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"SALUS POPULI SUPREMA LEX"



City of Portsmouth

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# HEALTH REPORT

For the Year 1937

BY

A. B. WILLIAMSON

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

*Medical Officer of Health*

*Medical Officer of Health to the Port of Portsmouth*

*Chief Administrative Medical Officer to the City Council*

INCLUDING

The Report of the Public Analyst

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# TABLE OF CONTENTS.

	<i>Page</i>
HEALTH COMMITTEE, CONSTITUTION OF .. .. .	4
STAFF .. .. .	5-9
INTRODUCTION .. .. .	10-13
SUMMARY FOR 1937 .. .. .	14
<b>Natural and Social Conditions</b> .. .. .	15-26
Population .. .. .	16
Marriages .. .. .	16
Births .. .. .	16
Deaths .. .. .	16
Comparison with previous year .. .. .	17
Table I. Vital Statistics of the Whole District, 1910-1937 .. .. .	18
" II. Population, Marriages, Inhabited Houses, Births and Deaths, 1927-37 .. .. .	19
" III. Vital Statistics for each of the Wards of the City, 1937 .. .. .	20
" IV. Births and Deaths in each of the Quarters of 1937 .. .. .	21
" V. Birth-rates and Death-rates, 1927-1937 .. .. .	22
" VI. Population, Birth-rates, Death-rates, etc., for 20 Largest Towns .. .. .	22a
" VII. Deaths registered at several groups of ages in the several Wards of the City from different causes, 1937 .. .. .	22b
Natural Conditions .. .. .	23
Summary of Meteorological Statistics .. .. .	24
Table VIII. Sunshine, Rainfall, Extremes of Temperature, 1890-1937 .. .. .	25
" IX. Monthly Weather Summary, 1937 .. .. .	26
<b>Hospital and other Services</b> .. .. .	27-40
Saint Mary's Municipal Hospital .. .. .	28-37
Administration .. .. .	28
Hospital Developments .. .. .	29
Co-operation with Voluntary Hospitals .. .. .	29
Table X. Summary of Hospital Services in the City (Voluntary and Municipal) Report of Medical Superintendent, Saint Mary's Hospital .. .. .	30
Table XI. Saint Mary's Hospital—Classification of Accommodation .. .. .	31-33
" XII. " " Statistics relating to In-patients .. .. .	34
" XIII. " " Classification of In-patients discharged .. .. .	35
" XIV. " " Part-time Visiting Medical Officers, Out-patients' attendances, etc. .. .. .	36
Laboratory Facilities .. .. .	37
Ambulance Facilities .. .. .	38
Professional Nursing in the Home .. .. .	39
Institutional Provision for the Care of Mental Defectives .. .. .	39-40
<b>Prevalence of, and Control over, Infectious and other Diseases</b> .. .. .	41-82
Scarlet Fever .. .. .	42
Diphtheria .. .. .	43
Diphtheria Immunisation .. .. .	43-45
Measles .. .. .	45
Erysipelas .. .. .	46
Enteric Fever .. .. .	46
Puerperal Fever and Pyrexia .. .. .	46
Pneumonia .. .. .	46
Undulant Fever .. .. .	46
Cases notified, admitted to Hospital and Deaths, 1937 .. .. .	46
Ophthalmia Neonatorum .. .. .	47
Vaccination .. .. .	47
" XV. Vaccination Returns for 30 years .. .. .	48
" XVI. Vaccination Returns, January to June, 1937 .. .. .	49
Table XVII. Numbers and Death-rates from certain Diseases in each of the Quarters .. .. .	50
" XVIII. Death-rates for Zymotic Diseases, 1861-1937 .. .. .	51
" XIX. Weekly Return of Notifications of Infectious Diseases .. .. .	52
" XX. Analysis of Notified Cases into Age Groups and Wards .. .. .	53
Infectious Diseases Hospital .. .. .	54-61
Report of the Deputy Medical Superintendent of the I.D. Hospital .. .. .	55-61
Table XXI. Number of Patients admitted to the I.D. Hospital .. .. .	56
Venereal Diseases .. .. .	62
Report of the Venereal Diseases Officer .. .. .	63
Table XXII. Venereal Diseases—Return of Patients treated at Centre .. .. .	64-66
Tuberculosis .. .. .	67-77
Table XXIII. Tuberculosis—Deaths and Death-rates, 1879-1937 .. .. .	68
" XXIV. " " Chart showing Deaths from Pulmonary Tuberculosis since 1885 .. .. .	69



	<i>Page</i>
Report of the Tuberculosis Officer .. .. .	70-72
Table XXV. Tuberculosis—New Cases and Mortality .. .. .	73
.. XXVI. .. Showing the Work of the Dispensary .. .. .	74
.. XXVII. .. Showing results of treatment of Patients discharged from Institutions .. .. .	75
.. XXVIII. .. Grade of Exercises, Langstone Sanatorium .. .. .	76
.. XXIX. .. Total number of Patients treated at Sanatoria .. .. .	77
Prevention and Treatment of Blindness .. .. .	78-80
Cancer .. .. .	80-81
Table XXX. Analysis of Deaths from Cancer .. .. .	82
<b>Maternity and Child Welfare</b> .. .. .	83-99
Maternal Mortality and Morbidity .. .. .	84
Table XXXI. Comparison of Infantile and Maternal Mortality Rates, 1924-1937 .. .. .	85
Institutional Treatment .. .. .	85
Ante-Natal Clinics .. .. .	86
Midwives Act, 1936 .. .. .	86
Child Welfare .. .. .	86
Table XXXII. Infantile Mortality—Causes of Death .. .. .	87
Voluntary Welfare Centres .. .. .	88
Table XXXIII. Chart shewing Infantile Mortality, 1886-1937 .. .. .	89
Report of the Maternity Officer and Inspector of Midwives .. .. .	90-96
Midwives .. .. .	90
Suspension from Practice .. .. .	90
Domiciliary Service of Midwives .. .. .	90
Table XXXIV. Notifications received from Midwives under Rule E. 33 .. .. .	91
Puerperal Fever and Pyrexia .. .. .	92
Birth Control .. .. .	92
Maternity and Nursing Homes (Nursing Homes Registration Act, 1927) .. .. .	93
Ante-Natal and Post-Natal Clinics .. .. .	93
Table XXXV. Institutional Treatment of Maternity Cases .. .. .	94
.. XXXVI. Roll of Midwives practising during 1937 .. .. .	95-96
Report of the Child Welfare Officer .. .. .	97-99
Home Visiting .. .. .	97
Pre-School Child .. .. .	97
Infant Life Protection .. .. .	98
Child Welfare Centres .. .. .	99
<b>Sanitary Circumstances</b> .. .. .	101-107
Water Supply .. .. .	101
Public Cleansing .. .. .	102
Municipal Disinfectant Fluid .. .. .	103
The Water of Swimming Baths and Pools .. .. .	103
Report of the Chief Sanitary Inspector .. .. .	104-107
Sanitary Inspection .. .. .	104-106
Table XXXVII. Factories and Workshops .. .. .	106-107
<b>Inspection and Supervision of Food</b> .. .. .	109-135
Milk and Dairies .. .. .	110
Food and Drugs .. .. .	111-113
Merchandise Marks Acts, 1926 .. .. .	112
Regulation of Manufacture and Sale of Ice Cream .. .. .	112-113
Report of the Public Analyst .. .. .	114-130
Analysis of the Portsmouth Water .. .. .	130
Inspection of Meat and other Foods .. .. .	131-135
Slaughterhouses .. .. .	131
Municipal Abattoir .. .. .	131
Report of the Meat Inspector .. .. .	132-135
<b>Housing</b> .. .. .	137-144
New Houses .. .. .	138
Council's Five Years' Housing Programme .. .. .	138
Programme for the Year, 1937-1938 .. .. .	139
Clearances .. .. .	140
Re-housing .. .. .	141
House Inspection .. .. .	141-143
Eradication of the Bed Bug .. .. .	143
Overcrowding .. .. .	144
<b>Health Education</b> .. .. .	145-149
Health Week .. .. .	146
National Fitness Campaign .. .. .	146-147
Other Health Propaganda .. .. .	147-149
<b>Port Sanitary Report</b> .. .. .	151-157



# Health Committee

## 1936-37

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**The Right Worshipful the Lord Mayor :**  
COUNCILLOR F. J. SPICKERNELL.

**Chairman :**  
COUNCILLOR A. E. ALLAWAY.

**Vice-Chairman :**  
COUNCILLOR L. N. BLAKE.

---

**Aldermen :**  
J. W. PERKINS, J.P.  
W. A. BILLING, O.B.E., J.P.  
A. RICE.  
A. BOSWORTH WRIGHT, J.P.

**Councillors :**

F. J. SPICKERNELL (Lord Mayor).	MRS. L. J. RAMSDEN.
A. W. WEST.	F. W. WHITING, J.P.
A. KILLE.	J. P. D. LACEY, J.P.
W. H. ANDREWS.	W. CLEMENTS.
J. A. GRIFFITHS, J.P.	J. J. MAHONEY.
J. C. JUNIPER.	H. T. CLIFTON.
MAJOR W. H. R. PREWER, O.B.E.	J. ELLIS-JONES.

---

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

MRS. P. H. CHILDS.	MRS. TROWBRIDGE.
MISS E. R. LAPHORN.	MRS. R. PARKER, J.P.

## STAFF

### Medical Officer of Health :

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

### Senior Assistant Medical Officers of Health :

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

### Chief Sanitary Inspector :

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

### Chief Clerk to Health Services and Meteorological Observer :

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

### Meat, Food and Sanitary Inspector :

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

### Inspector of Workshops and Sanitary Inspector :

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

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

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

### Housing Inspectors :

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

### Inspectors of New Buildings and Sanitary Inspectors :

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

### Sanitary Inspectors :

F. H. MILLICAN, Cert. R. San. I.      L. RICHARDS, Cert. R. San. I.  
G. S. GATTRELL, Cert. R. San. I., Hons. City & Guilds Lond., R.P.C. Lond.  
K. M. HOLMES, Cert. S.I.B.      A. W. ARNOLD, Cert. S.I.B.  
E. E. ROUGHTON, Cert. S.I.B., Hons. City & Guilds.  
F. JOHNSON, Cert. S.I.B. Hons. Medallist, City & Guilds.  
J. L. CORT, Cert. S.I.B., Hons. City & Guilds.  
H. B. PARRY, Cert. S.I.B., Hons. City & Guilds.

**First Assistant Clerk :** *Secretarial*—E. S. CHADWICK.

### Assistant Clerks :

*Statistical* :—H. S. WOODCOCK.

*Hospitals* :—A. A. SHERGOLD, L. E. H. PARKER and H. W. ALLEN  
(from October)

*Secretarial* :—E. GARNER, (from July)

*Infectious Diseases and*

*Sanitary Inspection* :—E. H. E. ALLWOOD, G. J. W. SPENCER.

*Maternity* :—Miss H. WRIGHT, Miss N. H. DOREY, Miss D.M. ABBOTT  
(from June), and Miss P.P. LEWINGTON (from August)

*General* :—A. R. PRICE (from July)



**Port Sanitary Inspector :** F. BATCHELOR. (to August)  
CAPT. V. FORTH. (from August)

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

**Public Vaccinators (part time) :**

P. HAYES, L.R.C.S., L.R.C.P., L.R.F.P. & S.  
A. B. DOYLE, L.R.C.P.I. & L.M., L.R.C.S.I. & L.M.

**Vaccination Officer :** L. T. McKINLAY.

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

**TUBERCULOSIS SERVICE.**

**Clinical Tuberculosis Officer**

**and Medical Superintendent, Langstone Sanatorium :**

IAN M. McLACHLAN, M.D., Ch.B., B.Hy., D.P.H.

**Matron of Langstone Sanatorium :** Miss J. S. BROWN.

**Tuberculosis Dispensary**

**Nurses :**

Miss L. LAMB.      Miss V. F. WARDLAW.  
\*Miss S. M. MITCHELL,      \*Miss H. M. NEVILL.

**Secretary :** \*Miss E. HEALEY.

**Almoner :** \*Miss N. O. ALLEN.

**MATERNITY AND CHILD WELFARE SERVICE.**

**Senior Assistant Medical Officer of Health and Child Welfare Officer :**  
T. E. ROBERTS, M.B., B.S. (Lond.), M.R.C.S. (Eng.), D.P.H. (Camb.).

**Maternity Officer and Inspector of Midwives :**

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

**Health Visitors :**

*Miss D. POULSON.	*Miss M. E. HANDLEY.
*Miss A. KNIGHT	*†Mrs. R. D. GRINDROD
*Mrs. M. SMEATON.	*†Miss E. K. WILTON.
*†Miss M. H. FLINT (to October)	*†Miss R. SEALE
*†Miss L. C. SESSIONS.	*†Miss A. M. KNAPP
	(from November)

**Municipal Midwives :**

**Superintendent Midwife :** \*†Miss A. M. M. GIRDLESTONE  
(from October)

**District Midwives :**

\*Mrs. M. FARR, (from July)  
\*Mrs. J. F. GEMMELL, (from July)  
\*Mrs. L. GOODMAN, (from July)  
\*Miss M. MALYON, (from July)  
\*Mrs. E. RUMBOLD, (from July to October)  
\*Mrs. M. M. SANSOM, (from July)  
\*Miss E. F. FIELD, (from October)  
\*Miss A. MORGAN, (from October)  
\*Mrs. J. GODWIN, (from November)  
\*Miss J. E. STEVENS, (from December)

\* *Certified Midwife*

† *Health Visitors Cert. R.S.I.*

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

A. B. WILLIAMSON, M.A., M.D., B.Sc., D.P.H.

**Deputy Medical Superintendent and****Senior Assistant Medical Officer of Health :**

IAN M. McLACHLAN, M.D., Ch.B., B.Hy., D.P.H.

**Senior Resident Medical Officer and Assistant Medical Officer of Health:**

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

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

**Junior Resident Medical Officer and Assistant Medical Officer of Health :**

J. Q. MOUNTAIN, B.Sc., M.D., Ch.B., D.P.H. (to September)

A. B. SEMPLE, M.B., Ch.B., D.P.H. (from October)

**Matron :** Miss F. PETCHEY.**PUBLIC ANALYST :** R. P. PAGE, F.I.C.**Chief Assistant :** C. M. BECKETT.**Assistant :** E. G. WHITTLE, B.Sc., A.I.C. (to June)

C. E. HALL, A.I.C. (from July)

**SAINT MARY'S HOSPITAL.****Medical Superintendent :**

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

**Deputy Medical Superintendent :**

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

**Senior Assistant Medical Officers :**

V. S. HUGHES-DAVIES, B.Sc. (Wales), M.B., Ch.B. (Liverpool)

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

A. L. GILBEY, M.B., Ch.B. (Edin.), M.M.S.A. (to July)

W. S. WOOLNER, B.Sc., M.D.C.M. L.M.S. (from September)

**Junior Assistant Medical Officers :**

J. C. H. BROWNE, L.R.C.P., M.R.C.S. (to May)

F. R. NEUBERT, L.M.S.S.A., F.S.M.C., F.B.O.A.

W. S. WOOLNER, B.Sc., M.D.C.M., L.M.S. (to September)

W. B. O'DRISCOLL, M.B., B.S., B.A.O.

**Part-time Visiting Medical Officers :****Physician :** R. J. LYTLE, M.D., B.S., B.A.O.**Surgeon :** O. S. HILLMAN, F.R.C.S., L.R.C.P., M.B., M.S.**Ear, Nose and Throat Specialist :**

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

**Radiologist :** R. S. MACHARDY, M.B., Ch.B., D.R.**Orthopaedic Surgeon :** A. G. ORD, F.R.C.S., L.R.C.P.**Skin Specialist :** A. MURRAY STUART, F.R.C.S., L.R.C.P.**Consultant Obstetrician :** T. BARNETT, M.D., F.R.C.S.**Eye Specialist :** J. C. BRINGAN, M.B., Ch.B., D.O.M.S., (from April)**Dental Surgeon (part time) :** D. A. BEVIS, L.D.S., R.C.S. (Eng.)

(to March)

**Asst. Dental Surgeon :** G. E. CHADD, L.D.S., R.C.S. (from April)**Steward :** B. NICHOLS**Assistant Steward :** S. F. HIGGINS**Clerks :** A. S. HUTCHINGS

H. S. SPACEY

W. RUMBOLD

B. S. PRING, (from August)

W. G. J. THOMAS

Miss G. M. JUPE

H. W. ALLEN, (to Sept.)

Miss K. M. J. ORCHARD,

(from May)



# **VENEREAL DISEASES CLINIC.**

## **Medical Officer (part-time) :**

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

## **Pathologist (part-time) :**

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

---

# **POLICE DEPARTMENT.**

## **Police Surgeons (part time) :**

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

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

---

**Medical Referee, Workmen's Compensation Act,  
Medical Examiner for New Corporation Appointments and  
Medical Officer, Corporation Tramways.**

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

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

---

## **VETERINARY SURGEON (part-time) :**

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

## **DISTRICT MEDICAL OFFICERS (part-time)**

A. E. CLARK, M.B., Ch.B. (Glas.).

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

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

S. GUYER, M.B., Ch.B. (Glas.)

S. CONWAY, M.R.C.S., L.R.C.P.

L. F. COPE, O.B.E., L.S.A.

## SCHOOL MEDICAL SERVICE.

### Chief Administrative Medical Officer :

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

### School Medical Officer and Senior Assistant Medical Officer of Health :

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

### Assistant Medical Officers :

ELIZABETH M. MARTIN, M.B., B.Ch. (Belfast), D.P.H.

JOHN M. MOUNSEY, B.A., M.B., B.Ch., B.A.O. (Dublin).

HARRY SMITH, M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H.

### Ophthalmic Surgeon (part-time)

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

### Senior Dental Surgeon :

L. J. THRELFALL, L.D.S., R.C.S. (Eng.)

### Assistant Dental Surgeons :

Miss M. C. LAUDER, L.D.S., R.C.S. (Eng.)

E. G. W. LEWIS, L.D.S., R.C.S. (Eng.)

A. A. WOOD, L.D.S., R.C.S. (Eng.)

### Dental Clerk-Attendants :

MRS. F. N. BESFORD

Miss M. FERBRACHE

MRS. E. M. PAY

Miss I. G. SMITH

### Nurse in Charge :

Miss A. M. DAWKINS, Cert. Med. Psych.

### School Nurses :

Miss M. DURMAN

\*Miss M. MCKENZIE

\*Miss K. PAGE, Cert. Med. Psych.

\*Miss O. G. HAWES

Miss M. A. RICE

Miss C. O'MAHONEY

\*Miss D. L. DUGAN

†\*Miss A. BARROW

\*Miss E. KANE

Miss E. V. SALMON,

Cert. C.S., M.M.G.

†Health Visitors' Certificate

\*Certified Midwife

### Clerical Department :

R. W. HARVEY

C. DALE

Miss H. GUTHRIE

## St. JAMES' HOSPITAL.

### Medical Superintendent :

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

### Assistant Medical Officers :

A. F. GRIMBLY, M.A., M.D. (Dub.), B.Ch., B.A.O. (Dub.)  
D.P.M., R.C.P.S.

G. G. BROWN, L.R.C.P.S. (Edin.) L.D.S., D.P.M.

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

J. P. McGUINNESS, L.R.C.P. & S. (Edin.) L.R.F.P.S.



# Medical Officer's Report for 1937.

TO THE CHAIRMAN AND MEMBERS OF THE HEALTH COMMITTEE.

Madam and Gentlemen,

I have the honour to present my fourth Annual Report, which is the sixty-fifth Annual Report on the Health of the City.

**HEALTH STATISTICS.**—The health statistics for the year 1937 were even more favourable than those for 1936, which in many respects was a record year. The general death-rate, *i.e.*, 11.5, as compared with 12.4 for England and Wales, was the lowest for the past nine years, and considerably below that of the average of the previous 10 years (12.32). Among the twenty largest towns of the country Portsmouth took third place.

The following were each the lowest on record in the statistical annals of the City: (a) the maternal mortality rate (the number of maternal deaths per 1,000 live births), *i.e.*, 1.51, as compared with 3.11 for the country as a whole; (b) the infantile mortality rate (the number of deaths of infants per 1,000 live births occurring in the same year), *i.e.*, 43.8, as compared with 58 for the country as a whole; (c) the number of deaths from pulmonary tuberculosis, and (d) the number of deaths from all forms of tuberculosis.

## CONTROL OF INFECTIOUS AND OTHER DISEASES—

No epidemics of any note occurred.

Scarlet fever was more prevalent during the year. It is very difficult to attribute a cause for this increased incidence which occurs every few years. Our knowledge regarding the causal organism of scarlet fever is not so complete as that regarding some of the other diseases, *e.g.*, diphtheria, and effective control is impossible on account of the large number of carriers and missed mild cases (mistaken by the patient for ordinary sore throat) occurring in the general population.

The returns showing the number of children immunised against diphtheria are disappointingly small and not commensurate with the effort expended. No fully immunised child developed diphtheria during 1937.

Towards the end of the year the Infectious Diseases Hospital was unable to cope with all cases requiring admission, and a few of the milder cases had to be placed on the waiting list. This state of affairs will be remedied when the new extension of 84 beds is completed in 1938. Deaths from measles and whooping cough are still too high, and, when the Hospital is enlarged, the intention is to admit all cases of measles and whooping cough from very poor homes or where the dreaded complication, *e.g.*, bronchial pneumonia, is likely to occur.

The number of vaccinations against smallpox carried out each year continues to be high, and Portsmouth may be considered to be the best vaccinated city in the country.

Due largely to increased anti-tuberculosis activity, the death rate from tuberculosis continues to decline, but, unfortunately, the same downward trend is not manifest in the case of cancer, the number of deaths from which during 1937 was 427, the highest on record. Powerful, deep and superficial X-ray plants are being installed at Saint Mary's Hospital at a cost of £2,000 for the treatment of this disease, and a co-ordinated effort is being made to improve facilities for diagnosis and radiological treatment in the Wessex Area.



A study of the statistics of the Venereal Diseases Treatment Centre indicates the existence of a large amount of untreated gonorrhoea in women, and the need for a more intensive campaign to enlighten the public on the subject of venereal diseases.

**INSPECTION AND SUPERVISION OF FOOD.**—The percentage of samples of Food and Drugs found to be adulterated (2.4 per cent.) was less than that for the previous year (3.5 per cent.), and is still much lower than the figure for the country as a whole (5.3 per cent.). The quality of ice cream sold in the City continues to improve.

Milk is one of our most perfect foods, and it augurs well for the City that so many milk bars are being established. These are inspected periodically.

The recent occurrence of a serious epidemic of infectious disease elsewhere clearly demonstrates once more that if milk is to be rendered safe, it must be pasteurised. Scientific investigation has now proved that if low temperature pasteurisation affects the nutritive value of milk at all, it can do so only to a very slight extent. From a milk census which was carried out recently in Portsmouth, only 0.7 per cent. of the total milk consumed was found to be tuberculin tested. Only 0.9 per cent. was found to be officially pasteurised (including the pasteurised milk supplied to schools under the Education Committee's Scheme), although most of the large firms subject the raw milk to some form of pasteurisation in order to improve the keeping qualities. It will be seen, therefore, that a considerable proportion of the milk in the City cannot be designated as "safe", and although we have hitherto been fortunate in escaping any serious outbreak of infectious disease resulting from milk, conditions are such that a serious milk-borne epidemic, similar to those which have occurred in many parts of the country, may take place at any time. During the year under review the City Council, on the recommendation of the Health Committee, decided that representation be made to the Ministry of Health to bring forward legislation as to the compulsory pasteurisation of milk in this country. Long term legislation would be necessary to prevent any undue hardship on the smaller milk retailers.

During 1937 excellent progress was made towards the establishment of a Public Abattoir, and thereby ending, once and for all, the present unsatisfactory method of meat inspection and supervision. A deputation of the Abattoir Sub-committee visited other abattoirs, joint meetings were held with representatives of the Portsmouth and District Master Butchers' Association, and by the end of the year under review a Scheme for the erection of an Abattoir at a cost of approximately £100,000, including compensation, had been presented to the Council for consideration.

**NEED FOR A MUNICIPAL CREMATORIUM.**—There is need in Portsmouth for the erection of a Municipal Crematorium, with a Columbarium and Garden of Rest. From the hygienic and aesthetic points of view, the disposal of the dead by cremation is undoubtedly to be preferred to that of the older insanitary method of earth burial. Moreover, it is surely not in the best interests of the community that large areas of valuable land in a congested City like Portsmouth, in most cases in close proximity to houses, should continue to be utilised for cemeteries.

A more recent method of cremation, namely, by electricity, has been invented and is being adopted by some Local Authorities.

Experience in some other places has shown that the establishment and maintenance of a crematorium can be made an economic proposition.

**OVERCROWDING.**—During the year the erection of 600 houses at Cosham was begun for the purpose of abating overcrowding in the City.



**MATERNITY AND CHILD WELFARE.**—The Council's Scheme for the establishment of a Municipal Midwives' Service under the provision of the Midwives Act, which was described in my Report last year, was put into operation on the 30th July, 1937, and by the end of the year ten midwives had been appointed. The Scheme so far has proved to be very successful and will, in my opinion, be only the first stage of a larger Scheme to come into force in the near future, which will bring into closer co-operation the specialists, the general practitioners and the hospitals.

An Emergency Maternity Unit or Flying Squad, with its base at Saint Mary's Hospital, was inaugurated during the year, whereby an ambulance, together with the necessary equipment, blankets, hot bottles, and gum saline transfusion outfit, is ready at a few minutes' notice to proceed, on the request of any of the Consultants on the Obstetric Panel, to the home of any patient whose condition is such that removal to the Hospital would be dangerous to life. A recent emergency call brought the Unit to the patient within twenty minutes, and was undoubtedly the means of saving her life.

A further step in bridging the gap between infancy and school age was made when a toddlers' clinic was opened at the Child Welfare Centre in Clive Road.

### **HOSPITALS' SERVICES.**

#### **Saint Mary's Hospital.**

The increasing number of admissions each year to Saint Mary's Hospital is an index of greater confidence shown by general practitioners and the public alike in their Municipal General Hospital, which is playing a larger and larger part each year in the Health Services of the City.

The facilities for dental treatment were augmented during the year, the Dental Department was enlarged and a full-time Corporation Dentist was appointed. It is now possible to provide treatment for those cases who are unable to afford a private dentist and, who, on account of their dental condition, are unable to derive the fullest benefit from the Health Services, *e.g.*, patients about to enter sanatoria, expectant mothers, etc.

Another step towards the establishment of a complete Orthopaedic Department was taken when a ward on the female side of the Hospital was adapted for the treatment of orthopaedic cases.

#### **Shortage of Nurses.**

A shortage of nurses in the Public Health Hospitals, but especially in the Infectious Diseases Hospital, was experienced during the year. After consultation with the Secretary of the recently appointed Government Inter-Departmental Committee on Nursing, I submitted a preliminary report to the Hospitals Governors, the adoption of which has helped to ease the situation. This is only the first stage, however, in the solution of a serious problem, which is facing all the Hospitals in the country at the present time. Pending the publication of the Report of the above Inter-Departmental Committee, it was decided, on the suggestion of the Medical Superintendent of Saint Mary's Hospital, to inaugurate a Scheme for enlisting and training girls between 16 and 17½, which has been tried out with success in other parts of the country.

### **CO-OPERATION OF MEDICAL PRACTITIONERS IN THE DISTRICT.**—

As a member of the Executive Committee of the Portsmouth Division of the British Medical Association, I have been able to consult periodically with the elected representatives of the medical profession in the City in regard to new developments, and I am glad to say that close and cordial co-operation exists.



It is important that members of the medical profession should be acquainted with the progress of the work of the Health Services in which they play a part, and it is felt that the decision of the Health Committee in 1936 to forward to each Medical Practitioner a copy of this Report has been appreciated. I would refer them particularly to the chapters on "Hospital and Other Services", "Prevalence of and Control over Infectious and Other Diseases", "Maternity and Child Welfare", and "Health Education", and I take the opportunity of thanking them for their co-operation during the year.

**ADMINISTRATION.**—Each year more and more responsibilities are being placed upon the Health Department by Acts of Parliament and by Circulars and Memoranda of the Ministry of Health. As an indication of the enormous increase in the work I may state that during the past few years the letters and reports sent out by the Department have nearly trebled.

In addition, an entirely new obligation has been placed on the Health Department to form an organisation for the purpose of providing first-aid and hospital treatment in connection with the City's Scheme of Passive Air Defence—necessitating the enrolment and training, with the assistance of the St. John Ambulance Brigade and the British Red Cross Society, of some 3,000 personnel.

**COST OF THE HEALTH SERVICES.**—The development of the Health Services on the lines indicated above has been achieved so far with the minimum expenditure, and it is pleasing to be able to record that the rate expended for Health Services in the City is the second lowest of the 20 largest towns in the country. From the latest figures available the average cost per patient per week of Saint Mary's Hospital is the second lowest of any Municipal General Hospital appropriated by the Health Committees of the 20 largest towns. It will be appreciated that wise expenditure on health, while the results may not be immediately manifest, will ultimately bring in a rich dividend expressed in lower mortality and morbidity rates and increased health and happiness of the citizens.

Details regarding the schemes and changes outlined above are given in the body of the Report, which has been divided into sections for purposes of clarity and easier reference. At the beginning of each section I have summarised the important changes and indicated their bearing on the work of the Department as a whole. Thereafter follows a brief description of the routine work of the sub-department by the Senior Medical Officer in charge.

Figures for the previous year are included in brackets for comparative purposes.

The work of a busy year has been much facilitated by the unfailing sympathy and support of the Chairman and Members of the Health Committee, and by the valuable help given most willingly at all times by every member of my staff. I desire also to express my appreciation of the courtesy extended to me by the chief officers of the Corporation and the various Committees with which I have been associated during the year.

I have the honour to be, Madam and Gentlemen,

Your obedient Servant,

A. B. WILLIAMSON,  
*Medical Officer of Health.*



**SUMMARY FOR 1937.**

Civil Population (estimated to middle of 1937) ... 256,200

**1.—GENERAL STATISTICS.**

Area in Acres (land and inland water)	...	...	9,223
Population (Census, 1931)	...	...	Total 249,283
Number of Inhabited Houses	...	...	62,829
Rateable Value (1st April, 1937)	...	...	£1,864,298
Sum represented by a Penny Rate	...	...	£7,399
Average number of persons in each house (Census 1931)			4.5
Average number of persons per acre (Census 1931)			31.3
Total Rainfall	...	33.33 inches	847.7 millimetres

**2.—EXTRACTS FROM VITAL STATISTICS.**

	Total	Male	Female	
<b>LIVE BIRTHS :</b>				
Legitimate .. ..	3,624	1,863	1,761	} Rate per 1,000 population 14.88
Illegitimate .. ..	188	96	92	
Total .. ..	3,812	1,959	1,853	

<b>STILLBIRTHS :</b>				
Legitimate .. ..	139	77	62	} Rate per 1,000 total births 37.37
Illegitimate .. ..	9	7	2	
Total .. ..	148	84	64	

<b>DEATHS</b> .. ..	2,947	1,520	1,427	} Rate per 1,000 population 11.50
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Deaths from diseases and accidents of pregnancy and childbirth :

From Puerperal Sepsis .. 0      From other Puerperal causes .. 6

Mortality rate per 1,000 total births :

From Puerperal Sepsis .. 0.0      From other Puerperal causes .. 1.51

Total maternal mortality rate .. 1.51

Death Rate of Infants under one year of age :

All Infants per 1,000 live births .. .. 43.81

Legitimate Infants per 1,000 legitimate live births .. .. 44.15

Illegitimate Infants per 1,000 illegitimate live births .. .. 37.23

NATURAL AND SOCIAL  
CONDITIONS



**POPULATION.**—The estimated population of the City at mid-1937 according to the Registrar-General was 256,200, or 4,800 more than in the previous year. The increase is doubtless partly due to the excess of births over deaths (865) and to immigration.

**MARRIAGES.**—The number of marriages during 1937 was 2,418, which is 173 more than last year and is greater than any other year since 1919.

**BIRTHS.**—There were 102 less births during 1937 than during the previous year. The total number of live births was 3,812, equivalent to a birth-rate of 14.88, as compared with 3,914 births and a birth-rate of 15.56 for the previous year. The birth-rate for England and Wales was 14.9.

**DEATHS.**—The general death-rate 11.50, which is lower than last year (11.81), is the lowest during the past nine years, and is considerably lower than the average death-rate for the previous ten years (1927-1936)—12.32. The general death-rate for England and Wales was 12.4. From Table VI. it will be seen that Portsmouth takes third place among the twenty largest towns in the country.

Only 167 deaths occurred amongst infants under one year of age, giving an infantile mortality rate of 43.8 per 1,000 births, as compared with 58 for England and Wales.

