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1925.

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# REPORT

ON THE

## Health of the County Borough of Wallasey,

AND ON THE WORK OF

### School Medical Inspection

FOR THE YEAR 1925,

BY

**T. W. NAYLOR BARLOW,**

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MEDICAL OFFICER OF HEALTH,

MEDICAL SUPERINTENDENT OF THE CORPORATION  
INFECTIOUS DISEASES HOSPITAL,

ADMINISTRATIVE TUBERCULOSIS OFFICER,

AND

SCHOOL MEDICAL OFFICER.

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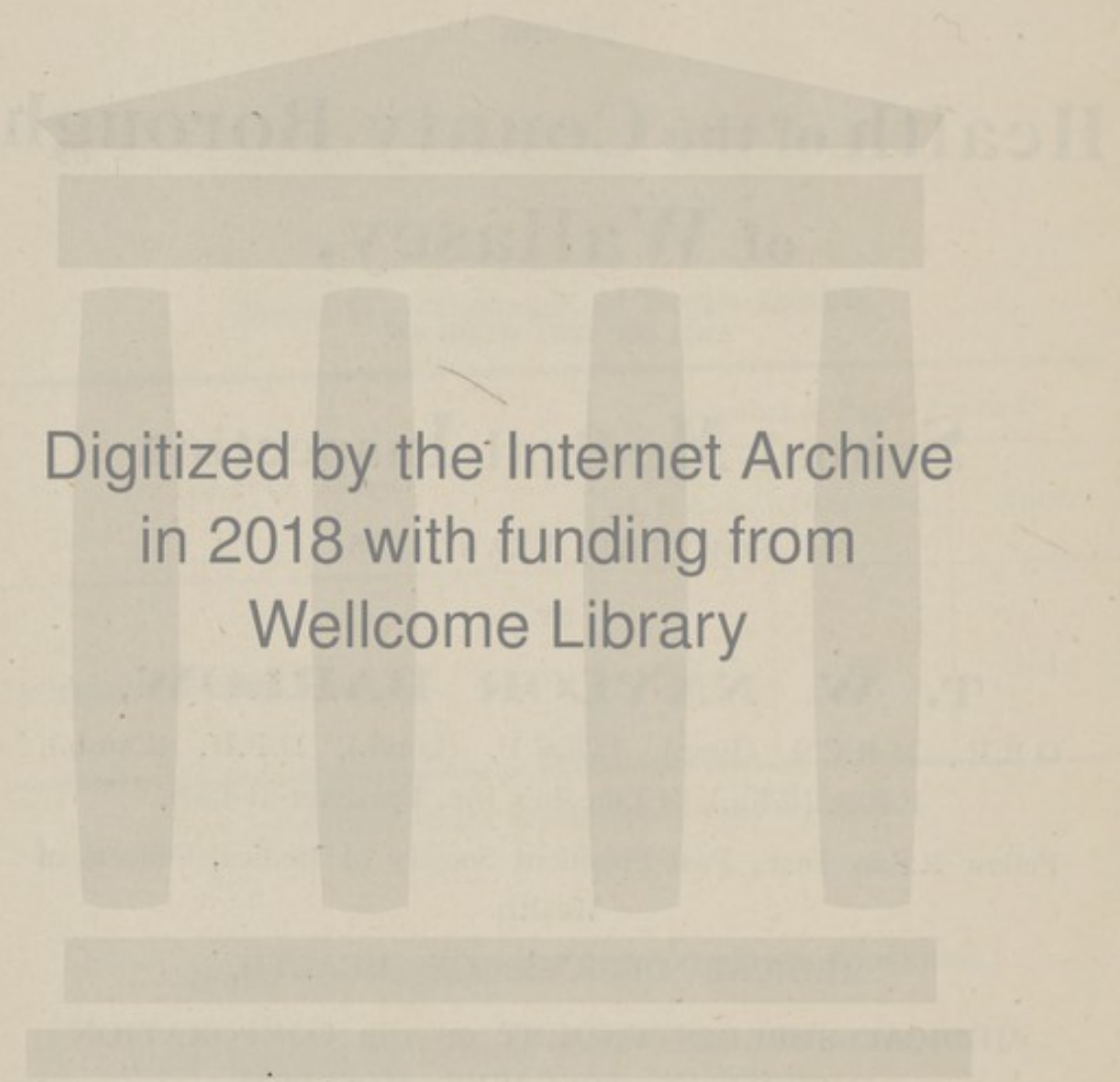
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1926.

1925

# REPORT



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# HEALTH COMMITTEE

OF THE  
WALLASEY TOWN COUNCIL  
TO NOVEMBER 9TH, 1925.

## Chairman :

MR. COUNCILLOR D. P. CHARLESWORTH.

## Vice-Chairman :

MR. ALDERMAN J. URMSON.

MR. ALDERMAN T. HASLAM.

MR. ALDERMAN A. QUINN.

## Councillors :

MR. T. HILL.

MR. N. A. LARSEN.

MRS. F. G. MCFALL.

MR. W. R. MEGGESON.

MR. G. W. RUSSELL.

MR. L. S. TAYLOR, F.A.I.

MR. A. B. TODD.

MR. E. H. WRIGHT.

AND

HIS WORSHIP THE MAYOR

(MR. ALDERMAN R. RAWLINSON, J.P.).

# MATERNITY AND CHILD WELFARE COMMITTEE

TO NOVEMBER 9TH, 1925.

## Chairman :

MR. ALDERMAN J. URMSON.

## Vice-Chairman :

MRS. COUNCILLOR A. SIDDALL.

## Councillors :

MR. F. S. ATKIN.

MR. W. H. BAKER

MR. H. J. HALL.

MRS. F. G. MCFALL.

MR. W. R. MEGGESON.

MR. A. W. V. SCOINS.

MR. F. H. THORNTON, F.C.A.

MR. A. B. TODD.

AND

MRS. BOWER.

MRS. MILROY.

MRS. THOMSON.

AND THE MAYOR.

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**STATISTICAL SUMMARY,**  
**1925.**

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Area in Acres ... ..	3,408
Census Population, June, 1921 ... ..	90,809
Estimated Population, June, 1921 (Registrar General's) ...	91,720
Number of Inhabited Houses, December 31st ... ..	20,765
Number of Empty Houses, December 31st ... ..	363
Rateable Value ... ..	£677,519
One Penny in the £ yields for General District Purposes...	£2,713
Number of Persons per house at time of 1921 Census ...	4.59
Registrar-General's standardizing factor for Age and Sex distribution in 1925... ..	.989
Birth-rate per 1,000 persons living ... ..	14.05
Death-rate per 1,000 persons living ... ..	11.3
Infant Mortality per 1,000 Births ... ..	60.5
Percentage of Uncertified Deaths ... ..	—
Total Deaths from Diarrhœa and Enteritis under 2 years	} 7
(under 1 year 7) ... ..	
(1 to 2 years —) ... ..	
Diarrhœa (including Enteritis) Mortality (under 1 year) per 1,000 Births ... ..	5.4
Zymotic Death-rate (excluding Diarrhœa) per 1,000 persons living ... ..	0.20
Phthisis Death-rate per 1,000 persons living ... ..	0.80
Respiratory Death-rate per 1,000 persons living (ex- cluding Phthisis) ... ..	1.7

Public Health Department,

May, 1926.

To the Mayor, Aldermen and Councillors of the  
County Borough of Wallasey.

Mr. Mayor, Ladies and Gentlemen,

I have the honour to present to you my Eighteenth Annual Report on the health, and the social conditions having a bearing on the health, of the Borough. This Report is the first of the Five-yearly Review Reports required by the Ministry of Health.

The Review necessarily is largely statistical in character. At first sight some of the tables may seem to be superfluous, but it is my experience that no statistical information is superfluous in regard to health matters, for the Medical Officer of Health is frequently, and often quite unexpectedly, called upon to supply information on various points to different enquirers and, occasionally, also in connection with local enquiries in which his own Department is not directly concerned. It is necessary, therefore, to gather all possible information bearing on the health of the community, and the quinquennial Report will be found a convenient way of recording that information for future reference.

During the last five years the principal developments in the Service in Wallasey have been the establishment of the Ante-Natal Clinic, the Municipal Maternity Home, the Orthopædics Clinic, and the opening of the Cheshire Joint Sanatorium, in which Wallasey is one of the co-partners. Information with regard to these will be found in the body of the Report, and they have already proved their extreme usefulness.

In these times of heavy taxation and heavy rates one hears, especially at Election times, criticisms of Municipal expenditure; and allegations of extravagance are not infrequent. It may, therefore, be not out of place to point out one item of expenditure which could quite easily be materially reduced if the assistance and co-operation of the ratepayers themselves could be obtained. I refer to the collection and disposal of house refuse. If ratepayers would but burn on the kitchen fire all their household refuse capable of being burned, not only would their own fuel bills be reduced, but their rate

bills also. The total expenditure of the Health Committee for all its activities, including Baths, Cemetery, Foreshore Bathing, Weights and Measures (not one of which is directly concerned with health matters), and also including the expenditure on Infectious Hospitals, Sanatoria, Maternity and Child Welfare work, for 1924-25 was £44,376, to which must be added the expenditure on the School Medical Service, namely, £1,730—a total of £46,106. One item alone of environmental hygiene, namely, the emptying of dustbins and ash-pits and the destruction of refuse, cost £21,425, or nearly one-half of the total expenditure of that Committee.

I have included in the Report some statistical information taken from the Census returns, which will be found to be very informative.

At the end of the Report will also be found my Annual Report on the Medical Inspection work carried out in connection with the various Schools of the Borough.

The work of the Health Department, as a perusal of the Report will show, covers an increasingly wide field, and demands the best efforts of a Staff highly specialized in many directions, while the resulting clerical work entails an unusual amount of care and intelligent application. I wish to express my deep appreciation of the help afforded me by my medical colleagues and by every member of the Staff, both inside and outside the Town Hall. It is a real pleasure to work with a Staff among whom there exists from highest to lowest such a fine spirit of loyalty, co-operation and camaraderie.

I should like also to thank the Chairman and Members of the Health and the Maternity and Child Welfare Committees for the kindly consideration they have invariably given to every recommendation put before them, and for the very real interest they have shown in all matters appertaining to the maintenance and improvement of the health of the community in Wallasey.

I am,

Mr. Mayor, Ladies and Gentlemen,

Your obedient Servant,

T. W. N. BARLOW,

Medical Officer of Health  
and School Medical Officer.



**WARDS.**

No. 1—New Brighton.	No. 8—South Seacombe.
„ 2—Upper Brighton.	„ 9—Somerville.
„ 3—North Liscard.	„ 10—Poulton.
„ 4—South Liscard.	„ 11—Marlowe.
„ 5—North Egremont.	„ 12—St. Hilary.
„ 6—South Egremont.	„ 13—Warren.
„ 7—North Seacombe.	„ 14—Wallasey.

NOTE.—The number of Wards was increased from 10 to 14 in 1920.

## NATURAL AND SOCIAL CONDITIONS.

AREA—The area of the Borough is 3,408 acres.

### POPULATION.

The population of the Borough at the 1921 Census was, according to the figures first published, 90,721. The Registrar-General subsequently reduced this to 89,609, and later it was further amended to 90,809. His estimates for 1922, 1923 and 1924 have all fallen below this figure. In 1925, for the first time since the Census, his estimate of the population is higher than the 1921 figure, namely, 91,720, an increase of 911 only over the Census figure.

The table below gives information on local conditions which may be unknown to the Registrar-General, and which have bearing on the question.

Registrar-General's Estimate.	Natural Increase (excess of Births over Deaths).	No. of Houses on Rate Books.	Increase in No. of Houses.	No. of New Houses Certified.
1921—90,809	631	19,503	153	243
1922—89,790	456	19,653	150	151
1923—89,990	469	19,841	188	268
1924—90,790	397	20,420	579	503
1925—91,720	236	20,765	345	457
	2,189		1,415	1,622

The population per house at the time of the Census was 4·59.

It is difficult to understand why the Registrar-General should estimate the population for 1922 to be less than 1921, especially having regard to the previous rapid growth of the population of the Borough. It will be seen from the above table that the natural increase in the population in the five years is 2,189, whereas, as above stated, the Registrar-General only gives us credit for an increase of 911. If his figures are correct there must have been considerable emigration from the town. There is, however, no evidence of that; on the other hand, there is distinct evidence of immigration.

Throughout the Report for 1925, I have, nevertheless, taken the Registrar-General's estimated population of 91,720 for the purpose of calculating all mortality statistics dependable thereon.

The following table shows the population of the Borough at each of the last five Censuses:—

1881	...	...	21,192	1911	...	...	78,504
1891	...	...	33,227	1921	...	...	90,809
1901	...	...	53,579				

For further information with regard to population, distribution of population in houses, occupations, etc., see the extracts from the Census Returns relating to Wallasey on page 144.

## **PHYSICAL FEATURES AND GENERAL CHARACTER OF THE DISTRICT.**

The Borough of Wallasey is a part of the Wirral Peninsula, and itself forms a peninsula, bounded by the River Mersey on the East, the Irish Sea on the North, Wallasey and Birkenhead Docks on the South and South-west, with a mile of flat land on the West between head of docks and sea. The ground rises from the river and also from the land side towards the middle of the district, forming a kind of backbone North and South, reaching a height of 200 feet above the sea at New Brighton, affording splendid facilities for drainage East and West of this natural ridge. New red sandstone underlies all this district, at a variable depth, with pockets of alluvium, drift clay, gravel marl and sand.

### **SOCIAL CONDITIONS.**

The Borough is mainly a residential place, a large number of the inhabitants being engaged in business in Liverpool. Some large docks, forming part of the Port of Liverpool, are situated in the Borough.

There are also in the district extensive Lairages, where imported cattle and sheep are killed.

There is no occupation which would have any particular influence on the public health.

Wallasey is the location of the largest milling industry in Britain, but with the exception of these large flour mills and one important engineering establishment, no industries of any moment employing any large number of men are established in the Borough. The building of houses has given employment in the last few years to a considerable number of men.

## **GRATUITOUS MEDICAL RELIEF.**

### **LOCAL HOSPITALS.**

There are two General Hospitals in the Borough, namely, the Victoria Central Hospital and the Wallasey Cottage Hospital. In connection with the latter there are no out-patients, and with the former surgical out-patients only.

There is also a charitable dispensary, the Medical Officer of which is also the House Surgeon to the Victoria Central Hospital, sleeps on the premises, and performs the duties of Dispensary Surgeon in a room provided by the Hospital. He also visits medical cases at their homes.

Figures in regard to the work of the out-patients' departments of the Victoria Central Hospital and the Wallasey Dispensary for the past five years, as well as in regard to Poor Law Relief, will be found in the following table.

VICTORIA CENTRAL HOSPITAL.

	OUT-PATIENTS.					Totals.	ATTENDANCES.					Totals
	1921	1922	1923	1924	1925		1921	1922	1923	1924	1925	
Dental Extractions	65	48	77	75	95	360	65	48	77	83	102	375
Ophthalmic Cases .....	417	447	514	572	561	2,511	1,114	1,300	1,486	1,539	1,890	7,329
Throat, Nose and Ear Cases .....	253	242	261	278	248	1,282	514	426	502	512	454	2,408
Gynæcological Cases	117	95	141	92	160	605	117	95	141	92	160	505
X-Ray Cases .....	541	731	930	1,131	1,551	4,884	1,195	3,159	3,514	3,905	4,228	16,001
Casualties .....	1,506	1,310	1,492	1,673	1,968	7,949	8,204	8,222	8,117	7,661	8,352	40,556
Discharged Pensioners .....	121	38	—	—	—	159	1,153	758	—	—	—	1,911

WALLASEY DISPENSARY.

	1921	1922	1923	1924	1925	Totals.
Attendances .....	6,017	8,281	5,379	5,529	7,013	32,219
No. of Visits at Homes ...	995	1,269	789	1,092	2,086	6,231

POOR LAW RELIEF.

	1921	1922	1923	1924	1925	Totals.
Admissions to—						
Institution .....	73	77	47	56	60	313
Infirmery .....	183	228	193	262	282	1,148
Sanatorium .....	72	82	73	53	56	336
Poor Law Relief Paid in Wallasey	£5,054/6/8	Outdoor £5,124/18/8 Unemployed Relief £3,258/4/8	£5,237/19/11 £915/5/-	£6,703/13/11	Ordinary £7,550/0/4 Unemployed Relief £217/1/10	£34,061/11/-

## PARKS AND OPEN SPACES.

The Borough is particularly well supplied with parks and recreation grounds, a list of which is as under.

These open spaces, taken together with the fact that the River Mersey forms one boundary, and the sea another boundary, are a factor of some importance in improving and maintaining the good health of the community, especially the younger portion of the community; but although the Borough is so comparatively well supplied with open spaces, there is still need for land on which the youth of the district can indulge in many sports and pastimes.

