for their health.* A well equipped and up-to-date Baths Establishment would form an added attraction to visitors from other parts, both during the winter and summer seasons. There is no doubt that Southsea by virtue of its unique position on the South Coast, its excellent sunshine record and its mild and equable climate would attract a good proportion of such patients if proper treatment facilities were available.

II.—PROPOSED ACCOMMODATION AND EQUIPMENT.

(*a*) 6 Medical Baths for Males and 6 for Females, capable of providing the following treatments :—Sulphur Bath, Alkaline Bath, Brine Bath, Aeration Bath, Foam Bath, Pine Bath, Seaweed Bath, Nauheim Bath, Paraffin Wax Arm and Leg, etc.

(*b*) One Douche Room, for joint use of males and females, containing 1 Vichy and 1 Aix Douche Massage, 1 Needle Douche, 1 Scotch Douche, etc. Together with 36 Dressing-rooms, Consulting Room, Lounge, etc.

III.—ADMINISTRATION.

Medical Bath treatment would be linked up with other forms of treatment for rheumatic conditions provided at both the Royal and Saint Mary's Hospitals or given by General Practitioners. Treatment would not be carried out without a medical prescription unless in special circumstances. Attendance would be by appointment, and the establishment would be open in the evenings for the convenience of patients unable to attend during working hours."

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

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

During the year under review 1,595 cases of infectious disease were notified as compared with 2,297 during 1934.

The outstanding features were :—

(*a*) the increase in the number of cases of diphtheria and the high mortality rate.

(*b*) the decreased incidence of scarlet fever, less than half of 1934.

SCARLET FEVER.—The number of cases of scarlet fever notified was 617 as compared with 1,349 during the previous year. Of these 583, or 94.5%, were admitted to hospital. Table XVII gives the number of notifications yearly for the past ten years. It will be seen that the incidence of erysipelas and puerperal sepsis has correspondingly diminished, doubtless explainable by the fact that scarlet fever, erysipelas and puerperal sepsis are manifestations of different strains of the same organism. There were no epidemics of note in the City. Several small ones occurred in schools and institutions but prompt measures, such as removing infecting cases, Dick testing and passively immunising positive reactors prevented further spread.

There were 6 deaths due to scarlet fever, giving a case mortality rate of 1.02%.

SCARLET FEVER "RETURN" RATE.—During the year there were 26 "return" cases of scarlet fever, giving a "return" case rate of 4.80%. This is a very marked improvement on previous years, but is still high. A "return" case is a case of scarlet fever occurring in the same house not less than 24 hours and not more than 28 days from the return of the original case from hospital.

One of the difficulties in controlling scarlet fever is that a case when discharged from hospital may appear perfectly free from infection but a few days later may develop a running nose, etc., with an infectious secretion capable of reproducing the disease in other members of the family. With the view of reducing the "return rate" still further, a scheme is being formulated whereby the parents of children convalescing from scarlet fever will be told on discharge from hospital that the children will only be allowed to attend school at the end of 14 days on the production of a certificate of fitness and freedom from infection, either from their own private practitioner or from a medical officer of the department.

TABLE XVII.

Comparison of the Number of Cases notified as suffering from Scarlet Fever, Erysipelas and Puerperal Sepsis during each of the years 1924-1935.

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
1935	617	72	18

DIPHTHERIA.—During the year 422 cases were notified, compared with 339 cases in 1934. Of these, 420 or 99.5%, were removed to hospital.

There were 39 deaths from the disease giving a case mortality rate of 9.24%. This high rate is due to the gravis (toxic) type of the disease that has been prevalent throughout the year—a type very similar to that occurring during 1934. On reviewing in detail the fatal cases, the most noticeable feature is that there is a definite delay in seeking medical advice.

DIPHTHERIA IMMUNISATION.—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.

The general scheme of diphtheria immunisation mentioned in my Report last year was approved by the Committee and put into effect during 1935. At the end of the year 698 children had been immunised or were in process of being immunised,

392 by private doctors, and 306 by medical officers of the Health or Education Departments. No general disturbance or reaction in any of the children was noticeable.

No case of diphtheria occurred in fully immunised children.

Generally speaking, the response has been poor. If parents realised the risk which is being run by their children during the present period of virulent diphtheria they would not hesitate to take advantage of this safe and reliable means of protection which scientific research has provided.

The following is a copy of a pamphlet which is distributed to parents. Further particulars can be obtained either from private practitioners or from the Health Department.

IMPORTANT.

DIPHTHERIA.

PARENTS! READ THIS!

(A). FACE THESE FACTS.

1. DIPHTHERIA is a dangerous infectious disease, which mainly attacks children.

In England and Wales there are some 55,000 cases of diphtheria each year, and out of these approximately 3,000 to 4,000 die.

About half the number of those who die are between one and five years old.

Science has now given us a safe and reliable means of preventing diphtheria.

2. There has been recently a change in the type of the disease. The most disquieting feature about this change is that, whereas in the ordinary form of diphtheria early administration of anti-toxin can be relied upon to neutralize the germ poisons and save the child's life, **in the type prevailing at present anti-toxin fails to give the same favourable results.**

3. **Your child may encounter the diphtheria germ at any time and in the most unexpected places,** hence **the only safe way** is to prevent your child contracting the disease by the simple process of immunisation.

PROTECTION AGAINST DIPHTHERIA.

How it is done. By the injection of 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.**

When it should be done. The best time is between one and three years, but it may be done any time up to five years of age and beyond.

(B). TAKE ACTION NOW.

It is your duty as a parent to stand between your child and the danger which threatens. You cannot be ignorant of that danger. If you are, be assured that it is real.

Your child can be protected by the simple precaution of having him immunised. You do not understand what that big word means. Your doctor will tell you all about it if you ask. Don't delay, ask at once and when you have learned all there is to learn and your doubts and fears have been removed, as I am sure they will be removed, put your child's name down for early immunisation. Doctors, realising the grave danger to which their own children are now exposed, are immunising them against diphtheria. **They** should know! Follow their example!

In some cities more than 60 per cent. of the children have been immunised, with marked saving of child life.

You owe it to your children to give them the benefit of this new discovery.

DO IT NOW, BEFORE IT IS TOO LATE!

Remember that epidemics of Diphtheria occur at the most unexpected times.

Please visit your own doctor or fill up the attached consent form without delay and hand it in at, or send it to, The Health Department, The Guildhall, Portsmouth, when arrangements will be made for your child to be protected.

If your child has a sore throat you should always get your doctor to see it.

A. B. WILLIAMSON, M.A., M.D., D.P.H.,
Medical Officer of Health.

DIPHTHERIA IMMUNISATION SCHEME.

I wish to have my child,

.....

aged.....years and.....months, protected against Diphtheria, and hereby give my consent to him/her undergoing the course of treatment necessary for that purpose.

Signed .....

Address .....

.....

.....

Date.....

OUTBREAKS.—There were several small epidemics, comprising at the most 6 cases. These as a rule affected one household or its immediate neighbours.

There was one rather serious outbreak at Francis Avenue Infants' School, which necessitated closing the school. Immediately the outbreak was suspected a thorough investigation took place, contacts were examined and swabbed and, if necessary, removed to hospital. The infant Department was closed. The outbreak was soon under control, but unfortunately owing to the virulent type of diphtheria present four children died.

The outbreak was due to "carriers," *i.e.* children who, apparently healthy, had been attending school with no symptoms other than a slightly "running" nose.

A letter was sent to the parents or guardians of all children in the Infants' Department, together with a leaflet strongly urging them to take advantage of the arrangements for the immunisation of their children.

ERYSIPELAS.—During the year 72 cases were notified, of these 6 proved fatal.

ENTERIC FEVER.—There were 8 cases notified during the year, of which 3 proved not to be suffering from the disease. Investigation failed to reveal a common source of infection.

PUERPERAL FEVER AND PYREXIA.

There were 18 of the former and 43 of the latter notified during the year. These conditions are dealt with more fully in the Maternity and Child Welfare section of the report.

PNEUMONIA—Acute Influenzal and Acute Primary.—During the year 53 cases were notified. The total deaths from this disease, certified as such, during the year was 155, giving a mortality rate of 0.61 per 1,000. The corresponding figures for 1934 were 182, giving a rate of 0.73 per 1,000.

MALARIA.—One case of malaria was notified—a male patient aged 38 years. The source of infection was from abroad (Gold Coast Colony). He attended the St. Pancras Hospital for Tropical Diseases.

Other infectious diseases notified during the year may be found on page 50.

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

Disease	Cases Notified*	Admitted to Hospital	Total Deaths
Diphtheria	422	420	39
Scarlet Fever	617	583	6
Enteric Fever	8	5	1
Puerperal Fever	18	17	11
Puerperal Pyrexia	43	32	—
Acute Primary and Influenzal Pneumonia	53	1	45
Cerebro-spinal Meningitis	1	1	2
Poliomyelitis	1	1	—
Encephalitis Lethargica	1	1	8
Erysipelas	72	37	—
Malaria	1	—	—
Dysentery	1	—	—
Ophthalmia Neonatorum	15	7	—
Pemphigus Neonatorum	2	—	—
Tuberculosis	340	361	211

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

OPHTHALMIA NEONATORUM.—The following particulars are given with regard to the 15 cases of ophthalmia neonatorum (inflamation 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 Inpaired	Total Blindness	Deaths
	At Home	In Hospital				
15	8	7	15	Nil	Nil	Nil

TABLE XVIII.

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 1935.

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
1935								
March 31st	27	0.43	86	1.37	51	0.81	836	13.36
June 30th	15	0.23	79	1.26	51	0.81	766	12.20
September 30th	12	0.15	39	0.62	34	0.54	599	9.57
December 31st	17	0.27	57	0.91	56	0.89	759	12.53
Totals	71	0.28	261	1.04	192	0.76	2959	11.82

* 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 XIX.

Showing the number of Deaths in the years 1861 to 1935 from the Seven Principal Zymotic Diseases.

Year	Population	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
1935	250200	....	....	6	39	9	1	16	71	0.28

* Civil population only.

TABLE XX.

WEEKLY RETURN of cases of Infectious Disease.

Week ending 1935	Small-pox	Scarlet Fever	Diphtheria	Enteric Fever	Pneumonia	Puerperal Fever	Puerperal Pyrexia	Cerebro-spinal Fever	Encephalitis Lethargica	Acute Poliomyelitis	Erysipelas	Ophthalmia Neonatorum	Malaria	Dysentery	Pemphigus Neonatorum	Tuberculosis		Total
																Pulmonary	Non-Pulmonary	
Jan. 5	....	16	7	....	1	....	....	....	....	....	5	....	....	....	....	3	....	32
,, 12	....	9	11	....	....	....	....	....	....	....	2	....	....	....	....	1	....	23
,, 19	....	17	7	....	....	....	1	....	....	....	....	....	....	....	....	6	....	31
,, 26	....	13	10	....	2	....	....	....	....	....	4	....	....	....	....	11	2	42
Feb. 2	....	23	12	....	....	....	4	....	....	....	1	....	....	....	....	3	....	43
,, 9	....	15	12	1	....	....	....	....	....	....	....	....	....	....	....	5	1	34
,, 16	....	11	6	....	....	1	....	....	....	....	1	....	....	....	....	2	2	23
,, 23	....	13	10	....	1	3	2	....	....	....	2	1	....	....	....	1	....	33
Mar. 2	....	18	4	....	....	1	1	....	....	....	4	....	....	....	....	4	....	32
,, 9	....	20	10	1	....	....	1	....	....	....	1	1	....	....	....	4	....	38
,, 16	....	17	12	....	1	1	....	1	....	....	....	1	....	....	....	9	....	42
,, 23	....	13	8	....	1	....	....	....	....	....	2	....	....	....	....	5	....	29
,, 30	....	15	13	....	1	....	....	....	....	....	....	....	....	....	....	10	1	40
April 6	....	16	8	....	2	1	....	....	1	....	2	....	....	....	....	2	....	32
,, 13	....	23	6	....	1	....	2	....	....	....	3	....	....	....	....	4	1	40
,, 20	....	9	9	....	6	1	....	....	....	....	2	....	....	....	....	4	....	31
,, 27	....	8	7	....	1	2	1	....	....	....	3	....	....	....	....	4	4	30
May 4	....	10	4	....	2	2	....	....	....	....	....	3	....	....	....	6	1	28
,, 11	....	14	4	1	....	....	4	....	....	....	1	....	....	....	....	2	1	27
,, 18	....	11	13	....	3	....	....	....	....	....	....	....	....	....	....	5	2	34
,, 25	....	15	4	....	2	....	3	....	....	....	....	....	....	....	....	3	1	28
June 1	....	10	8	....	3	....	3	....	....	....	1	....	....	....	....	7	4	36
,, 8	....	13	8	1	4	....	....	....	....	....	4	1	....	....	....	4	2	37
,, 15	....	6	4	....	1	....	....	....	....	....	3	....	....	....	....	1	1	16
,, 22	....	13	5	....	....	....	3	....	....	....	3	....	....	....	....	11	1	36
,, 29	....	10	9	....	....	....	....	....	....	....	....	1	....	....	....	6	1	27
July 6	....	6	9	....	....	....	3	....	....	....	....	....	....	....	....	8	3	29
,, 13	....	3	9	....	1	....	....	....	....	....	2	....	....	....	....	5	1	21
,, 20	....	10	5	....	....	1	2	....	....	....	....	....	....	....	....	2	....	20
,, 27	....	9	15	....	....	....	2	....	....	....	1	1	....	....	....	11	2	41
Aug. 3	....	8	16	....	....	....	2	....	....	....	....	....	....	....	....	5	....	31
,, 10	....	17	4	1	1	....	1	....	....	....	....	....	....	1	....	8	1	34
,, 17	....	4	....	....	1	....	1	....	....	....	....	....	....	....	....	10	1	17
,, 24	....	8	6	....	....	2	....	....	....	....	....	1	....	....	1	11	2	31
,, 31	....	8	9	....	3	....	1	....	....	....	3	....	....	....	1	11	1	37
Sept. 7	....	14	8	....	....	....	....	....	....	....	....	1	....	....	....	11	3	37
,, 14	....	15	3	....	....	....	....	....	....	....	....	....	....	....	....	8	2	28
,, 21	....	10	8	....	....	1	....	....	....	....	1	....	1	....	....	4	1	26
,, 28	....	8	5	....	4	....	....	....	....	....	....	1	....	....	....	6	....	24
Oct. 5	....	17	8	....	....	....	1	....	....	....	1	....	....	....	....	6	....	33
,, 12	....	10	6	....	1	....	1	....	....	....	....	....	....	....	....	9	....	27
,, 19	....	11	14	....	....	....	....	....	....	....	2	....	....	....	....	5	....	32
,, 26	....	10	12	....	2	....	1	....	....	....	5	....	....	....	....	6	....	36
Nov. 2	....	9	16	....	1	....	2	....	....	1	1	1	....	....	....	5	1	37
,, 9	....	20	7	....	....	....	....	....	....	....	2	....	....	....	....	7	....	36
,, 16	....	11	4	....	1	2	....	....	....	....	1	1	....	....	....	7	....	27
,, 23	....	9	9	....	....	....	....	....	....	....	2	....	....	....	....	6	....	26
,, 30	....	9	8	1	....	....	....	....	....	....	3	....	....	....	....	6	1	28
Dec. 7	....	6	9	....	3	....	1	....	....	....	1	....	....	....	....	3	....	23
,, 14	....	5	15	2	1	....	....	....	....	....	1	....	....	....	....	3	....	27
,, 21	....	12	3	....	1	....	....	....	....	....	....	....	....	....	....	7	2	25
,, 28	....	10	3	....	1	....	....	....	....	....	2	1	....	....	....	1	....	18
TOTALS	....	617	422	8	53	18	43	1	1	1	72	15	1	1	2	294	46	1595

TABLE XXI—Cases of Infectious Diseases notified during the Year 1935.

