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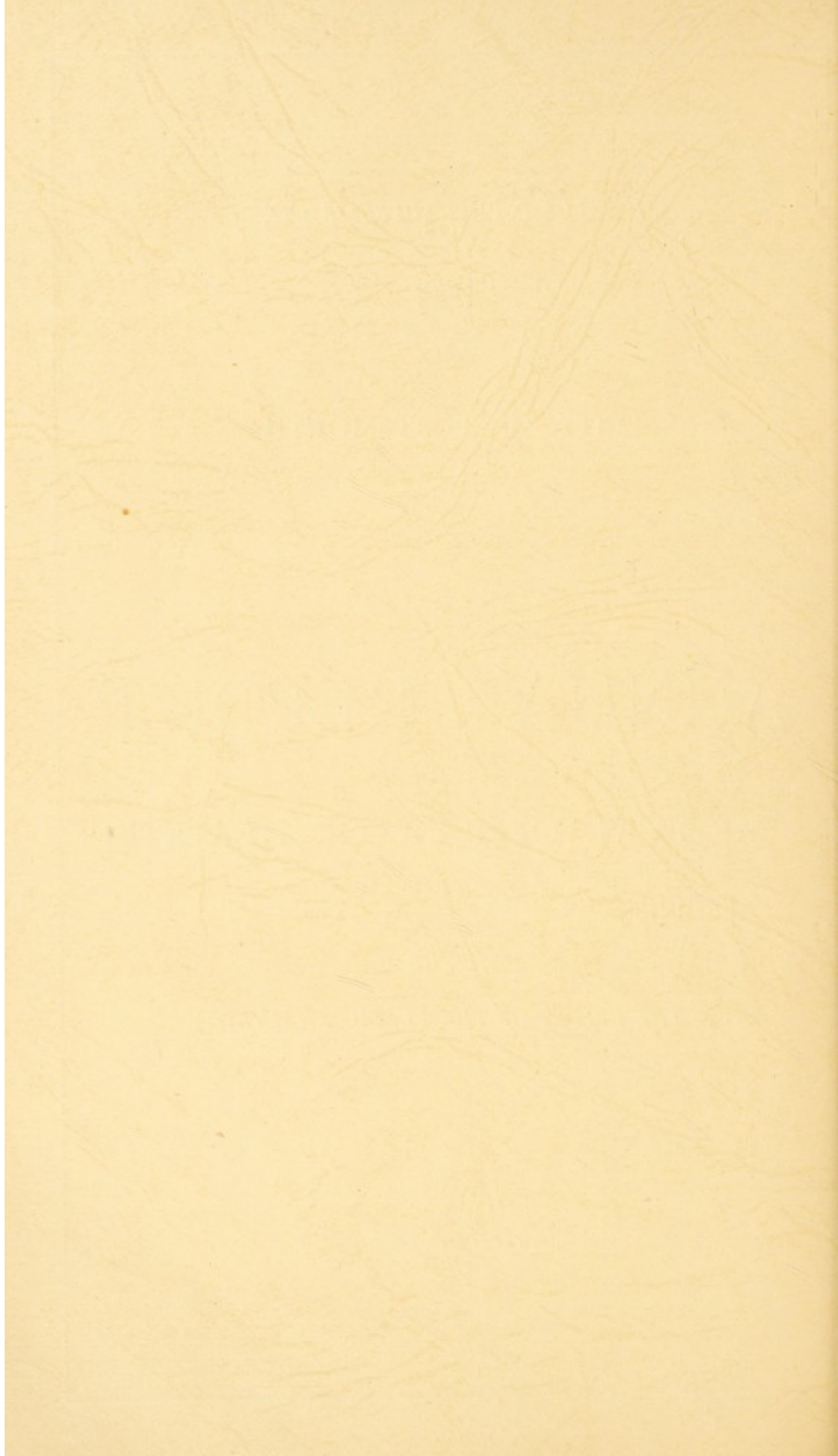
CITY OF PORTSMOUTH

ANNUAL REPORT
of the
MEDICAL OFFICER OF HEALTH
for the Year 1955

including

THE REPORT OF THE PUBLIC ANALYST

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"SALUS POPULI SUPREMA LEX"



CITY OF PORTSMOUTH

ANNUAL REPORT
of the
MEDICAL OFFICER OF HEALTH
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THE REPORT OF THE PUBLIC ANALYST

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The Right Worshipful the Lord Mayor
COUNCILLOR G. A. DAY, J.P.

HEALTH SERVICES COMMITTEE 1955 - 1956

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Vice-Chairman

ALDERMAN H. G. COOK

Aldermen

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A. H. W. POPE

L. FLAGG
M. BRESLER
E. W. MARRIOTT
MRS. H. M. KER
L. J. EVANS

The following ladies were co-opted to serve on the Committee
for housing purposes:

MRS. A. E. FERGUSON-BAKER; MRS. I. HUNGATE; MRS. W. STEVENS

SENIOR MEMBERS OF HEALTH DEPARTMENT STAFF

Medical Officer of Health,

Principal School Medical Officer,

Chief Administrative Medical Officer to the City Council and

Medical Officer of Health to the Port of Portsmouth

T. E. ROBERTS, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.

Deputy Medical Officer of Health and Deputy Principal

School Medical Officer

R. WOODROW, M.B., CH.B., D.P.H.

Senior Assistant Medical Officer of Health for Maternity and

Child Welfare

RUBY N. E. PIKE, M.B., CH.B.

Vaccination and Immunisation Medical Officer

E. D. B. WOLFE, M.B., CH.B., D.P.H.

Assistant Medical Officer of Health and Assistant Maternity and

Child Welfare Officer

AUDREY E. STEWART, M.B., CH.B., D.R.C.O.G.

Chief Sanitary and Port Health Inspector

W. F. APPLETON, F.R.San.I., F.S.I.A.

Veterinary Officer

R. SCOULAR, M.R.C.V.S.

Administrative Assistant

H. S. WOODCOCK

Executive Officer—Mental Health Service

A. F. T. ROSE

Superintendent Health Visitor

MISS E. M. BUSSBY, S.R.N., S.C.M., H.V.Cert., D.N.(Lond.)

Supervisor of Midwives

MISS D. J. KINSEY, S.R.N., S.C.M., M.T.D.

Joint Appointments with Regional Hospital Board


Consultant Chest Physician

J. H. DADDS, M.B., B.S., M.R.C.P.

Chest Physician

A. M. READ, M.R.C.S., L.R.C.P. (to 25/7/55)

J. C. HESKETH, M.B., B.S. (from 1/9/55)



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Public Health Department,
Municipal Offices,
1 Western Parade,
Portsmouth.

*To the Chairman and Members of the Health Services Committee, and to the
Chairman and Members of the Health and Housing Committee.*

My Lord Mayor, Ladies and Gentlemen,

I have the honour to present the Annual Report on the Health of the City for 1955, which follows the lines indicated by the Ministry of Health.

Figures in brackets represent the corresponding numbers or percentages for the previous year.

HEALTH STATISTICS

(pages 26 - 30)

The Registrar General's return for the year 1955 reveals a decrease of 4,900 in the total population (including Service personnel), which is now estimated to be 238,700.

Although by the end of the year some 10,569 (8,863) post-war properties were let, including 418 (881) requisitioned premises, there were still at that time 16,215 applicants on the list for rehousing (including 1,038 aged persons). It is, however, pleasing to report that the acceleration of the Health and Housing Committee's building programme, which was first noticeable in 1952, was fully maintained in the year under review. New dwellings were completed at the average rate of 190 (150) per month throughout the year. At the present time over a thousand new dwellings are actually under construction and the completion rate is expected to average approximately 120 new dwellings per month during 1956.

As will be seen from Table I on page 28, the following are the main features of interest for the year under review:—

1. A decrease in the birth rate from 15·23 in 1954 to 14·16 per thousand population (the lowest ever recorded), compared with 15·0 for England and Wales.
2. A decrease in the maternal mortality rate from 1·31 per thousand total births in 1954 to 0·29 (the lowest ever recorded), compared with 0·64 for England and Wales.
3. An increase in the neo-natal mortality rate from 14·01 per thousand live births in 1954 (the lowest ever recorded) to 18·34, compared with 17·3 for England and Wales.
4. A slight increase in the infant mortality rate from 23·71 per thousand live births in 1954 to 23·96 (both rates being amongst the lowest recorded), compared with 24·9 for England and Wales.
5. A slight increase in the general death rate from 10·76 per thousand population in 1954 (the lowest ever recorded) to 10·77, compared with 11·7 for England and Wales.

6. A further decrease in the death rate from the principal infectious diseases from 0.03 per thousand population in 1954 to 0.02 (the lowest ever recorded).

7. A further decrease in the death rate from all forms of tuberculosis from 0.185 per thousand population in 1954 to 0.09 (the lowest ever recorded), compared with 0.15 for England and Wales.

8. A slight decrease in the death rate from cancer (including leukaemia) from 1.98 per thousand population in 1954 to 1.97, compared with 2.06 for England and Wales.

Consideration of the foregoing statistics, together with the summaries and tables on pages 26-30 of the Report, shows that the maternal mortality rate and those due to the principal infectious diseases and from tuberculosis were all the lowest hitherto recorded, while the infant mortality rate was equally satisfactory, those for the past four years, which together comprise the lowest rates recorded, being: 1952—23.24 (the lowest recorded), 1953—23.80, 1954—23.71, 1955—23.96. Similarly, the general death rates for the past two years: 1954—10.76 and 1955—10.77 per thousand population are together the lowest recorded. Thus, it may well be claimed that, so far as serious illness and mortality were concerned, 1955 like the three previous years was an exceptionally healthy one for the citizens of Portsmouth. The birth rate, after remaining practically unchanged for the previous five years, shows a substantial decrease from 15.23 in 1954 to 14.16 per thousand population, the lowest ever recorded in Portsmouth, that for 1939 of 14.72 being the lowest rate hitherto.

The incidence of minor sickness, as reflected by the weekly returns of "New claims to sickness benefit," showed the now customary biennial increase (occurring principally in the first quarter of the year), although the swing was not so marked this year as in the past. The peak week had only 1,240 cases, compared with 1,016 in the previous year and 2,145 in 1953; and the average for the year was 568 "new claims" per week, compared with 530 in the previous year and 633 in 1953. Comparison of the three peak years 1951, 1953 and 1955 with the three more favourable years 1950, 1952 and 1954 reveals an average variation of nearly 4,000 cases a year.

METEOROLOGY

It is pleasing to be able to report that the weather for 1955 was somewhat better than the previous year, especially in regard to sunshine and rainfall. The total amount of sunshine registered—1,880.6 hours—was 326.8 hours more than in 1954 and the highest since 1949, when over 2,000 hours were recorded. There was $\frac{1}{2}$ hr. or more of sun on 282 days during the year, compared with 273.6 for the previous year, and during the holiday months of May—September there were only 12 days with no sun. Notwithstanding this increase, Portsmouth and Southsea's position in the sunshine table of health and holiday resorts on the mainland fell from 23rd to 27th and amongst the 326 meteorological stations in the British Isles from 40th to 45th; Jersey (St. Helier) was top of the list with 2,168.8 hours. The total rainfall was 24.6 inches, i.e. 8.53 less than the previous year and 3.2 below the average for the last 10 years; measurable rain fell on 130 days, compared with 166 during 1954. The warmest days were on the 15th July and the 24th August when the temperature reached 81°—6° higher than the warmest day of the previous year.

The following phenomena are worthy of note:—

Snow or sleet on 21 occasions, compared with 11 in 1954;
thunder on 11 (11) occasions, 14 (29) gales, 15 (19) fogs,
82 (59) ground frosts.

Prevailing winds were from the west-south-west quarter.

NATIONAL HEALTH SERVICE ACT, 1946

Details have been given in previous Reports of the changes which took place in the administration of the health services and of the responsibilities devolving upon the local health authority when this Act came into operation on the 5th July, 1948, in accordance with the proposals submitted to the Minister in 1947-1948, and there was included in the Report for 1952 (pages 9-29) a "Special Survey of Local Health Services provided under the National Health Service Acts" as existing at the end of that year. Any subsequent developments are referred to in the sections which follow.

Cordial co-operation between the three main branches of the National Health Service on the lines indicated in the Special Survey (pages 10-12 of 1952 Report) has been maintained throughout the year. A comprehensive Health Services handbook giving details of the services for which the Portsmouth Group Hospital Management Committee, the Executive Council and the Local Authority are responsible was published in March, 1955.

(1) SECTION 21 (HEALTH CENTRES)

No further progress has been made regarding the provision of health centres, either at Paulsgrove or elsewhere, but in the City Development Plan the erection of a health centre at Paulsgrove in 1955-1957 is included in the programme for the first five years; during the fifteen-year period commencing 1st April, 1958, it is hoped to provide three principal health centres—for the Central and Southern, North Portsea and Cosham areas respectively and subsidiary health centres at Southsea, Milton, Copnor and Farlington.

(2) SECTION 22 (CARE OF MOTHERS AND YOUNG CHILDREN)

SECTION 23 (MIDWIFERY)

SECTION 24 (HEALTH VISITING)

(pages 34-41)

During the five year period, 1950-1954, the annual birth rates have remained remarkably constant at the lower post-war level of 15 per thousand population, which corresponds closely with those for the immediate pre-war years 1933-1939. For 1955, however, the birth rate showed a substantial decrease to 14.16 per thousand population—the lowest ever recorded in Portsmouth, that for 1939 of 14.72 being the lowest rate hitherto. During the war years the birth rates were on a higher level, reaching a post-war peak of 24.29 (5,149 births) in 1947—the highest rate since 1920.

Domiciliary confinements numbered 1,525 (1,599), equal to 43% (42%) of the total births—the highest proportion delivered since the war by municipal midwives—while, of the remainder, approximately 37% of patients were confined in the maternity sections of Saint Mary's Hospital and its annexes, and 732 (723), or 20%, in private nursing homes (including the Royal Naval and Royal Marine Maternity Home). The average number of cases attended by each municipal midwife during the year was 82.5 (88.8).

MATERNAL MORTALITY

There was only one death in respect of which pregnancy was considered to be the primary cause, compared with five in the previous year and two in 1953. Thus, the maternal mortality rate was 0.29 per thousand total births—the lowest ever recorded.

INFANT MORTALITY

The death rate of infants under one year—23.96 per thousand live births—was again very favourable; indeed, those for the past four years together comprise the lowest rates recorded: 1952—23.24 (the lowest recorded), 1953—23.80, 1954—23.71, 1955—23.96. The neo-natal mortality rate (deaths of infants under four weeks) of 18.34 per thousand live births was less satisfactory compared with the rate of 14.01 for the previous year, which was the lowest recorded.

DAY NURSERIES

In view of the decreasing demand for places following the introduction of a new scale of assessment in March, 1953, which increased the weekly charges considerably to all but the lowest income groups, three of the day nurseries were closed in that year. In 1955 there were 164 (172) admissions to the three remaining nurseries, in which there are now places for 75 (116) children: (a) St. Peter's Institute, Somers Road—old complement 46, revised 30, (b) Twyford Avenue—old complement 40, revised 25, (c) Anglesea Road—old complement 30, revised 20.

NURSERIES AND CHILD MINDERS REGULATION ACT, 1948

Four new premises providing accommodation for 60 children were registered during the year. At the end of the year there were in all seventeen (16) premises registered under this Act providing accommodation for 360 (325) children; there was also one daily minder registered to receive five children.

HEALTH VISITING

At the end of the year there were 23 health visitors, and two trained nurses engaged as full-time tuberculosis visitors. Total visits paid numbered 66,504 (62,708), of which 55,155 were to children under five, 6,196 to other age groups in the family, especially the aged, and 5,153 to tuberculosis patients. Visits to old people and other adults have increased considerably in recent years:—1952—3,172, 1954—5,171, 1955—6,196.

(3) SECTION 25 (HOME NURSING) (page 42)

The Portsmouth Victoria Nursing Association, founded in 1884, which had for many years prior to the "appointed day" provided a very efficient service of home nursing in the area, has continued this service under the general control of the Authority. As will be seen from the report of the Secretaries (page 42), an average of 40 (37) nurses was employed, 19 (19) at Radnor House and 21 (18) at Beddow House, the total number of cases attended being 5,002 (5,264) and visits paid 116,270 (109,472).

Nursing equipment is supplied on loan to patients from a stock held by the Victoria Nursing Association; this is additional to that issued from the medical loan depots of the St. John Ambulance Brigade and British Red Cross Society.

(4) SECTION 26 (VACCINATION AND IMMUNISATION) (pages 43-46)**(a) VACCINATION**

The proportion of infants vaccinated during the first year of life was similar to that of recent years—1,071 vaccinations, or 31·5% of the total births, compared with 31·6% in the previous year and 35·4% in 1953; of this number 742 infants were vaccinated by their family doctors and 329 by medical officers of the Health Department. Total vaccinations numbered 2,888 (2,870), of which 2,110 (2,209) were primary and 778 (661) re-vaccinations.

(b) IMMUNISATION

During the year 3,222 (3,499) children were given a complete course of immunisation against diphtheria and 7,227 (7,169) a supplementary injection; of these 37·1% were immunised by private practitioners and the remainder by medical officers of the Health Department. The total number of children immunised since the inception of the scheme in 1935 is now 83,606.

The success of the diphtheria immunisation scheme is clearly shown in the appended table giving the yearly statistics of confirmed cases of diphtheria admitted to hospital and deaths from this disease.

<i>Year</i>	<i>Admitted to hospital</i>	<i>Died</i>	<i>Year</i>	<i>Admitted to hospital</i>	<i>Died</i>
1938	302	14	1950	1	—
1940	79	4	1951	5	1
1942	75	2	1952	—	—
1944	17	2	1953	1 (Haslar)	—
1946	17	—	1954	—	—
1948	6	—	1955	—	—

In connection with immunisation against whooping cough (pertussis), 2,013 children were given a full course of three injections by medical officers, compared with 2,126 in the previous year and 1,407 in 1953.

(5) SECTION 27 (AMBULANCE SERVICE) (pages 47-50)

During the year the record number of 66,481 patients was conveyed—an increase of 2,914 or 4·5% compared with 1954—of whom 15,191 (14,271) were stretcher and 51,290 (49,296) sitting cases. Patient carrying mileage was 248,569—an increase of 5,778 or 2·3% over 1954, but “miles per patient” were reduced by 0·1 to 3·7.

Installation of radio-telephony in eighteen first-line vehicles in March, 1953, has proved of immense benefit—not only by increasing the general efficiency and speed of dealing with emergencies, but by a reduction of fully 10% in the “average mileage per patient carried” from 4·2 miles in 1952 to 3·7 in 1955. Thus, it was possible for the Ambulance Service to deal with a greater number of patients in each of the last three years without increasing the staff or vehicle establishment, the total mileage being actually less than the peak figure of 250,940 in 1952, when only 59,421 patients were conveyed.

<i>Year</i>	<i>Patients Carried:</i>			<i>Patient Carrying Mileage</i>	<i>Av. Mileage per Patient</i>
	<i>Stretcher</i>	<i>Sitting</i>	<i>Total</i>		
1952	14,642	44,779	59,421	250,940	4·2
1953	15,102	48,628	63,730	244,182	3·8
1954	14,271	49,296	63,567	242,791	3·8
1955	15,191	51,290	66,481	248,569	3·7

(6) SECTION 28 (PREVENTION OF ILLNESS, CARE AND AFTER-CARE)

This Section, as its title implies, authorises the local health authority, with the approval of the Minister, to provide a comprehensive service for the improvement of public health in its area. This provision is permissive unless the Minister otherwise directs, and up to the present such directions have been given in respect of tuberculosis alone.

The proposals submitted to and approved by the Ministry of Health provided for the full utilisation of the facilities of the Mass Radiography Unit in the diagnosis of chest diseases, the supply of milk to tuberculous patients, and the development of occupational therapy and rehabilitation in co-operation with the Tuberculosis Voluntary Care Committee. The system of domiciliary visiting has been extended by the appointment of tuberculosis visitors.

The Authority has not, as yet, developed any further extensive scheme for care and after-care, but consideration is given to cases requiring special attention, such as home help, supply of nursing equipment or convalescent treatment, and in the care of the aged in their own homes the scope of the health visitor's work is continually increasing. In addition, a considerable proportion of the work of the Mental Health Service (pages 61-63) is concerned with the "care and after-care" of persons suffering from mental defect or mental illness under this Section of the Act.

Although the establishment of local authority medical loan depots and the extension of those already operated by voluntary organisations was envisaged in the proposals, the financial position has not allowed this. Nursing equipment has, therefore, continued to be issued on loan by the Victoria Nursing Association, the St. John Ambulance Brigade and the British Red Cross Society. Some items of equipment are, however, supplied by the Local Authority for the permanent use of patients nursed in their own homes, charges, where appropriate, being made in accordance with the Authority's approved scale of assessment. Convalescent home treatment is also provided for patients in need of recuperative rest after illness or operation, on the recommendation of either a medical practitioner or a hospital medical officer; here, again, a charge is made if the patient's means allow it.

HEALTH EDUCATION

The year's activities began with an article in *John Bull* (for the week ended 15th January, 1955) on the work of Portsmouth Health Department. Opportunity was taken to use several of the excellent photographs as illustrations for the pending Health Services handbook, and to obtain enlargements for display purposes.

In February, over 5,000 leaflets were distributed at a local exhibition. Of these, 3,000 had been specially prepared in the office.

The fourth edition of the Portsmouth Health Services handbook, which had been over a year in preparation, was published in March. This is an extended edition, prepared in collaboration with the Local Executive Council and the Portsmouth Group Hospital Management Committee.

In April, with the advent of a major outbreak of measles, copies of the special posters designed in the Department three years previously were displayed on the four Empire Marketing Board hoardings.

In common with other Corporation departments, a display was shown at the "Technology and Science Week" held at the College of Technology in May.

The filmstrip projector continued to give good service at the child welfare centres, and also in the training of members of the Civil Defence Ambulance Section.

B.C.G. VACCINATION AGAINST TUBERCULOSIS

Full details were given in last year's Report of the B.C.G. vaccination scheme for 13 year old 'school leavers', and the same procedure was followed during 1955, as it was found entirely satisfactory. The great advantage of the present scheme is that the "Heaf" method of tuberculin testing can be carried out by a nurse—thus saving a great deal of the medical officer's time. In addition, this method of testing is more acceptable to the children than the Mantoux test which involves an intradermal injection.

Particulars of the numbers dealt with are given in the table on page 46, from which it will be seen that 2,369 forms were sent to the parents of children aged 13½–14 years in the Education Committee's schools and 82·2% agreed to tuberculin testing and B.C.G. vaccination being done, if found necessary. Subsequently 53 visits were paid to schools and 1,896 children were tested; of these 79·9% were tuberculin-negative and 1,430 were vaccinated. Positive reactors numbered 359—20·1% of those tested; 31 were already attending the Chest Clinic, and 266 were given appointments for the Mass Radiography Unit.

TUBERCULOSIS (pages 51–54)

In his informative and encouraging report on page 51 the Consultant Chest Physician points out that, in addition to the accelerated fall in the death rate from pulmonary (respiratory) tuberculosis—8·2 per 100,000 population in 1955, compared with 36 in 1950—a comparable decrease in the incidence of this form of the disease has become evident in recent years—only 165 primary notifications having been received in 1955, compared with 312 in 1950. "This general improvement in the over all picture of tuberculous infection is further borne out by the results of the tuberculin testing of thirteen to fourteen year old school children, preliminary to B.C.G. vaccination. It has been found that, although the infectivity rate varies widely from school to school, an average figure is just over 20%—a substantial decline as compared with the position only four or five years ago."

As will be evident from the appended table, showing deaths from tuberculosis annually for the period 1947–1955, the dramatic decline in the mortality from this disease which has been such a favourable feature of the past nine years has continued during the year under review:—

	RESPIRATORY			NON-RESPIRATORY			COMBINED		
	M.	F.	Total	M.	F.	Total	M.	F.	Grand Total
1947 ...	84	60	144	10	10	20	94	70	164
1948 ...	69	51	120	7	3	10	76	54	130
1949 ...	62	36	98	5	4	9	67	40	107
1950 ...	56	31	87	6	2	8	62	33	95
1951 ...	39	21	60	5	1	6	44	22	66
1952 ...	40	11	51	7	4	11	47	15	62
1953 ...	30	16	46	4	2	6	34	18	52
1954 ...	24	14	38	3	4	7	27	18	45
1955 ...	16	4	20	1	2	3	17	6	23

From the foregoing statistics it will be seen that in 1955 only 20 persons—16 men and 4 women—died of pulmonary tuberculosis, whereas in 1947 144 persons—84 men and 60 women—died of this disease. It is considered that improved methods of treatment by new drugs and thoracic surgery, together with the work of the Mass Radiography Unit in finding cases in the earlier and more treatable stages of the disease, share the credit for this truly remarkable achievement.

MASS RADIOGRAPHY (pages 55–60)

During the year the Mass Radiography Unit operated outside the City for a longer period than usual—22 weeks, of which over three months were spent in a combined survey at Southampton; shorter visits were made to Leigh Park and several other places. For these and various other reasons, only 28,776 X-ray examinations were carried out in Portsmouth, compared with 37,007 in 1954, and 58 (102) were found to have active pulmonary tuberculosis—an incidence of 2.02 (2.76) per thousand examined, the lowest as yet recorded. Once again the highest proportion of active cases was found amongst patients referred by general practitioners—the 1,627 (2,513) persons sent for investigation at the Unit resulting in the diagnosis of 16 cases of active disease, or 9.83 per thousand examined (Table II).

In connection with the B.C.G. vaccination scheme for 13-year old "school leavers" 255 tuberculin-positive reactors and 201 family contacts attended the Unit; in the former group two cases and in the latter one of active tuberculosis were found.

(7) SECTION 29 (DOMESTIC HELP) (page 36)

The Home Help Service provides domestic assistance in households where such help is required "owing to the presence of any person who is ill, lying-in, an expectant mother, mentally defective, aged, or a child not over compulsory school age".

As reported last year, the large majority of those being helped are old people; still more assistance could be given, as demand always exceeds supply, but the number of hours is governed by the amount of money allocated by the Council in their budget and we must not exceed this figure.

The "group home help scheme", under which specially selected home helps were appointed exclusively to look after groups of old people living in close proximity to each other, was extended during the year by the addition of three more areas—making a total of nine groups in operation at the end of the year. Difficulties were encountered through the resignation of some of the home helps specially selected for this purpose and it was not always possible to provide an immediate replacement; nevertheless, the introduction of this scheme has resulted in more helps being available for allocation to other cases, as well as bringing comfort to those in the special groups by the attendance of the same help all the time.

There was the usual number of comings and goings of home helps and the Service was severely strained at times through absence on holiday or sick leave. During the year 751 cases were attended and 92,096½ hours worked, compared with 654 and 82,794½ in 1954, and at the end of the year 58 home helps, all part-time, were employed.

(8) SECTIONS 28 & 51 – PART V OF THE ACT (MENTAL HEALTH SERVICES) (pages 61–63)

The organisation of the Mental Health Service has continued as was described in the Report for 1953 and outlined in that of the Executive

Officer for the year under review; on 1st May, 1954, the offices were transferred to 28/29 Western Parade from their temporary accommodation in the Pier Hotel.

Cases of alleged mental illness dealt with by the Service show a further increase, 605 persons having been referred, compared with 566 in the previous year and 457 in 1952, while at the end of 1955 there were 257 (232) mental defectives under statutory supervision and a further 479 (401) under "voluntary supervision"—not being "subject to be dealt with".

The present Occupation Centre at Milton Church Hall provides for some 70 mental defectives of both sexes (another 26 cases being on the waiting list for admission), and a senior female class of 20 meets in another church hall four times weekly, under the handicraft instructress who also gives some home teaching to selected cases. During 1954, after consideration of the urgent need to provide more suitable premises and to expand the facilities for training generally, the Council obtained the approval of the Minister of Health to the erection of a new "Day Training Centre" for 137 mental defectives on the Eastern Road, and by the end of that year preparation of plans was in progress. These were finally approved by the Minister and loan sanction given in November, 1955; building was commenced in December, the estimated time of completion being fifteen months. This new Day Training Centre will supersede the premises in which the Occupation Centre and female class above referred to are at present established, these being rented church halls.

Considerable difficulties were again encountered in securing the admission to hospital of mental defectives in need of institutional care. This question is a continual source of anxiety to the Mental Health Service and there appears to be little prospect of any immediate improvement in the situation.

CARE OF THE AGED

It has been said that Great Britain is becoming a "nation of old people", and this may be one reason why the care of such persons has, in recent years, become one of the major problems causing concern to health and welfare authorities throughout the country. It is certainly one which is receiving more and more attention. As stated in last year's Report, "the essence of the matter is to assist elderly people to remain for as long as possible in health and comfort in their own homes, but to ensure that hospital, hostel or other institutional accommodation is available when needed". Locally this aim is kept in mind by all those agencies—local authority, hospital and voluntary—who are interested in the welfare of old people. Liaison between these organisations is very good, and it is rare for any case to defeat their combined efforts. This is reflected in the small number of persons whom it has been necessary to deal with under Section 47 of the National Assistance Act, 1948.

The "group home help scheme" for old people mentioned for the first time last year has been considerably extended, and there are now nine groups in operation. This scheme, whereby one home help is given the care of approximately six cases whose homes are in close proximity to one another, has worked well, and there is no doubt that the attendance of the same help has been beneficial to the general well-being of the old people concerned.

The schedule below gives details of institutional accommodation, apart from hospitals, available for old people in Portsmouth.

Local Authority Provision

So far as the Local Authority is concerned, the body responsible for residential care of aged persons is the Welfare Services Committee, and they had made the following provision by the end of the year. In addition, plans were being prepared for the adaptation of Flint House (in future to be known as Highgrove Lodge) and the erection of two further homes—at Stone Street and Link Road, Cosham—which, together, will provide accommodation for approximately another hundred persons. Margaret House, Farlington, was opened during 1955, and it is anticipated that Highgrove Lodge will be completed and ready for occupation during the early autumn of 1956.

HOME	ACCOMMODATION
St. Mary's House, Portsmouth	515 total—top floor rarely used
St. Vincent Lodge, Kent Road	35
St. Bernard Lodge, Merton Road	42
Jubilee Homes for the Blind, Cosham	28
Elizabeth House, Wymering	35
Margaret House, Farlington	35

Voluntary Provision

RESPONSIBLE AUTHORITY	TYPE OF ACCOMMODATION
Portsmouth Social Service Council, Old People's Welfare Committee.	Sunbury Court, Festing Road (hostel). Accommodation for 26 old ladies. Kelly Homes, Northern Parade (five bungalows for married couples).
Women's Voluntary Services	Queen Anne Lodge, Nightingale Road (hostel). Accommodation for 20 old persons.
The Church Army	Churchill House, Ashburton Road (single rooms with kitchenette). Accommodation for 10 residents including warden.
Committee of Management (C. of E.) <i>Chairman</i> , Mr. A. E. Hadley	Home of Comfort, Victoria Grove (registered nursing home). Accommodation for 11 infirm ladies.
The Forces Help Society	Princess Christian Home, Grand Parade (hostel). Accommodation for 14 pensioners—male (some infirm).
Friendly Society's Homes	Glasgow Road, Southsea. 24 flats—16 single, 8 for married couples. Canal Walk, Landport. 9 flats—all for married couples (6 flats only fit for use at present time—remainder, on top floor, considered unsafe). Plans have now been made for the renovation of the whole of this block in 1956.

