

**[Report 1936] / Medical Officer of Health, Rotherham County Borough.**

**Contributors**

Rotherham (England). County Borough Council.

**Publication/Creation**

1936

**Persistent URL**

<https://wellcomecollection.org/works/gx95p7yh>

**License and attribution**

You have permission to make copies of this work under a Creative Commons, Attribution license.

This licence permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



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



COUNTY BOROUGH OF ROTHERHAM

---

# REPORT

BY THE

MEDICAL OFFICER OF HEALTH

WILLIAM BARR, M.D., D.Sc., D.P.H.

FOR THE YEAR

**1936**







COUNTY BOROUGH OF ROTHERHAM

# REPORT

BY THE

MEDICAL OFFICER OF HEALTH

WILLIAM BARR, M.D., D.Sc., D.P.H.

FOR THE YEAR

**1936**

ROTHERHAM :  
HENRY GARNETT & CO. LTD., "ADVERTISER" OFFICE  
1937



## Table of Contents.

									PAGE
Section I.	Natural and Social Conditions of the Area	...	...	...	...	...	...	...	9
II.	General Provisions of Health Services in the Area	...	...	...	...	...	...	...	23
III.	Sanitary Circumstances of the Area	...	...	...	...	...	...	...	35
IV.	Housing	...	...	...	...	...	...	...	54
V.	Inspection and Supervision of Food	...	...	...	...	...	...	...	57
VI.	Infectious Diseases generally	...	...	...	...	...	...	...	70
VII.	Tuberculosis	...	...	...	...	...	...	...	84
VIII.	Venereal Diseases	...	...	...	...	...	...	...	106
IX.	Maternity and Child Welfare	...	...	...	...	...	...	...	115
X.	Mental Deficiency	...	...	...	...	...	...	...	168
XI.	Blind Persons	...	...	...	...	...	...	...	172
XII.	Report of the (late) Greasbrough U.D.C. for Jan./March, 1936								176

# COUNTY BOROUGH OF ROTHERHAM

---

## HEALTH COMMITTEE

as at December 31st, 1936.

---

HIS WORSHIP THE MAYOR  
(ALDERMAN F. A. BARLOW)

*Chairman :*  
ALDERMAN F. HARPER, J.P.

*Vice-Chairman :*  
COUNCILLOR G. C. BALL

ALDERMAN	W. BROOKE, O.B.E., J.P.	COUNCILLOR	MRS. F. L. GREEN
"	F. C. WOFINDEN	"	MRS. E. HUGHES
COUNCILLOR	G. A. BARKER	"	L. KIRK
"	W. G. DENHAM	"	J. E. MICKLETHWAITE
"	W. FOWLER	"	MRS. M. H. MOORHOUSE, J.P.
		"	H. NORTH

---

### SUB-COMMITTEES:

HOSPITALS SUB-COMMITTEE.

MATERNITY AND CHILD WELFARE SUB-COMMITTEE.

MENTAL DEFICIENCY SUB-COMMITTEE.

### JOINT COMMITTEES:

SHEFFIELD, ROTHERHAM AND DISTRICT SMOKE ABATEMENT  
COMMITTEE.

SOUTH WEST YORKSHIRE JOINT BOARD FOR THE MENTALLY  
DEFICIENT.





Digitized by the Internet Archive  
in 2018 with funding from  
Wellcome Library

<https://archive.org/details/b30042689>

## HEALTH OFFICERS OF THE LOCAL AUTHORITY.

These are as under :—

## PUBLIC HEALTH DEPARTMENT (under Public Health Committee).

WILLIAM BARR, M.D., D.Sc., D.P.H.	Medical Officer of Health and Chief School Medical Officer.
H. M. COHEN, M.D., D.P.H. (from 5/8/36).	Deputy Medical Officer of Health and Senior School Medical Officer.
LANCELOT H. COPPING, M.B., Ch.B.	Assistant Medical Officer of Health, Venereal Diseases Medical Officer, Maternity and Child Welfare Medical Officer.
ALEXANDER T. DOIG, M.D., D.P.H.	Assistant Medical Officer of Health, Tuberculosis Officer, Sanatorium Medical Officer, and Medical Officer, Infectious Diseases Hospital.
A. S. W. BUCHANAN, L.R.C.P., L.R.C.S. (to 12/4/1936).	Assistant Medical Officer, Oakwood Hall Sanatorium.
HUGH R. MORRISON, M.B., Ch.B., D.P.H. (from 23/6/1936).	do. do.
MARY D A. BOYD, M.B., Ch.B.	Assistant Medical Officer, Maternity and Child Welfare (part time).
M. RACHAEL POWELL, M.B., Ch.B.	do. do.
JOHN CHISHOLM, F.R.C.S., Ed., M.B., Ch.B.	Obstetric Consultant (part-time).
H. M. PETTY, M.B., Ch.B., D.L.O.	Aural Surgeon (part-time).
G. GREEN, M.R.C.V.S.	Veterinary Inspector (part-time).
J. EVANS, F.I.C., F.C.S.	Public Analyst (by fees).
MR. J. E. FULLER (1), (2), (6), (8), (9).	Senior Sanitary Inspector.
MR. W. PEARCE (1), (2), (8), (9).	Assistant Senior Sanitary Inspector and Inspector of Food and Drugs.
MR. T. W. PEARCE (1), (2), (8), (9).	Sanitary Inspector and Inspector of Meat.
MR. W. HORTON (1), (2).	District Sanitary Inspector.
MR. G. C. HARRISON (1).	District Sanitary Inspector.
MR. C. REDFERN (1), (2) (to 18/4/1936).	District Sanitary Inspector.
MR. S. MASTIN (1), (2) (from 1/5/36).	District Sanitary Inspector.
MR. L. W. LODGE (1), (2) (from 11/5/36).	District Sanitary Inspector.
MR. N. FROGGATT (1), (2).	Sanitary Inspector (Office).
MR. J. H. HOARE (3).	Smoke Inspector (by arrangement with the Sheffield, Rotherham and District Smoke Abatement Committee).
MR. G. E. WESTBY (1), (8).	Chief Clerk.
MISS J. BARRACLOUGH (1), (10).	Senior Health Visitor.
MISS E. G. CRESSWELL (10), (11), (13).	Assistant Senior Health Visitor.
MISS M. M. RIGBY (1), (10).	Health Visitor.
MISS M. F. SENIOR (10), (11), (14).	Health Visitor and Nurse, Venereal Clinic.
MISS E. HEYES (10).	Health Visitor and Mental Deficiency Visitor.
MRS. M. HEDLEY (5), (10), (11).	Health Visitor.
MISS A. COATES (5), (10) (11).	Health Visitor and Tuberculosis Visitor.
MISS S. A. SIMM (5), (10), (11) (from 20/4/36).	Health Visitor.
MRS. M. AIRTON (4), (10) (from 25/5/36).	Health Visitor.
MISS C. BARRACLOUGH (10), (11), (13), (15).	Matron, Isolation Hospital.



MISS A. SMEETON (11), (12).  
 MRS. EYRE.  
 MISS A. E. BUFFHAM (10), (11).  
 MR. R. LEEMAN.  
 MR. H. JACOBS (from 27/7/36).  
 MR. F. JESSOP (died 27/11/1936).  
 MRS. F. A. MONKS (11) (to 1/5/36).  
 MRS. E. MILLBURN (10), (11) (from 4/5/36).  
 Detective Inspector R. THOMPSON

MISS N. BROOKES (to 4/9/36).  
 MISS A. M. ARNOLD (from 1/9/36).  
 Public Health Department.  
 Maternity and Child Welfare Section.

#### PUBLIC VACCINATION.

T. V. GRIFFITH, M.B., Ch.B., B.A.O.  
 A. YOUNG, M.B., Ch.B.  
 H. R. ELLIOTT, M.R.C.S., L.R.C.P.  
 D. P. K. JOCKEL, M.D. (from 1/4/36)  
 MR. F. S. BUTCHER.  
 MR. T. H. HARRISON.  
 MR. W. J. BLYTH (from 1/4/36).

#### SCHOOL MEDICAL DEPARTMENT (under Education Authority).

H. M. COHEN, M.D., D.P.H.  
 ELSA F. BROWN, M.B., Ch.B.  
 H. CECIL SNELL, M.A., M.B., B.Ch.,  
 M.R.C.S., L.R.C.P.  
 H. L. CROCKETT, M.B., Ch.B.  
 H. M. PETTY, M.B., Ch.B., D.L.O.  
 H. R. HEALD, L.D.S., R.C.S. Eng.  
 J. M. FRASER, L.D.S.  
 MISS C. CROFTON (10), (11).  
 MISS G. CAVE (10), (11).  
 MISS N. MULLARKEY (11).  
 MISS R. HANCOCK (5), (10), (11).  
 MISS A. EDMONSON (5), (10), (11).  
 MISS P. JORGENSEN (to 14/5/36).  
 MISS N. WESTON (from 25/5/36) (5), (10), (11).  
 MISS A. C. HAMPTON, C.S.M.M.G., (M.G.), (11).  
 School Medical Department.

#### Qualifications.

- (1) Certificate, Royal Sanitary Institute (Sanitary Inspector).
- (2) Do. do. (Meat and other Foods).
- (3) Do. do. (Smoke Inspector).
- (4) Do. do. (Health Visitor).
- (5) Health Visitors Exam. under Ministry of Health Regulations.
- (6) Certificate, San. Insp. Assoc. Exam. Bd. (Sanitary Inspector).
- (7) Diploma, Board of Education, Health Visitors.
- (8) Certificate, Board of Education, Building Construction.
- (9) Certificate, City and Guilds Institute, Plumbing.
- (10) Certificate, Central Midwives Board.

Matron, Oakwood Hall Sanatorium.  
 Certificated Teacher, Oakwood Hall Sanatorium.  
 Matron, Ferham House Maternity Home.  
 Disinfecter.  
 do.  
 Venereal Diseases Orderly.  
 Venereal Diseases Nurse (part time).  
 do. do.  
 Inspector of Common Lodging Houses (part-time).  
 Visitor of Blind Persons.  
 do. do.  
 Six Clerks.  
 Three Clerks.

Public Vaccinator, Alma Road Hospital.  
 Public Vaccinator, North-West Rotherham.  
 Public Vaccinator, South-East Rotherham.  
 Public Vaccinator, Rawmarsh (part of).  
 Vaccination Officer, South-East Rotherham.  
 Temporary Vaccination Officer, N.W. Rother'm  
 Vaccination Officer, Rawmarsh (part of).

Senior School Medical Officer.  
 Assistant School Medical Officer (part-time).  
 Ophthalmic Surgeon (part-time).  
 Orthopaedic Surgeon (part-time).  
 Aural Surgeon (part-time).  
 School Dental Surgeon.  
 Assistant School Dental Surgeon.  
 School Nurse.  
 School Nurse).  
 School Nurse.  
 School Nurse.  
 School Nurse.  
 School Nurse.  
 School Nurse.  
 Orthopaedic Nurse and Masseuse.  
 Five Clerks.

- (11) General Trained Nurse.
- (12) Certificate, Tuberculosis Association.
- (13) Fever Trained Nurse.
- (14) Certificate, Gynæcological Training.
- (15) Housekeeping and Laundry Diploma.

PUBLIC ASSISTANCE MEDICAL DEPARTMENT (under Public Assistance Com.).

T. V. GRIFFITH, M.B., Ch.B., B.A.O.	Superintendent Medical Officer, Alma Rd. Hosp.
F. M. HANNA, B.A., M.B., Ch.B., B.A.O. (to 20/7/36)	Assistant Medical Officer, Alma Road Hospital.
J. F. A. CONOLLY, M.B., B.Ch., B.A.O. (from 25/1/36).	Assistant Medical Officer, Alma Road Hospital.
M. JEFFREY, M.B., Ch.B. (from 18/5/36).	Assistant Medical Officer, Alma Road Hospital.
C. O. GREER, M.B., B.Ch., B.A.O. (from 8/9/36).	Assistant Medical Officer Alma Road Hospital.
D. N. RYALLS, L.M.S.S.A. (to 30/4/36).	District Medical Officer, North-West Rotherham
W. CREER, M.B., Ch.B. (to 31/3/36).	District Medical Officer, South-East Rotherham.
H. M. MILLS, M.B., Ch.B.	District Medical Officer, Thorpe and Scholes.
MISS E. C. DAVIES	Superintendent Nurse, Alma Road Hospital.



Public Health Department,

Town Hall,

Rotherham

To the Chairman—Alderman F. Harper, J.P.—and Members of the Public Health Committee.

I herewith submit my annual report on the public health circumstances of the County Borough of Rotherham for the year 1936.

The contents have been compiled in compliance with Circular 1561 of the Ministry of Health, dated 16th October, 1936, and the report is an ordinary, not a survey report.

WILLIAM BARR

Medical Officer of Health.

## SECTION I.

## STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

## GENERAL STATISTICS.

Area (in acres)	Prior to 1st April, 1936	...	...	...	5,893
	As constituted 1st April, 1936	...	...	...	9,255
Population (census) 1931	Prior to 1st April, 1936	...	...	...	69,691
	As constituted 1st April, 1936	...	...	...	75,223
Population (estimated) 1936	Mid-year	...	...	...	74,965
	Modified for statistical purposes	...	...	...	73,330
Number of inhabited houses (31/12/1936)	...	...	...	...	19,755
Rateable value (1/4/1937)	...	...	...	...	£410,380
Sum represented by a penny rate (1/4/1937)	...	...	...	...	£1,580

## VITAL STATISTICS.

In the following summary extracts from the vital statistics for the year are given :—

Live births.	Total.	Male.	Female.		
Legitimate ...	1199	626	573	—	Birth rate per 1,000 of the esti-
Illegitimate	46	20	26	—	mated resident population ... 16.98
Stillbirths ...	60	30	30	—	Rate per 1,000 (live and still)
					births ... 0.82
Deaths ...	872	464	408	—	Crude death rate per 1,000 of the
					estimated resident population... 11.89
					Adjusted death rate per 1,000
					of the estimated resident popu-
					lation (comparability figure) ... 13.67

Deaths from puerperal causes—					Deaths.	Rate per 1,000 total (live and still) births.
Puerperal sepsis	...	...	...	...	1	0.76
Other puerperal causes	...	...	...	...	6	4.60
					—	—
Total ...	...	...	...	...	7	5.36

## Death rate of infants under one year of age—

All infants per 1,000 live births	...	...	...	...	71
Legitimate infants per 1,000 legitimate live births	...	...	...	...	67
Illegitimate infants per 1,000 illegitimate live births	...	...	...	...	173
Deaths from measles (all ages)	...	...	...	...	5
Deaths from whooping cough (all ages)	...	...	...	...	5
Deaths from diarrhoea (under 2 years of age)	...	...	...	...	13



In the tables which follow are given the detailed vital statistics of the County Borough.

Other tables of a more specific nature are incorporated in the later sections of this report dealing with infectious diseases generally, tuberculosis, venereal diseases, maternity and child welfare, mental deficiency, and blind persons.

In the following table the cause of death at different periods of life, as supplied by the Registrar General, are given for the year 1936. The inclusion of this is considered desirable by the Ministry of Health for the purpose of comparison with the figures for other areas, and relates to deaths **registered** in the calendar year, which totalled 872.

The remainder of the figures relating to deaths in other tables of this report are those of the actual deaths which **occurred** during the year, totalling 871 and have been compiled locally.

CAUSES OF DEATH					Sex	All ages	0-	1-	2-	5-	15-	25-	35-	45-	55-	65-	75-
ALL CAUSES	...	...	...	...	M.	464	54	6	15	9	17	16	27	43	90	101	86
					F.	408	37	9	7	8	14	21	19	33	67	97	96
1 Typhoid and paratyphoid fevers	...				M.	-	-	-	-	-	-	-	-	-	-	-	-
					F.	-	-	-	-	-	-	-	-	-	-	-	-
2 Measles	...	...	...	...	M.	3	2	-	1	-	-	-	-	-	-	-	-
					F.	2	1	-	1	-	-	-	-	-	-	-	-
3 Scarlet fever	...	...	...	...	M.	1	-	-	1	-	-	-	-	-	-	-	-
					F.	2	-	-	-	1	-	-	-	1	-	-	-
4 Whooping cough	...	...	...	...	M.	2	1	1	-	-	-	-	-	-	-	-	-
					F.	3	1	1	1	-	-	-	-	-	-	-	-
5 Diphtheria	...	...	...	...	M.	5	-	-	1	4	-	-	-	-	-	-	-
					F.	3	-	-	-	3	-	-	-	-	-	-	-
6 Influenza	...	...	...	...	M.	6	1	-	-	-	-	-	1	2	2	-	-
					F.	4	-	1	-	-	-	-	1	1	-	1	-
7 Encephalitis lethargica	...	...	...	...	M.	1	-	-	-	-	-	-	-	-	1	-	-
					F.	2	-	-	-	-	1	-	-	-	1	-	-
8 Cerebro-spinal fever	...	...	...	...	M.	-	-	-	-	-	-	-	-	-	-	-	-
					F.	-	-	-	-	-	-	-	-	-	-	-	-
9 Tuberculosis of respiratory system	...				M.	22	-	-	1	-	1	7	3	7	2	1	-
					F.	12	-	1	-	-	5	2	2	1	1	-	-
10 Other tuberculous diseases	...				M.	3	-	-	1	1	1	-	-	-	-	-	-
					F.	7	1	-	-	1	-	1	3	1	-	-	-
11 Syphilis	...	...	...	...	M.	5	-	-	-	-	-	-	-	2	2	-	1
					F.	1	-	-	-	-	-	-	-	-	1	-	-
12 General paralysis of the insane, tabes dorsalis	...	...	...	...	M.	3	-	-	-	-	-	-	-	-	2	1	-
					F.	1	-	-	-	-	-	-	-	-	1	-	-
13 Cancer, malignant disease	...				M.	54	-	-	-	-	-	1	1	4	16	26	6
					F.	49	-	-	-	-	-	1	2	9	18	13	6
14 Diabetes	...	...	...	...	M.	4	-	-	-	-	1	-	-	-	2	-	1
					F.	8	-	-	-	-	-	1	-	1	3	2	1
15 Cerebral haemorrhage	...	...	...	...	M.	21	-	-	-	-	-	-	-	-	3	11	7
					F.	28	-	-	-	-	-	-	2	4	5	8	9
16 Heart disease	...	...	...	...	M.	109	-	-	-	-	1	-	6	11	25	26	40
					F.	119	-	-	-	1	2	2	4	4	12	50	44
17 Aneurysm	...	...	...	...	M.	1	-	-	-	-	-	-	-	-	1	-	-
					F.	1	-	-	-	-	-	-	-	-	1	-	-
18 Other circulatory diseases	...				M.	20	-	-	-	-	-	-	1	1	2	8	8
					F.	13	-	-	-	-	-	-	-	-	1	5	7
19 Bronchitis	...	...	...	...	M.	15	3	-	-	-	-	1	1	1	1	2	6
					F.	11	1	1	-	-	-	-	-	-	2	2	5
20 Pneumonia (all forms)	...	...	...	...	M.	34	6	1	3	1	-	1	3	2	7	5	5
					F.	33	9	2	2	1	-	2	-	3	2	4	8
21 Other respiratory diseases	...				M.	2	-	-	1	-	-	-	-	-	-	1	-
					F.	3	-	-	-	-	-	-	1	-	2	-	-
22 Peptic ulcer	...	...	...	...	M.	4	-	1	-	-	-	-	1	2	-	-	-
					F.	3	-	-	-	-	-	-	-	1	1	1	-

Table showing ages and causes of death for the year 1936—Continued.

[illegible]



In the subsequent table the vital statistics of the Borough in relation to the various wards are shown :—

	Clifton Ward	East Ward	Greas-bro' Ward	Kim-ber-worth Ward	Mas-bro' Ward	North Ward	St. Ann's Ward	South Ward	Thorn-hill Ward	West Ward	Total 1936
Estimated population (mid-year 1936) .. ..	10860	12990	3430	9240	5710	6640	7600	7500	5665	5330	74965
Estimated population (statistical year 1936) .. ..	10630	12710	3350	9040	5580	6490	7440	7340	5540	5210	73330
Number of houses, 31/12/36 .. ..	2878	3440	906	2446	1512	1757	2013	1986	1500	1411	19849
Acreage .. ..	785	952	1403	2913	411	300	122	711	212	1446	9255
Density of houses per acre .. ..	3.67	3.61	0.64	0.84	3.60	5.86	16.5	2.79	7.08	0.98	2.14
Density of population per acre .. ..	13.84	13.65	2.44	3.17	13.90	22.14	62.29	10.54	26.73	3.68	8.10
Births—Legitimate .. ..	155	193	39	125	129	128	147	64	109	110	1199
Illegitimate .. ..	11	5	—	3	4	3	8	2	5	5	46
Total .. ..	166	198	39	128	133	131	155	66	114	115	1245
Birth rate .. ..	15.62	15.58	11.64	14.16	23.84	20.03	23.59	8.99	20.58	22.08	16.98
Deaths—Gross .. ..	171	101	30	100	81	94	110	68	91	252	1098
Outward transfers .. ..	66	3	—	5	1	—	1	4	—	200	280
Inward transfers .. ..	7	6	—	7	5	9	4	6	4	5	53
Nett .. ..	112	104	30	102	85	103	113	70	95	57	871
Death rate (crude) .. ..	10.54	8.18	8.96	11.28	15.24	15.87	15.19	9.54	17.19	10.94	11.89
Nett deaths under 1 year of age .. ..	14	14	2	5	11	10	11	5	9	8	89
Infantile mortality rate per 1000 births .. ..	84	71	51	39	83	76	71	71	79	70	71
CASES OF INFECTIOUS DISEASE REPORTED	Small-pox .. ..	—	—	—	—	—	—	—	—	—	—
	Diphtheria .. ..	41	18	5	17	9	8	28	4	17	154
	Scarlet fever .. ..	76	57	8	28	23	48	36	31	12	339
	Typhoid and paratyphoid fevers .. ..	1	1	—	—	—	—	—	—	1	3
	Erysipelas .. ..	10	11	—	5	2	10	9	2	3	60
	Pneumonia .. ..	10	14	6	17	14	21	8	19	20	129
	Chicken-pox .. ..	14	72	—	25	9	29	37	9	11	223
	Encephalitis lethargica .. ..	—	—	—	—	—	1	—	—	—	1
	Cerebro-spinal fever .. ..	—	—	—	—	—	—	—	—	—	—
	Acute polio-myelitis .. ..	—	—	—	1	—	—	—	1	—	2
	Dysentery .. ..	—	—	—	—	—	1	—	—	—	1
	Measles .. ..	240	274	14	274	261	233	152	67	208	1830
	German measles .. ..	56	135	9	35	54	32	42	20	58	458
	Puerperal fever .. ..	2	1	—	—	—	—	—	—	—	3
	Puerperal pyrexia .. ..	—	3	—	1	—	—	1	2	2	9
	Ophthalmia neonatorum .. ..	—	1	1	2	2	—	1	—	—	7
	Pemphigus neonatorum .. ..	1	—	—	—	—	—	—	1	1	3
	Pulmonary tuberculosis—										
	Males .. ..	2	5	—	7	8	1	3	—	1	32
	Females .. ..	5	1	1	2	3	2	2	4	5	27
	Other forms of tuberculosis—										
	Males .. ..	—	3	—	1	—	2	—	1	—	7
	Females .. ..	—	2	—	1	1	2	3	—	3	14
DEATHS	Small-pox .. ..	—	—	—	—	—	—	—	—	—	—
	Measles .. ..	—	1	—	—	3	1	—	—	—	5
	Scarlet fever .. ..	—	1	1	—	—	—	—	—	1	3
	Whooping cough .. ..	—	3	—	—	—	—	—	—	2	5
	Diphtheria .. ..	1	—	—	3	—	1	—	2	—	8
	Typhoid fever .. ..	—	—	—	—	—	—	—	—	—	—
	Erysipelas .. ..	1	1	—	—	1	—	—	—	1	4
	Influenza .. ..	1	—	—	2	—	2	—	1	3	10
	Diarrhoea and enteritis (under 2 years) .. ..	1	1	—	1	3	1	2	2	1	13
	Tuberculosis—										
	respiratory .. ..	8	2	—	3	2	7	5	1	2	34
	other forms .. ..	2	1	—	1	—	1	2	1	—	9
	Bronchitis .. ..	3	8	—	1	5	3	5	1	—	27
	Pneumonia .. ..	12	9	2	6	6	11	10	4	10	73
	Malignant disease .. ..	10	14	3	16	10	10	11	10	13	100
	Diseases of the heart .. ..	32	18	11	28	19	28	24	20	30	225
	Nephritis and Bright's disease .. ..	4	4	—	2	3	3	2	2	1	24



In the following table the vital statistics of the Borough in relation to the months of the year are given:

	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.	Total 1936
Rainfall—No. of wet days ... ..	25	16	15	13	9	17	21	10	15	15	22	16	194
Inches of rain ... ..	2.83	2.82	1.67	1.27	1.01	3.95	3.67	1.77	2.04	2.40	2.82	1.79	28.04
Maximum daily fall—day ... ..	19th	28th	26th	1st	30th	22nd	9th	10th	6th	30th	16th	13th	—
Maximum daily fall—inches ... ..	0.61	0.66	0.48	0.36	0.40	1.04	0.95	0.39	0.36	0.72	0.41	0.40	—
Births— Legitimate ... ..	112	83	103	101	106	99	116	92	91	99	88	109	1196
Illegitimate ... ..	6	2	5	2	4	3	4	6	3	4	4	3	46
Total ... ..	118	85	108	103	110	102	120	98	94	103	92	112	1245
Birth rate ... ..	19.31	13.91	17.68	16.86	18.00	16.69	19.63	16.04	15.38	16.86	15.05	18.32	16.98
Deaths— Gross ... ..	117	94	116	96	77	84	71	95	82	90	88	88	1098
Outward transfers ... ..	28	25	46	26	21	27	17	17	18	20	20	15	280
Inward transfers ... ..	6	9	5	1	2	3	5	2	6	4	3	7	53
Nett ... ..	95	78	75	71	58	60	59	80	70	74	71	80	871
Death rate (crude) ... ..	15.54	12.76	12.28	11.61	9.50	9.82	9.65	13.09	11.46	12.11	11.61	13.09	11.89
Nett deaths under 1 year of age ... ..	11	6	7	12	9	4	12	5	7	3	5	8	89
Infantile mortality rate per 1000 b'ths	93	71	65	116	82	39	100	50	74	29	54	71	71
CASES OF INFECTIOUS DISEASE REPORTED	Small-pox ... ..	—	—	—	—	—	—	—	—	—	—	—	—
	Diphtheria ... ..	7	7	7	11	20	4	10	9	18	22	17	154
	Scarlet fever ... ..	61	45	25	29	21	23	21	26	12	22	24	339
	Typhoid and paratyphoid fevers	1	—	—	—	—	—	1	1	—	—	—	3
	Erysipelas ... ..	4	3	13	5	4	2	4	6	5	7	5	60
	Pneumonia ... ..	18	10	13	10	11	7	6	9	13	7	17	129
	Chicken-pox ... ..	59	59	19	31	6	6	7	9	8	12	—	223
	Encephalitis lethargica ... ..	—	—	1	—	—	—	—	—	—	—	—	1
	Cerebro-spinal fever ... ..	—	—	—	—	—	—	—	—	—	—	—	—
	Acute polio-myelitis ... ..	—	—	1	—	—	—	—	—	1	—	—	2
	Dysentery ... ..	—	—	—	—	—	—	—	—	—	1	—	1
	Measles ... ..	48	87	504	628	286	109	100	42	14	6	—	1830
	German measles ... ..	56	100	172	83	35	10	—	2	—	—	—	458
	Puerperal fever ... ..	—	—	—	—	—	1	2	—	—	—	—	3
	Puerperal pyrexia ... ..	3	—	1	—	—	4	—	—	—	—	1	9
	Ophthalmia neonatorum ... ..	—	3	1	1	1	—	—	—	—	—	1	7
	Pomphigus neonatorum ... ..	—	—	1	—	—	—	—	—	—	1	1	3
	Pulmonary tuberculosis— Males	3	1	3	2	2	—	2	4	5	2	6	32
	Females	2	1	4	1	—	4	2	3	3	2	3	27
	Other forms of tub'culosis— Males	—	—	1	—	2	—	—	1	2	—	1	7
	Females	2	2	1	—	1	2	—	1	—	2	1	14
DEATHS	Small-pox ... ..	—	—	—	—	—	—	—	—	—	—	—	—
	Measles ... ..	—	—	—	1	4	—	—	—	—	—	—	5
	Scarlet fever ... ..	1	—	—	2	—	—	—	—	—	—	—	3
	Whooping cough ... ..	—	—	—	1	—	—	1	2	—	—	1	5
	Diphtheria ... ..	2	—	—	1	—	—	2	—	1	2	—	8
	Typhoid fever ... ..	—	—	—	—	—	—	—	—	—	—	—	—
	Erysipelas ... ..	—	—	1	—	1	1	—	—	—	1	—	4
	Influenza ... ..	2	3	—	—	—	—	—	1	2	—	2	10
	Diarrhoea & enteritis (under 2 yrs)	1	1	2	1	1	—	3	—	1	2	—	13
	Tuberculosis— respiratory	3	2	6	2	—	2	—	4	2	4	3	34
	„ other forms	—	—	2	1	1	—	2	2	—	1	—	9
	Bronchitis ... ..	5	2	2	2	4	2	1	—	1	—	2	27
	Pneumonia ... ..	13	7	4	3	4	5	9	6	3	5	6	73
	Malignant disease ... ..	3	9	13	10	6	9	4	15	4	8	7	100
	Diseases of the heart ... ..	23	20	19	20	13	14	18	20	21	25	10	225
	Nephritis and Bright's disease ...	1	—	—	5	2	2	3	4	1	2	3	24

The following table shows the birth-rate, death-rate, and analysis of mortality, during the year 1936, compared with England and Wales as a whole and various other areas.

(The mortality rates for England and Wales refer to the whole population but for London and the towns to civilians only.)

	RATE PER 1,000 TOTAL POPULATION.		ANNUAL DEATH-RATE PER 1,000 POPULATION.										RATE PER 1,000 BIRTHS.	
	Live births.	Still births.	All causes.	Enteric fever.	Small-pox.	Measles.	Scarlet fever.	Whooping cough.	Diphtheria.	Influenza.	Violence.	Diarrhoea and enteritis under two years.	Total deaths under one year.	
England and Wales...	14.8	0.61	12.1	0.01	—	0.07	0.01	0.05	0.07	0.14	0.52	5.9	59	
122 County Boroughs and Great Towns, including London.	14.9	0.67	12.3	0.01	—	0.09	0.01	0.06	0.08	0.14	0.45	8.2	63	
143 Smaller Towns (estimated resi- dent populations 25,000 to 50,000 at Census 1931) ...	15.0	0.64	11.5	0.00	—	0.04	0.01	0.04	0.05	0.15	0.39	3.4	55	
London ...	13.6	0.53	12.5	0.01	—	0.14	0.01	0.06	0.05	0.14	0.52	14.4	66	
Rotherham* ...	17.0	0.82	13.7	0.00	—	0.08	0.05	0.08	0.11	0.16	0.74	10.4	71	

\* Adjusted death rates.

Puerperal sepsis Others Total

The maternal mortality rates for England and Wales are as follow :

per 1,000 live and still births ...

1.40 2.41 3.81

The maternal mortality rates for Rotherham are as follow :

live and still births ...

0.76 4.60 5.36

The birth-rate, death-rate, and analysis of mortality during the years 1932-1936 for Rotherham alone are summarised herewith :—

YEAR.	RATE PER 1,000 POPULATION.										RATE PER 1,000 BIRTHS.				
	BIRTH RATE.	DEATH RATE. (crude)	Small-pox.	Enteric fever.	Diphtheria.	Scarlet fever.	Measles.	Whooping cough.	Pulmonary tuberculosis.	Other forms of tuberculosis.	Diarrhoea and enteritis under two years.	Total deaths under one year.	Deaths under one week.	Deaths under one month.	Maternal deaths.
1932	18.11	11.15	—	—	0.07	—	0.34	0.09	0.72	0.13	3.2	70	26	37	4.5
1933	16.53	12.06	—	—	0.01	—	—	0.07	0.65	0.07	11.3	84	31	44	3.3
1934	17.30	10.30	—	—	0.04	0.01	0.03	0.01	0.51	0.10	3.4	49	22	30	7.3
1935	17.01	11.53	—	—	0.14	0.03	0.03	0.07	0.54	0.04	6.0	69	34	43	4.3
1936	16.98	11.89	—	—	0.10	0.04	0.07	0.07	0.46	0.12	10.4	71	17	27	5.4
Average ...	17.23	11.42	—	—	0.07	0.01	0.09	0.06	0.58	0.09	6.7	69	26	36	5.0



## EXTENSION OF BOROUGH BOUNDARIES.

Under the Doncaster, Rotherham and Wakefield Extension Order, 1936, the boundaries of the County Borough of Rotherham were extended, and the following statement gives details of the alterations which came into operation on 1st April 1936 :—

	Area (acres)
County Borough of Rotherham at 31st March, 1936 .. ...	5895
Areas added as from 1st April, 1936 :—	
Greasbrough U.D. (part) ... ..	1418
Rawmarsh U.D. (part) ... ..	76
Rotherham R.D. (part) :—	
Brinsworth Parish (part) ... ..	359
Dalton Parish (part) ... ..	558
Wentworth Parish (part) ... ..	99
Whiston Parish (part) ... ..	916
	<u>1932</u>
	3426
	<u>9321</u>

Areas ceded from Rotherham C.B. as from 1st April, 1936

Rotherham R.D.C. :—	
Wentworth Parish ... ..	66
	<u>66</u>
	9255

The following table gives the areas of the several wards of the borough prior to the extension and the alteration in their areas as from the appointed day. A new ward was created, the Greasbrough ward, which comprises the part of the area of the late Greasbrough Urban District Council transferred to the County Borough, less a small portion added to the Thornhill ward :—

Ward	Area prior to extension (acres)	Areas added to borough on 1st April, 1936 (acres)	Transferred from :	Area at 1st April, 1936 (acres)
Clifton	519	154	Dalton Parish	
		112	Whiston Parish	785
		76	Rawmarsh U.D.C.	
East	472	404	Dalton Parish	952
Greasbrough	—	1403	Greasbro' U.D.C.	1403
Kimberworth	2880	33	Wentworth Parish	2913
			(nett addition)	
Masbrough	411	—	—	411
North	300	—	—	300
St. Ann's	122	—	—	122
South	431	280	Whiston Parish	711
Thornhill	197	15	Greasbro' U.D.C.	212
West	563	524	Whiston Parish	
		359	Brinsworth	1446
<b>Total</b>	<b>5895</b>	<b>3360</b>	<b>—</b>	<b>9255</b>

The net number of houses in the areas added to the Borough was 1770. Only one house, Westfield Farm, Barnsley Road, Thorpe Hesley, was in the portion of the County Borough ceded to the Wentworth Parish of the Rural District of Rotherham. The following statement gives the number of houses in the County Borough at 31st March, 1936, and the houses added into each ward as a result of the extension :—

Ward	Number of houses prior to extension	Number of houses added to borough 1.4.1936	Transferred from :—	Total number of houses at 1st April, 1936
Clifton	2474	164	Whiston Parish	2638
East	3380	35	Dalton Parish 29 Rawmarsh U.D. 6	3415
Greasbrough	—	895	Greasbrough U.D.	895
Kimberworth	2279	80	Wentworth Parish	2359
Masbrough	1607	—		1607
North	1801	—		1801
St. Ann's	2014	—		2014
South	1511	325	Whiston Parish	1836
Thornhill	1503	2	Greasbrough U.D. 1 Rawmarsh U.D. 1	1505
West	1036	269	Brinsworth Parish 125 Whiston Parish 144	1305
Total	17605	1770	—	19375

The increase in the population of the borough by reason of the extension is shewn in the following statement which has been extracted from the Census statistics of 1931 :—

	Males	Females	Total
Rotherham C.B. 1931 Census	35126	34565	69691
Rotherham C.B. as constituted 1st April, 1936	37881	37342	75223

The above figures however do not take into account changes which have occurred in the population since the census and the Registrar General estimates the population of the borough at mid-year 1936 as 74,965. To use this figure for statistical purposes of composite records of births, deaths, etc. (i.e., January to March of the records of the former area of the borough and from April to December of the altered area), would not be equitable, and a modified estimate of 73,330 has been supplied by the Registrar General for the calculation of such statistics and has been used for the various rates contained in this report.

The details of the arrangements of the public health services taken over from the areas added to the borough are given under the specific headings of the report.



## SOCIAL CONDITIONS.

Rotherham is an important industrial town, its chief activities being iron, steel and brass ; coal mining, by-products and coking ; glass and pottery ; brewing ; building and wood working ; and the electrical trades.

Coal mining is possibly the largest single industry of the district, and although most of this is carried on outside the actual area of the County Borough many of the work people reside in the town. Several of the local collieries have installed modern plants for coking and by-products.

Within the County Borough the largest industries are those associated with the heavy metals, particularly iron and steel, one steel making firm alone employing over 5000 men, with several thousands more employed in other works.

The metal products include iron and steel sheets, bars and rods, as well as manufactured articles such as rails, springs, wheel discs and tyres, cranks and piston rods, and a large variety of forgings and stampings.

Rolling is an important branch of the industry, and there are several steel strip works in the town, whilst other local firms are engaged in the manufacture of colliery machinery and head gear.

Brass founding is another well known industry and general engineering is also represented.

Stove grate manufacture, boiler making, refrigerating machinery, and wagon building and repairing are further local industries.

All kinds of glassware are manufactured in the district, and clay products include bricks, drain pipes and general sanitary ware.

## THE EXTENT OF UNEMPLOYMENT.

The area of the Rotherham Employment Exchange includes that of the County Borough together with the area of the Rawmarsh Urban District Council and part of the Rotherham Rural District Council. It is therefore impossible to give separate figures for the County Borough area.