Notifiable Disease	Cases notified in Whole District													Total Cases notified in each Ward.															Total Cases Removed to Hospital
	At Ages—Years													1 St. Thomas	2 Portsea	3 Nelson	4 North End	5 Buckland	6 Kingston	7 Highland	8 St. Simon	9 Havelock	10 St. Paul	11 Guildhall	12 Fratton	13 St. Mary	14 Charles Dickens	15 Cosham	16 Meredith	
	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)	422	5	10	17	23	26	200	82	15	36	4	4	—	10	42	12	20	35	68	32	24	33	17	28	25	23	16	19	18	420
Erysipelas	72	1	—	—	—	1	4	3	3	13	9	20	18	10	9	5	3	2	7	6	2	2	2	4	4	1	9	3	3	37
Scarlet Fever	617	5	14	35	40	74	304	68	19	43	11	4	—	14	62	51	34	45	51	34	20	19	24	35	38	51	34	57	48	583
Enteric Fever	8	—	—	—	—	—	1	1	1	2	—	2	1	—	—	—	1	—	4	—	—	1	—	—	—	1	—	1	—	5
Influenzal Pneumonia	53	—	1	—	1	—	4	3	5	13	8	15	3	—	2	2	6	2	30	1	—	—	1	1	2	1	4	—	1	1
Puerperal Fever	18	—	—	—	—	—	—	—	—	14	4	—	—	1	2	2	2	1	2	1	—	1	2	2	—	1	1	—	—	17
Puerperal Pyrexia	43	—	—	—	—	—	—	—	1	41	1	—	—	9	1	6	7	3	6	3	1	—	3	1	1	—	1	—	1	32
Poliomyelitis	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1
Encephalitis Lethargica	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1
Ophthalmia Neonatorum	15	15	—	—	—	—	—	—	—	—	—	—	—	4	—	—	1	—	2	2	—	—	—	—	—	1	3	1	1	7
Cerebro-spinal Meningitis	1	—	—	—	—	—	—	1	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Malaria	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery	1	—	—	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pemphigus Neonatorum	2	2	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—
Pulmonary Tuberculosis	294	—	—	—	—	1	2	9	29	118	63	66	6	15	24	13	22	20	20	16	17	14	25	26	14	18	14	17	19	312
Other forms of Tuberculosis	46	1	2	2	1	1	12	12	3	10	1	1	—	6	6	2	1	2	2	5	2	3	5	4	3	2	1	1	1	49
Totals	1595	29	27	54	65	103	530	179	76	291	101	112	28	70	150	93	98	110	193	100	67	73	79	101	87	99	84	99	92	1466

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

INFECTIOUS DISEASES' HOSPITAL.

Although the Hospital was not taxed to its utmost capacity during the year as was the case during 1934, there were occasions during small isolated outbreaks of infectious disease in the City when the bed accommodation was fully occupied. The Hospital is approved by the Ministry of Health for only 206 beds, but during periods of increased prevalence of infectious disease more patients than the approved number had to be admitted to the wards, thus increasing the danger of cross infection.

It was for this reason that the Council approved the recommendation of the Health Committee for the erection of (*a*) 2 more ward blocks (comprising a two-storey block of 60 beds and a cubicle ward block of 24 beds) ; (*b*) a larger and more up-to-date kitchen ; and (*c*) an extension to the Nurses' Home. It is expected that the new accommodation will be ready next year.

OPERATING THEATRE.—This theatre, erected in 1933, has proved of inestimable value. Patients, who after admission to the surgical wards of the hospitals in the City are found to be suffering from an infectious disease, can now be transferred to the Infectious Diseases Hospital with absolute safety, while the dreaded danger of spread of infection in the surgical wards is reduced to a minimum. Since the erection of the theatre there has been a marked reduction in the number of cases of infectious disease occurring in the hospitals of the City.

The theatre is also frequently used for cases of infectious disease in the Hospital itself who require surgical treatment. The surgeons on the consulting staff of Saint Mary's Hospital visit the Infectious Diseases Hospital when required.

RE-ORGANISATION OF MEDICAL STAFF.—The resignation of the Medical Superintendent, Dr. R. W. Revell on his appointment elsewhere, afforded an opportunity of re-organising the medical staff with the view of bringing the Hospital into closer touch with the other health services of the Department. Instead of appointing another Medical Superintendent, two resident medical officers designated—(*a*) Senior Resident Medical Officer and Assistant Medical Officer of Health, and (*b*) Junior Resident Medical Officer and

Assistant Medical Officer of Health, and capable of participating in other health work, *e.g.* maternity and child welfare and tuberculosis, were appointed. The Medical Officer of Health became the Medical Superintendent of the Hospital, as is the case in many other Local Authorities.

The Tuberculosis Officer and Senior Assistant Medical Officer of Health was appointed the Deputy Medical Superintendent of the Hospital, and is now in a position to co-ordinate under the direction of the Medical Officer of Health the diagnosis treatment and control of all infectious diseases, including tuberculosis. Thus the services of an additional Assistant Medical Officer have been obtained, and the closer liaison between branches of the Department achieved at very little extra cost.

ESTABLISHMENT OF A HOSPITAL LABORATORY.—With the adoption of newer methods of diagnosis and treatment which scientific research has made possible, a small laboratory for the examination of diphtheria swabs and infectious discharges from patients in the Hospital has become essential in every Infectious Diseases Hospital of any size and importance.

The number of swabs examined daily by the City Analyst had increased so much as to interfere with his other work. Accordingly it was arranged for a part of a small ward at the Infectious Diseases Hospital to be converted into a small laboratory for the culture and examination by the Resident Medical Officers of all the Hospital swabs. The examination of the larger proportion of the swabs of the City, *i.e.* from medical practitioners, is still carried out by the City Analyst.

APPLICATION FROM NEIGHBOURING LOCAL AUTHORITIES FOR THE ADMISSION OF CASES OF INFECTIOUS DISEASE.

One of the main objects of the Local Government Act of 1929 was to concentrate hospital treatment, and particularly specialised treatment, in large centres of population where better and more up-to-date facilities can be provided.

During the year applications were made by the Borough of Gosport and Urban District of Havant and Waterlooville to admit into Milton cases of infectious disease requiring operative treatment. The City Council on the recommendation of the Health Committee granted their request, and terms of agreement satisfactory to both parties have been entered into.

Towards the end of the year the Urban District of Havant and Waterlooville made a further application for the reception of all their cases of infectious disease. The application has been granted by the City Council—the new arrangement to operate as and from April 1st, 1936.

RECOGNITION OF THE HOSPITAL AS A TRAINING SCHOOL FOR THE CERTIFICATE OF FEVER NURSING.

With the development of the Hospital the importance of its recognition as a Training School for the Certificate of Fever Nursing was evident. The advantages of such recognition would be :—

(1) The establishment of a Training School would raise the status of the Hospital and would result in more applications being received in reply to vacancy advertisements. At the present time great difficulty is experienced in obtaining suitable probationer nurses, as intending probationers realise that there are no facilities for taking the State Registered Certificate.

(2) An opportunity would be given to the uncertificated nurses already on the staff of the Hospital to become fully trained and registered nurses.

(3) There would be reciprocity between the Infectious Diseases Hospital and Saint Mary's Hospital, which has, for many years, been a large Training School recognised by the General Nursing Council for the Certificate of General Nursing. Under the new arrangement, a nurse would be able to train for two years in the Infectious Diseases Hospital in fever nursing, at the end of which time she would sit the examination for the Certificate of Fever Nursing. Thereafter, should she so desire, she would be transferred to Saint Mary's Hospital Training School, where, with a further two years general training, she would be eligible to sit for the Certificate of General Nursing, so that she would obtain both Certificates in four years. The syllabus for the Preliminary Examination for both Certificates is identical and arrangements would be made whereby probationers from each Hospital would attend the same lectures, *e.g.* anatomy and physiology at Saint Mary's Hospital, and hygiene at the Infectious Diseases Hospital.

In December, 1935, application was made to the General Council for England and Wales for recognition of the Infectious Diseases Hospital as a Training School for the Certificate of Fever Nursing. This has been granted and preparations are now in progress for the establishment of the School.

The following Report of the work of the Hospital is given by Dr. I. M. McLachlan, Deputy Medical Superintendent :—

" During the year there were 1,204 cases of infectious diseases admitted to the Infectious Diseases' Hospital, divided up as follows :—

Scarlet Fever	583
Diphtheria	420
Enteric Fever	5
Other Diseases	196
	1204

Comparison with former years shows :—

Cases admitted	1935	1934	1933	1932	1931	1930
Scarlet Fever	583	1232	801	600	530	609
Diphtheria	420	332	185	233	340	570
Enteric Fever	5	4	3	12	5	32
Other Diseases	196	203	134	139	133	100

SCARLET FEVER.—The type of disease prevailing in the City during the year was of slightly greater severity than in previous years. There was a heavier incidence of complications, such as otorrhoea (ear discharge) and adenitis (swollen glands). 583 cases were admitted, of which 548 proved to be cases of scarlet fever. The 5—15 age group was the one in which most cases occurred. The incidence in males and females was about equal. The " return " case rate was 4.80% (see p. 44). There were 6 deaths directly attributed to scarlet fever, giving a case mortality rate of 1.02%.

DIPHTHERIA.—There were 420 cases admitted during the year. The type of disease especially during the latter four months was of a very toxic nature. The fatal cases totalled 39, giving a case mortality of 9.24%. There were 4 " Return " cases during the year.

ENTERIC FEVER.—Five cases of enteric fever were admitted during the year.

OTHER DISEASES.—There were 196 cases other than scarlet fever, diphtheria and enteric fever admitted, viz. :—

Tuberculosis	110	Tonsillitis	6
Erysipelas	37	Pneumonia	1
Measles	10	Ant. Poliomyelitis	1
Cerebro-spinal Meningitis	1	Varicella	9
Encephalitis Lethargica	1	Meningitis	3
Influenza	3	Rubella	2
Parotitis	2	Other Diseases	10

SPECIAL SERVICES.—The services of a ear, nose and throat specialist are available when required. During the year the consultant—Mr. Tamplin—paid 58 visits to the hospital, examined 53 patients and performed 33 operations, comprising Acute Mastoids, Tonsils and Adenoids.

Other consultants—surgical or medical—are available if the occasion arises.

The following table gives a complete list of the visits to the hospital by the various consultants :—

	Visits	*Examinations*	*Operations*	
Mr. TAMPLIN—Ear, Nose and Throat Specialist	58	53	33	Mastoids 16 Tonsils and Adenoids 15 Myringotomy 2
Mr. ORD, Orthopaedic Specialist	4	3	1	
Mr. HILLMAN—Surgeon	3	2	1	
Dr. LYTLE—Physician	5	5	—	
Dr. GITTINGS—Eye Specialist	2	4	—	

IMMUNISATION OF MEDICAL AND NURSING STAFF.—Arrangements are made whereby medical and nursing members of the Hospital Staff are immunised against Diphtheria, Scarlet Fever, Typhoid Fever, Small-Pox, if from the preliminary skin tests and other information it is found that they are susceptible to any or all of these diseases. Immunisation is carried out at very small cost (varying from 6d. to 3/6 according to the disease), and by so doing not only is sickness reduced amongst the staff, but the cost of many weeks of hospital maintenance is obviated.

TABLE XXII.

INFECTIOUS DISEASES' HOSPITAL, MILTON.

NUMBER OF PATIENTS ADMITTED
during the Year 1935.
(including a few Cases from outside Authorities)

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	3	166	342	37	24	8	2	1	583
Diphtheria	7	81	275	34	15	4	1	3	420
Tuberculosis	—	—	—	31	35	30	8	6	110
Erysipelas	—	2	6	3	9	4	4	9	37
Enteric Fever	—	—	2	1	1	—	1	—	5
Measles	—	4	4	1	1	—	—	—	10
Cerebro-spinal Meningitis	—	—	1	—	—	—	—	—	1
Encephalitis Lethargica	—	—	1	—	—	—	—	—	1
Influenza	—	—	—	3	—	—	—	—	3
Parotitis	—	—	1	1	—	—	—	—	2
Tonsillitis	—	—	—	4	1	1	—	—	6
Pneumonia	—	—	—	1	—	—	—	—	1
Ant. Poliomyelitis	—	—	1	—	—	—	—	—	1
Varicella	—	5	3	1	—	—	—	—	9
Meningitis	—	1	1	1	—	—	—	—	3
Rubella	—	—	1	—	1	—	—	—	2
Other Diseases	1	2	1	2	1	1	1	1	10
Totals	11	261	639	120	88	48	17	20	1204

TABLE XXIII.

NUMBER OF PATIENTS ADMITTED TO THE INFECTIOUS DISEASES' HOSPITAL

(Small-pox Patients—Langstone Hospital) for the years 1883 to 1935.

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
1935	....	583	5	420	10	186	1204

VENEREAL DISEASES.

Since the establishment of the V.D. Treatment Centre in 1917, the incidence of the three Venereal Diseases has shown a steady decline and the cost of treatment has been amply repaid by the saving of many lives and the alleviation of human suffering. The outstanding features of the year under review are :—

(*a*) the decrease in the number of children attending the Centre for Congenital Syphilis—the lowest on record ; and

(*b*) the intensive following up of contacts and the consequent increase in the number of women attending for treatment. Both Syphilis and Gonorrhoea are more difficult to eradicate in women by virtue of the anatomy of the parts affected. If untreated they constitute reservoirs of the disease for long periods, with recurrence of the infection in their male partner or partners. The Venereal Diseases Officer and his staff are to be congratulated in increasing by more than two-fold the number of women attending for treatment.

CO-ORDINATION.—There is close co-ordination between the Portsmouth Navy and Army Commands so far as the control and treatment of Venereal Diseases are concerned. The sources of infection of civilians and of service men alike are frequently the same. In this connection the investigation of the Naval Health Officer into the sources of infection of all cases attending the Naval Clinic is of interest. During the year 1935 prostitutes were responsible for 51.4 per cent. of the infections and amateurs for 42.3 per cent. In 6.3 per cent. of cases exposure was denied. Every effort is made, often with the help of the police, to trace these women and to induce them to undergo treatment.

The Venereal Diseases Officer, Mr. A. Murray Stuart, F.R.C.S. (Ed.) reports as follows on the work carried out at the Venereal Diseases Treatment Centre at the Royal Portsmouth Hospital :—

" During the year 1935 there was a decrease in the number of patients attending for the first time, which is chiefly accounted for by a marked diminution in non-venereal cases. The number of adult patients attending with syphilis for the first time remains about stationary. It is gratifying to record, however, that the number of children attending with congenital syphilis again showed a decrease ; the number is the lowest since the Treatment Centre opened in 1917, which shows that the work of the Centre is bearing fruit in preventing the transmission of this disease from parent to child.

Three children attended during the year with gonorrhoeal vaginitis.

The number of men attending with gonorrhoea has slightly decreased, but the number of women attending with gonorrhoea for the first time has more than doubled. The increase is largely due to a more intensive following up of contacts. The proportion of women attending for gonorrhoea to those attending for syphilis, which was formerly much below the average, has now increased to 3 to 1, which is about normal. This is very satisfactory, as it indicates that a large number of infected women who were spreading the disease have been induced to attend for treatment.

More intensive treatment both for syphilis and gonorrhoea, in accordance with modern practice, has been adopted, with the result that the number of attendances has largely increased. This has entailed an increased expenditure, but this should be amply repaid in the future by a decrease in the late results of these diseases and a diminution of the incidence of infection.

TABLE XXIV.

RETURN RELATING TO ALL PERSONS WHO WERE TREATED AT THE TREATMENT CENTRE DURING THE YEAR ENDED 31st DECEMBER, 1935.

	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	173	132	1	—	97	13	15	12	286	157	443
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	13	22	—	—	7	3	—	—	20	25	45
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	15	—	—	—	—	—	—	—	15	—	15
,, secondary	20	12	—	—	—	—	—	—	20	12	32
,, latent in 1st year of infection	1	—	—	—	—	—	—	—	1	—	1
,, all later stages	47	27	—	—	—	—	—	—	47	27	74
,, congenital	6	7	—	—	—	—	—	—	6	7	13
Soft Chancre	—	—	2	—	—	—	—	—	2	—	2
Gonorrhoea, 1st year of infection	—	—	—	—	150	56	—	—	150	56	206
,, later	—	—	—	—	5	1	—	—	5	1	6
Conditions other than venereal	—	—	—	—	—	—	199	96	199	96	295
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	14	7	—	—	23	6	—	—	37	13	50
TOTALS OF ITEMS 1, 2, 3 AND 4	289	207	3	—	282	79	214	108	788	394	1182
5. Number of cases discharged after completion of treatment and final tests of cure (see Item 15)	26	18	3	—	60	14	201	102	290	134	424
6. Number of cases which ceased to attend before completion of treatment and were, on first attendance suffering from :—											
Syphilis, primary	4	—	—	—	—	—	—	—	4	—	4
,, secondary	8	7	—	—	—	—	—	—	8	7	15
,, latent in 1st year of infection	—	—	—	—	—	—	—	—	—	—	—
,, all later stages	24	25	—	—	—	—	—	—	24	25	49
,, congenital	1	10	—	—	—	—	—	—	1	10	11
Soft Chancre	—	—	—	—	—	—	—	—	—	—	—
Gonorrhoea, 1st year of infection	—	—	—	—	39	11	—	—	39	11	50
,, later	—	—	—	—	3	—	—	—	3	—	3
7. Number of cases which ceased to attend after completion of treatment but before final tests of cure (see Item 15)	20	12	—	—	27	2	—	—	47	14	61
8. Number of cases transferred to other centres or to institutions, or to care of private practitioners	26	12	—	—	45	9	—	—	71	21	92
9. Number of cases remaining under treatment or observation on 31st December	180	123	—	—	108	43	13	6	301	172	473
TOTALS OF ITEMS 5, 6, 7, 8 AND 9	289	207	3	—	282	79	214	108	788	394	1182

	Syphilis		Soft Chancre		Gonorrhoea		Conditions other than Venereal		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Total
10. Number of cases in the following stages of syphilis included in Item 6 which failed to complete one course of treatment :—											
Syphilis, primary	2	—	—	—	—	—	—	—	2	—	2
,, secondary	5	2	—	—	—	—	—	—	5	2	7
,, latent in 1st year of infection	—	—	—	—	—	—	—	—	—	—	—
,, all later stages	10	9	—	—	—	—	—	—	10	9	19
,, congenital	—	—	—	—	—	—	—	—	—	—	—
11. Number of attendances :—											
(*a*) for individual attention of the medical officers	3186	2315	17	—	1957	543	681	284	5841	3142	8983
(*b*) for intermediate treatment, e.g. irrigation, dressing	543	417	80	—	9624	3903	875	657	11122	4977	16099
TOTAL ATTENDANCES	3729	2732	97	—	11581	4446	1556	941	16963	8119	25082
12. In-patients :—											
(*a*) Total number of persons admitted for treatment during the year	4	4	—	—	3	8	1	—	8	12	20
(*b*) Aggregate number of "In-patient days" of treatment given	203	107	—	—	77	305	6	—	286	412	698

	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.
13. Number of cases of congenital syphilis in Item 3 above classified according to age periods	1	1	2	—	2	2	1	4	6	7

	Arsenobenzene Compounds	Mercury	Bismuth
14. Chief preparations used in treatment of Syphilis :—			
(*a*) Names of preparations	Novostab	—	Chlorostab
(*b*) Total number of injections given (out-patients and in-patients)	3038	—	3529

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
If not, in what way are they modified ?	—

	Microscopical		Serum Tests		
	for spirochetes	for gonococci	Wassermann	Others for Syphilis	for Gonorrhoea
16. Pathological Work :—					
(*a*) Number of specimens examined at and by the medical officer of the treatment centre	63	—	—	—	—
(*b*) Number of specimens from patients attending at the treatment centre sent for examination to an approved laboratory	—	1823	1084	44	209

Statement showing the services rendered at the Treatment Centre during the year, classified according to the areas in which the patients resided.