## COMPARISON WITH PREVIOUS YEAR.

				1936 Population		1937 Population	
				Total—251,400		Total—256,200	
				Number	Rate per 1000 living	Number	Rate per 1000 living
BIRTHS	..	..	..	3,914	15.56	3,812	14.88
DEATHS	..	..	..	2,971	11.81	2,947	11.50
„	Principal Zymotic Diseases	..	..	44	0.17	57	0.22
„	Small-pox	..	..	..	..	..	..
„	Measles	..	..	14	0.05	5	0.02
„	Scarlet Fever	..	..	2	0.00	5	0.02
„	Diphtheria	..	..	8	0.03	13	0.05
„	Whooping Cough	..	..	1	0.00	10	0.04
„	Fever (Typhoid & Para Typhoid)	..	..	2	0.00	3	0.01
„	Diarrhoea (under 2 years)	..	..	17	0.06	21	0.08
„	Pulmonary Tuberculosis	..	..	171	0.68	142	0.55
„	Cancer	..	..	410	1.63	427	1.67
„	Influenza	..	..	33	0.13	57	0.22
				Number	Rate per 1000 Births	Number	Rate per 1000 Births
„	Under 1 year of age	..	..	194	49	167	44

AVERAGE DEATH-RATE for previous Ten years (1927-1936) .. 12.32





**TABLE II.**

Table showing the Population, Marriages, Inhabited Houses, Births and Deaths, for the year 1937, and the ten preceding years.

## GROSS NUMBERS.

Year	Estimated Civil Population	No. of Inhabited Houses	Marriages	Registered Births	Total Number of Deaths		
					Total all ages	Under 1 year	Under 5 years
1937	256,200	62,829	2,418	3,812	2,947	167	217
1936	251,400	62,746	2,245	3,914	2,971	194	258
1935	250,200	62,150	2,298	3,707	2,959	171	220
1934	248,900	61,500	2,217	3,948	3,077	175	282
1933	251,200	60,529	2,140	3,864	3,125	203	306
1932	253,100	59,780	2,164	4,092	3,101	246	338
1931	228,900	58,106	2,067	4,454	2,950	239	336
1930	242,000	57,591	2,242	4,409	2,856	250	415
1929	242,000	56,861	2,017	4,519	3,345	293	438
1928	240,700	54,740	2,100	4,579	2,669	242	359
1927	232,100	54,068	1,981	4,349	2,877	235	410
Average 10 years 1927-36	244,050	58,806	2,146	4,183	2,992	213	335



TABLE III.

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

WARD	Area in Acres	Population Census 1931	Density per Acre	Birth Rate (Per 1000 Pop.)	Death Rate (Per 1000 Pop.)	Infantile Mortality Rate (Per 1000 Births)	Tuberculosis (All Forms) Death Rate (Per 1000 Pop.)
1. St. Thomas ..	575	17,088	29.71	12.93	13.58	27	1.05
2. Portsea ..	480	21,339	*44.45	12.37	10.26	61	0.75
3. Nelson ..	235	15,739	66.97	15.76	10.17	52	0.51
4. North End ..	743	15,523	20.89	18.30	12.18	42	0.64
5. Buckland ..	189	14,493	76.68	15.94	12.01	65	0.34
6. Kingston ..	737	16,791	22.78	15.60	9.23	38	0.24
7. Highland ..	447	14,472	32.37	10.36	10.09	27	0.35
8. St. Simon ..	341	16,560	48.56	12.14	12.50	35	0.72
9. Havlock ..	196	15,772	80.47	15.16	12.46	34	0.70
10. St. Paul ..	183	15,717	85.88	13.04	12.79	59	0.51
11. Guildhall ..	172	16,500	95.92	12.97	11.27	33	0.61
12. Fratton ..	184	13,080	71.08	12.77	10.93	72	0.54
13. St. Mary ..	138	16,165	117.13	13.86	11.69	71	0.74
14. Charles Dickens ..	142	15,138	106.00	15.59	12.09	30	0.86
15. Cosham ..	3,167	11,233	3.54	35.70	17.72	37	1.16
16. Meredith ..	1,288	16,815	13.05	15.94	10.11	26	0.42
WHOLE CITY ..	9,217	252,425	27.39	14.88	11.50	44	0.62

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

TABLE IV.

Showing Births and Deaths Registered in Portsmouth during the four quarters ending 31st December, 1937.

QUARTER	BIRTHS	STILLBIRTHS	DEATHS	Deaths of Infants under 1 year of age	Deaths from							Rate per 1,000 living		Death-rate per 1,000 living						Death-rate per 1,000 Births	
					Enteric Fever	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Diarrhoea and Enteritis (under 2 years)	Total Births	Total Deaths	Enteric Fever	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Diarrhoea and Enteritis (under 2 years)	Infants under 1 year
1st Qtr.	896	40	863	50	..	2	2	5	..	44	4	14.3	13.8	..	0.03	0.03	0.08	..	0.70	4.5	56
2nd Qtr.	1095	35	661	43	1	1	1	3	5	4	6	17.5	10.5	0.02	0.02	0.02	0.05	0.08	0.06	5.5	39
3rd Qtr.	973	44	602	24	1	..	4	1	3	..	6	15.5	9.6	0.02	..	0.06	0.02	0.05	..	6.2	25
4th Qtr.	843	45	722	44	1	2	1	..	3	8	11	13.4	11.5	0.02	0.03	0.02	..	0.05	0.13	13.0	52
TOTAL..	3807	164	2848	161	3	5	8	9	11	56	27	14.9	11.1	0.01	0.02	0.03	0.04	0.04	0.22	7.1	42

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



TABLE V.

Table showing the Annual Birth-rate, Rate of Mortality, and Death-rates among children for the year 1937, and ten preceding years.

Year	Birth-rate per 1,000 of the Population	Annual Rate of Mortality per 1,000 living from all causes	Annual Rate of Mortality per 1,000 living from 7 Principal Zymotic Diseases	Deaths of Children under 1 year Percentage to total Deaths	Proportion of Deaths of Children under 1 year per 1,000 Registered Births	Deaths of Children under 5 years : Percentage to total Deaths
1937	14.88	11.50	0.22	5.7	44	7.3
1936	15.56	11.81	0.17	6.5	49	8.7
1935	14.81	11.82	0.28	5.7	46	7.4
1934	15.86	12.36	0.34	5.6	44	9.1
1933	15.38	12.44	0.23	6.4	52	9.7
1932	16.21	12.28	0.36	7.9	60	10.9
1931	17.49	12.88	0.31	8.1	55	11.3
1930	16.30	11.80	0.71	8.7	59	14.5
1929	16.80	13.82	0.49	8.7	66	13.0
1928	17.21	11.34	0.41	8.9	55	13.2
1927	17.08	12.68	0.52	7.9	55	13.9
Average of 10 yrs. 1927-36	16.27	12.32	0.38	7.4	54	11.2

TABLE VI.

22A

Showing the Population, Birth-rates, Death-rates, Zymotic Death-rates, Maternal Mortality, etc., in 20 Large Towns for the year 1937.

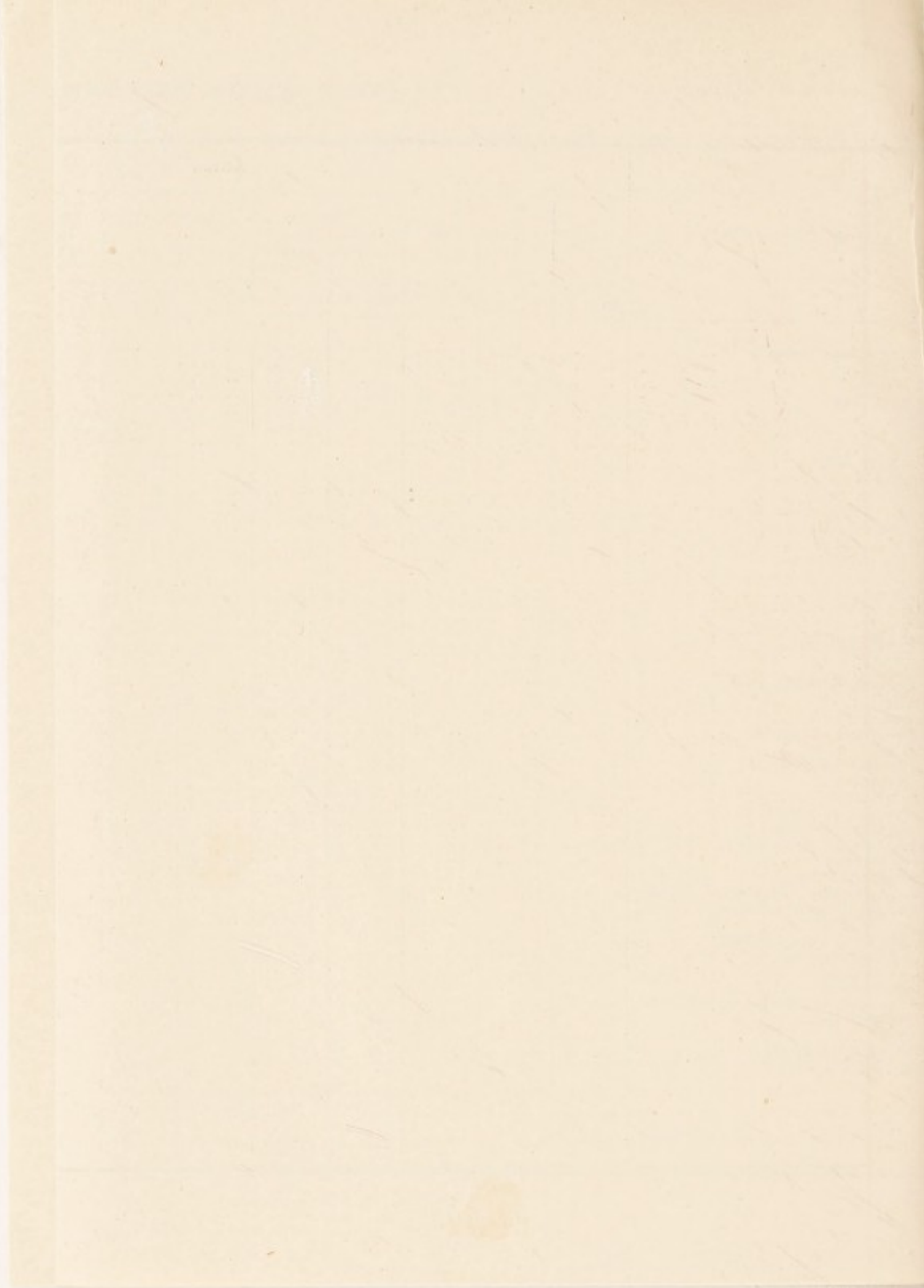
NAME OF TOWN	Population as estimated by the Registrar General Mid-1937	Comparability Factor	Per 1,000 Population		Death Rate as adjusted by Factor	RATES PER 1,000 POPULATION FROM :—												MATERNAL MORTALITY (per 1,000 Total Births)		
			Birth Rate	Crude Death Rate		Small-pox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Typhoid and Paratyphoid	Diarrhoea (under 2 years)	Influenza	Tuberculosis		Infantile Mortality Rate	From Sepsis	From Other Causes	Total	
														Pulmonary	Other Forms					
1. CROYDON .. ..	242,300	0.96	13.50	11.56	11.08	..	0.02	0.01	0.02	0.06	0.14	0.16	0.29	0.56	0.08	60	0.30	3.28	3.57	
2. BRISTOL .. ..	415,100	0.98	14.46	11.44	11.21	..	0.00	0.01	0.04	0.02	0.00	0.02	0.25	0.67	0.13	46	1.12	2.41	3.53	
3. PORTSMOUTH ..	256,200	0.99	14.88	11.50	11.38	..	0.02	0.02	0.04	0.05	0.01	0.08	0.22	0.55	0.07	44	..	1.51	1.51	
4. LEICESTER .. ..	262,900	1.02	14.48	12.46	12.71	..	0.04	..	0.04	0.08	..	0.08	0.45	0.82	0.14	63	1.27	..	1.27	
5. LONDON .. ..	4,094,500	1.02	13.44	12.52	12.77	..	0.01	0.01	0.06	0.05	0.00	0.17	0.40	0.71	0.09	60	0.81	1.41	2.22	
6. PLYMOUTH .. ..	210,460	0.98	14.60	13.06	12.79	..	0.00	0.00	0.01	0.08	..	0.02	0.16	0.69	0.07	46	2.19	1.13	3.32	
7. BIRMINGHAM ..	1,043,000	1.10	16.50	11.70	12.90	..	0.07	0.01	0.03	0.08	0.00	0.08	0.40	0.72	0.08	60	0.74	2.22	2.96	
8. CARDIFF .. ..	220,200	1.06	15.40	12.60	13.30	..	0.05	0.01	0.03	0.09	0.01	0.08	0.22	0.82	0.17	65	0.85	2.82	3.67	
9. WEST HAM .. ..	259,500	1.15	16.10	11.90	13.60	..	0.00	0.01	0.06	0.06	0.00	0.18	0.34	0.70	0.09	62	0.46	0.69	1.15	
10. HULL .. ..	319,400	1.10	18.20	12.60	13.80	..	0.13	0.01	0.02	0.18	..	0.19	0.37	0.92	0.20	77	0.83	1.65	2.48	
11. NOTTINGHAM ..	278,800	1.03	15.96	13.44	13.84	..	0.08	..	0.03	0.03	0.01	0.18	0.43	0.84	0.15	80	0.87	1.95	2.82	
12. SHEFFIELD .. ..	518,200	1.13	15.37	12.53	14.16	..	0.02	..	0.01	0.08	..	0.05	0.52	0.69	0.11	55	1.57	1.81	3.37	
13. LEEDS .. ..	491,800	1.07	14.80	13.36	14.30	..	0.02	0.01	0.04	0.09	0.01	0.13	0.37	0.72	0.11	67	0.79	1.45	2.24	
14. BRADFORD .. ..	289,510	1.00	13.85	14.74	14.74	0.00	0.01	0.01	0.04	0.16	0.01	0.11	0.47	0.65	0.12	70	0.95	1.67	2.62	
15. NEWCASTLE .. ..	290,400	1.13	16.50	13.30	15.03	..	0.05	0.00	0.09	0.08	..	0.28	0.35	0.93	0.19	91	1.00	3.21	4.21	
16. LIVERPOOL .. ..	867,110	1.15	19.29	13.21	15.19	0.00	0.14	0.01	0.14	0.17	0.02	0.20	0.16	0.79	0.13	82	0.58	1.73	2.31	
17. MANCHESTER ..	751,371	1.14	14.31	13.52	15.41	..	0.06	0.01	0.07	0.12	0.00	0.11	0.40	0.88	0.15	76	1.34	2.85	4.19	
18. SUNDERLAND ..	182,900	1.12	19.70	14.00	15.70	0.00	0.11	0.03	0.02	0.11	0.01	0.49	0.58	0.80	0.23	85	1.06	2.39	3.45	
19. STOKE-ON-TRENT	272,800	1.22	16.70	13.10	16.00	0.00	0.04	0.03	0.06	0.12	0.00	0.16	0.52	0.80	0.14	81	0.84	3.75	4.59	
20. SALFORD .. ..	201,800	1.18	15.10	14.60	17.23	..	0.06	0.01	0.07	0.06	..	0.12	0.28	0.88	0.13	84	0.94	3.47	4.41	











## NATURAL CONDITIONS.

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

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

CLIMATE.—The climate is sunny, equable and dry. The atmosphere is exceptionally clear and bright, and there is but little fog or mist. Snow is rarely seen. The meteorological records, 1928-37, show average maximum temperature  $59.6^{\circ}$ , annual sunshine 1,762 hours, annual rainfall 29.48 inches. The Invalids' Winter (November to March) is very sunny, averaging 2.76 hours per day, or 29 per cent. of the possible duration; very mild with average maximum temperature of  $48.2^{\circ}$  and rainfall only 14.00 inches.

SEA BATHING.—There is a long beach of sand and shingle suitable for bathing. Bathing shelters, with sun huts and tents are provided. There are no strong currents. The average sea temperatures are May  $53^{\circ}$ , June  $56^{\circ}$ , July  $60^{\circ}$ , August  $66^{\circ}$ , September  $60^{\circ}$ . A covered sea water swimming bath at a temperature of  $75^{\circ}$  is provided by the Corporation. In 1935, a large and up-to-date water pool (220 feet by 60 feet) was opened for bathers and water sports at Hilsea. The City Council have recently approved the erection, at a cost of £60,000, of a large indoor swimming bath, capable of accommodating 1,000 spectators, together with an extensive suite of Medical Baths.

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

WINTER ATTRACTIONS.—Indoor bowling green, golf, promenade on the sea front from which is obtained a constant panorama of warships, liners, etc., entering or leaving the Solent, chess and bridge clubs, theatres, cinemas, concerts, military bands and all the amenities of the adjacent large City of Portsmouth.”



## METEOROLOGICAL CONDITIONS, Etc.

### Summary of Meteorological Statistics, 1937.

**Barometer.**—The mean barometer pressure for the year was 29.927 inches. The highest observed reading corrected to sea-level was 30.719 on December 27th, and the lowest 28.798 on March 14th.

**Temperature.**—The mean temperature in the shade was  $52.3^{\circ}$ , or  $1.5^{\circ}$  above the normal.

**MAXIMUM.**—The mean maximum temperature in the shade was  $58.2^{\circ}$ , the highest being  $87^{\circ}$  on August 7th.

**MINIMUM.**—The mean minimum temperature was  $46.5^{\circ}$ , the lowest being  $28^{\circ}$  on March 9th and 10th.

**MINIMUM ON GRASS.**—The mean minimum temperature on the grass was  $41.1^{\circ}$ , the lowest being  $18^{\circ}$  on December 6th and 11th.

**EARTH TEMPERATURE.**—The mean temperature at 1 foot below the ground was  $53.3^{\circ}$ , and that at 4 feet  $53.9^{\circ}$ .

**Bright Sunshine.**—1,654.4 hours of sunshine were registered by the Campbell-Stokes Recorder. The greatest amount registered on one day was 14.0 hours, viz., on June 21st and July 20th.

**Frosts.**—The minimum thermometer in the shade, four feet above the ground, fell to and below freezing point on 30 days, and that on the ground on 59 occasions.

**Humidity.**—The mean humidity of the air (Saturation 100) was 83.9.

**Rainfall.**—The total rainfall was 33.33 inches, or 3.57 inches above the normal. The greatest fall of rain in 24 hours was 2.01 inches, on December 7th.

**Hail.**—Hail occurred on 3 occasions.

**Thunder.**—Thunder occurred on 7 occasions.

**Snow.**—Snow or Sleet fell on 14 occasions.

**Fogs.**—Fogs occurred on 11 occasions.

**Gales.**—Gales occurred on 8 occasions.

### Averages for the past Ten Years, 1928 to 1937.

	<i>Hours of Bright Sunshine</i>	<i>Mean Temperature</i>	<i>Humidity (Saturation 100)</i>
<i>Rainfall</i>			
29.48 inches	1761.6	$51.6^{\circ}$	83.2



TABLE VIII.

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

Year	Total Sunshine	Total Rainfall in ins.	Highest Maxi- mum in Shade ° F.	Date	Lowest Maxi- mum in Shade ° F.	Date	Lowest Mini- mum in Shade ° F.	Date	Lowest Mini- mum on Grass ° F.	Date
1890	1350	21.71	77	May 24th	30	Dec. 16th	18	Dec. 31st	10	Jan. 7th
1891	1247	31.43	78	May 16th, Sept. 12th	31	Jan. 6th	19	Jan. 18th	8	Jan. 10th, 11th
1892	1371	22.27	77	July 27th	29	Jan. 9th	19	Jan. 10th	13	Dec. 27th
1893	1412	23.14	85	June 18th	29	Jan. 2nd	20	Jan. 2nd	12	Jan. 5th
1894	1600	35.89	82	July 1st	25	Jan. 4th	14	Jan. 5th, 6th	13	Jan. 5th, 6th
1895	1811	27.26	79	Sept. 28th	25	Feb. 6th	17	Feb. 6th, 7th	5	Feb. 13th
1896	1566	25.79	81	July 21st	32	Feb. 23rd	24	Feb. 23rd	19	Feb. 26th
1897	1569	28.48	86	July 16th	32	Jan. 23rd	24	Jan. 24th	16	Dec. 4th
1898	1454	22.67	81	Aug. 16th	37	Feb. 16th	27	Feb. 16th	19	Feb. 21st
1899	1929	25.26	84	Aug. 3rd	30	Dec. 14th	22	Dec. 14th	16	March 25th
1900	1608	25.96	85	July 25th	35	Feb. 3rd	22	Feb. 10th	14	Feb. 8th, 10th
1901	1843	23.41	84	July 19th	30	Jan. 7th	20	Jan. 9th	14	Jan. 9th
1902	1501	25.27	82	July 19th	32	Dec. 6th	23	Dec. 7th	15	Feb. 12th, 13th, 16th
1903	1702	34.88	80	June 1st, July 9th	32	Jan. 12th	23	Jan. 15th	12	Dec. 3rd
1904	1732	26.64	79	July 17th	30	Jan. 2nd	25	Jan. 1st	13	Jan. 21st
1905	1685	24.05	80	July 21st, 26th	35	Jan. 1st, Nov. 17th	24	Nov. 24th	15	Jan. 6th, Nov. 21st
1906	1795	28.74	79	Sept. 1st	34	Dec. 26th	25	Jan. 24th	13	Feb. 14th
1907	1594	25.33	79	July 16th	29	Jan. 23rd, 24th	20	Jan. 24th	14	Jan. 25th
1908	1951	26.53	83	July 2nd	35	Jan. 11th	17	Dec. 30th	11	Jan. 6th
1909	1902	32.28	85	Aug. 12th	34	Mar. 3rd	20	March 3rd	10	Jan. 27th
1910	1691	31.66	76	May 23rd	35	Jan. 26th	21	Jan. 27th	10	Jan. 16th
1911	2108	30.06	90	Aug. 14th	35	Jan. 15th	25	Jan. 16th	13	Feb. 3rd
1912	1561	31.94	89	July 15th	32	Feb. 2nd	20	Feb. 3rd	12	Dec. 25th
1913	1584	29.95	81	June 29th	36	Dec. 29th, 30th	29	Jan. 13th, April 13th	19	Jan. 24th
1914	1914	33.13	79	Aug. 13th, 14th	33	Jan. 10th	25	Jan. 23rd	14	Nov. 27th
1915	1776	37.41	79	July 2nd	36	Jan. 28th	27	Feb. 26th	18	Dec. 17th
1916	1628	28.48	82	Aug. 2nd	34	Feb. 25th	25	Feb. 25th	17	Feb. 3rd
1917	1718	25.93	78	July 16th, 17th	31	Jan. 26th, 27th	20	Feb. 5th	13	Feb. 18th
1918	1874	25.80	83	Aug. 22nd	36	Jan. 3rd, 4th	23	Jan. 9th	16	Dec. 17th
1919	1784	29.06	82	Aug. 10th, 13th	31	Jan. 31st	24	Jan. 25th Feb. 8th, 9th	17	Dec. 16th
1920	1584	28.00	78	May 24th	31	Dec. 12th	22	Jan. 7th	22	Nov. 13th
1921	2095	14.00	89	July 19th	38	Feb. 7th	26	Nov. 15th	18	Nov. 13th
1922	1809	30.24	79	May 23rd, 24th	37	Feb. 6th	26	Jan. 24th, 25th	19	Jan. 18th
1923	1770	29.54	89	July 12th	34	Dec. 25th	23	Nov. 26th	17	Nov. 16th
1924	1760	36.59	77	July 12th	37	Feb. 20th, 27th	27	Feb. 18th, 29th	21	Feb. 15th
1925	1923	38.10	82	June 7th	35	Dec. 14th	26	March 10th	17	Nov. 14th
1926	1688	26.40	85	July 14th	32	Jan. 14th	22	Jan. 15th, 17th	18	Jan. 15th, 17th, Dec. 28th
1927	1653	34.00	80	July 10th	29	Dec. 19th	24	Dec. 19th	15	Jan. 20th
1928	1923	32.51	88	July 15th	37	Dec. 14th	25	Mar. 12th, 14th, Dec. 15th	17	Dec. 9th, 15th
1929	1686	28.00	87	Sept. 5th	26	Feb. 13th	16	Feb. 15th	7	Feb. 15th
1930	1730	30.65	83	August 28th	38	Dec. 5th	24	March 20th	16	Nov. 17th
1931	1503	27.76	77	August 3rd, 5th	33	Jan. 8th, March 9th	21	March 10th	16	March 9th
1932	1512	26.77	84	August 18th	31	Feb. 10th	26	Jan. 1st, Feb. 11th, Mar. 13	18	Jan. 1st
1933	2086	21.07	85	August 7th	33	January 24th	23	January 27th	19	December 9th
1934	1818	29.85	85	July 18th	38	Jan. 21st, Feb. 2nd	25	February 3rd	18	February 3rd
1935	1764	36.29	86	July 14th	33	December 20th	24	December 21st	20	December 21st
1936	1629	28.81	80	June 10th	34	February 11th	28	Feb. 12th, Dec. 8th, 13th	17	December 11th
1937	1654	33.33	87	August 7th	33	January 29th	28	March 9th and 10th	18	December 6th and 11th



**TABLE IX.**  
MONTHLY WEATHER SUMMARY FOR THE YEAR 1937.

Month	Mean Barometer ins.	Mean Temp. °F.	ABSOLUTE		MEAN		Mean Daily Range °F.	SUNSHINE		RAINFALL			Relative Humidity (Saturation 100)
			Max. °F.	Min. °F.	Max. °F.	Min. °F.		Total No. of hours	Days of 0.5 hrs. or more	Total m.m.	Total ins.	Days of 0.01 ins. or more	
January	29.826	44.1	53	29	48.2	40.0	8.2	63.2	14	157.6	6.19	24	92
February	29.645	45.4	55	30	50.0	40.9	9.1	67.4	17	117.0	4.61	24	91
March	29.663	41.7	56	28	47.4	36.1	11.3	141.1	25	91.5	3.60	16	85
April	29.872	51.1	65	38	58.8	45.4	11.4	140.2	26	51.1	2.01	17	82
May	30.023	56.2	74	40	63.0	49.5	13.5	203.0	28	36.4	1.43	12	79
June	30.085	61.0	80	47	68.8	53.3	15.5	236.5	30	27.7	1.09	6	73
July	30.034	63.4	77	52	69.5	57.4	12.1	163.0	25	35.9	1.41	7	79
August	30.093	65.7	87	51	73.4	58.0	15.4	232.5	29	30.2	1.19	4	76
September	29.961	59.5	78	43	66.6	52.4	14.2	168.9	27	57.6	2.26	11	81
October	29.993	55.0	68	41	60.8	49.2	11.6	116.7	24	68.3	2.69	11	84
November	30.037	44.7	58	29	49.9	39.6	10.3	76.3	17	47.3	1.86	8	91
December	29.896	40.4	53	29	44.4	36.5	7.9	45.6	10	127.1	4.99	20	94
TOTAL	—	—	—	—	—	—	—	1654.4	272	847.7	33.33	160	—
MEAN	29.927	52.3	67.0	38.0	58.2	46.5	11.7	137.8	22.6	70.6	2.77	13.3	83.9

## HOSPITAL AND OTHER SERVICES

(Figures for the previous year are included  
in brackets for comparative purposes.)



# HOSPITAL AND OTHER SERVICES.

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## SAINT MARY'S MUNICIPAL HOSPITAL.

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

The average number of beds occupied during the year has increased from 937 to 953—the highest ever recorded, and there were periods when the hospital accommodation was taxed to its utmost. In addition, the number of patients attending out-patient departments increased from 4,460 to 4,862, the increase being most marked in the Maternity and Skin Departments. Relief will come only when the aged and infirm persons are transferred to the new Home which is being erected by the Public Assistance Committee on the old Children's Home in Saint Mary's Road.

**Administration.**—During the year increasing difficulty was experienced in obtaining an adequate number of nurses in response to advertisements, due chiefly to—

- (a) the greater demand for nurses resulting from an extension of Hospital Services throughout the country, both municipal and voluntary ; and to
- (b) other Authorities offering higher salaries than Portsmouth.

A revised scale of salaries for all Public Health Institutions was approved and has relieved the situation somewhat. By the end of the year, however, it became evident that if the problem of the shortage of nurses, common throughout the country, was to be effectively solved, other aspects, in addition to adequate remuneration, *e.g.*, the bridging of the gap between school leaving age and the age when a probationer can commence hospital training, reduction in the number of working hours, etc., would have to be considered.



## Hospital Developments.

### (a) DEVELOPMENT OF THE DENTAL DEPARTMENT.—

Modern research is revealing more and more the important part played by dental caries in the causation of disease. With the extension of the Health Services, it became evident that some cases of sepsis in parturient women might have been prevented if septic dental foci had been removed during the ante-natal period, that dental caries in the toddler produced tonsillitis, swollen glands and inflammation of the middle ear, and that the tubercular patient made greater improvement in the Sanatorium if septic teeth were removed before admission.

Accordingly, the Committee approved a scheme to appoint a whole-time Dental Officer, and to modernise the equipment and accommodation at Saint Mary's Hospital. The new arrangements came into operation in April, 1937, and have worked well. Cases for dental treatment are now referred from the Ante-natal Clinics, the 'Toddlers' and Infants' Clinics and from the Tuberculosis Dispensary.

The work of the Dental Officer is co-ordinated with that of the School Dentists. In addition to his duties at Saint Mary's Dental Clinic, he spends two sessions a week at St. James's Hospital and two at the School Clinic.

### (b) DEVELOPMENT OF ORTHOPAEDIC DEPARTMENT.—

During the year, further progress was made towards the establishment of a complete Orthopaedic Department at Saint Mary's Hospital, when a ward of 25 beds on the female side was converted for use of orthopaedic cases and a plaster room and out-patients' room were provided.

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

The following Report of the Medical Superintendent indicates the increasing volume of work carried out by the resident and part-time visiting medical staffs and the nursing staff, and the important part played by the Hospital in the health services of the City.



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

HOSPITAL	SITUATION	DESCRIPTION	Number of Beds	MANAGEMENT	AREA SERVED	MEDICAL STAFF	NURSING STAFF
Royal Portsmouth Hospital	Commercial Road	General	250	Voluntary Committee	Portsmouth and surrounding district (excluding Gosport)	6 Resident Medical Officers 26 Honorary Medical and Surgical Staff	100
Portsmouth and Southern Counties Eye & Ear Hospital	Pembroke Road	Diseases of the Eye, Ear, Nose & Throat	57	Voluntary Committee	Portsmouth and surrounding district	One Resident Medical Officer 14 Honorary Medical and Surgical Staff	17
Saint Mary's Hospital	Milton Road	General and Lying-in	1050	*Health Committee of City Council	Portsmouth	1 Resident Medical Superintendent 6 Resident Assistant Medical Officers 8 Part-time Visiting Medical Officers	150 Nurses 75 Atttdts.
Infectious Diseases Hospital	Milton Road	City Infectious Diseases Hospital (excluding smallpox)	206	Health Committee of City Council	Portsmouth	2 Resident Medical Officers 1 Non-resident Medical Officer <i>Consultants when reqd.</i>	50
Langstone Sanatorium and Beach Lodge	Locksway Road, Milton	Tuberculosis, early cases and Children	25 and 10 children	Health Committee of City Council	Portsmouth	1 Non-resident Medical Officer	5
St. James' Hospital	Locksway Road, Milton	For Patients of Unsound Mind	1014	Mental Treatment Committee of City Council	Portsmouth	1 Resident Medical Superintendent 4 Resident Assistant Medical Officers	89 male 121 female
Royal Naval Maternity Home	Clifton Road, Southsea	Lying-in Cases. (Limited to the wives of men in the Royal Navy and Royal Marines)	21	Voluntary Committee	Portsmouth and District	1 Non-resident Medical Officer 5 Hon. Consultant Medical Officers	11
Military Families' Hospital	London Road, Hilsea	General and lying-in Cases. (Limited to the wives of men in the Army and Royal Air Force)	21 (nine maternity)	Army Authorities	Portsmouth and District	1 Non-resident Medical Officer	8



## REPORT ON THE WORK OF SAINT MARY'S HOSPITAL FOR THE YEAR 1937.

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

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The year 1937 showed a still further increase in the work of the Hospital, the accommodation of which during the whole year was taxed to its utmost.

The in-patient admissions in 1935 equalled 5,282 ; 1936, 5,407 ; 1937, 5,473. The average daily number of patients in the Hospital in 1936 was 937 and in 1937, 953. The highest number in Hospital during any one day was 985.

Owing to the increase in business of the Hospital it was found necessary to increase the number of telephone lines of the Hospital to five.

In January 1937 the special Orthopaedic Ward of the Hospital for Female Orthopaedic Cases was opened under the care of Mr. A. G. Ord, in addition to which the Side Ward was equipped and altered to form a Plaster Room. This Ward is the beginning of the Orthopaedic Department of the Hospital, as it is intended as soon as possible to prepare, equip and open a similar ward for the Male Orthopaedic cases ; the two Wards and Plaster Rooms then constituting the Orthopaedic Department.

