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COUNTY BOROUGH



OF SOUTHPORT.

REPORT

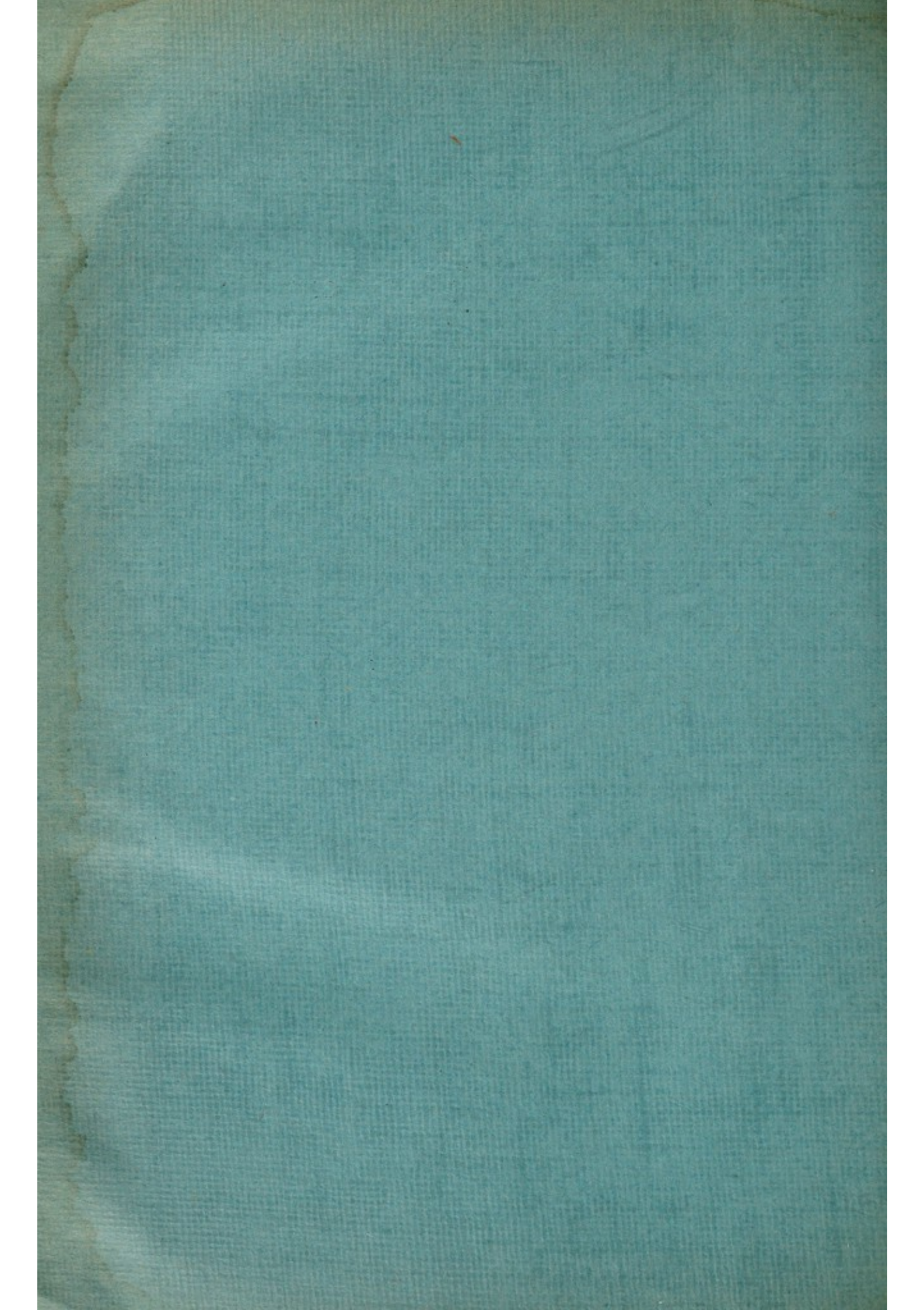
UPON THE

Health and Sanitary Condition

OF THE

County Borough of Southport,

For the Year 1930.



COUNTY BOROUGH



OF SOUTHPORT.

REPORT

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Health and Sanitary Condition

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For the Year 1930.

F. Taylor & Co. (Blackpool), Ltd., Back Regent Road, Blackpool.



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THE HEALTH COMMITTEE.

THE WORSHIPFUL THE MAYOR
(Councillor A. PEPLOE, O.B.E., J.P.).

Chairman : Councillor J. G. WILKINSON,

Vice-Chairman : Councillor Dr. G. R. ANDERSON, M.B.E., J.P.

Ald. C. AVELING, J.P.	Counc. F. A. DOBBINS.
Ald. F. HARLING, J.P.	Counc. MISS HARTLEY, J.P.
Ald. Dr. A. W. LIMONT, J.P.	Counc. R. HODGE.
Ald. W. H. M. MAWDSLEY, J.P.	Counc. G. H. HIBBOTT,
Ald. W. H. POTTS, J.P.	Counc. Dr. E. W. LEWIS.
Ald. A. TOMLINSON, J.P.	Counc. MISS RIMMER, J.P.
Ald. E. WOOD, J.P.	Counc. T. SCHOLES.
Counc. J. R. BILLINGTON.	Counc. J. TAYLOR.
Counc. T. BALL.	Counc. F. WHITTAKER.
Counc. R. BLAKELEY.	Counc. F. WORSWICK.
Counc. B. COMPTON CARR.	Counc. A. YATES,

TO THE CHAIRMAN AND MEMBERS OF THE HEALTH COMMITTEE OF
THE COUNTY BOROUGH OF SOUTHPORT.

MR. CHAIRMAN, LADIES, AND GENTLEMEN,

I have to present my report for the year 1930, which relates to a period of difficult conditions.

The new Venereal Diseases Hospital has been completed, and the quality of the work done here is of the highest and is not surpassed in this country. The question of supplying a full-time orderly should be disposed of.

Building has commenced on the new Maternity Hospital, for which we are indebted to the munificence of Miss Hartley. In the meanwhile the Infirmary authorities have kindly granted the Corporation the use of one of their wards.

Work has begun on the new Hampton Road Welfare Centre. It will be noted that this is the first of these Centres for which an *ad hoc* plan has been employed from the outset.

The in-patient treatment of Orthopædic cases continues to occasion a cost which is apparently high. Sanatorium benefit, which means that a patient, the subject of Tuberculosis, can be sent for in-patient treatment to an approved institution by the Tuberculosis Officer, is also causing increased expenditure. It will be observed that both these objects, whatever the Statutory Law may be, are outside of the original scope of work of the Sanitary authority, whose basic reason for sending a phthisical patient to a sanatorium is the isolation of an infectious case. This consideration does not apply to the above two sections.

The advantages due to the possession of a thoroughly up-to-date Isolation Hospital at New Hall continue to be experienced in a high degree. The standard of nursing at the Hospital has been excellent throughout the year, and many of the patients both in the Sanatorium and on the Fever side owe their recovery to the care given them by the nurses. The Hospital became a recognised Training Institution at the end of 1929. Nurses henceforth can be given training in Fever nursing for two years prior to taking up nursing training in general hospital, and this two years' course exempts them from one of the three years otherwise necessary in the general hospital. So far four nurses have sat for the preliminary examination for the certificate in Fever nursing, and these have duly passed. Their training includes the following subjects :—Physiology, Anatomy, Hygiene, Infectious Diseases, including Tuberculosis and the Theory and Practice of Nursing.

I regret that, except on the part of two or three members, the rota system has not secured peculiar acquaintance with particular departments by individual members of the Committee. Various sections of the Committees' undertakings are of exceeding intrinsic concern and absorbing interest ; each is a subject in itself. I would that you should visit them informally ; such attention is cordially welcomed by the staffs and a source of much personal satisfaction to the Committeeman.

I am,

Faithfully yours,

GEO. C. BARNES.

April 30th, 1931.


PUBLIC HEALTH OFFICERS.

Medical Officer & School Medical Officer	G. C. Barnes, D.P.H.
Deputy " "	W. E. FitzGerald, D.P.H.
Assistant Medical Officer of Health	Bertha M. Butters, D.P.H.
V.D. Medical Officer & Dermatologist	Dr. H. Bardsley, M.R.C.S., L.R.C.P.
Maternity Ward Obstetrician-in-Charge	Dr. A. S. Garden, M.D. Aberdeen ; L.M. Dublin.
Hon. Consultant Obstetrician	Dr. Leith Murray, M.D., M.B., Ch.B.
Consultant Tuberculosis Officer	Dr. John Hay, M.D., F.R.C.P.
Nose and Throat Specialist	Dr. C. Yorke, M.D., F.R.C.S. Eng.
Public Vaccinator	Dr. R. Haddock, M.A., M.B., Ch.B.
Do.	Dr. G. G. Rigby, L.M.S., S.A. (Lond.)
Veterinary Surgeon	H. G. Hewetson, M.R.C.V.S.
Analyst	W. H. Roberts, M.Sc., F.I.C.
Dentist	J. H. Highton, L.D.S.
Do.	W. Martland, L.D.S.
Dental Mechanic	R. Sanderson.
Chief Sanitary Inspector & Vaccination Officer	J. Peet (C.).
District Sanitary Inspector	P. Wright (C.).
Do.	K. Aspinwall (C.).
Do.	S. J. Wilde (C.).
Do.	G. Huggins (C.).
Food Inspector	D. Wood (C.).
Shops Inspector	G. Hadley (C.).
Ambulance Attendant and Infectious Disease Enquiry Officer	H. Magee.
Ambulance Driver	A. W. Armitage.
Senior Clerk	H. Griffiths.
Clerk	Miss E. Wilkinson.
Chief Health Visitor	" V. M. Willder (A.B.C.).
Assistant Health Visitor	" A. Bullen (B.C.).
Do.	" E. Palmer (A.B.C.).
Do.	" M. Lewis (A.B.C.).
Do.	" A. Probert (A.B.C.).
Do.	" G. M. Shenton (A.B.).
Do.	Mrs. E. Whelan (A.B.C.).
Do.	" E. Dearden.
Do.	Miss Annie Dunn (A.B.).
Dentist's Assistant	" H. Rimmer.
Clerk	" L. Taylor.
Do.	" A. Topping.
Do.	" M. Towler.
Caretaker, 2, Church Street	T. Wright.
Do. Slaughterhouses	F. Beaton.
Victoria Baths	Superintendent : S. Hodson.
Canning Road Baths	
Compton Road Baths	

A.—Trained Nurse. B.—Central Midwives Board. C.—Royal Sanitary Inst.

NEW HALL HOSPITAL.

NEW HALL HOSPITAL.					
Matron	MISS	COULTER	MISS	COULTER	Miss S. Coulter.
Home Sister	MISS	FLETCHER	MISS	FLETCHER	" Elsie Fletcher.
Night Sister	MISS	MCCRORY	MISS	MCCRORY	" Mary McCrory.
Sanatorium Sister	MISS	DALEY	MISS	DALEY	" Annie Daley.
Engineer	MR	PILKINGTON	MR	PILKINGTON	T. Pilkington.
Porter	MR	SEDDON	MR	SEDDON	J. Seddon.
Hon. Dental Surgeon	MR	FINDLAY	MR	FINDLAY	W. A. Findlay, jun., L.D.S.



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REPORT, 1930.

Population at Census, 1911	69,643
Do. do. 1921	71,900
Do. (estimated by M.O.H.), middle of 1930.....	80,700
Area of Borough (Excluding Foreshore, 14,196 acres), acres	8,804

	1925	1926	1927	1928	1929	1930
Birth Rate	13·10	11·90	12·18	11·54	11·07	11·3
" Academic " Corrected Death Rate	10·70	10·12	11·50	11·17	12·14	11·56
Death Rate, Zymotic Diseases	0·14	0·23	0·08	0·20	0·17	0·24
Infantile Death Rate	61	62·5	48	75	72·5	74·2

(For various other rates of previous years, see Table VIII, and Text *infra*.)

POPULATION.

The number of New Houses erected and completed during the year was about 310. The number of children attending Elementary Schools has shewn a further increase during the last four years of about 128.

The Registrar General's estimate for the middle of 1929 was 80,040, and mine for the middle of 1930 was 80,700, which is adopted as a basis for the rates for 1930.

SOCIAL CONDITIONS.

The population is almost entirely residential, with the necessary ancillary occupations. There is one important motor works.

Poor Law Relief :—

Amount of Relief granted during 1930.	No. of Persons in receipt of Out-door Relief Jan. 1, 1931.
£11,138	962

Southport Infirmary :—

	1926	1927	1928	1929	1930
In-Patients—Total Treated.....	1,336	1,562	1,648	1,517	1,705
Out-Patients— do.	3,682	3,649	4,723	4,133	4,119

Further assistance is given by the Southport and Birkdale Provident Society, and by the Southport and Birkdale District Nursing Society.

Vital Statistics.

BIRTH RATE.

The "Corrected" Births numbered 890 (6 less than last year) of which 464 were males and 426 females. The resulting Birth-rate is 11.03.

INFANTILE MORTALITY.

Year.	Total Births.	Legitimate Births.	Illegitimate Births.	Total Deaths.	Total Rates.	Deaths Legitimate	Rate per 1,000.	Deaths Illegitimate.	Rate per 1,000.
1923	996	937	59	65	65	55	59	10	169
1924	934	876	58	59	63	51	58	8	138
1925	973	917	56	59	61	54	59	5	89
1926	928	863	65	58	62.5	52	60	6	92
1927	958	891	67	46	48	41	46	5	75
1928	915	858	57	69	75	61	71	8	140
1929	896	842	54	65	72.5	57	68	8	148
1930	890	827	63	66	74.2	52	63	14	222

DEATH-RATE.

Gross (after "exclusions and inclusions")	13.64
Registered in the Borough and the Isolation Hospital	12.82
Local (after deduction of imported "Bad Lives"	11.97
"Corrected for age and sex"	11.56
Five Years' Average of same (1926-1930)	11.30
Percentage over 65 years	52.00
Do. 75 do.	26.52

The deaths from Organic Heart Disease and Respiratory Diseases shew a reduction.

More than half the deaths occurred at the age of 65 and upwards, and more than a quarter at 75 and upwards. In estimating the healthiness or otherwise of a given population even the death-rate is insufficient of itself; at least two other rates must be borne in mind for the consideration of the problem, namely the Infantile Death-rate and the Zymotic Death-rate.

**RATIO OF DEATHS IN EACH OF THE VARIOUS AGE GROUPS TO
TOTAL DEATHS (100).**

	Under 1	1—2	2—5	5—15	15—25	25—45	45—65	65 and Upwards.
1923.....	6·7	2·7	1·3	1·2	2·4	8·7	27·4	49·6
1924.....	5·9	2·0	1·5	1·0	2·8	10·0	23·9	52·9
1925.....	6·3	1·7	1·3	1·2	3·0	8·3	25·9	52·3
1926.....	6·2	0·7	1·2	1·4	2·1	9·1	25·7	53·6
1927.....	4·3	0·3	1·1	1·1	2·2	8·3	28·3	54·4
1928.....	6·6	1·7	1·5	1·0	2·4	7·2	27·5	52·1
1929.....	5·7	0·8	0·6	1·6	2·6	8·5	24·5	55·7
1930.....	6·0	0·5	0·6	2·1	3·4	10·5	24·7	52·2

ZYMOTIC DEATH-RATE.

Nineteen deaths, due respectively to Diphtheria (6), Measles (2), Whooping Cough (3), Diarrhœa (3), Enteric Fever (2) and Scarlet Fever (3), gave a corrected Zymotic Death-rate of 0·24 per 1,000. This is a very satisfactory Zymotic Death-rate. It is doubtful if the deaths from Infantile Diarrhœa were of an epidemic nature.

CANCER, MALIGNANT DISEASE.

The number of deaths was 155—about the usual incidence. One in six of all deaths of persons 25 years and upwards were due to this condition.

In a population with an age constitution such as ours the rate must necessarily remain apparently high. The deaths are confined practically to the middle aged and the aged.

HEART DISEASE DEATHS.

	Totals	10-20	20-30	30-40	40-50	50-60	60-70	70-80	80-90	90-100	100 Up
Valvular Disease	54	1	1	2	3	6	16	21	4	-	-
Endocarditis	1	-	-	-	-	-	1	-	-	-	-
Dilatation	1	-	-	-	-	-	-	1	-	-	-
Myocardial Degeneration	41	-	-	-	1	4	6	18	10	2	-
Myocarditis	31	-	-	-	-	-	6	18	5	2	-
Auricular Fibrillation	4	-	-	-	-	-	1	2	1	-	-
Cardio-Vascular Degen- eration	1	-	-	-	-	1	-	-	-	-	-
Heart Disease	7	-	-	-	3	2	1	1	-	-	-
Myocardial Disease	1	-	-	-	-	-	1	-	-	-	-
Totals	141	1	1	2	7	13	32	61	20	4	-

There would appear to be a vogue for certifying deaths at the higher ages as of Cardiac causation so that the Death-rate from Cardiac Disease is higher than it would otherwise be. My own opinion is that the true incidence of Cardiac morbidity is low in this area.

TABLE X.—Birth-rate, Death-rate, and Analysis of Mortality during the year 1930.

(Provisional figures. The rates for England and Wales and Southport have been calculated on a population estimated to the middle of 1930, but those for the other towns have been calculated on populations estimated to the middle of 1929. The mortality rates refer to the whole population as regards England and Wales, but only to civilians as regards London and the groups of towns).

	RATE per 1,000 TOTAL POPULATION.		ANNUAL DEATH-RATE PER 1,000 POPULATION.									RATE PER 1,000 LIVE BIRTHS.		PERCENTAGE OF TOTAL DEATHS.			
	Live Births.	Still-births.	All Causes.	Enteric Fever.	Small-pox.	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Influenza.	Violence.	Diarrhoea and Enteritis (under Two years).	Total Deaths under One year.	Certified by Registered Medical Practitioners.	Inquest Cases.	Certified by Coroner after P.M. No Inquest.	Uncertified Causes of Death.
England and Wales	16.3	0.69	11.4	0.01	0.00	0.10	0.02	0.05	0.09	0.12	0.55	6.0	60	90.4	6.9	1.7	1.0
107 County Boroughs and Great Towns, including London	16.6	0.71	11.5	0.01	0.00	0.15	0.02	0.05	0.10	0.11	0.50	8.3	64	90.6	6.6	2.3	0.5
159* Smaller Towns (1921 Adjusted Population 20,000—50,000)	16.2	0.69	10.5	0.00	0.00	0.08	0.01	0.05	0.07	0.13	0.43	4.4	55	91.8	5.9	1.2	1.1
London	15.7	0.56	11.4	0.01	0.00	0.23	0.02	0.03	0.10	0.08	0.55	9.9	59	88.3	7.4	4.3	0.0
Southport	11.03	0.56	11.56	0.02	0.00	0.02	0.04	0.04	0.07	0.11	0.37	3.4	74.2	92.82	3.71	0.27	3.20

*By the creation of Llwelwr U.D. on the 1st April, 1930, and the extension of Sale U.D. on the 1st October, 1930, the number of Smaller Towns was increased to 159.

General Housing Conditions.

HOUSING ACCOMMODATION.

Three hundred and ten houses have been erected by private enterprise during the year. None by Corporation.

The cost of repair of old houses is still so high that in the presence of restriction on rent it is difficult to get repairs executed.

COMMON LODGING HOUSES.

There are five registered Common Lodging Houses, the same number as last year. The conditions generally inside and out are satisfactory.

NEW LOCAL ACT.

Under the SOUTHPORT CORPORATION ACT OF 1930, the Corporation obtained a number of additional powers to deal with Infectious Diseases and sanitary matters.

SECTION 84 of the Act places a duty upon any person being the parent or having care of a child at a school in the Borough, who is aware, or who has reason to suspect the occurrence of any infectious disease in any person residing with such parent or other person, to notify forthwith such occurrence to the head teacher, principal or superintendent of the school. Failure to do so incurs liability to a penalty, and the expression school includes a Sunday school.

SECTIONS 85 AND 86 give the Corporation power to close Sunday schools and exclude children from entertainments, and also to restrict the attendance of children at Sunday school and places of assembly, and

SECTIONS 79 AND 80 of the Corporation Act of 1913 are repealed.

UNDER SECTION 87, the occupier of any building which is used for human habitation and in which there has been any person suffering from infectious disease shall, on the application of the Medical Officer of Health, furnish such information within his knowledge as the Medical Officer may reasonably require.

The Act also gives powers to the Medical Officer of Health to require the names of laundry men to be furnished in case of infectious disease, and also to require buildings to be cleansed and disinfected to prevent or check Tuberculosis.

SECTION 90 prohibits a person who is suffering from infectious disease from carrying on the business of the preparation or handling of food intended for consumption by persons other than himself or members of his household.

SECTIONS 91 AND 92 authorise the Corporation to supply any medical practitioner with antidotes and remedies against Infectious Disease, and also to deal with the removal of infirm and diseased persons to a suitable Hospital or Institution.

The Act also provides (SECTIONS 93 and 94) for the registration of Ice Cream Manufacturers and premises, and for regulating the manufacture and sale of Ice Cream.

There are also a number of provisions (SECTION 95 to 101), bringing the powers of the Corporation up to date in dealing with the transport of food and unsound food, and also for the inspection of meat.

Several additional powers have also been obtained (SECTION 102 and 115) dealing with such matters as offensive trades, removal of refuse, the better sanitary conditions of stables, the cleansing of dwellinghouses, and the provision of water closets in new buildings and the conversion of slop closets, also powers to close or purchase slaughterhouses.

SECTIONS 123 to 127 give the Corporation additional control in respect of common lodging-houses.

Public Baths.

VICTORIA BATHS.

These baths, situated near the Pier, have been completely modernized, and are unequalled for comfort both in summer and winter.

Sea water supplied to the Plunge Baths is treated by the most up-to-date method of filtration and samples of water taken periodically from these baths show a state of purity which is exceptional.

During the winter months, November to March, one Plunge Bath is open each week-day for the purpose of Family and Mixed Bathing, the water being heated to a temperature which makes bathing as comfortable in winter as in summer.

The number of baths taken during the year was 116,224.

HOT WATER PRIVATE SLIPPER BATHS.

For a very modest sum hot or cold filtered sea water, or softened fresh water, baths are available at any hour during which the baths are open. Separate suites are provided for ladies and gentlemen. These baths are the last word in cleanliness; the baths being used 16,760 times.

TURKISH AND RUSSIAN BATHS.

The Turkish Baths are acknowledged to be the most up-to-date in the north of England, and are complete with every comfort. One of the outstanding features of these baths are the Salt Water Douche and Sprays, which are given after the shampoo and massage. The Cooling Rooms and Lounge are large and airy. An experienced Masseur and Masseuse are in attendance. 3,688 of these baths were taken.

CANNING ROAD BATHS.

Since these baths were opened in 1903 they have fulfilled a very useful purpose. They comprise: an open-air bath for boys and girls, admission to this bath being free to those under the age of 16 years; hot-water slipper baths available at the low cost of 2d., or with towel and soap 4d. The slipper baths were used 5,094 times.

COMPTON ROAD BATHS.

These baths were opened in 1926, and consist of one Open-Air Bath, which is free to children under 16 years, and 10 slipper baths. The charge for the slipper baths is 2d. each person, or with soap and towel 4d. 4,868 slipper baths were taken.

SEA BATHING LAKE.

Southport was the first Municipality to provide, many years ago, a large open-air sea bathing lake for mixed bathing. In keeping, however, with the town's progressive policy, a magnificent new lake was opened in 1928. The new lake, which is situated in Prince's Park, adjoining the seashore, cost £70,000 and is most luxuriously appointed. The lake itself takes the form of an oval, 330 feet at its greatest length, with a maximum width of 212 feet. It is filled with filtered sea water and has a water surface area of over 50,000 square feet, surrounded with grass borders.

The sea water with which the lake is filled first undergoes a period of settlement in underground concrete tanks so that any mud or suspended matter is deposited. It then flows from the settling tanks into three large filters, where it passes through fine gravel and sand. After leaving the filters it is dosed with the necessary amount of chlorine so as completely to sterilise the water; and is then aerated by means of blowers and by passing the water over cascades and through sprays into the lake. This process of filtration proceeds continuously so that the whole of the water in the lake is turned through the filters and treated at least once a day. A proportion of fresh sea water is added every morning after being treated.

There are terraces with seating accommodation for several thousands of spectators, a fine cafe, and an upper terrace promenade connecting the two-storey dressing pavilions at the south and north ends of the lake for ladies and gentlemen respectively. There is dressing accommodation for about 1,000 bathers. In front of the cafe there is a pergola carried on white pillars, and leading down to the lake there is a wide artificial stone stairway, on either side of which clear sea water falls in beautiful cascades over limestone rocks on its way to the lake.