In addition to residential provision, assistance to elderly persons in their own homes occupied the attention of not only the Local Authority but also the voluntary bodies in the City. The Old People's Welfare Committee continued to expand and extend their programme, particularly their plans for friendly visiting. Recreational activities included parties, outings, the provision of wireless, food parcels, and many other forms of social service, including thirteen "Good Companions" Clubs, all of which are self-supporting and have long waiting lists. These clubs do a tremendous amount to relieve

the loneliness of old people living by themselves, and also encourage members to help each other by friendly visiting, etc. The Committee maintain a close liaison with hospital almoners and health visitors and are often able to assist in cases referred to them from these sources. They undertake a good deal of visiting and, in short, co-operate generally with all other bodies, both official and voluntary, who are interested in the welfare of old people. They are still conscious of the need for "Half-way Houses", i.e. accommodation for elderly people who do not need hospital care but are not fit to enter a hostel or remain at home, and hope a plan for such accommodation will not be too long delayed. More recently, the Committee have been in touch with the Charity Commissioners and hope an arrangement may be made for some additional accommodation for elderly spinsters in the Ancient Parish of Wymering when the Honor Waite Almshouses site is sold. They feel it important that a site should be secured from the Local Authority as soon as possible, whatever plan for further accommodation might be made in that area.

The Women's Voluntary Services' "meals on wheels" now delivers a two-course meal to between 50 and 75 old people twice a week, an increase of some 25% on last year, and the mobile library which they continue to operate in conjunction with the City Librarian is still a most popular service. Their five "Darby and Joan" clubs have a membership of about 750-800, and a waiting list. In addition, members of the service are always willing to visit lonely old people.

SECTION 47, NATIONAL ASSISTANCE ACT, 1948

Section 47, which gives local authorities power to effect the removal to hospital of persons who, because of grave chronic disease or being aged, infirm or physically incapacitated and living in insanitary conditions, are unable to devote to themselves, and are not receiving from other persons, proper care and attention, was amended by the National Assistance (Amendment) Act, which came into force on 1st September, 1951. Briefly, this means that it is now possible to arrange for the removal of persons in need of care and attention immediately; formerly it was necessary to give seven clear days' notice.

In no case was it necessary to apply for an Order under this section of the Act during 1955, but numerous investigations and visits were made by health visitors, sanitary inspectors and members of the medical staff to elderly persons living alone or receiving inadequate care. The number of cases dealt with in this way, particularly by health visitors, has again increased, over 3,000 visits being made by them in connection with the care of old people during 1955. Action taken to remedy the unsatisfactory conditions found in some of these cases included the provision of home help or home nursing, supply of clothing and bed linen through voluntary agencies, the National Assistance Board, etc.; some were persuaded to enter St. Mary's House voluntarily, while others are being kept under regular supervision so that further action may be taken if necessary.

EPILEPTICS AND SPASTICS

Epileptics

There has been no change in the scheme for ascertainment and treatment of epileptics at St. James Hospital. During the year 15 new cases of epilepsy were brought to the notice of the School Health Service, the majority of whom were seven years of age and under. They were all minor cases and in no instance was special schooling required, except in the case of a girl of five years who had another physical handicap and was admitted to a day special

school for physically handicapped pupils. Three children suffering from this complaint are still in boarding special schools on account of the severity of their condition and/or behaviour difficulties. There are at present on the register 85 children of sixteen years and under known to the School Health Service, and apart from very occasional fits no difficulties are found in educating them in ordinary schools.

The Disablement Resettlement Officer of the Ministry of Labour has kindly informed me that there are now 113 epileptics registered as disabled persons, 84 men and 29 women. The rehabilitation and resettlement of persons suffering from epilepsy has been widely discussed by doctors and other experts with a specialised knowledge of this complaint, and by the Government departments interested in health and employment problems. Hitherto many epileptics have, quite wrongly, been regarded as unemployable. Given a chance, a fair proportion of such persons would, in all probability, prove excellent employees. Nevertheless, the Disablement Resettlement Officer has great difficulty in finding some of these persons employment and, at the moment, 14 men and 5 women are unemployed. Many employers are very sympathetic but it would be unfair to overload them with such severely handicapped workers. In the D.R.O.'s opinion about 10 registered epileptics would be better off in some sheltered employment.

The Mental Health Service continues to supervise epileptics who are also in some way mentally defective.

Spastics

The building of the Special Unit in the grounds of Queen Alexandra Hospital for the treatment and education of children suffering from cerebral palsy, made possible by funds raised by the Portsmouth and District Branch of the Spastics Society, was commenced in May. With the exception of some space-heating units, it was completed by the end of the year and was finally opened to patients in February, 1956. It is a pleasant brick building with a timber roof and consists of two classrooms, a physiotherapy room, speech therapy room, staff room and kitchen. The emphasis is on space and colour and, of course, no steps.

During the year a Screening Panel was formed, consisting of two nominees from the Spastics Society, three consultants from the Hospital Management Committee and two representatives from the Portsmouth Education Department—the Principal School Medical Officer and the Educational Psychologist. This Panel met on numerous occasions to discuss and make recommendations about the various children nominated for admission by Hampshire and Portsmouth Local Education Authorities. Twenty-three children, classified as follows, were submitted by Portsmouth:—five on home tuition; five in ordinary and day special schools; three in boarding special schools; two in Lord Mayor Treloar Orthopaedic Hospital, Alton; four reported under Section 57(3) of the Education Act, 1944, as ineducable; three possibly ineducable and one under five years of age. All the relevant information from the Child Welfare and School Health Services, including a report from the Educational Psychologist, was considered for each child, who was then examined by the consultants from the Hospital Management Committee. Nine Portsmouth children were admitted to the Unit in March and April, 1956. All others were considered to be suitably placed or unlikely to benefit from attendance (ineducable, etc.). Arrangements are now in hand for screening the latter group of children, and those thought likely to benefit from treatment—apart from education—will be admitted.

The over-all day-to-day supervision of the Unit is in the hands of the Consultant in Physical Medicine, Dr. K. Tyler, who directs the treatment

given by the Hospital Management Committee physiotherapists and speech therapists. The Portsmouth Education Committee have provided all the educational equipment required and the services of two teachers, and the children are conveyed to the Unit by the Municipal Ambulance Service. Parents of spastic children attend daily on a rota system to help with the children's meals, toilet, etc., and in so doing gain valuable experience in the handling of their own children.

BLIND PERSONS

Under Section 29 of the National Assistance Act the Welfare Services Committee is responsible to the Council for the welfare of the blind; the information given in the appended table regarding registered blind and partially sighted persons has accordingly been provided by the Director of Welfare Services:—

A.—FOLLOW-UP OF REGISTERED BLIND AND PARTIALLY SIGHTED PERSONS

(i) Number of cases registered during the year in respect of which para. 7 (c) of Form B.D.8 recommends:	Cause of Disability			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
(a) No treatment ...	9	4	—	37
(b) Treatment (medical, surgical or optical) ...	9	2	1	14
(ii) Number of cases at (i) (b) above which on follow-up action have received treatment ...	4	1	1	9

There have been no further confirmed cases of retrolental fibroplasia since September, 1952, when it became obvious that excessive concentration of oxygen in the "Oxygenaire" box was responsible for the condition, and simple practical steps were taken to obviate this.

B.—OPHTHALMIA NEONATORUM

(i) Total number of cases notified during year ...	4
(ii) Number of cases in which:—	
(a) Vision lost ...	NIL
(b) Vision impaired ...	
(c) Treatment continuing at the end of year ...	

It will be noted that four cases of ophthalmia neonatorum were notified during the year, compared with three in the previous year and fourteen in 1952, and in none of these was there any impairment of vision.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASES (pages 64-71)

As will be seen from the table on page 66, there was a considerable increase in the total number of cases of infectious diseases recorded—5,239, compared with 1,066 in 1954; this was entirely due to a severe epidemic of measles in which 4,479 cases were notified, compared with only 46 in the previous year.

The reason why the number of cases of measles notified during the year, 4,479, was the highest ever recorded in Portsmouth since this disease was made notifiable during the war (the first full year being 1941) is that, for the first time, a major outbreak fell entirely within the calendar year. It was in fact only the third largest outbreak—the largest, 5,279 cases, overlapped the winter of 1952-53, and the next largest, 4,577 cases, covered the 1948-49 winter. Two unusual features were, however, associated with this outbreak—firstly, the long interval, two years, since the ending of the previous one; and secondly, the time of year during which it occurred—mid-March to mid-August. Past experience has suggested that spring—summer outbreaks are usually milder than winter ones. This deviation may be attributed to the attack being "overdue", a correspondingly larger susceptible child population having been built up.

The principal decreases occurred in scarlet fever—156 notifications, compared with 171; meningococcal infections—six, compared with eleven; whooping cough—204, compared with 409; puerperal pyrexia—35, compared with 87; and pulmonary tuberculosis—165, compared with 200 cases notified.

There were, however, increases in all the intestinal diseases, including three cases of typhoid fever and four of paratyphoid fever—a total of seven cases, compared with five in 1954; 26 cases of dysentery, mostly of *Sonné* type, compared with 25 in the previous year, and 14 in 1953; and 56 cases of food poisoning, compared with 36. These are fully discussed in the section on "Food and Drink Infections" on page 23.

No case of diphtheria was notified and none proved to be this disease on admission to hospital. Pneumonia showed an increase—60 cases notified, compared with 35 in the previous year, and 68 in 1953. The incidence of poliomyelitis has fortunately remained very low—only four confirmed cases (three paralytic and one non-paralytic), compared with three in the previous year, and thirteen in 1953. There were 23 deaths from tuberculosis, compared with 45—pulmonary 20 (38), and other forms 3 (7), and one death each from typhoid, meningococcal infections and food poisoning.

CANCER (page 67)

The death rate from this disease, which since 1952 has included leukaemia, has remained practically unchanged during the past four years at a figure slightly below that for England and Wales generally. Thus, in 1954 the death rate showed a slight decrease to 1.97 per thousand population, compared with 1.98 in the previous year, 1.97 in 1953 and the national average for 1954 of 2.06, while total deaths were 471, compared with 482 in 1954 and 510 in 1951—a small but very welcome reduction in mortality over this five year period.

The appended table shows the dramatic decline in recent years in deaths from respiratory (pulmonary) tuberculosis, compared with the marked increase in those from cancer of the lung, which in 1955 numbered 72 in males and 13 in females. The total deaths from lung cancer are now more than four times the mortality from pulmonary tuberculosis and have increased by more than 200% in the eight years, i.e. from 39 in 1948 to 85 in 1955.

Year	Males		Females		Total Deaths	
	T.B.	Cancer	T.B.	Cancer	T.B.	Cancer
1948 ...	69	27	51	12	120	39
1949 ...	62	47	36	7	98	54
1950 ...	56	68	31	9	87	67
1951 ...	39	66	21	11	60	77
1952 ...	40	61	11	10	51	71
1953 ...	30	70	16	18	46	88
1954 ...	24	87	14	9	38	96
1955 ...	16	72	4	13	20	85

CANCER EDUCATION

The year was a fruitful one for the Portsmouth Cancer Education Committee. Its parent body, the Marie Curie Memorial Foundation, made a grant of £50 for the emergency relief of cancer patients, and of this £13 6s. 8d. was expended on extra nourishment, night nursing, stocks of bedlinen, etc.

In June an interesting meeting on cancer education was held at Winchester, attended by the medical officers of neighbouring authorities and representatives of the Ministry of Health, the Regional Hospital Board and general practitioners. Mr. Ronald Raven (who visited Portsmouth in 1952) was the speaker, and a lively debate ensued.

Towards the end of the year I was invited to serve on two national committees concerned with cancer. One is the Education and Welfare Sub-Committee of the Marie Curie Memorial Foundation, and the other an Advisory Committee on Cancer Education set up by the Central Council for Health Education.

The fourth Annual General Meeting, in November, was addressed by one of the "backroom boys" of medicine—Dr. J. H. O. Earle, Consultant Pathologist, The Royal Marsden Hospital, London.

VENEREAL DISEASE (page 68)

It will be noted that the table of statistics relating to these diseases takes a more detailed form this year. There has been an all-round decrease in the number of cases seen, but the most encouraging features are that the number of patients not completing treatment was so low and that quite a number of contacts came up for examination on the advice of patients. The health visitor who attends the Treatment Centre still does valuable work in tracing contacts and encouraging patients to take advantage of treatment.

PARASITIC INFESTATION (pages 70-71)

(a) SCABIES

The incidence of scabies in the community shows a small increase, 78 cases and 46 contacts being treated during the year, compared with 64 cases and 21 contacts in 1954; in 1947, however, cases numbered 656 and contacts 521—an aftermath of the war years.

(b) PEDICULOSIS (Lice)

Cases of pediculosis showed a further decline, 77 families and 271 individuals—of whom 135 were actually infested—being dealt with, compared with 124 families and 480 persons in 1954.

PUBLIC BATHS

(pages 72-75)

The financial year 1955-56 was the most favourable ever experienced in the history of the Park Road Baths, total patronage having attained the record figure of 139,236—an increase of 3,516 on the previous year, and the revenue of £5,504 13s. 4d. being £314 1s. 9d. more. These excellent results must be attributed in the main to the enthusiasm and enterprise of the Baths Superintendent and his staff, and fully justify the modest expenditure incurred by your Committee in 1949 by the installation of modern filtration and chlorination plant for the swimming pool.

As will be evident from the appended table, the number of persons, other than school children under instruction, using the swimming pool is now more than three times the figure prevailing before the filtration plant was installed and the total receipts have increased to a similar degree.

<i>Year ended 31st March</i>	<i>Number attending</i>		<i>Total</i>	
	<i>Swimming Pool</i>	<i>Slipper Baths</i>	<i>Attendances</i>	<i>Receipts</i>
1949	19,920	43,259	74,928	£2,038
1951	28,091	34,141	88,921	£3,637
1953	34,574	35,445	97,940	£3,895
1954	36,832	36,753	119,936	£4,730
1955	55,896	38,390	135,720	£5,190
1956	61,736	38,939	139,236	£5,505

*The Anglesea Road Baths were under construction in 1939 when war broke out; work was stopped in the following year and the building subsequently suffered severe bomb damage as well as considerable deterioration from exposure to the weather over a period of fifteen years. After the refusal of several applications, the Ministry of Housing and Local Government in December, 1953, gave approval in principle to the completion of the building.

In the spring of 1954, the Health and Housing Committee approved a scheme of reconstruction recommended by the Baths Sub-Committee, and instructed the City Architect to prepare sketch plans. These will include a number of improvements to bring the scheme up to modern requirements and are principally extending the swimming bath and hall, providing facilities for international swimming and diving events. They will also provide 24 slipper baths and 20 showers for men, and nine slipper baths for women, together with an immersion pool for remedial exercises; these now supersede and will occupy that part of the building originally allocated to medicated baths. In September, 1955, the Committee resolved that "having regard to the amenity value of a modern swimming bath and washing facilities in a City which has suffered so severely from the effects of enemy action, approval be given to the project being proceeded with and that, subject to the approval of the Finance and General Purposes Committee and the Council, the City Architect be now authorised to forward his sketch plans together with estimates to the Minister for his approval to the scheme". The Government's communication concerning the restriction of capital expenditure followed and at a special meeting subsequently held it was decided that the proposal be deferred indefinitely.

Meantime, many improvements have been made at the Park Road Baths, including:—a new diving board, hair dryers, a weighing machine, additional changing equipment for swimmers and the redecoration of the swimming hall. The slipper baths section also has been redecorated, and last year six new baths were provided in replacement of old ones; during the current financial year it is proposed to provide a further seven new baths.

INSPECTION AND SUPERVISION OF FOOD

(pages 76-80 and 85-87)

The total number of samples of food and drugs was 1,832, a decrease of 113 when compared with the number taken in 1954. Of this number, 102 were found to be adulterated or incorrectly labelled, a percentage of 5.6, compared with 7.2% in 1954.

All the adulterated samples were dealt with by cautions or, where appropriate, referred to the appropriate Ministry.

FOOD AND DRINK INFECTIONS

1955's record was marred by a fatal case of typhoid fever, but two other patients suffering from this disease made good recoveries. The three patients were women and the infecting organisms isolated from blood cultures were of the same bacteriophage type. Following a cold trail, as is general in the investigation of a disease with a fairly long incubation period, and relying on information provided by sometimes harassed relatives, it is perhaps inevitable that the source of infection remains obscure. As in previous years, shellfish figured in the diet of two of the patients, but there any similarity in the cases ended. Several public houses known to be sources of liquid and solid refreshment for one of the patients were visited and specimens of food sold therein were examined in the laboratory. All known contacts of each patient were prevailed upon to submit faecal specimens for bacteriological examination, but no secondary cases or healthy carriers came to light. Extracting no positive leads from the accumulated information, the Department was left with the enigma and references for any future incidence.

Four cases of paratyphoid B were recorded, of which one was probably imported into the City. One youth, accustomed to bathing in Port Creek near the Cosham Sewage Works outfall, contracted the fever. Subsequent swabbing of the effluent yielded negative results even though the swabs remained in the sewage chamber for five days, but a similar bacterium of the identified phage type was isolated later from a sample of the creek water. The year ended with cases occurring in St. James Hospital, but visits paid to the home addresses of the patients involved found no infecting agent.

The increase in the number of individuals affected by food poisoning, chiefly by salmonella typhi murium, was offset by the satisfaction that no large scale outbreaks were recorded. Pursuing the similar investigations of previous years it was found that, whilst the actual source of infection was seldom found, the same type of organism as that affecting the patient was often recovered from allegedly symptomless carriers. Numerous specimens of foodstuffs were submitted to the bacteriologists but rarely was the Department able to recover portions of the actual food forming the patients' diet and all specimens were negative. Investigations of food poisoning and similar intestinal upsets all point to the fact that the Department is hampered by late information, usually the fault of the patient who suffers the inconvenience and pain for some time before consulting a medical practitioner, so that, when notification eventually reaches the Department, the onset of the illness is ancient history. This is also coupled with the unfortunate fact that for every case of diarrhoea and sickness investigated there are half-a-dozen that are concealed, either through the sufferer's fortitude or false modesty.

Minor family outbreaks of Sonn  dysentery also occupied the Department's time.

Undoubtedly the prime achievement of the Public Health Department in this particular field of work was the tracing and impounding of the now famous Chinese egg, the infectious potentialities of which were to become

known to all public health workers. This City was fortunate in being able to locate all unused consignments of powdered, crystallised and frozen Chinese egg and to satisfy the Ministry's requirements on the matter. Pathogens were isolated from samples taken from the detained stocks and there is no doubt that the requirements for epidemic disease existed in this apparently innocuous baker's and confectioner's commodity.

SANITARY CIRCUMSTANCES

(pages 81-91)

WATER SUPPLY

There is no change to be recorded regarding the water supply, which continues to be of excellent character, both in purity and quantity. The results of the Public Analyst's chemical and bacteriological examinations are referred to on page 112.

HOUSING

The City Architect has supplied the following information regarding housing progress during the year:—

- 2,526 houses were completed during 1955
(216 private enterprise, 17 housing societies, etc.)
- 1,063 were under construction
(126 private enterprise)
- 296 were under contract, but building not started
(all Local Authority)

These figures include houses outside the Local Authority's boundary.

DISPOSAL OF THE DEAD

MORTUARY ACCOMMODATION

The number of bodies received into Park Road mortuary during the year was 361, compared with 359 in 1954. These were brought to the mortuary from fatal accidents—89 (included in (c) below); from private residences, hospitals, etc. (a) for post-mortem examination—177, (b) for post-mortem and subsequent inquests—52, and (c) for inquest only—126. In addition, six bodies were brought in on whom neither post-mortem nor inquest was held.

In October, 1949, consideration was given by the Health and Housing Committee to proposals submitted by the Regional Hospital Board to extend and modernise the existing mortuary at Saint Mary's Hospital, additional accommodation and refrigeration being provided. It was suggested that the Council should contribute half the capital cost of providing this central mortuary, which would afford greatly improved facilities for pathological investigations, and allow the existing mortuary at Park Road to be used, subsequent to its completion, only as a viewing room for the Coroner's Court. Unfortunately, the Regional Hospital Board subsequently found it necessary, owing to the need for economy in capital expenditure, to defer this proposal indefinitely. In 1953, however, the Western Area Committee of the Regional Hospital Board resolved that the scheme should be included in the capital programme for 1955/56, and that in the meantime certain minor improvements to the mortuary, which would form an integral part of the permanent scheme, should be carried out, including the provision of a 12-body refrigerator and new post-mortem tables at an estimated cost of £635, of which one half would be borne by the Corporation.

During 1954-55 further meetings were held with representatives of the Regional Board as a result of which it was decided to proceed with the provision of a central mortuary at Saint Mary's Hospital, including a new 24-body refrigerator, at a cost of approximately £12,000, one half of which would be borne by the Council. It was further agreed that the Board would be responsible for maintaining the mortuary and the furniture and equipment therein in good decoration and repair, the total running costs being apportioned between the Board and the Council pro rata to the number of bodies received into the mortuary for which each party was responsible. This work of extension and improvement is now in progress and will probably be completed by October, 1956.

CREMATORIUM

The proposed crematorium at Cornaway Lane, Portchester, the site for which has been acquired by the Portchester Crematorium Joint Committee of which Fareham, Havant, Gosport and Portsmouth are the constituent bodies will, it is hoped, be under construction by the end of 1956. Detailed plans are in the course of preparation and tenders will be invited shortly.

ACKNOWLEDGMENTS

Once again I would express my appreciation to the Chairman and Members of the Health Services Committee and of the Health and Housing Committee for their assistance and encouragement, and I should also like to record my thanks to my medical colleagues and the various voluntary organisations in the City for their helpful co-operation. Thanks are also due to the Town Clerk and other chief officials of the Corporation for their help and advice, so willingly given, to the Physician Superintendent of the Infectious Diseases Hospital for his assistance with epidemiological investigations, and to the Director of the Public Health Laboratory, Portsmouth, for his expert help with enquiries into cases of infectious disease.

Finally, I should like to record my appreciation of the willing service given by the staff of the Health Department throughout the year, special thanks being due for their valuable assistance to my Deputy (Dr. Woodrow), the Chief Sanitary Inspector (Mr. Appleton) and my Administrative Assistant (Mr. Woodcock).

I have the honour to be, my Lord Mayor, Ladies and Gentlemen,

Your obedient servant,

T. E. ROBERTS.

June, 1956.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH

STATISTICAL SUMMARIES FOR 1955

Total Population (estimated by the Registrar General) ... 238,700

GENERAL STATISTICS

Area in acres (land and inland water) ... 9,249
 Population (Census 1951) ... 233,545
 Number of houses (including pre-fabricated bungalows) ... 55,309
 Number of flats ... 6,677
 Rateable value (31st March, 1955) ... £1,960,523
 Nett product of a penny rate (year ended 31st March, 1956) ... £7,945
 Total rainfall ... 24.60 inches

EXTRACTS FROM VITAL STATISTICS

		<u>Total</u>	<u>Male</u>	<u>Female</u>	
LIVE BIRTHS:					
Legitimate	...	3,191	1,619	1,572	Rate per 1,000 population <u>14.16</u>
Illegitimate	...	189	99	90	
Total	...	3,380	1,718	1,662	

STILLBIRTHS:					
Legitimate	...	84	33	51	Rate per 1,000 total births <u>26.50</u>
Illegitimate	...	8	5	3	
Total	...	92	38	54	

DEATHS	...	2,571	1,337	1,234	Rate per 1,000 population <u>10.77</u>
--------	-----	-------	-------	-------	--

Deaths from:

(a) Complications of pregnancy and delivery	...	...	...	—
(b) Other complications of the puerperium	...	...	...	1
Total	...	...	...	<u>1</u>

Maternal mortality rate per 1,000 total births ... 0.29

Death rate of infants under one year of age:

All infants per 1,000 live births (81)	...	...	...	23.96
Legitimate infants per 1,000 legitimate live births (76)	...	...	...	23.82
Illegitimate infants per 1,000 illegitimate live births (5)	...	...	...	26.46

PROPORTION OF DEATHS FROM PRINCIPAL DISEASES

TOTAL — 2,571

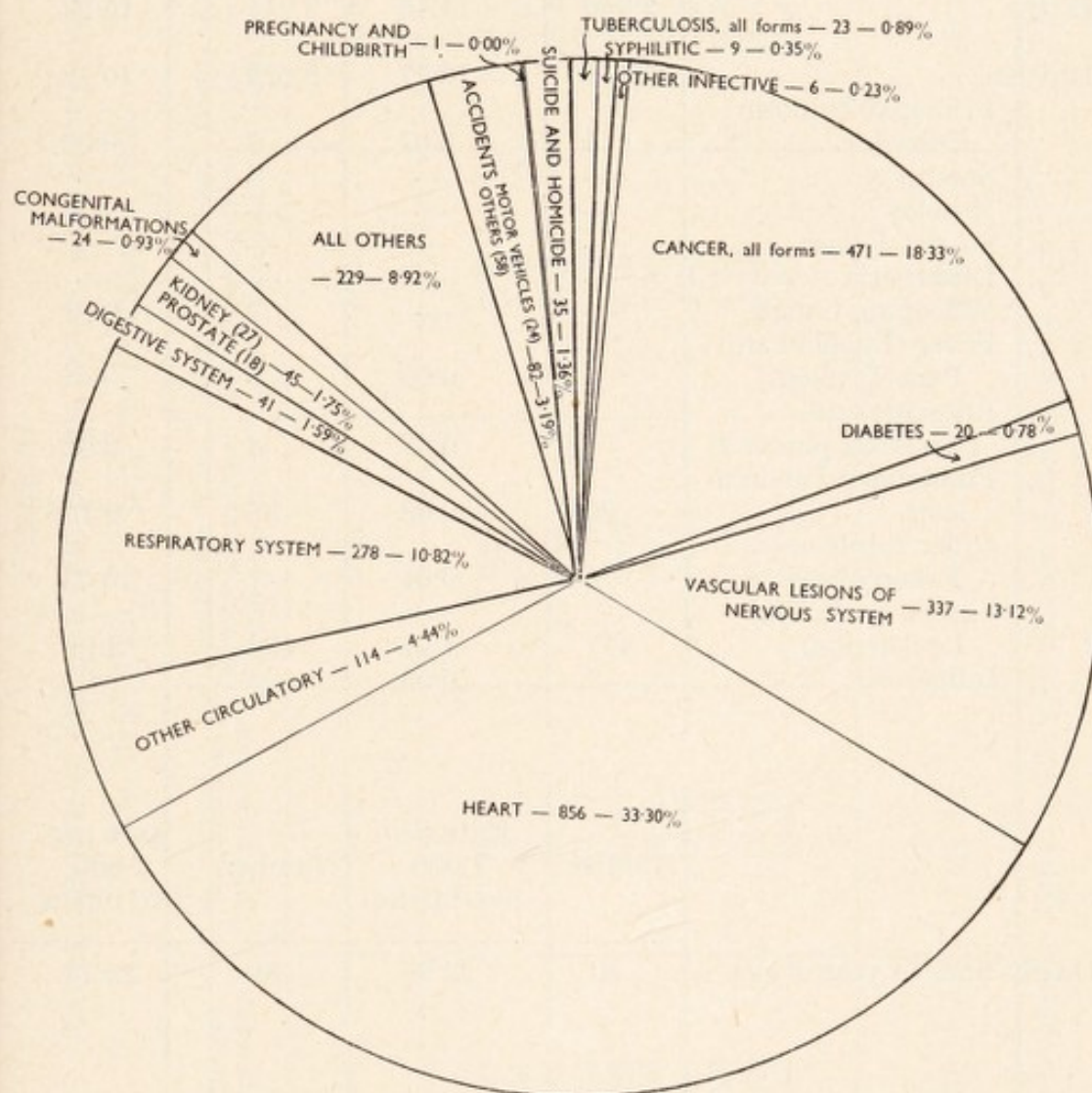


TABLE I
COMPARISON WITH PREVIOUS YEAR (1954)

	1955 Population 238,700		1954 Population 243,600	
	Number	Rate per 1,000 living	Number	Rate per 1,000 living
Births	3,380	14.16	3,711	15.23
Deaths	2,571	10.77	2,622	10.76
„ Principal Zymotic Diseases	5	0.02	7	0.03
„ Smallpox	—	—	—	—
„ Measles	—	—	—	—
„ Scarlet Fever	—	—	—	—
„ Diphtheria	—	—	—	—
„ Whooping Cough	—	—	3	0.01
„ Fever (Typhoid and Para-Typhoid)	1	0.00	—	—
„ Enteritis and Diarrhoea (under 2)	4	0.02	4	0.02
„ Pulmonary Tuberculosis	20	0.08	38	0.156
„ Other forms of Tuberculosis	3	0.01	7	0.03
„ Cancer (including Leukaemia)	471	1.97	482	1.98
„ Influenza	7	0.03	4	0.02
	Number	Rate per 1,000 live births	Number	Rate per 1,000 live births
Deaths under 1 year of age ...	81	23.96	88	23.71
	Number	Rate per 1,000 total births	Number	Rate per 1,000 total births
Deaths—Maternal:				
Sepsis	—	—	—	—
Other Causes	1	0.29	5	1.31
Total	1	0.29	5	1.31

TABLE II
TABLE SHOWING BIRTH-RATE, DEATH-RATES AND POPULATION
FOR YEAR 1955 AND THE TEN PRECEDING YEARS

Year	Birth-rate per 1,000 population	Death-rate per 1,000 population	Death-rate from zymotic diseases per 1,000 population	Deaths of children under 1 year—per- centage of total deaths	Deaths of children under 1 year—per 1,000 live births	Population (R.G.'s estimate)
1955	14.16	10.77	0.02	3.15	23.96	238,700*
1954	15.23	10.76	0.03	3.36	23.71	243,600*
1953	15.21	11.59	0.04	3.12	23.80	245,800*
1952	15.43	10.77	0.04	3.33	23.24	242,600*
1951	15.05	11.87	0.06	3.76	29.64	244,400*
1950	15.22	10.92	0.05	4.16	29.84	240,020*
1949	19.06	12.05	0.07	3.80	24.04	218,250
1948	21.06	11.01	0.06	4.45	23.28	216,200
1947	24.29	12.98	0.12	6.25	33.40	212,020
1946	23.69	12.13	0.07	6.65	34.05	204,540
1945	23.40	13.80	0.17	7.23	42.67	179,240
Average for 10 yrs. 1945-54	18.76	11.79	0.07	4.61	28.77	—

