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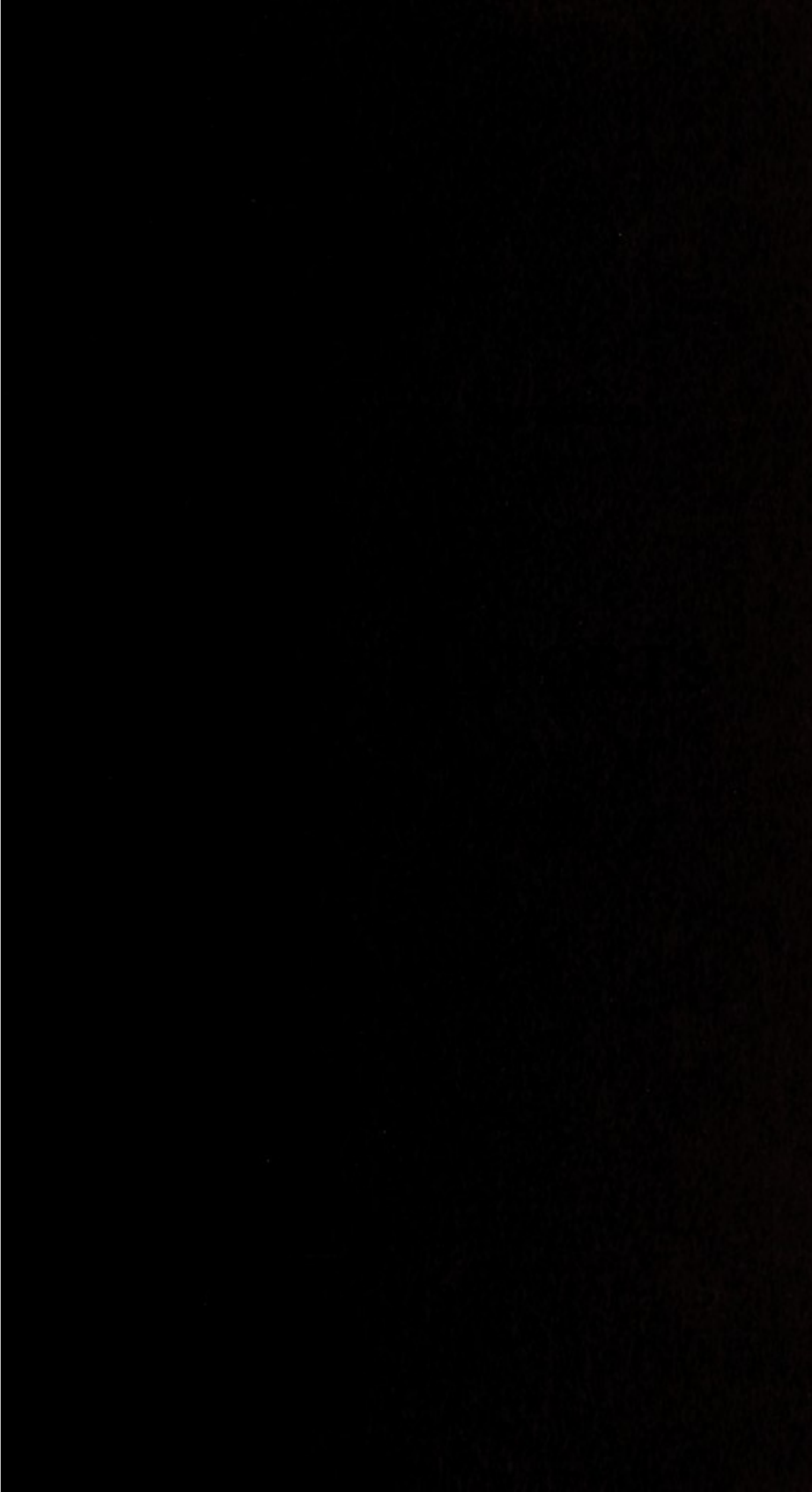
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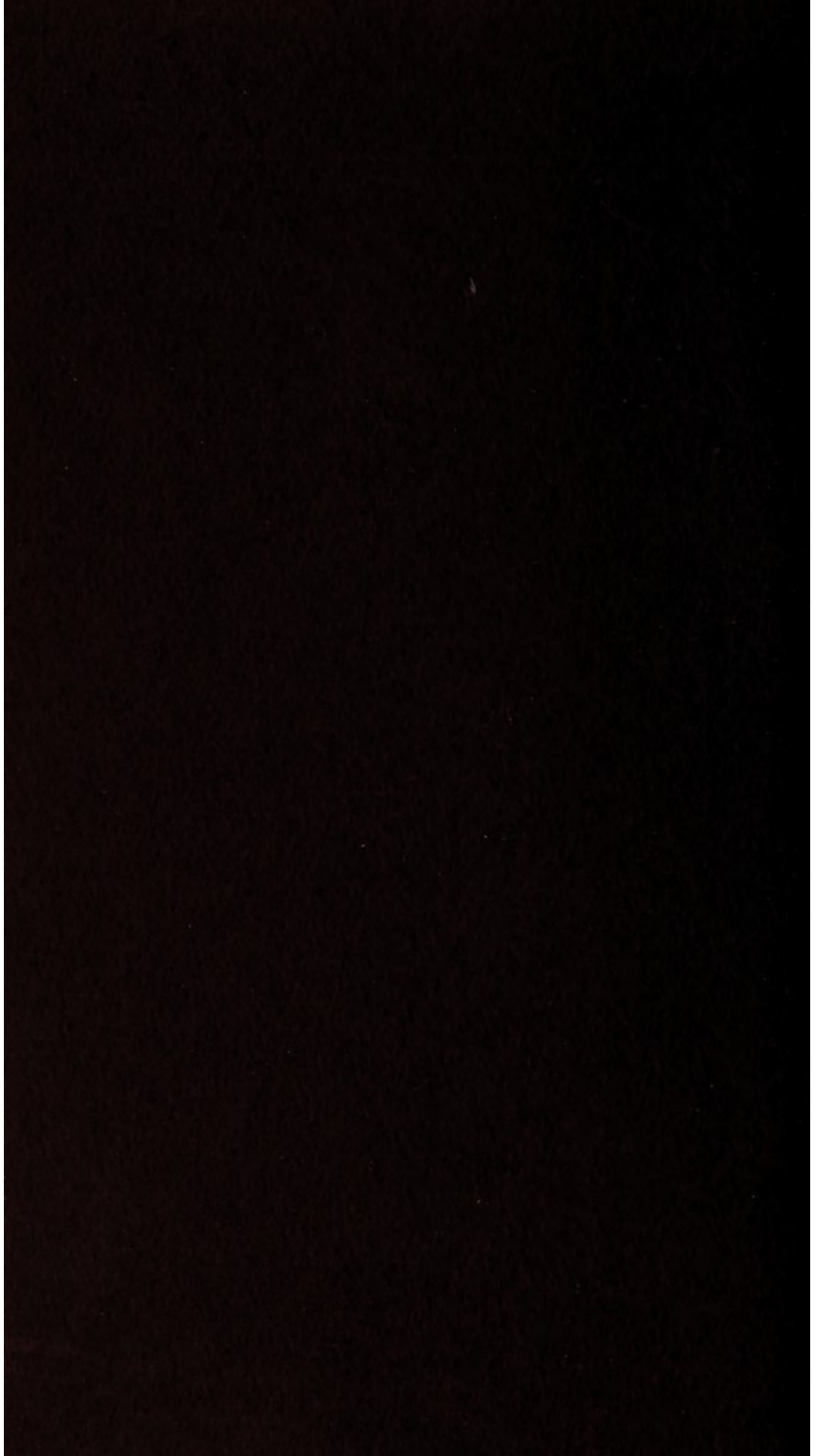
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COUNTY BOROUGH OF SMETHWICK.

ANNUAL REPORTS

OF THE

Medical Officer of Health,

Tuberculosis Officer,

Chief Sanitary Inspector,

AND

Public Analyst,

For the Year 1925.

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County Borough of Smethwick.

Health Committee.

(From November, 1924, to November, 1925).

Chairman :

COUNCILLOR A. BRADSHAW, M.R.C.S., L.R.C.P.

ALDERMAN G. BOWDEN, J.P.	COUNCILLOR E. T. BROWN.
ALDERMAN A. MORRIS.	COUNCILLOR W. Y. DAVIDSON,
COUNCILLOR E. ADAMS, J.P.	M.B., Ch.B.
COUNCILLOR J. SMITH.	COUNCILLOR Mrs. E. M. SANDS, J.P.

Maternity and Child Welfare Committee.

The Members of the Health Committee together with the following Co-opted Members :—

Mrs. E. T. BROWN.	Mrs. E. GRIFFITHS.
Mrs. F. CHAPMAN.	Mrs. C. W. JONES.
	Mrs. LUSTY.

Smethwick and Oldbury Joint Hospital Committee.

Chairman : ALDERMAN T. W. EVANS, J.P.

The Mayor (ALDERMAN G. F. BETTS, J.P.).

ALDERMAN G. BOWDEN, J.P.	COUNCILLOR E. T. BROWN.
COUNCILLOR A. BRADSHAW,	COUNCILLOR W. Y. DAVIDSON,
M.R.C.S., L.R.C.P.	M.B., Ch.B.
COUNCILLOR S. W. B. STEPHEN, J.P.	COUN. Mrs. E. M. SANDS, J.P.

Oldbury Representatives :

COUNCILLOR W. T. DAVIES, J.P.	COUNCILLOR WM. PARKES, J.P.
COUNCILLOR H. H. ROBBINS.	COUNCILLOR J. WORTLEY.

Smethwick Representatives on the South Staffordshire Joint Small Pox Hospital Board.

The Mayor (ALDERMAN G. F. BETTS, J.P.).

ALDERMAN G. BOWDEN, J.P.	COUNCILLOR W. Y. DAVIDSON,
	M.B., Ch.B.

Health Department Staff.

Medical Officer of Health, Tuberculosis Officer, School Medical Officer, and Medical Superintendent of Isolation Hospital :

J. BELL FERGUSON, M.D. (Edin.), D.P.H. (Manchester).

Assistant Medical Officers :

RICHARD SANDILANDS, M.B., Ch.B., B.Sc., D.P.H.

GLADYS E. AINSCOW, M.B., Ch.B., D.P.H.

EDITH AINSCOW, M.B., Ch.B., D.P.H. (Part-time).

Chief Sanitary Inspector :

*JOHN FYLES (To Sept. 30th, 1925).

†*JOHN H. WRIGHT (From Oct. 1st, 1925).

Sanitary Inspectors :

†*JOHN DEMPSEY (Appointed Deputy Chief Sanitary Inspector—
Oct. 1st, 1925).

†*JAMES F. ROGERS (Appointed Oct. 1st, 1925).

Clerical Staff :

Chief Clerk and Statistician : *G. H. ROE.

Second Clerk : J. H. MASSEY.

Clerk for M. and C. W. Work : MISS WINIFRED M. COOMBES.

Junior Clerk : A. H. CORNHILL (Appointed Nov. 9th, 1925).

Nursing Staff :

§ MISS N. S. GRAY
(To April 30th, 1925).

MISS L. E. ROBERTS.

§*MISS F. RICHARDS.

||†§*MISS L. WEALE.

§ MISS E. COLLINS
(From June 29th, 1925).

§ MISS A. WRIGHT.

§ MISS F. M. SULLIVAN.

§ MISS B. D. HAIGH
(From June 8th, 1925).

§ MISS J. E. ACKERS
(From July 1st, 1925).

The work of these Nurses is divided between the following Committees:—Health, Maternity and Child Welfare, Tuberculosis, Education, and Mental Deficiency.

Health Visitor and Clerk to Tuberculosis Dispensary :

§ MISS J. P. BATES.

Matron of Isolation Hospital : MISS F. E. WHITEHOUSE.

Public Analyst : JOSEPH LONES, F.I.C., F.C.S.

*Sanitary Inspectors' Certificate of Royal Sanitary Institute.

†Meat and Foods Inspectors' Certificate of Royal Sanitary Institute.

‡Health Visitors' Certificate of Royal Sanitary Institute.

§Maternity and Child Welfare Certificate of Royal Sanitary Institute.

§Certificate of the Central Midwives Board.

County Borough of Smethwick.

Public Health Department,
280, High Street, Smethwick.
October, 1926.

TO THE MAYOR, ALDERMEN AND COUNCILLORS FOR THE
COUNTY BOROUGH OF SMETHWICK.

MR. MAYOR, MRS. SANDS, AND GENTLEMEN,

I beg to submit my Annual Report as Medical Officer of Health and Tuberculosis Officer for the year 1925.

In accordance with the instructions of the Ministry of Health this Report is of the nature of a "Survey Report" and gives a somewhat fuller review of the sanitary conditions of the district for a period of five years in a more detailed manner than outlined in the ordinary Annual Reports.

The total of 1,448 births registered during the year 1925 showed a sharp decline to 18.36 per 1,000 of the population, compared with 20.19 per 1,000 in 1924.

There were 116 deaths of Infants under one year of age, representing an Infant Mortality Rate of 80.11 per 1,000 births, compared with 74.79 in the previous year. Actually there were three fewer deaths in 1925, but the number of births was considerably less and expressed as a rate per 1,000 births the Infant Mortality shows the above increase.

There were 817 deaths during the year, which in a population of 78,840 gives a rate of 10.36 per 1,000 living, and with the exception of 1924 when the rate was 10.12 per 1,000, is the lowest ever recorded for the Borough. Of the total deaths, 35 per cent. occurred in persons over 65 years of age.

During the year the notifications of Scarlet Fever showed a slight increase, and those of Diphtheria a slight decrease, the latter disease being of a less virulent type.

Measles and Whooping Cough still continued prevalent throughout the year; there was a slight increase in the number of deaths from Measles and a decline in the mortality from Whooping Cough as compared with 1924.

There was a slight increase in the deaths from both Lung and other forms of Tuberculosis.

The work of Maternity and Child Welfare received a valuable stimulus during the year from a visit of one of H.M. Inspectors from the Ministry of Health, who pointed out that while the conduct of Maternity and Child Welfare Scheme in Smethwick was eminently satisfactory the numbers attending the Centres had increased to such an

extent that additional help and additional sessions were required. Accordingly one part-time Medical Officer and two nurses were appointed in July, 1925, and the Infant Welfare Centre sessions were increased from five to eight weekly and an additional Ante-Natal session was inaugurated. Despite this help the work of the Centres continues to grow and the time is not far distant when further help will be required.

The neo-natal deaths (i.e., those occurring in the first four weeks of life) represented 43 per cent. of the total deaths under one year. This shows the need for increased activities in Ante-Natal work. The midwives in the Borough have been asked to keep a simple ante-natal record of their cases, and it is satisfactory to report that most of them are doing this.

In connection with Ante-Natal work the provision of dental treatment for expectant mothers is urgently required.

The work of the Department in combating Ophthalmia Neonatorum has been remarkably successful, there being 15 cases only in 1925 compared with 61 when measures were first inaugurated in 1920. The nursing staff are to be congratulated on their keenness and enthusiasm in dealing with this dangerous disease.

The activities of the Ultra-Violet Light Clinic have continued to grow to such an extent as to almost embarrass the resources of the staff. I would here urge the provision of a quartz mercury vapour lamp at each Centre where electric current is available, for the prophylactic irradiation of young infants. This would de-centralise the work and free the existing Light Clinic to a considerable extent. While unreasonable and undue claims have emanated from certain quarters as to the results and benefit of irradiation treatment, our experience has gone to show that with proper and careful supervision the results obtained in infants and young children are eminently satisfactory in the great majority of cases. I should like to stress the necessity of having this treatment carefully supervised by a medical officer who has some experience of the method.

With regard to Housing, it is regrettable that in spite of the efforts of the Housing Committee very many cases of serious overcrowding still exist in the Borough, and housing conditions are becoming more acute if anything. A bold and fearless policy in this matter must be adopted. Something might be done to alleviate conditions by the erection of small blocks of four flats with limited accommodation for elderly couples and the newly married, which could be let at a reasonable rent. These dwellings would be particularly useful in connection with the scheme for the clearance of back-to-back houses.

Below are appended some figures kindly supplied by the Borough Treasurer, relating to the cost of the Public Health Services in the town, which show that out of a total rate of 16s. 9d. in the pound, the actual cost on the rates of the Public Health Services was 9.83d. in the pound. This shows a reduction over last year's figures which were 11½d. in the pound, which is partly accounted for by the fact that grant in respect of the School Medical Service was not deducted in previous years.

I have several times reported to the Health Committee the need for additional help in the clerical section of the Department and hope that this matter will receive attention in the near future.

I have to record the retirement on superannuation of Mr. John Fyles, who was Chief Sanitary Inspector of the Borough for a period of 35 years. He was succeeded by Mr. John H. Wright, who commenced duties on the 1st October, 1925.

In conclusion, I should like to thank my staff for their help and loyalty throughout the year, and also the members of the Health Committee and the members of the medical profession in the town for their interest and co-operation in the work of the Department.

I am, Mr. Mayor, Mrs. Sands, and Gentlemen,

Your obedient servant,

J. BELL FERGUSON,

Medical Officer of Health.

COST OF PUBLIC HEALTH SERVICES

DURING THE YEAR ENDED 31ST MARCH, 1926.