	Acres.	Rds.	Perches.
Belvidere Road Recreation Ground ...	1	1	13 $\frac{1}{2}$
Central Park ... ..	57	1	7
Vale Park ... ..	9	3	20 $\frac{1}{8}$
Marine Park ... ..	3	1	26
Harrison Park ... ..	50	2	9
Warren Park (Golf Links) ... ..	35	3	28
Wallasey Grange and Grounds ... ..	2	2	23
Victoria Gardens ... ..	1	3	23 $\frac{1}{4}$
Quarry Recreation Ground ... ..	1	3	23
Maddock Road Recreation Ground ... ..	0	3	9
North Seacombe Recreation Ground ... ..	2	2	23
Oakdale Recreation Ground ... ..	2	3	10 $\frac{1}{2}$
Gorse Lane Recreation Ground ... ..	3	3	38 $\frac{1}{8}$
Withens Lane Recreation Ground ... ..	2	3	24
Belvidere Recreation Ground ... ..	8	3	13 $\frac{3}{4}$
The Wallace ... ..	13	0	22 $\frac{7}{8}$
Captain's Pit Recreation Ground ... ..	2	0	3
Sandon Road Recreation Ground... ..	0	1	15
South Seacombe Playground ... ..	0	2	38
Bridle Road Playground ... ..	0	2	24 $\frac{5}{8}$
Wallasey Road Playground ... ..	0	2	4 $\frac{1}{2}$
The Breck ... ..	2	0	26
Egremont Ferry Pleasure Grounds ... ..	0	1	35 $\frac{1}{5}$
St. Hilary Gardens ... ..	0	2	39 $\frac{3}{4}$
Flynn's Piece ... ..	2	0	3
Promenade Plantations ... ..	1	2	23
Allotment Gardens, Love Lane ... ..	4	3	12 $\frac{1}{2}$
Allotment Gardens, Gorse Lane ... ..	4	2	15 $\frac{1}{2}$

## CLOSET ACCOMMODATION.

Practically every house in the Borough is provided with water-closet accommodation. In the outlying portions of the town, however, there are 15 cesspools, and one privy midden. These are emptied fortnightly. There are 35 earth closets, chiefly attached to summer camps, which are emptied twice weekly, from May to September.

## SCAVENGING.

The work of street scavenging is carried out under the direction of the Borough Engineer and Surveyor, and is efficiently done. One cannot help, however, referring to the practice of sweeping roads in dry, windy weather, without the previous precaution being taken of watering them. The result is that clouds of dust and dirt are created which, to say the least, are not conducive to the cleanliness of exposed food stuffs or of adjoining houses.

Another point which calls for notice is the littering of streets, passages, etc., with papers, wrappings, etc., by messenger boys and others. This would seem to be a matter which could, with advantage, be taken up by the teachers in Elementary schools. If it were impressed upon children at school that it is just as necessary for them to help in keeping the streets clean and tidy, as it is to keep themselves and their homes clean and tidy, and that there is really no fun in breaking windows and the glass in street lamps, and that breaking bottles on the shore can, and frequently does, cause grievous injury to other children, some improvement in the habits of messenger boys and young adults in regard to the points above mentioned, ought soon be manifest.

## REMOVAL AND DISPOSAL OF HOUSE REFUSE.

This work is carried out under the direction of the Superintendent of Cleansing. The following table gives particulars, not only as to the number of ashpits and bins in use, but as to the pits abolished.

	1921.	1922.	1923.	1924.	1925.
No. of Single Ashpits in use	323	309	292	284	257
„ Double „ „	571	495	446	428	386
„ Bins in use	20,777	21,000	21,146	21,190	21,758
„ Pits abolished in 10 years up to 1921 ...	2,067	90	66	26	69

As will be seen from these figures, the policy of ashpit abolition has been steadily pursued. Bins are now required in all new houses, and these are emptied weekly. The whole of the refuse is taken to the Destructor Works, and there burnt, with the exception of the cesspool, privy and pail closet refuse, which is utilised by the Cleansing Department for their land off Leasowe Road. Particulars as to the quantities of refuse destroyed or otherwise disposed of in each of the past five years are as under.

	1921			1922			1923			1924			1925		
	Tons	C.	Qr.	Tons	Tons	C.	Qr.	Tons	C.	Qr.	Tons	C.	Qr.		
Quantity of Refuse Delivered to Destructor	20,435	10	0	22,253	22,578	18	2	23,112	19	0	22,889	2	2		
Quantity tipped away .....	1,454	0	0	293	296	0	0	273	18	0	275	8	0		
Total Collected .....	21,889	10	0	22,546	22,874	18	2	23,486	17	0	23,164	10	0		

## REFUSE DESTROYER.

1. A Manlove Alliott 12-cell natural draught Destructor, top fed with "Boulnois" trucks. Installed in 1896 and 1897. Now fitted (1914) with system of forced draught by means of steam jets and blowers. Capacity of about 40 tons per 16 hours.
2. A 3-cell forced draught Heenan & Froude Destructor, with chimney 120 feet high, and water-tube boiler, was installed in 1910. Capacity, 35 tons per 16 hours.
3. A 3-cell forced draught Destructor (designed and erected by Cleansing Department), with chimney 160 feet high, and water-tube boiler. Installed in 1922. Capacity, 35 tons per 16 hours.

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## VITAL STATISTICS.

### BIRTHS.

The Births during the year, including 64 transferred to us, but deducting 49 transferred outwards, numbered 1,289 (641 males, 648 females), giving a birth-rate of 14·05 (corrected according to Registrar-General's standardizing factor, to 13·89) per 1,000 of population, calculated on an estimated population of 91,720. Of these 234 were notified by Doctors, 840 by Midwives, and 44 by parents or others, the remainder not being notified. The births in 1924 numbered 1,413, the rate being 15·5.

The illegitimate births were :—

25 registered in the Borough.
18 transferred to Wallasey.
—
43
less 4 transferred to other districts.
—
nett 39

The illegitimate birth-rate is 3·02 per cent. of the total Births.

The Registrar-General's factor for the standardization of Birth and Death rates in 1925 is ·989.

Particulars with regard to Births, Birth-rates, etc., for the five years 1921 to 1925 inclusive, are as under.

## NUMBER OF BIRTHS NOTIFIED BY

Year.	Doctors.	Mid-wives.	Parents, &c.	Not notified.	Total.*	Percentage of notifications.
1921	451	952	15	222	1,640	86·4
1922	405	933	20	233	1,591	85·3
1923	270	907	24	229	1,430	83·9
1924	296	900	45	168	1,409	88·0
1925	234	840	44	156	1,274	87·6
Totals	1,656	4,532	148	1,008	7,344	86·2

\*The "Total" figures are "corrected" in other Tables in accordance with Registrar-General's returns, which include particulars as to inward and outward transfers.

Visits to the homes were paid in connection with Births as under.

Year.	Visits.	Re-visits.	Visits to ALL INFANTS for any purpose whatever.
1921	1,430	3,939	6,340
1922	1,475	5,634	7,823
1923	1,345	4,938	6,783
1924	1,347	4,859	6,708
1925	1,031	5,559	7,229

The visits above referred to are quite distinct from those paid in connection with the Child Welfare Centre.

The Birth-rates for the past five years were :—1921, 18·3 ; 1922, 17·4 ; 1923, 15·7 ; 1924, 15·5 ; 1925, 14·05.

The average rate for the five years is 16·19.

A comparison of the Birth-rates of the past seven quinquennial periods shows a steady decline, as will be seen from the following.

Quinquennial period	1891-1895	...	29·50	
"	"	1896-1900	...	29·08
"	"	1901-1905	...	28·72
"	"	1906-1910	...	25·27
"	"	1911-1915	...	21·80
"	"	1916-1920	...	16·79
"	"	1921-1925	...	16·19



THE FOLLOWING TABLE SHOWS THE DISTRIBUTION OF BIRTHS AND DEATHS AND THE NATURAL INCREASE OF POPULATION, THAT IS, THE EXCESS IN THE NUMBER OF BIRTHS OVER DEATHS IN THE DIFFERENT WARDS IN THE PAST FIVE YEARS.

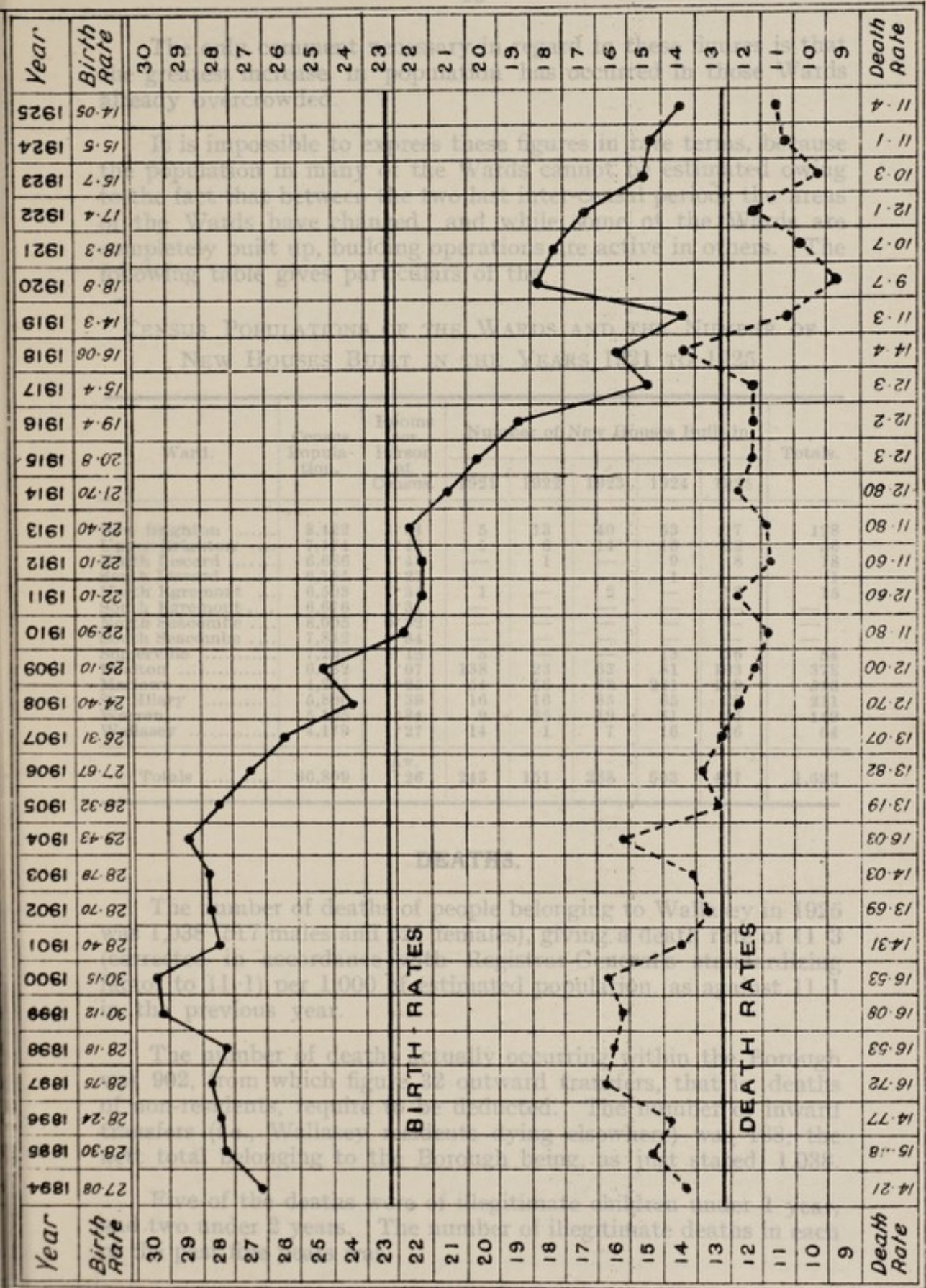
Wards.	Births in		Deaths in		Totals.	Increase in		Decrease in		Totals.							
	1921.	1922.	1923.	1924.		1925.	1921.	1922.	1923.		1924.	1925.					
1. New Brighton...	115	99	87	89	78	468	93	102	90	85	82	452	22	23	4	26	
2. Upper Brighton	113	111	90	96	80	490	82	88	90	64	74	398	31	32	3	92	
3. North Liscard...	87	106	93	85	59	430	70	87	81	69	82	389	17	19	—	64	
4. South Liscard...	114	137	89	98	83	521	82	93	65	105	83	428	32	44	—	100	
5. North Egremont	110	99	92	118	78	497	71	70	66	74	87	368	39	29	—	138	
6. South Egremont	99	89	94	97	83	462	76	107	83	61	78	405	23	—	—	75	
7. North Seacombe	179	195	160	184	153	871	97	93	90	106	92	478	82	102	—	393	
8. South Seacombe	208	162	167	175	151	863	94	107	69	89	77	436	111	55	—	427	
9. Somerville .....	152	126	122	95	99	594	70	73	78	81	87	389	82	53	—	205	
10. Poulton .....	140	155	138	118	151	702	41	67	50	56	67	281	99	88	—	421	
11. Marlowe .....	86	74	90	69	78	397	53	53	40	43	49	238	33	21	—	159	
12. St. Hilary .....	102	106	92	98	80	478	46	62	70	66	73	317	56	44	—	161	
13. Warren .....	50	42	53	35	39	219	58	60	48	67	79	312	—	—	—	5	
14. Wallasey .....	36	62	47	56	62	263	27	45	25	50	28	175	9	17	—	88	
Totals .....	1,591	1,563	1,414	1,413	1,274	7,255	960	1,107	945	1,016	1,038	5,066	639	495	—	88	
Less outward Transfers	19	44	39	47	49	198											
Plus inward Transfers	1,572	1,519	1,375	1,366	1,225	7,057	Corrected numbers: i.e., after adjusting transfers.					312	472	312	2,354	39	76
Nett Totals .....	1,640	1,591	1,430	1,409	1,289	7,359							8	39	3	88	165

Nett Increase in 1921 ... 639—8 = 631  
 1922 ... 495—39 = 456  
 1923 ... 472—3 = 469  
 1924 ... 436—39 = 397  
 1925 ... 312—76 = 236

2,354—165 = 2,189 in 5 years.

Average  
32 Years  
23.27

Average  
32 Years  
13.17



	1921.	1922.	1923.	1924.	1925.	Total.
Under 1 year ... ..	6	7	5	7	5	30
Over 1 year ... ..	4	—	2	1	2	10
Total ... ..	10	7	7	8	7	40

Illegitimate rate per 1,000 Births ...	144	97	106	145	179
---	-----	----	-----	-----	-----

Eighty-four Inquests were held during the year, 16 being on non-residents, and 68 on residents. Eight of these were on children under 1 year, and two were on children aged between 1 and 2 years.

There were no Inquests on illegitimate children, but one was held on an unknown infant.

THE CAUSES AND AGES OF THE DEATHS OF ILLEGITIMATES  
WERE :—

Causes.	1921 Ages.	1922 Ages.	1923 Ages.	1924 Ages.	1925 Ages.
Premature Birth and Debility from Birth	2 hours 1 month 7 days	7 months 6 months 1 month 21 days	1 hour 4 hours	2 days 17 hours 30 minutes	7 days 1 month
Respiratory Diseases	2 years 4 days	—	1 month	18 months	—
Intestinal Diseases	4 months 1 month	1 month 42 days	1 month 1 month 1 year	—	4 months
Tubercular Diseases	—	—	—	8 months	7 months
Infectious Diseases	—	11 months	—	6 months 3 months	13 months 18 months
Other Causes ... ..	21 months 1 month 9 months 2 years	—	3 years	3 months	1 month
TOTALS ... ..	10	7	7	8	7

PRINCIPAL CAUSES OF DEATH DURING 1921-1925.

	1921	1922	1923	1924	1925	Totals.
Respiratory Diseases—						
Pneumonia ... ..	71	91	82	72	82	398
Bronchitis ... ..	44	70	59	72	57	302
Other R. D. ... ..	9	23	17	15	19	83
	124	184	158	159	158	783
Cancer ... ..	120	115	109	141	133	618
Heart Disease ... ..	109	117	132	122	119	599
Phthisis ... ..	76	85	60	77	74	372
Congenital Disease ... ..	42	51	33	28	25	179
Nephritis and Bright's Disease	27	30	25	34	36	152
Influenza ... ..	10	53	21	24	25	133
Violent Deaths ... ..	17	21	17	11	29	95
Other Tuberculous Diseases ... ..	20	18	14	13	11	76
Meningitis (not T. B.) ... ..	14	6	14	5	10	49

As will be seen from the foregoing Table, Respiratory Diseases in Wallasey still hold their pride of place amongst the principal causes of death. Cancer has now crept up into second place. The mortality from Pulmonary Tuberculosis is stationary, while there is a satisfactory and gradual decrease in the deaths from other forms of Tuberculosis, which means Tuberculosis, principally, of the Joints and Glands. One would have expected this decline in the mortality from Other Tuberculous Diseases, since the demand for children's beds is markedly less. The number of cases notified last year was artificially raised owing to several children who ought to have been notified previously having come under the observation of the Tuberculosis Officer for the first time. The cases under treatment are of a milder type than formerly. Diarrhoea and Enteritis, which used to loom very prominently in the returns, show a marked decline, owing to the almost complete absence nowadays of Summer Diarrhoea. Influenza, while not accounting for the abnormal mortality of 1918 and 1919, still accounts for an appreciable number of deaths.

## BIRTH-RATE, DEATH-RATE, AND ANALYSIS OF MORTALITY DURING THE YEAR 1925 COMPARED WITH WALLASEY RATES.

(Provisional figures. The rates for England and Wales have been calculated on a population estimated to the middle of 1925, while those for the towns have been calculated on populations estimated to the middle of 1924. 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.)