(The most favourable figures in the statistics are shown in heavy type)

* Total population

TABLE III — TABLE SHOWING POPULATION, BIRTH-RATE, DEATH-RATE, ZYMOTIC DEATH-RATES, INFANT AND MATERNAL MORTALITY RATES OF THE 20 LARGE TOWNS OF ENGLAND AND WALES FOR 1955

Name of Authority	Popu- lation (Total)	Adjusted Rates per 1,000 population		Death-rates per 1,000 population from:													Maternal Mortality Rate per 1,000 total births
		Birth	Death	Meningococcal Infections	Whooping Cough	Influenza	Measles	Acute Polio- myelitis and Encephalitis	Diphtheria (under 2 years)	Tuberculosis— Respiratory	Tuberculosis— Non-respiratory	Cancer (all forms including Leukaemia and Aplastic)	Cancer of Lungs and Bronchus	Infantile mortality rate per 1,000 live births	Neo-natal mortality rate per 1,000 live births	Stillbirth rate per 1,000 total births	
CROYDON ...	249,300	13.3	10.3	0.01	0.00	0.08	0.00	0.02	0.01	0.140	0.012	2.190	0.477	21.00	13.47	20.26	0.59
SOUTHAMPTON ...	194,000	16.57	10.31	—	0.005	0.03	0.005	—	0.01	0.164	0.026	1.934	0.421	19.42	13.05	23.12	—
PORTSMOUTH ...	238,700	14.44	10.55	0.00	—	0.03	—	0.00	0.02	0.08	0.01	1.97	0.36	23.96	18.34	26.50	0.29
COVENTRY ...	267,300	15.2	11.0	0.007	—	0.07	—	0.004	0.1	0.16	0.015	1.6	0.38	27.9	17.9	25.1	1.16
PLYMOUTH ...	218,000	16.54	11.15	0.00	0.00	0.10	—	—	0.00	0.19	0.00	1.90	0.31	20.65	14.71	20.22	0.83
BRISTOL ...	442,500	14.61	11.30	—	0.002	0.063	0.005	0.002	0.007	0.118	0.016	1.993	0.371	19.14	12.71	20.25	0.30
CARDIFF ...	248,400	15.84	12.19	0.016	0.004	0.036	0.004	0.008	0.020	0.19	0.012	2.07	0.399	33.21	19.34	30.12	0.46
LEICESTER ...	286,300	14.65	12.19	—	0.0035	0.087	—	—	0.007	0.199	0.007	1.890	0.311	23.37	16.76	20.80	0.23
NOTTINGHAM ...	312,000	14.89	12.30	0.006	0.006	0.048	0.016	0.003	0.016	0.17	0.01	2.02	0.43	28.00	16.76	24.91	0.60
SUNDERLAND ...	182,000	18.17	12.32	0.005	0.005	0.03	0.005	0.005	0.06	0.16	0.02	1.92	0.38	38.08	24.44	25.74	0.83
KINGSTON-U-HULL ...	299,000	17.3	12.4	0.006	0.006	0.036	0.003	0.003	0.01	0.19	0.013	2.04	0.45	26.4	15.7	25.04	1.08
LEEDS ...	507,400	14.7	12.4	0.01	—	0.04	0.01	0.002	0.02	0.13	0.01	2.11	0.54	25.4	17.8	22.2	0.51
SHEFFIELD ...	501,100	13.35	12.55	0.00	0.00	0.03	0.01	0.01	0.01	0.216	0.022	2.16	0.48	23.68	16.73	25.39	—
BIRMINGHAM ...	1,111,700	15.05	12.85	0.00	0.00	0.08	0.01	0.00	0.01	0.19	0.01	2.06	0.44	23.71	16.24	23.00	0.33
BRADFORD ...	286,400	16.20	13.59	0.01	—	0.06	0.01	0.01	0.01	0.10	0.01	2.37	0.46	28.58	17.81	20.04	0.43
NEWCASTLE-U-TYNE ...	281,000	15.91	13.61	0.007	—	0.053	—	0.007	0.011	0.17	0.014	2.27	0.54	33.58	23.17	23.05	1.45
STOKE-ON-TRENT ...	274,000	14.34	14.13	0.015	0.004	0.065	0.011	0.0	0.0033	0.263	0.025	1.87	0.328	31.00	21.77	29.26	0.697
SALFORD ...	169,300	15.1525	14.268	0.006	—	0.65	—	—	0.012	0.224	0.024	2.103	0.543	30.00	21.85	35.03	0.71
LIVERPOOL ...	779,900	18.0	14.3	0.00	0.00	0.06	0.00	0.00	0.02	0.24	0.02	2.05	0.52	30.00	20.3	26.0	0.57
MANCHESTER ...	692,200	16.06	14.33	0.004	0.003	0.049	0.003	0.001	0.01	0.19	0.02	2.28	0.56	28.37	18.37	26.45	0.75

METEOROLOGY—1955

BAROMETER. The mean barometric pressure (corrected to sea level) for the year was 29·947 inches (29·900). The highest observed reading was 30·566 on 16th November (30·563), and the lowest 28·725 on 16th January (28·420).

TEMPERATURES. The mean temperature in the shade was 51·0° (51·0°).

Maximum. The mean maximum temperature in the shade was 56·5° (55·9°), the highest being 81° on 15th July and 24th August (75°).

Minimum. The mean minimum temperature was 45·5° (46·0°), the lowest being 21° on 13th and 27th February (17°).

Minimum on Grass. The mean minimum temperature on the grass was 39·0° (40·5°), the lowest being 11° on 27th February (13°).

Earth Temperature. The mean temperature at one foot below the ground was 52·3° (52·4°), and at four feet 53·0° (52·8°).

Frosts. The minimum temperature in the shade, four feet above the ground, fell to and below freezing point on 49 days (26), and there were 82 (59) ground frosts during the year.

SUNSHINE. 1,880 hours 36 minutes (1,553 hours 48 minutes) of sunshine were registered by the Campbell-Stokes recorder. The greatest amount on one day was 14 hours 42 minutes on 30th May (13 hours 54 minutes).

RAINFALL. The total rainfall was 24·60 inches (33·13). The greatest fall in twenty-four hours was 1·31 inches on 13th January (1·70).

HUMIDITY. The mean humidity of the air (saturation 100) was 79 (81).

The following phenomena were recorded:—

HAIL on two occasions (9).

SNOW or SLEET on twenty-one occasions (11).

THUNDER on eleven occasions (11).

FOGS. Fifteen (19).

GALES. Fourteen—7 fresh, 7 moderate (twenty-nine—16 fresh, 13 moderate).

AVERAGES FOR THE PAST TEN YEARS (1946-55)

Rainfall	Sunshine	Mean Temperature
27·80 inches	1,797·4 hours	51·8°

(Figures in brackets refer to 1954)

TABLE IV
MONTHLY METEOROLOGICAL SUMMARY FOR THE YEAR 1955

Month	Mean Pressure (ins.)	Temperature—Degrees F.						Sunshine		Rainfall			Relative Humidity (Saturation 100)
		Absolute		Mean		Mean Daily Range	Total No. of hours	Days of 0.5 hrs. or more	Total m.m.	Total ins.	Days of 0.01 ins. or more		
		Max.	Min.	Max.	Min.								
January	29.728	51	22	43.5	34.8	8.7	35 hrs.	0 mins.	9	87.1	3.43	18	84
February	29.613	53	21	42.0	32.7	9.3	99 "	24 "	21	40.8	1.61	12	85
March	30.003	55	28	45.3	33.1	12.2	174 "	36 "	28	30.5	1.20	7	74
April	30.170	66	36	54.4	42.4	12.0	183 "	30 "	26	7.0	0.28	5	77
May	29.931	65	37	57.4	45.8	11.6	232 "	36 "	28	90.0	3.54	20	73
June	29.967	72	43	64.8	53.6	11.2	212 "	36 "	28	68.7	2.71	11	78
July	30.071	81	51	72.6	58.5	14.1	294 "	18 "	29	27.2	1.07	5	73
August	30.058	81	52	72.1	60.2	11.9	231 "	42 "	30	25.8	1.02	6	76
September	30.012	73	45	66.0	54.8	11.2	180 "	24 "	27	43.5	1.71	8	78
October	29.959	66	34	57.3	44.1	13.2	134 "	12 "	24	58.5	2.30	9	80
November	30.055	60	34	52.1	44.2	7.9	66 "	0 "	20	46.2	1.82	10	81
December	29.787	54	30	50.9	41.3	9.6	36 "	18 "	12	99.5	3.92	19	85
TOTAL	—	—	—	—	—	—	1,880 "	36 "	282	624.8	24.60	130	—
MEAN	29.947	—	—	56.5	45.5	11.0	156 "	42 "	24	52.1	2.05	11	79

TABLE V
MONTHLY ANALYSIS OF WIND DIRECTIONS—1955

(recorded at 9 hours G.M.T.)

	N	NE	E	SE	S	SW	W	NW	Calm	Totals
January ...	—	11	2	7	1	7	—	2	1	31
February ...	2	5	5	1	—	6	5	4	—	28
March ...	5	10	5	1	2	5	1	2	—	31
April ...	1	4	4	4	1	6	7	3	—	30
May ...	2	4	1	2	1	10	9	2	—	31
June ...	1	5	4	2	1	10	6	1	—	30
July ...	8	8	3	1	2	3	3	3	—	31
August ...	6	7	3	2	2	4	4	3	—	31
September	2	—	1	2	1	9	9	6	—	30
October ...	4	2	1	1	2	3	9	7	2	31
November ...	3	8	2	3	5	4	2	3	—	30
December ...	1	3	1	4	4	8	8	2	—	31
TOTALS ...	35	67	32	30	22	75	63	38	3	365
% (nearest whole Nos.)	10	18	9	8	6	21	17	10	1	100

MATERNITY AND CHILD WELFARE

*By the Senior Assistant Medical Officer of Health
(Maternity and Child Welfare)*

CARE OF MOTHERS AND YOUNG CHILDREN**MATERNAL MORTALITY**

The maternal mortality rate showed a decrease from 1·31 per thousand total births in 1954 to 0·29, the lowest ever recorded. This represents one death, the cause of which was as follows:—

Pulmonary embolism. Normal delivery 5 days previously with post-partum haemorrhage.

The investigation into this case showed that the patient was under constant care during her ante-natal period and confinement and it is difficult to find any cause for the pulmonary embolism.

INFANT MORTALITY

The infant mortality rate for 1955 increased slightly to 23·96, compared with 23·71 in 1954; the actual number of infant deaths was 81 (88). An analysis of these figures (page 40) shows that in 1955 the deaths occurring in the first four weeks of life numbered 62, and those from four weeks to one year 19 (comparable figures in 1954 were 52 and 36), making a neo-natal death rate of 18·34 in 1955, compared with 14·01. Of the 62 neo-natal deaths, 54 occurred in the first week of life, representing 67% of the total number of infant deaths. As in 1954, the highest numbers of deaths were in the categories post-natal asphyxia and atelectasis, and immaturity. It is noteworthy that the deaths from pneumonia were only 9, compared with 19 in 1954.

PREMATURE BIRTHS

Special visits were made by midwives and health visitors to all premature babies. A premature baby outfit, including cot equipment, etc., is supplied by the local authority and is available for nursing premature babies on the district.

Wherever it is possible arrangements are made for premature births to take place in hospital, and during 1955, 126 (145) premature births occurred in Saint Mary's Hospital.

The total number of premature births reported during 1955 occurring at home and in private nursing homes was 86 (106). Of the 41 (59) born and nursed at home, no baby died during the first twenty-four hours and 40 (58) were still surviving at the end of the month; 15 (25) babies born at home were transferred to hospital. Of the 27 (21) babies born and nursed in nursing homes, one baby died during the first twenty-four hours and 26 (21) were still surviving at the end of the month; 3 (1) babies born in nursing homes were transferred to hospital.

OPHTHALMIA NEONATORUM

During the year 4 (3) cases of ophthalmia neonatorum were notified. There was no resultant impairment of vision in any of these cases.

ATTENDANCES AT CLINICS

The number of new patients attending the municipal ante-natal clinics showed a very slight decrease from 1,737 in 1954 to 1,714. During the year patients made a total of 11,855 attendances, compared with 12,706. Co-operation between the general practitioners and the staff of the ante-natal clinics is most satisfactory.

The number of patients who attended the post-natal clinics for the first time decreased to 247, compared with 299 in 1954. Patients made a total of 419 attendances, compared with 393 in the previous year.

The child welfare clinics continue to be well attended, as will be seen from the table on page 37. There was a decrease in the total attendances made by the children—55,534, compared with 56,843 in 1954.

HEALTH EDUCATION

Mothercraft talks continued to be given weekly by health visitors and midwives at the child welfare centre at Trafalgar Place, Clive Road, Fratton, and were well attended. Relaxation classes were held weekly after the mothercraft talks and continued to be very popular.

MOTHERS' CLUBS

Two mothers' clubs continued to meet as previously, one at Portsea and one at Cosham child welfare centres. Social and educational meetings, including lectures and the showing of films, continue to be held at these clubs and seem to be appreciated by the mothers.

NATIONAL WELFARE FOODS

The arrangements for the distribution of national welfare foods, introduced in June, 1954, when the responsibility for this function was transferred to local authorities from the Ministry of Food, continued to work smoothly, and no undue difficulties have been experienced through the assumption of these duties by the Health Department.

The total issues from the 15 distribution centres during the year were:—

National dried milk

117,300 tins (weekly average of 2,256, compared with 2,343 for 1954)

Cod liver oil

23,663 bottles (weekly average of 455, compared with 438 for 1954)

A and D tablets

11,260 packets (weekly average of 217, compared with 180 for 1954)

Orange juice

141,640 bottles (weekly average of 2,724, compared with 2,300 for 1954)

NURSERIES

During the year the total number of children under five years of age admitted to the day nurseries was 164 (172). The number of places available remained at 75.

Medical Officers of the Health Department continue to carry out medical examinations regularly at Annesley House residential nursery.

DENTAL TREATMENT

Dental care of expectant and nursing mothers and of young children continues to be carried out mainly by the hospital authorities. During the year 365 cases were referred from the local authority's clinics, compared with 389 cases in 1954.

MIDWIVES SERVICE

The total number of domiciliary midwives who were practising at the end of the year was 26, all of whom belonged to the Portsmouth Municipal Service. The total number of cases delivered by them was 1,525 (1,599), representing an average of 82.5 (88.8) cases per midwife per annum.

Close liaison is maintained between the maternity section of the Health Department and the hospital maternity booking office. The Supervisor of Midwives continues to make investigations into home conditions where admission to hospital is sought on grounds of inadequate accommodation at home, and during the year 952 cases were investigated.

The domiciliary service of midwives continues to undertake the district training of pupil midwives for their Part II examination of the Central Midwives Board. During the year 28 pupils entered for the examination and all were successful at their first attempt.

ANALGESIA IN CHILDBIRTH

There was a slight increase in the percentage of cases to whom gas and air analgesia was administered on the district in 1955—87·1, compared with 86·9 in the previous year.

The administration of pethidine by the midwives continues to be most successful in bringing relief to mothers in labour.

The following is an analysis of cases:—

Gas and air and pethidine used	780 (855)
Gas and air alone used	548 (534)
Pethidine alone used	24 (17)

The remaining cases—173—were those in which a different form of analgesia was used, those where for medical reasons it was contra-indicated, cases in which the delivery was too rapid, and where the mothers preferred to have no analgesia.

HOME HELP SERVICE

This service continues to work satisfactorily; all cases receiving assistance are carefully selected and supervised.

To further the more efficient care of old people and to reduce home helps' travelling time the group scheme was further extended. In this scheme a home help is given the care of approximately six cases whose homes are in close proximity to one another; nine of these groups have now been introduced. It is of interest to note that the number of hours worked for old people represents 86% of the work of the service.

The Home Help Service could be greatly extended but it is limited by the amount of money available. An analysis of the statistics for the year 1955 is as follows:—

Number of home helps at the end of the year	...	58
Number of maternity cases helped	...	98
Number of tuberculosis cases helped	...	31
Number of chronic sick cases helped (including aged and infirm)	...	539
Number of other cases of illness helped	...	83
Number of hours worked for maternity cases	...	4,301½
Total number of hours worked	...	92,096¾ (82,794¾)

HEALTH VISITING

The number of health visitors employed at the end of the year was 23 (23), of whom one was employed as full-time and five as part-time tuberculosis visitors. There were also two trained nurses engaged as full-time tuberculosis visitors.

The total number of visits paid was 66,504, compared with 62,708 in 1954. The number of visits paid to children under five years of age was 55,155, compared with 52,310 in the previous year. 6,196 (5,171) were paid to other age groups in the family, especially the aged, and 5,153 (5,227) to tuberculosis patients.

A total number of 3,227 (2,567) visits was paid to the aged. This type of visit is becoming increasingly predominant in the health visitor's work and, owing to the nature of the visit, involves much time. There is a marked increase in the co-operation between the general practitioner and the health visitor in this type of case.

Each health visitor has approximately 600 families in her area.

The health visitors training course continued at Southampton University.

PROBLEM FAMILIES

In Portsmouth health visitors are fortunate in having a comparatively low case load (i.e. approximately 600 families, exclusive of school work) and, therefore, it is felt that each health visitor has sufficient time to carry out intensive work on any family which shows preliminary signs of breaking up. Similarly, constant visiting is done to those unfortunate families with established problems.

The closest co-operation is maintained between the health visitors and the various voluntary and statutory bodies concerned with this problem and, to promote liaison still further between the health visitors and the general practitioners, a special meeting was held between representatives from the Local Medical Committee, B.M.A. and the Public Health Department.

The approximate number of problem families in the city at present is 60, a slight decrease from last year's figure.

MATERNITY AND CHILD WELFARE STATISTICS

CHILD WELFARE CENTRES

The number of attendances, new cases and children seen by the Medical Officers at the Child Welfare Centres functioning during the year are set out below:—

	Attendances	New Cases	Seen by the Medical Officer
Fratton (two afternoons per week) ...	8,797	595	1,122
Epworth Road (one afternoon per week) ...	7,341	317	872
Drayton (one afternoon per week) ...	4,118	170	496
Eastney (two afternoons per week) ...	12,414	740	1,213
Portsea (one afternoon per week) ...	4,455	344	776
Stamshaw (one afternoon per week) ...	6,299	390	686
Tangier Road (one afternoon per week) ...	4,249	172	447
Cosham (one afternoon per week) ...	2,938	263	503
Paulsgrove (one afternoon per week) ...	4,923	261	524
TOTALS	55,534	3,252	6,639
TOTALS for 1954	56,843	3,363	6,912

Attendances at Child Welfare Centres during the year 1955, classified according to the age of the child concerned, were as follows:—

Children from 0 to 1 year of age	...	...	...	41,650
„ „ 1 to 2 years of age	...	...	...	8,539
„ „ 2 to 5 years of age	...	...	...	5,345
Total	...	...	...	55,534
Total for 1954	...	...	...	56,843

Proprietary brands of dried milk were issued from the Child Welfare Centres to expectant mothers, nursing mothers and infants, at a total cost of £3,497 (£3,655); £3,838 (£4,115) was recovered from the patients.

DAY NURSERIES

The following are the statistical details relating to the three Day Nurseries:—

	Admissions during the year	No. on Register at 31st Dec.	Awaiting admission 31st Dec.
ST. PETER'S DAY NURSERY (Complement 30)	75	26	} 8
TWYFORD AVENUE DAY NURSERY (Complement 25)	50	26	
ANGLESEA ROAD DAY NURSERY (Complement 20)	39	20	

MIDWIVES

The practice of district midwives and of those practising in nursing homes during the year was satisfactory, and the inspection of midwives' bags, books and appliances was carried out regularly.

	1955	1954
Number of midwives practising on the district and in nursing homes on December 31st	36	36
Total number of cases attended by them	2,257	2,334
Number of cases attended by municipal midwives	1,525	1,599
„ „ „ „ independent midwives	—	12
„ „ „ „ in nursing homes	732	723
„ „ „ in which medical assistance was sought where no doctor was engaged	182	259

DOMICILIARY SERVICE OF MIDWIVES

	1955	1954
Number of municipal midwives employed in Portsmouth at 31st December	26	24
Number of cases booked	2,155	2,309
Number of patients delivered	1,525	1,599
Excluding holidays and sickness:		
Average number of cases per midwife per month	6.9	7.4
Average number of cases per midwife per annum	82.5	88.8
Average weekly number of bookings	41.4	44.4

ANTE-NATAL AND POST-NATAL CLINICS

Details of the work carried out at Ante-Natal and Post-Natal Clinics during the year are given below:—

	ANTE-NATAL				POST-NATAL			
	No. of new patients		Total attendances		No. of new patients		Total attendances	
	1955	1954	1955	1954	1955	1954	1955	1954
Fratton (A.N., 5 clinics weekly) ... (P.N., 1 clinic weekly)	1,126	1,091	8,075	8,365	219	240	331	284
Cosham (A.N., 2 clinics weekly) ... (P.N., 2 clinics monthly)	389	422	2,383	2,732	28	59	88	109
Portsea (A.N., 1 clinic weekly) ...	199	224	1,397	1,609	—	—	—	—
Saint Mary's Hospital (A.N., 7 clinics weekly) ... (P.N., 1 clinic weekly)	1,045	1,257	14,536	15,552	779	1,291	1,077	1,291
TOTALS ...	2,759	2,994	26,391	28,258	1,026	1,590	1,496	1,684

INSTITUTIONAL TREATMENT OF MATERNITY CASES

	Saint Mary's Hospital	Royal Naval Maternity Home
No. of maternity beds (exclusive of isolation and labour) ...	73	17
No. of patients admitted ...	2,063	184
Average duration of stay ...	11 days	14 days
No. of cases delivered by—		
(a) Midwives ...	1,462	155
(b) Doctors ...	334	18
Cases in which medical assistance was sought by midwife ...	Doctor always available	18
No. of cases notified as puerperal pyrexia ...	26	1
No. of cases of pemphigus neonatorum ...	—	—
No. of infants not entirely breast-fed while in Institution ...	478	26
No. of cases notified as ophthalmia neonatorum ...	—	—
No. of maternal deaths ...	2	—
No. of foetal deaths—		
(a) Stillborn ...	82	3
(b) Within 28 days of birth ...	59	2

HOME VISITING

The health visitors paid 66,504 (62,708) visits during the year:—

						Total Number of Visits	
						1955	1954
First visits to children	...	...	...	...	...	3,405	3,624
Subsequent visits to children from 0 to 1 year of age	...				...	19,424	18,082
" " " 1 to 2 years of age	...				...	10,855	10,567
" " " 2 to 3 years of age	...				...	8,754	8,955
" " " 3 to 5 years of age	...				...	12,717	11,082
Visits to expectant mothers	...	...	...	...	...	1,365	988
Visits in respect of home helps and the aged	...	...	...	...	...	4,831	4,183
Visits in respect of tuberculosis patients	...	...	...	...	...	5,153	5,227

INFANT MORTALITY, 1955

DEATHS FROM STATED CAUSES AT VARIOUS AGES
UNDER ONE YEAR OF AGE

Cause of Death					Under 1 week	1 to 2 weeks	2 to 3 weeks	3 to 4 weeks	Total under 4 weeks	4 weeks and under 3 months	3 months and under 6 months	6 months and under 9 months	9 months and under 12 months	Total Deaths under 1 year
Pneumonia	...	...	...	...	2	1	1	1	5	—	3	1	—	9
Laryngitis	...	...	...	...	—	—	—	—	—	—	—	—	1	1
Gastritis, Enteritis and Diarrhoea	...			...	—	1	—	—	1	—	—	1	1	3
Congenital Malformations	...	...			5	1	—	—	6	2	2	2	1	13
Injury at Birth	...	...	...		9	—	—	—	9	—	—	—	—	9
Post-natal Asphyxia and Atelectasis					16	1	—	—	17	—	—	—	—	17
Immaturity	...	...	...	...	13	1	—	1	15	1	—	—	—	16
Other Causes	...	...	...	...	8	—	—	—	8	1	1	—	—	10
Accidents	...	...	...	...	—	—	—	—	—	1	1	—	—	2
Homicide	...	...	...	...	1	—	—	—	1	—	—	—	—	1
TOTALS	...	...	...	...	54	5	1	2	62	5	7	4	3	81
Previous Year (1954)	...	...	...	...	42	7	2	1	52	15	10	5	6	88

DENTAL TREATMENT FOR EXPECTANT AND NURSING MOTHERS AND YOUNG CHILDREN

By the Senior Dental Officer

Under an agreement with the Portsmouth Group Hospital Management Committee, clinics are held for these patients in the Dental Department of Saint Mary's Hospital and all forms of dental treatment are provided, including, when necessary, the supply of dentures. The facilities of the hospital's x-ray department are also available.

The number of dental officers in the School Dental Service ($4\frac{1}{2}$ for 33,000 children) is inadequate for them to allocate time for the inspection and treatment of expectant and nursing mothers, but some children under five are given treatment in the Education Committee clinics. These are largely younger brothers and sisters of children at school and are brought to the clinic, or appointments sought, by their parents when other members of the family are attending for treatment. The children attending child welfare clinics, etc., are usually referred to Saint Mary's Hospital for treatment. No provision has yet been made for the routine inspection of "under fives."

These patients are, of course, entitled to free treatment—excluding dentures—under the general dental service and practitioners have always shown some priority to expectant mothers.

There is no evidence to show that those wishing to have treatment by the dentist of their choice under the scheme have any difficulty in obtaining it.

SCHOOL DENTAL SERVICE

DENTAL TREATMENT PROVIDED FOR PRE-SCHOOL CHILDREN

(a) Numbers provided with Dental Care:

Examined	Needing Treatment	Treated	Made Dentally Fit
124	89	80	60

(b) Forms of Dental Treatment provided:

Extractions	General Anaesthetics	Silver Nitrate Treatment	Fillings
115 teeth extracted for 70 children	26	5	5

SAINT MARY'S HOSPITAL DENTAL CLINIC

DENTAL TREATMENT PROVIDED FOR EXPECTANT AND NURSING MOTHERS AND PRE-SCHOOL CHILDREN

(a) Numbers provided with Dental Care:

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers	141	105	116	116
Children under five	200	178	166	166

(b) Forms of Dental Treatment provided:

	Scalings and Gum Treatment	Fillings	Extractions	General Anaesthetics
Expectant and Nursing Mothers	—	14	96	89
Children under five	—	6	159	159

HOME NURSING

The Secretaries of the Portsmouth Victoria Nursing Association, Messrs. Edmonds & Co., have kindly supplied the following report for 1955:—

"Since 1948 the work of the Association has more than doubled, both as regards the number of cases visited and the number of visits made. It is encouraging to note that the staff position remains satisfactory.

The trend reported last year that patients over 65 years of age were requiring more attention than hitherto has continued and causes no little anxiety. The analysis of cases shows that well over half the number of cases and visits made in 1955 were in respect of this class, who, usually living alone, require considerable nursing attention extended over a lengthy period of time.

Largely due to the efficient work of the health visitors, the paediatric wards of the hospitals, the School Medical Service, and a good standard of general health, the proportion of work attributable to infants and children is small and mostly of a minor character.

The number of cases where the staff are called upon to administer drugs has continued to increase. In 1955 over one-third of the total cases attended involved intra-muscular injections.

The superintendents and staff continue to work in close liaison with all other branches of the health service with whom they are associated in carrying out their duties.

The Executive desire to record their thanks to our superintendents and nurses for the very efficient and untiring manner in which they have carried out their increased work.

The Executive also wish to thank the representatives of the Portsmouth Corporation, who have continued to offer us their help, and also the doctors and other social service workers for their willing help in giving lectures to candidates for the Queen's Roll."

PORTSMOUTH VICTORIA NURSING ASSOCIATION
STATISTICS FOR 1955

	NURSES' HOMES				TOTAL	
	Radnor House		Beddow House			
Number of nurses employed for visiting (average)	19	(19)	21	(18)	40	(37)
Minimum in any one month	16	(18)	18	(16)	34	(34)
Maximum in any one month	21	(21)	24	(20)	45	(41)
Number of cases visited in 1955:						
(a) Maternity	14	(6)	15	(28)	29	(34)
(b) Pre-school children	120	(164)	73	(122)	193	(286)
(c) School children	118	(132)	81	(79)	199	(211)
(d) Tuberculosis	82	(67)	232	(107)	314	(174)
(e) Other cases... ..	2,827	(2,660)	1,440	(1,899)	4,267	(4,559)
	3,161	(3,029)	1,841	(2,235)	5,002	(5,264)
Total number of visits in respect of these cases:						
(a) Maternity	110	(54)	99	(277)	209	(331)
(b) Pre-school children	651	(788)	376	(1,029)	1,027	(1,817)
(c) School children	666	(653)	542	(590)	1,208	(1,243)
(d) Tuberculosis	3,306	(1,665)	2,240	(2,255)	5,546	(3,920)
(e) Other cases... ..	65,433	(62,422)	42,847	(39,739)	108,280	(102,161)
	70,166	(65,582)	46,104	(43,890)	116,270	(109,472)

VACCINATION AND IMMUNISATION

*By the Medical Officer in Charge***Vaccination**

The numbers vaccinated by medical practitioners and the Health Department were as follows:—

		1955			1954		
		<i>Primary</i>	<i>Re-Vacc.</i>	<i>Total</i>	<i>Primary</i>	<i>Re-Vacc.</i>	<i>Total</i>
Health Department	...	632	457	1,089	716	281	997
Practitioners	...	1,478	321	1,799	1,493	380	1,873
		<u>2,110</u>	<u>778</u>	<u>2,888</u>	<u>2,209</u>	<u>661</u>	<u>2,870</u>

Children born in 1955 numbered 3,380 (3,711) and, of these, 1,071 (1,172) or 31·5% (31·6%) were vaccinated in the same year.

259 (195) international certificates were completed for persons going abroad.

In addition to the sessions which are held at the Vaccination and Immunisation Clinic, "F" Ward, Infectious Diseases Hospital, weekly vaccination has now been introduced into two more child welfare centres. This makes a total of seven centres for vaccination.

Vaccine lymph continued to be obtained from the Central Public Health Laboratory, Winchester. Primary vaccination is now performed at 3 months. Members of the Health Department, including doctors, health visitors, sanitary inspectors, clerks, and ambulance drivers and attendants, were again offered vaccination and the response was good.

In April, as the Port of Brest in France was declared infected with smallpox and as there are many small ships from the neighbouring ports that call at Portsmouth, vaccination was offered to the customs officers and the staff of the Harbour Master and shipping companies and others using the Harbour at the Camber. 126 people were vaccinated.