					Amount.			Rate in £
GENERAL DISTRICT FUND.					£	s.	d.	d.
Infectious Diseases :								
Notification	...	...	...	...	70	11	6	0.05
Prevention	...	...	...	...	750	18	3	0.57
Smethwick & Oldbury Joint Hospital					3,460	12	4	2.63
South Staffordshire Joint Smallpox Hospital								
	...	...	...	...	119	12	0	0.09
Maternity and Child Welfare	...	...	...	...	1,396	15	5	1.06
Veneral Diseases	...	...	...	...	99	10	7	0.08
Tuberculosis	...	...	...	...	2,334	2	10	1.77
Salaries (not otherwise charged)	...	...	...	...	2,308	13	4	1.75
					10,540	16	3	8.00
BOROUGH FUND.								
Mental Deficiency	...	...	...	...	686	18	0	0.59
Medical Inspection of School Children					1,217	18	3	1.05
Food and Drugs Acts	...	...	...	...	222	0	10	0.19
					2,126	17	1	1.83
Grand Totals	...	...	...	...	12,667	13	4	9.83

The above figures represent actual Net Expenditure for the year ended 31st March, 1926.

Annual Report, 1925.

NATURAL AND SOCIAL CONDITIONS OF THE AREA.

AREA : 1,929 acres.

POPULATION : Census 1921—75,757.

Registrar-General's Estimate Mid-year 1925—78,840.

PHYSICAL FEATURES AND GENERAL CHARACTER OF THE AREA.

The County Borough of Smethwick constitutes the extreme southern portion of the County of Stafford. It is bounded on the north by the County Borough of West Bromwich, on the east and on the south by the City of Birmingham, and on the west by the Urban District of Oldbury and the township of Warley. It is closely in contact with a more or less dense population on certain of its confines, especially on the north-eastern and south-eastern boundaries where it adjoins Birmingham. Towards the south and south-west it adjoins a large and extensive tract of open country. Its surface is undulating, its elevation ranging from 426 to 606 feet above sea level; the mean elevation is 550 feet. The Borough extends from north to south about three miles and from east to west, on its widest portion, about two miles.

The geological formation is gravel beds on the red sandstone. Coal measures exist and are worked on the northern border (Sandwell Park Colliery). In the western portion there is less gravel and porous red sand prevails.

Smethwick is well provided with parks and open spaces, one-fifteenth of the Borough's total area being appropriated for this purpose.

The old Birmingham Canal passes through Smethwick, where there is a side cut with three locks, and continues through Oldbury, Tipton, Bilston and Wolverhampton, to join the Staffordshire and Worcestershire Canal $1\frac{1}{2}$ miles from Aldersley.

The town is served by the London, Midland and Scottish and Great Western Railways and there are four stations in the Borough.

Electric tramways traverse the Borough, connecting with Birmingham, Oldbury, Dudley and West Bromwich, while other routes are served by motor omnibuses. The estimated total mileage of streets in the Borough is 45 miles.

NUMBER OF INHABITED HOUSES : 1921—15,895.
1925—16,024.

NUMBER OF FAMILIES OR SEPARATE OCCUPIERS : 1921—16,366.

RATEABLE VALUE : £341,430.

SUM REPRESENTED BY A PENNY RATE : £1,150.

OCCUPATIONS AND INDUSTRIES.

The engineering and allied trades predominate, employing both male and female labour. There are several large iron works, stamping and drop-forging works, extensive glass works, designing and manufacturing stained glass, special metals for ships, manufacture of scales and weighing machines, oil, paint, varnish and lubricant manufacturers, motor engineering works, pottery, a large brewery, and a host of other activities. Smethwick is well represented in the metallic bedstead trade, there is one colliery, a factory producing steel pens, and a large cake factory, the two latter employing mainly female labour.

With the exception, perhaps, of glass-blowing and extremes of heat in certain occupations, none of the occupations can be described as particularly injurious to health. The larger employers in the Borough have evinced considerable interest in welfare work amongst their employees and several have large recreation grounds and playing fields of their own.

A considerable number of Smethwick residents work outside the Borough, particularly in electro-plating work, engineering work, etc., while large numbers of persons employed in the town reside in adjoining districts.

VITAL STATISTICS,

SUMMARY FOR THE YEAR 1925.

			Total.	Males.	Females.
BIRTHS :	Legitimate	... ..	1,413	685	728
	Illegitimate	... ..	35	21	14
	Total	... ..	1,448	706	742

BIRTH-RATE: 18.36 per 1,000 of the population.

MARRIAGES: 669. Marriage-rate: 16.9 per 1,000.

DEATHS: Total, 817. Males 430, Females 387.

DEATH-RATE: 10.36 per 1,000 of the population.

DEATHS OF INFANTS under one year of age:—Total 116. Males 69, Females 47.

INFANT MORTALITY RATE per 1,000 births:—Total, 80.11. Legitimate, 75.72. Illegitimate, 257.14.

DEATHS FROM:—

			Number.	Rate per 1,000 of Population.
Measles	... ..		7	0.08
Whooping Cough	... ..		11	0.14
Diarrhœa and Enteritis				
	(under 2 years)		15	0.19
Diphtheria	... ..		5	0.06
Scarlet Fever	... ..		3	0.03
Influenza	... ..		20	0.25
Cancer	... ..		87	1.10
Respiratory Diseases	... ..		151	1.91
Pulmonary Tuberculosis	... ..		61	0.77
Other forms of Tuberculosis	... ..		19	0.24

**BIRTH-RATE, DEATH-RATE, AND ANALYSIS OF MORTALITY
DURING THE YEAR 1925.**

	BIRTH-RATE PER 1,000 TOTAL POPULATION	ANNUAL DEATH-RATE PER 1,000 POPULATION									RATE PER 1,000 BIRTHS		PERCENTAGE OF TOTAL DEATHS		
		All Causes	Enteric Fever	Small-pox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Violence	Diarrhoea and Enteritis (under 2 years)	Total Deaths under 1 year	Causes of Death certified by Regd. Med. Practitioners	Inquest Cases	Uncertified Causes of Death
England and Wales ...	18.3	12.2	0.01	0.00	0.13	0.03	0.15	0.07	0.32	0.47	8.4	75	92.1	6.9	1.0
105 County Boroughs and Great Towns, including London ...	18.8	12.2	0.01	0.00	0.17	0.03	0.18	0.09	0.30	0.43	10.8	79	92.1	7.3	0.6
157 Smaller Towns (1921 Adjusted Populations, 20,000—50,000) ...	18.3	11.2	0.01	0.00	0.15	0.02	0.14	0.06	0.31	0.38	7.6	74	93.0	5.9	1.1
London ...	18.0	11.7	0.01	—	0.12	0.08	0.19	0.11	0.23	0.46	10.6	67	91.1	8.9	0.0
SMETHWICK ...	18.3	10.3	—	—	0.08	0.03	0.14	0.06	0.25	0.43	10.3	80	93.5	6.3	0.2

The total deaths registered in the district numbered 574; 9 of these were non-residents and were transferred to other districts; while 252 Smethwick residents died in other districts and have been added to the total registered in the Borough. The nett deaths thus number 817, giving a rate of 10.36 per 1,000 of the population, slightly higher than last year, but with that exception the lowest recorded for the Borough.

Reference to the above table will show that Smethwick again compares favourably with other towns and with the country as a whole, and it is worthy of note that 293 or 35.8 per cent. of the persons dying during the year were over 65 years of age. The mean age at death was 45.8 years, compared with 43.8 last year, 43.6 in 1923, and 41.18 in 1922.

There was a further sharp decline in the Birth-rate to 18.36, compared with 20.19 last year, 20.24 in 1923, 21.39 in 1922, and 25.46 in 1921.

The number of marriages last year showed a slight increase to 669, compared with 654 last year, and 610 in 1923.

The Infant Mortality Rate for the year was 80.11 per 1,000 births, and with the exception of the two previous years, is the lowest rate recorded for the Borough. The actual number of deaths of infants under one year was 116, against 119 last year but the number of births was considerably less and expressed as a rate per 1,000 births the Infant Mortality appears to have risen from 74.79 to 80.11. There was a decrease in the number of infant deaths due to respiratory diseases, but on the other hand an increase in those ascribed to prematurity.

A table giving a detailed analysis of the causes of death, based on the "International List of Causes of Death," and of age and sex distribution will be found in the Appendix at the end of this Report, and a similar table relating to deaths of infants under one year appears on page 38.

COMPARISON OF RATES IN THE VARIOUS WARDS.

Ward	Estimated Population	Total Acreage	Density	General Death-rate	Respiratory Death-rate	Infant Mortality rate
Spon Lane ...	13,007	515	25.2	8.4	1.4	59.4
Sandwell	12,085	411	29.3	13.3	2.2	81.7
Uplands	8,800	255	34.4	9.7	1.6	73.6
Bearwood ...	21,689	348	62.2	9.5	1.5	84.5
Victoria	11,934	176	67.7	10.9	2.6	107.7
Soho	11,325	224	50.5	10.8	2.3	68.8
Totals ...	78,840	1,929	40.8	10.36	1.9	80.1

REVIEW OF VITAL STATISTICS IN SMETHWICK DURING THE
PAST 25 YEARS.

Year	Estimated population	Marriage rate per 1,000	Birth rate per 1,000	Death rate per 1,000	Infant mor- tality rate per 1,000 births	Zymotic death rate per 1,000	Death rates per 1,000		
							Respiratory diseases	Pulmonary tuber- culosis	Cancer
1901 ...	54,560	15.4	34.7	14.9	170	1.76	2.5	0.87	0.62
1902 ...	55,700	12.1	35.4	13.8	127	1.4	2.9	0.75	0.55
1903 ...	58,000	14.8	34.1	14.1	141.7	1.2	3.1	0.65	0.77
1904 ...	61,000	11.08	32.06	13.2	145.6	1.24	2.67	0.93	0.80
1905 ...	63,000	14.9	30.3	15.0	139	1.7	2.7	0.73	0.60
1906 ...	65,000	15.6	31.2	14.6	130	2.21	2.7	1.03	0.67
1907 ...	67,000	14.4	29.4	14.34	116	1.43	3.1	0.78	0.85
1908 ...	69,500	14.1	30.0	14.5	135	1.84	2.7	0.86	0.70
1909 ...	70,300	13.8	28.1	13.4	116	2.23	2.8	0.82	0.78
1910 ...	72,000	15.2	27.35	12.42	108	1.3	2.1	0.84	0.54
1911 ...	70,681	15.9	27.8	14.6	140	2.3	2.6	0.94	0.79
1912 ...	73,372	16.3	25.8	12.32	111	0.9	2.8	0.9	0.7
1913 ...	72,936	18.0	28.1	14.98	127	2.1	3.1	0.8	0.76
1914 ...	72,975	16.8	27.5	14.13	106	1.67	3.4	1.26	0.89
1915 ...	72,439	21.6	25.88	13.8	109.3	2.13	3.02	1.10	0.98
1916 ...	78,335	17.4	22.04	11.08	93.8	0.77	3.33	1.20	0.84
1917 ...	78,335	18.11	20.32	11.5	99.8	0.71	3.9	1.30	0.86
1918 ...	76,056	16.49	20.28	15.63	102.4	0.6	3.56	1.43	0.9
1919 ...	73,000	17.67	22.19	13.00	84.6	0.45	3.2	1.19	1.03
1920 ...	75,027	22.71	27.08	11.16	82.18	0.64	2.4	0.81	0.92
1921 ...	77,400	16.4	25.46	11.11	88.28	0.69	2.27	0.68	0.85
1922 ...	78,140	15.6	21.39	11.22	86.12	0.67	2.31	0.78	1.13
1923 ...	78,450	16.6	20.24	10.82	65.49	0.79	1.82	0.93	1.04
1924 ...	78,790	15.9	20.19	10.12	74.79	0.41	1.87	0.67	1.20
1925 ...	78,840	16.9	18.36	10.36	80.11	0.52	1.91	0.77	1.10

POOR LAW RELIEF.

Smethwick is a constituent part of the Birmingham Union for Poor Law purposes, and I am indebted to Sir James Curtis, K.B.E., Clerk to the Guardians, for the following information relating to the relief of Smethwick residents during the past four years:—

Year ended March.	Total amount raised from rates.	Expenditure on account of unemployment included in Col. 2.	Number of persons relieved on January 1st.			Total.	No. of persons included in Col. 4 suffering from disease of body or mind.
			In Inst'ns	In Asylums.	In own Homes.		
1.	2.	3.	4.	5.	6.	7.	8.
	£	£					
1922	57,000	6,000	350	159	7,503	8,012	120
1923	79,000	28,500	380	167	6,218	6,765	130
1924	82,975	33,000	390	165	4,325	4,880	140
1925	80,000	29,500	380	165	2,090	2,635	150

Column 2 includes not only expenditure on Relief of the Poor, but expenditure partly connected and partly unconnected as well as expenditure wholly unconnected with Relief of the Poor.

N.B.—The above Statement refers to expenditure out of Rates only. In respect of the years 1922, 1923, and 1924, loans totalling £1,064,000 were borrowed by the Birmingham Guardians to meet part of the cost of relief to unemployed persons and their dependents. Annual repayments of principal and interest in respect of these loans were met out of the Rates in the years 1923, 1924, and 1925, and are included in the figures in Columns 2 and 3.

Column 9 includes a number of Non-Poor Law cases (i.e., Mental Deficiency Act cases, Local Education Committee's cases, etc.).

One large Poor Law Hospital (Dudley Road) equipped and run on modern lines, is within a mile of the Smethwick-Birmingham boundary.

UNEMPLOYMENT.

I am indebted to Mr. S. E. Clift, Acting-Manager of the Smethwick Employment Exchange for the following figures showing the average weekly number of unemployed persons on the Register during 1925 and the three previous years:—

		Males.	Females.	Juveniles.	Grand Total.
1922	.....	6,086	1,686	872	8,644
1923	.....	3,901	1,185	390	5,476
1924	.....	3,164	1,257	185	4,606
1925	.....	2,505	1,050	72	3,627

NOTIFIABLE DISEASES DURING THE YEAR 1925.

DISEASE.	TOTAL CASES NOTIFIED.														Cases admitted to Hospital.	TOTAL DEATHS.													
	AGE GROUPS.															AGE GROUPS.													
	All ages	0-1	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45	45-65	65 and upwards	All ages		0-1	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45	45-65	65 and upwards		
Scarlet Fever	165	1	4	6	14	17	87	28	3	5	...	...	...	97	3	...	...	...	1	1	...	...	1	...	...	...	...		
Diphtheria	104	1	5	6	4	5	47	12	12	10	1	1	...	75	5	1	1	...	...	3	...	...	...	...	...	...	...		
Erysipelas	28	...	...	...	...	...	...	...	1	2	7	13	4	3	...	...	...	...	...	...	...	...	1	...	...	...	...		
Puerperal Fever	8	...	...	...	...	...	...	...	1	6	1	...	...	8	1	...	...	...	...	...	...	...	...	...	...	...	...		
Ophthalmia Neonatorum	15	15	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...		
Anterior Poliomyelitis	3	1	...	...	1	...	...	...	...	1	...	...	1	2	...	...	...	...	...	...	...	...	...	...	...	...	...		
Encephalitis Lethargica	5	...	...	1	...	...	1	...	1	1	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Primary Pneumonia	126	3	3	9	3	7	10	10	14	15	16	31	5	28	38	...	...	...	...	1	1	1	1	1	11	14	9		
Influenzal Pneumonia	24	...	1	...	...	...	1	1	5	3	5	6	2	...	16	2	1	...	...	1	1	1	1	1	2	5	2		
Tuberculosis :-																													
(a) Pulmonary...	Males	38	1	...	...	...	1	1	3	18	4	10	...	47	32	...	...	...	...	1	...	2	12	6	11	...	...		
	Females	36	...	...	...	...	3	...	4	20	5	3	1	33	29	...	...	...	...	...	...	2	15	6	5	1	...		
	Total...	74	1	...	...	...	4	1	7	38	9	13	1	80	61	...	...	...	...	1	...	4	27	12	16	1	...		
(b) Other forms	Males	10	1	1	...	...	...	1	2	3	...	1	1	2	9	3	2	1	...	1	...	1	...	...	...	...	...		
	Females	14	3	2	...	1	1	2	...	3	...	1	...	4	10	3	1	...	2	...	1	1	1	...	1	...	...		
	Total...	24	4	3	...	1	1	3	2	6	...	2	1	6	19	6	3	1	3	...	2	2	1	...	1	...	...		
GRAND TOTALS	..	576	25	17	22	23	30	151	56	46	87	39	66	14	300	144	8	5	2	1	4	7	4	8	32	25	36	12	

SMETHWICK & OLDBURY JOINT ISOLATION HOSPITAL.

STATEMENT OF CASES ADMITTED AND DISCHARGED DURING THE YEAR 1925.

	Number of Cases in Hospital on December 31st, 1924.				Number of Cases Admitted during 1925.				Cases Discharged, Died, or Transferred to other Institutions during 1925.				Number of Cases in Hospital on December 31st, 1925.			
	Males.	Females.	Children under 16	Total.	Males.	Females.	Children under 16	Total.	Males.	Females.	Children under 16	Total.	Males.	Females.	Children under 16	Total.
SMETHWICK :																
Scarlet Fever ...	...	...	5	5	2	5	90	97	2	5	89	96	...	...	6	6
Diphtheria ...	1	1	4	6	4	5	66	75	4	4	58	65	1	2	12	15
OLDBURY :																
Scarlet Fever ...	...	...	...	...	3	2	15	20	3	2	15	20	...	...	...	...
Diphtheria ...	...	...	3	3	1	2	9	12	1	2	12	15	...	...	...	...
Totals ...	1	1	12	14	10	14	180	204	10	13	174	197	1	2	18	21

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SCARLET FEVER :—The following complications occurred :

Adenitis ...
Arthritis ...
Mastoiditis ...
Otorrhoea ...
Rhinorrhoea ...

