

[Report 1937] / Medical Officer of Health, Somerset County Council.

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Publication/Creation

1937

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REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1937.

J. F. DAVIDSON,

M.B., Ch.B., D.P.H.,

County Medical Officer of Health.

Somerset County Council.

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**To the Chairman and Members of the Public Health and Housing Committee,
Somerset County Council.**

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to submit my First Annual Report upon the Health Administration of the County.

In view of the fact that practically all the work recorded in this report was directed by Sir William Savage I have refrained from making any alteration in its form.

The report presents a general survey of the work carried out under the various services of your County Health Department.

I have to thank the Medical and Clerical Staffs for their co-operation, and I have been much indebted to my colleagues in other departments of the County Council for their assistance.

In the difficult period of transition, I have also been helped considerably by Sir William Savage who has very willingly given me his advice on various matters.

I am,

Your obedient Servant,

Taunton.

J. F. DAVIDSON.

June, 1938.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Area (in acres): 1,028,992.

Population (1937):—404,090.

Live births:—Total, 5,355; Legitimate 5,137, Illegitimate 218. Still births, 212.

Deaths:—Total, 5,430; Urban, 2,463; Rural, 2,967.

Deaths of children under 1 year of age:—233.

Rateable Value:—£2,457,585 (1937).

Sum represented by a penny rate:—£9,648(1936-37); £9,776(1937-38); £9,985(1938-39).

Birth rate:—13.25.

Death rate:—13.44.

Rate of infantile mortality:—43.51.

Percentage of births which were illegitimate:—4.07.

The birth rate is slightly higher than for the previous year, and the birth and death rates are now nearly the same. The population shows an increase of 490.

The death returns are corrected as regards the distribution of deaths to the districts to which they properly belong. To correct the differences of age and sex distribution a standardising factor has to be used based upon the census figures. So corrected the following figures are obtained:—

| | | | | <i>Net Death-rate.</i> | <i>Standardising Factor.</i> | <i>Standardised Death-rate.</i> |
|-----------------------|-----|-----|-----|----------------------------|----------------------------------|-------------------------------------|
| Rural Districts | ... | ... | ... | 13.42 | 0.82 | 11.00 |
| Urban Districts | ... | ... | ... | 13.47 | 0.82 | 11.05 |
| Administrative County | ... | ... | ... | 13.44 | 0.82 | 11.02 |
| England and Wales | ... | ... | ... | 12.4 | — | 12.4 |

The fact that Somerset now contains a high proportion of old people is well established and this is reflected in the difference between the net and standardised death rates. It will be noted that compared with a population of standard age and sex distribution, which is what the standardised rate permits, a rate of 11.02 is shown, whereas the net death rate is 13.44.

Again the birth rate (13.25) remains low, and the rates for births and deaths are now very close to each other.

This low birth rate, together with the change in the age composition of the population, at present give rise to no serious issues but the cumulative effects of this tendency must present a serious problem. It must be clearly realised that a fall in the birth rates does not at once bring a decline in the population but, if continued, it does bring a steady diminution in the proportion of the population who are of an age to be actual or prospective parents, and so after a lapse of years a dramatic drop, and then it will be too late for any arrest.

I emphasise that the significance of this population issue and its serious effects in the future are too little appreciated to-day, but its vital importance is immediate and it should not be minimised in any way.

In a few years time the weighting by age of the general population will be marked; again, a fall in the general population must be inevitable.

The first result from these changes is now appearing; there must without doubt be an increase in the death rate owing to the much greater proportion of old people in the population; and it should be noted that on account of this fact a rising death rate can carry no longer the same reflection on the healthiness of the area.

The second point that arises is the need for still further safeguarding the lives and health of the young and for making child-bearing and mother life safer and freer from risks.

Again, as pointed out in last year's report, there is need for care in the housing schemes of the future, and, particularly, attention should be given to the suitable housing of the aged, for such housing will be much required in the years that lie ahead.

The causes of death are set out in Tables A. and B. at the end of the Report. Table A. shows that heart diseases are responsible for the largest number of deaths from one single group of causes (1,344 deaths), cancer and other forms of malignant disease the next largest (786 deaths), bronchitis and pneumonia caused 361 deaths, while tuberculosis caused 208 deaths.

As pointed out in previous years, we cannot hope to lower the death rate further to any great extent but must aim at a postponement of the period of death. Table I. shows that this is taking place.

TABLE I.
Proportion of the deaths in each year divided amongst the different age groups.

| | Under 1 year. | 1—45. | 45—65. | 65 and over. |
|------|------------------|-------|--------|-----------------|
| 1911 | 12.9 | 21.0 | 20.8 | 45.3 |
| 1912 | 10.6 | 21.0 | 23.0 | 45.4 |
| 1913 | 10.8 | 23.3 | 21.0 | 44.9 |
| 1914 | 9.2 | 22.0 | 22.3 | 46.5 |
| 1920 | 9.7 | 19.1 | 22.3 | 48.9 |
| 1921 | 9.3 | 18.0 | 23.1 | 49.6 |
| 1922 | 6.6 | 17.3 | 22.2 | 53.9 |
| 1923 | 7.0 | 18.7 | 23.1 | 51.2 |
| 1924 | 7.1 | 17.5 | 21.8 | 53.6 |
| 1925 | 6.5 | 17.0 | 22.2 | 54.3 |
| 1926 | 6.9 | 16.0 | 22.3 | 54.8 |
| 1927 | 5.3 | 15.3 | 23.5 | 55.9 |
| 1928 | 5.6 | 16.6 | 23.2 | 54.6 |
| 1929 | 5.2 | 14.8 | 22.3 | 57.7 |
| 1930 | 5.6 | 15.5 | 23.4 | 55.5 |
| 1931 | 5.6 | 15.1 | 22.7 | 56.6 |
| 1932 | 5.3 | 14.1 | 23.2 | 57.4 |
| 1933 | 4.7 | 13.9 | 22.3 | 59.1 |
| 1934 | 4.9 | 13.3 | 23.4 | 58.4 |
| 1935 | 4.2 | 12.3 | 23.7 | 59.8 |
| 1936 | 4.8 | 11.9 | 22.7 | 60.6 |
| 1937 | 4.3 | 12.1 | 23.1 | 60.5 |

Only 39 per cent. of the deaths are in persons under 65 years of age.

Cancer. Table A. shows the actual number of deaths from cancer in the county divided into age groups; Table B. the deaths in the individual districts. The cancer rate continues to increase as shown by the following figures:—

| Year. | No. of deaths. | Rate per 1,000. |
|-------|----------------|-----------------|
| 1911 | 447 | 1.1 |
| 1921 | 520 | 1.3 |
| 1931 | 715 | 1.8 |
| 1932 | 700 | 1.7 |
| 1933 | 649 | 1.6 |
| 1934 | 710 | 1.8 |
| 1935 | 677 | 1.7 |
| 1936 | 729 | 1.8 |
| 1937 | 786 | 1.9 |

It is shown in Table A. that 60 per cent. of the deaths were in the 65 and over group. The increase in the cancer rate is probably largely due to the fact that owing to the steady postponement of death the proportion of people of 65 years and over in Somerset continues to rise with a correspondingly greater risk rate.

Each year cancer claims a large number of lives in this County; it is a disease of dreaded seriousness but it has been shown that early treatment can do much to arrest its course, and each year the hopes of cure in early cases become steadily better founded. It is important that all possible steps should be taken to have the best facilities for treatment available and that they should be widely known and used.

The available facilities for treatment have been specified in previous reports and the Bristol Radium Centre continues to be extensively used.

With regard to the question of propaganda on cancer, caution must be exercised in the methods and ways in which it is attempted. There is no doubt of the urgent need for instructing the public on early treatment, for on this depends the whole success of dealing with the disease and even now too frequently cases are seen for the first time when it is too late to do anything beyond palliative treatment. On the other hand, in propaganda of this type the very greatest care must be taken not to give rise to fear and dread in apprehensive but entirely disease-free people. Such a happening is an easy one if this work is badly directed and the results are disastrous in their misery.

I believe, however, that it is possible to hold a proper balance, and therefore in the general interests wise and safe propaganda against cancer and its ravages can be recommended and thoroughly encouraged.

TABLE II.
Rural Districts.

| YEAR. | Population estimated to middle of each Year. | BIRTHS. | | DEATHS UNDER ONE YEAR OF AGE. | | DEATHS AT ALL AGES. TOTAL. | |
|------------------------------------|--|---------|-------|----------------------------------|--|-------------------------------|-------|
| | | Number. | Rate. | Number. | Rate per 1,000 Births registered. | Number | Rate. |
| 1927 | 233,000 | 3,507 | 15.05 | 165 | 47.04 | 2,891 | 12.41 |
| 1928 | 235,440 | 3,615 | 15.35 | 155 | 42.88 | 2,754 | 11.70 |
| 1929 | 235,500 | 3,459 | 14.69 | 166 | 47.99 | 3,012 | 12.37 |
| 1930 | 232,040 | 3,465 | 14.93 | 162 | 46.76 | 2,747 | 11.84 |
| 1931 | 230,100 | 3,442 | 14.96 | 181 | 52.59 | 3,076 | 13.37 |
| 1932 | 231,400 | 3,315 | 14.32 | 160 | 48.27 | 2,888 | 12.48 |
| 1933 | 222,801 | 3,069 | 13.61 | 140 | 45.62 | 2,851 | 12.65 |
| 1934 | 222,691 | 3,204 | 14.39 | 146 | 45.57 | 2,742 | 12.31 |
| 1935 | 222,600 | 3,027 | 13.60 | 115 | 37.99 | 2,627 | 11.80 |
| 1936 | 221,700 | 3,070 | 13.85 | 160 | 52.12 | 2,880 | 12.99 |
| Averages for years 1927—1936 | 228,727 | 3,317 | 14.5 | 155 | 46.7 | 2,847 | 12.4 |
| 1937 | 221,190 | 3,006 | 13.59 | 139 | 46.24 | 2,967 | 13.42 |

Urban Districts.

| | | | | | | | |
|------------------------------------|---------|-------|-------|-----|-------|-------|-------|
| 1927 | 168,500 | 2,262 | 13.42 | 100 | 44.21 | 2,110 | 12.52 |
| 1928 | 169,810 | 2,336 | 13.76 | 114 | 48.80 | 2,058 | 12.12 |
| 1929 | 171,060 | 2,233 | 13.05 | 108 | 48.37 | 2,240 | 13.11 |
| 1930 | 172,830 | 2,340 | 13.54 | 104 | 44.44 | 1,986 | 11.50 |
| 1931 | 173,750 | 2,260 | 13.01 | 114 | 50.44 | 2,193 | 12.64 |
| 1932 | 176,700 | 2,250 | 12.74 | 114 | 50.67 | 2,239 | 12.68 |
| 1933 | 180,529 | 2,105 | 11.73 | 105 | 49.88 | 2,331 | 12.99 |
| 1934 | 180,809 | 2,284 | 12.63 | 102 | 44.66 | 2,321 | 12.84 |
| 1935 | 181,100 | 2,092 | 11.55 | 90 | 43.02 | 2,269 | 12.53 |
| 1936 | 181,900 | 2,251 | 12.37 | 92 | 40.87 | 2,337 | 12.85 |
| Averages for years 1927—1936 | 175,699 | 2,241 | 12.8 | 104 | 46.4 | 2,208 | 12.6 |
| 1937 | 182,900 | 2,349 | 12.84 | 94 | 40.01 | 2,463 | 13.47 |

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

This was set out in detail in the Annual Report for 1930 and remains substantially unaltered.

PREVALENCE AND CONTROL OVER INFECTIOUS AND OTHER DISEASES.

Acute Infectious Diseases.

Progress has been made towards completing the general Isolation Hospital Scheme for the County.

The extensions and improvements at the Taunton Isolation Hospital were completed and these have provided modern facilities in this hospital.

The building of the South Somerset Hospital has proceeded, and it is anticipated that the work will be completed in the summer of 1938.

Plans for the extension of the Shepton Mallet Isolation Hospital were examined and revised during the year.

No changes have occurred in the other hospitals in the scheme.

When the South Somerset Hospital comes into commission the scheme will be complete, and it will provide an adequate service for the normal requirements of the various areas.

Small Pox. I am glad to be able to report that there were no cases of Small-pox during the year in the County.

The 1937 vaccination figures are not yet available, but early in 1938 those for 1936 were reported. Of 5,063 births 1,168 were returned as successfully vaccinated. This gives only 23 per cent. vaccinated, the percentage varying from four in Norton-Radstock and Clutton to forty-nine in Dulverton registration sub-districts.

Diphtheria. 122 cases were notified with 7 deaths, a case mortality of 5.7 per cent. The distribution of the cases is shown in Table III. The number of cases was lower than the previous year and so also was the case mortality.

Scarlet Fever. This disease was not so prevalent as in the previous year and 401 cases were notified. There were only two deaths, giving a case mortality of 0.49 per cent.

Enteric and Paratyphoid Fevers. 12 cases were notified with three deaths. The cases were of a sporadic nature and there was no epidemic prevalence.

Encephalitis Lethargica, Cerebro-spinal Meningitis, and acute Poliomyelitis. Notifications of these diseases will be found in Table III. There was no epidemic prevalence in any part of the County.

Dysentery. An outbreak of dysentery, due to the Sonne type dysentery bacillus, probably spread by infected ice cream and causing a number of cases, occurred on a somewhat wide basis in the Chard and surrounding districts of the County. The illness in practically all the cases was mild and there were no deaths. The circumstances were fully investigated and a special report was sent to the Ministry of Health.

Measles and Whooping Cough. Neither disease is notifiable, so the number of cases is not known. During the year there were 2 deaths from Measles and 17 deaths from Whooping Cough.

Table III. shows that the incidence of notifiable infectious diseases in Somerset during 1937 was low.

INFECTIOUS DISEASES.

TABLE III.

| | Small Pox. | Scarlet Fever. | Diphtheria. | Enteric and Paratyphoid Fevers. | Puerperal Fever and Puerperal Pyrexia. | Ophthalmia Neonatorum. | Cerebro-spinal Meningitis. | Dysentery. | Malaria. | Pneumonia. | Acute Poliomyelitis. | Encephalitis Lethargica. |
|-----------------------|------------|----------------|-------------|---------------------------------|--|------------------------|----------------------------|------------|----------|------------|----------------------|--------------------------|
| URBAN | | | | | | | | | | | | |
| Bridgwater | 0 | 21 | 2 | 0 | 4 | 1 | 2 | 0 | 0 | 19 | 0 | 0 |
| Burnham | 0 | 4 | 3 | 0 | 2 | 0 | 0 | 0 | 0 | 5 | 0 | 0 |
| Chard | 0 | 0 | 0 | 0 | 1 | 2 | 0 | 10 | 0 | 4 | 0 | 0 |
| Clevedon | 0 | 0 | 4 | 1 | 0 | 0 | 0 | 0 | 0 | 21 | 0 | 0 |
| Crewkerne | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 0 | 0 |
| Frome | 0 | 17 | 2 | 0 | 1 | 0 | 0 | 0 | 0 | 2 | 0 | 0 |
| Glastonbury | 0 | 3 | 1 | 0 | 3 | 0 | 0 | 0 | 0 | 3 | 0 | 0 |
| Ilminster | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 4 | 0 | 4 | 0 | 0 |
| Minehead | 0 | 4 | 0 | 1 | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 0 |
| Norton-Radstock | 0 | 13 | 7 | 0 | 2 | 0 | 0 | 0 | 0 | 13 | 0 | 0 |
| Portishead | 0 | 0 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 |
| Shepton Mallet | 0 | 18 | 2 | 0 | 1 | 0 | 0 | 0 | 0 | 25 | 0 | 0 |
| Street | 0 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 10 | 0 | 0 |
| Taunton | 0 | 47 | 19 | 0 | 8 | 2 | 0 | 0 | 0 | 9 | 1 | 0 |
| Watchet | 0 | 0 | 0 | 0 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Wellington | 0 | 9 | 1 | 0 | 2 | 0 | 0 | 0 | 0 | 6 | 0 | 0 |
| Wells | 0 | 0 | 0 | 0 | 1 | 1 | 0 | 0 | 0 | 2 | 1 | 0 |
| Weston-super-Mare | 0 | 18 | 9 | 1 | 6 | 4 | 0 | 0 | 0 | 24 | 5 | 1 |
| Yeovil | 0 | 22 | 12 | 1 | 6 | 2 | 0 | 0 | 0 | 20 | 0 | 0 |
| RURAL | | | | | | | | | | | | |
| Axbridge | 0 | 25 | 4 | 3 | 7 | 0 | 1 | 0 | 0 | 29 | 1 | 1 |
| Bathavon | 0 | 18 | 15 | 2 | 0 | 1 | 0 | 0 | 0 | 7 | 1 | 0 |
| Bridgwater | 0 | 8 | 1 | 0 | 3 | 0 | 0 | 0 | 0 | 6 | 0 | 0 |
| Chard | 0 | 11 | 0 | 0 | 2 | 1 | 0 | 4 | 1 | 8 | 0 | 0 |
| Clutton | 0 | 22 | 2 | 0 | 3 | 1 | 0 | 0 | 0 | 29 | 2 | 0 |
| Dulverton | 0 | 1 | 1 | 0 | 1 | 0 | 0 | 0 | 0 | 7 | 0 | 0 |
| Frome | 0 | 25 | 0 | 0 | 3 | 1 | 0 | 0 | 0 | 9 | 1 | 0 |
| Langport | 0 | 8 | 4 | 0 | 1 | 2 | 0 | 0 | 0 | 15 | 1 | 0 |
| Long Ashton | 0 | 18 | 11 | 1 | 2 | 0 | 1 | 1 | 0 | 7 | 0 | 1 |
| Shepton Mallet | 0 | 34 | 3 | 0 | 0 | 0 | 0 | 0 | 0 | 16 | 0 | 0 |
| Taunton | 0 | 9 | 7 | 1 | 4 | 2 | 0 | 0 | 0 | 9 | 0 | 0 |
| Wellington | 0 | 4 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 4 | 0 | 2 |
| Wells | 0 | 1 | 0 | 0 | 2 | 0 | 0 | 0 | 0 | 9 | 0 | 1 |
| Williton | 0 | 6 | 0 | 1 | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 0 |
| Wincanton | 0 | 8 | 6 | 0 | 2 | 0 | 0 | 0 | 0 | 19 | 0 | 0 |
| Yeovil | 0 | 25 | 0 | 0 | 0 | 4 | 0 | 1 | 0 | 24 | 0 | 0 |
| Urban Districts | 0 | 178 | 67 | 4 | 40 | 13 | 2 | 14 | 1 | 170 | 7 | 1 |
| Rural Districts | 0 | 223 | 55 | 8 | 31 | 12 | 2 | 6 | 1 | 199 | 6 | 5 |
| Administrative County | 0 | 401 | 122 | 12 | 71 | 25 | 4 | 20 | 2 | 369 | 13 | 6 |

VENEREAL DISEASES.

The attendances of Somerset cases at the various clinics for the past three years have been as follows:—

| Clinic. | NEW CASES. | | | | ATTENDANCES. | | | |
|-------------------------|------------|-------|-------|-----------------------------------|--------------|-------|-------|----------------------------------|
| | 1935. | 1936. | 1937. | Increase or decrease during 1937. | 1935. | 1936. | 1937. | Increase or decrease during 1937 |
| Bath | 9 | 15 | 18 | + 3 | 219 | 196 | 222 | + 26 |
| Bristol | 56 | 47 | 65 | + 18 | 754 | 586 | 640 | + 54 |
| Taunton | 86 | 70 | 85 | + 15 | 1,115 | 1,032 | 937 | - 95 |
| Yeovil | 45 | 22 | 38 | + 16 | 539 | 674 | 780 | + 106 |
| Bridgwater | 33 | 22 | 15 | - 7 | 842 | 482 | 366 | - 116 |
| Frome | 22 | 12 | 16 | + 4 | 383 | 295 | 150 | - 145 |
| Glastonbury | 28 | 9 | 6 | - 3 | 352 | 252 | 102 | - 150 |
| Minehead | 23 | 3 | 10 | + 7 | 287 | 125 | 112 | - 13 |
| Weston-super-Mare | 54 | 66 | 58 | - 8 | 1,056 | 1,245 | 1,191 | - 54 |
| All Clinics | 356 | 266 | 311 | + 45 | 5,547 | 4,887 | 4,500 | - 387 |

Seventy-three per cent. of the new cases and 81 per cent. of the total attendances were at County Council Clinics.