Corridor foot-baths have been installed in the floors of the corridor from dressing cubicles to Pool, thus insuring that no bathers enter the water without their feet having been rinsed or washed in running water.

The laundry where all towels and costumes are washed and sterilised has been enlarged, and water-softening plant installed.

Sun Bathing is exceedingly popular on the grass surrounds of the bath, and in addition two large areas have been constructed especially for Sun Bathing, where a large number of bathers can be accommodated. The Ladies' Sun Bathing enclosure is secluded and private. The sand is renewed periodically and fresh sea-sand brought in.

In connection with the Sun Bathing, a Gymnasium has been provided, the necessary apparatus installed and a qualified instructor of physical training and Swedish drill is in attendance.

Samples of the water are taken at frequent intervals for bacteriological test, and results show a remarkable degree of purity.

The number of attendances at the Bathing Lake during the past season was 375,791.

Infectious Diseases.

DISEASE.	NOTIFICATIONS.					DEATHS.					CASE MORTALITY.				
Year	1926	1927	1928	1929	1930	1926	1927	1928	1929	1930	1926	1927	1928	1929	1930
Enteric Fever	5	7	1	1	2	1	1	—	1	2	20.0	14.3	—	100.0	100.0
Scarlet Fever	132	144	123	234	269	1	—	—	2	3	0.76	—	—	0.85	1.12
Diphtheria	35	49	71	168	205	1	—	1	3	6	2.86	—	1.41	1.79	2.93
Measles*	887	401	674	581	889	5	2	2	3	2	0.56	0.50	0.30	0.51	0.22
Whooping Cough*	418	118	310	149	280	5	3	9	1	3	1.03	2.54	2.90	0.67	1.07

* Only first case in a house in two months is notifiable.

INCIDENCE RATE PER 1,000 POPULATION.

	Small-pox	Scarlet Fever	Diphtheria	Enteric	Puerperal	Puerperal Pyrexia	Erysipelas
England and Wales	0.29	2.76	1.84	0.07	0.06	0.14	0.45
Southport	0.00	3.33	2.54	0.01	0.05	0.14	0.61

DIPHTHERIA.

Cases—205.

Deaths—6.

Case Mortality—2.93.

Many of the cases were of the gravest type, and the mortality therefore is remarkably low. Six carriers were found by swabbing at Elementary Schools and Institutions.

PREVENTION OF DIPHTHERIA AND SCARLET FEVER.

	NOTIFICATIONS.	DEATHS.
Diphtheria	205	6
Scarlet Fever	269	3

On reviewing these cases there are several points which call for attention, especially in regard to the former.

The type of Diphtheria which has prevailed recently is easily and successfully treated by antitoxin if the disease is recognised in its early stages and before much membrane has formed; but without early treatment the patient becomes progressively worse and in proportion to the amount of membrane found so may the chances of recovery be prejudiced, *caeteris paribus*.

It seems to those who have to accept the final responsibility for these cases that one rule should never be broken, namely, that where "clinical" diphtheria is present *antitoxin should be given immediately before waiting for the result of the bacteriological examination of the throat swab*; and even given a negative result from the swab, if the throat does still clinically resemble diphtheria, or there is any doubt in the mind of the physician, antitoxin should be administered without delay.

In a case untreated by antitoxin four to seven days are sufficient time for a fatal result to ensue; while waiting for the result of bacteriological examination valuable time may be fatally lost.

In a recent outside case the first throat swab examined proved to be negative for Klebs Loeffler's Bacillus—antitoxin was withheld until a second swab taken three days later proved positive, but by this time the throat was very severely infected and a considerable amount of membrane with accompanying oedema had developed. Fortunately this case yielded to treatment, but was the cause of considerable anxiety for some time.

Secondly: the question of contacts becomes important, and this is more difficult to advise upon owing to varying circumstances.

The department has been consulted from time to time by medical practitioners who having diagnosed a case of Diphtheria in a household wish to take precautions about the contacts. There can be little dispute as to the advisability of taking throat swabs from all contacts, and, where a contact exhibits symptoms of nasal catarrh, a swab from the nose as well. In this way an incipient case or a carrier will be sometimes detected, and can be isolated and treated—but it must be remembered that if the rest of the contacts are susceptible to the disease they will continue to run some risk of infection both on return of the carrier to the house and also on return of the convalescent patient.

A common rule at most isolation hospitals is to insist upon one or two negative swabs before the patient is ready for discharge, but this must always be a compromise because owing to the anatomical formation of the throat and nose, and especially when unhealthy tonsils exist, two negative swabs may be obtained in sequence followed by a positive swab, and the discharged patient may still be a carrier of the bacillus ready to infect others on his return home.

The only way in which this problem can be efficiently dealt with is to isolate the patient and any carriers found, and to test the rest of the household by the Schick test for susceptibility. If the other members are not susceptible there is no need to immunize them. If they are susceptible, then two courses are open to the practitioner. The easiest one is to give a prophylactic dose of antitoxin of 2,000 units.

The disadvantage of this is that it confers only an evanescent immunity and one of somewhat limited duration. The other course is to immunize the susceptible cases by means of toxoid (combined antitoxin and toxin). This is given in three doses at intervals of one to four weeks, and lasting immunity is the result. This immunity takes some time to establish, but should be sufficient after the third dose to prevent the individual from contracting the disease in the absence of a massive infection, when at the least the severity of the attack will be modified.

The following extract from the "American Journal of Diseases of Children" (1929) displays the value of the Schick and Dick tests:—

"Active immunization against Diphtheria and Scarlet Fever has been on trial long enough to call for a verdict.

"Of the verdict there is no doubt. The final demand we make of Active Immunization is that it shall protect those most intensely exposed; Vaccination must protect the staff in a Small-pox Hospital, Typhoid Vaccination must protect the nurse in a Typhoid Ward. Since they do this we believe in them. Active Immunization against Diphtheria *does* protect the staff in hospitals for infectious diseases; a number of the large hospitals in England have practically abolished Diphtheria amongst the staffs for some years past. The two homes we immunized five to seven years ago, and the entrants which my colleagues, Dr. Okell and Dr. Parish, have tested and immunized since have remained free of Diphtheria. Commander Dudley reports, in last week's 'Lancet,' that for the first time in the recent history of a Naval School for boys a year has passed without Diphtheria.

"The tale for Scarlet Fever is almost equally comforting. We are not here on such sure ground as in Diphtheria. Though a negative response to the Dick test does indicate a high level of immunity against Scarlet Fever, the deduction cannot be made with the same certainty as in Diphtheria. I therefore await with great interest the result of the crucial test, viz., will the use of the Dick test and Active Immunization protect hospital nurses in Scarlet Fever wards? From English experience we can now answer that it will. Dr. Benson, of Edinburgh, has recorded a period of approximately two years without any Scarlet Fever amongst his nurses, for the first time in the modern history of the hospital. There is another large hospital in the Midlands which has now passed through its first year after Active Immunization, without a case. The unprejudiced observer will be satisfied that these measures, either in their present or in an improved form, have come to stay, and will be applied to groups of people intensively exposed, such as hospital nurses, children in residential homes, and those amongst whom this disease may break out."

So far this work is in its infancy in Southport. The children in one girls' home have been tested for susceptibility to both Scarlet Fever and Diphtheria. In all, 24 children were tested, 8 were found to lack natural immunity to Scarlet Fever and 12 in the case of Diphtheria. These children were immunized, using Parke Davies's Scarlet Fever Streptococcus Toxin for the Scarlet Fever susceptibles and Parke Davies's Diphtheria Toxoid-Antitoxin against Diphtheria. All new entrants to the school are immediately tested. At a private boarding school where an outbreak of Scarlet Fever occurred the medical officer in charge carried out similar work.

WHOOPIING COUGH.

Cases—280.

Mild type.

Deaths—3.

MEASLES.

Cases—889.

Mild type.

Deaths—2.

NEW HALL ISOLATION HOSPITAL.

I append statement of the costings in the Institution and call attention to the Patient—Staff days ratio.

CALCULATION OF AVERAGE PATIENT DAY COST FOR 12 MONTHS 1st JANUARY TO 31st DECEMBER, 1930.

	TOTAL FOR 12 MONTHS.			AVERAGE FOR 12 MONTHS.					
	Total.	Tuber- culosis.	Other Diseases.	Total.	Tuber- culosis.	Other Diseases.			
	£	£	£	s. d.	s. d.	s. d.			
Provisions	2,914	1,039	1,875	1 7½	1 10	1 6			
Drugs, etc.	947	301	646	6½	6½	6½			
Salaries and Wages	2,332	690	1,642	1 3½	1 2¾	1 3¾			
Rates and Taxes	516	129	387	3½	2¾	3¾			
Fuel, Light, Water	1,558	498	1,060	10¼	10½	10			
Domestic Renewals	386	95	291	2½	2	2¾			
Other Items	456	118	338	3	2½	3½			
Structural Repairs	257	74	183	1¾	1½	1¾			
Loan Charges	7,714	1,923	5,791	4 3	3 4¾	4 7½			
	17,080	4,867	12,213	9 5	8 7½	9 9½			
Income	1,193	91	1,102	8	1¾	10½			
	15,887	4,776	11,111	8 9	8 5½	8 11			

Borough Treasurer's Dept., Southport.

Patient-day Total 36,198 11,293 24,905

Staff-day Total 11,064

Ratio of Patient-days to Staff-days : 100 : 30·5

Venereal Disease.

	Out-Patient Attendances.	In-Patient Days.
1922	11,130	2,144
1923	8,883	1,327
1924	8,436	1,314
1925	9,506	1,476
1926	12,871	1,976
1927	13,299	2,456
1928	12,320	2,054
1929	10,571	1,557
1930	9,760	1,588

The new cases were 243, about the same as last year.

There has been a considerable increase in the number of new cases of both Syphilis and Gonorrhœa in males and females under one year's standing. The number of new cases proved to be Non-Venereal has diminished.

The decrease in the number of total attendances is in part due to cases coming up earlier and attending more regularly in the early stages, the cure thereby being more rapid.

During the year 1930 we have had eight births in the Department ; owing to the mothers having not received ante-natal treatment, two were still-born and one born with a definite Congenital Syphilis. The others having been under treatment previously were fine, healthy babies.

There were four cases of Positive Ophthalmia Neonatorum admitted, and each case was discharged cured without impairment of vision.

During the year, 260 cases were discharged as completely cured. This is a large number and refers in many instances to cases which have been under treatment and observation over a period of years. Each one has been given thorough Clinical, Bacteriological and Provocative tests before being discharged thereby maintaining the high standard of cure.

The Clinic has now completed ten years, and during that period there have been 113,984 attendances.

At the time of writing the Clinic has been transferred to the new Department which is fully equipped for all modern methods of treatment and diagnosis of Venereal Diseases, but as the figures have got to somewhat large dimensions (there being a total of 980 patients on the books still requiring observation and periodic treatment) it makes it necessary that a whole-time male nurse should be employed who could devote his time solely to administering treatment at any time to male patients ; attending to the records, and maintaining the regular attendance of patients due for tests and periodic examination, as it is only by doing this we can keep control of Venereal Disease in the town and prevent recurrences and relapses, which is a most important factor in avoiding perpetuation of these diseases.

HENRY BARDSLEY, M.R.C.S.

Vaccination.

Appended is a Table showing the percentage of unvaccinated infants found during Medical Inspection of School Children.

	Boys.	Girls.
1909	13.0	14.1
1910	8.3	9.1
1911	4.2	4.7
1912	23.9	21.8
1913	44.0	45.4
1914	50.8	55.7
1915	53.6	49.6
1916	55.6	50.4
1917	60.2	57.5
1918	63.4	63.6
1919	68.8	67.1
1920	68.5	66.7
1921	73.0	68.4
1922	69.0	73.6
1923	69.0	68.0
1924	76.4	72.8
1925	72.9	74.6
1926	77.2	75.5
1927	35.4	38.0
1928	57.6	61.3
1929	54.8	50.2
1930	51.9	52.2

Tuberculosis.

This branch continues to develop in methods and scope and will continue to do so. It is interesting to note that of the number of notified cases of Tuberculosis (all forms, 93) 71 per cent. were seen at the Tuberculosis Dispensary. In the previous year 73 per cent. were seen at the Dispensary. The figures on page 28, under the heading "Dispensary," give some idea of the amount of work which has been done during the year; in most cases these figures show an increase on those of last year. More especially is this evident in the number of contacts examined as compared with 1929. Twice the number of contacts have been examined, and this is undoubtedly one of the most important activities of the Department, and one which will be more and more brought to the forefront. In many of these cases an X-ray examination is also made before the patient is declared to be free from Tuberculosis or otherwise.

Of the T.B. plus Stage 1 and Stage 2, the results are more satisfactory, and the condition of these patients on discharge are shown in Table III, page 31.

Treatment by artificial pneumothorax has been continued in suitable cases, and at present six cases are being treated in this way. Since 1927 nine cases have been treated :—

M. J.	T.B.+Gr. II	Commenced in November, 1927	December, 1930. T.B. neg. for nine months—fit for work.
-------	-------------	--------------------------------	---

K. T.	T.B.+Gr. II	Commenced in May, 1929	Treatment had to be discontinued September, 1930, on account of obliterative pleurisy and effusion. Has been admitted to a sanatorium in Newcastle recently.
M. C.	T.B.+Gr. II	Commenced in October, 1930	December, 1930. No cough or sputum—disease arrested.
Mrs. C.	T.B.+Gr. II	Commenced in June, 1929	Sputum T.B. neg. Disease quiescent—general condition excellent.
Mrs. H.	T.B.+Gr. II	Commenced in October, 1930	T.B. neg. Disease quiescent. Treatment discontinued December, 1930, on account of obliterative pleurisy.
S.	T.B.+Gr. II	Commenced in September, 1929	Arrested—working—T.B. neg.
E. W.	T.B.+Gr. II	Commenced in May, 1930	Quiescent.
N. W.	T.B.+Gr. II	Commenced in December, 1930	Improving.
E. H.	T.B.+Gr. II	Commenced in April, 1931	Improving.
G.	T.B.+Gr. II	Commenced in December, 1930	Improving.

In all these cases the disease although mainly on one side only was severe, to the extent of cavitation in four cases ; and the only hopeful line of treatment in all was Artificial Pneumothorax.

Two of the cases were transfers from outside and the treatment had been commenced in other Sanatoria—one case was a private case, and although in this instance the treatment was only recently started, and on the whole the results are satisfactory, the case has confirmed the opinion that the only place to commence Artificial pneumothorax, and to continue it until it is well-established, is an institution and preferably a Sanatorium.

It is essential that Sanatorium conditions should be maintained in the early months of the treatment, and that the patient should be living next door to an X-ray department so that the amount of collapse may be carefully controlled and any severe displacement of the heart and mediastinum avoided ; after the treatment is well-established it could well be carried out by the patient's doctor, given training in the technique.

It is with satisfaction that we can say that the general practitioners are co-operating with us more and more in connection with this work. There is a growing tendency amongst them to send doubtful cases to the Dispensary for examination, and there is a welcome movement in favour of more accurate and early diagnosis. In this respect it must not be lost sight of that the patient himself is sometimes to blame, and by ignoring his symptoms arrives at the doctor's surgery when all chance of help is gone. The only way we can counteract this is by further education of the general public on suitable lines.

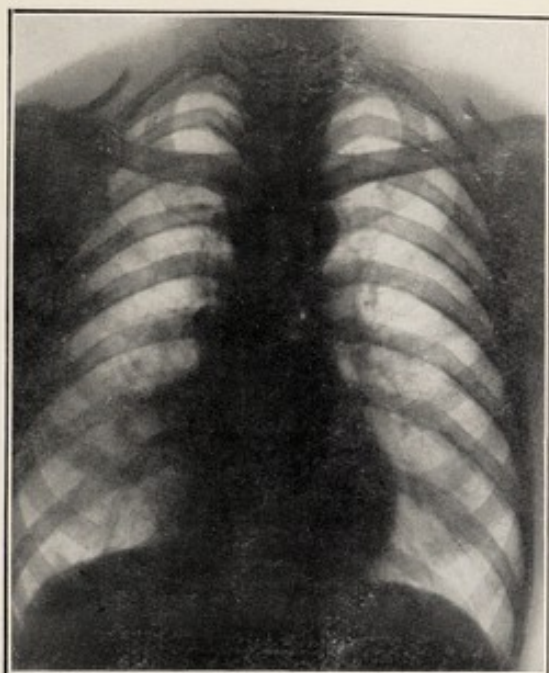
The entertainment of the patients in the Sanatorium during the winter months has been well cared for, and we would welcome this opportunity of thanking all those who have helped us to this end by taking out concert parties, and providing patients with books, etc. Cinematograph entertainments have also been given from time to time. Entertainment is a necessity, and part of the treatment, for it gives interest to the patients, who otherwise would have a very monotonous existence.

Instruction in the Theory and Practice of Nursing was given by the Matron and Sister Fletcher.

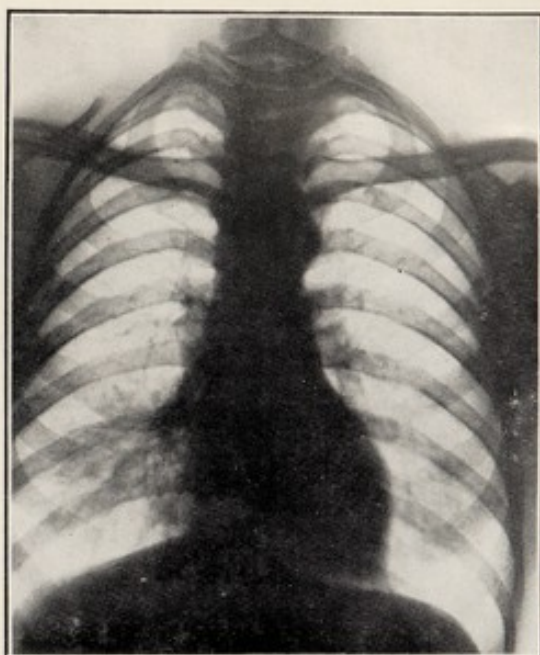
In addition to lectures and tuition, cinematograph films demonstrating some feature of Physiology, Anatomy and Hygiene were shown with advantage.

It is felt that this is a step in the right direction, and it is hoped will help the junior nurses to obtain that interest in the work which is so necessary from the point of view of the patient.

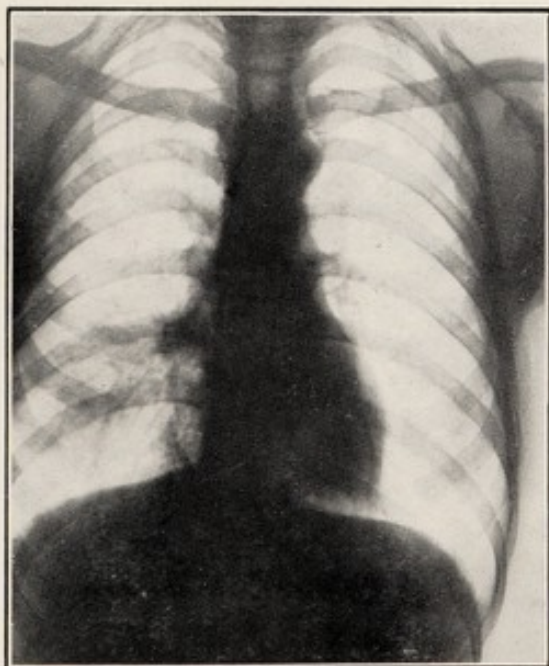
No. 1.



No. 2.



No. 3.



A female patient, aged 36, was notified on August 31st, 1928, suffering from Pulmonary Tuberculosis. The sputum was positive and she was admitted to the Sanatorium on the 4th September, 1928, and discharged "improved" after four months' treatment. A radiogram taken immediately after discharge (26/2/29) showed "mottling" at the base of the right lung.

She was readmitted to the Sanatorium in January, 1930 having lost weight, with return of cough and expectoration.

Physical signs of cavitation were found at the base of the right lung, anteriorly, and a radiogram showed the appearances seen above in No. 1. The sputum was still positive. A ring shadow with well-marked walls can be seen close to the root at the junction of the middle and lower thirds of the lung. After four months' treatment she was discharged with no

symptoms, no cough and no expectoration. Radiogram No. 2 shows the appearance immediately before discharge. The ring shadow cannot be seen and the physical signs of cavitation had disappeared.

The third radiogram shows the condition four months after discharge and it will be seen that the lung has still further improved. A year after her discharge from the Sanatorium she remains well.

This would appear to be a case where a cavity has by free drainage into a bronchus gradually become obliterated and replaced by scar tissue.



YEAR.	T.B. POSITIVE.				Average length of stay.	Result on Discharge.	Condition at end of 1928.	Condition at end of 1929.	Condition at end of 1930.
	Early (Gr. I).	Inter-mediate. (Gr. II).	Ad-vanced (Gr. III).	T. B. Negative.					
1928 Females	2				2 months	Quiescent Improved	Left district Left district	— —	— —
		10			4-7 months	Quiescent do. do. do. Improved do. do. do. do. do. do. do.	Doing housework at home do. Working (domestic) do. Housework at home Left district Not working do. Working (tailor) do. Housework at home do. Not working do.	Housework at home do. Working (domestic) do. Housework at home do. Fit for light work Working (tailor) do. Housework at home do. Not working do.	Worse—unfit for work Fit for work Working (domestic) Working (Post Office clerk) House work—condition not so good Not fit for work Working Able to do light house work Haemoptysis—unfit for work
			3		2-4 months	No mat. improvement do. do.	Left district Died do.	— — —	— — —
				5	4-1 months	No mat. improvement Quiescent do. do. Improved do.	Left district do. At school do. Working (laundress)	— — do.	— Well at school do. Working (laundress)
1928 Males	2				4-7 months	Quiescent Improved	Working (tram conductor) Working (traveller)	Working (tram conductor) Working (traveller)	Working (tram conductor) Working (traveller)
		4			4-5 months	Improved do. Quiescent No mat. improvement	Not working do. Working (gardener) do.	Not working Died Working (gardener) Re-admitted to San.—died	Re-admitted to San.—worse Working (gardener)
			2		2-5 months	No mat. improvement Improved	Not working Not working	Died Not working	Died
				10	2-5 months	Quiescent do. do. do. do. do. do. do. do. do. No mat. improvement Improved do.	Working (errand boy) do. (shopkeeper) At school do. do. Not working Working (clerk) Working (motor body b'lder) Not working do.	Working (errand boy) do. (shopkeeper) At school Working At school Not working Working (clerk) Working (motor body b'lder) Re-admitted to San. Working (errand boy)	Working—still under treatment for Lupus Working (traveller) At school—well Working (motor body builder) At school—well Not fit for work Working (clerk) Working (motor body builder) Fit for work Working (garage)
1928 Males	Non-Pulmonary.		Bones and Joints.		3-25 months	Quiescent No mat. improvement	N.A. Not fit to work N.A. At school	I.S.Q. N.A. Improving	Worse—not fit to work Improved—discharged New Hall
1928 Females						Nil			

YEAR.	T.B. POSITIVE.			T.B. Negative.	Average length of stay.	Result on Discharge.	Condition at end of 1928.	Condition at end of 1929.	Condition at end of 1930.
	Early (Gr. I).	Inter- mediate. (Gr. II).	Ad- vanced (Gr. III).						
1929 Females	1				4-8 months	Improved	—	Housework	—
		9			4-8 months	Improved do. do. do. No mat. improvement do. Quiescent No mat. improvement	— — — — — — —	Working (domestic) Housework Re-admitted to San. Household duties Not working Died Not working Household duties Not working	Working (domestic) — Re-admitted to San. in Newcastle Working (household duties) Unfit for work — — Working (household duties) —
			3			No mat. improvement Improved Quiescent	— — —	Not working Not working Not working	Working (household duties) Admitted Ormskirk Institution
				7		Improved do. Quiescent do. do. do. No mat. improvement	— — — — — — —	Household duties At school Household duties At school Working (domestic) Not working Died	Household duties At school—well Working (dentist's assistant) Re-admitted to San. Working (domestic). Working (laundress) —
1929 Males	2				1-5 months	No mat. improvement do.	—	Not working Re-admitted to San.	Unfit for work Died
		9			6-1 months	Improved do. do. do. do. No mat. improvement do. do. Quiescent	— — — — — — — —	Working (motor eng.) Not working Left district Re-admitted to San. Not working Left district Not working Died Working (labourer)	Fairly well—working part time (mtr. nec.) Re-admitted to San.—worse Working (traveller) Worse—re-admitted to San. Working (butcher) — Fit for light work — Worse—re-admitted to San.
			3			No mat. improvement Improved do.	— — —	Died Not working Working (motor driver)	Died Working (traveller) —
				6		Quiescent do. do. do. do. do. do. Improved	— — — — — — —	Left district Working manager of hostel Working (stain glass work) Working (labourer) Working (traveller) Working (painter) Re-admitted to San. Working (plumber)	Admitted Barrowmore Hall Sanatorium Died Working (motor work) Working (shop assistant) Working (painter) Working (gardener) Fit for work

YEAR.	T.B. POSITIVE.				Average length of stay.	Result on Discharge.	Condition at end of 1928.	Condition at end of 1929.	Condition at end of 1930.
	Early (Gr. I).	Inter-mediate. (Gr. II).	Ad-vanced (Gr. III).	T.B. Negative.					
1929 Males	Non-Pulmonary.		Bones and Joints.		7.3 months	Active disease—re-moved to Ormskirk Hospital	—	Worse	Died
1929 Females						Nil			
1930 Females	2				9 months	Quiescent Improved	—	—	Working (saleswoman) Unfit for work
		1			6 months	Improved	—	—	Unfit for work
			3		6 months	Improved do.	—	—	Unfit for work do.
						Worse	—	—	Died
1930 Males				3	7.5 months	No mat. Improvement Improved I.S.Q.	—	—	Admitted Institution for Mental Diseases
	2				7.5 months	Quiescent Improved	—	—	Working (domestic servant)
					6 months	Improved Quiescent	—	—	Working (painter) Died
		2			6 months	Improved Quiescent	—	—	Working (caretaker) Working (shop assistant)
			1		6 months	Worse	—	—	Died
				2	4.5 months	Quiescent do.	—	—	Working (caretaker) Working (ticket inspector)

Cases notified :—

	Pulmonary.	Non- Pulmonary.	Total.
Males	35	10	45
Females	31	17	48
	<hr/> 66	<hr/> 27	<hr/> 93

Duplicate notifications excluded.