DIPHTHERIA :—The following complications occurred :

Cardiac paresis ...
Palatal paresis ...
Otorrhoea ...
Rhinorrhoea ...

There were 3 cases of Laryngeal diphtheria. It was not necessary to perform tracheotomy in any case during the year.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASES.

SCARLET FEVER.

During the year under review there has been a slight increase in the incidence of Scarlet Fever. The cases notified numbered 165, and of these 97, or 58.7 per cent., were removed to the Joint Isolation Hospital, Holly Lane. Three deaths occurred, all in the Hospital; one case in a boy, aged 5 years, was complicated by mitral stenosis; another in a boy, aged 4 years, by tuberculous peritonitis and lobar pneumonia; the third case, a man of 28 years, developed lobar and broncho-pneumonia.

Cases in which ear or nose discharge have occurred while in hospital are notified to the Health Department and "followed up" by the School Nurses lest there should be a recrudescence of the discharge.

There were 114 cases of Scarlet Fever in children of school age, compared with 67 last year. The incidence was not marked in any particular school.

The age incidence of the persons attacked will be found in the table on page 13.

The incidence of, and mortality from Scarlet Fever during the past ten years is as follows:—

Year	Cases notified	Attack rate per 1,000 of population	Number of deaths	Case mortality per cent.
1916	169	2.2	4	2.3
1917	105	1.3	1	0.9
1918	52	0.7	1	1.9
1919	145	2.0	5	3.4
1920	514	6.8	2	0.4
1921	426	5.5	3	0.7
1922	270	3.4	2	0.7
1923	207	2.6	4	1.9
1924	126	1.5	—	—
1925	165	2.0	3	1.8

At the Hospital, the Dick test has been used extensively during the past year, and the results obtained have confirmed the observations of other workers. Its chief value in an Isolation Hospital is as an aid to diagnosis of doubtful cases of Scarlet Fever, and its use enables many cases to be discharged forthwith after isolation for the incubation period. This is a point of great importance, especially when beds are scarce. The results of treatment by Scarlet Fever Anti-toxin have also been sufficient to warrant this method of treatment as a routine procedure.

DIPHTHERIA.

The incidence of Diphtheria has shown a decline from 141 cases in 1924 to 104 cases during the year under review. During the preceding five years the disease had been consistently prevalent in the town. The virulence of the infecting organism has apparently been less severe than in previous years, and there were only 5 deaths.

There were 51 cases in children of school age, against 74 last year, with no particular incidence in any one school.

The age periods of the persons attacked will be found in the table on page 13.

The incidence of, and mortality from Diphtheria during the past ten years is as follows:—

Year	Cases notified	Attack rate per 1,000 of population	Number of deaths	Case mortality per cent.
1916	57	0.7	5	8.7
1917	56	0.7	6	10.7
1918	70	1.0	8	11.4
1919	94	1.29	6	6.4
1920	177	2.3	16	9.0
1921	132	1.7	9	6.8
1922	119	1.5	10	8.4
1923	138	1.75	10	13.7
1924	141	1.78	7	4.9
1925	104	1.3	5	4.8

Antitoxin is supplied free to medical practitioners in the Borough, 194 phials of 8,000 units being issued during the year, against 219 last year, and 253 in 1923.

It is to be regretted that mothers are not taking advantage of the facilities offered to protect their children against this dangerous disease by Toxin-Antitoxin inoculation. This should be done between the age of 6 months and 12 months. I would again urge that Toxin-Antitoxin should be placed at the service of medical practitioners in the Borough free of charge for prophylaxis in the same way as Antitoxin is given for curative purposes.

An enlightened community which would embrace the protection afforded by Toxin-Antitoxin to its juvenile population could almost abolish Diphtheria from its midst.

The Hospital Staff is immunised against Diphtheria, as a routine now, the Schick test being considered unnecessary. In all cases the initial immunising dose is subminimal, and with this method there have been no untoward or regrettable occurrences in connection with the administration of the immunising agent. No case of Diphtheria has occurred amongst the staff since these prophylactic measures were adopted.

ENTERIC FEVER.

It is satisfactory to record that there was no case of this disease during the year. The Medical Officer of Health saw four suspect cases in consultation with medical practitioners and Widal's reaction was carried out in seven instances, but with negative results.

ENCEPHALITIS LETHARGICA.

Seven cases of this disease were notified during the year, compared with 13 cases last year. Two cases were removed to hospitals in Birmingham. In no case did death supervene. There were two children under 10 years of age and three adults.

CEREBRO-SPINAL FEVER.

No case of this disease was reported during the year.

ANTERIOR POLIOMYELITIS.

Three cases were notified during the year, one being removed to hospital. One case, a child aged 3 years, died, the other cases were in an infant under 1 year and a man aged 27 years.

MALARIA, DYSENTERY AND TRENCH FEVER.

No notifications were received of these diseases during the year.

SMALLPOX.

No case of Smallpox was notified during the year. Several notifications were received of contacts arriving in the area from ships or from other towns and these persons were visited and kept under observation.

The members of the staff at the Health Department and at the Isolation Hospital, Holly Lane, were re-vaccinated in 1923.

During the year 1925 there were 5,355 cases of Smallpox in England and Wales, with 9 deaths, compared with 3,765 cases, and 13 deaths in 1924.

Leaflets are distributed at the Infant Welfare Centres and at the Health Office placing before the public the benefits of vaccination. The public would be well advised to avail themselves of the protection afforded by vaccination for the infant population.

The Vaccination Officer's Return for the twelve months ended 30th June, 1912, showed 18.1 per cent. of conscientious objections. This figure gradually rose to 34.4 per cent. in 1921, and fell to 25.0 per cent. in 1924. It will be seen from the following table that the percentage has again risen to 29.9. In view of the continued prevalence of Smallpox throughout the country this tendency is to be deplored.

VACCINATION RETURNS FOR THE PAST TEN YEARS.

Year ending 30th June,	Births	Vaccinations	Insusceptible	Conscientious objections	Died unvaccinated	Postponed by medical certificate	Gone to other districts	Gone— no address	Outstanding	Percentage of conscientious objections*
1925	1,406	866	3	404	55	29	7	15	27	29.9
1924	1,448	958	2	343	176	13	15	9	32	25.0
1923	1,535	984	—	428	62	15	6	10	30	29.0
1922	1,759	1,024	2	561	101	14	7	17	33	33.8
1921	1,884	1,046	5	608	119	32	10	20	44	34.4
1920	1,944	1,153	2	549	118	44	17	25	36	29
1919	1,438	816	—	421	104	20	21	23	33	31
1918	1,494	853	6	418	116	40	16	11	34	30
1917	1,689	1,042	3	425	120	36	15	20	28	27
1916	1,762	1,091	1	430	120	34	13	36	37	26

* In calculating these percentages, the number dying unvaccinated has been deducted from the total number of births,

PNEUMONIA.

The cases of Primary Pneumonia notified during the year numbered 126, an increase of 37 over last year. Twenty-four cases of Influenzal Pneumonia were reported, being 8 less than in 1924. The notifications and deaths during the last seven years are as follows:—

Year.	PRIMARY PNEUMONIA.		INFLUENZAL PNEUMONIA.	
	Notifications.	Deaths.	Notifications.	Deaths.
1919	75	45	62	64
1920	97	46	26	10
1921	70	49	8	3
1922	103	37	51	26
1923	141	37	27	14
1924	89	18	32	12
1925	126	38	24	16

Cases are visited by the nurses and disinfection is undertaken when requested. Leaflets on the disease are distributed and a polyvalent vaccine of proved antigenic properties offered to medical practitioners for use early in cases of Acute Primary Pneumonia. Each c.c. of the vaccine contains Types I., II., and III. pneumococci, 300, 200, and 80 millions respectively. Practitioners are asked to use the vaccine within 24 hours of onset of the attack in all cases presenting symptoms of acute lobar pneumonia. In connection with the use of this vaccine from 1923-1925, 107 vials were issued to ten doctors who attended 218 cases in whom 42 deaths occurred, giving a case mortality of 19.2 per cent. Over a similar period twelve doctors who did not use the vaccine attended 167 cases, with 43 deaths, giving a case mortality of 25.7 per cent. Great difficulty was experienced in obtaining details of the actual cases in which the vaccine was used, but figures for individual users showed a much greater improvement in the case mortality than for the whole series, and it seems likely that if the actual mortality amongst the cases in which vaccine was administered early could be accurately ascertained it would show a much lower figure than 19.2 per cent.

Sputum from 104 cases was examined as regards the types of pneumococcus present, with the following results:—

	Type I.	Type II.	Type III.	Type IV.
1923	60%	7%	—	33%
1924	36%	16%	4%	44%
1925	33%	2%	—	65%
1926	42%	8%	—	50%

(3 months)

As a rule Type I. predominates in acute Lobar Pneumonia infections. The above figures show that the type prevalent in Smethwick has tended to change from Type I. to Type IV., which latter is rather a less well-defined group.

It would greatly facilitate the study of pneumonia infections at all ages if all forms of pneumonia were made notifiable and classified on

the notification form according to clinical type, instead of restricting notifications to Acute Primary Pneumonia and Acute Influenzal Pneumonia as at present.

Pneumonia is one of the most important of human diseases; the case mortality is exceedingly high and the after-effects on those who recover are frequently grave. Moreover, one attack of pneumonia does not always leave the patient immune to future attacks as in the case of many other infectious diseases. Some patients suffer from repeated attacks. The public do not regard pneumonia sufficiently as an infectious disease and the importance of convalescent "carriers" and attendants who are "carriers" has not been appreciated.

Pneumonia shows a definite seasonal variation, being especially apt to assume serious proportions in the late winter and early spring. The prevalence of "common colds," bronchitis, and tonsilitis has some bearing on the incidence of pneumonia; also bad personal hygiene, i.e., spitting in public places, omitting to wash hands before eating, etc., has probably some influence on its spread. Smoky atmosphere, dust, cold and wet, and lack of sunshine, overcrowding and intemperate habits undoubtedly influence the pneumonia rate.

Much might be done by utilising beds at the Isolation Hospital for cases of Measles and Whooping Cough complicated by Bronchopneumonia to lower the mortality in these cases and in preventing permanent damage to the lungs.

MEASLES.

Measles was fairly prevalent throughout the year and accounted for 7 deaths, six in children under five and one in the age-group 15-25 years.

WHOOPING COUGH.

This disease was also prevalent throughout the year and caused 11 deaths, of which nine were in children under two years of age. The treatment of a small series of cases by ultra-violet radiation has given most encouraging results, cutting short the severity and number of the spasms and shortening the duration of the attack.

DIARRHŒA AND ENTERITIS.

This condition was not at any time during the year responsible for extensive illness amongst young children. There were 15 deaths under two years of age, giving a mortality rate of 10.3 per 1,000 births.

INFLUENZA.

Influenza was not particularly prevalent during the year. Twenty deaths were certified from this cause, the majority of which occurred amongst persons over 45 years of age. The mortality rate was 0.25 per 1,000 of the population, compared with 0.32 per 1,000 for the whole country.

CANCER.

Eighty-seven deaths were certified from this disease during the year. The following table shows that the increase in the mortality from Cancer has more than doubled since 1900. A large proportion of this increase is no doubt due to more accurate diagnosis and to more frequent examination of post-mortem specimens, but the figures are disquieting.

Year.	Number of Deaths.	Rate per 1,000 of population.
1900	31	0.55
1901	34	0.62
1902	31	0.55
1903	45	0.77
1904	49	0.80
1905	37	0.60
1906	44	0.67
1907	57	0.85
1908	49	0.70
1909	57	0.78
1910	39	0.54
1911	56	0.79
1912	52	0.70
1913	59	0.76
1914	65	0.89
1915	71	0.98
1916	66	0.84
1917	69	0.86
1918	61	0.90
1919	75	1.03
1920	71	0.92
1921	66	0.85
1922	89	1.13
1923	82	1.04
1924	95	1.20
1925	87	1.10

Educational efforts have been continued amongst the public and the midwives by means of leaflets pointing out the necessity for early diagnosis and the imperative need for patients to consult a medical man early when any suspicious signs are observed.

In addition to the apparatus for the treatment of cancer by means of powerful X-Rays (Erlangen treatment) available at the Skin Hospital, John Bright Street, Birmingham, a new apparatus has been provided at the Hospital, Dudley Road, Birmingham, under the charge of Dr. Russell Green. I understand that this apparatus is available for all classes of patients, including the private patients of general practitioners.

DIABETES.

The following figures are given as they may prove of interest in connection with the introduction of "Insulin" to general practice.

		DEATHS FROM DIABETES IN SMETHWICK.												
Age Group		O — 5		5 — 15		15 — 25		25 — 45		45 — 65		66 & up		Total
Sex		M	F	M	F	M	F	M	F	M	F	M	F	
1919		—	—	1	—	—	—	—	—	1	—	—	1	3
1920		—	—	—	—	—	—	—	1	1	1	1	—	4
1921		—	—	1	—	2	2	—	2	1	2	1	4	15
1922		—	—	1	—	—	—	—	1	3	3	—	—	8
1923		—	—	—	—	—	1	—	—	3	2	2	3	11
1924		—	—	—	—	—	—	—	—	3	—	1	3	7
1925		—	—	—	—	—	—	1	—	—	4	1	1	7

RHEUMATIC DISEASES.

The large group of Rheumatic Diseases is of great importance to the community. The recent report of the Ministry of Health on the incidence of Rheumatic Diseases discloses the fact that nearly one-sixth of the industrial invalidity in this country was due to "rheumatism." The following table may be of interest as giving some indication of the actual mortality caused by these diseases. The deaths due to heart disease are separated from the rest in the table, but the presumption is that the greatest number are due to rheumatic infection. It must always be borne in mind that the "damage rate" in Rheumatic Diseases is considerably greater than the death-rate. The term "Heart Disease" in the table includes only pericarditis, endocarditis, and valvular disease, as being probably rheumatic in origin.

Cause of death.	Chorea.	Rheumatic Fever.	Chronic Rheumatism.	Heart Disease.
1919	—	2	—	32
1920	—	6	—	54
1921	1	7	—	52
1922	—	5	—	39
1923	1	2	1	46
1924	1	5	3	33
1925	—	9	2	35

The chief field in the prevention of these diseases lies in education, and care of the earliest manifestations in childhood. "Growing pains" and Chorea (St. Vitus' Dance) in children are forms of Rheumatic Disease and children with these conditions should be carefully watched and kept under medical supervision. Attention to septic teeth and diseased tonsils are also important factors. A sufficient wage, abolition of dampness, and the provision of as much sunlight as possible, will help in prevention. The prevention of Rheumatic Diseases offers a big field for future public health endeavour.

INFECTIOUS DISEASES AND DISINFECTION.

Immediately on receipt of a notification of infectious disease the premises are visited by a sanitary inspector. At these visits arrangements are made for the efficient isolation of the patient, or alternatively for removal of the case to the Isolation Hospital. The circumstances in

connection with the case, such as occupation of patient and family, sources of water supply and milk supply, probable sources of infection, etc., are recorded and tabulated, and any insanitary conditions found are noted and dealt with. Cards of instruction as to the prevention of the spread of infection are sent to the parents or guardians in each case, and the Education Office notified of all children of school age in infected houses. In addition a list of notified cases is sent daily to the Borough Librarian. Library books in infected houses are destroyed.

On the termination of illness or on removal of a case to hospital the premises are disinfected by means of formalin spray or lamp and where necessary notices are served upon the owners to strip and lime-wash the rooms occupied by the patient. Infected clothing, bedding, etc., is removed to the Isolation Hospital and dealt with in a Manlove and Elliott's steam disinfector.

The number of lots of bedding, etc., removed for disinfection during the year was 441, comprising 4,264 articles. The total number of disinfections was 466, and the following is a classified list of the reasons for disinfection of premises:—

Scarlet Fever	...	...	...	...	...	141
Diphtheria	...	...	...	...	...	103
Tuberculosis	...	...	...	...	...	137
Cancer	...	...	...	...	...	68
Puerperal Fever	...	...	...	...	...	6
Pneumonia	...	...	...	...	...	2
Erysipelis	...	...	...	...	...	2
Measles	...	...	...	...	...	1
Chicken Pox	...	...	...	...	...	1
Scabies	...	...	...	...	...	1
Schools	...	...	...	...	...	4
Total						466

BACTERIOLOGICAL EXAMINATIONS.

Arrangements are made for the necessary routine bacteriological examinations to be carried out by the Public Health Laboratory of the University of Birmingham. The number of specimens examined during the year, and the results, are set out below:—

Nature of Specimen.				Number.	Positive.	Negative.
Throat Swabs for Diphtheria bacilli—						
Suspects	...	...	...	366	67	299
Contacts	...	...	...	78	9	69
Nasal Swabs for Diphtheria bacilli—						
Suspects	...	...	...	2	1	1
Contacts	...	...	...	50	17	33
Exudate from Eyes for Gonococci	...	...	...	5	5	—
Blood for Widal's Test—						
For B. Typhosus	...	...	...	7	—	7
For B. Para-typhosus B.	...	...	...	7	—	7
Sputum for Tubercle bacilli	...	...	...	280	43	237
Milk for Tubercle bacilli	...	...	...	3	—	3
Milk for Bacterial Count.	...	...	...	24	—	—
Totals				822	142	656

In addition to the above, 183 swabs were examined for Diphtheria bacilli at the Hospital, Holly Lane, from patients in the Hospital, 27 giving positive, and 156 negative results. Two consecutive negative swabs are required before a patient is discharged.