It will be noted that the attendances at Frome, Glastonbury and Minehead are not high. I consider that at Frome and Glastonbury the clinics serve a useful purpose and they do not entail extra expenditure because a doctor is in attendance for other purposes on the same day.

With regard to Minehead, there appears little justification in the figures to continue this clinic and I suggest that the question of its withdrawal should be considered and alternative facilities for treatment provided at the Taunton clinic.

Medical Practitioners in the County qualified to receive supplies of arsenobenzol compounds can obtain them free of charge on request to the County Medical Officer. Only 23 Medical Practitioners are on this free list.

Bacteriological work in connection with venereal diseases is arranged for either in connection with Bristol University Laboratory or at the County Health Laboratory.

During the year the following examinations were made:—

| Samples. | For Clinics and Hospitals. | For Medical Practitioners. | Total. |
|------------------------------|----------------------------|----------------------------|--------|
| Wasserman ... | 182 | 331 | 513 |
| Gonococcus ... | 376 | 88 | 464 |
| Spirochetes ... | 0 | 0 | 0 |
| Fixation and other tests ... | 53 | 3 | 56 |
| | 611 | 422 | 1,033 |

TUBERCULOSIS.

The work has proceeded steadily during the year along the approved and successful lines and there were no fresh developments of importance.

TABLE IV.

| Year. | Phthisis Death rates. | | | Other Tuberculous Diseases | | | Tuberculosis Death-rate. | Deaths in a population of 406,000. | |
|-------|-----------------------|--------|---------|----------------------------|--------|---------|--------------------------|------------------------------------|------------------|
| | Rural. | Urban. | County. | Rural. | Urban. | County. | County. | Phthisis. | All Tuberculosis |
| 1901 | 0.88 | 0.84 | 0.871 | 0.18 | 0.23 | 0.202 | 1.073 | 354 | 435 |
| 1902 | 0.86 | 0.89 | 0.877 | 0.20 | 0.19 | 0.201 | 1.078 | 356 | 437 |
| 1903 | 0.94 | 0.76 | 0.879 | 0.19 | 0.34 | 0.251 | 1.130 | 357 | 459 |
| 1904 | 0.99 | 0.97 | 0.989 | 0.20 | 0.34 | 0.255 | 1.244 | 402 | 505 |
| 1905 | 0.90 | 0.91 | 0.905 | 0.14 | 0.18 | 0.162 | 1.067 | 367 | 433 |
| 1906 | 0.90 | 0.86 | 0.890 | 0.13 | 0.37 | 0.221 | 1.111 | 361 | 451 |
| 1907 | 0.83 | 0.85 | 0.842 | 0.24 | 0.26 | 0.253 | 1.095 | 341 | 445 |
| 1908 | 0.91 | 0.93 | 0.922 | 0.24 | 0.31 | 0.274 | 1.196 | 375 | 485 |
| 1909 | 0.82 | 0.85 | 0.833 | 0.24 | 0.27 | 0.255 | 1.088 | 338 | 441 |
| 1910 | 0.98 | 0.78 | 0.912 | 0.16 | 0.24 | 0.197 | 1.109 | 371 | 451 |
| 1911 | 0.83 | 0.76 | 0.804 | 0.15 | 0.39 | 0.240 | 1.044 | 327 | 424 |
| 1912 | 0.69 | 0.90 | 0.778 | 0.17 | 0.20 | 0.191 | 0.970 | 315 | 394 |
| 1913 | 0.74 | 0.67 | 0.721 | 0.15 | 0.30 | 0.239 | 0.960 | 293 | 389 |
| 1914 | 0.86 | 0.79 | 0.833 | 0.21 | 0.26 | 0.232 | 1.065 | 338 | 432 |
| 1915 | 0.84 | 1.13 | 0.960 | 0.18 | 0.23 | 0.201 | 1.160 | 389 | 471 |
| 1916 | 0.75 | 0.97 | 0.838 | 0.16 | 0.25 | 0.194 | 1.032 | 340 | 418 |
| 1917 | 0.90 | 1.05 | 0.962 | 0.18 | 0.21 | 0.191 | 1.153 | 390 | 468 |
| 1918 | 1.09 | 1.30 | 1.180 | 0.21 | 0.24 | 0.225 | 1.403 | 479 | 569 |
| 1919 | 0.85 | 0.90 | 0.871 | 0.21 | 0.22 | 0.212 | 1.083 | 355 | 439 |
| 1920 | 0.65 | 0.93 | 0.765 | 0.14 | 0.27 | 0.196 | 0.961 | 310 | 390 |
| 1921 | 0.63 | 0.76 | 0.685 | 0.16 | 0.30 | 0.220 | 0.904 | 278 | 367 |
| 1922 | 0.75 | 0.78 | 0.761 | 0.18 | 0.18 | 0.180 | 0.941 | 309 | 382 |
| 1923 | 0.65 | 0.76 | 0.696 | 0.19 | 0.22 | 0.206 | 0.902 | 282 | 366 |
| 1924 | 0.60 | 0.74 | 0.656 | 0.15 | 0.13 | 0.140 | 0.797 | 267 | 324 |
| 1925 | 0.61 | 0.73 | 0.659 | 0.12 | 0.14 | 0.126 | 0.784 | 268 | 319 |
| 1926 | 0.53 | 0.54 | 0.533 | 0.13 | 0.14 | 0.138 | 0.671 | 217 | 273 |
| 1927 | 0.55 | 0.64 | 0.586 | 0.13 | 0.13 | 0.130 | 0.716 | 237 | 290 |
| 1928 | 0.59 | 0.71 | 0.639 | 0.08 | 0.16 | 0.113 | 0.753 | 259 | 306 |
| 1929 | 0.55 | 0.65 | 0.593 | 0.11 | 0.14 | 0.121 | 0.714 | 240 | 289 |
| 1930 | 0.54 | 0.52 | 0.532 | 0.09 | 0.09 | 0.091 | 0.623 | 216 | 253 |
| 1931 | 0.45 | 0.65 | 0.533 | 0.14 | 0.12 | 0.131 | 0.664 | 216 | 270 |
| 1932 | 0.50 | 0.62 | 0.554 | 0.12 | 0.10 | 0.115 | 0.671 | 225 | 272 |
| 1933 | 0.44 | 0.51 | 0.472 | 0.14 | 0.09 | 0.118 | 0.590 | 192 | 240 |
| 1934 | 0.38 | 0.48 | 0.426 | 0.12 | 0.09 | 0.106 | 0.533 | 173 | 216 |
| 1935 | 0.39 | 0.49 | 0.433 | 0.11 | 0.08 | 0.094 | 0.528 | 176 | 214 |
| 1936 | 0.30 | 0.42 | 0.354 | 0.07 | 0.11 | 0.086 | 0.441 | 144 | 179 |
| 1937 | 0.33 | 0.51 | 0.413 | 0.10 | 0.10 | 0.101 | 0.515 | 168 | 209 |

The actual results achieved are more clearly seen when the figures are calculated on a standard population of 406,000 (last column) which is nearly the Administrative County population. This column shows that as many as 236 fewer persons died of tuberculosis in the County in 1937 than would have been the case 30 years ago with the same population. Compared with an average figure of 459 deaths for a five year period 30 years ago the decline represents a reduction of 55 per cent.

The following figures show the deaths and notifications since 1919:—

TABLE V.

| Year. | 1919 | 1920 | 1921 | 1922 | 1923 | 1924 | 1925 | 1926 | 1927 | 1928 | 1929 | 1930 | 1931 | 1932 | 1933 | 1934 | 1935 | 1936 | 1937 |
|----------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|
| Deaths. | 388 | 358 | 350 | 366 | 354 | 317 | 312 | 268 | 287 | 305 | 290 | 253 | 268 | 273 | 239 | 215 | 213 | 178 | 208 |
| *Notifi- cations. | 922 | 860 | 882 | 732 | 707 | 701 | 769 | 729 | 703 | 713 | 605 | 640 | 585 | 565 | 479 | 511 | 459 | 395 | 435 |

*These are primary cases only and do not include institutional cases.

Of the 208 deaths from tuberculosis, 30 were not notified.

TABLE VI.

New cases of tuberculosis and deaths from the disease in the County during 1937.

| Age Periods. | New cases. | | | | Deaths. | | | |
|----------------|------------|-----|----------------|----|------------|----|----------------|----|
| | Pulmonary. | | Non-Pulmonary. | | Pulmonary. | | Non-Pulmonary. | |
| | M | F. | M. | F. | M. | F. | M. | F. |
| 0—1 | 0 | 0 | 1 | 2 | 0 | 0 | 2 | 1 |
| 1—5 | 0 | 0 | 10 | 6 | 0 | 0 | 2 | 4 |
| 5—10 | 9 | 3 | 9 | 12 | 2 | 1 | 2 | 3 |
| 10—15 | 2 | 13 | 7 | 10 | | | | |
| 15—20 | 17 | 16 | 4 | 5 | 13 | 13 | 2 | 1 |
| 20—25 | 27 | 28 | 4 | 2 | | | | |
| 25—35 | 39 | 53 | 6 | 9 | 43 | 45 | 8 | 6 |
| 35—45 | 25 | 33 | 6 | 4 | | | | |
| 45—55 | 23 | 15 | 4 | 0 | 25 | 14 | 4 | 1 |
| 55—65 | 9 | 9 | 0 | 2 | | | | |
| 65 and upwards | 5 | 5 | 0 | 1 | 4 | 7 | 1 | 4 |
| Totals | 156 | 175 | 51 | 53 | 87 | 80 | 21 | 20 |

TABLE VII.

Tuberculosis Notifications and Deaths.

| URBAN DISTRICTS. | Number of primary cases notified. | | Number of Deaths during the year from Pulmonary Tuberculosis. | Number of Deaths during the year from other varieties of Tuberculosis. | RURAL DISTRICTS. | Number of primary cases notified. | | Number of Deaths during the year from Pulmonary Tuberculosis. | Number of Deaths during the year from other varieties of Tuberculosis. |
|------------------|-----------------------------------|-----------|---|--|------------------|-----------------------------------|-----------|---|--|
| | Pulm. | Non-Pulm. | | | | Pulm. | Non-Pulm. | | |
| Bridgwater | 20 | 7 | 17 | 3 | Axbridge | 9 | 2 | 10 | 0 |
| Burnham | 5 | 4 | 4 | 0 | Bathavon | 14 | 5 | 8 | 2 |
| Chard | 3 | 1 | 3 | 0 | Bridgwater | 13 | 4 | 5 | 1 |
| Clevedon | 5 | 0 | 6 | 1 | Chard | 7 | 7 | 3 | 1 |
| Crewkerne | 6 | 2 | 0 | 2 | Clutton | 7 | 2 | 5 | 2 |
| Frome | 7 | 1 | 2 | 0 | Dulverton | 3 | 1 | 1 | 0 |
| Glastonbury | 6 | 1 | 0 | 0 | Frome | 5 | 2 | 4 | 0 |
| Ilminster | 4 | 1 | 2 | 0 | Langport | 11 | 7 | 4 | 1 |
| Minehead | 11 | 1 | 5 | 0 | Long Ashton | 15 | 7 | 7 | 4 |
| Norton-Radstock | 6 | 4 | 7 | 1 | Shepton Mallet | 7 | 4 | 2 | 1 |
| Portishead | 3 | 0 | 4 | 0 | Taunton | 9 | 3 | 3 | 3 |
| Shepton Mallet | 4 | 1 | 1 | 1 | Wellington | 5 | 2 | 2 | 1 |
| Street | 3 | 1 | 1 | 1 | Wells | 4 | 3 | 3 | 1 |
| Taunton | 25 | 5 | 15 | 0 | Williton | 10 | 2 | 5 | 2 |
| Watchet | 0 | 0 | 0 | 0 | Wincanton | 10 | 5 | 8 | 3 |
| Wellington | 5 | 0 | 1 | 0 | Yeovil | 18 | 4 | 4 | 1 |
| Wells | 4 | 1 | 1 | 0 | | | | | |
| Weston-s-Mare | 30 | 7 | 12 | 5 | | | | | |
| Yeovil | 37 | 7 | 12 | 4 | | | | | |
| Totals | 184 | 44 | 93 | 18 | Totals | 147 | 60 | 74 | 23 |

TABLE VIII.

Admissions to Sanatoria during 1937.

| Sanatorium. | Men. | Women. | Children. | Total. |
|------------------------|------|--------|-----------|--------|
| Quantock | 61 | 56 | — | 117 |
| Chard | 11 | 34 | 2 | 47 |
| Taunton | 14 | 11 | — | 25 |
| Wincanton | 19 | — | — | 19 |
| Compton Bishop | — | — | 54 | 54 |
| Alton Hospital | — | — | 4 | 4 |
| Bath Ortho. Hospital | 3 | 1 | 8 | 12 |
| Swanage RedCross do. | — | — | 1 | 1 |
| British Legion Village | 1 | — | — | 1 |
| | 109 | 102 | 69 | 280 |

TABLE IX.

During the year the use of the Mantoux test to judge infection with the tubercle bacillus was continued. The following two tables give the actual figures. The results obtained are of considerable value, chiefly in prognosis but to some extent in connection with treatment.

| Contacts of a | | | | Other Cases. Result. | | Total. |
|-------------------------|---|-------------------------|----|-------------------------|-----|--------|
| T.B. + Case. Result. | | T.B. - Case. Result. | | | | |
| + | - | + | - | + | - | |
| 23 | 8 | 5 | 17 | 30 | 110 | 193 |

AGE GROUPS.

| 0-11 | | 12-15 | | Over 15 | | Total |
|--------|-----|--------|----|---------|---|-------|
| Result | | Result | | Result | | |
| + | - | + | - | + | - | |
| 49 | 106 | 10 | 23 | 1 | 4 | 193 |

TABLE X.

All cases under treatment. Complete results as regards working capacity.

| All years, (1912-1937). | | Cured. | Working. | Not Working. | Dead. | Lost sight of or Removed. | Total cases. |
|----------------------------|------------|--------|----------|--------------|-------|---------------------------------|--------------|
| Men | Cases | 1,198 | 321 | 278 | 1,703 | 700 | 4,200 |
| | Percentage | 28 | 8 | 7 | 40 | 17 | |
| Women | Cases | 1,380 | 409 | 251 | 1,524 | 779 | 4,343 |
| | Percentage | 32 | 9 | 6 | 35 | 18 | |
| Children | Cases | 2,045 | 300 | 82 | 197 | 484 | 3,108 |
| | Percentage | 66 | 10 | 3 | 6 | 15 | |
| Un- Classified | Cases | 0 | 0 | 0 | 124 | 229 | 353 |
| | Percentage | 0 | 0 | 0 | 35 | 65 | |
| Total | Cases | 4,623 | 1,030 | 611 | 3,548 | 2,192 | 12,004 |
| | Percentage | 38 | 9 | 5 | 30 | 18 | |

TABLE XI.

Table showing the work of the Dispensaries during the Year 1937.

| DIAGNOSIS. | PULMONARY. | | NON-PULMONARY | | TOTAL. | | GRAND TOTAL. |
|--|--------------|---|---------------|-----------|---------|-----------|-----------------|
| | Adults. | Children. | Adults. | Children. | Adults. | Children. | |
| | M. F | M. F. | M. F. | M. F. | M. F. | M. F. | |
| A.—NEW CASES examined during the year (excluding contacts)— | | | | | | | |
| (a) Definitely tuberculous | 129 118 | 4 10 | 15 10 | 13 10 | 144 128 | 17 20 | 309 |
| (b) Diagnosis not completed | — — | — — | — — | — — | 2 — | 3 — | 5 |
| (c) Non-tuberculous | — — | — — | — — | — — | 166 197 | 138 112 | 613 |
| B.—CONTACTS examined during the year— | | | | | | | |
| (a) Definitely tuberculous | 2 — | 1 — | — — | 2 2 | 2 — | 3 2 | 7 |
| (b) Diagnosis not completed | — — | — — | — — | — — | — 1 | 2 2 | 5 |
| (c) Non-tuberculous | — — | — — | — — | — — | 31 66 | 99 110 | 306 |
| C.—CASES written off the Dispensary Register as— | | | | | | | |
| (a) Recovered | 53 76 | 27 25 | 3 11 | 27 21 | 56 87 | 54 46 | 243 |
| (b) Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous) | — — | — — | — — | — — | 200 270 | 239 227 | 936 |
| D.—NUMBER OF CASES on Dispensary Register on December 31st— | | | | | | | |
| (a) Definitely tuberculous | 546 598 | 91 76 | 44 63 | 121 94 | 590 661 | 212 170 | 1,633 |
| (b) Diagnosis not completed | — — | — — | — — | — — | 2 1 | 5 2 | 10 |
| 1. Number of cases on Dispensary Register on January 1st .. | 1,790 | 2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years | | | | | 8 |
| 3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of" | 74 | 4. Cases written off during the year as Dead (all causes) | | | | | 147 |
| 5. Number of attendances at the Dispensary (including Contacts) | 6,518 | 6. Number of Insured Persons under Domiciliary Treatment on the 31st December | | | | | 47 |
| 7. Number of consultations with medical practitioners— (a) Personal (b) Other | 549 1,650 | 8. Number of visits by Tuberculosis Officers to homes (including personal consultations) | | | | | 862 |
| 9. Number of visits by Nurses or Health Visitors to homes for Dispensary purposes | 11,739 | 10. Number of— (a) Specimens of sputum, etc., examined (b) X-ray examinations made in connexion with Dispensary work .. | | | | | 461 94 |
| 11. Number of "Recovered" cases restored to Dispensary Register, and included in A(a) and A(b) above | 2 | 12. Number of "T.B. plus" cases on Dispensary Register on December 31st | | | | | 530 |

TABLE XII.

Cases treated through the County Dispensaries.

| Dispensary. | Persons treated at Dispensaries during 1937. | | Under treatment at Dispensaries Dec. 31st, 1937. | | Total Dispensary Attendances 1937. | Total Persons examined 1937. |
|-------------------|--|------------|--|------------|------------------------------------|------------------------------|
| | Insured. | Uninsured. | Insured. | Uninsured. | | |
| Bath (County) | 6 | 20 | 2 | 5 | 170 | 79 |
| Bridgwater | 31 | 99 | 6 | 34 | 802 | 300 |
| Bristol | 0 | 28 | 5 | 16 | 171 | 90 |
| Chard | 12 | 19 | 6 | 3 | 252 | 103 |
| Clevedon | 25 | 28 | 4 | 13 | 415 | 125 |
| Frome | 4 | 6 | 2 | 12 | 117 | 65 |
| Glastonbury | 10 | 12 | 5 | 6 | 217 | 90 |
| Langport | 6 | 33 | 0 | 0 | 228 | 76 |
| Minehead | 23 | 40 | 7 | 13 | 484 | 197 |
| Radstock | 8 | 21 | 7 | 16 | 220 | 88 |
| Shepton Mallet | 4 | 19 | 2 | 8 | 169 | 80 |
| Taunton | 83 | 208 | 11 | 60 | 1021 | 555 |
| Wellington | 27 | 28 | 12 | 16 | 261 | 74 |
| Weston-super-Mare | 10 | 60 | 12 | 48 | 937 | 328 |
| Wincanton | 3 | 25 | 0 | 14 | 145 | 80 |
| Yeovil | 35 | 70 | 7 | 17 | 909 | 351 |
| | 287 | 716 | 88 | 281 | | |
| | 1,003 | | 369 | | 6,518 | 2,681 |

Quantock Summer Camp. As in previous years, unused buildings at Quantock Sanatorium were utilised during 1937 as a Summer Camp. Unfortunately it was only possible to arrange a three weeks' camp for boys and no girls' camp was held as difficulty was experienced in obtaining voluntary helpers. The boys who attended camp were those who were predisposed to tuberculosis on account of general debility or undernourishment, with special attention to those from homes in which there was an active case of tuberculosis. Certain of the more important cases recommended for the girls' camp were offered places at the Children's Home, Compton Bishop, and those who attended stayed for approximately six weeks and greatly benefited.

The 'boys' camp was run under open-air conditions as a holiday camp, and the resultant increase in weight and general health was very good. The staff was almost entirely voluntary, and their excellent work largely contributed to the success of the Camp.

Tuberculosis Officer's Clinical Report for 1937.

Dr. Short, County Tuberculosis Officer, has drawn up the following remarks dealing with the treatment given under the County Council scheme and the results obtained.

The unfavourable climatic conditions of 1936 made their presence felt in 1937, and for the first time for several years we have to record an increase in the men patients notified as Tuberculous, and also in the number of deaths.