DISPENSARY.

Tuberculosis cases :	1st visits	69
	Re-visits	1,674
Contacts visited.....		4,395
Contacts examined by Tuberculosis Officer :	1st visits	87
	Re-visits	49
Clinical examinations by Tuberculosis Officer :	1st examinations	97
	Re-examinations	484
Clinical examinations by Consulting Officer.....		56
Patients seen by Health Visitor at Dispensary		289
Hours in Dispensary		294
Total visits to Dispensary		900
Individual Patients attending Dispensary		146
" Contacts		146

NEW CASES AND MORTALITY DURING 1930.

Age Periods	New Cases.				Deaths.			
	Pulm'ry.		Non-Pulm'ry.		Pulm'ry.		Non-Pulm'ry.	
	M.	F.	M.	F.	M.	F.	M.	F.
0	—	—	—	—	—	—	—	—
1	—	1	2	6	2	—	3	2
5	1	2	4	3	—	2	—	2
10	—	—	—	3	—	—	—	—
15	3	1	1	—	1	3	—	—
20	2	2	—	3	4	3	—	1
25	10	6	1	1	7	3	—	—
35	7	6	—	—	9	8	—	—
45	8	7	2	—	6	3	—	—
55	2	5	—	1	4	2	—	1
65 and upwards	2	1	—	—	—	3	—	—
Totals	35	31	10	17	33	27	3	6

TABLE I.

TUBERCULOSIS SCHEME.

Return showing the work of the Dispensary (or Dispensaries) during the year 1930

DIAGNOSIS.	PULMONARY.				NON-PULMONARY				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	23	19	2	2	2	1	4	4	25	20	6	6
(b) Doubtfully tuberculous	5	5	—	—	—	—	1	—	5	5	1	—
(c) Non-tuberculous	5	2	—	1	—	—	—	—	5	2	—	1
B.—CONTACTS examined during the year :—												
(a) Definitely tuberculous	—	—	—	—	—	—	—	—	—	—	—	—
(b) Doubtfully tuberculous	6	14	14	12	—	—	—	—	6	14	14	12
(c) Non-tuberculous	9	33	26	19	—	—	—	—	9	33	26	19
C.—CASES written off the Dispensary Register as												
(a) Cured	3	5	1	1	2	1	4	4	5	6	5	5
(b) Diagnosis not confirmed or non-tuberculous (including cancellation of cases notified in error)	31	54	34	24	1	3	8	2	32	57	42	26
D.—NUMBER OF PERSONS on Dispensary Register on December 31st :—												
(a) Diagnosis completed	93	89	9	7	9	11	35	27	102	100	44	34
(b) Diagnosis not completed	10	16	15	13	—	—	2	—	10	16	17	13

1. Number of persons on Dispensary Register on January 1st	369	9. Number of patients to whom Dental Treatment was given, at or in connection with the Dispensary	15
2. Number of patients transferred from other areas and of "lost sight of" cases returned	12	10. Number of consultations with medical practitioners :— (a) At Homes of Applicants	42
3. Number of patients transferred to other areas and cases "lost sight of"	40	(b) Otherwise	54
4. Died during the year	37	11. Number of other visits by Tuberculosis Officers to Homes	Nil.
5. Number of observation cases under A (b) and B (b) above in which period of observation exceeded 2 months	19	12. Number of visits by Nurses or Health Visitors to Homes for Dispensary Purposes	1103+640
6. Number of attendances at the Dispensary (including Contacts).....	900+ 669 Light Treatment	13. Number of (a) Specimens of sputum, etc., examined	349
7. Number of attendances of non-pulmonary cases at Orthopaedic Out-stations for treatment or supervision	9	(b) X-ray examinations made in connection with Dispensary work	177
8. Number of attendances, at General Hospitals or other Institutions approved for the purpose, of patients for (a) "Light" treatment	Nil.	14. Number of Insured Persons on Dispensary Register on the 31st December	139
(b) Other special forms of treatment	Nil.	15. Number of Insured Persons under Domiciliary Treatment on the 31st December	45
		16. Number of reports received during the year in respect of Insured Persons :— (a) Form G.P. 17	42
		(b) Form G.P. 36	27

TABLE II.—RESIDENTIAL INSTITUTIONS.

(A) AVERAGE NUMBER OF BEDS AVAILABLE FOR PATIENTS DURING THE YEAR 1930.

—	Observa- tion.	Pulmonary Tuberculosis.		Non-Pulmonary Tuberculosis.		Total.
		“Sana- torium” Beds.	“Hospital” Beds.	Disease of Bones and Joints.	Other Conditions	
Adult Males	1	7	5	—	—	13
Adult Females	1	7	5	—	—	13
Children under 15	1	3	—	5	1	10
Total	3	17	10	5	1	36

(B) RETURN SHOWING THE EXTENT OF RESIDENTIAL TREATMENT DURING THE YEAR 1930.

			In Institutions on Jan .1.	Admitted during the year.	Discharged during the year.	Died in the Institutions	In Institutions on Dec. 31.
Number of Patients	Adults	M.	12	25	13	10	14
		F.	11	19	19	4	7
	Chil- dren	M.	5	6	1	2	8
		F.	6	3	2	—	7
Number of Observa- tion Cases.	Adults	M.	2	11	11	—	2
		F.	2	6	5	—	3
	Chil- dren	M.	—	6	6	—	—
		F.	3	3	5	—	1
Total			41	79	62	16	42

TABLE III.

Return showing the immediate results of treatment of Patients and of observation of doubtful cases discharged from Residential Institutions during the year 1930.

[illegible]

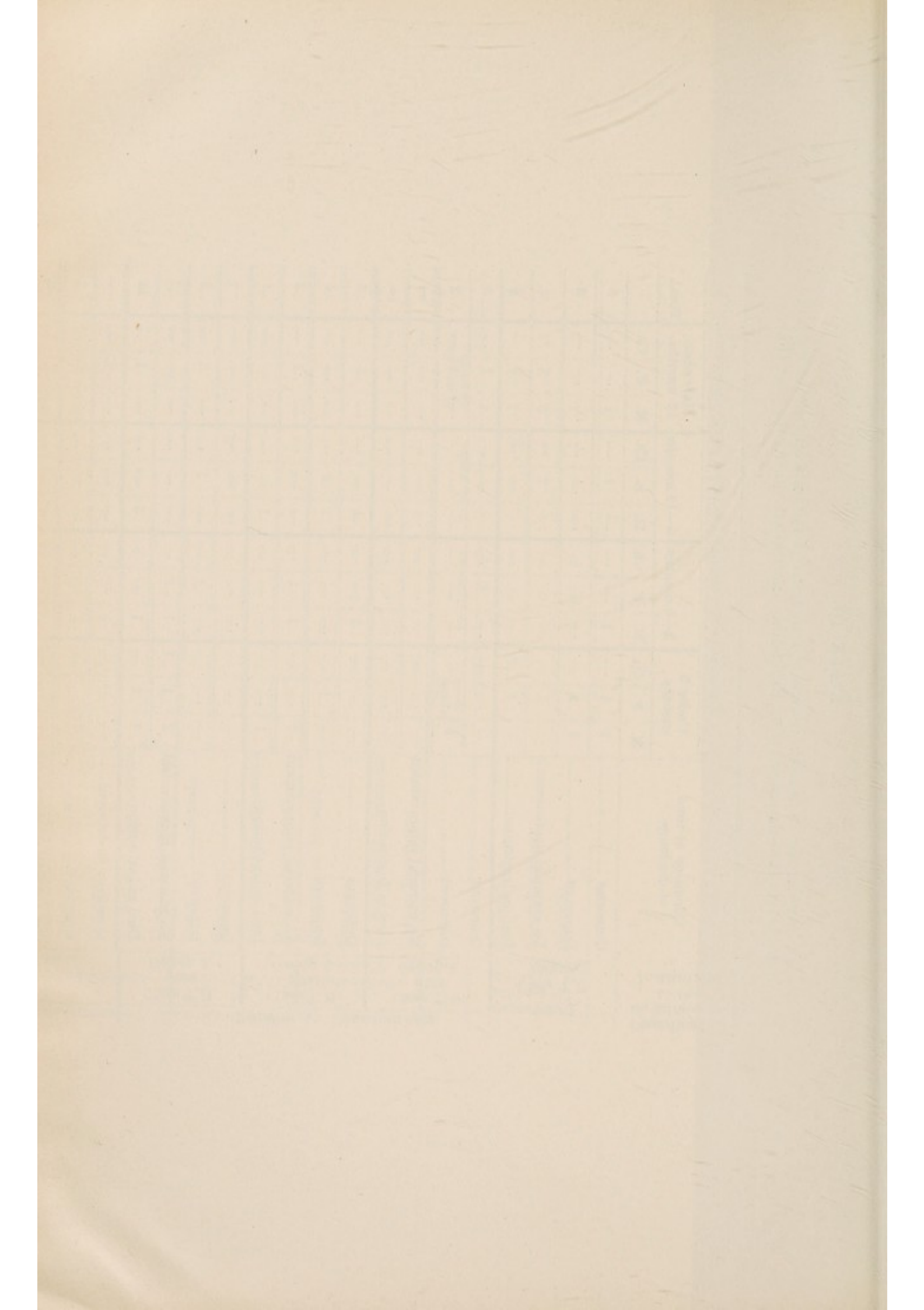


TABLE IV.—(a) PULMONARY TUBERCULOSIS.

Annual Return showing in summary form the condition of all Patients whose case records are in the possession of the Dispensary (or Dispensaries) at the end of 1930, arranged according to the years in which the Patients first came under Public Medical Treatment for pulmonary tuberculosis, and their classification as shown on Form A.

Condition at the time of the last record made during the year to which the Return relates.				Previous to 1926.					1926					1927					1928					1929					1930.				
				Class T.B. minus.	Class T.B. plus.				Class T.B. minus.	Class T.B. plus.				Class T.B. minus.	Class T.B. plus.				Class T.B. minus.	Class T.B. plus.				Class T.B. minus.	Class T.B. plus.				Class T.B. minus.	Class T.B. plus.			
					Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).		Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).		Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).		Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).		Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).		Group 1.	Group 2.	Group 3.	Total (Class T.B. plus).
ALIVE.	Discharged as cured.	Adults	M.	40	10	2	1	13	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
			F.	31	3	—	—	3	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		Chil-dren.	M.	22	2	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
			F.	14	2	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Disease arrested.	Adults	M.	12	4	1	—	5	6	1	—	—	1	—	—	1	2	1	2	—	3	—	—	—	—	—	—	—	—	—	—	—	—
			F.	8	3	2	—	5	3	2	1	1	4	2	—	—	—	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		Chil-dren.	M.	1	—	—	—	—	1	—	—	—	—	1	—	—	—	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
			F.	3	1	—	—	1	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Disease not arrested.	Adults	M.	8	1	10	1	12	—	—	—	2	2	1	3	4	2	9	4	2	1	—	3	6	1	2	—	3	2	3	6	3	14
			F.	3	2	6	1	9	1	1	—	1	2	2	—	8	—	8	1	2	1	3	6	7	2	4	1	7	9	1	3	4	17
		Chil-dren.	M.	—	—	—	—	—	1	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
			F.	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1
CONDITION NOT ASCERTAINED DURING THE YEAR.				—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
LOST SIGHT OF OR OTHERWISE REMOVED FROM DISPENSARY REGISTER				66	21	37	20	78	28	1	6	6	13	14	2	2	1	5	7	1	7	1	9	3	—	—	—	—	4	—	—	—	4
DEAD.	Chil-dren.	Adults	M.	18	12	37	112	161	3	—	2	5	7	3	—	2	10	12	1	—	1	7	8	—	—	2	7	9	1	—	—	8	9
			F.	10	4	26	88	118	2	—	1	7	8	—	—	—	6	6	—	1	3	10	14	—	—	—	7	7	—	—	—	2	2
		Chil-dren.	M.	—	—	1	3	4	—	—	1	1	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	2
			F.	3	—	—	4	4	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1	1	—	—	—	—
Totals				239	65	122	231	418	46	5	11	23	39	26	5	17	19	41	23	7	15	21	43	16	3	8	16	27	19	4	9	17	49

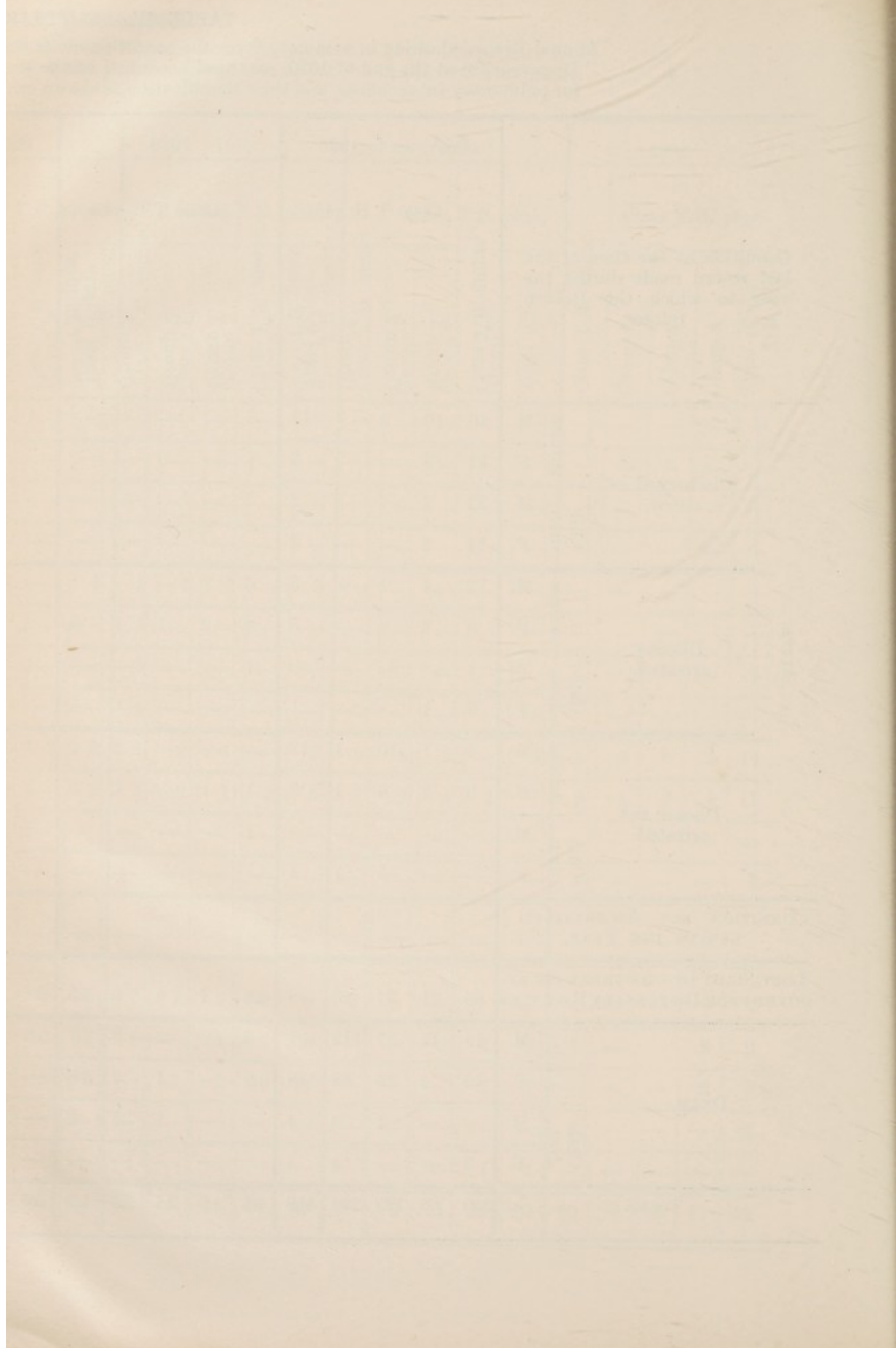


TABLE IV.—(b) NON-PULMONARY TUBERCULOSIS.

Annual Return showing in summary form the condition of all Patients whose case records are in the possession of the Dispensary (or Dispensaries) at the end of 1930, arranged according to the years in which the Patients first came under Public Medical Treatment, and their classification as shown on Form A.

and their classification as shown on Form A.

Condition at the time of the last record made during the year to which the Return relates.				Previous to 1926.					1926					1927					1928					1929					1930						
				Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total.		
ALIVE.	Discharged as cured.	Adults	M.	6	—	—	14	20	—	—	—	—	—	—	1	1	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
			F.	4	—	1	15	20	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
		Chil. dren.	M.	14	9	1	53	77	2	1	—	3	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
			F.	7	8	5	44	64	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Disease arrested.	Adults	M.	1	—	2	—	3	—	—	—	—	—	—	1	—	—	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
			F.	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1	1	2	—	—	—	—	—	—	—	—	—	—	—	—	
		Chil. dren.	M.	2	1	—	4	7	—	—	—	1	1	1	1	1	2	5	—	—	—	4	4	—	—	—	1	1	—	—	—	—	—	—	
			F.	—	—	—	1	1	—	—	—	—	—	—	—	—	2	2	1	—	—	5	6	—	—	—	—	—	—	—	—	—	—	—	
	Disease not arrested.	Adults	M.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	1	—	—	1	2	—	—	—	—	2	—	
			F.	1	—	1	—	2	—	—	—	1	1	3	—	—	—	3	—	—	—	—	1	—	1	—	2	—	—	—	—	—	—	—	
		Chil. dren.	M.	3	—	2	—	5	—	—	—	—	—	—	—	—	—	1	—	—	—	1	2	—	3	2	7	1	1	—	2	4	—	—	
			F.	1	—	—	3	4	1	—	—	—	1	1	—	—	2	3	1	—	—	2	3	—	2	1	1	4	—	1	—	2	3	—	—
TRANSFERRED TO PULMONARY.				1	1	1	6	9	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
CONDITION NOT ASCERTAINED DURING THE YEAR.				—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
LOST SIGHT OF OR OTHERWISE REMOVED FROM DISPENSARY REGISTER				23	7	1	25	56	3	2	5	4	14	—	—	—	1	1	—	—	—	1	1	—	—	—	1	1	—	—	1	1	2	—	—
DEAD.	Adults	M.	6	—	2	—	8	—	—	1	—	1	1	1	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
		F.	3	2	4	1	10	—	—	1	—	1	1	—	—	1	—	—	—	—	—	—	—	1	—	1	—	—	—	—	—	—	—	—	
	Chil. dren.	M.	2	—	5	—	7	—	—	—	—	—	—	—	1	—	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
		F.	2	6	2	3	13	—	—	1	—	1	—	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Totals				77	34	27	169	307	6	3	8	11	28	7	4	3	8	22	4	2	1	13	20	3	3	6	5	17	3	2	1	5	11	—	—

CARBON ARC AND MERCURY VAPOUR LAMP CLINIC.

669 attendances were registered at these Clinics, and the results of treatment demonstrate the wisdom of the provision made by Committees concerned.

These results are tabulated; speaking generally, the use of the Carbon Arc has been of value in some cases of Chronic Rheumatism, especially the type characterised by the symptom of "growing pains." Some cases of Chorea have been improved, but alone the Arc treatment does not appear to abolish the choreic movements.

In cases of Malnutrition very definite help has been given, the appetite improving and the general condition of the child becoming ameliorated.

In cases of Tubercular Peritonitis with effusion the exposure of the abdomen to the ultra-violet light has proved to be the turning point in the course of a case, and the continued treatment has resulted in absorption of effusion and reduction in the size of the abdomen. Moreover the increase in weight and improved general health have amply justified its use.

Treatment of Lupus by the Kromayer Lamp is slow in its results, although definite improvement of the lesions is evident. Apparently more intensive and drastic use of the lamp is indicated.

It must be realized that the conditions calling for this treatment are of a chronic and recalcitrant nature, involving the greatest patience and persistence on the part of both patient and Clinician.

TUBERCULAR CASES.

Defect.	No. of Cases.	Average months of treatment during 1930.	Condition on December 31st, 1930.
T.B. Glands	6	2	4 arrested. 2 improved.
Lupus	12	4 $\frac{1}{4}$	4 quiescent. 8 improved.
T.B. Periostitis	1	11 $\frac{1}{2}$	1 improved.
T.B. Peritonitis	2	5	2 improved.

MATERNITY AND CHILD WELFARE CASES.

Defect.	No. of Cases.	Average months of treatment during 1930.	Condition on December 31st, 1930.
Rickets	11	7 months, 5 weeks	9 cured. 2 improved.
Malnutrition	2	2 months, 2 weeks	1 cured. 1 improved.
Marasmus	1	1 month	1 improved.
Cervical Glands	4	7 months	3 cured. 1 improved.
Chorea	1	3 weeks	1 improved.
Varicose Ulcers	1	2 months, 1 week	1 improved.
Bronchitis	1	3 weeks	1 improved.

General Sanitary Work.

Only 23 cesspools are in existence in the Borough.

There are at the present time 82 privies in the Borough, the whole of which are outside the sewer area.

MAIN DRAINAGE SCHEME.

The work on the first Section of this Scheme as sanctioned by the Ministry of Health was commenced on the 1st June, 1930, since which date considerable progress has been made.

Considering first the 60 in. diameter overflow sewer to be laid from the junction of Cambridge Road and Park Crescent across Hesketh Park and the Municipal Golf Links to the site of the proposed Pumping Station on the seaward boundary of the Links. Approximately 35 per cent. of this sewer has been constructed, and the main overflow chamber in Park Crescent at the head of this sewer is now nearing completion. The contract for the construction of the Pumping Station on the seaward boundary of the Golf Links has been let, and work will commence in the near future.

As regards the 42 in. diameter outfall sewer from this Pumping Station to the sea, this, with the exception of the provision of a tidal flap and certain work at the seaward end of the outfall, is completed, approximately 93 per cent. of the total length having been laid.

With regard to the Crowland Street Section of the Scheme, 87 per cent. of the 54 in. diameter sewer along Crowland Street and Butts Lane has been completed, 67 per cent. of the 24 in. sewer in Hart Street, and the whole of the 48 in. sewer in Russell Road. A start has also been made on the 33 in. diameter sewer in Russell Road.

The work of constructing the Storm Water Tanks and Pumping Station is now being carried out by contract, 99 reinforced concrete piles having already been driven to provide foundations for this Pumping Station.

With respect to the second Section of the Scheme, for which the Ministry of Health sanction was received on the 11th December, 1930, and which provides for a section of the Lord Street Relief Sewer along Park Crescent, Queen's Road and Manchester Road to Lord Street, the construction of the 48 in. diameter sewer in Park Crescent, also the 42 in. diameter sewer in Queen's Road, has been commenced.

GENERAL SANITARY WORK.