The following statement gives the districts comprising the Exchange area together with the latest estimated population :—

Rotherham County Borough	...	...	...	...	...	74965
Rawmarsh Urban District	...	...	...	...	...	18926
Rotherham Rural District (parts of) :—						
Dalton	...	...	...	...	...	6020
Thrybergh	...	...	...	...	...	3955
Wickersley	...	...	...	...	...	2804
Treeton	...	...	...	...	...	2165
Whiston	...	...	...	...	...	1890
Catcliffe	...	...	...	...	...	1825
Hooton Roberts	...	...	...	...	...	200
Ulley	...	...	...	...	...	186
						19045
						112936

The proportion of the population of the County Borough to that of the Exchange area is 66.38 per cent. or 2/3rds approximately.

The following statement shows the volume of unemployment in the Rotherham Exchange area during the past five years :—

	Men	Women	Juveniles	Total	Insured population
March 1933					
Wholly unemployed	5135	521	489	6145	
Part time unemployed	5632	68	123	5823	
Total ...	10767	589	612	11968	34432
March 1934					
Wholly unemployed	4258	393	391	5042	
Part time unemployed	3363	41	73	3477	
Total ...	7621	434	464	8519	32437
March 1935					
Wholly unemployed	3874	367	513	4754	
Part time unemployed	4403	27	82	4512	
Total ...	8277	394	595	9266	35399

March 1936						
Wholly unemployed	3440	365	409	4214		
Part time unemployed	1960	34	40	2034		
Total ... ..	5400	399	449	6248	36000	

March 1937						
Wholly unemployed	2367	312	61	2740		
Part time unemployed	757	15	37	809		
Total ... ..	3124	327	98	3549	36740	

The following figures give an indication of the position of unemployment in the more important local industries :—

	Iron and steel	Coal trade	Building trade	Eng- neering	Public works
November 1935					
Wholly unemployed	550	1517	288	128	143
Temporarily suspended and short time workers	738	460	41	45	2
Totals ... ..	1288	1977	329	173	145
March 1936					
Wholly unemployed	530	1106	278	116	117
Temporarily suspended and short time workers	431	1347	32	34	1
Totals ... ..	961	2453	310	150	118
August 1936					
Wholly unemployed	483	958	209	105	120
Temporarily suspended and short time workers	421	2596	11	22	5
Totals ... ..	904	3554	220	127	125
November 1936					
Wholly unemployed	468	1187	240	99	137
Temporarily suspended and short time workers	289	1120	29	23	—
Totals ... ..	757	2307	269	122	137



The statistics relating to the Juvenile Employment Bureau, which operates in the same area as the Employment Exchange, are as follows :—

Year ended 31st December	Number of children leaving elementary schools	No. of children applying to Bureau for assistance in securing employment direct from school	Number of juveniles placed in employment by Bureau
1932 ... ..	887	573	718
1933 ... ..	993	674	799
1934 ... ..	1321	935	1122
1935 ... ..	1158	767	1149
1936 ... ..	1099	624	1541

#### PUBLIC ASSISTANCE OUTDOOR RELIEF.

The following statement gives the cost of public assistance outdoor relief granted in the County Borough during the past five financial years ending 31st March, together with the average number of cases per week receiving outdoor relief during those years :—

	1932-3	1933-4	1934-5	1935-6	1936-7
Expenditure :	£	£	£	£	£
Unemployed (able bodied) ... ..	24323	32174	36203	40769	44160
Ordinary outdoor relief ... ..	20628	22096	25315	28738	33144
Boarding out of children ... ..	1078	858	673	662	496
Administration ... ..	4643	5026	5540	5605	7102
Total expenditure ... ..	50672	60154	67731	75774	84902
Income :					
Ministry of Health—					
Widows', Orphans' and Old Age Pensions Acts, 1925-29 ... ..	251	275	192	251	231
Ministry of Labour—					
Repayment of outdoor relief ... ..	89	91	129	27	21
Other Local Authorities—					
Persons not chargeable to Rotherham	1716	2149	2178	2437	2360
Relatives in repayment of relief ... ..	421	627	940	941	1402
Repayment of relief on loan, etc. ... ..	1563	1279	1076	1258	1016
Unemployment Assistance Board ... ..	—	—	1067	12866	13438
Total income ... ..	4040	4421	5582	17780	18468
Net cost of service ... ..	46632	55733	62149	57994	66432



			s.	d.	s.	d.	s.	d.	s.	d.	s.	d.
Cost in rate poundage	...	...	...	3 1.41	3 8.10	3 8.80	3 4.83	3 6.60				
Cost per head of population	...		13	4.30	16 0.82	18 0.48	16 10.60	17 8.68				
Average number of cases for outdoor relief per week	...	...	...	1495	2072	2004	2020	2098				

## SECTION II.

---

### GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

#### PROFESSIONAL NURSING IN THE HOME.

There is no scheme provided by the Local Authority for professional nursing in the home of either (a) general cases or (b) infectious cases.

A grant, however, of £50 a year is made by the Corporation to the Rotherham District Nursing Association, who employ a staff of eight nurses. Advice of a general or special nature is also available in the case of certain infectious diseases, such as measles or pneumonia, in the course of the routine visits of the health visitors.

A grant of £10 a year is made to the Thorpe Hesley Nursing Association together with a payment of 7/6 per session for the attendance of the district nurse at the child welfare session held fortnightly at Thorpe Hesley.

As from 1st April, 1937, with the extension of the borough boundaries, the Corporation entered into an arrangement whereby the district nurse attends the child welfare sessions held weekly at Greasbrough, for which 7/6 per session is paid together with a grant of £25 per year. During the financial year ended 31st March, 1937, the sum for maternity and child welfare purposes amounted to £41 2s. 6d., which was increased to £70 by a grant from the Finance Committee of the Corporation, under the arrangement made that the Corporation's contribution should not be less than that previously received from the West Riding County Council.

#### MIDWIVES.

During the year 1936, forty-five midwives notified their intention to practise in the County Borough of Rotherham under Section 10 of the Midwives Act 1902. Of these, 27 were midwives in independent practice on the district, 13 were attached to the staff of the Alma Road Public Assistance Hospital and five were in practice at the Ferham House Municipal Maternity Home. At the end of the year 36 midwives were actively engaged in practice, 22 in independent practice on the district, nine at the Alma Road Hospital and five at Ferham House.

Two midwives who resided in the area added to the borough were accepted as resident and practising in Rotherham as from 1st April, 1936.

Three midwives, who, by the approval of the Central Midwives Board, undertake the training of pupils from the Municipal Maternity Home and the Alma Road Hospital, are paid by the Local Authority at the rate of 7/6 per case.



## NATIONAL HEALTH INSURANCE.

Apart from the fact that Insurance medical practitioners are required, under their terms of service, to furnish certain reports to the Tuberculosis Officer in connection with the treatment of tuberculosis, and, further, that the Borough Council appoint one-fifth of the members of the Insurance Committee, there are no other points in which the work of the Local Authority is administered in co-operation with the National Health Insurance service.

## LABORATORY FACILITIES.

Laboratory arrangements for the examination of clinical materials are provided by the Corporation at the laboratory attached to the Public Health Department, Town Hall, Rotherham, and the work is performed by the Medical Officer of Health and his assistants.

Particulars of the examinations during the year 1936 are given in Section VI. of this report.

Bacteriological work of a more detailed character, such as biological tests, virulence tests, Wasserman re-actions, blood cultures, etc., are sent to Sheffield University.

Chemical investigations are carried out by the Public Analyst on behalf of the Local Authority, the Senior Sanitary Inspector and the Assistant Senior Sanitary Inspector being the authorised inspectors under the Acts.

In Section V. of this report details are given of samples taken, summonses issued, convictions obtained, and the amounts of the penalties received.

## LEGISLATION IN FORCE.

The local Acts, general adoptive Acts and Byelaws relating to the public health in force in the area are as follow :—

### LOCAL ACTS.

The First Public Health Supplement Act, 1852.  
 Rotherham and Kimberworth Local Board of Health Act, 1863.  
 Rotherham and Kimberworth Local Board of Health Act, 1870.  
 Rotherham Borough Extension and Sewerage Act, 1879.  
 Rotherham Corporation Act, 1904.  
 Rotherham Corporation Act, 1911.  
 Rotherham Corporation Act, 1915.  
 Rotherham Corporation Act, 1921.  
 Rotherham Corporation Act, 1924.  
 Rotherham Corporation Act, 1928.  
 Rotherham Corporation Act, 1930.



## GENERAL ADOPTIVE ACTS.

The Infectious Diseases (Prevention) Act, 1890.

The Public Health Acts (Amendment) Act, 1890.

The Notification of Births Act, 1907.

Sections of the Public Health Acts (Amendment) Act, 1907 in force as follow :—

Part 2. (Streets and Buildings) Sections 16, 19, 22, 23, 24, 25, 32, and 33.

Part 3. (Sanitary Provisions) Sections 34, 36, 43, 48, 49, 50, and 51.

Part 4. (Infectious Diseases) Sections 52, 55, 56, 63, and 64.

Part 5. (Common Lodging Houses) Sections 69, 70, 71, 72, 73, 74, and 75.

Part 7. (Police) Section 78 (Regulations as to Street Traffic) Sections 79, 80, 85, and 86.

Part 8. (Fire Brigade) Sections 87, 88, 89, and 90.

Part 10. (Miscellaneous) Section 93.

Public Health Act, 1925, Sections 14, 15, 16, 20, 21, 24, 26, 29, 30, 31, 32, 35, 37, 45, 51, and 55

## BYE-LAWS.

Nuisances, the Keeping of Animals, and the Cleansing of Footways and Pavements, 1893.

Common Lodging Houses, 1893.

Locomotives on Highways, 1901.

Houses Let in Lodgings, 1920.

Offensive Trades, 1922.

Pleasure Fairs, 1922.

Tents, Vans, Sheds, and similar structures used for human habitation, 1923.

New Streets and Buildings, 1925.

Drainage of Existing Buildings, 1926.

Nursing Homes, 1928.

Deposit of Litter, 1932.

Public Lavatories, 1933.

Slaughterhouses, 1934.

Public Slaughterhouses, 1934.

Employment of Children, 1934.

No new local legislation was put into force during 1936, but the special local regulations in respect of the notification of measles and german measles were rescinded as from 1st December, 1936.

## HOSPITALS.

The summary of hospital accommodation as outlined in the report for 1931 remains unchanged.

The following table gives details with regard to the hospitals under the control of the Local Authority concerning the classification of the medical and nursing staffs on 31st December, 1936, and the employment of consultants.

Name.	Medical staff.	Nursing staff.	Consultants.
Oakwood Hall Sanatorium	2 1 part time	Matron ... 1 Sisters ... 5 Nurses ... 15	Orthopædic Surgeon when required.
Isolation Hospital	1 part time	Matron ... 1 Sister ... 1 Nurses ... 12	Surgeon when required
Ferham House Maternity Home	1 part time	Matron ... 1 Sisters ... 2 Nurses ... 4	Obstetric Surgeon employed
Kimberworth Hospital	1 part time	Staffed from Isolation Hospital when required	
Alma Road Hospital	3	Matron ... 1 Sisters ... 14 Nurses ... 68 Male Nurses 4	1 Consultant Surgeon. 1 Consultant Physician. 1 Consultant Ophthalmic Surgeon. 2 Consultants-Nervous. Diseases (part time). 1 Anæsthetist (part time).

In the following table is specified the bed accommodation of the various hospitals in the Borough relating to defined grouping of case material.

	General Hospital.	Alma Road Hospital.	Oakwood Hall Sanatorium	Isolation Hospital.	Ferham House Maternity Home.	Kimber- worth Hospital.
Medical .. ..	36	124	—	—	—	—
Surgical .. ..	72	43	—	—	—	—
Children .. ..	22	44	—	—	—	—
Chronic sick .. ..	—	42	—	—	—	—
Venereal .. ..	—	—	—	—	2	—
Tuberculosis .. ..	—	14	100	—	—	—
Isolation .. ..	—	11	—	64	—	12
Maternity .. ..	—	35	—	—	10	—
Mental and mental defectives .. ..	—	46	—	—	—	—
Maternity cots .. ..	—	21	—	—	—	—

It should be noted that the three hospitals, the General, Alma Road, and Oakwood, are not utilised solely by the County Borough. The General Hospital is available for the whole of the surrounding area, the proportion of the Borough patients to the whole treated being in the neighbourhood of 75 per cent. Alma Road Hospital serves the areas of the Rotherham County Borough and the Rother



Valley Public Assistance Committees with a population of approximately 193,650. Oakwood Hall Sanatorium, with its 100 beds, has 30 allocated to the West Riding County Council and occasional beds to the Dewsbury and Wakefield Corporations by agreement.

#### ALMA ROAD HOSPITAL.

The following extracts from Form Hosp. 6 of the Ministry of Health give details of the institutional treatment of the sick in Alma Road Hospital, Rotherham. This institution is maintained as a hospital under the Poor Law Act.

The total number of beds available for sick, maternity and mental cases is as follows :—

For men	...	...	...	130
For women	...	...	...	176
For children under 16 years				53 excluding cots in — maternity wards.
Total	...	...	...	359

Children over 7 years approximately are nursed in adult beds.

The following table shows the classification of the accommodation for the sick and the number of beds occupied on 31st December, 1936.

Classification of wards.	Number of wards.	BEDS							
		MEN		WOMEN		CHILDREN (under 16 years of age)		Total.	
		Pro- vided	Occu- pied	Pro- vided	Occu- pied	Pro- vided	Occu- pied	Pro- vided	Occu- pied
1 Medical ...	6	47	43	66	38	11	11	124	92
2 Surgical ...	2	16	16	16	14	11	11	43	41
3 Children (med.) ...	4	—	—	—	—	44	24	44	24
4 Chronic sick ...	5	15	15	27	27	—	—	42	42
5 Venereal ...	—	—	—	—	—	—	—	—	—
6 Tuberculosis ...	2	8	3	4	—	2	2	14	5
7 Isolation ...	2	2	1	3	2	6	6	11	9
8 Maternity ...	2	—	—	35	18	—	—	35	18
9 Mental ...	2	23	21	19	18	—	—	42	39
(a) Short stay ...	—	—	—	—	—	—	—	—	—
(b) Long stay ...	—	—	—	—	—	—	—	—	—
10 Mental defectives ...	1	—	—	—	—	4	4	4	4
11 Maternity cots ...	2	—	—	—	—	21	14	21	14
Total ...	28	111	99	170	117	99	72	380	288

The following gives the statistics of in-patients relating to the year 1936.

DISEASE GROUPS	Children (under 16 years of age).		Men and women.	
	Dis- charged	Died	Dis- charged	Died
Acute infectious disease ... ..	12	2	19	2
Influenza ... ..	1	—	2	—
Tuberculosis—				
(1) Pulmonary ... ..	3	2	25	12
(2) Non-pulmonary ... ..	8	5	4	4
Malignant disease ... ..	—	—	41	49
Rheumatism—				
(1) Acute rheumatism (rheumatic fever) together with sub-acute rheumatism and chorea ... ..	25	—	22	—
(2) Non-articular manifestations of so-called "rheum- atism" (muscular rheumatism, fibrositis, lumbago and sciatica) ... ..	4	—	13	1
(3) Chronic arthritis ... ..	2	—	12	5
Venereal disease ... ..	—	—	10	6
Puerperal pyrexia ... ..	—	—	3	1
Puerperal fever (a) Women confined in the hospital	—	—	—	—
(b) Admitted from outside ... ..	—	—	2	—
Other diseases and accidents connected with child bearing ... ..	—	—	248	1
Mental diseases (a) Senile dementia ... ..	—	—	13	6
(b) Other ... ..	6	1	89	2
Senile decay ... ..	—	—	21	3
Accidental injury and violence ... ..	36	1	100	13
<i>In respect of cases not included above :</i>				
Disease of the nervous system and sense organs ...	25	2	132	5
Disease of the respiratory system ... ..	82	26	85	56
" " circulatory " ... ..	6	5	95	118
" " digestive " ... ..	106	17	402	11
" " genito-urinary " ... ..	37	3	47	19
" " skin ... ..	57	4	34	—
Other diseases ... ..	63	9	88	7
Mothers and infants discharged from maternity wards and not included in above figures. Mothers ... ..	—	—	315	—
Infants ... ..	288	14	—	—
TOTALS ...	761	91	1822	329

#### MATERNITY AND NURSING HOMES.

As a result of the extension of the borough boundaries one registered nursing home previously registered by the West Riding County Council was added to the register as from 1st April, 1936. This home was of two beds and is registered as a maternity home only.



At the end of the year three nursing homes were registered under the provisions of the Nursing Homes Registration Act, 1927, two as maternity homes only and the other as a nursing and maternity home.

The homes have been inspected by the Maternity and Child Welfare Medical Officer, and no action has been necessary during the year.

#### MATERNAL MORTALITY.

During the year investigations have been made into all maternal deaths occurring in the Borough, and the results of each enquiry have been forwarded to the Maternal Mortality Committee, or in the case of extra urban deaths, to the responsible authority for the area in which the case was normally resident, for transmission to that Committee.

All cases of puerperal fever and puerperal pyrexia are enquired into by the Medical Officer for Maternity and Child Welfare, and particulars of these enquiries will be found in Section IX. of this report.

In the above section also will be found the report upon the midwives practising in the borough during the year, together with comments upon the administrative action taken.

#### INSTITUTIONAL PROVISION FOR UNMARRIED MOTHERS, ILLEGITIMATE INFANTS AND HOMELESS CHILDREN.

There have been no changes in the arrangements made for the above as enumerated in the report for 1931.

#### INSTITUTIONAL PROVISION FOR THE CARE OF MENTAL DEFECTIVES.

No institutional accommodation has been provided for the care of mental defectives solely for the use of local cases. Rotherham is, however, one of the constituent authorities of the South-West Yorkshire Joint Board for Mental Defectives, who control the St. Catherine's Certified Institution, Loversall, near Doncaster, and which had at the end of 1936 a total available accommodation of 300 beds.

The present allocation of these beds for Rotherham is 40, 24 male and 16 female and particulars of the occupancy of these beds are given in detail in Section X of this report. In this section also will be found full detailed particulars of the Rotherham cases in institutions, other than that provided by the joint board.

#### AMBULANCE FACILITIES.

There are two motor ambulances used for the removal of cases of infectious diseases to the Isolation Hospital.

Accidents, non-infectious cases and maternity cases are dealt with by the Police.

# CLINICS AND TREATMENT CENTRES.

The following is a list of the out-patient departments under the control of the Corporation and provided by them, together with the sessional times, and attendances for 1936 :—

Name of clinic.	Location.	Hours of attendance.	Particulars of cases attending.	Attendances 1936.
<b>CHILD WELFARE.</b>				
Ferham House.	Kimberworth Road.	2.30 to 5 p.m. Mondays and Fridays.	Infants under 1 year. Children 1 to 5 years.	Under 1 year .. 3017 1 to 5 years .. 3882 Total .. 6899
Cranworth Centre.	Cranworth Road.	2.30 to 5 p.m. Mondays, Tuesdays, Thursdays.	Infants under 1 year. Children 1 to 5 years	Under 1 year .. 3863 1 to 5 years .. 5596 Total .. 9,59
Thorpe Hesley.	Thorpe Hesley School.	Alternate Wednesdays 2.30 to 5 p.m.	Infants under 1 year. Children 1 to 5 years.	Under 1 year .. 165 1 to 5 years ... 159 Total .. 324
Greasbrough Centre.	Greasbrough Town Hall.	2.30 to 5 p.m. Wednesday.	Infants under 1 year. Children 1 to 5 years.	From 1.4.36 Under 1 year .. 327 1 to 5 years .. 452 Total .. 779
<b>ANTE-NATAL.</b>				30
Ferham House (Maternity Home cases).	Kimberworth Road.	2 to 5 p.m. Wednesday	Expectant mothers.	1252
Ferham House.	Kimberworth Road.	2.30 to 5 p.m. Tuesdays.	Expectant mothers.	515
Cranworth Centre.	Cranworth Road.	2.30 to 5 p.m. Fridays.	Expectant mothers.	205 from 6.6.36
Greasbrough Centre.	Greasbrough Town Hall.	2.30 to 5 p.m. Wednesdays.	Expectant mothers.	56 from 1.4.36
<b>POST NATAL.</b>				
Ferham House.	Kimberworth Road.	2.30 to 5 p.m. Tuesdays.	Nursing mothers.	78
Cranworth Centre.	Cranworth Road.	2.30 to 5 p.m. Fridays.	Nursing mothers.	28 from 6.6.36
Greasbrough Centre.	Greasbrough Town Hall.	2.30 to 5 p.m. Wednesdays.	Nursing mothers.	1 from 1.4.36
<b>BIRTH CONTROL.</b>				
Ferham House.	Kimberworth Road.	2.30 to 5 p.m. Tuesdays.	Expectant and nursing mothers seeking birth control advice on medical grounds.	70
Cranworth Centre.	Cranworth Road.	2.30 to 5 p.m. Fridays.	Do. Do.	53 from 6.6.36



Name of clinic.	Location.	Hours of attendance.	Particulars of cases attending.	Attendances 1936.
Greasbrough Centre.	Greasbrough Town Hall.	2.30 to 5 p.m. Wednesdays.	Expectant and nursing mothers seeking birth control advice on medical grounds.	8 from 1.4.36
SCHOOL CHILDREN. Ferham House.	Kimberworth Road.	9 a.m. to 12.30 (school children). 2 to 5.30 p.m. daily. (infant welfare).	Minor ailment and general.  School children. Infant Welfare, afternoons only. Baths, 2 afternoons per week. Minor ailment and general. School children. Infant welfare children. School children.	21,501
Cranworth Road.	Cranworth Road.	9 a.m. to 12.30 p.m.		20,264
Thorpe Hesley.	Thorpe Hesley School.	2 p.m. to 4 p.m. Thursday afternoon each week.		470
Greasbrough.	Greasbrough Town Hall.	2 p.m. to 4 p.m. Monday and Friday afternoon each week.	School children.	538
ORTHOPAEDIC. Cranworth Centre.	Cranworth Road.	2 p.m. onwards one afternoon per month.	School children. Infant welfare children.	263
REMEDIAL, Etc. Ferham House.	Kimberworth Road.	9 a.m. to 12.30 p.m. Friday morning.	School children. Infant welfare children.	203
Cranworth Centre.	Cranworth Road	9 a.m. to 12.30 p.m. every morning. except Friday.	School children. Infant welfare children.	5568
OPHTHALMIC. Ferham House.	Kimberworth Road.	9 a.m. to 12.30 p.m. every other week Friday morning.	School children. Infant welfare children.	796
Cranworth Centre.	Cranworth Road.	9 a.m. to 12.30 p.m. every other week Friday morning.	School children. Infant welfare children.	882

Name of clinic.	Location.	Hours of attendance.	Particulars of cases attending.	Attendances 1936.
DENTAL. Ferham House.	Kimberworth Road.	9 a.m. to 12.30 p.m. Tuesday, Wednesday, Friday, Saturday. 2 p.m. to 5.30 p.m. Monday, Tuesday, Wednesday, Thursday and Friday.	Elementary and secondary school children. Tuberculosis, maternity patients Wednesday afternoons. Infant welfare patients Friday afternoons.	3799
Cranworth Centre.	Cranworth Road.	9 a.m. to 12.30 p.m. Monday, Wednesday, Thursday, Friday, and Saturday. 2 to 4.30 p.m. Monday and Thursday.	Elementary and secondary school children	3193
Thorpe School.	Thorpe Hesley.	Last Friday morning in each month.	School children.	114
Greasbrough Centre.	Greasbrough Town Hall.	$\frac{1}{2}$ days when number of applications for treat- ment warrants a visit. As required.	School children.	264
Oakwood Hall Sanatorium. AURAL.	Moorgate.	Treatment sessions. 2 to 5.30 p.m. each afternoon.	Bed patients.	8
Ferham House.	Kimberworth Road.	Specialist's session Monday afternoon.	School children. Infant welfare children.	1960
do.	do.	Treatment sessions 9 a.m. to 12.30 p.m. each morning.	do.	343
Cranworth Centre.	Cranworth Road.	Specialist's session Friday morning.	School children. Infant welfare children.	2064
do.	do.		do.	730



Name of clinic.	Location.	Hours of attendance.	Particulars of cases attending.	Attendances 1936.
TUBERCULOSIS. Dispensary.	12, Frederick Street.	2 to 4 p.m. Mondays and Wednesdays. Special contact sessions fortnightly.	Accepted and observation cases for tuberculosis.	1699
VENEREAL DISEASES. Venereal Diseases Centre. LIGHT TREATMENT. Ferham House.	12, Frederick Street.  Kimberworth Road.	Daily (as clinic list).  Monday, Wednesday and Friday.	V.D. patients.  Selected cases from child welfare clinic and by appointment only. In future light treatment to be given in special medical cases only. None selected to end of year.	9188
PUBLIC ASSISTANCE. X-RAY.	Alma Road Hospital.	Mondays 2.30 p.m. and other days as required. Wednesday 2.30 p.m.	Public Assistance cases.	509
NERVOUS DISEASES. MATERNITY AND ANTE-NATAL. MASSAGE AND ELECTRICAL. SUN-RAY. GENERAL OUT- PATIENT. DISTRICT OUT- PATIENT. DENTAL CLINIC.	do. do. do. do. do. do. do.	Friday 2.0 p.m.  Daily 9.30 a.m. to 5 p.m. Daily 9.30 a.m. to 5 p.m.  Daily.  Daily. Tuesday 12.0 noon— 2.0 p.m. Tuesdays fortnightly 2.30—5.0 p.m.	do. do. do. do. do. do. do.	1297 1400 6281 1621 5952 3176 172 from September, 1936 66 from 9.6.36
CANCER CLINIC.	do.			

## LOCAL GOVERNMENT ACT, 1929.

The arrangements made under the above Act were described in the annual reports for 1930 and 1931, and no change has taken place in the arrangements beyond the extension of the services to the areas added to the borough and which are specifically dealt with under the appropriate headings in this report. There has been no further developments during the year in the arrangements of the administration of the medical services at the Alma Road Hospital.

## POOR LAW MEDICAL OUT-RELIEF.

With the exception of the Scholes and Thorpe district of the County Borough of Rotherham, the Public Assistance Committee dispensed with the services of district medical officers and commencing 1st April, 1936, the medical care of the out-door poor was placed under the control of Dr. T. V. Griffith, Medical Superintendent of the Alma Road Hospital, and an additional assistant resident medical officer was appointed for these duties ; Dr. Griffith is to be designated as a district medical officer.

The Public Assistance Committee during the year set up at the Alma Road Hospital a dental clinic for out-relief cases requiring dentures. The Committee have, for a considerable time, granted dentures to out-door relief cases where recommended by the medical officer, and were paying the sum of £5 10s. 0d. per set to local dentists. Owing to the large increase in the number of cases applying for dentures, the Committee made arrangements with a firm of dental mechanics to supply dentures. They have also arranged for the services of a dentist to attend at the Alma Road Hospital one afternoon weekly for the purpose of taking the dental impressions. The cost for dentures supplied is now 30/- as against £5 10s. 0d. previously paid.



## SECTION III.

---

### SANITARY CIRCUMSTANCES OF THE AREA.

#### WATER.

The supplies obtained during 1936 were as follows :—

From Derwent Valley Water Board (via Sheffield), 858,000 gallons per day.

From Langsett (Sheffield Corporation), 1,558,000 gallons per day.

From Rotherham Rural District Council, 50,000 gallons per day (from 1st April only).

The above includes all water supplied in bulk by Rotherham to Rawmarsh.

The supply to the added area taken over in the borough extension from Rotherham Rural District Council was taken over, and the added area previously supplied in bulk through Greasbrough is now supplied direct from Rotherham.

The emergency supply from Ulley reservoir (Rotherham Corporation) has not been called upon during the year.

The service reservoir capacity of the existing works is  $4\frac{1}{2}$  million gallons, which is equivalent to 1-4/5th days supply for the Borough and areas supplied in bulk.

The whole of the distribution in the Borough is effected by gravitation, with the following exceptions :—

Langsett water pumped from Boston reservoir to Boston overhead tank to supply high level areas in Moorgate and Broom Road.

Derwent water pumped from Kimberworth reservoir to Keppel's Column reservoir during periods of maximum "draw-off" to supply high level areas in Thorpe Hesley and Scholes.

The general condition of the town mains is being steadily improved both by the renewal of the older pipes by concrete lined pipes of increased capacity and by the continued scraping of mains.

#### TOWN AREA.

Improvement and extensions to the distribution system in the centre of the town have been executed to ensure an adequate supply to the improved areas, particularly for fire protection purposes.

## CHARACTER OF WATER.

Samples of water from the distribution system have been taken at intervals throughout the year and submitted to the Public Analyst for analysis and report. These reports have been satisfactory, and the following are typical examples:—

	Rotherham R. D. C. water drawn from tap at 238, Wickersley Road.	Langsett water drawn from tap at 1 Danum Drive.	Derwent water drawn from tap at 9 Herbert Street.
Physical characters.			
Suspended matter ... ..	None.	None.	None.
Appearance of a column 2 ft. long	Clear : Colourless.	Clear : Brownish yellow.	Clear : Yellowish.
Taste ... ..	Normal.	Normal.	Normal.
Odour ... ..	None.	None.	None.
Chemical examination.			
	Parts per 100,000.		
Total solids dried at 180°C.	7.20	7.40	7.60
Chlorides as chlorine ... ..	1.20	1.30	1.30
Equivalent to sodium chloride	1.97	2.13	2.13
Nitrites ... ..	None.	None.	None.
Nitrates as nitrogen ... ..	0.025	0.045	0.04
Poisonous metals (lead, etc.)	None.	None.	None.
Total hardness ... ..	2.9	3.3	3.3
Oxygen absorbed in 4 hours at 80°F.	0.011	0.18	0.064
Ammoniacal nitrogen ... ..	0.0004	0.0022	0.0004
Albuminoid nitrogen ... ..	0.0020	0.0072	0.0026
Ph. value ... ..	7.0	7.0	7.0
Bacteriological examination.			
B.Coli test.			
Probable number of bacteria of the coli aerogenes group present in 100 mls. of the water	None.	None.	None.
Remarks.			
	Satisfactory both chemically and bacter- iologically.	Satisfactory both chemically and bacter- iologically. Somewhat highly coloured.	Satisfactory both chemically and bacter- iologically. Slightly coloured.



## RIVERS AND STREAMS.

The supervision of rivers and streams in the County Borough rests with the West Riding Rivers Board.

## DRAINAGE AND SEWERAGE.

By means of a high level and also a low level sewer, the sewage of the greater part of Rotherham is conveyed to the Aldwarke Sewage Works on the banks of the River Don. The method of purification is by the bio-aeration process.

The village of Thorpe Hesley has a separate sewerage system and sprinkler filter, and the sewage from Blackburn is treated at the adjacent disposal works of the City of Sheffield.

Cesspools exist in the unsewered parts of the district.

The drainage and sewerage of the areas added to the district under the recent Extension Order are affected as follows:—

Greasbrough added area.

This area drains to an independent disposal works near Scrooby Lane, Greasbrough.

The area added from the Rotherham Rural District Council.

The Brinsworth and a portion of the Whiston parts of the area already drained to Aldwarke sewage works. The remaining portions of this area still drain to Rotherham Rural District Council works under arrangement with that authority.

## CLOSET ACCOMMODATION.

**PRIVIES.** During the year the extension of the borough boundaries brought an additional 117 privies into the borough. Four privies were abolished and 249 remained at the end of the year.

**PAIL CLOSETS.** There were 15 pail closets attached to dwellinghouses and also a number used in connection with temporary dwellings at the end of the year.

**WASTE WATER CLOSETS.** At the end of the year there were no waste water-closets left in the borough, the last group of 13 have been converted to waterclosets with separate flushing cisterns during the year.

**TROUGH CLOSETS.** Several trough closets were demolished in connection with slum clearance and 36 were converted to waterclosets during the year. The number remaining at 31st December, 1936, was 295.

ADDITIONAL WATERCLOSETS SO AS TO PROVIDE ONE FOR EACH HOUSE. The standard of one watercloset for every house was adopted by the Council in 1931, and progress has been made towards the attainment of that standard. Since the beginning of 1931, 1,643 additional waterclosets have been provided, 455 of which were provided during the year 1936.

DRY ASHPITS. Fourteen dry ashpits were brought into the borough by the extension of the boundary and 9 were abolished during the year. At the end of the year there remained 34 ashpits, of which 19 were in use serving 32 houses, and the remainder were either disused or used in connection with chapels or institutions.

### PUBLIC CLEANSING.

The cleansing of privies and cesspools, and the removal and disposal of house refuse, are undertaken by the Cleansing Department of the Borough Engineer.

Privies in the urban parts of the borough are emptied weekly. Those in the rural parts are emptied every seven weeks, or more frequently as required.

Pail closets, fixed ashpits and movable bins are emptied weekly. Cesspools are emptied by mechanical emptier as required.

The total amount of refuse collected and disposed of during the year ended 29th March, 1937, amounted to 20,875 tons, and represents 15.26 cwts. per 1,000 population per day.

There is an increase in tonnage of refuse collected and disposed of this year of 2,529 tons 7 cwts., which is mainly accounted for by the extended area of the borough, as follows :—

Added areas	...	...	...	...	...	1795 tons 4 cwts.
Increase in old area	...	...	...	...	...	734 tons 3 cwts.
Total increase	...	...	...	...	...	<u>2529 tons 7 cwts.</u>

The method of collection of refuse is carried out by petrol-driven rear loading vehicles.

The method of disposal is 100 per cent. controlled tipping in low-lying areas liable to flood and eventually providing playing fields, etc.



In order to facilitate the provision and maintenance of movable ashbins power was granted under the Rotherham Corporation Act, 1930, which enables the Corporation to maintain refuse bins on payment of a certain sum per annum for each premises. This power was put into operation as from the 1st April, 1931, and a charge of 1/6 per annum was made. This charge was reduced to 1/- per annum as from 1st April, 1934, for which sum the Corporation maintain and renew bins and provide the initial ashbins when fixed ashpits are abolished. During the year ended 29th March, 1937, 2,431 bins were provided or renewed, making a total of 12,942 ashbins provided since the commencement of the scheme.

There are  $92\frac{1}{2}$  miles of roads in the borough, of which approximately

$7\frac{1}{2}$  miles are cleansed daily.

$3\frac{1}{2}$  miles are cleansed three times per week.

$11\frac{1}{2}$  miles are cleansed twice per week.

70 miles are cleansed once weekly.

During the year 123,000,000 square yards of streets were cleansed, exclusive of footpaths. The total tonnage of street sweepings collected was 1,358 tons.

Also during the year 2,519 gullies were cleansed by hand and 11,168 by the suction gully emptier.

## SANITARY INSPECTION OF THE AREA.

The following is a summary of the work done by the sanitary inspectors during the year, together with a statement of the periodic sanitary work performed by the health visitors.

## MALE STAFF.

Complaints investigated .. .. .	546
Miscellaneous inspections and visits .. .. .	3833
Re-inspections of nuisances .. .. .	1828
Inspections of work in progress .. .. .	1965
Visits for sanitary alterations .. .. .	190
Interviews with owners, agents, and builders .. .. .	246
Inspections of pleasure fairs .. .. .	6
,,   ,,   tents, vans, and sheds .. .. .	81
,,   ,,   workshops and factories .. .. .	160
,,   ,,   offensive trades .. .. .	180
,,   ,,   canal boats .. .. .	2
,,   ,,   cowsheds and dairies .. .. .	192
,,   ,,   common lodging houses (including visits by Police Inspector) .. .. .	112
,,   ,,   houses let in lodgings .. .. .	29
,,   ,,   premises where made up goods are prepared .. .. .	105
Visits to slaughterhouses (excluding whole time inspector at Public Abattoir) .. .. .	619
Cases in infectious diseases investigated .. .. .	528
Visits to zymotic contacts .. .. .	4
Visits re exhumation of human remains .. .. .	1
Drains tested .. .. .	244
Number of verbal intimations .. .. .	168
,,   ,,   preliminary notices and letters .. .. .	1342
,,   ,,   statutory notices .. .. .	15
Matters referred to other Departments .. .. .	49
Samples obtained under Food and Drugs (Adulteration) Act .. .. .	203
Informal milk samples for Gerber test .. .. .	36
Milk samples for bacteriological examination .. .. .	134
Samples of fertilisers and feeding stuffs .. .. .	7
Samples of water for analysis (private supplies) .. .. .	2
Visits re Pharmacy and Poisons Act .. .. .	4
Summonses issued .. .. .	9

## FEMALE STAFF.

Inquiries in respect of various infectious diseases .. .. .	918
Visits to workshops .. .. .	10
,,   ,,   public lavatories .. .. .	48



In the following summary, details are given of the defects remedied:—

Drains relaid and new drains provided .. .. .	344
Drains repaired, trapped, etc. .. .. .	26
Soil pipes repaired .. .. .	1
Drain vent shafts repaired .. .. .	2
Drains cleansed .. .. .	208
Cesspools abolished .. .. .	1
Water closets rebuilt .. .. .	123
Water closets repaired .. .. .	582
Water closets provided for dwelling houses (additional) .. .. .	455
Water closets provided in lieu of privies .. .. .	2
Water closets cleansed .. .. .	11
Trough closets converted to water closets .. .. .	36
Waste water closets converted to water closets .. .. .	13
Privies abolished .. .. .	4
Wet ashpits abolished .. .. .	4
Dry ashpits abolished .. .. .	9
Houses provided with horizontal damp proof course .. .. .	23
Yards paved or paving repaired .. .. .	219
Walls pointed or repaired (houses) .. .. .	335
Boundary walls repaired .. .. .	32
Cellars drained .. .. .	4
Chimneys repaired .. .. .	114
Roofs repaired .. .. .	284
Eaves, gutters and fallpipes repaired .. .. .	244
Eaves, gutters and fallpipes cleansed .. .. .	20
Fallpipes disconnected from drains .. .. .	24
Wells or underground rain water tanks filled in .. .. .	3
Sinks renewed .. .. .	136
Sink waste pipes renewed or repaired .. .. .	53
House floors repaired (houses) .. .. .	130
Defective plasterwork repaired (houses) .. .. .	156
Defective ceilings repaired (houses) .. .. .	68
Ranges and fireplaces repaired (houses) .. .. .	165
Washing coppers repaired, renewed, or provided .. .. .	73
Stairs repaired (houses) .. .. .	35
Window defects remedied (houses) .. .. .	181
Door defects remedied (houses) .. .. .	135
Coal stores provided .. .. .	27
Offensive accumulations removed .. .. .	9
Nuisances from the keeping of animals abated .. .. .	2
Outbuildings repaired .. .. .	169
Outbuildings demolished .. .. .	10
Yards cleansed .. .. .	3
Dirty houses cleansed .. .. .	2
Vans removed .. .. .	6
Other matters remedied (unclassified) .. .. .	20
Nuisances connected with offensive trades remedied .. .. .	20
Defects connected with factories and workshops remedied .. .. .	25
Improvements to dairy farms .. .. .	4

## SMOKE ABATEMENT.

Under arrangement between the Councils of the City of Sheffield and the County Borough of Rotherham, all the powers relating to the abatement of nuisance from smoke conferred by the Public Health Act, 1875, and the Public Health (Smoke Abatement) Act, 1926, were translated to the Joint Smoke Abatement Committee in May, 1928. The experience of this committee satisfied them that the area covered by them should be extended, and they invited the Stocksbridge, Rawmarsh, and Greasbrough Urban District Councils, together with the Rotherham and Wortley Rural District Councils, to combine with them. All these Councils, with the exception of Wortley Rural District, accepted the invitation; the Sheffield and Rotherham Smoke Abatement Committee was abolished, and the Sheffield, Rotherham and District Smoke Abatement Committee constituted in its place. The new committee commenced its duties on May 12th, 1930, and the work is continuing in quite a satisfactory manner.