	Birth-rate per 1,000 Total Population.	Annual Death-rate per 1,000 Population.										Rate per 1,000 Births.		Percentage of Total Deaths.			
		All Causes.	Enteric Fever.	Small-pox.	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Influenza.	Violence.	Diarrhoea & Enteritis (under Two years).	Total Deaths under one year.	Causes of Death certified by Registered Medical Practitioners.	Indigent Cases.	Uncertified Causes of Death.		
England and Wales...	18.3	12.2	0.01	0.00	0.13	0.03	0.15	0.07	0.32	0.47	8.4	75	92.1	6.9	1.0		
105 County Boroughs and Great Towns, including London ...	18.8	12.2	0.01	0.00	0.17	0.03	0.18	0.09	0.30	0.43	10.8	79	92.1	7.3	0.6		
157 Smaller Towns (1921 Adjusted Populations 20,000-50,000) ...	18.3	11.2	0.01	0.00	0.15	0.02	0.14	0.06	0.31	0.38	7.6	74	93.0	5.9	1.1		
London ...	18.0	11.7	0.01	0.00	0.08	0.02	0.19	0.11	0.23	0.46	10.6	67	91.1	8.9	0.0		
Wallasey ...	14.05	11.3	—	0.00	0.05	0.01	0.09	0.06	0.27	0.31	5.4	60	92.0	8.0	0.0		

## DEATHS FROM ZYMOTIC DISEASES SINCE 1909.

Disease.	1909.	1910.	1911.	1912.	1913.	1914.	1915.	1916.	1917.	1918.	1919.	1920.	1921.	1922.	1923.	1924.	1925.
	60	90	105	57	70	76	62	36	22	65	20	33	40	35	13	24	29
Smallpox ...	13	15	5	19	7	17	7	2	10	10	—	4	—	—	—	—	—
Measles ...	20	3	2	6	6	4	3	—	—	7	5	—	3	11	—	8	5
Scarlet Fever ...	9	4	16	9	5	9	15	11	1	6	9	7	12	4	1	1	1
Diphtheria and Croup ...	—	19	5	15	11	18	12	8	6	29	—	9	8	4	4	6	6
Whooping Cough... ..	2	5	1	3	3	1	3	3	1	1	—	2	1	7	1	1	9
Fever (Typhoid) ... ..	16	44	75	5	38	27	22	12	4	12	6	11	16	10	7	7	8
Diarrhoea and Enteritis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Rate per 1,000 of population ...	0.77	1.13	1.33	0.7	0.8	0.8	0.68	0.43	0.26	0.80	0.20	0.33	0.44	0.39	0.14	0.26	0.30

Causes of Death.	Sexes.		DEATHS IN WHOLE DISTRICT AT													Total Deaths in Institutions in the Borough, whether of residents or non-residents	DEATHS IN THE WARDS.														
	M.	F.	All Ages.	Under					45 and under 65.					65 and over.	1		2	3	4	5	6	7	8	9	10	11	12	13	14		
				1	2	3	4	5	10	15	20	25	35																	45	
All Causes } Certified ...	2,443	2,615	5,061	136	112	97	136	199	660	1,460	1,961	562	452	397	389	428	367	405	478	436	389	281	238	317	311	173					
} Uncertified ...	3	2	5	—	—	—	—	1	1	3	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	2					
1. Enteric Fever ...	4	—	4	—	—	—	—	1	2	1	—	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—					
2. Small-pox ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—					
3. Measles ...	12	12	24	2	11	7	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—					
4. Scarlet Fever ...	3	4	7	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—					
5. Whooping Cough ...	11	23	34	17	14	2	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—					
6. Diphtheria and Croup ...	7	17	24	—	2	8	13	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—					
7. Influenza ...	63	70	133	13	3	3	3	8	20	41	42	6	10	8	11	12	8	15	14	13	5	8	7	8	12	2					
8. Erysipelas ...	4	2	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—					
9. Phthisis (Pulmonary Tuberculosis) ...	211	161	372	—	2	3	8	72	170	102	15	30	26	20	31	29	27	30	53	46	40	33	8	18	6	5					
10. Tuberculous Meningitis ...	13	13	26	3	8	9	4	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—					
11. Other Tuberculous Diseases ...	25	25	50	4	5	8	3	10	9	9	2	4	1	3	2	4	2	2	8	10	2	3	3	3	—	7					
12. Cancer, Malignant Disease ...	273	345	618	—	—	—	—	3	49	310	256	52	69	40	59	54	40	37	36	41	62	36	35	51	39	19					
13. Rheumatic Fever ...	8	16	24	—	—	—	—	9	6	4	2	5	3	2	—	—	—	—	—	—	—	—	—	—	—	1					
14. *Meningitis (not Tuberc, but including Cerebro Spinal) See below ...	28	21	49	17	7	8	5	4	7	1	—	13	2	3	3	4	—	3	10	8	3	1	3	5	2	2					
15. Organic Heart Disease ...	243	356	599	3	—	—	6	11	49	183	347	27	62	61	47	62	49	57	38	38	49	24	24	33	41	14					
16. Bronchitis ...	127	175	302	16	2	7	2	1	15	60	199	8	19	20	19	23	28	32	41	28	23	14	15	18	16	6					
17. Pneumonia (all forms) ...	224	174	398	46	29	20	19	19	70	105	90	58	32	32	17	26	31	33	40	46	34	24	19	26	19	19					
18. Other Diseases of Respiratory Organs ...	44	39	83	2	2	2	1	4	18	34	20	11	8	12	8	10	5	8	5	9	6	1	4	5	2	—					
19. Diarrhoea and Enteritis ...	22	25	47	40	7	—	—	—	—	—	—	6	4	1	2	4	1	1	7	11	4	5	3	1	—	3					
20. Appendicitis and Typhlitis ...	16	20	36	—	—	—	—	—	—	—	—	26	3	1	2	3	5	2	—	—	—	—	—	—	—	—					
21. Cirrhosis of Liver ...	16	12	28	—	—	—	—	—	—	—	—	1	5	1	2	3	5	4	—	—	—	—	—	—	—	—					
21a. Alcoholism ...	5	2	7	—	—	—	—	—	—	—	—	1	1	1	—	—	—	—	—	—	—	—	—	—	—	—					
22. Nephritis and Bright's Disease ...	75	77	152	—	1	—	—	3	3	18	57	24	15	8	14	19	9	12	12	9	9	7	6	10	17	5					
23. Puerperal Fever ...	—	8	8	—	—	—	—	—	2	6	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—					
24. Other Accidents and Diseases of Pregnancy and Parturition ...	—	26	26	—	—	—	—	3	23	—	—	7	1	2	3	2	1	1	4	4	4	1	1	1	1	—					
25. Congenital Debility and Malformation, including Premature Birth ...	103	75	178	176	2	—	—	—	—	—	—	23	15	9	8	11	15	12	30	14	14	18	8	12	7	5					
26. Violent Deaths, excluding Suicide ...	61	34	95	7	1	2	7	16	22	25	15	37	10	8	9	5	8	3	12	9	5	10	3	7	4	2					
27. Suicide ...	24	19	43	—	—	—	—	—	—	—	—	3	2	—	3	2	5	2	5	2	—	—	—	—	—	—					
28. Other Defined Diseases ...	804	853	1,667	87	14	15	39	26	138	450	898	179	153	155	139	144	117	137	130	116	99	75	85	106	132	79					
29. Diseases ill-defined or unknown ...	20	15	35	3	2	1	1	1	7	13	7	10	5	4	2	3	1	2	4	4	3	3	1	2	—	1					
Totals ...	2,446	2,620	5,066	136	112	97	136	200	661	1,460	1,964	562	452	398	389	428	368	405	478	436	389	281	238	317	312	175					
Sub-entries (Included in above figures) :-	NIL.																														
14. (a). Cerebro-spinal Meningitis ...	NIL.																														
28. (a). Poliomyelitis ...	NIL.																														

DEATHS IN PUBLIC INSTITUTIONS.

IN WALLASEY.	ELSEWHERE.
MILL LANE HOSPITAL :- Residents ... 53 Non-Residents ... 1	LIVERPOOL AND OTHER HOSPITALS :- (Excluding Sanatoria) ... 169
SMALL-POX HOSPITAL :- Residents ... — Non-Residents ... —	UNION INFIRMARY, BIRKENHEAD ... 430
VICTORIA CENTRAL HOSPITAL :- Residents ... 354 Non-Residents ... 28	CHESTER AND OTHER ASYLUMS ... 115
WALLASEY COTTAGE HOSPITAL :- Residents ... 97 Non-Residents ... 4	SANATORIA outside Wallasey ... 1
NEW STREET C.W. CENTRE :- Residents ... 13 Non-Residents ... 1	Total ... 715
HIGHFIELD MATERNITY HOME :- Residents ... 9 Non-Residents ... —	DEATHS OUTSIDE WALLASEY but not in Public Institutions :-
OTHER PUBLIC INSTITUTIONS :- Residents ... 1 Non-Residents ... 1	INWARD TRANSFERS ... 109
Total ... 562	TRANSFERABLE DEATHS in Wallasey of Non-Residents :-
	OUTWARD TRANSFERS ... 160

DEATHS OF CHILDREN UNDER ONE YEAR BELONGING TO WALLASEY.

Wards.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	Total
Totals ...	20	28	25	29	25	21	75	59	41	44	21	26	11	11	436

DEATHS OF ILLEGITIMATE CHILDREN BELONGING TO WALLASEY.

Wards.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	Total
Under 1 Year ...	3	3	3	4	1	1	8	2	1	1	1	—	—	—	30
Over 1 Year ...	1	2	—	1	1	—	2	1	1	1	—	—	—	—	10
Totals ...	4	5	3	5	2	1	10	3	2	2	1	—	—	—	40

(Included in preceding Table).

Number of Inquests on	NUMBER OF INQUESTS ON			
	Residents (all ages) ... 277		Non-Residents (all ages) ... 69	
	Legitimate Children :		Illegitimate Children :	
	Under 1 year ... 25	Over 1 year ... 3	Under 1 year ... 5	Over 1 year ... 1



VITAL STATISTICS OF WHOLE DISTRICT DURING 1925 AND FIVE PREVIOUS YEARS.

YEAR	Population estimated to Middle of each Year	BIRTHS.		TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS.		NETT DEATHS BELONGING TO THE DISTRICT.				
		Un-corrected Number	Nett		Number	Rate	Of Non-residents registered in the District	Of Residents not registered in the District	Under 1 year of age		At all Ages	
			Number	Rate					Number	Rate per 1,000 Nett Births		Number
1920	100,000	1,835	1,886	18.8	850	8.5	43	164	130	68.0	971	9.7
1921	Census 90,809	1,591	1,640	18.3	865	9.6	32	127	98	59.0	960	10.7
1922	91,000	1,563	1,591	17.4	967	10.6	31	171	98	61.6	1,107	12.1
1923	91,000	1,414	1,430	15.7	806	8.8	32	171	83	58.0	944	10.3
1924	91,000	1,413	1,409	15.5	863	9.1	33	186	79	56.0	1,016	11.1
1925	91,720	1,274	1,289	14.05 <sup>(A)</sup>	902	9.8	32	168	78	60.5	1,038	11.3 <sup>(B)</sup>

(A) Corrected according to Registrar-General's standardizing factor to 13.89.

(B) Corrected according to Registrar-General's standardizing factor to 11.1.



### MATERNITY AND CHILD WELFARE WORK.

For Official Staff engaged in this work see page 111. In addition, voluntary workers attend at each Session at New Street.

The Institutions concerned in this work are :—

(1) The Child Welfare Centre, open on three afternoons per week. A doctor is in attendance on each occasion.

(2) Ante-Natal Clinic, held at the Child Welfare Centre one afternoon per week. A lady doctor in attendance.

(3) Maternity Home at "Highfield," Mill Lane, 10 beds.

(4) Three beds for Convalescent Children at West Kirby.

(5) On the upper floor of the Child Welfare Centre there is provision for eight resident babies, and there is also a large open-air balcony for their use when weather permits.

(6) There is a room beneath the balcony where model garments for babies are on exhibition, where mothers are taught to cut out and make similar articles, and where materials can be obtained at cheap rates. This Department is run entirely by voluntary workers.

(7) Beds for unmarried mothers at St. Faith's Home, Birkenhead, subsidized by this Local Authority.

### ANTE-NATAL.

The Ante-Natal Clinic was started in October, 1920. At the commencement the Clinics were held once a fortnight only, but owing to the number of people attending, they have since 1924 been held once a week. At the present time the attendances are more than can be conveniently dealt with at one weekly session, and the Committee have made arrangements for the holding of an extra session once a fortnight. The Sewing Class above referred to is held weekly on the same day as the Ante-Natal Clinic. Midwives have been encouraged at all times to send their cases to the Ante-Natal Clinic, and to attend with them. Many have done so. The very great importance of ante-natal work has also been laid before the local medical practitioners. Several doctors have sent cases to the Clinic, and I think it can be said with truth that an increasing number now exercise the necessary ante-natal supervision over their own cases. Up to a recent date no case was allowed to go into the Maternity Home unless she had previously attended the Ante-Natal Clinic. This rule has just been modified, and doctors' cases are now admitted to the Home if a certificate from a doctor on certain specified and

agreed on lines is presented at the time of booking. The Health Visitors have also stressed the importance of ante-natal supervision on all expectant mothers with whom they have been brought into contact. The nett result is shown in the largely increased attendances at the Ante-Natal Clinic, and in the larger amount of ante-natal work done in general practice now than formerly. Specific instances could be adduced demonstrating the value of this work, and a pleasing feature of the campaign is that letters have been received from medical men expressing their appreciation of the information sent to them from the Clinic with regard to certain of their cases.

ATTENDANCES AT THE ANTE-NATAL CLINIC.

Expectant Mothers.	1921.	1922.	1923.	1924.	1925.
Expectant Mothers on the books at January 1st ... ..	12 (from Sep. 3)	17	34	23	29
New cases dealt with during the year	65	85	121	161	219
Attendances of Expectant Mothers	288	239	350	552	743
First visits to homes of Expectant Mothers ... ..	252	393	377	345	389
Re-visits to homes of Expectant Mothers ... ..	107	154	141	145	136
Expectant Mothers on books at December 31st ... ..	17	34	23	30	70

CHILD WELFARE WORK.

With the exception of the establishment of the Orthopaedics Clinic in 1924 (see School Report), there have been no extensions of this work. It is desirable to open a Child Welfare Centre in another part of the district, and provision has been made for this in the Estimates for two years past, but the project has not matured owing to the inability to find suitable premises. The beds for resident babies have proved of very great value, not only in saving some lives (it is quite certain that many of the infants would have died if they had not been admitted) but in giving children from unsatisfactory homes, with unsatisfactory mothers, a real start in life, and in enabling children to be looked after while their mothers were in Hospital, and who, but for the Centre, would have had nowhere to place the children. It should be explained that the mothers of the babies who are admitted must attend daily, prepare the food for, and also learn how to handle and wash their infants. Many mothers have thus gained the necessary confidence, and have profited greatly by the experience. Below will be found particulars of some infants admitted, and of

their progress—the list could be greatly lengthened. These cases on admission were looked upon by their parents as hopeless, and certainly were about as hopeless looking specimens as can be imagined.

	Aged	Weight	In Centre.	Weight on Discharge.	At Present.
B.S. ... ..	15 weeks	5lbs. 14ozs.	79 days	10lbs.	11 months— 19lbs. 1oz.
S.P. ... ..	7 weeks	6lbs. 13ozs.	91 days	10lbs. 15ozs.	12 months— 23lbs. 8ozs.
H.F. ... ..	3 months	6lbs. 7ozs.	187 days	16lbs. 12ozs.	not known.
D.K. ... ..	3 months	8lbs. 4ozs.	49 days	13lbs.	Do.
I.W. ... ..	3 weeks	5lbs. 15ozs.	78 days	10lbs. 2ozs.	13 months— 19lbs. 2ozs.
D.T. ... ..	4 weeks	6lbs.	43 days	8 lbs.	14 months— 22lbs. 8ozs.

Children between 1 and 5 are supervised by the Health Visitors at their homes, and, according to circumstances, are referred by them direct to the various Clinics, or to the Child Welfare Centre, where they are medically examined and put in the way of obtaining suitable treatment. The Medical Officer of Health takes one Child Welfare Clinic, and the Assistant School Medical Officer two Clinics weekly. The School Medical Officer, therefore, sees many children as entrants into the schools whom he has seen at the Child Welfare Centre. Children found ill-nourished are referred to the Nutrition Clinic, those with crippling defects, or threatened therewith, to the Orthopædic Clinic.

Children convalescing after illness are sent to the Convalescent Home at West Kirby. Children suspected of Tuberculosis are referred to the Tuberculosis Officer. The Medical Officer is the connecting link, and there is complete co-ordination between all the Municipal medical activities.

#### ATTENDANCES AT THE CHILD WELFARE CLINIC.

Infants.	1921.	1922.	1923.	1924.	1925.
Infants on the books at January 1st	1,828	2,341	2,816	3,342	2,293
New cases dealt with during the year	513	475	526	432	382
Percentage of total births attending	31·2	29·8	36·7	30·6	29·6
Attendances of Infants during the year ... ..	6,518	7,102	6,720	5,501	4,383
*Visits to homes of infants attending the Centre ... ..	1,431	1,127	911	579	830
Infants on the books at December 31st	2,341	2,816	3,342	3,774	2,648
*The actual number of visits and re-visits paid to ALL infants, whether attending the centre or not	8,040	7,823	6,283	6,206	7,229

### NEW STREET CENTRE.

Work has been carried on in the new permanent premises, New Street, Seacombe, since January, 1919.

A description of the Centre, with particulars as to the staffing, was given in 1919 Report (see page 76). It is not, therefore, necessary to repeat these in the present Report.

#### ADMISSIONS, DISCHARGES, Etc.

The following figures show details with regard to the CASES ADMITTED TO NEW STREET CENTRE IN THE PAST FIVE YEARS.