The following Table shows the nature and amount of work done during the year by the Highways Department under orders sent to it by the Health Department, and also the corresponding figures for the two preceding years :

	1928	1929	1930
Houses drained or re-drained.....	162	124	110
House drains unstopped.....	502	500	554
Midden privies converted into W.C.'s	4	2	—
Bristol ejects and trough closets converted into fresh-water closets	7	18	11
Wet ashpits converted into dry	0	0	0
Sundry structural nuisances abated	134	209	247
Totals.....	809	853	922

The implication from these figures is that the Sanitary condition with respect to both house drains and structure has been raised to a highly satisfactory point.

The whole of the houses within the sewer area in the Borough are now connected to the Public Sewer. Much work has been done by private contractors by way of correcting defects which do not appear in the Table.

ASHBINS.

Ashbins should be used for the temporary deposit of ashes and other similar refuse not subject to decomposition ; hence the name " Ashbin." It is nevertheless the custom to pile into the ashbin everything which it is wanted to get rid of, and which, being out of sight, can also be out of mind.

It would be an advantage if people would endeavour to get rid of and destroy at the house more of the refuse than they do ; in particular it would be better if worthless waste paper could be burnt at the house instead of being placed in the ashbin.

The disposal of this waste paper is becoming a definite problem in itself and will have to be taken seriously.

Factory and Workshop Acts.

The following Report is made out in accordance with requirements of the Home Office, to whom a copy of this Report has to be sent.

FACTORIES, WORKSHOPS, WORKPLACES, AND HOMEWORK.

1.—INSPECTION.

INCLUDING INSPECTIONS MADE BY SANITARY INSPECTORS.

PREMISES.	NUMBER OF		
	Inspections.	Written Notices.	Prosecutions.
FACTORIES (Including Factory Laundries).	86	1	None
WORKSHOPS (Including Workshop Laundries).	727	4	"
WORKPLACES	73	0	"
Totals	886	5	"

2.—DEFECTS FOUND.

PARTICULARS.	Number of Defects.			Number of Prosecutions.
	Found.	Remedied	Referred to H.M. Inspector	
<i>Nuisances under the Public Health Acts—*</i>				
Want of Cleanliness	—	—	None	None
Want of Ventilation	—	—	"	"
Overcrowding	—	—	"	"
Want of Drainage of Floors	—	—	"	"
Other Nuisances	3	3	"	"
†Sanitary Accommodations {	insufficient	—	"	"
	unsuitable or	—	"	"
	defective	—	"	"
not separate	2	2	"	"
for sexes				
<i>Offences under the Factory and Workshop Act</i>				
Illegal Occupation of Underground Bakehouse (S. 101)	None	None	"	"
Breach of Special Sanitary Requirements for Bakehouses (SS. 97 to 100)	2	2	"	"
Other Offences	None	None	"	"
Total	7	7	"	"

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

† Section 22 of the Public Health Acts Amendment Act, 1890, has been adopted in Southport. The standard of sufficiency and suitability of sanitary accommodation for persons employed in factories and workshops is in accordance with the Sanitary Accommodation Order of 4th February, 1903.

4.—REGISTERED WORKSHOPS.

Total number of workshops on Register..... 385

5.—OTHER MATTERS.

CLASS.	NUMBER.
Matters notified to H.M. Inspectors of Factories.....	—
Failure to affix Abstract of the Factory and Workshop Act (S. 133)	—
Action taken in matters referred by H.M. Inspectors as remediable under the Public Health Acts, but not under the Factory Act (S. 5) {	
Notified by H.M. Inspector	2
Reports (of action taken) sent to H.M. Inspector	—
Other Matters—Forms received from H.M. Inspector <i>re</i> New Workshops.....	16
Underground Bakehouses (S. 101) :—	
Certificates granted during the year.....	—
In use at the end of the year.....	6

SMOKE ABATEMENT.

I refer to the table (*infra*) giving deposits from the atmosphere here and elsewhere, which completely demonstrates the remarkable relative clearness of the local atmosphere.

ABSTRACT OF WORK OF SANITARY INSPECTORS.

Total Visits	31,334
Complaints received from public	973
Inspections on complaints	973
Miscellaneous Inspections	6,902
Houses completely inspected—for in-going tenants, sickness, etc.	575
Re-inspections relating to sanitary defects under notice, etc.....	2,852
Routine Inspections of Special Premises :—	
Factories and Workshops, including Bakehouses	342
Common Lodging houses	430
Stable Premises	43
Offensive Trades	177
Milk Shops	335
Smoke Observations (one hour each).....	27

Sanitary Defects Remedied :—

Houses re-drained, or drains amended, etc.	257
Building and altering W.C.'s.....	91
Miscellaneous Nuisances, etc., remedied	957
Total	13,961

Notices Served for Abatement of Nuisances, etc. :—

Verbal	98
Preliminary	312
Statutory	239
Sewer complaints reported to Highway Department	38
Sanitary Certificates issued	5

Infectious Diseases :—

Inquiries into Cases	2,394
Patients removed to Isolation Hospital	509
Houses disinfected	684
Bedding disinfected	812
Schools disinfected	3
Stables and Cowsheds disinfected	2
Notices to School Attendance Officers	2,880
Notices to Free Library	2,233
Notices to School Medical Officer	2,037

Consumption :—

Cases notified.....	83
Pulmonary	59
Non-Pulmonary.....	24
Number of Visits to Tuberculosis Patients	1,723
Patients' Visits to Dispensary	992
Examined by Tuberculosis Officer	627
Enquiries—Contacts	4,368
Contacts examined by Tuberculosis Officer	107

ABATEMENT OF NUISANCES.

Only 3·4 per cent. of the total Nuisances reported remained wholly or partly unabated at the end of the year.

Cases reported	1,603
„ abated	1,549
„ not abated	54
„ under negotiation.....	19
„ in Contractors' hands	19
„ in Borough Engineer's hands	14
„ in Unoccupied Premises	2
	54

SANITARY CERTIFICATES.

Householders are strongly advised to have the Drains and Sanitary Fitments of their dwellings inspected and tested triennially. These occasional examinations act as an insurance against sickness from environmental defects.

HOUSING ACT, 1909.

HOUSING (INSPECTION OF DISTRICT) REGULATIONS, 1910.

ARTICLE V.

	1925	1926	1927	1928	1929	1930
Houses completely inspected for various causes	653	906	839	446	468	575
Reports made under Housing Acts, 1909 and 1919	28	14	0	0	0	0
Notices served under the said Housing Acts	15	4	0	0	0	0
Houses reported under Section 11 of 1925 Act for closing	6	7	6	2	2	0
Houses considered to be in a state so dangerous or injurious to health as to be unfit for human habitation.....	6	7	6	2	2	0
Closing Orders made by Local Authority	6	7	6	2	2	0
Dwelling-houses closed after Closing Orders	3	7	4	2	2	0
Houses reported under Section 15 and Section 28 for repairs necessary to put such houses into a fit state for human habitation.....	16	14	0	0	0	0
Notices served under Sections 15 and 28.....	15	4	0	0	0	0
	1925	1926	1927	1928	1929	1930
Orders under Sections 15 and 28 complied with by Owners	5	10	0	0	0	0
Orders carried out by Local Authority under the powers of the Act.....	0	0	0	0	0	0
Orders not complied with under Section 17	0	0	0	0	0	0
Orders not complied with under Section 15 and Section 28	10	4	0	0	0	0
New Houses erected and certified.....	630	730	504	300	250	310
Houses closed on Owners' initiative.....	0	0	0	0	0	0

Most of the work during the year has been carried out under The Public Health Acts. There is comparatively little dilapidated property in the Area.

SHOPS INSPECTION.

Much of the Inspectors' time is occupied in patrolling, and in the greater part of this no entrance that can be included in the count of visits set out in the Table below is involved. The Table includes evening visits.

Total Visits.....	1,926
Breaches of Shops' Acts Discovered :—	
Trading during prohibited hours.....	11
Assistants not getting full time for meals.....	—
Assistants not getting Weekly Half-holiday.....	4
No Notice in Shop <i>re</i> Weekly Half-holiday.....	45
No Notice in Shop <i>re</i> Closing Day.....	62
Shop Seats—Absence of.....	—
No Notice in Shop <i>re</i> Mixed Business.....	33
Action taken as to offences :—	
Warned verbally.....	152
Warned by letter.....	1
Reported to Local Authority.....	2
Prosecutions.....	—
Night Patrol—Hours.....	55

THE REMOVAL OF HOUSEHOLD REFUSE.

	1926	1927	1928	1929	1930
Estimated Amount of Refuse removed from Borough, loads	13 731	13,588	13,670	13,164	13,247
Number of Ashpits replaced by Ashbins during the year	141	55	18	51	Nil

It should be noted that a "load" now signifies a much heavier weight than formerly, owing to the carrying capacity of the wagons having been increased.

RATS AND MICE (DESTRUCTION) ACT, 1919.

1924 Notices served	Nil
1925 ".....	4
1926 ".....	5
1927 ".....	2
1928 ".....	4
1929 ".....	2
1930 ".....	Nil

We have no difficulty in getting any measures we suggest taken. In fact the occupiers of premises show as much anxiety to get rid of the rodents as we do.

During the year the Corporation have co-operated with the owners of several large business premises in the town in an endeavour to get rid of these, and are satisfied that much good has been done in this direction. We have also given advice and prescriptions to owners and occupiers and have found a general willingness on their part to carry out our suggestions.

Public Assistance.

The Local Government Act of 1929 became operative on the 1st April. The intention of the Public Assistance Committee under the Act is that all the work of treating the sick should be delegated to the Health Committee.

The alterations at the Cottage Hospital in Fleetwood Road are nearing completion and will be ready during the year for the reception of about forty-five aged folks who must have institutional accommodation.

The provision of in-patient accommodation for the sick is under further consideration.

The Health Committee have effectual staffing and accommodation for Fevers ; Dispensary and Sanatorium for Tuberculosis ; Maternity Hospital ; Venereal Diseases Clinic and Hospital ; the supervision of Midwives and Medical Inspection and Treatment of School Children. The Blind are now dealt with by the Blind Welfare Committee of the Corporation.

The Corporation have replaced the Guardians as the Vaccination Authority and have become responsible for the appointments of the Public Vaccinators and of the Vaccination Officer.

The treatment of acute illness in destitute persons, whether medical or surgical, requiring in-patient treatment, has been discussed with the Southport Infirmary.

DOMICILIARY TREATMENT.

It was thought expedient to continue tentatively the system of general practitioners acting as district medical officers. This has, at any rate, two advantages, namely, the doctor's dispensary is in the area he serves, and being a general practitioner he is not necessarily earmarked as a Poor-Law doctor. Moreover he is available at all reasonable hours.

The alternative suggestion of doing this work by one of the official doctors out of central office staff has been made. While centralising the work, this would involve patients from the extreme ends of the Borough making a journey to the centre of the town, and that during certain fixed hours. The matter is under further consideration.

REPORT ON CHILDREN BOARDED OUT IN THE COUNTY BOROUGH OF SOUTHPORT.

On April 1st, 1930, the duty of visiting boarded-out children, whatever their domicile, was transferred to the Council through the Boarding-Out Committee, and the nurse who had previously done this work being taken over by the Health Committee on to the Health-Visiting staff.

At the close of the year there were 24 Southport children boarded out in the Borough and 46 from outside Authorities, which include Tynemouth and Derbyshire.

These children are visited by the Health Visitors quarterly and more frequently as required, when a report as to their condition is made ; they also have the privilege of attending the various clinics which are held weekly at 2, Church Street, for Minor Ailments, Skin, Vision, etc. The Dental department is open daily, and any child can have treatment after the Foster-parent has signed a permit.

The ladies on the Boarded-Out Committee, who also visit and report quarterly on the condition of the children, very kindly assist in finding employment.

ORMSKIRK INSTITUTION.

SOUTHPORT CASES, December 31st, 1930.

	Men.	Women.	Children.	Total.
Patients needing continual Medical treatment	35	30	4	69
Maternity Patients	—	1	—	1
Aged and Infirm	15	18	—	33
Mental Cases, Defective and Epileptics	6	6	3	15
Other Mental Cases	12	20	—	32
Infants under 3 years	—	—	9	9
Children over 3 years	—	—	6	6
Adults not in need of continual Medical treatment	29	30	—	59
Total	97	105	22	224

AREA AND POPULATION SERVED BY THE INSTITUTION.

Ormskirk Urban District.
 Formby.
 Lathom and Burscough.
 Skelmersdale.
 West Lancashire Rural District.
 Southport C. B.
 Population—125,812.

TABLE SHOWING THE CLASSIFICATION OF THE ACCOMMODATION FOR THE SICK AND THE NUMBER OF BEDS OCCUPIED ON THE 31st DECEMBER, 1930.

Classification of Wards.	Number of Wards.	MEN.		WOMEN.		CHILDREN.		TOTAL.	
		Pro- vided.	Occu- pied.	Pro- vided.	Occu- pied.	Pro- vided.	Occu- pied.	Pro- vided.	Occu- pied.
Medical	14	94	77	82	74	8 cots	8	184	159
Surgical									
Children									
Chronic Sick									
Venereal	—	—	—	—	—	—	—	—	—
Tuberculosis	3	12	3	—	—	—	—	12	3
Isolation	—	—	—	—	—	—	—	—	—
Maternity	2	—	—	6	1	—	—	6	1
Mental—	8	55	48	52	45	—	*2	107	95
(a) Short stay									
(b) Long stay	—	—	—	—	—	—	—	—	—
Mental Defectives	—	—	—	—	—	—	—	—	—
Others	—	—	—	—	—	—	—	—	—
Total	27	161	128	140	120	8	10	309	258

* Children occupying Adult beds.

CASUAL WARDS, BIRCH STREET.

Accommodation—Males 24
 Females 4

Admissions for twelve months ending 31st March, 1931 :—

Men.	Women.	Children.
2,197	53	None

All Casuals are detained two nights and one day, except those in possession of a travelling card from the Labour Exchange.

The males are employed during detention by cleaning, sawing railway sleepers, bundling and chopping firewood, and gardening.

The females are engaged in cleaning and washing.

When parents or persons having the custody of children apply for admission the case is reported to the N.S.P.C.C. Inspector for investigation.

Each Casual is given a bath and his clothing searched on admission, and when necessary the clothing is stoved.

DIETARY.

	SUPPER AND BREAKFAST.	DINNER.
Men and Boys over 12 years	<div style="display: flex; align-items: center;"> <div style="font-size: 4em; margin-right: 10px;">{</div> <div> Bread 8 oz. Margarine 1 oz. Tea or cocoa 1 pint. </div> </div>	<div style="display: flex; align-items: center;"> <div style="font-size: 4em; margin-right: 10px;">{</div> <div> Bread 8 oz. Cooked or tinned meat 2 oz. Cheese 2 oz. Potatoes 4 oz. Salt—a sufficiency. </div> </div>
Women and Girls over 12 years	<div style="display: flex; align-items: center;"> <div style="font-size: 4em; margin-right: 10px;">{</div> <div> Bread 6 oz. Margarine 1 oz. Hot tea, coffee or cocoa 1 pint. </div> </div>	<div style="display: flex; align-items: center;"> <div style="font-size: 4em; margin-right: 10px;">{</div> <div> Bread 6 oz. Cooked or tinned meat 2 oz. Cheese 2 oz. Potatoes (hot) 4 oz. Salt. </div> </div>

Children.

Such meals as may, subject to the approval of the Council be prescribed by the Committee.

STATEMENT SHOWING NUMBER OF PERSONS IN RECEIPT OF
INSTITUTIONAL RELIEF ON THE NIGHT OF THE 1st JANUARY, 1931.

ESTABLISHMENTS IN WHICH PERSONS WERE RELIEVED.

	Number.
Poor Law Hospitals	3
Poor Law General Institutions with separable accommodation for the sick :—	
Sick Wards	130
Other Wards	97
Children's Homes—Separate Schools :—	
Grouped Cottage Homes	23
Other Schools	1
Other Children's Homes	22
Establishments (other than Mental Hospitals) for persons suffering from mental infirmity (Non-Poor Law)	13
Other Establishments for the sick (Non-Poor Law)	3
Miscellaneous	5
	<hr/>
	297

Maternity and Child Welfare.

PRE-NATAL WORK.

As in the past few years, two Ante-natal Clinics have been held weekly throughout the year.

That in connection with the Maternity Hospital is attended mainly by those who are to be admitted as in-patients.

CHURCH STREET CLINIC.

The Clinic provides chiefly for cases to be attended at home by midwives, who are kept informed of their patients' progress and advised as to necessary precautions.

Great care has been taken to follow up any patient who has not kept second or subsequent appointments, so that, as far as possible, no expectant mother who has once attended the Clinic is lost sight of till her confinement is over.

Apart from defects in general health, the chief conditions requiring treatment have been :—

1. DENTAL CARIES.—Dental treatment is offered to every ante-natal case who requires it, but much educational work has still to be done before the majority will willingly accept it, especially in the later months of pregnancy.

2. ALBUMINURIA.—There were 16 cases ; of these, 13 were slight when discovered and cleared up when instructions were followed. 3 were severe ; one of them rapidly improved, while the remaining two, proving intractable, were referred to private practitioners for intensive treatment at home. In both these cases the confinement was premature.

3. MAL-PRESENTATIONS.—There were 11 cases. 9 were corrected after the 32nd week. The remaining two, owing to home circumstances, could not be got to attend at the required date, and were warned to engage a doctor for the confinement.

There were no cases of puerperal pyrexia and no deaths amongst those who attended the Clinic.

The attendances show an encouraging increase, but there is still room for expansion.

	1st Visits.		Re-Visits.		Total.
1929	92	.....	120	.....	212
1930	137	.....	256	.....	393

MIDWIVES.

In order to stimulate their interest in the aims and methods of modern ante-natal care, the district Midwives have been invited to several evening lectures and discussions at 2, Church Street during the winter ; two of them were illustrated by cinematograph films showing management of a normal birth in a Continental Clinic. The Midwives have attended well and apparently appreciated both the lectures and the opportunity of meeting each other and discussing problems arising in their work.

18 Midwives notified their intention to practice during 1930; of these 15 hold the certificate of the Central Midwives Board. They are visited regularly by the Inspector of Midwives about once a quarter, and at other times as the need arises, e.g., where compensation has to be arranged owing to Midwives being suspended from practice to prevent spread of infection.

The Health Committee guarantees the payment of fees to doctors who are called in by Midwives under the rules of the Central Midwives Board. Where possible these are subsequently recovered.

Medical Assistance has been so required in 105 cases (excluding hospital cases) for the following reasons :—

MOTHER.		CHILD.	
Pyrexia	2	Prematurity	3
Ruptured perineum	30	Deformity	2
Uterine inertia	4	Inflammation of eyes	9
Hæmorrhage	8		
Abortion	4		—
Mastitis	1		14
Mal-presentation	8		—
Ante-natal examination	6		
Ulcerated foot	1		
Hæmorrhoids	1		
Exhaustion	2		
Prolonged labour	13		
Oedema of legs and feet	4		
Presentation uncertain	1		
Not definitely specified.....	6		
	—		
	91		
	—		
	TOTAL—105.		

MATERNITY HOSPITAL.

Excellent work has been done in the present Hospital since it was opened in 1921. Through the munificence of Miss Hartley, the temporary building will, it is hoped, before my next report have been replaced by one thoroughly up-to-date.

330 cases were confined, and there were 1,373 attendances at the Ante-Natal Clinic. Every mother was examined at the Post-Natal Clinic before discharge, and if any abnormality was discovered she was requested to attend subsequently.

The ante-natal work continues to show great recompense for the time spent on it. Every booked case attends this Clinic, and the following is a short résumé of some of the definite advantages obtained therefrom :—

1. BREECH PRESENTATIONS.—44 such cases were diagnosed at the Clinic. In the early months nothing more is done than to enter the position on the chart, and in 19 of these, without interference, the position became a vertex. In 21 cases external version was done. In many of these it was possible to do only partial version; pads and binder were then applied to maintain the correction and encourage completion. At the attendance the following week

it was generally found the the version was completed without any further manipulation except an attempt to fix the head in the brim of the pelvis. The idea aimed at is explained to the mother, and she is requested to have the binder tightened and the pads adjusted by a friend each night and morning until her attendance the following week.

On two occasions only was it necessary to give an anæsthetic, namely in two primiparae with very tense abdominal muscles who had not the faculty of relaxing.

Four cases of primiparae were delivered breech :—

(a) Was diagnosed a vertex at last ante-natal examination—live baby.

(b) Could not be maintained in vertex position. When delivered the cord was only 14 inches long, and the baby was still-born.

(c) Several attempts at version were unsuccessful. At delivery legs were extended, but a live baby was secured.

(d) Several attempts at version failed. At delivery legs and arms were extended, but the baby was delivered alive.

2. OCCIPITO-POSTERIOR POSITIONS.—25 of these were diagnosed, and all were corrected by the pad and binder method after partial rectification. Our lack of success with this method in previous years was undoubtedly due to not doing a partial correction first. We had no case of occipito-posterior presentation at confinement.

3. ALBUMINURIAS.—37 of the cases at the Clinic showed albumin in the urine at some time. In every case the urine was free of albumin before confinement occurred, and *there was no case of Eclampsia among the women who attended the Ante-Natal Clinic.*

4.—DISPROPORTIONS.—2 cases were put down for Cæsarean section quite early as the head could not be made to engage in the pelvis.

21 cases were brought in for induction at the 38th week. All responded within 48 hours to the stomach-tube method. The results were highly satisfactory in every case.

About 20 border-line Cases were given Castor Oil, Pituitary, and Quinine to hasten them.

PUERPERAL SEPSIS.

At the beginning of the year there were 4 cases.

After the first case aseptic and antiseptic precautions were intensified, but three more cases developed. On consultation with our Honorary Consultant, Dr. Leith Murray, it was deemed advisable to look for a carrier. The throats of the entire staff were swabbed, and one nurse was found to harbour, without symptoms, the streptococcus hæmolyticus pyogenes, the identical organism isolated from the uterine swab of the first patient. The nurse was isolated from the wards, and as an additional precaution gauze masks were worn by all members of the staff during confinements and swabbing, and no further case occurred. The precaution of wearing masks has been continued ever since.

EMERGENCY CASES.

The number of emergency cases sent in was 22. Four of these were of Eclampsia. Two were treated by Cæsarean section, and two expectantly, with one death in each method.

(a) MRS. H.—Multipara—2 children. Blood pressure, 200. Admitted 2 a.m., 13/10/30. She had her first fit five minutes after admission and five fits before the baby was born. Baby delivered 3-30 a.m., and there were five fits after. Only one ounce of blood could be drawn off—it clotted so quickly—and an intravenous saline given. Stomach lavage—mag. sulph. pot. brom. and chloral and subcutaneous salines, etc., were given, but the kidneys would not act. The temperature rose to 106.4 at 6 p.m. the 14th, and she died at 6-45 p.m.

(b) MRS. P.—Multipara—2 children. Blood pressure, 155. Admitted 10 p.m., 19/5/30. The usual treatment was given, and at 4 a.m. a stomach-tube induction was done. At 6-40 a.m. she gave birth to a live female child and both did well.

(c) MRS. R.—Primpara. Admitted 5-30 a.m., 16/3/30. She had one fit before admission and eleven before her operation of Cæsarean section. The usual treatment was given, she remained comatose for two days but recovered.

(d) MRS. C.—Primpara. Admitted 6 a.m., 5/6/30, having had three fits before admission. Cæsarean section performed at 8-15 a.m. Had one fit after delivery but there was very much ascites. She had the usual treatment, but died at 7-20 p.m., 6/6/30.

A. S. GARDEN, M.D., B.Ch., L.M.,

Obstetrician in Charge.

MATERNITY HOSPITAL, CURZON ROAD, SOUTHPORT.

NUMBER OF BEDS—21.

(1) Cases in the Hospital on January 1st, 1930	12
(2) Admitted during 1930	330
(3) Average duration of stay	14 days.
(4) Delivered by :— (a) Midwives	267
(b) Doctors	63
(5) Number of cases in which medical assistance was sought, stating reasons for requiring assistance. (a) ante-natal. (b) during labour. (c) after labour. State separately the number of perineums which required suture.	(a) Every case is seen by the doctor at the Ante-Natal Clinic, except cases sent in emergency. (b) 28 cases of Uterine Inertia. 22 emergency cases. 2 cases of breech with extended arms and legs. 3 cases of A. P. H. 21 stomach tube inductions. (c) 3 cases of Adherent Placenta. Every case is seen by Doctor after labour and <i>all</i> internal lacerations and perineums are stitched—however slight. Complete rupture of perineum—6 cases.
(6) Number of cases notified as :— (a) Puerperal Fever. (b) Puerperal Pyrexia.	(a) 3 cases, two of which were transferred to Isolation Hospital, the third made a good recovery. (b) 3 cases of Puerperal Fever. 1 case of Puerperal Mania. 1 Cæsarean section (Peritonitis).
(7) Number of cases of Pemphigus Neonatorum	None.
(8) Number of cases of "Inflammation of Eyes"	10
(9) Number of cases notified as Ophthalmia Neonatorum	None.