By the Doncaster, Rotherham and Wakefield Extension Order, 1936, the area of the Greasbrough Urban District Council was merged into the County Borough of Rotherham and the Rawmarsh Urban District Council as from 1st April, 1936. The actual area of this Committee therefore remains unaltered by the order.

The following shows the list of work done by the department in Rotherham during the past five years :—

	1932	1933	1934	1935	1936
No. of observations on chimneys of one hour each	733	736	911	971	1078
„ minutes during which excessive smoke was emitted ... ..	2311	2220	2763	2598	2979
Average number of minutes during which smoke was emitted ... ..	3.1	3.0	3.0	2.6	2.6
No. of intimations served ... ..	41	61	55	67	78
„ works visited ... ..	77	105	116	112	141
„ statutory notices served ... ..	6	18	14	9	14
„ complaints received and attended to ...	13	36	25	19	25
„ chimneys dismantled ... ..	2	3	4	6	11
„ chimneys raised ... ..	2	6	5	2	2
„ chimneys erected (new) ... ..	4	2	2	3	1
„ prosecutions (an abatement order and costs in each case) ... ..	—	—	—	—	—

The year under review has shown an increased trade activity in both the coal and steel industries and most of the works are now on maximum output. This increase in trade tends toward greater atmospheric pollution, but with the exception of two or three works it can be stated that the amount of smoke emitted is not in excess of normal working.



The heavier trades are showing a remarkable example of what can be done in the manufacture of steel with a minimum of smoke. The more extensive use of gas and electricity is having the desired effect, the daily consumption of gas in Rotherham being estimated at eleven million cubic feet. In addition to this a number of works are using producer gas which they manufacture on the premises.

The use of pulverised fuel is being extended, and though reports of its use for process work are satisfactory, it would appear to be premature to make any definite statements with regard to the possibility of its development on a more extensive scale.

The following is a list of installations and conversions carried out in the borough during the year :—

Number of new town's gas fired boilers for central heating	...	...	...	9
Number of new town's gas fired boilers for steam raising	...	...	...	2
Number of new town's gas fired heat treatment furnaces	...	...	...	3
Number of producer gas fired heat treatment furnaces	...	...	...	6
Number of electrically operated heat treatment furnaces	...	...	...	5
Number of central heating boilers converted to town's gas firing	...	...	...	8
Number of reheating furnaces converted to town's gas firing	...	...	...	2

The two part tariff method of gas supply for domestic use continues to advance, the number of consumers having now reached a total of 1,286, and the average per consumer is 56,000 cubic feet.

The classes for stokers and furnacemen for instructional work have been continued at the College of Technology and Art, but the number of candidates has fallen very considerably. The general increase in trade may have accounted for this, the men being kept too busy to attend, but it is thought that "saturation" point has now been reached and most of the available men have completed the course. Four candidates entered for the City and Guilds Examination for Boiler Attendants, and it is very gratifying to note that all of them passed the examination, the certificates being presented at the college by Alderman F. Harper

The following tables give in summary form the soot deposit, ultra-violet ray, and sulphur absorption records, taken at the College of Technology and at the Oakwood Hall Sanatorium during the year 1936 :—

## COLLEGE OF TECHNOLOGY.

Month	Soot deposit gauge						Sulphur di-oxide monthly estimations (lead cone)
	Rainfall m/m's.	Total solids dissolved grams.	Total insoluble matter grams.	Equivalent to tons per square mile.			Weight of SO <sub>3</sub> per 100 sq. cms. grammes.
				Total insoluble	Total soluble	Total solids	
January ...	65.0	0.327	0.409	14.51	11.60	26.12	3.79
February	52.3	0.233	0.449	15.93	8.27	24.20	4.10
March ...	51.5	0.222	0.593	21.04	7.88	28.92	3.66
April ...	27.4	0.201	0.466	16.54	7.13	23.67	3.04
May ...	12.5	0.149	0.545	19.34	5.29	24.63	2.40
June ...	97.3	0.308	0.584	20.73	10.93	31.66	2.94
July ...	94.0	0.243	1.012	35.92	8.62	44.54	2.04
August ...	41.2	0.284	0.529	18.77	10.08	28.85	2.16
September	47.5	0.259	0.733	26.01	9.19	35.21	3.08
October ...	49.4	0.348	0.593	21.05	12.35	33.40	3.50
November	65.1	0.421	0.757	26.87	14.94	41.81	5.32
December	32.6	0.300	0.442	15.68	10.65	26.33	5.24
Average ...	53.0	0.275	0.593	21.03	9.75	30.78	3.44

## OAKWOOD HALL SANATORIUM.

Soot deposit gauge.							
Month			Rainfall m/m's.	Total solids dissolved grams.	Total insoluble matter grams.	Equivalent to tons per square mile.	
						Total insoluble	Total soluble
January ...	...	...	70.3	0.193	0.306	10.26	6.47
February	...	...	48.3	0.132	0.180	6.03	4.43
March	...	...	58.3	0.195	0.246	8.25	6.54
April ...	...	...	32.4	0.158	0.245	8.21	5.30
May ...	...	...	17.1	0.156	0.064	2.14	5.23
June ...	...	...	101.0	0.276	0.507	17.00	9.25
July ...	...	...	89.7	0.198	0.259	8.68	6.63
August	...	...	48.4	0.235	0.358	12.00	7.88
September	...	...	60.0	0.210	0.353	11.84	7.04
October	...	...	61.9	0.320	0.290	9.72	10.73
November	...	...	68.6	0.235	0.343	11.50	7.88
December	...	...	41.2	0.150	0.207	6.94	5.03
Average	...	...	58.1	0.205	0.280	9.38	6.87



The following table gives the average ultra-violet daily readings per month at the two stations :—

Month	TECHNICAL COLLEGE			OAKWOOD HALL SANATORIUM		
	Quartz tube	Glass tube	Difference	Quartz tube	Glass tube	Difference
January ... ..	0.16	0.16	—	0.16	0.16	—
February ... ..	0.29	0.29	—	0.29	0.29	—
March ... ..	0.37	0.37	—	0.40	0.33	0.07
April ... ..	0.90	0.38	0.52	0.98	0.43	0.55
May ... ..	0.93	0.48	0.45	0.93	0.51	0.42
June ... ..	1.46	0.43	1.03	1.50	0.40	1.10
July ... ..	1.19	0.55	0.64	1.09	0.52	0.57
August ... ..	1.13	0.39	0.74	1.35	0.51	0.84
September ... ..	0.63	0.23	0.40	0.90	0.43	0.47
October ... ..	0.39	0.06	0.33	0.54	0.16	0.38
November ... ..	0.16	0.10	0.06	0.23	0.06	0.17
December ... ..	0.10	0.10	—	0.13	0.10	0.03
Average ... ..	0.64	0.29	0.35	0.71	0.33	0.38

According to the makers of the apparatus a quartz tube filled with acetone methylene blue solution exposed for one hour at a distance of one yard from a carbon arc lamp (25 amperes) gives a reading of one unit. Glass "check" tubes were used in conjunction with the quartz tubes and the results recorded for comparison.

### OFFENSIVE TRADES.

The following offensive trades existed in the Borough at the end of December, 1936 :—

Fish friers	...	...	...	...	...	...	90
Tripe boilers	...	...	...	...	...	...	3
Gut scrapers	...	...	...	...	...	...	1
Rag and bone dealers	...	...	...	...	...	...	3
Hide and skin dealers	...	...	...	...	...	...	2
Blood driers	...	...	...	...	...	...	1
							—
							100
							—

Six fish friers were added to the register by the extension of the borough.

One new business was established during the year and one ceased.

The following matters were dealt with and remedied :—

Fish friers' premises :

Lack of cleanliness	...	...	...	...	...	15
Unsatisfactory removal of waste	...	...	...	...	...	1
Defects in shop	...	...	...	...	...	3
						—19

Hide and skin dealers' premises :

Lack of cleanliness	...	...	...	...	...	1
						— 1
						—
						20
						==

### COMMON LODGING HOUSES.

During the year one common lodging house was closed for demolition, and one was added to the register. Two lodging houses with accommodation for 64 persons remained at the end of the year.

In all, 112 visits were paid.

### HOUSES LET IN LODGINGS.

At the end of 1936, 19 premises were registered as houses let in lodgings. The premises were maintained in a clean condition. 29 special inspections were made.

One house let in lodgings was vacated for demolition, and one was added to the register, and nine are in clearance areas which were represented during the year.

### TENTS, VANS AND SHEDS.

The Borough is not seriously troubled by a great number of tents, vans and sheds occupied as dwellings. The number at the end of the year was as follows :

Fixed huts	...	...	...	...	...	...	13
Stationary vans	...	...	...	...	...	...	9
							—
							22
							==

Occasionally vans occupied by travelling hawkers and showmen are pitched temporarily.

81 inspections were made.



# FACTORIES AND WORKSHOPS.

The number of workshops on the register at the end of 1936 is set out below :—

Workshops and workplaces (excluding bakehouses)	...	74
Bakehouses (including factory bakehouses)	... ..	27
		<hr/> 101 <hr/>

Details of inspection, including inspections made by the health visitors, are given herewith :—

Premises.	Inspections.	Written. notices.	Verbal. notices.
Factories (including factory laundries) ... ..	30	1	10
Workshops (including workshop laundries) ... ..	140	4	8
Workplaces (other than outworkers' premises)...	—	—	—
	<hr/> 170 <hr/>	<hr/> 5 <hr/>	<hr/> 18 <hr/>

In the following statement, particulars of the defects found are given :—

Particulars.	Number of defects	
	Found.	Remedied.
Want of cleanliness ... ..	12	12
Want of ventilation ... ..	2	2
Defective sanitary accommodation ... ..	4	3
Insufficient sanitary accommodation ... ..	3	3
Other nuisances ... ..	5	5
	<hr/> 26 <hr/>	<hr/> 25 <hr/>

# CANAL BOATS.

The County Borough of Rotherham is not a registration authority for the purposes of the Canal Boats Acts.

Number of canal boats inspected	...	2
Number of infringements observed	...	—
Notifications of infectious disease	...	—
Cases of illness observed	...	—

Number of persons aboard :—

	Males.	Females.
Adults ... ..	2	—

On six occasions there were no boats at the wharfe when visited by the inspector. Very few boats stay at the wharfe any length of time, the majority staying a few hours to unload cargo or change horses and then immediately continuing their journey.

### DISPOSAL OF THE DEAD.

Although the most modern facilities for cremation are available at the City Road Cemetery, Sheffield, no recent increase in the disposal of the dead by this method can be shown.

I am indebted to the Superintendent, Mr. C. Cook, for the following figures relating to the past 24 years :—

Year	Number of cremations.				
1913-1924	...	...	...	...	One each year.
1925	...	...	...	...	6
1926	...	...	...	...	4
1927	...	...	...	...	5
1928	...	...	...	...	5
1929	...	...	...	...	2
1930	...	...	...	...	3
1931	...	...	...	...	2
1932	...	...	...	...	3
1933	...	...	...	...	3
1934	...	...	...	...	4
1935	...	...	...	...	4
1936	...	...	...	...	4

### SCHOOLS.

The following extracts from the annual report of the Chief School Medical Officer deal with school hygiene and co-ordination between the School Medical Department and the Public Health Department :—

#### SCHOOL HYGIENE.

The hygienic conditions of the public elementary schools in the area were fully reviewed in the annual report for 1933.

Masbrough Boys' School was closed during the year, and Greasbrough C. E. and Greasbrough Council Schools were taken over by the Authority in April consequent upon the extension of the borough boundaries.



The Director of Education has kindly supplied the following list of improvements and alterations effected during the year :—

Erection of partition in Girls' Department of South Grove Central School.

Installation of electric lighting at Doncaster Road Council School.

#### CO-ORDINATION.

The Medical Officer of Health was appointed Chief School Medical Officer as from 1st July, 1936, and the Senior School Medical Officer, Dr. H. M. Cohen, was appointed Deputy Medical Officer of Health on 5th August, 1936. Effective results should now obtain from this arrangement and be of great value to the two services.

A review of the services rendered by co-ordination was given fully in the annual report for 1935. A further extension of inter-availability facilities during the year was the provision of dentures under the supervision of the school dental surgeons, for expectant mothers referred from the maternity clinics.

Strict attention is paid to the instructions contained in the "Memorandum of Closure of and Exclusion from School, 1927," which was issued jointly by the Ministry of Health and the Board of Education.

#### RAG FLOCK ACT.

No flocks are manufactured in the district. One workshop where rag flocks are used in a small way was inspected during the year, and was found to be maintained in a cleanly condition. No samples were taken.

#### PUBLIC MORTUARY.

Under the arrangement made with the Public Assistance Committee during 1933, whereby the mortuary at the Alma Road Hospital was to be used as the public mortuary, 22 bodies were removed there during the year and were detained for 78 days. The post-mortem room was used on 14 occasions.

The charges paid by the Public Health Committee for the above service amounted to £34 4s. 0d.

#### SHOPS ACT, 1934.

Routine inspections under the Shops Act are carried out by the officers of the Weights and Measures Department, who report to the Public Health Department defects relating to ventilation, temperature and sanitary accommodation.

No reports were received during the year.

## RATS AND MICE (DESTRUCTION) ACT, 1919.

During the year 1936, the number of infestations and re-infestations dealt with by the officer appointed under the above-mentioned Act was 222 and 217 premises were involved; of these premises 136 were dwellinghouses, 33 shops, 17 works and warehouses and the remainder were farms, land, tips, cinemas, garages, offices, etc.; a large proportion of the dwellings infested were properties in the new suburban areas. In the case of some infestations visits are made to the premises morning and evening for many weeks, and in all 6,043 visits were made and 3,147 rats caught in addition to those not traced, which were destroyed by poison and gas. The carcasses of caught rats are buried at the Corporation tips.

The method of destruction used varies with the type of premises infested; in houses trapping is the general practice; in works, cinemas, garages, etc., poison baits are generally laid; ferrets and sulphur di-oxide gas are chiefly used at isolated premises, farm buildings, tips and the like; during the year poison baits were put down on 166 occasions and the gassing apparatus was used 86 times.

The Rat Officer's normal procedure is to commence duty at 8.30 a.m.; he visits shops and business premises until 11 to 11.30 and takes up traps and left-over baits (occupiers of sales shops do not care to have set traps about their premises during business hours).

The remainder of the morning and afternoon is given to infestations at houses, etc., then from 6.30 to 8 or 8.30 p.m. shop premises are re-visited, traps set and baits, where necessary, put down. In the case of infestations at cinemas these premises are visited twice daily—before opening and again at closing time at night.

The figure for infestations (222—rather more than 4 per week) conveys little idea of the work done, for though some infestations are cleared up in a week or ten days others necessitate daily and twice daily visits for months. One example of prolonged infestation is the case of shop premises in the centre of the town; during the period March 18th to November 9th these premises were visited twice a day on 183 days, rats were caught on 103 days—150 rats being caught in addition to those destroyed by poison.

The figure for visits (6,043) gives an average of 27 visits per infestation and 20 visits per working day.

National Rat Week was observed in Rotherham from the 2nd to the 7th November. The attention of the public was called to the campaign by poster publicity, and chemists, hardware dealers, etc., were circularised and asked to co-operate by displays of traps, poisons, etc.



This publicity resulted in the Health Department receiving in the week as many reports of infestations as had been received during the previous ten weeks ; during the period November 2nd to 7th, 211 rats were caught by the Rats and Mice Officer.

## ERADICATION OF BED BUGS.

### COUNCIL HOUSES.

Fifty-five council houses were found to be infested during the year and were disinfested.

In cases of extensive infestation the house is sealed and fumigated with cyanide.

In cases of slight infestation infested woodwork is removed and burned, the premises are sprayed with a proprietary insecticide and all defective plasterwork made good.

The disinfestation of furniture and bedding in connection with the rehousing of tenants from clearance areas and individual unfit houses is undertaken as a matter of routine. The process is carried out by a contractor with cyanide. The fumigation is not done in the house to be vacated but in furniture vans hired by the Corporation.

The vans are loaded at the house and taken to the fumigation station, where they are heated by electric radiator and sealed up.

After fumigation the furniture is delivered to the new house the same day. Beds and bedding for one night are loaned to the tenant, whose bedding and upholstered goods are retained at the fumigating station over night for further airing, when it is delivered to the owner and the loaned beds and bedding taken away to be washed and stoved for further use.

The fumigation is carried out by a contractor, who will continue to do the large batches of rehousing. Two members of the Health Department staff have been trained to do this work, and in future they will undertake small batches of rehouseings and the disinfection of council and other houses.

### NON-COUNCIL HOUSES.

Our records indicate that there appears to be some decrease in the number of infested houses in the borough.

Whereas in 1933 it was found that about 80 per cent. of 450 houses inspected for slum clearance were infested, during 1936, of 303 houses in clearance areas 80 (about 27 per cent.) were found to be infested.

Altogether 98 infested houses were observed during 1936. Of these, 82, including 2 individual unfit houses, were destined for demolition and no action towards the eradication of bugs was undertaken. The remaining 16 were disinfested.

In some cases the methods consisted of removing infested woodwork, skirtings and architraves, the use of a blow-lamp, replacing of wood by cement or plaster skirtings and general repairs to plasterwork. In other cases the premises were sprayed with a proprietary insecticide.

## SWIMMING BATHS.

### SHEFFIELD ROAD SWIMMING BATH.

The new swimming bath in Sheffield Road was officially opened by His Worship the Mayor (Alderman F. Harper, J.P.), on 30th July, 1936. The bath is 100 feet long and 40 feet wide, and the water depth varies from 3 feet 3 inches to 9 feet 3 inches. The capacity of the bath is 153,000 gallons.

The filter plant has a capacity of 50,000 gallons per hour, giving a complete turnover every 3 hours. Sterilisation of the filtered water is effected by the injection of chlorine and ammonia.

Two dressing rooms, one for each sex, are arranged on either side of the bath and have direct access from the entrance hall. Each dressing room is completely tiled and contains 100 cubicles. Adjoining each dressing room is a compartment containing warm showers and foot sprays, and bathers can only enter the bath by walking through a continuous foot bath.

### MAIN STREET SWIMMING BATH.

The size of the bath is 75 feet long and 25 feet wide, and has a capacity of 80,000 gallons of water. Two filters having a capacity of 26,000 gallons per hour give a complete turnover every 3 hours. Sterilisation is by a chlorinator.

There are 46 dressing boxes and 50 lockers, and ample provision is made for foot baths and showers.



## SHELL-FISH.

There are no shell-fish beds or layings in the district, and no action was taken under the Public Health (Shell-fish) Regulations 1934 or the Public Health (Cleansing of Shell-fish) Act 1932.

Oysters marketed in the borough are from Whitstable and Brightlingsea, and mussels are from Conway, with the exception of those supplied by two retailers, which are obtained from Fleetwood and Wells (Norfolk).

## SECTION IV.

### HOUSING.

The 15 houses mentioned in the last report in respect of which undertakings as to future user had been accepted by the Council were demolished by the owners.

Two houses in respect of which demolition orders were made during 1936 were awaiting demolition at the end of the year.

As stated in the report for 1935, 18 clearance orders made during that year were confirmed during 1936 ; 248 houses were included in the orders as confirmed. By the end of the year most of the tenants had been rehoused and many of the houses had been demolished.

Thirty-two other clearance areas, involving 303 dwellinghouses, were represented.

In the following table housing statistics for the year 1936 are given :—

#### I.—INSPECTION OF DWELLING-HOUSES DURING THE YEAR :—

(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) and number of inspections made for that purpose	... ..	2543
(2) Number of dwelling-houses (included under sub-head (i) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925, and number of inspections made for that purpose	... ..	555
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	... ..	328
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	... ..	164

#### II.—REMEDY OF DEFECTS DURING THE YEAR WITHOUT SERVICE OF FORMAL NOTICE :—

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers (including houses in respect of which informal notices were served during 1935 and the work was carried out during 1936 and also including houses with minor defects)	... ..	2044
---	--------	------

#### III.—ACTION UNDER STATUTORY POWERS DURING THE YEAR :—

##### A. Proceedings under Sections 17, 18, and 23 of the Housing Act, 1930.

(1) Number of dwelling-houses in respect of which notices were served requiring repairs	—
(2) Number of dwelling-houses which were rendered fit after service of formal notices :—	
(a) By owners	—
(b) By Local Authority in default of owners	—



## B. Proceedings under Public Health Acts.

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied .. .. .	69
(2) Number of dwelling-houses in which defects were remedied after service of formal notices	
(a) By owners .. .. .	50
(b) By Local Authority in default of owners .. .. .	—

## C. Proceedings under Sections 19 and 21 of the Housing Act, 1930.

(1) Number of dwelling-houses in respect of which demolition orders were made ..	18
(2) Number of dwelling-houses in respect of which undertakings as to future user were accepted .. .. .	4
(3) Number of dwelling-houses demolished in pursuance of demolition orders ..	16
(4) Number of dwelling-houses closed in pursuance of undertakings as to future user	4

## D. Proceedings under Section 20 of the Housing Act, 1930.

(1) Number of separate tenements or underground rooms in respect of which closing orders were made .. .. .	—
(2) Number of separate tenements or underground rooms in respect of which closing orders were determined, the tenement or room having been rendered fit ..	—

## IV.—HOUSING ACT 1935—OVERCROWDING :—

(a) (i) Number of dwellings overcrowded at the end of the year .. ..	464
(ii) Number of families dwelling therein .. .. .	532
(iii) Number of persons dwelling therein .. .. .	3675
(b) Number of new cases of overcrowding reported during the year .. ..	—
(c) (i) Number of cases of overcrowding relieved during the year .. ..	15
(ii) Number of persons involved in such cases .. .. .	105
(d) Particulars of any cases in which dwellinghouses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding .. .. .	—
(e) Any other particulars with respect to overcrowding conditions upon which the Medical Officer of Health may consider it desirable to report :—	

Very little can be done in the way of abating overcrowding until additional houses are available. During the past year it was possible to relieve only a few gross cases by re-lets of council houses.

No new cases of overcrowding were reported ; the cases which were reported were found to be included in the overcrowding survey which had been undertaken in the early part of the year.

By the end of the year the Council had arranged for the erection of 212 houses for the abatement of overcrowding, and at the time of writing several of the houses are nearing completion. It is anticipated that good progress will be made during the present year towards the abatement of the overcrowding evil so far as the supply of new houses will allow.



## SECTION V.

## INSPECTION AND SUPERVISION OF FOOD.

## MILK.

The following statement shows the number of milk producers, dealers and registered premises and also the number of dealers distributing locally whose premises are not locally situated :—

Registered cowkeepers (producers within the County Borough)	...	37
Retail milk purveyors :		
Cowkeepers within the County Borough retailing their own supplies	... ..	29
Retail roundsmen with premises within the County Borough	...	22
Retailers (not roundsmen) from shops within the County Borough		19
Retail roundsmen from premises outside the County Borough	...	53
Registered dairies :		
Where cows are kept	... ..	37
Where milk is sold or stored	... ..	34
Where receptacles are stored	... ..	5

By the extension of the County Borough boundaries there have been added to the register thirteen cowkeepers and one retail roundsman.

Eight licences have been issued during the year under the provisions of the Milk (Special Designations) Order—two in connection with the sale of "tuberculin tested" milk, four for the sale of "accredited," one for the sale of "pasteurised" and one in respect of premises at which the pasteurising process is carried on ; there are no licensed producers of designated milk in the County Borough.

Fifteen samples of designated milk were obtained for bacteriological examination.

	Conforming to standard.	Not conforming to standard.	Total.
Tuberculin tested ...	4	1	5
Accredited ... ..	3	—	3
Pasteurised ... ..	7	—	7
	—	—	—
	14	1	15
	==	==	==

Improvements were effected at four dairy farms ; at one, additional accommodation for seven cows was provided, and the works carried out at the other three included new cowshed floors, cement rendering of internal surfaces of cowshed walls, and re-roofing.

There are 37 dairy herds in the County Borough with approximately 458 cows ; all herds are clinically examined by the Veterinary Officer four times yearly, and during last year 151 visits were made to farms and 1,893 clinical examinations were made. In connection with these examinations the following microscopical and biological tests were done for the presence of tubercle bacilli.

	Positive		Negative	Total.
	T.B.	T.B.		
Milk samples microscopically examined (individual cows) ... ..	5	36		41
Milk samples biologically examined (individual cows) ... ..	4	3		7
Milk samples biologically examined (groups) ... ..	—	9		9
Sputum and other specimens micro- scopically examined ... ..	1	10		11
	10	58		68
	—	—		—

Under the provisions of the Tuberculosis Order, 1925, fourteen cows were slaughtered ; proceedings were taken against an owner under Article 2 of the Order for failing to give information that a cow in his possession was suffering from indurated udder ; he was convicted and fined five pounds and costs.

The cases dealt with under the Order are summarised in the following table :

Description of animals.	Number of animals examined.	Form of disease reported by Veterinary Officer.				Conclusions from post mortem examination.				Compensation paid.				Salvage received.
		Tuberculosis of the udder.	Giving tuberculous milk.	Tuberculous emaciation.	Chronic cough, etc.	Tuberculosis of the udder.	Giving tuberculous milk & showing lesions of T.B.	Tuberculous emaciation.	Otherwise affected by T.B.	Non-advanced cases (Three-fourths market value).		Advanced cases. (One-fourth market value or 30/-).		
										No.	Amount	No.	Amount	
Cows in milk	174	6	1	5	—	6	1	5	—	3	£29 5 0	9	£20 5 0	£17 3 7
Other cows or heifers	16	—	—	2	—	—	—	2	—	—	—	2	£3 0 0	£1 0 0
Other bovine animals	6	—	—	—	—	—	—	—	—	—	—	—	—	—
	196	6	1	7	—	6	1	7	—	3	£29 5 0	11	£23 5 0	£18 3 7

Average compensation paid per animal—£3 15s. 0d.

Average salvage received per animal—£1 6s. 8d.



Thirty-eight samples of milk (including seven pasteurised but no other designated milk) were examined for the presence of bacillus coli; where this organism is not found in 0.01 m.l. of milk in two tubes of three examined, the milk is regarded as satisfactory in respect of this test; it will be seen from the summary below that 55 per cent. of the samples proved satisfactory by the test.

	Percentages.	
	0.1 m.l.	0.01 m.l.
B. coli absent in all tubes ... ..	31.6	42.1
B. coli absent in two tubes ... ..	13.1	13.1
B. coli absent in one tube ... ..	5.3	18.4
B. coli present in all tubes ... ..	50.0	26.4

In connection with the routine sampling and examination of milk supplies for the presence of tuberculous infection 107 samples of raw milk were sent to the Bacteriological Department of Sheffield University for the biological test; this total was made up of 96 mixed milks, three bulked, five tuberculin tested and three accredited; six samples (5.60 per cent.) were found to contain tubercle bacilli; this is the lowest percentage recorded since regular sampling was commenced in 1931—the average figure for the five years 1931–1935 being 14.98 per cent.

Two of the infected samples were from locally produced supplies, and in both cases the cows secreting tubercle bacilli were traced and slaughtered; the other four tubercular samples were derived from supplies produced outside the County Borough, and in two cases the responsible local authorities found and slaughtered the infecting animals.

In two instances notices under Section 4 of the Milk and Dairies (Consolidation) Act, 1915, were received by us from other local authorities that supplies originating in our area had been found to contain tubercle bacilli; a resume of the investigations in connection with these two cases is given below:—

#### FARM 1.

The herd consisted of eleven cows; two specimens of milk and two of sputum were taken from individual cows and examined microscopically but no tubercle bacilli were found; two group samples and one from an individual cow were then taken, examined biologically and tubercle bacilli were found in the individual sample; the cow was slaughtered.

#### FARM 2.

There were twenty-eight cows in this herd at the time of examination and three specimens of milk and two of sputum from individual cows showed no tubercle





In addition to the written notices of regular slaughter at fixed times on fixed days at the private slaughter-houses, the following notices were received in compliance with the Public Health (Meat) Regulations, 1924 :—

Nature of notices.	Notices received.	Number visited.
<b>A. Private premises (other than private slaughter-houses) :—</b>		
Notices of intention to slaughter ... ..	16	16
Emergency slaughter in the Borough ... ..	4	4
<b>B. Private slaughter-houses :—</b>		
Notices of intention to slaughter ... ..	17	17
Emergency slaughter ... ..	1	1
Notices to examine meat where there is evidence of disease ...	1	1
	39	39

The following summary gives details of the meat seized or surrendered and destroyed during 1936 as unfit for human food, from all causes (including tuberculosis) :—

Number of	Beasts.	Calves.	Sheep and lambs.	Pigs.	Total.
Carcases (including offal)	91	18	58	48	215
Portions of carcases ..	13	—	1	1	15
Heads(including tongues)	814	—	—	556	1370
Heads (without tongues)	15	—	—	—	15
Tongues only .. ..	5	—	—	—	5
Lungs .. ..	1590	—	14	620	2224
Livers .. ..	1148	—	277	495	1920
Tripes or stomachs ..	422	—	—	—	422
Spleens .. ..	369	—	—	65	434
Kidneys .. ..	188	—	—	—	188
Hearts .. ..	9	—	—	23	32
Udders .. ..	1093	—	—	—	1093
Fats (mesenteries, etc.)	486	—	—	1542	2028

The total weight of fresh meat and offals condemned was allocated as follows :

	Tons.	Cwts.	Stones
Public Slaughter-house ... ..	77	5	3
Private slaughter-houses ... ..	1	9	2½
Other private premises ... ..	—	1	3
	78	16	0½

Tuberculosis was the reason for the condemnation of 76.6 per cent. of the total weight of fresh meat and offals condemned during the year.

Particulars of the tuberculous meat seized or surrendered and destroyed during 1936 are given herewith:—

Number of	Beasts.	Calves	Pigs.	Total.
Carcases (including offal) ... ..	70	4	14	88
Portions of carcases (quarters) ...	10	—	—	10
Heads (including tongues) ... ..	797	—	556	1353
Lungs ... ..	1544	—	517	2061
Livers ... ..	647	—	452	1099
Tripes or stomachs ... ..	418	—	—	418
Spleens ... ..	368	—	64	432
Kidneys ... ..	73	—	—	73
Hearts ... ..	8	—	—	8
Udders ... ..	39	—	—	39
Mesenteries ... ..	484	—	1539	2023

Under the Tuberculosis Order 9 cows were taken to the Public Slaughterhouse for slaughter, 7 from the County Borough area and 2 from the West Riding, and the parts condemned are included in the foregoing table.

The following table gives an analysis of whole carcasses condemned on account of disease or condition other than tuberculosis:—

Condition or disease which rendered the meat unfit for human food.	Beasts.	Calves.	Sheep.	Pigs.	Total.
Calf diphtheria .. ..	—	1	—	—	1
Hydraemia .. ..	5	2	53	4	64
Immature .. ..	—	11	—	—	11
Jaundice .. ..	—	—	1	5	6
Johne's disease and hydraemia ..	6	—	—	—	6
Killed in extremis .. ..	4	—	4	3	11
Malignant tumour .. ..	1	—	—	—	1
Parturient fever .. ..	1	—	—	—	1
Rachitis .. ..	—	—	—	3	3
Septicaemia .. ..	2	—	—	—	2
Swine erysipelas .. ..	—	—	—	1	1
Swine fever .. ..	—	—	—	18	18
Traumatic peritonitis .. ..	1	—	—	—	1
Uraemia .. ..	1	—	—	—	1
	21	14	58	34	127



The practice of marking meat, in accordance with Part III of the Public Health (Meat) Regulations, was continued throughout the year. The stamp, which identifies the inspector using it, indicates that the carcass has been inspected and passed as fit for human food, and is used only in connection with carcasses dressed at the Public Slaughter-house. During 1936 the following carcasses were stamped:—beasts 1, sheep 11, and pigs 1692.

The Borough continues to be free from butcher meat stalls, except meat hawkers' vehicles. None of these was found to contravene the Public Health (Meat) Regulations.

#### OTHER FOODS.

The following table gives details of food other than fresh killed meat condemned during the year:—

	Number.	Weight in lbs.
Imported meat ... ..	—	48
Imported offals ... ..	—	10
Imported rabbits (case) ... ..	1	—
Fish ... ..	—	35
Prawns (tin) ... ..	1	—
Tinned goods (tins) ... ..	115	—

#### FOOD AND DRUGS (ADULTERATION) ACT.

Two hundred and three samples of foods and drugs were purchased and submitted to the Public Analyst for examination; twenty-nine samples (14.28 per cent.) were not reported genuine; of these twenty-nine samples two were butter, two jam and the remainder were milk.

A sample of butter which had been purchased informally was found to contain 20 per cent. of water—the limit prescribed by the Sale of Butter Regulations, 1902, being 16 per cent.; a formal purchase, from the same source was made, and as this sample contained 20.7 per cent. of water proceedings were taken against the vendors, who successfully pleaded the warranty defence; a summons was issued against the warrantors for giving a false warranty, and they were fined five pound and costs.

An informal sample of damson jam was deficient in sugar and other soluble solids, but a second sample of the same brand proved genuine; in the case of a sample of black currant jam, found deficient in fruit content, a second sample by the same maker was not procurable.

Twenty-five samples of milk—relating to eleven supplies—failed to conform to the requirements of the Sale of Milk Regulations. Investigation of the circumstances of production, handling and distribution, of the eleven supplies adversely

reported on, showed that the deficiencies of milk-fat or solids not fat were attributable to the following causes :—

(1) Unequal intervals between milking times—a too long night interval was responsible for milk-fat deficiencies in morning milk in three supplies ; (2) failure of the retailer to keep the milk mixed whilst making “ round ” deliveries—the cream rises during the progress of the “ round ” and if drawings are made from the bottom tap of the churn without occasional plungings there are stages of the “ round ” when drawings are likely to show a low fat content ; this cause was responsible for deficiencies in three supplies ; (3) faulty bottling practice at the farm was responsible for a milk fat deficiency in one supply—this was a case where the bottle filler was allowed to overtake the milkers with the result that yields of single cows or even part yields were being bottled ; (4) in one case an excessive production ration was probably responsible for the depression of the milk-fat percentage ; (5) the deficiencies found in another supply, which was derived from only two cows, appeared to be due to “ individuality ”—some characteristic of the individual cows ; (6) in two supplies the deficiencies arose from deliberate watering of the milk.

Associated with milk production there are in some cases circumstances which make it difficult to ensure approximately equal intervals between milking times but, even so, it is doubtful if the influence which hours of milking have on the milk-fat percentage of the supply is fully appreciated by all producers ; it is certain that a closer attention to the matter of intervals between milkings and adequate mixing of herd yields by producers, together with care on the part of the retailers of unbottled milk to ensure that a uniform consistency of the supply is maintained in the course of their deliveries, would result in a very considerable decrease of samples not in conformity with the requirements of the Sale of Milk Regulations.

It will be seen in the tabular statement which follows that prosecutions under the Food and Drugs (Adulteration) Act were instituted in connection with six milk samples : in respect of two samples there were convictions with penalties ; summonses relating to two other samples were dismissed—one of them on payment of costs ; proceedings relating to the remaining two samples, both heavily watered and purchased from one vendor, are not yet determined—the vendor absconded and has not yet been arrested.

In addition to the one hundred and twenty-four milk samples submitted to the Public Analyst, thirty-six were obtained and examined by the Gerber test in the Public Health Department's laboratory.

#### PUBLIC HEALTH (PRESERVATIVES, ETC., IN FOOD) REGULATIONS.

A sample of jam contained fourteen parts per million of sulphur dioxide—the above mentioned regulations permit of the presence of forty parts per million.