In March 1937 the equipment of the new Dental Department was completed and a Dental Surgeon appointed in charge of this Department, which has become since its formation an exceedingly busy one. The Department is thoroughly up-to-date and well equipped, and consists of two Dental Surgeries and a Waiting Room. All classes of work—extractions, fillings and the supply of dentures are carried out in the Department, and during the year the work has been carried out smoothly and without trouble.

The work of the Maternity Department of the Hospital has also shown a considerable increase as compared with 1936. Births 1936, 756 ; Births 1937, 875. Maternal Deaths 1936, 6 = .8% ; 1937, 4 = .46%. Still Births 1936, 41 = 5.4% ; 1937, 40 = 4.5%. This is an improvement, despite the fact that the Maternity Department continues to receive large



numbers of the more dangerous types of cases from the City and from the County of Hampshire. Neo-Natal deaths (when death occurs within ten days of birth) numbered 16. This equals 1.83%, a remarkably good figure, and the lowest recorded in the history of the Hospital. The corresponding figure in 1936 was 2.77%.

In the Ante-Natal Department the work has again shown a large increase. Attendances for 1936 = 6,672 ; 1937 = 8,743—increase = 1,071 attendances. The number of women attending in 1936 = 1,144 ; 1937 = 1,386—increase = 250.

The Post-Natal Clinic treated 303 women, with 544 attendances, as against 260 women with 454 attendances in 1936.

The Operating Theatre of the Hospital has also been kept exceedingly busy, and is now in use for operations of General Surgery, Orthopaedic Operations, Throat, Nose and Ear Operations and certain Obstetric Operations. In this department there is urgent necessity for the building of a new Operating Theatre. 826 operations were performed in the Operating Theatre in 1937, of which 231 operations were major abdominal ones.

In the Out-patients' Department the number of attendances during the year was 10,457. This includes the attendances at the Electrical and Massage, the Skin and X-ray departments.

The Dental Department for the period April 1937 to 31st December 1937 dealt with 436 out-patients, who made 436 attendances, *i.e.*—

Number of Attendances :

Fillings 48 ; Dentures 9 ; Scalings 18 ; Extractions 361.

The extension of the Training School for the training of Male Nurses commenced in 1936 was continued during the year 1937, and we are now training 12 Male Probationers at one time. The first Male Probationer presented for the State Examination passed that examination successfully. The Male Probationer Staff has been found useful and to give most satisfactory service on the Male wards of the Hospital, and the Hospital is to be congratulated on being one of the first in the country to take up the training of Male Probationers on a large scale.

During 1937 a small extension of the Massage Department which had become necessary owing to the increased work of



the department was completed, and the department is now able to cope with the work. This Department is also equipped with new and modern electrical and light apparatus, and is doing excellent work in the treatment of both the In- and Out-patients of the Hospital.

An experimental Mimic Air Raid was held on the night of the 15th-16th July, in which the Hospital was equipped and used as a Cleansing Station and as a Casualty Clearing Station. The report on this experiment was regarded as satisfactory by the Home Office authorities.

A large proportion of the Nursing Staff is still housed at the old Municipal Maternity Hospital in Clive Road. This is an exceedingly awkward and unsatisfactory arrangement, and the nurses who are housed in that building are living in conditions which are most uncomfortable and which are lacking in privacy. These conditions, the expense entailed, and the fact that a large proportion of the Staff of the Hospital has to be boarded out points to the extreme urgency for building a new Nurses' Home.

The heating and domestic water supply of the Hospital have during the past year been unsatisfactory, and this matter is one which also requires attention.

The Hard Tennis Courts provided for Nursing Staff and Medical Staff were completed during the year and have been greatly appreciated by the staffs enjoying their use.

The Nurses Training School of the Hospital had a successful year in 1937 :—

#### 1937 STATE EXAMINATIONS.

<i>Finals</i> : Entered 19 ; Passed 17 ; Failed *2	} 80% passed
<i>Preliminaries</i> : Entered 37 ; Passed 28 ;	
Failed *9	

(\*of 2 failures in Final, one passed at second attempt in February 1938 ; \*of 9 failures in Preliminary, eight passed at second attempt in 1938, leaving actually only two failures of those entered in 1937).

The Staff of the Hospital during the year received small additions in all its departments, owing to the gradually increasing work. The equipment of the Hospital has been maintained in good order and efficiency, and each year sees additions of new and up-to-date equipment for the treatment of diseases and for the comfort of the patients of the Hospital.



TABLE XI.

## SAINT MARY'S HOSPITAL.

Table showing the classification of the accommodation for Sick, Maternity and Mental Cases and the number of beds occupied on the 31st Dec., 1937.

Classification of Wards  (1)	Number of Wards  (2)	BEDS							
		MEN		WOMEN		CHILDREN (under 16 years of age)		Total	
		Pro- vided (3)	Occu- pied (4)	Pro- vided (5)	Occu- pied (6)	Pro- vided (7)	Occu- pied (8)	Pro- vided (9)	Occu- pied (10)
Receiving Ward ..	1	..	..	..	..	..	..	5	..
1. Medical .. ..	2	51	51	49	40	..	..	100	91
2. Surgical .. ..	2	49	35	46	29	3	3	98	67
3. Chronic Sick .. ..	3	46	45	86	84	..	..	132	129
4. Children .. ..	2	..	..	..	..	108	108	108	108
5. Venereal .. ..	1	6	..	..	..	..	..	6	..
6. Tuberculosis .. ..	2	34	32	34	26	2	2	70	60
7. Isolation .. ..	..	..	..	..	..	..	..	..	..
8. Maternity .. ..	3	..	..	70	43	..	..	70	43
9. Mental Lunacy Act, 1890—									
(i) Short Stay .. ..	5	24	23	56	47	..	..	80	70
(ii) Long Stay .. ..		48	43	110	95	36	29	194	167
10. Mental Defectives ..	Part of 2 wards	37	37	32	32	..	..	69	69
11. Skin and Cancer ..	2	49	48	49	46	..	..	98	94
12. Orthopaedic .. ..	1	..	..	20	12	..	..	20	12
TOTAL ..	24	344	314	552	454	149	142	1050	910

TABLE XII.

## SAINT MARY'S HOSPITAL.

Statistics relating to In-patients during the year 1937, compared with 1936.

	<i>Year</i> 1937	<i>Year</i> 1936
1. Total number of admissions (including infants born in hospital) .. .. .	5473	5407
2. Number of women confined in Hospital ..	875	756
3. Number of Live Births .. .. .	845	715
4. Number of Still-births .. .. .	40	41
5. Number of Deaths among the newly-born ( <i>i.e.</i> , under four weeks of age)* .. .. .	18	28
6. Total number of Deaths among children under one year (including those given under 5) ..	48	48
7. Number of Maternal deaths among women confined in Hospital .. .. .	4	6
8. Total number of Deaths .. .. .	859	788
9. Total number of Discharges (including infants born in Hospital) .. .. .	4610	4607
10. Duration of stay of Patients included in 8 and 9 above. Number of cases whose total stay was for the following periods—		
(a) Under four weeks .. .. .	3547	2896
(b) Four weeks, but under thirteen weeks ..	879	990
(c) Thirteen weeks or more .. .. .	1043	1509
11. Number of beds occupied—		
(a) Average during the year .. .. .	953	937
(b) Highest on { 10th December, 1937 .. .. .	985	
{ 1st April, 1936 .. .. .		995
(c) Lowest on { 25th December, 1937 .. .. .	870	
{ 1st January, 1936 .. .. .		891
12. Number of Surgical operations under general anaesthetic (excluding dental operations) ..	826	1061
13. Number of abdominal sections .. .. .	231	233

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



TABLE XIII.

## SAINT MARY'S HOSPITAL.

Classification of In-patients who were discharged from or who died in the Hospital during the Year ended 31st December, 1937.

DISEASE GROUPS	Children (under 16 years of age)		Men and Women	
	Dis- charged	Died	Dis- charged	Died
1. Acute Infectious Disease .. .. .	87	2	21	9
2. Influenza .. .. .	..	..	13	2
3. Tuberculosis—				
Pulmonary .. .. .	5	1	116	57
Non-pulmonary .. .. .	11	2	23	2
4. Malignant Disease .. .. .	..	..	77	135
5. Rheumatism—				
(1) Acute Rheumatism (rheumatic fever) together with sub-acute rheumatism and chorea ..	32	..	22	..
(2) Non-articular manifestations of so-called “rheumatism” (muscular rheumatism, fibro- sitis, lumbago and sciatica) .. .. .	..	..	35	..
(3) Chronic arthritis .. .. .	..	..	24	..
6. Venereal Disease .. .. .	3	..	23	3
7. Puerperal Pyrexia .. .. .	..	..	31	..
8. Puerperal Fever { (a) Women confined in the hospital .. .. .	..	..	1	..
(b) Admitted from outside ..	..	..	5	..
9. Other diseases and accidents connected with Preg- nancy and Childbirth .. .. .	..	..	92	3
10. Mental Diseases { (a) Senile Dementia .. .. .	..	..	24	..
(b) Other .. .. .	8	..	97	..
11. Senile decay .. .. .	..	..	61	131
12. Accidental Injury and Violence .. .. .	23	1	67	49
<i>In respect of cases not included above :</i>				
13. Disease of the Nervous System and Sense Organs ..	45	2	143	42
14.     „     „     Respiratory System .. .. .	107	8	188	57
15.     „     „     Circulatory System .. .. .	27	1	201	240
16.     „     „     Digestive System .. .. .	59	11	167	32
17.     „     „     Genito-urinary System .. .. .	33	..	98	36
18.     „     „     Skin .. .. .	62	..	97	..
19. Other Diseases .. .. .	25	29	143	4
20. Mothers and Infants discharged from Maternity Wards, and not included in above figures :				
Mothers .. .. .	..	..	1057	..
Infants .. .. .	832	..	..	..
21. Any persons not falling under any of the above headings .. .. .	291	..	134	..
TOTALS	1650	57	2960	802 <sup>d</sup>

TABLE XIV.

## SAINT MARY'S HOSPITAL.

Table shewing the Number of Sessions held by the part-time Visiting Medical Officers and the number of patients and attendances at the Out-patient Department and Ante-natal Clinic during the year, compared with 1936.

	<i>Year</i>	<i>Year</i>
Number of Sessions held by Visiting Medical Officers :	1937	1936
	—	—
Physician .. .. .	100	108
Surgeon .. .. .	62	77
Ear, Nose and Throat Specialist .. .. .	119	147
Radiologist .. .. .	154	149
Skin Specialist .. .. .	87	100
Orthopaedic Surgeon .. .. .	120	118
Obstetrician .. .. .	261	160
	—	—
Total	903	859
Number of Patients attending Out-patient Departm't	2720	3222
Number of Attendances at Out-patient Department	10487	12161
Number of Patients attending Ante-natal Clinic ..	1386	1144
Number of Attendances at Ante-natal Clinic ..	8747	6672



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

DISEASE	Result				TOTAL	
	Positive		Negative			
	1937	1936	1937	1936	1937	1936
Diphtheria .. .. .	979	751	5013	4166	5992	4917
Tuberculosis .. .. .	919	646	1287	1328	2206	1974
Enteric Fever .. .. .	29	6	97	24	126	30
Others .. .. .	9	—	22	—	31	—
Totals ..	1936	1403	6419	5518	8355	6921

As stated in my last Annual Report, a small laboratory has been established at the Infectious Diseases Hospital for the examination of swabs from that institution. During the year 3,327 (3,007) specimens were examined : 3,277 (2,876) for diphtheria, of which 768 (630) were positive. These figures are included in the above table.

In addition, the Pathologist made 30 (19) examinations of specimens submitted in connection with the investigation of cases of Puerperal Pyrexia and Puerperal Fever, 312 (176) examinations of specimens submitted from the Infectious Diseases Hospital, 364 (353) examinations of specimens submitted from Saint Mary's Hospital, and 122 (59) examinations of specimens submitted from the Health Department, Tuberculosis Dispensary, etc.

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



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

One Ambulance kept at the Milton Hospital for cases of infectious disease ;

Two Police ambulances at the Police Station for street accidents ;

Five Ambulances at the Ambulance Station, Saint Mary's Hospital, for general work.

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

### **PROFESSIONAL NURSING IN THE HOME.**

The nurses of the Victoria Nursing Association, of whom there are 27 (25), attended on 2,958 (2,764) patients in their own homes ; they paid altogether 92,453 (84,244) visits, these included 6,102 (6,795) visits to 387 (404) patients at the request of the Health Department (Maternity and Child Welfare Section) and 1,930 (2,066) visits in respect of 27 (43) tuberculous patients, at the request of the Tuberculosis Officer and other medical men.

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

**Accommodation.**—Accommodation for the reception of mental defectives is provided at Saint Mary's Hospital, where a portion of that hospital is approved by the Board of Control under Section 37 of the Mental Deficiency Act, 1913. All classes of defectives within the meaning of the Mental Deficiency Acts are received, provided the patients are over the age of 16 years, the number not to exceed 60 (29 males and 31 females).

On 1st January, 1938, there were 173 defectives actually resident in Certified Institutions, chargeable to the Local Authority (64 males and 109 females). Two male and four female defectives were absent from Institutions without leave, and 11 male and 10 females were granted prolonged leave of absence on licence from Institutions or guardianship. There were also 18 defectives (9 males and 9 females) from Portsmouth borne on the books of State Institutions.



Plans for the provision of a Colony on Portsdown Hill for accommodating 500 mental defectives have been approved by the Government Departments and the City Council, and it is hoped that in the very near future actual building operations will be commenced.

In addition to the above, there were on the 1st January, 1938, 110 mental defectives (39 males and 71 females) under guardianship, in respect of whom the Local Authority contribute towards the cost of their maintenance.

**Care and Training.**—The number of mental defectives under Statutory Supervision on the 1st January, 1938, was 191 (102 males and 89 females) and the number under voluntary supervision was 599 (276 males and 323 females).

The continued use of the portion of the old Children's Home in St. Mary's Road as an Occupation Centre, has proved of immense value, providing an environment which has been the means of greatly improving the response to training given by those attending. As a means of additional training for the Senior Girls attending the Occupation Centre, a loom was purchased and instruction in weaving was begun towards the end of the year. Excellent progress has been made in this direction, and it is proposed to extend this form of training by the purchase of further looms. The provision of a hot mid-day meal at a small charge has been continued and much enjoyed by the children.

At the end of the year the total number of defectives on the register at the Occupation Centre was 138.

The defectives and border-line cases living in their own homes are visited periodically by the staff of the Mental Treatment Department, and during the year 1937, 3,919 visits were made.

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

(Figures for the previous year are included  
in brackets for comparative purposes).



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

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During the year under review 1,812 cases of infectious disease were notified, as compared with 1,557 during 1936. The outstanding features were :—

- (a) an increase in the number of cases of scarlet fever and diphtheria, with comparatively low mortality rates ;
- (b) the second lowest death-rate on record (0.22 per 1,000 living) from the Seven Principal Zymotic Diseases—diphtheria, scarlet fever, measles, small-pox, typhoid fever, whooping cough and diarrhoea.

**SCARLET FEVER.**—The number of cases of scarlet fever notified was 948, which is 247 more than last year (701) and 186 more than the average number per year (762) for the past twelve years. Of these 912, or 96.2% were admitted to hospital.

There were only five deaths due to scarlet fever, giving a case mortality rate of 0.52% as compared with 0.28% last year, and with an average of 0.86% for the past ten years.

**SCARLET FEVER "RETURN" RATE.**—During the year there were 32 "return" cases of scarlet fever, giving a "return" case rate of 3.95%, compared with 4.47% during 1936. This is a marked improvement on previous years. A "return" case is defined as a case of scarlet fever occurring in the same house not less than 24 hours and not more than 28 days from the return of the original case from hospital.

**OUTBREAKS.**—During the year there were a few minor outbreaks of scarlet fever in institutions and schools, which were successfully dealt with.



**DIPHTHERIA.**—During the year 310 cases were notified, compared with 244 cases in 1936. Of these, 303, or 97.7%, were removed to hospital.

There were 13 (8) deaths from the disease, giving a case mortality rate of only 4.19%, as compared with 3.27% for last year.

**OUTBREAKS.**—There were no epidemics of diphtheria in the City during the year.

**DIPHTHERIA IMMUNISATION.**—Despite the fact that during the year there was a Health Week and that energetic measures were adopted to acquaint the populace with the benefits of immunisation against diphtheria, the response has been disappointing.

As to the efficacy of immunisation there can be no doubt. Active immunisation against diphtheria has been practised in this country and in America since the War and has definitely passed the experimental stage. Parents can be assured that their children, if successfully immunised and post Schick tested, will not contract the disease under normal circumstances even though exposed to it.

Active immunisation is the only reliable safeguard against the severe type of diphtheria which is prevalent in this country. Whereas in the ordinary form of diphtheria early administration of anti-toxin to the patient can be relied upon to neutralise the poison, in the graver type anti-toxin fails to give the same favourable results. The wise parent, therefore, will not hesitate to do his duty to his child and will follow the example of the doctors themselves, who take good care to see that their own children are immunised. The foolish parent, however, will wait until his child contracts the disease and will then experience the remorse of knowing that but for his parental neglect the serious illness of his child, followed, perhaps, by complications and even death, could easily have been prevented—not to speak of the needless expense which his indifference has caused his fellow-ratepayers in maintaining his child in hospital (approximately £25).

A comprehensive scheme for the diphtheria immunisation of children in the City was approved by the Health Committee and launched in 1935. The co-operation of Medical Practitioners in the City was obtained, and immunising and testing



material forwarded to them free on request. Leaflets (a copy of which was reproduced in my Annual Report of 1935) were widely distributed, requesting parents to visit their own doctor, or if unable to afford a doctor, to apply to the Health Department.

During the year 1,054 (1,459) c.c.'s of immunising material (*i.e.*, two injections each of 1 c.c. of Toxoid Antitoxin Floccules T.A.F. per case) were issued to Medical Practitioners, together with 28 (20) c.c.'s of Schick test material, and in addition 156 (480) children were Post-Schick tested by the Department's Medical Officers at the request of Medical Practitioners. The results were as follows :—

Schick positive	...	9 (5.76%)	(50)
Schick negative	...	147 (94.24%)	(430)
<hr/>			
Total	...	156	(480)
<hr/>			

It has now been decided to issue 3 x 1 c.c.'s of T.A.F. instead of 2 x 1 c.c. doses, and it is anticipated that the third injection will increase the percentage of children rendered immune to about 95. The 9 (50) children who were found to be still Schick positive were given further injections until rendered Schick negative.

The immunisation work carried out by the Medical Officers of the Health Department during the year was as follows :—

#### CHILDREN INNOCULATED DURING 1937.

##### Infectious Diseases Hospital :

Immunised 286 (520) ; Schick tested 378 (461)

##### School Clinic :

Immunised 77 (157) ; Schick tested 162 (147)

##### Royal Naval and Marine Orphanage :

Immunised 20 (—) ; Schick tested 16 (—)

Total	383 (677)	Total	556 (608)
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In immunising the 286 (520) children at the Infectious Diseases Hospital, Alum Precipitated Toxoid or A.P.T. (*i.e.*, the "two shot" method—two injections of 0.1 cc. and 0.5 cc.) was used as an experiment in 155 (207) cases, and Toxoid



Antitoxin Floccules or T.A.F. (two injections each of 1 c.c.) was used in 137 (313) cases. The results were as follows :—

A.P.T. :

Schick negative	...	...	75 (156)
Schick positive	...	...	1 (3)
Not tested	...	...	79 (48)

Total 155 (207)

*i.e.*, 98.7% (98%) of those tested after immunisation with A.P.T. by the "two shot" method became Schick negative.

T.A.F. :

Schick negative	...	...	52 (255)
Schick positive	...	...	6 (27)
Not tested	...	...	73 (31)

Total 131 (313)

*i.e.* 89.7% (90.5%) of those tested after immunisation with T.A.F., using two injections only of 1 c.c., became Schick negative.

The numbers are small, but even so they indicate quite clearly the superiority of the "two shot" A.P.T. method over the two 1 c.c. T.A.F. method, thus suggesting that when T.A.F. is used, three injections (1 c.c., 1 c.c. and 1.5 c.c.) be given. A.P.T. is ideal and very efficient for children under six years of age. T.A.F. should be used for older children.

**MEASLES.**—As measles is not notifiable, the number of cases occurring in the City during the year is not known. The number of deaths was 5. Measles is undoubtedly one of the chief killing diseases in childhood.

### PREVENTION OF MEASLES.

The prevention or attenuation of measles by the injection of the blood serum of persons who have suffered from the disease has now passed the experimental stage and the results achieved indicate that the method is of real value. Accordingly the Health Committee invited, and readily obtained, the co-operation of Medical Practitioners in the City in a Scheme for the collection and distribution of measles serum (which was described in full in my Report last year).

By means of the serum the doctor can prevent an attack of disease in those exposed to the infection, the



protection lasting for a few weeks, after which the patient becomes susceptible ; or, if he considers it advisable, he can arrange for the patient to have only a modified attack, which usually occurs without complications, and protection remains high for at least many months and probably for years.

**ERYSIPELAS.**—During the year 63 (61) cases were notified and of these 2 (4) proved fatal.

**ENTERIC FEVER.**—There were 12 (11) cases notified during the year. These occurred sporadically. Investigation failed to reveal a common source of infection.

**PUERPERAL FEVER AND PYREXIA.**—There were 4 (9) of the former and 34 (48) of the latter notified during the year. These conditions are dealt with more fully in the Maternity and Child Welfare section of the report.

**PNEUMONIA—Acute Influenzal and Acute Primary.**—During the year 45 (47) cases were notified. The total deaths from this disease, certified as such during the year were 116 (137), giving a mortality rate of 0.45 (0.55) per 1,000.

**UNDULANT FEVER.**—One non-fatal case of Undulant Fever occurred, traceable to milk from a cow. Investigation failed to reveal other cases.

Other infectious diseases notified during the year are given below :—

Disease	Cases Notified*	Admitted to Hospital	Total Deaths
Diphtheria .. .. .	310	303	13
Scarlet Fever .. .. .	948	855	5
Enteric Fever.. .. .	12	15	3
Puerperal Fever .. .. .	4	3	—
Puerperal Pyrexia .. .. .	34	25	—
Acute Primary & Influenzal Pneumonia	45	13	57
Cerebro-spinal Meningitis .. .. .	3	3	2
Acute Polio-myelitis .. .. .	4	2	1
Erysipelas .. .. .	63	51	2
Dysentery .. .. .	2	—	—
Undulant Fever .. .. .	1	1	—
Ophthalmia Neonatorum .. .. .	15	3	—
Tuberculosis .. .. .	371	342	159

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

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

Cases Notified	Treated		Vision Unimpaired	Vision Impaired	Total Blindness	Deaths
	At Home	In Hospital				
15	12	3	13	1	—	1

In regard to the case of impaired vision and to the case which died, ophthalmological specialist treatment was ordered and administered from the onset. The cause of death of the latter was certified as convulsions, gastro-enteritis and microcephaly.

**VACCINATION.**—During 1936, the last year for which statistics are available, 4,102 (3,860) births were registered, of whom 2,910 (2,747) or 70.94% (71.2%) were successfully vaccinated; 38 (20) cases were found to be insusceptible to vaccination, and statutory exemptions were issued in respect of 783 (785).

Although there has been a slight reduction in the percentage of successfully vaccinated children during the year, the figure 70.94% would still appear to be the highest of the 20 largest towns in the country, and compares very favourably with the corresponding figure of 35.4% for England and Wales for the year 1935.



**TABLE XV.**  
**VACCINATION RETURNS FOR PAST THIRTY YEARS.**

Year	No. of Births re- turned in birth sheets so regis- tered from 1st Jan. to 31st Dec.	Successfully Vaccinated	Insus- ceptible to Vaccin- ation	Had Small- pox	Dead Unvac- cinated	Postpone- ment by Medical Certificate	Removed to Districts the Vacc. Officer of which has been appraised	Removed to places to which unknown	No. of these births remain- ing	No. in respect of which certificates of conscientious objections have been received
1908	5998	5120	35	..	473	37	43	24	..	266
1909	5861	4938	46	..	430	40	33	26	2	346
1910	5809	4667	15	..	449	40	50	21	5	562
1911	5788	4376	57	..	510	41	43	42	6	713
1912	5658	4314	26	..	389	33	57	34	5	800
1913	5874	4321	35	..	409	44	48	27	12	978
1914	5749	4235	42	..	409	59	74	31	9	890
1915	4997	3785	29	..	288	47	50	18	11	769
1916	5208	3875	31	..	321	39	56	29	9	848
1917	4613	3405	13	..	256	32	54	37	6	810
1918	4810	3459	38	..	263	38	118	30	5	859
1919	5195	3752	13	..	302	26	76	38	4	984
1920	6600	4790	38	..	303	30	116	29	5	1289
1921	5662	4083	18	..	265	32	82	26	4	1152
1922	5528	4105	11	..	269	23	61	18	2	1039
1923	5327	4243	28	..	239	40	86	15	2	674
1924	5089	4004	21	..	243	26	45	16	3	731
1925	4884	3772	15	..	223	24	54	14	2	780
1926	4637	3673	42	..	185	26	53	14	2	642
1927	4353	3418	35	..	157	28	48	16	3	648
1928	4579	3541	38	..	194	27	63	20	5	691
1929	4518	3395	86	..	222	33	52	20	2	708
1930	4407	3232	28	..	174	29	70	35	12	827
1931	4454	3152	36	..	185	87	72	65	76	781
1932	4174	2872	22	..	202	133	74	51	20	799
1933	4000	2759	16	..	164	133	46	44	22	816
1934	4042	2813	16	..	132	130	60	46	21	824
1935	3860	2747	20	..	149	50	39	53	17	785
1936	4102	2910	38	..	161	83	58	69	..	783
*1937 (to June)	2082	1452	27	..	67	46	22	40	6	422

\*6 months only.

TABLE XVI.

VACCINATION RETURNS—1st January to 30th June, 1937.

Registration Sub-Districts comprised in the Vaccination Officer's District.	Number of Births returned in the Birth List Sheets as registered from 1st January to 30th June, 1937	Number of these Births duly entered by 31st Jan., 1938, in Columns 1, 2, 4 and 5, of the Vaccination Register Birth List Sheets, viz. :				Number of these Births which on 31st January, 1938, remained unentered in the Vaccination Register on account (as shown by Report Book) of				Number of these Births remaining on 31st January, 1938 neither, duly entered in the Vaccination Register (columns 3, 4, 5, 6 & 7 of this Return) nor temporarily accounted for in the Report Book (columns 8, 9 and 10 of this Return).
		Col. 1 Success- fully Vaccin- ated	Col. 2 Insuscep- tible of Vaccin- ation	Had Small- Pox	Col. 4 Number in respect of whom Certi- ficates of Conscientious Objection have been received	Col. 5 Dead Unvac- cinated	Postpone- ment by Medical Certificate	Removal to Districts the Vaccination Officer of which has been duly apprised	Removal to places un- known, or which cannot be reached ; and cases not having been found	
1	2	3	4	5	6	7	8	9	10	11
1. North End and Buckland	663	463	10	..	140	28	10	4	8	—
2. Kingston and East Southsea	571	383	5	..	122	19	12	7	17	6
3. Portsea and Landport	298	218	2	..	53	13	5	2	5	—
4. Portsmouth and Mid-Southsea	550	388	10	..	107	7	19	9	10	—
Totals .. ..	2082	1452	27	..	422	67	46	22	40	6
VACCINATION OF CHILDREN whose Births were registered in this District from Jan. 1st to Dec. 31st, 1936 inclusive.										
1. North End and Buckland	1222	846	10	..	276	32	19	26	13	—
2. Kingston and East Southsea	1105	773	12	..	199	52	29	14	26	—
3. Portsea and Landport	684	501	4	..	126	35	6	2	10	—
4. Portsmouth and Mid-Southsea	1091	790	12	..	182	42	29	16	20	—
Totals .. ..	4102	2910	38	..	783	161	83	58	69	—



TABLE XVII.

Table showing the Numbers and Death-rates per 1,000 of Population from the Seven Principal Zymotic Diseases, from Lung Diseases (excluding Phthisis), from Phthisis, and from all causes, during each Quarter and for the whole year 1937.

Quarter ending	The Seven Principal Zymotic Diseases* All ages		Lung Diseases (excepting Phthisis)†		Phthisis		From all Causes	
	No.	Death Rate per 1000	No.	Death Rate per 1000	No.	Death Rate per 1000	No.	Death Rate per 1000
1937								
March 31st .. ..	16	0.25	87	1.35	38	0.59	838	13.08
June 30th .. ..	12	0.19	55	0.85	34	0.53	705	11.00
September 30th ..	13	0.20	21	0.33	31	0.49	619	9.66
December 31st ..	16	0.25	52	0.81	39	0.61	785	12.26
Totals .. ..	57	0.22	215	0.84	142	0.55	2947	11.50

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

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

TABLE XVIII.

Showing the number of Deaths in the years 1861 to 1937 from the Seven Principal Zymotic Diseases.

Year	Popula- tion	DISEASES							TOTALS	
		Small- pox	Measles	Scarlet Fever	Diph- theria	Whoop'g Cough	Typhoid Fever	Diarr- hoea	Numbers	Rate per 1000 living
1861	95220	1	3	5	6	11	111	152	289	3.06
1862	96060	..	42	225	20	36	128	71	522	5.39
1863	97831	12	80	134	24	16	37	68	391	3.96
1864	100531	228	6	17	17	48	72	118	506	4.95
1865	102363	3	14	20	7	50	74	122	290	3.09
1866	104230	1	16	34	26	46	85	117	325	3.16
1867	106130	..	82	15	4	23	74	140	338	3.18
1868	108064	..	46	107	18	57	119	117	464	4.86
1869	110034	1	57	295	18	26	105	100	602	5.47
1870	112040	1	39	119	13	46	91	121	430	3.83
1871	114083	39	42	30	10	66	72	100	359	3.28
1872	114970	514	52	5	21	17	112	113	834	7.25
1873	116380	45	16	12	15	19	97	106	310	2.66
1874	117810	2	56	36	19	104	101	149	467	3.90
1875	119260	..	54	47	18	8	103	141	371	3.11
1876	120730	1	109	457	11	42	71	131	822	6.80
1877	122210	..	12	36	5	59	87	153	352	2.63
1878	123710	..	36	16	1	92	96	170	411	3.32
1879	125250	..	10	11	4	9	62	73	169	1.35
1880	126830	..	42	9	20	48	70	192	381	3.00
1881	128691	..	7	25	205	66	60	73	436	3.38
1882	131535	..	156	40	106	36	107	111	556	4.22
1883	134441	1	10	16	20	54	93	80	274	2.03
1884	137412	..	164	9	41	9	58	116	397	2.88
1885	140448	..	7	5	42	44	93	123	314	2.23
1886	143552	1	197	18	65	102	124	191	698	4.86
1887	146724	3	8	26	47	41	53	151	329	2.34
1888	149966	..	50	12	17	27	27	98	231	1.53
1889	153279	2	8	11	33	92	32	122	300	1.95
1890	156667	..	4	19	47	39	50	105	264	1.69
1891	160167	..	223	9	23	38	33	73	399	2.49
1892	163628	..	38	18	26	87	42	99	310	1.89
1893	165153	..	120	32	29	36	54	247	518	3.13
1894	167878	4	139	14	34	41	29	93	554	3.18
1895	170672	..	39	7	18	64	37	238	403	2.36
1896	173565	..	126	19	20	60	28	157	410	2.36
1897	176497	..	35	11	22	65	44	286	463	2.62
1898	179500	..	73	31	54	42	44	183	427	2.38
1899	182576	..	50	22	120	62	75	316	645	3.35
1900	185725	..	3	11	104	87	93	159	457	2.46
1901	188885	..	82	15	70	21	43	311	542	2.87
1902	193969	..	70	14	62	92	54	159	451	2.32
1903	198049	..	17	27	75	34	23	115	291	1.46
1904	202171	..	1	22	71	76	34	213	417	2.06
1905	206336	..	218	11	69	45	18	173	534	2.58
1906	210546	..	8	3	60	63	17	226	377	1.79
1907	214797	..	169	4	61	57	30	60	381	1.77
1908	219095	..	14	8	49	55	26	48	200	0.91
1909	223436	..	104	19	66	27	33	54	303	1.35
1910	227821	..	64	30	56	52	39	54	295	1.29
1911	232221	..	28	21	72	40	26	290	477	2.05
1912	236732	..	95	29	124	52	22	57	379	1.60
1913	241256	..	25	20	87	16	23	112	283	1.17
1914	245827	..	39	5	79	50	29	71	273	1.11
1915	*202141	..	123	17	68	36	18	52	314	1.55
1916	*197843	..	15	3	52	46	10	65	191	0.96
1917	*198527	..	44	7	40	36	4	48	179	0.90
1918	*203396	..	52	4	48	43	5	40	192	0.94
1919	*224846	..	14	2	42	20	..	37	115	0.51
1920	*233805	..	32	3	40	41	1	22	139	0.59
1921	*233929	..	23	13	30	21	3	87	177	0.75
1922	*236630	..	12	12	48	42	3	32	149	0.61
1923	*230718	..	39	5	46	9	11	31	141	0.61
1924	*232000	..	16	8	18	38	4	21	105	0.44
1925	*232900	..	20	6	43	30	5	19	123	0.52
1926	*231500	..	11	7	66	17	3	36	140	0.60
1927	*232100	..	40	3	47	18	..	15	123	0.52
1928	*240700	..	9	3	53	12	2	22	101	0.41
1929	*242000	..	1	7	24	19	2	67	120	0.49
1930	*242000	..	101	9	16	6	1	40	173	0.71
1931	*228900	..	1	12	12	21	3	24	73	0.31
1932	253100	..	48	5	2	6	..	30	91	0.36
1933	251200	..	4	10	9	17	..	19	59	0.23
1934	248900	..	28	10	29	7	1	12	87	0.34
1935	250200	..	..	6	39	9	1	16	71	0.28
1936	251400	..	14	2	8	1	2	17	44	0.17
1937	256200	..	5	5	13	10	3	21	57	0.22

\* Civil population only.