MATERNITY HOSPITAL, CURZON ROAD, SOUTHPORT—*contd.*

(10) Number of infants not entirely breast-fed while in the Institution, stating the reasons why they were not breast-fed.	<p>23 cases not entirely breast-fed. 3 cases transferred to other institutions. 4 cases of Eclampsia of mother. 1 case of Gall-stones. 3 cases of previous Mastitis. 2 cases of twins. 6 cases of death of mother. 2 cases of Albuminuria of mother. 2 cases of retracted nipples.</p>
(11) Number of maternal deaths, stating the causes.	<p>8 cases. (a) Pernicious Anæmia. (b) Peritonitis. (c) Cancer of Cervix. (d) Adherent Placenta. (e) Eclampsia. (f) Eclampsia (from without the area). (g) Ante-partum Hæmorrhage. (h) Myocarditis and P. P. H.</p>
<p>(12) Number of foetal deaths. (A) Stillborn.</p> <p>(B) Within 10 days of birth. State causes and results of post mortem examinations if obtainable.</p>	<p>17 cases of stillborn babies. (A) (a) 2 cases of breech presentation with premature rupture of membranes. (b) Post-maturity. (c) Pernicious Anæmia of mother (baby macerated). (d) 4 cases of Prematurity. (e) 3 cases of Macerated Foetus, no apparent cause for two; one cord three times round neck. (f) Uterine Inertia of mother (in three cases). (g) 1 Placenta Prævia. (h) History of fall before admission. No foetal heart sound heard for one week before delivery.</p> <p>(B) 5 cases. (a) Congenital Disfunction of Kidneys. (b) Hydrocephalus and Spina Bifida. (c) 3 cases of Prematurity.</p> <p>Post-mortem examination performed in case (a). Result—Congenital Disfunction of Kidneys.</p>

MATERNAL DEATHS.

The Registrar-General adopts a method of classification of these cases which differs in some respects from our own. On his count the number here is 10; on our somewhat broader system the number is 13, which brings any case however doubtful under the most careful observation.

The following analysis shows that no one cause was responsible for the rise in the number of deaths, which can be attributed only to unavoidable fortuity.

CAUSES OF DEATH.

SEPSIS—6 cases.

- 1 Toxic absorption from Necrotic Placental Tissue.
- 2 following uncomplicated labour, of which one was in hospital and one at home.
- 2 following premeditated operative interference in presumably clean cases (1 Cæsarean section for small pelvis and 1 induced abortion for Mitral Stenosis).
- 1 following Cæsarean section in Uterine Inertia and complicated by Cervical Carcinoma.

All these cases were undertaken in good conditions in which Sepsis seemed unlikely.

HAEMORRHAGE—4 cases.

- 1 following difficult labour.
- 1 due to Placenta Prævia.
- 1 following Adherent Placenta.
- 1 due to miscarriage.

The first and second of these had no ante-natal care which, in the case of the first at any rate, might have prevented the fatal issue.

VARIOUS CAUSES—3 cases.

- 1 Puerperal Mania.
- 1 Eclampsia.
- 1 Heart Disease—Syncope.

The last case engaged a midwife, but had no ante-natal care, with the result that she underwent a prolonged labour in poor general condition.

It is noteworthy that toxæmias of pregnancy accounted for one death only. This case was under supervision by her doctor at home throughout her pregnancy, improved for a time and was immediately admitted to hospital when serious symptoms suddenly developed.

In two cases only could lack of ante-natal care be said to contribute largely to the fatal result. In all others, either the patient was apparently well supervised or else the cause of death was an accident of pregnancy which could not be foreseen. Hospital accommodation was readily available for any ante-natal case which required it, as well as for each emergency when it arose.

11 of the 13 deaths occurred in institutions as under :—

Maternity Hospital.....	7
Isolation Hospital.....	2
Mental Hospital.....	1
Nursing Homes.....	1

MALIGNANT DISEASE.

I take this opportunity of emphasizing again the need there is for continued propaganda concerning Cancer of the Breast and Cancer of the Uterus.

The conditions differ slightly in the two affections, because whereas in both it is necessary to teach women about the early symptoms and the need for early treatment, in the case of Cancer of the Breast emphasis should be laid particularly on the *success* of early treatment.

Experience and investigation have shown that most women who have any swelling in the breast now suspect Cancer, and they put off seeking advice not because they do not realize the possible seriousness of the condition, but because, realizing it, they consider themselves doomed.

On the other hand, irregular, excessive or recommencing Uterine Hæmorrhage are not yet well enough appreciated by women as possible symptoms of a commencing Cancer.

I repeat—that in both, early treatment now affords a very good hope of cure and is available in this area to all who apply for it. Delay must be avoided like the plague! Moreover, early and competent examination may show that the condition is not Cancer at all!

NURSING HOMES.

Under the Nursing Homes Registration Act, 1927, 19 homes, including those receiving maternity cases, were registered and duly inspected in 1930.

PUERPERAL FEVER AND PUERPERAL PYREXIA.

Under the Regulations of 1926, 3 cases of Puerperal Fever and 12 cases of Puerperal Pyrexia have been notified during the year.

Immediately on notification, the Health Department gets into touch with the doctor attending the case and offers any necessary help, e.g., nursing assistance, hospital isolation, etc.

15 cases of Puerperal Fever or Pyrexia were admitted to New Hall Isolation Hospital in 1930. Of these 8 came from outside the Borough.

	Puerperal Fever.	Died.	Recovered.	Puerperal Pyrexia.	Died.	Recovered.
Cases notified	3	—	—	12	—	—
Treated in Hospital	2	1	1	10	3	7
Nursed at home	1	1	—	2	—	2

NOTIFICATION OF BIRTHS.

The adoption by the local authority of the Notification of Births Act, 1927, has required all Medical Practitioners and Midwives concerned to notify all births to the Medical Officer of Health within 36 hours.

BIRTHS NOTIFIED IN 1930.

	Notified by Medical Practitioners.	Notified by Midwives.	Duplicate Notifications.	TOTAL.
STILL BIRTHS.				
(a) Legitimate	17	28	} 5	46
(b) Illegitimate	1	5		
LIVE BIRTHS.				
(a) Legitimate	291	643	} 51	940
(b) Illegitimate	9	48		
	318	*724	56	986

*Includes 330 Hospital cases.

Births not Notified—6.

HEALTH VISITING.

The value of early notification of all births lies in the fact that where necessary the Health Visitor comes in touch with the parent as soon after the tenth day as possible, the Midwife being responsible during the first ten days of life.

When it is remembered that of the 66 infant deaths occurring during the year 38 took place in the first month of life, the need for ante-natal and post-natal supervision is very obvious.

Since the coming into force of the Local Government Act, 1929, the supervision of nurse children has been added to the duties of the Health Visitors, who for this purpose have been appointed Infant Life Protection Visitors. This has already increased the attendances at the Welfare Centres of illegitimate children—a highly desirable result.

SUMMARY OF HEALTH VISITING.

Ante-natal cases : 1st visits	184
Re-visits	575
Post-natal cases : 1st visits	766
Re-visits	5,121
Infants visited at home : 1st visits	770
Conditions found :—	
Still-born	42
Died within 24 hours of birth	14
Breast fed	560
Partly breast fed	42
Artificially fed	102
Removed	10

Infants visited at home : Re-visits	5,139
Home visits to children—1-5 years	6,555
Visits to infants <i>re</i> sore eyes	31

Visits *re* deaths of infants :—

Conditions found : Breast fed	26
Artificially fed	24
Died under 24 hours	12
Too good to visit	5

SUPPLEMENTARY HEALTH VISITING.

Special enquiries—Medical Officer of Health	140
Incidental calls	644
Visits to infectious diseases	67
Visits to houses found closed	1,280
Visits to Midwives	30
Visits to Maternity and Nursing Homes	11
Visits to nurse children	166

(See also Report of School Medical Officer.)

IN-PATIENTS DURING 1930.

Corporation Institutions	{ New Hall Isolation Hospital	659	
	" Sanatorium	105	
	Maternity Ward	340	
	V.D. Ward	121	
	St. Katherine's Home	50	
		—	1,257
Outside Institutions	{ Bradstock Lockett	12	
	Children's Convalescent Home, W. Kirby.....	5	
	Royal Normal College, London (Blind).....	1	
	Training School for the Blind, Liverpool	1	
	School for Indigent Blind, Wavertree	4	
	Royal School for Deaf and Dumb, M/c.	1	
	School for Deaf and Dumb, Liverpool	1	
	Dovecot, Knotty Ash (Feeble-minded)	2	
	Pontville R.C. School do.	1	
	Great Warford do.	2	
	Monyhull Institution do.	1	
	Homestead, Lingfield (Epileptic)	1	
		—	32
			<u>1,307</u>

MEDICAL DEPARTMENTS.

OUT-PATIENT ATTENDANCES.

Minor Ailment Clinic (Doctors)	4,732
do. (Nurses)	10,091
Aural Clinic	309
Nasal Clinic	1,498
Eye Clinic	667
Nose and Throat Clinic	220
Sunlight Clinic (Doctors)	121
do. (Nurses)	1,107
Dental Clinic (Elementary)	4,141
do. (Secondary)	458
do. (Mothers)	836
Ante-Natal Clinic (Church Street)	402
Maternity Ward	1,373
V. D. Department	9,760
Welfare Centres	27,439
Dispensary	1,743
Contact Clinic	136
X-ray examinations	177
	<hr/>
	65,210

CHILD WELFARE CENTRES.

There are five Welfare Centres held in different parts of the town on different days of the week at 2-30 p.m. :—

Hampton Road Mission Hall on Thursday (opened 1914).

92, Poulton Road, High Park, on Wednesday (opened 1918).

Wesleyan Schools, Liverpool Road, on Tuesday (opened 1919).

Rufford Road, Crossens, on Wednesday (opened 1921).

Baptist Schools, Hoghton Street, on Friday (opened 1926).

All areas of the town are now reasonably well served, and there appears to be no present necessity to increase the number of centres.

The Hampton Road Centre, while still of great value owing to its situation in a crowded neighbourhood, has become increasingly congested and difficult to run. An up-to-date building should shortly be begun on an adjacent site, and will do much to facilitate the educational work of the centre—a *sine qua non* of all good welfare schemes.

The Central Voluntary Committee with its voluntary helpers have, as in past years, carried out the social services of the scheme. Their untiring efforts are worthy of the work they have in hand.

Interest in the Centres and average attendances have been well maintained. There is a small but encouraging increase in the number of children attending between 1 and 5 years, hitherto an age possibly more neglected than any until leaving school. The services of the Dental Clinic have been frequently used for this group of children.

Name of Centre.	ATTENDANCES.							TREATED.			
	Post-Natal Mothers.		Expectant Mothers.		Infants.		Children over 1 and under 5.	Nursing Mothers.	Expect-ant Mothers.	Infants.	Children over 1 and under 5.
	1st visits.	Re-visits.	1st visits.	Re-visits.	1st visits.	Re-visits.					
Hampton Road	193	2544	25	89	192	1770	1022	563	57	1962	1022
High Park	109	2318	19	65	114	1656	930	582	86	1770	932
Liverpool Road	105	2407	30	70	105	1736	1503	490	100	1854	1507
Crossens	78	1490	20	76	79	885	984	319	94	958	984
Hoghton Street	142	3040	12	23	141	2132	1329	245	22	2273	1329
Totals	627	11799	106	323	631	8179	5768	2199	359	8817	5774

	ATTENDANCES.							
	Post-Natal Mothers.		Expectant Mothers.		Infants.		Children over 1 and under 5 years.	
	1st visit.	Re-visit.	1st visit.	Re-visit.	1st visit.	Re-visit.		
1924	384	6617	35	95	384	4407	2876	
1925	479	8416	58	191	472	5651	3607	
1926	586	9511	60	248	599	6742	4150	
1927	629	10316	70	246	644	7539	4934	
1928	594	10067	85	315	583	7055	5087	
1929	703	11835	116	319	702	8511	5565	
1930	627	11799	106	323	631	8179	5774	
1930	TOTAL ATTENDANCES.....						27439.	

OPHTHALMIA NEONATORUM.

7 cases were notified during the year. In every instance prompt action was taken with the result that no impairment of vision occurred.

Out-door Midwives are instructed to use 1 per cent. silver nitrate after birth in every case.

Cases Notified.	Treated.		Vision unimpaired.	Vision impaired.	Total Blindness.	Deaths.
	At Home.	In Hospital.				
7	4	3	7	Nil.	Nil.	Nil.

INFANTILE MORTALITY.

66 infant deaths occurred, giving a rate of 74·2 per thousand births. It is noteworthy that 38 (or 57 per cent.) of the deaths took place in the first month of life, and that 22 were ascribed to premature birth, the prevention of which is a complex problem still far from being solved. Full details of the causes of infant deaths are given in Table IV in the Appendix.

GRANTS TO INSTITUTIONS.

The Health Committee have continued the system of co-operation with St. Katherine's Home and Southport and Birkdale Day Nursery, whereby the Corporation pays 75 per cent. of their nett approved expenditure.

SOUTHPORT AND BIRKDALE DAY NURSERY, DUKE STREET.

Individual children admitted	82
Attendance (days)	3,067
Average weekly attendance	65
„ daily „	13

ST. KATHERINE'S HOME.

MATERNITY CASES.

In Institution on Jan. 1st.		Admitted during the year.	DISCHARGED DURING THE YEAR.						In the Institution on Dec. 31st.	Mother days.
			To the Union.	To the V.D. Ward.	Own Homes.	Other Homes.	Domes- tic Service.	Died.		
1926	9	18	1	1	8	—	12	—	6	3053
1927	6	19	1	2	6	2	5	—	9	3171
1928	9	30	1	4	10	5	8	—	11	4156
1929	12	20	1	4	12	4	1	—	10	3492
1930	10	17	—	2	12	2	7	—	4	2584

INFANTS.

	In In- stitutions on Jan. 1.	Ad- mitted during the year.	Born in Home during the year.	DISCHARGED DURING THE YEAR.						In In- stitut'n on Dec. 31.	Infant days.
				Dis- charged with their Mothers.	To Foster- Mothers.	To another Home.	To the V.D. Ward.	To the Union.	Died.		
1926	5	7	10	5	7	5	1	1	1	2	2317
1927	2	3	16	4	3	2	1	1	2	8	2140
1928	8	2	21	11	6	5	—	1	—	8	3012
1929	8	2	13	8	3	1	1	—	2	8	2369
1930	8	2	13	9	8	2	—	—	—	4	2128

NURSING AND MATERNITY HOMES.

Number of Homes Registered prior to 1930.	Number of Applicants for Registration during 1930.	Number of Homes Registered during 1930.
6 M. and N.	2 M. and N.	2 M. and N.
8 N.	—	—
3 N.	—	—

M.—Maternity Home.

N.—Nursing Home.

EXPENDITURE FOR THE PAST FIVE YEARS.

	GRANT. £ s. d.	FOSTER MOTHERS. £ s. d.	TOTAL. £ s. d.
1926-27	600 0 0	—	600 0 0
1927-28	675 0 0	54 17 11	729 17 11
1928-29	939 0 8	—	939 0 8
1929-30	714 13 3	—	714 13 3
		Total	£2,983 11 10

MATERNITY DENTAL CLINIC—YEAR 1930.

SUMMARY OF WORK.

Date.	Appointments		Number of Visits		New Cases.		Extractions.		Anaesthetics			Fillings	Root Treatment.	Dressing.	Scaling.	Oral Affections.	Examined.	Impressions Taken.	Bite Taken	Try In	Finished Denture			Repair.	Re-make.
									Loc.	N ₂ O Gen.	U. L.										Partial	Full	U. L.		
	Ist	Re																							
Jan.	54	29	20	4	56	19	—	2	3	2	—	—	7	19	14	2	5	—	1	1	1	4	1		
Feb.	51	18	33	6	67	15	—	2	3	3	—	—	5	16	20	5	4	—	1	2	2	2	1		
Mar.	53	17	48	13	106	35	—	3	9	1	—	1	3	22	10	1	7	3	1	3	3	1	2		
April	63	16	52	9	96	63	—	1	5	4	7	3	6	17	14	1	2	—	—	—	—	1	2		
May	78	18	83	11	135	59	—	3	8	3	1	1	8	20	33	10	21	1	—	4	4	1	—		
June	75	11	68	10	71	41	—	1	13	1	—	4	14	18	18	7	16	1	—	7	7	—	4		
July	76	16	72	8	94	70	—	1	11	—	2	2	18	17	23	4	9	2	1	7	6	3	—		
August ..	17	3	13	2	27	7	—	1	2	—	—	—	—	7	4	1	—	—	—	—	—	1	—		
Sept.	79	16	63	17	83	23	—	2	8	2	—	1	11	23	28	6	14	1	3	3	2	3	1		
Oct.	99	17	97	15	165	86	—	3	10	4	—	1	15	27	27	2	11	—	3	4	6	5	1		
Nov.	72	14	73	8	79	53	—	1	12	4	1	—	15	16	18	3	11	—	—	2	3	2	2		
Dec.	52	6	33	9	34	11	—	1	1	—	—	—	9	13	12	2	4	—	1	4	4	1	—		
Totals	769	181	655	112	1013	482	—	21	85	24	11	13	111	215	221	44	104	8	11	37	38	24	14		

SUMMARY OF VARIOUS CLINICS.

Days and Times of Attendances.

	Monday.	Tuesday.	Wednesday	Thursday.	Friday.	Saturday.
Infant Welfare Centres—						
Liverpool Road		2-30				
High Park			2-30			
Crossens			2-30			
Hampton Road				2-30		
Hoghton Street					2-30	
Sewing Classes :						
High Park				2-30		
Ante-Natal Clinic—						
2, Church Street				10-0		
Maternity Ward, Curzon Road					11-0	
Maternity Dental Clinic		2 p.m.			2 p.m.	
School Clinic, 2, Church St.						
Minor Ailment Clinic	2-30					
Ophthalmic Clinic					2-30	
Skin Clinic				2-30		
Tonsil and Adenoid Clinic			9-30 (when			
Artificial Sunlight Treat-			necessary)			
ment Clinic	9-30		9-30 a.m.		9-30	
Nasal Clinic		2-30	5-0 p.m.		2-30	
Aural Clinic					10-0	
Treatment Clinic	9-30	9-30	9-30	9-30	9-30	9-30
Dental Clinic	9-30 and 2 p.m.	9-30 and 2 p.m.	9-30 and 2 p.m.	9-30 and 2 p.m.	9-30 and 2 p.m.	
Kromayer Lamps					5 p.m.	
Tuberculosis Dispensary		2 p.m.				
Venereal Diseases—						
Southport Infirmary—						
Clinic—Men	5-30			5-30		
" Women		2-0				
Treatment Clinic—Men	8-30—10 a.m.	8-30—10 a.m.	8-30—10 a.m.	8-30—10 a.m.	8-30—10 a.m.	8-30—10 a.m.
" " Women	6-8 p.m.	6-8 p.m.	6-8 p.m.	6-8 p.m.	6-8 p.m.	6-8 p.m.
" " Women	10-12 a.m.	10-12 a.m.	10-12 a.m.	10-12 a.m.	10-12 a.m.	10-12 a.m.
" " Women	2-4 p.m.	6-8 p.m.	2-8 p.m.	2-4 p.m.	2-8 p.m.	2-8 p.m.

MODIFYING THE PHYSICAL AND MENTAL CHARACTER OF THE PEOPLE.

I quote verbatim a passage from "The Health of the School Child"—1929; fo. 71-72. This passage was the occasion of a good deal of editorial comment at the time it appeared; but one feels its gravamen for the future has not become generally appreciated outside of a certain very limited academic circle.

"There is a new factor at work which is profoundly affecting the physical constitution of this generation of school children. The enormous reduction in the infant mortality rate is saving some 40,000 lives every year which would not have been saved a generation ago. The infant mortality rate of 1891-1900 was 153 per 1,000 as compared with the rate for 1920-1929 which was approximately 74 per 1,000. Meanwhile, the birth rate has fallen from 25.5 in 1920 to 16.3 in 1929. These figures are of profound interest and importance. Here we can only touch upon two of the numerous deductions which might legitimately be drawn from them. First, it is obvious that it is not the birth rate only but the enormous advance of preventive medicine and enlightened motherhood which is sustaining our population; and secondly, we are now saving the lives of tens of thousands of infants who, under former conditions would not have survived. When we remember also that for many years the birth rate has been declining more rapidly among the better physical stocks of the population than among the less physically fit, we cannot fail to recognise that the present generation of school children may be relatively lacking in physical stamina and powers of resistance. In other words, the maintenance of the population in this way and from its present sources is, with all its advantages, one of the factors which, for the present, is tending to modify the physical and mental character of the people. This *temporary change** (and provided it remains transitory) is not, as is sometimes suggested, necessarily bad in itself, nor a sound reason for not saving infant life. It is part of the cost of saving it, though it makes new demands upon us. In theory we could get a strong physical race by allowing the feebler specimens to die or be sterilised, and breeding from the best stocks. But it is only a theory, for who is to determine which children shall die? and who is to select the best stocks?† What we have to do is to save every life we can; nurture it, strengthen it, and educate it in the finest of all the arts, the art of living. A nation survives by its physical life being well born, *for heredity is more than environment*;§ secondly, by its citizens being saved from premature death; and lastly, by the subsequent improvement of its physical life by nurture and by social conditions favourable to virility."

(The italics and the following notes are mine.)

* If the attributes of continuity cannot be perceived in this change it is difficult to imagine when they will ever be suspected.

† Are these the questions? While there may be absence of agreement as to which stocks or types should be fostered, there surely can be really little difference of opinion that certain others are not worth the preserving.

On one hand much of the best stock organically, of every social order, is not being reproduced—stock that is the most valuable asset of any nation under any conditions, and competent to any valuable work, performance or achievement of which the human organism is capable; on the other it is apparently the policy that no stock however deficient in good qualities, mental, physical or moral, must be allowed to die out.

§ Wise writers have written: "Do men gather grapes of thorns or figs of thistles?" ; and "You cannot teach a cow the violin."

LIST OF PUBLIC GENERAL (ADOPTIVE) ACTS IN FORCE WITHIN THE BOROUGH RELATING TO PUBLIC HEALTH.

Act.	Date of Adoption by Council.
The Infectious Disease (Prevention) Act, 1890	1st December, 1890.
The Public Health Acts Amendment Act, 1890	1st December, 1890.
The Bath and Washhouses Acts	July, 1902.
Notifications of Births Act, 1907	1st February, 1908.
The Public Health Acts Amendment Act, 1907 (Por- tions of Parts I to X)	26th May, 1910.
The Public Health Acts Amendment Act, 1907 (Section 23)	17th August, 1910.
The Public Health Act, 1925 (Parts II, III, IV and V)	2nd October, 1923.
	1st December, 1925.

LIST OF LOCAL BYE-LAWS AND REGULATIONS RELATING TO PUBLIC HEALTH.

REGULATIONS.

Dairies, Cowsheds, and Milkshops	1906
--	------

BYE-LAWS.

Common Lodging-houses	1887
Prevention of Nuisances	1887
Offensive Trades	1887
Blowing and Stuffing of Meat	1888
Slaughter-houses	1910
Houses Let in Lodgings	1912
Removal of House Refuse	1920
Public Baths	1922
Tents, Vans, and Similar Structures	1923
Nursing Homes	1928

LIST OF LOCAL ACTS AND ORDERS IN FORCE IN THE BOROUGH RELATING TO PUBLIC HEALTH.

28 and 29 Vict., ch. cxcv. Southport Improvement Act, 1865.
34 and 35 Vict., ch. cxl. Southport Improvement Act, 1871.
38 and 39 Vict., ch. cxxvi. Southport Improvement Act, 1875.
39 and 40 Vict., ch. cxxii. Southport Improvement Act, 1876.
48 and 49 Vict., ch. cxxii. Southport Improvement Act, 1885.
63 and 64 Vict., ch. cclxxxi. The Southport Corporation Act, 1900.
3 and 4 George V, ch. xciii. The Southport Corporation Act, 1913.
11 and 12 Geo. V, ch. xcvi. Ministry of Health Provisional Orders Confir- mation (No. 8) Act, 1921, authorising increased charges for markets and slaughter-houses, and giving power to run omnibuses.
The Borough of Southport (Offensive Trades) Confirmation Order, 1926.
Southport Corporation Act, 1930.

INSTITUTIONS.