Diphtheria Immunisation

In addition to weekly sessions held at the Immunisation and Vaccination Clinic at "F" Ward, Infectious Diseases Hospital, sessions are also held at nine child welfare centres. Primary immunisation is now carried out at 4 months, the vaccine used being Glaxo's combined Diphtheria F.T. (P) and Pertussis.

During the year the Ministry of Health offered to supply P.T.A.P. instead of A.P.T., and this offer was accepted with the hope of reducing the number of reactions. Six-monthly visits are paid to all schools and those children not already immunised with combined vaccine are immunised by two injections deep subcutaneously of P.T.A.P. with one month's interval between doses. The P.T.A.P. is issued free by the Ministry of Health. Supplementary or "Booster" doses of P.T.A.P. are given to the 5 year-old group and again at 9 years and 13 years.

The number who completed the course is slightly less than in 1954. This is possibly due to two factors: the decreased birth rate and the emigration to Leigh Park housing estate, which is outside the boundaries of the City. The "Booster" doses have again slightly increased to 7,227, the highest yet recorded in Portsmouth.

The following table indicates the work done since 1943:—

Year	Completed course	"Booster" doses	Cases of diphtheria admitted to hospital	Deaths from diphtheria
1943 ...	4,784	75	31	1
1944 ...	2,518	106	17	2
1945 ...	3,633	820	13	2
1946 ...	4,763	4,243	17	—
1947 ...	4,375	3,060	15	1
1948 ...	4,917	5,452	6	—
1949 ...	4,437	3,335	7	1
1950 ...	3,428	3,756	1	—
1951 ...	3,479	5,261	5	1
1952 ...	3,214	6,551	—	—
1953 ...	3,243	5,292	1 Haslar	—
1954 ...	3,499	7,169	—	—
1955 ...	3,222	7,227	—	—

Supplementary doses are given almost entirely in schools; co-operation given by head teachers has been good.

Each year a letter offering immunisation is sent to the principals of every private school but this year the response has been poor; only three replied.

The proportion immunised by the various agencies (shown as a percentage of the children under 5 years of age) was:—

	1955	1954
Clinics	61.1	58.6
Schools	0.4	1.7
Nurseries	1.4	1.5
Private Practitioners	37.1	38.2

Number of children who received the complete course:—

Under five	2,720	2,912
Five to fifteen	495	583
Over fifteen	7	4
TOTAL	3,222	3,499
Supplementary doses	7,227	7,169
	10,449	10,668

Total number of children immunised since the inception of the scheme in 1935—83,606.

The percentage of children immunised was as follows:—children born during 1955 and immunised the same year—13.7%, between one and four years 73.9%, and between five and fourteen 76.8%, giving an overall percentage of 71.7%.

REACTIONS

As in previous years those reactions which are brought to our notice have been recorded and classified as mild, moderate or severe. The great majority fall into the mild group, as shown in the following table.

		Mild	Moderate	Severe	Total
First diphtheria ...	...	1	1	—	2
First combined ...	...	2	—	—	2
Second diphtheria ...	...	—	—	—	—
Second combined ...	...	2	1	1	4
Third combined ...	...	—	—	—	—
Supplementary ...	...	34	3	1	38
		39	5	2	46

It cannot be claimed that the above table presents the whole picture, though it is fair to assume that reactions not brought to the notice of the Department are only mild ones. There is a definite reduction in the number of reactions this year, possibly due to the use of P.T.A.P. instead of A.P.T.

POLIOMYELITIS AND IMMUNISATION

None of the four poliomyelitis cases admitted to the Infectious Diseases Hospital from the City had been immunised during the previous six months.

Whooping Cough (Pertussis) Immunisation

Immunisation is carried out with Glaxo's Diphtheria-Pertussis (combined) vaccine in most cases, though pertussis vaccine alone is available for cases in which the child has already been immunised against diphtheria.

194 cases of whooping cough were notified by general practitioners and 23 (11·9%) were stated to have been previously immunised; in three of the immunised only two injections had been given and therefore immunisation was incomplete. In two cases there was no record of immunisation.

Information was not available as to the severity of the cases; none of the immunised cases was admitted to hospital.

STATISTICS RELATING TO PERTUSSIS IMMUNISATION

		1955	1954
First doses ...	...	2,597	2,276
Second doses ...	...	2,296	2,134
Completed doses ...	...	2,013	2,126
Completed doses: Under five ...	...	1,989	2,091
Five to fifteen ...	...	24	35
		2,013	2,126

Cholera, Typhoid, Tetanus and Typhus

122 (151) individuals, mostly persons going abroad—mainly wives and families of service men—were vaccinated for one or more of the above diseases.

The actual numbers were:—

		1955	1954
Cholera ...	...	27	24
Cholera-typhoid ...	...	18	27
Typhoid and para-typhoid ...	...	77	93
Tetanus-typhoid ...	...	0	6
Typhus ...	...	0	1
		122	151

45 (51) international certificates for cholera were issued.

Needle Sharpening

This is undertaken at the clinic by the male orderly and the number of needles sharpened during the year was:—

	1955	1954
Midwives Service	3,866	3,265
Victoria Nurses	1,893	1,808
Immunisation Clinic	2,764	3,660
	<u>8,523</u>	<u>8,733</u>

From July the Central Laboratory Syringe Service took over the sterilisation of all needles and syringes used for immunisation.

Preliminary cleaning and sharpening of needles is still carried out by the staff at the Clinic, Infectious Diseases Hospital. Previous to this needles and syringes were autoclaved by the Infectious Diseases Hospital.

B.C.G. Vaccination

The procedure adopted last year was continued. The Superintendent School Nurse visited each school, by appointment, and applied the "Heaf" multiple puncture tuberculin test. The Medical Officer in charge of Immunisation visited three days later to read the results of the tests and to vaccinate the non-reactors. All positive reactors were given appointments to attend the Mass Miniature Radiography Unit. Testing and vaccination were carried out in the schools at six-monthly intervals.

The acceptance rate by parents (82·2%) was considered satisfactory.

Unsatisfactory reactions to vaccination were few, were confined to small ulcers, and no cases of adenitis were noted.

TESTING FOR CONVERSION

A total of 555 children was retested with the "Heaf" gun six months after vaccination, with the following results:—

<i>Positive</i>	<i>Negative</i>	<i>Not Inspected</i>	<i>Total</i>
510	6	39	555

The six who had failed to convert were again tested with Mantoux 1/1000 and, of these, two remained negative and four showed a very faint positive reaction.

The results of Mass Miniature Radiography of the positive reactors are dealt with by the Medical Director of the Unit in his report on page 55.

STATISTICS RELATING TO B.C.G. VACCINATION

No. of visits to schools	Forms sent out	No. of acceptances	Number tested	Absent from initial test	Already att. Chest Clinic	Negative Reactors (vaccinated)	Positive Reactors	M.R.U. appts.	Absent from initial reading
53	2,369	1,947 (82·2%)	1,896	63	31	1,430 (79·9%)	359 (20·1%)	266	107

MUNICIPAL AMBULANCE AND MEDICAL CAR SERVICE

By the Ambulance Officer

GENERAL

During the year 1955 there was an increase in the number of patients conveyed in comparison with the previous two years; this was mainly due to the increased work in existing clinics, particularly fracture clinics and casualty wards, and to a considerably increased outpatient activity at Queen Alexandra Hospital and St. James Hospital.

Peak hours of work extend from about 8.15 to 5.30 and, generally, the build-up at 10.0 a.m. and 1.30 p.m. remained as in previous years. This earlier start of certain clinics was most noticeable and the late finishing of some clinics extended well into the evening—outpatients still being conveyed home at 5.30 and 6.0 p.m. and, on a number of occasions, considerably later.

There was no seasonal decline in patients conveyed during holiday months; in fact, June, July, August and September were the busiest months of the year. The highest number of patients ever carried in any one month occurred in June, but otherwise monthly totals were fairly constant.

PATIENT CONVEYANCE

The number of patients conveyed was 66,481, comprising 15,191 stretcher and 51,290 sitting cases. In comparison with 1954, this is an increase of 2,914 (4.5%). Admissions were 12.9% of the total. There was a slight increase of 157 in this category in comparison with 1954, mainly to St. Mary's and the Royal Portsmouth Hospitals; other hospitals remained at much the same level as in the previous year. The most marked decrease was in the tubercular admissions to the Infectious Diseases Hospital.

The ratio was 6 stretcher cases to 1 sitting case.

Discharges were 7.6% of the total, this being a decrease of 344 in comparison with 1954—mainly a reduction by the Royal Portsmouth Hospital.

The ratio was 1 stretcher to 3 sitting cases.

Transfers were 15.9% of the total, an increase of 353, this increase being mainly sitting cases. St. Mary's, Queen Alexandra, St. James and the Eye and Ear Hospitals show an increase in this category.

The ratio was 1 stretcher to 2 sitting cases.

Outpatients were 63.4% of the total, an increase of 2,748. A point about this increase is that stretcher cases increased almost at the same level as sitting cases. St. Mary's Hospital and the Ministry of Health outpatients decreased but all other hospitals increased.

The ratio was 1 stretcher to 11 sitting cases.

The overall ratio was 1 stretcher to 3 sitting cases, which is the same as in previous years.

Patients conveyed to places outside the City totalled 1,910 and, of these, 153 travelled by rail. The highest proportion of patients to places outside the City was to other hospitals, convalescent and maternity homes within the Hospital Management Committee area.

Patient-carrying mileage during 1955 was 248,569; this was an increase of 5,778 (2.3%) over 1954, but the miles per patient were reduced by 0.1 to 3.7. Ambulances covered 134,645 miles and sitting-case cars 113,924.

EMERGENCY SERVICE

There were 2,464 calls and 2,307 patients during 1955, this being an increase of 79 calls and 67 patients in comparison with the previous year. The mileage was 10,853, an increase of 197 miles. Calls wherein ambulances were not required numbered 148; there were 96 persons deceased on arrival of the ambulance. During the year there were only two malicious calls—one in January and one in December. Casualty distribution was:—

316 to St. Mary's Hospital,
1,875 to the Royal Portsmouth Hospital,
116 taken home or to other places.

The busiest months of the year were July and August and the average busiest days, Saturdays and Mondays.

ANCILLARY WORK

Conveyance of municipal midwives and analgesic apparatus during the year accounted for 10,987 miles, a reduction of 1,667 in comparison with the previous year. During the year, about 1,450 gas and air machines were delivered and collected. Abortive and Service mileage for the year was 12,046, an increase of 139 miles over the previous year.

VEHICLES

Generally throughout the year there was comparatively little mechanical trouble but the age and high mileage of the older vehicles are causing an increase in repair expenditure and of man-hours to keep them reasonably roadworthy. There were very few breakdowns on the road but repairs at the Central Depot increased. The major repairs carried out at Central Depot were, generally, done expeditiously and a good liaison with the garage manager was maintained. The maintenance schedule carried out by the maintenance chargehand was generally up-to-date but his task was made more difficult than it should be by lack of housing and proper heating. One ambulance was converted into a special vehicle to convey respiratory poliomyelitis cases and is still held for that purpose.

Accidents involving Ambulance Service vehicles numbered 14; 3 of these were during Civil Defence training but the highest proportion of accidents were the fault of the other party. No really serious accident occurred, and those that did were mainly dented mudguards and bodywork.

STAFF

Sickness rate during February and March of this year was fairly high but it affected only a few of the staff and was not general. A high proportion of it was post-operation convalescence. There was no absenteeism at any time and timekeeping on the whole was good. No disciplinary action of any note was necessary and the staff worked well and willingly often under difficult weather conditions. Chargehands worked well and the control of staff was good without being offensive and co-operation between control room and vehicle crews assisted this Service to operate with the minimum of staff. Clerical staff worked well under conditions of lack of space, heating and light, and continual noise interruptions.

No complaints of note against the staff were received and generally public relations were good. Many comments on the cheerfulness of the staff have been received, even though some of these patients were extremely trying. Written and verbal compliments have been received, which included the clerical staff.

Courses during the year were first aid examination courses—all members passed this examination and obtained certificates.

RADIO

During this year, no breakdowns of the fixed station occurred and there were very few faults in the mobile sets. It is difficult to assess the actual savings due to radio in (say) petrol consumption, because of aging vehicles, weather conditions, type of journey, etc. The most obvious saving has been in manpower required, as there is the same number of staff now as in 1951 but, in comparison with that year, patients increased by 12,993 but the mileage by only 4,132. No increase in the number of operational vehicles has been necessary and this is due solely to having complete flexibility through radio-telephony. Servicing arrangements of the agents were again very satisfactory, liaison was good, and no delays occurred in repairing reported faults.

MUTUAL AID

Mutual aid arrangements with Hampshire County Council for the conveyance of infectious cases were cancelled by them during this year. This leaves only an agreement for the conveyance of premature babies. The effect has been to allow a little better coverage for City commitments, but this cancellation has reduced income. Agreements regarding Section 24 of the Amendment Act continue to operate satisfactorily and save this Service considerable mileage and time. Mutual aid arrangements with other Ambulance Services continued to operate very well in the meeting of trains and boats and, in this category, there is a considerable increase as Portsmouth is now recognised as the terminal point for this area.

More use is generally being made of returning empty vehicles on long-distance journeys; the liaison between Portsmouth and Surrey is exceptionally good and has saved considerable mileage and money to both authorities. Close liaison with Hampshire (Fareham) Ambulance Service has resulted on numerous occasions in one vehicle being used on distance journeys instead of one from each Service.

VOLUNTARY ORGANISATIONS

The Hospital Car Service conveyed 59 patients, covering 5,543 miles—an increase of 18 patients and 1,352 miles over the previous year. The Area Organiser has been most co-operative and in many instances arranged drivers and cars at very short notice.

The St. John Ambulance Brigade conveyed 62 patients, covering 552 miles—an increase of 8 patients and 54 miles in comparison with 1954.

The British Red Cross Society conveyed 8 patients, covering 105 miles—an increase of 4 patients but a decrease of 42 miles in comparison with the previous year.

The figures in this paragraph are not included in the preceding patient-carrying analysis.

CIVIL DEFENCE

Mileage covered during 1955 in Civil Defence training was 35,167, of which ambulances covered 15,793 and cars 19,374; this is an increase of 11,982 over the previous year. There were 43 learner-drivers; 15 of these were discontinued, 19 are still under instruction and 9 passed their test. There were 132 students on conversion or refresher courses, each student averaging about 10 hours.

In section training, there were approximately 690 hours instruction and 6,911 attendances—an average of 10 students per session. Generally, training went reasonably smoothly and impetus was given to it by the appointment of a Section Training Organiser (Mr. R. J. Turner) in October. The provision of vehicles for training at times took too high a number of the Section 27 fleet, particularly so in the evenings, but, toward the end of the year, the situation was eased by the acquisition of a Civil Defence ambulance.

TOTAL MILEAGE

The total mileage for the directly provided service was 306,769, of which ambulances covered 158,554 and sitting-case cars 148,215. Voluntary Organisations covered 6,200 miles, of which 657 were by ambulances and 5,543 by Hospital Car Service.

STATISTICS RELATING TO THE PERIOD 1st JANUARY TO 31st DECEMBER, 1955

PATIENT CARRYING ANALYSIS

	<i>Patients</i>		<i>Mileage</i>	
Saint Mary's Hospital	19,155	(20,274)	67,425	(74,545)
Infectious Diseases Hospital	1,824	(1,893)	11,579	(9,713)
Chest Clinic	5,296	(6,137)	9,449	(12,347)
Royal Portsmouth Hospital	22,489	(19,160)	67,010	(62,219)
Queen Alexandra Hospital	8,443	(7,168)	37,016	(31,268)
St. James Hospital	1,240	(735)	7,903	(5,561)
Eye and Ear Hospital	1,644	(1,460)	5,975	(6,155)
Ministry of Health	1,230	(1,540)	4,181	(5,948)
Nursing Homes	283	(222)	2,018	(1,566)
Other requesting authorities	2,570	(2,738)	25,160	(22,813)
Accident Service	2,307	(2,240)	10,853	(10,656)
TOTAL ...	66,481	(63,567)	248,569	(242,791)
Average patients per day	=		182.1	(174.1)
Average miles per patient	=		3.7	(3.8)
Average patient-carrying miles per day	=		681.0	(665.1)

ANCILLARY AND CIVIL DEFENCE ANALYSIS

Analgesic Apparatus	10,987	(12,654)
Service and Abortive	12,046	(11,916)
Civil Defence	35,167	(23,185)
Immunisation Team	—	(14)
TOTAL ...	58,200	(47,755)

WORK OF THE TUBERCULOSIS SERVICE

By the Consultant Chest Physician

The decline in primary notifications which was commented on in last year's report has continued, and the substantial downward trend seen over the past few years is evident in the following figures.

PRIMARY NOTIFICATIONS

	Respiratory	Non-respiratory	Total
1950	312	33	345
1951	270	29	299
1952	223	25	248
1953	260	24	284
1954	200	16	216
1955	165	17	182

This is a considerably more significant indication of the general state of tuberculous infection in the City than is the number of deaths from the disease during the year, which have now declined so substantially that they do not accurately reflect the general picture of infection.

DEATHS

	Respiratory	Death rate per 100,000 population	Non-respiratory	Death rate per 100,000 population
1950	87	36	8	3
1951	60	24.6	6	2.5
1952	51	21	11	4.5
1953	46	18.7	6	2.4
1954	38	15.6	7	2.9
1955	20	8.2	3	1.2

This general improvement in the over-all picture of tuberculous infection is further borne out by the results of the tuberculin testing of thirteen to fourteen year old school children, preliminary to B.C.G. vaccination. It has been found that, although the infectivity rate varies widely from school to school, an average figure is just over 20%—a substantial decline as compared with the position only four or five years ago.

CONTACTS

	1951	1952	1953	1954	1955
No. of contacts examined...	921	914	993	1107	742
No. of contacts proved definite cases ...	5	15	33	13	9

NEW PATIENTS EXAMINED

1951	1952	1953	1954	1955
1342	1490	1537	1528	1476

NUMBER OF CASES ON REGISTER 31st DECEMBER

	1951	1952	1953	1954	1955
Respiratory ...	1906	1935	2042	1993	2006
Non-respiratory	203	188	186	165	167
TOTAL ...	2109	2123	2228	2158	2173

DEATHS BY AGE GROUPS

AGE GROUP	RESPIRATORY		NON-RESPIRATORY		COMBINED		GRAND TOTAL
	M.	F.	M.	F.	M.	F.	
0—1	— (—)	— (—)	— (—)	— (—)	— (—)	— (—)	— (—)
1—4	— (—)	— (—)	— (—)	— (—)	— (—)	— (—)	— (—)
5—14	— (—)	— (—)	— (—)	1 (1)	— (—)	1 (1)	1 (1)
15—24	— (1)	1 (2)	— (1)	— (—)	— (2)	1 (2)	1 (4)
25—34	— (2)	1 (5)	— (—)	— (—)	— (2)	1 (5)	1 (7)
35—44	1 (2)	1 (1)	— (—)	1 (—)	1 (2)	2 (1)	3 (3)
45—54	5 (3)	1 (4)	— (1)	— (1)	5 (4)	1 (5)	6 (9)
55—64	1 (8)	— (1)	— (—)	— (—)	1 (8)	— (1)	1 (9)
65 plus	9 (8)	— (1)	— (1)	1 (2)	9 (9)	1 (3)	10 (12)
TOTAL ...	16 (24)	4 (14)	— (3)	3 (4)	16 (27)	7 (18)	23 (45)

(Figures in brackets are those for 1954)

Of the 20 deaths from respiratory tuberculosis, 6 cases (30%) were not notified during life

NOTIFICATIONS BY AGE GROUPS

* NEW CASES							
AGE GROUP	RESPIRATORY		NON-RESPIRATORY		COMBINED		GRAND TOTAL
	M.	F.	M.	F.	M.	F.	
0—1	— (—)	1 (—)	— (—)	— (—)	— (—)	1 (—)	1 (—)
1—4	— (1)	2 (2)	1 (1)	2 (—)	1 (2)	4 (2)	5 (4)
5—14	3 (11)	8 (5)	— (—)	3 (2)	3 (11)	11 (7)	14 (18)
15—24	24 (24)	19 (22)	— (2)	3 (2)	24 (26)	22 (24)	46 (50)
25—34	9 (20)	12 (20)	1 (1)	2 (—)	10 (21)	14 (20)	24 (41)
35—44	18 (19)	14 (9)	— (1)	2 (2)	18 (20)	16 (11)	34 (31)
45—54	19 (22)	2 (7)	1 (—)	1 (2)	20 (22)	3 (9)	23 (31)
55—64	14 (21)	2 (4)	— (—)	— (—)	14 (21)	2 (4)	16 (25)
65 plus	12 (8)	6 (5)	— (2)	1 (1)	12 (10)	7 (6)	19 (16)
TOTAL ...	99 (126)	66 (74)	3 (7)	14 (9)	102 (133)	80 (83)	182 (216)

* Includes all primary notifications and new cases coming to the notice of the Medical Officer of Health by other means

(Figures in brackets are those for 1954)

SUMMARY OF CASES OF TUBERCULOSIS ON DISPENSARY REGISTER 1955

DIAGNOSIS	RESPIRATORY			NON-RESPIRATORY			TOTAL		GRAND TOTAL
	MEN	WM.	CH.	MEN	WM.	CH.	MEN	WM.	
A. (1) No. of definite cases of tuberculosis on Register 1st January, 1955	1,099	784	110	52	71	42	1,151	855	2,158
(2) Transfers from other Authorities	19	40	3	2	1	-	21	41	65
(3) Lost sight of cases returned during year	5	6	-	-	-	-	5	6	11
B. No. of New Cases diagnosed as tuberculosis during the year:									
(1) CLASS A (T.B. minus)	35	30	13	1	5	6	36	35	90
(2) CLASS B (T.B. plus)	61	25	1	1	4	-	62	29	92
C. No. of cases included in A and B written off the Register during the year as:									
(1) Recovered	27	22	1	1	2	1	28	24	54
(2) Dead (all causes)	24	5	-	-	2	1	24	7	32
(3) Removed to other areas	41	50	9	-	2	1	41	52	103
(4) For other reasons	21	22	3	3	2	3	24	24	54
D. No. of definite cases of tuberculosis on Register 31st December, 1955	1,114	792	100	52	75	40	1,166	867	2,173

ALMONER'S REPORT FOR THE YEAR 1955

Although the incidence of tuberculosis is on the decline, the volume of work in the Almoners' Department has not yet shown signs of decreasing.

During the year 187 patients were referred to the Disablement Resettlement Officer. For many of these suitable employment was found, but it is still difficult to place patients who are fit only for part-time or very light work.

The Disablement Resettlement Officer not only attends regular sessions at the Chest Clinic to discuss plans for patients fit to start work. He also visits patients in hospital if they are anxious about their future employment, and tells them about the Industrial Rehabilitation Units and training schemes that will be open to them.

Occupational therapy, which plays such an important part in the treatment of patients in hospital, is of equal importance to patients at home. The Occupational Therapist, however, has not been able to devote as much time as she would like to patients in their own homes, as so much of her time is taken up by patients in the wards. Plans are being made to provide accommodation for an Occupational Therapy Department, and when these plans materialise they will fulfil a great need. In addition to giving the Occupational Therapist an adequate storing space for her materials, it will also mean that out-patients and the patients allowed up on hours in the wards will be able to go there to work under her supervision, and learn new handicrafts.

Long term illness often brings in its wake complex problems in the life of the family and, if the number of patients decreases, it will be possible for the almoners to give more time to interviewing those patients who require case work skill.

In addition to emotional problems, there are, of course, the material ones which, if not solved, will often lead to more serious upsets. The rapid rise in the cost of living during the year would have caused real hardship in families where there was illness if it had not been for the help forthcoming from the voluntary societies. Many demands were made on these, and the number of patients referred to the Voluntary Tuberculosis Care Committee, in particular, exceeded by more than 100 the number referred in 1954. The majority of our patients would not be able to take advantage of the Home Help Service because of the high assessment were it not for the grants made for this purpose by the Voluntary Tuberculosis Care Committee. Grants were also made for extra nourishment, coal, clothes and many other necessities. Hire purchase accounts were settled and fares for visiting hospital paid. Holidays for patients' families were financed, and it is hoped to extend this scheme still further in 1956.

MASS RADIOGRAPHY—1955*Report of the Medical Director***A.—GENERAL****AREAS SURVEYED**

Arrangements were made for the Unit to combine with the Bournemouth and Southampton Units in a combined survey of the City of Southampton, for a period of over three months, and, therefore, little other work outside Portsmouth was carried out.

The Unit visited Leigh Park, for a survey disappointing in its results, and made five other moves.

The time away from headquarters was greater than usual (22 weeks).

Public sessions in Portsmouth, as a result of the Southampton survey, did not take place on the usual scale.

NUMBERS EXAMINED

An appreciable fall in examinees is due to three main causes:—

1. The survey in Southampton was organised so that this Unit (which is one of the original, transportable units) was set up in some areas for a greater time than was advisable in view of the population of the area, public transport facilities, etc., and, not being mobile, there was nothing that could be done about this, although, on occasions, a mobile Unit was borrowed and manned by our staff.
2. The Unit had various staff changes and was without an Organising Secretary at one period.
3. The public sessions in Portsmouth, which are always very well attended, did not take place on the usual scale.

POLICY

Changes were made in the internal working of the Unit resulting in no new observation cases being taken on: this has had its effect in the number of cases of tuberculosis found, as each year this group has given about 12 cases, which will now be lost to the M.R. figures.

Again, as for many years, general practitioners have been encouraged to refer cases, and once again these shew the highest proportion of active cases.

A continuous search for new groups to be examined is being made, especially in hospitals and in contacts-at-work, but little can be done about this until a mobile unit is provided and the present Unit can become static.

SCHOOL CHILDREN

This is the first full year in which tuberculin positive reactors (tested as part of the B.C.G. vaccination scheme in Portsmouth) were X-rayed, instead of the previous scheme of X-raying all school-leavers, as volunteers, without skin tests. Two cases of active tuberculosis were found in the 255 positive reactors who attended. The large number of children X-rayed without skin test is due to the Southampton survey.

The M.R. Scheme also encourages the families of positive reactors to attend the Unit at the same time, and of these 201 attended, and one case of active tuberculosis was found.

In my opinion, this scheme should be extended to *all* school-leavers.

STAFF

This has been a difficult year for the staff in many ways, and I wish to thank them for their hard work and for coping with many difficulties.

Finally, I would like to thank the Chest Physicians for their help in coping with cases referred and with the forms now made necessary by the new Statistical Office returns which have to be made. My own view is that these could be simplified considerably, with much saving of clerical time, without losing much useful information.

In particular, I would like to thank Dr. MacLeod, Consultant Chest Physician, Southampton, for his co-operation and assistance during the Southampton survey.

B.—STATISTICAL

ALL AREAS

Comment has already been made about the reduction in the numbers examined.

The incidence of active disease as found by the Unit has again fallen, from 2.47 in 1954 to 2.13 per 1,000 examined: this fall has appeared in the men examined, the rate in the female sex remaining almost unchanged.

PORTSMOUTH

A total of 28,776 persons was examined in the City, as opposed to 37,007 in 1954, and 58 cases of active tuberculosis were found, an incidence of 2 per 1,000 examined, the lowest yet recorded.

The fall in incidence in the male sex this year is largely in the higher age groups, the youngest age group shewing a rise: the latter is not a true rise in view of the fact that the majority of the youngest age groups this year is a selected group, the positive reactors. In spite of the fall in the higher age groups, 25 per cent. of all male cases were in the 45-54 age group.

ANALYSIS OF ABNORMAL FINDINGS

TABLE III

	Male	Female	Total	Rate per 1,000
SECTION A:				
1. CASES OF INACTIVE PULMONARY TUBERCULOSIS				
(a) Primary lesions	785	519	1,304	30.54
(b) Post-primary lesions	341	196	537	12.58
2. NEWLY DISCOVERED CASES OF ACTIVE PULMONARY TUBERCULOSIS				
(a) Primary	1	3	4	.09
(b) Post primary—Unilateral	31	24	55	1.29
(c) Post primary—Bilateral	19	9	28	.66
(d) Pleural effusions	3	1	4	.09
3. Cases recommended for hospital D5	52	33	85	1.99
4. Cases recommended for observation D4 (Clinic and domiciliary)	10	6	16	.37
5. Cases recommended for observation D3 (or occasional supervision)... ..	49	40	89	2.08
SECTION B:				
NON-TUBERCULOUS CONDITIONS				
1. Abnormalities of the bony thorax and soft tissues—congenital	217	169	386	—
2. Abnormalities of the bony thorax and soft tissues—acquired	261	230	491	—
3. Tumours of the bony thorax: primary and secondary	5	—	5	—
4. Congenital malformations of the lungs	42	14	56	—
5. Bacterial and virus infections of the lungs	19	21	40	—
6. Other infections of the lungs	3	—	3	—
7. Bronchiectasis	41	31	72	—
8. Honeycomb lung	—	—	—	—
9. Emphysema	142	94	236	—
10. Pulmonary fibrosis—non-tuberculous	47	23	70	—
11. Pneumoconiosis	1	—	1	—
12. Spontaneous pneumothorax	3	1	4	—
13. Benign tumours of the lungs and mediastinum	2	—	2	—
14. Carcinoma of the lung and mediastinum	16	3	19	—
15. Metastasis in the lung and mediastinum	2	2	4	—
16. Enlarged mediastinal and bronchial glands— non-tuberculous	4	2	6	—
17. Sarcoidosis and collagenous diseases	6	4	10	—
18. Pleural thickening or calcification—non- tuberculous	548	177	725	—
19. Abnormalities of the diaphragm and oesophagus—congenital and acquired	11	13	24	—
20. Congenital abnormalities of heart and vessels	5	2	7	—
21. Acquired abnormalities of heart and vessels	185	224	409	—
22. Miscellaneous	57	23	80	—
23. Pneumoconiosis with tuberculosis	—	—	—	—
24. Cases who fail to attend for further films or clinical examination	14	12	26	—

SURVEY ANALYSIS (ORGANISED GROUPS)—TABLE IV

TYPE OF SURVEY	NUMBER EXAMINED			NUMBERS SHOWING EVIDENCE OF ACTIVE PULMONARY TUBERCULOSIS						
	Code	Male	Female	TOTAL	Male		Female		Combined Total	Combined Incidence per 1,000
					No.	Incidence per 1,000	No.	Incidence per 1,000		
A. General Public	7	5,543	9,161	14,704	17	3.07	20	2.18	37	2.52
B. Industrial Groups	6	14,257	5,004	19,261	17	1.19	7	1.4	24	1.25
C. School Children	3	1,470	991	2,461	1	.68	1	1	2	.81
Positive Reactors - School Children	3V	124	131	255	2	16.1	—	—	2	8.
D. General Practitioner Groups ...	2	712	915	1,627	11	15.45	5	5.46	16	9.83
E. Mental Hospitals and Institutions	9	—	—	—	—	—	—	—	—	—
F. National Service Recruits ...	1	1,816	—	1,816	4	2.2	—	—	4	2.2
G. Contacts	4	335	111	446	—	—	1	9.01	1	2.24
Families of Positive Reactors—										
School Children	40	54	147	201	—	—	1	7	1	5
H. Out-Patients: General Hospitals	0	314	282	596	—	—	—	—	—	—
I. Special Surveys	5	—	—	—	—	—	—	—	—	—
J. Ante-Natal Groups	8	—	1,155	1,155	—	—	2	1.73	2	1.73
K. Borstal, Prisons and Approved Schools										
L. Local Authority Schools:	6X	235	—	235	2	8.51	—	—	2	8.51
Portsmouth—										
Teachers		6	14	20	—	—	—	—	—	—
Meal Service		—	5	5	—	—	—	—	—	—
Cleaners and Caretakers		3	7	10	—	—	—	—	—	—
Clerical Staff		3	8	11	—	—	—	—	—	—
Southampton—										
Teachers		64	84	148	—	—	—	—	—	—
Meal Service... ..		1	36	37	—	—	—	—	—	—
Cleaners and Caretakers		9	14	23	—	—	—	—	—	—
Clerical Staff		—	5	5	—	—	—	—	—	—
Sussex—										
Teachers		1	—	1	—	—	—	—	—	—
Private Schools:										
Portsmouth—										
Teachers		1	1	2	—	—	—	—	—	—
Southampton—										
Teachers		1	4	5	—	—	—	—	—	—
Clerical Staff		—	1	1	—	—	—	—	—	—

PORTSMOUTH
 CASES OF ACTIVE TUBERCULOSIS
 TABLE V

	Under 14		14 years		15-19		20-24		25-34		35-44		45-54		55-59		60-64		65+		Total	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Number examined	388	216	188	75	2,853	1,790	2,129	2,148	2,650	2,477	3,419	1,782	3,253	1,234	1,137	415	703	260	395	264	18,115	10,661
Number of active cases	1	1	1	—	5	5	3	2	6	7	3	4	13	—	1	1	2	1	—	2	35	23
Rate per 1000 examined	2.58	4.63	5.32	—	1.75	2.79	1.41	0.93	2.26	2.83	0.88	2.24	4.00	—	0.88	2.41	2.84	3.85	—	7.58	1.93	2.16
Combined rate ...	3.31		3.8		2.15		1.17		2.54		1.35		2.9		1.22		3.12		3.03		2.02	

MENTAL HEALTH SERVICE*By the Executive Officer***1.—Administration***(A) Committee*

The prevention, care and after-care of mental illness and mental defectiveness are undertaken by the Mental Health Service, which is administered by the Mental Health Sub-Committee of the Health Services Committee.