Details of all samples examined by the Public Analyst are given in the following tabulated statement :—

Total No.	Nature of sample.	Genuine		Not reported as genuine.		Formal samples						
		Formal.	Informal.	Formal.	Informal.	Prosecutions instituted.	Dismissed	Adjourned	Convictions.	Penalties including costs.		
3	Amm. tinct. of quinine	—	3	—	—	—	—	—	—	—	—	—
3	Baking powder ..	—	3	—	—	—	—	—	—	—	—	—
14	Butter .. ..	—	12	1	1	1	1	—	—	—	—	—
2	Camphorated oil ..	—	2	—	—	—	—	—	—	—	—	—
2	Castor oil .. ..	—	2	—	—	—	—	—	—	—	—	—
3	Coffee .. ..	—	3	—	—	—	—	—	—	—	—	—
3	Condensed milk ..	—	3	—	—	—	—	—	—	—	—	—
5	Cream .. ..	—	5	—	—	—	—	—	—	—	—	—
3	Flour (self-raising) ..	—	3	—	—	—	—	—	—	—	—	—
3	Ground almonds ..	—	3	—	—	—	—	—	—	—	—	—
3	Ground ginger ..	—	3	—	—	—	—	—	—	—	—	—
3	Honey .. ..	—	3	—	—	—	—	—	—	—	—	—
4	Jams .. ..	—	2	—	2	—	—	—	—	—	—	—
4	Lard .. ..	—	4	—	—	—	—	—	—	—	—	—
3	Liquorice powder ..	—	3	—	—	—	—	—	—	—	—	—
5	Margarine .. ..	—	5	—	—	—	—	—	—	—	—	—
124	Milk .. ..	75	24	16	9	6	2	2	2	£6	12	—
5	Peas (tinned) ..	—	5	—	—	—	—	—	—	—	—	—
3	Pepper .. ..	—	3	—	—	—	—	—	—	—	—	—
1	Skimmed milk ..	1	—	—	—	—	—	—	—	—	—	—
4	Sponge buns ..	—	4	—	—	—	—	—	—	—	—	—
1	Tincture of iodine ..	—	1	—	—	—	—	—	—	—	—	—
2	Zinc ointment ..	—	2	—	—	—	—	—	—	—	—	—
203		76	98	17	12	7	3	2	2	£6	12	0

Particulars of the samples not reported genuine and action taken are given below :

Identi- fication mark.	Article.	Result of analysis.			Remarks and action taken.
		Milk fat. Percentages.	Solids not fat. Percentages.	Freezing pt (Hortvet) deg. Cent.	
1691	Milk	2.96	9.02		The slight deficiency of milk-fat was probably due to failure to keep milk mixed during progress of of "round"; a further sample taken at the place of delivery to this retailer and from a corresponding milking of the cows showed milk-fat 3.55 per cent.; warning letter to retailer.
1702	Milk	2.60	8.55		13.3 per cent. deficient in milk-fat; a producer-retailer's sample; morning milk; herd consisted of only two cows; though an "appeal-to-the-cows" sample showed morning milk to contain 3.00 per cent. of milk-fat a similar sampling of evening milk showed only 2.86 per cent.; letter of advice to producer.
1704	Milk	2.60	9.15		13.3 per cent. deficient in milk-fat; an informal sample of bottled morning milk taken from producer; 38 cows in herd; see also No. 1717.
1707	Milk	2.86	8.60		4.6 per cent. deficient in milk-fat; an "appeal-to-the-cows" sample relating to No. 1702; evening milk; two cows in herd; milking times 7 a.m. and 6 p.m.
1717	Milk	2.64	9.09		12 per cent. deficient in milk-fat; an informal sample of bottled morning milk taken from producer; 38 cows in herd; see Nos. 1740, 1742.
1730	Milk	2.71	8.80		9.6 per cent. deficient in milk-fat; morning milk; See No. 1736.
1736	Milk	2.50	8.65		16.6 per cent. deficient in milk-fat; "appeal-to-cows" sample in connection with No. 1730; from mixed yields of 4 cows; morning milk; milking hours 3 p.m. and 6.30 a.m.; producer requested to more nearly approximate intervals between milking times; see also No. 1750.
1740	Milk	2.88	9.03		These samples relate to Nos. 1704 and 1717 and were two of a series of six taken during bottling run of morning milk; milking hours 5 p.m. and 6.30 a.m.; milking hours were not altered but production ration was decreased (and weighed) and five samples taken under like circumstances eleven days later all showed more than 3 per cent. of milk-fat.
1742	Milk	2.81	8.99		



Identification mark.	Article.	Result of analysis.			Remarks and action taken.
		Milk fat. Percentages.	Solids not fat.	Freezing pt (Hortvet) deg. Cent.	
1750	Milk	2.79	8.82		7 per cent. deficient in milk-fat; relates to No. 1736; morning milk; hours of milking said to have been altered; a further sample taken a week later than this, when milking times were checked by attendance of Inspector, showed 3.15 per cent. of milk-fat.
1755	Milk	3.27	7.70	-0.456	Contained 9.4 per cent. added water. Summons issued; vendor convicted and fined £2 and 13/- costs.
1762	Milk	2.58	8.91		14 per cent. deficient in milk-fat; deficiency due to milking hours and failure to mix milk when "making up" for despatch on round; see Nos. 1769, 1770.
1769	Milk	2.87	9.04		Relates to No. 1762; 4.3 per cent. deficient in milk-fat; "appeal-to-cows" sample; morning milk; 13 cows in good condition.
1770	Milk	2.69	9.05		Relates to No. 1762; deficient in milk-fat 10.3 per cent. Same milk from same churn as No. 1769. One gallon was drawn from bottom tap of churn after milk had stood undisturbed for 1½ hours and this sample was taken from the one gallon; this method of "making up" for the round occurred in the quantity from which No. 1762 was purchased. Producer improved his milking hours and methods and a subsequent sample of morning milk showed 3.4 per cent. milk-fat.
1771	Milk	2.72	8.84		9.3 per cent. deficient in milk-fat; an informal sample; a later sample showed 3.0 per cent. milk-fat.
1832	Milk	2.79	8.87		7.0 per cent. deficient in milk-fat; summons issued; vendor fined £2 and 17/- costs.
1852	Milk	2.64	8.97		12 per cent. deficient in milk-fat; see No. 1855.
1855	Milk	2.82	8.76		6 per cent. deficient in milk-fat; relates to No. 1852; "appeal-to-cows" sample; morning milk; 7 cows; milking hours 7 a.m. and 5 p.m.; milking hours altered to 6.40 a.m. and 6 p.m. and morning milk then showed 3.1 per cent. milk-fat.
1865	Milk	2.73	8.82		9 per cent. deficient in milk-fat; deficiency due to failure to secure a mixture of an adequate number of yields before bottling; letter to producer-retailer; for later samples all showed 3.0 per cent. and over of milk-fat.

Identification mark.	Article.	Result of analysis.			Remarks and action taken.
		Milk fat. Percentages.	Solids not fat.	Freezing pt (Hortvet) deg. Cent.	
1867	Milk	3.45	8.39		Slightly deficient in solids not fat; see No. 1870. Taken from same retailer as No. 1867—three days later; deficient in milk-fat 15 per cent. and slightly deficient in solids not fat but the freezing point was normal. Summons issued against retailer; case dismissed on payment of costs (22/-)
1870	Milk	2.55	8.36	-0.530	
1871	Milk	3.35	7.74	-0.467	Contained 8.9 per cent. of added water; purchased 1/12/36 from a retailer; see samples Nos. 1877 and 1878.
1877	Milk	2.61	5.68	-0.348	Contained 33.1 per cent. of added water.
1878	Milk	2.57	5.56	-0.338	Contained 34.5 per cent. of added water. These two samples were taken on 2/12/36 from milk in course of delivery to the retailer of No. 1871. The vendor of Nos. 1877 and 1878 absconded on 4/12/36; two summonses were issued against him; he did not appear on the date the summonses were made returnable and a warrant for his arrest was issued.
515 W.R.C. C.	Milk	3.84	7.76	-0.472	Contained 8.7 per cent. of added water; taken on 3/12/36 at producer's premises from milk in course of delivery to the vendor of samples Nos. 1877 and 1878. Summons issued against producer of No. 515; case dismissed.
1706	Butter	contained 20 per cent of water.			An informal sample; see formal sample No. 1709.
1709	Butter	contained 20.7 per cent of water.			Summons issued; case dismissed on proof of warranty.
1790	Damson jam	Deficient in sugar and other soluble solids.			An informal sample; a subsequent sample proved genuine.
1791	Black currant jam	Deficient in fruit content.			An informal sample; this maker's jam not on sale when purchase of a second sample was attempted.



The quarterly average composition of the samples of milk was as follows :—

Period.	Percentages.		No. of samples.
	Milk-fat.	Solids not fat.	
1st quarter ... ..	3.32	8.95	51
2nd quarter ... ..	3.51	8.84	21
3rd quarter ... ..	3.50	8.90	29
4th quarter ... ..	3.57	8.47	23
The whole year ... ..	3.47	8.79	124

The low figure for solids not fat recorded for the fourth quarter is due to the watering of four samples.

The total number of milk samples procured was	...	...	...	...	124
The highest percentage of milk fat was	...	...	...	...	5.35
Associated with solids not fat (Dec.)	...	...	...	...	8.85
The highest percentage of solids not fat was	...	...	...	...	9.47
Associated with milk fat (September)	...	...	...	...	3.25
The number of samples containing 4 per cent. or over of milk fat was	...	...	...	...	12
The number of samples containing 9 per cent. or over of solids not fat was	...	...	...	...	43
And the number of samples containing over 4 per cent. milk fat and 9 per cent. solids not fat was	...	...	...	...	4

### PHARMACY AND POISONS ACT.

The main restrictions imposed by this Act relating to the sale, distribution, etc., of poisons, and the rules made under the Act, became operative on May 1st.

By the provisions of the Act retail vendors of poisons are divided into classes :

(a) " authorised sellers of persons," i.e. registered pharmacists ; (b) " listed sellers of Part 2 poisons," i.e. persons, other than pharmacists, who (not being " authorised sellers of poisons ") are registered with the local authority for the sale of poisons in Part 2 of the Poisons List.

Section 21 of the Act provides that the local authority shall keep a list of persons who are entitled to sell poisons included in Part 2 of the Poisons List and in connection with this requirement fifty-two premises have been registered.

## SECTION VI.

## INFECTIOUS DISEASES GENERALLY.

The prevalence of the infectious diseases notifiable in the County Borough is shown in the following table:—

Disease.	1932	1933	1934	1935	1936
Small-pox ... ..	—	—	—	—	—
Cholera ... ..	—	—	—	—	—
Plague ... ..	—	—	—	—	—
Diphtheria ... ..	104	57	91	140	154
Erysipelas... ..	42	43	57	59	60
Scarlet fever ... ..	114	268	407	602	339
Malaria ... ..	—	—	—	—	—
Typhoid and paratyphoid fevers ... ..	15	1	—	2	3
Continued fevers ... ..	—	—	—	—	—
Puerperal fever ... ..	6	4	3	5	3
Encephalitis lethargica ... ..	1	—	—	1	1
Measles and German measles ... ..	1464	36	1667	484	2288
Ophthalmia neonatorum ... ..	6	3	3	5	7
Pulmonary tuberculosis ... ..	100	126	84	79	59
Other forms of tuberculosis ... ..	40	29	27	21	21
Cerebro-spinal meningitis ... ..	13	3	2	1	—
Pneumonia ... ..	155	155	117	103	129
Chicken-pox ... ..	444	300	582	323	223
Dysentery... ..	—	—	—	—	1
Acute anterior poliomyelitis ... ..	—	—	—	—	2
Acute polio-encephalitis... ..	—	—	—	—	—
Puerperal pyrexia ... ..	10	16	11	6	9
Femphigus neonatorum ... ..	1	—	—	—	3
Totals ... ..	2515	1041	3051	1831	3302

Measles, german measles and chicken-pox ceased to be notifiable diseases in the area as from 1st December, 1936.

In the subsequent table particulars are given of the incidence of the notifiable infectious diseases during the year, showing age grouping, ward distribution, cases removed to hospital, and total deaths.



Notifiable disease.	No. of cases notified											Total cases notified in each ward of the Borough.									Total cases removed to hospital.	Total deaths.				
	At ages—years.											Total cases notified in each ward of the Borough.														
	At all ages.	Under 1 year.	1 to 2 years.	2 to 3 years.	3 to 4 years.	4 to 5 years.	5 to 10 years.	10 to 15 years.	15 to 20 years.	20 to 35 years.	35 to 45 years.	45 to 65 years.	65 years and over.	Clifton.	East.	Greasbrough.	Kimberworth.	Masbro'.	North.	St. Ann's.			South.	Thornhill.	West.	
Small pox ..	154	—	1	8	9	7	74	24	16	10	1	—	—	41	18	5	17	9	8	27	4	17	8	—	151	8
Diphtheria ..	60	4	1	—	—	—	1	2	3	8	8	24	9	10	11	—	5	2	10	9	2	3	8	—	4	4
Erysipelas ..	339	2	8	21	24	25	154	59	13	23	9	1	—	76	57	8	28	23	48	36	31	12	20	—	276	3
Scarlet fever ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cerebro-spinal fever ..	3	—	—	—	—	—	—	1	1	1	1	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—
Typhoid and para-typhoid fevers ..	9	—	—	—	—	—	—	—	1	8	—	—	—	—	3	—	1	—	—	—	1	2	2	—	2	—
Puerperal pyrexia ..	3	—	—	—	—	—	—	—	—	3	—	—	—	2	1	—	—	—	—	—	—	—	—	—	3	1
Puerperal fever ..	1	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—
Encephalitis lethargica ..	2	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—
Acute polio-myelitis ..	2288	103	153	210	238	264	1094	187	17	13	8	1	—	296	409	23	309	315	265	194	87	266	124	—	6	5
Measles and German measles ..	7	7	—	—	—	—	—	—	—	—	—	—	—	—	1	1	2	2	—	1	—	—	—	—	—	—
Ophthalmia neonatorum ..	129	3	4	2	2	3	14	9	10	23	10	31	18	10	14	6	17	14	21	8	—	19	20	—	—	67
Pneumonia ..	223	14	20	16	23	21	116	10	3	—	—	—	—	14	72	—	25	9	29	37	9	11	17	—	—	—
Chicken-pox ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Malaria ..	3	3	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1	1	—	2	—
Pemphigus neonatorum ..	1	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—	—	—	—	1	—
Dysentery ..	32	—	—	1	—	—	2	—	3	12	5	7	2	2	5	—	7	8	1	3	—	1	5	—	34	22
Pulmonary tuberculosis : Males	27	—	—	—	—	1	2	3	4	10	2	5	—	5	1	1	2	3	2	2	2	4	5	—	24	12
Other forms of tuberculosis : Males	7	—	—	1	—	—	2	1	1	2	—	—	—	—	3	—	1	—	2	—	—	1	—	—	8	3
Females	14	—	—	—	—	—	5	2	—	2	1	4	—	—	2	—	1	1	2	2	3	—	3	—	5	7
Total	3302	136	187	260	297	321	1464	298	72	117	44	77	29	458	598	44	416	386	388	321	139	338	214	—	523	132

## ISOLATION HOSPITAL.

The following table shows the numbers of cases of the principal notifiable diseases admitted during the year.

Disease.	Cases notified during 1936	In hospital 31st Dec. 1935	Admissions 1936	Discharges 1936	Deaths 1936	Remaining in hospital 31st Dec. 1936	Total patient days.
Scarlet fever ...	339	40	278	291	3	24	9643
Diphtheria ...	154	12	155	128	9	30	6634
Typhoid fevers ...	3	1	4	4	—	1	147
Cerebro-spinal meningitis ...	—	—	—	—	—	—	—
Other diseases ...	—	1	53	47	4	3	976
Total ...	—	54	490	470	16	58	17400

The average number of patients daily was 47.5

Comparative annual case figures are given in the following summary:—

Year.	Scarlet fever.	Diphtheria.	Typhoid fevers.	Other diseases.	Total.
1932 ...	98	100	21	34	253
1933 ...	221	60	3	26	310
1934 ...	365	88	—	29	482
1935 ...	495	141	2	33	671
1936 ...	278	155	4	53	490
Total ...	1457	544	30	175	2206

SCARLET FEVER. Of the 339 notified cases of scarlet fever 276 were treated in hospital, leaving 63 home cases. One case was admitted from the West Riding area, and one case was re-admitted for further treatment.

Generally the cases met with were very mild and complications as a rule were slight, the commonest being rhinorrhoea, otorrhoea, and adenitis. Three cases died, one of which was due to the septic form of scarlet fever, the others being due to cardiac failure.

DIPHTHERIA. Of the 154 cases notified, 151 were treated in hospital, leaving only three cases treated at home. In addition, there were treated in hospital one extra urban case from the West Riding area and three cases occurring in the Isolation Hospital Staff. The Isolation Hospital cases occurred in two nurses and a



maid. The nurses had only been employed at the hospital for a very short time, and Schick and Dick tests had not been performed when they contracted the disease.

As mentioned in the preceding report the number of cases of diphtheria admitted contained many of a severe nature. By far the greater proportion of these cases were of a rapidly progressive type with a short history of illness—presumably cases of infection with the graves type of bacillus.

Nine deaths occurred from this disease, one of which was an extra urban case.

Some few severe cases are still met with, however, who have been under medical treatment for several days. The usual history in such cases is that the practitioner was called in on the second day of the disease, that a swab was taken, which was reported negative (the report being received on the third day) and no antitoxin was administered. It usually comes as a sudden shock to the practitioner concerned when he finds about the fourth or fifth day, or even later, that the case is now one of obvious and severe diphtheria. Occasionally such a case may be admitted to hospital in a moribund condition. In the four weeks preceding the writing of this report two such cases, each having a history of medical attention for five days previous to admission, were received in hospital, and, in spite of extremely large doses of antitoxin intravenously and intramuscularly, both have died within a few days of admission. A large proportion of such cases can definitely be saved by the use of antitoxin in the early stages. Antitoxin is supplied free of charge to practitioners, yet comparatively few requests are received for supplies. In doubt, cases should either be admitted to hospital or given a dose of antitoxin. Throat swabs should certainly be taken, but the practitioner must not be misled by a negative report. The onus of the diagnosis of diphtheria rests with the physician in every case, not with the laboratory, and a swab may be negative in a case of diphtheria for several reasons, a common one being that the organisms in the saliva frequently multiply on culture more rapidly than the diphtheria bacillus and have an inhibitory effect on its growth.

**TYPHOID FEVER.** Three Rotherham cases were notified, one of whom, who was infected at Bournemouth during an epidemic there, was a mild case and was treated at home. The other two cases along with two extra urban cases were treated in hospital. All five cases recovered.

**OTHER DISEASES.** 53 cases of various diseases were admitted and treated under this heading. The commonest disease was tonsillitis, usually admitted as cases of diphtheria, or of scarlet fever. Four cases of erysipelas were admitted, one of whom died, the other three making good recoveries. There were six cases of measles, two of which were admitted suffering from scarlet fever during the

incubation period of measles and were responsible for minor outbreaks of the disease in the wards to which they were admitted.

Seven cases of scabies, occurring in two families, were admitted to Kimberworth Hospital for treatment, and the bedding, etc., used by these cases was disinfested before the cases returned home. One of the cases was a severe one and required twelve days' treatment before being discharged.

**SCHICK AND DICK TESTS.** Thirteen nurses were tested as to their susceptibility to scarlet fever and diphtheria. All tests were negative, showing that all the nurses exhibited a relative immunity to these diseases.

#### KIMBERWORTH HOSPITAL.

No cases of small-pox were admitted to Kimberworth Hospital during the year.

#### PUBLIC VACCINATION.

Prior to 31st March, 1936, the County Borough was covered by two districts for the purposes of public vaccination, namely, the whole of the Rotherham North West and part of the Rotherham South East district. Each district had a vaccination officer and a public vaccinator, together with Dr. T. V. Griffiths, Medical Superintendent of the Alma Road Hospital, who acted as public vaccinator for that hospital.

As from 1st April, 1936, the following district arrangements came into operation :—

#### ROTHERHAM SOUTH-EAST.

This district included part of the County Borough and parishes in the surrounding West Riding area. Parts of these parishes were added to the County Borough area, and the effect of the order in relation to the duties of the vaccination officer of this district was purely an internal transfer of rural to borough area within his district.

The duties of public vaccinator for the County Borough portion of this district were carried out prior to the extension by Dr. H. R. Elliott, and in the parts of the parishes of Brinsworth and Whiston added to the borough by Dr. R. G. Selby, and the part of the parish of Dalton by Dr. G. H. Sedgwick. It was arranged that Dr. Elliott should act as public vaccinator for the whole of the new County Borough area within the Rotherham south-east sub-district, and that the services of Drs. Sedgwick and Selby be discontinued for the parts of their districts added to the borough.



#### ROTHERHAM NORTH-WEST.

This vaccination district was previously wholly in the County Borough, and the effect of the extension order was that one house, Westfield Farm, Barnsley Road, was added to the parish of Wentworth. Parts of the parish of Wentworth, included in the Wath Registration Sub-district, were added to the borough, and as the vaccination officer for this latter district was also the temporary vaccination officer for the Rotherham North-west District, arrangements were made for him to continue to act as vaccination officer for the added portions.

The duties of public vaccinator prior to the extension were carried out by Dr. A. Young for this district and Dr. H. M. Mills for the portions of the parish of Wentworth. Arrangements were made for Dr. Mills to cease to act as public vaccinator for the portions of his district added to the County Borough and for Dr. Young to take over these added portions into his district.

#### RAWMARSH.

The parts of the urban districts of Greasbrough and Rawmarsh added to the County Borough were in the Rawmarsh sub-district, and arrangements were made for the vaccination officer and public vaccinator to temporarily continue to act for the portions of the district added to the County Borough.

The arrangements for vaccination officer are temporary and will continue until such date as the amended registration districts come into operation.

The following statement shows the arrangements made in the County Borough for public vaccination together with the changes caused by the extension of the borough boundaries :—

District.	Vaccination Officer.		Public Vaccinator.	
	Prior to 1/4/36	After 1/4/36	Prior to 1/4/36	After 1/4/36
ROTHERHAM SOUTH-EAST. Rotherham County Borough.	Mr. F. S. Butcher, Durlston, Moorgate, Rotherham.	Mr. F. S. Butcher.	Dr. H. R. Elliott, Denman House, Fitzwilliam Road, Rotherham.	Dr. H. R. Elliott.
Parishes of Brinsworth (part of) (added to Rotherham C.B.)	do.	do.	Dr. R. G. Selby, Newburn House, Tinsley, Sheffield.	Dr. H. R. Elliott.
Whiston (part of) (added to Rotherham C.B.)	do.	do.	Dr. R. G. Selby.	Dr. H. R. Elliott.
Dalton (part of) (added to Rotherham C.B.)	do.	do.	Dr. G. H. Sedgwick, Barnego, Thrybergh.	Dr. H. R. Elliott.
ROTHERHAM NORTH-WEST. Rotherham County Borough.	Mr. T. H. Harrison, 53, Sandygate, Wath-upon-Deane, 92, Meadow Street, Rotherham.	Mr. T. H. Harrison.	Dr. A. Young, 5, Lindum Terrace, Rotherham.	Dr. A. Young.
Parish of Wentworth (part of) (added to Rotherham C.B.)	do.	do.	Dr. H. M. Mills, Wentworth, Rotherham.	Dr. A. Young.
RAWMARSH. Greasbrough Urban District (part of) (added to Rotherham C.B.)	Mr. W. J. Blyth, Council Offices, Rawmarsh.	Mr. W. J. Blyth.	Dr. D. P. K. Jockel, Westfield Road, Parkgate.	Dr. D. P. K. Jockel.
Rawmarsh Urban District (part of) (added to Rotherham C.B.)	do.	do.	do.	do.



The following are details extracted from the annual return forwarded to the Registrar-General, and relate to the year 1935 :—

Number of live births returned in birth list sheets	...	1269
Number successfully vaccinated	... ..	458
Number insusceptible of vaccination	... ..	12
Number of conscientious objectors	... ..	669
Number who died unvaccinated	... ..	70
Number postponed by medical certificate	... ..	1
Number removed to other known districts	... ..	26
Number removed to places unknown	... ..	11
Number remaining on 31st January, 1936, not accounted for		22

Under the Public Health (Small-pox Prevention) Regulations, 1917, no vaccinations or revaccinations were performed.

The following table shows the number of persons successfully vaccinated and re-vaccinated at the cost of the rates by the medical officers of institutions and the public vaccinators during the year ended 30th September, 1936 :—

Name of the institution or vaccination district.	Name of the medical officer or public vaccinator.	Numbers of successful primary vaccinations of persons :—			Number of successful re-vaccinations of persons who had been successfully vaccinated at some previous time.
		Under one year of age.	One year and upwards.	Total	
Rotherham—					
South East	Dr. H. R. Elliott	88	1	89	—
North West	Dr. A. Young	86	—	86	—
Greasbrough.	Dr. D. P. K. Jockel	2	—	2	—
Alma Road Hospital, Rotherham.	Dr. T. V. Griffith	184	—	184	—
Maternity and Child Welfare Centres.	M. & C.W. Medical Officers.				
	Dr. L. H. Copping	48			
	Dr. Boyd ..	19			
	Dr. Powell ..	1			
	Dr. Brenner ..	2			
	Dr. Rushbrook	2			
	Dr. Hallinan ..	1			
		73	—	73	—
	Totals.	433	1	434	

11 children unsuccessfully vaccinated. Certificates issued.

## PROPHYLAXIS OF DIPHTHERIA AND SCARLET FEVER.

During the year thirteen nurses at the Isolation Hospital were Schick and Dick tested with negative results.

Free immunisation for diphtheria was offered to the public generally with very disappointing results. In all, three children attended, the method used being T.A.M. requiring three separate injections. In one instance a child had only two injections.

## SUPPLY OF DIPHTHERIA ANTITOXIN.

On application to the Health Department concentrated diphtheria antitoxin is supplied free to all medical practitioners for use in the borough.

During the year, 23 phials, equivalent to 122,000 units, were so supplied.

## BACTERIOLOGICAL LABORATORY.

In the following table details are given of the examinations at the Public Health Laboratory made during 1936 :—

Examinations for :—	Positive.	Negative.	Doubtful.	Total.
Diphtheria ... ..	265	1795	7	2067
Tuberculosis ... ..	318	845	1	1164
Typhoid fever ... ..	—	—	—	—
Gonorrhoea ... ..	76	177	22	275
Other examinations ... ..	47	40	—	87
Total ... ..	706	2857	30	3593

The following statement gives details of the specimens examined at the Bacteriological Laboratory of the University of Sheffield during the year 1936 :—

### Wassermans :

Serum tests ... ..	499
Cerebro-spinal fluid ... ..	17
	516
Gonococci ... ..	12



## Cerebro-spinal fluid :

Complete examinations	...	...	...	...	...	5	
Other examinations	...	...	...	...	...	13	
						—	18
Blood cultures	...	...	...	...	...	...	8

## Typhoid examinations :

Blood	...	...	...	...	...	...	13
Urine	...	...	...	...	...	...	7
Faeces	...	...	...	...	...	...	9
						—	29

## Virulence tests :

Nasal and throat swabs	...	...	...	...	...	...	14
------------------------	-----	-----	-----	-----	-----	-----	----

## Milk examinations :

Inoculation—T.B.	...	...	...	...	...	125	
B. coli content	...	...	...	...	...	46	
Bacterial count	...	...	...	...	...	19	
Microscopic—T.B.	...	...	...	...	...	2	
						—	192

## Other examinations :

Haemolytic streptococci	...	...	...	...	...	53	
Other special examinations	...	...	...	...	...	20	
						—	73
							862

## NON-NOTIFIABLE ACUTE INFECTIOUS DISEASES.

The following table indicates the incidence of various non-notifiable acute infectious diseases prevalent amongst children attending the public elementary schools :—

Disease.	1932	1933	1934	1935	1936
Whooping cough	640	239	300	569	564
Mumps	124	446	997	347	186
Ringworm	212	201	178	158	163
Totals	976	886	1475	1074	913

# CANCER.

During the year, 100 deaths from cancer took place, as compared with 86 in 1932, 69 in 1933, 80 in 1934, and 98 in the year 1935.

Details are furnished in the following table regarding the location of the disease, together with the age and sex distribution.

Location of disease	Under 20 years M. F.	20—25 years		25—30 years		30—35 years		35—40 years		40—45 years		45—50 years		50—55 years		55—60 years		60—65 years		65—70 years		70—75 years		75—80 years		80—85 years		85 years & over M. F.	Total M. F.	Grand total.		
		M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.				M. F.	
Buccal cavity M. and pharynx F.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4	2	6	
Digestive organs and peritoneum	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	36	30	66	
Respiratory organs	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	8	-	8	
Uterus	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	7	7	7	
Other female genital organs	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	6	6	6	
Breast	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	3	3	
Male genito-urinary organs	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4	4	4	
Skin	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other organs	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Totals	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	52	48	100	

The ratio of cancer deaths to deaths from all causes expressed as a percentage for the years 1932-36 is as follows :—  
In 1932 the percentage was 11.0 ; in 1933, 8.2 ; in 1934, 11.3 ; in 1935, 12.4 and in 1936, 11.5.



The facilities for diagnosis and treatment of cancer provided by the County Borough are now more comprehensive than hitherto, and the following is a summary of these.

Cancer cases are admitted to Alma Road Hospital as medical or surgical cases generally, and the necessary treatment given there by the resident staff. Most of the cases are admitted on the advice of their general practitioners. In addition by agreement between the Rotherham Corporation and the Sheffield Radium Centre, fortnightly clinics are now held on Tuesdays from 2.30 to 5.0 p.m. at Alma Road Hospital, at which Dr. Ellis or one of his assistants attends.

The cases seen include (a) carcinophobia, (b) new cases with cancer for examination, (c) cases receiving out-patient treatment at the Sheffield Radium Centre, (d) Rotherham out patients. In addition, Mr. Ellis examines all cases in hospital suffering from cancer, and advises on and arranges times for treatment at Sheffield. As occasion arises he carries out minor treatments with radon seeds. A proposal to treat cases locally at Alma Road Hospital with radium is being considered.

At the Alma Road Hospital, 82 patients were admitted suffering from cancer during the year who had no previous advice or treatment at another hospital. The following statement gives the site of the disease and the operations performed:—

Site.	Total cases admitted.	Operations performed.
Uterus ... ..	14	2
Tongue and mouth ... ..	8	—
Breast ... ..	6	3
Hip ... ..	—	—
Skin ... ..	—	—
Larynx ... ..	1	—
Bladder ... ..	4	—
Rectum ... ..	8	5
Colon ... ..	12	6
Stomach ... ..	16	1
Other sites ... ..	13	6
	—	—
	82	23
	—	—

Twenty-two patients were referred to Sheffield hospitals, and the particulars of the cases are as follows :—

Site	Admitted to hospital.	Treated as out-patients at Sheffield.
Uterus ... ..	3	2
Tongue and mouth ... ..	1	4
Breast ... ..	—	1
Rectum ... ..	3	—
Colon ... ..	—	1
Other sites ... ..	2	5
	—	—
	9	13
	==	==

Eight patients were referred direct from the out-patient department of the hospital to the Sheffield Radium Centre. 29 patients were seen at the Radium clinic, and 66 attendances were made up to the end of the year from the commencement on 9th June, 1936.

No educational campaign by either announcements, printed leaflets or lectures has been conducted during the year, but the medical practitioners of the borough are fully aware of the facilities offered at the hospital and the liason with the Sheffield Radium Centre.

Arising from circular 1136 of 31st July, 1930, the local branch of the British Medical Association was approached, and a model form of questionnaire discussed. It was then decided that every help could be assured by the doctors to the local authority in giving as full information as possible.

This help has been generously given, and in the years that have intervened a large number of forms have accumulated with varying amounts of information. Owing to the relative smallness of the number, however, for statistical purposes it should now be considered whether these forms should be pooled for combined areas or for the country as a whole when some information of value, might be obtained. For an individual area like Rotherham the data collected are too scanty for any serious conclusions to be formed.

#### INFLUENZA.

During the year 10 deaths occurred from influenza ; 2 in January, 3 in February, 1 in September, 2 in October and 2 in December.



## CLEANSING AND DISINFECTION.

The arrangements for cleansing and disinfection, as outlined in the annual report for 1931, remain unchanged.

## REMOVAL OF INFIRM OR DISEASED PERSONS.

Section 101 of the Rotherham Corporation Act, 1928, enables the medical officer of health to apply to a court for an order for the removal of an infirm or diseased person. It was not necessary to apply for an order during the year.

One aged and infirm person was under observation and was persuaded to enter the institution without an order being obtained.

## VERMINOUS CONDITIONS.

During 1936, a total of 36,438 examinations of school children were made by school nurses, as a result of which 2,409 children were found with nits and 294 individual children were found verminous; of this number 28 were cleansed at the clinic under arrangements made by the Local Education Authority.

## SECTION VII.

## TUBERCULOSIS.

## NEW CASES AND MORTALITY DURING 1936.

Under the Public Health (Tuberculosis) Regulations, 1930, the number of cases of tuberculosis on the register of notifications on the 31st December, 1936, was 738, classified as follows :—

Total cases	Pulmonary.			Non-pulmonary.		
	Males.	Females.	Total.	Males.	Females.	Total.
738	330	238	568	90	80	170

Particulars of new cases of tuberculosis and of deaths from the disease are given in the following table :—

Age periods. Years.	New cases.*				Deaths.			
	Pulmonary		Non-pulmonary		Pulmonary		Non-pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 ...	—	—	—	1	—	—	—	1
1-5 ...	1	2	1	—	1	1	1	—
5-10 ...	3	2	6	6	—	—	1	1
10-15 ...	2	5	2	4	—	—	—	—
15-20 ...	8	5	4	3	1	3	1	—
20-25 ...	6	14	2	3	—	2	—	—
25-35 ...	17	11	2	3	7	2	—	—
35-45 ...	15	6	—	2	3	2	—	3
45-55 ...	13	7	2	4	7	1	—	1
55-65 ...	4	5	—	1	2	1	—	—
65 and upwards ...	3	—	—	—	1	—	—	—
Totals ...	72	57	19	27	22	12	3	6

\*Primary notifications, including other new cases which have come to the knowledge of the Medical Officer of Health during the year 1936

The ratio of non-notified tuberculous deaths to the total tuberculous deaths was 1 in 21½. No action was required for cases of wilful neglect or refusal to notify



No action was taken during the year under the Public Health (Prevention of Tuberculosis) Regulations, 1925, or Section 62 of the Public Health Act, 1925.

NOTIFICATIONS.—80 primary notifications of new cases were received during the year, 59 of which were in relation to pulmonary disease (males 32, and females 27) and the remaining 21 in relation to non-pulmonary disease (males 7, and females 14). In addition, 95 cases were brought to notice other than by formal notification. This figure included 52 males, 40 of whom were suffering from pulmonary disease, and 43 females, of whom 30 were suffering from pulmonary disease.

The sources of information of these latter cases were :—

Source of information	Pulmonary	Non-pulmonary
Death returns from local registrars ... ..	—	1
Posthumous notifications ... ..	2	4
Transferred deaths from Registrar General ...	1	—
Transfers from other areas (other than transferable deaths) ... ..	67	20

The large number of cases “transferred in” from other areas is accounted for mainly by the extension of the borough, which took place on April 1st, when 64 cases previously resident outside the Borough were taken over from the West Riding County Council.

234 cases were removed from the register of notifications for the following reasons :—

Withdrawal of notification ... ..	45
Recovery from the disease ... ..	132
Death ... ..	57

The procedure taken on receipt of a notification of a new case was detailed in the 1935 report and remains unchanged.

DEATHS.—57 deaths occurred amongst notified tuberculous patients during 1936, 48 being pulmonary and 9 non-pulmonary. Ten pulmonary cases died from other causes than tuberculosis and the remainder died from the condition originally notified (38 pulmonary—9 non-pulmonary). The period which elapsed between notification and death is summarised below :—

				Pulmonary	Non-pulmonary
Notification after death	...	...	...	1	4
„ within 1 month	...	...	...	4	2
„ „ 3 months	...	...	...	6	1
„ „ 6 months	...	...	...	2	—
„ „ 1 year	...	...	...	2	—
„ „ 2 years	...	...	...	2	1
„ „ 3 years	...	...	...	6	—
„ „ 4 years	...	...	...	2	—
„ „ 5 years	...	...	...	3	—
„ over 5 years	...	...	...	9	—
„ from local death returns	...	...	...	1	1

#### TUBERCULOSIS DISPENSARY.

NEW CASES.—It will be seen that 266 new cases attended the dispensary during 1936, and of those only 51 were found to be definitely suffering from tuberculosis. Of these cases 42 were pulmonary, 23 of whom were found to be sputum positive. It will be noted that less than 20% of the new cases were found to be suffering from tuberculosis. These figures show the readiness with which medical practitioners take advantage of the facilities for diagnosis available at the dispensary. Cases are still met with, however, who have been under medical attention for some months, and who on clinical examination present unmistakeable signs of gross pulmonary disease. These cases, one feels sure, could have been diagnosed earlier by adequate clinical examination and/or sputum tests. It appears that too little advantage is taken of the laboratory facilities provided for the examination of sputum, and that too much reliance is placed on the result of one sputum test, instead of having several tests performed in doubtful cases. That a negative sputum test does not mean that tuberculosis is absent is well known and need not be emphasised, but many practitioners seem content with a negative result and do not send a second specimen for some months.

The number of new cases attending the dispensary in 1936 is the highest met with so far under the tuberculosis scheme.



The following table shows the relation between primary notifications and the cases attending the dispensary who were "accepted" as suffering from tuberculosis :—

		Primary notifications	*Accepted cases attending dispensary
Pulmonary	Males ...	32	24
	Females ...	27	18
Non-pulmonary	Males ...	7	5
	Females	14	4
		—	—
		80	51
		—	—

\*These figures exclude 4 cases who attended as contacts and who were diagnosed as being tuberculous.

The following table compares the figures for new cases examined during 1936 with those for the preceding years :—

Year.	Definitely tuberculous.	Doubtfully tuberculous.	Non- tuberculous.	Total.
1932	101	9	73	183
1933	107	3	74	184
1934	62	8	113	183
1935	76	7	133	216
1936	51	8	207	266

CONTACTS.—The number of contacts examined was 115 in 1936. Of these 4 were found to be suffering from tuberculosis, 2 of whom were children. The other cases were interesting. The previous practice was to offer examination only to the contacts of positive sputum cases. During the last year it was decided to extend the offer of examination to the parents of children dying from tuberculous meningitis. In this connection a husband and wife were examined towards the end of the year and both were found to have pulmonary tuberculosis, the husband exhibiting tubercle bacilli in his sputum. Both cases were admitted to the sanatorium for treatment.