TABLE XIX.

WEEKLY RETURN of cases of Infectious Disease.

Week ending	1937	Scarlet Fever	Diphtheria	Enteric Fever	Pneumonia	Puerperal Fever	Puerperal Pyrexia	Cerebro-spinal Fever	Erysipelas	Ophthalmia Neonatorum	Acute Polio-myelitis	Dysentery	Undulant Fever	Tuberculosis		Total
														Pul-monary	Non-Pul-monary	
Jan.	9	13	4	..	1	..	..	..	4	..	..	..	..	2	1	25
"	16	9	3	..	2	..	..	..	1	..	..	..	1	10	..	26
"	23	8	3	..	4	..	..	..	..	..	..	..	..	8	4	27
"	30	17	6	..	3	..	1	..	2	..	..	..	..	10	3	42
Feb.	6	13	4	..	3	..	1	..	1	..	..	..	..	17	5	44
"	13	16	2	..	..	..	..	..	1	1	..	..	..	9	3	32
"	20	14	5	..	2	..	..	..	..	..	1	..	..	14	1	37
"	27	16	7	..	1	1	..	..	1	1	..	..	..	8	2	37
Mar.	6	13	4	1	..	..	2	..	..	..	..	..	..	6	..	26
"	13	12	2	..	..	..	..	..	1	..	..	..	..	5	..	20
"	20	11	1	..	1	..	1	..	2	..	..	..	..	6	1	23
"	27	11	2	..	..	..	..	..	1	..	..	1	..	3	..	18
April	3	13	1	..	2	..	..	1	1	..	..	..	..	3	1	22
"	10	12	1	..	3	..	2	1	..	..	..	1	..	8	2	30
"	17	10	9	1	..	..	1	..	..	..	..	..	..	8	1	30
"	24	13	1	..	..	..	..	..	1	1	..	..	..	6	..	22
May	1	15	2	1	..	..	..	..	1	..	..	..	..	5	1	25
"	8	8	4	..	1	..	1	..	1	..	..	..	..	6	..	21
"	15	6	1	..	5	..	..	..	1	..	1	..	..	4	..	18
"	22	10	2	..	..	..	..	..	..	..	..	..	..	4	..	16
"	29	6	6	..	3	..	1	..	2	..	..	..	..	7	2	27
June	5	16	..	..	..	..	..	..	..	..	..	..	..	10	1	27
"	12	11	4	..	..	..	..	..	..	1	..	..	..	9	1	26
"	19	12	6	..	..	..	..	..	..	1	..	..	..	6	..	25
"	26	17	1	..	..	..	2	..	2	..	..	..	..	6	..	28
July	3	19	8	1	..	1	..	..	..	1	..	..	..	2	1	33
"	10	13	4	..	..	..	..	..	1	..	..	..	..	6	..	24
"	17	18	4	..	2	..	..	..	1	1	..	..	..	10	..	36
"	24	10	5	..	..	..	..	..	1	1	..	..	..	8	1	26
"	31	13	7	2	..	..	2	..	4	1	..	..	..	7	..	36
Aug.	7	26	4	..	..	..	..	..	2	..	..	..	..	4	..	36
"	14	12	8	..	..	1	..	..	..	..	..	..	..	1	1	23
"	21	18	5	..	4	..	..	..	..	..	..	..	..	6	1	34
"	28	11	1	..	..	..	..	..	..	..	..	..	..	6	2	20
Sept.	4	13	2	2	1	..	..	..	1	..	1	..	..	4	..	24
"	11	13	3	..	1	1	..	..	1	..	1	..	..	6	2	28
"	18	24	3	..	..	..	1	..	1	1	..	..	..	4	..	34
"	25	20	6	..	..	..	3	..	1	2	..	..	..	1	..	33
Oct.	2	19	10	1	1	..	..	1	2	1	..	..	..	7	..	42
"	9	20	11	..	..	..	2	..	..	..	..	..	..	4	1	38
"	16	30	22	..	..	..	..	..	4	..	..	..	..	7	3	66
"	23	45	24	..	1	..	2	..	1	..	..	..	..	6	1	80
"	30	29	16	..	1	..	7	..	2	..	..	..	..	3	..	58
Nov.	6	28	10	..	..	..	..	..	2	..	..	..	..	6	..	46
"	13	24	22	..	1	..	..	..	3	..	..	..	..	11	..	61
"	20	53	10	1	..	..	1	..	3	..	..	..	..	3	2	73
"	27	27	5	1	..	..	3	..	3	..	..	..	..	7	..	46
Dec.	4	36	5	..	..	..	1	..	1	1	..	..	..	6	1	51
"	11	28	7	1	1	..	..	..	1	1	..	..	..	8	1	48
"	18	42	12	..	..	..	..	..	..	..	..	..	..	6	..	60
"	25	31	4	..	..	..	..	..	..	..	..	..	..	3	2	40
Jan.	1	24	11	..	1	..	..	..	5	..	..	..	..	1	..	42
TOTALS ..		*948	310	12	45	4	34	3	63	15	4	2	1	323	48	1812

\* Includes one notification in the Port for week ending 7th August.

TABLE XX.—Cases of Infectious Diseases notified during the Year 1937.

Notifiable Disease	CASES NOTIFIED IN WHOLE DISTRICT													TOTAL CASES NOTIFIED IN EACH WARD.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																				
	At all Ages	Un-der 1	At Ages—Years										St. Thomas	1	Portsea	2	Nelson	3	North End	4	Buckland	5	6	Kingston	Highland	7	St. Simon	8	Havelock	9	St. Paul	10	11	12	13	Charles Dickens	14	15	16																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																											
			1 to 2	2 to 3	3 to 4	4 to 5	5 to 10	10 to 15	15 to 20	20 to 35	35 to 45	45 to 65																												65 over																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																										
Diphtheria (including Mem- branous Croup) .. ..	310	12	8	11	23	19	153	43	17	17	4	3	..	23	45	21	7	9	37	6	11	12	27	33	3	19	27	26	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..</

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

\* Includes one notification in the Port.



## INFECTIOUS DISEASES HOSPITAL

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The work in connection with the new Hospital Extensions continued throughout the year, and it is hoped that they will be completed in 1938.

There was a large increase in the number of admissions—1,508—as compared with 1,187 in 1936, and the Hospital accommodation was taxed to its utmost. During the peak periods the admission of some of the milder cases, *e.g.*, scarlet fever, had to be postponed for a few days. Other cases, for whom admission was requested by medical practitioners, had to be nursed at home. The opening of the Hospital Extension of 84 beds will help to prevent a recurrence of these conditions.

There was great difficulty in obtaining a sufficiency of nurses, especially in the lower grades—a difficulty which was shared by many municipal hospitals in the country. The scale of salaries of all nursing grades was augmented, but with little or no increase in the number of applications in response to the advertisements, and at the end of the year consideration was being given to other means of making the nursing profession more attractive.

The latest methods of treatment employed by the Medical Staff at the Hospital have largely contributed during the past few years to a marked reduction of the number of deaths from Scarlet Fever and Diphtheria, to a decrease in the number of complications and to a shortening of the period of stay in hospital.

## REPORT ON THE WORK OF THE INFECTIOUS DISEASES HOSPITAL.

By IAN McLACHLAN, M.D., Ch.B., B.Hy., D.P.H.,  
*Deputy Medical Superintendent and Senior Asst. M.O.H.*

The total number of beds available for the treatment of infectious diseases in the Hospital is 206, of these the cubicle isolation block supplies 20, which is totally inadequate. Two new blocks are nearing completion—one a two-storey block of 64 beds (four wards of 14 and side wards), the other a cubicle ward block of 20 beds. It is hoped to have these wards in commission during the coming year.

Unfortunately, during the past year great difficulty has been experienced in obtaining nursing staff, and as a result the work has been carried out under very trying circumstances, many of the wards having to be under-staffed. Certain of the wards had to be closed in turn for repairs and on account of the installation of a new heating system, with consequent risk of overcrowding the other wards.

**ADMISSIONS.**—During the year 1,457 cases were admitted, excluding tuberculosis, which accounted for 50 admissions. The following table gives in detail the admissions month by month.

The grand total of all cases admitted during the year was 1,507, or 333 more than in 1936.



TABLE XXI. CASES ADMITTED DURING 1937.

Month	Scarlet Fever	Diphtheria	Enteric Fever	Erysipelas	Measles	Pertussis	Poliomylitis	Malta Fever	Chicken-pox	Tonsillitis	Meningitis	Scarlet Fever C.P.	Rubella	Bronchitis	Parotitis	Septic Rash	Other Diseases
1937																	
January ..	54	18	1	5	..	2	1	1	..	1	..	..	..	1	2	..	..
February ..	52	19	1	3	9	2	..	..	..	..	..	..	..	..	..	..	..
March ..	50	8	..	5	22	3	..	..	..	..	3	..	..	..	..	..	..
April ..	47	11	2	3	7	1	..	..	2	3	1	..	..	..	1	..	..
May ..	43	12	..	5	8	..	..	..	..	..	1	..	..	..	..	..	..
June ..	55	19	1	2	2	1	..	..	..	..	1	..	..	..	..	..	..
July ..	70	23	4	6	4	..	..	..	2	..	1	..	..	..	..	..	..
August ..	76	21	2	4	1	..	..	..	..	1	1	..	..	..	..	..	..
September ..	79	25	2	4	..	3	1	..	1	1	1	..	..	..	..	..	..
October ..	123	83	..	4	7	1	..	..	4	1	..	..	..	..	..	..	..
November ..	130	55	2	6	10	..	..	..	2	4	..	1	..	..	..	2	..
December ..	133	31	1	4	22	..	..	..	2	2	1	..	2	..	..	..	..
TOTALS ..	912	325	16	51	92	13	2	1	13	13	10	1	2	1	3	2	
Cases from Outside Authorities ..	57	22	1	2	..	1	..	..	..	..	2	..	..	..	2	..	
Nett Portsmouth Cases																	
1937 ..	855	303	15	49	92	12	2	1	13	13	8	1	2	1	1	2	
1936 ..	636	240	10	24	114	3	..	..	..	20	3	..	..	..	1	..	41

**BACTERIOLOGICAL WORK.**—The Laboratory was opened on January 1st, 1936, and much useful work has been done. It is hoped to extend its usefulness. Examinations are confined to diphtheria swabs and microscopic work in connection with pathological discharges.

A large amount of bacteriological work is sent to the Royal Portsmouth Hospital (widals, faeces, urines, cerebro spinal fluids and throat swabs for haemolytic streptococci).

The following is a table of the work done.

K.L.B. Examinations	...	3277	(2876)
Other Investigations...	...	50	(31)
		—	—
Total	...	3327	(2907)
		—	—
K.L.B. Negative	... ..	2509	(2246)
K.L.B. Positive	... ..	768	(630)
Post Mortem Examinations...		19	(12)

**TRAINING SCHOOL.**—The Lecture Room has provided a long-needed want. Courses of instruction have been given by the Sister-Tutor and also by the resident Medical Officers on theoretical and practical nursing, anatomy, physiology and hygiene, to prepare nurses for the State Examinations in Fevers.

**SPECIAL SERVICES.**—The services of an Ear, Nose and Throat Surgeon are available when required, also those of a Consulting Surgeon and Consulting Physician.

#### OPERATIONS, 1937.

Tonsils and Adenoids ...	21	Myringotomy ...	...	1
Incision of Abscess ...	1	Teeth Extractions	...	2
Single Mastoidectomy...	13			
Double Mastoidectomy	2	Total	...	43
Tracheotomy ...	3			



**DISPENSARY.**—The new Dispensary was completed in the early part of last year. The Dispenser, besides her duties as such, is responsible for the keeping of case records (discharges from hospital, etc.), also for the clerical work in relation to the diphtheria immunisation clinic.

**SCARLET FEVER.**—Of the 912 (644) cases admitted as Scarlet Fever during the year, the majority were of a mild type. There were, however, several cases of toxic Scarlet Fever necessitating intravenous Scarlet Fever Serum and resulting in five (two) deaths, giving a death rate of 0.62 (0.33) per 100 proved cases.

The following is a table showing the complications arising from 810 proved cases of Scarlet Fever discharged.

COMPLICATIONS OCCURRING IN 810 PROVEN  
CASES OF SCARLET FEVER.

Adenitis	...	...	86	Injection Abscess		
Ear Complications	...			(Buttock)	...	1
Otitis Media	2	} 51		Quinsy	...	2
Otorrhoea	47			Pneumonia	...	4
Mastoiditis	2			Rheumatism	...	2
Relapses	...	...	20			
Nephritis	...	...	6			—
Carditis	...	...	9		Total	185
Rhinorrhoea	...	...	4			—

It will be seen that 86, or 46.4% of the complications were due to the enlargement of glands (mainly cervical), and that only in two cases was incision necessary. Ear complications accounted for 51, or 27.6% of the total.

There were 20, or 10.8% of relapse cases.

**DIPHTHERIA.**—There were 325 (249) cases admitted. Of these 198 (197) were discharged during the year "proved to be diphtheria".

An analysis of these 198 cases is given on next page, together with the complications arising whilst in hospital.



## RETURN OF COMPLICATIONS—1937.

Type of Diphtheria	Total Cases Dis- 'ch'g'd.	Palatal Paresis	Cardiac	Strabismus	Otorrhoea	Adenitis	Vaginitis	Broncho Pneumonia	Pharyngeal Paralysis	Mastoid	Tracheotomy	Antrostomy	% of Complication
Faucial .. .. .	94	5	16	1	2	2	2	..	1	..	..	..	30.8
Bacteriological : Throat .. .. .	10	..	..	..	..	..	..	..	..	..	..	..	..
Nose .. .. .	47	..	..	..	..	..	..	..	..	..	..	1	2.1
Ear .. .. .	3	..	..	..	..	..	..	..	..	..	..	..	..
Nasal .. .. .	16	1	1	..	..	..	..	1	..	1	..	..	25.0
Toxic Faucial .. .. .	17	6	4	2	1	2	..	..	..	..	..	..	88.2
Laryngeal .. .. .	9	..	1	..	..	..	..	..	..	..	1	..	22.2
Naso-Pharyngeal .. .. .	2	..	..	..	..	..	1	..	..	..	..	..	50.0

It will be seen from the above table the very high percentage of complications in the toxic faucial type of the disease is 88.2% (80). The average dose of diphtheria antitoxin given in each case of toxic faucial diphtheria was 250,000 units.

The 60 (34) cases of bacteriological diphtheria were those in which the bacilli were found on microscopic examination of swabs—the patients themselves not exhibiting any clinical signs or symptoms. The treatment in the majority of these cases consisted in the removal of tonsils and adenoids.

**ENTERIC FEVER.**—During the year there were 7 (10) cases admitted as Typhoid Fever and 3 (3) as Paratyphoid Fever.

**DEATHS.**—During the year there were 32 (26) deaths from the causes stated below.

Diphtheria	...	11	Tetanus	...	1
Broncho-Pneumonia	...	1	Angina	...	1
Erysipelas	...	2	Typhoid Fever...	...	2
Scarlet Fever	...	5	Whooping Cough	...	1
Measles	...	2	Cerebro-spinal		
Double Pneumonia	...	1	Meningitis	...	2
Myelitis & Tuberculosis		1			—
Purpura Hæmorrhagica		1			—
Purulent Meningitis	...	1			—
			Total	...	32



**DISCHARGES.**—During the year there were 1,336 (1,124) patients discharged from the Infectious Diseases Section, as follows :—

	Scarlet Fever	Diph- theria	Other Infectious	Non- Infectious	Deaths	Total
January .. ..	52	19	9	6	4	90
February .. ..	41	15	9	3	1	69
March .. ..	52	21	8	9	6	96
April .. ..	55	19	19	11	2	106
May .. ..	48	11	17	6	4	86
June .. ..	37	9	10	4	5	65
July .. ..	74	8	9	13	3	107
August .. ..	66	12	7	20	3	108
September .. ..	65	16	7	11	1	100
October .. ..	84	19	9	16	1	129
November .. ..	106	25	21	17	2	171
December .. ..	130	24	23	32	—	209
Total .. ..	810	198	148	148	32	1336
Cases from Outside Authorities .. ..	44	7	9	15	1	76
Nett Portsmouth Cases 1937 .. ..	766	191	139	133	31	1260
„ 1936 .. ..	595	191	177	103	26	1092

**WORK OF THE MEDICAL REFEREE.**—The Senior Resident Medical Officer is also Medical Referee to the Corporation, and during the year has carried out 451 (548) examinations of Corporation employees and new staff.

EXAMINATIONS BY MEDICAL REFEREE.

Workmen's Compensation	...	...	158 (229)
Passenger Transport Department	...	...	125 (142)
New Staff	...	...	145 (141)
Special Examinations	...	...	20 (29)
Third Party Claims	...	...	3 (7)
Total			451 (548)

**STAFF SICKNESS.**—During the year there were 37 (31) of the Staff off duty due to illness—two on more than one occasion. The conditions arising were :—

Scarlet Fever ... ..	2	Cold ... ..	1
Scarlet Fever (?) ... ..	1	Infected Hand ... ..	1
Diphtheria-Faucial ... ..	1	Septic Finger ... ..	1
Enteric ... ..	1	Injury to Ankle ... ..	1
Influenza ... ..	3	Septic Corn ... ..	1
Tonsillitis ... ..	15	Constipation ... ..	1
Rheumatism ... ..	2	Not Diagnosed... ..	7
Tonsillectomy ... ..	1		
Cystitis ... ..	1		—
Quinsy ... ..	1	Total	42
Carbuncle of Chin ... ..	1		—

The discrepancy between 42 and 37 is accounted for by the fact that five nurses suffered from more than one illness during the year.

The cases of infectious disease occurred in members of the Staff of over two years standing, who were not Schick or Dick tested, because these procedures were not compulsory at the time they were appointed. No case of infectious disease occurred in a completely immunised member of the staff.

The choice of Medical Attendant for the Staff is optional—some being on the panel of the Deputy Medical Superintendent, the remainder being on the panel of outside Practitioners.



## VENEREAL DISEASES.

Judged by the number of attendances, the work of the Centre shows an increase as compared with the previous year.

There is still need to intensify our efforts in educating women as to the need for treatment, especially for gonorrhoea. In fresh infections with syphilis the ratio of females to males was 1 : 1.3, while in fresh infections with gonorrhoea it was 1 : 3.4. This indicates that a good proportion of women suffering from gonorrhoea fail to attend for treatment—due mainly to the fact that in women the symptoms of gonorrhoea are often slight and are wrongly ascribed to other conditions, which are treated by the women themselves at home. If improperly treated, such women constitute reservoirs of the disease for long periods, with recurrence of the infection in their male partner or partners.

The percentage of patients who ceased to attend before completion of treatment was 14.1, as compared with 15.3 for 1936, and as compared with 19.7 for England and Wales in 1936. Allowance must be made, of course, for the varying standards of cure adopted by different medical officers, but even so, Portsmouth can be said to compare favourably with the country as a whole.

The total number of doses of arsenobenzene compound issued to private practitioners under the provisions of the Public Health (Venereal Diseases) Regulations, 1916, was 82.

**CO-ORDINATION.**—Complete liaison between the out-patient treatment at the Venereal Diseases Centre and the in-patient treatment at Saint Mary's Hospital is ensured by the appointment of Mr. A. Murray Stuart, F.R.C.S., as part-time Visiting Medical Officer at Saint Mary's Hospital.

In regard to congenital syphilis there is close co-operation between the Maternity and Child Welfare Service, the School Medical Service, and the Venereal Diseases Service in the detection of this form of the disease.

Close co-ordination also continues between the Portsmouth Navy and Army Commands, so far as the control and treatment of Venereal Diseases in the City are concerned. The sources of infection of civilians and of service men alike are frequently the same. Every effort is made, often with the help of the police, to trace infected women and to induce them to undergo treatment.



## VENEREAL DISEASES TREATMENT CENTRE.

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

“ During the year 1937 there has been a decrease in the number of patients attending for the first time. The number attending with a recent infection of syphilis remains the same. The numbers of those attending with outstanding infection and with congenital syphilis have fallen decidedly. This indicates that treatment in past years is now bearing fruit in cutting short the infection and preventing transmission. The number of cases of congenital syphilis is the lowest on record in this Clinic. Of the 15 who attended for the first time, only 5 were children. The number of cases of gonorrhoea also shows a decrease. The proportion of those ceasing to attend before completion of treatment remains low in comparison with other clinics. There was a marked decrease in those requiring in-patient treatment. There were 4 cases of gonorrhoeal vaginitis in children.

There was an increase in the number of patients who attended for the first time and were subsequently classified under the heading “Conditions other than Venereal”. The greater percentage of these are patients who reported for examination after running the risk of infection and were found not to be suffering from venereal disease. It would therefore appear that the work of propaganda undertaken by the City authorities regarding the dangers of venereal disease has been the means of most of these patients coming to the Centre for the purpose of eliminating infection.

In accordance with modern views the treatment for syphilis has now been intensified. This is the cause of the considerable increase in the number of attendances and injections given to patients suffering from this disease.

The following is a record that has again been kept of the new male patients regarding the source of infection :—

SYPHILIS		GONORRHOEA	
Amateurs	Prostitutes	Amateurs	Prostitutes
11	10	57	70



TABLE XXII.

RETURN RELATING TO ALL PERSONS WHO WERE TREATED AT THE TREATMENT CENTRE DURING THE YEAR ENDED 31st DECEMBER, 1937

	Syphilis		Soft Chancre		Gonorrhoea		Conditions other than Venereal		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Total
1. Number of cases on 1st January under treatment or observation ..	194	145	..	..	109	25	6	7	309	177	486
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 ..	14	19	..	..	13	3	..	..	27	22	49
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 .. .. .	6	..	..	..	..	..	..	..	6	..	6
„ secondary .. .. .	19	19	..	..	..	..	..	..	19	19	38
„ latent in 1st year of infection .. .. .	..	..	..	..	..	..	..	..	..	..	..
„ all later stages .. .. .	38	23	..	..	..	..	..	..	38	23	61
„ congenital .. .. .	8	7	..	..	..	..	..	..	8	7	15
Soft Chancre .. .. .	..	..	1	..	..	..	..	..	1	..	1
Gonorrhoea, 1st year of infection .. .. .	..	..	..	..	131	39	..	..	131	39	170
„ later .. .. .	..	..	..	..	5	..	..	..	5	..	5
Conditions other than venereal .. .. .	..	..	..	..	..	..	203	91	203	91	294
4. Number of cases dealt with for the first time during the year under report known to have received treatment for the same infection, or to have been under observation, at other Centres .. .. .	15	12	..	..	30	8	4	..	49	20	69
TOTALS OF ITEMS 1, 2, 3 AND 4 ..	294	225	1	..	288	75	213	98	796	398	1194
5. Number of cases discharged after completion of treatment and final tests of cure, or after diagnosis as non-venereal .. .. .	26	15	1	..	95	28	205	84	327	127	454
6. Number of cases which ceased to attend before completion of treatment and were, on first attendance, suffering from :—											
Syphilis, primary .. .. .	3	..	..	..	..	..	..	..	3	..	3
„ secondary .. .. .	11	9	..	..	..	..	..	..	11	9	20
„ latent in 1st year of infection .. .. .	..	..	..	..	..	..	..	..	..	..	..
„ all later stages .. .. .	19	18	..	..	..	..	..	..	19	18	37
„ congenital .. .. .	6	6	..	..	..	..	..	..	6	6	12
Soft Chancre .. .. .	..	..	..	..	..	..	..	..	..	..	..
Gonorrhoea, 1st year of infection .. .. .	..	..	..	..	34	8	..	..	34	8	42
„ later .. .. .	..	..	..	..	1	..	..	..	1	..	1
7. Number of cases which ceased to attend after completion of treatment, but before final tests of cure .. .. .	13	13	..	..	26	1	..	..	39	14	53
8. Number of cases transferred to other centres or to institutions, or to care of private practitioners .. .. .	22	14	..	..	49	9	4	..	75	23	98
9. Number of cases remaining under treatment or observation on 31st December .. .. .	194	150	..	..	83	29	4	14	281	193	474
TOTALS OF ITEMS 5, 6, 7, 8 AND 9 ..	294	225	1	..	288	75	213	98	796	398	1194

	Syphilis		Soft Chancre		Gonorr- hoea		Conditions other than Venereal		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Total
Number of cases in the following stages of syphilis included in Item 6 which failed to complete one course of treatment :—											
Syphilis, primary .. .. .	..	..	..	..	..	..	..	..	..	..	..
„ secondary .. .. .	3	1	..	..	..	..	..	..	3	1	4
„ latent in 1st year of infection .. .. .	..	..	..	..	..	..	..	..	..	..	..
„ all later stages .. .. .	3	6	..	..	..	..	..	..	3	6	9
„ congenital .. .. .	1	..	..	..	..	..	..	..	1	..	1
Number of attendances :—											
(a) for individual attention of the medical officer .. .. .	2812	2579	7	..	2289	507	497	322	5605	3408	9013
(b) for intermediate treatment, <i>e.g.</i> irrigation, dressing .. .. .	452	411	32	..	12162	4661	1015	1727	13661	6799	20460
TOTAL ATTENDANCES .. .. .	3264	2990	39	..	14451	5168	1512	2049	19266	10207	29473
In-patients :—											
(a) Total number of persons admitted for treatment during the year .. .. .	3	1	..	..	5	4	1	1	9	6	15
(b) Aggregate number of “In-patient days” of treatment given	206	115	..	..	193	207	34	34	433	356	789
	Under 1 year		1 & under 5 years		5 & under 15 years		15 years and over		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Number of cases of congenital syphilis in Item 3 above classified according to age periods .. .. .	1	1	..	..	..	3	7	3	8	7	
Chief preparations used in treatment of Syphilis :—	Arsenical						Mercury		Bismuth		
	Approved Arsenobenzene Compounds						Others				
(a) Names of preparations .. .. .	Novostab Novarsenobillon Sulphostab						Tryparsamide		—  Chlorostab		
(b) Total number of injections given (out-patients and in-patients) ..	2825						271		—  3634		



	Microscopical		Cerebro-spinal Fluid	Serum Tests	
	for Syphilis	for Gonorrhoea		for Syphilis	for Gonorrhoea
<b>15. Pathological Work :—</b>					
(a) Number of specimens examined at and by the medical officer of the treatment centre .. .. .	31	—	—	—	—
(b) Number of specimens from patients attending at the treatment centre sent for examination to an approved laboratory .. .. .	—	1534	33	1043	214
Number of specimens examined at and by the medical officer of the treatment centre for the Trichomonas Vaginalis .. .. .	—	221	—	—	—

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

Name of County or County Borough (or Country in the case of persons residing elsewhere than in England and Wales) to be inserted in these headings.	Portsmouth	Hampshire	West Sussex	Isle of Wight	Total
<b>A. Number of cases from each area included under the following headings in Item 3 :—</b>					
Syphilis .. .. .	89	27	4	—	120
Soft Chancre .. .. .	1	—	—	—	1
Gonorrhoea .. .. .	136	27	10	2	175
Conditions other than Veneral..	232	49	12	1	294
<b>TOTAL ..</b>	<b>458</b>	<b>103</b>	<b>26</b>	<b>3</b>	<b>590</b>
<b>B. Total number of attendances of all patients residing in each area .. .. .</b>	<b>25617</b>	<b>3322</b>	<b>494</b>	<b>40</b>	<b>29473</b>
<b>C. Aggregate number of "In-patient days" of all patients residing in each area .. .. .</b>	<b>595</b>	<b>194</b>	<b>..</b>	<b>..</b>	<b>789</b>



## TUBERCULOSIS.

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**CO-ORDINATION.**—The arrangements described in my previous Report to ensure complete co-ordination in our efforts to combat this disease have worked well during the year. The Tuberculosis Officer who directs the work of the Dispensary visits, at least once a week, all patients undergoing institutional treatment, and can thus supervise each phase of the treatment with resultant economy and avoidance of overlapping.

Owing to the migration of the population northwards, it was decided to establish at Cosham a branch of the Dispensary, which will be opened in the early part of 1938.

**NOTIFICATIONS.**—During the year under review there were 440 persons notified to the Medical Officer of Health as suffering from tuberculosis, as compared with 441 during 1936, and with an average of 500 for the past ten years.

**CONTACTS.**—For the effective control of tuberculosis it is unnecessary to stress the importance of the examination of contacts. There was, unfortunately, a decrease in the number of contacts examined, and with a view to increasing their number, arrangements were made towards the end of the year for a special clinic to be devoted for their examination.

**DEATHS.**—The earlier a case of tuberculosis is notified the greater are the chances of recovery, and it is gratifying to be able to report—

- (a) the lowest number of deaths on record from pulmonary tuberculosis, *i.e.*, 142, or 0.55 per 1,000 living, as compared with 171, or 0.68 last year; and
- (b) the lowest number of deaths on record from all forms of the disease, *i.e.*, 159, or 0.62 per 1,000 living, as compared with 0.81 last year, and as compared with an average of 0.90 for the past ten years.

The gradual decline in the death-rate from tuberculosis in recent years has been made possible only by maintaining an intensive anti-tuberculosis campaign. From the following report it will be seen that the volume of work carried out in connection with the Tuberculosis Scheme, instead of decreasing, is actually increasing; *e.g.*, the numbers of new cases and contacts examined were 669 in 1935; 908 in 1936 and 914 in 1937; while the numbers of attendances were 4,683; 5596 and 5890 respectively.



TABLE XXIII.

Table showing the number of Deaths and Death-rates per 1,000 living from TUBERCULAR DISEASES for Fifty-nine Years (1879 to 1937).