(B) Staff

Under the direction of the Medical Officer of Health the work of the Service is performed by the following staff:—

One medical officer employed part-time on the supervision of mental defectives in their own homes.

Executive officer—lay administrator, petitioning officer, with duly authorised officer powers.

Senior psychiatric social worker—has petitioning officer and duly authorised officer powers.

Six mental health social workers—three men and three women, of whom the former have duly authorised officer powers. One has, in addition, petitioning officer powers. Of the three men, two were for many years relieving officers and the third a charge nurse in a mental hospital; and, of the three women, two possess social science diplomas, and the third, though without academic qualification, has had many years' experience in social work.

OCCUPATION CENTRE STAFF

Supervisor.

Handicraft Instructor.

Five Assistants.

Handicraft Instructress

(who is also part-time home teacher).

(C) Co-ordination with Regional Hospital Boards and Hospital Management Committees

There is still user of the local health authority's staff by Saint Mary's Hospital in the supervision of mental defectives on licence from that hospital.

The advisory service of the psychiatrists of St. James Hospital continues to be available to the local health authority through the normal consultant channels.

(D) Duties delegated to Voluntary Associations

No duties are (or were) delegated to any voluntary association.

(E) Training

The staff of the Service is unchanged since the last report, and all members are trained social workers. Two students from London University underwent six weeks practical training during the summer of 1955 under the guidance of the senior psychiatric social worker.

2.—Account of Work undertaken in the Community*(A) Under Section 28, National Health Service Act, 1946.*

The Service continued to maintain a close liaison with the various regional and local departments of the National Health Service, and with the Ministry of Labour, Ministry of Pensions, and all other social agencies in the City, in the provision of community care for the prevention of mental illness, and the care and after-care of mental patients and mental defectives.

Reference has been made in past reports to the difficulty in rehabilitating mental patients and mental defectives because of the absence of large industries, the high unemployment rate in the City, and the lack of suitable employment for mental defectives in particular, most of which is domestic and confined to the holiday season. The arrival of Service people with acute problems (mostly Royal Navy and usually without warning) continues to produce difficulties, since they make demands on the Mental Health Services of equal urgency with those of resident Portmuthians, and not uncommonly leave the City as suddenly as they came, whilst endeavours are still in train to adjust their problems.

(B) *Under the Lunacy and Mental Treatment Acts, 1890-1930.*

605 (566) persons were referred as cases of alleged mental illness. Of those cases dealt with under the Lunacy Act, 1890, 220 were admitted to designated wards under Section 20. 51 were admitted thereto by Order of Justices under Section 21, and 25 were admitted to mental hospitals under Section 16. Of those dealt with under the Mental Treatment Act, 1930, 54 became voluntary patients under Section 1, and 121 were admitted to mental hospitals as temporary patients under Section 5. Because of the lack of more appropriate accommodation, 5 cases were admitted to geriatric wards. In 129 cases the Justices to whom notice was given considered no action was required. The extreme shortage of hospital observation beds designated for the purposes of Section 20 and 21 of the Lunacy Act, 1890, is still attended by the undesirable risk of recourse to admission to mental hospitals by reception and temporary treatment orders.

Portsmouth is a "hospital area", and numerous patients are brought to the mental observation wards of Saint Mary's Hospital, or are taken, with a view to voluntary admission, to St. James Hospital, by duly authorised officers of adjacent local health authorities; patients from these areas admitted to the general or infectious diseases hospitals have sometimes to be admitted to St. James Hospital. Besides this, during the summer months large numbers of visitors (from the Midlands in particular) enter the City, among whom there are quite frequent cases of mental illness which break down here—having come to the seaside after "nervous breakdowns", and so on. All this results in a considerable number of persons brought to the notice of the duly authorised officers having eventually to be taken by them to mental hospitals other than St. James Hospital—sometimes at a considerable distance. It is for this reason that the local health authority does not accept the "knock for knock" principle understood to be adopted by certain local health authorities in operating Section 25 of the National Health Service (Amendment) Act, 1949.

(C) *Under the Mental Deficiency Acts, 1913-1938*

(i) ARRANGEMENTS FOR ASCERTAINING AND SUPERVISING MENTAL DEFECTIVES

The liaison with other departments and agencies mentioned above has been developed to the extent that the powers and duties of the local health authority concerning mental defectives are widely known. In the process of ascertainment, where diagnostic confirmation is required, this is available through the consultant services of the psychiatric staff of St. James Hospital and supervision is carried out by the foregoing staff of social workers.

At the end of 1955 there were 257 mental defectives under statutory supervision, and a further 479 under "voluntary supervision", not being "subject to be dealt with".

(ii) GUARDIANSHIP

Mental defectives under guardianship (of whom there were 20 at the end of the year) are similarly supervised, the frequency of visitation being determined by the nature of the case. Medical supervision under Article 76 (1) of the Mental Deficiency Regulations, 1948, is carried out by a part-time medical officer of the Council. Of the number given, 10 cases were, at the end of the year, placed with nominees of the Guardianship Society. Of both these and local cases, the majority of those needing pecuniary assistance are now maintained by the National Assistance Board.

(iii) ARRANGEMENTS FOR PROVIDING OCCUPATION AND TRAINING FOR DEFECTIVES

An Occupation Centre for mental defectives is in operation, having 73 patients of both sexes on the register at the end of 1955, chiefly of low-grade feeble-minded and imbecile grade, divided into primary mixed and intermediate mixed classes, and a senior male class. Instruction is given in sense training, elementary handicrafts, reading and writing and physical training. A senior female class of 22 meets on three afternoons and one morning weekly under the handicraft instructress, who also gives some home teaching to suitable cases.

During the year plans for the erection of a Day Training Centre for 137 mental defectives, on a site nearly opposite the Corporation Depot in the Eastern Road, were approved by the Minister of Health and building commenced in December, the estimated time of completion being fifteen months. This Centre will supersede the premises in which the Occupation Centre and female class above referred to are at present established, these being rented Church halls.

The shortage of institutional accommodation for mental defectives again produced many grave difficulties; despite approaches made to the appropriate authorities, the situation is steadily worsening. Only one institution (Botleys Park Hospital, Chertsey) is available for Portsmouth cases, and this hospital also serves the Hampshire County Council, Surrey County Council, London County Council and Croydon County Borough Council.

INFECTIOUS DISEASES HOSPITAL

By the Physician Superintendent

ADMISSIONS

The total number of admissions was higher than in 1954.

During the year 1,215 fever (in 1954—970), 45 geriatric (in 1954—69) and 254 tuberculosis (in 1954—247) cases were admitted.

Of the fever cases, 406 (in 1954—247) cases were admitted from outside the City boundary. There were 11 Service cases (in 1954—nil).

DISCHARGES AND DEATHS (FEVER)

Discharges—1,192. Deaths—30. TOTAL—1,222.

Of this number, 380 discharges and 15 deaths were outside the City boundary, making a total number of Portsmouth cases—827.

CASES DISCHARGED DURING 1955

Month	Scarlet Fever	Diph- theria	Other Infections	Non- Infections (not ntfd.)	Deaths	TOTAL
January ...	13	—	57	14	1	85
February ...	14	—	54	13	1	82
March ...	11	—	81	21	3	116
April ...	10	—	71	21	2	104
May ...	4	—	93	17	4	118
June ...	5	—	114	15	3	137
July ...	6	—	115	24	2	147
August ...	6	—	53	19	2	80
September ...	8	—	57	25	2	92
October ...	7	—	73	13	2	95
November ...	4	—	65	16	4	89
December ...	7	—	47	19	4	77
TOTAL ...	95	—	880	217	30	1,222
Outside Cases...	23	—	275	82	15	395
Portsmouth Cases ...	72	—	605	135	15	827

DEATHS—1955

During the year there were 30 deaths from the causes stated below:

Tetanus ...	1	Cardiac Failure and Congenital Heart Disease ...	1
Broncho-Pneumonia ...	2	Typhoid Fever ...	1
Acute Pyogenic Meningitis ...	2	Respiratory Failure and Polio Encephalitis ...	1
Miliary Tuberculosis ...	1	Acute Enteritis ...	2
Miliary Tuberculosis and Tuberculous Meningitis ...	1	Broncho-Pneumonia and Terminal Gastro Enteritis ...	1
Acute Haemorrhagic Necrosis of Supra-renals ...	1	Carcinoma ...	2
Acute Infective Hepatitis ...	2	Necrosis of Supra-renals and Toxaemia and Abscess of Anterior Abdominal Wall ...	1
Chronic Parenchymatous Nephritis...	1	Congenital Heart Disease ...	1
Gastro Enteritis ...	7	TOTAL ...	30
Influenzal Meningitis...	1		
Uraemia and Par-enteral Diarrhoea due to Ectopia Vesicae ...	1		

The following table gives in more detail the deaths for 1955.

Under 1 year ...	...	10
1-5 years ...	...	8
5-20 years ...	...	2
20-70 years ...	...	7
70+ years ...	...	3
		<hr/>
		30
		<hr/>

This gives an over-all mortality rate for infectious diseases of 2.7%.

It will be noted that, of the 30 deaths, 13 occurred in the extremes of life, i.e., under one year and seventy plus. Also, 13 deaths occurred within 24 hours of admission to this hospital. The following table gives a more detailed analysis of the ages of the cases which died within 24 hours of admission.

Under one year	0-14 days	...	-
	14-28 days	...	-
	1-3 months	...	-
	3-6 months	...	1
	6-9 months	...	2
	9-12 months	...	2
1-5 years	...	...	3
5-20 years	...	...	1
20-70 years	...	...	3
70+ years	...	...	1
TOTAL	...	...	13

Diphtheria

There were 5 cases (Portsmouth—2) admitted as observation diphtheria, but no case proved to be this disease.

Paratyphoid and Typhoid Fever.

There were 9 cases (all Portsmouth) admitted as paratyphoid fever and 4 as typhoid fever (Portsmouth—2). 4 proved to be paratyphoid (Portsmouth—2) and 6 typhoid fever (Portsmouth—3).

Scarlet Fever

There were 100 cases (Portsmouth—74) admitted as scarlet fever.

Puerperal Pyrexia

There were 29 cases (Portsmouth—4) admitted as puerperal pyrexia.

Poliomyelitis

During the year there were 57 cases (Portsmouth—28) admitted as poliomyelitis. 21 cases (Portsmouth—3) proved to be this disease.

Respiratory—5. Paralytic—12. Non-paralytic—4. TOTAL—21.

Meningitis.

55 cases (Portsmouth—31) were admitted as meningitis and 4 (Portsmouth—2) as tuberculous meningitis. 24 cases (Portsmouth—14) proved to be meningitis, 3 tuberculous meningitis (Portsmouth—nil) and 1 tuberculous meningitis and miliary tuberculosis (Portsmouth—nil).

		Scarlet Fever	Diphtheria	Typhoid and Paratyphoid Fevers	Meningococcal Infect'n	Acute Poliomyelitis		Erysipelas	Dysentery	Measles	Whooping Cough	Ophthalmia Neonat'm	Puerperal Pyrexia	Notifiable Pneumonia	Food Poisoning	Malaria	Tuberculosis		TOTAL
						Paralytic	Non-Paralytic										Pulmonary	Other Forms	
Jan.	8	-	-	-	-	-	-	2	1	5	1	-	-	1	-	-	4	1	15
"	15	4	-	-	-	-	-	1	-	4	8	-	1	2	3	-	-	-	23
"	22	9	-	-	-	-	-	-	1	2	3	-	-	2	3	-	1	-	21
"	29	2	-	-	-	-	-	-	1	4	3	-	-	1	5	-	5	-	21
Feb.	5	2	-	-	-	-	-	1	-	8	2	-	-	2	4	-	6	2	27
"	12	2	-	-	-	-	-	1	-	26	5	-	-	9	3	-	4	-	50
"	19	5	-	-	2	-	-	-	2	17	1	-	-	-	3	-	3	1	34
"	26	3	-	-	-	-	-	-	-	21	5	-	3	-	1	-	3	2	38
Mar.	5	6	-	-	-	-	-	-	-	25	1	-	-	2	1	-	3	-	38
"	12	6	-	-	-	-	-	-	2	11	2	-	1	1	3	-	3	-	29
"	19	3	-	-	-	-	-	-	-	39	2	-	-	6	-	-	3	-	53
"	26	11	-	-	-	-	-	-	2	39	3	-	1	4	-	-	2	-	62
April	2	6	-	-	-	-	-	-	1	74	3	-	1	8	1	-	6	-	100
"	9	6	-	-	1	-	-	-	-	66	5	1	1	1	-	-	4	-	85
"	16	1	-	-	-	-	-	-	-	172	2	-	1	4	1	-	5	-	186
"	23	5	-	-	-	-	-	-	-	182	5	-	-	-	-	-	6	-	198
"	30	1	-	-	-	-	-	-	1	178	3	-	-	-	-	-	5	-	188
May	7	1	-	-	-	-	-	-	3	245	5	-	2	-	-	-	2	-	258
"	14	1	-	-	-	-	-	-	-	209	9	-	-	1	1	-	1	-	222
"	21	3	-	-	-	-	-	1	-	349	8	-	-	-	1	-	5	-	367
"	28	2	-	-	-	-	-	-	-	439	4	-	4	-	-	-	10	-	459
June	4	2	-	-	-	-	-	1	-	299	3	1	3	-	-	-	4	-	313
"	11	5	-	-	-	-	-	1	-	540	5	-	-	2	-	-	5	1	559
"	18	5	-	-	-	-	-	1	-	282	7	-	1	-	-	-	3	-	299
"	25	2	-	-	-	-	-	-	1	401	2	-	-	2	3	-	-	-	411
July	2	2	-	-	-	-	-	1	4	178	5	-	1	-	-	-	3	-	194
"	9	3	-	-	-	-	-	-	2	206	5	1	-	-	1	-	4	-	222
"	16	4	-	1	-	-	-	-	-	153	8	1	-	2	5	-	2	-	176
"	23	3	-	-	-	-	-	1	-	99	1	-	1	1	-	-	4	3	113
"	30	1	-	-	-	-	-	-	-	50	8	-	1	2	1	-	3	-	66
Aug.	6	2	-	1	-	-	-	1	-	37	4	-	-	2	2	-	4	1	54
"	13	-	-	-	-	-	-	-	1	54	6	-	1	1	-	-	3	1	67
"	20	1	-	-	-	1	-	-	2	18	4	-	2	1	-	-	-	-	29
"	27	-	-	1	-	-	-	-	-	14	4	-	1	-	2	-	3	-	25
Sept.	3	1	-	-	-	-	-	2	-	5	4	-	-	1	3	-	3	-	19
"	10	1	-	-	-	-	-	-	-	13	4	-	-	-	1	-	4	-	23
"	17	7	-	-	-	1	-	-	-	1	3	-	-	-	2	-	4	-	18
"	24	1	-	-	-	-	-	-	-	1	-	-	4	-	-	-	3	-	9
Oct.	1	4	-	1	-	-	-	-	-	1	3	-	-	-	-	-	2	1	12
"	8	2	-	-	-	-	-	-	1	-	5	-	-	-	1	-	2	-	11
"	15	4	-	1	-	-	-	1	-	1	3	-	1	-	-	-	3	-	14
"	22	1	-	-	-	-	-	1	-	1	3	-	-	1	-	-	1	-	8
"	29	4	-	-	-	-	-	-	-	5	-	-	-	-	-	-	1	-	10
Nov.	5	1	-	-	-	-	-	1	-	1	-	-	2	-	-	-	3	-	8
"	12	2	-	-	-	-	-	1	-	-	2	-	-	-	1	-	2	1	9
"	19	2	-	-	-	-	1	1	-	-	4	-	1	-	-	-	6	-	15
"	26	6	-	-	3	-	-	-	-	1	3	-	-	-	3	-	2	-	18
Dec.	3	2	-	-	-	-	-	1	1	1	3	-	-	-	-	-	1	-	9
"	10	2	-	1	-	-	-	-	-	2	6	-	-	-	-	-	2	1	14
"	17	1	-	1	-	-	-	-	-	4	6	-	-	-	1	-	4	-	17
"	24	4	-	-	-	1	-	-	-	-	6	-	1	-	-	-	2	-	14
"	31	2	-	-	-	-	-	-	-	1	2	-	-	1	-	-	1	2	9
Total 1955		156	-	7	6	3	1	20	26	4479	204	4	35	60	56	-	165	17	5239
Total 1954		171	-	5	11	2	1	18	25	46	409	3	87	35	36	1	200	16	1066
Deaths 1955		-	-	1	1	-	-	-	-	-	-	-	-	100	1	-	20	3	126
Deaths 1954		-	-	-	2	-	-	-	-	-	3	-	-	123	1	-	38	7	174

* All Forms

VENEREAL DISEASES TREATMENT CENTRE

By the Venereal Diseases Officer

It is gratifying to record that early syphilis is still keeping at a low level; only 3 cases were seen during the year. Gonorrhoea (86 cases) shews a decline of approximately 20% from 1954 (104), although this is slightly above the average for the previous 5 years (77.2).

The closest and friendliest liaison with the Naval authorities still continues and that factor, together with the excellent work of the health visitor attached to the Department, gives most satisfactory results in contact tracing.

DETAILS OF WORK OF THE ALMONER

	1955	1954
Number of patients helped by Almoner...	72	86
Visits paid by Almoner ...	72	58
Number of patients visited by Sister Trimble ...	5	7
Reports and letters sent ...	68	98
Reports and letters received ...	40	54
Number of interviews ...	102	126
Number of attendances ...	1,811	2,549

TABLE OF STATISTICS

	SYPHILIS			GONORRHOEA			OTHER CONDITIONS		
	M	F	TOTAL	M	F	TOTAL	M	F	TOTAL
Patients under treatment or observation on 1st January ...	90 (91)	135(126)	225 (217)	8 (22)	6 (13)	14 (35)	38 (59)	17 (31)	55 (90)
Patients removed from the register in previous years who returned during the year for treatment or observation of the same condition ...	9 (8)	7 (10)	16 (18)	- (-)	- (-)	- (-)	1 (2)	1 (-)	2 (2)
Patients transferred from other centres after diagnosis ...	1 (9)	3 (7)	4 (16)	10 (11)	4 (4)	14 (15)	22 (22)	2 (5)	24 (27)
Patients dealt with for the first time ...	16 (20)	16 (22)	32 (42)	53 (61)	33 (43)	86(104)	261 (279)	96(104)	357 (383)
Patients completing treatment and/or observation ...	17 (19)	36 (21)	53 (40)	18 (44)	27 (26)	45 (70)	228 (273)	95(118)	323 (391)
Patients transferred elsewhere ...	2 (15)	5 (9)	7 (24)	27 (23)	3 (9)	30 (32)	48 (51)	11 (5)	59 (56)
Patients not completing treatment and/or observation ...	2 (2)	4 (-)	6 (2)	9 (19)	- (19)	9 (38)	- (-)	- (-)	- (-)
Patients under treatment or observation on 31st December ...	95 (90)	116(135)	211 (225)	17 (8)	13 (6)	30 (14)	46 (38)	10 (17)	56 (55)
Attendances by patients— seen by physician ...	971(1,314)	770(949)	1,741(2,263)	306(497)	185(284)	491(781)	1,245(1,318)	535(621)	1,780(1,939)
not seen by physician ...	148 (513)	124(527)	272(1,040)	19 (41)	3 (9)	22 (50)	433 (379)	194(159)	627 (538)
Contacts attending for examination referred by patients, etc.	10 (4)	11 (12)	21 (16)	- (-)	27 (14)	27 (14)	- (8)	15 (28)	15 (36)

PARASITIC INFESTATION

*By the Medical Officer in charge, Disinfestation Clinic***Scabies**

There was an increase over the previous year when the incidence was exceptionally low.

Total number of cases dealt with during the year:—

						1955	1954
Cases	...	...	...	...	...	78	64
Contacts	...	...	...	...	...	46	21
TOTALS						124	85

Thirty-seven cases were referred by private doctors, three by the City's hospitals, two by the police and the remainder by the School Clinics.

One family attended for the second time in 12 months. Two contacts were notified to the Royal Navy.

A vanishing cream containing 25% Benzyl Benzoate was used for treatment.

Distribution as to age and sex was:—

	Under 5			5—15			Over 15			Totals		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Cases ...	5	5	10	13	15	28	13	27	40	31	47	78
Contacts ...	4	7	11	5	7	12	10	13	23	19	27	46
Totals ...	9	12	21	18	22	40	23	40	63	50	74	124
Sent by Pri- vate doctors	5	1	6	5	4	9	10	12	22	20	17	37
Subsequent Attendances	10	6	16	20	40	60	29	40	69	59	86	145

Total attendances for the year—Original ... 124

Subsequent 145

GRAND TOTAL ... 269

No letters warning of possible legal proceedings for non-attendance at the clinic were required.

The following table gives figures for earlier years:—

<i>Year</i>			<i>Cases</i>	<i>Contacts</i>	<i>Year</i>			<i>Cases</i>	<i>Contacts</i>
1947	...	...	656	521	1953	...	...	87	82
1949	...	...	160	127	1954	...	...	64	21
1951	...	...	47	65	1955	...	...	78	46

Pediculosis

Again there has been a decrease in the number seen and treated, and during the year 68 households, comprising 77 families and 271 individuals, of whom 135 were infested, were dealt with.

The distribution as to age and sex was:—

	Under 5			5—15			Over 15			Totals		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Infested ...	7	13	20	30	41	71	11	33	44	48	87	135
Not infested	14	14	28	23	26	49	24	35	59	61	75	136
Totals ...	21	27	48	53	67	120	35	68	103	109	162	271
Sent by private doctors	—	—	—	—	—	—	3	1	4	3	1	4

ATTENDANCES

	Under 5			5—15			Over 15			Totals		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Original ...	21	27	48	53	67	120	35	68	103	109	162	271
Subsequent...	19	21	40	48	116	164	10	49	59	77	186	263
Totals ...	40	48	88	101	183	284	45	117	162	186	348	534

52·6% (62%) of those infested were school children aged 5—15.

Four cases were sent by general practitioners, 12 from other sources, including police and local hospitals, and the remainder as a result of school inspections by the school nurses. Three of the cases were infestations of *phthirus pubis* (crab-louse) and one of body lice.

Four letters giving warning of possible prosecution under Section 85 of the Public Health Act of 1936 for non-attendance at the clinic were sent; all had the desired effect, except in the case of one family who had to be taken to Court, with satisfactory results. On three occasions Ambulance Service vehicles were used to fetch patients otherwise unable to come for treatment.

Treatment of choice was a proprietary emulsion containing D.D.T. and Pyrethrin. Use was also made of a concentrate of B.H.C. gamma isomer, diluted for use as required.

The following table gives comparative figures of infested persons treated at the Clinic in earlier years:—

1947	...	...	...	640	1953	...	...	...	479
1949	...	...	...	826	1954	...	...	...	279
1951	...	...	...	733	1955	...	...	...	135

REPORT OF THE BATHS SUPERINTENDENT

Good weather is a contributing factor in encouraging the art of swimming; thus, the exceptionally good weather experienced in the summer of 1955, coupled with the innovations installed at the Park Road Baths, make it my pleasant duty to report that 1955/56 was a record year in respect of swimming patrons and revenue.

Much praise must be accorded the Education Authority, its instructor and teachers, who, although not quite reaching the record of the previous year, have contributed greatly, having taught and coached swimming under exacting circumstances in a well-patronised bath.

The patronage of 139,236 persons for the entire establishment shows an increase of 3,516 over the previous year, which incidentally was a record one; to this must be added free passes, season tickets and club attendances.

Had the private baths section been able to increase its trade in the same ratio as the swimming pool the total income would have been even higher; nevertheless, the revenue of £5,504 13s. 4d. is the highest on record, an increase of £314 1s. 9d. over the preceding year.

The bookings of the swimming bath by clubs for the exclusive use of their members have been exceedingly good, extending to 9.45 p.m. in the winter and to 10.45 p.m. in the summer; many applications, moreover, could not be accepted as earlier hours of booking were not available. This is the greatest year for private bookings and is almost the maximum which the bath and staff could cope with. Approximately sixteen hours per week have been maintained during the whole year, enabling the swimming bath to be open some fourteen hours per day during the major part of the year.

SWIMMING BATH SECTION

This department catered for the large total of 98,795 (95,751) swimmers; add to this persons attending with private clubs and competitions, and it will be seen how many are patronising this bath of 27 yds. in length.

Schoolchildren in classes attending for instruction under the Education Authority totalled 37,059—a decrease of 2,796 over the previous year. This decrease, however, may be somewhat offset by the attendance of schoolchildren's clubs operating in the early evenings. All persons instrumental in providing and assisting these children to receive this beneficial art and exercise are to be commended.

All sections of swimming patrons attending during public hours show new records, except one. The 1/-d. male section with 10,028 hrs. has a 693 increase, 1/-d. female 2,272—a 99 increase, 6d. boys 30,579—a 3,807 increase and 6d. girls 12,036—a 977 increase.

Schoolchildren attending the baths before and after school hours, with a teacher in charge, at the reduced price of admission of 2d. per child, had a record year in the boys' section, whilst the girls' had a slight reduction, the former being 4,605 and the latter 2,216, a total of 6,821. Thus, the grand total was 61,736, showing an increase of 5,840 over last year and creating a new record.

The popularity of this establishment and the confidence which the public has in it are shown by their attendances and, with more dressing facilities, the patronage would increase.

Spectators' attendances did not reach the previous year's total, there being an attendance of 1,502—a decrease of 77; this is best explained by the fact that patrons preferred to swim rather than watch others doing so.

Club attendances numbered 20,656 persons.

Free passes attendances were 2,000 for swimming.

Season ticket attendances were 689.

Swimming instruction. Lessons given by the Baths staff numbered 1,267—a decrease of 27 over the preceding year. As swimming patronage increases and the swimming bath becomes more crowded, it becomes more difficult to give lessons in the limited space available. Satisfaction can only be gained by both the pupil and instructor if the lessons are taken in slack periods.

Numerous persons, I am sorry to state, book swimming lessons over the 'phone or personally and fail to keep the appointment at the appropriate time. With the limitations of staff, specially selected for this service, such cancellations entail readjustment of staff and cause considerable inconvenience.

Private hire of the swimming bath has now reached the maximum, with 755 hours reserved—an increase over the previous year of $21\frac{1}{4}$ hours. This type of booking is increasing in popularity, and numerous clubs and business houses who make application for the early evening cannot be accommodated unless they are prepared to go on later in the evening.

The Infantile Paralysis Fellowship, so graciously granted the use of the bath at a reduced fee on Sunday mornings, have had a record year, with 43 bookings, an increase of 12 hours; their maintained patronage throughout the winter was something to be proud of, especially when the cold was intense.

There was the usual baptismal booking, when a large congregation witnessed the occasion.

This year the Park Road Baths have enjoyed the privilege of catering for some of the Southampton swimming clubs, owing to their town's Corporation Baths being closed for a considerable period. I trust that the many late hours the various clubs spent at this bath were pleasant; it is certainly a long way to come for a swim at such a late hour—9.45 p.m.—10.45 p.m., twice a week.

Season tickets, introduced last year, provided a great increase; no fewer than 27 persons have partaken of this new feature—19 more than last year. As this advantageous service becomes more known, I anticipate many more purchasers.

Hair dryers, installed in 1953, had a tremendous demand this year, 12,282 patrons using this appreciated service—an increase of 2,175.

Brylcreem hair oil, with 11,079 purchasers, showed an increase of 249.

Self-weighing scales again proved attractive and remunerative, 3,321 persons having a 1d. weigh—an increase of 300.

It will be readily seen that the more persons who enter the establishment the greater the revenue from these ancillary services. Of all patrons using the premises, one person in every 12 uses the hair-dryers, one in every 14 uses hair cream, and one in every 50 has a self-weigh.

PRIVATE HOT BATHS

The installation of six new slipper baths in the male first class slipper suite has been completed and a further renewal of another seven cast iron baths is anticipated in the forthcoming year to make this section more attractive. These improvements have had the desired effect, as shown by the increase in patronage of the men's 1/-d. baths, of which there were 20,303 taken—1,297 more than last year. I am, however, sorry to state that the other sections of service in this department all show a slight reduction. The ladies' 1/-d. bath, with 2,624, decreased by 206, ladies' 9d., with 810, by 65, ladies' 6d., with 3,596, by 185, men's 9d., with 5,805, by 282 and the men's 6d., with 5,801 by 10.