The following table gives details of the contacts examined during the past five years :—

Year.	Definitely tuberculous.	Doubtfully tuberculous.	Non-tuberculous.	Total.
1932	3	2	13	18
1933	12	3	15	30
1934	11	—	137	148
1935	2	—	44	46
1936	4	—	111	115

RADIOLOGICAL EXAMINATIONS.—The X-ray examinations in connection with dispensary work continue to increase, as shown in the following table, which gives the yearly number of dispensary X-ray films exposed during the past 5 years :—

1932	...	...	...	...	164
1933	...	...	...	...	237
1934	...	...	...	...	368
1935	...	...	...	...	340
1936	...	...	...	...	462



The following return shows the work of the dispensary during the year 1936.

DIAGNOSIS.	Pulmonary				Non-pulmonary				Total				Grand total.	
	Adlts.		Child.		Adlts		Child.		Adlts.		Child.			
	M	F	M	F	M	F	M	F	M	F	M	F		
A—New cases examined during the year (excluding contacts)														
(a) Definitely tuberculous ...	22	14	2	4	2	1	3	3	24	15	5	7	51	
(b) Diagnosis not completed...	—	—	—	—	—	—	—	—	3	1	1	3	8	
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	75	57	37	38	207	
B—Contacts examined during the year :—														
(a) Definitely tuberculous ...	1	1	1	1	—	—	—	—	1	1	1	1	4	
(b) Diagnosis not completed...	—	—	—	—	—	—	—	—	—	—	—	—	—	
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	12	35	32	32	111	
C—Cases written off the dispensary register as														
(a) Recovered ...	23	25	18	11	—	2	8	9	23	27	26	20	96	
(b) Non-tuberculous (including any such cases previously diagnosed and entered on the dispensary register as tuberculous) ...	—	—	—	—	—	—	—	—	89	98	71	71	329	
D—Number of cases on dispensary register on Dec. 31st :—														
(a) Definitely tuberculous ...	197	119	64	57	15	10	48	46	212	129	112	103	556	
(b) Diagnosis not completed...	—	—	—	—	—	—	—	—	3	1	1	3	8	

1. Number of cases on dispensary register on January 1st ...	617	8. Number of visits by tuberculosis officer to homes (including personal consultations) ...	14
2. Number of cases transferred from other areas and cases returned after discharge under head 3 in previous years	44	9. Number of visits by nurses or health visitors to homes for dispensary purposes ...	*2073
3. Number of patients transferred to other areas, cases not desiring further assistance under the scheme and cases "lost sight of"	24	10. Number of	
4. Cases written off during the year as dead (all causes) ...	29	(a) Specimens of sputum, &c., examined ...	194
5. Number of attendances at the dispensary (including contacts) ...	1699	(b) X-ray examinations made in connection with dispensary work ...	462
6. Number of insured persons under domiciliary treatment on the 31st December ...	59	11. Number of "recovered" cases restored to dispensary register and included in A(a) and A(b) above ...	1
7. Number of consultations with medical practitioners :—		12. Number of "T.B. plus" cases on dispensary register on 31st December ...	119
(a) Personal ...	3		
(b) Otherwise ...	236		

\*All visits.

The 329 non-tuberculous persons written off the dispensary register revealed the following conditions :—

Bronchitis, 77 ; pulmonary and bronchial catarrhs, 20 ; pulmonary fibrosis, 15 ; anaemia, 10 ; debility, 7 ; bronchiectasis, 6 ; cervical adenitis, 6 ; hilar enlargement, 5 ; valvular disease of the heart, 6 ; healed tuberculosis, 4 ; enteritis, 4 ; emphysema, 5 ; neurasthenia, 3 ; pleurisy, 3 ; lung abscess, 3 ; asthma, 2 ; rheumatism, 2 ; post influenzal debility, 2 ; congenital dislocation of the hip, 2 ; chronic non-tuberculous pneumonia, 2 ; gingivitis, 2 ; acute lobar pneumonia, 2 ; and one each pneumoliths, erythema nodosum, sub-pectoral abscess, Hodgkin's disease, nasal catarrh, malaria, streptococcal pleurisy, hyperthyroidism, tonsillitis, syphilis of central nervous system, pelvic cellulitis, coeliac disease, goitre, empyema necessitatis, myocarditis, empyema, healed spinal caries, gastro-enteritis, aphonia, pleural thickening, hypopituitarism, chorea, toxic arthritis, traumatic arthritis of spine. The remaining 117 cases showed no apparent disease.



The following summary shows the clinical condition of all patients at the end of 1936, classified as (a) pulmonary cases and (b) non-pulmonary cases, arranged according to the years in which they first came under public medical treatment.

(a) PULMONARY TUBERCULOSIS.

Condition at the time of the last record made during the year to which the return relates.	Previous to 1932						1932						1933						1934						1935						1936														
	Class T.B. plus.			Class T.B. minus.			Class T.B. plus.			Class T.B. minus.			Class T.B. plus.			Class T.B. minus.			Class T.B. plus.			Class T.B. minus.			Class T.B. plus.			Class T.B. minus.			Class T.B. plus.			Class T.B. minus.											
	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).													
Disease arrested — Adults M. F.	48	6	13	1	20	10	1	2	3	15	4	6	4	1	1	1	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1												
Children	41	5	1	2	8	6	1	1	1	14	1	3	4	1	1	1	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1												
Disease not arrested Adults M. F.	2	6	6	1	13	1	1	3	5	—	—	3	—	—	—	—	7	—	—	—	3	21	2	11	13	11	2	5	4	11	8	—	—												
Children	5	1	2	—	3	1	—	2	3	1	1	1	—	—	—	—	2	—	—	—	1	3	1	2	4	7	5	—	8	—	—	—	—												
Condition not ascertained during the year ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—											
Total on dispensary register at 31st December ...	138	19	22	4	45	29	3	9	15	58	1	8	4	13	35	2	4	6	33	2	4	15	21	25	2	5	12	19	—	—	—	—	—	—											
Discharged as recovered Adults M. F.	165	—	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
Children	121	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
Lost sight of, or otherwise removed from dispensary register	355	10	24	5	39	11	—	1	1	9	1	2	2	5	6	—	1	3	4	3	—	1	1	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Dead— Adults M. F.	61	14	64	41	119	7	—	3	4	7	3	2	3	11	16	2	—	1	3	4	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Children	35	4	33	30	67	3	—	5	6	11	1	—	4	1	5	1	1	3	4	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Total written off dispensary register ...	956	23	125	81	235	21	—	9	10	19	13	3	9	14	26	9	1	2	9	12	6	—	1	8	9	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
GRAND TOTALS...	1094	48	147	85	280	50	3	18	13	34	71	4	17	18	39	44	1	4	13	18	39	2	5	23	30	27	2	5	16	23	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

**(b) NON-PULMONARY TUBERCULOSIS.**

Condition at the time of the last record made during the year to which the return relates.	Previous to 1932					1932					1933					1934					1935					1936				
	Bones and joints.	Abdominal.	Other organs.	Peripheral glands.	Total.	Bones and joints.	Abdominal.	Other organs.	Peripheral glands.	Total.	Bones and joints.	Abdominal.	Other organs.	Peripheral glands.	Total.	Bones and joints.	Abdominal.	Other organs.	Peripheral glands.	Total.	Bones and joints.	Abdominal.	Other organs.	Peripheral glands.	Total.	Bones and joints.	Abdominal.	Other organs.	Peripheral glands.	Total.
(a) Remaining on dispensary register on 31st December.	Disease arrested—Adults M. F.	5	—	1	2	8	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Children	10	4	2	14	30	1	4	—	10	15	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Disease not arrested Adults M. F.	—	—	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Children	8	—	—	2	10	—	1	—	—	1	—	—	—	2	3	2	—	—	—	—	3	—	—	—	3	—	—	—	6
	Condition not ascertained during the year ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(a) Remaining on dispensary register at 31st December	Total on dispensary register at 31st December ...	24	4	4	18	50	3	5	—	10	18	4	1	—	10	15	4	2	1	4	11	3	2	1	10	16	2	—	7	9
	Transferred to pulmonary ...	3	1	1	4	9	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(b) Not now on dispensary register and reasons for removal therefrom.	Discharged as recovered Adults M. F.	1	—	2	4	7	—	—	—	—	—	—	—	—	2	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Children	38	10	5	53	106	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(b) Not now on dispensary register and reasons for removal therefrom.	Lost sight of, or otherwise removed from dispensary register	12	6	10	23	51	—	—	—	—	—	—	—	1	2	2	2	—	—	2	4	—	—	—	—	—	—	—	—	—
	Dead Adults M. F.	1	1	—	1	3	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(b) Not now on dispensary register and reasons for removal therefrom.	Children	2	3	2	2	9	—	—	1	—	1	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—
	Total written off dispensary register ...	60	20	19	90	189	2	—	1	3	6	1	—	—	3	4	2	—	2	2	6	2	—	—	—	2	—	—	—	—
(b) Not now on dispensary register and reasons for removal therefrom.	GRAND TOTALS of (a) and (b) (excluding those transferred to pulmonary) ...	84	24	23	108	239	5	5	1	13	24	5	1	—	13	19	6	2	3	6	17	5	2	1	10	18	2	—	7	9



## OAKWOOD HALL SANATORIUM.

**BUILDINGS.**—The nurses' home, commenced in the autumn of 1935, was completed during the year and opened by His Worship the Mayor of Rotherham (Alderman F. Harper) on the 27th October. The home stands conveniently near the administrative block on its north side, and is a three storey building. On the ground floor are the dining room, sitting rooms for the sisters, staff-nurses and probationer nurses, writing room, service kitchen, personal laundry and lavatory unit. The floors of the entrance hall and corridors are finished in terrazzo.

On the first and second floors are bedrooms, sick-room, home sister's sitting room, box-room and linen room. On each of these floors is also a bathroom with slipper and showerbaths, wash-hand basins, w.c's and house maid's sink. Accommodation is provided for a nursing staff of 22, each member having a separate bedroom.

The home is heated with hot water pipes and radiators, and gas fires are installed in the sitting-rooms, dining-room and sick-room. New furniture has been provided throughout, and wireless is supplied by loud-speakers in the sitting-rooms working from a five valve receiver.

The old boiler house was rebuilt and enlarged and a new heating plant installed. This plant consists of three gas fired boilers with the necessary pumps, etc., and supplies the administrative block, nurses' home, schoolroom and patients' dining room with water for heating and domestic purposes. These boilers besides being very cleanly require comparatively little attention, as the temperature is automatically controlled. The gas service to the sanatorium has been greatly improved by the laying down of a larger supply pipe.

The congestion and overcrowding which has existed in the administrative block will now be relieved, as the accommodation vacated by the nursing staff will be available for the domestic staff when the necessary painting and decorating, which was commenced when the nurses' home had been opened, are completed. The domestic staff will also be provided with a recreation room, which will fill a long felt want.

Extensive alterations to certain of the ground floor rooms were also commenced, and at the end of the year the room previously used as the nurses' dining room had been divided by a partition into two rooms, one of which became the Medical Superintendent's office, while the other became included in the suite for the assistant medical officer. The former office was utilised as the assistant medical officer's sitting room, and together with the bathroom the suite is now complete and conveniently placed.

Lavatory accommodation for visitors had always been a difficulty, and this will be overcome when the alterations now taking place are completed. The room used by the Matron as an office is now being made into a central passage leading out to the terrace, and on each side of this corridor are rooms containing lavatory basins and w.c.'s.

The rather large entrance hall is being divided by a partition, thus making an excellently placed office for the Matron.

The kitchen has been enlarged by taking in the old larder, and, in place of this, new stores for butter, meat, milk, dry goods, tinned goods and bread have been provided. The kitchen equipment has been modernised and an electric refrigerator of sufficient capacity for the needs of the institution have been installed.

The old servants' hall has been divided to form a clean linen and sorting room and a dining room for the male outdoor staff. A small building was erected in the yard comprising of sorting room for patients' dirty linen and a store for the spinal frames, invalid chairs and the like.

The building and structural alterations have been carried out by the Borough Engineer.

GROUNDS AND GARDENS.—The new tennis court for the staff became ready for play at the beginning of the summer. This court occupies that stretch of lawn which bordered the old lily pond, and which has previously been used by the patients as a bowling green. It is in an extremely sheltered position, which not only improves play but occasions greater privacy, and the former tennis court which was near the male patients' block is found to be an admirable site for the bowling green.

No other alterations have taken place in the grounds or gardens.

Mr. Hill, head gardener, reports that fruit and vegetables to the value of £80 9s. 3d. were supplied from the gardens during the year. The poultry farm yielded 772½ dozen eggs and 83 fowls were supplied for consumption, the total value of them being £84 19s. 2d.

ADMISSIONS AND DISCHARGES.—66 borough patients were in residence on January 1st and 62 on December 31st. 111 cases were admitted and 103 were discharged, there being in addition 12 deaths. Details are given on the next page.



Number of patients in hospital.				1/1/36	Admitted.	Dis- charged.	Died.	31/12/36
Obser- vation cases.	Adults.	M.	...	1	16	14	1	2
		F.	...	—	8	7	—	1
	Children	...	—	16	13	1	2	
Total ...				1	40	34	2	5
Pul- monary cases	Adults.	M.	...	29	30	31	5	23
		F.	...	14	16	12	4	14
	Children	... ..	5	12	7	—	10	
Total ...				48	58	50	9	47
Non- pulmon- ary cases.	Adults	M.	...	1	2	1	—	2
		F.	...	—	3	3	—	—
	Children	...	16	8	15	1	8	
Total ...				17	13	19	1	10
Grand total ...				66	111	103	12	62

Of the 36 suspicious cases discharged, only 5 were found to be suffering from tuberculosis. 27 cases were found to be suffering from diseases other than tuberculosis, while 4 patients were discharged without a definite diagnosis being made. Three of these left on their own accord, and the fourth was discharged provisionally non-tuberculous, the final definite diagnosis being made after discharge on receipt of reports of guinea-pig inoculation tests.

The two observation cases who died suffered from advanced bronchiectasis.

The following table gives particulars of the observation cases admitted to the sanatorium during the year :—

Diagnosis on discharge from observation	For pulmonary tuberculosis.						For non-pulmonary tuberculosis.						Totals		
	Stay under 4 weeks			Stay over 4 weeks			Stay under 4 weeks			Stay over 4 weeks					
	M	F	Ch	M	F	Ch	M	F	Ch	M	F	Ch	M	F	Ch
Tuberculous ...	1	1	—	2	—	—	—	—	1	—	—	—	3	1	1
Non-tuberculous ...	3	3	2	6	3	7	—	—	1	1	—	1	10	6	11
Doubtful ...	1	—	2	1	—	—	—	—	—	—	—	—	2	—	2
Totals ...	5	4	4	9	3	7	—	—	2	1	—	1	15	7	14

The immediate results of the treatment of definitely tuberculous patients discharged from the sanatorium during the year are given in the following table:—

Classification on admission to the institution.	Condition at time of discharge.	Duration of residential treatment in the institution.															Grand totals.	
		Over 28 days and under 3 months			3—6 months.			6—12 months.			More than 12 months.			Totals.				
		M	F	Ch	M	F	Ch	M	F	Ch	M	F	Ch	M	F	Ch		
PULMONARY TUBERCULOSIS.	Class TB minus.	Quiescent ...	...	...	3	1	4	2	1	...	...	...	...	5	2	4	11	
		Not quiescent ...	2	...	3	...	1	5	...	2	...	1	...	10	1	3	14	
		Died in institution ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Class TB plus Group 1.	Quiescent ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
		Not quiescent ...	...	...	...	...	...	...	1	...	...	...	...	...	1	...	1	
		Died in institution ...	...	...	...	...	...	...	...	...	1	...	...	1	...	...	1	
	Class TB plus Group 2.	Quiescent ...	...	...	...	...	...	1	...	...	...	...	...	1	...	...	1	
		Not quiescent ...	1	...	3	...	...	1	...	...	...	...	...	5	...	...	5	
		Died in institution ...	...	...	...	...	...	...	1	...	1	1	...	1	2	...	3	
	Class TB plus Group 3.	Quiescent ...	...	...	...	...	...	...	...	...	1	...	...	1	...	...	1	
		Not quiescent ...	2	2	...	2	1	...	3	2	...	1	1	...	8	6	...	14
		Died in institution ...	...	1	...	...	1	...	1	...	...	1	...	2	2	...	4	
		Totals (pulmonary)	5	3	...	11	3	5	13	5	2	5	3	...	34	14	7	55
	Bones and joints.	Quiescent ...	...	...	1	...	...	...	...	...	...	...	...	...	...	1	...	1
		Not quiescent ...	...	1	...	...	...	1	...	...	...	...	4	1	1	4	...	6
		Died in institution ...	...	...	...	...	...	...	...	1	...	...	...	...	...	1	...	1
Abdominal.	Quiescent ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Not quiescent ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Died in institution ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Other organs.	Quiescent ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Not quiescent ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Died in institution ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Peri-pheral glands.	Quiescent ...	...	...	...	...	2	...	...	4	...	...	...	...	...	6	...	6	
	Not quiescent ...	...	...	...	...	1	...	...	...	...	...	...	...	...	1	...	1	
	Died in institution ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Totals (non-pulmon'y)	...	1	1	...	3	1	...	5	...	...	4	1	1	13	...	15	



**GENERAL TREATMENT.**—The general principles of treatment employed have been described in previous reports and remain unaltered. Rest remains the most effective method of treating recent and acute cases. A prolonged period of absolute rest forms the first part of the treatment of every pulmonary case admitted. The length of this period of absolute rest is determined not so much by the temperature and pulse-rate as by the X-ray picture. The temperature and pulse-rate in many cases of active tuberculosis subside very quickly after admission, especially if the toxæmia has not been of long duration, but these cases continue their treatment by absolute rest until definite signs of retrogression are seen on the X-ray film.

Compared with other sanatoria Oakwood usually has a high percentage of bed cases. (A "bed case" is defined as one who has two meals or more in bed daily, and includes in the scheme of grading patients who are up for 4 hours or less daily). The percentage of bed cases during 1936 was 64.

**COLLAPSE THERAPY.**—Artificial pneumothorax forms the most valuable adjunct in the treatment of pulmonary tuberculosis. The treatment consists of the introduction of air between two layers of membrane which surround the lung. By this means the movements of the treated lung are greatly diminished, and also the diseased areas are relaxed, thus facilitating healing. In cases where cavities exist which do not respond to routine treatment by rest, or which respond very slowly, artificial pneumothorax is being increasingly employed. Disease in the other lung is not necessarily a contra-indication, and in some cases it may be advisable to treat both lungs with simultaneous artificial pneumothoraces, using of course only slight collapse in each. There has been no occasion to use bilateral simultaneous pneumothorax in any of the cases as yet, but several cases presenting disease in both lungs have been treated by an artificial pneumothorax on the more severe side. Towards the end of the year the services of Dr. James C. Anderson, of Sheffield, were secured for pulmonary cases requiring operative interference. One case was found suitable for a minor operation known as phrenicectomy and was admitted to the City General Hospital, Sheffield, for this. The additional collapse obtained by this means proved very beneficial to the patient.

**GOLD THERAPY.**—As noted in the previous report the injection of gold salts in the treatment of pulmonary tuberculosis is not held in such high esteem at Oakwood as it is in many other sanatoria. In many cases in which it has been used it has proved of little value, and in those cases who have improved it is difficult to assess the relative value of the course of gold injections and the routine sanatorium treatment. Patients treated by adequate rest and graduated exercise seem to show as good results as those given aurotherapy.



ULTRA-VIOLET RAY THERAPY.—Great benefit results from the employment of ultra-violet rays in cases of skin and glandular tuberculosis, and most of these cases admitted are given a course of this treatment. Certain cases of bone and joint and abdominal tuberculosis are also treated by this means. In the former group the rays seem to exert a beneficial effect directly on the tuberculous process; in the latter group a general toning up of the system results.

RADIOLOGY.—1003 films were exposed during the year, which figure includes 462 films taken in connection with the Tuberculosis Dispensary. 541 films were therefore exposed in connection with the treatment of in-patients. In this connection the actual figure should be rather higher, as most of the borough patients are X-rayed in connection with their dispensary attendance, and if admitted to the sanatorium shortly afterwards a preliminary film on admission is rendered unnecessary.

The plant in use, installed in 1930, continues to give satisfactory service. No alterations or additions to the equipment were made during the year, but a lead-lined coat was provided for the use of the medical officer making the examinations.

Lipiodol is frequently used in order to examine the bronchial tree in cases of diseases other than tuberculosis.

TUBERCULIN.—The Mantoux test is employed to a large extent in children and in adults admitted for observation.

As mentioned in the previous report, a small investigation was commenced at the end of 1935 relating to a comparison of tuberculo-protein, a recent derivative of tuberculin, with old tuberculin in Mantoux tests. The material for the tests was kindly supplied by Dr. O'Brien, of the Wellcome Physiological Research Laboratories. 153 patients were tested and the results seem to indicate that the products are very similar in regard to sensitivity. The great advantage of tuberculo-protein is that the material can be supplied in the dry state (powder or tablet) in known strengths thus greatly facilitating the making of dilutions of the required strengths. Tuberculin has not been used in treatment.

ORTHOPAEDIC CASES.—These cases are treated by the recognised conservative methods of immobilisation of the affected part by means of plaster of paris or other means. In addition some cases receive ultra-violet ray therapy. X-ray films to assess results of treatment and to control future procedure are usually taken at three monthly intervals.



It is fortunate that the services of Dr. C. Lee Pattison, of Sheffield, as Consultant Orthopaedic Surgeon, are still available. Dr. Pattison visits the sanatorium when required—normally at intervals of about three months, and his advice as to diagnosis and treatment is very greatly valued. Two patients were admitted during the year to King Edward VII Hospital, Sheffield for operations in connection with the treatment of their bone and joint tuberculosis.

RECREATION.—Billiards, cards, dominoes, etc., continue to be favourite indoor pastimes, and during the summer months bowls and putting help to while away the time.

Hearty thanks are due to the friends who have organised concerts for the patients and staff throughout the year. Wireless programmes are of course supplied to the adults patients daily.

LIBRARY.—The library continues to be well used. 2,600 books were exchanged during the year.

SCHOOL.—The following is the report of the teacher, Mrs. Eyre :—

Number of children admitted to register : Girls	...	...	31
Boys	...	...	27
			—
			58
			—
Number of children unable to read or write when admitted	...		15

Mrs. Eyre is also keenly interested in the education of bed-fast children and provides them with handwork, reading and recreation.

The supervision of the Boy Scouts, Girl Guides and Brownies also falls under Mrs. Eyre's able control. She reports that good work continues to be done by each group. The visit of Miss Taylor and the High School Brownies gave great pleasure, and their gift of twenty parcels at Christmas was much appreciated. The County Commissioner, Miss Peake, also visited the troupe in June and expressed her pleasure and satisfaction at the work done.

## SPECIAL INVESTIGATIONS.

1. Tuberculo-protein (see under tuberculin, supra).
2. The Oesophagus in Pulmonary Fibrosis.

Following upon the admission of a case suffering from dysphagia due to displacement and structure of the oesophagus by the pull of fibrous tissue, a small investigation of a series of other cases with unilateral pulmonary fibrosis was made. The findings showed that the oesophagus was as mobile a structure as the other mediastinal contents when influenced by mechanical stresses arising in the lungs and pleura. Attention was drawn to the danger of passing oesophageal sounds in cases of long standing pulmonary disease without first ascertaining the amount of oesophageal displacement.

The operation of thoracoplasty was suggested as being theoretically sound in the rare cases of severe dysphagia due to unilateral pulmonary fibrosis.

The findings were published in the "British Medical Journal" March 7th, 1936, vol. i. page 469.

3. X-ray appearances of the lungs of Electric Arc-Welders.

While attention has been directed previously to acute conditions occurring in electric-arc welders as a direct result of their occupation, no chronic changes had been reported.

Our attention was drawn to the condition by the following case :—

A man aged 44 attended the Tuberculosis Dispensary in June, 1933, because his sputum had been blood-tinged for a few days. He felt otherwise well except for slight debility which had followed an attack of influenza six months previously. His father and grandfather, both of whom had been tin miners, had died from silicosis. The occupational history showed that the man had worked as a blacksmith for 18 years, during which time he had done occasional electric-welding jobs. He had been an electric welder for 11 years.

Physical examination revealed few abnormal signs, but the X-ray film showed a fine mottling evenly distributed over both lung fields, an appearance which simulated silicosis, or a subacute or healed miliary tuberculosis. The sputum was examined for tubercle bacilli with negative results.



The man had never been exposed to silica dust, but it was learned that the electrodes used in welding were sometimes covered with a wrapping containing asbestos. Asbestos fibre when inhaled gives rise to a condition similar in many ways to silicosis. The X-ray film was quite unlike the usual picture of asbestosis, but this condition had to be considered as possible, because the fibres, under the conditions of intense heat developed during the welding might be changed chemically or physically to produce a different clinical or radiological condition. Sputum examinations for the presence of asbestos fibres or asbestos bodies were negative. The glass shield used by the man to protect his eyes during welding was sent to the Government Laboratory for examination. The report stated that "the fume deposited consisted essentially of magnetic iron oxide ( $\text{Fe}_3\text{O}_4$ ). Slight evidence of the presence of silica was obtained, but this was probably derived from the glass slide, the surface of which was damaged by red-hot particles thrown off from the electrodes."

When it was learned that a material rich in sodium silicate was used as a flux during the welding, the possibilities as to the cause of the condition were seen to be several. Silica, asbestos, the gases and the fume arising from the welding process, miliary tuberculosis, all had to be considered. This last received special consideration, as tuberculosis is so often a concomitant of silicosis from which the father and grandfather had died.

With a view to determining whether the occupation was a cause of the condition, the patient was invited to bring some of his fellow workers to Oakwood Hall Sanatorium for examination and X-ray. After much persuasion two other welders attended and one of these, who had also been engaged in the work for eleven years was found to present an almost similar X-ray picture. This second had no family history of tuberculosis. The X-ray film in the third case was not normal, but the changes were not considered to be due to exposure to this occupation.

As no other welders could be persuaded to attend the investigation remained at a standstill although a definite pointer had been secured of the possibility of an industrial hazard in electric welding.

In the latter part of the year 1935, Dr. A. I. G. McLaughlin, H.M. Medical Inspector of Factories, had his attention drawn to the condition. His interest was aroused, and we decided to collaborate in furthering the investigation. Groups of electric welders from firms in Rotherham and district were invited to come to Oakwood Hall Sanatorium for clinical and radiological examination.

The results of the clinical and radiological examinations of the first 16 cases were published in the "Lancet," April 4th, 1936, and aroused great interest in the field of industrial medicine. The summary of that article stated :—

1. The chests of 16 electric-arc welders who have been engaged at the trade for periods varying from 6–16 years have been examined radiologically.
2. In 6 cases the X-ray films showed fine nodulation over both lung fields : in three cases stippling was present over a more limited area : the remaining cases showed varying degrees of accentuation of the bronchial shadows, but no stippling. In no case was a completely normal radiogram obtained.
3. Clinical examination of the chests revealed few abnormal signs.
4. The alterations in the pulmonary or bronchial tissues underlying these X-ray changes have been set up by the inhalation of fume which arises during electric-arc welding.
5. The probable composition of the fume has been discussed.
6. We wish to emphasise that these X-ray appearances have been found in men who are apparently in good health.
7. Up to the present time we have come to no conclusion as to the exact diagnosis of the condition.

The investigation has been continued and up to the present time 57 men have been examined at Oakwood. These comprise 50 electric arc welders, 6 men who were engaged both in electric and oxy-acetylene welding, and one man solely engaged in oxy-acetylene welding.

In addition to these clinical and radiological examinations carried out at Oakwood, Dr. McLaughlin has had a further 22 men examined, and has also very considerably widened the field of the investigation by invoking the aid of chemists regarding the analysis of the fume by having experiments conducted as to the effect of the fume on animals, by having the sputum from welders examined, and in other directions.

The results of these investigations will be published later.

Our thanks are due, not only to the men who have voluntarily submitted to the examinations, but to the employers who have readily supplied us with information about the technicalities of welding and afforded us facilities to approach the men, etc.



## ALMA ROAD HOSPITAL.

In the following extract from T. 145 of the Ministry of Health, the position with regard to the number of beds available for the treatment of tuberculosis in the Alma Road Hospital as on 31st December, 1936, is given. For pulmonary cases there are 14 beds for adults; and for children under 15 years of age and non-pulmonary cases there are no definite beds provided, but the patients are nursed in the general wards.

The following table shows the number of patients treated in the hospital during the year who were chargeable to the Rotherham County Borough Council:—

Number of patients in hospital.				1/1/36	Admitted.	Discharged	Died.	31/12/36
Pulmonary cases.	Adults.	M.	...	3	13	13	3	—
		F.	...	—	6	3	3	—
	Children	...	...	1	3	2	2	—
	Total	...	...	4	22	18	8	—
Non-pulmonary cases.	Adults.	M.	...	—	1	—	1	—
		F.	...	1	5	4	2	—
	Children	...	...	1	7	6	2	—
	Total	...	...	2	13	10	5	—
Grand total				6	35	28	13	—

## TUBERCULOSIS CARE COMMITTEE.

The seventh annual report of this important voluntary committee has already been published, but as its work is so intimately interlaced with the official tuberculosis work of the borough, the following extracts relating more or less to the general preventive scheme are given:—

During the year 66 persons were assisted by the Committee, 45 cases receiving grants from the Corporation Fund, and 21 from the Voluntary Fund. In all, 217 grants were made, and included:—

				Corporation Fund.	Voluntary Fund.	Total.
Milk	...	...	...	350 gallons	173 gallons	523 gallons
Eggs	...	...	...	2173	1098	3271
Meat	...	...	...	352 lbs.	148 lbs.	500 lbs.

Twelve grants of clothing, boots, and underclothing were made to special cases in sanatorium or before their admission during the year.

Eight grants were made by the Committee for the supply of dentures to patients who had had their teeth extracted under the Corporation's dental scheme. Four cases were provided with full sets of dentures free of cost; two patients were provided with dentures and one patient was provided with repairs to dentures, the cost being borne by the Public Assistance Committee; and one patient was provided with dentures at a charge of £1 11s. 0d. by the Committee. Another patient whose dentures were being provided by his health insurance society was referred to the Public Assistance Committee, who made a grant towards the cost.

The scale of income adopted in connection with the grants remains the same, as also the condition for the receipt of grants from the separate funds as set out in previous years.

Since the Committee came into existence just over seven years ago, 6,100 gallons of milk, 32,500 eggs, 4,100 lbs. of meat have been issued in grants.

The arrangement made with the Public Assistance Committee whereby they accept the Tuberculosis Officer's certificate for grants of extra medical necessities (including extra nourishment) to cases in receipt of public assistance relief, is still being continued, and this greatly reduced the grants of extra nourishment and clothing made by the Committee's Voluntary Fund.

The Committee again made special grants during the Christmas period by the issue of vouchers for extras, when not only the persons who were in receipt of assistance from the Committee, but also the borough patients in poor circumstances who were granted Christmas leave from the sanatorium were given grocery vouchers ranging from 5/- to 10/- according to their means. In all, 37 grants were made. The action of the Committee in making these special grants was greatly appreciated by the patients, who in many cases would have gone home to reduced circumstances.

The two car parks continue to provide an excellent service to the motoring public and beneficial employment to several ex-sanatorium patients as car park attendants. By the provision of the attendant's hut at the Crofts car park the Committee have now two well equipped huts for their attendants which are suitable for their specific purposes. Electric lighting is provided in each hut together with an electric heating stove, and they are well designed for the comfort of the



car park attendants. The hours of parking were reduced at the Corporation Street park by cutting down the last hour, i.e. from 12 mid-night to 11 p.m. and now both car parks are open from 9 a.m. to 11 p.m. The wages paid to the attendants were increased from £2 per week to £2 5s. 6d. During the year the personnel of the car park attendants was reviewed on three occasions, and in all six men were employed, four of whom were employed at the end of the year.

As a result of the report of the Tuberculosis Officer on the housing of tuberculous patients which was under consideration at the end of the year 1935 and was referred to in the report for that year, the matter was further considered by the Housing Committee of the Corporation, who granted six houses for the Committee's use as they become vacant. The Tuberculosis Officer was asked to revise the cases on the list of the Housing Department stated to be tuberculous, in order that cases who in his opinion were infectious could be given priority. The Committee adopted a scale of income similar to that applied to slum clearance cases for the re-housing of tuberculous persons, which is as follows :—

That the rebates be calculated on the following standard incomes per week :—

No. in family	2	3	4	5	6	7	8 (or over)
Standards	37/-	42/-	47/-	50/-	52/-	54/-	56/-

That a rebate of one quarter of the amount by which the household income is less than the standard income as above defined be allowed, subject to the minimum rent decided upon by the Council.

Minimum inclusive rent equals 5/10 (subject to variations in rates).

No tenant must pay less (in the first instance) than the rent he paid in his old house. This does not apply in the case of furnished rooms, which are considered separately.

The total family income to be assessed as follows :—

Parents : whole amount.

Children : three-quarters of their income.

Lodgers : (a) relatives. Count three-quarters of income, as with children.

(b) not relatives. Allow 2/6 for profit if not working.

Allow 5/- for profit if working.

At the end of the year, however, the Housing Department had not been able to let the Committee have any houses under this scheme. (Note : During the first quarter of 1937 a commencement was made).

## SECTION VIII.

### VENEREAL DISEASES.

The sessions of the treatment centre have been re-organised during the year, and the time table has been so extended that treatment is now available, for one sex or the other, for the major portion of the day. The chief extension of hours of treatment is on the female sessions, and has generally relieved the pressure during clinic hours all round. The medical officer's sessions for females have been increased to include two afternoon sessions of  $2\frac{1}{2}$  hours instead of a one hour session on Monday mornings, and the Friday morning and evening sessions remain unaltered. Since the additional sessions have come into operation the Friday morning session has almost ceased to function, but is being retained for the time being for the convenience of a few cases. Female intermediate treatment is now given every afternoon, Monday to Friday inclusive, from 2.0 to 5.0 p.m. in place of the two hours morning session on Mondays, Wednesdays and Fridays, whilst the Friday evening session from 6.0 to 8.0 p.m. is still retained. The part time female nurse, who previously attended for two sessions per week, was replaced by a nurse who now attends for five afternoon and one evening sessions per week solely for female intermediate treatment.

The medical officer's sessions for men remain the same, but with the re-organisation of the female sessions, it has been possible to extend the morning intermediate sessions daily up to 12.30 p.m. except on Tuesday mornings, when the medical male session takes the last hour of the morning's treatment as in the past, and on Friday mornings to 11.30 a.m.

The special medical session held at the child welfare centres for children which during 1935 had to be discontinued has been replaced in the re-organised scheme by a special medical session held at the V.D. centre on Saturday mornings from 10.30 a.m. to 12.0 noon. This session was felt to be timed best off school days, so that attendance at the clinic did not upset attendance at school, and that the whole of the junior members of families could attend for review and for treatment if necessary.

Details of the scheme of treatment which was put into operation on 4th May, 1936, are given herewith :—

CENTRE.—The Venereal diseases centre is situated at 12, Frederick Street, Rotherham, in the same building as the Tuberculosis Dispensary.

The medical officer is in attendance every week-day at 9.30 a.m. to 10.30 a.m.



MEDICAL SESSIONS.—Clinics, which are always attended by the medical officer, are held as follows :—

For men.

Tuesday	...	11.30 a.m. to 12.30 p.m. 6.0 p.m. to 8.0 p.m.
Wednesday	...	6.0 p.m. to 8.0 p.m.

For women.

Tuesday	...	2.0 p.m. to 4.30 p.m.
Thursday	...	2.0 p.m. to 4.30 p.m.
Friday	...	11.30 a.m. to 12.30 p.m. 6.0 p.m. to 8.0 p.m.

For children.

Saturday	...	10.30 a.m. to 12.0 noon.
----------	-----	--------------------------

#### INTERMEDIATE TREATMENT.

The centre is open for intermediate treatment at the following times :—

For men.	Morning.	Evening.
Monday	... 9.30 a.m. to 12.30 p.m.	6.0 p.m. to 8.30 p.m.
Tuesday	... 9.30 a.m. to 11.30 a.m.	6.0 p.m. to 8.30 p.m.
Wednesday	... 9.30 a.m. to 12.30 p.m.	6.0 p.m. to 8.30 p.m.
Thursday	... 9.30 a.m. to 12.30 p.m.	6.0 p.m. to 8.30 p.m.
Friday	... 9.30 a.m. to 11.30 a.m.	No session.
Saturday	... 9.30 a.m. to 12.30 p.m.	6.0 p.m. to 8.30 p.m.

For women.	Afternoon.	Evening.
Monday	... 2.0 p.m. to 5.0 p.m.	—
Tuesday	... 2.0 p.m. to 5.0 p.m.	—
Wednesday	... 2.0 p.m. to 5.0 p.m.	—
Thursday	... 2.0 p.m. to 5.0 p.m.	—
Friday	... 2.0 p.m. to 5.0 p.m.	6.0 p.m. to 8.0 p.m.

The figures for the year indicate that the changes were warranted and generally show some slight all round increase, the total attendances being 9,188 as against 8,605 for the previous year. The figures for individual attention of the medical officer are 4,009 as against 3,775.

This increase is on the female side, where it had previously been found almost impossible to give all the individual attention that was required. There is also a particular increase in the figures for intermediate treatment of non-venereal females, which is very satisfactory, as the intermediate sessions have been increased from four to six in order to improve the facilities for these cases.

The Saturday morning session is occupied by several families which are attending en masse as a result of family blood tests, even where only one member of the family is suffering from active disease. The attendance of children has been quite satisfactory except in the cases of a few boys of school age, who are not under good parental control. These cases are a continued source of worry, and with some of them it is almost impossible to ensure adequate treatment. As soon as active signs of disease clear up they cease to attend.