ANNUAL REPORT OF THE TUBERCULOSIS OFFICER FOR 1925.

NOTIFICATIONS.

Ninety-eight notifications of Tuberculosis were received through the Medical Officer of Health during the year. There were 74 cases of Pulmonary Tuberculosis and 24 of other forms of the disease. The following table shows the notifications received and attack-rate for each year since the commencement of the Public Health (Tuberculosis) Regulations, 1912:—

		Notifications received:		Attack Rate per	
		Pulmonary.	Other forms	1,000 of the population.	
				Pulmonary.	Other forms.
1912	.....	307	—	4.1	—
1913	.....	318	50	4.3	0.68
1914	.....	143	167	1.9	2.2
1915	.....	229	103	3.1	1.4
1916	.....	204	117	2.6	1.4
1917	.....	206	126	2.6	1.6
1918	.....	194	80	2.5	1.0
1919	.....	260	60	3.5	0.8
1920	.....	146	31	1.9	0.4
1921	.....	88	14	1.1	0.18
1922	.....	112	17	1.4	0.2
1923	.....	80	18	1.02	0.2
1924	.....	110	18	1.39	0.2
1925	.....	74	24	0.9	0.3

The deaths from all forms of tuberculosis during the year numbered 80, of which 60 were notified cases, and 20 not notified. The ratio of unnotified deaths to the total deaths is 25 per cent., against 26.8 per cent., 29.8 per cent., and 38.7 per cent. in the three previous years.

While a number of these cases died in institutions, steps are being taken in the future to communicate with medical practitioners with regard to cases of Tuberculosis heard of for the first time through the death returns.

The following table shows the total NEW CASES during the year, i.e., all PRIMARY NOTIFICATIONS and also other NEW cases coming to the know-

ledge of the Medical Officer of Health from the Death Returns or otherwise; and also the deaths registered during the year:—

TUBERCULOSIS.

AGE PERIODS.	NEW CASES.				DEATHS.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M	F	M	F	M	F	M	F
0 to 1	—	—	3	3	—	—	3	3
1 to 5	1	—	3	4	—	—	4	3
5 to 10	2	3	—	1	1	—	—	—
10 to 15	1	1	1	2	—	—	1	1
15 to 20	3	5	2	1	2	2	1	1
20 to 25	3	9	—	1	—	5	—	1
25 to 35	14	16	4	2	12	10	—	—
35 to 45	6	15	—	—	6	6	—	—
45 to 55	33	6	1	1	9	4	—	—
55 to 65	1	3	—	—	2	1	—	1
65 upwards	1	2	1	—	—	1	—	—
TOTALS	45	43	15	15	32	29	9	10

PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS) REGULATIONS, 1925.

No tubercular employees in the milk trade were discovered during the year.

PUBLIC HEALTH ACT, 1925, SECTION 62.

The Council provide beds for advanced cases at Holly Lane Hospital, but in no case was it found necessary to apply for an Order for the compulsory removal of a patient to hospital.

TUBERCULOSIS SCHEME FOR THE BOROUGH.

- (a) DISPENSARY: In Smethwick the Dispensary is called the Chest Clinic, and is situated behind the Council House. The premises consist of a waiting room, two dressing cubicles, consulting room, X-ray room, and an office. The Staff comprises the Tuberculosis Officer and Assistant Tuberculosis Officer (who are also Medical Officer of Health and Assistant Medical Officer of Health respectively), one nurse and one clerk and health visitor.

New patients are seen by appointment only, on Wednesdays and Fridays, from 3 to 5 p.m.

Cases which are taken on for observation or treatment at the Chest Clinic are asked to attend on Tuesday or Friday mornings

between 10 and 1 o'clock. Patients who have received treatment or who cannot conveniently attend in the mornings, are seen on Tuesday evenings from 5.30 to 8 o'clock.

X-Ray examinations take place on Monday evenings commencing at 5 p.m.

Treatment by Ultra-Violet Radiation is undertaken on Monday afternoon, and Wednesday and Friday morning.

On days when the Clinic is nominally closed the nurses are engaged in work in the district.

- (b) **SANATORIUM ACCOMMODATION:** The accommodation for the reception of early types of tuberculous patients includes 20 beds at Romsley Hill Sanatorium, near Halesowen,—8 beds for females and 12 for males.
- (c) **HOSPITAL ACCOMMODATION:** Accommodation for hospital cases is provided in "D" Block at the Smethwick and Oldbury Joint Hospital, Holly Lane, and consists of 10 beds for females and 12 beds for males.

Chronic and advanced cases are admitted when satisfactory isolation cannot be obtained at home.

In addition to the above, chalets are available in the hospital grounds, which are used as required for cases which are improving.

The Assistant Tuberculosis Officer is resident at Holly Lane Hospital.

- (d) **SHELTERS:** Ten shelters have been in use by patients in their own gardens during the year. It is satisfactory to note that all the shelters have now been recalled and put in proper repair, the work having been done in the carpenters' workshop at Holly Lane Hospital.
- (e) **SURGICAL TUBERCULOSIS:** The arrangement whereby the Corporation sanctioned the use of six beds for the prolonged treatment of surgical tuberculosis has continued. A very severe case of lupus has remained during the year at Lord Mayor Treloar's Cripples' Hospital, Alton, Hants. In addition to two cases remaining from last year, five other cases were admitted to "The Woodlands," Northfield, and four were discharged during the year.

AFTER-CARE WORK.

After-care work has been carried out by the staff at the Chest Clinic and the following is a summary of the work done during the year:—

Patients receiving loan of beds and bedding ...	...	17
Patients receiving loan of shelters, including beds ...	...	11
Advanced cases of domiciliary treatment receiving loans of bed-pans, air-cushions, etc. ...	...	34
Cases receiving grants of milk ...	...	19

CO-OPERATION OF MEDICAL PRACTITIONERS, ETC.

The co-operation with the medical practitioners in the area is good. Of the large number of cases attending the Chest Clinic, many are cases of doubtful diagnosis referred by the medical practitioners for examination.

The Tuberculosis Officers also act as School Medical Officers, so that there is complete co-ordination between these branches of the Public Health Service.

DENTAL TREATMENT.

No provision has yet been made for special dental treatment in connection with the Tuberculosis Scheme, but patients for whom such treatment is required are referred to the Dental Hospital, Great Charles Street, Birmingham, or to their own dentists.

DIAGNOSIS.

In cases of doubtful diagnosis, the patients are seen periodically until the diagnosis is definitely established one way or the other. As a rule an attempt is made to clear up the diagnosis within six weeks. Temperature, pulse and weight are observed, sputum and radiological examinations made, and in certain cases tuberculin (T.A.F.) is used finally.

CONTACTS.

One hundred and eight persons living in infected houses and in intimate contact with cases of Pulmonary Tuberculosis have been carefully examined and dealt with during the year. Of these, 4 were found to be definitely suffering from the disease, 70 were regarded as being free from active tuberculosis, and 28 were still under observation at the end of the year. The number of contacts re-examined during the year was 44.

CONTACTS.

No. of infecting cases			No. of contacts examined.			No. found tuberculous.			No. suspected.			No. of non-tuberculous.		
M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.
34	22	2	15	49	44	...	2	2	1	16	11	14	31	31
58			108			4			28			76		

HOME NURSING AND EXTRA NOURISHMENT.

The nurses visit certain advanced cases in their homes where satisfactory isolation can be secured, and bathe the patient.

In 19 cases extra nourishment in the form of grants of milk was given during the year.

NON-PULMONARY TUBERCULOSIS.

These cases are dealt with as outlined above in institutions and are thereafter deferred to the Chest Clinic and to the Smethwick Cripples' Union for after-care. Certain of these cases have received ultra-violet radiation with beneficial results. Surgical appliances are provided as required, the parents being asked to pay a proportion of the cost.

PREVENTION OF TUBERCULOSIS.

Your Medical Officer has consistently advocated the provision of an Open Air School, open-air classrooms, and improved ventilation facilities in the schools, as the most economical, efficient and satisfactory measures by which to prevent the scourge of tuberculosis. By this plan the resistance of child contacts of notified cases may be built up and the establishment of actual disease prevented in children who have been exposed to massive doses of infection at home.

It is satisfactory to record that the Smethwick Education Committee are proceeding in the near future with the erection of a modern Open-Air School for 120 places on "The Firs" estate.

In the opinion of the writer, progress in combating tuberculosis will follow upon increased attention to its manifestations in childhood, and much of the money now being spent on adults would be better spent in improving the school environment, housing conditions, and nutrition of the child.

SUMMARY OF WORK DONE AT THE CHEST CLINIC DURING THE YEAR 1925.

	Males.	Females.	Children under 15 Years.	Total.
Number of New Cases	80	106	90	276
Number of Re-attendances	760	795	1423	2978
Number of Insured Persons commencing treatment at the Clinic ...	27	11	—	38
Ditto at Romsley Hill Sanatorium ...	25	13	—	38
Ditto at Holly Lane Sanatorium ...	16	9	—	25
New Cases taken on at the Clinic for Observation or Treatment ...	25	35	42	102
New Cases passed for Sanatoria ...	27	23	5	55
Referred to other Institutions ...	6	10	5	21
Old Patients re-examined	101	70	52	223
Chest Clinic Cases transferred to Sanatoria	25	19	3	47
Sanatoria Cases transferred to Chest Clinic	21	14	1	36
Home Visits :—				
Tuberculosis Officer				60
Nurses				1932
Special After-care visits				47
Attendances of Patients receiving Injection Treatment	320	257	319	896
Attendances of Patients receiving Ultra-Violet Radiation Treatment	240	224	839	1303
Contacts :—				
Number of Infecting Cases ...	34	22	2	58
Number of Contacts examined ...	15	49	44	108
Number found tuberculous ...	—	2	2	4
Number suspected	1	16	11	28
Number found non-tuberculous ...	14	31	31	76
Number of Contacts re-examined...	8	13	23	44
X-Ray Examinations				67
Surgical Dressings				324
Blanket Baths				65
TOTAL ATTENDANCES AT THE CLINIC : Old and New Cases				3321
Average Weekly Attendance...				69.1

The total number of cases (old and new) on the Register at the Chest Clinic at the end of the year was 454.

During the year 1925, 276 persons applied at the Chest Clinic for advice and treatment. These were divided as follows:—

	Males.	Females.	Total.
Insured persons	72	43	115
Dependents of insured persons	39	107	146
Non-insured persons	6	9	15
Totals	117	159	276

AGE AND SEX CONSTITUTION OF THE 276 PERSONS EXAMINED
AT THE CHEST CLINIC DURING THE YEAR 1925.

	Ages		0-5		5-10		10-15		15-25		25-35		35-45		45 up		Total
Sex	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Pulmonary																	
Tuberculosis:																	
Definite	-	-	1	-	-	-	4	15	12	7	6	4	8	3			60
Suspected	2	1	5	9	5	8	1	9	3	12	3	2	3	2			65
Tuberculosis:																	
Other forms	1	2	-	2	2	4	2	3	1	3	-	-	1	-			21
Non-Tuberculous.....	-	2	13	10	9	13	13	8	9	24	7	7	5	10			130
Totals	3	5	19	21	16	25	20	25	25	46	16	13	17	15			276

VISITS.

During the year the Tuberculosis Officer paid 60 visits to patients in their own homes. The nurses paid 1,932 visits, and, in addition, 47 visits in connection with the after-care of patients. It has been the aim of the staff at the Clinic to foster a friendly feeling in these visits and to obviate as much as possible any suggestion of officialism or inspection.

SANATORIUM TREATMENT.

TABLE SHEWING ADMISSIONS to, and DISCHARGES from, SANATORIA during the Twelve Months ended December 31st, 1925.

NAME OF INSTITUTION	Number of Cases in Sanatorium on December 31st, 1924.			Number of Cases admitted during 1925.			Cases discharged or transferred to the Chest Clinic.			Number of Cases in Sanatorium on December 31st, 1925.			Number of Deaths.	
	Males	Females	Children under 16	Total	Males	Females	Children under 16	Total	Males	Females	Children under 16	Total	Males	Females
Romsley Hill ...	6	8	1	15	26	18	1	45	23	20	2	45	6	2
Holly Lane ...	8	6	...	14	17	14	4	35	17	12	4	33	2	5
Lord Mayor Treloar Hospital, Alton ...	...	...	1	1	...	...	...	...	...	...	...	...	...	...
The Woodlands, Northfield ...	...	...	2	2	...	...	6	6	...	...	6	6	...	...
Preston Hall ...	1	...	...	1	...	...	...	...	1	...	...	1	...	...
Totals ...	15	14	4	33	43	32	11	86	41	32	12	85	8	7

PULMONARY TUBERCULOSIS.—Classification of Cases Discharged from, or Died in Sanatoria during the year 1925.

CLASSIFICATION.	Holly Lane Sanatorium.		Romsley Hill Sanatorium.	
	T.B.+	T.B.—	T.B.+	T.B.—
Observation	...	9	1	2
Early	6	8	8	7
Middle	4	1	15	3
Advanced	16	...	14	...
All cases	26	18	38	12

LENGTH OF STAY in Sanatoria of Patients discharged during 1925.

CLASSIFICATION.	Holly Lane Sanatorium.			Romsley Hill Sanatorium.		
	Number of Days.			Number of Days.		
	Average.	Max'm.	Min'm.	Average.	Max'm.	Min'm.
Observation	58	73	36	124	188	55
Early	92	112	4	105	182	28
Middle	96	114	75	118	182	40
Advanced	129	358	15	142	294	63
All cases	94			130		

The average length of stay of patients in the Open-Air Wards at Holly Lane was 13.2 weeks, against 13.2 weeks last year, and 10.8 in 1923.

CONDITION OF PATIENTS ON DISCHARGE (ALL INSTITUTIONS).

Markedly Improved	18
Improved	58
In Statu Quo	3
Worse	6
Died	16

RECREATION.

Contributions of books, periodicals, etc., for the patients' library will be welcome from anyone reading this Report. Through the kindness of Mr. H. V. Worwood and the Smethwick Insurance Committee, newspapers and periodicals are supplied weekly to the patients at Holly Lane.

We have again to thank Mr. T. Collins, J.P., and the Chairman of the Smethwick and Oldbury Joint Hospital Committee (Alderman T. W. Evans, J.P.) for the interest they have taken in the wireless receiving set installed at Holly Lane through their efforts. Some trouble was experienced with the working of the set, and Mr. J. H. Wright, the Chief Sanitary Inspector, very kindly re-wired the set, which has since continued to function satisfactorily and has proved an invaluable boon to patients confined to bed for many weeks on end.

The carpenter's shop has continued to be useful and the women patients have carried on with their small stock of poultry.

ULTRA-VIOLET RADIATION.

In September, 1924, the Light Clinic was inaugurated by the Smethwick Health Committee. Premises in the existing Chest Clinic at the rear of the Council House were utilised.

During the period ending 31st December, 1925, 83 cases of Tuberculosis come under treatment; of these 39 have been discharged and 44 are still continuing treatment. These cases included seven patients referred from Holly Lane Sanatorium for light treatment.

Details of the apparatus used will be found on page 47.

Very satisfactory results were obtained in Lupus and certain cases of bone and joint tubercle, and in scrofuloderma. Cases of lung tubercle were not encouraged to attend the Clinic, as I consider they should receive more careful supervision than can be obtained outside a Sanatorium.

The following table shows the various forms of tuberculosis treated by ultra-violet radiation, together with an assessment of the results obtained:—

CASES OF TUBERCULOSIS TREATED BY ULTRA-VIOLET RADIATION.

DISEASES.	Total Cases commencing Treatment.	Treated and Discharged.						No. of Cases continuing Treatment.
		Total.	Cured.	Improv- ed.	In Statu Quo.	Worse.	Died.	
Tuberculos Adenitis ...	32	14	10	2	2	...	...	18
Lupus ...	19	6	5	1	...	...	...	13
Tuberculosis of Bones and Joints ...	5	5	1	3	1	...	...	...
Tuberculosis of Lungs...	16	10	...	4	2	...	4*	6
Tuberculosis of Eye ...	5	1	...	1	...	...	...	4
Tuberculous Peritonitis	3	1	...	...	1	..	...	2
Bazin's Disease ...	1	11	1	...	...	...	...	...
Scrofuloderma ...	2	1	...	1	...	...	...	1
Totals ...	83	39	17	12	6	...	4	44

* 1 died from Cancer; 1 died at Romsley Hill Sanatorium; 1 received four doses only.

VENEREAL DISEASES.

By arrangement, treatment is available for Smethwick patients at the General Hospital, Birmingham. The Centre is open for men and women on the following days:—

Men—Monday, Tuesday, Wednesday, and Friday from 5.30 to 7.30 p.m.

Women—Tuesday and Friday from 10 to 12 noon. Thursday from 5 to 7 p.m.

The number of Smethwick residents dealt with at the Centre during the year was 89, compared with 64 last year, 61 in 1923, 74 in 1922, 73 in 1921, 120 in 1920, and 143 in 1919.