Name of County or County Borough (or County in the case of persons residing elsewhere than in England and Wales) to be inserted in these headings.	Portsmouth	Hampshire	West Sussex	Isle of Wight						Total
A. Number of cases in Items 3 and 4 from each area found to be suffering from :—										
Syphilis	126	26	2	2						156
Soft Chancre	1	1	—	—						2
Gonorrhoea	186	44	5	6						241
Conditions other than venereal	243	43	8	1						295
TOTAL	556	114	15	9						694
B. Total number of attendances of all patients residing in each area	21065	3415	524	78						25082
C. Aggregate number of "In-patient days" of all patients residing in each area	561	18	119	—						698
D. Number of doses of approved arseno-benzene compounds given in the out-patient Clinic and In-patient Department to patients residing in each area	2384	558	64	32						3038

TUBERCULOSIS.

CO-ORDINATION.—During the year application was made to the Minister of Health for the approval of Wards 9A and 9B at Saint Mary's Hospital for the treatment of tuberculosis. The Minister gave his approval, and by so doing enabled the Hospital to play an important part in the City's Tuberculosis Scheme. The Tuberculosis Officer who directs the work of the Dispensary also visits, at least once a week, all patients undergoing institutional treatment, *i.e.* 70 beds at Saint Mary's Hospital, 32 at the Infectious Diseases' Hospital, and 35 beds at Langstone Sanatorium, and can thus supervise each phase of the treatment with resultant economy and avoidance of overlapping.

NOTIFICATIONS.—During the year under review there were 381 persons notified to the Medical Officer of Health as suffering from Tuberculosis, or 82 less than last year. The decrease was most marked in the pulmonary form of the disease.

An endeavour has been made during the past few years to follow up and ascertain the condition and whereabouts of all notified patients added to the register of the Medical Officer of Health each year since the inception of the Tuberculosis Scheme in 1913. Thousands of enquiries have been made by the Medical and Nursing Staffs, and it is pleasing to be able to report that ascertainment is now complete, the number on the new register having been reduced to 1,405 on December 31st, 1935.

DEATHS.—The total number of deaths from tuberculosis (all forms) was 211, equivalent to a death rate of 0.84 per 1,000 living, the second lowest rate ever recorded in the City (see Table XXV). There were 192 deaths from pulmonary tuberculosis, giving a death rate of 0.76 as compared with 0.79 last year, and 19 deaths from non-pulmonary tuberculosis,

equivalent to a death rate of 0.08 as compared with 0.07 last year. Reference to Table XXV will show that the non-pulmonary death rate is the lowest ever recorded. Table XXV and the graph on page 70 indicate the gradual decline in the number of deaths from tuberculosis since 1879, a decline towards which many factors have contributed, chief of which are no doubt the anti-tuberculosis measures inaugurated in 1913 with the opening of the Tuberculosis Dispensary, Anglesea Road, the steady process of educating the public on measures of prevention, the improved housing conditions, and the general increase in the standard of living of the people.

SANATORIUM TREATMENT.—A further stage was reached in the matter of providing more adequate and up-to-date facilities for sanatorium treatment in regard to which representations have been made from time to time by the Minister of Health. On the recognised basis of 75 beds for every 100 deaths in one year, Portsmouth requires 150 beds of which 100 should be hospital beds, and 50 sanatorium beds. There is a sufficiency of hospital beds at Saint Mary's Hospital and the Infectious Diseases' Hospital, but in regard to sanatorium treatment Langstone provides only 35 beds (30 during the winter time) of which 12 are in wooden chalets.

An alternative site was reported upon, namely, the area south of Saint Mary's Hospital. This site would have many advantages, in that, due to its proximity to Saint Mary's Hospital there would be no need to erect an administrative block, or a kitchen, or a mortuary, laundry, etc. In addition, the specialised services of a large modern hospital would be available for the treatment of the disease, *i.e.* X-ray department, operating theatre, etc. Whilst on grounds of economy this would be an ideal site there are certain disadvantages connected therewith, and the Ministry of Health have been consulted on the matter. By the end of the year no definite decision had been made.

TABLE XXV.

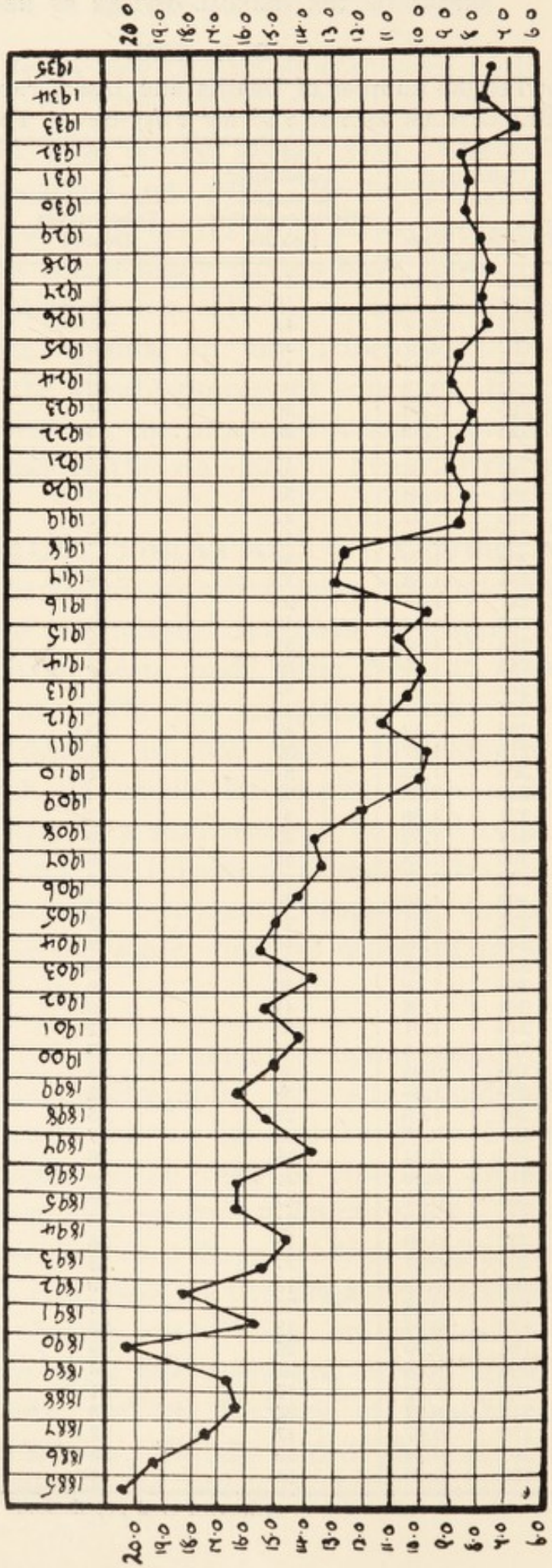
Table showing the number of Deaths and Death-rates per 1,000 living from TUBERCULAR DISEASES for Fifty-Seven Years (1879 to 1935).

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
1935	192	0.76	15	4	19	.08

* Calculated on estimated civil population.

TABLE XXVI.

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



THE WORK OF THE TUBERCULOSIS DISPENSARY AND SANATORIA.

By I. M. McLACHLAN, M.D., Ch.B., B.Hy., D.P.H.
(Tuberculosis Officer and Senior Assistant M.O.H.)

Dispensary.—The work carried out at the Dispensary in the control of tuberculosis is of paramount importance. The Dispensary may be regarded as the "sorting house." Here cases referred by practitioners are seen and examined—clinically, bacteriologically and radiologically. A report is sent to the doctor stating the diagnosis and suggestions as to treatment. The case may either be treated at home, in Sanatorium, or Hospital or visit the Dispensary periodically for examination. Pamphlets are also issued giving hints as to the care of a tuberculosis patient, and as to the early signs of the disease.

The number of contacts examined is still far from satisfactory, but shows a definite increase over previous years. This branch of the work is very important as it is only by this means that the condition can be diagnosed and treatment commenced at an early date.

Every new case attending the Dispensary, besides clinical examination, has the sputum examined and an X-Ray plate taken.

Table XXVIII shows statistically the work done at the Dispensary. There is a slight diminution in the number of attendances of patients. This is accounted for by the increase in the number of patients under domiciliary care. The number of visits made to the homes of tuberculous patients by the nurses shows an appreciable increase.

Institutional.—Cases are admitted either to Sanatorium Ward at the Infectious Diseases Hospital, to Saint Mary's Hospital or Langstone Sanatorium. Occasionally patients are sent to Ventnor, Bournemouth or Bramshott. Cases of

non-pulmonary tuberculosis are sent to the Lord Mayor Treloar Cripples' Hospital, Alton.

Tables XXX and XXXI give statistical details of the cases referred for Hospital, or Sanatorium treatment.

The Tuberculosis Officer pays a weekly consultative visit to the Hospitals and Sanatorium. There is a steady demand for beds and on occasions a considerable waiting list for admission.

Treatment.—The basis of treatment in tuberculosis is rest in bed—this cannot be too strongly emphasised—fresh air and regulated diet. There are many other auxiliary treatments, the method employed depending entirely on the condition of the patient. All modern methods of treatment are available at Saint Mary's Hospital and Infectious Diseases Hospital. These consist of Artificial Pneumothorax-aurotherapy, sanocrysin, myocrysin, solganol, lopion, nordalin and tuberculin. In certain cases surgical means such as phrenic exairesis or evulsion and thoracoplasty are employed.

(*a*) Gold Treatment.—Of the 34 cases who have received gold treatment and who have completed the course, 11 developed complications of albuminuria, dermatitis, joint pains, etc., necessitating the stopping of the injections. The results to date are on the whole very encouraging and justify the necessarily heavy expenditure.

(*b*) Treatment by Nordalin.—This is a comparatively new form of treatment. Altogether 56 cases received at least one course of treatment. The appended Table shows an analysis of the cases treated.

No. of cases.	Improved.	No change.	Worse.	Died.	Still on treatment.
56	17	19	3	5	12

Of the 56 cases treated, 26 received one or more courses.

The results tend towards the conclusion that further trial be given to this preparation.

(*c*) TREATMENT BY PNEUMOTHORAX.—The work of the pneumothorax clinic established at the Infectious Diseases Hospital continues. Cases are carefully selected, induction is performed and refills are carried out at stated intervals. All stages of the treatment are controlled by X-Ray examination at Saint Mary's Hospital.

No one form of treatment can be said to be a cure of tuberculosis, but a careful combination of treatments can and will effect a cure.

TUBERCULOSIS.

TABLE XXVII.

NEW CASES AND MORTALITY DURING 1935.

Age Periods	* New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
0 to 1	—	1	8	2	—	1	7	—
1 ,, 5	—	2	5	5	1	1	3	1
5 ,, 15	5	7	15	10	—	—	2	1
15 ,, 25	28	43	4	5	17	18	1	—
25 ,, 35	42	39	2	4	22	25	2	—
35 ,, 45	42	29	—	1	28	13	—	1
45 ,, 55	22	26	—	—	26	7	—	—
55 ,, 65	14	12	1	—	12	9	—	1
65 & upwards	6	1	—	—	7	5	—	—
TOTALS	159	160	35	27	113	79	15	4

* 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 211 deaths registered from all forms of tuberculosis, 26, or 12 per cent., had not been notified during life as suffering from the disease.

TABLE XXVIII.

Showing the work of the Dispensary during 1935.

Diagnosis	Pulmonary				Non-Pulmonary				Total				Grand Total
	Adults		Children		Adults		Children		Adults		Children		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
A.—New Cases examined during the year (excluding contacts) :—													
(*a*) Definitely tuberculous	107	85	6	5	7	5	14	11	14	91	20	16	241
(*b*) Diagnosis not completed	....	....	....	....	....	....	....	....	6	5	2	1	14
(*c*) Non-tuberculous	....	....	....	....	....	....	....	....	59	82	46	37	224
B.—Contacts examined during the year :—													
(*a*) Definitely tuberculous	1	5	....	3	....	....	....	....	1	5	....	3	9
(*b*) Diagnosis not completed	....	....	....	....	....	....	....	....	1	1	2	2	6
(*c*) Non-tuberculous	....	....	....	....	....	....	....	....	24	71	42	38	175
C.—Cases written off the Dispensary Register as :—													
(*a*) Recovered	15	25	8	3	....	....	7	13	15	25	15	16	71
(*b*) Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous)	....	....	....	....	....	....	....	....	87	163	89	79	418
D.—Number of Cases on Dispensary Register on December 31st :—													
(*a*) Definitely tuberculous	441	355	42	40	26	28	72	69	467	383	114	109	1073
(*b*) Diagnosis not completed	....	....	....	....	....	....	....	....	7	6	4	3	20

1. Number of cases on Dispensary Register on January 1st	1193	2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years	56
3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of"	201	4. Cases written off during the year as Dead (all causes)	135
5. Number of attendances at the Dispensary (including Contacts)	4683	6. Number of Insured Persons under Domiciliary Treatment on the 31st December	156
7. Number of consultations with medical practitioners :— (*a*) Personal	65	8. Number of visits by Tuberculosis Officers to homes (including personal consultations)	65
(*b*) Other	1338		
9. Number of visits by Nurses or Health Visitors to homes for Dispensary purposes	5638	10. Number of :— (*a*) Specimens of sputum, etc., examined	1587
		(*b*) X-ray examinations made in connection with Dispensary work	661
11. Number of "Recovered" cases restored to Dispensary Register, and included in A(*a*) and A(*b*) above	Nil	12. Number of "T.B. plus" cases on Dispensary Register on December 31st	341

TABLE XXIX.

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.	
Class T.B. minus	Quiescent	6	2	....	3	13	....	4	3	....	....	1	....	13	19	....	32
	Not quiescent	5	7	....	4	3	1	....	2	1	....	....	....	9	12	2	23
	Died in Institution	3	3	....	1	1	....	....	....	....	....	....	....	4	4	....	8
Class T.B. plus Group I	Quiescent	4	....	....	2	1	....	3	3	1	....	....	....	9	4	1	14
	Not quiescent	8	1	....	3	....	....	2	2	....	1	....	1	14	3	1	18
	Died in Institution	2	....	....	....	....	....	1	2	....	1	....	....	4	2	....	6
Class T.B. plus Group II	Quiescent	1	1	....	5	2	....	6	1	....	1	....	....	13	4	....	17
	Not quiescent	8	4	....	9	7	....	6	2	2	1	....	....	24	13	2	39
	Died in Institution	7	1	....	3	3	....	2	1	....	1	1	....	13	6	....	19
Class T.B. plus Group III	Quiescent	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....
	Not quiescent	7	6	....	2	1	....	4	3	....	3	1	....	16	11	....	27
	Died in Institution	6	6	....	4	....	....	2	....	....	....	1	....	12	7	....	19
TOTALS (pulmonary)		57	31	....	36	31	1	30	19	4	8	4	1	131	85	6	222
Bones and Joints	Quiescent	....	....	....	1	....	2	1	....	3	....	....	10	2	....	15	17
	Not quiescent	....	....	....	....	....	1	....	....	....	....	....	....	....	....	1	1
	Died in Institution	....	....	....	....	....	....	....	....	....	1	....	....	1	....	....	1
Abdominal	Quiescent	....	....	1	....	....	2	....	....	3	....	....	....	....	....	6	6
	Not quiescent	....	....	4	1	....	....	....	....	1	....	....	....	1	....	5	6
	Died in Institution	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....
Other Organs	Quiescent	....	....	....	....	....	2	....	1	....	....	....	....	....	1	2	3
	Not quiescent	....	....	....	1	1	....	....	....	....	....	....	....	1	1	....	2
	Died in Institution	....	....	....	....	....	....	....	....	....	....	1	....	....	1	....	1
Peri-pheral glands	Quiescent	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....
	Not quiescent	....	....	1	....	....	....	....	....	....	....	....	....	....	....	1	1
	Died in Institution	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....	....
TOTALS (non-pulmonary)		....	....	6	3	1	7	1	1	7	1	1	10	5	3	30	38

TABLE XXX.