	1921.	1922.	1923.	1924.	1925.
1. Number remaining in on January 1st, each year ... ..	8	5	6	5	4
2. Number admitted to December 31st, each year (including re-admissions) ... ..	32	31	30	23	21
	40	36	36	28	25
3. Number discharged to December 31st ... ..	29	27	30	23	19
4. Number died to December 31st ... ..	6	4	1	1	1
5. Number remaining in on January 1st ... ..	5	5	5	4	5
Average duration of stay of discharged cases ... ..	60.0 days	66.0 days	56.7 days	60 days	72 days
Average duration of stay of fatal cases ... ..	50.6 "	12.2 "	5 "	12 hours	20 "
<b>REASONS FOR ADMISSIONS.</b>					
1. Indifferent mothers and unsatisfactory home conditions ...	18	18	20	9	16
2. Mother not at home (either in hospital, or no one to look after child) ... ..	12	11	7	12	3
3. Serious condition of child ... ..	2	2	3	2	2
	32	31	30	23	21
<b>Number of cases discharged—</b>					
(a) In good health ... ..	28	27	29	22	17
(b) Improved in health ... ..	—	—	—	—	—
(c) No improvement (baby taken out by mother) ...	1	—	—	—	2
(d) To other Institutions ...	—	—	1	1	—
(e) Fatal ... ..	6	4	1	1	1
	35	31	31	24	20
Number remaining at Dec. 31st	5	5	5	4	5
	40	36	36	28	25
Causes of death, and period of residence in Centre ... ..	Prematurity (35 days) Broncho Pneum. (43 days) 2 Marasmus (146 and 32 days) Convulsions, etc. (47 days) Whooping Cough (44 days)	2 Influenza (19 and 8 days) 2 Marasmus (14 and 8 days)	Premature (5 days)	Premature (12 hours)	Marasmus (20 days)
<b>Number of cases of infectious disease:—</b>					
(a) Whooping Cough ... ..	1	2	—	—	—
(b) Epidemic Diarrhoea ... ..	2	—	—	—	—
Number of cases discharged on account of illness ... ..	—	2 to M.L.H. (Intussuscep 1 to V.C.H. (C.-pox) ... } 3 (all re-admitted)	1 to V.C.H. (acute Meningitis)—fatal ... .. 1	—	—

NOTE.—The cards of all children attending the Centre are kept for five years. Each is then summarized on a card which is transferred to the Education Committee.

NEW YORK

It is hereby certified that the following is a true and correct copy of the original of the same as the same appears in the records of the City of New York.

Witness my hand and the seal of the City of New York, this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_.

Mayor of the City of New York

City Clerk

City of New York

County of \_\_\_\_\_

State of New York

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## VISITS RE CHILD WELFARE.

First visits <i>re</i> registered births	...	...	...	1,031
Re-visits	"	"	...	5,559
Visits <i>re</i> still-births	...	...	...	2
" ophthalmia cases	...	...	...	52
" puerperal cases	...	...	...	4
Visits to Maternity Centre	...	...	...	442
First visits to homes <i>re</i> expectant mothers	...	...	...	389
Re-visits	"	"	...	136
First visits to homes <i>re</i> infants attending the Centre	...	...	...	*517
Re-visits	"	"	...	*294
Visits <i>re</i> infant deaths	...	...	...	*38
Visits to all children, 1 to 5 years	...	...	...	1,306
*Included in figures above <i>re</i> Registered Births.				
Visits <i>re</i> cases of Diarrhœa	...	...	...	—
" Measles	...	...	321	} 1,570
" Whooping Cough	...	...	456	
" Mumps	...	...	436	
" Chicken Pox	...	...	332	
" other minor Inf. Diseases	...	...	25	
References to Education Authority	...	...	...	988
Enquiry visits	...	...	...	335
References to Guardians	...	...	...	43
" N.S.P.C.C.	...	...	...	6

## DISTRIBUTION OF DRIED MILK.

Dried Milk, in one pound cartons, is given free to infants when the family income per head, after deducting rent, falls below a limit fixed by scale. Particulars of these distributions in the past five years are as under:—

## DRIED MILK.

	1921.	1922.	1923.	1924.	1925.
Number of packets of Dried Milk given ... .. lbs.	2,724	3,515	2,538	2,359	2,571
To number of infants under one year ... ..	378	356	258	244	359
To number of infants over one year ... ..	42	17	—	—	—
To number of expectant mothers	35	36	10	8	—
To number of nursing mothers	59	261	247	215	174
At cost of ... ..	£290/10/5	£335/15/10	£198/3/7	£155/17/11	£190/19/-

## MILK SOLD.

	1921.	1922.	1923.	1924.	1925.
Number of packets of Dried Milk sold ... ..	14,291	11,554	12,802	11,410	8,869
Realising ... ..	£1,709/15/6	£1,215/14/10	£1,115/0/6	£894/16/4	£665/3/2

## DISTRIBUTION.

	1921.	1922.	1923.	1924.	1925.
Average weekly distribution of Dried Milk—packets ... ..	lbs. 327	lbs. 251	lbs. 295	lbs. 264	lbs. 220

**THE UNMARRIED MOTHER.**

Unmarried expectant mothers are provided for at St. Faith's Home, Birkenhead, the Corporation giving a grant of £50 a year thereto. (See also page 44.)

**“ HIGHFIELD ” MATERNITY HOME.**

“ Highfield ” Maternity Home was officially opened on August 19th, 1921. The first case, however, was not admitted until September 3rd. The Home has proved a great success ; on many occasions, especially of late, the numbers of people desiring to book have been more than could be accommodated, and have had, perforce, to be refused. Having regard to the housing shortage, and also to the great disturbance which takes place in the ordinary household on the arrival of a new member, the increasing tendency nowadays is for confinements to take place in Institutions. In my view this tendency is to be encouraged. The accommodation and conveniences for a normal confinement in the ordinary four and five-roomed house is far from ideal and it would be much better if all mothers in such houses could be confined in Maternity Homes. Mothers themselves are appreciating this point, and although our Home has only been open for four years, a large number of mothers have been in for the second, or even third time. Ten beds are hardly sufficient now for the needs of this Borough. I am quite clear they will be totally insufficient in five years' time.

The following is a Summary of information supplied to the Ministry of Health in each of the past five years in regard to the cases admitted to the Maternity Home.





Number of Cases admitted since opening of Home ...	698	Post-Partum Hæmorrhage ...	8
Primip. ... ..	308	Adherent Placenta ... ..	13
Multip. ... ..	390	Eclampsia ... ..	2
Head Presentation ... ..	673	Albuminuria ... ..	5
Breech ... ..	29	Septicæmia ... ..	1
Trans. ... ..	1	Doctors' Cases ... ..	285
Deaths ... ..	2	Midwives' Cases ... ..	413
Ante-Partum Hæmorrhage ...	5	Doctors engaged ... ..	285
		Doctors called ... ..	85
Rise of temperature ... ..	3		
Obstructed labour ... ..	6		
White leg ... ..	1		
Death—Pulmonary Embolism ... ..	1		
Death—Septicæmia ... ..	1		
Torn Perineums ... ..	34		
Discharging eyes ... ..	7		
Still-born babies ... ..	25		
Death after birth ... ..	7		

## TORN PERINEUMS.

## DOCTORS.

NORMAL—	
Primip ... ..	55
Multip. ... ..	20

## MIDWIVES.

NORMAL—	
Primip. ... ..	25
Multip. ... ..	9

## ABNORMAL—

Primip :—		
Abnorm. Breech ...	1	} 28
Forceps, head ...	19	
Multip. :—		
Forceps, head ...	4	} 28
Abnorm. Breech ...	4	

11 of the above 28 abnormal cases were Midwives' calls.

## CHILDREN'S BEDS IN INSTITUTIONS.

The Corporation formerly had six beds at West Kirby Convalescent Home for children between the ages of 3 to 15 years (girls), and 3 to 12 years (boys), but as it was difficult to find a sufficient number of children to keep them always occupied, the number of beds has been reduced to three.

During the quinquennium cases have been referred to institutions as under:—

INFANTS REFERRED TO INSTITUTIONS.

	1921.	1922.	1923.	1924.	1925.	Totals.
Victoria Central Hospital—						
In-patients ... ..	9	2	7	—	—	18
Out-patients... ..	13	14	18	7	4	56
Southern Hospital, Liverpool	4	—	4	—	—	8
Children's Infirmary ..	14	10	11	8	—	43
St. Paul's Eye and Ear Infirmary, Liverpool ... ..	3	3	2	1	—	9
Dental Clinic (School) ...	—	—	—	—	5	5
Mill Lane Hospital ... ..	15	50	3	—	1	69
V.D. Centre ... ..	25	28	7	4	10	74
Leasowe Children's Hospital	6	11	8	9	—	34
Leasowe Children's Hospital Annexe ... ..	2	—	—	—	—	2
Heswall Country Hospital .	1	3	7	1	—	12
Convalescent Home, West Kirby	60	48	35	44	31	218

MOTHERS REFERRED TO INSTITUTIONS.

	1921.	1922.	1923.	1924.	1925.	Totals.
Shaw Street Hospital, Liverpool ... ..	6	2	7	10	—	25
Dental Hospital, Liverpool	—	—	3	—	—	3
Mill Lane Hospital, Wallasey	16	30	8	17	—	71
				9 T.B. 8 V.D.		
Victoria Central Hospital—						
In-patients ... ..	14	19	55	3	—	91
Out-patients... ..	—	—	—	—	—	—
Maternity Home, Birkenhead	16	1	—	—	—	17
Dental Clinic, Wallasey ...	—	—	—	15	2	17

MIDWIVES' ACT.

SUMMARY OF THE WORK DONE UNDER THE MIDWIVES' ACT.

Routine Visits paid to Midwives' houses, Inspection of Bags, Case books, etc. ... ..	250
Enquiries re Still-born Children ... ..	3
Other Enquiries ... ..	11
Total Visits paid under the Midwives' Act ... ..	264

Under the Rules of the Central Midwives' Board (E. 18) the following notifications have been received :—

Records of sending for medical help (see Table below)	136
Notifications of Still-births ... ..	3
"    "    Laying out Dead ... ..	1
"    "    Artificial feeding ... ..	3
"    "    Ophthalmia ... ..	2
Deaths of Children before attendance of a Medical Practitioner ... ..	1
Cases of Puerperal Fever attended by Midwives ...	3
Cases of other Infectious Disease notified by Midwives	—

The following is a list of the causes for which Medical help was sought in the 136 cases mentioned above :—

Feebleness of infant ... ..	11
Protracted labour ... ..	39
Retained Placenta ... ..	6
Instrumental Aid ... ..	5
Prematurity ... ..	3
Post-partum Hæmorrhage ... ..	3
Ante-partum Hæmorrhage ... ..	2
Laceration of Perineum ... ..	22
Placenta Prævia ... ..	3
Inflamed Eyelids ... ..	3
Abnormal Presentation ... ..	10
Rise of Temperature ... ..	7
Abortion ... ..	2
Uterine Inertia ... ..	5
General Weakness ... ..	6
Various other causes ... ..	9

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Under Section 8 of the Midwives' Act, the Central Midwives' Board is to be acquainted with the death, and change of name or address of any Midwife.

Changes have been notified during the year in respect to :—

Name ... ..	—
Address ... ..	4
Notice of intention to cease practice ... ..	1
Removal from District ... ..	4

There are 48 Midwives on the Roll, 44 of whom are trained, and 4 untrained. None are illiterate. Their registers (which are on the whole well kept) and their bags are regularly inspected by a lady Health Visitor, who possesses the C.M.B. qualification.

The total number of cases attended by Midwives was 446.

**PUERPERAL FEVER.**

## NOTIFICATIONS.

Year.	No.	Number which were			No. Fatal.
		Doctors' Cases.	Midwives' Cases.	Both.	
1921	12	3	9	—	3
1922	5	3	2	—	1
1923	2	—	—	2	3 (a)
1924	1	—	1	—	—
1925	4	4	—	4	1 (b)

(a) One not formally notified.

(b) This was an Inward Transfer (Union Infirmary).

Two of the cases in 1921 and two in 1922 were removed to Institutions, viz., three to Tranmere Infirmary, and one to the Victoria Central Hospital.

The only institutional treatment provided for cases of Puerperal Fever is in the Poor Law Infirmary.

**OPHTHALMIA NEONATORUM.**

Two of the Lady Health Visitors have received special instruction at St. Paul's Eye Hospital, Liverpool, in the douching of eyes of children suffering from Ophthalmia Neonatorum. The home cases notified were treated by them under the superintendence of the doctor. All the cases recovered without injury to the eyes.

Year.	No.	Notifications		No. Treated at		Visits for Douching Purposes.
		By Doctors.	By Midwives.	Home.	Hospital.	
1921	7	5	2	7	—	13
1922	5	3	2	5	—	36
1923	7	4	3	4	3	73
1924	11	8	3	10	1	223
1925	2	—	2*	1	1	52

\*1 born outside the Borough.

### INFANTILE MORTALITY.

There is a marked improvement in recent years in respect to the interest taken in, and the necessary knowledge with regard to the rearing of children, to whatever this may be due. That is a fact, but it is also a fact that there still remains in the mass a large number of people who are indifferent and careless as to the fate of their children. Children are procreated without any thought as to how they are to be fed, clothed or trained. By others, when children arrive they are looked upon as a nuisance, sadly interfering with their freedom. Even the granting of Widows' Pensions is not without its black side. Instances already are far from uncommon where single men on the dole cohabit with widows with pensions, and do not worry about seeking work.

In short, we must recognize that there is a section of the community which does not want to be reformed, and which will not be reformed by anything but forceful measures. For this section the only solution I can think of, is the provision of Work Colonies on a large scale. These people to whom I refer abuse their liberty, and are a drag upon the community which has to support them in idleness, and not only themselves, but the oftentimes numerous progeny which they choose to bring into this world. Instances have occurred where three successive children of the same parents have been kept alive by milk supplied free at the Child Welfare Centre.

### EPIDEMIC DIARRHŒA.

With regard to Epidemic Diarrhœa very few cases have come to my notice for several years past. There is practically no Epidemic Diarrhœa nowadays. The number of deaths in each of the past five years is as under :—

Year			Number fatal	
1921	...	...	3	} All the deaths occurred in the summer months, June to Sept., in each year.
1922	...	...	1	
1923	...	...	—	
1924	...	...	—	
1925	...	...	1	
			—	
			5	
			—	

Opinions may differ as to the cause of this decreased mortality, but the fact cannot be gainsaid. The deaths of infants in the third Quarter of the year, which used to be such a marked statistical feature, has now disappeared, as the following table shows.

## DEATHS UNDER ONE YEAR.

The deaths of children under one year in the four quarters were as follows :—

Quarter	1921	1922	1923	1924	1925
First ...	30	37	21	23	19
Second...	17	23	19	16	18
Third ...	23	20	18	14	20
Fourth...	28	18	25	26	21
Totals ...	98	98	83	79	78

Year.	No. of Deaths of Infants under one year.	Per cent. of Total Deaths.	Rate of Infant Mortality per 1,000 Births.	Deaths of Children under 5 Years.
1915	143	12.8	80	203
1916	128	12.5	72	186
1917	98	9.4	67	166
1918	123	10.5	84	214
1919	108	10.0	75	168
1920	130	13.3	68	169
1921	98	10.0	59	141
1922	98	8.8	61	152
1923	83	8.3	58	116
1924	79	7.7	56	111
1925	78	7.5	60	125

Details of deaths under one year for the last 12 years, from those diseases most fatal to infants are given below :—

	1914	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924	1925
Diarrhoea ... ..	14	4	2	1	2	—	1	3	1	—	—	1
Convulsions ... ..	10	7	4	2	9	5	8	3	4	6	—	3
Bronchitis and Pneumonia ... ..	30	31	26	25	29	25	26	7	10	14	17	15
Enteritis ... ..	8	9	6	2	4	3	8	10	3	6	6	4
Premature Birth ... ..	30	19	34	26	19	21	31	20	26	18	17	9
Atrophy and Debility	19	17	16	14	11	19	8	15	8	5	3	5
Common Infectious Diseases ... ..	—	—	—	6	18	1	7	6	4	2	6	2
Totals ... ..	111	88	88	76	92	74	89	64	56	51	49	39

**INFANT MORTALITY IN THE WARDS.**

Ward No.	NUMBER OF BIRTHS.					NUMBER OF INFANT DEATHS.					Infant Mortality Rates Per 1,000 Births.					Average Rate for 5 yrs.			
	1921	1922	1923	1924	1925	Totals.	1921	1922	1923	1924	1925	Totals.	1921	1922	1923		1924	1925	
1	115	99	87	89	78	468	3	6	4	5	2	20	26.0	60.6	45.9	56.1	25.6	42.7	
2	113	111	90	96	80	490	5	6	6	6	5	28	44.2	54.0	66.6	62.5	62.5	57.1	
3	87	106	93	85	59	430	7	3	5	6	4	25	80.4	28.3	53.7	70.5	67.8	58.1	
4	114	137	89	98	83	521	7	10	2	4	6	29	61.4	73.0	22.4	40.8	72.2	55.6	
5	110	99	92	118	78	497	8	4	7	3	3	25	72.7	40.4	76.0	25.4	38.4	50.3	
6	99	89	94	97	83	462	6	2	7	3	3	21	60.6	20.2	74.4	30.9	36.1	45.4	
7	179	195	160	184	153	871	14	20	14	12	15	75	78.2	102.5	87.5	65.2	98.0	86.1	
8	208	162	167	175	151	863	17	12	7	14	9	59	81.7	74.0	41.9	80.0	59.6	68.3	
9	152	126	122	95	99	594	7	8	10	7	9	41	46.0	63.5	81.9	73.6	90.9	69.0	
10	140	155	138	118	151	702	6	12	6	8	12	44	42.8	77.4	43.4	67.8	79.4	62.6	
11	86	74	90	69	78	397	8	4	3	3	3	21	93.0	54.0	33.3	43.4	38.5	52.9	
12	102	106	92	98	80	478	6	5	6	5	4	26	58.9	47.1	65.2	51.0	50.0	54.3	
13	50	42	53	35	39	219	1	4	4	1	1	11	20.0	95.2	75.4	28.5	25.6	50.2	
14	36	62	47	56	62	263	3	2	2	2	2	11	83.3	32.2	42.5	35.7	32.2	41.8	
Plus	1,591	1,563	1,414	1,413	1,274	7,255													
	68	72	55	43	49	198													
Minus	1,659	1,635	1,469	1,456	1,225	7,057													
	19	44	39	47	64	302													
Totals	1,640	1,591	1,430	1,409	1,289	7,359	98	98	83	79	78	436	59	61.6	58	56	60.5	59.2	

**INFANT MORTALITY IN WALLASEY COMPARED WITH  
INFANT MORTALITY RATES FOR ENGLAND AND WALES  
SINCE 1904.**

Year.	Number of		Infant Mortality Rate per 1,000 births.	England and Wales. Rate per 1,000 births.
	Births.	Infant Deaths.		
1904	1,678	265	157	145
1905	1,657	163	98	128
1906	1,716	201	117	132
1907	1,763	179	101	118
1908	1,738	176	101	120
1909	1,838	148	80	109
1910	1,724	149	86	105
1911	1,752	190	109	130
1912	1,791	138	77	95
1913	1,863	150	80	108
1914	1,842	167	90	105
1915	1,774	143	80	110
1916	1,768	128	72	91
1917	1,448	98	67	96
1918	1,457	123	84	97
1919	1,422	108	75	89
1920	1,886	130	68	80
1921	1,640	98	59	83
1922	1,591	98	61	77
1923	1,430	83	58	69
1924	1,409	79	56	75
1925	1,289	78	60	75

The number of infant deaths in Wallasey has fallen to less than one-third of the number 20 years ago, notwithstanding increased population (57,000 in 1904, 91,720 in 1925).