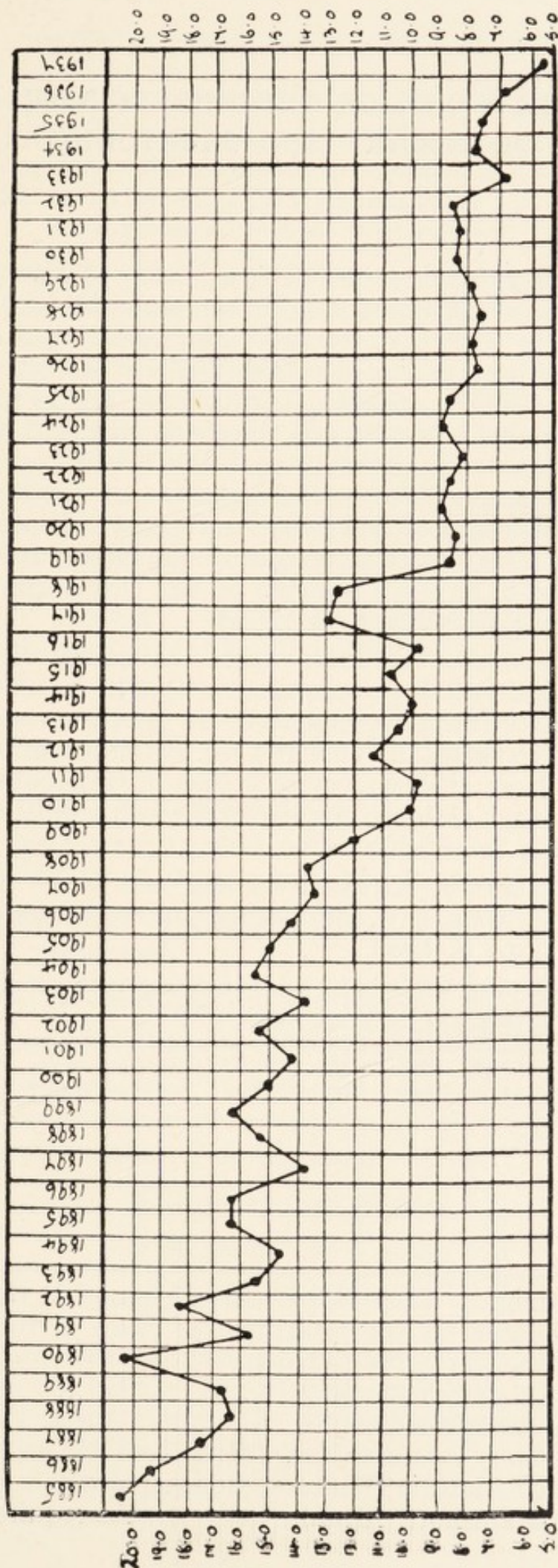
Year	(1) Pulmonary Tuberculosis		(2) Tubercular Meningitis Hydrocephalus Deaths	(3) Other Forms of Tuberculosis Deaths	Totals of Cols. 2 and 3	
	Deaths	Rate			Deaths	Rate
1879	271	2.05	44	58	102	.77
1880	234	1.74	49	81	130	.96
1881	275	2.14	44	61	105	.81
1882	269	2.07	33	67	100	.76
1883	262	1.96	41	72	113	.84
1884	292	2.12	34	62	96	.69
1885	290	2.06	36	54	90	.64
1886	285	1.98	38	85	123	.86
1887	261	1.77	41	95	136	.92
1888	240	1.60	38	90	128	.85
1889	251	1.63	35	93	128	.83
1890	319	2.03	37	57	94	.60
1891	252	1.57	41	86	127	.79
1892	308	1.89	31	51	82	.50
1893	254	1.53	32	59	91	.55
1894	241	1.43	21	50	71	.42
1895	280	1.64	43	50	93	.54
1896	283	1.63	51	55	106	.61
1897	245	1.38	39	33	72	.39
1898	277	1.54	37	57	94	.52
1899	295	1.61	40	64	104	.57
1900	286	1.53	42	53	95	.51
1901	278	1.47	37	91	128	.67
1902	308	1.58	31	51	82	.42
1903	269	1.35	35	34	69	.34
1904	321	1.58	44	32	76	.37
1905	314	1.52	42	25	67	.32
1906	306	1.45	38	36	74	.35
1907	282	1.31	47	36	83	.38
1908	300	1.36	39	38	77	.35
1909	272	1.21	41	33	74	.33
1910	249	1.09	40	23	63	.28
1911	239	1.02	36	23	59	.25
1912	267	1.13	30	46	76	.32
1913	264	1.08	41	40	81	.33
1914	249	1.01	33	52	85	.34
*1915	233	1.15	51	69	120	.59
*1916	188	0.95	39	48	87	.43
*1917	269	1.35	38	62	100	.50
*1918	261	1.28	23	45	68	.33
*1919	197	0.88	25	37	62	.27
*1920	197	0.84	19	36	55	.23
*1921	211	0.90	22	26	48	.20
*1922	207	0.87	17	38	55	.23
*1923	191	0.82	21	16	37	.16
*1924	222	0.93	18	36	54	.23
*1925	204	0.87	27	23	50	.21
*1926	183	0.79	18	20	38	.16
*1927	182	0.78	27	24	51	.22
*1928	179	0.74	26	23	49	.20
*1929	192	0.79	26	9	35	.14
*1930	208	0.85	26	14	40	.16
*1931	189	0.82	17	21	38	.16
1932	213	0.84	22	18	40	.15
1933	170	0.67	17	12	29	.11
1934	197	0.79	15	28	43	.17
1935	192	0.76	15	4	19	.08
1936	171	0.68	13	20	33	.13
1937	142	0.55	7	10	17	.07

\* Calculated on estimated civil population.



TABLE XXIV.

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





## THE WORK OF THE TUBERCULOSIS DISPENSARY AND SANATORIA.

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

**Dispensary.**—Table XXVI (page 74) gives statistical details of the work done at the Dispensary during the year 1937. During the year 784 (692) new cases were examined and the diagnosis confirmed in 270 (295), or 34.4% (42.63%); 439 (374), or 55.9% (54.04%) proved not to be tubercular. Of the remainder, 75 (23), the diagnosis had not been completed. There was an increase of 92 (213) new cases as compared with those of 1936. Attendances at the Dispensary showed an increase of 303 (913) and the visits paid by the tuberculosis nurses were increased by 430 (964). It is the aim of the service to have all patients on the Dispensary Register visited at least four times each year.

The number of contacts examined at the Dispensary during the year—130, as compared with 216 in 1936, is very disappointing. There appears to be an apathy on the part of the parents to bring the children for examination. The fact that at the time of discovery of a case of tuberculosis in the family the other children appear quite well seems to lull the parents into a sense of false security.

The numbers of X-ray (screening and films) and sputa examinations were very considerably increased as compared with those done in 1936.

The following table sets the foregoing remarks in tabular form. A comparison is made with 1936.

Year	New Cases referred for opinion	Definite Cases of Tuberculosis	Not Tubercular or Indefinite	Number of Contacts	Number of Sputa	Number of X-Ray Examinations	Attendances at the Dispensary	No. of Visits by Tuberculosis Nurses
1937	784	270	514	130	2206	1945	5899	7032
1936	692	295	397	216	1974	1664	5596	6602

**Institutional.**—There has been no change in the number of beds available for the treatment of cases of tuberculosis, details of which are given below :—

Langstone Sanatorium	...	...	...	35
Saint Mary's Hospital	...	...	...	70
Infectious Diseases Hospital	...	...	...	32
Other Sanatoria (Ventnor, Bournemouth, Bramshott, Alton)	...	...	As required	



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

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

**GOLD THERAPY.**—A total of 331 (415) injections of myocrysine were given, totalling 48.55 (66.4) gms.

	<i>Cases discharged</i>	<i>Cases still in</i>	<i>Total</i>
Number of injections .. ..	271 (190)	184 (225)	331 (415)
Gms. of myocrysine given ..	26.40 (31.5)	22.15 (34.9)	48.55 (66.4)

The results of treatment were :—

14 (16) Cases were treated with myocrysine injections, 8 (7) completed one course with the following results—

5 (6) were discharged "improved" and 3 (1) "not improved".

In 3 (2) cases sputum previously T.B. + became negative, and 2 (1) cases the sputum disappeared. In the remaining 3 (4) cases sputum remained positive.

Grades attained on discharge were—

4 (3) cases "up all day"

3 (2) cases "up 6 hours"

1 (1) case "up 2 hours".

The number of patients treated is too small for any justifiable criticism. The results, however, are considered sufficiently encouraging to warrant continuation of the treatment in selected cases.



The reasons for not completing one course were :—

4 (5) discharged or transferred.

1 (2) owing to activation of the disease.

1 (1) owing to enteritis.

1 (1) owing to dermatitis.

**PNEUMOTHORAX.**—12 (7) cases were attempted ; two (3) were unsuccessful on account of adhesions. Of the 10 (4) successful cases, 6 (3) previously sputum positive cases became negative, the remaining 4 (1) shewed a diminution in amount of sputum. On discharge, 2 (2) of these cases were up all day and able to do light work.

**TUBERCULIN.**—In 3 (6) cases treated by injections of tuberculin the results were satisfactory in two.

These treatments are carried out mainly at the Infectious Diseases Hospital under the supervision of Dr. J. Q. Mountain, the Junior Resident Medical Officer. The following table gives details of these treatments.

	<i>Cases discharged</i>	<i>Cases still in</i>	<i>Total</i>
<b>Artificial Pneumothorax.</b>			
Inductions .. .. .	6 (10)	4 ( 4)	10 (14)
Refills .. .. .	271 (60)	184 (61)	455 (121)
Aspiration of fluid and replacement of air	—	7 ( 4)	7 ( 4)
<b>Gold Therapy.</b>			
Number of Injections .. ..	188 (190)	143 (225)	331 (415)
Grams of Myocrisine .. ..	26.40 (31.5)	22.15 (34.9)	48.55 (66.4)
<b>Tuberculin.</b>			
Number of Injections .. ..	20 ( 6)	22 (64)	22 (70)

### **Langstone Sanatorium.**

Thirty-five beds are available here for the sanatorium treatment of tuberculosis and pre-tubercular cases, as follows :

Male           ...           ...           ...           ...           17

Female       ...           ...           ...           ...           8

BEACH LODGE for children under 12 years  
of age (Non-pulmonary tuberculosis  
and the pre-tubercular state)       ...       10

Wherever possible, cases are sent here in the convalescent stage and strict sanatorium routine is carried out in conjunction with graduated exercise (Table XXVIII).

## TUBERCULOSIS.

TABLE XXV.

NEW CASES AND MORTALITY DURING 1937.

Age Periods			* NEW CASES				DEATHS			
			Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
			M.	F.	M.	F.	M.	F.	M.	F.
0 to 1	..	..	1	..	1	2	1	..	..	2
1 „ 5	..	..	3	..	1	6	1	..	1	2
5 „ 15	..	..	10	9	14	12	3	..	1	..
15 „ 25	..	..	37	51	8	6	10	13	1	..
25 „ 35	..	..	42	51	4	3	14	17	1	1
35 „ 45	..	..	44	26	1	4	21	5	..	..
45 „ 55	..	..	35	8	..	..	21	2	1	..
55 „ 65	..	..	37	14	..	..	21	7	..	..
65 and upwards	..	..	4	6	..	..	4	1	..	1
TOTALS	..	..	213	165	29	33	96	45	5	6

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

N.B.—Of the total number of 152 deaths registered from all forms of tuberculosis, 25, or 16 per cent., had not been notified during life as suffering from the disease.



TABLE XXVI.

Showing the work of the Dispensary during 1937.

DIAGNOSIS	PULMONARY				NON-PULMONARY				TOTAL				GRAND TOTAL	
	Adults		Children		Adults		Children		Adults		Children			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
A.—NEW CASES examined during the year (excluding contacts) :—														
(a) Definitely tuberculous .. ..	128	104	4	2	5	12	7	8	133	116	11	10	270	
(b) Diagnosis not completed .. ..	..	..	..	..	..	..	..	..	27	26	10	12	75	
(c) Non-tuberculous .. ..	..	..	..	..	..	..	..	..	104	149	102	84	439	
													784	
B.—CONTACTS examined during the year:—														
(a) Definitely tuberculous .. ..	1	1	..	1	..	..	..	..	1	1	..	1	3	
(b) Diagnosis not completed .. ..	..	..	..	..	..	..	..	..	2	6	13	10	31	
(c) Non-tuberculous .. ..	..	..	..	..	..	..	..	..	4	23	39	30	96	
													130	
C.—CASES written off the Dispensary Register as :—														
(a) Recovered .. ..	40	46	8	6	3	7	16	10	43	53	24	16	136	
(b) Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous) .. ..	..	..	..	..	..	..	..	..	116	180	146	116	558	
D.—NUMBER OF CASES on Dispensary Register on December 31st :—														
(a) Definitely tuberculous .. ..	487	406	33	43	29	33	60	73	516	439	93	116	1164	
(b) Diagnosis not completed .. ..	..	..	..	..	..	..	..	..	29	32	23	22	106	
1. Number of cases on Dispensary Register on January 1st .. ..	1200				2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years .. ..				49					
3. Number of cases transferred to other areas, cases not desiring further assistance, under the scheme, and cases "lost sight of" ..	94				4. Cases written off during the year as Dead (all causes) .. ..				105					
5. Number of attendances at the Dispensary (including Contacts) .. ..	5899				6. Number of Insured Persons under Domiciliary Treatment on the 31st December ..				146					
7. Number of consultations with medical practitioners :— (a) Personal .. .. (b) Other .. ..	158 1592				8. Number of visits by Tuberculosis Officers to homes (including personal consultations)				158					
9. Number of visits by Nurses or Health Visitors to homes for Dispensary purposes ..	7032				10. Number of :— (a) Specimens of sputum, etc., examined .. (b) X-ray examinations made in connection with Dispensary work .. ..				2206 1945					
11. Number of "Recovered" cases restored to Dispensary Register, and included in A (a) and A (b) above .. ..	—				12. Number of "T.B. plus" cases on Dispensary Register on December 31st .. ..				435					

TABLE XXVII.

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

Classification on admission to the institution	Condition at time of discharge	Duration of Residential Treatment in the Institution.															Grand Totals
		Under 3 months			3-6 months			6-12 months			More than 12 months			Totals			
		M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	
Class T.B. minus	Quiescent .. ..	9	8	2	8	5	2	5	3	3	1	..	..	23	16	7	46
	Not quiescent .. ..	6	6	1	9	11	..	5	10	..	1	3	..	21	30	1	52
	Died in Institution ..	1	1	..	4	..	..	..	..	..	..	..	..	5	1	..	6
Class T.B. plus Group I	Quiescent .. ..	..	1	..	..	2	..	1	1	..	1	..	..	2	4	..	6
	Not quiescent .. ..	4	..	..	1	3	..	1	4	..	1	..	1	7	7	1	15
	Died in Institution ..	..	..	..	..	..	..	1	..	..	..	..	..	1	..	..	1
Class T.B. plus Group II	Quiescent .. ..	1	1	..	1	1	..	2	..	..	5	1	..	9	3	..	12
	Not quiescent .. ..	4	4	..	2	8	..	5	4	..	1	3	..	12	19	..	31
	Died in Institution ..	4	1	..	..	3	..	..	..	..	..	..	..	4	4	..	8
Class T.B. plus Group III	Quiescent .. ..	..	1	..	..	..	..	..	..	..	..	..	..	..	1	..	1
	Not quiescent .. ..	2	..	..	3	3	..	2	2	..	2	1	..	9	6	..	15
	Died in Institution ..	3	6	..	1	2	..	1	2	..	1	..	..	6	10	..	16
T.B. (pulmonary) .. ..		34	29	3	29	38	2	23	26	3	13	8	1	99	101	9	209
Bones and Joints	Quiescent .. ..	1	..	1	4	..	1	..	2	5	..	..	6	5	2	13	20
	Not quiescent .. ..	..	2	..	..	1	1	1	..	..	..	..	..	1	3	1	5
	Died in Institution ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Abdominal	Quiescent .. ..	..	..	..	..	..	1	..	..	..	..	..	1	..	..	2	2
	Not quiescent .. ..	..	1	..	..	..	..	..	..	..	..	..	..	..	1	..	1
	Died in Institution ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Other Organs	Quiescent .. ..	..	..	1	..	..	..	..	..	..	..	..	1	..	..	2	2
	Not quiescent .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Died in Institution ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Peripheral Glands	Quiescent .. ..	..	..	3	..	..	..	..	..	1	..	..	..	..	..	4	4
	Not quiescent .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Died in Institution ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
T.B. (non-pulmonary) .. ..		1	3	5	4	1	3	1	2	6	..	..	8	6	6	22	34



TABLE XXVIII.

## LANGSTONE SANATORIUM.

Grade of Exercise attained by Adult Cases before discharge.

Grade	Badge	Exercise	Males	Females	Total
I.	White	Up 4, 6 or 8 hours. Quiet games, except billiards.	0	2	2
II.	Yellow	Up all day. Specified light ward duties. Limited slow walking exercise.	2	1	3
III.	Green	Up all day. Specified ward duties, requiring more exertion. Further walking exercise (1 mile).	7	3	10
IV.	Red	Up all day. Specified ward duties, requiring still more exertion. Long distance walking, increasing.	13	9	22

Thirty-five patients were discharged.

TABLE XXIX.

Total Number of Patients treated at various Sanatoria, Hospitals  
and Colonies during 1937.

SANATORIUM, HOSPITAL OR COLONY	Resident at beginning of year	Admitted during year	Discharged or died during year	Remaining end of year	Totals
Langstone Sanatorium .. ..	20	40	42	18	60
Beach Lodge .. ..	10	19	20	9	29
Milton Hospital .. ..	31	54	58	27	85
Saint Mary's Hospital .. ..	63	178	185	56	241
Royal National Sanatorium, Bournemouth ..	2	6	4	4	8
Royal National Hospital for Consumption, Ventnor .. ..	4	30	21	13	34
Lord Mayor Treloar Cripples' Hospital ..	15	5	14	6	20
King George V Sanatorium for Sailors, Bramsbott .. ..	1	5	4	2	6
Royal Sea Bathing Hospital, Margate ..	1	..	..	1	1
Papworth Training Colony .. ..	1	1	..	2	2
Preston Hall Training Colony .. ..	..	1	..	1	1
Brompton Hospital .. ..	..	1	..	1	1
East Anglian Sanatorium .. ..	..	1	..	1	1
Stanmore Cripples' Hospital .. ..	..	1	..	1	1
Totals ..	148	342	348	142	490



## PREVENTION AND TREATMENT OF BLINDNESS.

The following report presented by the Chief Administrative Medical Officer on February 5th, 1937, summarises the measures which are taken in the City to prevent blindness.

### A.—Ante-Natal.

In Portsmouth the scheme of ante-natal supervision is not so comprehensive as in most of the other County Boroughs. The percentage of women attending ante-natal clinics to the total notified births during 1936 was 52, as compared with 60 and 70 per cent. in some areas. One additional ante-natal clinic was established last year and it is hoped to add another soon. Women and children found by the clinic medical officer to be suffering from venereal disease are referred to the Venereal Diseases Clinic at the Royal Hospital, where the services of a venereal disease specialist are available. It would be impracticable at present to arrange facilities for the diagnosis and treatment of venereal disease at any of the Maternity and Child Welfare Clinics.

### B.—Pre-School.

During the past few years an endeavour has been made in Portsmouth to supervise the health of children between two and five years of age. Two additional health visitors were appointed two years ago, thus enabling more intensive home visiting to be carried out. Last year a 'Toddlers' Centre was opened, and a clinic is held once weekly for the systematic examination of children between two and five years of age. Eye conditions, *e.g.*, squint, discovered by the Medical Officer at the 'Toddlers' Clinic, or by the Health Visitors during visiting, are referred to the private doctor, or by arrangement between the Education and Health Committees to the School Clinic, where the services of an ophthalmic surgeon are available. If in-patient treatment is necessary the child is admitted to the Eye and Ear Hospital. The minor ailments clinics designed for children of school age are also available to pre-school children for the treatment of external eye conditions.

There is still need to develop further the present arrangements for the supervision of pre-school children, so that more children can be given advantage of the facilities for the diagnosis and treatment of eye defects.



The City Council last year approved the appointment of a consultant ophthalmic surgeon who will attend when required at the various Corporation Hospitals, including the Infectious Diseases Hospital, so that cases of measles developing eye trouble will have expert advice. It is not practicable, of course, for the Council to arrange for expert ophthalmic supervision of such children in their own homes.

### **C.—School Age.**

In Portsmouth an examination of the visual conditions of children is made as soon as possible after their entry into school. Cases of gross visual defect are detected at once by the teacher and referred to the School Clinic for diagnosis and treatment, or they are discovered by the medical officer at the routine medical examination carried out during the first few months of school life.

All children whose cases present difficulty to the examining medical officers are referred to the ophthalmic surgeon employed part time by the Education Committee. In regard to myopia there is a special class at Francis Avenue School for children suffering from this condition.

The treatment of eye disease at the school clinics is carried out under the supervision of an ophthalmic surgeon, who is on the honorary medical staff of the Eye and Ear Hospital, and cases requiring hospital treatment are referred to this Hospital.

School children found at routine or special medical inspections to be suffering from eye conditions resulting from venereal disease are referred to the Venereal Diseases Clinic at the Royal Portsmouth Hospital.

### **D.—Adolescence and Adult Life.**

Pupils of the Special Classes for blind and partially sighted children at Francis Avenue School, on leaving school, are reported to the Blind Persons Act Committee who keep in touch with them. Some of these children are also referred to the Eye and Ear Hospital if they appear to require immediate attention.

I am indebted to Mr. E. Tunnicliffe, Superintendent to



the Blind Persons Act Committee, for the following information :—

“ The Blind Persons Act Committee of the City Council, assisted by the local Voluntary Association for the Blind, have continued to give careful consideration to all matters affecting the Welfare of Blind Persons resident within the Portsmouth area.

The number of registered blind persons, of all ages, resident in Portsmouth at the close of the year was 533 ; this number shows a slight increase on last year, and is wholly attributable to there being a greater number of cases where blindness has occurred late in life.

The needs of the Blind, from earliest years to advanced age, are met in various ways : Education is provided at the Francis Avenue Special School for Blind Children ; Industrial Training and Employment suited to the capacities of blind persons is carried on at the Council's Workshops at Cosham ; the unemployable Blind are visited and cared for in their own homes ; financial assistance is provided where necessary, and, at the Jubilee Home for the Blind, Wymering, a number of aged and infirm blind persons are housed in comfortable and happy surroundings.”

**CANCER.**—During 1937 the number of deaths from Cancer was 427 (410), equivalent to a cancer death-rate of 1.67 (1.63) per 1,000 living. From Table XXX it will be seen that there were more cases of cancer of the uterus and of cancer of the male genito-urinary organs. Classified according to age groups the deaths showed an appreciable increase in groups “45-55 years”, “55-65 years” and “75 years and over”, and a decrease in age group “65-75 years”.

There is no special Cancer Clinic in Portsmouth, but facilities are available at the Royal Portsmouth Hospital and Saint Mary's Municipal Hospital for diagnosis and treatment. Complete co-ordination exists between these two hospitals in this respect. As deep and superficial X-ray therapy is playing an ever-increasing part in the treatment of cancer, the Sub-Health (Hospitals Governors) Committee, after consultation with the representatives of the Royal Portsmouth Hospital and the Eye and Ear Hospital, decided to instal deep and superficial X-ray therapy units at Saint Mary's Hospital at a cost of about £2,000. These will be in operation about the middle of 1938.



The Royal Portsmouth Hospital possesses a supply of radium, 223 milligrammes, purchased by public subscription, and Portsmouth cases, including cases from Saint Mary's Municipal Hospital, are treated there, unless accommodation is not available, when they are sent to the Radium Institute, London.

Every opportunity is taken by means of lectures and printed announcements to impress upon the inhabitants the importance of early treatment of the disease.

Facilities for the radiological treatment of cancer in the Wessex Area are at present inadequate, especially in the rural areas, and during the year a series of meetings were held for the purpose of exploring a co-ordinated scheme of treatment ; representatives of local authorities and of voluntary hospitals in Hampshire, Isle of Wight, South-east Wiltshire and Dorset and of the Radium Commission and British Empire Campaign participated. Tentative proposals discussed include the establishment of Radio-therapeutic Centres at Portsmouth, Southampton and Bournemouth, each centre to serve a population of about 500,000. The proposals were considered at a meeting of the Portsmouth Joint Hospitals Committee, and it is hoped that a co-ordinated scheme will be inaugurated at an early date.





## MATERNITY & CHILD WELFARE

(Figures for the previous year are included  
in brackets for comparative purposes.)



## MATERNITY & CHILD WELFARE

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

- (a) a further marked decrease in the maternal mortality rate to 1.51, the lowest on record ;
- (b) a decrease in the infantile mortality rate to 43.8, the lowest on record ; and
- (c) the coming into operation of the Scheme for a domiciliary service of midwives.

### MATERNAL MORTALITY AND MORBIDITY.

During 1937, 6 (9) maternal deaths occurred, giving a maternal mortality rate of 1.51, which is the lowest on record. This is a further reduction over the year 1936, which was 2.21, and compares very favourably with that for the country as a whole, *i.e.*, 3.11. The reduction is attributable chiefly to the marked decrease in the deaths from sepsis, there being none during 1937, as compared with a rate of 0.73 for the previous year, a decrease in which the new Scheme, introduced during 1935 for the free provision of masks to all midwives in the City, probably played a part.

The following is an analysis of the causes of death :—

Acute heart failure, accelerated by anaesthetic—

Child undelivered	...	...	...	1
Pulmonary embolism following childbirth			...	1
Syncope, due to shock whilst under the effects of an anaesthetic during an operation	...		...	1
Rupture of tubal pregnancy. Syncope following internal haemorrhage (natural causes)			...	1
Syncope, difficult childbirth, anaemia	...		...	1
Hyperemesis gravidarum	...	...	...	1

## XXXI.

Comparison of the Maternal and Infantile Mortality Rates in Portsmouth and England and Wales during the past 14 years.

Year	MATERNAL MORTALITY*			INFANTILE MORTALITY*	
	Portsmouth		England & Wales	Portsmouth	England & Wales
	From Sepsis	Total	Total		
1924 .. ..	1.19	3.98	3.90	66	74
1925 .. ..	0.63	2.51	4.08	62	75
1926 .. ..	—	3.11	4.12	55	70
1927 .. ..	2.12	4.49	4.11	55	70
1928 .. ..	3.15	5.4	4.42	55	65
1929 .. ..	1.59	3.4	4.33	66	74
1930 .. ..	1.64	2.3	4.40	59	60
1931 .. ..	0.44	2.3	4.11	55	66
1932 .. ..	0.93	2.34	4.04	60	65
1933 .. ..	0.99	1.98	4.23	51	64
1934 .. ..	1.96	4.66	4.41	44	59
1935 .. ..	2.87	3.91	3.93	46	57
1936 .. ..	0.73	2.21	3.65	49	59
1937 .. ..	—	1.51	3.11	44	58

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

**INSTITUTIONAL TREATMENT.**—Last year was the second full year during which maternity services have been concentrated at Saint Mary's Hospital, where there is a complete maternity unit of 70 beds, with all the facilities offered by an up-to-date Maternity Hospital. This is in conformity with the recommendation of the Departmental Committee on Maternal Mortality and Morbidity that "maternity accommodation should, where possible, be associated with general hospitals". A Consultant Obstetrician is in attendance.

Saint Mary's Hospital is becoming increasingly popular with mothers, and during the year no fewer than 1,068 (756) were admitted. Expectant mothers who have booked to enter for their confinements are examined periodically before and after the event by one of the senior Resident Medical Officers. The number of ante-natal and post-natal clinics held at the Hospital during the year was 260 (218), and the number of attendances was 9,291, as compared with 7,126 during 1936.



**ANTE-NATAL CLINICS.**—The Ante-Natal Clinic opened at Cosham during 1936 has been made good use of by the expectant mothers in the outlying districts, and there is no doubt that the establishment of this Clinic has been well warranted. A marked increase in the attendances at the Fratton Ante-Natal Clinic rendered it necessary to have another session, and this was commenced on the 3rd November 1937. The number of patients attending the Ante-Natal Clinics in Portsmouth represents 61.07% of the women confined during the year, as compared with 52.03% for 1936.

**MIDWIVES ACT, 1936.**—The scheme to provide an adequate service of Municipal Midwives, described in my report last year, came into operation on the 30th July, 1937, when six midwives commenced duty with the City Council. As the demand grew this number was gradually increased to ten by the end of the year. In October 1937 a Superintendent Midwife commenced duty.

There is no doubt that the Municipal Midwives have proved popular with the mothers.

The Minister has recommended that no midwife be required to attend more than 80/100 cases per annum, and in the five months the Scheme has been in operation the average number of deliveries per midwife per month has been 6.1. Much more of the midwives' time is, however, taken up in attendance at Ante-Natal Clinics, and this has to a large extent relieved Health Visitors of this work, and so enabled them to concentrate on visiting children in their own homes.

## **CHILD WELFARE.**

**STATISTICS.**—The number of children under one year of age who died in 1937 was 167, equivalent to an infantile mortality rate of 43.8, as compared with 49.6 for the previous year, and an average of 55.2 for the preceding 10 years. The causes of death are set out in Table XXXII, from which it will be seen that slightly more than one-half of the children died during the first four weeks, and that the principal causes contributing to the infant death rate were prematurity, diarrhoea, congenital malformations and atrophy, debility and marasmus, in order of numerical importance.



TABLE XXXII.

## Infant Mortality.

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

CAUSE OF DEATH	Under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total under 4 weeks	4 weeks and under 3 months	3 months and under 6 months	6 months and under 9 months	9 months and under 12 mths.	Total Deaths under One Year
Whooping Cough .. ..	..	..	..	..	..	2	1	2	1	6
Diphtheria .. ..	..	..	..	..	..	..	..	1	..	1
Influenza .. ..	..	..	..	..	..	..	1	..	..	1
Tuberculous Meningitis ..	..	..	..	..	..	..	..	3	..	3
Syphilis .. ..	..	1	..	..	1	..	1	..	..	2
Meningitis (not Tuberculous)	..	..	..	..	..	1	..	..	1	2
Convulsions .. ..	2	..	1	..	3	1	1	1	..	6
Bronchitis .. ..	..	..	1	..	1	..	3	..	..	4
Pneumonia (all forms) ..	..	1	..	..	1	2	4	3	1	11
Gastritis .. ..	..	1	..	..	1	..	..	1	..	2
Diarrhoea and Enteritis ..	..	1	1	2	4	8	8	1	1	22
Congenital Malformations ..	7	4	1	..	12	6	2	..	..	20
Atrophy, Debility and Marasmus ..	3	1	2	..	6	4	2	1	..	13
Premature Birth .. ..	27	4	4	3	38	3	..	..	..	41
Injury at Birth .. ..	5	..	1	..	6	..	..	..	1	7
Atelectasis .. ..	8	..	1	..	9	..	..	..	..	9
Icterus Neonatorum .. ..	1	..	..	1	2	..	..	..	..	2
Pemphigus Neontorum .. ..	..	1	..	..	1	..	..	..	..	1
Suffocation, Overlying .. ..	..	..	..	..	..	2	..	..	..	2
Other Causes .. ..	2	1	1	1	5	3	1	..	3	12
TOTALS .. ..	56	14	13	7	90	32	24	13	8	167
PREVIOUS YEAR .. ..	83	9	5	7	104	26	25	27	12	194

Nett Births in the year—Legitimate 3624

Illegitimate 188

Comparison of the total infant deaths within the age periods stated, with those of the previous year, reveals that the most marked decrease was in the neo-natal period—under four weeks of age—particularly in the first week after birth. There was also a substantial decrease in the age period 6/9 months. Among the causes of death the most marked decrease was that of deaths from prematurity (41 as compared with 62). There was also a decrease in the deaths from pneumonia (11 compared with 30).



The causes of premature birth are various—ill-health of the mother, complications of pregnancy, accident, etc.—and they can be reduced only by more adequate ante-natal care of the expectant mother. Congenital malformations and developmental defects of the infant similarly are to be attributed to ante-natal causes, of which for the most part our knowledge is still incomplete, and which are not likely to be easily controlled by public health measures. There is evidence, however, that increased attention to the mother in pregnancy and childbirth will, in due course, reduce still further the number of infant deaths, especially those of the first month after birth.

**VOLUNTARY WELFARE CENTRES.**—Portsmouth is fortunate in having two voluntary organisations, which do excellent work in connection with the Maternity and Child Welfare in the City, *i.e.* :—

(a) The Royal Naval and Royal Marine Maternity Home and Child Welfare Centre, 45-49 Commercial Road, which is a complete and up-to-date unit. The City Council contributes towards its funds. During the year 407 (379) new cases were seen by the Medical Officer (Dr. A. Erskine Clark) at the Child Welfare Centre, the total attendances being 3,484 (2,893).

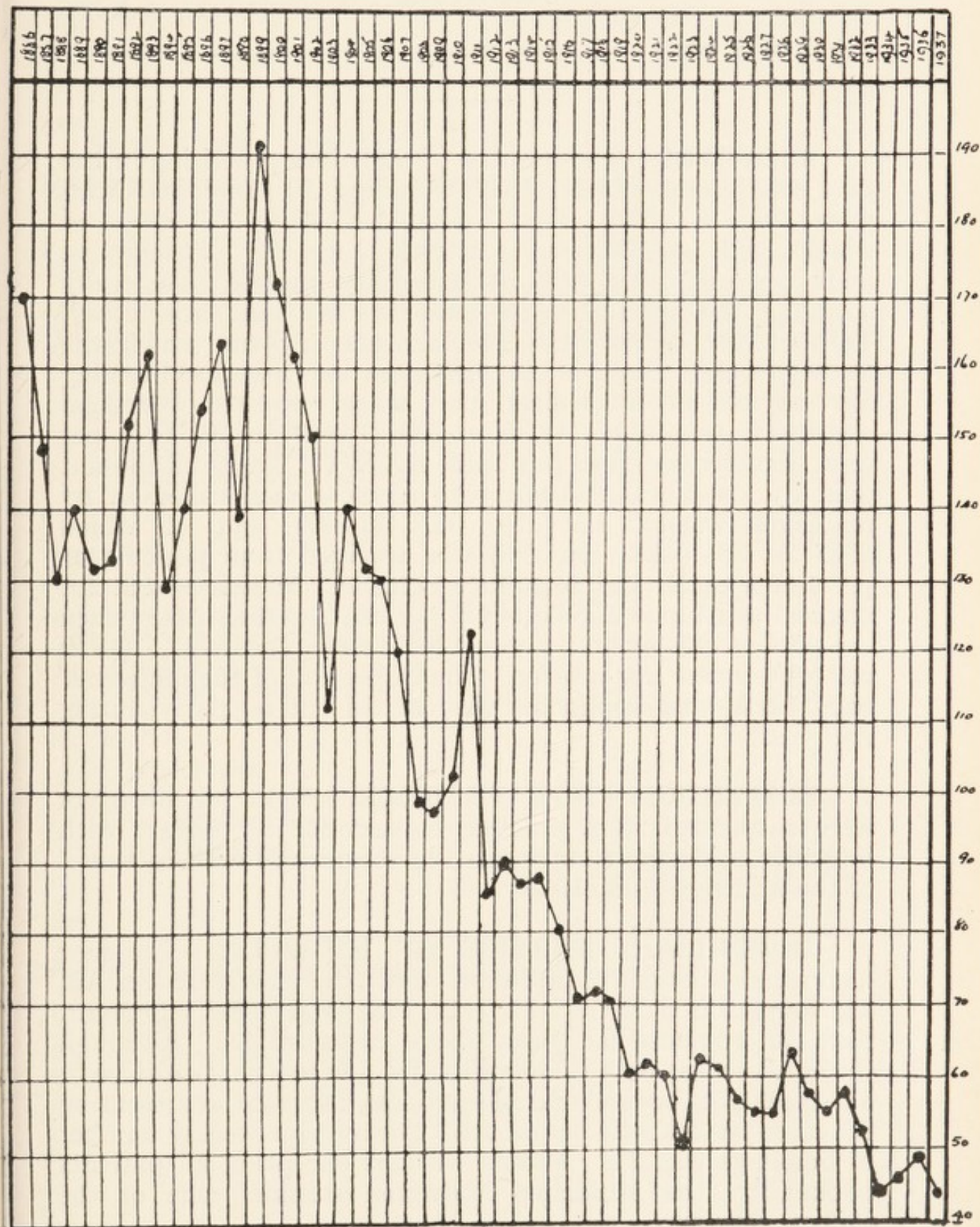
Ante-natal and Post-natal Clinics are also held. At the former 533 (457) patients made 3,221 (2,889) attendances, and at the latter 374 (326) made 541 (485) attendances.