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.	3	1	4
II.	Yellow	Up all day. Specified light ward duties. Limited slow walking exercise.	1	1	2
III.	Green	Up all day. Specified ward duties, requiring more exertion. Further walking exercise (1 mile).	2	6	8
IV.	Red	Up all day. Specified ward duties, requiring still more exertion. Long distance walking, increasing.	35	10	45

64 Patients were discharged, but 5 were bed cases (not graded).

TABLE XXXI.

Total Number of Patients treated at various Sanatoria, Hospitals and Colonies during 1935.

Sanatorium, Hospital or Colony	Resident at beginning of year	Admitted during year	Discharged or died during year	Remaining end of year	Totals
Langstone Sanatorium	18	62	64	16	80
Beach Lodge	6	13	11	8	19
Milton Hospital	25	108	104	29	133
Saint Mary's Hospital	58	156	155	59	214
Royal National Sanatorium, Bournemouth	1	—	1	—	1
Royal National Hospital for Consumption, Ventnor	2	1	2	1	3
Lord Mayor Treloar Cripples' Hospital	20	17	20	17	37
King George V Sanatorium for Sailors, Bramshott	1	1	1	1	2
Royal Sea Bathing Hospital, Margate	—	3	—	3	3
Brompton Hospital Sanatorium, Frimley	1	—	1	—	1
Totals	132	361	359	134	493

CANCER.—For the first time since 1933 there was no increase in the number of deaths from cancer. The number of deaths was 410, equivalent to a cancer death rate of 1.63 per one thousand living, as compared with 420 deaths, and a death rate of 1.68 for the previous year.

With the help of the *Portsmouth Evening News*, an appeal was launched during the year for the raising of funds to increase the amount of radium at the Royal Hospital, which is the centre for treatment in Portsmouth. The amount subscribed to date is £1,276.

PREVENTION AND TREATMENT OF BLINDNESS.—I am indebted to Mr. E. Tunnicliffe, Superintendent to the Blind Persons Act Committee, for the following information :—

" The City Council, working through their Blind Persons Act Committee, and in combination with the local Voluntary Association for the Blind, make contributions to the funds of the local Eye Hospital. The various agencies are linked up with the Local Authority through the medium of a member of the City Council who is also a member of (1) the Blind Persons Act Committee, (2) the Eye Hospital Committee, and is also actively engaged in the work carried on by the local Voluntary Association for the Blind.

During the year the Home for Aged and Infirm Blind Persons was officially opened by the Right Worshipful the Lord Mayor of Portsmouth, Councillor Frank J. Privett, J.P. This home, which is the first of its kind to be established by a local authority, has accommodation for 10 blind men and 16 blind women.

The revised scheme and regulations relating to domiciliary assistance to unemployable and other blind persons adopted by the Local Authority became operative under the administration of the Portsmouth Voluntary Association for the Blind as from 1st April, 1935. The scheme has worked well."

MATERNITY AND CHILD WELFARE

MATERNITY AND CHILD WELFARE.

The following are the main features of interest in this section of the Department during the year under review :—

(*a*) a marked decrease in the maternal mortality rate as compared with the previous year ;

(*b*) a slight increase in the infantile mortality rate ; and

(*c*) the development of the Maternity and Child Welfare Service on the representation of the Ministry of Health.

(A) MATERNAL MORTALITY AND MORBIDITY.

STATISTICS.—The maternal mortality rate for 1935 was 3.91 per 1,000 total births, which is slightly below that for England and Wales as a whole. Compared with the figure for the previous year (4.66) there is a considerable improvement which is doubtless the result of the stricter measures of control adopted (see last year's Report).

TABLE XXXII.

Comparison of the Maternal and Infantile Mortality Rates in Portsmouth and England and Wales during the past 12 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
1935	2.87	3.91	3.93	46	57

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

WEARING OF MASKS.—As a further safeguard against infection all the midwives in the City were circularised as to the necessity for the wearing of masks when attending patients during confinement and when making subsequent dressings. Arrangements were made for the free issue to all midwives of a simple type of mask which could be easily sterilised.

INSTITUTIONAL TREATMENT.—On April 1st the maternity services of the Municipal Maternity Hospital, Fratton (where the maintenance costs were necessarily very high by reason of the smallness of the unit) were transferred to Saint Mary's Hospital. The City has now 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."

During the remaining nine months of the year the maternity unit at Saint Mary's Hospital became increasingly popular with mothers, no fewer than 572 being admitted. More adequate and better equipped accommodation was provided for the Ante-Natal and Post Natal Clinics at the Hospital. There expectant mothers who have booked to enter for their confinement are examined periodically before and after the event by Dr. Gilbey, one of the senior Resident Medical Officers. The number of ante-natal and post-natal clinics held at the Hospital during the year was 114, and the number of attendances was 3681.

Towards the end of the year a scheme was being considered, on the recommendation of the Ministry of Health, for the appointment of a Consultant Obstetrician to visit the maternity unit at least once a week, and to hold a Consulting Ante-Natal and Post-Natal Clinic.

NEED FOR AN ANTE-NATAL CLINIC AT COSHAM.—Another recommendation of the Ministry of Health, consequent upon a visit of one of the Ministry's Medical Officers to Portsmouth, was the need for opening another ante-natal clinic at Cosham. This district is rapidly increasing, due to the migration of the population from the more congested parts of the City, and the distance from this ward to the ante-natal clinic at Fratton prevents many expectant mothers from attending. Accordingly, towards the end of the year the Committee gave their approval for the establishment of this clinic.

CHILD WELFARE.

STATISTICS.—The number of children under one year of age who died in 1935 was 171, equivalent to an infantile mortality rate of 46, as compared with 44 for the previous year, and an average of 56.2 for the preceding 10 years. The causes of death are set out in Table XXXIII, from which it will be seen that slightly more than one half of the children died during the first four weeks, and that the principal causes contributing to the infant death rate were prematurity, pneumonia and diarrhoea, in order of numerical importance.

TABLE XXXIII.

Infant Mortality.

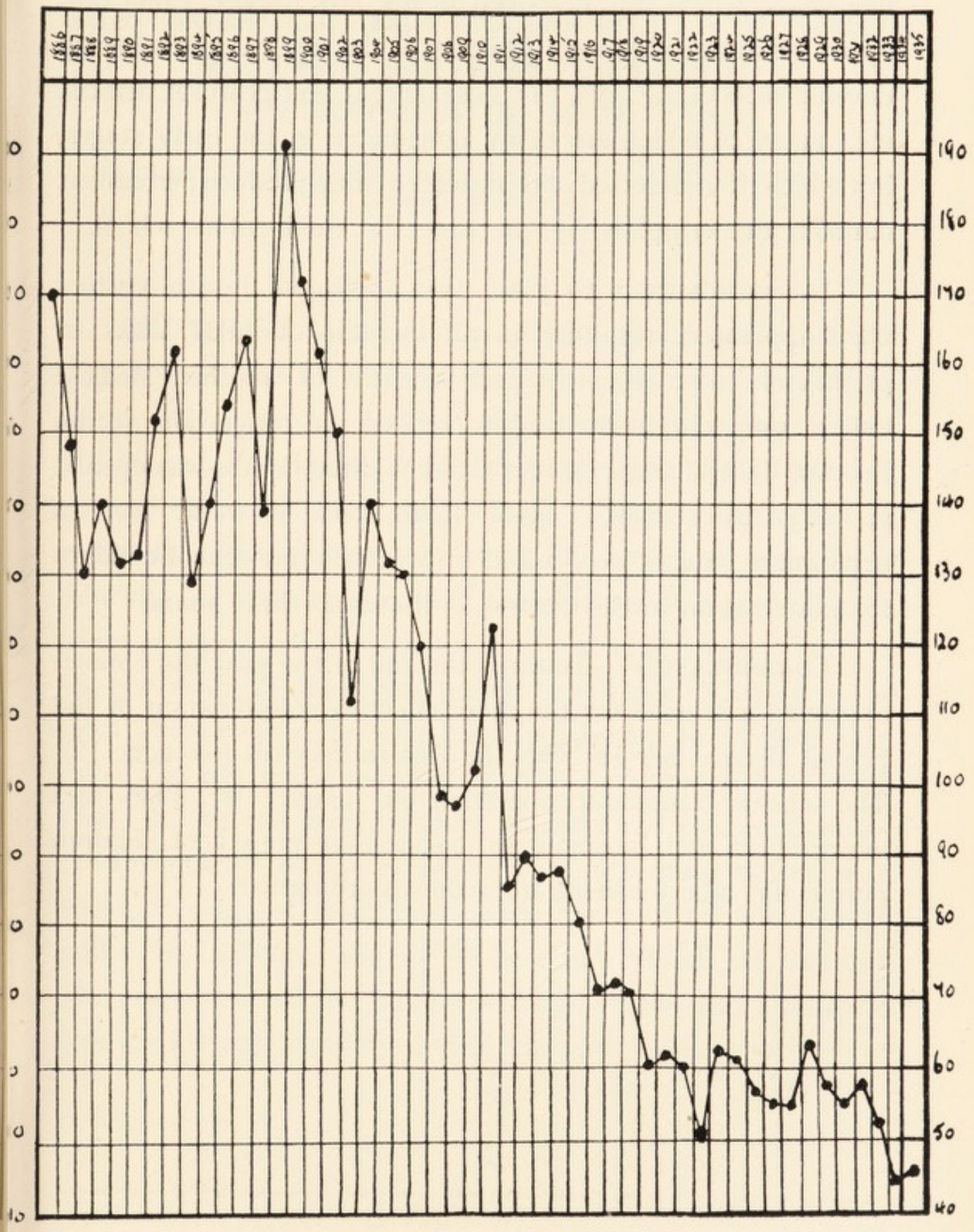
Nett Deaths from stated causes at various Ages under 1 Year of Age.

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	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	—	—	—	—	—	—	—	—	—	—
Whooping Cough	—	—	—	—	—	—	2	1	2	5
Diphtheria	—	—	—	—	—	—	—	—	—	—
Influenza	—	—	—	—	—	1	—	—	—	1
Erysipelas	—	—	—	—	—	—	1	—	—	1
Cerebro-spinal Fever	—	—	—	—	—	—	—	—	—	—
Tuberculous Meningitis	—	1	—	—	1	—	2	1	1	5
Abdominal Tuberculosis	—	—	—	—	—	—	—	—	—	—
Other Tuberculosis	—	—	—	—	—	—	1	1	1	3
Syphilis	—	—	—	—	—	1	—	—	—	1
Chicken-pox	—	—	—	—	—	—	—	—	—	—
Rickets	—	—	—	—	—	—	—	—	—	—
Meningitis (not Tuberculous)	—	1	—	—	1	2	5	—	1	9
Convulsions	2	—	—	—	2	—	1	—	—	3
Bronchitis	—	—	—	—	—	1	1	1	—	3
Pneumonia (all forms)	2	1	2	1	6	7	4	6	4	27
Gastritis	—	—	—	—	—	1	1	—	1	3
Diarrhoea and Enteritis	2	—	3	1	6	5	5	2	1	19
Congenital Malformations	4	1	—	1	6	4	—	1	—	11
Atrophy, Debility and Marasmus	7	—	—	—	7	3	4	—	—	14
Premature Birth	42	7	1	—	50	2	—	—	—	52
Injury at Birth	—	—	—	—	—	—	—	—	—	—
Atelectasis	10	—	—	—	10	—	—	—	—	10
Icterus Neonatorum	—	—	—	—	—	—	—	—	—	—
Pemphigis Neonatorum	—	—	—	—	—	—	—	—	—	—
Suffocation, Overlying	1	—	—	—	1	—	—	—	—	1
Other Causes	1	—	1	—	2	—	—	1	—	3
TOTALS	71	11	7	3	92	27	27	14	11	171

Nett Births in the year—Legitimate 3484
Illegitimate 223

TABLE XXXIV.

Chart showing the number of Deaths under 1 year of age to 1,000 Births in Portsmouth, 1886 to 1935.



THE PRE-SCHOOL CHILD.—The scheme to extend the examination and visitation of children between one and five years, which was described in my last Report, came into operation during the year. 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.

In accordance with plan, two additional health visitors were appointed, resulting in an increase of 4,834 visits to pre-school children; the part services of another Medical Officer were obtained; and to relieve the congestion at the Fratton Central Clinic, a new Child Welfare Centre was opened at St. Alban's Hall, Copnor Road, once a week. As an experiment parents were asked to bring the pre-school children for examination to the Centres at the usual clinic hours.

CO-ORDINATION.—Towards the end of the year the Council approved a scheme for the more effective co-ordination of the School Medical Service with the Health Services (see page 12). The scheme comes into operation on January 1st, 1936, and every effort will be made to ensure that pre-school children derive the fullest benefit from the co-ordination.

THE WORK OF THE MATERNITY AND CHILD WELFARE SERVICES, INCLUDING SUPERVISION OF MIDWIVES.

By RUBY N. FOGGIE, M.B., Ch.B., *Maternity and Child Welfare Officer and Inspector of Midwives.*

MIDWIVES.—The number of midwives practising in the City was 66, and they attended 3,097 cases. Of these confinements they attended 2,585 in the capacity of midwives, and 512 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 1,095, or 42 per cent. of midwives' cases (see Table XXXV). The total amount paid by the Local Authority to medical men called in by midwives was £1,572 1s. 6d., out of which £544 6s. 9d. was received from patients and premiums under the Insurance Scheme. Midwives sent for medical assistance in 48.4 per cent. of their cases when the patient was insured under the Scheme, and in 30 per cent. where not insured. The inspection of the midwives' bags, books and appliances was carried out regularly during the year.

TABLE XXXV.

Table shewing numbers of cases and various reasons for which medical help was sought by Midwives, and notifications received from Midwives under Rule E. 33 of the Central Midwives' Board.

Cases of sending for medical help—Rule E. 33a :—			
During pregnancy—			
For abortion	29		
For albuminuria	34		
For other causes	202		
		267	
During labour—			
For Ante-partum haemorrhage	23		
For Delayed Labour	199		
For Mal-presentation	37		
For Ruptured Perineum	170		
For Retained Placenta	21		
For other causes	81		
		531	
During lying-in—			
For convulsions	1		
For rise of Temperature	22		
For Post-partum haemorrhage	21		
For other causes	66		
		110	
For the Infant—			
For still-birth	6		
For death	2		
For discharging eyes	71		
For other causes	108		
		187	
		Total	1095

No. of notifications received from Midwives in cases—	
Of death (Rule E. 33b)	3
Still-birth (Rule E. 33c)	16
Of having laid out dead body (Rule E. 33d)	1
Of liability of source of infection (Rule E. 33e)	1
In cases of artificial feeding (Rule E. 33f)	21
Total	42

TABLE XXXVI.