This increase was particularly among cases of the Pulmonary type and suggests a human rather than a bovine infection. It was rather disconcerting to find that of the new cases seen at the Dispensaries, 148 already had T.B. present in the sputum, as compared with 130 in 1936.

As a result of this increase in definite cases, we were kept very busy all through the year and the Sanatorium beds were in greater demand than ever.

Methods of treatment remain the same, with an increasing use of collapse therapy, both of artificial pneumothorax and phrenic evulsion, and also of treatment with gold preparations. The effect of both these measures is to reduce or abolish the number of T.B. in the sputum.

Children have again done wonderfully well and co-operation with the School Medical service is an invaluable feature of the work.

The medical practitioners in the County have used the Tuberculosis Staff freely and fully both for diagnostic purposes and for helping treatment, and the assistance of the Voluntary Care Committees has enabled the treatment to be much more effective and continued than would otherwise have been possible.

The happier side of the picture is revealed by the fact that more cases than ever (243) were written off as "cured" after careful and prolonged observation lasting more than 5 years from their date of notification, and very few indeed who are thus cancelled have ever to be re-entered on the list of active cases.

Sanatorium or hospital treatment was given to 280 cases. In addition many open-air shelters were provided, those in actual use on December 31st, 1937, being 53. The number of shelters available is 60. Milk, for a period of six or eight weeks, was provided for 73 cases, Dental treatment for 6 cases, X-Ray examinations for 94.

Treatment by the use of artificial pneumothorax has been extended and the cases dealt with are shewn in the following table:—

| | At Dispensary or home of patient. | | | At Institutions. | Total. |
|------------------------|-----------------------------------|-----|--|------------------|--------|
| Primary inductions ... | ... | 1 | | 26 | 27 |
| Refills ... | ... | 256 | | 577 | 833 |

The new cases seen numbered 1,253, and were classified as follows:—

| | | | | | |
|--|-----------------------|-----|-----|-------|--------------|
| PULMONARY TUBERCULOSIS. | T.B. Negative | ... | ... | 122 | |
| | T.B. Positive Stage 1 | ... | ... | 20 | |
| | T.B. Positive Stage 2 | ... | ... | 92 | |
| | T.B. Positive Stage 3 | ... | ... | 36 | |
| | | | | <hr/> | 270 |
| NON-PULMONARY TUBERCULOSIS. | Bones and Joints | ... | ... | 16 | |
| | Abdominal | ... | ... | 8 | |
| | Other Organs | ... | ... | 8 | |
| | Peripheral Glands | ... | ... | 22 | |
| | | | | <hr/> | 54 |
| Not Tuberculous | | | | ... | 919 |
| Diagnosis not completed on 31st December, 1937 | | | | ... | 10 |
| | | | | | <hr/> |
| | | | | | <u>1,253</u> |

L. J. SHORT.

Quantock Sanatorium. The Medical Superintendent, Dr. V. C. Martyn, has furnished the following report:—

The Sanatorium has been open for the reception of 68 cases (33 males and 35 females) throughout the year 1937. During this time 117 cases have been admitted, of whom 61 were males and 56 females. 115 patients were discharged, 60 males and 55 females. 7 of these cases were not T.B., and there were 3 deaths. The average stay for female patients was 199 days and for male patients 197 days. This is an average of about 28 weeks for each patient.

Treatment was carried out as in previous years, *i.e.*, by rest, graduated exercise and work, with good plain food under open-air conditions.

Artificial Pneumothorax. There have been 20 inductions, 268 refills for in-patients and 25 for out-patients. There have also been 4 aspirations and replacements by air.

Phrenic Evulsion. Six cases have been operated on for Phrenic Evulsion at Minehead Hospital by Messrs. Walker and Tatlow.

In suitable cases Artificial Pneumothorax and Phrenic Evulsion are most valuable helps in the treatment of Pulmonary Tuberculosis.

X-Ray. 41 Films were taken of cases and 472 were screened.

Sanocrysin. 16 cases were treated with Oleo-Sanocrysin. 8 of these cases had the full dose but the other 8 had to be abandoned.

Hon. Dental Surgeons. Messrs. Phillips and Milton, honorary Dental Surgeons, have treated cases who were uninsured and not able to pay, and this has been a great help in treatment.

Staff. The death of Miss Jones, the Matron, after a very short illness, was a great shock to us all. She had been Matron here since the Institution had been opened for the reception of Tuberculous patients and before that had been Matron of the Shepton Mallet Sanatorium.

Miss Neal, from Exeter, has been appointed in her place.

I also have to report with very great regret the death after a long illness of Mr. Mayers, who had been engineer here for a good many years. His place has not yet been filled.

Staff Patients. We have now 3 ex-patients doing part-time work and receiving suitable remuneration. From their point of view it is an excellent life for them and they are also most useful to the Institution.

Amusements. This side of Sanatorium life is very important, and everything is done that is possible to make the lives of the patients during their stay here happy.

During the winter months concerts or some form of entertainment are provided, if possible, weekly and billiards matches and whist drives are also arranged.

We wish to thank the ladies and gentlemen who have helped in any way to provide amusement or recreation for the patients; also for the books, magazines, papers, etc., sent.

I am sure the patients appreciate it very much. Both staff and patients too have provided entertainments.

RESULTS OF TREATMENT.

WEIGHTS.

Increase in weights in Kilos. (1 Kilo=2.2 lbs.)

| | | 1—6 | 6—12 | 12 and over. | Total. |
|--|-----|-----|------|--------------|--------------|
| Males | ... | 37 | 13 | 4 | 54 |
| Females | ... | 21 | 13 | 6 | 40 |
| The average gain in weight of 94 patients weighed on discharge | | | | | = 5.5 kilos. |
| " " of 54 male patients " " | | | | | = 4.97 " |
| " " of 40 female patients " " | | | | | = 6.18 " |
| The average loss in weight of 8 patients weighed on discharge | | | | | = 2.58 " |

Ten patients were not weighed on discharge, including 7 not T.B., and there were 3 deaths.

Working capacity of patients on admission and discharge.

| | | Full Working Capacity. | | Fit for light work. | | Unfit for work. | |
|---------|-----|------------------------|------------|---------------------|------------|-----------------|------------|
| | | Admission. | Discharge. | Admission. | Discharge. | Admission. | Discharge. |
| Males | ... | 1 | 34=59.65% | 0 | 6=10.53% | 56 | 17=29.82% |
| Females | ... | 0 | 32=66.67% | 0 | 1=2.08% | 48 | 15=31.25% |

On admission 99.04 per cent. were unfit for any work. On discharge 62.85 per cent. of all patients were fit for full work; 6.67 per cent. for light work; and 30.47 per cent. were unfit for work.

Classification on admission of patients discharged during 1937.

| Classification. | M. | F. | Total. | % | Tubercle Bacilli. | | | |
|------------------|----|----|--------|-------|-------------------|----|-----------|----|
| | | | | | Positive. | | Negative. | |
| | | | | | M. | F. | M. | F. |
| Early ... | 5 | 3 | 8 | 7.62 | 0 | 1 | 5 | 2 |
| Intermediate ... | 52 | 42 | 94 | 89.52 | 30 | 21 | 22 | 21 |
| Advanced ... | 0 | 3 | 3 | 2.86 | 0 | 3 | 0 | 0 |

Complications presented by patients were:—Pleurisy, Larynx infection, Bronchitis, Ischio-rectal Abscess, Pleura, Abdomen, Dysmenorrhœa, Neurasthenia, Rheumatoid Arthritis, M.D., Bronchial Catarrh, Emphysema, Kidney, T.B. glands and tonsils, Hernia.

The following table shows the condition of all definite cases discharged from Quantock Sanatorium since the opening in June, 1925, until 31st December, 1937:—

| | Cases. | Percentage. |
|--------------------------------------|-------------------|-------------|
| Cured | 378 | 24.9 |
| Arrested and Working | 271 | 17.9 |
| Arrested and Not Working | 20 | 1.3 |
| Not Arrested and Working | 191 | 12.5 |
| Not Arrested and Not Working | 131 | 8.6 |
| Lost Sight of and Left County | 160 | 10.6 |
| Dead | 368 | 24.2 |
| | <hr/> 1,519 <hr/> | |

NOTE.—Some of the cases are not admitted as curative cases but are advanced cases sent in to prevent home infection. This accounts for almost all the "dead" group.

The expression "Arrested" has a technical meaning and is only applied to cases free from any symptoms for at least two years. Many in the "Non-arrested" groups are apparently quite well but the two years' period has not elapsed.

TABLE XIII.

QUANTOCK SANATORIUM.

Duration of Treatment and Condition on Discharge.

| | Under 3 months. | | | | | | | | | 3—6 months. 6-12 months. | | | | | | | | | More than 12 months. | | | | | | Totals. | | | Grand Totals. |
|---------------------|---------------------|----|-----|-------------|----|-----|--------------|----|-----|--------------------------|----|-----|---------|----|-----|---|--|-----|----------------------|----|--|--|--|--|---------|--|--|---------------|
| | 3 months. | | | 3—6 months. | | | 6-12 months. | | | More than 12 months. | | | Totals. | | | | | | | | | | | | | | | |
| | M. | F. | Ch. | M. | F. | Ch. | M. | F. | Ch. | M. | F. | Ch. | M. | F. | Ch. | | | | | | | | | | | | | |
| Class TB Minus. | Quiescent | 4 | 3 | 0 | 8 | 9 | 0 | 13 | 8 | 0 | 1 | 1 | 0 | 26 | 21 | 0 | | | | 47 | | | | | | | | |
| | Not quiescent | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 0 | | | | 2 | | | | | | | | |
| | Died in Institution | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | | 0 | | | | | | | | |
| Class TB + Group 1. | Quiescent | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 3 | 0 | 0 | 0 | 0 | 0 | 3 | 0 | | | | 3 | | | | | | | | |
| | Not quiescent | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | | 0 | | | | | | | | |
| | Died in Institution | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | | 0 | | | | | | | | |
| Class TB + Group 2. | Quiescent | 0 | 1 | 0 | 6 | 0 | 0 | 12 | 8 | 0 | 2 | 1 | 0 | 20 | 10 | 0 | | | | 30 | | | | | | | | |
| | Not quiescent | 5 | 2 | 0 | 0 | 2 | 0 | 4 | 3 | 0 | 0 | 0 | 0 | 9 | 7 | 0 | | | | 16 | | | | | | | | |
| | Died in Institution | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | | | | 1 | | | | | | | | |
| Class TB + Group 3. | Quiescent | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | | 0 | | | | | | | | |
| | Not quiescent | 1 | 2 | 0 | 0 | 0 | 0 | 0 | 2 | 0 | 1 | 1 | 0 | 2 | 5 | 0 | | | | 7 | | | | | | | | |
| | Died in Institution | 0 | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 0 | | | | 2 | | | | | | | | |
| | | | | | | | | | | | | | | | | | | 108 | | | | | | | | | | |

In 46 out of 60 men discharged the disease was quiescent = 76.66 per cent. In 34 out of 48 women discharged the disease was quiescent = 70.83 per cent. 13 cases who had been admitted for observation were discharged: 6 were found to be tuberculous and are included in the above figures. The remaining 7 cases were discharged as being non-tuberculous.

Chard Sanatorium. The Visiting Tuberculosis Officer, Dr. D. B. Pascall, has furnished the following report:—

During the year the beds were fairly well occupied but there seems least call on the men's orthopædic beds.

There were the following admissions and discharges:—

| | | | | |
|-------------------------|-----|----|----------|--|
| PULMONARY. All females. | | | | |
| Admitted | ... | 28 | | |
| Discharged | ... | 21 | Deaths—3 | |
| NON-PULMONARY. Females. | | | | |
| Admitted | ... | 8 | | |
| Discharged | ... | 7 | | |
| Males. | | | | |
| Admitted | ... | 8 | | |
| Discharged | ... | 9 | Deaths—1 | |

There were in at the end of the year 43 patients; 18 pulmonary women, 14 orthopædic women and 11 orthopædic men.

The small number of admissions is plain evidence of the long stay that is necessary to produce any satisfactory results, but it also means that a long time is necessary for the staff to obtain much experience. Results have been, on the whole, satisfactory, disappointments and setbacks occur but they are inevitable and are offset by marked improvements.

X-Rays. The X-ray apparatus broke down in June and a new tube had to be procured. At the end of the year a Stabiliser was fitted into the circuit which has both improved the results obtained and made the technique simpler and more reliable.

There were 183 screenings and 324 films taken during the year.

Treatment. The first place has, as before, been given to rest in treatment. The patients downstairs obtained great benefit from the doors on to the verandah; the beds were outside almost continuously from April until into October and since then they are wheeled out on fine days. Gold has been used as before in selected cases and is quite definitely of benefit. Artificial pneumothorax was induced in six cases, one was abandoned owing to adhesions causing pain, the other five have improved and all now have no sputum or sputum negative for T.B.

In addition, 2 gas replacements and 260 refills were done during the year.

Blood sedimentation rates have been done as a routine, and though the numbers here are too small to draw definite conclusions I suggest that the two most important points in the ultimate prognosis are the sputum test and the sedimentation rate. If the sputum disappears or becomes consistently negative and the sedimentation rate becomes good the outlook is hopeful, whereas if those two factors cannot be obtained rosy cheeks and a gain in weight, though much admired by the lady, are too often only a transient gain all too soon to be followed by relapse.

During the year the Sanatorium suffered the loss of its original matron, Mrs. Batchelder, a person not at all easy to follow, but we have been fortunate to secure the services of Miss Coppinger, who has most successfully carried on, keeping up the cheerful atmosphere of the Sanatorium and the morale of the patients. To this end, concerts, entertainments and whist drives have been organised. In my view, it is a most essential part of the treatment that the patients should be kept contented and confidently happy.

I should like now to thank everyone, including the patients, for their co-operation during the year, and I hope and expect that it will be continued.

Compton Bishop Children's Home. This valuable institution was opened in October, 1917, for 19 beds, and in 1919 was enlarged for 29 beds and in 1928 for 33 beds. It has always been economical to run, and the results of the treatment as may be seen from the appended table have been most satisfactory. The average duration of stay is about 9 months for notified cases and for those under observation about 11 weeks.

It is the aim at this Children's Home to treat "the whole child" and not merely the particular physical weakness which presents itself first.

The whole atmosphere is beneficial to a child whose bodily condition has prevented him or her from living a normal life at home and whose mentality is warped and dulled in consequence.

The quiet orderly routine is particularly helpful, combined as it is with personal observation and treatment for each child so that there is no forcing of a child who needs more rest than the others.

The results of treatment—and the following up which is an essential part of the scheme—speak for themselves and are most encouraging.

The condition of all definite cases discharged up to the end of 1937 is as follows:—

| | Cases. | Percentage. |
|-------------------------------------|-----------------|-------------|
| Cured | 388 | 63.2 |
| Arrested (working or at school) ... | 93 | 15.2 |
| Arrested—Not working | 2 | 0.3 |
| Not Arrested—Working | 46 | 7.5 |
| Not Arrested—Not working | 9 | 1.5 |
| Lost sight of | 52 | 8.5 |
| Dead—of Tuberculosis ... 19 | 24 | 3.8 |
| Other conditions ... 2 | | |
| Not ascertained ... 3 | | |
| | <hr/> 614 <hr/> | |

In addition to the above cases the records of 28 are available but are not included as they stayed less than one month, and there are also 93 children who have received treatment at the Home and were finally discharged as not tuberculous.

TREATMENT WITH ARTIFICIAL LIGHT.

This work is being carried out under the Tuberculosis, Education and Maternity and Child Welfare Schemes. Four light treatment centres were in use during 1937, and 242 clinics were held. The new cases seen were 89, while the total attendances of all cases were 2,252. Of the cases treated, 18 were tuberculous. The details are given in my Report for 1937 as School Medical Officer.

MATERNITY AND CHILD WELFARE.

The general details of this work were discussed in the Annual Report for 1935.

The Midwifery Service. An important development which took place during the year was the operation of the new Midwives Act, 1936; this Act, which has as its principal object the organising of a domiciliary service of salaried midwives, under the control of the Local Supervising Authority, came into force in Somerset on April 1st, 1937, with the approval of the Ministry of Health.

The Somerset County Council entered into an agreement with the County Nursing Association, by which that Association and its affiliated Associations undertook to employ the number of midwives required for the area as whole-time servants, on the understanding that as soon as possible the County Nursing Association would arrange to employ for Midwifery and Maternity work a larger number of women who are fully-trained nurses as well as being certified midwives, and to amalgamate smaller districts in order to ensure that each midwife has a sufficient number of cases to maintain efficiency. It is satisfactory to note that since April, 1937, the whole area has been covered with an adequate supply of midwives, and amalgamations are taking place.

The County Nursing Association have agreed to employ 15 Queen's Staff Nurses to take the place of the regular nurses when they are absent on holiday or for any other reason, to act in emergency, and to fill a gap when a Nursing Association is unable to secure a suitable permanent nurse.

The salaries of the Nurse-Midwives have been considerably increased, and an adequate Pension Scheme has been adopted. Cars and telephones are being provided where necessary, and the 'Midwives' equipment has been brought up to date.

The Somerset County Nursing Association have decided that from May 1st, 1938, they will cease to give midwifery training to any but State Registered Nurses.

The amalgamations of smaller districts employing a Queen's Nurse with a car and telephone communication are steadily increasing. During the year three amalgamations have been effected and several more are under consideration.

Post Graduate Courses for midwives have been approved and will be brought into operation as soon as we are able to secure the necessary staff.

Midwifery lectures have been arranged at Bridgwater and Yeovil during the year and were well attended.

The number of certified midwives who gave notice of their intention to practise during 1937 was 335, consisting of 334 trained and 1 "bona fide" midwife.

The percentage of 1937 births in the County attended by midwives as midwives was 52.3.

During the year 836 visits of inspection were made to midwives, representing an average of 3.1 visits to each midwife.

Summary for all Midwives during the year.

| | | | |
|---------------------------------|-----|-----|-------|
| Cases attended as Midwife | ... | ... | 2,909 |
| Cases attended as Monthly Nurse | ... | ... | 1,560 |
| Doctor sent for for Mother | ... | ... | 1,247 |
| Doctor sent for for Child | ... | ... | 167 |
| Stillbirths | ... | ... | 53 |
| Death of Mother | ... | ... | 11 |
| Death of Child | ... | ... | 28 |

A doctor was called in under Section 14 of the Midwives' Act in 48.6 per cent. of midwives' cases.

During the year 1,124 doctors' accounts were paid under the contributory scheme, at a cost of £1,584 10s. 0d., while the contributory fees were £639, the deficit payable by the County Council being £945 10s. 0d. The average doctor's fee per case was £1 8s. 2d. Fees amounting to £92 11s. 0d. were paid in 68 cases not coming under the scheme, and of this £32 17s. 6d. was recovered. Apart from the Central Office Expenses, the cost of working this section of the Midwives' Act for 1937 was, therefore, £1,005 3s. 6d. This is £127 5s. 0d. more than last year.

Ante-Natal and Post-Natal Work.

Most of the Infant Welfare Centres have now started ante-natal clinics. Those at work in the areas included under the County Council Scheme are Bridgwater and Clevedon, run directly by the County Council, and Chard, Chewton Mendip, Crewkerne, East Harptree, Frome, Glastonbury, Minehead, Pill, Shepton Mallet, Street, Wellington, and Wells, managed by Voluntary Associations.

In addition to the work carried out at these centres, 114 ante-natal examinations and 33 post-natal examinations were made through the Flying Clinics.

Again many patients are referred for definite defects to medical practitioners by the midwives and payment is made under the Midwives Act.

These general arrangements have been satisfactory in the past, but with the greater attention now being given to midwifery work and to conditions in the ante-natal and post-natal branches it appears desirable that the provisions should be extended and this matter is receiving attention.

Arising out of such work it is necessary to have available institutions to which cases can be sent when special treatment is required. Arrangements have been made with four maternity homes in the County to take in cases at the cost of the County Council, when sent for certain special conditions such as abnormality of the mother or suspected difficult confinement or unsuitable or very inaccessible home. The maternity homes at which arrangements have been made for County Council cases are the following:—Bridgwater, Taunton, Wellington and Yeovil, while cases were sent to Bristol General Hospital, Bristol Royal Infirmary, Royal United Hospital, Bath, and several voluntary hospitals in the County.

During the year, 110 applications were received for assisted admissions to a maternity home or hospital. Of these 55 were accepted and 55 refused.