The collective totals show 38,939 baths taken, an increase of 549 baths over the previous year. This is a most satisfactory state of trade for a private baths department, especially so when one thinks of the numerous customers lost through the rehousing of persons in new houses with bathing facilities. A national survey of baths points to a decline in private bath patronage, but this is not yet evident in Portsmouth.

Luma remedial baths continue to find favour amongst rheumatic sufferers; unfortunately, we have no facilities for a rest room where light refreshment could be taken during the period after treatment when the patron is perspiring. However, this year 123 baths were taken, an increase of 53 over the preceding year, and may I state that the persons testify to the physical benefit felt after partaking of one of these 2/6d. baths. The Committee are to be commended upon incorporating this service; the only detracting feature is the long time necessary for the cooling down of the patron before going into the outdoor temperature.

EQUIPMENT

The one metre springboard continues to give satisfaction but there are many requests for a better type of firm board for diving and I certainly agree that the present one is very much out of date for the present standard of diving.

Plant and machinery. The Cornish boiler continues to give satisfactory service after overhaul and inspection and the anxiety I felt regarding the condition of this old boiler has been somewhat allayed by the City Engineer and his staff.

Laundry equipment. The combined washing machine and hydro-extractor also continues to give service, although it is far short of modern day standards of efficiency. The extensive repairs effected during and after the annual overhaul have certainly improved this dual-purpose machine considerably.

Filtration plant and chlorinators. This equipment is giving excellent service, catering most adequately with the large increase in swimming pool patronage and assisting me to maintain the system of "Breakpoint" chlorination throughout bathing hours. Testimony to this plant's efficiency can be shown by the frequent bacteriological and chemical tests so meticulously taken by the Public Analyst and his staff. These tests are a great pointer to the swimming fraternity that their health is being safeguarded to a high degree.

GENERAL REMARKS

The increased efficiency shown by the Baths staff in dealing with the extra patronage is most marked. The new employees have adapted themselves readily to the changed and increased work, and they are to be complimented upon their desire to improve their swimming and life saving prowess, thereby increasing their efficiency and reliance. It is with satisfaction I have to record that awards have been gained in the high zone of the Royal Life Saving Society; one employee has actually obtained his silver medal for the very exacting test of the "Award of Merit" and others are continuing to practise and hold the efficiency already gained.

The staff, by the adoption of technical methods, continued practice and zeal in fuel combustion, have been instrumental in substantially reducing the amount of coal consumed, irrespective of the fact that trade has increased considerably.

I herewith express to all concerned my sincere appreciation of their tremendous endeavours.

STATISTICS FOR THE YEAR ENDED MARCH 31st, 1956

	PRIVATE BATHS										SWIMMING BATH										BATH TOTALS				
	Male					Female					Total	Male					Female					Total	Male	Female	Total
	1/-	9d.	6d.	Total	1/-	9d.	6d.	Total	1/-	6d.		2d.	Total	1/-	6d.	2d.	Total	1/-	6d.	2d.	Total				
1955-56	20,303	5,805	5,801	31,909	2,624	810	3,596	7,030	38,939	10,028	30,579	4,605	45,212	2,272	12,036	2,216	16,524	61,736	77,121	23,554	100,675				
1954-55	19,006	6,087	5,811	30,904	2,830	875	3,781	7,486	38,390	9,335	26,772	4,012	40,119	2,173	11,059	2,545	15,777	55,896	71,023	23,263	94,286				
Increase	1,297	—	—	1,005	—	—	—	—	549	693	3,807	593	5,093	99	977	—	747	5,840	6,098	291	6,389				
Decrease	—	282	10	—	206	65	185	456	—	—	—	—	—	—	—	329	—	—	—	—	—				

	Classes	Spec-tators	Grand Total	Hire of Bath Hrs.	Tuition Fees	Luna Baths	Season Tickets	Total Cash £ s. d.
1955-56	37,059	1,502	139,236	755	1,267	123	27	5,504 13 4
1954-55	39,855	1,579	135,720	733½	1,294	70	8	5,190 11 7
Increase	—	—	3,516	21½	—	53	19	314 1 9
Decrease	2,796	77	—	—	27	—	—	— — —

	£	s.	d.
11,079 Brylcream Users ...	46	3	3
12,282 Hair Dryer Users ...	51	3	6
3,321 Self Weighers ...	13	16	9
Private Club Attendances	20,656		
Season Ticket Attendances ...	689		
Passes Attendances ...	2,000		

REPORT OF THE VETERINARY OFFICER

MEAT INSPECTION

Since derationing was introduced last summer the period under review was the first whole year of de-control in the meat trade since the last war and great changes can be observed as a result of the transformation from rationing to de-control. Under rationing, home-killed supplies consisting of beef, veal, pork, mutton and lamb were despatched to the City from Fontley, Petersfield and Reading and the wholesale meat depot in Greetham Street served local traders and others in localities adjoining the City. Following de-control, home-killed supplies came into the City from Fontley, Petersfield, Swindon, Westbourne, Wimborne, Southampton, Chichester, Islington, Smithfield, Brighton, Salisbury and the London docks, and retailers located in a much more extensive area than that under rationing were served from Greetham Street. A noteworthy feature in the work of meat inspection during most of the year was the condition known as bone-taint which renders meat unfit for human consumption. Usually this was found in imported bovine carcasses and, following careful inspection to obtain the maximum salvage for human consumption, the weight which it was necessary to condemn was substantial and mostly hindquarter beef. Except for a brief interruption in the summer, weekly supplies of Irish meat and offal were shipped regularly to the Camber from the Irish Republic, and I understand that this trade increased substantially during the year. Some of the Irish supplies went to the Wholesale Meat Market, Greetham Street, and some local traders were supplied directly from the Camber. Road vehicles regularly moved consignments of Irish meat from the Camber to Smithfield Market (London) and other centres.

MEAT CONDEMNATIONS

English: 93 lbs. forequarter beef; 213 lbs. hindquarter beef; 142 lbs. ox liver; 271 lbs. part ox liver; 5 sets ox lungs; 6 ox melts; 9 lbs. ox tails; 48 lbs. ox brains; 20 lbs. ox breads; 395 lbs. pork; 179 lbs. pigs' hearts; 27 lbs. pigs' heads; 23 lbs. pig fats; 12 lbs. ox liver.

Imported: 286 lbs. forequarter beef; 5,586 lbs. hindquarter beef; 24 lbs. ox hearts; 192 lbs. ox kidneys; 124 lbs. ox liver; 20 lbs. ox tails; 56 lbs. pig kidneys; 120 lbs. pig liver; 74 lbs. pork; 12 cwts. minced pork; 10 lbs. sheep liver; 82 lbs. mutton; 40 lbs. lamb livers.

PUBLIC HEALTH (MEAT) REGULATIONS

Most of the meat and offal consigned to the City and supplies distributed from Greetham Street were carried in road vehicles, which also awaited the arrival at the Camber of meat and offal from the Irish Republic. In my opinion, the different types of vehicles engaged and the various journeys undertaken make the task of satisfactory meat distribution a very formidable one. Once again the work has been carried out very smoothly and there was no evidence that the general provisions of the regulations were not well observed. At Greetham Street the manager and his deputy of the United Carriers supervised daily meat transport. As this organisation was responsible for carrying most of the meat supplies in the City and surrounding areas I should like to pay tribute to them and their staff's careful handling of the meat, which did so much to ensure another year of quiet efficient meat transport.

ANTHRAX

This deadly disease was serious during the opening weeks of the year, as the monthly total of outbreaks confirmed represented an increase of 100% over the figures for the previous month. Both fortnightly returns issued by the Ministry of Agriculture in February were unsatisfactory and revealed figures very similar to those of January. Despite the fact that a decrease in the number of outbreaks was recorded in March, no doubt the most striking comparable details issued by the Ministry were the quarterly ones. At the end of March this year 267 outbreaks were detected, against 71 at the same date last year, and exceptionally high figures continued without interruption till May when a substantial drop was recorded. Although the improvement in the position was maintained until the end of June, the comparable half-yearly totals showed how serious the situation had been. 442 outbreaks were confirmed during the first half of the year, against 150 for a similar period in 1954. Steady improvement in the figures occurred till September when an increase of over 50% was recorded, compared with details for August; at the 30th September 549 outbreaks were detected, compared with 221 at the corresponding date in 1954. Following a serious deterioration in the position during October and November, a marked improvement occurred in December when the number of outbreaks again looked more like what one normally associates with this disease. Since the total number of outbreaks was considerably more than double that of 1954, probably the Ministry will regard the details relating to anthrax as the most serious feature of the annual returns. The comparable totals for 1954 and 1955 were 350 and 764 respectively.

FOOT AND MOUTH DISEASE

After a very satisfactory year and following a period of over eight months' freedom from it, foot and mouth disease was again detected in this country during January. The policy of slaughter and compensation is still practised by the Ministry of Agriculture and appears to have been successful in stamping it out, as no outbreak was confirmed throughout February. It re-appeared in Great Britain in March when one outbreak was recorded. Favourable comparable quarterly figures were issued by the Ministry—a total of six outbreaks, against 11 at the same date in 1954. The country's good fortune continued without interruption throughout the second quarter of the year, as no outbreak was recorded during that period. Despite the fact that last year was one of exceptionally low incidence for this costly disease, no doubt the Ministry of Agriculture and the Treasury regarded the comparable details for the first half of the year as very satisfactory. At the end of June this year a total of six outbreaks was confirmed, against 12 at the same date in 1954. Improvement in the position relating to this disease during the year's third quarter would not be possible as its existence was not confirmed by the Ministry during that period. This fortunate state of affairs, besides saving the country substantial sums of money in compensation for owners of diseased livestock, made unnecessary the application of irritating movement restrictions on food animals. Following another month's freedom from it during October, its existence was confirmed in November—the first outbreak since March. Despite the fact that two outbreaks were detected during the last fortnight of the year, no doubt the year will be described as one of exceptionally low incidence for this disease. The comparable annual figures published by the Ministry show that nine outbreaks were confirmed in 1955, against a total of 495 in 1952—the year of the epidemic.

SWINE FEVER

Despite the issue by the Ministry of Agriculture of two favourable fortnightly returns for swine fever during January, when a considerable drop

in the monthly total of outbreaks was recorded, there was no evidence that this improvement in the position was maintained. The situation deteriorated steadily to the end of the first quarter of the year which was indicated by a continuous flow of unsatisfactory returns. The serious trend in the monthly figures continued without interruption till the end of May and no doubt caused the Ministry and pig-keepers generally considerable anxiety; a slight decrease in the monthly total for June was the first indication that the regular monthly increases had ended. The number of outbreaks during July, which represented a substantial decrease, confirmed that the exceptionally high totals of recent months had now been arrested and the favourable trend in the figures was uninterrupted throughout the third quarter of the year. Unsatisfactory details in the returns for October and November revealed that the Ministry had experienced a setback in its struggle with this disease. Evidence of the Ministry's recovery was provided by a substantial decrease in the number of outbreaks confirmed during December. Although the annual details are slightly better than those of last year, one can hardly describe them as very encouraging for the Ministry. 1,403 outbreaks were detected this year, against 1,455 in 1954.

FOWL PEST

Following the substantial seasonal increases in the number of outbreaks which were anticipated, satisfactory details relating to fowl pest were given in the returns issued by the Ministry of Agriculture throughout the first quarter of the year. Regular monthly decreases were recorded and a striking improvement in the comparable figures was observed at the end of March when a total of 166 outbreaks was detected this year, against 411 for the same quarter in 1954. Despite the fact that an increase was recorded in April, there was evidence that the Ministry maintained a steady improvement in the position till the end of June when the comparable details were 271 this year, against 541 for the corresponding period in 1954. During July 100 outbreaks were confirmed and the Ministry experienced a serious setback; the sudden fluctuation in the number of outbreaks showed that fowl pest had flared up again and that the position had worsened considerably. The monthly totals for August and September provided evidence that the Ministry was recovering from its setback and at the end of the third quarter a drop of about 33% in the comparable details was recorded. Although the slaughter and compensation policy practised by the Ministry aims at complete eradication of this disease, a steady worsening in the position occurred in the last quarter of the year; the fact that 282 outbreaks were detected in December alone gives some indication of the serious deterioration in the position but no doubt the Ministry anticipated this state of affairs as a seasonal feature of this disease. The annual figures cannot be described as satisfactory, since during the year an increase of over 100 outbreaks was recorded, the actual totals being 906 in 1955 and 795 in the previous year.

PET ANIMALS ACT, 1951

One noteworthy feature of the working of this Act during the year was the increased attention paid by the Ministry of Agriculture to some of the premises licensed under it as being potential channels in the spread of fowl pest. Particular attention was naturally given to the cleanliness and condition of any equipment, and there was no evidence that the general provisions of the Act were not on the whole well observed to ensure the welfare of the animals. Tribute should be paid to the occupiers of premises for another year's satisfactory working of the Act. A total of 23 pet shops was licensed in the City and 36 visits were made during the year.

FISH

The following is a list of the various species of fish relating to parcels surrendered after inspection and condemnation:—hake, whiting, herrings, escallops, skate, mackerel, dog fish, crabs, haddocks, prawns, jellied eels, trout, fillets (various).

OTHER FOODSTUFFS

As in previous years, practically all kinds of foodstuffs, other than fish, homekilled and imported meat already mentioned, were handled under this heading. Canned foods were an important item, 11,711 tins being surrendered as unfit for human consumption following inspection.

DUTIES AT THE PORT

No clinical evidence of the existence of any notifiable disease was detected in livestock landing at Point and all animals were able to proceed to their destinations. A total of 35 visits was made to the Dockyard, Camber and Flathouse; a number were of a preventive nature to ensure that certain livestock were not allowed to enter this country illicitly—the regulations being designed to prevent disease entering this country at the ports. On one occasion I was instructed by the Medical Officer of Health to visit with the Deputy Medical Officer of Health at Spithead an aircraft-carrier as soon as she arrived from abroad, as earlier one of the crew had been flown ashore suspected to be suffering from psittacosis. The carrier arrived late in the evening and when visited we discovered that there were some hundreds of birds (mostly budgerigars) aboard. The task of inspecting them was commenced as soon as possible, and although owners and everyone connected with the birds showed understanding and were very helpful, we did not come ashore again till after midnight. Other visits to the Port were associated with the trade in the importation of foodstuffs at the Camber and Flathouse.

VISITS

1,966 visits were made during the year, including 675 to meat premises (wholesale and retail), 122 to fish premises (wholesale and retail), 778 to provision shops (wholesale and retail); 73 to piggeries, 132 to sausage makers, 36 under the Pet Animals Act, 1951, 35 in connection with my duties at the Port and 398 relating to complaints.

INSPECTION AND SUPERVISION OF FOOD

FOOD AND DRUGS ACT, 1938

During the year 1,832 samples were taken under the Food and Drugs Act, 1938. Of these, 102 were found to be adulterated, incorrectly labelled or otherwise unsatisfactory, or 5·6%, compared with 7·2% in 1954. Of these 102 samples, 12 were formal samples, 89 informal or test samples and 1 private purchase sample.

All the adulterated samples were dealt with by cautions or, where appropriate, referred to the appropriate Ministry.

MILK (SPECIAL DESIGNATION) (PASTEURISED AND STERILISED MILK) REGULATIONS, 1949.

During the year 77 licences were issued for the sale of pasteurised milk, 8 for sterilised milk and 3 for tuberculin tested milk.

87 samples of tuberculin tested (pasteurised) milk were examined and two failed the test for this type of milk.

306 samples of pasteurised milk were examined and three failed the test.

54 samples of pasteurised milk supplied to schools were examined and all were found satisfactory.

13 samples of sterilised milk were examined and all passed the test.

MILK

706 samples of milk were taken during the year; 26 were found to be adulterated and 57 not up to standard, the deficiencies being due to natural causes. Of this number, 250 represented milk supplied by farmers to retailers in the City, 17 being found to be adulterated.

ICE CREAM

128 samples of ice cream were taken for examination, with the following results:—

59 samples were Grade 1	15 samples were Grade 3
39 samples were Grade 2	15 samples were Grade 4

During the year 489 visits and inspections were made to ice cream premises.

DRUGS

93 samples of drugs were taken, and 7 were found not to be in accordance with the standard or requirements laid down in the Food and Drugs Act, 1938, the Pharmacy and Medicines Act, 1941, and the Poisons and Pharmacy Act, 1933.

MERCHANDISE MARKS ACT, 1926, AND ORDERS IN COUNCIL MADE THERE-UNDER

During the year 61 visits were made to business premises to see that the provisions of these Orders were being complied with.

WATER

89 samples of swimming pool and paddling pool water and 6 of sea water were taken during the year.

REPORT OF THE CHIEF SANITARY INSPECTOR

W. F. APPLETON, F.R.S.H., F.S.I.A.

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

It is my lamentable duty to introduce this report for 1955 by commenting on the death of one of the staff, Mr. Leonard Richards, who was appointed a Sanitary Inspector on 24th October, 1929. His death on 16th April, 1955, after a short illness, ended twenty-six years of service with the Corporation.

My eleventh annual report shows a regrettable contraction in certain fields of work attributable to the serious deterioration in the staff position, there being no less than nine vacancies for sanitary inspectors on 31st December, 1955. This report is condensed not only for reasons of economy, but also because it reflects the personnel shortage, especially in food hygiene and in the operation of the Public Health Act. My concern is therefore not so much for what has been done, as for what has perforce to be left undone.

PUBLIC HEALTH ACT, 1936.

GENERAL INSPECTION

Complaints totalled 3,094, of which approximately 71% referred to buildings and defects, a decrease in 1954's 93%, due to the exceptionally clement weather—the annual rainfall for 1955 fell to 24·60"—nearly 9" less than in 1954.

Under the provisions of the Public Health Act, 4,282 inspections of dwelling houses were made and the requirements of the Act were enforced by the following procedure:—

Intimation notices issued	...	...	...	1,338
Abatement notices served	...	...	...	299
Letters requiring work "without further delay"	...	...	...	102
Letters requiring work "within 7 days"	...	...	...	107
Letters requiring work "forthwith"	...	...	...	3

Although the official returns for the Department show the unusual position of having more abatement notices complied with than were served (due to the carry-over from 1954) 18 defaulters were arraigned before the Magistrates, the litigation resulting as hereunder:

Orders made for work to be done	...	...	...	...	8
Adjourned <i>sine die</i>	...	...	...	...	2
Withdrawn before case heard	...	...	...	...	7
Summons not heard—further period allowed to defendant	...	...	...	...	1
					—
					18
					—

Further proceedings were entailed in three cases—two included in the 18 above.

Fines totalling £3 and costs amounting to £13 10s. 4d. were recorded against defendants.

TENTS, VANS, SHEDS, AND MOVABLE DWELLINGS

AUTHORISED CARAVAN SITES

CLIFFDALE

This site suffered a severe loss of amenities when the newly provided sanitary conveniences were wrecked by a fall of limestone from the cliff face. Fortunately the avalanche occurred at a time when the ablution block was not in use. The general maintenance of the site was on a high level.

GREAT SALTERNS

This site on the Eastern Road has now two recently erected ablution and w.c. blocks and, with the completion of the landscaping, should be the equal of any caravan site in the country.

HENDERSON ROAD

This site continues to be well maintained.

PRIVATE SITES

No complaints about the maintenance of the two private sites were received. The necessary building having been erected, the permitted extension for 28 caravans, envisaged in 1954, was carried out at the Milton Park site.

Early in the year a licence for the siting of five caravans in the Long Curtain Moat was granted, subject to the erection of a block of conveniences at the rear of the site.

UNAUTHORISED SITES

At the end of the year the Department became aware of the existence of unauthorised caravan parking on a Southsea garage site. Action to stop this in 1956 was in process as the period under review concluded.

The parking of caravans on other unauthorised sites in the City again exercised the Department this year, the culprits chiefly being entertainers at local theatres. Correspondence ensued between the managers of the theatres concerned and myself, when it was stated that the managements advise all artistes arriving with caravans to go to authorised sites named by the Corporation. A legitimate excuse appears to be that the latter are without vacancies at the time of application.

One application to station a caravan for the occupation of a time-keeper-cum-night watchman was favourably considered and the firm engaged in building at the northern end of the City was given a dispensation until 4th April, 1956.

Six caravans were required to be removed from unlicensed sites.

HOUSEBOATS

One application to station a houseboat at the Corporation's berthing site was received and approved.

NUISANCES FROM DEPOSITS, DUST, SMELLS, ETC.

Wanton casting about of litter—very often at night—is difficult to detect.

In more instances than not, there is nothing of organic nature in the accumulation, and its removal is not the responsibility of the Public Health Department, but, being a contravention of the Byelaws for the Good Government of the City, is a subject for police action. Nevertheless, although this is a correct interpretation of the law, the majority of complainants are

convinced that an unremoved deposit is a sign of official ineptitude on the part of the health inspector. An example of this arose out of the complaint by a ratepayer that members of the public were depositing rubbish and urinating on the vacant lot adjoining his premises. Resulting from the inspector's report that there was no organic matter present the matter was referred to the police. The sterility of his complaint to the Public Health Department provoked a further letter from the complainant in which he agreed that full-time police surveillance of the site was impracticable but offered the health inspector a free seat in his window over the week-end to witness the fact that the site was used as a urinal by the public!

Fourteen complaints of dumping were received and amongst other things the Department obtained the removal of fat, blood-contaminated sawdust, decomposing grapefruit, dirty rags, offal and soot.

A watchful eye was kept on that fruitful origin of complaints, the local loaders of coal, but 1955 was devoid of incident so far as coal dust was concerned.

So far there has been no repetition of the rain of damaging oil from an obscure source which occurred in Copnor two years ago, and the conjecture of a meteorological phenomenon seems feasible.

Some inevitable trivialities such as neighbour's neglected rabbits or chickens were easily dealt with, but other complaints were more involved, like the continuing offensiveness alleged to be emanating from the cooking processes in a modern potato-crisp manufactory. The search for a corrective for this condition has reached as far as Kent, where deodorising equipment is undergoing trial. Contingent upon its success is the decision to install similar plant in the Portsmouth factory.

Two sources of nuisance from smell, particularly embarrassing in that they are Corporation-owned, were the Cosham Sewage Works and the Central Depot pig-swill concentrator plant. Fortunately, however, the former will be eliminated when the Works become redundant.

Progressing to the etcetera I feel I must comment that it is a sad fact that Portsmouth, notable for its dog-shows, is also remarkable for its dog-fouled pavements. Many complaints were made during 1955 about the disgusting condition of the City's footways on which dog-excrements present quite a hazard. It is a brave soul who will invoke the maledictions of dog-lovers by such criticism, but it so happens that many of these foulings contain the necessary bacteria for an epidemic of food poisoning. It is of course an offence for any person to permit a dog on a lead to foul a pavement.

The question of the ubiquitous pigeon also presents a difficulty and this year complainants have been referred to a firm specialising in this particular disinfection.

Used as the Department is to matters ranging from the sublime to the ridiculous and sometimes from the macabre to the bizarre it was surprising to receive two complaints about two different addresses where nuisances were alleged to be caused by the breeding of no less an animal than the mink.

REFUSE RECEPTACLES.

I trust that the members of the Committee will appreciate my reason for selecting this position in my report to state that probably the biggest source of nuisance from deposits, dust and smells is caused by the indescribable laxity of the City regarding the storage of household refuse. It is an ever present cause of adverse comment from visitors and new residents coming from lesser authorities where this matter of public hygiene is better ordered.

SMOKE NUISANCES

Whilst legislation is being moulded by Parliament into the anticipated Clean Air Act, Health Departments are still confronted with the enforcement of the existing statute. Especially difficult is the problem of securing abatement in the face of such escape clauses as "it shall be a defence for the defendant to prove that the best practicable means have been taken for preventing the nuisance" especially when those "best practicable means" constitute the use of a suitable fuel, for it is then that offenders have a practically unassailable excuse in that they are supplied with unsuitable fuel.

Twenty-two complaints of smoke nuisance were received and 41 observations resulted.

One undoubted source was located on Crown property and affected an adjacent block of flats. Ensuing correspondence with the Naval Health Officer brought the admission that two vertical boilers supplying steam and hot water to the R.N. establishment were not functioning as intended, that the complaint was justified and would be remedied by the recommendation which had been made. Since then no recurrence of the complaint has taken place.

Reasonable latitude was given to the management of a Southsea bakery the boiler house chimneys of which intermittently cause annoyance to an adjoining school, but the persistence of smoke emission caused an intimation notice to be issued and in view of subsequent lack of improvement an abatement notice followed. The position at the end of the year was that legal proceedings were envisaged if the negligence continued.

Foundries, breweries, cinemas, hospitals, and laundries created temporary conditions of air pollution attributable generally to one of two things either (a) failure of the human element or (b) unsuitable fuel.

One of the few blacksmith's forges remaining operative in the City was alleged to be producing volumes of dense black smoke by the process of pouring water on a red hot wheel ring!

PERSONS INADEQUATELY HOUSED

(a) Housing application requested by the Medical Officer of Health for assessment	2,233
(b) Housing applications referred to the Medical Officer of Health by the City Treasurer for assessment	5,764
(c) Housing applications forwarded for investigation prior to allocation	1,004
(d) Housing applications requested for special consideration on grounds of tuberculosis	40
(e) Housing applications issued to the sanitary inspectors	2,218
Total number of housing applications dealt with	9,041
(Note figure (e) included in (a) and (b))	

Although the above figures show a decline, this section's work increased in other directions due to the provisional Housing Redevelopment Programme.

Routine investigation of applicants' home conditions in many instances secured necessary structural repairs whilst in the case of 29 underground rooms the owners either had their attention drawn to an extract from the Housing Acts, compliance with which would render the habitation legal, or were required not to relet the premises.

Fifteen addresses were known to be in such a condition that on the rehousing of their occupants the owners were requested not to allow the premises to be re-occupied.

Eleven sub-tenants occupying sub-standard accommodation were rehoused. The principal tenants were informed by letter that fairness to other applicants demanded that no further persons from that sub-letting would be rehoused.

IMPROVEMENT GRANTS AND APPLICATIONS FOR LOANS

Activity under this heading was greatly stimulated by Press and other publicity and 80 formal applications reached the Department. Eighty-one inspections of premises were carried out and there were many informal applications and enquiries for improvement grants—through which 124 visits and inspections of premises resulted.

Four applications for loans under Section 4 of the Housing Act were also considered.

HOUSING REPAIRS AND RENTS ACT, 1954.

Disrepair certificates were issued to the tenants of 32 houses whose dwellings were inspected and found to warrant certification. One other application was rejected. None of the nine applicants for revocation was refused.

LAND CHARGES INQUIRIES

Searches against 3,600 addresses or sites in course of conveyance were referred by the Town Clerk to the Public Health Department to make sure that the properties were free from statutory notice or other embarrassment.

FOOD

FOOD HYGIENE

Despite the public's growing consciousness of Food Hygiene and its demand for better conditions in food shops this division of the Inspector's work was practically eclipsed by housing to which the staff's attention was directed. Scarcely any routine inspections were made and it is to be feared that the non-appearance of the health inspector in various catering establishments will be construed as a slackening of official endeavour. Fortunately, few complaints were received and none resulted in legal proceedings. Admonishment by letter has, so far, secured the requisite alterations.

Outstanding from 1954, the task of enforcing legal requirements on the management of the Willow Cafe, which trades with the public although the building is vested in the Crown, appeared a less Sisyphean task this year and the nebulous building scheme envisaged previously became concrete, alongside official assurance that the Willow will assume a new pattern.

FOOD AND DRUGS ACT AND CLEAN FOOD BYE LAWS

Two complaints were made about unclean cutlery and chipped and cracked crockery, and both were remedied.

The public reported the undesirable and illegal practice of a baker who kept his full basket of bread on the handle of the van whilst it was moving. The employing firm quickly responded to the Department's request by issuing instructions to their van-men to discontinue any such custom.

Two premises, one of which was a basement, were found unsuitable for the storage and packaging or bottling of food. One concerned a soft drinks manufactory and the other the putting-up for retail of lemonade powder and nuts.

A rather unusual line of outworker was found in a private house where the occupant was a sub-contractor for a local pickled-onion bottler. In this instance compliance with the requirements of the Act was assured.

The following contraventions of the Act were discovered as the result of 34 casual visits and were remedied.

Uncleanliness of utensils	...	...	...	...	2
Uncleanliness of surfaces	...	...	...	...	7
Uncovered foodstuffs	...	...	...	...	2
Non-provision of ablution facilities	...	...	...	...	1
Non-provision of hot and cold water	...	...	...	...	2
Non-provision of sanitary accommodation	...	...	...	...	1
Defective w.c.s	...	...	...	...	1
Non-display of notices	...	...	...	...	1
General defects and dilapidations	...	...	...	...	17
Cracked and chipped crockery...	...	...	...	...	2

SAUSAGE MAKERS

One firm was discovered making sausages in unregistered premises and discontinued this activity. One other firm applied for registration.

WHOLESALE MARGARINE DEALERS

One firm's premises were approved for the storage of margarine.

EDUCATIONAL ACTIVITY

The staff of Inspectors having to be deployed to the best advantage it was found necessary to curtail any activities under this heading in so far as incursions into official time were concerned. Nevertheless, such is their appreciation of the importance of health education that senior members of the staff gave talks in their leisure hours on various aspects of the work of the Department. Their audiences were representative of City firms and social and business associations, as well as trainee midwives, etc.

ICE CREAM MANUFACTURE

What was thought to be the ultimate in hygienic production of ice cream in the Portsmouth factory reported on in the past two years proved then to be anything but a conclusion, for further reports of low grade ice cream were received from outlying authorities. Most disconcerting was the fact that the last report was received three months after the firm discontinued production, this last course being decided upon after the firm had failed to maintain a contamination free product. Thus, as stated, surveillance was maintained until a satisfactory conclusion was reached.

EXTRANEIOUS MATTER IN FOOD

A welcome decline in 1955 was the fall in the number of these cases, for the time devoted to investigation sometimes only results in the discovery of an accident, or combination of events, which may never occur again. No legal action was undertaken in any of the instances which are summarised:—

<i>Material or object</i>	<i>Found in</i>	<i>Action taken</i>
Safety pin	Bottle of limeade	Strong caution to firm not to repeat offence.
Mites	Chocolate raisins	Removed from stock and returned to manufacturers
Mould	Mincemeat	Removed from stock and returned to manufacturers.
Fragments of iron plate	Barbados sugar	None required.