The report of the Medical Officer of the Treatment Centre for the year under review shows:—

- A. Number of Smethwick patients dealt with during the year at or in connection with the Out-Patient Clinic for the first time and found to be suffering from:—

Syphilis	...	...	...	...	...	...	...	26
Soft Chancre	...	...	...	...	...	...	...	—
Gonorrhœa	...	...	...	...	...	...	...	46
Conditions other than Venereal	...	...	...	...	...	...	...	17
								—
Total	...	...	...	...	...	...	...	89
								—

- B. Total number of attendances at the Out-patient Clinic of all patients residing in Smethwick ... 2843

- C. Aggregate number of "In-Patient days" of all patients residing in Smethwick ... 162

- D. Number of doses of Salvarsan substitute given ... 423

Pathological examinations made during the year 1925 relating to patients residing in Smethwick:—

For detection of Spirochetes	...	...	...	...	1
For detection of Gonococci	...	...	...	...	265
For Wasserman reaction	...	...	...	...	93
					—
Total	...	...	...	...	359
					—

Seven enquiries in connection with the scheme were received at the Health Office during the year. Any member of the public is confidentially and courteously received and given full information. Enamel signs calling attention to the necessity for immediate treatment and giving information as to the treatment centre are permanently fixed in all public conveniences throughout the Borough.

During the past five years we have had two campaigns against Venereal Diseases—in 1921 a week was devoted to meetings of male employees in twelve of the larger works in the Borough addressed by the Medical Officer of Health and Mr. H. R. Elliott of the National Council for Combating Venereal Diseases; public lectures, illustrated by lantern slide and specimens, were given, and literature distributed. In 1922, Mrs. Altentop, of the N.C.C.V.D., spent a week in the Borough addressing mothers at the Infant Welfare Centres, female employees in the factories, and a public lantern lecture. Films, "The Gift of Life" and "The End of the Road," were exhibited to a crowded audience at one of the picture theatres and films were shown to a mixed audience consisting of the parents of school children at the Baptist Assembly Hall. A special meeting of midwives was arranged at the Council House, when the Lady Assistant M.O.H. dealt with the prevention of Ophthalmia Neonatorum.

General Provision of Health Services in the Borough.

HOSPITALS PROVIDED OR SUBSIDISED BY THE LOCAL AUTHORITY.

(1) TUBERCULOSIS :—

Holly Lane Hospital, Smethwick. 22 beds for advanced and chronic cases, and 12 beds in chalets.

Romsley Hill Sanatorium, near Halesowen. (Birmingham Hospital Saturday Fund). 20 beds reserved for Smethwick patients.

For Surgical Tuberculosis: Authority given to send up to 6 cases to "The Woodlands," Northfield, "The Forelands," Bromsgrove, or Lord Mayor Treloar Cripples' Hospital and College, Alton, Hants.

(2) MATERNITY :—

Two beds reserved for cases of Puerperal Fever at the Women's Hospital, Sparkhill, Birmingham.

Under an Agreement between the Smethwick Corporation and the Guardians of the Birmingham Union, the Guardians receive in Dudley Road and Selly Oak Hospitals such cases as are recommended by the Medical Officer of Health for maternity treatment. The Guardians collect from the patients such amounts towards the cost of treatment as the circumstances allow and the Corporation pay to the Guardians a sum to make up the amount of seven shillings per day of each patient's residence in hospital.

(3) CHILDREN :—

No hospital is provided or subsidised by the Corporation.

(4) FEVER :—

Smethwick and Oldbury Joint Isolation Hospital, Holly Lane, Smethwick (total 60 beds). Diphtheria and Scarlet Fever cases only.

(5) SMALLPOX :—

South Staffordshire Joint Smallpox Hospital, Bagnall, near Stoke-on-Trent.

INSTITUTIONAL PROVISION FOR UNMARRIED MOTHERS, ILLEGITIMATE INFANTS, AND HOMELESS CHILDREN :—

None at present.

AMBULANCE FACILITIES :—

(a) For Infectious Cases: Smethwick and Oldbury Joint Hospital Committee have a motor ambulance, which is kept at the Isolation Hospital, Holly Lane, Smethwick. (Telephone: Smethwick 159).

(b) For Non-Infectious and Accident Cases: Town Ambulance kept at the Fire Station, Rolfe Street, Smethwick. (Telephone: Smethwick 22).

CLINICS AND TREATMENT CENTRES.

INFANT WELFARE CENTRES :—

There are five Infant Welfare Centres in the Borough, and sessions are held on the following days from 2 to 4 p.m.

No. 1. Baptist Hall, Rawlings Road. Mondays and Wednesdays.

No. 2. 95, Soho Street. Mondays and Thursdays.

No. 3. St. Stephen's Hall, Sydenham Road. Wednesdays and Fridays.

No. 4. Smethwick Hall School, Devonshire Road. Tuesdays.

No. 5. Congregational Church Hall, Oldbury Road. Fridays.

ANTE-NATAL CLINIC :—

Held in the Chest Clinic, behind the Council House, on Thursday afternoons from 2 to 4.30 p.m. and on Saturday mornings from 10 to 12.30 o'clock.

SCHOOL CLINICS :—

Two School Clinics are provided, one at 95, Soho Street, Six Ways, and one at Smethwick Hall Schools, Devonshire Road. The days and times of attendance are as follows :—

Treatment Clinics :—

Six Ways: Monday, 2.30—5; Tuesday, 2.30—5; Wednesday, 2.30—5; Thursday, 9.30—11.30; Friday, 9.30—1.

Smethwick Hall: Monday, 9.30—11.30; Tuesday, 9.30—1; Wednesday, 9.30—11.30; Thursday, 9.30—11.30; Friday, 9.30—1.

Inspection Clinics :—

Six Ways: Friday, 9.30—1.

Smethwick Hall: Thursday, 9.30—1.

EYE CLINIC :—

Smethwick Hall: Mondays and Thursdays, 2—5 p.m.

IONISATION CLINIC :—

Six Ways: Tuesday, 10—12.30.

CLEANSING STATION (for Scabies, etc.) :—

Six Ways: Monday, 9.30—11.30; Wednesday, 9.30—11.30; Friday, 2.30—5.

DENTAL CLINIC :—

Six Ways: Every day from 9.30—5, except Monday and Thursday afternoons. For school children 5 to 7 years only.

CHEST CLINIC :—

Behind Council House. New cases seen by appointment on Wednesdays and Fridays from 3 to 5 p.m.

Cases taken on for observation or treatment attend on Tuesdays or Fridays from 10 to 1, or by appointment on Tuesday evenings from 6 to 8.

ULTRA-VIOLET LIGHT CLINIC :—

At Chest Clinic, behind Council House.

Mondays, Wednesdays and Fridays from 9.30—1.

Tuesday evening from 6—8. Additional sessions as required.

X-RAY EXAMINATIONS :—

At Chest Clinic: Mondays from 5 p.m. by appointment.

PROFESSIONAL NURSING IN THE HOME :—

(a) *General*: The Smethwick District Nursing Association, The Edward Cheshire Nurses' Home, Bearwood Road, Smethwick, has a nurse-matron and two nurses, who undertake general nursing among the poorer inhabitants in the district.* A grant of £25 per annum is made to the Association by the Council for emergency nursing of cases of Ophthalmia Neonatorum when for some reason the nurses of the Health Department cannot attend.

(b) *Infectious Diseases*: No service is provided, but a panel of handy-women is kept at the Health Office and their services utilised in certain cases.

*During the year under review 295 patients were nursed and a total of 8,345 visits paid.

MIDWIVES :—

Twenty midwives reside in the Borough, and a total of 42 notified their intention to practice in the area during the year.

In 1921 two midwives were trained and these with a third, already trained, were subsidised by the Council for a period of twelve months. No midwife is at present receiving a subsidy from the Council.

CHEMICAL WORK :—

This work is undertaken by the Public Analyst for the Borough.

Other Institutions available for the District.

GENERAL HOSPITAL, STEELHOUSE LANE, BIRMINGHAM :—

Out-patients' Department open daily from 9—10 a.m.

QUEEN'S HOSPITAL, BATH ROW, BIRMINGHAM :—

Out-patients' Department open daily at 9 a.m.

CHILDREN'S HOSPITAL, LADYWOOD ROAD, BIRMINGHAM :—

For children under 12 years of age. Daily from 1.30—2.30 p.m.

WOMEN'S HOSPITAL, SPARKHILL, BIRMINGHAM :—

(Out-patients' Department, Upper Priory, Birmingham). Daily (except Saturday) from 1 to 2 p.m.

EYE HOSPITAL, CHURCH STREET, BIRMINGHAM :—

Out-patients' Department open daily at 9 a.m.

SKIN AND URINARY HOSPITAL, JOHN BRIGHT STREET, BIRMINGHAM :—

Out-patients' Department open daily at 1.30 p.m.

EAR, NOSE AND THROAT HOSPITAL, EDMUND STREET, BIRMINGHAM :—

Out-patients' Department open daily at 9.30 a.m.

ORTHOPÆDIC AND SPINAL HOSPITAL, NEWHALL STREET, BIRMINGHAM :—

Out-patients' Department open daily (except Saturdays) at 2 p.m.

DENTAL HOSPITAL, GREAT CHARLES STREET, BIRMINGHAM :—

Daily from 9 to 10.15 a.m.

HOMŒOPATHIC HOSPITAL, Easy Row, Birmingham :—

Out-patients' Department open daily 9—10 a.m. (except Wednesday) and every afternoon from 2—3 o'clock.

MATERNITY HOSPITAL, LOVEDAY STREET, BIRMINGHAM.

Out-patients are seen on Tuesday and Thursday mornings from 9.30 a.m.

THE BIRMINGHAM GENERAL DISPENSARY has a branch at Cape Hill,

Smethwick—surgery hours, 2 to 4 p.m. daily (except Wednesday). During the year 1925, 10,305 attendances were recorded at this branch.

Local Acts, Bye-Laws, etc., relating to Public Health, in force in the County Borough of Smethwick.

LOCAL ACT.

Smethwick Corporation Act, 1901.

ADOPTIVE ACTS.

Baths and Wash-houses Acts—Adopted 11th Sept., 1885.

Infectious Disease (Prevention) Act, 1890—Adopted 10th Oct., 1890.

Public Health Acts Amendment Act, 1890—Adopted 14th Nov., 1890.

Private Street Works Act, 1892—Adopted 10th March, 1893.

Public Health Acts Amendment Act, 1907—the following parts adopted 18th Feb., 1908—Part II., Sections 17 to 33; Part III., Sections 34 to 38, 45 to 47, 49 to 51; Part IV., Sections 52 to 66 and Section 68; Part V., the whole part; Part X., the whole part.

Public Health Act, 1925—the following parts adopted 3rd May, 1926—Part II., Sections 13 to 33, and 35; Parts III., IV., and V., the whole parts.

BYE-LAWS.

Street Cleansing and Nuisances, 1856.

Slaughter-houses, 1893.

Nuisances, 1914.

Good Rule and Government, 1921.

REGULATIONS.

Dairies, Cowsheds and Milkshops, 1901.

INFANT MORTALITY DURING THE YEAR 1925.

CAUSE OF DEATH	Under 1 w'k.	1-2 w'ks.	2-3 w'ks.	3-4 w'ks.	Total under 4 w'ks.	1-2 m'nths	2-3 m'nths	3-4 m'nths	4-5 m'nths	5-6 m'nths	6-7 m'nths	7-8 m'nths	8-9 m'nths	9-10 m'nths	10-11 m'nths	11-12 m'nths	Total under 1 year
Measles ...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1
Whooping Cough ...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	3	4
Influenza ...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	2
Acute Miliary Tuberculosis ...	...	...	...	...	...	...	...	...	...	2	...	...	...	...	...	...	2
Tuberculous Meningitis ...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	1
Tuberculosis of Peritoneum ...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	1	...	2
Disseminated Tuberculosis ...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	1
Syphilis ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Intra-cranial Hemorrhage ...	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1
Bronchitis ...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1
Broncho-pneumonia ...	...	...	...	1	1	...	...	2	3	1	...	1	6	...	1	...	15
Stomatitis ...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	1
Inflammation of Stomach ...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1
Infective Enteritis ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Diarrhoea ...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	2
Gastro-enteritis ...	...	...	2	...	2	...	2	...	1	...	...	...	1	1	...	...	12
Intestinal Obstruction ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
Cellulitis of Scrotum ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Acute Abscesses ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Pemphigus Neonatorum ...	...	1	1	...	2	...	...	...	...	...	1	...	...	...	...	...	3
Other Skin diseases ...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	1
Congenital Hydrocephalus ...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	1
Cong. Malformation of Heart... Cong. Malformations ...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	1
Other Cong. Malformations ...	...	1	...	...	1	...	1	...	...	...	...	...	...	...	...	...	2
Premature Birth ...	21	6	6	...	33	3	1	...	...	...	...	...	...	...	...	...	37
Atrophy, Debility & Marasmus ...	1	1	...	...	2	2	...	...	2	1	...	...	...	...	...	...	7
Icterus Neonatorum ...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	1
Diseases of Umbilicus, etc. ...	1	...	...	1	2	...	...	...	...	...	...	...	...	...	...	...	2
Atelectasis ...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1
Injury at Birth ...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1
Lack of care ...	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1
Accidental Suffocation... Accidental Drowning ...	...	...	...	...	...	1	...	1	...	1	...	...	...	...	...	...	3
Totals ...	28	9	11	2	50	10	5	4	8	9	7	3	9	3	5	3	116

BIRTHS DURING THE YEAR { Legitimate 1,413. Illegitimate 35.

DEATHS DURING THE YEAR { Legitimate infants 107. Illegitimate infants 9.

Rate, 757. Rate, 2571.

Total 1,448

Total 116.

Rate, 801.

MATERNITY AND CHILD WELFARE.

SUMMARY OF STATISTICS FOR THE YEAR 1925.

BIRTHS.

Registered: (1) Legitimate, 1,413; (2) Illegitimate, 35; (3) Total, 1,448.

Notified within 36 hours of birth:—

(1) Live births, 1,234; (2) Stillbirths, 33; (3) Total, 1,267.

(1) By Midwives, 1,160; (2) By parents and doctors, 107.

In addition to this number particulars of 172 births notified to the Medical Officers of Health of adjoining areas, and relating to Smethwick residents, were transferred to this office.

INFANT DEATHS.

Number: (1) Legitimate 107; (2) Illegitimate, 9; (3) Total 116.

Rate per 1,000 births: (1) Legitimate, 75.72; (2) Illegitimate, 257.14; (3) Total, 80.11.

MATERNAL DEATHS.

Number of women dying in, or in consequence of childbirth:—(1) From Sepsis, 1; (2) from other causes, 6.

The maternal death-rate is 4.8 per 1,000 births, compared with 4.4 in 1924, 6.9 in 1923, 1.7 in 1922, and 4.5 in 1921. The rate for England and Wales for 1924 was 3.70 per 1,000 births.

OPHTHALMIA NEONATORUM.

Number of cases notified: 15; Genuine cases, 11; Non-genuine, 4. Cases treated by Health Department nurses: 7.

Cases treated at Birmingham and Midland Eye Hospital (including cases referred by nurses): 5.

Cases resulting in impairment of vision: None.

Exudate from the eyes was examined in five instances and Gonococci were found in all.

Visits paid to cases of Ophthalmia Neonatorum by the nurses during the year numbered 169.

It was not necessary to call in the assistance of the District Nursing Association during the year.

Notifications for past years :—

1925	1924	1923	1922	1921	1920	1919	1918	1917
15	27	31	32	34	61	43	54	49

ANTE-NATAL CLINIC (Dr. G. Ainscow reports as follows) :—

In July a second session of the Ante-Natal Clinic was commenced on Thursday afternoons. This extra session allows more time to be spent on each expectant mother and it is now a routine practice to ask each patient to attend once a month during the first seven months and once a fortnight during the last two months of pregnancy. The numbers of attendances have almost doubled that of 1924, and as the proper examination of a pregnant woman and the investigation of her case is, of necessity, a rather lengthy process, the time at each session is already fully occupied, but 1,448 births took place in Smethwick during the year and the 537 attendances at the Ante-natal Clinic only represent a small number of these births. It is therefore hoped that, to extend this very important work and make the attendance more in proportion with the births, it may be found possible to arrange further afternoon sessions.

The great obstacles to the Ante-natal Clinic, namely prejudice and old-fashioned ideas are gradually being overcome and women are beginning to expect ante-natal care, and expectant mothers now present themselves for examination at the Ante-natal Clinic early in their pregnancy without any prompting on the part of their midwife. Every effort is made both at the Ante-natal Clinic and Infant Welfare Centres to make the women realise that most of the conditions which give rise to risk and danger at the time of labour can be clearly foreseen and adequately prepared for if an investigation is made and supervision exercised during the months of pregnancy. Efforts are directed especially to securing the attendance of women expecting their first baby. None of the women who attended the Ante-natal Clinic died as the result of child birth. Women who were found to have any abnormality were sent to hospital or their own doctor and carefully watched and treated.

Several of the women who complained of sleeplessness, depression and irritability were subjected to small doses of ultra-violet light twice a week, and appeared to benefit considerably from their treatment. They slept better, appeared brighter and said that they felt much better after the "sunbaths." Besides the examination and care of the mother instruction is given at the Ante-natal Clinic to the expectant mother in the care of herself and infant, and in the principles of breast feeding. It is rather to the lack of knowledge of the principles of breast feeding than to the inherent disability which causes so many mothers to put their babies on to artificial foods. Each mother who attends the Ante-natal Clinic is also visited at least once a month by the Health Visitor of the district in which the mother resides. Instruction in the care of the breasts and breast feeding is continued and advice is given on the preparation for the confinement. Sterile sets of articles needed for the confinement can be obtained from the Ante-natal Clinic at cost price.

Since the establishment of the Ante-Natal Clinic in 1920, the total attendances have been as follows:—

1920	...	...	...	...	...	42
1921	...	...	...	...	...	107
1922	...	...	...	...	...	127
1923	...	...	...	...	...	241
1924	...	...	...	...	...	275
1925 (2 sessions from July)	...	...	...	...	...	537

MIDWIVES.