With regard to post-natal work, there have been no great developments in the County, but for the proper safety of the mothers it is essential that such examinations should be made available in the future. A scheme for this purpose will operate in the near future.

Consultants for Midwifery Scheme. Under the County Scheme 18 cases were accepted, and these were distributed among the four specialist consultants for this work. This service is proving of the greatest value and it is a provision which is definitely helping to lessen the risks and dangers of child birth.

Dental Scheme for Expectant and Nursing Mothers. This scheme operates partly through private dental practitioners and partly through dental clinics staffed by officers of the County Council.

Under the first section of the scheme, 30 applications were received during 1937. Seven dentures were fitted, and in every case a report has been received from a County Council Medical Officer or Health Visitor that the dentures were satisfactory and in use. Dentures are not completed in 17 cases but patients are still attending for treatment. Two patients applied and were referred to their local dentist, but no estimates have been received.

Two of the 17 uncompleted cases were referred to their local hospital for extractions through Hospital Leagues schemes, the County Council being responsible for the cost of the dentures only.

Four cases were not accepted as they were either women who were not considered likely to prove satisfactory patients or ineligible to come into the Scheme.

Under the main scheme clinics were held as follows:—

Glastonbury Clinic. This Clinic has been in existence since the beginning of 1936. It is very well supplied with clinical material by Glastonbury, Wells and Street midwives, and patients also come long distances from the Polden Hills and the Mendips. Miss Abbott undertakes a great deal of personal service in rounding up patients and encouraging them to attend.

During 1937, 39 patients attended for the first time. Sixteen sessions were held, with 128 attendances for general work. In addition, there were 133 attendances for denture treatment made. 41 cases have been recommended for dentures.

Frome Clinic. This Clinic has been in existence since the beginning of 1937. It serves Frome Rural District and the town, and parts of Shepton Mallet, Clutton and Bathavon Rural Districts, and has proved to fulfil a need. Midwives send or bring in patients and the attendance is well maintained.

During 1937, 20 patients attended for the first time. Twenty-one sessions were held, with 61 attendances for general work, and there were 44 attendances for denture treatment.

Maternal Mortality. This is included in two groups in the Registrar-General's returns and is so included in Tables A. and B. The two groups are "Puerperal Sepsis" and "Other Accidents and Diseases of Pregnancy and Parturition."

The deaths from these causes for each of the last 20 years are shown in the following Table:—

| | 1918 | 1919 | 1920 | 1921 | 1922 | 1923 | 1924 | 1925 | 1926 | 1927 | 1928 | 1929 | 1930 | 1931 | 1932 | 1933 | 1934 | 1935 | 1936 | 1937 |
|---|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|
| Puerperal Sepsis ... | 8 | 6 | 9 | 5 | 2 | 4 | 5 | 10 | 6 | 12 | 14 | 8 | 12 | 11 | 5 | 5 | 9 | 9 | 12 | 3 |
| Other Accidents and Diseases of Pregnancy & Parturition | 20 | 9 | 21 | 22 | 15 | 13 | 19 | 16 | 15 | 11 | 12 | 13 | 13 | 14 | 19 | 18 | 9 | 10 | 18 | 15 |
| TOTAL ... | 28 | 15 | 30 | 27 | 17 | 17 | 24 | 26 | 21 | 23 | 26 | 21 | 25 | 25 | 24 | 23 | 18 | 19 | 30 | 18 |
| Rate per 1,000 Births | 5.14 | 2.64 | 3.63 | 3.60 | 2.45 | 2.49 | 3.69 | 4.21 | 3.46 | 3.83 | 4.36 | 3.69 | 4.31 | 4.84 | 4.31 | 4.45 | 3.28 | 3.71 | 5.64 | 3.23 |

It will be noted that the maternal mortality rate for this area shows a reduction and compares favourably with the rates in recent years. Each case is separately investigated and all the circumstances examined in detail.

During the year 8 cases of Puerperal Fever and 63 cases of Puerperal Pyrexia were notified. Arrangements have been made with different Hospitals to take in County cases and facilities are offered. During 1937 nine cases were so admitted. The Hospitals with which arrangements have been made are the following:—

Bath Royal United Hospital, Bridgwater Hospital, Bristol Royal Infirmary, Chard Hospital, Minehead Isolation Hospital, Taunton Isolation Hospital, Yeovil Hospital.

The previously inadequate accommodation in the Taunton area has now been overcome by the special block for puerperal sepsis cases in the Taunton and District Isolation Hospital. The alterations at this hospital are now completed and the unit is in service.

Care of Infants and Children under School Age. This work is carried on partly through home visits and partly through established Infant Welfare Centres. While it is true that much essential work can be done in the homes of the people by well-trained Visitors, yet the position of the Infant Welfare Centre is also an important one in the successful direction of this work.

In my opinion, special attention should be given to the early application of preventive measures and, where necessary, of treatment to young children under the age of five. Such a procedure forms the very foundation of preventive medicine and if carried out properly will do much to lessen the diseases and defects of later life.

Towards this end the work of home visiting by Health Visitors and District Nurse Health Visitors should be intensified, the clinic services should be extended, and in addition, where possible, the County Scheme for the examination of children between the ages of 3 and 4 should be promoted. In this latter service there are many difficulties, and perhaps it may not be possible to obtain a complete scheme throughout the County, but at least a start has been made with it and every effort will be made to extend its scope.

(a) **Visits and advice in the homes.** Most of this work is carried out by district nurses, a small part by the whole time Health Visitors. The proportion of births so distributed during 1937 was as follows:—

| | | | Rural. | Urban. | Total. |
|-------------------------|-----|-----|--------------|--------------|--------------|
| Whole-time County Staff | ... | ... | 55 | 302 | 357 |
| District Nurses | ... | ... | 3,056 | 1,247 | 4,303 |
| | | | <u>3,111</u> | <u>1,549</u> | <u>4,660</u> |

(b) **Infant Welfare Centres.** At the end of 1937 the Centres in the County, exclusive of those at Yeovil, Taunton and Weston-super-Mare which are outside the County Scheme, so far as I am aware, were:—

| Centre. | Day of week open. | Frequency of Meetings. |
|----------------|-------------------|---|
| Bridgwater | Friday | Every week. |
| Chard | Friday | 1st and 3rd Friday in every month. Doctor 1st Friday. |
| Chewton Mendip | Wednesday | 1st and 3rd Wednesday each month. Doctor once a month. |
| Clevedon | Thursday | Every Thursday except 1st in month. Doctor last Thursday each month. |
| Crewkerne | Tuesday | Alternate weeks. |
| Curry Rivel | Thursday | 1st Thursday in each month. |
| Frome | Tuesday | Every week. Doctor 2nd Tuesday. |
| Glastonbury | Wednesday | 1st and 3rd Wednesday each month. Doctor 1st Wednesday. |
| Harptree | Tuesday | Alternate weeks. |
| Long Ashton | Monday | Alternate weeks. Doctor once a month |
| Minehead | Tuesday | Every week. Doctor 1st Tuesday in every month. |
| Pill | Wednesday | 1st and 3rd Wednesday in every month. |
| Portishead | Friday | Alternate weeks. |
| Shepton Mallet | Friday | Twice monthly and also twice monthly ante-natal. |
| Street | Wednesday | Every week. Doctor alternate weeks. |
| Wellington | Thursday | Every week. Doctor alternate weeks. |
| Wells | Tuesday | 2nd and 4th Tuesday in every month. also ante-natal 1st Tuesday. |
| Wraxall | Friday | 1st and 3rd Friday in every month Doctor once a month (1st Friday). |

The Centre at Bridgwater is the only one for which the County Council is directly responsible, but grants are paid to all the others by the County Council.

A separate ante-natal clinic is held at Clevedon by Dr. Pringle. 11 sessions were held during the year, 7 different cases attended with 7 attendances.

Bridgwater Infant Welfare Work. As a County Council Centre this is considered separately. The following gives some particulars of the work.

Births. During 1937, the number of births notified in the Borough (including still-births and cases later transferred to other districts) was 456; of these 429 were attended by midwives. A doctor was called in to help the midwife in 136 cases. 8 babies died during the year, a rate of 25.2 deaths per 1,000 births.

| | | | | | | |
|-----------------------|----------------------------------|-----|-----|-----|-----|-------|
| <i>Home Visiting.</i> | No. of children on visiting list | ... | ... | ... | ... | 679 |
| | Total visits paid to infants | ... | ... | ... | ... | 4,623 |
| | Ante-natal visits paid | ... | ... | ... | ... | 162 |
| | Total visits paid during 1937 | ... | ... | ... | ... | 5,464 |

Milk Grants. 70 grants were made, at an estimated cost of £157. As far as possible it is made a condition that cases receiving milk attend at the Centre so that the benefit of the grants can be estimated. Were it not for the milk grants a very considerable number of mothers would be unable to breast feed who now do so.

| | | | | |
|----------------|--|-----|-----|-------|
| <i>Centre.</i> | Number of individual children who attended the Centre | ... | ... | 414 |
| | Number of individual mothers who attended the Centre | ... | ... | 386 |
| | Average weekly attendance of children (under 1 year) | ... | ... | 41 |
| | Average weekly attendance of children (1 to 5 years) | ... | ... | 54 |
| | Average weekly attendance of mothers | ... | ... | 52 |
| | Total number of attendances (children 2,440; mothers 1,442) | ... | ... | 3,882 |
| | Total number of medical consultations for infants | ... | ... | 472 |
| | Total number of medical consultations for women (excluding ante-natal) | ... | ... | 104 |

The medical work was carried out by Dr. Halliday.

Ante-Natal Work. This was carried on throughout the year both by home visits and by inviting attendance at the Ante-Natal Centre once a month. The total attendances were 102 with 54 women attending.

The figures show an increase in the amount of work undertaken by the Centre and they are extremely satisfactory, especially when it is noted that the total number of attendances of children have increased from 1,719 last year to 2,440 this year, and that similarly the attendances of mothers have increased from 1,051 to 1,442.

The work of the Centre will be very considerably helped in the future by the new premises of the Bridgwater Health Centre. Every facility will be available for the conduct of the work and the housing of this clinic under these new conditions should materially add to its general value.

(c) **Treatment and supervision of abnormal children.** These are dealt with in various ways. It is the duty of the Infant Visitors to report all infants not progressing properly and those with definite abnormalities. Many are seen by Dr. Halliday, and the appropriate treatment advised, some are seen by other members of the Staff, a few are referred to Infant Welfare Centres. A certain number have been seen by the County Oculist, as squint cases, and the appropriate treatment given. The aim is that all children not progressing properly should come under review at the Health Department, with the object that adequate treatment, if treatment is necessary, should be advised.

702 reports were received, including a few from doctors or through the Orthopædic Centres. They include a miscellaneous series of conditions, and no scientific classification is possible. They have been grouped as follows to give an idea of the conditions to be dealt with:—Malnutrition 148, Rickets 55, Debility 58, Catarrhal 78, Minor Postural Defects 109, Orthopædic 51, Eye Defects 51, Tonsils, Otorrhœa, etc. 44; other defects 108.

Under mal-nutrition are grouped children who fail to gain weight, and there is a constant supply of these, whose weight remains stationary for months at a time. Most of these are in poor families, *i.e.*, those whose income is well within the scale for free grants. A few are children whose diet is badly balanced, or who do not get sufficient rest, but poverty is also present.

An important weapon in improving nutrition is the authorisation of the County Council to make Milk Grants. Throughout the year milk was granted to necessitous cases under the Milk (Mothers and Children) Orders of the Ministry of Health. Grants were made to 2,863 cases, at an estimated cost of £993. Last year £927 was spent. The grants are carefully made and supervised, and given as allowances for specific public health purposes. Of the grants made, about 26 per cent. were to expectant mothers, 41 per cent. to nursing mothers, and 33 per cent. to children under five years of age. Great care is taken to prevent abuse and to see that the milk is taken only by the person for whom it is intended.

The heading of "other defects" includes about 60 reports received from Infant Visitors on cases of transitory illness, difficult feeding, etc. There were dealt with by milk grants, advice by letter or at flying clinics, etc., and usually a further report was received that conditions were now satisfactory. The other 48 were unclassifiable conditions where no definite action was indicated.

The figures show that many children get treatment with maltoline, oil and malt, etc., or are given treatment through one or more of the various County Schemes. For others it is only necessary to keep them under special observation. The number dealt with through their private doctors is increasing. More children are being referred by doctors to the County Health Visitors or to Infant Visitors for help with extra-nourishment, regulation of diet, etc., while the doctor provides any medical treatment required. It is to be hoped that this friendly co-operation will continue to develop.

Baby Hospital, Bridgwater. At the beginning of 1937 there were 3 babies in the ward and during the year 28 were admitted.

The nature of the defects for which the babies were admitted were:—Prematurity 4, mismanaged feeds 11, rickets 3, Pink disease 1, Bronchial catarrh 2, congenital debility 2, neglect 3, congenital respiratory obstruction 3, spinal weakness 1, and bottle-burn 1.

Of these cases, 2 died within a week after admission, one after 3 weeks and one after 4 months, and 5 babies were still in the Hospital at the end of the year. Of the other 22 cases, 14 were discharged well and 6 improved. In nearly all of these our reports show that progress has been maintained, but 2 cases discharged not improved have since died. The average length of stay has been nearly 10 weeks. This little ward has been found most beneficial, and great credit is due to the Sister in charge for her devoted care of the individual babies.

Institutional treatment for children 1-5 years. The Baby Hospital is mainly for children under one year of age and no child over two is admitted.

Arrangements are made for a few children 2-5 at other homes, and several are available. One is at Wells, which we have found to be very satisfactory. 7 children were received at this home, 1 at Batheaston and one at Weston-super-Mare, the average length of stay being 16 weeks. All of them received treatment for malnutrition, generally associated with some other condition either as the cause, or, on the other hand, as an effect of the malnutrition. 5 were mismanaged at home, 5 suffered from catarrhal infections, 1 from anæmia, 2 from rickets, and 2 were tuberculosis contacts. All improved while away at the Homes. At the end of the year 3 were still there, and of the 6 discharged 4 showed sustained improvement, 1 relapsed, while 1 had only recently returned home.

Ophthalmia Neonatorum. During the year 25 cases were notified. The distribution of the cases is shown in Table III. Under the Public Health (Ophthalmia Neonatorum) Regulations, 5 cases were sent to Hospital under the County Council Scheme. All the cases were followed up for long periods, to ascertain if there is any impairment of vision. All cleared up completely.

Flying Clinics. To enable these abnormal children to be seen, to give advice to ante-natal cases, and to help and encourage Infant Visitors in their work, the system of special occasional clinics by Dr. Halliday, and other medical members of the Staff, has been continued.

These clinics are not fixed in most instances, but are arranged irregularly as occasion arises and held at any convenient place. The occasion for holding a clinic may be a request from the Infant Visitor for advice for one or more cases, advice for any expectant mother, or our opinion that a local clinic would help to stimulate and assist the nurse-midwife, who is the Infant-Visitor. At the clinic the Infant Visitor presents such of the infants and children under five years about whom she is not satisfied as to their progress, mothers who seek medical advice for their children, possibly one or more expectant mothers. The Medical Officer also takes the opportunity to discuss the work and any difficulties. The method of procedure varies from the collection of a dozen or more children at the nurse's house, or at a room taken for the purpose, to the visiting of several scattered families in their own homes.

As a development of this service a permanent clinic has been established at Banwell. At this Centre 68 children made a total of 253 attendances and in addition 10 ante-natal cases and 22 children of school age were examined.

The work done at these Flying Clinics is shown in the following table:—

| Medical Officer. | Infant Visitor districts visited. | Sessions held. | Numbers seen. | | | | Total. |
|--------------------|-----------------------------------|----------------|------------------|---------------|------------|------------------------|--------|
| | | | Infants under 2. | Children 2-5. | Ante-natal | Post-Natal and others. | |
| Dr. H. R. Dugdale | 15 | 28 | 151 | 115 | 10 | 11 | 287 |
| Dr. D. G. Evans | 32 | 73 | 471 | 491 | 22 | 2 | 986 |
| Dr. H. M. Halliday | 81 | 92 | 534 | 347 | 64 | 61 | 1006 |
| Dr. G. H. Pringle | 25 | 53 | 281 | 260 | 18 | 42 | 601 |
| Totals .. | 153 | 246 | 1,437 | 1,213 | 114 | 116 | 2,880 |

Birth Control. This is conducted along the restricted lines authorised by the Public Health Committee. Applications for the most part go direct to Dr. Halliday. During the year 20 applications were received, of which 10 were seen and advised personally by Dr. Halliday, and 10 were referred to other clinics.

Nursing and Maternity Homes. At the end of the year the number of homes on the Register was 43. They were all visited from time to time by Dr. Halliday or Miss Stewart to see that the premises are in order and the requirements of the County Council complied with as regards management.

Child Life Protection. The supervision of children under nine maintained for reward, apart from their parents, is carried out by the County Council and administered by the Public Health Committee. All the Health Visitors act as Infant Life Protection Visitors.

The children on our Register at the end of 1937 number 201, and as regards methods of payment may be grouped as follows:—

| | | | | | | |
|---|-----|-----|-----|-----|-----|------------|
| Weekly payments in | ... | ... | ... | ... | ... | 155 |
| Single lump sum payment | ... | ... | ... | ... | ... | 2 |
| Otherwise paid for (mostly monthly or irregularly)... | ... | ... | ... | ... | ... | 45 |
| | | | | | | <u>202</u> |

Those for whom a lump sum has been paid require and receive special supervision.

The number of foster mothers with one child only is 101; with two children—16; with three children—5; with four children—1; with over four children—3.

The foster mothers who run a regular baby home are therefore few and those with over four infants are one at Taunton with 32 at the end of 1937 (authorised for 35); one at Bridgwater with 11 (authorised for 12); one at Wembdon with 7 (authorised for 8).

TABLE XIV.

DEATHS UNDER 1 YEAR OLD.

| URBAN. | | Under 1 week. | 1—4 weeks (inclusive) | Total under 1 month. | 1—6 months. | 6—12 months. | Total Deaths under 1 year. | RURAL. | | Under 1 week. | 1—4 weeks (inclusive). | Total under 1 month. | 1—6 months. | 6—12 months. | Total Deaths under 1 year. |
|-------------------|------|---------------|--------------------------|-------------------------|-------------|--------------|-------------------------------|----------------|------|---------------|---------------------------|-------------------------|-------------|--------------|-------------------------------|
| Bridgwater | ---- | 4 | 0 | 4 | 4 | 1 | 9 | Axbridge | ---- | 0 | 11 | 11 | 1 | 1 | 13 |
| Burnham | ---- | 6 | 0 | 6 | 0 | 2 | 8 | Bathavon | ---- | 9 | 0 | 9 | 5 | 2 | 16 |
| Chard | ---- | 3 | 0 | 3 | 0 | 0 | 3 | Bridgwater | ---- | 6 | 2 | 8 | 5 | 0 | 13 |
| Clevedon | ---- | 3 | 0 | 3 | 0 | 0 | 3 | Chard | ---- | 5 | 3 | 8 | 2 | 1 | 11 |
| Crewkerne | ---- | 0 | 0 | 0 | 0 | 2 | 2 | Clutton | ---- | 7 | 1 | 8 | 5 | 3 | 16 |
| Frome | ---- | 2 | 0 | 2 | 0 | 0 | 2 | Dulverton | ---- | 0 | 1 | 1 | 0 | 1 | 2 |
| Glastonbury | ---- | 0 | 0 | 0 | 0 | 0 | 0 | Frome | ---- | 4 | 2 | 6 | 0 | 0 | 6 |
| Ilminster | ---- | 1 | 0 | 1 | 0 | 0 | 1 | Langport | ---- | 2 | 2 | 4 | 3 | 1 | 8 |
| Minehead | ---- | 1 | 0 | 1 | 0 | 1 | 2 | Long Ashton | ---- | 3 | 3 | 6 | 3 | 2 | 11 |
| Norton-Radstock | ---- | 2 | 2 | 4 | 1 | 1 | 6 | Shepton Mallet | ---- | 2 | 1 | 3 | 1 | 0 | 4 |
| Portishead | ---- | 1 | 0 | 1 | 0 | 1 | 2 | Taunton | ---- | 4 | 3 | 7 | 3 | 1 | 11 |
| Shepton Mallet | ---- | 0 | 1 | 1 | 1 | 1 | 3 | Wellington | ---- | 1 | 0 | 1 | 1 | 0 | 2 |
| Street | ---- | 1 | 0 | 1 | 0 | 0 | 1 | Wells | ---- | 1 | 3 | 4 | 1 | 2 | 7 |
| Taunton | ---- | 6 | 3 | 9 | 7 | 2 | 18 | Williton | ---- | 3 | 2 | 5 | 0 | 0 | 5 |
| Watchet | ---- | 2 | 0 | 2 | 0 | 0 | 2 | Wincanton | ---- | 3 | 0 | 3 | 1 | 0 | 4 |
| Wellington | ---- | 5 | 0 | 5 | 0 | 0 | 5 | Yeovil | ---- | 4 | 0 | 4 | 4 | 1 | 9 |
| Wells | ---- | 3 | 0 | 3 | 1 | 0 | 4 | | | | | | | | |
| Weston-super-Mare | ---- | 10 | 2 | 12 | 1 | 1 | 14 | | | | | | | | |
| Yeovil | ---- | 4 | 1 | 5 | 3 | 0 | 8 | | | | | | | | |
| Totals | | 54 | 9 | 63 | 18 | 12 | 93 | Totals | | 54 | 34 | 88 | 35 | 15 | 138 |

Rate of Infantile Mortality. This is the number of deaths under one year of age per 1,000 births and for 1937 was 43.51. This rate is the lowest on record for the County. The rate for England and Wales was 58. The rate in the rural areas was 46.24 and in the urban areas 40.01.