	% from outside in 1930.	BEDS.			
		M.	F.	Children.	Total.
SOUTHPORT INFIRMARY, SCARISBRICK NEW ROAD. Voluntary. General, Children ; Medical, Surgical and Children ; Oper- ative Surgery, X-ray ; Dental, Ophthalmic, Massage ; Ear, Nose and Throat ; Pathology.	10·7%	56	67	17	140
VENEREAL DISEASES, PILKINGTON ROAD. Corporation. See V.D. Report and Table IX.	17%	5	5	6	16
MATERNITY HOSPITAL, SCARISBRICK NEW ROAD. Corporation. Hon. Consultant : Dr. Leith Murray. See Report, page 39-42.	3·6%	—	21	—	21
BRADSTOCK LOCKETT HOME, ST. ANNES ROAD. Voluntary. Surgical Tuberculosis and Or- thopædics (Children).	63%	—	—	50	50
NEW HALL ISOLATION HOSPITAL AND SANATORIUM, SCARISBRICK. Corporation. Isolation Hospital and Sana- torium ; Laboratory and X- Ray. Consultant : Dr. John Hay.					
SANATORIUM	1%	18	18	—	36
FEVERS	5%	7	9	54	70
OUTSIDE THE BOROUGH. MOSS LANE HOSPITAL, BANKS. Corporation. Small-pox.	—	20	20	—	40

INSTITUTIONS—*continued.*

Occasional cases are sent to :—

Shropshire Orthopædic Hospital, Oswestry.

David Lewis Northern Hospital, Liverpool.

Royal Infirmary, Liverpool.

Royal Children's Hospital, Liverpool.

PATHOLOGY.

SOUTHPORT INFIRMARY.

Dr. E. Cronin Lowe ; Venereal Diseases ; £300 per annum ;
Swabs, Sputa, Fæces, Bloods, etc.

LIVERPOOL UNIVERSITY.

Professor J. Henry Dible ; Milk.

HOMES FOR DISABLED SOLDIERS.

“ Wyborne Gate,” Westcliffe Road.

“ Byng House,” Promenade.

Blind Persons Committee.

The care of the Blind from 1922 until March 31st, 1930, had been conducted by the Manchester and Salford Blind Aid Society on behalf of the Local Authority under a Scheme approved by the Ministry of Health. In view of the changes following the Local Government Act, 1929, it was considered advisable for the proper development and administration that the Council make themselves responsible, and as from April 1st, 1930, the Council took over the responsibility of all blind persons within the Borough, including those blind persons previously dealt with by the Board of Guardians, excepting those persons receiving institutional relief.

NUMBER ON THE REGISTER, 1929..... 103

REMOVED DURING THE YEAR :—

2 males, sight improved after Operation.....		
3 males, deceased, ages 63, 63, 72	5	
	—	
2 females left the town		
1 female, deceased, age 84	3	8
	—	—
		95

ADDED TO THE REGISTER :—

9 males	9	
8 females	8	17
	—	—
		112

ON THE REGISTER 31ST DECEMBER, 1930 :—

	Under 16	16-21	22-49	50-69	70 and over.	Total
MALES	7	4	11	22	10	54
FEMALES	5	0	11	23	19	58
						112

Persons in receipt of State Pensions	63
Visits paid by the Home Teacher to persons in their own homes	755
Classes held for instruction	74
Social gatherings held during the winter months.....	21

RESIDENT IN INSTITUTION FOR THE BLIND.

	Males.	Females.
Royal Normal College, London	1 age 19	—
Hardman Street, Liverpool	2 „ 33, 18	—
Wavertree Schools for the Blind, Liverpool	3 „ 15, 11, 10	1 age 11
Calderstones, Whalley	—	1 „ 12

GRANTS.

Grants have been given to the amount of over	£770
Persons receiving weekly grants	40
Augmentation paid to Home Workers	£97

INSTRUCTIONAL CLASSES.

Classes are held every Monday and Wednesday afternoon from 1-30 to 4-30 p.m. at the Technical Schools.

At these classes instruction is given in embossed reading and writing, rush and cane-seating, hand and round-machine-knitting, basketry, etc.

Domiciliary instruction in the above subjects is also given.

HOME WORKERS.

Number of Home Workers—4.

One Home Worker has been withdrawn from the Home Workers Scheme owing to ill-health.

It is hoped that under the new regime it will be possible to keep the Home Workers and those engaged in pastime-occupations more fully occupied.

SALE OF WORK.

In order to assist the Home Workers and those engaged in pastime-occupations in the disposal of their work, a Sale of Work was organised by the Ladies' Committee and held in the Lecture Hall of the Technical Schools, kindly lent by the Education Authority on Wednesday afternoon, July 9th, 1930.

As a result of the arrangements the receipts from sales, etc., realised over £49.

In September one of our trainees, Lilian Cooper, 50, Segars Lane, left the Schools for the Blind, Hardman Street, Liverpool, where she had been trained in circular and flat-machine-knitting. A flat-machine had been purchased for her by the Blind Persons Committee and installed in the office at 2, Church Street. This is the first young person to have finished training, and the Authority responsible has reason to be pleased.

SOCIAL EVENTS.

September 9th, 1930. Picnic to St. Annes-on-Sea—Blind and Guides present	104
January 6th, 1930. Christmas Party—Blind and Guides present.....	85
Social Gatherings held fortnightly in the Unitarian Schoolroom, Portland Street—average attendance	70

The picnic to St. Annes-on-Sea was organised by members of the Southport Branch of the Rotary Club and Toc H.

Our thanks are especially due to :—

The Rotary Club.

Toc H., for keeping the wireless sets in order and many other services.

The Advertising and Band Committee for free seating in the Municipal Gardens.

The Tramways Committee for free passes on tramcar and 'bus.

Dr. de Courcy and the Infirmary Staff for great consideration.

Miss Mace for the responsibility of the Social Gatherings and her services at the pastime-classes.

To the above and others the Blind of Southport offer grateful thanks.

Supervision of Food Supplies.

VISITS TO :—

Public Slaughter-houses	578
Private Slaughter-houses.....	243
Butchers' Shops.....	2,628
Fish and Poultry Shops	2,038
Other Shops	5,295
Restaurant or Hotel Kitchens (workplaces)	73
Ice-cream Workshops	46
Ice-cream Stalls	76
Potted Meat and Fish Works	248
Piggeries	380
Cowsheds	304
Milk Farms outside the Borough	11
Bacteriological Examination of Milk	100
Private Premises where Pigs are killed	328
	<hr/>
	12,348

UN SOUND FOOD DESTROYED.

Under Magistrate's Order :—Nil.

By consent of Owner or Consignee :—

Beasts' Carcases and all Organs	36
Beasts' Livers	88
Beasts' Lungs (sets)	202
Beef (lbs.)	772
Calves' Lungs (sets)	1
Beasts' Heads	3
Pigs' Livers	75
Pigs' Carcases and all Organs	60
Pigs' Lungs (sets)	296
Pork (lbs.)	335
Pigs' Mesenteric Fat.....	1
Lambs' Carcases and all Organs	6
Beasts' Stomachs	11
Pigs' Spleen	1
Pigs' Heads	61
Beasts' Mesenteric Fat.....	60
Sheeps' Liver	18
Beasts' Spleens	9
Beasts' Skirts	11
Pigs' Hearts	43
Rabbits	288
Pigs' Stomachs	13
Beasts' Udders	7
Beasts' Hearts	6
Calves' Carcases and all Organs	2
Turkeys	2
Mutton (lbs.)	12
Wet Fish (lbs.)	52

Sheeps' Lungs	3
Pears (lbs.)	90
Picked Shrimps (qts.)	280
Rough Shrimps (qts.)	77
Ducks	42
Beasts' Kidneys	5
Beasts' Mesenteric Organs	3
Pigs' Feet	14
Pigs' Kidneys	7
Pigs' Plucks	50
Brawn (lbs.)	24
Calves' Sweetbreads	1
Kippers (pairs)	12
Tiger Nuts (lbs.)	112
Bacon (lbs.)	311
Lamb (lbs.)	75
Water Melons	3
Pears (tin)	1
Calves (unborn)	2

FOOD AND DRUGS ACT.

SUMMARY OF SAMPLES SUBMITTED FOR ANALYSIS.

Informal Samples				Nature of Sample.	Formal Samples.					
Number Taken.	Number Genuine.	Adulterated.			Number Taken.	Number Genuine.	Adulterated.		Vendors Cautioned.	Prosecutions
		Materially	Trivially or doubtful				Materially	Trivially or doubtful		
1	1	—	—	Milk	85	79	3	2	—	—
1	1	—	—	Apple Jelly	—	—	—	—	—	—
1	1	—	—	Honey	—	—	—	—	—	—
1	1	—	—	Damson Jelly	—	—	—	—	—	—
1	1	—	—	Polony	—	—	—	—	—	—
—	—	—	—	Beef Sausage	3	3	—	—	—	—
1	1	—	—	Butter	20	20	—	—	—	—
—	—	—	—	Pork Sausage	6	5	—	1	1	—
—	—	—	—	Beef Dripping	1	1	—	—	—	—
—	—	—	—	Cheese	6	6	—	—	—	—
—	—	—	—	Margarine	5	5	—	—	—	—
7	7	—	—	Pepper	—	—	—	—	—	—
9	9	—	—	Fresh Cream	—	—	—	—	—	—
3	3	—	—	Camphorated Oil	—	—	—	—	—	—
2	1	1	—	Ground Cinnamon	1	—	1	—	—	1
1	—	1	—	Gregory Powder	1	1	—	—	—	—
1	—	1	—	Calcined Magnesia	1	—	1	—	—	1
1	1	—	—	Cream of Tartar	—	—	—	—	—	—
1	1	—	—	Liquorice Powder	—	—	—	—	—	—
1	1	—	—	Seidlitz Powder	—	—	—	—	—	—
1	1	—	—	Red Currant Jelly	—	—	—	—	—	—
1	1	—	—	Potted Ham and Ton.	—	—	—	—	—	—
1	1	—	—	Lard	5	5	—	—	—	—
1	1	—	—	Syrup of Senna	—	—	—	—	—	—
1	1	—	—	Liquid Ex. of Cascara	—	—	—	—	—	—
2	2	—	—	Glycerine	—	—	—	—	—	—
2	2	—	—	Tinned Lobster	—	—	—	—	—	—
1	1	—	—	Beef Paste	—	—	—	—	—	—
5	5	—	—	Coffee	—	—	—	—	—	—
1	1	—	—	Picnic Sauce	—	—	—	—	—	—
1	1	—	—	Salmon Paste	—	—	—	—	—	—
2	2	—	—	Lemon Cheese	—	—	—	—	—	—
1	1	—	—	Turkey and Tongue Paste	—	—	—	—	—	—
1	1	—	—	Raspberry Jam	—	—	—	—	—	—
1	1	—	—	Tinned Peas	—	—	—	—	—	—
—	—	—	—	Bread and Butter	12	10	2	—	—	2
1	1	—	—	Olive Oil	—	—	—	—	—	—
1	—	1	—	Sweet Spirit of Nitre	—	—	—	—	—	—
1	1	—	—	Syrup of Rhubarb	—	—	—	—	—	—
1	1	—	—	Paregoric	—	—	—	—	—	—
1	1	—	—	Ground Almonds	—	—	—	—	—	—
1	1	—	—	Chicken Ham and Tongue Paste	—	—	—	—	—	—
1	1	—	—	Crab Paste	—	—	—	—	—	—
1	1	—	—	Salmon and Shrimp Paste	—	—	—	—	—	—
1	1	—	—	Tinned Tomatoes	—	—	—	—	—	—
1	1	—	—	Tinned Peas	—	—	—	—	—	—
1	1	—	—	Tinned Fruit Salad	—	—	—	—	—	—
1	1	—	—	Clover Honey	—	—	—	—	—	—
1	1	—	—	Marrow and Ginger	—	—	—	—	—	—
1	1	—	—	Strawberry Jam	—	—	—	—	—	—
1	1	—	—	Savourette	—	—	—	—	—	—
1	1	—	—	Koax Krisps	—	—	—	—	—	—
1	1	—	—	Gelatine	—	—	—	—	—	—
1	1	—	—	Tincture of Rhubarb	—	—	—	—	—	—
1	1	—	—	Precipitate Ointment	—	—	—	—	—	—
73	69	4	—		146	135	7	3	1	4

PARTICULARS OF SAMPLES REPORTED TO BE NOT GENUINE.

BREAD AND BUTTER.

Two formal samples were reported against. In each case the Vendor was prosecuted and fined £2.

GROUND CINNAMON.

An informal sample was reported against. A formal sample then being taken proved to be materially adulterated. The Vendor was prosecuted and fined £10.

CALCINED MAGNESIA.

One sample was reported against and the Vendor was prosecuted. The prosecution failed on a technical point, owing to a verbal error in the copy of certificate which was served with the summons.

MILK.

Two samples were found to be slightly below standard with regard to the amount of fat. Further samples were then taken which proved genuine. With regard to three other samples it was quite clear that water had been added but owing to the difficulty of fixing the onus on the producer or carrier of the milk no action was taken.

One sample was broken in transit.

SLAUGHTER-HOUSES.

The time is close at hand when the whole question of the Public Slaughter-houses will have to be considered with a view to modern accommodation being provided.

The Public Slaughter-houses are in Poplar Street, on a plot of freehold land comprising 5,258 square yards. The buildings were erected in 1880.

There are thirteen Slaughter-houses. Seven are let to butchers at a yearly rental; the other six are used in common by butchers who pay a "head rate." There are a like number of lairs directly opposite the Slaughter-houses. During 1930 there were 19,674 animals slaughtered. In the middle of the yard between the lairages are two gut-scraping establishments.

Animals slaughtered in the Borough for human consumption :—

	Poplar Street Slaughter-houses		In the Five Private Slaughter-houses.		Totals.
	Public.	Rented.			
Cattle	579	1,108	.....	694	2,381
Calves	394	756	.....	134	1,284
Sheep	3,208	13,064	.....	7,268	23,540
Pigs	565	—	.....	76	641
Total	4,746	14,928	.....	8,172	27,846

777 pigs have been killed on private premises. It is quite time improved pig-slaughtering accommodation should be provided at the Public Slaughter-houses, so as to enable the slaughtering to be done under proper supervision.

PRIVATE SLAUGHTER-HOUSES.

There are five Private Slaughter-houses in the district. Of these, the three in use are kept satisfactorily clean and free from nuisance, and the business in each case is properly conducted. About 29 per cent. of the animals slaughtered in the district are dealt with in the Private Slaughter-houses.

THE PUBLIC HEALTH (MEAT) REGULATIONS, 1924.

The quality and condition of the meat supplied here are remarkably high, and the members of the Butchers' Association are on excellent terms with the Health Department.

BACTERIOLOGICAL EXAMINATION OF MILK.

	Samples from Producers in the Borough.	Samples from Producers outside the Borough.
Samples from bulk	(a) 11	(a) 90
Of which found to be Tuberculous	(b) 2	(b) 7
(a) Guinea pigs died before test completed.	4	

CASE No. 1.—Three samples were taken, one mixed and two from individual cows. Tubercle bacilli were not found. One cow had been sold between the date of the sample being taken and the visit of the Inspectors.

CASE No. 2.—Four samples were taken, one mixed and three from individual cows. Tubercle bacilli were not found. One cow had been sold since the first sample was taken. Two cows were dealt with under the Tuberculosis Order, 1925, by the Inspector at the time of examination, and in both cases post-mortem revealed Tuberculosis of the Udder.

CASE No. 3.—A mixed sample was taken from twelve cows. Tubercle bacilli were not found. One animal from which no sample was taken was dealt with under the Tuberculosis Order. The cow was slaughtered and post-mortem revealed Tuberculosis of the Udder.

CASE No. 4.—Five samples were taken, four individual and one a mixed sample from three cows. Tubercle bacilli were found in the milk of two cows and these were dealt with under the Tuberculosis Order.

CASE No. 5.—Four samples were taken, two mixed and two from individual cows. Tubercle bacilli were found in the individual samples, and the animals were dealt with under the Tuberculosis Order.

CASE No. 6.—The Veterinary Inspector took three mixed samples covering the whole of the herd. All samples were negative. One cow had been sold between the date of the first sample being taken and the visit of the Inspectors.

CASE No. 7.—The whole of forty-seven cows were examined and four mixed samples taken. All the samples were negative. Five cows had been sold between the date of the first sample being taken and the visit of the Inspectors.

IN THE BOROUGH.

CASE No. 1.—Took three samples; two from individual cows and one mixed from six cows. The individual samples were negative, but Tubercle bacilli were found in the mixed sample. This was followed up and individual samples were then taken from the six cows and these proved negative.

TUBERCULOSIS ORDER, 1925.

This Order of the Minister of Agriculture and Fisheries, dated the 13th day of July, 1925, came into operation on the 1st September, 1925. It gives to Local Authorities powers similar to those contained in the Tuberculosis Order, 1914, which was suspended in August, 1914.

Under the new Order every person having in his possession or under his charge (1) any cow which is, or appears to be, suffering from Tuberculosis of the Udder, Indurated Udder or other Chronic Disease of the Udder; or (2) any bovine animal which is, or appears to be, suffering from Tuberculous Emaciation; or (3) any bovine animal which is suffering from Chronic Cough and showing definite Clinical signs of Tuberculosis, is required to give notice of the fact to the Local Authority.

Provision is made for compensation to be paid to the owner of every animal dealt with under the Order; during 1930 the Local Authority have dealt with six cows, which have all proved to be Tubercular on post-mortem examination. The owner, in each case received the minimum amount of forty-five shillings as compensation. In every case dealt with the cowshed was disinfected after the animal had been removed. We welcome the new Order, and consider the powers given to Local Authorities are of great benefit to the public in safeguarding the milk supply and preventing the harbouring and dissemination of Bovine Tuberculosis; in fact they have already been most satisfactorily applied.

Animals inspected by the Veterinary Inspector	1,212
Bovine post-mortems conducted	6

REGISTERED COWKEEPERS AND PURVEYORS OF MILK.

Cow-keepers.	Cow-keepers and Purveyors.	Purveyors.
12	54	136

WORN-OUT OR DISEASED ANIMALS brought (some at the instance of the Veterinary or Dairy Inspectors) by cattle dealers or farmers in the Borough and adjoining districts to be slaughtered for value of salvage, and those dead before arrival :—

From :—	Town.	Country.
Tuberculosis	4	27
Accident	4	4
Dropsical	1	11
Emaciation	0	1
Pneumonia	1	7
Peritonitis	1	5
Jaundice	0	3
Swine Fever	14	19
Anthrax	1	0
Mastitis	0	2
Metritis	1	0
Pyæmia	0	1
	<hr/> 27	<hr/> 80

Water Supply.

“ NO PURER WATER OCCURS IN NATURE.”

The water supply is maintained by the Southport and District Water Board, which is a combination of the local Authorities of the County Borough of Southport, the Urban District of Formby, and the West Lancashire Rural District, and supplies water within the area of these three Authorities.

The Board was constituted under Act of Parliament of 1901 to take over the Waterworks Undertaking established by the Southport Waterworks Company in 1854.

The supply is constant and sufficient. With the exceptions referred to below, all property within the Borough is supplied direct from the Board's mains.

The Board owns four Pumping Stations, situated six to ten miles South-West of the town in the Parishes of Aughton, Bickerstaffe and Lathom, and the whole of the water is obtained from Wells over 200 feet deep. Only three of these Stations, however, supply water to the Borough of Southport. Owing to the depth of the Wells and the nature of the strata, the possibilities of contamination are most remote. The waters have no plumbo-solvent action, and no reports of contamination have been received. Although somewhat hard, the water is exceptionally pure, both chemically and bacteriologically.

The last available figures, namely, those for the year ending 31st March, 1930, show that the Board then supplied, direct, an estimated population, excluding Summer Visitors, of 108,135. The average domestic consumption, excluding meter supplies and based on this population figure, was at the rate of about 23·54 gallons per head per day ; and the total consumption 30·73.

HOUSES NOT SUPPLIED WITH TOWN WATER.

There are 16 houses in the Borough which derive their water from shallow wells on their own premises. The cost of furnishing a supply of town's water to these would exceed the water rate authorised to be charged within the district. The supply from these wells up to the present time has been adequate, and we have no cause for apprehension as regards the quality of the water.

Two small holdings in Town Lane are also situated some considerable distance from the Board's mains. These people use the Board's water, carrying it from the premises which are supplied by meter.

ANALYSIS, SAMPLE, 16th DECEMBER, 1930.

CHEMICAL.

	Parts per 100,000
Calcium Carbonate	19.60
Magnesium Carbonate	5.59
Magnesium Sulphate	10.16
Magnesium Chloride	1.12
Sodium Chloride	4.00
Sodium and Potassium Silicates, etc.	3.85
Reaction to Litmus—Neutral. PH value 7.1	
	<hr/> 44.32
Temporary hardness.....	26.2
Permanent hardness	8.0
Total hardness	34.2
Ammonia	None
Ammonia from Organic Matter.....	None
Oxygen required to oxidize | in 15" .....	.005
| in 3 hours .....	.011
Nitrogen as Nitrates	Trace
Nitrogen as Nitrites	None
Combined Chlorine	2.85

The sample was clear, colourless and odourless. It contained only a very minute trace of suspended matter, which consisted of hydrated oxide of iron and minute particles of silicious matter.

The water is organically very pure.

W. H. ROBERTS, M.Sc., F.I.C.

BACTERIOLOGICAL.

Number of organisms per c.c. capable of growing upon nutrient gelatine at 20.22 deg. C. in 3 days.....	70 organisms per c.c.
Number of organisms per c.c. capable of growing upon agar at 37 deg. C. in 3 days	8 organisms per c.c.
Test for B. Coli	absent in 100 c.c.
B. Enteritidis Sporogenes and Streptococci	absent in 100 c.c.
Result satisfactory.	

J. HENRY DIBLE,

Professor of Pathology, University of Liverpool.

RESULTS FOR CONSECUTIVE YEARS.

	Temporary.	Permanent.	Total.
1913—Nov. 28th	26·5	12·0	38·5
1913—Dec. 18th	22·6	16·4	39·0
1915—Mar. 18th	24·0	12·0	36·0
1915—Mar. 23rd	21·0	12·4	33·4
1916—Feb. 3rd	26·2	7·6	33·8
1917—Feb. 17th	18·7	9·6	28·3
1918—Jan. 29th	18·6	9·9	28·5
1919—Jan. 13th	24·9	17·0	41·9
1919—Dec. 30th	25·5	14·6	40·1
1920—Dec. 16th	23·0	12·8	35·8
1921—June 29th	25·5	13·8	39·3
1922—Nov. 23rd	23·2	12·7	35·9
1923—Oct. 9th	23·2	12·4	35·6
1924—Oct. 21st	23·7	13·4	37·1
1925—Sept. 30th	23·7	11·6	35·3
1926—Oct. 5th	20·5	9·1	29·6
1927—Dec. 24th	24·6	8·8	33·4
1928—Oct. 19th	22·0	12·6	34·6
1929—July 16th	24·1	9·9	34·0
1930—Dec. 16th	26·2	8·0	34·2

Meteorology.

LOCAL WEATHER.

Considered as a whole, 1930 was an uncommonly wet year, with a very poor record of sunshine; but it was by no means cold. With the single exception of February, every month yielded a lower mean atmospheric pressure, and a higher mean temperature, than the normal values. Most months were, in addition as already indicated, either wet or dull (or both); but few were windy. *Extremes* however (of all kinds) were, after February less frequent and noteworthy than during a number of recent years.

TEMPERATURE OF THE AIR.

1930.	Mean Temperature (Hesketh Park)	Deviation from Normal	Absolute Extremes (Marshside).	
			Highest.	Lowest.
January	41·7	+2·6	56	27
February	36·5	—3·2	48	19
March	41·7	+0·2	55	26
April	46·9	+1·3	62	31
May	51·3	+0·2	66	34
June	59·1	+2·5	80	39
July	59·6	+0·2	75	47
August	59·6	+0·5	88	45
September	56·7	+1·3	71	41
October	51·3	+2·1	64	36
November	44·0	+0·9	57	25
December	40·7	+0·7	52	25
The Year	49·1	+0·8	88	19

The foregoing figures call for little comment. It will be seen that January, June and October were especially warmer than usual, while February formed the solitary cold month. Mildness was general, but the monthly deviations from normal were all either moderate or small. The heat indicated by the maximum reading of 88 degrees in August, only endured for a few hours (on the 27th).

SUNSHINE AND OZONE.