The following table presents a review of the statistics of the patients treated, and attendances at the centre during the past five years :—

						1932	1933	1934	1935	1936
Number of persons attending who were suffering from :—										
Syphilis	...	...	...	...	...	115	121	148	173	179
Soft chancre	...	...	...	...	...	—	—	—	—	—
Gonorrhoea	...	...	...	...	...	172	144	147	135	135
Conditions other than venereal	...	...	...	...	...	54	76	101	107	135
Totals	...	...	...	...	...	341	341	396	415	449
Total out-patient attendances						9600	9824	8963	8605	9188
Total in-patient days						77	114	71	69	157

Remarks have been made in previous reports on the value of bed as part of the venereal diseases treatment scheme. It will be seen on reference to the table that there has been some increase in in-patient treatment. This increase is still insufficient to cover actual needs. It is usually possible to admit to Ferham House pregnant women suffering from venereal diseases but occasionally beds are not available. The older chronic cases are not as a rule women of child bearing age and therefore are not admitted. The present situation therefore precludes any case from obtaining bed treatment until she becomes pregnant. There are times when the need for a bed is definite and urgent. On the male side there are no available beds. While the total number of cases requiring bed treatment during the year is probably not very great, the individual need is a very serious matter to the patient, and it is distressing to realise that one's treatment is not as efficient as it might be.

Drug treatment remains the same with the addition of two new forms of bismuth salts soluble in oil; these preparations appear to give good clinical results and have some definite advantages over the older preparations. A new preparation for the local treatment of gonorrhoea in females is on trial, and appears to be a definite advance on anything previously used: it will probably be in regular use in 1937.



During the winter 1935-36 no special propaganda films were shown, but in place of this a course of lectures by the British Social Hygiene Council was presented. The following is an extract from the annual report of the Council :—

“ On 26th February Dr. Drummond Shiels addressed a film illustrated mixed public meeting at the Technical Institute.

Attendance : 300.

Two film illustrated courses of four lectures were given to young men and young women respectively in March, 1936, the lecturers being Miss Bennet, Mr. Lee and Miss Swaisland. The average attendances were 114 and 128. As a result of the interest displayed the Principal of the Technical College, Mr. F. C. Clarke, decided to arrange a series of lectures on biology in the autumn of 1936 as part of the college curriculum.”

It is with regret that we note the death, after a brief illness, of Mr. F. Jessop, Orderly at the Veneral Diseases Centre. Mr. Jessop had held the position since the opening of the centre, and was a highly exteemed, efficient, and courteous officer whose services were always of the best.

In the following table is given the return relating to all persons who were treated at the Rotherham centre during the year ended 31st December, 1936.

	Syphilis		Soft chancre		Gonorrhoea		Con- ditions other than venereal		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Tot.
1. Number of cases on 1st January under treatment or observation ...	57	58	—	—	35	12	5	14	97	84	181
2. Number of cases removed from the register during any previous year which returned during the year under report for treatment or observation of the same infection ...	5	12	—	—	10	3	—	—	15	15	30
3. Number of cases dealt with for the first time during the year under report (exclusive of cases under item 4) suffering from :—											
Syphilis, primary ...	4	2	—	—	—	—	—	—	4	2	6
" secondary ...	—	2	—	—	—	—	—	—	—	2	2
" latent in 1st year of infection ...	7	9	—	—	—	—	—	—	7	9	16
" all later stages ...	3	4	—	—	—	—	—	—	3	4	7
" congenital ...	9	5	—	—	—	—	—	—	9	5	14
Soft chancre ...	—	—	—	—	—	—	—	—	—	—	—
Gonorrhoea, 1st year of infection ...	—	—	—	—	55	6	—	—	55	6	61
" later ...	—	—	—	—	10	—	—	—	10	—	10
Conditions other than venereal ...	—	—	—	—	—	—	45	70	45	70	115
4. Number of cases dealt with for the first time during the year under report known to have received treatment at other centres for the same infection ...	2	—	—	—	3	1	1	—	6	1	7
TOTALS OF ITEMS, 1, 2, 3 AND 4	87	92	—	—	113	22	51	84	251	198	449
5. Number of cases discharged after completion of treatment and final tests of cure ...	—	—	—	—	14	1	38	57	52	58	110
6. Number of cases which ceased to attend before completion of treatment and were, on first attendance, suffering from :—											
Syphilis, primary ...	8	3	—	—	—	—	—	—	8	3	11
" secondary ...	1	3	—	—	—	—	—	—	1	3	4
" latent in 1st year of infection ...	9	18	—	—	—	—	—	—	9	18	27
" all later stages ...	3	3	—	—	—	—	—	—	3	3	6
" congenital ...	7	10	—	—	—	—	—	—	7	10	17
Soft chancre ...	—	—	—	—	—	—	—	—	—	—	—
Gonorrhoea, 1st year of infection ...	—	—	—	—	26	7	—	—	26	7	33
" later ...	—	—	—	—	6	2	—	—	6	2	8



	Syphilis		Soft chancre		Gonorrhoea		Con- ditions other than venereal		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Tot.
7. Number of cases which ceased to attend after completion of treatment but before final tests of cure	1	—	—	—	9	—	—	—	10	—	10
8. Number of cases transferred to other centres or to institutions, or to care of private practitioners ... ..	1	1	—	—	6	—	—	—	7	1	8
9. Number of cases remaining under treatment or observation on 31st December ... ..	57	54	—	—	52	12	13	27	122	93	215
TOTALS OF ITEMS 5, 6, 7, 8 AND 9 ... (These totals should agree with those of items 1, 2, 3 and 4)	87	82	—	—	113	22	51	84	251	198	449
10. Number of cases in the following stages of syphilis included in item 6 which failed to complete one course of treatment :—											
Syphilis, primary ... ..	1	—	—	—	—	—	—	—	1	—	1
„ secondary ... ..	1	1	—	—	—	—	—	—	1	1	2
„ latent in 1st year of infection ... ..	3	9	—	—	—	—	—	—	3	9	12
„ all later stages ... ..	—	—	—	—	—	—	—	—	—	—	—
„ congenital ... ..	2	2	—	—	—	—	—	—	2	2	4
11. Number of attendances :—											
(a) for individual attention of the medical officers ... ..	1212	1255	—	—	689	204	220	429	2121	1888	4009
(b) for intermediate treatment, e.g., irrigation, dressing ... ..	18	5	—	—	3794	418	257	687	4069	1110	5179
TOTAL ATTENDANCES ... ..	1230	1260	—	—	4483	622	477	1116	6190	2998	9188
12. In patients :—											
(a) Total number of persons admitted for treatment during the year ... ..	—	2	—	—	—	2	—	2	—	6	6
(b) Aggregate number of “in-patient days” of treatment given ... ..	—	22	—	—	—	43	—	92	—	157	157
13. Number of cases of congenital syphilis in item 3 above classified according to age periods and areas.	Under 1 year		1 and under 5 years		5 and under 15 years		15 years and over		Totals.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
(a) Rotherham cases... ..	—	—	1	—	2	1	1	1	4	2	
(b) Other areas ... ..	1	—	—	—	3	3	1	—	5	3	
Total	1	—	1	—	5	4	2	1	9	5	

14. Chief preparations used in treatment of syphilis :— (a) Names of preparations .. (b) Total number of injections given (out-patients and in-patients) .. .. .	Arsenical.		Mercury	Bismuth
	Approved arsenobenzene compounds	Others		
	Stabilarsan sulphostab	Tryparsamide	Pil. Hutch. Tab. hyd. c. cret	Bisantol Neo-Cardyl Neo-Olesal Quinostab
	463	15	—	1355

15. Pathological work :— (a) Number of specimens examined at and by the medical officer of the treatment centre .. .. (b) Number of specimens from patients attending at the centre sent for examination to an approved laboratory	Microscopical		Cultural for gonorrhoea	Serum		Cerebro-spinal fluid	Others for diagnosis of venereal disease
	for syphilis	for gonorrhoea		for syphilis	for gonorrhoea		
		4	196	—	—	—	—
	—	—	—	174	—	—	



The following is a statement of new cases attending the treatment centre during the year, classified according to the areas in which the patients resided:—

Name of County or County Borough in which patients resided.	Rotherham C.B.	Yorkshire W.R.C.C.	Derbyshire C.C.	Durham C.C.	Nottinghamshire C.C.	Surrey C.C.	Bradford C.B.	Doncaster C.B.	Liverpool C.B.	Sheffield C.B.	Worcester C.B.	Edinburgh	Total.
Number of cases in item 3 from each area found to be suffering from:—													
Syphilis ... ..	25	18	—	—	—	—	—	1	—	1	—	—	45
Soft chancre ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—
Gonorrhoea ... ..	36	31	—	1	—	—	1	—	—	1	1	—	71
Conditions other than venereal ... ..	77	35	—	—	—	—	—	1	1	—	—	1	115
Total ... ..	138	84	—	1	—	—	1	2	1	2	1	1	231
Total number of attendances of all patients residing in each area ... ..	5459	3478	8	42	50	6	12	14	1	86	13	19	9188
Aggregate number of "in-patient days" of all patients residing in each area ... ..	87	70	—	—	—	—	—	—	—	—	—	—	157

The pathological work performed during the past five years in connection with venereal diseases is summarised in the following :—

	For detection of			For Wassermann re-action.				
	Spirochetes.	Gonococci.	Other organisms.					
Examinations of pathological material :—								
(a) Specimens from persons attending at the treatment centre which were examined at the Public Health Laboratory during the years :—								
1932	...	...	...	...	—	276	—	—
1933	...	...	...	...	—	311	—	—
1934	...	...	...	...	—	201	—	—
1935	...	...	...	...	7	175	—	—
1936	...	...	...	...	4	196	—	—
(b) Specimens from persons attending at the treatment centre which were sent for examination to an approved laboratory during the years :—								
1932	...	...	...	...	—	—	—	142
1933	...	...	...	...	—	—	—	121
1934	...	...	...	...	—	—	—	144
1935	...	...	...	...	—	—	—	135
1936	...	...	...	...	—	—	—	174

Besides the 174 tests for the Wassermann re-action which were sent from the centre, there were 325 tests for Wassermann re-action and 12 for gonococci sent to the Sheffield University Bacteriological Laboratory on behalf of institutions and local medical practitioners. 17 specimens of cerebro-spinal fluid were also examined for Wasserman re-action.



## SECTION IX.

### MATERNITY AND CHILD WELFARE.

#### MIDWIVES.

Forty five midwives notified their intention to practise, during 1936, within the area of the Rotherham local supervising authority.

Two midwives, hitherto resident in the West Riding area, were accepted as resident and practising in the Rotherham area on the 1st April, when the extension of the borough boundaries came into operation.

There was an increase of four notifications of independent practice but none of the midwives concerned attended any cases within the area during the year. Their intent to establish a practice was based on the hope of incorporation under the municipal scheme envisaged by the Midwives Act 1936.

At the end of the year 36 midwives were actively engaged in practice, the oldest being 80 years of age, and the last of the bona fide class.

The following is a summary of the notifications received :—

- 17 resident in the area and in independent practice.
- 10 resident outside the area and in independent practice.
- 5 in practice at the municipal maternity home.
- 13 on the staff of the public assistance hospital.

The inspection of midwives has been performed by the medical officer of health and the assistant medical officer for maternity and child welfare. Under their direction, the health visitors have carried out case vigilance as hitherto.

Four minor breaches of the rules were reported to the inspectors and in each case the midwife was cautioned. Circular letters were thereafter addressed to all the district midwives calling their attention to the rules which had not been strictly observed by these midwives.

One serious breach of the rules was reported to the Central Midwives Board for penal action the charge being :—

“ That the midwife did not call in medical aid in a case of abnormality, namely, inflammation of or discharge from the eyes of an infant occurring during the lying-in period.”

The condition resulted in ophthalmia neonatorum, fortunately with no permanent injury to the eyes.

The charge was heard on the 4th April and was found proved, sentence being postponed until the midwife had undergone one months residential post-certificate training. Arrangements were made for the training to be taken at the municipal maternity home and, at the end of the term, reports on her practice were furnished by the matron and the medical officer. Her professional conduct had been highly satisfactory during her period of training and the Board thereon decided to take no further action.

One midwife, against whom a conviction had been obtained at the court of quarter sessions, was also cited to appear before the Board. The Board considered the offence proved, but, before passing sentence, they decided to place the midwife on probation for 12 months. The local supervising authority was asked to furnish quarterly reports on her conduct and practice during the period of probation and the case was subjudice at the end of the year.

In view of the revised instructions of the Board issued in October as to the drugs which may properly be carried and administered by midwives, all the district midwives were circularised and asked to state the drugs of which they had been thoroughly instructed to use, dosage and method of administration or application. Whilst most of them were familiar with the aperients and antiseptics scheduled, knowledge of the stimulants and sedatives was found to be generally below the standard listed. The local practice is to call medical aid and to administer stimulants and sedatives under medical direction only.

Twenty two replies were received and of these :—

- 12 were familiar with ergot only.
- 5 with ergot and chloral hydrate.
- 5 with most of the drugs listed.



In view of the limited knowledge of the larger group it was decided to make no change in local practice until the Midwives Act of 1936 is put into operation.

The council contributed to the midwife's fee in 20 cases of necessity and in a further 29 cases paid compensation of 50% of the loss sustained by the midwife in the removal of her patient to hospital.

The following table is an analysis of the cases so removed :—

Removal ordered by.	Removed during				Complications necessitating removal.	Hospital to which admitted and result						Maternal deaths.
	Pregnancy.	1st stage.	2nd stage.	3rd stage.		Alma Road Hospital.		Municipal Maternity Home.		Jessop Hospital, Sheffield.		
						live birth	still birth	live birth	still birth	live birth	still birth	
Medical officer district ante-natal clinic	1				Toxic symptoms .. ..	1						
	1				Transverse lie .. ..	1						
	1				Contracted pelvis .. ..					1		
	1				Heart disease .. ..			1				
	1				Vaginal discharge .. ..	1						
	1				Vaginitis .. ..			1				
	1				Contracted pelvis .. ..			1				
	1				Loss of blood .. ..			1				
	1				Contracted pelvis .. ..			1				
	1				Loss of blood .. ..			1				
	1				Vaginal discharge .. ..	1						
	1				Vaginal discharge .. ..			1				
	1				? twins .. ..			2				
General practitioners		1			Hydramnios pendulous belly ..	1						
			1		Delay, 2nd stage .. ..	1						
		1			Obstruction cyst .. ..	1	Caes	arian	operation			
	1				Mental stress .. ..	1						
			1		Delay in labour .. ..	1						
	1				Contracted pelvis .. ..	1						
				1	Mental derangement .. ..	Deliv	ered	at ho	me (a	dmitt	ed to	Alma Rd)
			1		Delay oedema of vulva .. ..	1	1					
		1			Uterine inertia .. ..	1						
		1			Eclampsia .. ..	1						
		1			Placenta praevia .. ..		1					
			1		Delay, 2nd stage .. ..	1						
				1	Retained placenta .. ..	Deliv	ered	at ho	me (a	dmitt	ed to	Alma Rd)
	1				Abscess of vulva .. ..	1						1 pneu monia.
		1			Placenta praevia .. ..		1					
	1			Prolonged 1st stage .. ..	1							

On 8 occasions midwives were suspended from practice after contact with or liability to be a source of infection. Compensation in relation to the loss sustained was paid to the midwives during the periods of compulsory inactivity.

In 2 cases midwives were found to be carrying haemolytic streptococci when suspended from duty. In no case was there any proof of the midwife carrying infection after the period of suspension.

One midwife was suspended under section 6 of the Midwives Act 1918 pending the decision of the Board on the penal charge. No compensation was paid in this case as the charge was ultimately found proved.

Statistics relating to the 503 cases taken within the area by midwives in independent practice are given in the following table :—

Certificate number.	No. of cases.	Infants born alive.	Stillborn.	Dead.	Died within 1 month.	Feeding, 1st month.		Ophthalmia.	Puerperal fever.	Puerperal pyrexia.	Pemphigus.	Mothers dead.	Illegitimate.	Twins.	Medical aid.		
						Breast entirely.	Breast & or artificial.								Ante natal.	Neo and post natal.	For infant.
40344	62	63	1	3	2	50	13	—	1	—	—	—	—	2	24	31	17
78373	53	51	2	1	—	43	8	—	—	—	—	—	2	—	9	12	6
44515	52	50	2	3	2	41	9	—	—	—	—	—	2	—	90	31	20
57198	52	53	—	—	—	40	13	—	—	—	—	—	1	1	68	17	9
64479	50	50	—	1	1	41	9	—	—	—	—	—	3	—	16	22	8
40576	45	43	2	1	—	37	6	1	—	—	—	—	—	—	17	14	6
34006	44	43	1	2	1	35	8	1	—	—	1	—	3	—	51	17	4
66154	44	43	1	3	—	36	7	—	2	—	—	1	1	—	24	15	5
24756	20	20	—	1	—	17	3	—	—	—	—	—	1	—	3	1	1
45089	20	22	—	1	1	16	6	—	—	1	—	—	1	2	35	17	11
83759	16	16	—	2	1	8	8	—	—	—	—	—	—	—	7	7	1
75348	10	9	1	1	—	9	—	1	—	—	—	—	—	—	4	4	2
74737	9	9	—	—	—	8	1	—	—	—	—	—	—	—	—	3	—
55602	7	7	—	—	—	6	1	—	—	—	—	—	—	—	—	3	—
71521	7	7	—	—	—	6	1	1	—	—	—	—	—	—	1	2	2
56193	3	3	—	1	—	3	—	—	—	—	—	—	—	—	—	1	—
87602	3	3	—	—	—	3	—	—	—	—	—	—	—	—	1	—	—
3857	2	2	—	—	—	2	—	—	—	—	—	—	—	—	7	2	—
69712	2	2	—	—	—	2	—	—	—	—	—	—	—	—	—	1	—
82608	1	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—
68632	1	1	—	—	—	1	—	—	—	—	—	—	—	—	1	1	—
81229	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—
	503	498	10	19	8	405	93	4	3	1	1	1	14	5	358	202	102

21 midwives attended cases during 1936



Statistics relating to the 198 cases delivered at the Municipal Maternity Home and attended by the staff midwives are as follows :—

Certificate number.	No. of cases.	Infants born alive.	Stillborn.	Dead.	Died within 1 month.	Feeding, 1st month.		Ophthalmia.	Puerperal fever.	Puerperal pyrexia.	Pemphigus.	Mothers dead.	Illegitimate.	Twins.	Medical aid.		
						Breast entirely.	Breast &/or artificial.								Ante natal.	Neo and post natal.	For infant.
41005	22	21	1	—	—	20	1	—	—	—	—	—	1	—	31	10	1
68275	79	77	5	6	3	60	17	2	—	1	—	2	2	3	10	60	22
79196	77	77	1	2	2	62	15	1	—	—	—	—	1	1	2	32	19
96948	11	11	—	—	—	8	3	—	—	—	—	—	—	—	—	9	3
97331	9	8	1	—	—	7	1	—	—	—	—	—	2	—	—	3	—
	198	194	8	8	5	157	37	3	—	1	—	2	6	4	43	114	45

One case was treated for breast abscess at the Home and 10 were treated for a like condition which occurred after discharge from the Home.

Leg complications occurred in 2 cases and 1 case of ophthalmia neonatorum was notified after discharge from the Home.

The following conditions for which medical aid was required occurred in 127 of maternity home cases and in 434 of the district cases.

	Maternity Home.	District.
Pregnancy :—		
Albumin in the urine .. .. .	11	14
Excessive sickness .. .. .	1	3
Abortion actual or threatened .. .. .	—	3
Loss of blood .. .. .	—	7
Puffiness of hands and face .. .. .	1	9
Fits or convulsions .. .. .	—	—
Purulent discharge .. .. .	5	5
Sores on the genitals .. .. .	—	—
Dangerous varicose veins .. .. .	—	2
Deformity or disproportion .. .. .	3	11
Post term .. .. .	1	16
Ante-natal care .. .. .	16	257
Other causes .. .. .	5	31
Labour :—		
Purulent discharge .. .. .	—	—
Sores on the genitals .. .. .	—	—
Excessive bleeding .. .. .	14	13
Malpresentation .. .. .	2	15
Presentation other than uncomplicated head or breech .. .. .	—	4
No presentation made out .. .. .	—	2
Retained placenta and/or membranes .. .. .	17	8
Rupture of the perineum or soft parts .. .. .	37	53
Delay in labour .. .. .	16	48
Sleeping draught during labour .. .. .	—	6
Other causes .. .. .	1	11
Lying-in :—		
Fits or convulsions .. .. .	—	—
Offensive lochia .. .. .	2	—
Rigor with raised temperature .. .. .	1	—
Rise of temperature .. .. .	11	13
Steadily rising pulse rate .. .. .	—	—
Swelling of breasts with pain .. .. .	—	2
Excessive or prolonged bleeding .. .. .	—	—
White leg .. .. .	—	1
Post natal examination .. .. .	2	—
Insufficient supply of breast milk .. .. .	6	—
Subinvolution .. .. .	—	13
Other causes .. .. .	5	13
The child :—		
Injuries received during birth .. .. .	—	1
Malformations .. .. .	—	5
Dangerous feebleness .. .. .	12	14
Inflammation of or discharge from the eyes .. .. .	27	46
Inflammation of or discharge from the navel .. .. .	—	4
Stillbirths .. .. .	1	5
Swollen breasts .. .. .	—	1
Skin eruptions .. .. .	1	6
Other causes .. .. .	4	20
	202	662



## MIDWIVES ACT 1936.

The above Act is generally regarded as a piece of legislation long overdue and is an Act which, difficult though it may be to reduce to terms of practical politics, will be welcomed by public health authorities and by the midwives whose services will now be recognised at their proper value.

One great benefit it confers is that, for the first time, adequate legislation is afforded for dealing with the problem of the handywoman.

During 1936, the health visitors obtained information regarding 13 handywomen who attended confinements under medical direction. 74 cases are known to have been nursed by these women, but the extent of their practice is, in all probability, considerably larger than the figure ascertained.

It will be necessary to inform these women of the restrictions imposed by the new Act when the Minister of Health makes the order authorising section 6 of the Act to be put into operation. Thereafter, attendance for gain at a confinement by any person, other than one duly qualified, will constitute a penal offence upon which action can be taken.

The major function of the Act is to establish a salaried midwives service throughout the country under the jurisdiction of the local supervising authorities.

In general terms the Act will be as successful as the local schemes devised under its egis are attractive to the mass of the general public. Should schemes not be sufficiently embracive then the independent midwife will continue to flourish side by side with the official service.

The economics of the problem may tend to squeeze the independent midwife but sections of the community remain which are not affected by economic considerations and who will retain a right of choice beyond the operations of the official scheme.

That scheme will be most successful which gives due consideration to the rights and desires of all sections of the community, and is organised and staffed in a manner acceptable to the community it is intended to serve.

## ANTE-NATAL CLINICS.

During the year 3428 attendances were made at the five ante-natal clinics held in the Borough. The clinics were held at the following centres :—

Centre	Purpose of Clinic.	Day and time of session.
Ferham House	Maternity Home cases	Wednesday 2.30. pm.
Ferham House	District midwifery cases	Monday 2.30 p.m.
Greasbrough	District midwifery cases	Wednesday 2.30 p.m.
Cranworth Road	District midwifery cases	Friday 2.30 p.m.
Alma Road Hospital	Maternity ward cases	Friday 2.0 p.m.

Detailed information respecting the individual clinics follows in the succeeding sub-sections. It is interesting to note that 882 expectant mothers attended these clinics during the year, which number represents 73.3 per cent of the total notified births and still-births.

## FERHAM HOUSE MATERNITY HOME ANTE-NATAL CLINIC.

During the year 283 cases attended the ante-natal clinic which is run in conjunction with the Municipal Maternity Home.

The following table gives comparative figures for the past five years :—

Year.	Number who attended for the first time.	Number of examinations made.	Average attendance per session.
1932 ...	215	1046	20
1933 ...	209	1109	21
1934 ...	221	1145	22
1935 ...	220	1045	20.5
1936 ...	225	1252	23.6

In addition to the 225 new cases attending, 58 cases attended from the previous year, and of these cases 36 for various reasons were not delivered in the maternity home. 55 cases were attending at the end of the year.

## ANTE-NATAL CLINIC, ALMA ROAD HOSPITAL.

Sessions were held weekly at a clinic held in connection with the maternity ward of the above hospital, and 335 patients attended during the year, making 1400 attendances in all.



## DISTRICT ANTE-NATAL CLINICS.

There has been an extension of this service during the year as, on the 6th June, a weekly session was commenced at the Cranworth Road Centre.

There is now one weekly session for each section of the town area roughly divided by the river.

A part time session is also held weekly at the Greasbrough Centre taken over from the West Riding Authority on the 1st April. A separate report is furnished elsewhere on the general activities of this Centre.

Mrs. Rachel Powell, M.B., Ch.B., is in charge of the three sessions on a pro-rata sessional basis. This method of staffing proves reasonably satisfactory as a temporary expedient but the delegation of these duties to permanent medical officers, with wider scope, is highly desirable.

The responsibility of the part time officer ends with the examination of patients during pregnancy. Linkage with other maternal and child welfare activities, either of a private or an official nature, is achieved by clerical contact only.

Maternity, in an area yielding one thousand two hundred births per annum is a sufficiently wide problem to warrant the appointment of a specialist maternity officer to conduct and co-ordinate the official and private services dealing with parturition.

The following table indicates the work done at the three centres during the year.

	Sessions held	Number of women attending (A)			Attendances made			Average attendance per session	Average attendance of ante-natals per session	New cases 1936 included in (A)		
		Ante-natal	Post-natal	Birth control	Ante-natal	Post-natal	Birth control			Ante-natal	Post-natal	Birth control
Ferham .. .. .	49	188	56	50	515	78	70	13.5	10.5	172	51	25
Cranworth Road 6.6.36 ..	29	61	17	18	205	28	53	9.8	7	61	17	15
*Greasbrough 1.4.36 ..	28	15	1	6	56	1	8	2.6	2	15	1	6
Whole time sessions ..	78	264	74	74	776	107	131	12.0	9.2	248	69	46
Part time sessions ..	28	—	—	—	—	—	—	2.6	2.0	—	—	—

\*Part time sessions only.

Of the 363 cases who attended at the clinics for the first time in 1936 :—

195 were referred by midwives.

10 were referred by medical practitioners.

77 were referred by health visitors.

23 were referred from other clinics.

58 attended of their own volition.



The ante-natal cases attending are largely midwives cases.

The midwife referring a case gives the patient a sealed envelope containing her ante-natal record card. On examination, the doctor reports her findings on the card and this is returned to the midwife.

The doctor whom the patient desires to be called in at the confinement should medical aid be considered necessary is also informed of each examination.

Should the patient fail to keep a subsequent appointment, a notice is sent to the midwife regarding her patient's default.

The case cards of patients delivered by midwives are vised by the clinic doctor monthly so that she has some knowledge of the end results of cases which have come within her observation.

Cases of suspected abnormality are referred either to the Alma Road Hospital or the Municipal Maternity Home and should hospital care for confinement be deemed necessary, the midwife is compensated for the loss of her case.

That a close link is maintained with other maternity services is apparent by the following table which gives details of cases referred to other clinics during the year. Cases referred to :—

Venereal diseases clinic	...	...	...	21
Obstetric consultant	...	...	...	15
Maternity Home	...	...	...	8
Alma Road Hospital	...	...	...	19
General Hospital	...	...	...	1
Tuberculosis dispensary	...	...	...	1
Own doctor	...	...	...	6
Dental clinic	...	...	...	96

Dental treatment was augmented on the 1st April by a scheme for the provision of dentures to expectant and nursing mothers attending the clinics. The scheme, of which a detailed report is furnished elsewhere, has added impetus to the post natal attendance.

The following is a list of conditions found amongst the 74 women attending for post-natal examination ; and of the venue of treatment.

Conditions found	Referred to :—							
	Number	Own doctor	Dental clinic	Veneral diseases clinic	Alma Road Hospital	Jessop Hospital	Operations	Pessaries fitted and belts obtained
Abdominal hernia	1	—	—	—	—	—	—	1
Bartolyn's cyst	1	—	—	—	—	—	—	—
Cervical catarrh	3	—	—	—	—	—	—	—
Cystocele	2	—	—	—	—	—	—	—
Debility	1	—	—	—	—	—	—	—
Dental caries	25	—	25	—	—	—	—	—
Erosion of cervix	2	—	—	—	—	—	—	—
Inguinal hernia	1	—	—	—	1	—	Pending	—
Menopause	1	—	—	—	—	—	—	—
Miscarriage	3	—	—	—	2	—	—	—
Old tears—cervix	3	—	—	—	—	1	—	—
Piles	1	—	—	—	—	—	—	—
Prolapse of uterus	18	—	—	—	4	3	7	11
Retroflexion	1	—	—	—	—	—	—	—
Retroversion	5	—	—	—	1	3	1	1
Scarring of vagina	2	1	—	—	—	—	—	—
Sterility	2	1	—	—	—	—	—	—
Subinvolution	2	1	—	—	—	—	—	—
Ulcerated stomach	1	1	—	—	—	—	—	—
Vaginal discharge	8	—	—	8	—	—	—	—
Varicose veins	1	—	—	—	—	—	—	—
Visceroptosis	1	—	—	—	—	1	—	—
N.A.D.	3	—	—	—	—	—	—	—
	88	4	25	8	8	8	8	13

Four cases failed to attend at the hospital to which referred.

A separate report on the review of the birth control section during the past five years follows.



## BIRTH CONTROL.

In accordance with the provisions of memorandum 153/M & C W of the Ministry of Health, birth control advice has been available during the past five years to expectant and nursing mothers attending the district clinics for this purpose.

From a review of the activities in this connection, the following information is available :—

Year.	New cases.	Total attendances.
1932	11	17
1933	12	34
1934	11	21
1935	31	51
1936	46	131
Total	111	254

The increased enrolment of 1936 is probably due to the fact that two additional clinics were opened during the year, one at the Greasbrough centre taken over from the West Riding Authority on the extension of the borough boundaries at 1st April, 1936, and one at Cranworth Road on 6th June, 1936. The current register on the 31st December comprised 92 cases, a further 19 cases having been written off owing to removal, etc.

Although a notice is displayed at each child welfare and ante-natal clinic informing mothers that birth control advice on medical grounds is available, volitional attendance is relatively rare.

The women seeking advice are largely referred from other clinics as will be seen by the following table :—

Referred by	Ferham House.	Cranworth Road.	Greasbrough	Total
Health visitors .. .. .	13	18	1	32
Child welfare centres .. .. .	4	5	—	9
Midwives .. .. .	—	2	—	2
Doctors .. .. .	—	1	—	1
Venereal diseases officer .. .. .	—	1	—	1
Tuberculosis officer .. .. .	—	1	—	1
Maternity Home .. .. .	—	1	—	1
Post-natal clinics .. .. .	3	2	—	5
Ante-natal clinics .. .. .	3	1	5	9
Letters to both consorts after attendance of wife at an ante-natal clinic .. .. .	3	9	—	12
Volitional .. .. .	8	11	—	19
Total .. .. .	34	52	6	92

Of the 92 cases under review information has been obtained regarding eleven instances of failure ; three due to non-application of the advice given and eight to failure in the method adopted. A further two cases, for whom birth control was advised for a short period only, became pregnant and are not included in these figures. There is also a probable margin of failure resulting in miscarriage, information concerning which is difficult to obtain and only two instances are recorded.

The following table indicates the methods recommended and the relative success of the contraceptive used.

Method.	Total cases	Contraceptive		No report.	Pregnancies resulting from		Percentage of failures in relation to "contraceptive used."
		Used.	Not used.		Non-application	Failure of contraceptive	
Dutch cap .. .. .	27	23	3	1	2	5	22
Male sheath .. .. .	51	42	6	3	—	2	5
Sponge .. .. .	6	4	2	—	—	1	25
Cap and sheath .. .. .	2	2	—	—	—	—	—
Racial pessaries .. .. .	1	—	1	—	1	—	—
Not yet advised .. .. .	3	—	—	—	—	—	—
Pregnancy desired .. .. .	2	—	—	—	—	—	—
Total .. .. .	92	71	12	4	3	8	11.2

No charge is made for the contraceptives issued and each patient is supplied with a vaginal syringe if she has not already obtained one. A spermicidal ointment is given for use with each fitment.

The Dutch cap is more aesthetically acceptable in cases where it can be used intelligently and the vagina is suitable. This method in future should have a greater success if pessaries are added to the outfit and this will be done in the forthcoming year.

Many patients seem to find the sheath a simpler and more satisfactory method. It has proved the most successful but it is necessary that the husband's co-operation be assured before the method is recommended.

From general observation of the cases attending the following conclusions in regard to failure in practice have been arrived at :—

1. Failure to renew appliances.
2. Failure to use the given appliances regularly and correctly.



The following is a detailed list of the cases under review :—

No.	Previous history.	Reason advice given.	Method advised.	Result.
1	2 pregnancies, both difficult deliveries. Last, P.P.H.	Family doctor advised no further pregnancies, pruritis.	1936, sheath.	Used satisfactorily. No pregnancy.
2	6 pregnancies, last miscarriage.	Vaginal discharge. Referred for treatment. For operation later.	1936, Sheath.	Used satisfactorily. No pregnancy.
3	11 pregnancies. 2 miscarriages. Kidney trouble.	Toxaemia of pregnancy. Anaemia. Badly torn cervix. Referred to Hospital.	1933, Dutch cap. 1936, Dutch cap.	Used satisfactorily. No pregnancy.
4	6 pregnancies. 1st forceps. 2nd in sanatorium 4 months. Debility last 4 pregnancies. 1 miscarriage.	Cervical erosion and discharge. Referred for treatment.	1936, Sheath.	Used satisfactorily. No pregnancy.
5	8 pregnancies. 1 miscarriage. Toxaemia last 3 pregnancies.	Multipara. Toxaemia of pregnancy. Dropsy and jaundice 1935.	1935, Dutch cap.	Used satisfactorily. No re-attendance. No pregnancy.
6	8 pregnancies. 2 miscarriages. Extensive tear 1st confinement. Breast abscess 1936.	Multipara. Debility	1936, Dutch cap	Used satisfactorily. No pregnancy.
7	4 pregnancies.	Waddles on walking. Pain in back. Referred to General Hospital.	1936, Sheath.	Used satisfactorily. No pregnancy.
8	2 pregnancies. Excessive sickness. 1st instrumental.	Mammary abscess both breasts. Very anaemic.	1934, Dutch cap.	Advised use until general health improved. Live birth January, 1936. Pregnancy desired.

No.	Previous history.	Reason advice given.	Method advised.	Result.
9	6 pregnancies. 1st forceps. 2nd miscarriage. Varicose veins + Puerperal fever. White leg 1935.	Debility. Cystocele.	1936, Sheath.	Used satisfactorily No pregnancy.
10	6 pregnancies. 1 miscarriage.	Old sanatorium case.	1934, Dutch cap.	No re-attendance. No pregnancy.
11	2 pregnancies. 1st instrumental. Eclampsia over 2nd pregnancy.	Eclampsia 1936.	1936, Sheath.	Used satisfactorily.
12	Sugar ++ before and after delivery.	Diabetes. Referred to own doctor.	1935, Dutch cap. 1936, Dutch cap.	Used satisfactorily. No pregnancy.
13	7 pregnancies. Last stillborn.	Prolapse vaginal walls. Ring fitted, belt obtained. Erosion of cervix.	December, 1936.	To re-attend for examination and advice.
14	10 pregnancies. 1 miscarriage.	Prolapse of uterus. Ring fitted.	1935, Sheath.	Used until June, 1936, not since. No re-attendance.
15	7 normal pregnancies.	Prolapse of uterus. Ring fitted.	1936, Sheath.	Used satisfactorily.
16	3 pregnancies. 1st difficult Last two pregnancies caesarian section.	Rickety pelvis.	1935, Dutch cap. 1936, Dutch cap.	Regular attendance. Used satisfactorily. No pregnancy.
17	4 pregnancies. Kidney trouble over each.	Had operation :—fixation of uterus. ? polypus left kidney.	1935, Dutch cap. 1936, Dutch cap.	Used satisfactorily No pregnancy.
18	4 pregnancies.	Prolapse of uterus. Ring fitted. Vaginal discharge, under treatment.	1936, Sheath.	No report.



No.	Previous history.	Reason advice given.	Method advised.	Result.
19	9 pregnancies. 1st breech. 4th instrumental.	Prolapse of uterus. Ring fitted.	1934, Sheath. 1935, Sheath.	No attendance 1936. West Riding case. No report obtained.
20	3 pregnancies. 1 miscarriage. Excessive sickness. Puerperal sepsis 1935	Chronic cervical catarrh.	1936, Sheath.	Used satisfactorily. No pregnancy.
21	5 pregnancies.	Anaemia and debility.	1936, Sheath.	Used satisfactorily No pregnancy.
22	5 pregnancies. Haemorrhage over 4 pregnancies. Kidney trouble during last two.	Anaemia. Mitral murmur.	1932, Dutch cap. 1934, Dutch cap.	No attendance since 1934. Miscarriage 1934. Not practising method now.
23	6 pregnancies.	Anaemia and debility.	1936, Sheath.	Used satisfactorily.
24	9 pregnancies.	Prolapse of uterus ; for operation later.	1935, Sheath. 1936, Sheath.	Used satisfactorily. No pregnancy.
25	3 pregnancies. Severe varicose veins.	Dangerous varicose veins.	1936, Dutch cap. 1936, Sheath.	No faith in Dutch cap. Sheath used satisfactorily.
26	3 pregnancies. Sugar + + .	Diabetes.	1935, Dutch cap.	Used satisfactorily. No re-attendance. No pregnancy.
27	7 pregnancies. 1 miscarriage.	Vaginal discharge. Referred for treatment.	1934, Sheath.	No re-attendance. Not used. Thinks she is pregnant. Not confirmed.
28	9 pregnancies. Ruptured varicose vein in 1934. 2 confinements since.	Dangerous varicose veins.	1936, Sheath.	Sheath used.
29	4 pregnancies. Heart trouble last two.	Valvular disease, failing compensation.	1935, Sheath. 1936, Dutch cap.	Sheath failed. Still birth 20.6.36.