This low rate of infantile mortality demonstrates the results of the care and supervision of child life in Somerset during recent years. It is undoubtedly an achievement of considerable merit, especially in view of the changes in the general population referred to in a previous section of this report.

Table XIV. shows the months of death. These figures do not always exactly correspond with those in Table A, as the latter is taken from the Registrar-General's figures, and this Table is from figures given by the District Medical Officers of Health, obtained from the local Registrars.

This Table shows that 151 of the 231 deaths under one year of age took place before the child was a month old. This is 65.4 per cent. and of these 71.5 per cent. took place before the infant was a week old. In other words, a large proportion of the deaths are pre-natal in origin and illustrates the importance of pre-natal work.

ORTHOPÆDIC SCHEME.

The County Scheme and the results of working during 1937 are described in considerable detail in my Report for 1937 as School Medical Officer.

The new cases seen and dealt with through the Clinics were as follows:—

Cases seen at the Clinics.

| | |
|---|-------|
| Tuberculosis of bones and joints | 14 |
| Spastic and other paralysis conditions | 10 |
| Infantile paralysis (poliomyelitis) | 51 |
| Osteo-myelitis | 2 |
| Congenital dislocation of the hip | 6 |
| Club foot | 5 |
| Other congenital deformities | 14 |
| Torticollis | 13 |
| Diseases and injuries to the toes | 19 |
| Scoliosis | 8 |
| Postural deformities:— | |
| General defects of posture | 14 |
| Flat foot (often with other postural deformities) ... | 35 |
| Knock knees (many old rickets) | 37 |
| Bow-legs | 25 |
| | <hr/> |
| | 111 |
| Rickets (not specially postural) | 4 |
| Injuries and accidents | 15 |
| Other defects and deformities | 46 |
| | <hr/> |
| | 318 |
| | <hr/> |

The number of new cases seen is 3 less than in the previous year.

Much attention has been given to the prevention of crippling and postural defects and to their treatment in the early stages of development. The general posture work carried out in this County has returned uniformly good results and the gain to the children has been marked.

Generally speaking early prevention and early treatment are now well established as principles in this orthopædic work, and, consequently, the strength of the service is steadily on the increase.

HEALTH PROPAGANDA.

(A) General Remarks.

The general work under the County Scheme for Health Propaganda has been continued, and a heavy programme has been carried out in an efficient and enthusiastic way by Miss Sewell, the County Lecturer.

I am satisfied that this service, steadily and regularly provided, returns results of the best description; any propaganda of a temporary nature is largely wasteful and useless for the very basis of this work depends upon simple health teaching applied in small amounts over a considerable period of time.

I am confident that the field for such work among the general public is a large one and that public interest in its development can easily be aroused and secured, always providing that the methods and direction of the service are on the proper lines.

There appears to me to be a great future for educational health films dealing with every section of health education, but one must emphasise that these films must be sufficiently attractive and interesting to take and hold their own place in comparison with the general films to whose standards the great mass of the public have now become accustomed. Anything poorly produced and badly planned, and there are many such health films to-day, simply has no effect and such films may even damage the work by precipitating ridicule.

Again, in general health education throughout the country to-day there is far too much overlapping of endeavours and far too much multiplication of agencies and bodies. The result is that the public is confused at first and later entirely neglectful and the final result is a weakening of a cause which is so important that any such happening is greatly to be deplored.

In Somerset these varied and sometimes conflicting tendencies have been avoided, and, in fact, we ourselves act as a co-ordinating factor in all this work. Although we direct this work in our own department we welcome the help of outside voluntary and other agencies, but even with our own organisation we would be greatly aided by any control system whereby all the many health teaching bodies of to-day were amalgamated, or at least in which their various efforts were pooled and so became available to everybody from one common source.

(B) Details of work in Somerset during the year.

In addition to the usual routine work, the year has been marked by the inauguration of the National Health Campaign in which we have participated fully, although it was felt that the continuous Health Propaganda work undertaken in this County is of more value than any sudden spurt of a temporary nature. I would make it clear, however, that such criticism applies only where regular health teaching is not usually carried out from year to year; in our case the extra publicity and effort may well have been of advantage to our scheme, and in any regular scheme such a special effort from time to time may well be extremely valuable.

During the year the appointment of extra Physical Training Organisers relieved the difficult situation previously caused by the large demand for "Keep Fit" classes which came in continually and which there was no means of supplying. Under the new arrangements "Keep Fit" classes are now being organised in a large number of places in the County.

In the course of the year a total of 244 talks and lectures were given by the County Lecturer under such auspices as Women's Institutes, Mothers' Unions, Women's Meetings, Infant Welfare Centres, Schools, District Nursing Associations, Village Lectures and Educational Evenings, V.A.D., Girl Guides and Boy Scouts, Tuberculosis Care Committees, District Nurses Study Circles, Health Exhibitions, Lectures to Pupil Midwives and Talks to Factory Staffs, etc.

I supply details of some of these sections of the work under the following individual headings:—

National Health Campaign. The campaign initiated by the Ministry of Health and organised by the Central Council for Health Education has had the full support of this County. It was launched in October, when Health Exhibitions were held in four towns and the Health and Cleanliness Council's Cinemotor toured the County for a fortnight as reported under separate headings. Literature was received from the Central Council and distributed throughout the Campaign as follows:—

50,000 Folders; 45,000 Book-Marks; 15,600 Posters and 5,000 Display Cards. These were issued to Local Authorities, Elementary Schools, Infant Welfare Centres, Dispensaries, Women's Institutes, Girl Guides, Breweries, Libraries, etc.

In addition, a notice has been drawn up and supplied to each Post Office in the County concerning the local Health Services. This is available on application at the Counter.

Women's Institutes and Mothers' Unions. The number of Women's Institutes at which lectures have been given has increased from 35 last year to 40 this year. A number of requests for lectures and demonstrations on the "Keep Fit" movement have also been received and passed on to the Physical Training Organisers and voluntary leaders and these are not included in the figures.

The County Officer gave various health lectures at the following Institutes:—Somerton, East Brent, Cudworth, Curry Mallet, Orchard Portman and Thurlbear, Keynsham, Norton Fitzwarren, Spaxton, West Buckland, Sandford, East Huntspill, Corfe, Combe St. Nicholas, Rode, Yeovil Women's Fellowship, Roadwater, Cothelstone, East Harptree, Wraxall, Wincanton, Dinder, Hatch Beauchamp, Bishops Lydeard, Chilcompton, Bagborough, Limington, Horsington, Churchinford, Creech St. Michael, Dunkerton, Newton St. Loe, Witham Friary, Alcombe, Ash Priors, Camerton Mothers' Union (2), Edington, Halse Women's Club, Monkton Combe, Clutton.

Lectures and Meetings—Various. Open Days have been held at two schools, Barrow Gurney and Pitney, where the Health Exhibition was on view, and a health talk given to parents.

The Yeovil Girls' Friendly Society has been visited for the purpose of encouraging the "Keep Fit" class.

Health Films were shown and a talk was given to the Yeovil V.A.D. and also at the following Village Meetings:—Dunkerton, Cranmore, Norton St. Philip, Compton Dundon, Martock, Ilchester, Ditchet.

District Nurses' Refresher Course. Three Centres were held this year with a fresh syllabus for the revision of Midwifery. Each course consisted of three lectures only instead of six as at former meetings. The shortening of the course resulted in more Nurses attending the full course.

| | |
|---------------------------------|------------------------|
| Bridgwater Centre—Spring, 1937. | Average attendance 24. |
| Taunton „ —Summer, 1937. | „ „ 18. |
| Yeovil „ —Winter, 1937. | „ „ 28. |

We were fortunate in getting Dr. Statham, Consultant Obstetric Surgeon, to give one lecture in each course, and this was very much appreciated.

Infant Welfare Centres. Thirty-seven talks were given at Infant Welfare Centres during the year. Courses of lectures have been given at Frome and Shepton Mallet, which have increased the interest taken by the mothers. At the end of each course questions were given for the mothers to answer at home and a small prize awarded for the best answers.

Lectures were given at the following Centres:—Weston-super-Mare (5), Shepton Mallet (6), Kilmersdon (2), Portishead (1), Frome (6), Crewkerne (4), Street (1), Chewton Mendip (4), Mells (5), Wellington (1), Clevedon (1), Wells (1).

Flying Clinics. Two Flying Clinics were visited and talks given to the mothers while they waited to see Dr. Halliday.

Lectures to Pupil Midwives. Two courses, each of seven lectures, have been held to prepare the pupil midwives at the Mary Stanley Home for the Infant Visitor's Examination. Their notebooks were corrected after each lecture and a question given them to answer during the week. One examination has been held, and it is hoped to hold another early in the New Year. Results:—14 candidates took the examination; 10 passed.

District Nursing Associations. At the Annual Meetings of three District Nursing Associations lectures have been given. These took place at Churchill, Yatton and Winsford.

Tuberculosis Care Committees. At the Annual Meetings of two Tuberculosis Care Committees lectures were given.

Health Exhibitions. Thirteen centres were visited by the Health Exhibition. Of these eight were Urban Districts, one a village centre, two school open days and two Infant Welfare Centres.

The Exhibitions in the Urban Districts have gradually become more elaborate, and in consequence their organisation takes a great deal of time. Exhibitions arranged in the Spring had to be postponed owing to the influenza epidemic, but in spite of this and bad weather conditions good attendances were secured. The annual visit of the Health and Cleanliness Council's Cinemotor in October coincided with the opening of the National Health Campaign, so a further series of Urban District Exhibitions were organised successfully. Arrangements were made on similar lines as last year, the County Travelling Health Exhibition being on view but the main feature being demonstrations of Physical Training by the Elementary School children taken by Miss M. A. Smith; demonstrations of cookery by the Milk Publicity Council; Home Nursing and First Aid demonstrations by local V.A.D. and Ambulance men. The Mayor, Chairman of the U.D.C., or other local person, has opened each Exhibition.

Additions to Exhibition. (1) A set of charts showing the average normal growth of Infants at various ages has been made from schemes produced by Dr. Halliday and presented by the Glaxo Laboratories.

(2) A street Banner to advertise the "Health Exhibition" has been purchased.

(3) Charts showing the Health Services and Maternity and Child Welfare Services of Somerset have been produced.

(4) Charts illustrating clean milk production have been presented by United Dairies Ltd.

(5) Specimens of the Vitamins and charts of Vitamin deficiency have been presented by Glaxo Laboratories.

(6) The National Eye Service have presented a show stand advertising the Service.

(7) Model of Lower Jaw of child presented by Mr. Crossley.

(8) More food models have been made.

Schools. One hundred and ten schools have been visited and talks given, health films shown, or a discussion held with the teacher regarding the teaching of Hygiene. This does not include the forty-four schools visited by the Dental Board Demonstrators.

The Hygiene survey of the County started in 1934 has been continued and returns obtained from a further fifty-three schools, making a total of three hundred and eight. The value of this survey is doubtful, for as it takes five to six years to visit all the Schools the earlier returns must be out of date before the survey is complete. Of the fifty-three returned, thirty are teaching Hygiene efficiently and with a syllabus, twenty have no regular hygiene teaching and three give lessons but have no syllabus. Twenty-eight out of the fifty-three Schools still have no suitable Health Reader although these can be obtained by requisitioning and are never refused.

Hygiene Classes for Teachers. One lecture was given to the Head Teachers of the Weston-super-Mare District. Courses at centres have been discontinued as it was found they were very unsatisfactory and more could be done by individual visits.

Dental Board Tour (5th Tour). Two lecturers visited Somerset for a week in July and toured Schools in the Taunton Rural, Wellington and Bridgwater Rural areas. Forty-four Schools were visited and letters of appreciation were received from many of the teachers. These lectures undoubtedly are of great value in stimulating Dental Health work but it is felt that propaganda on this subject is entirely wasted if the Dental Service offered does not keep pace.

Schools visited by Dental Board lecturers. Cannington, Otterhampton, Stogursey, Nether Stowey, Wembdon, West Huntspill, Highbridge, Burnham C.E., Burnham St. Joseph's R.C., Edington and Chilton Polden, Edington Burtle, Chedzoy, Weston Zoyland, North Petherton, Somerset Bridge, North Newton, Lyng, Burrowbridge, Puriton, Brent Knoll, Stawell and Sutton Mallet, Ashcott.

Thornfalcon, Creech St. Michael, West Monkton, Thurlbear, Durston, Churchstanton, Otterford Bishopswood, Staplegrove, Kingston St. Mary, Bishops Lydeard, West Bagborough, Halse, Lydeard St. Lawrence, Trull, Oake, Milverton, Wiveliscombe, Chipstable, Bathealton Kittisford, Wellington Courtland Road Boys' and Girls', Rockwell Green.

Health and Cleanliness Council Cinemotor Tour. A fortnight's tour was arranged in October in conjunction with the Somerset Rural Community Council. Films were borrowed from other organisations, including the Dental Board, the National Milk Publicity Council and the National Eye Service.

The Cinemotor attended the Health Exhibitions at Frome, Glastonbury, Midsomer Norton and Yeovil and was partly responsible for attracting large audiences. Film Shows were also given at the following places:—

Schools. Kilmersdon Endowed, Norton Radstock C.E. Mixed, Norton Radstock Girls, Norton Radstock Welton Boys, Timsbury Council, Somerton Boys, Somerton Monteclefe, Butleigh, Wells Central C.E. Boys and Girls, Long Sutton, Martock Boys, Martock Bower Hinton, Ilchester, Templecombe, Henstridge.

Village Halls. Dunkerton, Cranmore, Norton St. Philip, Compton Dundon, Diteheat, Martock, Ilchester.

Infant Welfare Centres. Mells, Wells.

V.A.D. Yeovil.

Cinemas. Frome, Yeovil. Free shows were given on the two Saturday mornings, all the school children of each town being invited.

The tour was an undoubted success this year, approximately 7,500 people seeing the films.

Factories. Health talks were given in four factories during the year. The conditions for speaking are difficult but there is scope for development in this work.

"Better Health" Magazine. The articles on the County Council page have included the following:—Clothes of the School Child; Some Dental Misconceptions; Our Score Card; The Essentials of a Healthy Home; What is Dirt?; Use and Preparation of Dishes from the Cheaper Cuts of Meat; One way to Health; Seaside Bathing; Back into Harness; Nutrition and the "Keep Fit" Movement; Winter versus Summer; Pioneer of Medicine—Moses.

The circulation of the magazine is 3,000 copies per month.

Gramophone Records of Health Talks. An attempt was made to establish a library of Health Talks recorded on gramophone records which could be lent to Schools and Infant Welfare Centres, etc., but it was found that the existing records were not suitable for the purpose and the matter was dropped for the present.

Conclusions. It will be noted that this work was carried out on a wide basis and that it was brought into contact with many different phases of life in the County.

The results that come from it are never sudden or dramatic but they are steadily showing themselves in greater interest on the part of the public and more especially and importantly in wives and mothers in the basic essentials of better health and its attainment and preservation.

Teaching of this kind on infant and child welfare, nutrition, rest and exercise, cleanliness and care of the bodily functions, and the proper and early treatment of disease and illness is steadily building up a public of better informed and more keenly interested people; there is still much to be done in the pioneer way, and much to maintain each year, but there is every promise in the work, and, in my opinion, it forms one of the most important sections of the preventive duties of a health department.

Mental Treatment Act, 1930.

Under the Act out-patient clinics have been established as set out below, while, by arrangement, the Mental Deficiency Acts Committee Inspectors are available to visit the homes and link them up with the Mental Hospitals.

| Place of Clinic. | Started. | Medical Officer. | No. of sessions. | Somerset cases seen. | Av.attendance per session. |
|---------------------------------------|----------------|-------------------|------------------|----------------------|----------------------------|
| Taunton and Somerset Hospital. | April, 1931 | Dr. F. H. Healey | 50 | 48 | 5 |
| Shepton Mallet and District Hospital. | April, 1931 | Dr. A. Darlington | 24 | 6 | 0.5 |
| Weston-super-Mare Hospital. | December, 1932 | Dr. J. McGarvey | 23 | 11 | 2.5 |
| Yeovil and District Hospital. | February, 1933 | Dr. J. B. Methven | 24 | 22 | 4 |

It has been arranged to commence a clinic at Bridgwater early in 1938 at the new County Council Health Centre.

These clinics fulfil an extremely useful function and it is somewhat regrettable that they are not used for a larger number of cases. The figures for 1937 show a decline in the number of cases and it is to be hoped that in the future greater use will be made of this important service.

WATER SUPPLIES.

Progress is still being made in the various parts of the County in seeing that an adequate and pure water supply is available and the tables following set out the position at the end of the year.

Sir William Savage in his Annual Report for 1936 detailed the position in the different districts. This provides a most useful summary. There are still parts, however, where the supply is inadequate, and steps are being taken with the Authorities concerned to improve these conditions. Many samples have been taken from doubtful well supplies respecting purity and the evidence obtained is a decisive factor as to whether a scheme is necessary or not. I have visited a number of these areas myself accompanied by the County Sanitary Inspector. A sufficient and wholesome supply throughout the County is essential, and more particularly so as Somerset is so largely concerned with dairying. The considerable increase of designated milk producers in the County has undoubtedly affected this question of water supplies and as it is necessary to have hygienic conditions where a standard milk is being produced such difficulties as shortage will have to be met. At the moment it would appear that the two rural districts who need water most are Langport and Wells. Considerable difficulties have been met in the proposed Wells Regional Scheme which was to be the main source of supply for the parishes requiring water situated in the two districts. It is desirable that any Scheme or Schemes made to supply these poorly watered areas should be completed with all possible speed. In the County Sanitary Inspector's records of the sanitary circumstances in the different parishes valuable information is contained as to the exact position respecting water supply.

The position in the different rural districts at the end of 1937 was as follows:—

Areas on a District Basis.

| Rural District. | | | | | Estimated Deficiency. | | Grants payable by C.C. |
|-----------------|-----|-----|-----|-----|-----------------------|----------------|------------------------|
| | | | | | 1937-38. | Future. | 1937-38. |
| | | | | | £ | £ | £ |
| Bridgwater | ... | ... | ... | ... | 3,339 | 3,105 | 1,113 |
| Chard | ... | ... | ... | ... | 1,800 | 1,800 | 600 |
| Clutton | ... | ... | ... | ... | 4,700 | 4,500 | 1,567 |
| Dulverton | ... | ... | ... | ... | 454 | 300 | 151 |
| Langport | ... | ... | ... | ... | 2,220 | 3,244 | 740 |
| Shepton Mallet | ... | ... | ... | ... | 705 | 813 | 235 |
| Taunton | ... | ... | ... | ... | 1,257 | 2,115 | 419 |
| Wincanton | ... | ... | ... | ... | 4,400 | 5,300 | 1,466 |
| Yeovil | ... | ... | ... | ... | 3,900 | 4,200 | 1,300 |
| | | | | | <u>£22,775</u> | <u>£25,377</u> | <u>£7,591</u> |

Areas on a Parochial Basis.

| | £ | £ | £ |
|---|---------------|---------------|-------------|
| Axbridge (Puxton) | 218 | 213 | 54 |
| Bathavon (Peasedown and Marksbury) ... | 1,138 | 1,212 | 284 |
| Frome (Norton St. Philip, Rode and Beckington) | 440 | 1,146 | 110 |
| Long Ashton (Winford and Kenn) ... | 736 | 740 | 184 |
| Williton (West Quantoxhead and Crowcombe Heathfield) | 75 | 130 | 19 |
| | <u>£2,607</u> | <u>£3,441</u> | <u>£651</u> |

The schemes for which grants have been authorised by the County Council during the year were as follows, the figures in brackets being the estimated cost:—

| | |
|-----------------------------|--|
| Bridgwater Rural | Extensions to Otterhampton (£800), Stockland Bristol (£1,400), Fiddington and Keenthorpe (£3,314). |
| Clutton | Extensions: Chew Valley Scheme (£2,540). " Clutton Old Scheme (£575). |
| Frome Rural | Norton St. Philip, Rode & Beckington (£16,000). |
| Langport | Extension to Gawbridge Mill (£235). " to Picts Hill (£1,160). |
| Shepton Mallet Rural | Batcombe Modified Scheme (£592) in lieu of £2,020, 1935 scheme. |
| Taunton Rural. | Norton Fitzwarren (£2,080). |
| Wellington Rural | New main at Milverton (£1,687). |
| Williton | Crowcombe Heathfield (£2,200). |
| Wincanton | Extension to Wheathill (£400). " at Henstridge (£350). " at Woolston (£175). |

RIVER POLLUTION AND SEWAGE DISPOSAL.