1930.	Duration of Sunshine Hours.	Deviation from Normal Hours.	No. of Sunless Days.	Mean Daily Ozone 0 to 10
January	51.2	+ 7.9	14	3.6
February	75.5	+ 8.1	10	1.6
March	113.2	— 5.7	5	3.8
April	121.5	—50.0	7	4.6
May	184.9	—23.8	1	3.8
June	242.1	+29.9	0	2.9
July	158.1	—45.3	3	4.8
August	160.0	—16.2	2	3.8
September	126.0	—13.3	6	3.0
October	103.1	+ 6.1	4	3.4
November	60.4	+ 4.1	9	3.5
December	21.3	—15.4	17	2.2
The Year	1417.3	—113.6	78	3.4

June was the one bright month of the year. April, May, July, and December were particularly dull; while the entire holiday quarter (July to September) was more or less so. December proved one of the most hazy, misty and frequently quite foggy months ever experienced at Southport.

RAINFALL.

1930.	Total Rainfall. Inches.	Deviation from Normal. Inches.	Number of Days with Rain.	Duration of Definite Rainfall. Hours.
January	4.88	+2.20	23	95.8
February	0.33	—1.81	5	10.0
March	3.11	+0.88	19	69.1
April	2.72	+0.90	17	66.6
May	1.00	—1.21	13	29.3
June	1.40	—0.76	12	25.9
July	3.46	+0.44	19	61.7
August	5.93	+2.26	24	70.5
September	2.39	—0.74	17	48.6
October	5.48	+1.77	27	71.8
November	4.81	+1.74	20	60.2
December	4.06	+0.79	23	86.6
The Year	39.57	+6.46	219	696.1

The year was a wet one, annual aggregates of rainfall approximating to 40 inches being decidedly infrequent at Southport. The only notably dry month was February. August unhappily proved the wettest of the twelve; but January, October and November were also very rainy. There were 29 more days with measurable precipitation than the local normal number. Snowfalls, however, were almost entirely restricted to March. Days with hail were fewer than usual. Thunder occurred rather frequently, but its manifestations were trivial in comparison with the very severe thunderstorms experienced not many miles away.

HUMIDITY AND SUBSOIL WATER LEVEL.

1930.	Humidity of the Air at 9 a.m. % of Saturation.	Deviation from Normal % of Saturation.	Mean Level of Subsoil Water <i>a</i> Inches.	Deviation from Normal Inches.
January.....	88	0	26.8	-7.1
February.....	87	-1	28.6	-3.9
March.....	83	-1	32.6	-0.2
April.....	80	+1	32.7	-2.0
May.....	74	-2	37.0	-0.6
June.....	72	-3	42.5	+0.9
July.....	80	+2	47.3	+1.7
August.....	83	+3	46.1	-1.4
September.....	84	+2	46.5	-1.3
October.....	82	-4	44.2	-1.9
November.....	85	-3	39.2	-2.7
December.....	92	+3	41.7	+3.5
The Year.....	83	0	38.8	-1.2

a Distance below Well-mouth.

The principal summer holiday months, and December, were very humid but the complete year was by no means so—which indeed is often an interesting peculiarity of abnormally rainy seasons here.

The subsoil water level was unusually high at the commencement of the year, and somewhat so during the late autumn; but the December figures are unreliable, owing to the effects of sewer-constructional pumping in the vicinity of Hesketh Park. Materially higher water levels were at that time recorded in Birkdale.

WIND DIRECTION (GROUPED).

1930.	Duration Percentages.				Deviations from Normals.			
	N.E.	S.E.	S.W.	N.W.	N.E.	S.E.	S.W.	N.W.
	& E. %	& S. %	& W. %	& N. %	& E. %	& S. %	& W. %	& N. %
January.....	5	55	34	6	-6	+20	-6	-8
February.....	70	13	1	16	+53	-22	-32	+1
March.....	22	29	32	17	0	+4	-1	-3
April.....	31	17	14	38	+8	-3	-20	+15
May.....	27	16	36	21	+1	-5	+6	-2
June.....	25	24	35	16	+4	+7	+2	-13
July.....	3	19	37	41	-13	0	-1	+14
August.....	5	30	46	19	-8	+7	+4	-3
September.....	28	27	22	23	+7	0	-8	+1
October.....	6	39	36	19	-15	+3	+11	+1
November.....	10	23	39	28	-9	-11	+10	+10
December.....	15	44	29	12	-1	+6	-2	-3
The Year.....	21	28	30	21	+2	+1	-3	0

The only outstanding feature of 1930 in regard to wind at Southport was the northerly to easterly character of February, and that month's calmness. It was the most persistently north-easterly month *of any name* during the 59 years' existence of the Fernley Observatory, and was the calmest February in the same period. The year as a whole was generally quiet ; October and November were the two windiest months. No gale of any serious severity was experienced.

JOSEPH BAXENDELL,

Borough Meteorologist.

THE FERNLEY OBSERVATORY,

SOUTHPORT.

ATMOSPHERIC POLLUTION—COMPARATIVE STATISTICS.

Monthly Means, at various Places for the Year April, 1929 to March, 1930.
In English Tons per Square Mile.

STATIONS.	Rainfall (Per Pollution Gauge). In Milli- metres.	Insoluble Matter.			Total Insol- uble Matter.	Total Soluble Matter.	TOTAL SOLIDS.	Included in Soluble Matter.		
		Tar.	Carbon- aceous, other than Tar.	Grit, (as Ash).				Sulphates (SO ²).	Chlorine (CL.).	Ammonia (NH ³).
SOUTHPORT :—										
Hesketh Park.....	82	0.10	1.55	2.40	4.05	7.42	11.48	1.45	2.09	0.03
Marshside	70	*	*	*	4.87	7.57	12.47	*	*	*
Edinburgh :—										
Leith Links	55	0.41	2.83	5.72	8.96	7.70	16.68	1.96	0.56	0.18
Princes St. Gardens	54	0.51	3.52	9.51	13.54	6.22	19.79	2.27	0.38	0.15
Glasgow :—										
Alexandra Park	78	0.36	5.58	9.62	15.56	9.29	24.84	3.06	1.32	0.54
Bellahouston Park	85	0.05	2.62	6.35	9.02	11.71	20.73	5.05	1.30	0.35
Blythswood Square	71	0.28	4.26	9.31	13.85	10.53	24.40	3.14	1.12	0.38
Botanic Gardens	85	0.23	3.83	9.77	13.83	11.02	24.84	3.59	1.20	0.43
Queen's Park	77	0.08	2.47	6.45	9.00	9.77	18.77	2.50	1.10	0.36
Richmond Park	81	0.33	5.74	9.21	15.28	10.50	25.78	3.72	1.40	0.59
Ruchill Park	82	0.28	4.41	7.14	11.83	10.03	21.88	2.96	1.20	0.54
Tollcross Park	72	0.18	3.82	9.46	13.46	11.68	25.17	3.44	1.10	0.43
Victoria Park	78	0.13	3.54	8.09	11.76	11.69	23.43	3.52	0.97	0.48
Newcastle-upon-Tyne										
St. Lawrence Dis.	48	0.54	5.38	13.21	19.13	11.68	30.75	3.42	1.53	0.13
Town Moor.....	70	0.23	3.93	4.90	9.06	11.98	21.01	3.52	1.17	0.18
Westgate Road	61	0.51	9.82	12.14	22.47	17.57	40.06	6.45	1.17	0.18
Leeds :—										
Headingley	61	0.10	1.73	2.42	4.25	5.76	10.05	1.35	1.07	0.10
Hunslet	56	0.25	4.03	12.04	16.32	8.56	24.89	2.24	1.35	0.13
Park Square	61	0.28	5.54	14.08	19.90	11.37	31.29	3.08	2.12	0.18
Templenewsam	48	0.08	1.45	2.22	3.75	4.38	8.13	1.10	0.79	0.08
York Road	55	0.36	5.08	10.82	16.26	9.36	25.55	2.34	1.60	0.28
Burnley	96	0.48	6.84	15.71	23.03	21.20	44.27	2.62	2.06	0.18
Kingston-upon-Hull	54	0.33	3.82	8.53	12.68	13.99	26.65	3.40	1.86	0.25
Wakefield :—										
Clarence Park	55	0.13	2.04	2.71	4.88	5.41	10.25	1.32	0.79	0.10
W.R. Rivers Board	56	0.56	5.66	8.05	14.27	7.42	21.70	1.86	1.32	0.18
Huddersfield :—										
Cooper Bridge	50	0.05	2.96	5.62	8.63	22.80	31.44	7.65	2.73	1.55
Deighton.....	75	0.05	6.70	9.74	16.49	13.80	30.32	3.52	1.94	0.51
Rochdale :—										
Drake Street	90	0.46	5.92	12.45	18.83	9.03	27.82	2.32	2.12	0.15
Edwards & Brynings Works	70	0.31	5.28	9.86	15.45	7.63	23.08	2.01	2.04	0.25
Electricity Works	98	0.54	9.69	19.10	29.33	10.20	39.55	2.94	2.65	0.23
St. Mary's Church	70	0.64	9.84	16.22	26.70	8.21	34.94	2.45	1.73	0.15
Town Hall	101	0.28	5.18	8.67	14.13	9.02	23.15	2.24	2.01	0.13
Salford :—										
Ladywell San.	84	1.10	4.56	8.34	14.00	6.83	20.86	2.34	2.52	0.10
Regent Road	97	1.53	9.00	10.81	21.34	9.47	30.83	3.34	3.04	0.10

* NOT DETERMINED.

ATMOSPHERIC POLLUTION—COMPARATIVE STATISTICS—concluded.

Monthly Means, at various Places, for the Year April, 1929, to March, 1930.
In English Tons per Square Mile.

STATIONS.	Rainfall (Per Pollution Gauge). In Milli- metres.	Insoluble Matter.			Total Insol- uble Matter.	Total Soluble Matter.	TOTAL SOLIDS.	Included in Soluble Matter.		
		Tar.	Carbon- aceous, other than Tar.	Grit, (as Ash).				Sulphates (SO ₂).	Chlorine (Cl).	Ammonia (NH ₃).
Rotherham :—										
Oakwood Hall San.	46	0.10	2.47	3.78	6.35	5.38	11.76	1.22	1.12	0.13
Town Hall	51	0.33	7.57	20.88	28.78	10.20	38.99	2.58	2.06	0.18
St. Helens	83	0.46	6.94	12.28	19.68	13.56	33.25	4.67	2.32	0.35
Liverpool :—										
Cambridge Street	76	0.43	6.20	9.80	16.43	9.63	26.06	2.37	2.24	0.54
Netherfield Road	71	0.56	8.24	19.28	28.08	18.83	46.92	5.43	3.00	0.56
Marple	88	0.23	3.14	1.78	5.15	4.82	9.95	1.53	1.71	0.08
Sheffield :—										
Attercliffe	59	0.31	6.42	15.15	21.88	9.13	31.01	2.37	2.45	0.13
Nether Green	70	0.08	1.27	2.06	3.41	5.40	8.80	1.10	1.20	0.15
Surrey Street	67	0.48	7.75	17.03	25.28	10.30	35.57	2.78	2.37	0.23
Wrexham	90	*	*	*	6.63	10.20	16.83	*	*	*
Stoke-on-Trent :—										
Leek Road	79	0.43	3.34	6.99	10.76	6.98	17.75	1.99	1.61	0.33
Longton	72	0.69	5.00	11.83	17.52	7.22	24.74	*	*	*
Loughborough	62	*	*	*	14.92	9.97	24.43	*	*	*
Leicester :—										
Milton Street	53	0.41	5.91	12.01	18.33	9.15	27.46	2.83	0.79	0.23
Town Hall	57	0.36	5.18	12.14	17.68	8.57	26.27	2.27	0.89	0.10
Western Park	48	0.13	1.27	2.34	3.74	4.03	7.75	0.92	0.43	0.05
Birmingham :—										
Central	60	0.33	4.56	14.58	19.47	12.14	31.65	3.65	1.81	0.28
West Heath	63	0.10	0.99	3.04	4.13	6.12	10.28	1.55	0.76	0.18
Bournville :—										
Village	75	0.08	1.89	2.09	4.06	5.76	9.84	1.07	0.64	0.03
Works	75	0.13	2.27	3.08	5.48	6.91	12.37	1.15	0.76	0.03
Cheltenham	*	*	*	*	9.49	6.73	16.22	*	*	*
Gloucester	71	*	*	*	5.35	4.62	9.97	*	*	*
Rothamsted	59	*	1.35	2.29	3.64	7.14	10.79	*	*	*
Garston, Watford	75	0.13	2.34	1.55	4.02	9.93	13.95	1.76	1.02	0.05
London :—										
Archbishop's Park	45	0.33	3.96	6.12	10.41	9.03	19.43	2.96	1.17	0.35
Finsbury Park	53	0.38	2.98	7.50	10.86	12.81	23.64	2.68	1.45	0.15
Golden Lane	46	0.31	7.06	10.48	17.85	14.69	32.56	3.52	2.47	0.51
Kew Observat'y 'A'	53	0.31	2.27	3.29	5.87	6.72	12.55	1.86	0.99	0.13
Kew Observat'y 'B'	66	0.31	2.30	3.44	6.05	8.95	14.97	2.32	1.40	0.15
Ravenscourt Park	48	0.31	2.70	7.25	10.26	18.42	28.69	5.75	0.94	0.15
S. Kensington (M.O.)	40	0.36	3.47	7.16	10.99	8.03	19.02	2.09	1.53	0.15
Southwark Park	51	0.69	5.05	9.07	14.81	8.46	23.26	2.68	1.25	0.28
Victoria Park	48	0.28	4.03	8.10	12.41	7.39	19.84	2.16	0.94	0.20
Wandsw'th Common	45	0.20	2.42	4.64	7.26	6.83	14.10	1.66	1.02	0.15
Westminster	51	0.43	5.86	7.70	13.99	10.90	24.91	2.32	1.35	0.05
Cardiff	96	0.15	3.19	4.16	7.50	10.63	18.16	2.16	2.62	0.05

* NOT DETERMINED.

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Department of Scientific and Industrial Research.

TABLE I. VITAL STATISTICS OF WHOLE DISTRICT DURING 1930 AND PREVIOUS YEARS.

COUNTY BOROUGH OF SOUTHPORT.

YEAR.	Population estimated to Middle of each year	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS <i>a</i>		NETT DEATHS BELONGING TO THE DISTRICT.		
		Un-corrected Number		Rate	Number *	Rate	of Non-residents registered in the District	of Resi-dents not registered in the District	Under 1 Year of Age.		At all Ages.
		3	4						Number *	Rate per 1,000 Nett Births	
1	2			5	6	7	8	9	10	11	12 13
1920	70,000	1259	1261	17.26	915	13.07	81	121	68	54	945 13.50
1921	71,900	1120	1106	15.38	894	12.43	71	97	77	70	920 12.80
1922	72,020	1023	1028	14.27	940	13.05	79	114	58	56	975 13.54
1923	72,410	1012	996	13.76	940	12.98	69	106	65	65	977 13.49
1924	73,650	952	934	12.90	977	13.24	78	109	59	63	1006 13.66
1925	74,260	988	973	13.10	880	11.85	56	118	59	61	937 12.62
1926	77,970	942	928	11.90	878	11.26	72	124	58	62	930 11.93
1927	78,670	973	958	12.18	1002	12.64	64	130	46	48	1067 13.56
1928	79,290	959	957	11.54	1002	12.64	72	132	69	75	1044 13.17
1929	80,040	929	896	11.07	1073	13.41	86	179	65	73	1146 14.32
1930	80,700	921	890	11.03	1035	12.82	72	165	66	74	1101 13.64

Z Including deaths in the Borough Isolation Hospital in the West Lancashire Rural District.

* In Column 6 are included the whole of the deaths registered during the year as having actually occurred within the district, military deaths excepted.

In Column 12 is entered the number in Column 6, corrected by subtraction of the number in Column 8 and by the addition of the number in Column 9. Deaths in Column 10 are similarly corrected by subtraction of the deaths under 1, included in the number given in Column 8, and by addition of the deaths under 1 included in the number given in Column 9.

(a) "Transferable Deaths" are deaths of persons who, having a fixed or usual residence in England or Wales, die in a district other than that in which they resided.

(b) See remarks, Table III.

The following Special Cases arise as to Transferable Deaths:—

(1) Persons dying in Institutions for the sick or infirm, such as hospitals, lunatic asylums, workhouses, and nursing homes (but not almshouses) have been regarded as residents of the district in which they had a fixed or usual residence at the time of admission. If the person dying in an Institution had no fixed residence at the time of admission the death is not transferable.

(2) The deaths of infants born and dying within a year of birth in an Institution to which the mother was admitted for her confinement have been referred to the district of fixed or usual residence of the parent.

(3) Deaths from Violence have been referred (a) to the district of residence, under the general rule; (b) if this district is unknown, or the deceased had no fixed abode, to the district where the accident occurred, if known; (c) failing this, to the district where death occurred, if known; and (d) failing this, to the district where the body was found.

Census		1911	1921
Total population at all ages	69,643	—	71,900
Number of inhabited houses	15,676	—	16,314
Average number of persons per house	4.44	—	4.41
Area of District in acres (land and inland water)	9,426	—	9,426



TABLE II. CASES

NOTIFIABLE DISEASE.	NUMBER		
	At all Ages.	Under 1	1 to 5.
Small-pox	—	—	—
Cholera (C) Plague (P)	—	—	—
Diphtheria (including Membranous Croup)	205	—	25
Erysipelas	49	1	2
Scarlet Fever	269	3	50
Typhus Fever	—	—	—
Enteric Fever	2	—	—
Para-Typhoid Fever	1	—	—
Relapsing Fever (R) Continued Fever (C)	—	—	—
Puerperal Fever	4	—	—
Puerperal Pyrexia	11	—	—
Tuberculous Meningitis	—	—	—
Poliomyelitis	—	—	—
Pulmonary Tuberculosis	69	—	2
Other forms of Tuberculosis	24	—	8
Chicken Pox	295	5	81
Measles	889	17	230
German Measles	30	1	6
Whooping Cough	280	11	94
Ophthalmia Neonatorum	8	8	—
Pneumonia	105	5	23
Influenzal Pneumonia	16	1	1
Dysentery Amoebic	—	—	—
Malaria	—	—	—
Encephalitis Lethargica	1	—	—
Cerebro Spinal Meningitis	1	—	—
Septic Meningitis	—	—	—
Totals	2259	52	522

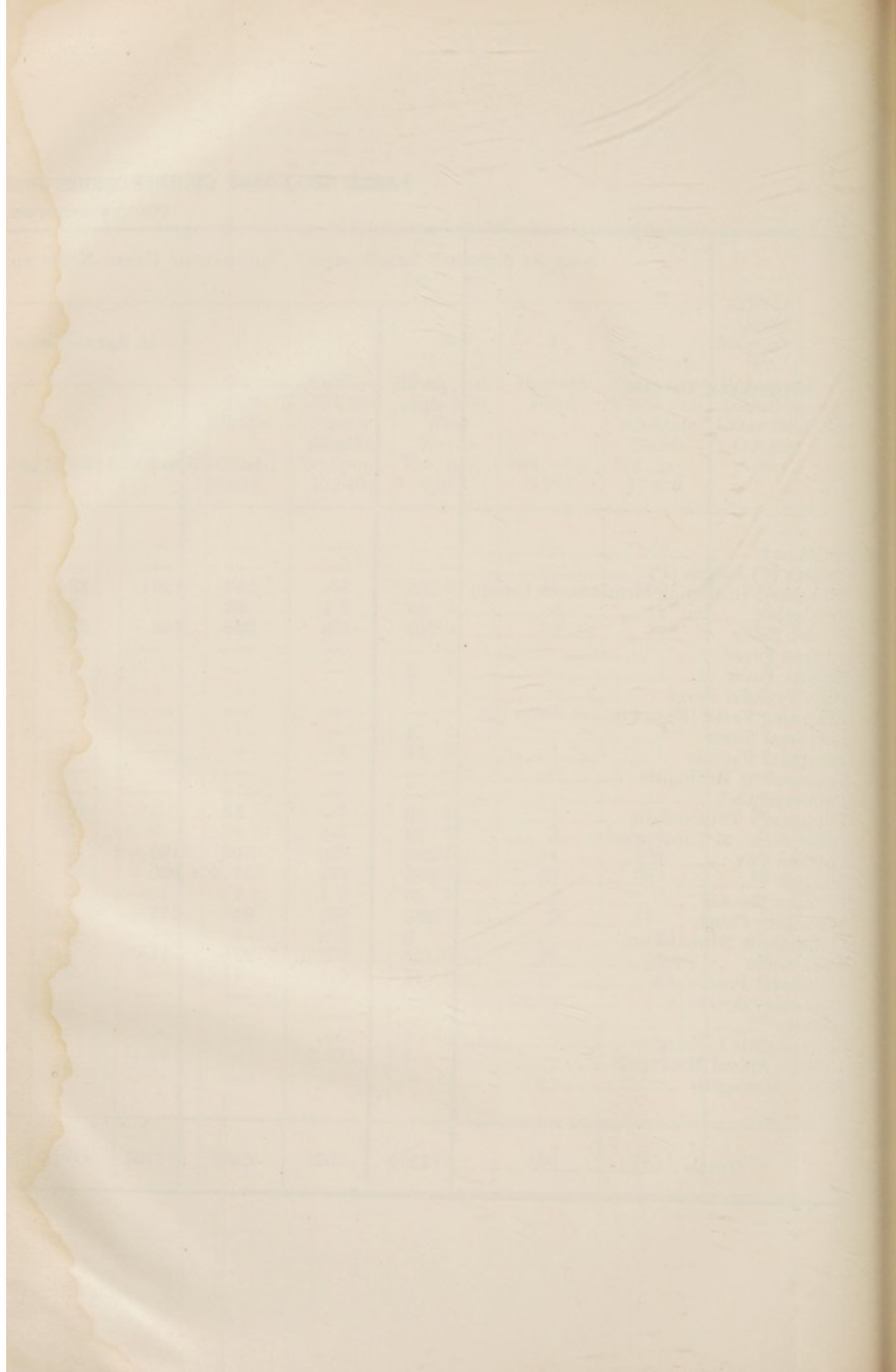


TABLE III. CAUSES OF, AND AGES AT, DEATH DURING THE YEAR 1930.
COUNTY BOROUGH OF SOUTHPORT.

CAUSES OF DEATH.	NET DEATHS AT THE SPECIFIED AGES OF "RESIDENTS" WHETHER OCCURRING WITHIN OR WITHOUT THE DISTRICT (a).								TOTAL DEATHS OF "RESIDENTS" or "NON-RESIDENTS" IN INSTITUTIONS IN THE DISTRICT (b)	
	All ages	Under 1 year	1 and 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		
1	2	3	4	5	6	7	8	9	10	11
All Causes	1066	62	6	7	23	36	109	260	563	—
	35	4	—	—	—	1	6	12	12	—
1—Enteric Fever	2	—	—	—	—	1	—	1	—	—
2—Small-pox	—	—	—	—	—	—	—	—	—	—
3—Measles	2	1	1	—	—	—	—	—	—	—
4—Scarlet Fever	3	—	1	—	2	—	—	—	—	—
5—Whooping Cough	3	3	—	—	—	—	—	—	—	—
6—Diphtheria and Croup	6	—	—	2	4	—	—	—	—	—
7—Influenza	9	—	—	—	—	1	3	2	3	—
8—Erysipelas	1	1	—	—	—	—	—	—	—	—
9—Phthisis (Pulmonary Tuberculosis)	60	—	—	2	1	12	27	15	3	3
10—Tuberculous Meningitis	8	—	3	2	3	—	—	—	—	3
11—Other Tuberculous Diseases	1	—	—	—	—	—	—	1	—	1
12—Cancer, malignant disease	155	—	—	—	1	—	9	68	77	17
13—Rheumatic Fever	4	—	—	—	—	1	3	—	—	—
14—Meningitis (See Note (d))	2	—	—	—	1	—	1	—	—	—
15—Organic Heart Disease	141	—	—	—	—	2	6	24	109	4
16—Bronchitis	63	1	1	—	—	—	3	10	48	1
17—Pneumonia (all Forms)	56	6	—	—	2	1	10	12	25	11
18—Other diseases of respiratory organs.	8	—	—	—	—	—	2	3	3	1
19—Diarrhoea & Enteritis (See Note (e))	3	3	—	—	—	—	—	—	—	1
20—Appendicitis and Typhilitis	6	—	—	—	—	1	—	3	2	3
21—Cirrhosis of Liver	6	1	—	—	—	—	1	3	1	—
21a—Alcoholism	2	—	—	—	—	—	1	1	—	—
22—Nephritis and Bright's Disease	55	—	—	—	—	3	6	24	22	9
23—Puerperal Fever	3	—	—	—	—	1	2	—	—	—
24—Other Accidents and Diseases of Pregnancy and Parturition	7	—	—	—	—	2	5	—	—	6
25—Congenital Debility and Malformation, including Premature Birth	42	42	—	—	—	—	—	—	—	13
26—Violent Deaths, excluding Suicide	30	2	—	—	6	3	9	5	5	18
27—Suicide	9	—	—	—	—	1	2	5	1	2
28—Other Defined Diseases	410	6	—	1	3	7	24	94	275	46
29—Diseases ill-defined or unknown	4	—	—	—	—	1	1	1	1	—
	1101	66	6	7	23	37	115	272	575	139

NOTES TO TABLE III.