No.	Previous history.	Reason advice given.	Method advised.	Result.
30	5 pregnancies.	Uterus retroverted.	1936, Sponge.	Used satisfactorily.
31	7 pregnancies. Kidney trouble. Haemorrhage 1933.	Goitre. Very anaemic. A.P.H. last pregnancy.	1933, Dutch cap. 1934, Dutch cap. 1935, Dutch cap.	Cap failed, live birth 16.9.35. Not practising method now.
32	10 pregnancies.	Old multipara.	1935, Sheath. 1936, Sheath.	Regular attendance. Used satisfactorily. No pregnancy.
33	12 pregnancies. 3 miscarriages.	General health poor. Heart sounds poor. Losing weight. Cystocele and rectocele.	1934, Dutch cap.	No re-attendance. Not practising method.
34	7 pregnancies. Difficulty with placenta over four. Haemorrhage.	Anaemia and debility.	1936, Sheath.	Used satisfactorily.
35.	6 pregnancies. Pneumonia at confinement 1936.	Debility.	1936, Sheath.	Used satisfactorily. Too recent for report re pregnancy.
36	1 pregnancy. Caesarian section. Spinal curvature.	Spinal curvature.	1936, Dutch cap and Sheath.	Used satisfactorily.
37	4 pregnancies. Prolapse.	Prolapse of uterus.	1936, Sheath.	Used satisfactorily.
38	6 pregnancies. P.P.H. 1936.	Debility.	1936, Sheath.	Not used.
39	5 pregnancies. Tuberculous. Vaginal discharge + +. Infant born 1936—ophthalmia.	Tuberculous. Vaginal discharge + +. Referred for treatment.	1936, Sheath.	Used satisfactorily.
40	3 pregnancies. Retained placenta.	Debility.	1936, Sheath.	Used satisfactorily



No.	Previous history.	Reason advice given.	Method advised.	Result.
41	4 pregnancies. Prolapse after fourth.	Prolapse of uterus. Ring fitted.	1936, Sheath.	Used satisfactorily. No further pregnancy.
42	2 pregnancies.	Cervicitis.	1933, Sponge.	Used satisfactorily. No further pregnancy.
43	4 pregnancies, 1st normal, 2nd forceps, 3rd miscarriage, 4th premature twins.	Chest trouble. Old sanatorium case.	1933, Dutch cap.	Not practised 1936. No pregnancy since.
44	3 pregnancies. Vaginal discharge since first.	Vaginal discharge, under treatment. Had operation for ovarian cyst.	1936, Sheath.	Used satisfactorily. No pregnancy.
45	6 pregnancies.	Anaemia and debility. Low mentality.	1936, quinine pessaries.	Did not re-attend for further advice, doubtful if she could apply it. Pregnant 1936.
46	4 pregnancies. Persistent vomiting 2nd. Prolapse after 3rd.	Debility.	1936, Sheath.	Used satisfactorily. No further pregnancy.
47	12 pregnancies. 2 miscarriages. 2 inductions. 2 breech deliveries. 1 footling. 2 forceps. 3 normal.	Poor general health. Prolapse of rectum.	1933, Dutch cap.	Renewed frequently. Used satisfactorily. No pregnancy.
48	3 pregnancies. Last twins.	Mitral murmur. Cervix N.A.D. slight tenderness.	1936, Sponge.	Not practised. Husband objects.
49	7 pregnancies. Inguinal hernia after 3rd.	Double inguinal hernia. Referred to hospital for operation. Performed December 1936.	1936, Sheath.	Used satisfactorily. No pregnancy.
50	10 pregnancies.	Old multipara. Debility.	1936, Sheath.	Used satisfactorily No pregnancy.
51	3 pregnancies.	Old sanatorium case.	1936, Sheath	Used satisfactorily. No pregnancy

No.	Previous history.	Reason advice given.	Method advised.	Result.
52	3 pregnancies.	Very anaemic. Cough. Referred to Tuberculosis Dispensary.	1932, Dutch cap. 1933, renewed. 1934, renewed.	Failed in use. Delivered 15.6.36. No faith in method now.
53	5 pregnancies.	Anaemia and debility.	1936, sponge.	July. Satisfactory, health improved. September, ? pregnant, has taken strong purges. December, not pregnant.
54	2 pregnancies.	Uterus retroflexed.	1935, Dutch cap. 1936, renewed twice.	Used satisfactorily. No pregnancy.
55	3 pregnancies.	Rheumatism. Heart trouble.	1934, Dutch cap. 1936, Sheath.	Delivered 2.3.36. Dutch cap not used.
56	2 pregnancies, difficult deliveries. Contracted pelvis.	Contracted pelvis.	1936, Sheath.	Used satisfactorily. No further pregnancy.
57	5 pregnancies. 1st twins, difficult.	Thyroid enlargement. Exophthalmos.	1933, Dutch cap.	No further attendance. Cap used satisfactorily. No further pregnancy.
58	6 pregnancies, 1 triplets, others normal.	Amputation of breast 1934. Carcinoma. Baby born 6.5.35.	1935, Dutch cap. 1936, Renewed and sheath.	No confidence in Dutch cap. Using both. No further pregnancy.
59	9 pregnancies. 5 miscarriages, 1 forceps.	Cystocele and rectocele ? causing miscarriage. Ring fitted. Referred to hospital.	1935, Sheath. 1936, Sheath.	Used satisfactorily. No further pregnancy.
60	3 pregnancies. 1 miscarriage.	Prolapse. Ring fitted. Operation 1936	1936, sheath.	Not used. Husband found it painful to remove.



No.	Previous history.	Reason advice given.	Method advised.	Result.
61	1 miscarriage.	Debility. Birth control for short period. Pregnancy desired.	1935, Sheath.	Used 6 months. Now 4 months pregnant.
62	7 pregnancies. 1st instrumental. 2 born prematurely.	Debility and vaginal discharge. Retroflexion. Referred to Hospital.	1936, Sponge.	Now ? 2 months pregnant. Failed in use.
63	4 pregnancies. 1st miscarriage. Vaginal discharge since 2nd pregnancy.	Amputation of cervix.	1936, Dutch cap.	No report.
64	4 pregnancies. 1 instrumental, still-born. 1 miscarriage. Others normal.	Prolapse of uterus. Referred to Hospital. For operation when fit.	1935, Sheath. 1936, Sheath.	Regular use. No pregnancy.
65	7 pregnancies. 1 miscarriage. 2 premature deliveries. Eclampsia 1935.	Mitral stenosis and regurgitation.	1936, Dutch cap.	Used. Failed. Delivered 8.12.36. For further advice.
66	9 pregnancies. Weakness and debility last 3 pregnancies.	Debility.	1935, Dutch cap. 1936, Sheath.	No confidence in Dutch cap. Sheath used satisfactorily.
67	2 pregnancies. 1st instrumental. 2nd normal.	Lupus. Had skin graft.	1936, Sheath.	Used satisfactorily. No pregnancy.
68	12 pregnancies. Varicose veins +.	Dangerous varicose veins. Debility.	1936, not examined.	To return 1937. Patient undecided.
69	12 pregnancies. 1 breech ; others normal.	Puerperal fever last confinement. ? gallstones.	1936, Sheath.	Not used.
70	5 pregnancies. 1 miscarriage. 1 premature delivery.	Abdominal hernia. Special belt obtained.	1936, Sheath.	Used satisfactorily. No pregnancy.

No.	Previous history.	Reason advice given.	Method advised.	Result.
71	1 pregnancy. Premature delivery by induction. Kidney trouble.	Chronic cervicitis. Referred to hospital. Ovarian cyst. Operation 1936.	1935, Dutch cap. 1936, Sheath.	Dutch cap difficult to apply. Sheath satisfactory.
72	10 pregnancies, 4 still born. 2 premature deliveries.	Vaginal discharge since confinement 1936. W.R. negative. Referred for treatment.	1936, Sheath.	Used satisfactorily. No pregnancy.
73	5 pregnancies. Kidney trouble over three. Prolapse 1932.	Varicose ulcer, under treatment. ? tumour. Hospital December 1936.	1936, Sponge.	Not able to use Sponge. To re-attend for further advice.
74	6 pregnancies.	Debility.	1934, Dutch cap.	No further attendance. Used satisfactorily. No pregnancy.
75	7 pregnancies excessive sickness first three. Heart trouble last three.	Old multipara. Debility.	1936, Sheath.	No report.
76	5 pregnancies, kidney trouble first. Next 3 were instrumental. Last A.P.H., still born.	Discharge and backache since last confinement. Extensive scar left cervix.	1935, Sheath. 1936, Dutch cap.	Feeling much better. Used satisfactorily. No pregnancy.
77	2 pregnancies. Kidney trouble over both.	Cervicitis.	1935, Dutch cap.	Not used. Miscarriage October 1936.
78	4 pregnancies.	Very anaemic and nervy. Uterus retroflexed. Cervix scarred.	1934, Sheath. 1936, Sponge.	Sheath failed. Live birth November 1936. Is attending hospital.
79	6 pregnancies. Kidney trouble first two. Others difficult.	Toxaemia of pregnancy. Vaginal discharge.	1936, Sheath.	Husband objects to use. Not practised.
80	4 pregnancies. Last 4 months gestation—male. Bleeding one month before delivery.	Prolapse of uterus.	December, 1936.	Menstruating at time of visit. To re-attend.



No.	Previous history.	Reason advice given.	Method advised.	Result.
81	3 pregnancies. 1st miscarriage. 2nd forceps. 3rd kidney trouble and haemorrhage.	Toxaemia of pregnancy.	1936, sponge, Sheath.	Was afraid of losing sponge 'inside.' Sheath satisfactory.
82	11 pregnancies. 1 miscarriage. 1 premature delivery.	Pulmonary tuberculosis.	1932, Dutch cap. Nov., 1935. Sponge.	Was pregnant at time cap was fitted. Delivered 26.5.33. Could not use Dutch cap. Failed in use. Twins September, 1935. Both dead.
83	8 pregnancies. 2 miscarriages. Debility over last four.	Prolapse. On waiting list for operation.	1936, Sheath.	Operation September 1936. Not practised.
84	5 pregnancies. Debility and P.P.H. last two pregnancies.	Anaemia and debility. Prolapse. Ring inserted. Sent to convalescent home 1936.	1936, Sheath.	Used satisfactorily for 8 months. Husband now objects to use. To be fitted with Dutch cap.
85	4 pregnancies. Swollen feet and sickness over 1st. Last still born, A.P.H.	Poor general health. Pregnancy 1934. Sugar + +. Breast abscess later. Debility.	1934, Dutch cap. 1936, Renewed.	Used satisfactorily. No further pregnancy. Health improved.
86	5 pregnancies.	Debility.	1935, Sheath. 1936, Renewed.	Used satisfactorily. No further pregnancy. Health improved.
87	5 pregnancies. Last albuminuria and A.P.H.	Very anaemic. Vaginal walls slack.	1934, Dutch cap. 1936, Sponge.	Did not like sponge. Has returned to Dutch cap obtained privately.
88	1 pregnancy, very difficult forceps delivery, extensive rupture of perineum.	Broken down perineum. On waiting list for operation.	1936, Sheath.	Used satisfactorily. No pregnancy.
89	6 pregnancies.	Vaginal discharge. Referred for treatment.	1936, Sheath.	Used satisfactorily. No pregnancy.

No.	Previous history.	Reason advice given.	Method advised.	Result.
90	9 pregnancies.	Old sanatorium case. Pulmonary active.	1935, Dutch cap. 1936, renewed.	Used satisfactorily.
91	4 pregnancies, toxæmia each time. Eclampsia 1934, Jessop Hospital.	Kidney trouble. Told to have no more children. Bad scar left cervix.	1935, Dutch cap.	No re-attendance. Used for a time. Not co-habiting now.
92	5 pregnancies of which 3 were instrumental.	Goitre. Operation 1936.	1935, Dutch cap. 1936, renewed.	Used satisfactorily. No pregnancy.



## FERHAM HOUSE MATERNITY HOME

During the year 243 cases were admitted to the maternity home as compared with 240 in the previous year. Of this number, 198 were delivered, and the balance includes cases admitted and not confined at the end of the year, together with cases of "false" admission or cases requiring hospital treatment during the ante-natal period.

The statistics for the year 1936 are given in the following table:—

1	Number of beds	...	...	...	...	...	...	10
2	Number of maternity cases admitted during 1936	...	...	...	...	...	...	198
3	Average duration of stay	...	...	...	...	...	...	12 days
4	Number of cases delivered by—							
	(a) midwives	...	...	...	...	...	...	190
	(b) doctors	...	...	...	...	...	...	8
5	Number of cases in which medical assistance was sought by the midwife in emergency	...	...	...	...	...	...	145
6	Number of cases notified as							
	(a) puerperal fever	...	...	...	...	...	...	—
	(b) puerperal pyrexia	...	...	...	...	...	...	1
7	Number of cases of pemphigus neonatorum	...	...	...	...	...	...	—
8	Number of infants not entirely breast fed while in the institution	...	...	...	...	...	...	10
9	Number of cases of ophthalmia neonatorum with result of treatment in each case	...	...	...	...	...	...	2
10	Number of maternal deaths (and cause)	...	...	...	...	...	...	1
	1a. Secondary post-partum haemorrhage 36 hours after delivery.							
11	Number of foetal deaths							
	(i) stillborn	...	...	...	...	...	...	7
	(ii) within 10 days of birth	...	...	...	...	...	...	3

The above table shows only one maternal death occurring during the year ; actually two mothers died, but as one death was not directly due to pregnancy it is not classified under the heading of maternal deaths. The cause of death was certified as 1(a) cardiac failure, (b) infective nephritis following (c) B. coli cystitis with pregnancy.

Of the 198 cases delivered in the Home, 49 cases had previously been confined in the Home ; and 88 were first confinements. It has been remarked on several occasions that there is always some patient in the Home who has been before.

The average fee per patient during the year is £3 9s. 3d. as against £3 5s. 0d. for the previous year. This figure excludes all West Riding cases (19) who are charged the full fee £7 15s. 0d. ; and all venereal diseases cases (5).

The figures for attendance at the ante-natal clinic show an increase above previous years which is a little more satisfactory. The importance of early ante-natal supervision is still not realised and the tendency is still noted amongst multiparae, chiefly, to leave booking arrangements till the last few weeks of pregnancy. While this usually works out satisfactorily in the end, it is far too risky a procedure to recommend. Early visits need not be irksome and do not entail the wasting of much time, but they are quite definitely necessary if all patients are to be efficiently cared for. Pregnancy is not a disease and should not be considered in that light, but continued care under expert supervision is the only way to meet the insidious onset of pathological conditions associated with pregnancy. As has been pointed out previously the ideal to be aimed at in the practice of midwifery lies not in the heroic treatment of catastrophies as they arise, but in the intelligent anticipation and avoidance of these conditions; and this applies as much to mechanical difficulties in delivery as to disease associated with pregnancy.

#### ALMA ROAD HOSPITAL.

The following table gives particulars for the year 1936 of the cases dealt with at the maternity ward of the Alma Road Hospital.

1	Number of beds	...	...	...	...	...	...	35
2	Number of maternity cases admitted during 1936	...	...	...	...	...	...	339
3	Average duration of stay	...	...	...	...	...	...	14 days
4	Number of cases delivered by—							
	(a) midwives	...	...	...	...	...	...	296
	(b) doctors	...	...	...	...	...	...	36
5	Number of cases in which medical assistance was sought by the midwife	...	...	...	...	...	...	93
6	Number of cases notified as—							
	(a) puerperal fever	...	...	...	...	...	...	—
	(b) puerperal pyrexia	...	...	...	...	...	...	2
7	Number of cases of pemphigus neonatorum	...	...	...	...	...	...	1
8	Number of infants not entirely breast fed while in the institution	...	...	...	...	...	...	10
9	Number of cases of ophthalmia neonatorum with result of treatment in each case	...	...	...	...	...	...	—
10	Number of maternal deaths	...	...	...	...	...	...	9



Cause of death in each case.

- |   |  |
|---|--|
| 1. Ante-partum haemorrhage.<br>Placenta praevia.  | 6. Pulmonary embolism.<br>Parturition.   |
| 2. Puerperal parametritis and endometritis.   | 7. Acute heart failure.<br>Obstetric shock.<br>Ante-partum haemorrhage.<br>Placenta praevia.<br>Albuminuria. |
| 3. Pulmonary embolus.<br>Caesarean section.   | 8. Cardiac syncope.<br>Haemorrhage.<br>Central placenta praevia.<br>Caesarean section.                       |
| 4. Toxaemia.<br>Cellulitis of wound.<br>Caesarean section.<br>(Placenta praevia centralis). | 9. Peritonitis.<br>Caesarean section.<br>Dystocid.   |
| 5. Pulmonary embolism.<br>Pregnancy.<br>Prolonged labour.                                   |  |

11. Number of infant deaths—

(i) stillborn (including one born in ambulance on admission to hospital) . . . . .	32
(ii) within 10 days of birth . . . . .	11

### NOTIFICATION OF BIRTHS ACT, 1907.

The following table shows the births notified under this Act :—

Births notified.	Live births.	Still births.	Total.
From institutions and by doctors . . . . .	741	51	792
By midwives . . . . .	510	10	520
By sundry persons . . . . .	20	1	21
Total notified prior to registration . . . . .	1271	62	1333

### SUMMARY OF REGISTRARS' NOTIFICATIONS.

Births notified by registrars and	Live births.	Still births.	Total.
Attended by midwives . . . . .	—	—	—
Born in institutions or attended by doctors . . . . .	40	3	43
Total . . . . .	40	3	43

The above table of notifications as adjusted by inward and outward transfers gives the actual number of births occurring amongst the resident population.

	Live births	Still births	Total
Borough cases confined within the borough .. .. .	1170	52	1222
Borough cases confined outside the borough .. .. .	20	?	20
Corrected totals .. .. .	1190	52	1242

Extra urban cases confined in the borough of which notice was sent to the medical officer of the district in which the mother normally resided totalled 141 live births and 13 still births.

### HOME VISITING.

Two new appointments have been made during the year to meet the needs of the extended Borough and to allow visiting of the East Dene section which had been written off as non-visiting owing to staff insufficiency.

Miss A. Simm commenced duties on 20th April, 1936, and Mrs. M. Airton on 25th May, 1936.

Some adjustments of the districts had necessarily to be made in order to encompass the added areas.

There has been no change in the method of routine visiting ; the system adopted two years ago has been followed and has proved uniformly satisfactory.

Two problems now confront the health visitors concerning which there has been much expression of opinion.

The one is the increasing incidence of breast abscess and the other is the problem of prematurity and congenital inanition. These are reported on elsewhere.

Vigilance in regard to child neglect has been maintained as hitherto and valuable assistance has been rendered by Mr. Lewingdon, the local inspector of the N.S.P.C.C.

No prosecutions in respect of children under 5 years have been recorded in the Borough, but in one case taken at the inspector's instigation the father and step-mother were sentenced for neglect of school children whilst the infant in the household, the first child of the second marriage, was reported as being well nourished and well kept. The infant was too young to be separated from its mother and remained with her during the term of imprisonment.



Sundry investigations have been made in regard to seven cases of adoption of pre-school children.

Legislation on this subject is still faulty as the Act does not provide for official notification to the health authorities of the area to which the child is removed at the time the adoption order is granted.

There is no difficulty when the order is made by the local magistrates as the officer presenting the case notifies the medical officer of health of each order granted.

In the case of adoption orders granted outside the jurisdiction of the Borough magistrates the problem is not so simple and information is largely obtained by the area vigilance of the district health visitors.

The need for early and regular advice is urgent in circumstances in which a middle aged woman, probably with no previous experience in child nurture, takes into her home an infant during the early weeks of life. Official notification of transfer would eliminate the lapse of time during which factors, detrimental to the infant, might arise.

During the year, contact has been made, through the public assistance officer, with the house master and the superintendent of the scattered homes under the jurisdiction of the public assistance department and an arrangement has been made whereby a weekly return of admissions and discharges of infants under five years is furnished to the medical officer of health.

Such children are often orphaned, destitute or abandoned. Whilst within the care of the public assistance administration all is well but on discharge the only regular supervision is afforded by the health visitors.

Lack of this contact has hitherto been a weak link in the child welfare scheme. Cases were picked up by the health visitors when found on the area during routine visiting and this often after a serious lapse of time.

With inter-departmental linkage the cases can be followed up immediately after discharge and a better chance of well-being is afforded.

A weekly return of hospital admissions and discharges is also furnished but, as yet, medical notes are not transferred.

Records of pre-school health and progress of 90% of the under fives in the Borough are kept by the child welfare section.

These records would be more complete and therefore of more value if reports on hospital treatment were furnished regularly to the Department by all the hospitals providing treatment for the pre-school child.

This co-operation appears eminently desirable, but as yet, has not been achieved.

The following table shows the work done by the health visitors :—

Visits to :—

Birth control .. .. .	152
Expectant mothers (1st visits) .. .. .	432
do. (re-visits) .. .. .	279
Post-natal .. .. .	163
Still-births (1st and re-visits) .. .. .	107
Births .. .. .	1190
Infants under 1 year .. .. .	8796
Infants 1 to 5 years .. .. .	17921
Illegitimate infants under 1 year .. .. .	286
Illegitimate infants 1 to 2 years .. .. .	341
School entrants .. .. .	374
School children referred to school medical service .. .. .	84
Escorting children .. .. .	2
Boarded-out children .. .. .	136
Death enquiries .. .. .	17
Defects, following up visits to infants under 1 year .. .. .	331
Defects, following up visits to infants 1 to 5 years .. .. .	1101
"Housing and nutrition" enquiries .. .. .	132
Enquiries in respect of :—	
Medical aid (midwives) .. .. .	303
Homehelps .. .. .	69
Milk grants .. .. .	32
Philanthropic funds .. .. .	39
Convalescent treatment .. .. .	85
Attendances at :—	
Clinics, ante-natal .. .. .	78
Light .. .. .	22
Child welfare .. .. .	689
V.D. clinics .. .. .	215
V.D. intermediate treatment .. .. .	20
Special visits to midwives .. .. .	37
Enquiries in respect of :—	
Measles .. .. .	836
Chickenpox .. .. .	11
Pneumonia .. .. .	11
Whooping cough .. .. .	49
Puerperal pyrexia and fever .. .. .	2
Ophthalmia neonatorum .. .. .	9
Venereal disease .. .. .	1
Mental defectives .. .. .	532



Crowded houses	..	..	..	..	..	..	..	..	..	..	2
Workshops	..	..	..	..	..	..	..	..	..	..	10
Public lavatories	..	..	..	..	..	..	..	..	..	..	48
Scabies	..	..	..	..	..	..	..	..	..	..	3
Escorting mental defectives	..	..	..	..	..	..	..	..	..	..	15
Visits in respect of tuberculosis	..	..	..	..	..	..	..	..	..	..	2073
Attendances at tuberculosis dispensary	..	..	..	..	..	..	..	..	..	..	98
Total visits paid	..	..	..	..	..	..	..	..	..	..	35994
Half day attendances at clinics	..	..	..	..	..	..	..	..	..	..	1122
Escorting duties	..	..	..	..	..	..	..	..	..	..	19
Number of visits to homes	..	..	..	..	..	..	..	..	..	..	28082
Average number of visits to homes per health visitor	..	..	..	..	..	..	..	..	..	..	3510

Enquiries in respect of 1223 confinements were made by health visitors during the year.

The following tables indicate the age in relation to fertility and the occupations of the parous women prior to marriage.

Age at recent confinement.  years	Primipara.	2nd para.	3rd para.	4th para.	5th para.	6th para.	7th para.	8th para.	9th para.	10th para.	11th para.	12th para.	13th para.	23rd para.	Total.
15	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1
16	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
17	5	1	-	-	-	-	-	-	-	-	-	-	-	-	6
18	14	1	-	-	-	-	-	-	-	-	-	-	-	-	15
19	45	8	-	-	-	-	-	-	-	-	-	-	-	-	53
20	37	7	1	1	-	-	-	-	-	-	-	-	-	-	46
21	36	17	4	-	-	-	-	-	-	-	-	-	-	-	57
22	57	20	5	2	-	-	-	-	-	-	-	-	-	-	84
23	50	20	4	3	-	-	-	-	-	-	-	-	-	-	77
24	33	25	12	3	1	-	-	-	-	-	-	-	-	-	74
25	29	23	19	12	1	-	-	-	-	-	-	-	-	-	84
26	44	21	8	4	2	-	-	-	-	-	-	-	-	-	79
27	27	26	13	13	3	3	-	-	1	-	-	-	-	-	86
28	34	20	9	9	11	1	-	-	-	-	-	-	-	-	84
29	18	12	11	14	5	2	-	-	-	-	-	-	-	-	62
30	17	15	10	2	1	7	2	-	-	-	-	-	-	-	54
31	7	7	5	7	3	2	3	1	-	-	-	-	-	-	35
32	7	11	13	6	5	3	4	1	-	-	-	-	-	-	50
33	5	2	14	5	5	2	5	2	-	-	-	-	-	-	40
34	3	8	9	6	2	2	3	1	1	1	-	-	-	-	36
35	-	4	6	3	7	4	7	-	3	1	-	-	-	-	35
36	2	7	7	5	3	5	2	1	5	-	-	-	1	-	38
37	-	-	5	3	6	9	1	-	2	-	-	-	-	-	26
38	2	1	2	2	-	4	1	3	5	2	1	-	-	-	23
39	1	1	4	4	2	3	-	1	2	1	-	-	-	-	19
40	1	1	5	1	3	2	2	-	-	2	1	-	-	-	18
41	1	1	1	-	-	3	2	1	2	2	-	1	-	-	14
42	-	-	1	1	3	-	-	-	-	1	-	1	-	-	7
43	-	-	1	-	1	-	1	2	-	1	-	-	-	-	6
44	-	-	1	-	-	1	-	-	1	-	-	-	-	-	3
45	-	-	1	1	-	3	-	1	1	-	-	-	-	1	8
46	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
47	-	-	-	-	1	-	-	-	-	1	1	-	-	-	3
48	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total	476	259	171	107	65	56	33	14	23	12	3	2	1	1	1223



Occupations prior to marriage, or in the case of the illegitimate, prior to confinement.												
Bakeress	..	..	..	..	..	..	..	..	..	..	..	7
Barmaid	..	..	..	..	..	..	..	..	..	..	..	19
'Bus conductor	..	..	..	..	..	..	..	..	..	..	..	2
Cinema attendant	..	..	..	..	..	..	..	..	..	..	..	4
Clerk	..	..	..	..	..	..	..	..	..	..	..	22
Collector	..	..	..	..	..	..	..	..	..	..	..	2
Cook	..	..	..	..	..	..	..	..	..	..	..	9
Domestic	..	..	..	..	..	..	..	..	..	..	..	820
Domestic nurse	..	..	..	..	..	..	..	..	..	..	..	9
Dressmaking and tailoring	..	..	..	..	..	..	..	..	..	..	..	16
Factory worker	..	..	..	..	..	..	..	..	..	..	..	76
Farm worker	..	..	..	..	..	..	..	..	..	..	..	1
Hairdresser	..	..	..	..	..	..	..	..	..	..	..	2
Hawker	..	..	..	..	..	..	..	..	..	..	..	1
Heavy industries	..	..	..	..	..	..	..	..	..	..	..	37
Laundress	..	..	..	..	..	..	..	..	..	..	..	11
Milk round	..	..	..	..	..	..	..	..	..	..	..	4
Nurse	..	..	..	..	..	..	..	..	..	..	..	9
Packer	..	..	..	..	..	..	..	..	..	..	..	9
Palmist	..	..	..	..	..	..	..	..	..	..	..	1
School teacher	..	..	..	..	..	..	..	..	..	..	..	7
Shop assistant	..	..	..	..	..	..	..	..	..	..	..	101
Stage	..	..	..	..	..	..	..	..	..	..	..	10
Textile worker	..	..	..	..	..	..	..	..	..	..	..	8
Waitress	..	..	..	..	..	..	..	..	..	..	..	25
Wardmaid	..	..	..	..	..	..	..	..	..	..	..	7
Window cleaner	..	..	..	..	..	..	..	..	..	..	..	4
Total	..	..	..	..	..	..	..	..	..	..	..	1223

Employment of married women, other than in casual domestic work is not general in the Borough.

## ADDED AREAS.

## GREASBROUGH.

The whole of the village of Greasbrough which was the major part of the area of the Greasbrough Urban District Council was added to the Borough on 1st April, and home visiting in this area was organised in accordance with the system obtaining throughout the Borough.

The West Riding Authority transferred the notifications of births of the past five years, and the area case records of children under school age.

Since the 1st April, 38 live births and five stillbirths (including one set of twins) occurred amongst the normally resident population. One death under one year was recorded and the infantile mortality rate for the nine months period was, therefore, 26.32 per 1000 live births.

This is a record of which the mothers of the village might be reasonably proud.

Between 20th April and 31st December 1005 visits were paid in the district by the area health visitor.

The child welfare clinic, hitherto held in the village hall on Monday afternoons was transferred to Wednesday afternoons. The premises were lacking in certain amenities. A wash bowl and hot water supply have been fitted in the weighing and consulting rooms.

It was found necessary to augment the equipment taken over and for this reason it was not possible to commence ante-natal work before 3rd May.

The centre is in the charge of Dr. Rachel Powell assisted by the health visitor and the district nurse. Voluntary service is also rendered by a local midwife.

The early part of each session is devoted to ante-natal and post natal examination. Birth control advice on medical grounds is also available to nursing mothers attending the centre.

Fifteen expectant mothers attended during the nine months and 56 attendances were registered, an average of 3.73 attendances per patient. A further nine attendances were made by seven patients attending post-natally and the average attendance of the three groups was 2.6 per session.

Child welfare consultations form the major portion of the work and the average attendance per session was 21.6.



The live register on the 31st December was as under :—

Year of birth.	Number of children registered.
1932	38
1933	30
1934	41
1935	39
1936	38
Total	186

126 children attended during the nine months and 779 attendances were made, an average of 6.2 attendances per child.

The pre-school population is estimated at 220 so that the centre appears to be functioning at a fair level.

Intermediate minor treatment sessions are held on Monday and Friday afternoons.

Dental, ophthalmic, aural and orthopaedic consultations are arranged by appointment and selected cases have been referred to the appropriate consultant.

#### CANKLOW.

Borough extension of the boundary at this point increased the visiting area by two rather long streets thickly populated.

No separate records have been kept but the need of a child welfare centre nearer to this point has been considered and negotiations in regard to premises for this purpose are in process.

#### BROOM AND WHISTON.

Extensions at these points have brought into the Borough considerable villa property largely owner occupied.

These areas too, are remote from existing child welfare centres and will have to be considered in future centre development.

## CHILD WELFARE CENTRES.

There has been no increase of centre sessions other than the one at Greasbrough included by reason of the extension of the borough boundaries on the 1st April and of which a separate report is furnished.

Two sessions per week at Ferham House, three at Cranworth Road and one per fortnight at Thorpe Hesley have been continued as hitherto.

Efforts to encourage the attendance of the two to five year olds have been continued.

Birthday letters have been sent to the parents of children who have not attended a centre or have defaulted in attendance over a long period. The idea of annual examination is growing in the minds of parents and many have responded to the invitation to present their children for annual examination.

A relative comparison in the attendance (excluding the Greasbrough figures) over the last three years indicates the increasing attendance of the toddler group :—

Children who attended during the year and who at the end of the year were :—						1934	1935	1936
Under 1 year	...	...	...	...	...	660	643	652
Between 1 and 5 years	...	...	...	...	...	1838	2301	2390

No further expansion of the service is possible without an increase in the number of sessions held.

There are blank afternoons at the child welfare centre premises which could be utilised without increasing establishment charges other than by staff and cleaning costs. Additional staff is the first essential.



The following is the combined report of child welfare attendances :—

	Ferham House.	Cranworth Road.	Thorpe Hesley.	Greasbrough from 1.4.36	Total.
Number of sessions held .. .. .	97	149	25	36	307
New cases enrolled during the year and who at the time of their enrolment were :—					
Under 1 year .. .. .	355	450	17	37	859
Over 1 year .. .. .	104	151	6	52	313
Cases enrolled in preceding years and who at the time of their first attendance in 1936 were :—					
Under 1 year .. .. .	162	202	6	2	372
Over 1 year .. .. .	655	908	26	35	1624
Total number of children attending and who at the time of their first attendance in 1936 were :—					
Under 1 year .. .. .	517	652	23	39	1231
Over 1 year .. .. .	759	1059	32	87	1937
Total attendances made :—					
Under 1 year .. .. .	3017	3863	165	327	7372
Over 1 year .. .. .	3882	5596	159	452	10089
Average attendance per session .. .. .	71.12	63.49	13	21.6	
Average number of medical consultations per session ..	45.7	38.1	12.8	14.3	

The following table gives details of attendances of children under five years at clinics held on centre premises.

	Children under 1 year.	Children 1 to 5 years.	Total
Child welfare clinic .. .. .	7372	10089	17461
Ultra-violet light clinic .. .. .	13	344	357
Orthopaedic clinic .. .. .	9	69	78
Minor treatment clinic .. .. .	515	828	1343
Aural clinic .. .. .	21	296	317
Ophthalmic clinic .. .. .	1	153	154
Dental clinic .. .. .	—	357	357
Orthopaedic treatment clinic .. .. .	18	245	263
Total .. .. .	7949	12381	20330

An average attendance at the town centres of approximately 70 per session in reality means that attendances vary from 40 to over 100 per afternoon.

An average of 45 medical consultations also means a corresponding variation.

Should the doctor be in constant attendance for  $2\frac{1}{2}$  hours per session the average length of a consultation is three and a fraction minutes including the time taken in the child arriving at and leaving the chair in the consulting room.

The normal examination of a toddler takes longer than that of an older child. Contact with the child has to be made and much though one may wish to examine the molars for instance, force is to be deprecated. The examination has to be a playtime and acceptable to the child. An atmosphere of rush is fatal to achieving this end.

The sessions are definitely too overcrowded to allow the work to be thoroughly done and much is sacrificed to expediency.

The health visitor exercises discretionary powers of selection of cases needing to see the doctor and has authority to sign milk forms etc. at intermediate visits. Appointments for medical consultations are made and toddlers are undressed before entering the consulting room for examinations. Waste of time is minimised as much as possible.



With a growing clientele (and desirable as it is to expand contact with the two to five year olds) it is difficult to see how satisfactory results are accomplished. Somewhere there must be a "crowding out" and this being so the possibility looms large of the missed case resulting disastrously.

A concentration on essentials is arrived at by devious means and perhaps the most helpful is the close linkage between area home visiting reports and centre records. Where the health visitor suspects departure from the normal, notes are made on the clinic chart prior to the doctor seeing the case. By this means, the doctor's attention is focussed to points of doubt, which, owing to lack of time, he or she might otherwise have failed to notice. Defects diagnosed are tabulated on the clinic record and are thereafter investigated at each visit until written off as remedied.

A card index is kept of all defects diagnosed at the centres and of the treatment obtained thereafter.

The following is the report obtained from this source :—

	Remedied.		Under obser- vation and/or treat- ment.	No action taken to end of year.	School entrants	Dead.	Total.
	Medical treat- ment.	Surgical treat- ment.					
Adenoids .. ..	2	2	16	1	2	—	23
Anaemia and undersized	67	—	360	17	90	3	537
Aural defects (not summarised) .. ..	11	—	8	—	—	—	19
Blepharitis .. ..	30	—	19	—	—	—	49
Catarrh .. ..	13	—	9	—	—	—	22
Conjunctivitis .. ..	20	—	8	—	—	—	28
Corneal ulcer .. ..	—	—	1	—	—	—	1
Cough and chest conditions .. ..	45	—	22	—	5	—	72
Cyst of eye or ear ..	—	1	4	—	—	—	5
? Deaf .. ..	—	—	1	—	—	—	1
Dental caries .. ..	—	283	76	1	32	—	392
Diarrhoea and vomiting	22	—	3	—	—	2	27
? Dumb .. ..	—	—	1	—	—	—	1
Eczema .. ..	33	—	18	—	1	1	53
Eneuresis .. ..	16	—	10	—	5	—	31
Eye conditions (not summarised) .. ..	17	—	7	—	—	—	24
Fits .. ..	2	—	14	—	7	—	23
Foreign body in ear ..	2	—	—	—	—	—	2
Glands enlarged .. ..	59	1	46	1	12	1	120
Heart condition .. ..	6	—	13	—	—	1	20
Impetigo .. ..	57	—	12	—	—	—	69
Inguinal hernia .. ..	11	1	11	—	1	2	26
Injuries .. ..	11	—	3	—	—	2	16
Inflammation of the eyes	40	—	4	—	—	1	45
Intertrigo .. ..	10	—	4	—	—	—	14
Mastoiditis .. ..	—	—	1	—	—	—	1
? Mentally defective ..	—	—	8	—	2	3	13
Naevus .. ..	6	—	22	1	—	—	29
Nasal discharge .. ..	3	—	3	—	1	—	7
Ophthalmia .. ..	3	—	—	—	—	—	3
Orthopaedic defects ..	8	—	50	—	7	3	68
Otorrhoea and otitis ..	76	1	36	—	3	1	117
Phimosis .. ..	100	48	47	5	1	2	203
Rheumatism .. ..	—	—	—	—	2	—	2
Rickets .. ..	47	—	85	—	11	—	143
Ringworm .. ..	2	—	—	—	—	—	2
Scabies .. ..	5	—	—	—	—	—	5
Septic conditions .. ..	85	—	47	—	9	—	141
Squint .. ..	—	—	95	1	3	—	99
Tapeworm .. ..	1	—	1	—	—	—	2
Threadworms .. ..	42	—	15	1	5	—	63
Tonsillitis and enlargement .. ..	5	11	55	2	12	—	85
Tonsils and adenoids ..	3	42	26	4	13	—	88
Tuberculosis .. ..	—	—	—	—	1	—	1
Umbilical hernia .. ..	135	—	89	1	1	3	229
? Venereal disease .. ..	—	—	14	—	—	—	14
Wasting .. ..	—	—	—	—	—	3	3
Others .. ..	149	—	34	—	9	1	193



Defects observed by health visitors amongst children not attending child welfare centres.