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	8th January
2.	Amsden	Anne Winifred	11, Tangier Road	62675	9th April, '24	4th January
3.	Bampton	Dorothy Vera	31, Collins Road	68136	25th Feb., '26	12th January
4.	Barnes	Eliza	109, Church Road	23295	26th April, '06	3rd January
5.	Barnes	Elizabeth	109, Church Road	27020	15th Oct., '08	3rd January
6.	Belcher	Dorothy M.	Royal Naval Maternity Home	86522	27th May, '33	4th January
7.	Bishop	Mildred Grace	Royal Naval Maternity Home	63232	14th Sept., '34	5th January
8.	Blake	Ellen M.	12, Haslemere Road	27693	16th Dec., '08	9th January
9.	Bragg	Sarah	118, St. Augustine Road	42180	1st May, '15	11th January
10.	Brassfield	Frances Mary	26, Besant Road	47125	11th May, '18	10th January
11.	Brinn	Rosina	63, Ophir Road	29590	30th Oct., '09	9th January
12.	Brockett	Ellen	23, Outram Road	45584	7th May, '17	9th January
13.	Caton	Kathleen	1, First Avenue, Farlington	64753	10th Dec., '24	2nd January
14.	Challis	Patty Jane	37, Aylesbury Road	4208	28th April, '04	9th August
15.	Clark	Margaret	28, Victoria Road N.	85848	10th Mar., '33	7th Sept.
16.	Clarke	Gertrude	16, Second Avenue, Cosham	17540	23rd Mar., '05	3rd January
17.	Clarke	Gwendoline	Royal Naval Maternity Home	45983	11th Aug., '17	3rd January
18.	Cowell	Mary A.	57, St. Piran's Avenue	69902	16th Dec., '26	8th January
19.	Crafts	Elizabeth	14, Alexandra Road	39421	17th Dec., '13	3rd January
20.	Diamond	Agnes Mary	"Inglenook," Havant Road, Cosham	76920	23rd Nov., '29	29th April
21.	Elliott	Mary Ann Leah	128, Prince Albert Road	5487	30th June, '04	8th January
22.	Farr	Mary	6, Longs Road	52338	10th Nov., '20	2nd January
23.	Field	Ethel Fanny	22a, Priory Crescent	54222	11th June, '21	4th January
24.	Foley	Louisa A.	8, Thurbern Road	37918	28th April, '13	21st January
25.	Foot	Alice Maud Mary	21, Essex Road	54229	11th June, '21	3rd January
26.	Gemmell	Jane Frances	15, Edgerley Gardens, Cosham	88265	25th Nov., '33	11th January
27.	Godwin	Julia	3, Dean Road, Cosham	65151	29th Jan., '25	9th January
28.	Goodman	Lucy Ann	3, Derby Road	26437	21st May, '08	2nd January
29.	Hall	Margaret Mary	Royal Naval Maternity Home	—	November, '34	7th May
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	5th January
32.	Hebington	Eliza	31, Curzon Howe Road	50981	12th May, '20	3rd January
33.	Hodge	Ada J.	73, King Street, Southsea	50992	12th May, '20	5th January
34.	Horton	Winifred	Naval Welfare Centre	66858	15th Aug., '25	2nd January
35.	Howard	Lydia	49, Wisborough Road	63413	14th June, '24	3rd January
36.	Howell	Gwendoline Mary	Municipal Maternity Hospital	83828	28th May, '32	3rd January
37.	Hughes	Mary Catherine	"Inglenook," Havant Road, Cosham	72776	20th Feb., '28	6th Sept.

ROLL OF MIDWIVES—*continued.*

	Surname	Christian Name	Address	No. of Cert.	Date of Certificate	Date of Notice 1934
38.	Jack	Emma	11, Shaftesbury Road	47280	11th May, '18	12th February
39.	Jago	Clara Sara	102, Hawthorn Crescent	23268	6th Feb., '06	4th January
40.	Jones	Elsie	27, Ashburton Road	85299	25th Nov., '32	2nd January
41.	Kean	Lucy Rowe	133, Eastfield Road	31908	30th Sept., '10	3rd January
42.	Langstreeth	Maria	69, King Street, Southsea	14211	23rd Feb., '05	2nd January
43.	Lanham	I. E.	Municipal Maternity Hospital	87639	10th Aug., '33	4th January
44.	Lee	Ethel Eliza	23, Derby Road	60963	11th Aug., '23	7th January
45.	Littler	Alice	16, Elmwood Road, Hilsea	44965	31st Oct., '16	8th July
46.	Lovett	Ellen	14, Shearer Road	48431	10th Feb., '19	4th January
47.	Malyon	Marion	200, Stamshaw Road	46160	11th Aug., '17	3rd January
48.	Martin	Elizabeth Amy	22, Milton Road	56977	10th April, '22	2nd January
49.	Moore	Emma Lilian K.	23, Oliver Road	48077	9th Nov., '18	2nd January
50.	Morey	Henrietta	" Inglenook," Havant Road, Cosham	35040	19th Nov., '11	6th Sept.
51.	Morgan	Agnes	68, Montgomery Road	44981	31st Oct., '16	3rd January
52.	Noble	Mary E.	28, Victoria Road North	86201	15th Feb., '33	8th January
53.	Packer	Mabel Elizabeth	7, St. Andrew's Road	48091	9th Nov., '18	3rd January
54.	Paul	Margaret	46, Derby Road	35805	2nd May, '12	4th January
55.	Pavier	W. G.	Royal Naval Maternity Home	78458	24th May, '30	8th February
56.	Phillips	Edith	80, Methuen Road	3388	24th Mar., '04	3rd January
57.	Quinn	Edith Emily	28, Victoria Road North	70190	16th Dec., '26	24th June
58.	Richards	Annie Kathleen	Royal Naval Maternity Home	35480	23rd Feb., '12	5th January
59.	Ricketts	Marion F.	454, Commercial Road	8755	27th Oct., '04	5th January
60.	Rumbold	Edith	" Burcott," Northern Road, Cosham	49421	9th Aug., '19	2nd January
61.	Rust	Jane	204, Powerscourt Road	40133	28th April, '14	3rd January
62.	Sansom	Maud Mary	46, Tottenham Road	40579	22nd June, '14	3rd January
63.	Stallworthy	Lydia Helen	454, Commercial Road	64077	August, '24	8th March
64.	Stevens	Johanna	" Glenlyn," Stubbington Avenue	55569	11th Oct., '21	18th April
65.	Stock	Dorothea Helena	44, Collins Road	70517	24th Feb., '27	3rd January
66.	Street	Beryl	9, Clovelly Road	38035	28th April, '13	9th January
67.	Taylor	Florence Mary	"St. Hilda," Portsmouth Rd., Portch't'r	29219	10th Aug., '09	3rd January
68.	Taylor	Lily May	3, Posbrooke Road	18246	27th April, '05	18th January
69.	Tribe	Hilda Alice F.	Royal Naval Maternity Home	91815	24th Nov., '34	10th August
70.	Trowbridge	Edith Mary	1, Collins Road	22860	28th Nov., '05	3rd January
71.	Weller	Marion Edith	45, Catisfield Road	46669	10th Nov., '17	3rd January
72.	Westgarth	Muriel Kathleen	8, Cecil Mansions, W. Parade	88777	25th Nov., '33	12th January
73.	Willcocks	May Julia	174, Chichester Road	57158	10th April, '22	14th January
74.	Winfield	Gladys Irene	2, Copythorn Road	74978	23rd Feb., '29	2nd January
75.	Wynn	Amelia	Solent Road, Drayton	35371	19th Feb., '12	3rd January

PUERPERAL FEVER AND PYREXIA.—During the year 18 cases of puerperal fever and 43 cases of puerperal pyrexia were notified, of these, 17 cases of fever and 22 cases of pyrexia were removed to or occurred in Saint Mary's Hospital, and one case of fever occurred in and was treated at the Royal Hospital.

Immediate investigation was made into every case in order that every precaution should be taken to prevent the spread of infection. Where deemed advisable the midwife attending the case was suspended from practice until it was clear that there was no further danger of infection being passed to other patients. In this connection, nose and throat swabs were, where indicated, taken from the midwife and from any other persons who had assisted in nursing the patient, and were forwarded either to Dr. Radcliffe at the Royal Hospital or the Ministry of Health Laboratory for examination for the presence of haemolytic streptococci. By means of these investigations it was made possible in most cases to trace the sources of infection and an analysis of these is given below :—

Sepsis	27	Pneumonia	2
Pyelitis	8	Salpingitis	1
Influenza	1	Toxaemia	2
Mastitis	5	Tuberculosis	3
Bronchitis	1	Other causes	11

Two outbreaks of Puerperal Fever occurred, the first in a midwife's district practice, the second in a nursing home.

In the first outbreak there were 5 cases, all of whom occurred in the practice of a midwife. The latter was immediately suspended from practice and an investigation was carried out, including the taking of throat and nose swabs which were examined by Dr. Radcliffe at the Royal Hospital and by the Ministry of Health Pathological Laboratory. As a result of these it was proved that the source of the infection was the midwife who, unknown to herself, was an innocent " carrier." Unfortunately, 3 of the 5 cases proved fatal.

In the second outbreak 4 cases were involved. Again a complete investigation was carried out including bacteriological examinations by the Ministry of Health Laboratory. In this outbreak, however, the source of infection was not definitely proved. The nursing home was closed for a week for the reception of patients and no further case of infection occurred. All the cases involved in the second outbreak made a good recovery.

COMPENSATION TO MIDWIVES.—18 Midwives were suspended from practice on account of contact with infection, and were compensated in accordance with Section 2 of the Midwives Act, 1926.

MATERNITY AND NURSING HOMES.—There are 46 Maternity and Nursing Homes registered under the provision of the Nursing Homes Registration Act, 1927. Applications for registration during the year were as follows :—

(1) Number of applications for Registration :
- (*a*) As Nursing Homes 4
- (*b*) As Maternity Homes 3

(2) Number of Homes registered :
- (*a*) As Nursing Homes 2
- (*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 2

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

ANTE-NATAL AND POST-NATAL CLINICS.—One Ante-Natal and Post-Natal Clinic is conducted weekly at the Child Welfare Centre, Trafalgar Place, to which midwives and doctors may refer their cases for opinion, and two clinics are conducted at Saint Mary's Hospital for the supervision of cases who intend to be confined in the Hospital.

At the Fratton Clinic, 373 women made 633 attendances, and at Saint Mary's Hospital 815 women made 3,681 attendances.

Ante-Natal and Post-Natal Clinics are also conducted by the Naval and Military Authorities, and these were attended by 1,026 women who made 3,864 attendances.

48.75 per cent. of the women confined attended the Ante-Natal Clinics.

BIRTH CONTROL.—Advice on Birth Control methods is given at the various Ante-Natal and Post-Natal Clinics in those cases where pregnancy would be detrimental to health, in accordance with Ministry of Health Memorandum 153/MCW.

During the year the Council granted an application from the Portsmouth Branch of the British Birth Control Association to use part of the Corporation premises at the old Maternity Hospital as a Birth Control Clinic. The application was granted for a period of six months.

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)	12,062	871	4,215
Eastney (1 afternoon a week)	8,005	420	1,861
Portsea (1 afternoon a week)	5,404	276	2,295
Stamshaw (1 afternoon a week)	6,444	333	2,342
Cosham (1 afternoon a week)	5,327	289	1,538
Copnor (1 afternoon a week)	315	38	136
Totals	37,557	2,227	12,387

Dried milk was issued from the Child Welfare Centres to 1,425 applicants—201 expectant mothers, 496 nursing mothers and 728 infants—at a total cost of £4,035. Of this sum £1,281 was recovered from the patients.

HOME VISITING.—The Health Visitors paid 26,640 visits during the year ; 3,724 were first visits to infants under one year of age, 12,811 were to children between the ages of one and five years, and 244 to expectant mothers. The visits also included those to 18 cases of puerperal fever, to 43 cases of puerperal pyrexia, and to 15 cases of ophthalmia neonatorum.

TABLE XXXVII.

	Saint Mary's Hospital	Royal Naval Maternity Home
No. of Maternity beds (exclusive of isolation and labour)	66	21
No. of Patients admitted	614	370
Average duration of stay	14 days	15 to 16 days
No. of cases delivered by :		
(*a*) Midwives	—	335
(*b*) Doctors	614	34
Cases in which medical assistance was sought by midwife	(Doctor always present)	197
No. of cases notified as :		
(*a*) Puerperal Fever	Nil	Nil
(*b*) Puerperal Pyrexia	6	11
No. of cases of pemphigus neonatorum	1	Nil
No. of infants not entirely breast-fed while in institution	7	46
No. of cases notified as ophthalmia neonatorum	1	6
Result of treatment	Recovered	Recovered
No. of Maternal deaths	2	Nil
Cause of death	1. Puerperal Sepsis 2. Myocarditis, Obstructed Labour (forceps delivery)	—
No. of foetal deaths :		
(1) Stillborn	28	11
(2) Within 10 days of birth	22	4
(3) Causes of death	Prematurity—10 Placenta praevia—4 Atelectasis—6 Ante-partum haemorrhage—1 Mal-presentation—1 Eclampsia—1 Twin pregnancy—4 Breech delivery—2 Prolapsed cord—2 Specific—1 Induction of Labour—3 Persistent Occipito Posterior—3 Occipito sacral and post-maturity—1 Craniotomy—2 Ruptured Uterus—1 Contracted Pelvis—1 Toxaemia—6 Pemphigus—1	Prematurity—3 Ante-partum haemorrhage—1 Difficult breech—2 Convulsions—2 Hydrocephalus—2 Difficult Labour—2 Post maturity—1 Accident to mother—1 Congenital heart—1

CHILDREN'S ACTS, 1908—1932.—Under these Acts, 113 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 158. At the end of the year the figures were 126 persons and 196 children. During the year 1,540 visits were paid by the Infant Protection Visitor to the various homes, which were generally speaking found to be satisfactory and the children well cared for. A number of applications to maintain children under the Act were refused for reasons such as old age, uncleanliness and overcrowding. There were two deaths among children under the care of foster mothers, but there were no prosecutions during the year.

VOLUNTARY 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 371 new cases were seen by the Medical Officer, Dr. A. Erskine Clarke, the total attendances being 3,335.

Ante-Natal and Post-Natal Clinics are also held. At the former 565 patients made 284 attendances, and at the latter 331 made 444 attendances.

A Welfare Centre is conducted by the Military Authorities at which 142 patients made 2,383 attendances. An Ante-Natal Clinic is also conducted, 130 patients making 570 attendances.

SANITARY CIRCUMSTANCES

SANITARY CIRCUMSTANCES.

WATER SUPPLY.—There is nothing to add to previous reports in respect of the water supply. Periodical analysis by the City Analyst, the results of which are given on page 123, 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—

" During the year under review the service has been maintained, the Compactor Vehicles working consistently well and giving no cause for complaint. Five horses only are engaged on Refuse Collection and with the arrival of three new vehicles on order, it is possible these will be reduced in number if not entirely dispensed with. One of the new vehicles will be of the Rear Loading type with mechanical packing device and should be a distinct advance on past and present practice, avoiding interference with pedestrians and also eliminating the risk of Loaders being injured by passing traffic as is possible when side loading on the traffic side or off side.

One hundred and twenty-two " City of Orderly " two-bin type Orderly Trucks have been obtained and placed into use for street cleansing, and these are a considerable improvement on the old wooden orderly truck.

A publicity campaign has been organised with a view to obtaining some improvement with regard to Civic Cleanliness, particularly in matters relating to Sanitary Dust Bins and Street Littering, and in this connection a 62-page Brochure for free distribution has been published, setting out the duties of the Department and also that of the general public, and the result of the campaign will be awaited with considerable interest,

Refuse disposal is still by Controlled Tipping, and this method will provide a satisfactory and economic solution for many years to come.

For the years 1931-36 inclusive, a net saving of £39,841 has been made in the cost of Refuse Collection and Disposal, and for the same period, based upon the 1930 cost of 16/4 per premises per annum, the gross saving has amounted to £60,440."

MUNICIPAL DISINFECTING FLUID.—7,840 gallons of electrolysed sea-water disinfecting fluid were manufactured at the Municipal Disinfecting Fluid plant during the year. Of this amount 2,921 gallons were issued to the public, 1,100 gallons to the public elementary schools, 2,060 gallons to the Public Swimming Baths, 420 gallons to the Children's Home Swimming Bath, 520 gallons to Langstone Sanatorium, 250 gallons to the Municipal Maternity Hospital, 150 gallons to Saint Mary's Hospital, 40 gallons to Saint Mary's Institution, and the remainder to various other institutions.

WATER OF SWIMMING BATHS AND POOLS.—During the year no complaint was received concerning the purity of the water of any of the Corporation Swimming Baths and Pools. Samples of water taken for bacteriological and chemical analysis proved satisfactory.

The new Hilsea Swimming Bath, opened during the year, has a capacity of 529,000 gallons, the sea water being pumped from the adjacent creek. An up-to-date filtration and purification plant was installed enabling a turnover of the water in the bath to be obtained once every six hours.

There are no privately owned swimming baths or pools in the City.

SANITARY INSPECTION.

Report by C. W. HALL, *Chief Sanitary Inspector.*
(Cert. R.S.I., Hons. Medallist, City & Guilds, Lond., R.P.C., Lon.)

During the year 1,716 Informal and 209 Statutory Notices were served for the abatement of nuisances under the Public Health Act.

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

35 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	391
Drains cleared in Workshops	2
Drains repaired or relaid	226
Drains ventilated or ventilating shafts repaired	60
New water-closet pans provided	82
New Pedestal closet pans provided	71
Water-closet fittings repaired	241
Flushing apparatus to water-closets provided	49
,, ,, ,, ,, in Workshops	1
Separate and additional sanitary accommodation provided	—
Water-closets disconnected from Workshops	1
,, Screened from Workshops	1
,, Ventilated	8
,, Cleansed	18
Gratings provided to gully traps	28
Glazed stoneware sinks provided	20
Sink waste-pipes repaired, trapped or renewed	141

OTHER DEFECTS.