Had the 1904 rate been maintained in 1925, the infant deaths would have totalled 122, instead of the 78 actual deaths, the latter figure representing a saving of 44 child lives.

I presume some capital value can be attached to a life, although there may be a difference of opinion as to what that value should be. Supposing it is taken as £300, the saving for 1925 alone would represent £13,200, expressing lives in cash value.



TRIENNIAL, DEATH RATES OF INFANTS UNDER ONE YEAR OF AGE FROM THE  
CAUSES MOST COMMON AMONG INFANTS.

	Measles.	Whooping Cough.	Diarrhoeal Diseases.	Premature Birth.	Congenital Defects.	Injury at Birth.	Want of Breast Milk.	Atrophy, Debility, Marasmus.	Tuberculous Diseases.	Convulsions.	Bronchitis & Pneumonia.	All other Cases.
1907-10	2.1	4.1	11.3	17.1	4.8	0.1	0.6	10.4	6.0	6.9	15.3	13.3
1913-15	1.0	4.1	15.1	12.1	4.0	0.9	0	10.7	2.5	5.2	16.7	14.2
1916-18	1.1	5.0	3.5	16.7	3.4	1.5	0	8.7	2.4	3.2	16.9	11.6
1919-21	0.0	0.2	5.0	10.4	6.2	0.4	0	8.4	1.0	3.4	11.0	16.7
1922-24	1.80	1.30	3.60	13.76	4.7	0.6	0	3.6	0.4	2.2	9.2	17.3
1925	0.77	0.77	3.9	3.9	3.9	0.7	0	3.9	0.7	2.3	11.6	25.6

Omitting last year as a single year, it will be noted that the deaths from Whooping Cough, Diarrhoeal Diseases, Atrophy, Debility and Marasmus, Tubercular Diseases and Convulsions, show progressive declines, whereas the Death Rates from Measles, Premature Birth, Congenital Defects and Respiratory Diseases vary, but show no prominent tendency to decline.

Infant and Child Mortality Rates per 1,000 Births, at age periods in Wallasey, compared with Rates for Triennial Periods from 1907-1910 :—

RATES.

	0 to 1 year	1 to 5 years	Under 1 week	Under 1 month (0-1 month)	Under 3 months (0-3 months)	3 to 6 mths.	6 to 12 mths.	Number of Births
1907-10	92.0	55.4	18.1	32.3	48.4	17.4	26.2	7,063
1913-15	83.9	41.1	15.6	29.0	44.8	15.6	23.1	5,479
1916-18	74.3	47.2	20.7	33.6	45.2	7.7	21.9	4,667
1919-21	59	28.8	19.8	30.3	41.8	13.3	13.3	4,948
1922-24	58.3	26.8	20.9	34.3	40.8	5.9	11.9	4,430
1925	60.5	36.4	18.6	31.0	43.4	9.3	7.8	1,289

It may be pointed out that, while the total Infantile Mortality Rate and Rates from one to five years both show steady declines, the Rates under one week and under one month show no tendency to decline. In other words, the saving in life has been mainly over the age of three months.

### FEEDING OF CHILDREN.

The following Table gives some interesting data, since 1908, in regard to the method of feeding of infants when first visited and of a certain number of infants whose deaths occurred :—

Year.	Births Visited.	Entirely breast.	Bottle fed.	Breast and bottle.	Infant deaths visited.	Number breast fed.	Number wholly bottle fed.	Partly breast, partly bottle.	Never fed at all.
1908	—	—	—	—	157	40	75	24	18
1909	1,230	75%	14%	11%	98	23	57	7	11
1910	1,128	78%	12%	6%	135	35	72	17	11
1911	1,165	83%	7%	7%	160	23	102	24	11
1912	1,134	87%	7%	5%	104	10	56	16	22
1913	1,059	86%	9%	5%	126	30	61	26	9
1914	1,601	81%	11%	6%	126	33	76	6	11
1915	1,595	83%	10%	7%	112	34	60	8	10
1916	1,578	85%	11%	4%	98	24	38	10	26
1917	1,013	91%	8%	1%	97	11	22	13	15
1918	1,008	90%	7%	2%	123	22	28	15	18
1919	1,318	91%	—	—	108	29	31	15	17
1920	1,731	93%	5%	2%	107	25	45	12	25
1921	1,430	91%	4%	5%	78	9	49	12	13
1922	1,475	90%	6%	4%	84	10	39	8	25
1923	1,345	87%	3%	10%	74	11	30	10	23
1924	1,347	90%	8%	2%	73	16	27	10	20
1925	1,274	91%	6%	3%	74	19	37	6	12

This Table verifies what has been pointed out over and over again and still remains true, that, while the gross number of children breast-fed greatly exceeds those artificially fed, the deaths of those artificially fed are always more than double those fed at the breast.

### INFANT MORTALITY IN WALLASEY DURING THE QUINQUENNium 1921-1925.

NETT DEATHS FROM STATED CAUSES IN WEEKS AND MONTHS UNDER ONE YEAR OF AGE.

CAUSE OF DEATH.	Under 1 year.		Total under 1 year.							
	Under 1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 1 month.	4 weeks and under 3 months.	3-6 months.	6-9 months.	9-12 months.	Total Deaths under 1 year.
ALL CAUSES	143	38	20	17	218	79	57	31	51	436
{ Certified ... Uncertified	...	...	...	...	...	...	...	...	...	...
Small-pox ...	...	...	...	...	...	...	...	...	...	...
Chicken-pox ...	...	...	...	...	...	...	...	...	...	...
Measles ...	...	...	...	...	...	1	...	1	...	2
Scarlet Fever ...	...	...	...	...	...	5	4	3	6	18
Whooping Cough ...	...	...	...	...	...	...	...	...	...	...
Diphtheria and Croup ...	...	...	...	...	...	1	2	...	1	6
Influenza ...	...	1	1	...	2	...	...	...	...	...
Erysipelas ...	...	...	...	...	...	...	...	...	...	...
Tuberculous Meningitis ...	...	...	...	...	...	...	...	2	...	2
Abdominal Tuberculosis ...	...	...	...	...	...	...	...	2	2	2
Other Tuberculous Diseases ...	...	...	...	...	...	...	...	2	4	17
Meningitis (not Tuberculous) ...	1	1	...	...	2	1	5	...	...	16
Convulsions ...	5	1	1	...	7	3	5	1	...	1
Laryngitis ...	...	...	...	...	...	...	...	...	...	...
Bronchitis ...	...	1	2	1	4	6	4	1	1	16
Pneumonia (All forms) ...	1	2	...	2	5	7	8	7	20	47
Diarrhoea ...	...	3	1	2	6	3	1	...	1	5
Enteritis ...	...	...	...	...	...	10	4	3	6	29
Gastritis ...	...	...	...	...	...	3	2	...	...	5
Syphilis ...	1	1	3	...	5	4	...	...	...	9
Rickets ...	...	...	...	...	...	...	...	...	1	1
Suffocation (Overlying) ...	3	...	...	...	3	2	2	...	...	7
Injury at Birth ...	3	1	...	...	4	...	...	...	...	4
Atelectasis ...	12	...	1	...	13	2	...	...	...	15
Congenital Malformations ...	15	5	2	2	24	2	1	...	2	29
Premature Birth ...	73	7	1	3	84	6	...	...	...	90
Atrophy, Debility, Marasmus ...	2	2	5	3	12	9	8	1	1	31
Other Causes ...	27	13	3	4	47	14	11	5	5	82
TOTALS	143	38	20	17	218	79	57	31	51	436

## HEALTH PROPAGANDA.

During the whole period covered by this Report, propaganda in health matters has been carried out fairly extensively, that relating especially to Venereal Diseases, under the ægis of the Merseyside Boroughs Health Education Committee. Propaganda has taken the form of Public Lectures by prominent publicists, e.g., Dr. Leonard Hill, Dr. Saleeby, Dr. McKenna; Dinner-hour Talks on health subjects at Works; Lectures to Parents of School Children, Church Associations, Ratepayers' Associations, the Boys of the Navy League Home, Talks to Mothers at the Clinics, etc., in fact, wherever an opportunity has occurred of getting an audience. At first the Lectures were confined to V.D. subjects, but it was soon discovered that the audiences became fewer when this subject only was taken. For some time past, therefore, general health subjects have been added, including Smoke Abatement, the activities in the promotion of health undertaken by the Local Authority, and so on. By these means greater public interest in health matters has undoubtedly been evinced. In my view, there are great possibilities in this campaign. One development of it is our Nutrition Clinic spoken of on page 96, but there is a tremendous amount of apathy to be removed and much misconception. The idea that the services of a doctor are necessary only in cases of developed illness, and that when the illness has been diagnosed the doctor has a bottle of medicine on the shelf which will cure the particular complaint, dies hard, but there are signs that the day of the point of view of preventive medicine is dawning. Child Welfare work has done much to show people how many ailments, and even what were looked upon as diseased conditions, can be prevented and cured by the exercise of common sense and a little elementary knowledge of physiology. People are beginning to see that small ailments can be prevented by proper habits of life, by such things as sufficient sleep for children, care of the teeth, proper use of the teeth, etc.

It was thought to be somewhat of a joke a few years ago when it was stated that we are getting near to the Chinese method of engaging a doctor, which is commonly supposed to be that you pay the doctor when you are well and cease to pay him when you are ill. It is now beginning—only beginning, but still beginning—to be appreciated that in fact, the most important rôle of the doctor is to keep people well, and signs are not wanting of an entirely new orientation with regard to the outlook of disease on the part of the medical profession itself. In my view, propaganda on health matters is not only the cheapest work undertaken by Health Authorities, but it is work, moreover, which is most likely to bring in its train the maximum amount of benefit to the individual.

**SUMMARY OF NURSING ARRANGEMENTS, HOSPITALS  
AND OTHER INSTITUTIONS AVAILABLE  
FOR THE DISTRICT.**

PROFESSIONAL NURSING IN THE HOME.—There are two Nursing Associations in the Borough which employ Nurses for nursing in homes. These are :—

- (1) The Seacombe, Egremont, New Brighton, and Liscard District Nursing Association (3 Nurses).
- (2) The Wallasey and Poulton Nursing Association (1 Nurse).

I have endeavoured to induce these Nursing Associations to allow their nurses to nurse certain infectious cases at home, but it would appear that there are certain old-fashioned regulations which prevent a Queen's Nurse from nursing an infectious case, founded, I believe, on the supposition that she may carry infection from an infectious case to other of her cases. I do not think there is the slightest risk of this, and I have explained so to the two Committees; but, while they would be willing, I understand they are tied by the Central Regulations. I may add that the Corporation were willing to give a grant to these Associations to defray the cost of their nursing infectious cases in the homes.

There are two trained nurses on my staff of Health Visitors, and these would be available for nursing to some extent. In the event of a serious epidemic, it would be necessary to engage nurses for this purpose.

DAY NURSERY.—There is now no Day Nursery in the Borough, the one formerly used at Marine Promenade in the Summer having been closed owing to alterations at Marine Park.

**HOSPITALS PROVIDED OR SUBSIDISED BY THE LOCAL  
AUTHORITY.**

The following Hospitals are PROVIDED by the LOCAL AUTHORITY within the District :

- |   |   |
|---|---|
| 1. Mill Lane Hospital :                             | For Infectious Diseases (other than small pox).         |
| 2. Tuberculosis Sanatorium :<br>Mill Lane Hospital. | One block, 22 beds, for advanced and observation cases. |
| 3. Highfield Maternity Home :<br>Mill Lane.         | 10 Beds.  |
| 4. Leasowe Road Hospital :                          | For Small-pox cases, 12 beds.                           |

5. Child Welfare Centre :  
New Street. 8 beds available for infants suffering from Malnutrition. Mothers are required to visit their children daily and receive practical instruction in all matters affecting their children's welfare. Where possible, a charge is also made for the children's maintenance.

The following Hospitals and Institutions are SUBSIDISED by the Local Authority either by way of : (A) An Annual Grant ; or (B) Payment for beds occupied by cases sent by this Authority :—

1. Victoria Central Hospital : £600 per annum grant.
2. Wallasey Dispensary : £40 per annum grant.
3. Wallasey Cottage Hospital : £180 per annum grant.
4. Convalescent Home for Children : West Kirby. Three beds for Convalescent Children (girls between 3 and 15, and boys between 3 and 11 years), £40 per annum per bed.
5. Royal Liverpool Country Hospital : Heswall. 2 beds for Children suffering from Non-Pulmonary Tuberculosis. £91 per bed per annum.
6. Leasowe Hospital for Children : Leasowe. 6 beds for Children suffering from Non-Pulmonary Tuberculosis. 40/- per bed per week. Arrangements have also been made for beds as required for Orthopaedics cases.
7. St. Paul's Eye and Ear Hospital : Liverpool. Arrangements are made whereby cases may be referred from Wallasey for treatment either as in-patients or out-patients, this Authority contributing approximately one-half the cost.
8. Tranmere Union Infirmary : Birkenhead. Wallasey is a part of the Birkenhead Poor Law Union, and cases are admitted from this Borough as necessity requires.
9. Cheshire Joint Sanatorium : near Market Drayton. The new Sanatorium for the joint use of the County and County Boroughs of Birkenhead, Wallasey, Stockport, and Chester was officially opened in September, 1923. 16 beds are allotted for Wallasey cases, but so far only 11 have been used. The cost per bed per week is 63/-.

## INSTITUTIONAL PROVISION FOR UNMARRIED MOTHERS.

### ILLEGITIMATE INFANTS AND HOMELESS CHILDREN WITHIN AND WITHOUT THE DISTRICT.

- |  |  |
|--|--|
| 1. St. Faith's Home : Palm Grove, Birkenhead.      | A Grant of £50 per annum is made towards this Home, which receives young Unmarried Mothers from this Borough.  |
| 2. Birkenhead Union :                              | Unmarried Mothers are also received at the Tranmere Union Infirmary, Birkenhead.   |
| 3. Birkenhead Union :                              | The Guardians look after the first illegitimate children of mothers. These children are looked after in an Institution in Bebington, the mothers contributing what they can from their earnings outside.   |
| 4. Birkenhead Union :<br>Wallasey Scattered Homes. | The Guardians have two houses situate in Mill Lane, Wallasey, for the reception of 24 destitute and orphan infants. They have also a large house situate in Albion Street, New Brighton, where they have accommodation for 24 children under the age of 5 years. |

### AMBULANCE FACILITIES.

- |  |  |
|--|--|
| (A) For Infectious Cases :                 | (1) A Buick Motor Ambulance (loaned by the British Red Cross Society), (2) A Ford Delivery Van for infected clothing.                        |
| (B) For Non-Infectious and Accident Cases. | Two Motor Ambulances for Non-Infectious and Accident cases are available for public use. These are under the control of the Watch Committee. |

### DISINFECTION.

There are two Washington-Lyons Disinfectors at Mill Lane Infectious Diseases Hospital, and for disinfestation.





TABLE SHOWING NOTIFICATIONS OF INFECTIOUS DISEASES.

(A) in each Ward ; (B) in each Month ; and (C) in each Quarter for the Five Years, 1921-1925.