Annual grants by the County Council in aid of Sewerage schemes:—

| | 1937-38. | Future. |
|--|-------------|---------------|
| | £ | £ |
| Axbridge (Winscombe) | 241 | 294 |
| Bathavon (Whitchurch) | 98 | 98 |
| Bridgwater (Catecott) | — | 40 |
| " (Cannington) | — | 140 |
| Dulverton (Brushford) | 38 | 38 |
| Frome (Coleford) | 184 10s. | 205 |
| Langport (Kingsbury Episcopi) | 84 | 86 |
| " (Curry Rivel) | — | 136 |
| " (Somerton Extension) | — | 101 |
| Taunton (Bishops Hull) | 32 | 75 |
| Williton (Withycombe) | — | 25 |
| Wincanton (Milborne Port) | 25 10s. | 109 |
| " (Sparkford and Queen Camel) | — | 128 |
| Yeovil (Over Stratton, Compton Durville, Watergore) | — | 40 |
| | <u>£703</u> | <u>£1,515</u> |

During the year the County Council agreed to contribute to the following Sewerage schemes:—

| | Estimated Cost. |
|--|-----------------|
| | £ |
| Bridgwater (Cannington) | 9,800 |
| Chard (Tatworth, South Chard and Perry Street) | 7,800 |
| Langport (Curry Rivel) | 9,890 |
| " (Somerton Extension) | 7,349 |
| Williton (Carhampton Withycombe) | 2,300 |
| Wincanton (Milborne Port) | 5,650 |
| Yeovil (Over Stratton, Compton Durville, Watergore) | 4,000 |

All the grants were made on a parochial basis. Most of these schemes were not started during the year.

Inquiries were held by the Ministry of Health into Sewerage Schemes in different parts of the County. In the majority of cases these were attended by the County Sanitary Inspector and a number of such Schemes were under consideration by the County Council towards the end of the year. One particular Inquiry attended by Mr. Dewhurst was held at Axbridge in connection with the new by-pass road, the proposed line of which interfered with the site of the disposal works. The objections to this line were upheld by the Ministry of Transport. The sanitary conditions in this area leave much to be desired, but it appears impossible that any sewer can be laid in the narrow streets of Axbridge unless a by-pass road is first constructed to relieve the street of its traffic.

In Sir William Savage's Annual Report for 1936 he mentioned that the County Sanitary Inspector was still proceeding with his survey of the sanitary circumstances in the various Rural districts throughout the County. This is undoubtedly a formidable task but Mr. Dewhurst's reports on each parish are proving of considerable value. Three further districts were completed during the year, viz.: Clutton, Langport and Shepton Mallet, and if it had not been for the many other pressing duties which come under his office the details would have been completed for the whole of the County. This record when finished will prove of inestimable value for reference, and in the future will save considerable time.

During the past year a number of complaints were received respecting river pollution from different parts of the County. These were immediately dealt with by the County Sanitary Inspector. Following systematic routine inspection and the logging of places where serious pollution might be anticipated, the discharge of noxious wastes into the rivers and watercourses has been considerably minimised. During many of these visits Mr. Dewhurst has taken successful informal action with the result that it has not been necessary for the Committee to consider the question of taking legal action. Many of the more serious cases of pollution are being obviated by the provision of proper disposal works by the local authorities and improvement to those now in existence.

Two cases of pollution which resulted in the loss of fish life were in connection with the River Yeo and a brook which runs through North Wootton and later joins the White and Red Lake streams. Immediate action was taken, and in the former case it is now felt that the source of the trouble has been found and dealt with in such a manner as to eliminate any

possibility of recurrence. In the second case the pollution was traced to a barrel of creosote which had been left dripping overnight and found its way by an underground drain to the water-course which was some distance away. With so many existing old sewers, plans of which are not available, it will be appreciated that it is in many cases an exceedingly difficult task to trace the source of the trouble.

There are still a considerable number of points in the County where pollution is taking place in which the local authority is responsible and where only the construction of proper disposal works or re-conditioning and making adequate existing ones will overcome the trouble. Informal action has been taken in these cases and schemes sufficient to meet the need are either in hand or will shortly be put into operation. Mr. Dewhurst's preparation of a map showing the rivers and their catchment areas, also the possible points of pollution in those areas, is nearing completion. This survey is laborious and takes much time but it will be of considerable value and save delay when complaints are received in the future.

Many samples have been taken of rivers and effluents for analysis.

ADMINISTRATION OF THE HOUSING ACTS.

The following shows the housing construction since 1921 :—

| Year. | Urban. | Rural. | Total. |
|-------|--------|--------|--------|
| 1921 | 493 | 685 | 1178 |
| 1922 | 395 | 637 | 1032 |
| 1923 | 279 | 375 | 654 |
| 1924 | 432 | 551 | 983 |
| 1925 | 581 | 812 | 1393 |
| 1926 | 974 | 1217 | 2191 |
| 1927 | 1393 | 1442 | 2835 |
| 1928 | 960 | 718 | 1678 |
| 1929 | 857 | 1070 | 1927 |
| 1930 | 887 | 833 | 1720 |
| 1931 | 654 | 837 | 1491 |
| 1932 | 746 | 724 | 1470 |
| 1933 | 1070 | 1035 | 2105 |
| 1934 | 1450 | 940 | 2390 |
| 1935 | 1525 | 1061 | 2586 |
| 1936 | 1303 | 1167 | 2470 |
| 1937 | 1567 | 1005 | 2572 |

The above figures show that in Urban Districts for 1937 more houses have been erected than in any one year since 1921, while in Rural Districts the total number of houses built yearly has only once been less than 1,000 since the end of 1932.

Table XV. shows that during the year, combining the Urban and Rural totals, 74% of the houses were erected by private enterprise.

It is difficult to find a fully adequate reason for this increased housing provided by private enterprise. New industries and extensions to existing ones do not materially account for it in recent years and I believe the real reason is to be found in the change taking place in housing habits. Very definitely people are leaving the older type of house for the newer kind with their improved conveniences and amenities.

The majority of local authorities are systematically dealing with the unfit houses in their districts and in one or two cases have practically dealt with those coming under the heading of "being incapable of repair at a reasonable expense", but the progress made in some parts leaves much to be desired. It is regrettable that I should have to say this when the subsidy allowed under the Housing Acts for the re-housing of de-housed people is so generous and those living in unfit and unhealthy homes could be provided with new houses and more reasonable amenities for little more rent than they are at present paying, and, in fact, in some instances they would not be paying so much.

With regard to the procedure under the Housing Acts there appears to be a lack of uniformity. This applies to the standards and the methods of dealing with the owners of such property. In my opinion it is most desirable that what applies in one district should apply in another. In some cases building bye-laws have been brought up to date whereas in others those existing and in operation permit of a different standard. The position is not a satisfactory one. In the short time I have been in the County I have made certain inspections and the evidence obtained leads me to believe that it is most desirable that such uniformity as outlined above should be adopted.

In many instances owners of houses which are on good sites and where a plentiful supply of wholesome water is available and proper drainage can be provided, may be materially assisted in the re-construction or re-conditioning of their property by the grants obtainable under the Housing (Rural Workers) Acts. In many instances houses that could not possibly have been repaired at a reasonable expense according to the Housing Acts and would normally fall under Sections dealing with demolition, have been restored and are indeed excellent houses. Where owners are of the opinion that their houses would rank for such assistance application should be made to the Clerk of the County Council following which Mr. Dewhurst, the County Sanitary Inspector, will arrange a visit and give his opinion.

Table XVII. shows that a considerable reduction has taken place since last year in respect of overcrowding, and I anticipate that following the Government subsidy offer to local authorities for the building of houses to abate overcrowding, there will be a similar fall in the number of cases in the ensuing year.

Finally with regard to this matter of housing, it is necessary to point out that while much was required to be done to improve the state of rural housing, and in fact is still required in some parts, care should be taken to interpret the Housing Acts in rural areas with common-sense and with due regard to the special circumstances of such areas. Under these safeguards which particularly require to be made for aged owner-occupiers of individual houses and in the interest of the character and amenities of the countryside, progress in rural areas can safely be made and even accelerated so that the general conditions of rural housing may reach a level in which an adequate standard of health can be attained and maintained.

TABLE XV.
NUMBER OF NEW HOUSES ERECTED DURING THE YEAR

| AREA. | With State assistance. | | Otherwise | Total. |
|-----------------------|-------------------------|-----------------------------|-----------|--------|
| | By the Local Authority, | By other bodies or persons. | | |
| RURAL. | | | | |
| AXBRIDGE | 14 | 0 | 93 | 107 |
| BATHAVON | 8 | 0 | 221 | 229 |
| BRIDGWATER | 14 | 0 | 75 | 89 |
| CHARD | 34 | 0 | 28 | 62 |
| CLUTTON | 8 | 0 | 17 | 25 |
| DULVERTON | 20 | 0 | 12 | 32 |
| FROME | 14 | 0 | 21 | 35 |
| LANGPORT | 4 | 0 | 14 | 18 |
| LONG ASHTON | 0 | 2 | 134 | 136 |
| SHEPTON MALLET | 8 | 0 | 24 | 32 |
| TAUNTON | 4 | 0 | 0 | 4 |
| WELLINGTON | 0 | 0 | 8 | 8 |
| WELLS | 0 | 0 | 16 | 16 |
| WILLITON | 11 | 0 | 47 | 58 |
| WINCANTON | 54 | 0 | 20 | 74 |
| YEOVIL | 12 | 0 | 59 | 71 |
| All Rural Areas | 205 | 2 | 789 | 996 |
| URBAN. | | | | |
| BRIDGWATER | 0 | 0 | 191 | 191 |
| BURNHAM | 0 | 0 | 25 | 25 |
| CHARD | 48 | 0 | 9 | 57 |
| CLEVEDON | 8 | 0 | 66 | 74 |
| CREWKERNE | 12 | 0 | 7 | 19 |
| FROME | 0 | 0 | 79 | 79 |
| GLASTONBURY | 0 | 0 | 13 | 13 |
| ILMINSTER | 16 | 0 | 2 | 18 |
| MINEHEAD | 0 | 0 | 37 | 37 |
| NORTON-RADSTOCK | 0 | 0 | 62 | 62 |
| PORTISHEAD | 0 | 0 | 12 | 12 |
| SHEPTON MALLET | 0 | 0 | 17 | 17 |
| STREET | 0 | 0 | 22 | 22 |
| TAUNTON | 152 | 0 | 173 | 325 |
| WATCHET | 6 | 0 | 12 | 18 |
| WELLINGTON | 36 | 0 | 0 | 36 |
| WELLS | 0 | 0 | 21 | 21 |
| WESTON-S-MARE | 0 | 0 | 229 | 229 |
| YEOVIL | 0 | 0 | 130 | 130 |
| All Urban Areas | 278 | 0 | 1107 | 1385 |
| County | 483 | 2 | 1896 | 2381 |

In addition to the above, houses were also erected by the following Sanitary Authorities *without* State assistance:—Williton Rural 9; Taunton Borough 16; Weston-super-Mare Borough 46; Yeovil Borough 120.

TABLE XVI.
HOUSING INSPECTIONS.

| Area. | Houses inspected for housing defects. | Houses specially inspected under Housing Acts. | Number found unfit. | Number defective but not unfit. | Demolition Orders made. |
|-----------------|---------------------------------------|--|---------------------|---------------------------------|-------------------------|
| RURAL. | | | | | |
| AXBRIDGE | 1120 | 820 | 119 | 700 | 104 |
| BATHAVON | 85 | 42 | 25 | 27 | 11 |
| BRIDGWATER | 240 | 0 | 79 | 179 | 14 |
| CHARD | 318 | 165 | 24 | 153 | 18 |
| CLUTTON | 252 | 188 | 183 | 69 | 0 |
| DULVERTON | 305 | 0 | 9 | 106 | 0 |
| FROME | 275 | 126 | 16 | 97 | 5 |
| LANGPORT | 156 | 70 | 25 | 118 | 10 |
| LONG ASHTON | 268 | 247 | 61 | 116 | 25 |
| SHEPTON MALLEY | 198 | 36 | 39 | 45 | 14 |
| TAUNTON | 419 | 244 | 0 | 244 | 3 |
| WELLINGTON | 191 | 163 | 135 | 28 | 4 |
| WELLS | 189 | 157 | 21 | 37 | 0 |
| WILLITON | 105 | 19 | 10 | 7 | 2 |
| WINCANTON | 687 | 412 | 226 | 173 | 10 |
| YEOVIL | 1,316 | 8 | 6 | 143 | 0 |
| All Rural Areas | 6,124 | 2,697 | 978 | 2,242 | 220 |
| URBAN. | | | | | |
| BRIDGWATER | 159 | 45 | 16 | 135 | 16 |
| BURNHAM | 44 | 0 | 1 | 18 | 0 |
| CHARD | 42 | 18 | 12 | 6 | 0 |
| CLEVEDON | 63 | 13 | 25 | 10 | 1 |
| CREWKERNE | 92 | 72 | 23 | 33 | 20 |
| FROME | 433 | 406 | 0 | 250 | 0 |
| GLASTONBURY | 45 | 23 | 9 | 30 | 0 |
| ILMINSTER | 52 | 24 | 0 | 16 | 0 |
| MINEHEAD | 59 | 8 | 0 | 9 | 0 |
| NORTON- | | | | | |
| RADSTOCK | 77 | 0 | 14 | 22 | 16 |
| PORTISHEAD | 2 | 0 | 0 | 1 | 0 |
| SHEPTON MALLEY | 61 | 21 | 6 | 0 | 4 |
| STREET | 60 | 0 | 0 | 18 | 0 |
| TAUNTON | 425 | 135 | 204 | 181 | 2 |
| WATCHET | 80 | 80 | 0 | 0 | 0 |
| WELLINGTON | 143 | 33 | 0 | 143 | 0 |
| WELLS | 44 | 0 | 0 | 24 | 0 |
| WESTON-S-MARE | 569 | 145 | 3 | 28 | 7 |
| YEOVIL | 283 | 105 | 1 | 99 | 0 |
| All Urban Areas | 2,773 | 1128 | 314 | 1,023 | 66 |
| County | 8,897 | 3,825 | 1,292 | 3,265 | 286 |

TABLE XVII.
HOUSING ACT, 1935 — OVERCROWDING.

| Area. | Dwellings over-crowded at end of year. | Families dwelling therein. | Persons dwelling therein. | New cases of over-crowding reported during year. | Cases of over-crowding relieved during year. | Number of Persons in such cases. |
|---------------------|--|----------------------------|---------------------------|--|--|----------------------------------|
| RURAL. | | | | | | |
| Axbridge ... | 28 | 28 | 148 | 1 | 32 | 156 |
| Bathavon ... | 44 | 44 | 271½ | 12 | 25 | 139½ |
| Bridgwater ... | 57 | 57 | 371½ | 0 | 5 | 34 |
| Chard ... | 18 | 18 | 143 | 0 | 19 | 127 |
| Clutton ... | 46 | 48 | 328 | 0 | 1 | 10 |
| Dulverton ... | 4 | 4 | 28 | 0 | 4 | 28 |
| Frome ... | 5 | 5 | 32 | 0 | 8 | 55 |
| Langport ... | 39 | 39 | 262 | 10 | 20 | 130 |
| Long Ashton ... | 34 | 34 | 256 | 0 | 1 | 4 |
| Shepton Mallet ... | 11 | 11 | 72 | 0 | 6 | 38 |
| Taunton ... | 22 | 22 | 145 | 0 | 18 | 130 |
| Wellington ... | 40 | 44 | 239 | 11 | 2 | 16 |
| Wells ... | 18 | 18 | 115 | 2 | 2 | 15 |
| Williton ... | 22 | 22 | 135 | 10 | 16 | 120 |
| Wincanton ... | 13 | 13 | 94 | 7 | 34 | 255 |
| Yeovil ... | 71 | 71 | 574 | 0 | 7 | 52 |
| All Rural Areas ... | 472 | 478 | 3,214 | 53 | 200 | 1,309½ |
| URBAN. | | | | | | |
| Bridgwater ... | 83 | 85 | 675 | 18 | 43 | 303 |
| Burnham ... | 1 | 1 | 6 | 1 | 2 | 12½ |
| Chard ... | 22 | 22 | 131 | 3 | 4 | 29 |
| Clevedon ... | 6 | 11 | 62 | 0 | 3 | 28 |
| Crewkerne ... | 8 | 8 | 60 | 0 | 8 | 60 |
| Frome ... | 13 | 13 | 77 | 0 | 1 | 6½ |
| Glastonbury ... | 4 | 4 | 26 | 2 | 4 | 36 |
| Ilminster ... | 0 | 0 | 0 | 0 | 11 | 89 |
| Minehead ... | 0 | 0 | 0 | 1 | 1 | 6 |
| Norton-Radstock ... | 1 | 1 | 5 | 0 | 0 | 0 |
| Portishead ... | 2 | 2 | 14½ | 0 | 1 | 3½ |
| Shepton Mallet ... | 1 | 1 | 6 | 0 | 0 | 0 |
| Street ... | 0 | 0 | 0 | 0 | 0 | 0 |
| Taunton ... | 61 | 61 | 234 | 6 | 49 | 329½ |
| Watchet ... | 0 | 0 | 0 | 0 | 2 | 9 |
| Wellington ... | 19 | 29 | 137 | 0 | 10 | 30 |
| Wells ... | 11 | 11 | 75½ | 0 | 16 | 54½ |
| Weston-s.-Mare ... | 10 | 16 | 68 | 2 | 16 | 99½ |
| Yeovil ... | 67 | 77 | 419 | 1 | 10 | 55 |
| All Urban Areas ... | 309 | 342 | 1,996 | 34 | 181 | 1,151 |
| County ... | 781 | 820 | 5,210 | 87 | 381 | 2,460½ |

Housing (Rural Workers) Acts, 1926 & 1931.

The year under review has seen an increase in the number of applications under the above Acts. In 134 cases appropriate grants under the Acts were approved; the County Sanitary Inspector surveyed 373 cottages and made 156 additional visits of reinspection.

Considerable publicity has been given respecting the assistance obtainable under the Acts. Leaflets and other literature, including coloured posters sent by the Ministry of Health, have been distributed to the various Authorities throughout the County, and it is pleasing to note the co-operation of the Authorities in the way the posters have been displayed. This mutual interest has resulted in increased activity throughout the County and many houses have been saved that would otherwise have been condemned as unfit.

It is the practice of Mr. Dewhurst to meet the owner, architect and builder on the site wherever possible so that he may be satisfied that the site is suitable. This preliminary meeting is much in the interests of the owner because by this method unnecessary expenditure on plans and proposals can be avoided if it is found that the application is unsuitable from the commencement. Consultations on technical matters, and the perusal of draft plans, take up a considerable amount of time but in view of the ultimate results this method of dealing with applications proves to be time well spent.

Local Authorities are showing interest in the purchasing of desirable property and re-conditioning it under the Housing (Rural Workers) Acts, and during the latter half of the year there has been increased activity in this respect. This is very gratifying as works to these cottages can be carried out in such a manner that their final appearance blends with the surroundings.