Rain-water spouting cleansed or repaired	447
Roofs repaired	1044
Weather slating repaired or external walls protected	523
Floors, stairs or doors repaired	761
Sashes, lines, sills, glazing or sash frames repaired	1613
Damp courses provided or repaired	114
Houses or parts of houses cleansed or distempered	423
,, ,, ,, repaired	831
Sanitary dustbins provided	3
Dust chutes cleansed or repaired	5
Space beneath floors ventilated	82
Yards, stables, sties, etc., repaved	287
Overcrowding in dwelling-houses abated	7
Foundation of house concreted	7
Water supply laid on or water services repaired	47
Workshops cleaned or distempered	10
Workshop floors repaired	3

OTHER DEFECTS.—*continued.*

Workshop roofs repaired	3
Workshops or parts of Workshops repaired	15
Cooking ranges or firegrates repaired or renewed	336
Coppers repaired or renewed	104
Other nuisances in dwelling-houses abated	426

OFFENSIVE MATTER, &c.

Manure and refuse removed	23
Stagnant water removed	10
Animals removed	3
Bedding cleansed or destroyed	10

SLAUGHTERHOUSES, STABLES, &c.

Yards, stables, sties, etc., cleaned	6
Bakehouses cleansed	12

BYELAWS.

Notices under Nuisance Bye-laws complied with	1

GENERAL INSPECTION.

DWELLING HOUSES.—7,856 dwelling houses were inspected, and 16,297 re-inspections were made whilst work ordered to be carried out was in progress.

COMPLAINTS.—1,976 complaints were made at the office and received attention.

COMMON LODGING HOUSES.—97 visits were made to the six registered Common Lodging Houses.

WORKSHOPS.—516 visits were made to the Workshops, which have been well kept, and 132 visits to out-workers' premises. 6 Complaints were received from H.M. Inspector of Factories, all of which received attention.

OLD DRAINS.—1,005 old drains were tested or re-tested.

NEW DRAINS AND FITTINGS.—936 new drains were tested or re-tested and 2,661 sanitary fittings were examined.

OCCUPATION CERTIFICATES.—1,036 Occupation Certificates were issued with respect to new buildings.

SANITARY CERTIFICATES.—4 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, ten certificates relating to dwelling houses not being kept in a reasonable state of repair were granted to tenants.

RATS AND MICE (DESTRUCTION) ACT.—366 visits were made to rat infested premises, and 2 notices were served.

INFECTIOUS DISEASES.—1,597 cases of infectious diseases were visited and investigated, and 1,522 rooms were disinfected by the disinfector.

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 XXXVIII.

Premises	Number of		
	Inspections	Written Notices	Occupiers Prosecuted
Factories (including Factory Laundries)	178	7	Nil
Workshops (including Workshop Laundries)	516	21	Nil
Workplaces (other than Outworkers' premises)	102	2	Nil
TOTAL	796	30	Nil

DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORKPLACES.

Particulars	Number of Defects.			Number of offences in respect of which Prosecutions were instituted
	Found	Remedied	Referred to H.M. Inspector	
(1)	(2)	(3)	(4)	(5)
Nuisances under the Public Health Acts :—				
Want of Cleanliness	22	22	—	—
Want of Ventilation	—	—	—	—
Overcrowding	—	—	—	—
Want of Drainage of Floors	—	—	—	—
Other Nuisances	13	11	—	—
Sanitary accommodation — insufficient	—	—	—	—
Sanitary accommodation — unsuitable or defective	4	4	—	—
Sanitary accommodation — not separate for sexes	—	—	—	—
Offences under the Factory and Workshops Acts				
Illegal occupation of underground bakehouse (s. 101)	—	—	—	—
Other Offences .... (Excluding offences relating to outwork and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921	—	—	—	—
TOTAL	39	37	—	—

HOMEWORK.

Lists received twice a year from Employers	53
Number of Outworkers : Contractors	52
Workmen	275
Lists received once a year	2
Number of Outworkers : Contractors	2
Workmen	2
Outwork in unwholesome premises	—
Notices served	—
Outwork in infected premises	1

REGISTERED WORKSHOPS.

WORKSHOPS ON REGISTER AT END OF YEAR	Number
Retail Bakehouses	49
Tailoring	109
Dressmaking and Millinery	70
Upholstery	19
Laundries	12
Photography	15
Miscellaneous	319
TOTAL	593

INSPECTION AND SUPERVISION OF FOOD

MILK AND DAIRIES.

MILK SUPPLY.

During the year 988 visits were made to the registered Dairies, Cowsheds and Milkshops. There are 1,319 retail purveyors, 16 wholesale dealers in milk, and 3 cowkeepers carrying on business in the City, and these premises have all been well kept.

The number of samples taken was 566, of which 25 were found to be deficient in milk fat and 5 found to be deficient in solids-not-fat. Fines were imposed in two cases, one dismissed on payment of costs, while eight were cautioned.

GRADED MILK.—Under the Milk (Special Designations) Order, 1923, 33 licences for the sale of Certified, Grade A (Tuberculin tested), Grade A and Pasteurized Milk were issued.

During the year 187 samples of milks of special designation were examined by the Public Analyst, details of which are contained in his Annual Report (pages 106—121). In only nine samples did the milk fail to pass the " Bacillus Coli " Test.

GUINEA PIG TESTS.—In addition to the samples of milk submitted to the Public Analyst, 9 samples of ordinary and graded milks were forwarded to the Clinical Research Association, London, for examination for the presence of tubercle bacilli. The ingestion of these bacilli in milk is the cause of a large proportion of the cases of tuberculosis in children, especially of the bones, joints and abdomen. In all cases the examination of the Guinea pig failed to show the presence of tubercle bacilli.

MILK SUPPLIED TO SCHOOLS.—In connection with the scheme for the supply of milk to school-children which was inaugurated by the Education Committee at the beginning of the year, 71 samples of milk were taken from 8 retailers of pasteurised milk. Of these 8 were reported by the Public Analyst not to be in accordance with standard. The retailers were cautioned in all cases. No prosecutions took place.

FOOD AND DRUGS.

FOOD & DRUGS (ADULTERATION) ACT, 1928.

The total number of samples of food and drugs taken for analysis during the year was 1,229, of which 38, or 3 per cent., were adulterated as compared with 1.9 per cent. for the previous year. Despite the increase the percentage adulterated is still below the average for the past five years (3.1), and is considerably below the average for the past five years for England and Wales (5.1).

ACTION TAKEN.—Of the 38 adulterated samples 24 were formal samples of which 7 were " Appeal to the Cow " samples. The action taken by the Committee in regard to the remaining 17 samples was as follows :—In 7 cases no proceedings were instituted, 8 cases were cautioned by the Medical Officer of Health, and in 3 cases proceedings were instituted resulting in fines ranging from 10/- to £2, with or without costs.

Details of the samples adulterated are given by the Public Analyst in Tables A and B of his Report (pages 110 and 111). The outstanding cases of adulteration in respect of which administrative action by the Medical Officer of Health was considered necessary were those of tomatoes and pearl barley.

ARSENIC IN TOMATOES.—Information was received from the Medical Officer of Health, City of Westminster, that 10 boats of imported tomatoes, stated to contain arsenic, had been sent from Covent Garden to a wholesaler in Portsmouth. The consignment was immediately held up pending investigations. Examination of samples by the Analyst showed that though the calyxes or stalks were heavily infected with arsenic, the amount found in the tomatoes, including the calyx, did not exceed the limits recommended by the Royal Commission on Arsenical Poisoning. Instructions were therefore given for all the tomatoes in the 10 boats to be carefully wiped and the calyx removed under supervision by the Inspector, after which they were released for sale.

The presence of the arsenic was due to the fact that the tomatoes had been sprayed by the grower with an arsenical insecticide which, owing to the unusually dry weather, had not been washed off.

ADULTERATION OF PEARL BARLEY BY CHINA CLAY.—Three samples of pearl barley were found to contain nearly double the amount of mineral substance in the form of china clay than is recommended by the Ministry of Health. The clay is used to give the barley a brighter and more

polished appearance. A cautionary letter was sent to the retailers in question and a request was made to the Secretary of the local association recommending that members be apprised of the danger of selling pearl barley of this nature, and that in all cases the purchaser should protect himself by a written warrantee under Section 29 of the Food and Drugs (Adulteration) Act, 1928.

DRUGS.—Of 43 samples of drugs examined by the Public Analyst, one was found to be adulterated, *i.e.* saffron.

In addition to samples of drugs examined by the Public Analyst, 33 drugs tests, chiefly mixtures, were carried out by the City of Portsmouth Insurance Committee, the examinations being made by a London firm of analysts nominated by the Ministry of Health. Two samples were found to be below standard and fines of £1 were imposed in each case. The above information has been kindly supplied by the Clerk to the Insurance Committee.

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 1,598 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 imported eggs with indication of origin removed. A fine of £17 7s. 0d. including costs 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 :—

71 persons were registered as vendors,

8 persons were registered as manufacturers.

Ice cream is a most valuable article of food, the consumption of which in this country is rapidly increasing. It is important, therefore, to ensure a pure and wholesome supply. This is rendered difficult by the fact that ice cream like milk forms a most favourable breeding ground for bacteria, which gain ready access to the ingredients of the " mix " and of 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.

In my last Report I summarised a copy of " Instructions on the Prevention of Bacterial Contamination," embodying the results of the most recent scientific investigation and research, which I circulated to each manufacturer and vendor of ice cream in the City. At the same time District Sanitary Inspectors were directed to pay particular attention to all registered premises in their districts.

It is gratifying to be able to report that 18 samples of ice cream taken during the year under review show a marked improvement (see Public Analyst's Report, page 116). Further efforts are being made to produce still greater improvement.

CHEMICAL AND BACTERIOLOGICAL EXAMINATION OF FOOD.

This is carried out by the Public Analyst at the Laboratory in Arundel Street. The nature of the work done is clearly set out in the Analyst's Report (pp. 108—123). It represents an increasing volume of work admirably carried out by Mr. R. P. Page and his staff. Towards the end of the year arrangements were made to relieve the increasing congestion of work at the Laboratory by establishing a Hospital Laboratory at the Infectious Diseases Hospital, where the hospital swabs are now examined by the Resident Medical Officers.

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, 1935.

There is a further increase of 2,365 in the total number of samples and specimens received for examination during the year. This is almost entirely due to the additional number of swabs received for Bacteriological examination. The increase in this side of the work of the Department was so great that it was found impossible to carry on under the existing conditions and at the same time efficiently perform the Chemical work of the Department. Consequently the Diphtheritic examinations made for the Infectious Diseases' Hospital have now been transferred to that Institution, and this has greatly reduced the abnormal pressure of work.

I have to record my appreciation of the help given me, 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 I have also 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, 1935, the number of samples and specimens examined was 8,435, which may be briefly summarised as follows :—

	1935	1934
Food and Drugs Act	1,229	1,253
Graded Milks	187	123
Samples taken at Farms	66	—
Water and Sewage	555	656
Police and Coroner	14	14
Miscellaneous	52	60
Diphtheritic Material	6,332	3,964
Total	8,435	6,070

The number of samples taken in connection with The Sale of Food and Drugs Act is 1,229. This gives an average of one sample for every 203 persons in the City, or a " Sample Rate " of 4.9 samples for 1,000 persons.

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

TABLE A.

Nature of Sample	Number Examined	Number Genuine	Number Inferior	Number Adulterated	Percentage Adulterated
Milk	566	532	4	30	5.3
Condensed Milk	8	8	—	—	—
Cream	3	3	—	—	—
Tinned Cream	3	3	—	—	—
Butter	110	110	—	—	—
Margarine	44	44	—	—	—
Lard	12	12	—	—	—
Treacle	1	1	—	—	—
Golden Syrup	1	1	—	—	—
Cheese	16	14	—	2	12.5
Vinegar	3	2	—	1	33.3
Coffee	45	45	—	—	—
Cocoa	47	46	—	1	2.1
Tea	23	23	—	—	—
Rice	28	28	—	—	—
Ground Rice	7	7	—	—	—
Pepper	26	26	—	—	—
Mustard	21	21	—	—	—
Pearl Barley	23	20	—	3	13.4
Dried Fruits	38	38	—	—	—
Preserved Fruits	14	14	—	—	—
Ground Ginger	6	6	—	—	—
Lemon Curd	6	6	—	—	—
Honey	2	2	—	—	—
Sugar	14	14	—	—	—
Ice Cream	19	19	—	—	—
Self-Raising Flour	6	6	—	—	—
Baking Powder	2	2	—	—	—
Jam	2	2	—	—	—
Marmalade	2	2	—	—	—
Tinned Fruits	2	2	—	—	—
Mincemeat	4	4	—	—	—
Dripping	4	4	—	—	—
Minced Meat	2	2	—	—	—
Ground Almonds	6	6	—	—	—
Mixed Candied Peel	8	8	—	—	—
Raisins	8	8	—	—	—
Sultanas	7	7	—	—	—
Chocolate Swiss Roll	1	1	—	—	—
Chopped Suet	3	3	—	—	—
Non-Alcoholic Wine	3	3	—	—	—
Whisky	29	28	1	—	—
Gin	11	10	1	—	—
Spirit of Iodine	1	1	—	—	—
Iodine Ointment	1	1	—	—	—
Seidlitz Powder	5	5	—	—	—
Aspirin	5	5	—	—	—
Saffron	3	2	—	1	33.3
Parrish's Food	3	3	—	—	—
Liquid Paraffin	3	3	—	—	—
Bismuth Lozenge	4	4	—	—	—
Mercury Ointment	3	3	—	—	—
Camphorated Oil	4	4	—	—	—
Olive Oil	4	4	—	—	—
Tincture of Iodine	4	4	—	—	—
Almond Oil	3	3	—	—	—
Total	1229	1185	6	38	3.0

TABLE B.

ADULTERATED SAMPLES.

No.	*Nature of Sample*	*Nature of Adulteration*	*Observation*
77	Vinegar	35% Deficient in Acetic Acid	Fined 10/- and £1 1s. Costs
98	Milk	6.2% Deficient in Solids-not-Fat	Test Sample
172	Milk	7.4% Added Water	Case proved, information dismissed on payment of Costs £2 6s.
179	Cheese	2.8 grains of Tin per pound	Test Sample
180	Cheese	3.0 grains of Tin per pound	Test Sample
198	Milk	6.6% Deficient in Milk Fat	Test Sample
202	Milk	28% Deficient in Milk Fat	No proceedings taken
203	Milk	28% Deficient in Milk Fat	Test Sample
206	Milk	11.6% Deficient in Milk Fat	Taken at Farm after seeing cows milked
207	Milk	15% Deficient in Milk Fat	Taken at Farm after seeing cows milked
209	Milk	38.3% Deficient in Milk Fat	Test Sample, Private Person
262	Pearl Barley	Faced with 0.9% Extraneous Mineral Matter	Test Sample
293	Saffron	3.5% Extraneous Mineral Matter	Test Sample
384	Pearl Barley	0.8% Extraneous Mineral Matter	Test Sample
419	Pearl Barley	0.7% Extraneous Mineral Matter	Cautioned by M.O.H.
420	Milk	15.0% Deficient in Milk Fat	Fined £2
544	Milk	12.6% Deficient in Milk Fat	No proceedings taken
545	Milk	5.0% Deficient in Milk Fat	No proceedings taken
546	Milk	5.0% Deficient in Milk Fat	No proceedings taken
548	Milk	6.6% Deficient in Milk Fat	Taken at Farm after seeing cows milked
549	Milk	10.0% Deficient in Milk Fat	
550	Milk	5.0% Deficient in Milk Fat	
623	Milk	8.0% Deficient in Milk Fat	Cautioned by M.O.H.
626	Milk	10.0% Deficient in Milk Fat	Cautioned by M.O.H.
627	Milk	6.6% Deficient in Milk Fat	Cautioned by M.O.H.
628	Milk	10.0% Deficient in Milk Fat	Cautioned by M.O.H.
651	Milk	13.3% Deficient in Milk Fat	Test Sample, Private Person
654	Milk	5.0% Deficient in Milk Fat	No proceedings taken
655	Milk	10.0% Deficient in Milk Fat	No proceedings taken
658	Milk	13.3% Deficient in Milk Fat	Taken at Farm after seeing cows milked
659	Milk	18.3% Deficient in Milk Fat	
815	Milk	35.0% Deficient in Milk Fat	Cautioned by M.O.H.
816	Milk	5.6% Added Water	Cautioned by M.O.H.
823	Milk	7.0% Added Water	Test Sample, Private Person
824	Milk	7.0% Added Water	Test Sample, Private Person
854	Milk	14.0% Deficient in Milk Fat	Cautioned by M.O.H.
943	Milk	30% Deficient in Milk Fat	Test Sample, Private Person
1160	Cocoa	75% of Cane Sugar	Test Sample

TABLE C.

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

	Year	Samples Examined	Number Adulterated	Percentage Adulterated
PORTSMOUTH	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
do.	1935	1,229	38	3.0
ENGLAND AND WALES	1934	140,583	7,451	5.3

MILK.

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

TABLE D.