## (A) WARDS.

	Small-pox.	Diphtheria	Erysipelas.	Scarlet Fever.	Typhoid Fever.	Puerperal Fever.	Cerebro-Spinal.	Acute Polio-Myelitis.	Tuber- culosis.		Ophthalmia Neonatorum.	Malaria.	Dysentery.	Trench Fever.	Plague.	Influenzal, &c. Pneumonia.	Encephalitis Lethargica.	Totals.
									Pulmy.	Other								
1	—	32	4	67	3	—	—	—	54	3	1	—	—	—	—	24	—	188
2	—	22	8	89	—	—	—	1	31	5	2	—	—	—	—	32	2	192
3	—	24	5	140	3	1	—	—	50	11	2	2	—	—	—	25	3	266
4	—	25	6	121	3	—	—	—	66	15	1	1	—	—	—	22	1	261
5	—	17	7	70	3	—	—	1	69	9	1	—	—	—	—	22	2	201
6	—	29	7	92	—	2	—	—	60	14	4	—	—	—	—	41	1	250
7	—	35	8	123	2	6	—	—	104	29	5	—	—	—	—	71	2	385
8	—	34	11	127	4	6	—	1	114	37	3	1	—	—	—	73	—	411
9	—	28	11	127	1	1	—	—	89	21	4	1	—	—	—	30	2	315
10	—	28	8	104	1	4	—	—	70	22	2	1	—	—	—	24	—	264
11	—	18	8	59	3	2	—	—	37	14	1	—	—	—	—	18	1	161
12	—	19	3	74	1	—	—	—	29	9	4	—	—	—	—	12	1	152
13	—	12	5	70	5	1	—	—	24	3	—	—	—	—	—	23	2	145
14	—	17	4	66	1	1	—	—	27	8	2	—	—	—	—	21	—	147
TOTALS ...	—	340	95	1,329	30	24	—	3	824	200	32	6	—	—	—	438	17	3,338

## (B) MONTHS.

Jan. ...	—	26	12	102	3	3	—	—	71	9	3	—	—	—	—	46	2	277
Feb. ...	—	36	15	101	2	1	—	1	68	16	1	—	—	—	—	76	3	320
March ...	—	25	10	110	—	4	—	—	71	18	4	1	—	—	—	39	4	286
April ...	—	19	6	90	4	1	—	—	50	26	1	—	—	—	—	38	—	235
May ...	—	24	8	99	6	3	—	—	79	24	4	1	—	—	—	44	2	294
June ...	—	17	4	95	3	2	—	—	55	14	1	—	—	—	—	24	—	215
July ...	—	18	6	114	2	—	—	—	58	15	1	2	—	—	—	19	3	238
August .	—	15	4	64	—	2	—	—	61	9	5	—	—	—	—	19	—	179
Sept. ...	—	20	10	83	—	—	—	—	68	10	4	—	—	—	—	21	—	216
Oct. ...	—	35	10	109	3	3	—	—	53	14	2	—	—	—	—	19	2	250
Nov. ...	—	42	5	182	4	2	—	2	74	24	2	2	—	—	—	41	—	380
Dec. ...	—	63	5	180	3	3	—	—	116	21	4	—	—	—	—	52	1	448
TOTALS ...	—	340	95	1,329	30	24	—	3	824	200	32	6	—	—	—	438	17	3,338

## (C) QUARTERS.

1st Q. ...	—	87	37	313	5	8	—	1	210	43	8	1	—	—	—	161	9	883
2nd Q. ...	—	60	18	284	13	6	—	—	184	64	6	1	—	—	—	106	2	744
3rd Q. ...	—	53	20	261	2	2	—	—	187	34	10	2	—	—	—	59	3	633
4th Q. ...	—	140	20	471	10	8	—	2	243	59	8	2	—	—	—	112	3	1,078
TOTALS ...	—	340	95	1,329	30	24	—	3	824	200	32	6	—	—	—	438	17	3,338

The following Table shows the number of Notifications since the Year 1909:—

DISEASE.	1909	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924	1925
Small-pox ...	—	7	10	1	—	—	—	—	—	—	3	—	—	—	—	—	—
Diphtheria and Membranous Croup ...	57	44	62	75	44	84	89	68	46	49	71	103	96	88	60	34	62
Erysipelas ...	32	32	42	28	21	47	34	21	20	12	22	31	19	18	17	19	22
Scarlet Fever ...	716	329	286	307	312	249	210	119	189	361	286	145	494	265	113	170	287
Typhus... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Typhoid ...	18	14	24	16	19	22	14	11	2	4	1	6	11	2	4	10	3
Puerperal Fever ...	2	4	3	3	1	1	3	2	1	4	2	5	12	5	2	1	4
Phthisis ...	—	—	71	176	158	171	130	181	192	182	115	142	198	160	117	169	180
Non-Pulmonary Tuberculosis ...	—	—	—	—	66	38	39	48	25	16	52	26	31	31	31	51	56
Cerebro-Spinal Meningitis ...	—	—	—	—	—	1	1	—	1	—	—	—	—	—	—	—	—
Acute Poliomyelitis ...	—	—	—	—	—	1	—	—	—	—	1	1	—	—	—	1	2
Ophthalmia Neonatorum (from April 1st, 1914) ...	—	—	—	—	—	16	8	17	12	9	9	10	7	5	7	11	2
Measles... ..	—	—	—	—	—	—	—	1,116	751	533	98	—	—	—	—	—	—
" (German) ...	—	—	—	—	—	—	—	379	164	65	144	—	—	—	—	—	—
Malaria... ..	—	—	—	—	—	—	—	—	—	—	24	15	3	3	—	—	—
Dysentery ...	—	—	—	—	—	—	—	—	—	—	3	—	—	—	—	—	—
Trench Fever ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Influenzal Pneumonia ...	—	—	—	—	—	—	—	—	—	—	—	75	65	123	100	76	74
Encephalitis Lethargica ...	—	—	—	—	—	—	—	—	—	—	130	—	4	—	5	3	5
TOTALS ...	825	430	498	606	621	630	528	1,962	1,403	1,236	962	559	940	700	456	545	697

## SCARLET FEVER.

The following Table shows the number of notifications of and deaths from Scarlet Fever in each of the past five years :—

Year.	Number of notifications.	Attack rate per 1,000 of population.	Number of deaths.	Death rate per 1,000 of population.	Admissions to hospital.
1921	494	5·4	3	0·03	190
1922	265	2·9	2	0·02	94
1923	113	1·2	—	—	61
1924	170	1·8	1	0·01	89
1925	287	3·1	1	0·01	158
	1,329	2·9	7	Av. 0·01	592

The incidence of Scarlet Fever in the first year of the quinquennium was rather above the average ; it then fell, and last year was about the average. There were 1,329 cases notified in the five years, with 7 deaths, giving a rate of 0·5 per cent. of attacks ; in other words, 1 in 200 died. These figures show that the disease continues to be of the exceedingly mild type which has prevailed of late years.

On Table page 54, will be found some information in regard to Scarlet Fever since the year 1901. It will be seen from that Table that in the last 10 years, in spite of there being included in the period two years of what might in these days be termed an exceedingly high case mortality, only 19 patients died, giving a total case mortality of 0·7 per cent., and in four of the years not a single death occurred. Not only is the mortality rate low, but complications, which used to be so frequent and serious, now occur infrequently and are not serious. Nowadays cases of Albuminuria are infrequent, and quite readily respond to treatment. Similarly, ear discharges, which formerly were frequent and difficult to cure, now are very uncommon, and clear up easily. Moreover, at our Minor Ailments School Clinic, when a case of ear discharge turns up for treatment enquiries are always made with the view of discovering the cause. Practically never are we able to associate the discharge with a previous attack of Scarlet Fever.

The cost of the isolation of cases of Scarlet Fever in Fever Hospitals is not inconsiderable. The question seriously arises, having regard to the above facts, whether the expense of isolating cases of Scarlet Fever in Hospital, simply on account of Scarlet Fever being an infectious disease, is justifiable.

It will be noticed from the same Table that the percentage of admissions has increased. This has been due entirely to the abnormal housing conditions prevailing. So long as there is such serious overcrowding in houses, it is not possible to adequately treat at many homes even the mildest form of any disease, to say nothing of an infectious disease.

There is another point in connection with the isolation of Scarlet Fever cases in Hospital which requires consideration, namely, that "Return" cases are much less likely to occur with home treated cases than with cases treated in Hospital. In a recent survey of "Return" cases, from 1908 to the present time, it appears that, while the percentage of secondary cases to cases treated in Hospital for the whole period is 3·1, the percentage of secondary cases to cases treated at home is 0·7; and during the period under review, 2,939 cases were treated in Hospital, and 2,076 at home.

The Health Committee some years ago agreed to my suggestion that a case of Scarlet should not be admitted to Hospital merely because it was labelled "Scarlet Fever," but it should be admitted only: (1) when any kind of isolation was absolutely impossible; (2) when a case was severe and required special nursing; and (3) when a case occurred on premises where there was a danger of food being infected. The results have amply justified that policy. It appears to me, after an experience of 30 years in Infectious Hospitals, that their use is far too restricted. Officially the cases isolated are Scarlet, Diphtheria and Typhoid. Typhoid nowadays rarely occurs. Scarlet Fever is now such a mild disease that under ordinary housing conditions it is unnecessary to isolate it in Hospital, with the exceptions named above. The available accommodation could be made use of for selected cases of Measles, Whooping Cough, Pneumonia, *according to the special need of the district at any particular time.* Moreover, the danger of cross infection in the Wards would be lessened, or even done away with, by the adaptation of some of our present Wards so as to make possible the open air methods now employed in the treatment of Tuberculosis.

Experience has shown that, in the open air, much more so than even in Wards with proper nursing methods, cases of different infectious diseases can be treated side by side. These are my own views from my own experience. It would be very helpful if the Ministry of Health, with the opportunities they have of obtaining information from all over the country, would give some pronouncement on this question of the extended use of Fever Hospitals. This is especially important, in view of the proposed abolition of Boards of Guardians, in relation to the future hospital requirements in various districts.

It may be that Scarlet Fever will revert to the type which some of us remember so well (and incidentally, it may be remarked, that on the whole the cases treated in Hospital last year were of a more severe type than usual with a greater return case rate), in which case the previous methods of dealing with it might well be resumed. In a word, what is required in order to make the best use of Fever Hospitals, is more elasticity; they should be used, as far as infectious diseases are concerned, to meet the pressing needs of the moment, and not stereotyped for the isolation of what were at one time undoubtedly the most serious infectious diseases—Scarlet Fever, Diphtheria and Enteric—but of which Diphtheria only remains to be included in that category.

The following is an extract from a report I made in November, 1925, to the Ministry of Health *re* "Return" cases:—

19th November, 1925.

#### SCARLET FEVER RETURN CASES.

*The main point on which information was desired, was the persistence of infection in Scarlet Fever in some instances. In the years 1908-12 we had no fewer than 11 cases isolated in hospital for periods of 90 days and over, the longest periods being 131, 116, 115, 106 (three cases) and 104 days. All these cases were the presumed cause of secondary cases on their discharge from hospital. From 1913 onwards to November of this year, the longest period of isolation was 70 days, except in three instances, namely, 78 (of home treated cases) and 81 and 71 (hospital cases). All these were the cause of return cases. As the result of my enquiries into return cases since 1908 some other facts have emerged which may be of use to you.*

(1) *From the period 1908-25 (November 1st) there were 116 secondary or return cases of Scarlet Fever, presumably infected by 107 primary cases. Ninety-two of these primary cases were treated in hospital, and 15 at home. In the five years 1908-12, no fewer than 72 out of the 107 cases occurred, namely, 61 in hospital cases and 11 in home treated cases. The average period of isolation in hospital of the primary cases was 56.1 days, and of the 11 home cases, 47.1 days. In the 12½ years 1913-25, there have been only 34 secondary or return cases—30 in hospital and four in home treated cases. The average period of isolation of the hospital cases was 43 days, and for the home cases, 45 days. It is a fact, although not suggested as cause and effect, that the longer the cases were kept in hospital, the more return cases occurred. This is shown very markedly in the years 1908-12. The records show that the secondary cases resulting from the primary cases isolated for six weeks or less were 19 in number, and of over six weeks, 42; and of these 42, 20 were isolated for over eight weeks, and 15 for over nine weeks. The same fact is brought out.*

although not so markedly, in regard to home secondary cases; five secondary cases resulting from those isolated six weeks and under, and six for those isolated more than six weeks—two of these after nine weeks isolation.

(2) The number of return cases has decreased, coincident with a diminishing period of isolation in hospital.

(3) The actual incidence of Scarlet Fever in the Borough has decreased coincident with the increased number of children isolated at home. In other words, the fewer the cases removed to hospital, the less has been the incidence of the disease.

(4) House disinfection was given up here at the end of 1922. In 1923 we had the lowest number of Scarlet Fever cases ever recorded, namely, 113.

I am not suggesting cause and effect, or attempting to explain anything; I am simply stating the facts. In several recent years the number of cases of Scarlet Fever isolated at home has exceeded those removed to hospital, the exact converse of what used to be the practice.

#### " RETURN " CASES.

Periods of Year when " Return " Cases have occurred.

Year.	Jan.	Feb.	Mch.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Quarters.				Total
													1st	2nd	3rd	4th	
1925	—	1	1	—	—	—	1	—	1	1	2	1	2	—	2	4	8
1924	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1923	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1922	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1	—	1
1921	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	1
1920	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	1	1
1919	2	1	—	—	—	—	—	—	—	1	—	—	3	—	—	1	4
1918	—	—	4	—	—	—	1	1	—	—	1	—	4	—	2	1	7
1917	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1	—	1
1916	—	—	—	—	—	—	1	—	2	—	—	—	—	—	3	—	3
1915	1	—	—	—	1	—	—	—	—	—	—	—	1	1	—	—	2
1914	2	—	—	1	—	—	—	1	—	—	—	—	2	1	1	—	4
1913	—	1	1	—	—	—	—	—	1	2	—	—	2	—	1	2	5
1912	—	1	1	2	2	—	—	3	—	1	4	—	2	4	3	5	14
1911	—	—	—	—	—	—	—	1	1	—	3	—	—	—	2	3	5
1910	1	—	1	—	1	—	2	—	—	2	—	—	2	1	2	2	7
1909	5	1	2	4	2	4	3	1	1	1	2	1	8	10	5	4	27
1908	8	1	—	2	—	—	—	1	—	1	—	4	9	2	1	5	17
	19	6	10	9	6	4	10	8	6	9	13	7	35	19	24	29	107

Details concerning "Return" Cases of Scarlet Fever during the quinquennium are as under :—

Year.	Number of "Return" cases.	Occurrence after discharge of first case from hospital.	Interval between onsets of first and second cases.	Complications of first case while in hospital.
		Days.	Days.	
1921	1	9	26	None
1922	1	26	81	Albumen
1923	Nil.	—	—	—
1924	Nil.	—	—	—
1925	8	(a) 16	48	Otorrhœa— an old disability.
		(b) 4	28	None
		(c) 8	37	Otorrhœa— had running ear for years.
		(d) 4	36	Enlarged tonsils.
		(e) 7	39	None
		(f) 6	37	None
		(g) 1	32	Enlarged cervical glands—second week.
		(h) 13	42	None
TOTAL	10	—	—	—

Also 1 home return case in 1925, four days after release from isolation of first.

Interval between onset of first and second cases, 32 days.

## (HOME-TREATED CASES).

Table showing number of houses where two or more cases occurred.

1921	1922	1923	1924	1925	Totals	
15	8	3	3	4	31	Instances when 2 cases notified at same time.
3	4	1	1	—	9	“ “ 3 “ “ “
—	—	—	—	—	—	“ “ 4 “ “ “
—	—	—	1	1	2	“ “ 2nd case notified 1 day after previous case.
—	1	—	—	—	1	“ “ “ 2 days “
—	—	—	—	—	—	“ “ “ 3 “ “
1	—	—	—	1	2	“ “ “ 4 “ “
1	—	—	—	—	1	“ “ “ 5 “ “
1	—	—	—	—	1	“ “ “ 6 “ “
—	—	—	—	—	—	“ “ “ 7 “ “
4	1	1	—	4	10	“ “ “ 8 14 “ “
2	3	—	2	1	8	“ “ “ 15 21 “ “
1	1	—	1	1	4	“ “ “ 22 28 “ “
—	—	—	—	—	—	“ “ “ 29 35 “ “
1	—	—	—	—	1	“ “ “ 36 42 “ “
2	—	—	—	—	2	“ “ “ 43 49 “ “
—	1	—	—	—	1	“ “ “ 50 56 “ “
1	—	—	—	—	1	“ “ “ 57 63 “ “
—	—	1	—	—	1	“ “ “ 64 70 “ “
3	—	—	—	—	3	“ “ “ Over 70 “ “

## (HOSPITAL CASES.)

In houses where two or more cases occurred, the following were removed to hospital at the intervals named.

1921	1922	1923	1924	1925	Totals	
5	3	2	2	2	14	Instances when 2 cases were removed at same time.
—	2	—	—	—	2	“ “ 3 “ “ “
1	—	2	—	2	5	At an interval of 1 day after admission of previous case.
—	—	1	1	—	2	“ “ 2 days “ “
—	—	—	—	1	1	“ “ 3 “ “
2	—	—	—	—	2	“ “ 4 “ “
—	—	—	1	—	1	“ “ 5 “ “
2	1	—	—	—	3	“ “ 6 “ “
—	—	—	1	1	2	“ “ 7 “ “
1	—	1	—	—	2	“ “ 8 14 “ “
—	—	—	—	2	2	“ “ 15 21 “ “
3	—	—	1	1	5	“ “ 22 28 “ “
—	—	—	1	—	1	“ “ 29 35 “ “
—	—	—	—	2	2	“ “ 36 42 “ “
1	—	—	—	1	2	“ “ 43 49 “ “
—	—	—	—	—	—	“ “ 50 56 “ “
1	—	—	—	—	1	“ “ 57 63 “ “
2	—	—	—	1	3	“ “ 64 70 “ “
3	1	—	—	—	4	“ “ over 70 days “ “

In 1921, 1 case notified as Diphtheria and Scarlet Fever.



The following Table gives some very interesting information with regard to Scarlet Fever cases in this district since the year 1901 :—

STATISTICS RE SCARLET FEVER SINCE 1901.

Year.	Estimated Population at Middle of Year.	Total Notifications.	Attack rate per 1,000 of Population.	No. of Deaths.	Death rate per cent. of Cases.	Death rate per 1,000 of Population.	No. of Cases Admitted to Hospital.	Percentage of Cases removed to Hospital.	No. of Deaths in Hospital.	Percentage of Deaths in Hospital to Admissions.
1901	54,000	147	2.7	5	3.4	0.09	68	45.5	4	5.9
	— Census —									
	53,579									
1902	55,000	293	5.3	5	1.7	0.09	199	67.9	4	2.0
1903	56,000	440	7.8	18	4.1	0.32	309	70.2	11	3.5
1904	57,000	270	4.7	8	3.0	0.14	170	62.9	7	4.1
1905	58,000	348	5.9	6	1.7	0.10	227	62.0	3	1.3
1906	62,000	266	4.3	6	2.2	0.09	178	66.9	6	3.3
1907	67,000	255	3.8	6	2.3	0.08	188	73.7	6	3.2
1908	71,000	248	3.5	10	4.0	0.14	174	70.1	9	5.1
1909	73,000	716	9.8	20	2.7	0.27	507	70.8	14	2.7
1910	75,000	329	4.3	3	0.5	0.04	229	69.6	2	0.8
1911	79,000	286	3.6	2	0.7	0.02	189	66.1	1	0.5
	— Census —									
	78,504									
1912	81,000	307	3.8	6	1.9	0.07	205	66.7	3	1.4
1913	83,000	312	3.8	6	1.9	0.07	216	69.2	5	2.3
1914	85,000	249	2.9	4	1.6	0.04	159	63.8	2	1.2
1915	Gross 90,000 Civil 85,000	210	2.3	3	1.4	0.03	90	42.8	3	1.4
1916	*83,442	119	1.4	0	0	0	66	55.4	0	0
	†90,786									
1917	*84,209	189	2.2	0	0	0	111	58.7	0	0
	†93,869									
1918	*80,956	361	4.4	7	1.9	0.08	199	55.1	3	1.5
	†90,708									
1919	95,424	286	2.9	5	1.7	0.05	167	58.4	4	2.3
	†99,403									
1920	100,000	145	1.4	0	0	0	83	57.1	0	0
1921	90,809	494	5.4	3	0.6	.03	190	38.4	2	1.0
	— Census —									
1922	91,000	265	2.9	2	0.7	.02	94	35.4	1	1.0
1923	†91,000	113	1.2	—	—	—	61	54.0	—	—
1924	91,000	170	1.8	1	0.6	.01	89	52.3	1	1.1
1925	91,720	287	3.1	1	0.3	.01	158	55.0	1	0.6

\*Registrar-General's estimate for calculating Death Rate.