(b) A Child Welfare Centre is conducted by the Military Authorities at Cambridge Barracks, at which 127 (163) patients made 2,211 (1,986) attendances. An Ante-natal Clinic is also conducted, 157 (156) patients making 1,058 (793) attendances. At the Post-natal Clinic 149 patients made 162 attendances.



TABLE XXXIII.

Chart showing the number of Deaths under 1 year of age  
to 1,000 Births in Portsmouth, 1886 to 1937.





## REPORT ON THE WORK OF THE MATERNITY SERVICES, INCLUDING SUPERVISION OF MIDWIVES.

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

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**MIDWIVES.**—The number of midwives practising in the City on December 31st, 1937, including 10 Municipal Midwives, was 82 (72). They attended 3,126 (3,172) cases, of which 2,631 (2,657) were attended in the capacity of midwives and 495 (515) as maternity nurses. Generally speaking, the practice of the midwives has been satisfactory. Through the operation of the Insurance Scheme under the Midwives Act there is no difficulty in patients obtaining the services of a medical man when required. Medical assistance was sent for in 1,209 (1,081) or 46 (41) per cent. of midwives' cases (see Table XXXIV). The total amount paid by the Local Authority to medical men called in by midwives was £1,349 15s. 0d. (£1,347), out of which £527 3s. 3d. (£527 10s. 0d.) was received from patients as premiums under the Insurance Scheme. Midwives sent for medical assistance in 58.6 (48.5) per cent. of their cases when the patient was insured under the Scheme, and in 17.7 (18.2) per cent. where not insured. The inspection of the midwives' bags, books and appliances was carried out regularly during the year.

**SUSPENSION FROM PRACTICE.**—Eight (9) Midwives were suspended from practice on account of contact with infection, and were compensated in accordance with Section 2 of the Midwives Act, 1926.

**DOMICILIARY SERVICE OF MIDWIVES.**—The new Domiciliary Service of Midwives under the new Midwives Act was inaugurated on the 30th July, 1937, and there is no doubt that the response has been above expectations. Although the Scheme was only in operation for five months of the year, 530 cases were booked and 244 patients delivered, representing 6.1 cases per midwife per month. The average weekly number of bookings was 24. Almost without exception all patients booked by the Municipal Midwives attended one of the Clinics regularly.

TABLE XXXIV.

Table shewing number of cases and various reasons for which medical help was sought by Midwives, and notifications received from Midwives under Rule E. 33 of the Central Midwives' Board during the year, compared with 1936.

Cases of sending for medical help—Rule E. 33a :—							
During pregnancy—						1937	1936
For abortion	..	..	..	..		15	28
For albuminuria	..	..	..	..		44	30
For convulsions	..	..	..	..		—	1
For other causes	..	..	..	..		169	178
						— 228	— 237
During labour—							
For Ante-partum haemorrhage	..	..	..	..		27	44
For Delayed labour	..	..	..	..		197	201
For Mal-presentation	..	..	..	..		44	57
For Ruptured Perineum	..	..	..	..		197	201
For Retained Placenta	..	..	..	..		14	14
For other causes	..	..	..	..		27	34
						— 506	— 551
During lying-in—							
For convulsions	..	..	..	..		—	—
For rise of Temperature	..	..	..	..		24	20
For Post-partum haemorrhage	..	..	..	..		24	22
For Maternal Death	..	..	..	..		1	—
For other causes	..	..	..	..		66	74
						— 115	— 116
For the Infant—							
For still-birth	..	..	..	..		5	10
For death	..	..	..	..		1	—
For discharging eyes	..	..	..	..		73	58
For other causes	..	..	..	..		116	109
						— 195	— 177
						Total 1044	1081
No. of notifications received from Midwives in cases—							
Of death (Rule E. 33b)	..	..	..	..		6	2
Still-birth (Rule E. 33c)	..	..	..	..		25	34
Of having laid out dead body (Rule E. 33d)	..	..	..	..		1	4
Of liability of source of infection (Rule E. 33e)	..	..	..	..		3	3
In cases of artificial feeding (Rule E. 33f)	..	..	..	..		42	25
						—	—
						Total 77	68
						—	—



**PUERPERAL FEVER AND PYREXIA.**—During the year there were 38 (57) notifications of Puerperal Fever and Puerperal Pyrexia.

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

Puerperal Sepsis	...	...	...	25
Pyelitis	...	...	...	8
Influenza	...	...	...	2
Mastitis ...	...	...	...	2
Broncho-pneumonia	...	...	...	1

No deaths from Puerperal Sepsis occurred during the year.

**WEARING OF MASKS.**—Masks are still being issued to the midwives in the City for use when attending patients during confinement and when making subsequent dressings, as a safeguard against the spread of infection.

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

During the year the Council renewed their permission to the Portsmouth Branch of the British Birth Control Association to use part of the premises of the old Maternity Hospital as a Birth Control Clinic. The original application was granted for a period of six months and this has again been extended for a further twelve months.



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

(1) Number of applications for Registration :	1936	1937
(a) As Nursing Homes      ...      ...	5	2
(b) As Maternity Homes    ...      ...	2	2
(2) Number of Homes registered :		
(a) As Nursing Homes      ...      ...	5	2
(b) As Maternity Homes    ...      ...	1	2
(3) Number of orders made refusing registration    ...      ...      ...      ...	Nil	Nil
(4) Number of applications for exemption from registration    ...      ...      ...	Nil	Nil
(5) Number of applications for registration withdrawn    ...      ...      ...      ...	1	—

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

**ANTE-NATAL AND POST-NATAL CLINICS.**—The following table gives details of the work carried out at the Council's Ante-natal and Post-natal Clinics during the year :

CLINIC	ANTE-NATAL				POST-NATAL			
	No. of Patients		Attendances		No. of Patients		Attendances	
	1936	1937	1936	1937	1936	1937	1936	1937
Fratton (two Clinics weekly)    ..	282	369	650	756	25	10	25	10
(one from 3-11-37)								
Cosham (one Clinic weekly)    ..	53	135	120	354	4	11	4	11
Saint Mary's Hospital (four Clinics weekly)    ..	1114	1386	6672	8747	260	303	454	544
TOTALS    ..	1449	1890	7442	9857	289	324	483	565

The number of patients attending Ante-natal Clinics in Portsmouth represents 61.07% (52.03%) of the women confined during the year.



TABLE XXXV.

## INSTITUTION TREATMENT OF MATERNITY CASES.

	SAINT MARY'S HOSPITAL	ROYAL NAVAL MATERNITY HOME
No. of Maternity beds (exclusive of isolation and labour) .. .. .	70	21
No. of Patients admitted .. .. .	1068	367
Average duration of stay .. .. .	14 days	15½ days
No. of cases delivered by :—		
(a) Midwives .. .. .	822	330
(b) Doctors .. .. .	53	37
Cases in which medical assistance was sought by midwife .. .. .	165	Doctor always available
No. of cases notified as :		
(a) Puerperal Fever .. .. .	Nil	Nil
(b) Puerperal Pyrexia .. .. .	10	2
No. of cases of pemphigus neonatorum .. .. .	Nil	Nil
No. of infants not entirely breast-fed while in Institution .. .. .	35	77
No. of cases notified as ophthalmia neonatorum .. .. .	2	4
Result of treatment .. .. .	1 Died 1 became blind in 1 eye	Recovered
No. of Maternal deaths .. .. .	4	Nil
Cause of death .. .. .	1. Ante-partum haemorrhage, pulmonary embolism 2. Acute Heart Failure—reported to Coroner 3. Pulmonary Tuberculosis. Tubercular Larynx. 4. Accidental Haemorrhage. Toxaemia of Pregnancy.	
No. of foetal deaths :—		
1. Stillborn .. .. .	40	10
2. Within 10 days of birth .. .. .	16	5
3. Causes of death .. .. .	Prematurity .. 11 " Cleft palate, hare lip 1 Postmaturity .. 5 Maternal Chronic Nephritis .. 3 Prolapsed Cord .. 4 Anencephaly .. 6 Concealed Ante-partum Haemorrhage .. 4 Brow presentation 1 Intra Cranial Oedema .. 5 Obstructed Labour 2 Accidental haemorrhage .. 2 Severe Toxaemia 1 Hydrocephaly .. 1 Second Twin—Macerated foetus 1 Syphilis .. 1 Ruptured Uterus 1 Asphyxia, Congenital Heart Disease 2 Ditto, Cerebral Oedema Obstructed Labour 1 Atelectasis .. 1 Broncho-pneumonia, the Haemorrhagic Disease 1 Cause unknown 2	Mother had severe influenza, very toxic before delivery 3 Macerated foetus .. 1 Severe ante-partum haemorrhage .. 1 Anencephalic .. 2 Severe albuminuria during whole of pregnancy .. 1 Difficult forcep delivery .. 1 Induction at 30 weeks for severe toxaemia 1 Atelectasis .. 1 Convulsion and inanition .. 1 Extreme prematurity 2 Cause unknown—Post-maturity .. 1



# ROLL OF MIDWIVES PRACTISING WITHIN THE CITY OF PORTSMOUTH.

SURNAME	CHRISTIAN NAME	ADDRESS	No. of Cert.	Date of Certificate	Date of Notice 1937
1. Ainsley	Clarissa Mary	25 Outram Road	51397	4th Aug., '20	6th January
2. Anstead	Elsie	27b Ashburton Road	85299	30th Nov., '32	6th January
3. Amsden	Anne Winifred	11 Tangier Road	62675	9th April, '24	6th January
4. Attley	Lydia E.	28 Victoria Road North	87286	12th Aug., '33	8th January
5. Bampton	Dorothy Vera	31 Collins Road	68136	25th Feb., '26	8th January
6. Barnes	Eliza	109 Church Road	23295	26th April, '06	6th January
7. Barnes	Elizabeth	109 Church Road	27020	15th Oct., '08	7th January
8. Belcher	Dorothy Madge	R.N. Maternity Home	86522	23rd May, '33	19th January
9. Blake	Ellen M.	12 Haslemere Road	27693	16th Dec., '08	8th January
10. Bragg	Sarah J.	118 St. Augustine Road	42180	1st May, '15	12th January
11. Brassfield	Frances Mary	26 Besant Road	47125	11th May, '18	19th January
12. Brinn	Rosa	63 Ophir Road	29590	30th Oct., '09	7th January
13. Brockett	Ellen	23 Outram Road	45584	7th May, '17	6th January
14. Calvert	Frances Mary	R.N. Maternity Home	96712	15th Aug., '36	28th August
15. Caton	Kathleen	3 Galt Road, Farlington	64753	10th Dec., '24	6th January
16. Challis	Kate	37 Aylesbury Road	4208	28th April, '04	6th January
17. Chiverell	Louise	43 Totland Road, Cosham	65495	9th Feb., '25	7th January
18. Clark	Olive	Military Families Hospital	78095	24th May, '30	3rd April
19. Clarke	Gertrude	16 Second Avenue, Cosham	17540	23rd Mar., '05	7th January
20. Clarke	Gwendoline	Royal Naval Maternity Home	45983	11th Aug., '17	8th January
21. Collins	Mabel	28 Victoria Road North	74387	24th Nov., '28	6th January
22. Cowell	Mary A.	57 St. Piran's Avenue	69902	16th Dec., '26	14th January
23. Crafts	Elizabeth	14 Alexandra Road	39421	17th Dec., '13	10th January
24. Diamond	Agnes Mary	28 Victoria Road North	76920	23rd Nov., '29	18th January
25. Elliott	Mary Ann Leah	22 The Cottages, Glasgow Road	5487	30th June, '04	8th January
26. Farnell	Marion	454 Commercial Road	8755	27th Oct., '04	9th January
27. Farr	Mary	6 Longs Road	52338	10th Nov., '20	6th January
28. Field	Ethel Fanny	22a Priory Crescent	54222	11th June, '21	8th January
29. Foley	Louisa A.	8 Thurbern Road	37918	28th April, '13	11th January
30. Foot	Alice Maud Mary	277 Milton Road	54229	11th June, '21	6th January
31. Franklin	Winifred M.	Royal Naval Maternity Home	96835	15th Aug., '36	12th January
32. Gemmell	Jane Frances	15 Edgerley Gardens, Cosham	88265	25th Nov., '33	7th January
33. Girdlestone	Alice Maude Mary	74 Hawthorne Crescent	69983	12th Dec., '26	20th October
34. Godwin	Julia	6 Dean Road, Cosham	65151	29th Jan., '25	10th January
35. Goodman	Lucy Ann	25 Laburnum Grove	26437	21st May, '08	31st January
36. Heard	Mabel Vosper	28 Victoria Road North	34558	28th Nov., '11	6th January
37. Hebington	Aileen Mary	63 Margate Road	70015	16th Dec., '26	21st January
38. Hebington	Eliza	31 Curzon Howe Road	50981	12th May, '20	6th January
39. Hill	Ellen Maud	22 Albany Road	58884	13th Dec., '22	4th March
40. Hodge	Ada J.	73 King Street, Southsea	50992	12th May, '20	10th January



## ROLL OF MIDWIVES—continued.

SURNAME	CHRISTIAN NAME	ADDRESS	No. of Cert.	Date of Certificate	Date of Notice 1937
41. Horton	Winifred	Naval Welfare Centre	66858	15th Aug., '25	7th January
42. Howard,	Lydia	49 Wisborough Road	63413	14th June, '24	15th January
43. Jack	Emma	11 Shaftesbury Road	47280	11th May, '18	8th January
44. Jago	Clara Sara	4 Chatsworth Avenue	23268	6th Feb., '06	8th January
45. Kean	Lucy Rowe	133 Eastfield Road	31908	30th Sept., '10	8th January
46. Lee	Ethel Fliza	23 Derby Road	60963	11th Aug., '23	9th January
47. Legge	Amelia Vine	49 Victoria Road North	58948	13th Dec., '22	7th January
48. Looker	Elsie May	4 Coniston Avenue	96997	15th Aug., '36	22nd January
49. Lovett	Ellen	14 Shearer Road	48431	10th Feb., '19	6th January
50. Malyon	Marion	200 Stamshaw Road	46160	11th Aug., '17	7th January
51. Martin	Elizabeth Amy	22 Milton Road	56977	10th April, '22	12th January
52. Midgley	Margaret	280a Chichester Road	85845	10th Mar., '33	8th January
53. Moore	Frances Evelyn	22 Milton Road	98603	20th Feb., '37	21st August
54. Morgan	Agnes	68 Montgomery Road	44981	31st Oct., '16	6th January
55. Nicholson	Maud Louisa	42 Dumbarton Street	93925	17th Aug., '35	11th January
56. Packer	Mabel Elizabeth	7 St. Andrew's Road	48091	9th Nov., '18	13th January
57. Paul	Margaret	46 Derby Road	35805	2nd May, '12	7th January
58. Pavier	Winifred G.	Royal Naval Maternity Home	78458	24th May, '30	7th January
59. Pearcey	Edna R.	24 Elphinstone Road	95039	22nd Feb., '36	23rd February
60. Phillips	Edith	80 Methuen Road	3388	24th Mar., '04	6th January
61. Pumphrey	Catharine E. V.	520 Commercial Road	94791	23rd Nov., '35	6th January
62. Richards	Annie Kathleen	Royal Naval Maternity Home	35480	19th Feb., '12	11th January
63. Richards	Queenie S. A.	Inglenook Nursing Home, Havant Road	97120	15th Aug., '36	4th January
64. Rumbold	Edith	"Burcott", Northern Road, Cosham	49421	9th Aug., '19	6th January
65. Rust	Jaac	204 Powerscourt Road	40133	28th April, '14	8th January
66. Ruston	Norah	Military Families Hospital	99308	26th Nov., '32	27th June
67. Salmon	Norah Kathleen	454 Commercial Road	85531	22nd Nov., '14	27th February
68. Sansom	Maud Mary	46 Tottenham Road	40579	21st Nov., '31	6th January
69. Selous	Sarah Jane	55 Salisbury Road	82624	11th Oct., '21	22nd April
70. Stevens	Johanna E.	226 Stubbington Avenue	55569	28th April, '13	9th January
71. Street	Beryl	9 Clovelly Road	38035	10th Aug., '09	6th January
72. Taylor	Florence Mary	"St. Hilda", Portsmouth Road, Portchester	29219	27th April, '05	6th January
73. Taylor	Lily May	5 Meon Road	18246	15th Aug., '36	23rd January
74. Towers	Ellen	3 & 5 Brading Avenue	97226	28th Nov., '05	5th March
75. Trowbridge	Edith Mary	1 Collins Road	22860	23rd May, '36	7th January
76. Webley	Joan	Royal Naval Maternity Home	96499	10th Nov., '17	1st April
77. Weller	Marion Edith	45 Catisfield Road	46669	22nd Feb., '36	7th January
78. Willows	Emmeline C.	30 St. Piran's Avenue	95142	10th April, '22	2nd May
79. Willcocks	May Julia	174 Chichester Road	57158	23rd Feb., '29	12th January
80. Winfield	Gladys Irene	2 Copythorn Road	74978	19th Feb., '12	6th January
81. Wynn	Amelia	69 Solent Road, Drayton	35371		6th January



## REPORT OF THE WORK OF THE CHILD WELFARE SERVICE.

By T. ERNEST ROBERTS, M.B., B.S. (Lond.), M.R.C.S. (Eng.), D.P.H. (Camb.),  
*Child Welfare Officer.*

**HOME VISITING.**—The Health Visitors paid 29,680 (29,783) visits during the year :—

	<i>Total No. of Visits</i>
First Visits                    ...                    ...                    ...                    ...	3,702
Subsequent visits to children from 0 to 1 year of age	10,482
Ditto to children from 1 to 2 years of age                    ...	6,287
Ditto to children from 2 to 3 years of age                    ...	3,458
Ditto to children from 3 to 5 years of age                    ...	4,762
Visits to cases attending Centres                    ...                    ...	197
Visits to ante-natal cases                    ...                    ...                    ...	354
Visits to cases of Ophthalmia Neonatorum                    ...	5
Visits to Midwives                    ...                    ...                    ...                    ...	26
Other visits                    ...                    ...                    ...                    ...	407

**THE PRE-SCHOOL CHILD.**—The total visits made during the year 1937 to children of this age-group, 3 to 5 years of age, numbered 4,762, as will be seen from the Table given above, in which Home Visits are now classified according to the age of the child concerned.

The Copnor Child Welfare Centre at St. Alban's Hall, Copnor Road, which was opened on 7th November, 1935, has proved most popular with mothers of that district, as will be seen from the Table of attendances in the following section. As an experiment parents were asked to bring pre-school children, whose homes had been visited, for examination to the nearest local Centre, at the usual clinic hours, and on the whole the response has been satisfactory, children being brought in most cases when some evident defect required advice or treatment, but few attendances have been made solely for medical overhaul of an apparently normal child.



The arrangements for medical examination of pre-school children have been further developed by the opening of a special "Toddlers' Clinic", on 24th June, 1936, at the Central Child Welfare Centre, Trafalgar Place. This is held weekly on Wednesday afternoons, and the attendances, etc., for the year 1937 were as follows :—

<i>Number of Clinics</i>	<i>New Patients</i>	<i>Attendances</i>	<i>Seen by Medical Officer</i>
46 (24)	223 (134)	754 (273)	568 (236)

Under the arrangements made with the Education Committee for the treatment of pre-school children, and indeed, infants of any age from birth up to five years, at School Clinics, cases are referred by the Medical Officers from Child Welfare Centres or from the 'Toddlers' Clinic for such conditions as external eye disease, skin disease, ringworm of the scalp, ear discharge, squint and orthopaedic defects. Cases requiring operation for tonsils and adenoids or more serious ear conditions are referred to Saint Mary's Hospital or the Eye and Ear Hospital.

Nutritional defects, including cases of rickets, are remedied by advice to the parents and the supply of special foods, such as chocolate milk, Virol, Maltoline, Aberdeen Emulsion, etc. In a few instances treatment by ultra-violet light has been arranged at Saint Mary's or the Royal Portsmouth Hospital.

**INFANT LIFE PROTECTION.**—At the beginning of the year 123 (126) persons had notified the Local Authority that they had undertaken the maintenance of infants apart from their parents, and the number of infants so maintained was 194 (196). At the end of the year the figures were 117 (123) persons and 200 (194) children. During the year 1,507 (1,702) visits were paid by the Child Protection Visitor to the various homes, which were, generally speaking, found to be satisfactory and the children well cared for. A number of applications to maintain children under the Act were refused for reasons such as old age, uncleanness and overcrowding. There was one prosecution during the year.

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

CENTRES		Attendances	New Patients	Seen by the Medical Officer
Fratton (2 afternoons a week)	..	10,946	1,011	2,938
Eastney (1 afternoon a week)	..	9,335	444	1,670
Portsea (1 afternoon a week)	..	5,068	264	1,863
Stamshaw (1 afternoon a week)	..	5,616	323	1,741
Cosham (1 afternoon a week)	..	6,240	339	1,581
Copnor (1 afternoon a week)	..	8,056	447	1,541
Totals	.. ..	45,261	2,828	11,334
Totals for 1936	..	45,254	2,712	11,790

Dried milk was issued from the Child Welfare Centres to 1,889 (1,720) applicants—267 (171) expectant mothers, 520 (535) nursing mothers, 1,102 (1,014) infants—at a total cost of £4,006 (£4,035). Of this sum £1,520 (£1,281) was recovered from the patients.

Attendances at Child Welfare Centres during the year 1937, classified according to the age of the child concerned, were as follows :—

Children from 0 to 1 years of age	...	32,111
„ „ 1 to 2 „ „	...	7,899
„ „ 2 to 5 „ „	...	5,251
		<hr/> 45,261



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## SANITARY CIRCUMSTANCES

(Figures for the previous year are included  
in brackets for comparative purposes).



## SANITARY CIRCUMSTANCES

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**WATER SUPPLY.**—There is nothing to add to previous reports in respect of the water supply. Periodical analysis by the City Analyst, the results of which are given on page 130, show that the usual high standard of purity is maintained.

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

“ During the year 1937-8 approximately 1,000 new premises have been added from which refuse collection had to be made, these situated on the outskirts of the City, increasing the length of haul and necessitating longer carrying, due to the bin positioning. Despite these facts, however, transport costs have been reduced on the actual for 1936-37 by £165 and £400 on estimate.

This has been rendered possible as the result of the conversion of four 7 cube yard side loading ‘Pactum’ vehicles, rigid type, into 21 cube yard articulated rear loading ‘Compressmore’ type. The chassis so converted had already been in use for six years, and to be able to design a suitable body of three times the capacity without causing undue strain on the motive unit, proves remarkable progress and advancement in vehicle design. In addition, the alteration has caused little, if any, increase in running costs. This type of machine, first designed and used in Portsmouth, has now become popular elsewhere, particularly in Westminster, where a large fleet is now operating successfully.

Filling in of low-lying areas by controlled tipping is still the method of disposal, and this is proving highly satisfactory from every point of view.

The adaptation of cleansing equipment and training of the personnel for work in connection with the air raid precaution services continues, and the method of adaptation initiated at Portsmouth is now being adopted in other Municipalities at home and abroad.”



**MUNICIPAL DISINFECTING FLUID.**—8,370 (7,320) gallons of electrolysed sea-water disinfecting fluid were manufactured at the Municipal Disinfecting Fluid plant during the year. Of this amount 2,466 (2,528) gallons were issued to the public, 1,880 (1,480) gallons to the public elementary schools, 3,150 (2,060) gallons to the Public Swimming Baths, 420 (460) gallons to the Children's Home Swimming Bath, 240 (480) gallons to Langstone Sanatorium, 180 (180) gallons to Saint Mary's Hospital, 20 (20) gallons to Saint Mary's Institution, and the remainder to various other institutions.

**WATER OF SWIMMING BATHS AND POOLS.**—The new Hilsea Swimming Bath, opened during 1935, has a capacity of 529,000 gallons, the sea water being pumped from the adjacent creek. An up-to-date filtration and purification plant was installed, enabling a turnover of the water in the bath to be obtained once every six hours.

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

As a result of my report on the hygienic condition of Stamshaw Swimming Pool, the Piers, Beach and Publicity Committee decided to close the Pool pending the carrying out of repairs and the installation of filtration plant.



## SANITARY INSPECTION.

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

During the year 1,260 (1,453) Informal and 55 (181) Statutory Notices were served for the abatement of nuisances under the Public Health Act.

28 (81) Notices were also served under Section 9 of the Housing Act, 1936, to render houses in all respects fit for habitation.

62 (68) Inspections were made of the sanitary arrangements of places of public entertainment.

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

### DRAINAGE DEFECTS.

Drains cleared .. .. .	288
Drains cleared in Workshops .. .. .	—
Drains repaired or relaid .. .. .	213
Drains ventilated or ventilating shafts repaired .. .. .	60
New water-closet pans provided .. .. .	54
New Pedestal closet pans provided .. .. .	63
Water-closet fittings repaired .. .. .	194
Flushing apparatus to water-closets provided .. .. .	33
“ “ “ “ “ in Workshops .. .. .	—
Separate and additional sanitary accommodation provided .. .. .	—
Water-closets disconnected from Workshops .. .. .	4
“ Screened from Workshops .. .. .	3
“ Ventilated .. .. .	10
“ Cleansed .. .. .	6
Gratings provided to gully traps .. .. .	49
Glazed stoneware sinks provided .. .. .	21
Sink waste-pipes repaired, trapped or renewed .. .. .	172

### OTHER DEFECTS.

Rain-water spouting cleansed or repaired .. .. .	373
Roofs repaired .. .. .	849
Weather slating repaired or external walls protected .. .. .	472
Floors, stairs or doors repaired .. .. .	510
Sashes, lines, sills, glazing or sash frames repaired .. .. .	1545
Damp courses provided or repaired .. .. .	36
Houses or parts of houses cleansed or distempered .. .. .	201
“ “ “ repaired .. .. .	751
Sanitary dustbins provided .. .. .	17
Dust chutes cleansed or repaired .. .. .	10
Space beneath floors ventilated .. .. .	54
Yards, stables, sties, etc., repaved .. .. .	220
Overcrowding in dwelling-houses abated .. .. .	2
Foundation of house concreted .. .. .	5
Water supply laid on or water services repaired .. .. .	41
Workshops cleaned or distempered .. .. .	5
Workshop floors repaired .. .. .	3



OTHER DEFECTS.—*continued.*

Workshop roofs repaired .. .. .	3
Workshops or parts of Workshops repaired .. .. .	10
Cooking ranges or firegrates repaired or renewed .. .. .	257
Coppers repaired or renewed .. .. .	78
Other nuisances in dwelling-houses abated .. .. .	270

## OFFENSIVE MATTER, &amp;c.

Manure and refuse removed .. .. .	18
Stagnant water removed .. .. .	1
Animals removed .. .. .	1
Bedding cleansed or destroyed .. .. .	4

## SLAUGHTERHOUSES, STABLES, &amp;c.

Yards, stables, sties, etc., cleaned .. .. .	3
Bakehouses cleansed .. .. .	18

## BYELAWS.

Notices under Nuisance Bye-laws complied with .. .. .	2
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## GENERAL INSPECTION.

DWELLING HOUSES.—7,374 (7,714) dwelling houses were inspected, and 15,387 (18,688) re-inspections were made whilst work ordered to be carried out was in progress.

COMPLAINTS.—2,220 (2,156) complaints were made at the office and received attention.

COMMON LODGING HOUSES.—70 (85) visits were made to the 4 (4) registered Common Lodging Houses.

WORKSHOPS.—429 (501) visits were made to the Workshops, which have been well kept, and 98 (137) visits to out-workers' premises. Six Complaints were received from H.M. Inspector of Factories, all of which received attention.

OLD DRAINS.—1,421 (1,090) old drains were tested or re-tested.

NEW SANITARY FITTINGS.—2,842 (2,693) sanitary fittings were examined.

OCCUPATION CERTIFICATES.—1,035 (994) Occupation Certificates were issued with respect to new buildings.

SANITARY CERTIFICATES.—8 (15) Sanitary Certificates with respect to the sanitary condition of the drains and fittings of old dwelling houses have been issued.

INCREASE OF RENT AND MORTGAGE INTEREST (RESTRICTIONS) AMENDMENT ACT, 1933.—Under this Act, 1 (4) certificates relating to dwelling houses not being kept in a reasonable state of repair were granted to tenants.

RATS AND MICE (DESTRUCTION) ACT.—581 (664) visits were made to rat infested premises, and 1 (1) notice was served.



INFECTIOUS DISEASES.—1,441 (1,557) cases of infectious diseases were visited and investigated, and 1,690 (1,015) rooms were disinfected by the disinfecter.

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

TABLE XXXVII.

Premises	Number of		
	Inspections	Written Notices	Occupiers Prosecuted
Factories (including Factory Laundries) ..	201	7	—
Workshops (including Workshop Laundries) ..	429	19	—
Workplaces (other than Outworkers' premises) ..	86	2	—
TOTAL ..	710	28	—

## DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORKPLACES.

Particulars	Number of Defects			Number of offences in respect of which Prosecutions were instituted
	Found	Remedied	Referred to H.M. Inspector	
(1)	(2)	(3)	(4)	(5)
<i>Nuisances under the Public Health Acts :—</i>				
Want of Cleanliness .. .. .	21	20	—	—
Want of Ventilation .. .. .	2	2	—	—
Overcrowding .. .. .	—	—	—	—
Want of Drainage of Floors .. .. .	—	—	—	—
Other Nuisances .. .. .	12	12	—	—
Sanitary accommodation { insufficient .. .. .	—	—	—	—
{ unsuitable or defective .. .. .	5	4	—	—
{ not separate for sexes .. .. .	—	—	—	—
<i>Offences under the Factory and Workshops Acts</i>				
Illegal occupation of underground bakehouse (s. 101) .. .. .	—	—	—	—
Other Offences .. .. . (Excluding offences relating to out-work and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921)	1	1	—	—
TOTAL ..	41	39	—	—





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## INSPECTION AND SUPERVISION OF FOOD

(Figures for the previous year are included  
in brackets for comparative purposes).



## MILK AND DAIRIES.

### MILK SUPPLY.

During the year 971 (2,285) visits were made to the registered Dairies, Cowsheds and Milkshops. There are 1,031 (964) retail purveyors, 16 (16) wholesale dealers in milk, and 3 (3) cowkeepers carrying on business in the City, and these premises have all been well kept.

**GRADED MILK.**—Under the Milk (Special Designations) Order of 1936, 13 licences were issued for the sale of Tuberculin-tested, 12 for the sale of Accredited and 8 for the sale of Pasteurised Milk.

During the year samples of milks of special designation were examined by the Public Analyst, details of which are contained in his Annual Report (pages 119 to 123). In only 32 samples did the milk fail to pass the required tests.

**GUINEA PIG TESTS.**—In addition to the samples of milk submitted to the Public Analyst, 7 (8) samples of ordinary and graded milks were forwarded to the Clinical Research Association, London, for examination for the presence of tubercle bacilli. The ingestion of these bacilli in milk is the cause of a large proportion of the cases of tuberculosis in children, especially of the bones, joints and abdomen. In all cases the examination of the Guinea pig failed to show the presence of tubercle bacilli.

**MILK SUPPLIED TO SCHOOLS.**—In connection with the scheme for the supply of milk to school-children, which was inaugurated by the Education Committee in January 1936, 74 (81) samples of milk were taken from 6 (6) retailers of pasteurised milk. Of these 14 (9) were reported by the Public Analyst not to be in accordance with the bacteriological standard. The retailers were cautioned by the Medical Officer of Health.

The average proportion of children taking milk at school during the year was 35 per cent.

**PASTEURISED MILK.**—Each year investigation and research adduce further evidence that pasteurised milk is the only safe milk, and that there is no significant difference in nutritive value between raw and pasteurised milk.



## FOOD AND DRUGS

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### FOOD AND DRUGS (ADULTERATION) ACT, 1928.