INFECTIOUS DISEASES

Although there was an increase in the number of visits to homes in which infectious diseases occurred in the City, the total of confirmed cases was less than in the preceding year. In 1955, 467 visits were necessary. Extra-mural contacts, especially those from the s.s. *Chusan*, accounted for the majority of visits of surveillance, and also for a minor smallpox alarm, for three of the suspects from the steamer were later found to be indisposed. The concern was rapidly dispelled by medical opinion and the Departmental staff which had been alerted resumed its normal routine. From this seaborne infection no secondary cases resulted. Similarly by proper surveillance infection from contacts of poliomyelitis, paratyphoid B., sonné dysentery, etc. was prevented from spreading in the City.

Somewhere in Portsmouth or its environs exists an ambulant carrier of typhoid fever, for again this year cases of this disease occurred. The origin of infection, despite the patient sifting of the available information, has so far eluded the Department. The three victims were women, and, although two of them had eaten shellfish, the third and fatal case had none. Specimens of food similar to that figuring in the patients' diet prior to onset included watercress, cockles, pies, etc., but no pathogens were isolated when these items were submitted to the laboratory, and negative results followed a like examination of contacts' stools. In each instance no contacts were infected.

Better results favoured the enquiry into the illness of a fifteen year old boy who on admission to hospital with a pyrexia was found to be suffering from paratyphoid B. A review of his activities showed that he frequently bathed in Ports Creek near the outfall of Cosham Sewage works. Swabs were hung in the effluent for five day periods but the infecting organism was never found although paratyphosus B. of the same phage type as the patient's was recovered from a sample of the creek water. Subsequent correspondence with the City Engineer ended with an assurance that 1956 would see the termination of the discharge of sewage from this outfall, its subsequent use being for storm water only. The above mentioned case was included in the total of four cases of paratyphoid B, the second case being undoubtedly an imported infection, whilst the third and fourth were institutional. Home addresses of these hospital patients were visited but no origin of infection was found.

Food poisoning increased, in that the number of individuals affected was higher than the previous year, but no large outbreaks occurred. *Salmonella typhi* murium was the predominant infecting agent. In the ensuing enquiries no valuable contribution to the field of prevention resulted, except the occasional detection of the supposedly healthy carrier amongst the patients' intimates, and as in previous years the causative pathogen was never discovered in samples of foodstuff from the patients' diet, despite the fact that a wide range of specimens was sent to the laboratory. Although

shellfish, cheese, jelly, blancmange, meringues, nougat, marshmallows, eclairs, cream buns, etc., etc., were brought or obtained from sources similar to the suspected food, the Department rarely recovered the residue of the patients' actual diet, chiefly because of the lapse of time between the onset of the symptoms and the notification of the infection. Strangely enough, the Department was called upon to investigate a suspected salmonella infection in a group of "safe workers."

A minor outbreak of *sonné* dysentery involved a Military Families hostel and at the request of the Military the civilian kitchen staff were bacteriologically investigated, the results being negative. The outbreak quickly subsided being probably due to contamination of water-closet seats and subsequently of hands, the majority of the cases being children.

The Health Department was fortunate in rapidly locating and causing to be impounded the crystallised, powdered or frozen Chinese egg consigned to wholesalers and therefrom to retailers in the city. Specimens from the stocks detained were put up to the laboratory and a large percentage of those examined were found to be infected. The possibility of this material being the cause of infection in paratyphoid and salmonella infections in the City was borne in mind in subsequent investigations but no definite connections were established. There is no doubt that the population ran the risk of large scale infection during the period when this product was being retailed in the City, and it is to be hoped that any future distribution will be adequately safeguarded by sterilising the egg.

A suspected trichinosis case was not proved but the possibility of this food infection being present in the City caused a temporary disquiet.

Terminal disinfection of rooms, mattresses and public library books was continued in 1955 and was not interrupted by the retirement of Mr. Treble, whose services were terminated on his reaching retirement age.

AIR RAID SHELTERS

No public air raid shelters required the attention of the Health Department, but three domestic surface shelters were said to be prejudicial to the health of the complainants whose claims were not substantiated when investigated.

PESTOLOGY

Three-hundred and seventy complaints of insects were received, many of these by-passing the complaint book and the normal channel of investigation by reasons of urgency or inability of the short-staffed Department to cope with minor matters.

That highly-mobile and ubiquitous parasite, the flea, was greatly in evidence this year, some of the complaints of infestation originating from a legal office, a prison cell and a library. Ninety-three of the 169 complaints were substantiated by inspectors, much to their personal discomfort, the other 76 reported being accepted as known infestations. Eighty premises were sprayed with insecticide to kill bugs whilst 40 premises were treated as a precautionary measure.

Advice was given on the extermination of fleas, bugs, beetles, cockroaches, woodworm, "itch mites", blackbeetles, ants, moths, steam fly, woolly bear, lice and mosquitoes, whilst identification was called for in cases of invasion by woolly bears, crickets, bugs, moth larvae, dung rolling beetles, blue bottle larvae, silver fish and furniture beetle.

<i>Re</i> formal application for Improvement Grant	...	...	—	18	81
Loans, Section 4, Housing Act	...	...	—	9	2
Miscellaneous	...	...	12	34	79
Ships	...	...	77	148	91
			12,968	12,708	7,639

VISITS

							1953	1954	1955
To dwelling houses <i>re</i> notices and miscellaneous visits							15,874	11,449	6,850
Factories <i>re</i> notices							32	79	30
To rodent infested premises (not included in rodent control report)							351	290	89
To new buildings <i>re</i> occupation certificates							2,254	2,230	1,185
<i>Re</i> obstructed and defective sewers							595	511	225
							19,106	14,559	8,379

INSPECTION OF FOOD PREMISES

INSPECTION OF FOOD PREMISES							1953	1954	1955
Ice cream manufacturers							142	128	183
Ice cream retailers							382	520	317
Tripe boilers							1	4	3
Bakeries							179	207	77
Shellfish vendors							25	13	6
School meal cooking depots							7	—	2
Fish friers							171	168	21
Fishmongers							—	36	33
Restaurants, cafes, etc.							879	964	151
Butchers, etc.							—	—	24
Grocers							—	—	39
Sugar boilers							—	5	2
Sugar wholesalers							—	—	3
Bacon smokers							2	1	1
Mineral and aerated water bottlers							5	3	6
Beer bottlers							4	3	3
Pickle manufacturers							1	7	2
Potato crisp manufacturers							14	20	5
Dairies							156	321	325
Preserved food premises, Section 14							16	9	5
<i>Re</i> meat and food condemnation							105	51	87
Section 13, Food and Drugs Act, 1938							3,097	2,048	34
Miscellaneous							213	—	19
							5,399	4,508	1,348

INVESTIGATIONS

INVESTIGATIONS							1953	1954	1955
Recorded complaints	...	...	...	...	...	...	3,089	3,337	3,094
Additional unrecorded complaints	...	...	...	...	...	...	472	584	36
Smoke nuisances	...	...	...	...	...	...	155	133	41
Infectious diseases	...	...	...	...	...	...	785	421	467
Typhoid cases and suspected cases	...	...	...	...	...	...	4	3	4
Smallpox, typhoid, etc. contacts	...	...	...	...	...	...	48	82	75
Paratyphoid B. cases and suspected cases	...	...	...	...	...	...	45	37	41
Food poisoning and suspected food poisoning cases	...	...	...	...	...	...	72	67	63
Council house applications and transfers	...	...	...	...	...	...	3,500	3,773	2,218
Council accommodation allocations	...	...	...	...	...	...	1,827	3,335	1,004
Cleanliness in factories	...	...	...	...	...	...	10	—	1
Verminous persons and premises	...	...	...	...	...	...	169	112	120
Rodent infestation complaints (not included in rodent report)	...	...	...	...	...	...	144	203	96
Mosquito infestation	...	...	...	...	...	...	3	5	3
Sea water	...	...	...	...	...	...	102	63	6
Swimming and paddling pool water	...	...	...	...	...	...	73		103
Various	...	...	...	...	...	...	60	—	47
							10,558	12,155	7,419

NOTICES AND NOTIFICATION

	1953	1954	1955
Abatement Notices, Public Health Act, 1936	700	632	299
Letter forms <i>re</i> defects (Intimation Notices)	1,762	1,810	1,338
Letters requiring execution of work without further delay	251	226	102
Letters requiring execution of work within 7 days	124	156	107
Letters requiring execution of work forthwith	—	22	3
Notice of intention to enter buildings	9	15	10
Dangerous buildings	99	95	41
Obstructed or defective sewers	316	204	57
Occupation certificates	919	931	862
Factories Act, 1937	14	22	6
Factories Act, 1937—Informal notice	13	36	6
Shops Act	20	86	—
Sanitary certificates (Rent Restriction)	2	23	33
Section 13, Food and Drugs Act, 1938	9	—	—
Notification premises or parts of premises closed	—	19	15
Basements or underground rooms	—	44	3
	<u>4,238</u>	<u>4,321</u>	<u>2,882</u>

RODENT CONTROL

Number of complaints received	1,855
Number of premises visited during survey	6,598
TOTAL	8,453

Number of premises treated by Local Authority 3,111

Of the premises treated 2,554 were private dwelling houses, 437 business premises and 118 Local Authority premises.

Included in the business premises are 16 Naval establishments and 2 agricultural properties. Of the 3,111 premises treated, 27 were major infestations (rats), 1,342 minor infestations (rats) and 1,742 minor infestations (mice).

The City's sewerage system was treated twice during the year and 3,475 of the 4,252 manholes on the system were baited and good results obtained.

Refuse tips, sewage disposal works, docks and foreshores, and allotments were all treated during the year as often as was found necessary.

No complaints have been received during the year from British Railways in respect of rat infestation in the permanent ways.

All schools under the jurisdiction of the Education Committee were visited and treated where found necessary.

The contract between the Council and the Director of Navy Contracts for the extermination of rats and mice on Admiralty lands and properties within the City boundary continues in operation.

The principal poison used—with the exception of the sewers— was Warfarin. The poison used in the sewers alternates between zinc phosphide and arsenic during the six monthly treatments.

I remain, Ladies and Gentlemen,

Your obedient servant,

W. F. APPLETON,

Chief Sanitary Inspector.

REPORT ON CLEANSING

I am indebted to the Acting Manager of the Cleansing and Haulage Department for the following report on the Cleansing Service during the year:—

During the year 1955 the refuse collection in Portsmouth was maintained with a weekly service. A total of 22 refuse vehicles and 90 men were employed collecting approximately 75,000 tons of refuse, all of which was disposed of by controlled tipping at Great Salterns. Extra collections from house and trades premises accounted for another 1,000 tons of refuse. Over a large percentage of the area receptacles have to be placed in front of premises for collection, and it is regrettable that such a large proportion of these receptacles are not standard dustbins for they present a very unsightly appearance on collection days, as well as being un-hygienic and a source of danger to the collectors.

Controlled tipping was carried on at one tipping point—Great Salterns, where valuable land reclamation took place.

The 210 miles of streets in Portsmouth continued to receive regular attention, main roads being swept daily and all others at least twice weekly. Over 100 men were engaged in this service together with two mechanical sweeper collectors. In times of bad weather the sweepers were engaged in sanding and gritting the roads to make them safe for traffic—special attention being given to the Hill roads and bridges and known danger areas. In the winter time the working hours were adjusted to enable this work to be carried out before the bulk of the traffic appeared on the roads.

Two gully emptying machines and four men were responsible for cleaning gullies regularly, washing alleys and channels and for clearing flood water.

Three cesspit emptying vehicles were fully occupied in cleansing the cesspits in the northern part of the City and every endeavour was made to maintain a monthly service, despite the increase in work caused by the erection of new factories at Cosham.

The salvage activities of the Department continued during the year. Economies in the collection costs of raw kitchen waste from households were effected by reducing the collections from three to two per week. The sales of concentrate did not approach the level anticipated, and the plant operations resulted in a slight loss, due to the uncertainty of the pig market during this period.

The market for waste paper and other salvageable materials remained steady.

PORT HEALTH AUTHORITY

Public Health Department,
Municipal Offices,
1 Western Parade,
Portsmouth.

To the Chairman and Members of the Port Health Authority.

Ladies and Gentlemen,

I have the honour to present my Report on the work of the Port Health Authority of Portsmouth during the year 1955.

SECTION I—STAFF

TABLE A

<i>Name of Officer</i>	<i>Nature of appointment</i>	<i>Date of appointment</i>	<i>Qualifications</i>	<i>Any other appointment held</i>
T. E. ROBERTS	Port Medical Officer of Health	1.11.47	M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.	Medical Officer of Health and Principal School Medical Officer, City of Portsmouth
W. F. APPLETON	Chief Port Health Inspector	1.1.52	F.R.S.H., F.S.I.A.	Chief Sanitary Inspector, City of Portsmouth.

Address and Telephone Number of the Medical Officer of Health:

Official: 1 WESTERN PARADE, PORTSMOUTH 74581, Ext. 144

Private: 3 CARMARTHEN AVENUE, COSHAM, PORTSMOUTH 76143

SECTION II—AMOUNT OF SHIPPING ENTERING THE DISTRICT DURING THE YEAR

TABLE B

Ships from	Number	Tonnage	Number Inspected		Number of ships reported as having, or having had during the voyage, infectious disease on board
			By the Medical Officer of Health	By the Sanitary Inspector	
Foreign Ports ...	646	210,224	12	41	—
Coastwise* ...	4,357	712,568	—	46	—
Total ...	5,003	922,792	12	87	—

* Includes local traffic between Southampton, Isle of Wight and Portsmouth.

SECTION III—CHARACTER OF SHIPPING AND TRADE DURING THE YEAR

TABLE C

There was no passenger traffic during the year.

Cargo Traffic. The principal imports were coal, cement, stone, oil, timber, glassware, building materials, tomatoes, onions, potatoes, cauliflower, citrus fruits, apples, pears, peaches, nuts, chocolate and general cargo traffic, from France, Italy, Holland, Belgium, Germany, Sweden, Finland, Norway, North Africa, Spain and Channel Islands.

The principal exports were pitch, machinery, scrap iron, fertilisers, oxide, barley and general cargo.

SECTION IV—INLAND BARGE TRAFFIC

There is no inland barge traffic.

SECTION V—WATER SUPPLY

- (1) The water used in the Docks is supplied by the Portsmouth Water Company. Vessels in dock are supplied from hydrants on the quay.
- (2) Samples are taken periodically by the Public Analyst of the City of Portsmouth and reports submitted to the Medical Officer of Health.
- (3) With regard to the supply of drinking water to ships arriving at and leaving the port the following precautions are taken before water is supplied.

When the water is turned on it is allowed to run through the hydrants for a while and then the hose is connected and the water allowed to run through the hose in the same way. When the quantity of water needed has been supplied the hose is disconnected, the water allowed to run through, and the hose replaced in the store, where it is locked up safely. The hydrants are locked and covered up also, and the area in the vicinity of the hydrants and hose pipes is kept scrupulously clean by washing down.

- (4) There are two Admiralty water-boats, controlled by them.

SECTION VI—PUBLIC HEALTH (SHIPS) REGULATIONS, 1952

(1) *List of Infected Areas*

The weekly Ministry of Health record of quarantinable diseases is supplied by the Port Medical Officer of Health to the Chief Port Health Inspector and the Chief Preventive Officer, H.M. Customs and Excise.

(2) *Radio Messages*

The telegraphic address "Portelth", suggested by the Ministry of Health, has been adopted by the Port Health Authority for radio communication between them and shipping entering the district. The master of a ship equipped with a radio transmitting apparatus must, if there are any circumstances on board requiring the attention of the Medical Officer, send a wireless message to "Portelth", Portsmouth, stating the name of his vessel and the time on the 24-hour clock she is expected to arrive. This message must be sent off not more than 12 hours and not less than 4 hours before the arrival of the ship.

(3) *Notifications otherwise than by Radio*

The master of a ship not fitted with a radio transmitting apparatus must notify the Port Health Authority, whenever practicable, before arrival and otherwise immediately on arrival, of any circumstances requiring the attention of the Medical Officer. International flag signals may be used for this purpose. These messages would normally be received by an officer of H.M. Customs and transmitted to the Medical Officer of Health.

(4) *Mooring Stations*

The following mooring stations have been established, with the concurrence of the Queen's Harbour Master and the Commissioners of Customs and Excise; these are subject to variation by the Commander-in-Chief, should the necessity arise.

(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 has been granted by the Medical Officer of the Port Health Authority in respect of any ship which—
 - (i) has called at a port or seaboard included in the weekly return of infected or suspected ports or seaboard, but reports "all well" during the voyage, or arrives with no sickness on board, unless a written notice to the contrary has been delivered to the Customs Officer by or on behalf of the Medical Officer of the Port Health 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 Health Authority will convey the Customs officers to the mooring place referred to as (a) above, free of expense to the Crown.
- (5) Arrangements for—
 - (a) Hospital accommodation. Cases of infectious diseases are removed to the Portsmouth Infectious Diseases Hospital by means of the Municipal Ambulance and Medical Car Service.
 - (b) Surveillance. Contacts of infectious diseases cases:
 - (i) Living in the City. If not removed to hospital they are kept under observation by the sanitary inspector.
 - (ii) Proceeding to an address outside the City. The Medical Officer of Health of the place of destination is advised.

Accommodation is available at the docks for the medical examination of suspected cases if necessary.
 - (c) Cleansing and Disinfection. 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 examination. Cleansing of ships is carried out by the disinfecting staff of the Health Department.

SECTION VII—SMALLPOX

- (1) Cases of smallpox are removed to the smallpox hospital at Crabwood, near Winchester.
- (2) Cases are conveyed by the Portsmouth Municipal Ambulance and Medical Car Service, the vaccinal state of the ambulance crews being: 25 vaccinated in 1955, 7 in 1954, 1 in 1952, 1 in 1951, 4 not known.
- (3) The smallpox consultant is Dr. I. M. McLachlan, Physician Superintendent, Infectious Diseases Hospital, Portsmouth (Tel. 2046).
- (4) Facilities for laboratory diagnosis of smallpox exist, by arrangement with the Portsmouth and Isle of Wight Area Pathological Service, at the Central Laboratory, Infectious Diseases Hospital, Portsmouth.

SECTION VIII—VENEREAL DISEASE

Confidential treatment can be obtained free at Ward C.2, Saint Mary's Hospital, Milton Road, on Tuesdays and Thursdays, from 10 a.m. to 12 noon and 5 to 7 p.m. (no appointment needed). In-patient accommodation is available at one of the general hospitals in the City. Cards giving the above information regarding out-patient treatment are supplied by the Medical Officer of Health to the Harbour Master for distribution to shipping entering the Port.

SECTION IX—CASES OF NOTIFIABLE AND OTHER INFECTIOUS DISEASES ON SHIPS

TABLE D

Category	Disease	Number of cases during the year		Number of ships concerned
		Passengers	Crew	
Cases landed from ships from foreign ports	—	—	—	—
Cases which have occurred on ships from foreign ports, but have been disposed of before arrival ...	—	—	—	—
Cases landed from other ships ...	—	—	—	—

SECTION X—OBSERVATIONS ON THE OCCURRENCE OF MALARIA IN SHIPS

No malaria occurred in ships during the year.

SECTION XI—MEASURES TAKEN AGAINST SHIPS INFECTED WITH OR SUSPECTED FOR PLAGUE

No plague or suspected plague occurred in ships during the year.

SECTION XII—MEASURES AGAINST RODENTS IN SHIPS FROM FOREIGN PORTS

- (1) Vessels arriving from abroad are examined periodically by the Port Health Inspector. Rat disinfestation is carried out by the Rodent Control Section of the Health Department in the port area.
- (2) Bacteriological or pathological examination of rodents can be carried out at the Central Laboratory, Infectious Diseases Hospital; none was examined during the year.
- (3) The Port is not approved for the deratting of ships and, by agreement with Southampton Port Health Authority, this is undertaken by them. Two certificates were issued in respect of local coastwise vessels during the year.
- (4) When necessary, rat guards are placed on ropes between ships and quays.

TABLE E

Rodents destroyed during the year in ships from foreign ports

Category	Number
Black rats	—
Brown rats	—
Species not known	—
Sent for examination	—
Infected with plague	—

TABLE F

Deratting Certificates and Deratting Exemption Certificates issued during the year for ships from foreign ports.
(*Not applicable*)

SECTION XIII—INSPECTION OF SHIPS FOR NUISANCES

TABLE G

Inspections and Notices

Nature and Number of Inspections	Notices served		Result of serving Notices
	Statutory Notices	Other Notices	
Primary 76	—	12	10 complied with
Others 11	—	—	—
Total 87	—	12	—

SECTION XIV—PUBLIC HEALTH (SHELLFISH) REGULATIONS, 1934 AND 1948

There are no shellfish layings within the area of the Port Health Authority.

SECTION XV—MEDICAL INSPECTION OF ALIENS (APPLICABLE ONLY TO PORTS APPROVED FOR THE LANDING OF ALIENS)

(*Not applicable*)

SECTION XVI—MISCELLANEOUS

No special arrangements, other than those made by the shipping agents, exist at present for the burial on shore of persons who have died on board ship from infectious disease.

I desire to express my thanks to the Queen's Harbour Master and H.M. Collector of Customs and their staff for their cordial co-operation and valuable assistance during the year, and to record my appreciation of the excellent service rendered by the Port Health Inspector.

I have the honour to be, Ladies and Gentlemen,

Your obedient Servant,

T. E. ROBERTS,

*Medical Officer of Health,
City and Port of Portsmouth.*

19th April, 1956.

REPORT OF THE PUBLIC ANALYST

THE PUBLIC ANALYST'S DEPARTMENT,
TRAFALGAR PLACE,
CLIVE ROAD,
PORTSMOUTH.

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

I have the honour to submit my Annual Report on the work carried out in my Department during the year 1955.

The total number of samples submitted for examination was 3,549. These may be summarised as follows:—

Food and Drugs Act	1,832
Designated Milk	460
Ice Cream (Hygienic quality)	128
City Water	49
Swimming Bath Water	89
Fertilisers and Feeding Stuffs Act	11

SAMPLES EXAMINED FOR:—

Borough of Gosport	181
Isle of Wight County Council	160
Fareham Urban District Council	95
Other Local Authorities	44
Corporation Departments	264
Miscellaneous	236
TOTAL	3,549

Of the 1,832 samples purchased in the City of Portsmouth and submitted for analysis under the Food and Drugs Act, 102 (equal to 5·6%) were found to be adulterated, incorrectly labelled or otherwise unsatisfactory.

I am glad to take this opportunity of expressing my appreciation of the efficient and loyal service of the technical and clerical staff and the valuable co-operation of the Sampling Officer.

I am, Mr. Chairman and Members,

Yours obedient servant,

A. L. WILLIAMS,
Public Analyst.

Nature of Sample	Number Examined	Number Genuine	Number Irregular
Foods			
Milk	706	680	26
Ale	7	7	—
Butter	53	53	—
Buttered Rolls, etc.	50	34	16
Blancmange Powder	1	—	1
Baking Powder	9	9	—
Beef Suet	10	10	—
Biscuits	6	4	2
Crystallised Fruit	8	4	4
Cake Confectionery	23	14	9
Canned Vegetables	13	13	—
Canned Cream Soup	30	25	5
Canned Tomatoes	11	11	—
Canned Fruit	18	18	—
Cheese Spread	13	12	1
Cereals	28	28	—
Canned Fish	12	12	—
Cooking Fat	27	27	—
Crab Paste and Dressed Crab	8	8	—
Cheese	25	25	—
Coffee	5	5	—
Cake and Pudding Mixture	12	12	—
Coffee and Chicory Mixture	11	11	—
Curry Powder	2	2	—
Custard Powder	8	6	2
Cocoa	7	7	—
Canned Meat	3	1	2
Desiccated Coconut	4	4	—
Dried Fruit	6	6	—
Dried Herbs	10	10	—
Dried Peas	2	1	1
Fish Cakes	4	4	—
Fish Paste	11	11	—
Fruit Pie	2	2	—
Fruit Juice	2	2	—
Fruit Curd	8	8	—
Gluten Rolls	1	1	—
Ground Almonds	7	7	—
Ground Spices	34	34	—
Golden Raising Powder	1	1	—
Gelatine	2	2	—
Gravy Browning	4	3	1
Honey	4	4	—
Ice Cream	14	14	—
Ice Lolly	3	1	2
Jam	39	39	—
Lard	51	51	—
Malt Vinegar	4	3	1
Margarine	59	58	1
Mustard	6	6	—
Meat Paste	23	23	—
Marzipan	3	2	1
Marmalade	9	8	1
Meat Pie	13	11	2
Mincemeat	12	11	1
Pepper	19	19	—
Plain Flour	1	—	1
Processed Cheese	2	2	—
Stuffing	4	4	—
Sugar	49	49	—
Sugar Confectionery	39	37	2
S.R. Flour	9	8	1
Carried forward ...	1,567	1,484	83

Nature of Sample						Number Examined	Number Genuine	Number Irregular
Foods—cont.								
Brought forward ...						1,567	1,484	83
Sterilised Cream ...						13	12	1
Sausages ...						16	13	3
Sweetened Condensed Milk ...						8	8	—
Soup Powder ...						3	2	1
Soya Flour ...						1	1	—
Soft Drinks ...						38	31	7
Solid Soft Drinks ...						6	6	—
Salad Cream ...						4	4	—
Tomato Purée ...						1	1	—
Tomato Juice ...						7	7	—
Tea ...						52	52	—
Tomato Ketchup ...						8	8	—
Treacle and Syrup ...						3	3	—
Table Jelly ...						12	12	—
Total Foods ...						1,739	1,644	95
Drugs								
Bicarbonate of Soda ...						2	2	—
Basilicon Ointment ...						1	1	—
Borax ...						1	1	—
Headache Powder ...						1	1	—
Cough Mixture... ..						4	4	—
Camphorated Oil ...						6	6	—
Cream of Magnesia Tablets ...						1	—	1
Calamine ...						9	9	—
Children's Aspirin ...						1	1	—
Cascara Tablets ...						1	1	—
Epsom Salts ...						1	1	—
Fullers Earth Cream ...						1	1	—
Gees Linctus Pastilles ...						1	1	—
Glycerin of Borax ...						8	3	5
Glycerin ...						2	2	—
Iodised Throat Tablets ...						1	1	—
Liquid Paraffin ...						3	3	—
Lanoline ...						3	3	—
Liver Salts ...						1	1	—
Olive Oil ...						11	11	—
Parrish's Chemical Food ...						4	4	—
Sulphur Ointment ...						1	1	—
Sulphur Tablets ...						8	7	1
Soda Mint Tablets ...						6	6	—
Soothing Powders ...						1	1	—
Senna Pods ...						1	1	—
Tincture of Iodine ...						8	8	—
Zinc Ointment ...						2	2	—
Zinc, Boric and Castor Oil Ointment ...						3	3	—
Total Drugs ...						93	86	7
TOTAL FOOD AND DRUGS ...						1,832	1,730	102

						Number Examined	Number Irregular	Percentage Irregular
Milks ...						706	26	3·7
Other Foods ...						1,033	69	6·7
Drugs ...						93	7	7·5

CHANGES IN LEGISLATION

FOOD AND DRUGS ACT 1955

This Act consolidates various food and drug enactments including the Food and Drug Amendment Act 1954.

The Ministry now possess powers to restrict and control, where necessary, the use of chemicals in food. Manufacturers are continually experimenting with substances which are claimed to retard deterioration or retain palatability of foods for longer periods. Some of these chemical substances are known to be harmless but some are suspect and the Act gives adequate powers to ensure the protection of the public in this matter.

The new Act incorporates the control of labelling and advertising of food; this was previously covered by Defence Regulations. An attempt had been made to clarify the use of the description "Cream" in compound articles of food such as cream cakes, etc. This section of the Act endeavours to provide that the purchaser will be informed whether a substance which has the appearance of cream is, in fact, dairy cream, artificial cream or synthetic cream. Unfortunately the word cream has established use in the description of many substances and it has been necessary to use complicated wording to ensure that the restrictions apply only to cream-like substances which the ordinary purchaser might reasonably expect to be dairy cream.

The Regulations governing sampling procedure have been amended to cover canned food, meat pies and similar articles where division of one article into the necessary three parts would be detrimental to the analysis.

Amendments to definitions include "food" which now includes chewing gum and "analysis" which includes microbiological assays, a method of estimating vitamins and other substances using bacteria under controlled conditions.

Patent and proprietary medicines must now comply with the provisions which are applied to other drugs in respect of nature, substance and quality.

FOOD STANDARDS (BUTTER AND MARGARINE) REGULATIONS 1955: LABELLING OF FOOD (AMENDMENT) REGULATIONS 1955

These Regulations retain the limits for water in butter and margarine and restriction on the sale of mixtures of margarine and butter. Any statement that margarine is made with or contains cream must be accompanied by a statement of the butter equivalent.

FOOD STANDARDS (TABLE JELLIES) (AMENDMENT) ORDER 1955

This Order allows the use of gelatine of lower setting quality (by allowing a higher proportion of gelatine) so long as the final jelly contains at least $2\frac{1}{2}$ oz. of sugar per pint.

BREAD (AMENDMENT) ORDER 1955

This Order requires national milk bread to contain 6 parts of skimmed milk powder for every 100 parts of flour.

Legal approval to use the unqualified word "milk" for a product containing only skimmed milk was deplored by public analysts. It was felt that this would create a serious precedent but the Ministry did not take this view.

MINERAL OIL IN FOOD (AMENDMENT) REGULATIONS 1955

Chewing gum is now included in the definition of food and this Amendment was necessary to allow the use of up to $12\frac{1}{2}$ per cent microcrystalline wax in these products.

FOOD STANDARDS COMMITTEE RECOMMENDATIONS

During the year, this Committee have published revised reports on Colouring Matters and Arsenic in foods.

These recommendations are of valuable assistance to public analysts as they represent considered opinions after consultations with trade and other representatives.

FERTILISERS AND FEEDING STUFFS REGULATIONS 1955

These Regulations are applicable from 1st January, 1956. They amend the limits by which the active constituents of various fertilisers and feeding stuffs may vary from the guaranteed figures. Some of the official methods of analysis have been modified.

MILK

NUTRITIVE VALUE

During 1955, 706 samples of milk were examined for nutritive quality from the following sources:—

Retailers milk as sold to the public ...	...	402
Farmers delivering to local dairies ...	...	250
School milk (1/3 pint bottles) ...	...	54
		<hr/>
		706
		<hr/>

All the samples of 1 pint bottles of retailers milk sold to the public were free from added water. Following a complaint from a service establishment, samples of milk from a wholesale supply of five churns were found to contain added water. It was subsequently traced to faulty operation of the pasteurising plant by workmen and the dairy was cautioned.

54 School milks were of a reasonably satisfactory standard. Minor deficiencies were found in two samples; one low in fat and one low in solids-not-fat. The deficiencies were due to the condition of the cows and not to the presence of added water.