During the year 42 midwives gave notice of their intention to practice in the area; of these, 26 were trained, and 16 were bona-fide midwives. Four midwives left the district and two died during the year.

During the year a total of 916 births were attended solely by midwives, being 77.1 per cent. of the total births notified.

Each midwife has now an ante-natal register in which she keeps a record of any ante-natal work done by herself. The majority of the midwives try to keep this register, but say they still have some difficulty in getting the mothers to submit to ante-natal examination. Every midwife is urged to send as many of her cases as possible to the Ante-natal Clinic, and she receives a written report and advice upon each case from the Medical Officer. If it is found necessary to send a midwife's case to Hospital for confinement, the midwife receives a fee of one guinea as compensation for the loss of her case. The number of such fees paid during the year was 5.

The following series of lectures has been arranged for midwives, to be held at the Council House, Smethwick, commencing in January, 1926:—

Lecturer.	Subject.
DR. ETHEL CASSIE	"Management of Mother and Child during the First Fourteen Days."
DR. J. FURNEAUX JORDAN ...	"Examination of the Patient."
DR. HILDA SHUFFLEBOTHAM ...	"Venereal Diseases during Pregnancy."
MISS BEUMENT (Inspector of Midwives, Birmingham)	"The Responsibilities of the Midwife."

Medical aid was summoned in 129 cases by the midwives, the doctor's fees being paid by the Corporation in 61 cases. The complications for which medical aid was sought were as follows:—

MOTHER:—

Torn perineum	...	...	...	...	24
Prolonged labour	...	...	...	...	23
Abnormal presentation	...	...	...	...	6
Miscarriage	...	...	...	...	2
Hæmorrhage	...	...	...	...	3
Contracted pelvis	...	...	...	...	3
Occipito-posterior	...	...	...	...	1
Inertia	...	...	...	...	1
Adherent placenta	...	...	...	...	10
Convulsions	...	...	...	...	1
Abortion	...	...	...	...	2
Breech presentation	...	...	...	...	3
Inflamed breast	...	...	...	...	1
Albuminuria	...	...	...	...	1
Other causes	...	...	...	...	23

CHILD:—

Feebleness	...	...	...	...	11
Impacted head	...	...	...	...	3
Pemphigus	...	...	...	...	6
Discharging eyes	...	...	...	...	4
Premature birth	...	...	...	...	1

Routine visits paid to midwives	...	...	...	93
Visits in connection with Puerperal Fever	...	...	...	8
Number of notices received re:				
Intention to practice	...	...	...	42
Sending for medical help	...	...	...	129
Attendance at stillbirths (under C.M.B. Rules)	...	...	...	16
Attendance at stillbirths (under Notification of Births Act)	...	...	...	33
Death of mother or child	...	...	...	3
Cessation of breast feeding	...	...	...	6
Liability to be a source of infection	...	...	...	1

HEALTH VISITORS.

In practice the town is divided into seven districts, to each of which one Health Visitors is allotted. Her duties include:—

- School visiting and attendance at medical inspection.
- Following up certain cases until treatment is completed.
- Attendance at the Infant Welfare Centre for her district and the home visiting of the children who are attending.
- Routine visiting of new births notified.
- Routine visiting of children from 1 to 5 years.
- Visiting tuberculous patients.
- Attendance in rotation at the Cleansing Station.
- Attendance at the Ante-Natal Clinic.
- Visiting expectant mothers.
- Visiting and treatment of cases of Ophthalmia Neonatorum.
- Routine inspection of midwives.
- Investigation of applications for grants of milk at reduced price.
- Visiting mentally defectives in the area.
- Visiting children of war pensioners when requested by the War Pensions Committee.
- Visits in connection with non-notifiable infectious diseases, i.e., Measles, Whooping Cough, Chicken-pox, etc.

The total number of visits paid by the Health Visitors during the year was 26,662, compared with 24, 256 in the previous year.

In accordance with the wishes of the Ministry of Health, on the recommendation of their Inspector, Dr. Emily Creaser, in November, 1924, two additional nurses and a part-time lady medical officer commenced work in July, 1925. This has enabled an increased effort to be made in visits to expectant mothers and more frequent visiting of children from 1 to 5 years, and additional lectures and talks to the mothers at the Infant Welfare Centres. The increased staff has also allowed Bearwood, Six Ways and Sandwell Centres to be opened on two afternoons a week, instead of one afternoon a week, and has also made possible a second weekly session at the Ante-Natal Clinic. The overcrowding which was formerly experienced at these Centres has been ameliorated and the work has proceeded much more efficiently and smoothly since the additional help was obtained.

INFANT WELFARE CENTRES.

There are at present five Centres in the Borough, three of which are open on two half-days a week, and two on one half-day a week. In addition the Ante-Natal Clinic is open on two half-days a week, making a total of 10 sessions weekly, whereas last year we had but six. The fifth Centre, at Oldbury Road, has now been open two years and its numbers are increasing rather slowly. A Lady Medical Officer is in attendance at each session and the health visitor for the district is in charge of the Centre, assisted by a second health visitor, and voluntary workers.

The numbers attending the Centres have continued to grow and the increased staff is amply justified, as the following figures show. The average weekly attendance during the year was 509, compared with 370 for the previous year. The names of 1,193 children were added to the rolls during the year; by a coincidence this was also the figure for 1924. The marked increase in attendance with the same number of new names is accounted for by the fact that the mothers take advantage of the increased sessions and are attending much more regularly with their children. They are no longer kept waiting for such long periods at the Centres and they and their children receive more individual attention. In addition the mothers are learning to bring the "toddlers" to the Centres and are availing themselves of instruction and advice in the mental care of young children. Help in dealing with the psychological problems of the young child is very badly needed in many instances and the mothers appreciate and benefit by the advice given under this heading. It is a matter for congratulation to reflect that these 1,193 new names have been added to the rolls during the year, with the total number of births of 1,448 and that the majority of these new names were those of children under twelve months old.

The days and times of meeting, and the average attendance at each Centre is set out below:—

Centre.	Day and Time of Meeting.	Average Attendance.		
		Under 1 year.	1—5 years.	Total.
1. Rawlings Road	... Monday, 2 p.m.	61	37	98
Ditto	... Wednesday, 2 p.m.	32	22	54
2. 95, Soho Street	... Monday, 2 p.m.	27	18	45
Ditto	... Thursday, 2 p.m.	54	29	83
3. Sydenham Road	... Wednesday, 2 p.m.	46	33	79
Ditto	... Friday, 2 p.m.	18	10	28
4. Devonshire Road	... Tuesday, 2 p.m.	39	43	82
5. Oldbury Road	... Friday, 2 p.m.	23	17	40

The total attendances at the Centres during the year was 20,049, against 17,289 last year.

The "disc" system introduced at the Centres last year has proved most successful. By this method each mother is interviewed by the nurse in charge as soon as she enters the Centre and the system ensures that each mother is dealt with in the order of her arrival at the Centre. Any difficulties the mother may have in feeding the baby is discovered early and can then be remedied. Each mother and baby is seen by the doctor once a month or more frequently if the baby is ill.

The mothers bring their babies to the Centres quite regularly on the whole and take a very keen interest in the weight and well-being of their infants. In fact the mothers tend to wish their babies to gain too much weight each week. No mother is allowed to purchase food at the Centre unless it is prescribed by the doctor and the name, amount and date written on the weight card.

BREAST FEEDING.

Everything is done at the Centres to encourage mothers to breast-feed their infants, but still a fair number of mothers come to the Centres having on their own initiative taken the baby completely off the breast. The superstition that breast milk and cow's milk do not agree with each other is still common amongst the mothers, in other words that a deficiency of breast milk made up by a required quantity of cow's milk, fresh or dried, will upset the baby's digestion. A large amount of educative work is necessary to overcome this belief and short talks are given to the mothers on this and other subjects at the Centres.

The following figures show that there has been an increase in breast-feeding at every Centre since 1920 :—

The proportion of :—

(a) Breast fed children was :—

	1920.	1921.	1922.	1923.	1924.	1925.
Rawlings Road	45.1%	57.4%	57.0%	57.7%	53.7%	54.1%
Devonshire Road	52.8%	64.2%	65.7%	65.5%	69.8%	66.9%
Sydenham Road	60.7%	53.1%	72.6%	68.7%	77.2%	77.5%
95, Soho Street	57.9%	66.4%	63.1%	57.5%	65.4%	65.6%
Oldbury Road	—	—	—	—	66.6%	53.2%

(b) Artificially fed children :—

Rawlings Road	40.2%	25.9%	19.0%	17.3%	23.3%	21.2%
Devonshire Road	39.4%	20.8%	18.3%	9.2%	9.3%	16.9%
Sandwell	21.7%	29.1%	12.1%	8.1%	8.3%	9.6%
95, Soho Street	29.0%	21.1%	24.4%	35.0%	15.5%	17.8%
Oldbury Road	—	—	—	—	13.4%	21.4%

(c) Complementary and Supplementary feeding (breast, supplemented by artificial feeding) :—

Rawlings Road	14.7%	16.7%	24.0%	25.0%	23.0%	24.7%
Devonshire Road	7.8%	15.0%	16.0%	25.3%	20.9%	16.2%
Sydenham Road	17.6%	17.8%	15.3%	23.2%	14.5%	12.9%
95, Soho Street	13.1%	12.5%	12.5%	7.5%	19.1%	16.6%
Oldbury Road	—	—	—	—	20.0%	25.4%

Total attendances at the

four Centres	11,926	13,744	14,573	15,696	17,289	20,049
Pounds of Dried Milk						
sold	22,772	14,542	9,990	12,675	13,210	9,021

REGULARITY IN FEEDING INFANTS.

Mothers are now learning that it is the baby who is fed regularly every three or four hours who becomes the "good" baby. In consequence many more mothers are now feeding their babies regularly, with consequent improvement in the health of the infants. Night feeding is not now so prevalent.

PROPAGANDA.

In place of having special Health Weeks and Baby Weeks an effort has been made at continuous propaganda throughout the year by means of short talks to the mothers at the Centres. It is necessary to repeat the same elementary facts time and again and much patience is required to overcome many of the small weaknesses and superstitions cherished by the poorer-class mother.

Suitable leaflets in connection with the prevention of colds, whooping cough, measles, diarrhoea, use of "dummies," etc., and a handbook on infant welfare, are distributed at the Centres. Leaflets on weaning, and diet sheets for a baby aged 9 months, 10 months, 11 months, 12—18 months, and 18 months to 2 years, are given as a guide to mothers. Leaflets urging mothers to protect their children against diphtheria have also been distributed to the Centres.

SEWING CLASS.

A sewing class is held on Tuesday afternoons at the Health Office, 280, High Street, Smethwick. Patterns of modern baby clothes and clothes for children up to five years of age are shewn at all the Centres, and mothers can be taught to make these clothes at the class.

VOLUNTARY WORKERS.

Our very best thanks are due to the voluntary workers at the Centres. They attend most regularly and are always willing to give whatever assistance is required. Their work is of great value to the town.

SUPPLY OF MILK TO EXPECTANT AND NURSING MOTHERS AND YOUNG CHILDREN. (Maternity and Child Welfare Act, 1918).

While there was a still further improvement in the prevailing conditions of unemployment in the town the administration of this scheme has entailed a considerable amount of work in the Department during the year. Grant of milk at reduced price are made to:—

- (a) Nursing mothers who are actually suckling their infants;
- (b) Expectant mothers during the last two months of pregnancy;
- (c) Children up to three years of age;
- (d) Exceptionally to children from 3 to 5 years on the certificate of the doctor;

in cases where the family income (after deducting the amount of the rent) falls below a certain limit.

The quantity supplied does ordinarily exceed 1 pint per eligible person per day, but in exceptional cases of infants from 3 to 18 months, $1\frac{1}{2}$ pints may be supplied on certificate of the doctor. In certain cases, on the recommendation of the Medical Officer at the Infant Welfare

Centres, dried milk is supplied in lieu of fresh milk. Orders are granted for 14 days in the first instance, and applications reviewed every two weeks.

Cases receiving assistance during the year : 209.

Total cost : £186 9s. 7d.

Average cost per case : 17s. 10d.

Average duration of case : 12½ weeks.

ULTRA-VIOLET RADIATION.

CLINIC, STAFF AND EQUIPMENT.

In September, 1924, the Light Clinic was inaugurated by the Smethwick Health Committee. Premises in the existing Clinic for Chest Diseases were used, including a waiting-room, consulting room, dressing cubicles, an office, and the treatment room. The temperature of the latter can be maintained at 60 deg.F. to 70 deg.F. by means of a gas fire. A small revolving stool and chairs are provided.

At first two sessions were held weekly, on Monday and Friday afternoons, but the popularity of this Clinic grew so rapidly and the benefit was so soon apparent, that seven sessions were introduced, and as many as 124 patients were attending, some bi-weekly and some three times a week. Ante-natal mothers were given two sessions to themselves.

The staff consists of one medical officer and two nurses.

DESCRIPTION OF APPARATUS USED.

The type of lamp used at the above Clinic is known as the "K.B.B." Quartz Mercury Vapour Lamp. The assembly consists of the lamp and its stand, switch, a series resistance, and a voltmeter and amperemeter. The lamp works a 220 to 250 volt direct current circuit, being connected to a 5 ampere plug with the resistance in series. Later a similar lamp, was suspended from the ceiling so that for general baths, a patient could sit between the lamps and have back and front exposed simultaneously, thus halving the time of treatment taken with one lamp only.

CASES TREATED.

One hundred and sixty-five cases under the heading of Maternity and Child Welfare were treated during the year. Of these 47 were expectant mothers referred from the Ante-Natal Clinic, suffering chiefly from debility, insomnia and anæmia. The remaining cases were babies and "toddlers" referred from the Infant Welfare Centres, and suffering from marasmus, rickets, delayed dentition, bronchitis, whooping cough, and various skin diseases, and babies who, for some reason, were "not thriving." The bulk of these cases came under the heading of various manifestations of rickets and those "not thriving," children who for some reason or other were "hanging fire" and showing various disturbances of the nervous or alimentary system, and disturbed metabolism.

METHOD.

At this Clinic the babies attend three times a week. The mother holds the infant at 4 feet from the lamp at the first instance, exposing the baby for two minutes to the back and two minutes to the front of the body. This dose is gradually increased by one minute per week to five or six minutes. This dosage is usually quite sufficient for most infants, but those who appear to stand the light well are brought later on to three feet from the lamp. The babies' eyes are protected by bandages and the mothers and "toddlers" wear goggles.

RESULTS.

In the majority of cases improvement resulted, shown by increased capacity for movement, greater contentment and alertness, and improvement of the whole general physical condition. Occasionally a light sensitive child was met with even with the above mild dosage. This is shown by fretfulness, sleeplessness, and loss of appetite. These cases are moved to six feet from the lamp and gradually brought nearer at each sitting. All cases responded to these methods. It would appear that very brief exposures are quite sufficient to produce satisfactory results in babies and young children.

The mothers are immensely pleased with this type of treatment and some difficulty is met with in getting them to cease attendance in many cases.

In the writer's opinion, every modern infant Welfare Centre should possess some source of ultra-violet radiation and during the winter months mild doses should be given at least once a week to all children in industrial towns. By this means rickets and allied disorders could be practically abolished from the infant population of our towns.

In Whooping Cough in infants and young children, provided the cases are treated early, ultra-violet radiation gives most encouraging results. Improvement is seen first in a lessening of the number and severity of the paroxysms, and lessening of cough and sickness, and in the general aspect of the patients who are not so easily exhausted by the disease; further there is an absence of complications. Small doses are given in this condition three times a week.

A complete and exhaustive report on "The Use of Ultra-Violet Radiation in the Work of the Public Health Department" was presented to the Council in February, 1926, and forwarded to the Ministry of Health.

Report of the Chief Sanitary Inspector.

Sanitary Administration.

INSPECTION OF CANAL BOATS.

The number of boats inspected was 64, as against 56 in the previous year. Commenting upon the condition of the boats and occupants, I have to report that in this particular, 9 were found to contravene the Acts and Regulations, viz. :—

Certificate not produced	...	...	...	5
Overcrowding	...	...	...	2
Marking	...	...	...	2
Painting	...	...	...	2

Notices were served in respect of these infringements and all the requirements were complied with. No case of infectious disease occurred, and it was not found necessary to detain any boat for the purpose of cleansing.

FACTORIES AND WORKSHOPS.

The visits paid to Factories and Workshops and work places numbered 113, and in addition 69 visits were paid to outworkers' premises.

Five notices were received from H.M. Inspector of Factories in respect of certain workshops and factories relative to limewashing and the provision of separate water closets. Special visits were paid and the defects remedied.

1.—INSPECTION OF FACTORIES, WORKSHOPS & WORKPLACES.

INCLUDING INSPECTIONS MADE BY SANITARY INSPECTORS OR
INSPECTORS OF NUISANCES.

Premises. (1)	Number of		
	Inspections. (2)	Written Notices. (3)	Prosecutions. (4)
FACTORIES (Including Factories Laundries)	19	4	—
WORKSHOPS (Including Workshop Laundries)	94	3	—
WORKPLACES (Other than Outworkers' premises)	—	—	—
TOTAL	113	7	—

2.—DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORKPLACES.