- (a) All "Transferable Deaths" of residents, i.e., of persons resident in the District who have died outside it, are *included* with the other deaths in columns 2-10. Transferable deaths of non-residents, i.e., of persons resident elsewhere in England and Wales who have died in the District, are in like manner *excluded* from these columns. For the precise meaning of the term "transferable deaths" see footnote to Table I. The total deaths in column 2 of Table III equal the figures for the year in column 12 of Table I.
- (b) All deaths occurring in institutions for the sick and infirm situated within the District, whether of residents or of non-residents, are entered in the last column of Table III.
- (c) All deaths certified by registered Medical Practitioners and all Inquest cases are classed as "Certified"; all other deaths are regarded as "Uncertified."
- (d) Exclusive of "Tuberculous Meningitis" but inclusive of Cerebro-Spinal Meningitis.
- (e) Title 19 has been used for deaths from Diarrhoea and Enteritis at all ages. (In the "Short List," deaths from Diarrhoea and Enteritis under 2 years are included under Title 19; those at 2 years and over being placed under Title 28).

NOTES TO TABLE IV.

- (a) The total in the last column of Table IV. equals the total in column 10 of Table I. and in column 3 of Table III.
- (b) Under Abdominal Tuberculosis are included deaths from Tuberculous Peritonitis and Enteritis and from Tabes Mesenterica.
- (c) The total deaths from Congenital Malformations, Premature Birth, Atrophy, Debility and Marasmus, equal the total in Table III under the heading Congenital Debility and Malformation including Premature Birth.
- (d) For references to the meanings of any other headings, *see* notes attached to Table III.

In recording the facts under the various headings of Tables I, II, III and IV., attention has been given to the notes on the Tables.

GEO. C. BARNES,
Medical Officer of Health.

TABLE V.

Showing the total number of Cases of Infectious Disease notified in the Borough, and the Deaths resulting therefrom, during the last 10 years (1921—1930).
It includes the Deaths which occurred both in the Borough, and in the Borough Infectious Diseases Hospital (outside the Borough).

	NUMBER OF CASES OF INFECTIOUS DISEASE NOTIFIED										DEATHS FROM INFECTIOUS DISEASE.											Total Deaths during 10 years 1921 to 1930	Case Morality (of all cases) in Borough and Borough Hospital for 10 years, 1921 to 1930.
	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930	Total Cases for 10 years 1921 to 1930	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930		
Scarlet Fever	129	168	101	107	132	122	144	123	234	269	1529	—	2	—	—	—	1	—	—	2	3	8	0.52%
Small-pox	—	—	—	—	—	—	65	—	—	—	65	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria	109	42	37	35	44	35	49	71	168	205	795	5	1	1	—	2	1	—	1	3	6	20	2.52%
Typhus	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Typhoid Fever	13	2	7	16	4	5	7	1	1	2	58	3	—	—	1	—	1	1	—	1	2	9	15.5 %
Para-Typhoid Fever	1	—	2	1	—	—	1	5	2	1	13	—	—	1	—	—	—	—	—	—	—	1	7.69%
Continued Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	23	30	22	36	36	34	21	29	54	49	334	1	—	3	—	1	1	—	1	1	1	9	2.69%
Puerperal Fever	5	1	1	3	1	2	1	—	3	4	21	1	—	—	1	1	—	—	—	—	—	3	14.28%
Puerperal Pyrexia	—	—	—	—	—	—	1	6	6	11	24	—	—	—	—	—	—	—	—	—	—	—	—
Cerebro-Spinal Meningitis	—	2	1	—	—	—	—	1	—	1	5	—	—	—	—	—	—	—	—	—	1	1	20.0 %
Poliomyelitis	1	1	1	—	—	2	1	1	4	—	11	—	—	—	—	—	—	—	—	—	—	—	—
Pulmonary Tuberculosis	80	104	87	101	74	83	73	82	59	69	812	42	43	52	65	44	36	41	39	44	60	466	57.39%
Other forms of Tuberculosis	34	23	32	34	36	28	24	33	27	24	295	10	8	16	13	10	8	7	10	7	9	98	33.22%
Ophthalmia Neonatorum	12	7	6	11	2	3	5	3	12	8	69	—	—	—	—	—	—	—	—	—	—	—	—
*Chicken Pox	412	119	307	249	372	391	348	434	430	295	3357	—	—	—	—	—	—	—	—	—	—	—	—
*Measles	890	170	1064	288	672	887	401	674	581	889	6516	2	1	9	2	3	5	2	2	3	2	31	0.47%
German Measles	53	26	16	23	187	45	26	27	50	30	483	—	—	—	—	—	—	—	—	—	—	—	—
*Whooping Cough	293	208	121	292	240	418	118	310	149	280	2429	5	9	—	4	2	5	3	9	1	3	41	1.69%

The following additional notifications were received :—Pneumonia (all forms) 121 ; Encephalitis Lethargica, 1.

*Chicken Pox, Measles and Whooping Cough were made compulsorily notifiable in Southport in May, 1902, and Cerebro-Spinal Meningitis, Poliomyelitis and Ophthalmia Neonatorum in February, 1912.
Measles, German Measles, and Whooping Cough :—Only the first case in a house in two months is notifiable.

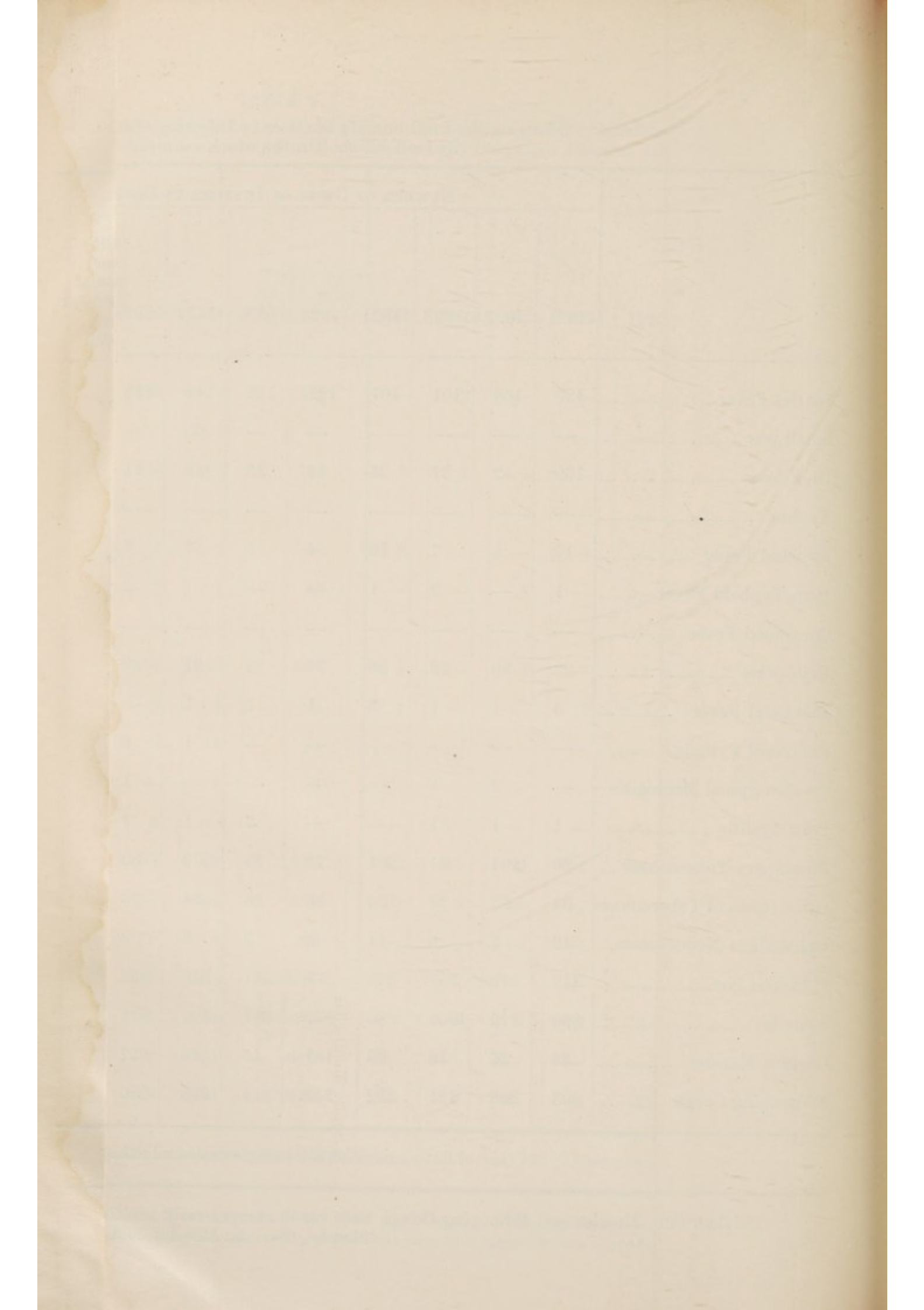


TABLE VI.
Cases of certain Infectious Disease treated in the Borough Infectious Diseases Hospitals during the last 10 years, 1921 to 1930.

	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930	Totals for the Ten years, 1921 to 1930.
Scarlet Fever	94	125	84	87	102	91	114	111	203 ^r	229 ^c	1250
Small-pox	—	—	—	—	—	—	45 ^a	—	—	—	45
Diphtheria	84 ^c	34	29	29	39	31	46	68	168 ^r	296 ^c	734
Typhoid Fever	8	—	1	12	—	3	5	1	1	3 ^a	34
Para Typhoid Fever	—	—	—	—	—	—	1	3	1	1	6
Erysipelas	5	4	3	5	4	3	5	5	6	16	56
Puerperal Fever	4	—	—	—	—	1	—	1 ^c	5 ^r	9 ^a	20
Measles	17	2	5	3	20	6	16	14	11	18	112
German Measles	1	—	—	—	7	—	—	2	—	—	10
Chicken Pox	—	—	—	1	9	5	1	8	5	5	34
Cerebro-Spinal Meningitis	—	—	—	—	—	—	—	1	—	1	2
Ophthalmia Neonatorum	—	3	—	—	—	—	—	—	—	—	3
Totals	213	168	122	137	181	140	233	214	400	498	2206
Miscellaneous Cases	20	10	9	22	14	7	8	29	41 ^r	50	210
Pneumonia	—	1	1	—	2	3	—	7	9	9	32
Poliomyelitis	—	—	—	—	—	1	—	—	—	—	1
Puerperal Pyrexia	—	—	—	—	—	—	—	3	1	6	10
T.B. Meningitis	—	—	—	—	—	1	—	1	1	—	3
Tuberculosis	50 ^b	48 ^b	52 ^b	50 ^b	61 ^b	46 ^b	54 ^b	96 ^b	66 ^b	76 ^b	599
Totals	283	227	184	209	258	198	295	350	518	639	3161

^d Including cases from outside the District :—
^e Including two imported cases.
^f SMALL-POX.—In addition to the above, there were 24 cases admitted to Sparrow Hall, making a Total of 69 cases.

^a Total of 69 cases.
^b Including 4 cases from outside the Borough.
^c From outside the Borough.
^d From outside the Borough.—Diphtheria 24; Scarlet Fever 3; Puerperal Fever 3; Mumps 1.
^e From outside the Borough.—Diphtheria 11; Typhoid Fever 1 (Hospital Nurse).

DEATHS AMONG THE ABOVE.
 Totals for the
 Ten years,
 1921 to 1930.

	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930	Totals for the Ten years, 1921 to 1930.
Scarlet Fever	—	1	1	—	1	1	—	—	—	2	6
Small-pox	—	—	—	—	—	—	—	—	—	—	—
Diphtheria	5 ^a	—	2 ^a	—	2	2 ^a	—	1	4 ^a	6	22
Typhoid Fever	1	—	1	—	1	—	—	1	2	6	6
Puerperal Fever	1	—	—	—	—	—	—	—	4 ^b	5	5
Measles	—	—	1	—	—	—	—	—	—	—	1
Whooping Cough	—	—	—	—	—	1	—	—	—	—	1
Marasmus	—	—	—	—	—	—	—	1	—	1	2
Tuberculosis	5	6 ^b	15	8 ^b	9	10	9	12	7	9	90
Pneumonia	—	—	—	—	1	1	—	—	3	1	6
Erysipelas	1	—	—	—	—	—	—	—	—	1	2
Cerebro Spinal Meningitis	—	—	—	—	—	—	—	—	1	1	1
Cerebral Haemorrhage	—	—	—	—	—	1	—	—	—	—	1
Mal Assimilation	—	—	—	—	—	—	—	—	1	—	1
Tuberculous Meningitis	—	—	1	—	—	—	—	1	1	—	3
Cardiac Failure	—	—	—	—	—	—	—	—	1	—	1
Capillary Bronchitis	—	—	—	—	—	1	—	—	1	—	2
Septic Meningitis	—	—	—	—	—	—	—	—	—	—	1
Encephalitis Lethargica	—	—	1	—	—	—	—	—	—	—	2
Totals	13	8	20	10	13	18	9	15	20	27	153

^a Including one non-resident of Southport.
^b Including non-residents of Southport; 1 in 1922; 1 in 1924; and 2 in 1930.

NOTE.—The figures given in this Table, except in columns distinguished as "native" or "local," are gross figures, without correction, and on that account may in some cases be found to differ from the figures given in Tables I to IV., which are corrected in accordance with the requirements of the Ministry of Health, as stated in the notes appended to them.

(For the years 1871—1911 see Report for year 1915).

TABLE									
PART I					PART II				
SECTION A					SECTION B				
SUBSECTION 1					SUBSECTION 2				
ITEM 1					ITEM 2				
1	2	3	4	5	6	7	8	9	10
11	12	13	14	15	16	17	18	19	20
21	22	23	24	25	26	27	28	29	30
31	32	33	34	35	36	37	38	39	40
41	42	43	44	45	46	47	48	49	50
51	52	53	54	55	56	57	58	59	60
61	62	63	64	65	66	67	68	69	70
71	72	73	74	75	76	77	78	79	80
81	82	83	84	85	86	87	88	89	90
91	92	93	94	95	96	97	98	99	100
101	102	103	104	105	106	107	108	109	110
111	112	113	114	115	116	117	118	119	120
121	122	123	124	125	126	127	128	129	130
131	132	133	134	135	136	137	138	139	140
141	142	143	144	145	146	147	148	149	150
151	152	153	154	155	156	157	158	159	160
161	162	163	164	165	166	167	168	169	170
171	172	173	174	175	176	177	178	179	180
181	182	183	184	185	186	187	188	189	190
191	192	193	194	195	196	197	198	199	200
201	202	203	204	205	206	207	208	209	210
211	212	213	214	215	216	217	218	219	220
221	222	223	224	225	226	227	228	229	230
231	232	233	234	235	236	237	238	239	240
241	242	243	244	245	246	247	248	249	250
251	252	253	254	255	256	257	258	259	260
261	262	263	264	265	266	267	268	269	270
271	272	273	274	275	276	277	278	279	280
281	282	283	284	285	286	287	288	289	290
291	292	293	294	295	296	297	298	299	300
301	302	303	304	305	306	307	308	309	310
311	312	313	314	315	316	317	318	319	320
321	322	323	324	325	326	327	328	329	330
331	332	333	334	335	336	337	338	339	340
341	342	343	344	345	346	347	348	349	350
351	352	353	354	355	356	357	358	359	360
361	362	363	364	365	366	367	368	369	370
371	372	373	374	375	376	377	378	379	380
381	382	383	384	385	386	387	388	389	390
391	392	393	394	395	396	397	398	399	400
401	402	403	404	405	406	407	408	409	410
411	412	413	414	415	416	417	418	419	420
421	422	423	424	425	426	427	428	429	430
431	432	433	434	435	436	437	438	439	440
441	442	443	444	445	446	447	448	449	450
451	452	453	454	455	456	457	458	459	460
461	462	463	464	465	466	467	468	469	470
471	472	473	474	475	476	477	478	479	480
481	482	483	484	485	486	487	488	489	490
491	492	493	494	495	496	497	498	499	500
501	502	503	504	505	506	507	508	509	510
511	512	513	514	515	516	517	518	519	520
521	522	523	524	525	526	527	528	529	530
531	532	533	534	535	536	537	538	539	540
541	542	543	544	545	546	547	548	549	550
551	552	553	554	555	556	557	558	559	560
561	562	563	564	565	566	567	568	569	570
571	572	573	574	575	576	577	578	579	580
581	582	583	584	585	586	587	588	589	590
591	592	593	594	595	596	597	598	599	600
601	602	603	604	605	606	607	608	609	610
611	612	613	614	615	616	617	618	619	620
621	622	623	624	625	626	627	628	629	630
631	632	633	634	635	636	637	638	639	640
641	642	643	644	645	646	647	648	649	650
651	652	653	654	655	656	657	658	659	660
661	662	663	664	665	666	667	668	669	670
671	672	673	674	675	676	677	678	679	680
681	682	683	684	685	686	687	688	689	690
691	692	693	694	695	696	697	698	699	700
701	702	703	704	705	706	707	708	709	710
711	712	713	714	715	716	717	718	719	720
721	722	723	724	725	726	727	728	729	730
731	732	733	734	735	736	737	738	739	740
741	742	743	744	745	746	747	748	749	750
751	752	753	754	755	756	757	758	759	760
761	762	763	764	765	766	767	768	769	770
771	772	773	774	775	776	777	778	779	780
781	782	783	784	785	786	787	788	789	790
791	792	793	794	795	796	797	798	799	800
801	802	803	804	805	806	807	808	809	810
811	812	813	814	815	816	817	818	819	820
821	822	823	824	825	826	827	828	829	830
831	832	833	834	835	836	837	838	839	840
841	842	843	844	845	846	847	848	849	850
851	852	853	854	855	856	857	858	859	860
861	862	863	864	865	866	867	868	869	870
871	872	873	874	875	876	877	878	879	880
881	882	883	884	885	886	887	888	889	890
891	892	893	894	895	896	897	898	899	900
901	902	903	904	905	906	907	908	909	910
911	912	913	914	915	916	917	918	919	920
921	922	923	924	925	926	927	928	929	930
931	932	933	934	935	936	937	938	939	940
941	942	943	944	945	946	947	948	949	950
951	952	953	954	955	956	957	958	959	960
961	962	963	964	965	966	967	968	969	970
971	972	973	974	975	976	977	978	979	980
981	982	983	984	985	986	987	988	989	990
991	992	993	994	995	996	997	998	999	1000

TABLE IX.—VENEREAL DISEASES.

RETURN relating to all persons who were treated at the Treatment Centre at Southport during the year ended the 31st December, 1930.

	Syphilis.		Soft Chancre.		Gonorrhoea.		Conditions other than Venereal.		Total.	
	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females
1. Number of cases which (a) at the beginning of the year under report were under treatment or observation for (b) had been marked off in a previous year as having ceased to attend or as transferred to other Centres, and which returned to the Treatment Centre during the year under report suffering from the same infection.	124	98	—	—	261	111	49	67	434	276
TOTAL—Items 1 (a) and 1 (b)	126	99	—	—	266	113	50	69	442	281
2. (a) Number of cases dealt with at the Treatment Centre during the year for the first time with infections of— (i) less than one year standing (ii) more than one year standing	20	18	1	—	95	37	23	21	139	76
	6	5	—	—	8	2	3	4	17	11
TOTAL—Items 1 (a), 1 (b) and 2 (a)	152	122	1	—	369	152	76	94	598	368
2. (b) Number of cases included in Item 2(a) known to have received previous treatment at other Centres for the same infection	1	2	—	—	8	3	—	—	9	5
3. Number of cases which ceased to attend— (a) before completing the first course of treatment for (b) after one or more courses but before completion of treatment for (c) after completion of treatment, but before final tests as to cure of	2	1	—	—	5	2	—	—	7	3
	12	—	—	—	—	—	—	—	12	—
	28	4	—	—	31	22	—	—	59	26
4. Number of cases transferred to other Treatment Centres after treatment for	11	7	—	—	21	12	—	—	32	19
5. Number of cases discharged after completion of treatment and observations for	25	7	—	—	38	37	66	87	129	131
6. Number of cases which, at the end of the year under report, were under treatment or observation for	74	103	1	—	274	79	10	7	359	189
TOTAL—Items 3, 4, 5 and 6	152	122	1	—	369	152	76	94	598	368
7. Out-patient attendances— (a) For individual attention by the Medical Officer (b) For intermediate treatment, e.g., irrigation, dressings, etc.	1824	894	2	—	1692	538	120	147	3638	1579
	31	522	—	—	1801	2060	—	99	1832	2711
TOTAL ATTENDANCES	1855	1416	2	—	3493	2628	120	246	5470	4290
8. Aggregate number of "In-patient days" of treatment given to persons who were suffering from	117	395	6	—	131	852	60	27	314	1274
9. Examinations of Pathological material :—										For Wassermann Reaction.
(a) Specimens which were examined at, and by the Medical Officer of, the Treatment Centre			Spirochetes.		For detection of		Other Organisms.			
					Gonococci.				334	
(b) Specimens from persons attending at the Treatment Centre which were sent for examination to an approved laboratory			1		No record kept.		569 Smears 44 Urines		4 C.S.F.'s	

TABLE IX (Continued).—VENEREAL DISEASES.

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

Name of County or County Borough (or Country in the case of persons residing elsewhere than in England and Wales) to be inserted in these headings.	Wigan.	Leeds.	Salford.	Lancashire.	Southport.	TOTAL.
A. Number of cases from each area dealt with during the year for the first time and found to be suffering from :—						
Syphilis	1	—	—	4	44	49
Soft Chancre	—	—	—	—	1	1
Gonorrhoea	2	2	2	26	110	142
Conditions other than venereal	1	—	—	4	46	51
TOTAL	4	2	2	34	201	243
B. Total number of attendances of all patients residing in each area	8	7	8	709	9028	9760
C. Aggregate number of "In-patient days" of all patients residing in each area	172	—	—	391	1025	1588
D. Number of doses of arsenobenzol compounds given in the :— 1. Out-patient Clinic 2. In-patient Dept. to patients residing in each area.	2	—	—	110	1015	1127
E. Names of arsenobenzol compounds used in the treatment of syphilis and the usual initial doses.	—	—	—	32	91	123
F. Amount and kind of treatment usually administered to a case of syphilis of each of the types usually dealt with at the Treatment Centre.	<p>N.A.B. 45-75 ; Sulfarsenol, Silber Salvarsan 1 gr.—3 grm. Neo Trepol, Spirellen Stabilarsan, Bismuth Salts, and Bismostol, Kar Suphan—Neo Khars.</p> <p>PRIMARY. One course of Arsenical Compounds to a total of 4 grams, nine injections of Hg or Bismostol (each injection=1 grm.). One month on Mist KI ; two months on Hg in the form of pills. Then a second course of arsenical compounds total of 4 grms. This is followed by KI and Hg for three months. Periodic exams. and Wassermann tests, and continuance of Hg extending over 2 years. SECONDARY and LATE PRIMARY. Same course as above except 3 courses are given over a period of 16 months independently of what Wassermann reaction shows—a total of 12 grms. of arsenobenzol compounds. Alternating with Hg by the mouth, or by injection. Patients are then kept under observation (when possible) for two years. TERTIARY AND PARA-SYPHILITIC. Patients are treated with Silber Salvarsan in small doses extending over a long period, weekly injections for 3 or 4 months then KI for some months, then the Silber Salvarsan course repeated.</p>					
G. Nature of tests applied in deciding as to discharge of patients referred to in Item 5 on previous page.	<p>SYPHILIS. After treatment and being under observation for at least 2 years, more frequently 3 years, absence of all clinical manifestations, and negative tests for at least 12 months, after provocative tests.</p> <p>SOFT CHANCERE. All sores healed. Under observation, examinations, and periodic 12 months tests to avoid possibility of Syphilis.</p> <p>GONORRHOEA.—FEMALES. Examinations, Cultures, and smears taken and provocative tests given every two months after completion of treatment for 12 months and longer if possible. MALES. Discharges ceased, smears from follicles, prostate, vesicles, and urine deposits before and after provocative tests show absence of G.c. and pus, re-examination 2 months after completion of curative treatment. Urethroscope examination must show no thickening of mucous membrane of Urethra or tendency to abscess. In very chronic or Rheumatic cases Complement Fixation tests are used as control of treatment.</p>					

(Signed) HENRY BARDSLEY, M.R.C.S., L.R.C.P.,
Medical Officer of the Treatment Centre.

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