The table below sets out the grants authorised by the County Council under the Acts for the year 1937:—

| District. | No. of Dwellings. | Amount. |
|-----------------------|-------------------|---------------|
| RURAL. | | £ |
| Axbridge ... | 5 | 500 |
| Bathavon ... | 2 | 200 |
| Chard ... | 10 | 1,000 |
| Clutton ... | 4 | 400 |
| Dulverton ... | 2 | 200 |
| Frome ... | 7 | 700 |
| Langport ... | 20 | 2,000 |
| Long Ashton ... | 9 | 900 |
| Shepton Mallet ... | 13 | 1,300 |
| Taunton ... | 3 | 300 |
| Wellington ... | 7 | 700 |
| Wells ... | 10 | 1,000 |
| Wincanton ... | 38 | 3,800 |
| Yeovil ... | 3 | 300 |
| URBAN. | | |
| Weston-super-Mare ... | 1 | 100 |
| | <hr/> 134 | <hr/> £13,400 |

Grants amounting to £400 have been repaid by the applicants.

Since April 1934, Bridgwater Rural District Council have been a separate Authority under the Acts, and grants were made by that Council in 18 cases during 1937.

Further information is tabulated below with regard to the various Sanitary Authorities and the grants authorised in respect of each Authority by the County Council from the date of the operation of the Acts to the 31st December, 1937, together with details of the number of dwellings actually re-constructed and grants paid.

| District. | | | | No. of Dwellings. | Amount. | | | No. of Dwellings reconstructed. | Grants paid. | | |
|-------------------|-----|-----|-----|----------------------|---------|----|----|------------------------------------|--------------|----|----|
| | | | | | £ | s. | d. | | £ | s. | d. |
| RURAL. | | | | | | | | | | | |
| Axbridge | ... | ... | ... | 16 | 1,180 | 0 | 0 | 11 | 680 | 0 | 0 |
| Bathavon | ... | ... | ... | 2 | 200 | 0 | 0 | — | — | | |
| Bridgwater | ... | ... | ... | 4 | 350 | 0 | 0 | 3 | 300 | 0 | 0 |
| Chard | ... | ... | ... | 48 | 4,578 | 0 | 0 | 21 | 2,096 | 0 | 0 |
| Clutton | ... | ... | ... | 16 | 1,283 | 16 | 0 | 8 | 670 | 0 | 0 |
| Dulverton | ... | ... | ... | 2 | 200 | 0 | 0 | — | — | | |
| Frome | ... | ... | ... | 18 | 1,738 | 0 | 0 | 9 | 838 | 0 | 0 |
| Langport | ... | ... | ... | 155 | 14,811 | 6 | 8 | 110 | 10,398 | 6 | 8 |
| Long Ashton | ... | ... | ... | 12 | 1,200 | 0 | 0 | 3 | 300 | 0 | 0 |
| Shepton Mallet | ... | ... | ... | 42 | 4,200 | 0 | 0 | 22 | 2,200 | 0 | 0 |
| Taunton | ... | ... | ... | 14 | 1,354 | 6 | 8 | 14 | 1,354 | 6 | 8 |
| Wellington | ... | ... | ... | 10 | 1,000 | 0 | 0 | 3 | 300 | 0 | 0 |
| Wells | ... | ... | ... | 18 | 1,800 | 0 | 0 | 9 | 900 | 0 | 0 |
| Williton | ... | ... | ... | 5 | 405 | 0 | 0 | 5 | 405 | 0 | 0 |
| Wincanton | ... | ... | ... | 234 | 21,941 | 0 | 0 | 146 | 13,544 | 0 | 0 |
| Yeovil | ... | ... | ... | 33 | 2,788 | 0 | 0 | 29 | 2,416 | 0 | 0 |
| URBAN. | | | | | | | | | | | |
| Ilminster | ... | ... | ... | 5 | 496 | 0 | 0 | 5 | 496 | 0 | 0 |
| Wellington | ... | ... | ... | 2 | 200 | 0 | 0 | 2 | 200 | 0 | 0 |
| Weston-super-Mare | ... | ... | ... | 1 | 100 | 0 | 0 | 1 | 100 | 0 | 0 |
| | | | | 637 | £59,825 | 9 | 4 | 401 | £37,197 | 13 | 4 |

The difference between the grants paid as compared with those authorised is due to either non-acceptance of the grants, works that have not been proceeded with mainly due to the increase in building costs, and those which are still pending.

Twelve loans, amounting to £1,180 10s. 0d. have also been made by the County Council under the Acts.

SUPERVISION OVER THE FOOD SUPPLY.

A. **Slaughter Houses and Meat Supervision.** The following table gives the number of slaughter houses licensed and registered in the Urban and Rural Districts.

Several successful prosecutions have taken place during the year where meat has been found unsound or diseased. There is no question as to the importance of routine inspection of all carcasses slaughtered for sale for human consumption and it is a regrettable fact that a considerable number of carcasses are not examined. The reason for this is in the main due to the large districts to be covered by the Sanitary Inspectors and in some cases the inadequacy of the District health staff. Public abattoirs are undoubtedly required in order to get adequate supervision and inspection of meat intended for human consumption. Until such facilities can be provided the existing conditions should receive the very careful consideration of Rural Authorities, particularly respecting the examination of all carcasses slaughtered in their areas which are intended for domestic consumption.

TABLE XVIII.
SLAUGHTER HOUSES.

| Sanitary Area. (Urban). | Licensed. | Registered. | Total. | Sanitary Area. (Rural). | Licensed. | Registered. | Total. |
|----------------------------|-----------|-------------|--------|----------------------------|-----------|-------------|--------|
| Bridgwater | 5 | 10 | 15 | Axbridge | 14 | 7 | 21 |
| Burnham | 7 | 2 | 9 | Bathavon | 6 | 16 | 22 |
| Chard | 5 | 1 | 6 | Bridgwater | 5 | 15 | 20 |
| Clevedon | — | — | P | Chard | 12 | 15 | 27 |
| Crewkerne | 1 | 3 | 4 | Clutton | 7 | 14 | 21 |
| Frome | 2 | 6 | 8 | Dulverton | 2 | 2 | 4 |
| Glastonbury | 2 | 4 | 6 | Frome | 10 | 1 | 11 |
| Ilminster | 2 | 3 | 5 | Langport | 13 | 2 | 15 |
| Minehead | — | — | P | Long Ashton | 2 | 10 | 12 |
| Norton-Radstock | 4 | 4 | 8 | Shepton Mallet | 12 | 0 | 12 |
| Portishead | 2 | 2 | 4 | Taunton | 33 | 0 | 33 |
| Shepton Mallet | 4 | 2 | 6 | Wellington | 8 | 0 | 8 |
| Street | 0 | 5 | 5 | Wells | 15 | 2 | 17 |
| Taunton | 4 | 7 | 11 | Williton | 8 | 6 | 14 |
| Watchet | 1 | 2 | 3 | Wincanton | 3 | 16 | 19 |
| Wellington | 2 | 7 | 9 | Yeovil | 27 | 0 | 27 |
| Wells | 4 | 5 | 9 | | | | |
| Weston-super-Mare | — | — | P | | | | |
| Yeovil | 10 | 0 | 10 | Total | 177 | 106 | 283 |
| Total | 55 | 63 | 118 | County Total | 232 | 169 | 401 |

P=Public Slaughter-house.

TABLE XIX.

MILK PRODUCERS AND DISTRIBUTORS.

| Sanitary Area. (Urban). | Producers. | Distributors. | | | Sanitary Area. (Rural). | Producers. | Distributors. | | |
|----------------------------|------------|--------------------|-------------------|--------|----------------------------|------------|--------------------|-------------------|--------|
| | | Also Producers. | Not Producers. | Total. | | | Also Producers. | Not Producers. | Total. |
| Bridgwater | 13 | 8 | 52 | 60 | Axbridge | 781 | 98 | 15 | 113 |
| Burnham | 26 | 14 | 11 | 25 | Bathavon | 263 | 102 | 24 | 126 |
| Chard | 8 | 2 | 11 | 13 | Bridgwater | 754 | 181 | 17 | 198 |
| Clevedon | 29 | 17 | 13 | 30 | Chard | 550 | 58 | 2 | 60 |
| Crewkerne | 10 | 4 | 6 | 10 | Clutton | 472 | 131 | 29 | 160 |
| Frome | 17 | 15 | 10 | 25 | Dulverton | 128 | 128 | 0 | 128 |
| Glastonbury | 57 | 10 | 4 | 14 | Frome | 386 | 60 | 3 | 63 |
| Ilminster | 9 | 8 | 6 | 14 | Langport | 434 | 123 | 0 | 123 |
| Minehead | 9 | 9 | 1 | 10 | Long Ashton | 424 | 63 | 43 | 106 |
| Norton-Radstock | 26 | 11 | 16 | 27 | Shepton Mallet | 350 | 61 | 1 | 62 |
| Portishead | 10 | 4 | 8 | 12 | Taunton | 333 | 26 | 12 | 38 |
| Shepton Mallet | 27 | 4 | 5 | 9 | Wellington | 171 | 61 | 2 | 63 |
| Street | 20 | 16 | 4 | 20 | Wells | 461 | 118 | 11 | 129 |
| Taunton | 2 | 26 | 37 | 63 | Williton | 196 | 79 | 5 | 84 |
| Watchet | 4 | 2 | 2 | 4 | Wincanton | 547 | 26 | 3 | 29 |
| Wellington | 25 | 11 | 14 | 25 | Yeovil | 404 | 93 | 7 | 100 |
| Wells | 7 | 3 | 7 | 10 | | | | | |
| Weston-super-Mare | 26 | 15 | 94 | 109 | | | | | |
| Yeovil | 15 | 8 | 18 | 26 | | | | | |
| | | | | | Total | 6,654 | 1,408 | 174 | 1,582 |
| Total | 340 | 187 | 319 | 506 | County Total | 6,994 | 1,595 | 493 | 2,088 |

B. Milk Supply. Table XIX. gives the number of producers and distributors registered in the County.

Much has been written in recent years on milk questions and it is unnecessary for me to add further general information on points which are now so commonly known.

The problem of obtaining both a clean and a safe milk supply is one of great complications and there is little point in adding to the fire of controversy in a report of this nature.

It is sufficient to say that in recent years very considerable progress has been made with regard to clean milk production and it is to be hoped that this valuable work may be continued and in fact that it may be linked up with measures which will also provide a safe milk.

It is well to remember that, although there are other solid reasons for this improvement in cleanliness, the educational and instructional services now available for this purpose have contributed greatly to the generally higher standards, and, in my experience, the majority of producers have themselves realised its importance and have been willing and anxious to participate in the work.

The work of sampling herds for tubercle bacilli has been continued.

During the year 364 samples of mixed milk, collected at the cowsheds, were examined for tubercle bacilli. Tubercle bacilli were found in 11, a percentage of 3.0.

Except for one year, this percentage keeps very constant, the percentage figures for previous years being: 2.2 (1926); 2.18 (1927); 2.2 (1928); 2.67 (1929); 2.32 (1930); 2.2 (1931); 5.7 (1932); 2.8 (1933); 3.15 (1934); 2.94 (1935); 3.4 (1936).

Of these 364 samples, 115 were from Accredited Milk producers and the milk from 3 contained living tubercle bacilli, a percentage positive of 2.6. The remaining 249 samples were from ordinary producers and the milk from 8 contained tubercle bacilli, a percentage positive of 3.2.

In addition to these 11 cases, reports on milk derived from Somerset, but found to be tuberculous by outside authorities, have been received in 10 cases from Bristol City.

Of the 11 positive herds, from samples examined in the County Laboratory, in 9 the County Veterinary Surgeon found a cow with a tuberculous udder, in some of these at the first examination while in others the herd had to be sampled in groups and the affected animal slowly detected by a process of elimination. Of the 2 failures, in between sampling and the results of the examination the cows were sold which were the probable source of infection.

Of the 10 herds reported from outside, 13 cows with tubercular mastitis were found and destroyed.

C. Administration of the Sale of Food and Drugs Acts. During the year 1,058 samples were examined. Of these, 22 were submitted by private individuals and Medical Officers of Health, and 24 were "Appeal to Cow" samples. The following Table shows the nature of the 1,012 samples submitted by the Inspectors, excluding the 24 "Appeal to Cow" samples.

TABLE XX.

| Article. | Number examined. | Number genuine. | Number adulterated. | Per cent. adulterated. |
|-------------------------|------------------|-----------------|---------------------|------------------------|
| Dairy Products—Milk | 529 | 493 | 36 | 6.8 |
| Skimmed Milk | 1 | 1 | 0 | 0 |
| Cream and Canned Cream | 33 | 33 | 0 | 0 |
| Cheese | 12 | 12 | 0 | 0 |
| Butter | 40 | 39 | 1 | 2.5 |
| Condensed Milk | 23 | 23 | 0 | 0 |
| Edible Fats | 26 | 26 | 0 | 0 |
| Cereals | 17 | 17 | 0 | 0 |
| Meat and Fish Products | 36 | 35 | 1 | 2.8 |
| Tea, Coffee, Cocoa | 13 | 13 | 0 | 0 |
| Condiments | 25 | 25 | 0 | 0 |
| Sugar Products | 36 | 33 | 3 | 8.3 |
| Miscellaneous Groceries | 76 | 74 | 2 | 2.6 |
| Beer, Spirits and Wine | 76 | 75 | 1 | 1.3 |
| Drugs | 68 | 62 | 7 | 10.1 |
| Total | 1,012 | 961 | 51 | 5.1 |

The samples adulterated, as shown in the Table, were mostly milk, the adulteration of other products being very few. 36 milk samples were reported as adulterated and of these no legal proceedings were taken in 27. A conviction was obtained in each of the remaining 9 cases. The legal position as regards chemical milk adulteration has greatly improved. Proceedings were not taken in the other 15 cases of adulteration.

TABLE XXI.

The number of samples analysed and the number adulterated during the past 15 years.

| | Year. | Number examined. | Number adulterated. | Percentage adulterated. |
|-------------------|-------|------------------|---------------------|-------------------------|
| Somerset | 1923 | 1,049 | 40 | 3.8 |
| " | 1924 | 1,045 | 48 | 4.6 |
| " | 1925 | 1,042 | 37 | 3.5 |
| " | 1926 | 1,044 | 29 | 2.8 |
| " | 1927 | 1,067 | 39 | 3.6 |
| " | 1928 | 1,043 | 25 | 2.4 |
| " | 1929 | 1,038 | 23 | 2.2 |
| " | 1930 | 1,033 | 30 | 2.9 |
| " | 1931 | 997 | 32 | 3.2 |
| " | 1932 | 1,013 | 22 | 2.2 |
| " | 1933 | 1,034 | 40 | 3.9 |
| " | 1934 | 1,024 | 22 | 2.15 |
| " | 1935 | 1,008 | 23 | 2.1 |
| " | 1936 | 1,021 | 38 | 3.7 |
| " | 1937 | 1,012 | 51 | 5.1 |
| England and Wales | 1936 | 146,438 | 7,802 | 5.3 |

PUBLIC HEALTH LABORATORY.

The Laboratory continues to be extensively made use of by the different Local Authorities for the examination of water supplies, sewage samples, diagnosis of infectious cases, etc. It is also very valuable in connection with Tuberculosis, School Work, Venereal Diseases and other work directly under the County Council. The main increase in recent years has been in connection with the examination of milk, necessitated by the marked increase in Licences under the Milk (Special Designations) Order, 1936, and its predecessor.

During the past year 11,199 samples have been examined (excluding all food and drug samples) as follows:—

Drinking Water—

| | | | | | | | |
|--|-----|-----|-----|-----|-----|-----|--------|
| Bacteriological examinations | ... | ... | ... | ... | ... | ... | 702 |
| Chemical analyses | ... | ... | ... | ... | ... | ... | 40 |
| Sewage, sewage effluents, rivers and streams | ... | ... | ... | ... | ... | ... | 44 |
| Swabs for diphtheria bacilli | ... | ... | ... | ... | ... | ... | 3,968 |
| Cerebro spinal fluid and post nasal swabs | ... | ... | ... | ... | ... | ... | 10 |
| Sputum for tubercle bacilli | ... | ... | ... | ... | ... | ... | 1,839 |
| Blood for typhoid, paratyphoid, other Salmonella, dysentery, and Br. abortus | ... | ... | ... | ... | ... | ... | 94 |
| Hairs and skin for ringworm | ... | ... | ... | ... | ... | ... | 56 |
| Specimens for venereal disease | ... | ... | ... | ... | ... | ... | 482 |
| Urine for tubercle bacilli, B. coli, sugar, albumin, casts, etc. | ... | ... | ... | ... | ... | ... | 115 |
| Faeces for typhoid and dysentery | ... | ... | ... | ... | ... | ... | 58 |
| Swabs for hæmolytic streptococci | ... | ... | ... | ... | ... | ... | 471 |
| Milk for tubercle bacilli | ... | ... | ... | ... | ... | ... | 588 |
| Milk for bacteriological examination (general) | ... | ... | ... | ... | ... | ... | 29 |
| Milk—Accredited | ... | ... | ... | ... | ... | ... | 1,556 |
| Milk—(T.T.), and Pasteurised | ... | ... | ... | ... | ... | ... | 993 |
| Other specimens | ... | ... | ... | ... | ... | ... | 154 |
| Total | | | | | | | 11,199 |

Of the 3,968 swabs examined, 503 showed the presence of diphtheria bacilli; of the 1,839 specimens of sputum, 542 contained tubercle bacilli; of the 94 specimens of blood, 9 gave a positive Widal reaction, and 8 gave agglutination with B. abortus; of the 56 specimens of hair, 22 contained ringworm fungi; and of the 482 specimens for venereal disease, 101 contained gonococci.

TABLE A.

Causes of, and Ages at Death during the Year 1937.

| CAUSES OF DEATH. | NETT DEATHS AT THE SUBJOINED AGES OF "RESIDENTS" WHETHER OCCURRING WITHIN OR WITHOUT THE DISTRICT. | | | | | | | | |
|---|--|---------------|----------------------|----------------------|-----------------------|------------------------|------------------------|------------------------|-----------------|
| | All ages. | Under 1 year. | 1 and under 2 years. | 2 and under 5 years. | 5 and under 15 years. | 15 and under 25 years. | 25 and under 45 years. | 45 and under 65 years. | 65 and upwards. |
| Typhoid and paratyphoid fevers | 3 | 0 | 0 | 0 | 2 | 1 | 0 | 0 | 0 |
| Measles | 2 | 1 | 0 | 0 | 0 | 1 | 0 | 0 | 0 |
| Scarlet Fever | 2 | 0 | 0 | 1 | 1 | 0 | 0 | 0 | 0 |
| Whooping Cough | 17 | 7 | 3 | 4 | 3 | 0 | 0 | 0 | 0 |
| Diphtheria | 7 | 0 | 0 | 2 | 4 | 1 | 0 | 0 | 0 |
| Influenza | 245 | 3 | 1 | 0 | 3 | 3 | 27 | 69 | 139 |
| Encephalitis Lethargica | 11 | 0 | 0 | 1 | 2 | 3 | 1 | 2 | 2 |
| Cerebro-spinal fever | 3 | 0 | 0 | 1 | 0 | 0 | 2 | 0 | 0 |
| Tuberculosis of respiratory system | 167 | 0 | 0 | 0 | 3 | 26 | 88 | 39 | 11 |
| Other Tuberculous Diseases | 41 | 3 | 3 | 3 | 5 | 3 | 14 | 5 | 5 |
| Syphilis | 9 | 2 | 0 | 0 | 0 | 0 | 1 | 3 | 3 |
| General paralysis of the insane, tabes dorsalis | 11 | 0 | 0 | 0 | 0 | 0 | 3 | 4 | 4 |
| Cancer, Malignant Disease | 786 | 0 | 0 | 0 | 2 | 4 | 35 | 270 | 475 |
| Diabetes | 92 | 0 | 0 | 1 | 3 | 0 | 3 | 29 | 56 |
| Cerebral Haemorrhage, etc. | 308 | 0 | 0 | 0 | 0 | 0 | 2 | 79 | 227 |
| Heart Disease | 1344 | 0 | 0 | 1 | 3 | 6 | 39 | 268 | 1027 |
| Aneurysm | 13 | 0 | 0 | 0 | 1 | 0 | 1 | 5 | 6 |
| Other circulatory diseases | 302 | 0 | 0 | 0 | 1 | 0 | 3 | 59 | 239 |
| Bronchitis | 178 | 9 | 1 | 0 | 1 | 1 | 5 | 17 | 144 |
| Pneumonia (all forms) | 183 | 19 | 5 | 8 | 4 | 6 | 15 | 47 | 79 |
| Other Respiratory Diseases | 51 | 0 | 0 | 0 | 1 | 2 | 3 | 18 | 27 |
| Peptic Ulcer | 45 | 0 | 0 | 0 | 0 | 0 | 7 | 25 | 13 |
| Diarrhoea, etc. | 35 | 12 | 2 | 2 | 0 | 1 | 2 | 5 | 11 |
| Appendicitis | 25 | 0 | 1 | 2 | 7 | 4 | 2 | 3 | 6 |
| Cirrhosis of Liver | 10 | 0 | 0 | 0 | 0 | 0 | 1 | 4 | 5 |
| Other diseases of liver, etc. | 23 | 0 | 0 | 0 | 0 | 0 | 5 | 3 | 15 |
| Other digestive diseases | 108 | 1 | 3 | 3 | 2 | 4 | 14 | 31 | 50 |
| Acute and Chronic Nephritis | 213 | 0 | 0 | 0 | 2 | 6 | 11 | 62 | 132 |
| Puerperal Sepsis | 3 | 0 | 0 | 0 | 0 | 1 | 2 | 0 | 0 |
| Other Puerperal causes | 15 | 0 | 0 | 0 | 0 | 4 | 11 | 0 | 0 |
| Congenital Debility Premature Birth, Malformations, etc. | 163 | 157 | 2 | 1 | 1 | 0 | 2 | 0 | 0 |
| Senility | 344 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 343 |
| Suicide | 50 | 0 | 0 | 0 | 0 | 1 | 9 | 28 | 12 |
| Other violence | 193 | 3 | 0 | 5 | 11 | 33 | 34 | 45 | 62 |
| Other defined diseases | 421 | 16 | 5 | 8 | 12 | 18 | 40 | 131 | 191 |
| Diseases ill-defined or unknown | 7 | 0 | 2 | 0 | 0 | 0 | 0 | 2 | 3 |
| | 5430 | 233 | 28 | 43 | 74 | 129 | 382 | 1254 | 3287 |

TABLE B.
Causes of Death at all Ages in each District during the Year 1937.