	Year	Samples Examined	Number Adulterated	Percentage Adulterated
PORTSMOUTH	1931	615	27	4.3
do.	1932	580	20	3.4
do.	1933	580	28	4.8
do.	1934	522	14	2.5
do.	1935	566	30	5.3
ENGLAND AND WALES	1934	76,930	5,506	7.2

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	3.78	8.90	12.68	51
February	3.61	8.94	12.55	42
March	3.91	8.94	12.85	44
April	3.73	8.86	12.59	47
May	3.74	9.10	12.84	42
June	3.56	8.81	12.37	46
July	4.02	8.99	13.01	33
August	3.61	8.89	12.50	42
September	3.80	8.98	12.78	39
October	4.11	9.23	13.34	43
November	4.18	9.10	13.28	49
December	4.22	9.06	13.28	51
Average 1935	**3.77**	**8.97**	**12.74**	**529**
,, 1934	**3.98**	**9.00**	**12.98**	**360**
,, 1933	**3.83**	**8.90**	**12.73**	**422**

FARMERS' SAMPLES.

Sixty-three samples of Milk were taken during the year, representing the milk supplied to Retailers of the City, and of these ten were found to be adulterated. In three cases a letter of caution was sent by the M.O.H.; no proceedings were instituted in the other seven cases, for after visiting the farm and seeing the cows milked, it was found the milk did not come up to the Legal Standard.

MILK SUPPLIED TO LOCAL INSTITUTIONS.

Sixty-five samples were obtained from St. Mary's Hospital, Kingston Prison and the various Hospitals and Institutions in the City, and of these two were found to be adulterated. In each case a letter of caution was sent by the M.O.H.

AGRICULTURAL PRODUCE (GRADING AND MARKING) ACT, 1928.

Merchandise Marks Act, 1926 and Orders in Council made thereunder. During the year 1,598 visits were made to business premises to see that the provision of these Orders are being complied with. One Retailer was proceeded against for non-compliance with the Orders and fined £17 7s. 0d., including Costs. Otherwise it has been found that these new Orders are being complied with by the numerous tradesmen in the City in a satisfactory manner.

CERTIFIED MILK.

(Examined 27; Passed 27; 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 'Bacullus Coli' must be absent from one-tenth part of a cubic centimetre of the Milk."

The 27 samples examined contained an average of 1,817 Bacteria per cubic centimetre, and none of the samples failed to comply with the Bacillus Coli Test.

The average amount of Fat was 4.28 per cent., and of Solids-not-Fat 9.29 per cent.

The results show a very high standard of cleanliness and quality, and represent almost the ideal in milk production.

GRADE A. (TUBERCULIN TESTED) MILK.

(Examined 77 ; Passed 68 ; Rejected 9.)

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 Bacillus Coli must be absent from one-hundredth part of a cubic centimetre of the Milk." The milk must not be heated at any stage in its production. It is delivered to the Retailers in sealed churns and bottled locally.

The 77 samples examined gave an average of 5,596 Bacteria per cubic centimetre, and on 9 occasions the Milk failed to satisfy the conditions laid down for the Bacillus Coli test. Of these 9 samples, 4 were the milk from one particular farm where the water supply broke down during the hot weather. The well being dry, the failure to comply with the Regulations was doubtless due to lack of an adequate supply of water for cleansing operations.

The average amount of Fat was 4.17 per cent., and of Solids-not-Fat 9.06 per cent.

GRADE A. MILK.

(Examined 12 ; Passed 12 ; 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 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 per cubic centimetre, and Bacillus Coli shall be absent from one-hundredth part of a cubic centimetre of the Milk."

The Milk shall not be treated by 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 12 samples examined were all the product of one Farm and contained an average of 7,276 Bacteria per cubic centimetre, and on no occasion did the Milk fail to comply with the Bacillus Coli test.

The average amount of Fat was 3.54 per cent., and of Solids-not-Fat 9.00 per cent.

PASTEURISED MILK.

(Examined 71 ; Passed 63 ; Rejected 8.)

Pasteurised Milk is milk which has been heated to a temperature of " not less than 145 degrees and not more than 150 degrees Fahrenheit," and retained at this temperature for at least half an hour, after which it is to be immediately cooled to a temperature of not more than 55 degrees Fahrenheit.

If a sample is taken after pasteurisation and before delivery to the Consumer, it shall not contain more than 100,000 Bacteria per cubic centimetre of the milk.

The 71 samples examined contained an average of 32,312 Bacteria per cubic centimetre, and on 7 occasions was the number of Bacteria above the limit of 100,000 per cubic centimetre.

On one occasion the milk was found to contain Added Water.

The average amount of Fat was 3.57 per cent., and of Solids-not-Fat 8.88 per cent.

These results are of interest inasmuch as they represent the quality of the milk as sold to the children under " The Milk in Schools Scheme " by which every child who desires it may have one-third of a pint daily.

The results obtained above, whilst not being altogether unsatisfactory, show that there is still room for improvement from a Bacteriological point of view.

ICE CREAM.

It will be remembered that during the year 1934 an examination of the Ice Cream sold in Portsmouth was made during the months of June to September.

As a result of my Report it was felt that there was room for improvement in the Bacteriological quality of the Ice Cream, and consequently a circular letter was sent to all Ice Cream manufacturers by the Medical Officer of Health pointing out possible sources of contamination of their product and the precautions to be taken in order to avoid them.

During the same months of the year under review (1935), 18 samples of Ice Cream were obtained for examination, and the results show that although there is still room for improvement in some cases, there was a decided advance on the previous year when judged from a bacteriological point of view.

Ice Cream is made by three types of manufacturer, namely, the manufacturer who specialises in this product, the Dairyman who makes Ice Cream as a side-line in the dairy business, and the manufacturer who uses Custard Powder and Milk.

The Ice Cream manufacturer makes his product from Milk Powder and Butter, and therefore this should be an article of superior bacteriological quality than that made from Milk and Cream, both of which contain a large number of Bacteria, especially in the summer months, whereas Milk Powder should be a sterile substance.

Ice Cream, which is made by freezing the product obtained by boiling milk with Custard Powder, should also contain a small number of Bacteria owing to the sterilization of the material by boiling.

These remarks are fully confirmed by the results of the investigation which are shown in the following Table :—

No.	Date	Total Solids	Fat	Mineral Matter	Bacteria on Agar at 37°C. in 1 c.c.	Bacillus Coli Test		Starch	Remarks
						Present in	Absent in		
1	28th June	30.9	10.0	0.76	11,700	0.01 c.c.	0.001 c.c.	Absent	Made by Manufacturer
2	11th Sept.	33.2	11.0	0.64	95,000	0.001 c.c.	—	Absent	
3	18th Sept.	30.0	6.4	0.86	28,000	0.01 c.c.	0.001 c.c.	Absent	
4	17th July	38.3	13.8	0.80	38,000	—	0.1 c.c.	Absent	
5	17th July	36.1	10.2	0.78	1,000	—	0.1 c.c.	Absent	
6	14th Aug.	38.8	9.3	0.74	24,000	0.1 c.c.	0.01 c.c.	Absent	
7	14th Aug.	34.9	10.3	0.86	190,000	0.001 c.c.	—	Absent	
8	28th July	37.7	15.0	0.70	2,880,000	0.001 c.c.	—	Absent	Made by Dairymen
9	2nd July	41.3	27.5	0.52	576,000	0.001 c.c.	—	Absent	
10	2nd July	28.3	6.9	0.94	1,200,000	0.001 c.c.	—	Absent	
11	22nd July	34.0	8.3	0.58	Uncountable	0.1 c.c.	0.01 c.c.	Absent	
12	13th Sept.	31.5	8.8	0.96	778,000	0.01 c.c.	0.001 c.c.	Absent	
13	13th Sept.	28.9	3.3	0.72	86,000	0.001 c.c.	—	Present	Boiled Custard
14	17th July	27.6	3.2	0.70	1,600	—	0.1 c.c.	Present	
15	22nd July	29.2	2.7	0.62	Uncountable	0.1 c.c.	0.01 c.c.	Present	
16	22nd July	24.0	2.7	0.66	34,000	0.1 c.c.	0.01 c.c.	Present	
17	11th Sept.	30.2	2.6	0.66	54,000	0.001 c.c.	—	Present	
18	18th Sept.	26.8	4.5	0.56	200,000	0.001 c.c.	—	Present	

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.

The 110 samples of Butter examined during the year have all complied with these requirements.

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

	Year	Samples Examined	Samples Adulterated	Percentage Adulterated
Portsmouth	1931	112	2	1.7
do.	1932	108	0	—
do.	1933	112	0	—
do.	1934	111	3	2.7
do.	1935	110	0	—
England and Wales	1934	8,612	73	0.8

MARGARINE.

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

All of the samples were correctly labelled as required by The Food and Drugs (Adulteration) Act, 1928.

CHEESE.

Sixteen samples of Cheese were examined, all of which were made from whole milk. The average amount of Fat, calculated on the dry material, was 54 per cent.

The modern method of selling " Crustless Cheese " wrapped in Tin Foil is not without its disadvantages, for it has been found that Cheese so wrapped is liable to be contaminated with tin.

In their Report to the Local Government Board in 1908, Sir George Buchanan and Dr. Schryver state that " it would appear that the presence of Tin in amounts greater than two grains per pound must be regarded with suspicion as being liable to produce gastro-intestinal irritation."

Four of the sixteen samples referred to above were wrapped in Tin Foil. Estimations of the Tin present were made in each case, with the result that all of the samples contained Tin in amounts corresponding to 3.0, 2.8, 1.1 and 0.8 grains per pound.

It would be advantageous if a layer of grease-proof paper was inserted between the Cheese and the metallic wrapper.

GROCERIES.

The large variety of Food-stuffs which can be grouped under this heading have been very satisfactory, and there have been few cases of adulteration. This can readily be seen from Table A on page 3 of this Report.

There were, however, three samples of Pearl Barley to which Mineral Matter, of the nature of Talc, had been added. The practice of coating grains of Rice and Pearl Barley with Talc seems to be dying out and only occasionally do consignments make their appearance in the City. In the case of Pearl Barley which is needed in the preparation of " Barley Water," and as such used as a beverage for invalids, the practice of adding Talc is most objectionable and quite unnecessary.

The three samples of Pearl Barley referred to contained nearly one per cent. of this adulterant. It was found that all of these samples originated from the same source, and on representations being made to the Vendor and to the Local Trade Association, the whole stock was withdrawn from sale.

A sample which was purchased as Cocoa was found to be a mixture of Cocoa and Sugar with a small amount of Starch, such as is used for the coating of cakes. A subsequent visit to the shop and to other branches of the same firm was made, but it was found impossible to obtain the same material as Cocoa.

One sample of Vinegar was found to be deficient in Acetic Acid. This proved to be an " Artificial " Vinegar and had been made by diluting a strong and suitably coloured solution of Acetic Acid with water.

There is no Government Standard for the amount of Acetic Acid which a Vinegar should contain, but the standard adopted by the Vinegar Brewers' Association for Malt Vinegar is that of a minimum of 4 per cent. of Acetic Acid.

PRESERVATIVES.

There has been no infringement of the Public Health (Preservatives, etc. in Food) Regulations, 1925 during the year.

TOMATOES.

In November of the year under review, a complaint was received by the Medical Officer of Health that Tomatoes arriving in the City were contaminated with Arsenic.

A large number of Tomatoes were submitted for examination, and the following Report was made to the Medical Officer of Health on the matter :—

The Tomatoes were sound and in good condition but a preliminary examination showed that the Calyx, or Stalk, was coated with a Yellow Powder which, in some cases, was adherent to the skin of the Tomato and particularly in the recess surrounding the Calyx.

In some of the samples this deposit was very marked whilst in others the Tomato appeared to be quite free from it.

Chemical examination of a Calyx removed from a Tomato revealed the presence of Arsenic largely in excess of the maximum amount allowable in food as recommended by the Royal Commission on Arsenical Poisoning, 1903—namely, 1.4 parts of Arsenic per million parts of food.

Subsequent examination of 35 Calyxes showed the average amount of Arsenic contained to be 200 parts of Arsenic per million parts of Calyx.

The amount of Arsenic found in the Tomatoes, including the Calyx, ranged from a trace to 1.1 parts per million—the average amount being about 0.5 parts per million.

Experiments were made by dividing the Tomato into two parts. On one part the Arsenic was estimated without further treatment, while the other portion was carefully wiped and had its portion of the Calyx removed before estimating the Arsenic, and it was found that in the case of the cleaned portion Arsenic was either absent or only present in negligible traces.

In view of the subsequent instructions of the Medical Officer of Health, a sample of the Tomatoes as cleaned and with the Calyx removed was taken by Inspector Sinnett at a Wholesale Establishment in the City. No Arsenic could be detected in this sample.

From the results of my experiments I am of the opinion that the Calyx of the Tomatoes contained Arsenic greatly in excess of the amount which can be permitted in food with safety, but having regard to the small proportion which the weight of the Calyx bears to the total weight of the Tomato and also to the fact that the Calyx represents the inedible portion of the fruit, there is no danger to the public by the consumption of them.

As a precautionary method the wiping of the Tomatoes and the removal of the Calyx is desirable, and in the sample examined this appears to have been done in a satisfactory manner.

DRUGS.

Forty-three samples were examined under this heading and, with the exception of one sample of Saffron, all were within the prescribed limits of *The British Pharmacopoeia*.

Saffron consists of the dried stigmas, and the tops of the styles, of the plant known as "Crocus sativus." This portion of the plant is used, apart from its medicinal preparations, as a flavouring and colouring agent.

The sample to which exception was taken was extremely dirty and contained 3.5 per cent. of sandy material. It proved to be the complete stock of the Pharmacist who sold it, as on a subsequent visit to the Pharmacy no Saffron could be obtained.

POLICE AND CORONER.

Eleven cases have been investigated for the City Police involving the analysis examination of 110 articles.

Three investigations were made for the City Coroner in cases of suspected death by poisoning. In one case no poison was found in the viscera, in another death was due to Aspirin poisoning, and in a third case Mercury Ammonium Chloride was found in the room of the deceased.

MISCELLANEOUS.

Fifty-two 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 £21 12s. 6d., and this sum has been paid to the City Treasurer during the year.

BACTERIOLOGICAL EXAMINATIONS:

DIPHTHERIA.

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

	Negative	*Positive*	*Total*
Medical Practitioners	2,547	200	2,747
School Clinic	640	81	721
Infectious Diseases Hospital	2,153	711	2,864
Totals	5,340	992	6,332

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

WATER, SEWAGE AND SEWAGE EFFLUENTS.

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 the analysis on page 123.

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 550 samples from these sources.

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

TABLE OF ANALYSES OF PUBLIC WATER SUPPLY DURING 1935 BY THE PUBLIC ANALYST.

(Results expressed in parts per 100,000).

Date 1935	Source	Total Solid Residue	Volatile Solid Residue	Chlorine	Nitrogen as Nitrates	Total Hardness	Free or Saline Ammonia	Albuminoid or Organic Ammonia	Oxygen absorbed in 4 hours at 37° C.	Remarks
Jan. 9	Co.'s Main, 16, Arundel Street	30.0	2.0	1.8	0.37	22.0	Nil	Traces	Nil	Bacillus Coli absent from 50 cc. of Water
Feb. 13	do.	31.5	1.5	1.7	0.42	22.0	0.001	0.001	Nil	do.
Mar. 27	do.	30.5	1.5	1.7	0.42	21.0	Traces	0.0015	Nil	do.
April 25	do.	30.5	1.0	1.7	0.42	21.0	Traces	0.0015	Nil	do.
May 23	do.	30.5	1.0	1.6	0.33	20.0	Traces	0.001	Nil	do.
June 26	do.	30.0	2.0	1.7	0.32	21.0	0.002	0.003	0.015	do.
July 23	do.	31.5	1.0	1.7	0.38	21.0	Traces	0.002	Nil	do.
Aug. 22	do.	30.0	1.0	1.7	0.32	21.0	Traces	0.001	Nil	do.
Oct. 20	do.	30.0	1.0	1.7	0.37	21.0	Traces	0.002	Nil	do.
Nov. 21	do.	30.5	1.0	1.8	0.28	21.0	Traces	0.003	Nil	do.
Dec. 18	do.	31.0	1.0	1.8	0.34	23.0	Traces	0.0015	Nil	do·

INSPECTION OF MEAT & OTHER FOODS

SLAUGHTERHOUSES.—At the end of the year under review the number of private slaughterhouses in use was 59, or one less than the previous year. Of this number 56 were licensed slaughterhouses and 3 were registered slaughterhouses.

The number of visits paid by the Meat Inspector to slaughterhouses at all times during the year was 1,443, equivalent to an average of about two visits per week to each slaughterhouse. It will be appreciated that this number is too small to permit of proper and adequate supervision, and though the meat traders assist the Department as much as they can by surrendering obviously diseased meat, there can be no doubt that meat inspection in the City is unsatisfactory as has been frequently stated by my predecessor.

Several complaints were received from householders and shopkeepers in close proximity to slaughterhouses regarding nuisances arising from smells, noise, etc.