Particulars. (1)	Number of Defects.			Number of Prosecutions (5)
	Found. (2)	Remedied. (3)	Referred to H.M. Inspector (4)	
<i>Nuisances under the Public Health Acts :—*</i>				
Want of cleanliness	3	3	—	—
Want of ventilation	1	1	—	—
Overcrowding	—	—	—	—
Want of drainage of floors	—	—	—	—
Other nuisances	—	—	—	—
Sanitary accommodation {	insufficient ...	2	2	—
	unsuitable or			
	defective	1	1	—
	not separate			
for sexes	2	2	—	—
<i>Offences under the Factory and Work- shop Acts :—</i>				
Illegal occupation of underground bakehouse (s. 101)	—	—	—	—
Other offences	—	—	—	—
(Excluding offences relating to outwork and offences under the Sections men- tioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921.)				
TOTAL	9	9	2	—

*Including those specified in sections 2, 3, 7 and 8 of the Factory and Workshop Act, 1901, as remediable under the Public Health Acts.

Sanitary Circumstances of the Area.

WATER.

The town is supplied with an excellent water by the South Staffordshire Waterworks Company and the source of the supply is from deep boreholes chiefly through red sandstone. The possibility of organic contamination is therefore extremely remote. It has no plumbo-solvent action and its hardness is in the region of 20 parts per 100,000.

There is no other source of water supply in the Borough and I am informed by the Company that the number of premises supplied on the 31st of December was 16,031. During the year samples were taken from various localities in the town and submitted to the Public Analyst whose reports show the water to be a very satisfactory drinking water. The majority of the working class dwelling-houses in the town have got a separate water supply laid on in the house but in a certain proportion of the older houses a common stand pipe in the yard serves a number of houses. As these houses are from time to time dealt with under the Housing Acts the provision of a separate water supply to each house and the demolition of the old standpipe is secured. It is not possible to state the exact number of houses served by standpipes.

RIVERS AND STREAMS.

There are several brook courses within the Borough boundary, most of them being culverted for some portion of their length where they pass under streets or buildings. None of these streams receive any pollution from sewers or drains, but it has been found that the uncovered portions of the brooks, where they pass the back gardens of inhabited houses, have a tendency to become obstructed and polluted by reason of carelessness on the part of tenants who use them as a dumping ground for garden refuse, old tins and bottles, etc.

During the year under review a serious effort was made to prevent this pollution, and a letter was sent to the occupier of every house situate and adjoining a brook course, pointing out the serious and cumulative character of the nuisance caused and drawing attention to the provisions of the Rivers Pollution Prevention Act, 1876, which provides a daily penalty against persons obstructing or polluting any stream. I have to thank the Borough Surveyor for his co-operation in this matter. So that more reliable observations could be made of the effect of this warning he caused each stream to be thoroughly cleaned out at about the time the letters were delivered. It is pleasing to be able to record that this action has had the desired effect and there has not been a single complaint of obstruction or pollution since.

DRAINAGE AND SEWERAGE.

With the exception of a few old houses situate between the two canals where a sewer cannot be constructed the whole of the town is connected up by means of efficient and reasonably modern systems of drainage to the main sewerage system. All the sewage is dealt with by the Birmingham Tame and Rea Drainage Board of which Smethwick is one of the constituent authorities. The sewers are at present ventilated by means of ventilating manhole covers at the street level. This system is perhaps open to the objection that whilst a very free circulation of air is maintained within the sewers there is in dry seasons, when the sewage is of a concentrated character, a tendency to offensive emanations from these ventilators. In one of the areas of the town where this nuisance has been most pronounced an experiment is to be made with a system of ventilation which provides for tall vent shafts to be fixed at the higher points of the various branch sewers. By this means the ventilators at street level will be made to act as inlets for fresh air whilst the raised shafts will provide foul air outlets.

CLOSET ACCOMMODATION.

The closet accommodation consists for the most part of water closets with separate fresh water flushing cisterns. There are, however, about 440 waste water closets which, whilst they cannot be regarded as entirely satisfactory from a sanitary point of view, are for the most part reasonably efficient if given sufficient attention by the tenants. About

a dozen houses and one or two works situate between the two canals, where it has not been possible to construct a sewer, are served by pan closets and these are regularly emptied by the Local Authority. These houses are among the oldest in the Borough and as it is likely that most of them will in the not far distant future become the subject of reconstructions schemes it has not been thought necessary to attempt any improvements upon the present type of closet.

SCAVENGING.

The refuse collection and disposal is undertaken by the Public Works Committee under the supervision of the Borough Engineer and Surveyor. A weekly collection is carried out. It is pleasing to be able to record that after some years of idleness the Destructor was again brought into use at the end of April this year and is dealing in a satisfactory and hygienic manner with the domestic and trade refuse.

During the five years period under review an intensive campaign has been carried out with a view to securing the provision of galvanised iron bins in lieu of existing unsatisfactory ashpits. In the years 1923 and 1924, 13,253 visits were made by your Sanitary Inspectors in connection with this one matter alone and a total of 7,573 galvanised iron bins, with covers, were secured. Of this number, 6,746 were provided by the owners in response to notices served under Section 36 of the Public Health Act, 1875, and 627 were provided by the Council in default or at the request of owners. In 537 cases the owners complied with the notices by either erecting or repairing an ashpit. The position in the town with regard to ashes accommodation at the close of the year is as follows:—

Number of houses with galvanised iron bin and cover	13,079
Number of houses with a good ashpit with proper door and covering	2,945

Sanitary Inspection of the Area.

REGISTER OF COMPLAINTS.

One of the sources of information as to isolated defective conditions and other sanitary matters in connection with property continues to be furnished by the Complaint Book, in which is entered details of all complaints received. These numbered 488, as compared with 392 for the previous year. Of this number, 11 instances of defective water fittings were reported to the S.S. Water Works Co., and in 35 instances matters relative to sewers and street gullies were referred to the Borough Surveyor's Department.

These complaints were in connection with 1,043 houses. Inspections and enquiries revealed the following defects, which were at once dealt with by the service of the usual notices and the requirements indicated in these notices were complied with.

The following is a list of defects found :—

Dirty Premises	...	...	...	...	...	137
Roofs and Eaves Gutters defective	...	...	...	...	...	197
Yard and W.C. Drains blocked	...	...	...	...	...	134
Yard Surfaces defective	...	...	...	...	...	23
Defective Sinks and Waste Pipes	...	...	...	...	...	17
Accumulations of offensive matter	...	...	...	...	...	37
Floors, Walls, etc., defective	...	...	...	...	...	211
W.C.'s without proper flushing arrangements	...	...	...	...	...	34
Ashbins or Ashplaces defective	...	...	...	...	...	56
Water Closets defective	...	...	...	...	...	40
Insufficient Closet Accommodation	...	...	...	...	...	6
Insufficient Lighting and Ventilation	...	...	...	...	...	36
Overcrowding	...	...	...	...	...	26
Animals kept so as to be a nuisance	...	...	...	...	...	10
Water Fittings defective	...	...	...	...	...	3
Breach of Bye-laws	...	...	...	...	...	1
Dampness	...	...	...	...	...	21
Insufficient Water Supply	...	...	...	...	...	3
Dangerous Buildings	...	...	...	...	...	16
Insufficient Drainage	...	...	...	...	...	2
Defective Drainage	...	...	...	...	...	16
Smoke Nuisances	...	...	...	...	...	3
Defective Rainwater Cisterns	...	...	...	...	...	14
Defective Washboilers	...	...	...	...	...	2

1,045

SUMMARY OF INSPECTIONS.

					Visits paid.	Defects found.
Housing	...	...	...	...	68	302
On Complaint	...	...	...	...	1,043	1,045
Miscellaneous	...	...	...	...	180	—
Infectious Diseases	...	...	...	...	288	36
Slaughterhouses	...	...	...	...	1,021	—
Meat and Food Shops	...	...	...	...	642	—
Dairies, Cowsheds and Milkshops	...	...	...	...	172	10
Pigstyes	...	...	...	...	5	—
Factories	...	...	...	...	19	5
Workshops	...	...	...	...	33	6
Outworkers	...	...	...	...	69	—
Bakehouses	...	...	...	...	61	2
Canal Boats	...	...	...	...	66	9
Markets	...	...	...	...	135	—
Schools	...	...	...	...	5	—
Drains Tested	...	...	...	...	10	2
Smoke Observations	...	...	...	...	24	—
Visits to Works in Progress	...	...	...	...	191	—
Re-Inspections re Notices served	...	...	...	...	1,411	—
Visits re Refuse Accommodation	...	...	...	...	359	165
Re-visits re Refuse Accommodation	...	...	...	...	85	—
Private Slaughtering	...	...	...	...	377	—
Brook Courses	...	...	...	...	6	—
					—	—
					6,270	1,582
					—	—

VARIETY OF DEFECTS.

Dirty Premises	...	...	...	...	...	189
Roofs, Spouting and Eaves Gutters	...	...	...	...	...	255
Yard and W.C. Drains blocked	...	...	...	...	...	147
Yard Surfaces	...	...	...	...	...	28
Defective Sinks and Waste Pipes	...	...	...	...	...	24
Accumulations of Offensive Matter	...	...	...	...	...	38
Floor, Walls, etc., defective	...	...	...	...	...	291
W.C.'s without proper Flushing Arrangements	...	...	...	...	...	37
Ashbins and Ashplaces defective	...	...	...	...	...	225
Water Closets defective	...	...	...	...	...	49
Waste Water Closets defective	...	...	...	...	...	4
Insufficient Lighting and Ventilation	...	...	...	...	...	85
Overcrowding	...	...	...	...	...	25
Animals kept so as to be a nuisance	...	...	...	...	...	10
Water Fittings defective	...	...	...	...	...	4
Smoke Nuisances	...	...	...	...	...	3
Breach of Bye-laws	...	...	...	...	...	3
Houses without Sinks	...	...	...	...	...	2
Insufficient Water Supply	...	...	...	...	...	10
Dampness	...	...	...	...	...	63
Dangerous Buildings	...	...	...	...	...	13
Single Houses	...	...	...	...	...	3
Insufficient Drainage	...	...	...	...	...	6
Defective Drainage	...	...	...	...	...	18
Insufficient W.C. Accommodation	...	...	...	...	...	8
Soft Water Cisterns defective	...	...	...	...	...	14
Washboilers defective	...	...	...	...	...	3
Unfit Houses	...	...	...	...	...	1
Breach of Regulations	...	...	...	...	...	24

1,582

LETTERS AND NOTICES SENT OUT.

Letters	...	...	...	...	...	...	1,487
Preliminary Notices	...	...	...	...	...	...	668
Secondary Notices	...	...	...	...	...	...	70
Statutory Notices	...	...	...	...	...	...	132
Statutory Notices under Sec. 36, Public Health Act, 1875, re Bins							
	...	...	...	...	...	...	102
Housing Notices	...	...	...	...	...	...	71
Cleansing Notices re Infectious Disease	...	...	...	...	...	...	85
Factory and Workshop Notices	...	...	...	...	...	...	7
Canal Boat Notices	...	...	...	...	...	...	9
Circulars	...	...	...	...	...	...	803
							3,434

SMOKE ABATEMENT.

From time to time observations are taken of the various factory chimneys within the Borough and in cases of serious emissions of dense black smoke the manufacturer is warned by notice or letter, usually with satisfactory results. Twenty-four half-hourly observations were made during the year and three black smoke nuisances recorded.

In October, 1925, apparatus for the collection of dust deposit, with a view to determining the extent of atmospheric pollution, was installed in three distinct districts of the town. The character of these districts is as follows: District 1—an open area in a central park. District 2—a purely residential area. District 3—an industrial area.

The following is a summary of the deposits recorded in the three districts in terms of tons per square mile:—

	District 1.	District 2.	District 3.	Average.
October	21.9	38.47	101.28	53.89
November	21.73	42.40	95.20	53.11
December	18.71	38.81	84.77	47.43

Premises and occupations which can be controlled by bye-laws or regulations:—

There are no common lodging houses in the town. Although many householders let a portion of their houses to another family, consequent upon the acute housing shortage, there are no houses let in lodgings in the technical sense of the term, neither have we any scheduled offensive trade carried on within the Borough boundary.

The premises in the town which can be controlled by bye-laws or regulations are confined to slaughterhouses, bakehouses, etc., and these are dealt with in other parts of the report.

HOUSING.

GENERAL HOUSING CONDITIONS IN THE AREA.

At the end of the year 1925, the housing conditions of the working class population are unsatisfactory. Not only is there an increased house shortage but the existing houses are rapidly falling into a state of disrepair, partly due to the excessive wear and tear to which they are subjected by reason of the excessive number of occupants and partly to the reluctance of owners to carry out repairs due to difficult economic conditions. It is estimated that the shortage of houses at the close of the year must be somewhere between three and four thousand; in other words between three and four thousand families are living in other people's houses, some of the houses containing three or even four families. Many of the houses containing these excess families are ill adapted for decently housing even one family.

OVERCROWDING.

It will be seen from the remarks above that the problem of overcrowding in the town is an acute one and one which must sooner or later have a very prejudicial effect on the health of the present generation of young children. Quite a large proportion of the excess families have not more than one sleeping room in which to accommodate the whole family irrespective of its size. Hundreds of them there are whose sole accommodation for living and sleeping is one tiny apartment shut off from the rest of the house. Virtually one roomed back to back houses, which are infinitely worse than the worst of the unfit houses scheduled for demolition. In this one room all the occupations of the day and night are performed. Parents and family have to rise and dress, wash, cook and eat their meals, etc. A fire burns all day in this room, winter and summer, as it is the only means of cooking and heating water. By the time night comes the whole family crowds itself again into one bed and attempts to secure what refreshing sleep it may in an atmosphere fouled and vitiated by the day's occupations. Scores of these families consist of a man and his wife with children of both sexes, some of adolescent age. Under these conditions the preservation of cleanliness and bodily health are as difficult as the maintenance of modesty. Moreover, the splendid work that is being done by the Maternity and Child Welfare section of the Department must be largely thwarted and rendered abortive by the hopelessness of the surroundings into which so many of our babies are born.

Where cases of overcrowding come under the observation of the Department notices are served on the occupiers of the houses calling for the abatement of the nuisance, in the hope of stimulating the subtenants to obtain more suitable and more commodious lodgings. In a certain number of cases this action has had the desired effect, but any attempt to secure a compulsory compliance would necessitate turning

families into the street and this, of course, cannot be contemplated. The following list gives a few typical cases of overcrowding which have been dealt with:—

Case Na.	No. of Families.	No. of Occupants.	No. of Living.	No. of Rooms. Sleeping.	Remarks.	Action taken.
6	3	17	2	2	8 persons in one room.	Notice served.
10	2	13	2	2		"
15	2	15	2	2	9 persons sleeping in one room.	"
29	2	14	2	2	7 persons living and sleeping in one room.	"
30	2	14	2	2		"
32	2	14	2	2		"
33	2	16	3	3	8 persons living and sleeping in one room.	"
34	2	7	1	1	Back to back house.	"
36	2	18	2	2		"
37	2	15	3	3	Case of Surgical Tuberculosis	"
38	2	12	1	2	Back to back house—case of Tuberculosis.	"
39	2	15	1	2	11 persons living and sleeping in one room	"
40	2	15	2	2		"
41	2	18	1	1	Back to back house.	"
43	2	15	2	3	8 persons sleeping in one room.	"
44	3	19	2	2		"
47	2	16	3	3	6 persons living and sleeping in one room.	"
48	2	15	2	2	8 persons living and sleeping in one room.	"
53	2	15	3	3	Case of Phthisis	"
55	5	16	2	4	Case of Tuberculosis	"
62	2	17	2	2	House filthy	"
63	2	15	2	2	House filthy	"
65	3	21	2	2		"
66	2	15	2	3	Man, wife and two adult children live and sleep in one tiny room.	"
70	2	14	2	2		"

FITNESS OF HOUSES.

(i.) GENERAL STANDARD OF HOUSING IN THE AREA:—

The general standard of housing in the district is good for an industrial area. The majority of the working class dwellings are of a type and structure which permits of adequate lighting and ventilation and were it not for the growth of overcrowding, due to the house shortage referred to above, a satisfactory scheme for dealing with the small amount of slum property in the town could have been formulated. With the exception of about five hundred houses, which are scheduled as either permanently or temporarily unfit for habitation, the working

class houses in the district have the advantage of good wide streets and an adequate back garden area, giving better external ventilation than it is customary to find in an industrial town.

The defects which are most frequently met with in the houses inspected are dilapidated eaves guttering, defective plastering of walls and ceilings, dirty walls and ceilings and defective floors. There is not the slightest doubt that these defective conditions are largely contributed to by the carelessness and neglect of many of the tenants occupying the houses. Since the war the trouble has undoubtedly been aggravated by the prevailing overcrowding; a house containing two or more families is naturally subjected to a good deal rougher usage than it would normally receive. Many owners are doing their best under difficulties and considerably greater expense than formally to keep their houses in something like decent repair. But it is unfortunately a fact that a certain amount of the poorer property is falling into the hands of speculative buyers who deliberately buy it as a paying proposition with apparently no intention of keeping it in repair. These individuals are not only charging the increase of rent permitted by the Increase of Rent and Mortgage Interests (Restrictions) Act for maintenance repairs but are also surcharging those tenants who sublet any part of the house. Nothing short of compulsion will induce this type of landlord to do any thing for the health and comfort of his tenants, and it is in this direction where there is scope for valuable work under the Housing Act, 1925.

Although the record of work done under the Housing Acts during the year under review is not a large one in comparison with the number of houses requiring attention, it is pleasing to be able to report that the Council has in 1926 appointed an additional Inspector who will be solely occupied in house to house inspection under the Housing Act, 1925, and will systematically secure complete repair and renovation of those houses in the town which are considered to fall below a reasonable standard of fitness.