RURAL DISTRICTS.

URBAN DISTRICTS.

| CAUSES OF DEATH. | RURAL DISTRICTS. | | | | | | | | | | | | | | | | URBAN DISTRICTS. | | | | | | | | | | | | | | | | COUNTY TOTAL. | | | | | | | |
|---|------------------|-----------|-------------|--------|----------|------------|--------|-----------|--------------|-----------------|----------|-------------|--------|-----------|------------|---------|------------------------|-------------|----------|--------|---------|------------|--------|--------------|------------|-----------|------------------|-------------|-----------------|---------|----------|----------|---------------|-------------|--------|--------------------|---------|------------------------|----|----|
| | AXBRIDGE. | BATHAVON. | BRIDGWATER. | CHARD. | CLUTTON. | DULVERTON. | FROME. | LANGPORT. | LONG ASHTON. | SHEPTON MALLET. | TAUNTON. | WELLINGTON. | WELLS. | WILLITON. | WINCANTON. | YEovil. | TOTAL RURAL DISTRICTS. | BRIDGWATER. | BURNHAM. | CHARD. | CLEDON. | CREWKERNE. | FROME. | GLASTONBURY. | IMMINSTER. | MINEHEAD. | NORTON-RADSTOCK. | PORTISHEAD. | SHEPTON MALLET. | STREET. | TAUNTON. | WATCHET. | | WELLINGTON. | WELLS. | WESTON-SUPER-MARE. | YEovil. | TOTAL URBAN DISTRICTS. | | |
| Typhoid & Paratyphoid Fevers | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 3 | |
| Measles | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 0 | 0 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | |
| Scarlet Fever | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 2 | |
| Whooping Cough | 1 | 3 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 2 | 0 | 0 | 1 | 1 | 1 | 0 | 11 | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 6 | 17 |
| Diphtheria | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 4 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 3 | 7 | |
| Influenza | 9 | 9 | 9 | 15 | 9 | 2 | 13 | 10 | 6 | 3 | 15 | 7 | 7 | 5 | 18 | 12 | 145 | 2 | 4 | 3 | 9 | 2 | 4 | 1 | 1 | 0 | 6 | 1 | 7 | 3 | 17 | 1 | 3 | 4 | 14 | 8 | 96 | 245 | | |
| Encephalitis Lethargica | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 3 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 4 | 8 | |
| Cerebro Spinal Fever | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 3 | |
| Tuberculosis of respiratory system | 10 | 8 | 5 | 3 | 5 | 1 | 4 | 4 | 7 | 2 | 3 | 2 | 3 | 5 | 8 | 4 | 74 | 17 | 4 | 3 | 6 | 0 | 2 | 0 | 2 | 5 | 7 | 4 | 1 | 1 | 15 | 0 | 1 | 1 | 12 | 12 | 93 | 167 | | |
| Other Tuberculous Diseases | 0 | 2 | 1 | 1 | 2 | 0 | 0 | 1 | 4 | 1 | 3 | 1 | 1 | 2 | 3 | 1 | 23 | 3 | 0 | 0 | 1 | 2 | 0 | 0 | 0 | 0 | 1 | 0 | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 5 | 4 | 18 | 41 | |
| Syphilis | 0 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 0 | 0 | 4 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 2 | 0 | 5 | 9 | |
| General paralysis of the insane | 0 | 1 | 1 | 1 | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 0 | 0 | 1 | 0 | 1 | 7 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 2 | 4 | 11 | |
| tabes dorsalis | 0 | 1 | 1 | 1 | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 0 | 0 | 1 | 0 | 1 | 7 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 2 | 4 | 11 | |
| Cancer, Malignant Disease | 47 | 36 | 28 | 30 | 35 | 6 | 20 | 22 | 37 | 25 | 32 | 11 | 7 | 12 | 31 | 32 | 417 | 32 | 14 | 11 | 16 | 6 | 23 | 6 | 9 | 14 | 18 | 6 | 9 | 6 | 61 | 3 | 15 | 12 | 75 | 33 | 369 | 786 | | |
| Diabetes | 5 | 4 | 5 | 2 | 6 | 0 | 3 | 3 | 5 | 2 | 4 | 1 | 2 | 1 | 6 | 5 | 54 | 4 | 1 | 1 | 2 | 3 | 2 | 0 | 0 | 1 | 4 | 1 | 0 | 0 | 3 | 0 | 3 | 2 | 7 | 4 | 38 | 92 | | |
| Cerebral Haemorrhage, etc. | 25 | 17 | 20 | 6 | 11 | 4 | 5 | 8 | 12 | 5 | 8 | 9 | 1 | 7 | 20 | 20 | 178 | 17 | 6 | 2 | 6 | 4 | 5 | 1 | 2 | 4 | 3 | 1 | 0 | 22 | 5 | 8 | 1 | 29 | 10 | 130 | 308 | | | |
| Heart Disease | 76 | 76 | 37 | 47 | 62 | 16 | 32 | 55 | 53 | 33 | 41 | 28 | 42 | 27 | 32 | 51 | 708 | 69 | 35 | 12 | 29 | 8 | 47 | 20 | 10 | 22 | 23 | 17 | 20 | 18 | 75 | 3 | 26 | 24 | 130 | 48 | 636 | 1344 | | |
| Aneurysm | 0 | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 | 1 | 5 | 2 | 0 | 0 | 0 | 1 | 1 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 8 | 13 |
| Other circulatory diseases | 19 | 21 | 10 | 6 | 9 | 1 | 3 | 5 | 15 | 10 | 13 | 5 | 5 | 16 | 12 | 12 | 162 | 11 | 7 | 2 | 9 | 2 | 6 | 2 | 0 | 5 | 7 | 2 | 2 | 1 | 19 | 2 | 8 | 7 | 26 | 22 | 140 | 302 | | |
| Bronchitis | 5 | 14 | 11 | 7 | 10 | 2 | 3 | 7 | 8 | 5 | 4 | 1 | 7 | 4 | 19 | 8 | 106 | 11 | 2 | 4 | 1 | 2 | 1 | 4 | 0 | 1 | 8 | 3 | 1 | 0 | 8 | 2 | 8 | 1 | 9 | 6 | 72 | 178 | | |
| Pneumonia (all forms) | 12 | 11 | 8 | 10 | 8 | 2 | 6 | 5 | 4 | 5 | 8 | 4 | 4 | 6 | 6 | 7 | 106 | 13 | 0 | 1 | 0 | 3 | 3 | 3 | 1 | 2 | 5 | 1 | 1 | 2 | 14 | 0 | 4 | 1 | 18 | 5 | 77 | 183 | | |
| Other Respiratory Diseases | 1 | 3 | 4 | 0 | 4 | 1 | 1 | 0 | 2 | 2 | 0 | 0 | 1 | 2 | 2 | 2 | 25 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 0 | 2 | 5 | 0 | 0 | 0 | 6 | 0 | 1 | 0 | 2 | 3 | 26 | 51 | | |
| Peptic Ulcer | 1 | 2 | 5 | 0 | 0 | 0 | 3 | 0 | 2 | 1 | 5 | 1 | 0 | 1 | 1 | 0 | 22 | 2 | 2 | 2 | 3 | 0 | 2 | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 4 | 0 | 4 | 1 | 1 | 0 | 23 | 45 | | |
| Diarrhoea, etc. (under 2 years) | 1 | 1 | 1 | 1 | 1 | 0 | 0 | 3 | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 1 | 11 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 0 | 0 | 1 | 0 | 0 | 3 | 14 | | |
| Appendicitis | 0 | 1 | 2 | 0 | 1 | 0 | 1 | 2 | 2 | 0 | 1 | 0 | 2 | 0 | 0 | 0 | 12 | 1 | 2 | 0 | 1 | 0 | 2 | 0 | 2 | 0 | 0 | 1 | 0 | 0 | 2 | 0 | 0 | 0 | 0 | 1 | 1 | 13 | 25 | |
| Cirrhosis of Liver | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 1 | 3 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 1 | 0 | 1 | 1 | 7 | 10 | | |
| Other diseases of liver | 0 | 1 | 3 | 1 | 0 | 0 | 1 | 0 | 0 | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 8 | 0 | 2 | 0 | 0 | 2 | 0 | 0 | 0 | 0 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 3 | 1 | 15 | 23 |
| Other digestive diseases | 0 | 10 | 6 | 1 | 6 | 1 | 3 | 4 | 6 | 5 | 5 | 2 | 2 | 5 | 4 | 8 | 68 | 6 | 2 | 0 | 4 | 3 | 4 | 1 | 2 | 3 | 6 | 1 | 1 | 1 | 8 | 2 | 4 | 1 | 8 | 4 | 61 | 129 | | |
| Acute and Chronic Nephritis | 11 | 17 | 5 | 6 | 8 | 1 | 1 | 18 | 8 | 6 | 5 | 3 | 7 | 8 | 11 | 3 | 118 | 4 | 4 | 1 | 5 | 4 | 3 | 4 | 3 | 3 | 2 | 0 | 5 | 19 | 2 | 4 | 1 | 23 | 4 | 95 | 213 | | | |
| Puerperal Sepsis | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 1 | 3 | | |
| Other puerperal causes | 1 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 | 2 | 0 | 0 | 1 | 0 | 0 | 7 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 8 | 15 | | |
| Congenital Debility, Premature Birth, Malformations, etc. | 11 | 13 | 9 | 8 | 9 | 0 | 6 | 4 | 6 | 3 | 9 | 1 | 3 | 4 | 3 | 6 | 95 | 3 | 6 | 3 | 3 | 0 | 2 | 0 | 1 | 1 | 5 | 1 | 2 | 1 | 10 | 2 | 5 | 4 | 12 | 7 | 68 | 163 | | |
| Senility | 28 | 5 | 25 | 18 | 11 | 6 | 6 | 13 | 9 | 4 | 12 | 8 | 3 | 8 | 12 | 29 | 197 | 24 | 2 | 14 | 17 | 8 | 15 | 1 | 2 | 2 | 5 | 3 | 3 | 5 | 8 | 3 | 6 | 2 | 19 | 8 | 147 | 344 | | |
| Suicide | 2 | 4 | 3 | 6 | 1 | 0 | 1 | 2 | 3 | 0 | 2 | 3 | 2 | 0 | 2 | 1 | 32 | 2 | 2 | 0 | 0 | 1 | 1 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 7 | 1 | 18 | 50 |
| Other violence | 10 | 17 | 4 | 9 | 8 | 2 | 6 | 7 | 10 | 6 | 9 | 5 | 3 | 5 | 6 | 9 | 116 | 5 | 4 | 0 | 3 | 2 | 3 | 2 | 0 | 4 | 5 | 1 | 3 | 0 | 15 | 3 | 5 | 1 | 13 | 8 | 77 | 193 | | |
| Other defined diseases | 22 | 21 | 18 | 11 | 17 | 3 | 4 | 13 | 16 | 14 | 16 | 13 | 8 | 16 | 18 | 18 | 228 | 18 | 8 | 3 | 14 | 3 | 9 | 4 | 1 | 11 | 14 | 2 | 5 | 6 | 26 | 8 | 5 | 2 | 36 | 18 | 193 | 421 | | |
| Causes ill-defined or unknown | 2 | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 1 | 0 | 2 | 7 | | | |
| All causes | 302 | 302 | 222 | 189 | 226 | 49 | 122 | 188 | 224 | 135 | 202 | 107 | 114 | 144 | 208 | 233 | 2967 | 259 | 108 | 63 | 134 | 54 | 138 | 51 | 38 | 86 | 128 | 50 | 57 | 51 | 353 | 37 | 113 | 67 | 460 | 216 | 2463 | 5430 | | |

TABLE C.

Table showing, for each Rural District, the number of Births and Deaths, the number of Deaths of Infants, also the Birth Rate, Death Rate, and Rate of Infantile Mortality.

| DISTRICT. | Area. Acres. | No. of Births. | No. of Deaths. | No. of Deaths Under 1 Year. | Population. (Mid-Year) | Birth Rate. | Death Rate. | Standardized Death Rate. | Rate of Infantile Mortality. |
|-------------------------------|-----------------|----------------|----------------|--------------------------------|---------------------------|-------------|-------------|-----------------------------|------------------------------------|
| RURAL :— | | | | | | | | | |
| 1. AXBRIDGE | 90,551 | 309 | 302 | 13 | 22,060 | 14.01 | 13.69 | 10.68 | 42.1 |
| 2. BATHAVON | 46,276 | 328 | 302 | 16 | 23,110 | 14.19 | 13.07 | 10.98 | 48.8 |
| 3. BRIDGWATER | 86,769 | 239 | 222 | 13 | 16,470 | 14.51 | 13.48 | 10.38 | 54.4 |
| 4. CHARD | 54,600 | 136 | 189 | 11 | 11,110 | 12.24 | 17.01 | 13.95 | 80.9 |
| 5. CLUTTON | 42,641 | 229 | 226 | 16 | 15,830 | 14.47 | 14.28 | 12.28 | 69.9 |
| 6. DULVERTON | 78,980 | 66 | 49 | 2 | 4,449 | 14.83 | 11.01 | 9.47 | 30.3 |
| 7. FROME | 51,933 | 138 | 122 | 7 | 9,563 | 14.50 | 12.82 | 10.64 | 50.7 |
| 8. LANGPORT | 59,407 | 145 | 188 | 8 | 12,090 | 11.99 | 15.55 | 11.97 | 55.2 |
| 9. LONG ASHTON | 46,515 | 276 | 224 | 11 | 19,540 | 14.12 | 11.46 | 10.08 | 39.9 |
| 10. SHEPTON MALLET | 47,777 | 144 | 135 | 4 | 9,630 | 14.95 | 14.02 | 11.50 | 27.8 |
| 11. TAUNTON | 70,682 | 200 | 202 | 11 | 16,580 | 12.06 | 12.18 | 9.62 | 55.0 |
| 12. WELLINGTON | 37,911 | 98 | 107 | 2 | 7,213 | 13.59 | 14.83 | 11.72 | 20.4 |
| 13. WELLS | 57,175 | 127 | 114 | 7 | 9,365 | 13.56 | 12.17 | 9.86 | 55.1 |
| 14. WILLITON | 97,364 | 146 | 144 | 5 | 11,860 | 12.31 | 12.14 | 9.47 | 34.2 |
| 15. WINCANTON | 64,540 | 185 | 208 | 4 | 15,770 | 11.73 | 13.19 | 10.95 | 21.6 |
| 16. YEOVIL | 53,495 | 240 | 233 | 9 | 16,550 | 14.50 | 14.08 | 11.97 | 37.5 |
| Totals of Rural Population | 986,616 | 3,006 | 2,967 | 139 | 221,190 | 13.59 | 13.42 | 11.00 | 46.2 |

TABLE D.

Table showing, for each Urban District, the number of Births and Deaths, the number of Deaths of Infants, also the Birth Rate, Death Rate, and Rate of Infantile Mortality.

| DISTRICT. | Area. | No. of Births. | No. of Deaths. | No. of Deaths Under 1 Year. | Population. (Mid-Year) | Birth Rate. | Death Rate. | Standardized Death Rate. | Rate of Infantile Mortality. |
|-------------------------------|-----------|----------------|----------------|-----------------------------|------------------------|-------------|-------------|--------------------------|------------------------------|
| URBAN :— | Acres. | | | | | | | | |
| 1. BRIDGWATER | 1,677 | 317 | 259 | 8 | 18,080 | 17.53 | 14.33 | 12.61 | 25.2 |
| 2. BURNHAM | 2,246 | 105 | 108 | 7 | 7,764 | 13.52 | 13.91 | 9.88 | 66.7 |
| 3. CHARD | 1,030 | 54 | 63 | 3 | 4,330 | 12.47 | 14.55 | 11.20 | 55.6 |
| 4. CLEVEDON | 3,296 | 71 | 134 | 3 | 7,764 | 9.14 | 17.26 | 10.87 | 42.3 |
| 5. CREWKERNE | 1,291 | 37 | 54 | 2 | 3,466 | 10.68 | 15.58 | 12.93 | 54.1 |
| 6. FROME | 1,194 | 111 | 138 | 2 | 10,360 | 10.71 | 13.32 | 10.52 | 18.0 |
| 7. GLASTONBURY | 5,019 | 60 | 51 | 0 | 4,462 | 13.45 | 11.43 | 10.06 | 0.0 |
| 8. ILMINSTER | 531 | 23 | 38 | 1 | 2,166 | 10.62 | 17.54 | 14.90 | 43.5 |
| 9. MINEHEAD | 2,816 | 54 | 86 | 2 | 6,356 | 8.50 | 13.53 | 10.42 | 37.0 |
| 10. NORTON- RADSTOCK | 3,370 | 162 | 128 | 6 | 11,170 | 14.50 | 11.46 | 10.89 | 37.0 |
| 11. PORTISHEAD | 911 | 40 | 50 | 2 | 3,808 | 10.50 | 13.13 | 10.64 | 50.0 |
| 12. SHEPTON MALLET | 2,278 | 60 | 57 | 4 | 4,296 | 13.97 | 13.27 | 11.01 | 66.7 |
| 13. STREET | 3,069 | 50 | 51 | 2 | 4,531 | 11.04 | 11.26 | 10.02 | 40.0 |
| 14. TAUNTON | 2,428 | 359 | 353 | 18 | 27,510 | 13.05 | 12.83 | 11.16 | 50.1 |
| 15. WATCHET | 493 | 36 | 37 | 2 | 2,197 | 16.39 | 16.84 | 13.30 | 55.6 |
| 16. WELLINGTON | 2,211 | 82 | 113 | 5 | 6,619 | 12.39 | 17.07 | 12.80 | 61.0 |
| 17. WELLS | 1,336 | 74 | 67 | 5 | 5,241 | 14.12 | 12.78 | 9.59 | 67.6 |
| 18. WESTON-S-MARE | 4,923 | 347 | 460 | 14 | 32,680 | 10.62 | 14.08 | 10.70 | 40.3 |
| 19. YEOVIL | 2,257 | 307 | 216 | 8 | 20,100 | 15.27 | 10.74 | 11.06 | 26.1 |
| Totals of Urban Population | 42,376 | 2,349 | 2,463 | 94 | 182,900 | 12.84 | 13.47 | 11.05 | 40.0 |
| Administrative County | 1,028,992 | 5,355 | 5,430 | 233 | 404,090 | 13.25 | 13.44 | 11.02 | 43.5 |
| England and Wales, 1937 | — | — | — | — | — | 14.9 | 12.4 | 12.4 | 58 |

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