The total number of samples of food and drugs taken for analysis during the year was 1,281, of which 31, or 2.4% were adulterated, as compared with 3.5% for the previous year. The percentage adulterated is well below the average for the past five years for England and Wales.

**ACTION TAKEN.**—Of the 31 (46) adulterated samples 13 (21) were formal samples, of which 3 (5) were cautioned. In two cases no proceedings were instituted, for after visiting the farms and seeing the cows milked it was found that the milk did not come up to the legal standard. In regard to the remaining 8 (14) samples, fines and costs were inflicted ranging from £1 to £3 7s. 0d.

Details of the samples adulterated are given by the Public Analyst in Tables A and B of his Report (pages 116 and 117).

**DRUGS.**—Of 69 (59) samples of drugs examined by the Public Analyst one official sample of Parrish's Chemical Food was found to be 44.4% deficient in ferrous phosphate, and one official sample of Mercury Ointment was found to be 66.6% deficient in mercury. Both vendors were cautioned by the Medical Officer of Health.

In addition to samples of drugs examined by the Public Analyst, 30 (33) drug tests, chiefly mixtures and four of dressings, were carried out by the City of Portsmouth Insurance Committee, the examinations being made by a London firm of analysts nominated by the Ministry of Health. Four (four) samples were found to be below standard of careful dispensing and fines of £1 were imposed in two (three) cases, there being extenuating circumstances in the other cases. The above information has been kindly supplied by the Clerk to the Insurance Committee.



**MERCHANDISE MARKS ACTS, 1926, AND  
AGRICULTURAL PRODUCE  
(GRADING AND MARKING) ACT, 1928.**

Under the above Acts, Orders in Council have been made in relation to the marking of the following imported foodstuffs: Fresh Apples, Raw Tomatoes, Eggs (hen or duck eggs in shell) Dried Eggs, Oat Products (Oatmeal, Rolled Oats, Oat Flour and Groats), Currants, Sultanas, Raisins and Honey, Frozen or Chilled Salmon or Sea Trout, Butter, Dead Poultry (ducks, fowls, geese or turkeys, whether dressed or undressed), Bacon and Hams. During the year 1,573 (1,649) visits were paid to various shops to ensure compliance with the provisions of the above Orders. Twenty traders were cautioned by the Inspector.

**REGULATION OF MANUFACTURE AND  
SALE OF ICE CREAM.**

Under the provisions of Section 92 of the Portsmouth Corporation Act, 1931, and Section 115 of the Portsmouth Corporation Act, 1920 :—

66 (125) persons were registered as vendors,

4 (6) persons were registered as manufacturers.

Ice Cream is a most valuable article of food, the consumption of which in this country is rapidly increasing. It is important, therefore, to ensure a pure and wholesome supply. This is rendered difficult by the fact that ice cream, like milk, forms a most favourable breeding ground for bacteria, which gain ready access to the ingredients of the "mix" and of the ice cream product through contact with unclean hands, through the medium of spray from the coughing or sneezing of the attendant, through dirty plant and equipment and through dust and splashings from unclean surroundings.

Bacteria contaminated ice cream is not only a source of danger to the public health and the cause of many fatal

epidemics, but from the commercial point of view contamination produces off-flavours and odours and impairs the keeping qualities of ice cream.

In my 1934 Report I summarised a copy of "Instructions on the Prevention of Bacterial Contamination", embodying the results of the most recent scientific investigation and research, which I circulated to each manufacturer and vendor of ice cream in the City. At the same time District Sanitary Inspectors were directed to pay particular attention to all registered premises in their districts.

It is gratifying to be able to report that 20 samples of ice cream taken during the year under review show a continued, though small, improvement (see Public Analyst's Report, page 123). Further efforts are being made to produce still greater improvement.

At the instance of the Health Committee representation has already been made to the Ministry of Health urging the need to adopt (1) chemical and (2) bacteriological standards for ice-cream.



# The Public Analyst's Report.

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THE CHEMICAL LABORATORY,  
16 ARUNDEL STREET,  
PORTSMOUTH.

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

Madam and Gentlemen,

I beg to submit my Report on the work carried out in my Department during the year ending 31st December, 1937.

The total number of samples of all kinds is rather larger than during the previous year, due to the increased number of Diphtheria examinations.

The percentage of detected adulteration is slightly lower than last year and about half of that shown in the latest published figures for England and Wales.

There have been changes in the Staff during the year, Mr. E. G. Whittle, B.Sc., A.I.C., having left to take up an appointment with the Colne Valley Water Company. His place has been taken by Mr. C. E. Hall, A.I.C., who joined the staff in July.

I wish to express my thanks to Mr. Beckett, and indeed to all the members of my staff, for their loyal co-operation, without which it would be impossible to cope with the work.

I should like also to mention the highly efficient manner in which Inspector E. J. G. Sinnett carries out his duties, at all hours day and night.

I remain, Madam and Gentlemen,

Your obedient servant,

REGINALD P. PAGE,  
*Public Analyst.*

## REPORT OF THE PUBLIC ANALYST.

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During the year ending December 31st, 1938, the number of samples and specimens examined was 4,946, which may be broadly classified as follows :—

	1937	1936
Food and Drugs Act ... ..	1,281	1,310
Graded Milk ... ..	163	191
Samples taken at Farms ... ..	42	—
Water ... ..	91	25
Sewage and Sewage Effluents ...	576	564
Fertilisers and Feeding Stuffs Act	10	—
Police and Coroner ... ..	25	27
Miscellaneous ... ..	43	54
Diphtheritic Material ... ..	2,715	2,041
	4,946	4,212

The number of samples taken in connection with “ The Sale of Food and Drugs Act ” is 1,281. This gives an average of one sample for every 196 persons in the City, or a “ Sample Rate ” of 5.1 samples for 1,000 persons.

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



TABLE A.

Nature of Sample	Number Examined	Number Genuine	Number Inferior	Number Adulterated	Percentage Adulterated
Milk .. .. .	563	539	7	17	3.0
Separated Milk .. .. .	1	1	—	—	—
Cream .. .. .	4	4	—	—	—
Butter .. .. .	110	109	—	1	.9
Margarine .. .. .	50	50	—	—	—
Coffee .. .. .	47	47	—	—	—
Cocoa .. .. .	44	44	—	—	—
Tea .. .. .	29	29	—	—	—
Sugar .. .. .	23	23	—	—	—
Pepper .. .. .	33	33	—	—	—
Mustard .. .. .	10	10	—	—	—
Rice .. .. .	20	20	—	—	—
Ground Rice .. .. .	7	6	1	—	—
Pearl Barley .. .. .	23	23	—	—	—
Cheese .. .. .	7	7	—	—	—
Lemon Curd .. .. .	12	12	—	—	—
Dried Fruits .. .. .	20	20	—	—	—
Baking Powder .. .. .	11	10	1	4	36.3
Ground Ginger .. .. .	12	12	—	—	—
Shredded Suet .. .. .	6	6	—	—	—
Honey .. .. .	5	5	—	—	—
Self Raising Flour .. .. .	5	5	—	—	—
Ice Cream .. .. .	25	25	—	—	—
Vinegar .. .. .	6	5	—	1	16.6
Sausages .. .. .	3	3	—	—	—
Lard .. .. .	4	4	—	—	—
Jam .. .. .	3	3	—	—	—
Arrowroot .. .. .	1	1	—	—	—
Trex .. .. .	1	1	—	—	—
Sultanas .. .. .	9	9	—	—	—
Raisins .. .. .	9	9	—	—	—
Mixed Candied Peel .. .. .	8	8	—	—	—
Crystallised Cherries .. .. .	6	6	—	—	—
Crystallised Fruits .. .. .	3	3	—	—	—
Glaze Cherries .. .. .	8	8	—	—	—
Ground Almonds .. .. .	8	8	—	—	—
Demerara Sugar .. .. .	3	3	—	—	—
Mincemeat .. .. .	4	4	—	—	—
Bun Flour .. .. .	1	1	—	—	—
Soluble Chocolate .. .. .	1	1	—	—	—
British Wines .. .. .	4	4	—	—	—
Beer .. .. .	1	1	—	—	—
Whiskey .. .. .	36	32	—	4	11.1
Gin .. .. .	15	15	—	—	—
Olive Oil .. .. .	3	3	—	—	—
Castor Oil .. .. .	3	3	—	—	—
Camphorated Oil .. .. .	12	12	—	—	—
Compound Liquorice Powder .. .. .	3	3	—	—	—
Boracic Ointment .. .. .	3	3	—	—	—
Zinc Ointment .. .. .	7	7	—	—	—
Sulphur Ointment .. .. .	3	3	—	—	—
Mercury Ointment .. .. .	5	5	—	2	40.0
Parrish's Chemical Food .. .. .	5	5	—	—	40.0
Lemon Barley Crystals .. .. .	1	1	—	—	—
Orangeade Crystals .. .. .	1	—	1	—	—
Tincture of Iodine .. .. .	7	7	—	—	—
Glycerine .. .. .	8	8	—	—	—
Glycerine of Borax .. .. .	4	4	—	—	—
Ammoniated Tincture of Quinine .. .. .	4	4	—	—	—
Ammoniated Quinine Tablets .. .. .	4	4	—	—	—
Sweet Almonds .. .. .	1	1	—	—	—
Linseed Meal .. .. .	2	2	—	—	—
Gelatine .. .. .	2	2	—	—	—
Liniment of Soap .. .. .	1	1	—	—	—
Ammoniated Camphor of Liniment .. .. .	1	1	—	—	—
Total .. .. .	1281	1240	10	31	2.4

TABLE B.

## ADULTERATED SAMPLES.

No.	Nature of Sample	Nature of Adulteration	Observation
56	Milk .. ..	25.8% of Added Water	Fined £3 and 1/- Costs
102	Separated Milk ..	Sold from a receptacle not marked "Separated" or "Skimmed Milk"	Fined 10/-
165	Milk .. ..	19.4% of Added Water	Private Test Sample
166	Milk .. ..	26.8% of Added Water	Private Test Sample
190	Whiskey .. ..	2.3% Excessive Water	Test Sample
199	Whiskey .. ..	2.3% Excessive Water	Cautioned by M.O.H.
203	Milk .. ..	5.4% of Added Water	Test Sample
206	Milk .. ..	3.0% of Added Water	Cases proved and Summonses dismissed on payment of £4 Costs
207	Milk .. ..	3.0% of Added Water	
212	Milk .. ..	3.0% of Added Water	
222	Baking Powder ..	16.6% deficient in available Carbon Dioxide	
268	Milk .. ..	13.3% deficient in Milk Fat	Test Sample Accredited Milk—cautioned M.O.H.
432	Baking Powder ..	16.6% deficient in available Carbon Dioxide	Fined £1 and £1 12s. 6d. costs
486	Milk .. ..	8.2% of Added Water	Private Test Sample
487	Milk .. ..	3.2% of Added Water	Case proved, information dismissed on payment of Costs £2 9s. 0d.
519	Whiskey .. ..	2.3% of Excessive Water	Test Sample
520	Whiskey .. ..	2.3% of Excessive Water	Cautioned by M.O.H.
539	Milk .. ..	20.0% deficient in Milk Fat	Test Sample
540	Milk .. ..	13.3% deficient in Milk Fat	No proceedings taken
541	Milk .. ..	16.7% deficient in Milk Fat	Taken at Farm after seeing cows milked
597	Milk .. ..	6.6% deficient in Milk Fat	Private Test Sample
629	Baking Powder ..	16.6% deficient in available Carbon Dioxide	Test Sample
649	Baking Powder ..	16.6% deficient in available Carbon Dioxide	Test Sample
654	Butter .. ..	100% Margarine	Test Sample
708	Parrish's Chemical Food	66.6% deficient in Ferrous Phosphate	Test Sample
810	Mercury Ointment	66.6% deficient in Mercury	Test Sample
815	Milk .. ..	10% deficient in Milk Fat	Private Test Sample
822	Parrish's Chemical Food	44.4% deficient in Ferrous Phosphate	Test Sample
840	Milk .. ..	50% deficient in Milk Fat	Private Test Sample
903	Vinegar .. ..	100% Artificial Vinegar and 4.5% deficient in Acetic Acid	Fined 5/- and 1/- Costs
924	Mercury Ointment	66.6% deficient in Mercury	Cautioned by M.O.H.
933	Milk .. ..	6.6% deficient in Milk Fat	Test Sample



TABLE C.

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

	Year	Samples examined	Number Adulterated	Percentage Adulterated
PORTSMOUTH. .. ..	1933	1,246	41	3.2
do. .. ..	1934	1,253	23	1.9
do. .. ..	1935	1,229	38	3.0
do. .. ..	1936	1,310	46	3.5
do. .. ..	1937	1,281	31	2.4
ENGLAND & WALES ..	1936	146,438	7,802	5.3

## MILK.

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

TABLE D.

	Year	Samples Examined	Number Adulterated	Percentage Adulterated
PORTSMOUTH .. ..	1933	580	28	4.8
do. .. ..	1934	522	14	2.5
do. .. ..	1935	566	30	5.3
do. .. ..	1936	645	39	6.0
do. .. ..	1937	563	17	3.0
ENGLAND & WALES ..	1936	80,082	5,706	7.1

TABLE E.

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

Month	Milk Fat	Solids-not-fat	Total Solids	Number of Samples examine
January .. ..	4.04	8.94	12.98	50
February .. ..	3.81	8.82	12.63	45
March .. ..	4.00	8.95	12.95	42
April .. ..	3.68	8.77	12.45	46
May .. ..	3.87	9.03	12.90	39
June .. ..	3.92	8.90	12.82	45
July .. ..	3.86	8.78	12.64	40
August .. ..	3.86	8.74	12.60	40
September .. ..	3.94	8.91	12.85	53
October .. ..	3.79	9.26	13.05	32
November .. ..	4.03	8.89	12.92	40
December .. ..	4.11	8.89	13.00	33
Average 1937 ..	3.91	8.91	12.82	505
„ 1936 ..	3.92	8.94	12.86	647
„ 1935 ..	3.77	8.97	12.74	529

These averages should be viewed from the standpoint of "The Milk & Cream Regulations" which prescribe limits of 3.0 per cent of Fat and 8.5 per cent of Solids-not-Fat.



## FARMERS' SAMPLES.

One hundred samples of Milk were taken during the year, representing the milk supplied to Retailers of the City, and of these six were found to be adulterated. No proceedings were instituted in Two cases, for after visiting the farm and seeing the cows milked it was found the milk did not come up to the legal standard. Legal proceedings were instituted in the other four cases. In each case the Summons was dismissed on payment of Costs, amounting to £6 9s. 0d.

## MILK SUPPLIED TO LOCAL INSTITUTIONS.

Sixty-seven samples were obtained from St. Mary's Hospital, Kingston Prison and the various Hospitals and Institutions in the City ; all were returned as genuine.

AGRICULTURAL PRODUCE  
(GRADING AND MARKING) ACT, 1928.

Merchandise Marks Act, 1926 and Orders in Council made thereunder. During the year 1,573 visits were made to business premises to see that the provision of these Orders are being complied with. Twenty shopkeepers were cautioned for not complying with the various Marking Orders. Otherwise it has been found that these Orders are being complied with by the numerous tradesmen in the City in a satisfactory manner.

MILK (SPECIAL DESIGNATIONS) ORDER, 1936.  
TUBERCULIN TESTED MILK.

This grade of milk is produced by cows which have been certified free from disease and which are subjected to a Tuberculin Test at least twice in every twelve months.

It may be bottled on the Farm where it is produced, and then may be labelled as "Tuberculin Tested (Certified) Milk", or it may be pasteurised, when it must be labelled "Tuberculin Tested (Pasteurised) Milk". If pasteurised it must not contain more than 30,000 bacteria in a cubic centimetre.



Tuberculin Tested Milk must satisfy a prescribed Methylene Blue reduction test, and it must contain no *Bacillus Coli* in one-hundredth of a cubic centimetre.

Seventy-six samples of this grade of milk have been examined during the year, and on 18 occasions the milk has failed to pass either, or both, of the prescribed tests.

Of the failures to pass the tests it should be stated that in the month of June one producer was responsible for eight of the rejected samples, owing to a shortage of water for cleansing purposes at the farm.

The bulk of this milk is produced from Jersey or Guernsey herds, and consequently the average percentage of Fat was 4.2 per cent. and of Solids-not-Fat 9.02 per cent., which represents milk of very rich quality.

#### ACCREDITED MILK.

This is a milk produced from cows which have passed a Veterinary examination and which are kept on farms which maintain a condition of cleanliness which is satisfactory to the Licensing Authority.

It may be bottled on the farm where it is produced or at the retailer's premises.

It must satisfy the same bacteriological tests as are laid down for the Tuberculin Tested Milk.

There is only one source of supply of this grade of milk in Portsmouth, and from this 13 samples have been examined. Of these all of them have satisfied the Methylene Blue reduction test, but on three occasions the milk has contained *Bacillus Coli*. The average percentage of Fat was 3.67 per cent. and of Solids-not-Fat 9.09 per cent.

#### PASTEURISED MILK.

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



Supervision of pasteurising plants and regulations for the provision of indicating thermometers and keeping of records are also laid down.

The Bacteriological test for Pasteurised Milk states that "if a sample of milk is taken after pasteurisation, and before delivery to the consumer, the milk shall not contain more than 100,000 Bacteria per cubic centimetre".

Seventy-four samples of this type of milk have been examined, and of these 14 samples were rejected on account of an excessive number of Bacteria.

The average amount of Fat in the samples was 3.76 per cent. and of Solids-not-Fat 8.80 per cent., which represents milk of good quality.

These results are of interest, inasmuch as they represent the quality of the milk supplied to the School Children under the "Milk in Schools" scheme.

It would appear that, judged by the bacteriological results, the milk supplied to the schools has not been entirely satisfactory, but it should, in fairness to the contractors as a whole, be pointed out that seven of the rejected samples were the output of one contractor, who has now given up the supply to the schools.

It should be clearly understood that "Pasteurised Milk" is a milk of Special Designation, the sale of which can only be carried out by firms holding a Licence issued by the Local Authority, and no milk which has not been subjected to the process of pasteurisation as laid down in "The Milk (Special Designations) Order, 1936" may be labelled or sold as "Pasteurised Milk".

Although a large proportion of the milk sold in Portsmouth is pasteurised, it is not labelled or sold as such, and is therefore not subject to any control by the Local Authority. Actually the only "Pasteurised Milk" sold in Portsmouth is that which is supplied to the Schools, and over this the Local Authority can, and does, exercise control.

Without going into the question of the nutritive value of Raw and Pasteurised Milk, it is an acknowledged fact that pasteurisation when carried out as described in the Regulations, ensures that all disease producing organisms liable to be present in the milk are destroyed. It therefore becomes of importance to distinguish, by means of some laboratory test, between Raw and Pasteurised milk.



Such a test was devised by Messrs. Kay and Graham, which, although at the moment has not received official recognition, finds strong recommendation in Circular No. 1533, issued by the Ministry of Health under the "Milk (Special Designations) Order, 1936".

This test, known as "The Phosphatase Test", has been applied to all of the samples of Pasteurised Milk supplied to the Schools during the year and consequently a brief reference may be made to it here.

### THE PHOSPHATASE TEST.

Milk is a biological fluid, and like all body fluids contains various substances known as *Enzymes*, which are destroyed by heat at various temperatures. One such *Enzyme*, known as "Phosphatase", is present in Raw milk, and can be readily detected by a fairly simple chemical test.

"Phosphatase" has the fortunate property of being almost completely destroyed at 145° F. in half-an-hour, which is the official time and temperature laid down for the pasteurisation of milk.

It follows, therefore, that in a properly pasteurised milk practically the whole of the "Phosphatase" will have been destroyed, and its presence in greater or less quantity in a sample of milk submitted as Pasteurised Milk will be an indication of the efficiency of the process of pasteurisation.

It is also interesting to note that the destruction of the "Phosphatase" takes place at a higher temperature than that which kills the Tubercle Bacillus. It follows, therefore, that the absence of "Phosphatase" in a sample of Pasteurised milk is a further proof of the death of this, and indeed all, disease producing bacteria.

The results of this test when applied to the Pasteurised Milk supplied to the Schools show that of the 74 samples examined, 15 were found to be improperly pasteurised when judged by the Phosphatase Test.

An investigation was made into the circumstances in all of these 15 samples. It was admitted that in five cases the milk had not been pasteurised at all and was actually Raw milk. In the case of a further four samples it was found that after the attention of the firm had been called to the matter



the Pasteurised Milk supplied by this firm was satisfactory afterwards as judged by weekly tests over a period of some months. In the case of six samples no satisfactory explanation of the cause of failure was obtained.

### RESULTS OF ANALYSIS OF ICE CREAM.

Samples Nos. 1 to 10, inclusive, represent Ice Cream prepared in large Ice Cream plants from Milk Powder, Sugar, Fats and Water, and with the exception of Sample No. 2, these are all of a satisfactory standard of cleanliness, as judged by the bacteriological examination.

Samples 1 and 2, made by the same manufacturer, and sample No. 9, are unsatisfactory on account of the substitution of Vegetable Fat for a portion of the Butter Fat. The incorporation of vegetable fat in place of butter lowers the cost of the finished product, which is, in my opinion, an inferior article.

There is no legal definition of Ice Cream in this country, and until some standard is adopted there is no possibility of preventing the substitution of other fats for Butter. This process, which is not at present universal, will, it is feared, become general, in view of the competition between Ice Cream manufacturers.

Samples Nos. 11 to 15, inclusive, represent Ice Cream made by Dairies from Milk and Cream, and are quite unsatisfactory, both in view of the numbers of Bacteria which they contain and from the fact that *Bacillus Coli* are present in large numbers.

Milk contains large numbers of Bacteria during the hot weather and the process of freezing merely retards or arrests their growth and multiplication. Efficient pasteurisation of the ingredients immediately before freezing would render this type of Ice Cream much more satisfactory.

Samples Nos. 16 to 20 represent Ice Cream which has been made from Milk which has been made into Custard by boiling it with Cornflour and the resulting product frozen. With the possible exception of No. 20 none of these samples would pass any reasonable standard for bacteriological purity, and this is the more regrettable because at some stage of their preparation the product should have been boiled.



## RESULTS OF THE ANALYSIS OF ICE CREAM.

Sample No.	Date	Fat	Total Solid Matter	Mineral Matter	Bacteria growing in 1 c.c.	Bacillus Coli Test Present in:	Bacillus Coli Test Absent in:	Starch	Remarks
1	19th May	9.5	33.5	0.85	7,000	0.01	0.001	Absent	Contains Vegetable Fat
2	19th Aug.	12.8	30.7	0.78	800,000	0.001	—	Absent	Contains Vegetable Fat
3	19th May	13.8	37.9	0.86	30,000	0.1	0.01	Absent	
4	19th May	6.8	34.1	0.74	44,500	0.001	—	Absent	
5	26th May	9.0	35.4	1.3	9,000	—	0.1		
6	26th May	10.0	38.7	0.75	4,000	—	0.1	Absent	
7	19th Aug.	10.4	39.2	0.86	7,000	0.1	0.01	Absent	
8	26th May	11.1	35.4	0.85	1,000	—	0.1	Absent	
9	19th Aug.	11.0	33.8	0.74	6,000	0.1	0.01	Absent	Contains Vegetable Fat
10	28th June	10.2	32.1	1.65	2,000	—	0.1	Absent	
			The above made by Ice Cream Manufacturers,						
11	28th June	7.3	33.1	0.85	800,000	0.001	—	Absent	
12	12th Aug.	8.7	31.9	0.63	Uncountable	0.01	0.001	Absent	
13	12th Aug.	31.7	42.3	0.53	1,680,000	0.001	—	Absent	
14	16th Aug.	10.4	34.9	0.98	2,000,000	0.001	—	Absent	
15	16th Aug.	16.2	38.6	0.77	40,000	0.001	—	Absent	
			The above made by Dairies,						
16	28th June	2.4	27.1	0.65	1,750,000	—	0.1	Present	
17	28th June	2.5	28.9	0.7	Uncountable	—	0.1	Present	
18	12th Aug.	6.9	33.0	0.74	350,000	0.001	—	Present	
19	16th Aug.	3.4	28.4	0.62	Uncountable	0.001	—	Present	
20	19th May	3.0	26.3	0.66	5,000	0.01	0.001	Present	
			The above represent Frozen Custard.						

## BUTTER.

Butter should contain no Fat other than that derived from Milk, not more than 16 per cent. of water, and should not contain any Preservative other than Salt.

Of the 110 samples of Butter which have been examined during the year, one sample was found to consist wholly of Margarine.

The average percentage of Water in the Butter was 14.5 per cent.

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

	Year	Samples examined	Samples adulterated	Percentage of adulterated
PORTSMOUTH .. .. .	1933	112	0	—
do. .. .. .	1934	111	3	2.7
do. .. .. .	1935	110	0	—
do. .. .. .	1936	111	0	—
do. .. .. .	1937	110	1	0.9
ENGLAND AND WALES ..	1936	7,558	122	1.6

## MARGARINE.

Fifty samples of Margarine were examined, all of which were passed as genuine.

The average percentage of Water in the samples was 14.0 per cent.

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

## BAKING POWDER.

Baking Powders have no food value in themselves. They consist essentially of chemical substances, which, when moistened with water, give off a gas, namely, Carbon-di-oxide.

Baking Powders are added to Flour in making bread, pastry or cakes, and during the formation of the dough, by admixture with water, gas is given off, owing to the action



of the water on the baking powder, which had been originally mixed with the flour. The small bubbles of gas then become disseminated throughout the mass of the dough, and subsequently produce the lightness or porosity of the bread, cake, etc., which is so essential to the appearance and digestibility of these articles.

The value of a Baking Powder depends, therefore, upon the amount of gas available to achieve this result. A good Baking Powder should contain about 10 per cent. of available carbon-di-oxide gas, with a minimum of 6 per cent.

Of the eleven samples taken during the year four contained only 5 per cent. of available carbon-di-oxide gas and were therefore returned as adulterated.

Legal proceedings were instituted in one case with successful results.

## VINEGAR.

There are two types of articles which are, or rather have been, sold under the name of "Vinegar". One, the genuine variety, which is a product made from the fermentation of Malt and correctly known as "Malt Vinegar", and the other, a solution of Acetic Acid of the necessary strength, suitably coloured, made to imitate the genuine variety.

Both of these articles could be purchased under the heading of "Vinegar", and unless the purchaser definitely asked for Malt Vinegar it was impossible to sustain a complaint against the vendors if the artificial vinegar had been supplied although this is an inferior article.

During the year under review, however, an important decision has been arrived at in connection with Vinegar. There was a case brought by the Westminster City Council, and heard at Bow Street Police Station, in January, in which the magistrate decided that "Vinegar" or "Table Vinegar" must be a vinegar derived from a process of fermentation—in other words, a Malt Vinegar.

An appeal was lodged against this decision, and this was heard before the London Sessions Appeal Committee in June of last year, and it was there held that for a substance to be called "Vinegar" at all it must be the product of fermentation, and that the qualification "Table Vinegar"



without any explanation or qualification being given to the purchaser implies that the vinegar sold has been produced by a process of fermentation.

This case will greatly clarify the position as far as Portsmouth is concerned, for it has been found that when "Vinegar": or "Table Vinegar" has been asked for, the article supplied has been usually the variety made from diluted Acetic Acid, and it has been the practice to ask for "Malt" Vinegar if the genuine article was desired.

Six samples of Vinegar were submitted during the year, and one sample, sold as Malt Vinegar, was found to be of the Artificial variety. Legal proceedings were instituted with successful results.

### SPIRITS.

Thirty-six samples of Whiskey and fifteen samples of Gin were analysed during the year. In four samples, representing the Whiskey supplied by two licensed premises, it was found that the whiskey had been slightly diluted beyond the legal limit of 35 degrees under proof.

A cautionary letter was sent in both cases.

### DRUGS.

Seventy-five samples, which might be classed under this heading, have been taken during the year, and four of these were returned as "not genuine".

### MERCURY OINTMENT.

This product should, according to the British Pharmacopoeia, contain 30 per cent. of Mercury, whereas the two samples to which exception were taken contained only 10 per cent. of Mercury. Both of the samples were obtained at the same pharmacy. A cautionary letter was sent by the Medical Officer of Health.



### PARRISH'S CHEMICAL FOOD.

This substance, known in pharmacy as Compound Syrup of Ferrous Phosphate, is a substance which undergoes deterioration if kept for any length of time. Two samples showed a marked deposit at the bottom of the bottle, and were found to be deficient in Ferrous Phosphate. In this case the attention of the Pharmacist was called to the matter and no further action was taken.

### POLICE AND CORONER.

In six cases the Department has been able to assist the Criminal Investigation Department of the City Police, involving the examination of twenty-two separate exhibits.

It was possible in one case to identify paint adhering to a jemmy found in the possession of the accused with paint taken from a door which had been forced open on the premises which had been entered. Identification of blood-stains on the jemmy, and other articles taken from the entered premises, coupled with the fact that the accused had recently cut himself, was additional evidence of connecting the accused with the scene of the crime.

In another case one-tenth of a grain of Strychnine was found in a chocolate, which was one of a box of six chocolates sent anonymously through the post.

Three cases of death have been investigated for the City Coroner, in one of which over 1,000 grains of Aspirin was found in the stomach of the deceased.

### MISCELLANEOUS.

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

Under this heading are also included samples submitted by Ratepayers in a private capacity, and for the analysis of which a fee is paid. The fees from this source have amounted to £23 7s. 6d., and this sum has been paid to the City Treasurer.

## BACTERIOLOGICAL EXAMINATIONS.

## DIPHTHERIA.

Diphtheritic Material has been received from the following sources :—

*Medical Practitioners ...	...	...	2,155
School Clinic ...	...	...	560
			<hr/>
Total ...			2,715
			<hr/>

*\* Including Saint Mary's Hospital.*

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

## WATER, SEWAGE AND SEWAGE EFFLUENTS.

The monthly examination of the City Water Supply has shown that the high standard of purity has been well maintained.

This will be seen by the results of analysis on page 17 of this Report.

A weekly examination of the Sewage and Sewage Effluents from the Works at Cosham and Farlington has been carried out, comprising the analysis of 576 samples from these sources.

The results have shown that the three systems have worked satisfactorily and that a high grade Effluent has been uniformly produced.

Sixty samples of Water, taken from Trial Boreholes at Farlington and Hayling Island, which were made in connection with the City Airbase Scheme, were analysed during the latter part of the year.



TABLE OF ANALYSES OF PUBLIC WATER SUPPLY DURING  
BY THE PUBLIC ANALYST.  
(Results expressed in parts per 100,000).

Date 1937	Source	Total Solid Matter	Volatile Solid Matter	Chlorine	Nitrogen as Nitrates	Total Hardness	Free or Saline Ammonia	Albu- minoid or Organic Ammonia	Oxygen absorbed in 4 hours at 37° C.	Remarks
Jan. 19	Co.'s Main, 16, Arundel Street	30.0	2.0	1.7	0.35	19.0	Traces	0.001	Nil	Bacillus Coli absent from 50 c.c.
Feb. 23	do.	31.4	1.0	1.7	0.44	21.0	Traces	0.0025	Nil	do.
Mar. 23	do.	31.3	1.0	1.7	0.42	25.0	0.001	0.0015	Nil	do.
April 23	do.	31.0	1.0	1.7	0.37	23.5	Traces	0.0015	Nil	do.
May 25	do.	31.0	1.0	1.9	0.35	23.5	Traces	0.0015	0.014	do.
June 23	do.	30.8	1.4	1.7	0.35	23.0	Traces	0.001	Nil	do.
July 20	do.	30.0	1.5	1.6	0.39	23.0	Traces	0.0007	Nil	do.
Aug. 25	do.	30.2	1.0	1.7	0.32	23.0	Traces	0.001	Nil	do.
Sept. 2	do.	33.6	1.5	1.8	0.34	23.0	Traces	0.0005	Nil	do.
Oct. 28	do.	31.0	1.1	1.8	0.30	22.5	Traces	0.0008	Nil	do.
Nov. 23	do.	32.5	1.5	1.7	0.25	23.0	Traces	0.002	Nil	do.
Dec. 29	do.	30.7	2.1	1.7	0.40	22.0	Traces	0.0015	Nil	do.

## INSPECTION OF MEAT AND OTHER FOODS

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**SLAUGHTERHOUSES.**—At the end of the year under review the number of private slaughterhouses in use was 57 (58), or one less than the previous year. Of this number 54 (55) were licensed slaughterhouses and 3 (3) were registered slaughterhouses.

The number of visits paid by the Meat Inspector to slaughterhouses at all times during the year was 1,101 (1,354). In addition numerous periodical visits were paid by the District Sanitary Inspectors to the slaughterhouses in their districts, and the existence of any unsound meat was reported at once to the Meat Inspector for action.

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

**MUNICIPAL ABATTOIR.**—It is pleasing to be able to record that satisfactory progress has been made during the year towards the establishment of a Municipal Abattoir, and ending once and for all the present unsatisfactory method of meat inspection and supervision. A deputation of the Abattoir Sub-committee visited various Municipal Abattoirs in the country, and thereafter tentative proposals were discussed with representatives of the Portsmouth and District Master Butchers' Association. By the end of the year a definite recommendation was forwarded to the Council by the Health Committee for the erection of an Abattoir of the single-floor type at Farlington.