Defects.	Treated.	Under observation or treatment.	Not treated.	Total.
Anaemia and undersized .. ..	2	2	21	25
Aural defects .. ..	13	29	18	59
Blepharitis .. ..	3	1	—	4
Dental caries .. ..	11	4	126	141
Eczema .. ..	4	—	—	4
Eneuresis .. ..	1	8	2	11
Fits .. ..	3	1	—	4
Heart condition .. ..	—	2	—	2
Impetigo .. ..	24	1	2	27
Inflammation of eyes .. ..	8	—	1	9
Inguinal hernia .. ..	1	1	1	3
? Mentally defective .. ..	—	2	—	2
Naevus .. ..	—	1	5	6
Orthopaedic conditions .. ..	2	—	1	3
Phimosis .. ..	4	1	3	8
Rickets .. ..	8	16	9	33
Scabies .. ..	3	—	—	3
Squint .. ..	2	7	7	16
Threadworms .. ..	8	1	3	12
Umbilical hernia .. ..	14	4	3	21

### CONGENITAL SYPHILIS.

No progress has been made in the detection of and treatment of congenital syphilis in children under five years.

85 children registered at the centres are either known to have suspicious histories or to have manifest suggestive signs.

At the commencement of the year the medical officers of the centres were instructed to refer suspicious cases to the children's session at the venereal diseases clinic for investigation.

This method does not appear acceptable as the resulting attendance was poor and cannot have touched the fringe of the problem in a town with 1200 births per annum.

9 cases were accepted at the venereal diseases clinic for observation.

6 cases were accepted for treatment.

3 cases were not accepted for treatment.

It is suggested that special sessions for diagnostic purposes should be held at the child welfare centres and that selected cases should attend by appointment.

Where the diagnosis is confirmed I am of the opinion that there would be little difficulty in getting mothers to attend at the venereal diseases clinic for treatment for their infants. Naturally they hesitate to attend purely on suspicion, but if the material facts of a confirmed diagnosis is explained a greater response would be obtained.

#### BREAST ABSCESS.

Breast abscess is known to have occurred in 32 of the 1223 confinements investigated by the health visitors and of the 32 cases, 16 were primipara.

Nine cases occurred amongst the 503 confinements taken by district midwives and eleven in cases confined at the municipal maternity home. In all but one instance the infection occurred after the period of attendance of the attendant concerned.

Infection of the breast is a complication of child bearing which is increasing in incidence. In the absence of data it is impossible to make any conclusions. It is however, surprising that the highest number of cases should have occurred amongst the women who were confined at the maternity home where detailed instruction on the technique of breast feeding is available to the mothers concerned.

Inability to breast feed is also increasing and it is probable that the two problems are associated. Investigation appears desirable but the medical officer for maternity and child welfare has not found this possible owing to the pressure of other duties.



## INFANTILE MORTALITY.

The following table gives the details concerning infantile mortality:—

CAUSE OF DEATH.				Under 1 week.	1—2 weeks.	2—3 weeks.	3—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 one year.
<b>All Causes :</b> certified				21	2	8	3	34	17	10	11	15	87
uncertified				—	—	—	—	—	1	—	1	—	2
Small-pox	...	...	...	—	—	—	—	—	—	—	—	—	—
Chicken-pox	...	...	...	—	—	—	—	—	—	—	—	—	—
Measles	...	...	...	—	—	—	—	—	—	—	—	3	3
Scarlet fever	...	...	...	—	—	—	—	—	—	—	—	—	—
Whooping cough	...	...	...	—	—	—	—	—	1	—	—	1	2
Diphtheria and croup	...	...	...	—	—	—	—	—	—	—	—	—	—
Erysipelas	...	...	...	—	—	—	1	1	—	1	—	—	2
Tuberculous meningitis	...	...	...	—	—	—	—	—	—	—	—	1	1
Pulmonary tuberculosis	...	...	...	—	—	—	—	—	—	—	—	—	—
Other tuberculous diseases	...	...	...	—	—	—	—	—	—	—	—	—	—
Meningitis (not tuberculous)	...	...	...	—	—	—	—	—	—	1	2	1	4
Convulsions	...	...	...	3	1	2	—	6	—	—	—	1	7
Laryngitis	...	...	...	—	—	—	—	—	—	—	—	—	—
Bronchitis	...	...	...	—	—	—	—	—	—	—	1	2	3
Pneumonia (all forms)	...	...	...	—	—	1	—	1	6	3	3	2	15
Diarrhoea	...	...	...	—	—	—	—	—	2	2	—	—	4
Enteritis	...	...	...	—	—	—	1	1	4	1	1	1	8
Gastritis	...	...	...	—	—	—	—	—	1	—	—	—	1
Syphilis	...	...	...	—	—	—	—	—	—	—	—	—	—
Rickets	...	...	...	—	—	—	—	—	—	—	—	—	—
Suffocation, overlying	...	...	...	—	—	—	—	—	—	—	—	—	—
Injury at birth	...	...	...	1	—	—	—	1	—	—	—	—	1
Atelectasis	...	...	...	2	—	—	—	2	—	—	—	—	2
Congenital malformations	...	...	...	—	—	—	—	—	3	1	2	1	7
Premature birth	...	...	...	13	1	3	1	18	—	—	—	—	18
Atrophy, debility & marasmus	...	...	...	—	—	1	—	1	1	1	1	1	5
Other causes	...	...	...	2	—	1	—	3	—	—	2	1	6
Totals	...	...	...	21	2	8	3	34	18	10	12	15	89

Nett births in the year : legitimate infants ... .. 1199  
 illegitimate infants ... .. 46

Nett deaths in the year : legitimate ... .. 81  
 illegitimate ... .. 8

Infantile mortality rate per 1,000 births : legitimate ... .. 67  
 illegitimate ... .. 173

## PREMATURITY AND DEBILITY AT BIRTH.

Neo-natal mortality remains the major problem of child welfare.

89 infants died last year before reaching one year of age and of these 34 died within one month of birth.

The analysis of these deaths shows that seventeen occurred in hospital, sixteen at home, and one in a private nursing home.

In noting the number of deaths in hospital it must be remembered that the majority of cases of toxæmia and other morbid conditions of pregnancy are delivered in hospital and that therefore the proportion of feeble infants born and of still births is higher in hospital practice.

The maternal causation of prematurity and foetal immaturity must therefore be borne in mind and the possibility of attacking the problem from this source by the provision of a specialist maternity service should be considered.

Prematurity is a result and not a cause and, although better care of the weakly born is necessary if they are to survive, real prevention will only be encompassed in the solution of the larger problem of securing full maternal function.

In promoting the care of the weakly born there is urgent necessity for hospital care. Such cases as are treated in hospital at present are nursed in the lying in wards or in the general children's wards.

Apart from the specialist nursing required in these cases the high susceptibility of the newly born to catarrhal infections complicates the problem.

Barrier nursing offers the only safe solution and this cannot be undertaken except in wards specially adapted to the purpose.

Concentrated individual nursing has rescued "quins" and "quads". Is such a social service to be achieved only on a commercial basis by those dramatic cases in which it "pays to advertise"?

Neo-natal deaths have been recorded in detail in the reports of 1934 and 1935. It remains to reiterate that a further reduction of the infantile mortality rate will only be achieved by action taken to reduce deaths of infants occurring within the first few weeks of life.



Infantile diarrhoea, although not generally prevalent, resulted in thirteen deaths under two years, which were spread over the year and not, as is usual, concentrated in the third quarter.

The deaths occurred as under :—

Alma Road Hospital	...	...	...	...	...	10
Sheffield Royal Hospital	...	...	...	...	...	1
Private nursing home	...	...	...	...	...	1
Died at home	...	...	...	...	...	1

The superintendent of Alma Road Hospital was communicated with regarding the mortality arising from this cause and he kindly furnished his observations on the eight cases which had then occurred. In these cases admission to hospital had been obtained for the following conditions :—

Bronchitis	...	...	...	...	...	...	1
Colic	...	...	...	...	...	...	1
Green stools	...	...	...	...	...	...	1
Marasmus and bronchitis	...	...	...	...	...	...	1
Wasting	...	...	...	...	...	...	1
Circumcision	...	...	...	...	...	...	1
Pemphigus	...	...	...	...	...	...	1
Broncho pneumonia	...	...	...	...	...	...	1

The two later cases were admitted suffering from diarrhoea and vomiting.

The variety of the causes of admission and the common cause of death in these cases again indicates that ward provision for the care of sick children needs developing in the Borough.

#### VOLUNTARY HELP REPORT.

During the past year, the helpers have continued their visits to the child welfare centres. Twenty seven ladies have attended in rotation at the five clinics held weekly to serve tea to the mothers, and to help where possible.

## FREE AND ASSISTED MILK SCHEME.

The following table gives a statement of the working of the scheme during the year :—

				Cows' milk	Dried milk
Number of applications received	..	..	..	5472	1621
Number granted free	..	..	..	4699	1373
Number granted half cost	..	..	..	557	172
Number disallowed	..	..	..	216	76
Approximate quantity	..	..	..	17551½ gallons	7187 packets
Approximate cost	..	..	..	£1903 7 6	£445 10 0

Applications are renewed monthly.

Included in the above table is the amount of milk shown hereunder granted during the year under the transferred service from the Public Assistance Committee to the Maternity and Child Welfare Sub-Committee, in pursuance of the Local Government Act, 1929.

				Cows' milk	Dried milk
Number of applications received	..	..	..	1487	336
Number granted free	..	..	..	1251	297
Number granted half cost	..	..	..	233	37
Number disallowed	..	..	..	3	2
Approximate quantity	..	..	..	4896½ gallons	1643 packets
Approximate cost	..	..	..	£53 5 8	£106 10 9

205 expectant mothers, 585 nursing mothers and infants under 18 months, and 616 infants over 18 months received milk assistance during the year.

## COD LIVER OIL.

The scheme for the free distribution of cod liver oil preparations as outlined in the report for the year 1932 has been continued during the year under review.

## MUNICIPAL DEPOTS FOR THE SALE OF DRIED MILK, Etc.

During the year, at the two depots, 25,044 packets of dried milk products were sold or distributed under the assisted milk scheme. In addition, 103 gallons, 124 ozs. of cod liver oil emulsion, 134 gallons, 20 ozs. of pure cod liver oil, and 187 gallons, 74 ozs. of Parrish's food were similarly disposed of ; 4681 lbs. of malt and cod liver oil products were also sold or given free.



## CONVALESCENT HOME.

Forty mothers and babies were sent to the Yorkshire Home for Mothers and Babies at Harrogate during the summer. Six women were also sent to the Woofindin Home, Sheffield.

## HOMEHELPS.

During 1936, 46 homes were attended by the homehelps who were employed on 765 days.

The demand for the service shows no increase as during the past ten years 40 to 50 homes per annum have been attended.

The extent of the scheme since its inauguration is summarised below :—

Year.	Number of homes attended.	Number of days on which home helps were employed.
1925     ...     ...	17	244
1926     ...     ...	18	275
1927     ...     ...	52	938
1928     ...     ...	50	956
1929     ...     ...	47	763
1930     ...     ...	47	946
1931     ...     ...	49	958
1932     ...     ...	59	1247
1933     ...     ...	59	935
1934     ....     ....	39	709
1935     ...     ...	50	1063
1936     ...     ...	46	765

## MATERNITY OUTFITS.

The maternity outfits supplied by the Stoddart Bequest have fulfilled a useful function during the year although there has been a decrease in the demand. Each bag contains all the necessary clothing and essential bedding for a confinement and the bags are sterilised before each issue. Nineteen calls were received during the year. One maternity outfit was included in the equipment taken over from the West Riding Authority at the Greasbrough child welfare centre. This had never been used and as there was no demand for it in the village it has been used to furnish renewals to the bags already in use.

## ORTHOPAEDIC SCHEME.

Number of sessions held	...	...	...	...	7
Number of cases examined	...	...	...	...	45
Number of splints supplied and shoes adjusted	...	...	...	...	79
Number of children who received indoor treatment	...	...	...	...	2
Number of children who received extern treatment	...	...	...	...	14

One child was on the waiting list for indoor treatment at the Yorkshire Children's Orthopaedic Hospital, Kirbymoorside at the end of the year.

## Current register of cases 31st December, 1936.

Hemiplegia	...	...	...	...	...	...	1
Knock-knee	...	...	...	...	...	...	5
Infantile paralysis	...	...	...	...	...	...	3
Talipes	...	...	...	...	...	...	7
Wry neck	...	...	...	...	...	...	2
Rickets	...	...	...	...	...	...	6
Osteomyelitis	...	...	...	...	...	...	1
Paresis	...	...	...	...	...	...	2
Flat foot	...	...	...	...	...	...	3
Shortening of arm	...	...	...	...	...	...	1
Lack of tone (mental defective)	...	...	...	...	...	...	1
Curvature	...	...	...	...	...	...	1
Poor chest expansion	...	...	...	...	...	...	1
Extra toe	...	...	...	...	...	...	1
Total	...	...	...	...	...	...	<u>35</u>

Two cases of acute poliomyelitis under five years were notified during the year. One refused indoor treatment and remained in the care of the family doctor ; the other has been examined by the orthopaedic surgeon and in both cases recovery appears to have been complete.

## SCHOOL ENTRANTS.

The particulars of pre-school health and progress of infants entering school have been submitted to the school medical officer at monthly intervals.

It has been said that the school medical officer's report on his school entrants is the index of the success of child welfare activities. This is not entirely true as the primary school examination does not take place until the child reaches eight years.

The child passes out of the influence of the child welfare service at five years and much that is detrimental to the child may occur in the three years between five and eight.



## CERTAIN DISEASES.

## Puerperal fever :

Cases notified	...	...	...	...	...	...	3
Removed to Norton Hall	...	...	...	...	...	...	1
Removed to Alma Road Hospital	...	...	...	...	...	...	2
Deaths	...	...	...	...	...	...	1

## Puerperal pyrexia : ... ..

Cases notified	...	...	...	...	...	...	9
Treated at Alma Road Hospital	...	...	...	...	...	...	1
Treated at Ferham House Municipal Maternity Home	...	...	...	...	...	...	1
Treated at home	...	...	...	...	...	...	2
Removed to Norton Hall	...	...	...	...	...	...	5
Deaths	...	...	...	...	...	...	—

## Ophthalmia neonatorum :

Cases notified	...	...	...	...	...	...	7
Nursed at home...	...	...	...	...	...	...	2
Nursed by health visitors	...	...	...	...	...	...	3
Nursed by Maternity Home staff	...	...	...	...	...	...	2
Recovered	...	...	...	...	...	...	7
Vision impaired	...	...	...	...	...	...	—
Deaths	...	...	...	...	...	...	—

## Pemphigus neonatorum :

Cases notified	...	...	...	...	...	...	3
Treated at Alma Road Hospital	...	...	...	...	...	...	2
Treated at Child Welfare Centre	...	...	...	...	...	...	1

There are no blind children in the borough under five years of age.

## WHOOPING COUGH :

Reliable statistics concerning this disease are unobtainable, as it is not notifiable. During the year five deaths were certified giving this disease as the cause.

## DENTAL SCHEME.

Dental treatment is given to (1) children under five years of age, referred by the child welfare doctors, (2) expectant mothers, referred by the maternity centre doctors and (3) tubercular patients referred from the sanatorium or dispensary.

Only the most urgent cases are seen in group (1) which is to be regretted, since the loss of milk teeth, especially back teeth, at such early ages does great harm to the permanent dentition (irregularity of the second teeth results from too early extraction of milk teeth), apart from interfering with the child's mastication and consequently, digestion. Regular dental attention of infants would mean that the child's first impressions of a dental surgery would be more pleasant than those he would obtain from having an abscessed tooth extracted; the socket of such a tooth is painful and unpleasant for several days afterwards even though the extraction be painless.

The mouths of many expectant mothers are really filthy and can only be satisfactorily treated by complete extractions. Dentures are now supplied to those necessitous people who are unable to obtain them from a private practitioner or from health insurance benefit and eight patients were supplied with artificial teeth during 1936 and ten remain to be dealt with. It is unfortunate that many mothers are edentulous and so can hardly obtain that maximum nourishment from their food which is desirable when they are expecting and nursing their baby. This is solely a matter of education and unavoidable in any dental scheme confined only to expectant mothers.

Applications for dentures are assessed on the following scale :—

No. in family.	Income less rent.	
	Free.	Half cost.
2	£1 10 0	£2 0 0
3	£1 14 0	£2 4 0
4	£1 17 0	£2 7 0
5	£2 0 0	£2 10 0
6 or more	£2 3 0	£2 13 0

All cases of single persons to be considered by the Committee.



The following table gives details of the applications for dentures received from expectant and nursing mothers :—

Applications received	...	...	...	...	...	21
Granted free	...	...	...	...	...	14
Granted half-cost	...	...	...	...	...	1*
Granted at cost	...	...	...	...	...	3
Disallowed	...	...	...	...	...	3
Dentures supplied	...	...	...	...	...	8
Remain to be dealt with	...	...	...	...	...	10

The attention given to tubercular patients has been greatly increased in 1936. Visits are made for urgent cases to the sanatorium when required, the others being treated at Ferham House. Ten patients were fitted with dentures.

The following table similar to previous years, gives the details of dental treatment during 1936.

Group	Total attendances	No. of Individuals treated	Extractions		Fillings		Anaesthetics		Other operations.
			perm. teeth	temp. teeth	perm. teeth	temp. teeth	local	general	
Tuberculosis	155	35	179	7	19	—	64	7	73
Maternity	280	93	773	—	12	—	25	155	102
Child Welfare	353	305	—	838	—	16	7	327	8
Total	788	433	952	845	31	16	96	489	183
1935	515	325	393	747	27	21	69	352	89

#### BOARDED-OUT CHILDREN.

Ten children have been under inspection during the year and 136 visits have been paid.

The following table relates to the administration of Part I. of the Children Act, 1908, as amended by Part V. of the Children and Young Persons Act, 1932, for the year 1936 :—

I. Notification :—

(i) Number of persons receiving children for reward on the register at the end of the year .. .. .	10
(ii) Number of children on the register :—	
(a) at the end of the year .. .. .	10
(b) who died during the year .. .. .	—
(c) on whom inquests were held during the year .. .. .	—

II. Visiting :—

(i) Number of infant protection visitors holding appointments under Section 2 (2) at the end of the year :—	
(a) Health visitors .. .. .	1
(b) Female, other than health visitors .. .. .	—
(c) Male .. .. .	2
(ii) Number of persons (in addition to or in lieu of visitors under (i) above) or societies authorised to visit under the proviso of Section 2 (2) of the Act of 1908 .. .. .	8 health visitors

III. Proceedings taken during the year :—

No. of cases.	Section of Act under which taken.
---------------	-----------------------------------

IV. Number of cases in which the Local Authority has given a sanction during the year :—

(i) Under (a) of Section 3 of the Act of 1908 .. .. .	—
(ii) Under (b) of Section 3 of the Act of 1908 .. .. .	—
(iii) Under (c) of Section 3 of the Act of 1908 .. .. .	—
Total .. .. .	—

V. Number of orders obtained during the year under Section 67 of the Act of 1932 :—

(i) From a court of summary jurisdiction .. .. .	—
(ii) From a single justice .. .. .	—

Fifteen foster children have been dealt with during the year.

Three have attained the age of nine years and their names have been removed from the register.

One has been returned to his parents and confirmation of his reception has been obtained from the medical officer of health of the area to which he was transferred.



An adoption order has been obtained by the foster parents in respect of another infant.

Ten cases remained on the register at the end of the year.

Of these ten children, three are attending school (two attained school age during 1936) and seven are under school age.

Four of the pre-school children are in regular attendance at child welfare centres and two of these have received treatment under child welfare schemes ; one had operative treatment for tonsils and adenoids and the other was fitted with glasses for the correction of a squint.

The other two have no registered defects.

Of the three non centre attenders one is tubercular and has been examined at the tuberculosis dispensary during 1936. The remaining two are well.

Monthly visits have been paid to registered children and the general care has been found to be reasonably good.

Payment for maintenance presents a difficulty in the fostering of children and in only half the cases has payment been continued regularly.

In five cases regular payments have been made in sums varying from two shillings to fifteen shillings per week.

In one case the infant had been accepted on an intention to pay but no payments have been made.

In two cases payments are made at irregular intervals and the amounts received have not been sufficient to cover the cost of child maintenance.

In two cases payments have lapsed and one foster mother has received no assistance towards the maintenance of the child during the past 3½ years.

It has not been necessary to take any action against foster parents during the year.

## SECTION X.

## MENTAL DEFICIENCY.

In the following table particulars are given for the year 1936 of mental defectives (A) "subject to be dealt with" by the Local Authority, and (B) who may become "subject to be dealt with" by the Local Authority.

A.—Number of cases "subject to be dealt with" :—

						Males.	Females.	Total.	
1.	Under " order " :—								
	(a)	(1) In institutions (excluding cases on licence).							
		Under 16 years of age	...	...	...	5	1	6	
		Aged 16 years and over	...	...	...	23	29	52	
	(2)	On licence from institutions.							
		Under 16 years of age	...	...	...	-	-	-	
		Aged 16 years and over	...	...	...	-	1	1	
	(b)	(1) Under guardianship (excluding cases on licence).							
		Under 16 years of age	...	...	...	-	-	-	
		Aged 16 years and over	...	...	...	2	2	4	
	(2)	On licence from guardianship.							
		Under 16 years of age	...	...	...	-	-	-	
		Aged 16 years and over	...	...	...	-	-	-	
2.	In " places of safety."								
		Under 16 years of age	...	...	...	-	-	-	
		Aged 16 years and over	...	...	...	-	1	1	
3.	Under statutory supervision						12	12	24
	Of whom—								
	(a)	Awaiting removal to an institution				8	6	14	
4.	Action not yet taken under any one of the above headings :—								
	(a)	Notified by Local Education Authority (Sec. 2 (2) )				1	2	3	
	(b)	Mental defectives in receipt of Poor Law relief :—							
	(1)	Institutional							
		(a)	In Public Assistance institutions and municipal general hospitals not approved under Section 37			8	13	21	
		(b)	In institutions certified under the M.D. Acts (including those approved under Section 37) —						
		(i)	Cases " placed " under Sect. 3			-	-	-	
		(ii)	Other cases			-	1	1	
	(2)	Domiciliary				20	20	40	
	(c)	Otherwise " ascertained "				1	-	1	



	Males.	Females.	Total.
B.—Number of cases not at present “subject to be dealt with” but for whom the Local Authority may subsequently become liable :—			
1. In institutions or under guardianship—dealt with under Sec. 3 :—			
(a) In regard to whom the Local Authority contributes under its permissive powers ... ..	—	—	—
(b) Maintained wholly by parents, relatives or others ... ..	—	—	—
2. Reported to the Local Authority from any reliable source and recognised by them as mentally defective but as to whom no action under the Mental Deficiency Acts has been taken			
(a) Children between the ages of 14 and 16 years ... ..	17	22	39
Of whom number, if any, under voluntary supervision ... ..	17	22	39
(b) All other cases ... ..	51	75	126
Of whom number, if any, under voluntary supervision ... ..	51	75	126

Also there were

	Males.	Females.	Total.
(a) Number of instances in which licence was granted during 1936 :—			
1. From institutions ... ..	—	1	1
2. From guardianship ... ..	—	—	—
(b) Number of instances in which cases on licence have been returned to institutions or transferred to guardianship during the year 1936 :—			
1. To institutions... ..	—	—	—
2. To guardianship ... ..	—	—	—

Of the cases notified by the Local Education Authority under Section 2 (2) during the year, there were :—

	Males.	Females.	Total.
Sent to institutions by “order” ... ..	—	—	—
Placed under guardianship by “order” ... ..	—	—	—
Placed under statutory supervision ... ..	1	2	3
Placed in “places of safety” ... ..	—	—	—
Died or removed from area ... ..	—	—	—
Action not yet taken (a) in receipt of Poor relief ... ..	—	—	—
(b) Others ... ..	—	—	—
Total ... ..	1	2	3

Of the total number of mental defectives known to the Local Authority there were :—

(a) Number who have given birth to children during 1936			
(1) After marriage ... ..	—		
(2) While unmarried ... ..	1		
	Males.	Females.	Total.
(b) Number who have married during year ... ..	—	—	—

At the end of the year the total number of defectives known to the Local Authority was 319. Of these, 63 were under "order," 58 being in institutions, 1 on licence from an institution and 4 under guardianship. One case was in a "place of safety": 62 were in receipt of public assistance relief, comprising 22 institutional and 40 domiciliary cases. The remaining 193 were maintained in their homes, 27 of whom were under statutory supervision.

The 58 cases under "order" in item A.1. (a), (1), were in the following certified institutions:—40 cases in the St. Catherine's Certified Institution; 12 cases in the Whittington Hall Certified Institution; 4 cases in the Stoke Park Colony; and one case each in the Cell Barnes Colony and the Balby Public Assistance Institution.

There were also 7 Rotherham cases in the Rampton State Institution.

One patient was released on licence to her own home during the year from the Eagle House Hostel.

Of the 4 cases under guardianship, 3 were under the care of the Brighton Guardianship Society, and 1 was under the care of the Central Association for Mental Welfare.

One case in the care of the Public Assistance Committee was in the David Lewis Colony. One case was detained in the Alma Road Hospital as in a "place of safety" and 22 others were in residence in the institution being in receipt of public assistance institutional relief.

The physical health of the defectives known to the Local Authority was generally good. Four deaths occurred during the year.

At the St. Catherine's Certified Institution one female high grade patient died of tuberculosis. This bed becoming vacant, adjusted the over occupancy of female high grade beds, and was therefore not filled. Two boys under 16 years of age and 1 male high grade patient were admitted during the year, whilst two high grade boys on reaching 16 years of age were transferred to the male adult block.



No other alteration occurred in the bed occupancy of the remainder of the beds at St. Catherine's during the year, and the following statement shows the allocation and occupation at 31st December, 1936, of the Rotherham beds at this institution :—

		MALES			FEMALES		Total
		High grade		Low grade	High grade	Low grade	
		Boys under 16 years	Adults				
Beds allocated	...	3	18	3	15	1	40
Beds occupied	...	2	20	3	15	—	40

At the end of the year 1 high grade boy's bed and 1 low grade female bed were vacant. It is hoped to fill the former bed during the early part of 1937, but as yet there is no suitable case for the female low grade bed. Two male adult high grade beds are over occupied.

The responsibility of 8 cases was transferred from the West Riding County Council to the County Borough as on 1st April, 1936, by the extension of the borough boundaries. Two cases were "under order" and are in the Whittington Hall Certified Institution and the Balby Public Assistance Institution respectively, and the other six cases are under supervision in their own homes.

## SECTION XI.

**BLIND PERSONS.**

The number of blind persons registered in the borough at the 31st December, 1935, was 146. During the year 1936 the number of new cases registered was 22 and the deaths or removals 14. The number on the register at the end of the year was 154.

The following tables will be of interest :—

**DISTRIBUTION.**

Intra-institutional								
Sheffield Workshops :	Workers	...	...	...	...	...	...	9
	Trainees	...	...	...	...	...	...	4
Royal Blind School, Sheffield	...	...	...	...	...	...	...	1
Other residential institutions	...	...	...	...	...	...	...	2
Public assistance institutions	...	...	...	...	...	...	...	4
Mental hospitals	...	...	...	...	...	...	...	2
Extra-institutional	...	...	...	...	...	...	...	132
								154

**AGE AND SEX.**

Age.								Males.	Females.	Total.
0—5	...	...	...	...	...	...	...	—	—	—
5—16	...	...	...	...	...	...	...	—	1	1
16—20	...	...	...	...	...	...	...	2	1	3
21—30	...	...	...	...	...	...	...	7	3	10
31—40	...	...	...	...	...	...	...	8	6	14
41—50	...	...	...	...	...	...	...	11	4	15
51—60	...	...	...	...	...	...	...	14	6	20
61—70	...	...	...	...	...	...	...	24	23	47
71 and over	...	...	...	...	...	...	...	23	21	44
								89	65	154

**EMPLOYABILITY (over 16 years of age).**

								Males.	Females.	Total.
Employed	...	...	...	...	...	...	...	10	4	14
Training	...	...	...	...	...	...	...	3	2	5
Unemployable	...	...	...	...	...	...	...	75	59	134
Waiting training	...	...	...	...	...	...	...	1	—	1
								89	65	154



## EMPLOYMENT.

Factory : Basket makers	..	..	..	..	..	..	3
Mat makers	..	..	..	..	..	..	3
Knitters	..	..	..	..	..	..	4
Knitter at Liverpool Blind Asylum (training)	..	..					1
Brush makers	..	..	..	..	..	..	3
At home or outside : Masseur	..	..	..	..	..	..	1
Knitter	..	..	..	..	..	..	1
Mat maker	..	..	..	..	..	..	1
Pianoforte tuner	..	..	..	..	..	..	1
Traveller	..	..	..	..	..	..	1
							<hr/> 19 <hr/>

Five of the above cases are trainees.

For the ninth year in succession there have been no blind children under the age of five years. The one child under 16 years of age on the register is resident at the Royal Blind School, Sheffield.

All blind persons in the borough who are suitable for technical training are receiving this at the Sheffield Corporation Workshops for the Blind, except one girl, who is being trained at the Liverpool Blind Asylum.

The yearly analysis of the register has been made, and the Blind Persons Act Committee are satisfied that all blind persons under the age of fifty who are suitable for education or technical training have been reported to the Education Committee, and that employment has been provided for all blind persons able to take advantage of it.

As in past years each new case is examined by Dr. Snell, who completes Form B. D. 8, and transmits a copy of the certificate to the Medical Officer of Health and to the Secretary of the Northern Counties Association for the Blind.

There are 111 blind persons of 50 years and over resident in the borough. All blind persons at this age period are eligible for the Old Age Pension on the same terms as sighted persons over 70 years of age. Of the 111 blind persons, 100 are in receipt of the pension; 6 are resident in institutions; 2 are married, and the husbands' incomes are over scale; 1 has private means; the earnings of one are above scale; and the remaining one is applying.

The co-operation between the Borough Council and the Sheffield City Council in matters relating to the welfare of the blind was continued up to the end of August, the work of visiting and teaching in the borough being carried out by Miss N. Brookes under the terms of agreement between the two authorities. After this the Rotherham Borough Council became entirely responsible for the welfare of the blind in the borough. Miss N. Brookes, who was really on the Sheffield staff, took up fresh duties in Sheffield, and Miss Arnold was appointed to be Home Visitor and Teacher for Rotherham.

The following table shows the work of the home teaching and visiting service during the year in respect of visits to blind persons :—

Routine	Special	Assistance	Lessons	Total
266	209	205	13	693

The handicraft classes have been continued during the year ; meetings have been held each week and have been organised on the same lines as last year. The following tables give the attendances :—

1935—Rotherham blind persons	...	...	...	830
West Riding blind persons	...	...	...	295
				<hr/> 1125 <hr/>
1936—Rotherham blind persons	...	...	...	865
West Riding blind persons	...	...	...	144
				<hr/> 1009 <hr/>

The Rotherham Borough Council granted domiciliary assistance to the unemployable blind persons in the borough amounting to £2494, being a decrease of £96 18s. 8d. on the previous year.

During the year tickets have been issued to blind persons in the borough entitling them to free slipper baths at the Rotherham Corporation Public Baths.

The swimming class has also been continued, and the attendances have been well maintained, the number being 206. These classes are very much appreciated, and thanks are due to the members of the Borough Treasurer's Department for their voluntary assistance.



The monthly concerts during the winter session have been continued. These concerts are much appreciated by the blind persons, and the attendances have been very good.

The summer outing, tea and concert at Christmas and Christmas gifts to blind persons were again provided.

During the year 109 wireless certificates have been issued entitling blind persons to receive a free wireless licence in accordance with the Wireless Telegraphy (Blind Persons Facilities) Act, 1926. 77 clear radio sets have been installed and maintained by the Blind Persons Committee; (the number includes new installations); 25 persons have their own sets, and 6 have one-valve sets (the property of the Blind Persons Committee) and are awaiting the consent of their landlords for clear radio to be allowed.

The Voluntary Fund Committee has continued its work during the year in close co-operation with the work under the Borough Council. The balance brought forward at the 1st January, 1936, was £427 11s. 7d., and the income received during the year was £214 10s. 7d.; the expenditure for the year was £137 12s. 9d., leaving a balance in hand at the end of the year of £504 9s. 5d. Through this fund gifts of clothing and glasses, extra nourishment, etc., have been provided to necessitous cases.

During the year 588 bundles of twopenny and 614 bundles of penny tram tickets were provided free of charge to the blind persons living in the borough, the cost of these bundles of a dozen tickets being borne in equal proportions by the Transport Committee and the Blind Persons Committee.

Through the kindness of the managements of the Hippodrome, Empire, Cinema, Whitehall and Tivoli picture houses and the Regent theatre, blind persons living in the borough are allowed passes to attend performances at each of these places free of charge.

## SECTION XII.

## THE LATE GREASBROUGH URBAN DISTRICT COUNCIL.

The major portion of the area of the Greasbrough Urban District Council was absorbed in the extended County Borough of Rotherham as from 1st April, 1936.

In order to keep up the continuity of records the following essential vital statistics are given for the first quarter of the year 1936 :—

Live births.	Total	Male	Female			
Legitimate ...	13	9	4	Birth rate per 1,000 of the estimated resident population ...	...	13.87
Illegitimate ...	—	—	—			
Stillbirths ...	—	—	—	Rate per 1,000 (live and still) births ...	...	13.87
Deaths ...	17	8	9	Crude death rate per 1,000 of the estimated resident population ...	...	18.28
				Adjusted death rate per 1,000 of the estimated resident population (comparability figure) ...	...	20.11
Deaths from puerperal causes—				Deaths	Rate per 1,000 total (live and still) births	
Puerperal sepsis ...	...	...	...	—	—	—
Other puerperal causes ...	...	...	...	—	—	—
				—	—	—
Total ...	...	...	...	—	—	—

## Death rate of infants under one year of age—

All infants per 1,000 live births ...	...	...	...	...	...	—
Legitimate infants per 1,000 legitimate live births ...	...	...	...	...	...	—
Illegitimate infants per 1,000 illegitimate live births ...	...	...	...	...	...	—
Deaths from measles (all ages) ...	...	...	...	...	...	1
Deaths from whooping cough (all ages) ...	...	...	...	...	...	—
Deaths from diarrhoea (under 2 years of age) ...	...	...	...	...	...	—



Notifiable diseases (other than tuberculosis) reported during the first quarter of the year 1936 are as follows :—

Disease	Cases notified	Cases admitted to hospital	Deaths
Smallpox .. .. .	—	—	—
Scarlet fever .. .. .	14	11	1
Diphtheria .. .. .	3	2	—
Enteric fever (including paratyphoid) .. .. .	—	—	—
Puerperal fever .. .. .	—	—	—
Puerperal pyrexia .. .. .	—	—	—
Erysipelas .. .. .	1	—	—
Pneumonia .. .. .	2	—	—
Cerebro spinal fever .. .. .	—	—	—

Particulars of new cases of tuberculosis and of deaths from the disease are given in the following table :—

Age periods. Years	New cases*				Deaths			
	Pulmonary		Non-pulmonary		Pulmonary		Non-pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 .. .. .	—	—	—	—	—	—	—	—
1-5 .. .. .	—	—	—	—	—	—	—	—
5-10 .. .. .	—	—	—	—	—	—	—	—
10-15 .. .. .	—	—	—	—	—	—	—	—
15-20 .. .. .	—	—	—	—	—	—	—	—
20-25 .. .. .	—	—	—	—	—	—	—	—
25-35 .. .. .	—	—	—	—	—	—	—	—
25-35 .. .. .	—	—	—	—	1	—	—	—
35-45 .. .. .	—	—	—	—	—	—	—	—
45-55 .. .. .	—	—	—	—	—	—	—	—
55-65 .. .. .	—	—	—	—	—	—	—	—
65 and upwards .. .. .	—	—	—	—	—	—	—	—
Totals .. .. .	—	—	—	—	1	—	—	—

\*Primary notifications, including other new cases which have come to the knowledge of the Medical Officer of Health during the year 1936.

There were 17 deaths in the district during the first quarter of 1936. This is equivalent to a rate of 18.28 per 1,000 inhabitants (or 20.11 per 1,000 inhabitants after adjustment in accordance with the comparability factor of 1.10). The causes of death are found in the adjoining table :—

Causes of death	Males	Females
Cerebro-spinal fever .. .. .	—	—
Enteric fever .. .. .	—	—
Small pox .. .. .	—	—
Measles .. .. .	—	1
Scarlet fever .. .. .	—	1
Whooping cough .. .. .	—	—
Diphtheria .. .. .	—	—
Influenza .. .. .	—	—
Encephalitis lethargica .. .. .	—	—
Meningococcal meningitis .. .. .	—	—
Tuberculosis of respiratory system .. .. .	1	—
Other tuberculous diseases .. .. .	—	—
General paralysis of the insane, tabes dorsalis .. .. .	—	—
Cancer—malignant disease .. .. .	3	—
Rheumatic fever .. .. .	—	—
Diabetes .. .. .	—	—
Cerebral haemorrhage, etc. .. .. .	—	—
Heart disease .. .. .	3	5
Aneurysm .. .. .	—	—
Other circulatory diseases .. .. .	—	—
Arterio-sclerosis .. .. .	—	—
Bronchitis .. .. .	—	—
Pneumonia (all forms) .. .. .	—	—
Other respiratory diseases .. .. .	—	—
Ulcer of stomach or duodenum .. .. .	—	—
Diarrhoea, etc., under 2 years .. .. .	—	—
Appendicitis and typhlitis .. .. .	—	—
Cirrhosis of liver .. .. .	—	1
Other diseases of liver .. .. .	—	—
Other digestive diseases .. .. .	—	—
Acute and chronic nephritis .. .. .	—	—
Puerperal sepsis .. .. .	—	—
Other puerperal causes .. .. .	—	—
Other accidents and diseases of pregnancy and parturition .. .. .	—	—
Congenital debility and malformation, premature birth .. .. .	—	—
Senility .. .. .	—	1
Suicide .. .. .	—	—
Other deaths from violence .. .. .	1	—
Other defined diseases .. .. .	—	—
Causes ill defined or unknown .. .. .	—	—
All causes .. .. .	8	9