†Ditto Birth Rate.

‡Lowest number of Notifications since 1892.

RELATION OF SIZE OF HOUSE TO INFECTION WITH SCARLET FEVER  
IN 1925.

Size of House. Rooms.	No. of Notifi- cations.	No. of Removals to Hospital.	No. of Home Cases.	Mortality Rates per cent.		No. of persons living in each class of house at the 1921 Census.	Incidence rate per 1,000 persons living in each class of house.
				Hospital cases to admission	Home cases.		
1	—	—	—	—	—	1,199	—
2	—	—	—	—	—	4,202	—
3	—	—	—	—	—	6,251	—
4	52	41	11	—	—	14,280	3·6
5	2	2	—	—	—	19,975	0·1
6	149	80	69	—	—	29,007	5·1
Over 6	84	35	49	0·6	—	12,895	6·5
Totals ...	287	158	129	0·6	—	87,809	3·2

### DIPHTHERIA.

The incidence of Diphtheria during the quinquennium has been about normal. Of the 62 cases occurring in 1925, no fewer than 40 of them occurred in the last quarter of the year. In a perusal of the Table on page 57 two facts stand out. Taking five yearly periods the *incidence* per thousand of population has not markedly varied from the first quinquennium ·88 to the last quinquennium ·72, but a reference to the percentage *mortality* rate shows a very marked decline, even between the last two quinquennia, namely, 9·9 to 6·1. The average case mortality rate for the quinquennium 1906 to 1910 was 18.

Nothing has been done in Wallasey in the way of Schick or Dick Tests, and nothing in the way of immunising the nurses at the Infectious Hospital. There has been only 1 case of Diphtheria among the nursing staff in the last six years.

The following Table shows the number of notifications of, and deaths from, Diphtheria in each of the past five years :—

Year.	Number of Notifica- tion.	Attack Rate per 1,000 of population	Number of Deaths		Death Rate per 1,000 of population.	Admissions to hospital.
			In hospital.	At home.		
1921	96	1·0	11	1	0·13	45
1922	88	0·8	3	1	0·04	46
1923	60	0·6	1	—	0·01	41
1924	34	0·3	—	—	0·01	25
1925	62	0·6	5	1	0·06	43

The throats of all children are examined bacteriologically before discharge from Hospital. Swabs are not taken from contacts as a routine measure. This is done only in exceptional instances.

#### CASES IN THE WARDS.

Year.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	Totals
1921	10	8	3	5	4	10	10	6	7	8	10	5	2	8	96
1922	4	5	7	9	7	12	8	11	8	5	—	5	2	5	88
1923	6	2	9	8	2	3	2	7	2	4	4	6	4	1	60
1924	2	2	2	1	2	1	5	4	7	3	1	2	2	—	34
1925	10	5	3	2	2	3	10	6	4	8	3	1	2	3	62
Totals	32	22	24	25	17	29	35	34	28	28	18	19	12	17	340

#### " RETURN " CASES.

1921	...	No return cases.
1922	...	" "
1923	...	" "
1924	...	" "
1925	...	One case.

#### ANTITOXIN APPLICATIONS FROM PRACTITIONERS.

1921	...	21 applications.	440,000 units issued.
1922	...	23 "	854,000 " "
1923	...	31 "	344,000 " "
1924	...	24 "	352,000 " "
1925	...	20 "	454,000 " "

The following Table gives some very useful information with respect to Diphtheria and Croup in this district since 1901 :—

Year.	Estimated Population Middle of Year.	Total No. of Cases Notified	Attack Rate per 1,000 Population.	No. of D'ths. Registered Diphtheria and Croup.	Fatality per cent. of Cases.	Mortality per 1,000 Population.	Number of Cases treated in Hospital.	Percentage of Cases Removed to Hospital.	
1901	54,000	55	1.0	12	21.8	0.22	22	40.0	
	{ Census 53,579 }	255							
1902	55,000		40	0.7	5	12.5	0.09	20	50.0
1903	56,000		40	0.7	3	7.5	0.05	27	67.5
1904	57,000		55	0.9	12	21.8	0.21	33	54.5
1905	58,500		65	1.1	10	15.3	0.17	45	69.2
1906	62,000	58	0.9	12	20.7	0.19	30	51.7	
1907	67,000	92	1.3	7	7.6	0.10	61	66.3	
1908	71,000	72	1.0	8	11.0	0.11	50	69.4	
1909	73,000	57	0.7	9	15.7	0.12	31	54.4	
1910	75,000	44	0.58	4	9.0	0.05	25	56.8	
1911	79,000	62	0.78	16	25.8	0.20	46	74.2	
	{ Census 78,504 }	354							
1912	81,000		75	0.9	9	12.0	0.11	39	52.0
1913	83,000		44	0.5	5	11.3	0.06	28	63.6
1914	85,000		84	0.99	9	10.7	0.10	56	66.6
1915	Civil 85,000 Gr's 90,000		89	0.99	15	16.8	0.16	54	60.6
1916	*83,442	68	0.08	11	16.1	0.13	43	63.2	
	†90,786	337							
1917	*84,209		46	0.81	1	2.1	0.01	25	54.3
	†93,869								
1918	*80,956		49	0.65	6	12.2	0.07	31	65.3
	†90,708								
1919	*95,424	71	0.74	9	12.6	0.09	25	35.2	
	†99,403	340							
1920	100,000		103	1.03	7	6.8	0.07	33	32.0
1921	89,600		96	1.07	12	12.5	0.13	57	59.4
1922	91,000		88	0.85	4	4.5	0.04	46	52.0
1923	91,000		60	0.65	1	1.1	0.01	41	68.3
1924	91,000	34	0.37	1	2.9	0.01	25	73.5	
1925	91,720	62	0.67	6	9.6	0.06	43	69.3	

\*Registrar-General's estimate for calculating Death Rate.

†Ditto Birth Rate.

#### HOME-TREATED CASES, 1921-1925.

From six houses, two cases notified at same time.

In one instance, second case notified 15-21 days after first.

## HOSPITAL-TREATED CASES.

In six instances, two cases removed at same time.  
 In one instance, second case removed 4 days after first.  
 In three instances „ „ 8-14 „ „  
 In one instance „ „ 29-35 „ „

## TYPHOID.

A glance at the Table on page 59 will show one of the most gratifying features of public health administration, the practical disappearance of Typhoid Fever, which was once so prevalent and so deadly, and caused such prolonged anxiety to the patient's friends. There were 30 cases notified in the quinquennium (3 in 1925). Four of these 30 were imported into the district. 11 were treated in Hospital. Of these 11, one was found not to be Typhoid, and six were classed as Para Typhoid. The cause was not ascertainable in any of the cases.

The following Table shows the number of notifications of, and deaths from, Typhoid Fever in each of the past five years :—

Year.	Number of Notifications.	Attack Rate per 1,000 of Population.	Number of Deaths.	Death Rate per 1,000 of Population.	Admission to hospital.
1921	11	0·12	1	0·01	4
1922	2	0·02	1	0·01	1
1923	4	0·04	1	0·01	1
1924	10	0·10	1	0·01	3
1925	3	0·03	—	—	2
Totals	30	0·06	4	0·01	11

The Table below shows how remarkable has been the fall for several years past in the number of cases notified. It will be noted that there were 257 cases in 1901, in a population of 53,000, whereas there were but three cases in 1925, with a population of approximately 100,000.

## DEATHS FROM TYPHOID SINCE 1901, WITH RATES.

Year.	Notified Cases.	Deaths.	Wallasey Rate per 1,000 of Population.	English Rate.
1901	257	31	0.57	0.16
1902	64	12	0.21	0.13
1903	47	5	0.08	0.10
1904	39	7	0.12	0.09
1905	61	8	0.13	0.09
1906	65	5	0.08	0.09
1907	31	3	0.04	0.07
1908	34	4	0.05	0.07
1909	18	2	0.02	0.06
1910	14	5	0.06	0.05
1911	24	1	0.01	0.06
1912	16	3	0.03	0.04
1913	19	3	0.03	0.04
1914	23	1	0.01	0.04
1915	14	3	0.03	0.03
1916	11	3	0.03	0.03
1917	2	1	0.01	0.02
1918	4	1	0.01	0.02
1919	1	—	—	0.01
1920	6	2	0.02	0.01
1921	11	1	0.01	0.01
1922	2	1	0.01	0.01
1923	4	1	0.01	0.01
1924	10	1	0.01	0.01
1925	3	—	—	0.01

## ERYSIPELAS.

Below will be found particulars with regard to Erysipelas. This disease has ceased to be of any importance from the public health point of view, and it is difficult to understand why it is still on the list of notifiable diseases.

Year.	Number of Notifications.	Number of Deaths.	Death Rate per 1,000 of population.	Admissions to hospital.
1921	19	2	0.02	—
1922	18	4	0.04	—
1923	17	—	—	—
1924	10	—	—	1
1925	22	—	—	—
Totals	95	6	—	1

**CEREBRO-SPINAL MENINGITIS.**

No case of this disease was notified in the past five years.

**ACUTE POLIO-MYELITIS.**

Three cases of this disease were notified during the past five years, viz., one in 1924 and two in 1925, giving attack rates of 0·01 and 0·02 respectively per 1,000 of population. None of the cases proved fatal.

**ENCEPHALITIS LETHARGICA.**

The following Table shows the notifications of this disease during the past five years :—

Year.	Number of Notifications.	Attack Rate per 1,000 of population.	Number of Deaths.	Death Rate per 1,000 of population.
1921	4	0·04	3	0·03
1922	—	—	—	—
1923	7 (a)	0·07	4	0·04
1924	3 (b)	0·03	—	—
1925	5 (c)	0·05	2	0·02
	19		10	

(a) One case admitted to the Infectious Diseases Hospital.

(b) One case turned out to be G.P.I., and is at present in an asylum.

(c) Diagnosis of one case in 1925 withdrawn.

Notifications In	Sex	Age	Results of Bacteriological Examination.	Occupants in house.	Subsequent History.
1921	F	38	None made	4	Fatal day after notification.
	M	2 $\frac{3}{4}$	do.	9	Fatal at time of notification.
	F	37	do.	3	Nervous temperament more marked.
	F	60	* { Albumen and Sugar present. Cells consist of Lymphocytes. No Bacteria found. }	3	Fatal two days after notification.
1923	F	18	No Bacteria found. No excess of cells.	5	Resumed work, but said to be irritable
	F	52	Lumbar puncture. No fluid obtained.	5	No change in behaviour but certain ocular symptoms remain, though improving.
	F	23	None made.	3	Fatal several months later.
	M	41	do.	?	Died as result of injury on railway.
	F	61	do.	3	Fatal 2-3 months later.
	M	43	No organisms found.	5	Fatal few days later.
	F	42	None made.	3	Fatal same month.
1924	F	19	do.	8	Got very fat; falls asleep if not actually employed. Dislike of another member of family, but this has passed.
	M	8	do.	8	Rather excitable and much more "touchy" than before.
	M	48	Not known.	2	Case proved to be G.P.I., and he is now in asylum.
1925	M	34	None made.	5	No information.
	M	47	Not known.	?	Fatal in a Liverpool hospital same month.
	M	44	do.	4	Diagnosis withdrawn; Patient moved to Tranmere, dying six weeks later.
	F	66	Not stated.	5	Fatal same month.
	F	30	None made.	7	Depression, but otherwise apparently normal.

\* Diagnosis Confirmed by Specialist.



### LOBAR AND INFLUENZAL PNEUMONIA.

The following Tables give particulars regarding the incidence of, and the mortality from, Influenzal Pneumonia :—

#### NOTIFICATIONS.

1921.	1922.	1923.	1924.	1925.	Totals.
65	123	100	76	74	438

#### SEXES AND AGES OF NOTIFICATIONS.

Sexes.	0-1.	1-5.	5-15.	15-25.	25-45.	45-65.	Over 65.	Totals.
M	7	21	54	54	69	55	17	277
F	1	18	30	13	50	29	20	161
	8	39	84	67	119	84	37	438

#### DEATHS FROM INFLUENZA AND CHEST COMPLICATIONS.

##### (A) INFLUENZA.

Year.	Number of Deaths.		Rate per 1,000 of population.	Percentage of total deaths.
	All ages.	Under One year.		
1921	10	1	.11	1.04
1922	53	6	.58	4.7
1923	21	4	.23	2.2
1924	24	1	.26	2.1
1925	25	1	.27	2.4
Totals	133	13	.29	2.4

## (B) BRONCHITIS.

1921	44	4	.49	4.5
1922	70	3	.77	6.3
1923	59	5	.48	6.2
1924	72	4	.79	7.0
1925	57	—	.62	5.4
Totals	302	16	.63	5.8

## (C) PNEUMONIA.

Year.	Number of Deaths.		Rate per 1,000 of population.	Percentage of total deaths.
	All ages.	Under One Year.		
1921	71	1	.79	7.3
1922	91	7	1.0	8.2
1923	82	9	.90	8.6
1924	72	13	.79	7.0
1925	82	14	.89	7.9
	398	44	.87	7.8

Some of these were admitted to the General Hospital, and in a few the services of the District Nurse were requisitioned. Some were cases which, with a more elastic administration of Infectious Hospitals, could have been isolated therein. Apparently there is lack of accommodation locally for them. Of the 20 cases marked "isolation unsatisfactory," four were fatal.

**SMALL-POX.**

There were no cases of Small-pox notified during the past five years.

Visits were paid to contacts reported to us, mostly members of crews of vessels arriving in Liverpool from ports where Small-pox was prevalent, or having had a case on board.

## PUBLIC HEALTH (SMALL-POX PREVENTION) REGULATIONS, 1917.

No primary vaccinations or re-vaccinations were performed by the Medical Officer of Health during the past five years.

Particulars with regard to vaccination of infants by the Public Vaccinators for the past few years will be found below. These figures are supplied by the Vaccination Officer.

**VACCINATION RETURNS FOR WALLASEY FOR YEAR ENDED  
JUNE 30th.**

	1921	1922	1923	1924	1925
Successfully Vaccinated ... ..	1,042	1,053	978	924	822
Died before Vaccination ... ..	74	78	63	52	61
Insusceptible ... ..	9	10	8	10	8
Conscientious Objections... ..	242	240	194	137	186
Postponed by Medical Certificate ...	139	136	134	141	161
Removed, Traced, and Vaccination Officers notified ... ..	53	41	51	56	51
Not found, or removed to places unknown	41	29	45	38	38
Not Vaccinated, or otherwise accounted for ... ..	19	26	23	45	41
Total Number of Births Registered ...	1,619	1,613	1,496	1,403	1,368
Percentage of successful Vaccinations ...	64	65	65	65	60

**ANTHRAX.**

No case of Anthrax was reported in the Borough during the past five years.

**RABIES.**

No case of Rabies occurred in the past five years.

There were no notifications during the quinquennium of

**MALARIA,  
DYSENTERY,  
TRENCH FEVER,  
TYPHUS,  
CHOLERA,  
OR  
PLAGUE.**

Plague contacts who were reported ex vessels arriving from infected ports were visited.

**MEASLES.**

Measles is not notifiable in the Borough, compulsory notification having ceased at the end of 1919. Cases and suspected cases occurring in the Schools are notified through the Education Office, and all are visited in their homes by the Health Visitors. Certain cases also are admitted to the Infectious Diseases Hospital.

There was an epidemic of Measles in the spring months of 1922, 1924 and 1925. There were, however, few months in the whole of the five years in which one or two suspected cases were not reported to me.

The following Table gives particulars as to the cases reported from the schools in each of the past five years :—

Year.	Number reported.	Number not as reported.	Number of Deaths.	Death Rate per 1,000 of population.
1921	16	3	—	—
1922	411	6	11	0·1
1923	35	3	—	—
1924	329	2	8	0·08
1925	283	12	5	0·05
Totals	1,074	26	24	0·05

**WHOOPIING COUGH.**

The procedure with regard to Whooping Cough is exactly the same as in Measles. Whooping Cough, like Measles, is hardly ever absent from the Borough. There was a mild epidemic in 1921, after which the incidence subsided until it began to appear in epidemic form again in the autumn of 1924, continuing in the same form during the spring and early summer months of 1925, since when only odd cases have occurred.

The following Table gives particulars as to the cases reported in each of the past five years :—

Year.	Number reported.	Number not as reported.	Number of Deaths.	Death Rate per 1,000 of population.
1921	168	12	8	0·08
1922	54	10	7	0·07
1923	81	8	4	0·04
1924	53	—	6	0·06
1925	320	52	9	0·09
Totals	676	82	34	0·07

**CHICKEN POX.**

Cases of suspected Chicken Pox are reported by the Education Authority, and visits are paid to the homes in order to ascertain the conditions existing thereat. Cases which admit of any doubt as to diagnosis are visited by one of the Medical Staff. Children found unvaccinated are reported to the Public Vaccinator.