**SLAUGHTER OF ANIMALS ACT, 1933.**—The number of slaughtermen registered during the year under the provisions of the above Act was 180 (174).



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

By R. SCOULAR, *Meat Inspector.*

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

LIVESTOCK INSPECTION AT THE PORT.—Throughout the year visits have been made, when possible, at the Port to inspect the animals landing from the Isle of Wight. No clinical evidence of any of the contagious and notifiable diseases was observed, and all animals were able to proceed to their destinations.

The practice of ante-mortem inspection caused one boar to be followed up to a local slaughterhouse and the surrender of its carcase on post-mortem examination.

The following is a list of livestock brought into the City of Portsmouth during the year 1937 :—

By Boat from the Isle of Wight :

Cattle	...	...	544 (664)
Sheep	...	...	793 (1,444)
Swine	...	...	5,590 (4,738)
Calves	...	...	2,099 (2,253)
Horses	...	...	96 (169)

At Cosham Market :

Poultry	...	...	3,634 (6,068)
Rabbits	...	...	76 (102)

At Fratton Railway Cattle Docks :

Cattle	...	...	4,150 (4,501)
Sheep	...	...	7,759 (9,300)
Calves	...	...	330 (423)
Swine	...	...	2,843 (5,059)

At Cosham Railway Cattle Docks :

Cattle	...	...	52 (266)
Horses	...	...	12 (1)

COSHAM MARKET.—This market has been held weekly throughout the year, the only livestock exposed for sale being poultry. It has been visited at irregular intervals and found to be conducted in a satisfactory manner.

SWINE FEVER ORDER, 1908.—No (1) suspected case of this disease was confirmed by the Ministry of Agriculture during the year.



**SWINE FEVER ORDER, 1922.**—2,871 (3,039) licences were received relating to 33,995 (34,640) swine brought into the City.

**TUBERCULOSIS ORDER, 1925.**—The cowsheds in the City have been visited regularly and a satisfactory standard of cleanliness maintained. Examination of the herds has been carried out and no clinical evidence of any disease which might endanger the milk supply was observed.

**TRANSIT OF ANIMALS (AMENDMENT) ORDER, 1931.**—Supervision of the vehicles used for transporting animals has been kept up throughout the year and no case of cruelty has been observed or reported.

**FOOT AND MOUTH DISEASE.**—During the year the City has been free from this disease and the restrictions relating to it.

**SLAUGHTERHOUSES.**—It has to be recorded that the number of these premises in the City being used for slaughtering has been reduced by one during the year, making the present total 57. Needless to say, under this system supervision cannot be so thorough as it can be with a Public Abattoir.

**MEAT REGULATIONS, 1924.**—The observance of the provisions of these Regulations relating to the protection of meat from exposure to contamination during transit has, in previous years, been unsatisfactory. During the year under review an improvement has been noticed, which it is hoped will be maintained.

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

**MEAT (ENGLISH).**

<b>Beef.</b>				<b>Veal.</b>			
Carcases	..	..	84	Carcases	..	..	4
Forequarters	..	..	20	<b>Mutton.</b>			
Pieces	..	lbs.	2,094	Carcases	..	..	1
Ox Lungs	..	sets	137	<b>Pork.</b>			
Ox Livers	..	..	144	Carcases	..	..	29
Ox Hearts	..	..	89	Pieces	..	lbs.	258½
Ox Tongues	..	..	1	Pigs' Heads	..	..	105
Ox Tails	..	..	53	Pigs' Lungs	..	sets	88
Ox Heads	..	..	67	Pigs' Livers	..	..	88
Ox Kidneys	..	..	2	Pigs' Plucks	..	..	32
				Pigs' Hearts	..	..	43



## MEAT (IMPORTED).

**Beef.**

Pieces	..	..	lbs.	4,211
Ox Kidneys	..	..	lbs.	480

**Lamb.**

Livers	..	..	lbs.	20
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**Mutton.**

Carcases	..	..	..	10
Pieces	..	..	lbs.	491

## FISH.

Hake	..	..	lbs.	22
Lemon Soles	..	..	lbs.	9
Fillets	127 stone and 594½	boxes		
Herrings	..	..	boxes	396
Melts	..	..	boxes	3
Slips	..	..	lbs.	4
Pollock	..	..	boxes	6
Codling	..	..	stone	8
Witches	..	..	stone	8
Mackerel	8 stone and 102	boxes		
Salmon	..	..	lbs.	1,305
Whitebait	..	..	boxes	5
Brill	..	..	lbs.	14
Lobsters	..	..	lbs.	35
Crabs	18 cases, 7 kits & 224	lbs.		
Cod	..	..	stone	47½
Smelts	..	..	boxes	8
Bream	..	..	boxes	10

Roes	..	..	lbs.	192
Haddock	426 lbs. and 85	boxes		
Sprats	..	..	lbs.	972
Megrims	..	..	lbs.	180
Kippers	..	..	boxes	27
Dog Fish	7 stone, 4 cases, 3	bxes.		
Whiting	..	..	lbs.	232
Turbot	..	..	boxes	2
Trout	..	..	boxes	2
Dabs	15 stone and 3	boxes		
Halibut	..	..	lbs.	89
Soles	..	..	lbs.	98
Skate	2 cases and 12½	stones		
Shrimps	33 pecks, 2 bags, 3	hps.		
Prawns	22 tins and 3	lbs.		
Cockles	..	..	bags	2
Bloaters	..	..	boxes	20
Escallops	..	..		9

## MISCELLANEOUS.

Sausages	..	..	lbs.	53
Cheese	..	..	lbs.	10
Ham	..	..	lbs.	6
Turkeys	..	..	..	4
Rabbits	..	374 and 5½	cases	
Oranges	..	..	cases	70
Saveloys	..	..	..	60
Hares	..	..	..	3
Dripping	..	..	lbs.	14

Eggs	..	..	..	1,584
Bacon	..	..	lbs.	218
Tinned Goods	2,598 and 17	cases		
Pheasant	..	..	..	1
Chicken	..	..	..	25
Butter	..	..	lbs.	25
Ducks	..	..	..	4
Pears	..	..	boxes	108

PUBLIC HEALTH ACT, 1875.—No seizure has been necessary. All food unfit for human consumption dealt with by this department has been surrendered to the Local Authority.

SAUSAGE MANUFACTORIES.—Strict supervision of these premises was maintained during the year and 129 (152) visits were made.

IMPORTATION OF DOGS AND CATS ORDER, 1928.—Thirty-three (22) notifications were received from the Customs Officers relating to 35 (22) dogs.

PARROTS (PROHIBITION OF IMPORT) REGULATIONS, 1930.—During the year 9 (33) birds have been dealt with under these Regulations.





## HOUSING



## HOUSING

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**NEW HOUSES.**—The total number of dwelling-houses or flats erected during the year was 1,035, as compared with 994 last year. Of this number 280 were erected by the City Council.

**THE COUNCIL'S FIVE YEARS' HOUSING PROGRAMME.**—Despite the fact that the Council's Five Years' Housing Programme was carried through with unabated vigour, there has been a slowing up of the programme, owing to various unexpected difficulties. The Minister of Health, however, in anticipation of unavoidable delays encountered by Local Authorities throughout the country has extended the time, by which houses ranking for grant should be completed, from March 1938 to December 1938.

The following Schedule gives details of the displacement and rehousing arrangements in regard to each Area. The total number of houses dealt with is 350, which equals last year's record.

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

**HOUSING ACT, 1936.**  
**PROGRAMME FOR THE YEAR 1937-38.**

DISPLACEMENTS				REHOUSING		
Year ending March 31st	Scheme	Number of Houses dealt with	Number of Persons displaced or being displaced	Number of Dwellings erected or in course of erection	Scheme	Remarks
1937-38	Chalton Street .. ..	66	266			
1937-38	Havant Street .. ..	35	127			
1937-38	All Saints Road .. ..	15	53	6	Hay Street—Beek Street	Flats
1937-38	Eaton Place .. ..	7	10			
1937-38	Gloucester Street, Portsea .. ..	4	14			
1937-38	Victory Road .. ..	4	9	24	St. George's Brewery	Flats
1937-38	Silver Court .. ..	3	5			
1937-38	St. George's Place .. ..	4	4			
1937-38	Oxford Street .. ..	134	512	148	Wymering Housing Site, Contract No. 3	Houses and Flats
1937-38	Ranwells Court .. ..	8	32			
1937-38	Sea View .. ..	5	22			
1937-38	Oyster Street, No. 1 .. ..	5	15			
1937-38	Blenheim Street .. ..	11	34	216	Wymering Housing Site, Contract No. 4	Houses and Flats
1937-38	St. Catherine Street .. ..	7	15			
1937-38	Nobbs Lane, No. 1 .. ..	9	25			
1937-38	Nobbs Lane, No. 2 .. ..	8	29			
1937-38	Vicarage Court .. ..	6	12	192	Wymering Housing Site, Contract No. 5	Houses and Flats
1937-38	Bucklers Court .. ..	3	6			
1937-38	Individual Unfit Houses .. ..	16	48			
		350	1238	586		



**CLEARANCES.**

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

- (a) Chalton Street Area
- (b) Havant Street Area
- (c) All Saints Road Area
- (d) Eaton Place Area
- (e) Gloucester Street, Portsea, Area
- (f) Victory Road Area
- (g) Silver Court Area
- (h) St. George's Place Area
- (i) Oxford Street Area
- (j) Ranwells Court Area
- (k) Sea View Area
- (l) Oyster Street No. 1 Area
- (m) Blenheim Street Area
- (n) St. Catherine Street Area
- (o) Nobbs Lane No. 1 Area
- (p) Nobbs Lane No. 2 Area
- (q) Vicarage Court Area
- (r) Bucklers Court Area

Compulsory Purchase Orders were made by the City Council in regard to (a), (b), (c), (i) and (j) and Clearance Orders in respect of (d), (e), (f), (g), (h), (k) and (l).

Clearance Orders were made by the Health Committee in regard to (m), (n), (o), (p), (q) and (r), and these Orders are awaiting confirmation by the City Council prior to their transmission to the Ministry of Health.

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

- (a) Chalton Street Area
- (b) Havant Street Area
- (c) All Saints Road Area
- (d) Eaton Place Area
- (e) Gloucester Street, Portsea, Area
- (f) Victory Road Area
- (g) Silver Court Area
- (h) St. George's Place Area

The Minister of Health made Confirmation Orders in respect of all of the eight Areas without modification.



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

The number of houses demolished in pursuance of action taken under Section II of the Housing Act, 1936, was 16.

Representations were submitted by the Medical Officer of Health under Section 12 of the Housing Act, 1936, to the effect that two parts of buildings were unfit for human habitation and undertakings were given by the owner to execute the works necessary to render them so fit.

**REHOUSING.**—The Table on page 139 shows the number of houses in schemes in respect of which tenders for their erection were accepted by the City Council. In addition, the 36 and 78 dwellings in Orange Street, Unicorn Street and Cumberland Street, and 95 at Church Path North (shown as in course of erection in the corresponding table of the Health Report for the year 1936) are rapidly nearing completion.

It will be noted that with the development of the Scheme more and more families are being rehoused in Portsea each year.

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

1.—INSPECTION OF DWELLING HOUSES DURING THE YEAR.

(1)	(a)	Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts) .. .. .	7,374
	(b)	Number of inspections made for the purpose ..	22,761
(2)	(a)	Number of dwelling houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 .. .. .	67
	(b)	Number of inspections made for the purpose ..	201
(3)		Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation .. .. .	340
(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 .. .. .	16



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

Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers	1,205
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## 3.—ACTION UNDER STATUTORY POWERS DURING THE YEAR.

## A.—Proceedings under sections 9, 10 and 16 of the Housing Act, 1936 :

(1) Number of dwelling houses in respect of which notices were served requiring repairs .. .. .	15
(2) Number of dwelling houses which were rendered fit after service of formal notices :	
(a) By owners .. .. .	12
(b) By local authority in default of owners ..	8

## B.—Proceedings under Public Health Acts :

(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied ..	1,260
(2) Number of dwelling houses in which defects were remedied after service of formal notices :	
(a) By owners .. .. .	63
(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 .. .. .	16
(2) Number of dwelling houses demolished in pursuance of Demolition Orders .. .. .	7

## D.—Proceedings under section 20 of the Housing Act, 1930 :

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

## 4. HOUSING ACT, 1936—OVERCROWDING.

(a) (i) Number of dwellings overcrowded at end of the year	875
(ii) Number of families dwelling therein .. ..	875
(iii) Number of persons dwelling therein .. ..	4,959
(b) Number of new cases of overcrowding reported during the year .. .. .	Nil
(c) (i) Number of cases of overcrowding relieved during the year .. .. .	80
(ii) Number of persons concerned in such cases ..	553



- |     |  |     |
|-----|--|-----|
| (d) | Particulars of any cases in which dwelling-houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding .. .. . | Nil |
| (e) | Any other particulars with respect to overcrowding conditions upon which the Medical Officer of Health may consider it desirable to report ..                        | —   |

**ERADICATION OF BED BUGS.**—During the year under review the number of Council houses in the Corporation Estates found to be infested with bed bugs was 100. These were disinfested by exposing the bug lairs as far as possible and then applying sulphur gas and/or other contact sprays.

The furniture and effects of 219 families about to be removed to Council houses under the Council's Five Years' Housing Programme, were dealt with as follows. The furniture was collected in special vans and taken to the Corporation Yard, where the contents were subjected to a certain concentration of gas for a period of four hours; thereafter aeration took place, and when all traces of the gas had dispersed, the furniture was conveyed direct to the new dwelling. Upholstered articles, *e.g.*, bedding, mattresses, etc., were retained overnight, to ensure that all the cyanide gas was removed. Chemical tests were carried out by way of confirmation. The tenants were given the loan of mattresses and bedding for use until their own bedding was returned the following day.

As a test of the efficiency of disinfestation, periodical inspections of Council houses were carried out during the year, and in no case was the presence of vermin detected which could be attributed to faulty disinfestation. In only two cases was vermin discovered, but on investigation infestation was proved to be due to the importation of infested articles of furniture into the new Council house several months after the removal.

In regard to private houses not connected with the Council's Five Years' Housing Programme, it is estimated that the number which were found to be infested was 251. Of these 151 were disinfested by the Corporation by means of sulphur and other contact sprays. The remainder were dealt with by private Contractors.



**OVERCROWDING.**—The Housing Act, 1936, consolidated the Act of 1935, and Sections 58, 59 and 61 of the new Act came into force in Portsmouth on January 1st, 1937. These Sections required that "every rent book or similar document used by or on behalf of a landlord, must, from that date, bear a prescribed summary containing the 'permitted numbers' allowed to sleep in the dwelling to which the rent book relates."

The necessary information as to these numbers was available as the result of the enumeration made by a temporary staff between December 1935 and March 1936, and the staff of temporary survey assistants engaged in taking measurements between August and December 1936. This survey covered the whole of the working-class houses in the City which had been assessed for rateable purposes up to the date of the commencement of the enumeration in December 1935.

Publicity by means of posters calling the attention of landlords to their responsibilities in the matter, and assistance by the local Press in leading articles, resulted in the receipt of—

3,372 lists of properties from landlords or agents, in respect of a total of

30,515 dwellings, during the year ending 31st Dec., 1937, for which the "permitted numbers" were supplied. This total represented approximately 66 per cent. of the properties which had been surveyed.

During May legal proceedings were taken against a landlord for not having complied with the Sections of the Act which required the statutory summary containing the "permitted number" to appear on his tenant's rent book. These proceedings were instituted in consequence of a slackening in the rate at which applications for "permitted numbers" were being received, and the case having been proved, was dismissed upon payment of 9s. costs.

The publicity which followed resulted in over 500 applications from landlords in the ensuing fortnight, and a further inspection of rent books in September, followed by five prosecutions, involving fines ranging from 10s. to £1 upon the cases being proved, produced a further total of over 400 applications from landlords who had not yet complied with the Act.

HEALTH EDUCATION  
AND PROPAGANDA



# HEALTH EDUCATION AND PROPAGANDA.

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## HEALTH WEEK.

Portsmouth's second Health Week, from October 18th to 23rd, 1937, while not on such an ambitious scale as that for 1936, was none the less most successful. The Week was devoted mainly to a Series of Parents' Conferences, organised in co-operation with the British Social Hygiene Council, which had for their object the instruction of parents in the sex education of their children.

In addition a series of meetings and talks on health subjects to employees in large factories and to various societies and fellowships in various parts of the City were organised during the Week, and altogether 18 lectures were given by Dr. Shiels, and by Medical Officers of the Department.

Dr. T. Drummond Shiels, M.C., Medical Commissioner of the British Social Hygiene Council, proved a most acceptable speaker and attracted large audiences, the average attendance at the Conferences being 400.

The Conferences, which were held in selected School Halls throughout the City, and to which parents were invited by leaflets distributed through the senior pupils, were all accompanied by displays of appropriate films.

**NATIONAL FITNESS CAMPAIGN.**—The autumn of 1937 marked the opening of the first National Campaign to encourage the wider use of the Health Services, promoted by the Ministry of Health in co-operation with the Central Council for Health Education. The campaign consisted in the main of the distribution through the schools organisation and public libraries of booklets, bookmarks, posters, etc., calling the attention of the public to the Health Services available to them and inviting them to make more use of these Services. The Campaign opened in October with the distribution of publicity material dealing with the Health Services in general, and introducing the slogan "Use your Health Services." November and December were devoted to the Maternity and Child Welfare Services. The Campaign



will be continued throughout the early part of 1938, to each month being assigned a particular branch of the Health Services. The following quantities of literature have been distributed in Portsmouth in connection with each phase of the Campaign :—

Folders	...	...	...	35,000
Book-marks	...	...	...	10,000
Traffic Notices	...	...	...	150
Double-crown Posters (indoor)	...	...	...	30
„ „ „ (outdoor)	...	...	...	150

At the request of the Minister of Health, public meetings were organised in all the large centres in the country, at which prominent members of the Government spoke. Such a meeting was organised in Portsmouth on December 2nd, presided over by the Right Worshipful the Lord Mayor (Councillor F. J. Spickernell), at which the Right Hon. Earl Stanhope, P.C., President of the Board of Education, and Mr. C. G. Ammon, M.P., spoke. Displays were given by the Southsea Gymnasium, the Dancing to Health League, and the League of Health and Beauty. Over 1,200 attended this meeting.

**OTHER HEALTH PROPAGANDA.**—In addition to the Health Week Campaign continuous educative work was carried out by the Medical Officers at the clinics and by the Health Visitors and Tuberculosis Nurses in the course of home visitation. The following twenty-six addresses on health were given by Medical Officers of the Health Department during 1937 :—

<i>Date</i>	<i>Subject</i>	<i>Lecturer</i>
12th January ..	Central Portsmouth Conservative Association— “ Health Services ” .. .. .	Dr. I. M. McLachlan
25th January ..	Victoria Road Methodist Church Sisterhood— “ The Public Health ” .. .. .	Dr. I. M. McLachlan
2nd February ..	College of Nursing—“ Midwives Act ” and “ Air Raid Precautions ” .. .. .	Dr. A. B. Williamson
8th February ..	Brougham Rd. Methodist Church—“ Bacteriology in relation to Health ” .. .. .	Dr. I. M. McLachlan
11th February	Senior Women's Co-operative Guild—“ The Pre- ventive aspect of the Health Services of Portsmouth ” .. .. .	Dr. I. M. McLachlan
18th February	Women's Section, North Divisional Labour Party —“ Health ” .. .. .	Dr. I. M. McLachlan
2nd March ..	Army Mothers' Association—“ Child Welfare ” ..	Dr. J. Q. Mountain
2nd March ..	Central Portsmouth Conservative Association— “ Health Services ” .. .. .	Dr. I. M. McLachlan
15th March ..	Central Ratepayers' Association—“ Tuberculosis ”	Dr. I. M. McLachlan
17th March ..	Joint Industrial Council of the Printing and Allied Trades, Municipal College—“ The Care of the Skin, Eyes, Teeth, Hands and Feet ” ..	Dr. I. M. McLachlan



<i>Date</i>	<i>Subject</i>	<i>Lecturer</i>
19th March ..	Immanuel Baptist Men's Fireside Hour—"Prevention of Disease" .. .. .	Dr. I. M. McLachlan
21st April ..	Cosham Conservative Association—"The Preventive Aspect of Medicine" .. .. .	Dr. I. M. McLachlan
10th May ..	Victoria Road Methodist Church Sisterhood—"Health Services" .. .. .	Dr. A. B. Williamson
11th May ..	Union of Catholic Mothers—"Child Welfare" ..	Dr. T. E. Roberts
30th June ..	National Association of Funeral Directors—"The Position of the Funeral Director in Health Services" .. .. .	Dr. A. B. Williamson
30th September	Portsmouth & District Friendly Societies' Council—"Tuberculosis" .. .. .	Dr. I. M. McLachlan
5th October ..	Naval Pensioners' and Serving Men's Association—"Childhood and Health" .. ..	Dr. T. E. Roberts
7th October ..	Portsmouth Trades Council—"Air Raid Precautions from the point of view of First Aid and Medical Treatment" .. .. .	Dr. A. B. Williamson
21st October ..	Portsmouth Central Divisional Labour Party—Women's Section—"Tuberculosis" ..	Dr. I. M. McLachlan
28th October ..	Portsmouth National Union of Railwaymen—"The Common Cold, Influenza and Respiratory Diseases" .. .. .	Dr. J. Q. Mountain
9th November	All Saints Mothers' Union—"Stepping Stones in Childhood" .. .. .	Dr. H. Smith
18th November	Eastney District R.N. Friendly Union of Sailors' Wives—"Health in the Home" .. ..	Dr. A. B. Semple
18th November	Portsmouth Central Conservative Association—"Tuberculosis" .. .. .	Dr. I. M. McLachlan
29th November	Portsmouth Conservative Association—"Infectious Diseases" .. .. .	Dr. I. M. McLachlan
2nd December	St. Mary's Women's Fellowship—"The Preventive Aspect of Public Health" .. ..	Dr. I. M. McLachlan
12th December	Gosport Brotherhood—"How to keep Fit" ..	Dr. A. B. Semple

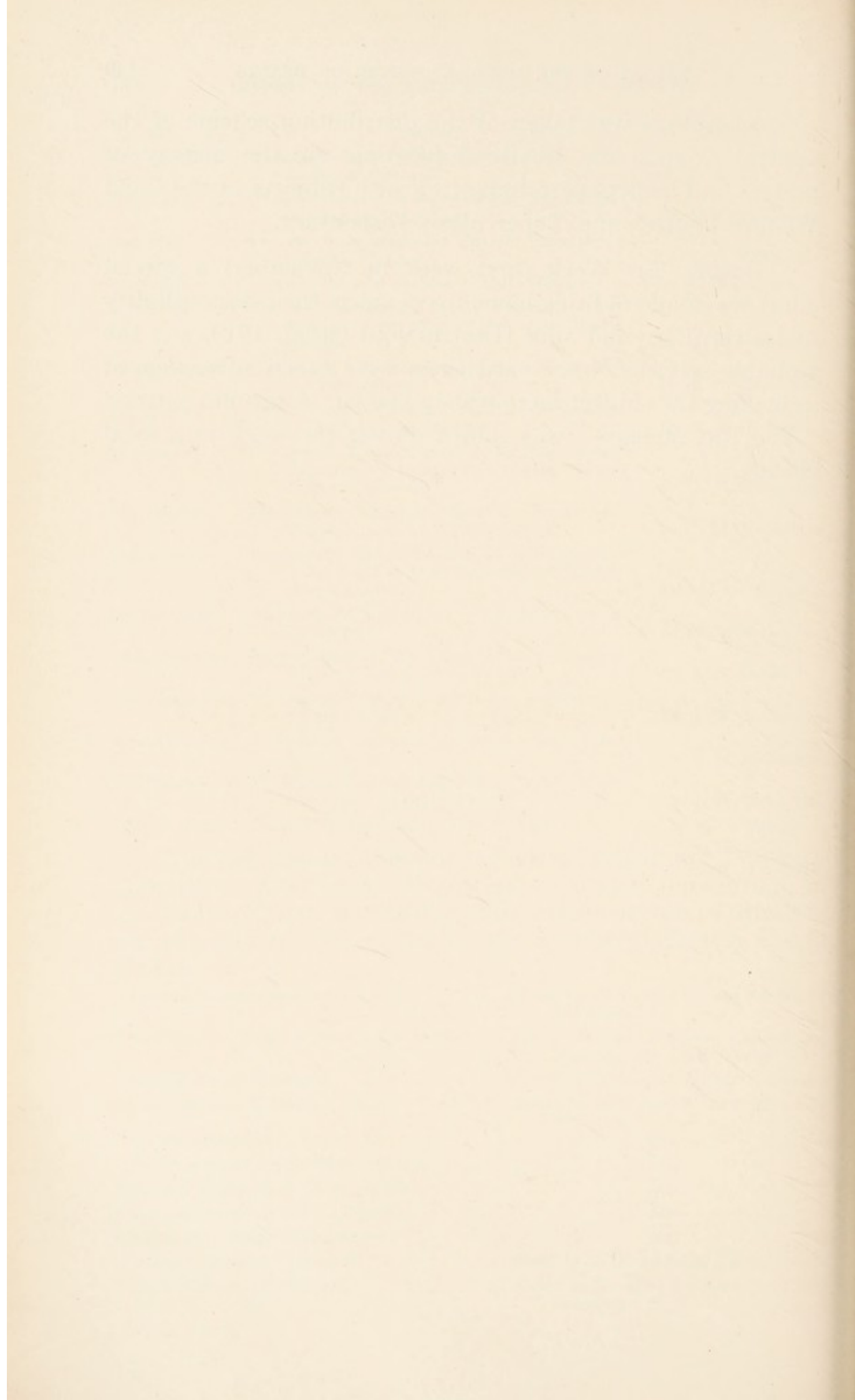
Through the kindness of the Piers, Beach and Publicity Committee, a series of 12 posters, as under, illustrating an apt Health Slogan was exhibited in prominent places throughout the City on two of the former Empire Marketing Board frames.

"Diphtheria Immunisation" (January) .. ..	<i>Issued by the Central Council for Health Education</i>
"Maternity and Child Welfare" (Feb. and Nov.)	<i>Issued by the National Council for Maternity and Child Welfare</i>
"Youths' Hostels" (March) .. .. .	<i>Issued by the Youths' Hostels Association</i>
"Obey the Laws of Health" (April) .. ..	<i>Issued by the Central Council for Health Education</i>
"Get Fit—Keep Fit" (May) .. .. .	<i>ditto</i>
"Health is worth a little Effort" (June) ..	<i>ditto</i>
"Holiday Fitness all the Year" (July) ..	<i>ditto</i>
"Use your Opportunities" (August) .. ..	<i>ditto</i>
"Self Help in Health" (September) .. ..	<i>ditto</i>
"Venereal Diseases" (October) .. .. .	<i>Issued by the British Social Hygiene Council</i>
"Child Welfare" (December) .. .. .	<i>Issued by the Central Council for Health Education</i>

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

During Rat Week (first week in November) a special effort was made to bring home to occupiers their responsibility under the Rats and Mice (Destruction) Order, 1919, and the valuable services of the local Press were taken advantage of in making the subject more widely known. A rat film entitled "The Rat Menace" was shown during the week in a local cinema.





## PORT SANITARY REPORT



## Port Sanitary Authority.

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*To the Chairman and Members of the Port Sanitary Authority.*

MADAM AND GENTLEMEN,

I have the honour to present my report on the work of the Port Sanitary Authority of Portsmouth during the year 1937.

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

One case of infectious disease was reported in the area during the year.

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

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

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

### Jurisdiction of the Port Sanitary Authority.

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

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

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

### I. Amount of Shipping entering the Port during the year 1937.

TABLE A.

Number			Tonnage	Number Inspected		No. of Vessels found Defective	No. of Vessels on which defects were remedied	Number of Vessels with infectious Diseases
				By M.O.H.	By P.S.I.			
FOREIGN	Steamers	79	33,314	—	42	12	12	Nil
	Motors..	57	8,014	—	34	4	4	Nil
	Sailing..	2	1,494	—	2	—	—	Nil
Total Foreign ..		138	42,822	—	78	16	16	Nil
COASTWISE	Steamers	571	250,472	—	62	5	5	Nil
	Motors..	232	36,850	—	37	4	4	Nil
	Sailing..	6	445	—	4	—	—	Nil
Total Coastwise ..		809	287,767	—	103	9	9	Nil
Total Foreign and Coastwise ..		947	330,589	—	181	25	25	Nil



## II. Character of Trade of Port.

TABLE B.

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

**Cargo Traffic.** The principal imports were coal, timber, cement, stone, oil, chiefly from St. Malo, Antwerp, Trangsund, Guernsey, Rosscoff, Ostend, Rotterdam, Wasa, Randers, Baltic, Gulf of Riga, etc.

## III. Sources of Water Supply.

The water used in the docks is supplied by the Portsmouth Water Company. Vessels in dock are supplied from hydrants from the same source. There are two water-boats (*Fenna* and *Irishman*) in use. These are both in good sanitary condition and are periodically inspected.

With regard to the supply of drinking water to ships arriving at and leaving the port, the following precautions are taken before water is supplied:

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

## IV. Port Sanitary Regulations, 1933.

### 1. Arrangements for dealing with Declarations of Health.

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

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

### 2. Telegraphic Address.

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

### 3. Mooring Stations.

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

#### (a) OUTER MOORING STATION.

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

#### (b) INNER MOORING STATION.

The upper reaches of Portsmouth Harbour.

This agreement is subject to the following understandings :—

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



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

- (i) has called at a port or seaboard included in the weekly return of infected or suspected ports or seabords, but reports "all well" during the voyage, or arrives with no sickness on board, unless a written notice to the contrary has been delivered to the Customs Officer by or on behalf of the Medical Officer of the Port Sanitary Authority.
- (ii) has on board a case of minor infectious disorder, namely, chickenpox, measles, scarlet fever, diphtheria, enteric fever, erysipelas, malaria, dysentery, pneumonia, tuberculosis, mumps, or cerebro-spinal fever.

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

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

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

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

##### Contacts of Infectious Diseases Cases.

- (a) Living in the City. If not removed to hospital they are kept under observation by the Sanitary Inspector.
- (b) Proceeding to an address outside the City. The Medical Officer of Health of the place of destination is advised.

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

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

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

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

TABLE C.

#### Cases of Infectious Diseases landed from Vessels.

Disease	No. of Cases during the Year		No. of Vessels concerned	Average No. of Cases for previous 5 years
	Passengers	Crew		
Scarlet Fever	—	1	1	0.2



TABLE D.

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

## V. Measures against Rodents.

All vessels arriving from abroad are examined periodically by the Port Sanitary Inspector. Rats are caught periodically on the quays, wharves, warehouses, etc., in the vicinity of the Port, per Table F., and sent for bacteriological examination for rat plague, by the Bacteriologist at the Royal Portsmouth Hospital. A trained rat-catcher is employed.

When necessary rat guards are placed on ropes between the ships and the quays. The Port is not approved for the deratisation of ships.

TABLE E.

No rats were destroyed during the year on vessels.

TABLE F.

Number of Rats destroyed in Docks, Quays, Wharves, Warehouses.

Number of Rats	February	June	September	Total in Year
Black .. .. .	—	3	4	7
Brown .. .. .	—	1	6	7
Species not recorded ..	3	—	—	3
Examined .. .. .	3	4	10	17
Infected with Plague ..	—	—	—	—

## VI. Hygiene of Crews' Spaces.

TABLE J.

Classification of Nuisances.

Nationality of Vessel	No. inspected during year 1937	Defects of original construction	Dirt, Vermin and other conditions prejudicial to health
BRITISH .. 6,860 ..	103 (British)	—	9
FOREIGN .. 129 ..	78 (Foreign)	—	16

## VII. Food Inspections.

The importations of food-stuffs are small in amount, these being chiefly potatoes from the Channel Islands, Scotland and Ireland, and flour, sugar and tinned foods from Liverpool, London, etc. During the year no adverse reports were made by the Meat Inspector.

**SHELL FISH.**—There is one oyster-laying in Langstone Harbour, but as the Harbour is liable to pollution from the sewage outfall, no oysters are put on the market. The owner, however, disposes of spat for relaying and growing purposes elsewhere.

Periwinkles are collected by the above owner and marketed in Bedford, Luton, Guildford, Billingsgate, etc. Bacteriological examinations of the winkles have proved satisfactory.

During the year no action was taken under the Public Health (Shell-fish) Regulations, 1934, or the Public Health (Cleansing of Shell-fish) Act, 1932.

The number of livestock landed at the docks from the Isle of Wight was 9,122. During the inspections of livestock no clinical evidence of the existence of any of the contagious and notifiable animal diseases was found.

I have the honour to be,

Madam and Gentlemen,

Your obedient Servant,

A. B. WILLIAMSON, M.D.,  
*Medical Officer of Health,  
City and Port of Portsmouth.*