(ii) GENERAL ACTION TAKEN AS REGARDS UNFIT HOUSES UNDER (a) PUBLIC HEALTH ACTS; (b) THE HOUSING ACTS.

By far the greater proportion of houses inspected for various structural and sanitary defects during the year under review were dealt with under the Public Health Acts. In most cases owners have readily complied with preliminary notices which are always served at once on the day that defects are noted. After each Meeting of the Sanitary Authority a statutory notice is served in connection with those nuisances that remain unabated and it is gratifying to record that it has not been necessary to resort to legal proceedings in a single case during the year.

Where a block of property has been found to be in a very dilapidated or unsatisfactory state and the defects numerous a house to house inspection has been made under the Housing (Inspection of District) Regulations, 1910, or the Housing Consolidated Regulations, 1925.

(iii) DIFFICULTIES FOUND IN REMEDYING UNFITNESS.

It is frequently found that a property which has been allowed to fall into a state of disrepair is owned by a person in poor circumstances, perhaps by an aged person who has had to depend on the rents for a livelihood and who, due to the altered economic conditions, aggravated in certain cases by the difficulty in securing regular payment of their rents, has found it impossible to put anything aside for repairs. These cases cause a certain amount of perplexity. It is essential for the health and well-being of the tenants, as well as for the future of the property itself, that certain repairs should be carried out; on the other hand the expenditure involved threatens the livelihood of the owner. The only available solution lies in the Council executing the repairs in the owner's default and recovering the cost of this in the easiest manner possible, i.e., by extending the repayment over a protracted period.

The difficulty in the way of dealing with the unfit houses is the obvious one of providing suitable alternative accommodation for the de-housed families. The type of houses which is being erected by the Corporation as part of the Municipal Housing Scheme is not suitable for occupation by the class of tenant who would be dispossessed by reason of a slum clearance scheme. These people can neither pay the rent of a semi-detached municipal house nor have they any desire to live in a garden city.

It would appear that a scheme for demolishing the unfit houses in the borough and for converting the three hundred back to back houses into through houses would necessitate the erection of a sufficient number of modest houses of four to five rooms, built in terraces or a modified form of tenements, for re-housing the present occupants.

(iv) CONDITIONS AFFECTING HOUSING.

The conditions so far as they affect housing as regards water supply, closet accommodation and refuse disposal have already been dealt with under the appropriate headings in the foregoing sections of the report.

UNHEALTHY AREAS.

The unfit houses in the town are not confined to any particular locality but are distributed throughout the older parts of the town; consequently it has not been found necessary to schedule any area as an unhealthy area.

GENERAL AND MISCELLANEOUS.

Efforts have been continued throughout the year with a view to securing the replacement of the existing ashpits with sanitary dustbins, and information as to the proper use of bustbins is from time to time distributed among householders.

Notices to cleanse dirty premises have also been in numerous instances served upon tenants and sub-tenants with a certain measure of success. In order to encourage and help people in poorer circumstances limewash brushes are loaned by the Department.

In certain instances where repeated stoppages of W.C.'s used in common have been encountered special notices have been served on each of the occupiers concerned, calling for the opening and cleansing of the W.C., and it has been found that this action results in greater care and consideration in the treatment of these conveniences.

HOUSING STATISTICS FOR THE YEAR 1925.

Number of new houses erected during the year :—

(a) Total (including numbers separately under (b))	...	...	84
(b) With State assistance under the Housing Acts :			
(i) By the Local Authority	...	...	Nil
(ii) By other bodies or persons	...	...	80

1.—UNFIT DWELLING-HOUSES.

Inspection.

(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	...	1,768
(2) Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910, or the Housing Consolidated Regulations, 1925	...	68
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	...	1
(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	...	67

2.—REMEDY OF DEFECTS WITHOUT SERVICE OF FORMAL NOTICES.

Number of dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	417
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3.—ACTION UNDER STATUTORY POWERS.

A.—Proceedings under Section 3 of the Housing Act, 1925.

(1) Number of dwelling-houses in respect of which notices were served requiring repairs	...	...	...	...	...	67
(2) Number of dwelling-houses which were rendered fit after service of formal notices :—						
(a) By owners	...	...	...	...	...	97
(b) By Local Authority in default of owners	...					Nil
(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close	...	...	...	...	...	Nil

B.—Proceedings under Public Health Acts.

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	...	...				234
(2) Number of dwelling-houses in which defects were remedied after service of formal notices :—						
(a) By owners	...	...	...	...	...	212
(b) By Local Authority in default of owners	...					9

C.—Proceedings under sections 11, 14, and 15 of the Housing Act, 1925.

(1) Number of representations made with a view to the making of Closing Order	...	...	...	...	...	Nil
(2) Number of dwelling-houses in respect of which Closing Orders were made	...	...	...	...	...	Nil
(3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit	...	...	...	...	...	Nil
(4) Number of dwelling-houses in respect of which Demolition Orders were made	...	...	...	...	...	Nil
(5) Number of dwelling-houses demolished in pursuance of Demolition Orders	...	...	...	...	...	Nil

Inspection and Supervision of Food.

(a) MILK SUPPLY.

DAIRIES, COWSHEDS AND MILKSHOPS.

The number of Dairymen on the register at the end of the year was 405, as compared with 387 in the previous year. Additional Dairymen registered during the year numbered 18.

The number of cowsheds is seven.

Generally speaking the premises where milk is stored are kept in a clean and satisfactory condition. Milk purveyors are instructed as to the importance of keeping all milk vessels covered so as to protect the contents from contamination by dust and flies.

PASTEURISATION OF MILK.

The milk pasteurising plant established by Messrs. Bray and Bailey in Sycamore Road continues to deal with some 300 gallons of milk daily. 250 gallons of these are pasteurised and the remaining 50 gallons sterilised and bottled. Of the pasteurised milk 95 gallons are bottled for sale to the public and 155 gallons are sold from churns in the same manner as ordinary milk. It is to be regretted that there is not a greater demand on the part of the public for the bottled pasteurised milk.

During the year 24 samples of milk were submitted to the University Public Health Laboratory for examination for bacterial count and the certified results were as follows:—

Date.	BACTERIA PER C.C.		
	Before Pasteurisation.	After cooling. 37 degrees F.	After Pasteurisation and Bottling.
January	42,777	1,010	7,233
March	42,380	540	755
April	109,920	2,022	21,043
May	96,486	10,303	10,436
August	2,754,000	42,542	43,550
October	1,277,000	755	535
November	21,473	1,860	1,692
December	128,252	2,590	3,570

EXAMINATION OF MILK FOR TUBERCLE BACILLI.

Three samples of milk were submitted to the University Public Health Laboratory and all were certified free from Tubercle Bacilli.

(b) MEAT.

INSPECTION OF SLAUGHTERHOUSES, MEAT & OTHER FOODS.

The Public Health (Meat) Regulations, 1924, came into operation on the 1st day of April this year. These Regulations imposed the duty on any person slaughtering an animal for sale for human consumption of giving not less than three hours notice of the day, time and place of slaughtering. Where by reason of accidental injury, illness, etc., the emergency slaughtering of an animal is necessary, notice must be given as soon as reasonably possible and the carcase of such animal must be

retained for examination by the Inspector. Provisions are also included in the Regulations for securing cleanliness in the preparation and handling of meat intended for human consumption. Gut scraping, tripe cleaning, the manufacture or preparation of articles of food for man or for animals are prohibited inside slaughterhouses. The slaughter of animals other than those intended for human consumption is also prohibited in slaughterhouses.

Other provisions for securing the cleanliness of meat exposed for sale on stalls, in shops and stores are included in the Regulations. It may be mentioned, however, that the position in this respect is unsatisfactory throughout the country as the Regulations are worded in a somewhat ambiguous manner and too much has been left to local interpretation, with the result that each town has established its own standard of what may be regarded as "steps reasonably necessary to guard against contamination." In this town, however, the meat trade generally has exhibited a commendable desire to meet the standard set by the Local Authority and, with one or two exceptions, no difficulty has been experienced in inducing the butchers to comply with the spirit of the new Regulations. The vexed question of the closed shop window is one which has presented most difficulty, owing to the anomalous position with regard to meat stalls which have been allowed to retain the open front.

The administration of the Regulations has placed a considerable amount of extra work on the Inspectors as, not only has it been possible to inspect every slaughterhouse at all times when slaughtering was in progress, but the system of compulsory notification has also enabled us to examine those pigs killed on private premises for home consumption which prior to the Regulations was rarely possible. As proof of this it will be seen from the following table that a total of 3,771 animals and carcasses (of which 377 were pigs slaughtered on private premises) were examined during the year as against 1,416 last year. The quantity of food seized and destroyed is correspondingly high, the total weight being 3,824 lbs as against 1,697 lbs last year.

No arrangement has been made by the Corporation for marking meat under the Regulations of 1924. There is no Public Abattoir in the town. Meat and other foods surrendered or seized is disposed of by burning at the Destructor.

The following is a summary of the number of animals and carcasses examined during the year, giving a total of 3,771:—

			Before Slaughter.	During Slaughter.	After Slaughter.	Total.
Oxen	...	...	38	18	605	661
Cows	...	...	5	2	25	32
Calves	...	...	4	1	64	69
Sheep	...	...	89	29	1,537	1,655
Pigs	...	...	64	24	1,266	1,354
			200	74	3,497	3,771

The following were found to be diseased or unsound and were surrendered and destroyed:—

Two Pigs' Carcases and Organs, Five Pigs' Heads, Five Pigs' Frys and Three Pigs' Intestines— Tuberculosis	498 lbs.
Two Pigs' Heads and Intestines—Localised Tuberculosis	62 „
Two Pigs' Livers, Lungs and Intestines—Localised Tuberculosis	49 „
One Pig's Head, etc.—Localised Tuberculosis ...	23 „
Three Pigs' Intestines and One Pig's Head— Tuberculosis	56 „
Nine Pigs' Heads and Organs—Tuberculosis ...	370 „
One Pig's Head and Liver—Tuberculosis ...	30 „
Two Pigs' Heads—Tuberculosis	33 „
Two Pigs' Heads and One Liver—Tuberculosis ...	37 „
Seven Pigs' Heads, Four Lungs and Livers and Two Intestines—Tuberculosis	112 „
One Pig's Lungs and Liver—Tuberculosis	9 „
Six Pigs' Intestines—Tuberculosis	76 „
One Pig and Organs—Tuberculosis	145 „
One Pig's Head and Organs—Tuberculosis ...	40 „
One Pig's Mudgeon and Liver—Tuberculosis ...	4½ „
One Pig's Carcase—Tuberculosis	234 „
Two Pigs' Livers—Congestion	15 „
Three Pigs' Lungs and Livers—Inflammation ...	19 „
One Pig's Head, Forequarters and Organs— Tuberculosis	140 „
One Pig's Organs—Hæmorrhage	15 „
One Pig's Carcase and Organs—Moribund ...	96 „
One Pig's Liver—Cirrhosis	4 „
One Pig's Spleen—Tumour	1 „
One Pig's Liver—Cloudy Swelling	5 „
One Ox Head—Localised Tuberculosis	37 „
Three Ox Lungs—Localised Tuberculosis	29 „
One Ox Liver and Lungs—Tuberculosis	24 „
One Ox Mesentery—Inflammation	35 „
Two Ox Lungs—Inflammation	17 „
One Ox Liver and Diaphragm—Tumours	15 „
One Ox Liver—Echinococci	11 „
Three Ox Livers—Bacterial Necrosis	37 „
One Ox Lungs—Tumour	8 „
Part of Shoulder of Beef—Decomposition ...	28 „
Thirteen Ox Livers—Distoma Hepaticum ...	152 „
One Ox Liver and Lungs—Echinococci	25 „
One Ox Head and Organs—Tuberculosis	100 „
One Ox Liver—Tumours	12 „
One Cow and Organs—Fevered (Parturition) ...	600 „
One Ox Liver and Stomach—Inflammation and Abscesses	21 „
One Forequarter of Beef—Tuberculosis	105 „
One Cow's Stomach—Injury	10 „
Ten Sheep's Lungs & Livers—Strongylus Rufescens	38 „

Twenty-one Sheeps' Lungs— <i>Strongylus Rufescens</i>	41	„
Forty-five Sheeps' Livers— <i>Strongylus Rufescens</i> ...	68½	„
Two Sheeps' Lungs—Inflammation	4	„
One Sheep's Lungs and Liver—Inflammation ...	4	„
Thirteen Sheeps' Livers— <i>Distoma Hepaticum</i> ...	36	„
One Sheep's Liver, Spleen and Mesentery—Sarcoma	5	„
One Turkey and Organs—Avian Tuberculosis ...	6	„
Hake—Decomposition	140	„
Flounders—Decomposition	28	„
Thirty-seven Tins of Pears—Decomposition ...	74	„
Forty Tins of Salmon—Blown	40	„
Total	3,824	lbs.

SEIZURE OF TUBERCULAR MEAT FROM WINDMILL LANE MARKET.

Legal proceedings were instituted against a meat salesman for exposing for sale a quarter of beef at a stall on the Windmill Lane Market. On examination by the Inspector it was found that the beef was affected with Generalised Tuberculosis. The defendant sought to plead in extenuation that the meat had already been passed by an Inspector before being brought into the Borough. The Magistrates intimated that this plea would not influence their decision and expressing the view that a serious offence had been committed, imposed a fine of £10.

Number of Slaughterhouses :—

			In 1920.	In January. 1925.	In December. 1925.
Registered	...	...	6	5	5
Licensed	...	...	8	9	9
Total	...	...	14	14	14

INSPECTION OF BAKEHOUSES.

The number of Bakehouses on the Register was 34. 61 visits have been paid during the year in connection with the requirements of the Factory and Workshops Act, 1901, as to limewashing, ventilation and cleanliness. It was not found necessary to complain of any contravention of the Regulations.

A case of Dermatitis of the hand and arms was discovered in a Smethwick baker, and in connection with this occurrence samples of Flour, Icing Sugar, Pastry Margarine and Cream of Tartar from the supplies used in the bakehouse were submitted to the Public Analyst. The analysis showed these to be genuine and containing no injurious or extraneous ingredients.

SALE OF FOOD AND DRUGS ACTS.

247 samples of foods and drugs were submitted to the Public Analyst, as against 254 samples in the previous year. 37 samples of milk were certified as not genuine, as against 27 in the previous year. All other articles were certified as genuine. The percentage of adulterations was 15.0 per cent. as against 10.6 per cent. in the previous year. In four cases legal proceedings were instituted and in the remaining cases the vendors were cautioned. The total fines and costs amounted to £17. Of 187 samples of milk taken, 35 were procured in course of delivery at the railway stations. A summary of the various articles sampled and the results of analysis are given in the subjoined table:—

Article Analysed.	Total Samples.	Genuine.	Not Genuine.
Milk	187	150	37
Butter	9	9	—
Margarine	15	15	—
Coffee	6	6	—
Pepper	3	3	—
Cream of Tartar	2	2	—
Seidlitz Powders	2	2	—
Condensed Machine			
Skimmed Milk	1	1	—
Condensed Milk	2	2	—
Ale	1	1	—
Mustard	1	1	—
Tea	1	1	—
Sausage	1	1	—
Preserved Cream	2	2	—
Cream	1	1	—
Arrowroot	1	1	—
Sterilized Milk	1	1	—
Lard	2	2	—
Icing Sugar	1	1	—
Flour	1	1	—
Cheese	1	1	—
Apples	6	6	—
	247	210	37

TABLE OF PROSECUTIONS UNDER THE SALE OF FOOD AND DRUGS ACTS, FOR THE YEAR 1925.

Date of Purchase.	Sample No.	Deficiency.	Results.	Penalty.	Costs.
				£ s. d.	s. d.
16.3.25.	4136	23.33% Fat.	Convicted	2 0 0	15 0
25.5.25.	4178	23.33% Fat.	Convicted	2 0 0	15 0
27.5.25.	4188	13.33% Fat.	Convicted	5 0 0	15 0
30.5.25.	4206	20.0 % Fat.	Convicted	5 0 0	15 0
				£14 0 0	£3 0 0

COUNTY BOROUGH OF SMETHWICK.

PUBLIC HEALTH (MILK AND CREAM) REGULATIONS,
1912 and 1917.

REPORT for the year ended 31st December, 1925.

1. MILK AND CREAM NOT SOLD AS PRESERVED CREAM.

	Milk.	Cream.
Number of Samples examined for the presence of a Preservative	188	1
Number in which a Preservative was reported to be present, and the percentage of Preservative found in each sample ...	Nil	Nil

2. CREAM SOLD AS PRESERVED CREAM.

(a) Instances in which samples have been submitted for analysis to ascertain if the statements on the label as to preservatives was correct:—

(1) Correct statements made	2
(2) Incorrect statements	—
	2
	—

(3) Percentage of Preservative found in each sample:—

Sample No. 4202—0.31% Boric Acid.

„ „ 4222—0.31% Boric Acid.

(b) Determinations made of milk fat in cream sold as preserved cream:—

(i) Above 35 per cent.	2
(ii) Below 35 per cent.	—
	2
	—

(c) Instances where (apart from analysis) the requirements with regard to labelling and declaration of preserved cream in Article V. (1) in the proviso in Article V. (2) of the Regulations have not been observed Nil

(d) Particulars of each case in which the Regulations have not been complied with, and action taken Nil

3. THICKENING SUBSTANCES.

Any evidence of their addition to cream or preserved cream Nil