57 samples from farmers and retailers failed to reach the presumptive solids-not-fat standard but were shown to be free from added water. These deficiencies are usually due to bad breeding and unbalanced feeding and the Agricultural Advisory Service undertook to advise the farmers on management of the herds.

Fat contents of less than 3.0 per cent were recorded in 17 samples from farmers but were in all cases from morning milk. The deficiencies were probably due to an excessively long period between milkings as the corresponding evening milks had a satisfactory fat content and again advice was given to the farmers concerned.

Further research by Agricultural experts has confirmed that herds which yield milk of inferior quality are increasing. The causes are again stated to be a high proportion of old cows, together with a policy of breeding and feeding for quantity. Unfortunately high administrative costs are likely to prohibit the adoption of any scheme for payment according to quality.

AVERAGE COMPOSITION OF MILK SOLD TO THE PUBLIC
(CHANNEL ISLAND MILK EXCLUDED)

Month	% Fat	% Solids-not-Fat	% Total Solids	No. of Samples examined
January	3.91	8.65	12.56	44
February	3.82	8.57	12.39	34
March	3.84	8.61	12.45	17
April	3.68	8.59	12.27	29
May	3.49	8.80	12.29	27
June	3.64	8.78	12.42	38
July	3.68	8.73	12.41	29
August	3.69	8.67	12.36	23
September	3.81	8.70	12.51	29
October	3.78	8.74	12.52	49
November	3.83	8.75	12.58	21
December	3.91	8.73	12.64	17
Average 1955	3.75	8.69	12.44	357
" 1954	3.76	8.69	12.45	396
" 1953	3.71	8.66	12.37	365

CHANNEL ISLAND MILK

This milk, for which a higher price may be charged, is produced from cows of Channel Island breeds and on average is appreciably richer in fat (and to some extent in solids-not-fat) than ordinary milk. A standard of 4% fat (as against 3% for ordinary milk) is applied to this milk.

Of the 148 samples examined only 11 samples failed to comply with this higher standard and in all cases the mixed milk from the churns of the total consignment was satisfactory.

The average difference in fat between ordinary milk and Channel Island milk is shown below:—

					Average Fat per cent	
					Channel Island Milk	Ordinary Milk
1955	...	...	...	...	4.54	3.75
1954	...	...	...	...	4.44	3.76

HYGIENIC QUALITY OF MILK

All milk sold by retail in Portsmouth is heat treated, a small amount being "Sterilised" but the larger proportion being "Pasteurised Milk". These processes aim at making the milk completely safe to drink from a health point of view but they do also improve, to some extent, the keeping quality of this milk.

Two tests are applied to pasteurised milk samples to ensure the correct and clean processing of the milk. The Phosphatase Test measures the adequacy of the pasteurisation process and of 460 samples examined, 5 failed to satisfy this test. The Methylene Blue Test is a measure of the keeping quality of the milk and all the samples were satisfactory.

In the cases of failure, investigation with the helpful co-operation of the dairymen concerned, rapidly traced the cause of the failures.

ICE CREAM

NUTRITIVE QUALITY

Legal minimum standards are prescribed for the fat, milk solids and sugar contents of ice cream. It is again clear that, whilst manufacturers do not greatly exceed these requirements in respect of sugars and milk solids, they do consider it necessary for much more fat to be present in order to produce an article satisfactory to the public. At the present time the minimum fat is 5.0%.

The following table shows the distribution of the fat content of the product of 14 different manufacturers.

Fat per cent					No. of Manufacturers
Under 5.0	...	...	...	...	0
5.0—7.4	...	...	...	...	3
7.5—9.9	...	...	...	...	5
10.0 and over	...	...	...	...	6
					—
					14
					—

There would appear to be a good case for raising the present legal minimum for fat. In this area, a higher standard would only affect a minority of the manufacturers.

HYGIENIC QUALITY

The proportion of unsatisfactory samples has slightly increased during 1955 and clearly indicates that continued vigilance is essential for maintaining an adequate hygienic standard.

The excellent weather during the summer months may have been partly responsible for the deterioration in some of the samples.

The following table gives the results of samples examined during the last 3 years:—

		1955		1954		1953	
Satisfactory	Grade 1	50%	} 80%	69%	} 91%	50%	} 80%
	" 2	30%		22%		30%	
Inferior	" 3	10%		5%		14%	
Unsatisfactory	" 4	10%		4%		6%	

SAMPLES OTHER THAN MILK NOT IN ACCORDANCE WITH STANDARD

No.	Nature of Sample	Formal Informal Private	Nature of Offence	Observations
G11	Scotch Cake made with butter and eggs	I	The added shortening contained not more than 5% butter	The manufacturer has undertaken to use 50% butter in the added fat and amend the claim to "half the fat is butter"
G118	Scotch Cake made with butter and eggs	I		
G49	Malt Vinegar (prepacked)	I	Label offence. Contained undeclared Salt	Manufacturer has undertaken to amend the label
G245	Rich Genoa Cake — contains butter and eggs	I	The added shortening contained not more than 25% of butter and the claim "Containing butter" is calculated to mislead. In my opinion this claim implies that the added fat contains at least as much butter as other fat i.e. 50% butter in the added fat	Referred to Trade Organisation
G284	Rich Genoa Cake — contains butter and eggs	F		
G269	Madeira Cake — over half the fat is butter	I	False claim. Sample contained no butter fat	Retailer stated that two types of Madeira Cake were being offered; one made with 50% butter and the other none. Retailer cautioned has undertaken to stock only one type of Madeira Cake in future
G346	Cooking Margarine	I	Label offence. Sold in plain wrapper contrary to Section 33 of the Food and Drugs Act 1938 Prepacked, label failed to give the name and address of packer	Packer cautioned
G347	Self Raising Flour	I		
G348	Plain Flour	I		
G418	Kidney Flavour Soup Powder	I	Label offence. "Flavour" in small print and fails to make it immediately apparent that the article contains no kidney meat	Manufacturer has undertaken to amend the label
G448	Blancmange Powder	I	Label gave a voluntary statement of ingredients which was incomplete. The presence of salt was omitted	Manufacturer has undertaken to amend label

No.	Nature of Sample	Formal Informal Private	Nature of Offence	Observations
G605	Beef Steak and Kidney Pie	I	False description. Contained no identifiable kidney meat	Manufacturer undertook to amend process of manufacture to ensure that each pie contained kidney meat
G493 G512	Butter Genoa Cake Butter Genoa Cake	I F	Misleading description. Added shortening contained not more than 15% of butter fat	Manufacturer agreed to cease to use the description unless shortening consisting wholly of butter was used
G572	Milk Shake Base	I	Label offence. List of ingredients failed to disclose presence of colour. Presence of sugars incorrectly stated in list of ingredients	Manufacturer has undertaken to amend label
G666	Steak and Kidney Pie	I	Contained no identifiable kidney meat	Description amended to "Steak Pie"
G553 G566	Custard Powder Custard Powder	I I	Voluntary list of ingredients. Failed to declare presence of Salt	Manufacturer has undertaken to amend label
G680	Biscuits (prepacked)	I	Misleading advertisement. Claimed "baked . . . with lashings of fine ingredients including dairy butter". "You can taste the butter". The shortening contained not more than 15% of butter fat	Advertisement withdrawn
G604	Genoa Cake (Made with best butter)	I	Misleading description. Shortening consisted of half butter and half other edible fat	Retailer's printed notice withdrawn
G648 G665	Meat Roll (Canned) Meat Roll (Canned)	I F	Contained 58% meat Contained 53% meat Label claimed 65% meat	Withdrawn from sale. Manufacturer stated to be in liquidation
G929	Rich Harvest Biscuits (prepacked)	I	Misleading label. Claimed "Made with butter". The added shortening consisted of half butter and half other edible fat. In my opinion "Made with butter" implies shortening consisting wholly of butter	Manufacturer undertook to amend the label when reprinting
G981	Pork Sausages	I	Contained 150 p.p.m. undeclared SO ₂	Caution

No.	Nature of Sample	Formal Informal Private	Nature of Offence	Observations
G1184	Ice Lolly (Plus Glucose)	I	Misleading label. Claimed "Plus Glucose" whereas the sample contained not more than a faint trace of either pure or liquid glucose	Manufacturer has undertaken to amend label
G1301	Orange Kwench Ice Lolly	I	False label. Claimed "Pure frozen orange juice" whereas sample consisted of orange juice and other ingredients. List of ingredients used "Glucose" as designation for Liquid Glucose and gave alternatives instead of specific descriptions	Manufacturer has undertaken to amend label
G1258	Quinine Tonic Water	I	Def. 60% of minimum amount of Quinine Sulphate B.P.	Caution
G1074	Quinine Tonic Water	I	Def. 40% of minimum amount of Quinine Sulphate B.P. Def. 60% of minimum amount of Quinine Sulphate B.P. Def. 60% of minimum amount of Quinine Sulphate B.P.	Caution
G1285	Quinine Tonic Water	I		
G1286	Quinine Tonic Water	I		
G1283	Quinine Tonic Water	I	Def. 20% of minimum amount of Quinine Sulphate B.P.	Caution
G1284	Quinine Tonic Water	I		
G1383	Milk Chocolate Seedless Raisins	P	Deteriorated during storage. Inferior palatability. Dead mites present	Stock withdrawn from sale
G1424	Mincemeat	I	Mould growth present on the surface of the Mincemeat	Stock inspected and found to be satisfactory
G1373	Sultana Cake (Contains pure Butter)	I	Misleading advertisement. Claimed "Contains pure butter". In my opinion this claim implies as much butter in the added shortening as any other fat. Sample contained shortening of which not more than one third consisted of butter	Referred to Trade Organisation
G1456	Gravy Browning	I	Label offence. Contained 3.5% of Salt not declared on the label	New labels being printed

No.	Nature of Sample	Formal Informal Private	Nature of Offence	Observations
G1499	Cream of Pea Soup	I	Edible Fat 2.5%	Manufacturer cautioned.
G1500	Cream of Pea Soup	I	Edible Fat 3.1%	
G1501	*Cream of Mushroom Soup	I	Edible Fat 2.6%	
G1502	*Cream of Mushroom Soup	I	Edible Fat 2.5%	
G1514	*Cream of Mushroom Soup	I	Edible Fat 2.6% *Samples G1501, G1502 and G1514 carried a label which claimed milk as an ingredient but the samples contained no milk fat.	
G1494	Beef Sausages	I	Contained 100 p.p.m. of undeclared SO_2 .	Caution.
G1496	Pork Sausages	I	Contained 100 p.p.m. of undeclared SO_2 .	Caution.
G1673	Dried Peas (prepacked)	I	Label offence. Claimed "Contained no artificial colour" but the sample contained a steeping tablet which was coloured with synthetic dye, the presence of which was not disclosed.	Packer undertook to use uncoloured steeping tablets.
G1533	Butter Liquorice	I	Description implies the presence of 4% butter fat. Total fat in sample 0.9%.	Manufacturer cautioned.
G1564	Cut Mixed Peel (Prepacked)	I	Label failed to disclose a list of ingredients.	Label to be amended.
G1577	Cut Mixed Peel (Prepacked)	I	List of ingredients incomplete. Failed to disclose the presence of Liquid Glucose.	New labels being printed.
G1622	Glacé Cherries	I	Label designated Liquid Glucose as 'Glucose' unqualified in the list of ingredients.	Manufacturer has undertaken to amend label.
G1585	Thick Cut Marmalade (Prepacked)	I	Label failed to disclose the address of the packer or a Registered Trade Mark.	Manufacturer has undertaken to amend label.
G1576	Glacé Cherries	I	Label designated Liquid Glucose as 'Glucose' unqualified in the list of ingredients.	Manufacturer has undertaken to amend label.

No.	Nature of Sample	Formal Informal Private	Nature of Offence	Observations
G1754	Sterilised Cream (Prepacked)	I	Label failed to disclose the address of the packer or a Registered Trade Mark.	Manufacturer has undertaken to amend label.
G1733	Marzipan (Prepacked)	I	Label designated Liquid Glucose as 'Glucose' unqualified in list of ingredients.	Manufacturer has undertaken to amend label.
G1773	Cheese Spread (Prepacked)	I	Innermost wrappers containing the cheese failed to disclose the name and address of the packer and list of ingredients. Outermost wrapper satisfactory.	Manufacturer has undertaken to amend label.
	Rolls and Butter Scones and Butter Bread and Butter		16 samples of which 11 samples contained spreading which was wholly Margarine and 5 samples a mixture of Margarine and Butter.	Retailers cautioned.
G35	Glycerin of Borax B.P. (Prepacked)	I	Official description is now Glycerin of Borax B.P.C.	Stock relabelled—manufacturer informed.
G36	Glycerin of Borax B.P. (Prepacked)	I	Official description is now Glycerin of Borax B.P.C.	Stock relabelled—manufacturer informed.
G38	Glycerin of Borax B.P. (Prepacked)	I	Official description is now Glycerin of Borax B.P.C. Def. of 4.3% of minimum limit of Borax	Stock withdrawn from sale.
G43	Glycerin of Borax B.P. (Prepacked)	I	Official description is now Glycerin of Borax B.P.C.	Stock relabelled—manufacturer informed.
G47	Glycerin of Borax B.P. (Prepacked)	I	Official description is now Glycerin of Borax B.P.C.	Packed on retailer's premises. Stock relabelled.
G42	Cream of Magnesia Tablets	I	Def. of 73% of the stated amount of dextrose.	Old stock of unknown date. Withdrawn from sale. Retailer cautioned.
G621	Sulphur Tablets	I	Contradictory label. States "Approximate composition" followed by figures given to three decimal places.	Manufacturer informed.

ADULTERATED AND UNSATISFACTORY SAMPLES

SAUSAGES. The meat content of 16 samples of beef sausages and pork sausages was of a reasonable standard, although the price bore no relation to the meat content. The question of whether the consumer should have the protection of minimum standards for the meat in sausages is still under discussion. The trade argue that the quality of the meat is just as important as the quantity. On the other hand it is impossible to distinguish between 50% and 60% of meat by taste and it may be claimed that flavour is primarily associated with the amount and type of spice which is incorporated. There is some evidence that the proportion of fat in sausages is increasing and the figures of this area have been submitted to the Food Standards Committee which has the whole question of sausage standards under consideration.

During 1955, three retailers sold preserved sausages without complying with the legal requirement of notifying the purchaser of the presence of preservative. The retailers were cautioned.

STEAK AND KIDNEY PIE. Two samples contained no identifiable kidney. One manufacturer claimed that his recipe provided for 10% of kidney; he undertook to carry out experiments to ensure that each individual pie received a fair proportion of this kidney. The other manufacturer evidently had doubts as to whether the description was justified for he readily undertook to use the description "Steak Pie" in future.

CAKE CONFECTIONERY. In my report for 1954, reference was made to claims that cakes were made with butter or contained butter, although butter was frequently a minor constituent of the added shortening. During the year under review further examples of similar exaggerated claims were discovered and the question has been the subject of discussion between the Association of Public Analysts and representatives of the trade. It is anticipated that it will be possible to agree that a claim such as "made with butter" means what the ordinary purchaser would expect it to mean, i.e. all the added shortening is butter. The phrase "Containing butter" is not easy to define, but when associated with a cake recipe it is reasonable to suggest that it implies a substantial amount of butter, at least equal to the amount of margarine and/or cooking fat.

The examination of 6 samples of Chocolate Sponge Cake showed that only one sample contained the 4.0% of dry fat free cocoa which has been considered for many years to be a reasonable minimum for a satisfactory chocolate flavour. Enquiries from local manufacturers indicated that the trade considered that a 4.0% minimum standard was incompatible with modern public taste and manufacturing techniques. Subsequently, a national trade organisation confirmed that the public now demand a chocolate flavour which is less bitter than the old standard and a lower proportion of cocoa is necessary to produce an acceptable article free from surface cracking in the large scale plant in use today. Agreement on an appropriate standard is being negotiated by representatives of public analysts and the various organisations of the trade.

BUTTERED ROLLS. A visitor complained that he was served with a roll containing margarine in a cafe, although a notice stated that "Buttered Rolls" were offered. As a result, a survey was made to find out whether this practice was general. A demand for buttered rolls, buttered scone and bread and butter was made from 50 catering establishments. Two thirds of the samples contained butter, the remainder contained margarine or a mixture.

Caterers were warned that the public must be supplied with the article demanded, and where margarine or mixtures of butter and margarine are used, a notice to that effect should be prominently displayed for the information of the customer.

CREAM SOUP. Various samples of different varieties of Cream Soup, all of the same manufacture, were deficient in fat and were accordingly not entitled to the description "Cream". Some of the samples claimed that milk was an ingredient but analysis showed that no milk fat was present. The packer claimed that the errors were due to a change of supplier and the use of old labels. He was cautioned.

SUGAR CONFECTIONERY. A sample of Buttered Liquorice contained only 0.9% of butter fat whereas trade organisations have agreed that an article so described should contain not less than 4.0% of butter fat, and, in fact, the manufacturer's recipe provided for this standard. He undertook to provide more efficient supervision in the factory, after his own consultant confirmed the deficiency of the batch which was being offered for sale in Portsmouth.

TONIC WATER. This article must comply with a minimum standard of half a grain per pint of anhydrous quinine sulphate. The manufacturer may add sugar and flavour at his discretion but his formula should provide for a generous amount of quinine to cover errors in preparation and bottling because a number of the operations of manufacture can lead to a deficiency of quinine.

Samples from 4 brands of tonic water were satisfactory but samples from 3 different brands were deficient in quinine. Investigation suggested that the deficiencies were due to faults in the mechanical device used for measuring the concentrated syrup into bottles, and faulty mixing of the ingredients of the concentrated syrup.

LABELLING IRREGULARITIES

The label of a sample of prepacked dried peas claimed prominently "Free from artificial colouring". The peas were, in fact, free from colour but inside the packet a steeping tablet was provided and this contained an artificial green dye. Accordingly, if the housewife followed the directions on the packet, the resulting cooked peas served at the table would be quite definitely coloured. The packer readily undertook to use uncoloured steeping tablets in future.

The composition of these steeping tablets is normally sodium bicarbonate and sodium carbonate and the question arises as to whether these ingredients should be declared on the label of prepacked peas. It has been suggested that the Ministry take the view that as the tablets are not offered for sale as food, it is not obligatory under the Labelling of Food Order for the ingredients to be declared. On the other hand the Order includes in the definition of food "any substance which is intended for use in the preparation of food" and the tablets, in this sense, are likely to be subject to the provisions of the Order.

Three labels were considered to be misleading. An Ice Lolly claimed to be "Pure frozen orange juice" without qualification, although a number of other ingredients had been incorporated. The label of a sample of Soup Powder gave prominence to the word "Kidney" followed by the word "Flavour" in extremely small type. The sample contained no kidney meat and derived its kidney flavour from artificial sources. The label of an Ice Lolly carried the claim "Plus Glucose" in large type although the sample contained only the faintest trace of either pure or liquid glucose. The

manufacturer stated that the sample must have been part of an experimental batch from which the normal addition of a small quantity of pure glucose had been omitted in an effort to deal with trouble from surface spots which appeared on storage.

A total of 17 samples of various foods failed to give the complete information required by the Labelling of Food Order on the labels. In 5 cases the unqualified word glucose was used to disclose the presence of an ingredient which was actually corn syrup or liquid glucose. The packers undertook to amend the description when the labels were re-printed.

DRUGS

During the year, 93 samples of drugs and medicinal preparations were examined and 7 samples (7.5%) were unsatisfactory.

A sample of Cream of Magnesia Tablets contained only 10.7% of dextrose although the label gave a formula claiming 40% of dextrose. The retailer was unable to give the source of the stock nor the date of purchase. The article was withdrawn from sale. A sample of Glycerin of Borax contained 11.0% of Borax whereas the minimum limit is 11.5%. Although this preparation ceased to be official in the B.P. from September 1953, five out of eight samples were erroneously labelled B.P.

An absurd and contradictory label was found on a sample of Sulphur Tablets. The formula was given on the carton with the heading "Approximate Composition" followed by figures carrying three decimal places. There was an implied accuracy of one part of sulphur in 36,000.

SWIMMING BATH WATER

During the summer the swimming and paddling pools were in constant use and regular samples were examined bacteriologically and chemically.

Chlorination has maintained a reasonable standard of purity but it has been difficult to provide a high standard in the paddling pools at times of heavy load. Some new methods of distribution of the water were tried and further attempts to improve the flow of water are planned.

CITY WATER SUPPLY

Regular examinations have been made on the City Water Supply and on all occasions the results have conformed to the highest standard of bacteriological purity. The chlorination has been adequately controlled.

Further instances of copper contamination of water from new installations of copper pipes have been noted during 1955. The heaviest contamination is always to be found in the first drawn water in the morning and for this reason, complaints of corrosion of aluminium kettles as a result of copper contamination have again been received.

FERTILISERS AND FEEDING STUFFS ACT 1926

10 samples of fertilisers were examined during the year, of these 6 were satisfactory.

2 samples when examined contained constituents in amounts slightly outside of the permitted limits of variation.

A sample of Hydrated Lime was satisfactory with respect to its chemical composition but in the statutory declaration the equivalent of CaO as Ca(OH)_2 had been incorrectly calculated.

Contrary to the provisions of the Act, a sample of Bone Meal was sold without a statutory statement of the active constituents.

BOROUGH OF GOSPORT

181 samples were submitted under the Food and Drugs Act by the Borough of Gosport. 11 samples were unsatisfactory (6.1%) compared with 3.2% for the preceding year.

61 samples of milk were examined and all were found to be free from added water, preservatives and artificial colour. 18 samples of Channel Island Milk were satisfactory.

Label offences were found in 6 samples. In 3 cases objection was taken to the description of the article, and in the other 3 samples technical offences against the labelling of Food Order were noted.

A sample of Pork Sausage contained only 59% of meat instead of 65%. Another sample of Pork Sausage contained the appropriate amount of 65% total meat but the proportion of fat and lean meat was 42% fat with 23% lean meat. Sausage of this composition cannot be regarded as the quality demanded by the average purchaser and it is likely that the relationship of fat and lean meat will be reviewed when a standard for the meat content of sausages is considered by the Ministry.

A sample of Eastons Syrup had deteriorated as a result of long storage; a large proportion of the iron phosphate had changed to an insoluble form. A Zinc Ointment had similarly deteriorated from long storage and the ointment base was so hard that the article was useless for the purpose intended.

ISLE OF WIGHT COUNTY COUNCIL

During the year, 159 samples were submitted by the Isle of Wight County Council under the Food and Drugs Act. One sample was submitted under the Merchandise Marks Act. There were 13 unsatisfactory samples (8.1%) as compared with 14.4% last year.

22 samples of milk were examined. 1 sample contained 16% of water and proceedings against the vendor resulted in a fine of £5 and costs.

6 samples of sausages were criticised, 4 for low meat content and 2 for failure to declare the presence of preservative.

Labelling offences were noted in 6 prepacked foods. When an article of food is subject to the Labelling of Food Order, the ingredients must be given in specific terms. Certain foods are exempt from the provisions of the Order but if the manufacturer of one of these foods chooses to give a voluntary statement of ingredients, it is reasonable to insist on specific designations to avoid misunderstanding. For this reason objection was taken to the use of Glucose for Corn Syrup on the label of a sample of Butterscotch and Edible Gum in Mayonnaise. A sample of Baby Cereal carried an elaborate analysis on the packet, but examination of the sample indicated the presence of 10 times as much Manganese as shown in the analysis on the label. Similarly, the analysis printed on a packet of Starch Reduced Rolls was shown to be inaccurate in that the declared amount of fat was only half the fat which was actually present. The declared figure referred to free fat but in correspondence it was agreed that the rolls contained additional fat in combination with protein and the total fat was the nutritionally significant figure. The manufacturers did not dispute the contention that if technical claims are made on labels, the figures quoted must be reasonably accurate.

FAREHAM URBAN DISTRICT COUNCIL

During the year the Fareham U.D.C. submitted 95 samples under the Food and Drugs Act; of these 4 were unsatisfactory (4.2%).

Of the 40 samples of milk submitted, 1 was genuine but below the statutory standard, whilst another was submitted in a bottle which was found on examination to contain some small pieces of potato peel. 5 samples of Channel Island Milk satisfied the standard for this type of milk.

3 other unsatisfactory samples were as follows:—

1 sample of Pork Sausage was of inferior quality containing less than 65% total meat and also contained 140 parts per million of Sulphur Dioxide which was not declared as required by the Preservative Regulations.

Corn Syrup was described as Glucose without qualification in the list of ingredients of a sample of Chocolate Spread. The manufacturer stated that he had submitted correspondence on the subject to his Trade Association, which had the whole problem under consideration.

A particular brand of Ice Cream was prominently advertised to contain butter. When a sample was analysed it was found to have a fat content of 12% of which 2% was butter fat, and 10% was margarine fat. In my opinion the prominence given to this claim would lead the ordinary purchaser to think that the proportion of butter fat was substantial and would be at least equal to that of the margarine fat, i.e. at least half the fat would be butter fat. The manufacturer argued that since his formula provided for $2\frac{1}{2}\%$ of butter fat and since ice cream may legally be sold with only 5% of total fat, he was in fact using half the minimum standard. It is significant, however, that this brand of ice cream always contains more than 10% of fat and it is doubtful if the manufacturer could meet trade competition if his formula contained no more than $2\frac{1}{2}\%$ butter and $2\frac{1}{2}\%$ margarine fat. This case provides another reason for a higher and more realistic standard for the fat in ice cream.

MISCELLANEOUS SAMPLES

A wide variety of problems which have a chemical aspect are brought to this Department. A few of these are included in the following notes:—

49 specimens were submitted by Coroners in connection with 12 cases of suspected poisoning. The examination of these specimens included a search for Alcohol, Aspirin, Phenacetin, Alkaloids, Paraldehyde, Arsenic, Volatile Chlorinated Hydrocarbons, Elemental Phosphorus and common metallic poisons. Analysis indicated that toxic amounts had been consumed in 3 cases and the appropriate verdict was given in each case.

For the City Architect samples of plaster were examined to find the cause of excessive condensation in the rooms of a block of Corporation flats. The chemical composition of the plaster was normal and in accord with the specification but laboratory experiments indicated that the surface of the samples, as decorated, were exceptionally non-porous. When a flat was placed at the disposal of this Department for experimental purposes, it was possible to show that the walls and ceilings had been treated with a primer or sealer prior to decoration with distemper. This sealer was a resinous plastic and it was proved that one coat was sufficient to seal the pores of the plaster so effectively that the surface was impervious to water or water vapour. The use of the sealer on the ceilings as well as the walls had the effect of converting the rooms into sealed boxes, and with appropriate humidity and wall temperature it was inevitable that heavy condensation resulted. After the walls and ceilings had been re-plastered and decorated without a sealing compound, the abnormal condensation ceased.

For the Pathological Laboratory, 8 samples of Urine were examined for lead as a diagnostic test for lead poisoning. 2 samples contained excess lead and poisoning was confirmed by clinical diagnosis.

From the City Engineer, a specimen of thick black oil was submitted for identification. It had been deposited on the beach and in streets near the sea by storm flood water. Analysis indicated that the sample was boiler fuel oil emulsified with sea water. It could be definitely stated to be neither crude oil, diesel oil or lubricating oil and it was suggested that a large naval vessel was likely to be responsible. It was subsequently admitted that a quantity of fuel oil had been deposited in the Solent close to the shore by the aircraft carrier *Ark Royal* and the Admiralty compensated those who had been inconvenienced by the incident.

A number of samples of Soil and Surface Water were examined for the presence of soluble sulphates which have a deleterious action on concrete made from Portland Cement.

For neighbouring local authorities, a variety of samples including water and sewage effluents have been examined.

For private miscellaneous samples, fees of £340 were charged. The total fees received by the City Treasurer from all sources amounted to £1,100 in 1955.

Private			Central Depot			Chief Education Officer			
Dripping	65		Pig Swill	3		Cooked Meat	1		
Shirt	1		Laboratory Information			Cooked Meat Pie	1		
Pillow Case	1					Fat Meat	1		
Belt	1					Vinegar	2		
Book	1		Chocolate Sponge	1		Health Department			
Cardboard	1		Cake	3					
Sausages	1		Chocolate Roll	1					
Salt	4		Meat Paste	2		Sugar Confectionery	2		
Water	11		Sirapite	1		Sausages	1		
Hog Fat	1		Hydraline	1		Water	1		
Vinegar	1		Paint Remover	2		Limeade	1		
Corset Steel	4		Plaster Sealer	1		Foreign Body	1		
Sugar	1		Finishing Plaster	1		Meat	1		
Cream	2		Plaster Undercoat	1		Rat Poison	1		
Milk	36		Distemper	1		Flour	1		
Sodium Nitrate	3		Margarine	1		Bread	5		
Efflorescence	1		Butter	1		Dirty Milk Bottle	7		
Cellar Water	3		Cooking Fat	1		Dried Milk	4		
Salt Lick	1		Oil	1		Canned Meat	1		
Stomach Contents	1		Sea Water	1		Vinegar	3		
Large Colon... ..	1		Diesel Oil	3		Toy Telephone	1		
Scale	1		Fuel Oil	2		Milk Top	1		
Cyanide Wash	1		National Malt Loaf	1		Spoon	1		
Soils	16		White Loaf	2		Piece of China	1		
Melted Fat	1		Potatoes	1		Pencil	1		
Olives	1		Meat	1		Pickling Condiment	3		
Gherkins	1		Tonic Water	6		Ice Lolly	1		
Mixed Pickle	1		Sugar Confectionery	2		Disinfecting Fluid	2		
Fertilisers	2		Quinine Concentrate	2		Chutney	2		
Corset	1		Tonic Water Syrup	1		Deposit	1		
Boiler Fuel	1		Dripping	1		Currant Bread	2		
Spiral Steel	4		Tea	1		Dog Food	1		
Plaster	1		Sugar	1		Sugar	1		
City Engineer			Sandown Shanklin U.D.C.			Pathological Laboratory			
			Water	9	Water	2	Urine	8	
Water—cellar	5	Havant U.D.C.			Bovril	1			
Trade Effluent	4				Biscuit	1			
Soils	117	Water	1	Bread and Butter	1				
Oil	1	Deposit from kettle	2	Aldershot U.D.C.					
Marchettes Flooring	1								
Acid Crystal	1	Chief Fire Officer			Alton R.D.C.				
Magnesium Crystals	1								
Contracts & Supplies			Cowes U.D.C.			Fareham U.D.C.			
Paint	6	Sewage Effluent	1	Water	5				
Sausages	2	Water	1	Petersfield U.D.C. and R.D.C.					
City Architect			Coroners' Specimens						
Plaster	3	Portsmouth	24	Water	7				
Cellar Water	1	Isle of Wight	10	Milk	1				
White Deposit	1	South Hants	13	Ryde B.C.					
City Police			Whitchurch					2	
Paste	1	Isle of Wight Water Board							
Deposit	1								
Isle of Wight Water Board									
Water	4								