PUBLIC ABATTOIR.—Another step towards the erection of a Public Abattoir has to be recorded. The Committee visited Farlington and recommended to the Council that part of the old Race-course on land belonging to the Corporation be utilised as a site for a Public Abattoir. The Council approved. Further progress, however, has been delayed in view of the fact that centralised slaughtering and the construction of regional abattoirs are still under consideration by the Government with a view to the possible introduction of new legislation.

SLAUGHTER OF ANIMALS ACT, 1933.—The number of slaughtermen registered during the year under the provisions of the above Act was 172. Occasionally it has been necessary for the Meat Inspector to speak to slaughtermen about dirty knives, choppers and saws.

PROSECUTION.—For slaughtering an animal in a manner contrary to Byelaws, a slaughterman was fined £1 and 3/- costs.

MEAT REGULATIONS, 1924.—In a few instances the Meat Inspector has had to warn persons conveying meat not adequately protected from exposure to contamination during transit.

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

Beef.

Carcases of	....	41
Forequarters	lbs.	34
Hindquarter	....	1
Pieces of	lbs.	120$22\frac{1}{2}$
,,	bags	9
Ox Livers	....	165
,, ,,	lbs.	$12\frac{1}{2}$
,, Lungs	sets	166
,, Heads and Tongues		167
,, Hearts	....	123
,, Kidney Knob	lbs.	28
,, Suet	lbs.	35

Mutton.

Carcases of	....	20
Pieces of	lbs.	$155\frac{1}{2}$
Sheeps' Lungs	sets	3
,, Livers	....	6
,, ,,	lbs.	10
,, ,,	tins	3
,, Head	....	1
,, Hearts	....	27
,, ,,	bags	2
,, Kidneys	....	918

Veal.

Carcases of	....	33
Pieces of	lbs.	400

Pork.

Carcases of	....	43
Pieces of	lbs.	$433\frac{3}{4}$
Pigs' Lungs	sets	82
,, Livers	....	81
,, Heads	....	$128\frac{1}{2}$
,, Hearts	....	62
,, Plucks	....	19

Fish.

Bloaters	lbs.	70
Brill	lbs.	17
Cod	lbs.	453
,,	boxes	3
Dabs	lbs.	814
Dogfish	lbs.	532
,,	kits	2
Dories	lbs.	50
Eels	box	1
Fillets	lbs.	1720
,,	boxes	96
Gurnet	stone	3
Haddock	lbs.	674
,,	boxes	68
Hake	lbs.	$68\frac{1}{2}$
Halibut	lbs.	43
Herrings	lbs.	252
,,	boxes	18

Kippers	boxes	230
Lemon Soles	lbs.	245
Mackerel	lbs.	580
,,	boxes	28
Meagrims	boxes	2
Melts	boxes	9
Mixed Fish	boxes	4
Mullet	lbs.	106
Plaice	lbs.	152
Roes	lbs.	324
Salmon	lbs.	27
Saltfish	cases	3
Skate	lbs.	126
,,	boxes	3
Soles	lbs.	314
Sprags	lbs.	85½
Trout	lbs.	50
,,	boxes	5
Whitebait	boxes	3
Whiting	lbs.	266
Witches	lbs.	466
,,	cases	2
Crabs	....	403
,,	lbs.	36
,,	kits	6½
,,	barrels	2
Cockles	bags	4
Escallops	....	78
Lobsters	lbs.	41
Prawns	tins	102
Shrimps	boxes	23
Shrimps	baskets	4
,,	bushels	4½
Winkles	bags	2

Miscellaneous.

Bacon	lbs.	942
Brawn	lbs.	44
Chicken	....	19
,,	lbs.	17
Cheese	lbs.	2259
Chocolates	boxes	42
Dates	pkts.	57
Ducks	lbs.	3
Eggs	....	120
Fruit	dozen	25
Ham	lbs.	92½
,,	tins	5
Hares	....	2
Luncheon Sausage	lbs.	20
Pears	boxes	4
Pies	....	33
Poultry	bag	1
Puddings	....	360
Rabbits	....	1870
Salad Dressing	bottles	100
Sausages	lbs.	88
Sweets	jars	7
Tinned Goods	....	2490
Tongues	tins	3
Tomatoes	baskets	3
Turkeys	....	5

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 livestock brought into the City of Portsmouth during the year 1935 :—

By Boat from the Isle of Wight :

Cattle	809
Sheep	1,701
Swine	4,928
Calves	2,790
Horses	195

At Cosham Market :

Calves	285
Swine	1,295
Horses	4
Poultry	8,719

At Fratton Railway Cattle Docks :

Cattle	4,853
Sheep	10,764
Calves	745
Swine	4,814

At Cosham Railway Cattle Docks :

Cattle	767
Sheep	330
Calves	23
Horses	22
Swine	15

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.—298 Licences were issued for movement of 1,222 swine, and 2,614 licences were received for movement of 29,590 swine into Portsmouth. There was no outbreak of Swine Fever.

IMPORTATION OF DOGS AND CATS ORDER.—16 Notifications were received from the Customs relating to 16 dogs and one cat.

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

TUBERCULOSIS ORDER, 1925.—During the year I visited 11 cowsheds in the City, and found them in a cleanly condition. The livestock appeared healthy.

TRANSIT OF ANIMALS (AMENDMENT) ORDER OF 1931.—The vehicles I have inspected have been in a cleanly and satisfactory condition.

FOOT AND MOUTH DISEASE.—During the month of February, the City formed part of a scheduled area for the control of movement of certain livestock owing to an outbreak of this disease. 257 licences relating to 2,790 animals were issued during the restrictions.

INSPECTION OF LIVESTOCK LANDING AT THE PORT.—Towards the end of the year Livestock Inspection at the Port was commenced. No clinical evidence of any of the contagious and notifiable diseases was observed in any of the animals.

SLAUGHTERHOUSES.—Throughout the City, generally, these premises have been kept in as satisfactory a condition as possible.

PUBLIC HEALTH ACT, 1875.—Although no seizures under this Act have been necessary during the year, in a few instances articles of old stock have been found on traders' premises. In each case the goods were immediately surrendered and the traders cautioned.

SAUSAGE MANUFACTORIES.—175 Visits were made to these premises which were kept in a satisfactory manner.

HOUSING

HOUSING.

NEW HOUSES.—The total number of dwelling-houses erected or in course of erection during the year was 1,036, as compared with 1,362 last year. Of this number 390 were erected or in course of erection by the City Council.

THE COUNCIL'S FIVE YEARS' HOUSING PROGRAMME.—The third year of the Council's Five Years' Housing Programme was carried through with unabated vigour. Despite various difficulties it is pleasing to be able to report that the programme is up to time.

The following Schedule gives details of the displacement and rehousing arrangements in regard to each Area. The total number of houses dealt with, *i.e.* 321, is more than in any prevous year in the history of the City.

When compared with the corresponding year of the Council's original Five Years' Housing Programme (*vide* Health Report for the year 1933), it will be seen that a few amendments have been made with the object of facilitating the rehousing of the maximum number of tenants in Portsea.

HOUSING ACT, 1930-35.

Programme for the Year 1935-36.

DISPLACEMENTS				REHOUSING			
Year ending March 31st	Scheme	Number of Houses dealt with	Number of Persons displaced or being displaced	Number of Persons rehoused or being rehoused	Number of Dwellings erected or in course of erection	Scheme	Remarks
1935-6	Orange Street—Unicorn Street—Cumberland Street : No. 1	113	534	534	24 308	Fraser House, etc., Britain St. Wymering Housing Site	Flats Houses & Flats
1935-6	Orange Street—Unicorn Street—Cumberland Street : No. 1a	12	60	60			
1935-6	Portsea View	11	66	66	24	King Street—Chatham Row	Flats
1935-6	Hay Street—Beck Street	24	123	123	—		
1935-6	St. Paul's Place	7	25	25	28	North Street—Prince George St.	Flats
1935-6	Nancy Road	4	14	14	—		
1935-6	Mary Street	27	93	93	—		
1935-6	Kettering Terrace	13	48	48	34	Aylward Street—The Dell—Bishop Street	Flats
1935-6	Church Path North, etc. : No. 1	96	492	492	—		
1935-6	Church Path North, etc. : No. 1a	4	13	13	100	Wymering Housing Site, Contract No. 2	Houses & Flats
	Individual Unfit Houses	10	24	24	—		
	Totals for Year ending March 31st, 1936	321	1492	1492	518		

CLEARANCES.

(*a*) REPRESENTATION OF UNHEALTHY AREAS.—During the year official representations were submitted by the Medical Officer of Health in respect of the following Areas :—

(i) Unicorn Street, etc.—No. 1 Area ;
(ii) Unicorn Street, etc.—No. 1A Area ;
(iii) Portsea View Area ;
(iv) Hay Street—Beck Street Area ;
(v) St. Paul's Place Area ;
(vi) Nancy Road Area ;
(vii) Mary Street Area ;
(viii) Church Path North, etc.—No. 1 Area ;
(ix) Church Path North, etc.—No. 1A Area ;
(x) Kettering Terrace Area.

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

(*b*) PUBLIC INQUIRIES.—Public Inquiries were conducted by Ministry of Health Inspectors in regard to—

(i) Prince George Street—North Street—King Street Area ;
(ii) Unicorn Street, etc.—No. 1 Area ;
(iii) Unicorn Street, etc.—No. 1A Area ;
(iv) Portsea View Area ;
(v) Hay Street—Beck Street Area ;
(vi) Nancy Road Area ;
(vii) Mary Street Area ;
(viii) Church Path North, etc.—No. 1 Area ;
(ix) Church Path North, etc.—No. 1A Area.

(Total number of houses affected, 315)

No objections were raised in regard to the St. Paul's Place or Kettering Terrace Clearance Orders, and in consequence it was not necessary for Public Inquiries to be held.

The Minister of Health made Confirmation Orders in respect of eleven Areas, in ten of them without modification and in the remaining one with very slight modification only.

(*c*) INDIVIDUAL UNFIT HOUSES.—Demolition Orders were made by the City Council in regard to 10 dwellings represented by the Medical Officer of Health, as unfit for human habitation and incapable of being rendered so fit at a reasonable cost.

The number of houses demolished in pursuance of action taken under Section 19 of the Housing Act, 1930, was 48.

Representations were submitted by the Medical Officer of Health under Section 20 of the Housing Act, 1930, to the effect that 7 parts of buildings were unfit for human habitation and undertakings were given by the owner to execute the works necessary to render them so fit.

REHOUSING.—The Table on page 131 shows the houses erected or in course of erection during the year. It will be noted that, with the development of the Scheme, more and more families are being rehoused in Portsea each year.

FUMIGATIONS BEFORE REHOUSING.—The Scheme inaugurated last year to prevent the infestation of Council houses and the subsequent expense of disinfestation (about £5 per house)has proved very successful. 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.

As a test of the efficiency of the disinfestation, periodical inspections of Council houses were carried out during the year and in no case was the presence of vermin detected.

HOUSE INSPECTION.—The following particulars are given in the form desired by the Ministry of Health :—

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)	7856
	(*b*) Number of inspections made for the purpose	16568
(2)	(*a*) Number of dwelling houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	211
	(*b*) Number of inspections made for the purpose	633
(3)	Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	70
(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	65

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	1469

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	45
	(*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	1716
(2)	Number of dwelling houses in which defects were remedied after service of formal notices :	
	(*a*) By owners	112
	(*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	10
(2)	Numbers of dwelling houses demolished in pursuance of Demolition Orders	63

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 AND PROPAGANDA

HEALTH EDUCATION & PROPAGANDA.

"There are none which it concerns us more to know than those which affect our own health."—*St. Augustine 6th Cent., A.D.*

Not the least important of the activities of any progressive Health Department is the dissemination of knowledge, in an attractive and easily understood form, concerning the principles of healthy living and the prevention of disease. It is estimated that if everybody made full use of the knowledge which scientific research has already given us the average expectation of life at birth would be increased at least by 10 years, *i.e.* to 66 years in the case of males, and to 70 years in the case of females.

VERBAL PUBLICITY.—In addition to the continuous educative work carried out by the medical officers at the clinics and by the Health Visitors and Tuberculosis Nurses in the course of home visitation, the following addresses on health were given during 1935 by members of the Health Department Staff, viz. :—

Date	*Subject*	*Lecturer*
30th May	Portsmouth & District Friendly Societies' Council—"Medicinal Baths"	Dr. A. B. Williamson
26th June	Portsmouth & District Free Church Council—"New Ways for Old"	do.
4th Oct.	Presidential Address to the Southern Branch of Medical Officers of Health—"The Development and Future of the Public Health Service"	do.
24th Oct.	Portsmouth Civic Survey Club—"The Health Services of Portsmouth" (illustrated by a Health Film)	do.
31st Oct.	Saint Mary's Mission Women's Fellowship—"Prevention is Better than Cure"	Dr. I. M. McLachlan
7th Nov.	St. Jude's Young People's Fellowship—"The Preventive Aspect of Public Health"	do.

Staff lectures followed by discussions on general health subjects, including health propaganda, were given monthly during the winter by members of the Staff.

PRINTED PUBLICITY.—Through the kindness of the Piers, Beach and Publicity Committee, the following series of posters have been exhibited monthly in prominent places throughout the City on two of the former Empire Marketing Boards.

" Smoke Abatement " .... (January and November)	*Issued by National Smoke Abatement Society.*
" Drink More Milk " .... (February and October)	*Issued by National Milk Publicity Council.*
" Healthy Childhood " .... (March and December)	*Issued by National Council for Maternity and Child Welfare.*
" Venereal Diseases " .... (April)	*Issued by British Social Hygiene Council.*
" Cleanliness and Health " .... (May)	*Issued by Health and Cleanliness Council.*
" Care of the Teeth " .... (June)	*Issued by Dental Board of the United Kingdom.*
" No Needless Noise " .... (July)	*Issued by The Anti-Noise League.*
" Do you use the Health Services ?" .... (August)	*Issued by Central Council for Health Education.*
" Tuberculosis is Preventable " .... (September)	*Issued by National Association for Prevention of Tuberculosis.*

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. A rat film entitled, " The Rat Menace " was shown during the week in a local cinema.

PROPOSED HEALTH WEEK.—The hope that Portsmouth may hold a Health Week, expressed in my Report last year, is to be fulfilled, and towards the end of the year preparations were in full swing to stage a Health Week and Health Exhibition, the first ever held in the City, from September 14th—19th, 1936, inclusive.

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 my report on the work of the Port Sanitary Authority of Portsmouth during the year 1935.

The total number of foreign and coastwise ships entering the port each shows a slight increase as compared with the previous year.

No case of infectious disease was reported in the area during the year.

In accordance with Ministry of Health Circular, 1931, a scheme was inaugurated towards the end of the year for catching and examining rats found on ships and on the quay side. None of the rats caught by the rat-catcher and submitted to the Bacteriologist at the Royal Portsmouth Hospital showed evidence of infection by plague either macrospically or microscopically.

I desire to express my thanks to the King's Harbour Master and to H.M. Collector of Customs and staff for their cordial co-operation and valuable assistance during the year.

It is again my pleasure to record my appreciation of the excellent service readily and willingly given to me by the Port Sanitary Inspector.

To the Chairman and Members of the Portsmouth Port Sanitary Authority my thanks are due for their unfailing sympathy and support in all matters relating to port sanitation throughout the year.

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° 45′ 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	115	33,689	—	54	17	17	—
	*Motor	38	5,418	—	31	3	3	—
	Sailing	1	110	—	1	1	1	—
	Fishing	—	—	—	—	—	—	—
Total Foreign		154	39,217	—	86	21	21	Nil
Coastwise	Steamers	551	242,637	—	75	9	9	—
	*Motor	162	15,963	—	39	7	7	—
	Sailing	1	45	—	—	—	—	—
	Fishing	—	—	—	—	—	—	—
Total Coastwise		704	258,645	—	114	16	16	Nil
Total Foreign and Coastwise		858	297,862	—	200	37	37	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, coal, stone and slates, chiefly from Frederikstad, Abo, Oslo, Antwerp, Calais, St. Malo, Roscoff, Jersey, Dunkirk, Archangel, Lovisa, Transung, Nearsnes, Guernsey, Wasa and Viborg.

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 seaboards, 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 is 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.

No cases of Infectious Disease was landed from Vessels.

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 periodically by the Port Sanitary Inspector and specimen rats are taken for examination for rat plague. Twelve rats were caught by the official rat-catcher and submitted for examination to the Bacteriologist at the Royal Portsmouth Hospital with negative results.

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

TABLES E. and F.

Twelve 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	114	Nil	Nil	114
Other Nations	86	Nil	1	85

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.

The number of livestock landed at the docks from the Isle of Wight was 10,423. During the inspections of livestock no clinical evidence of the existence of any of the contagious and notifiable animal diseases was found.

I have the honour to be,

Madam and Gentlemen,

Your obedient Servant,

A. B. WILLIAMSON,

Port Medical Officer of Health.