The following Table gives particulars as to the cases reported in each of the past five years :—

Year.	Number reported.	Number not as reported.
1921	130	10
1922	68	2
1923	99	9
1924	176	3
1925	231	9
Totals	704	33

None of the cases were fatal.

Advantage is always taken when visiting cases of Chicken Pox to enquire whether the patient is well vaccinated or otherwise.

The cases visited during the past five years were :—

Year.	Number of cases.	Un-vaccinated.	One mark.	Two marks.	Four marks.
1921	130	1	25	6	98
1922	68	—	29	4	35
1923	99	3	41	10	45
1924	176	6	66	—	104
1925	231	10	98	21	102

**MUMPS.**

Mumps is a disease which at times very adversely affects the attendance of children at school. There was an epidemic in 1921, and again in 1925. In the interval the disease was practically absent from the Borough. The mortality was nil, and the disease for the most part very mild in character.

The following Table gives particulars as to the cases reported in each of the past five years :—

Year.	Number reported.	Number not as reported.
1921	409	39
1922	4	2
1923	4	—
1924	6	1
1925	338	30
Totals	761	72

None of the cases were fatal.

**SCHOOLS.**

The Report with regard to the medical inspection of School Children will be found in the Appendix to this Report.

In 1922 the Infants' Departments of five schools, and in 1924 of four schools, were closed owing to the incidence of Measles.

Under the new regulations of the Ministry of Education, a certificate was issued in 1925 in regard to the Infants' Department of one school, in which the attendance had fallen below 60% owing to the prevalence of Measles.

Cases of infectious or suspected infectious disease occurring amongst the scholars are reported to me by the Director of Education. All these are visited, and a report on each sent to that official. Whenever there is a suspicion that diseases are being spread by means of any particular school, visits are paid to it, and children excluded where necessary.

The following cases reported by the Education Authority were enquired into during the past five years :—

	1921.	1922.	1923.	1924.	1925.	Total.
Measles ... ..	16 (3)	411 (6)	35 (3)	329 (2)	283 (12)	1,074 (26)
Chicken-pox ...	130 (10)	68 (2)	99 (9)	176 (3)	231 (9)	704 (33)
Whooping Cough	168 (12)	54 (10)	81 (8)	53	320 (52)	676 (82)
Mumps ... ..	409 (39)	4 (2)	4	6 (1)	338 (30)	761 (72)
Other Diseases	264 (21)	71 (3)	13	20	109 (4)	477 (28)
	987 (85)	608 (23)	232 (20)	584 (6)	1,281 (107)	3,692 (241)

\*The figures in brackets are the numbers of cases found not to be as reported.

### HOSPITAL ACCOMMODATION.

The following is the accommodation available at

#### MILL LANE HOSPITAL.

Scarlet Fever ... ..	...	...	...	...	60 beds.
Diphtheria ... ..	...	...	...	...	18 „
Typhoid ... ..	...	...	...	...	4 „
Phthisis ... ..	...	...	...	...	22 „
					104 „
					104 „

#### LEASOWE ROAD SMALL-POX HOSPITAL.

Small-pox ... ..	...	...	...	...	12 beds.
------------------	-----	-----	-----	-----	----------







## ISOLATION AND DISINFECTION ARRANGEMENTS.

Cases of Scarlet Fever, Diphtheria, Enteric and Tuberculosis are admitted to the Infectious Hospital as a matter of routine. Cases of Measles, Infantile Diarrhoea, Cerebro-Spinal Fever and Encephalitis Lethargica when occasion demands.

Rooms of houses from which patients suffering from Tuberculosis are taken are disinfected by spraying, and the bedding disinfected by steam. House disinfection after Scarlet Fever, Diphtheria and Enteric was discontinued in 1922.

There are two Washington-Lyons Disinfectors at Mill Lane Infectious Diseases Hospital.

## DISINFECTION.

							1925.
Number of	Houses disinfected after fevers	...	...	...	...	...	323
"	"	"	phthisis	...	...	...	76
"	"	"	other diseases	...	...	...	42
"	Rooms	"	fevers and phthisis	...	...	...	105
"	"	"	vermin	...	...	...	—
"	"	"	in hospitals	...	...	...	—
"	Books from Public, Private, or School Libraries	disinfected					158
"	Schools disinfected	...	...	...	...	...	—
"	Public Buildings disinfected	...	...	...	...	...	—

## LIST OF ARTICLES DISINFECTED.

Number of	Mattresses	...	...	...	...	...	...	24
"	Beds	...	...	...	...	...	...	501
"	Pillows and Bolsters	...	...	...	...	...	...	1,039
"	Blankets	...	...	...	...	...	...	938
"	Quilts and Eiderdowns	...	...	...	...	...	...	479
"	Sheets	...	...	...	...	...	...	447
"	Articles of wearing apparel	...	...	...	...	...	...	2,400
"	Miscellaneous articles	...	...	...	...	...	...	398
"	Hospital Wash Bags, etc.	...	...	...	...	...	...	—
	Total	...	...	...	...	...	...	6,226

## LIST OF ARTICLES DESTROYED.

Number of	Mattresses	...	...	...	...	...	...	—
"	Beds	...	...	...	...	...	...	29
"	Pillows, Bolsters and Blankets	...	...	...	...	...	...	22
"	Articles of Bedding	...	...	...	...	...	...	—
"	Articles of wearing apparel	...	...	...	...	...	...	39
"	Miscellaneous articles	...	...	...	...	...	...	—
"	Dressings	...	...	...	...	...	...	—
	Total	...	...	...	...	...	...	90

### LABORATORY WORK.

The arrangements for carrying out the bacteriological work in the Borough are :—

- 1.—Simple throat swabs in connection with Diphtheria cases, and specimens of sputum in connection with Phthisis cases, and various discharges in connection with Venereal Disease are examined in the Laboratory at Mill Lane Hospital. 298 swabs, and 356 specimens of sputum, also 142 swabs examined for Vincent's Angina, three urines for Bacillus Colic, one blood for Malaria.
- 2.—Samples of milk taken for purposes of bacteriological examination are forwarded to Liverpool University.
- 3.—Arrangements have also been made whereby blood specimens in connection with cases of Venereal Disease are also sent to Liverpool University for examination.

### TUBERCULOSIS.

During the past five years the personnel of the Dispensary has changed. Dr. W. A. Muir, who was the Clinical Tuberculosis Officer from July, 1919, until August 31st, 1922, was succeeded in January, 1923, by Dr. Raymond Gamlin, who, however, left the service at the end of May of the same year. Dr. F. C. Morgan has since occupied the position, and is responsible for the main portion of this part of the Report.

### TUBERCULOSIS SCHEME.

One Dispensary.

One Clinical Tuberculosis Officer.—Dr. F. C. Morgan.

One Visiting and Dispensary Nurse.—Miss A. L. Glassey.

Mill Lane Sanatorium.—22 beds for observation purposes, and for advanced cases—Dr. F. C. Morgan, in Clinical charge.

Burntwood Sanatorium, Market Drayton.—11 beds for early cases, viz.—Six female, five male. Dr. Peter Edwards is the Medical Officer in charge.

Leasowe Children's Hospital.—The Corporation pays for six beds at this Institution for Non-Pulmonary children under 15 years, and we also have the advantage of the Alexandra Rose Day bed at the same Institution. Dr. T. Hartley Martin is the Medical Officer in charge.

Wallasey Cottage Hospital.—Two beds for Non-Pulmonary Adults. No resident doctor.

## X-RAY EXAMINATION.

Arrangements have been in force with Victoria Central Hospital for X-Ray examination of cases seen at Mill Lane Infirmary. The number examined to December 31st was 20.

This aid to diagnosis is very important, as it saves the patient a considerable number of visits to the Dispensary, and saves the Tuberculosis department much valuable time. This examination by X-Ray is absolutely necessary in all artificial Pneumo-Thorax work. X-Ray work is becoming more and more a necessity to the Tuberculosis Dispensary. In Lancashire County, a plant has been installed at all the chief Dispensaries in the area, with great advantage to the patient and also to the Tuberculosis Officer, who can examine his own cases as often as necessary. The interpretation of an X-Ray photograph can only be done satisfactorily in conjunction with a clinical examination.

## NOTIFICATIONS.

There were 180 notifications from Pulmonary Tuberculosis in 1925 (93 males, 87 females), compared with 169 in 1924; 117 in 1923; 160 in 1922; 198 in 1921.

Twenty-five of the cases notified died within the current year.

There were 56 cases of non-Pulmonary Tuberculosis (23 males and 33 females) compared with 51 cases in 1924; 31 in 1923; 31 in 1922; 31 in 1921.

	Pulmonary.	Non-Pulmonary.
Notifications from General Practitioners ...	73	10
Tuberculosis Officer ...	81	32
Other sources ... ..	26	14
	—	—
	180	56
	—	—

Age Periods.	New Cases.				Deaths.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 ... ..	1	—	—	—	—	—	—	—
5 ... ..	4	3	3	5	2	1	2	—
10 ... ..	14	9	14	11	—	—	—	—
15 ... ..	11	14	4	10	—	—	1	—
20 ... ..	6	10	—	2	3	3	—	—
25 ... ..	7	8	1	1	5	6	—	—
35 ... ..	14	19	—	3	5	9	—	—
45 ... ..	14	12	1	1	13	10	—	—
55 ... ..	16	8	—	—	16	2	—	—
65 ... ..	5	3	—	—	2	—	—	—
65 and upwards	1	1	—	—	2	—	—	—
Totals ...	93	87	23	33	48	31	3	—

Pulmonary Tuberculosis includes T.B. of Thoracic Glands.  
All notifications under 15 were of this kind.

#### OCCUPATIONS OF CASES NOTIFIED IN 1925.

Scholars ... ..	44	Painter ... ..	1	Brick Maker ... ..	1
Housewives ... ..	35	Lift Attendant ...	1	Cattle Drover... ..	1
Nil. ... ..	18	Plasterer ... ..	1	Paper Boy ... ..	1
Clerks ... ..	15	Cable Jointer ...	1	Flour Miller ... ..	1
Salesmen ... ..	5	Butcher Boy ... ..	1	Gardener... ..	1
Labourers... ..	5	Musician ... ..	1	Ferryman ... ..	1
Hospital Nurses ...	5	Telephone Operator	1	Ship's Storekeeper...	1
Factory Workers ...	4	Milliner ... ..	1	Turner ... ..	1
Travellers ... ..	3	Office Manager ...	1	Prof. of Engineering	1
Ship's Stewards ...	2	Barber ... ..	1	Window Cleaner ...	1
Tram Drivers ... ..	2	Quay Foreman ...	1	Forwarding Agent...	1
Carters ... ..	2	Discharged Soldier	1	Cable Telegraphist	1
School Teachers ...	2	Barmaid ... ..	1	Nursery Governess	1
Compositors ... ..	2	Dressmaker ... ..	1	Waitress ... ..	1
Motor Engineer ...	1	Tailoress ... ..	1	Left District ... ..	4

The occupation of a consumptive is important if there is a risk of the spread of infection to others, especially to children. There are two School Teachers and one Nursery Governess in the above list. This surely is a terrible potential source of infection, and also quite unsuspected. The only remedy would be for all such applicants for these posts to be medically examined by experts before being appointed.

(NOTE.—The above-named Teachers and Governess are not now engaged in teaching).

There were 35 Housewives, all mothers. The risk of infecting children under these circumstances need not be stressed.

#### UNNOTIFIED CASES.

The number of cases in which the certificate of death was the first intimation was, in 1924, 14. It has been the practice always to call the attention of the doctor concerned to the fact that the case had not been notified by him, and it is satisfactory to observe that, as a result, in 1925 the number was reduced to 4.

**SUMMARY OF NOTIFICATIONS FOR THE FIVE YEARS, 1921-1925.**

Age Periods.	Notifications on Form A.													Total Notifications on Form A.	Notifications on Form B.				Notifications on Form C.		
	Number of Primary Notifications.														Total Notifications on Form B.	Total Notifications on Form B.	Poor Law Institutions.	Sanatoria.			
	0-1	1-5	5-10	10-15	15-20	20-25	25-35	35-45	45-55	55-65	65 and over.	Total Primary Notifications.	Under 5						5-10	10-15	
1921	Males ...	—	—	5	7	3	19	27	25	14	6	2	108	—	—	—	119	—	—	—	8
	Females ...	1	1	6	11	14	16	25	12	3	1	—	90	—	—	—	95	—	2	—	6
	Totals ...	1	1	11	18	17	35	52	37	17	7	2	198	—	—	—	214	—	2	—	14
1922	Males ...	—	—	4	6	8	11	22	11	8	8	—	78	—	—	—	87	—	—	—	15
	Females ...	—	—	2	6	7	5	16	17	10	4	3	70	—	—	—	77	—	—	—	5
	Totals ...	—	—	6	12	15	16	38	28	18	12	3	148	—	—	—	164	—	—	—	20
1923	Males ...	—	1	—	—	4	9	16	8	8	1	4	51	—	—	—	64	—	—	—	15
	Females ...	1	1	1	—	5	9	18	14	4	6	—	59	—	—	—	63	—	—	—	13
	Totals ...	1	2	1	—	9	18	34	22	12	7	4	110	—	—	—	127	—	—	—	28
1924	Males ...	—	2	8	7	9	5	23	15	11	5	3	88	—	—	—	95	—	—	—	13
	Females ...	—	2	7	7	7	11	19	7	12	2	1	75	—	—	—	85	—	—	—	13
	Totals ...	—	4	15	14	16	16	42	22	23	7	4	163	—	—	—	180	—	—	—	26
1925	Males ...	1	4	14	11	6	7	14	14	16	5	1	93	—	—	—	108	—	—	—	12
	Females ...	—	3	9	14	10	8	19	12	8	3	1	87	—	—	—	98	—	—	—	5
	Totals ...	1	7	23	25	16	15	33	26	24	8	2	180	—	—	—	206	—	—	—	17
	Males ...	1	7	31	31	30	51	102	73	57	25	10	418	—	—	—	473	—	—	—	63
	Females ...	2	7	25	38	43	49	97	62	37	16	5	381	—	—	—	418	—	—	—	42
	Totals ...	3	14	56	69	73	100	199	135	94	41	15	799	—	—	—	891	—	—	—	105

## TUBERCULOSIS DISPENSARY.

	1923	1924	1925
No. of persons attending the Dispensary	540	746	679
No. of persons diagnosed Tuberculous ...	178	276	369
No. of persons diagnosed Non-Tuberculous ... ..	59	148	153
No. of persons suffering from Mal-nutrition (pre-tubercular) ... ..	303	222	157

The increase in the number of Tuberculous cases in 1925 is chiefly due to the fact that certain children who have been under observation for a year or more have now been definitely diagnosed as Tuberculous. The 157 cases above referred to are under-nourished children in poor health, but with no definite evidence of Tuberculosis.

	1921	1922	1923	1924	1925
Number of new cases ...	364	284	272	407	319
Children ... ..	150	130	125	245	144
Number of cases referred by General Practitioners	148	101	105	141	144
Contacts ... ..	148	119	128	217	147

It is satisfactory to note that 49 per cent. of the new cases were referred by General Practitioners to the Dispensary.

## ATTENDANCES AT DISPENSARY.

	1923	1924	1925
Males ... ..		667	386
Females ... ..		527	437
Children ... ..		2,100	2,502
Total ... ..	3,131	3,294	3,325

The large number of attendances by children is very important, as by keeping the mal-nourished ones under observation, the earliest signs of Tuberculosis can be detected, and appropriate treatment given, should the prophylactic methods fail.

The Dispensary Nurse and Tuberculosis Health Visitor (Miss Glassey) has done a very large amount of very satisfactory work. She has now been supplied with a bicycle, and so can do more visits. The number of visits paid by her in 1925 was 1,448, compared with 1,141 in 1924.



## CONTACTS.

147 Contacts (32 adults, 115 children) were examined.

## ADULTS—

6	adults	were definitely Pulmonary Tuberculosis...	18%
24	„	no evidence of Tuberculosis ... ..	75%
2	„	under observation ... ..	6%

## CHILDREN—

19	children	were suffering from Pulmonary Tuberculosis	16%
14	„	„ „ „ „ Non-Pulmonary „	12%
59	„	no evidence of any disease ... ..	51%
23	„	mal-nourished and under observation ...	20%

The examination of contacts is the most important work of the Dispensary. The percentage of definitely tuberculous and of mal-nourished children only amounts to 48.69 per cent., as compared with 69 per cent. in 1924.

The type of case sent to the Dispensary still continues to be of the advanced variety. Seventeen died within eight months of their first attendance; of these 9 (53 per cent.) died within 3 months.

3 died within 1 month of first attendance.

3	„	„	2	months	„	„
3	„	„	3	„	„	„
1	„	„	4	„	„	„
2	„	„	5	„	„	„
1	„	„	6	„	„	„
2	„	„	7	„	„	„
2	„	„	8	„	„	„

## SPUTUM.

356 specimens were examined; of these 213 were sent by General Practitioners, and 36 contained Tubercle Bacilli. A large number of specimens were naso-pharyngeal secretion, and so were useless for examination.

## DEATHS.

There were 82 deaths, equal to .99 per 1,000 of population.

44 of these died within two years of notification, four were not notified.

25	were notified in	1925	...	...	year under review.
19	"	1924	...	...	1 year ago.
12	"	1923	...	...	2 years
3	"	1922	...	...	3 "
3	"	1921	...	...	4 "
3	"	1920	...	...	5 "
7	"	1919	...	...	6 "
1	"	1918	...	...	7 "
2	"	1917	...	...	8 "
1	"	1916	...	...	9 "
1	"	1915	...	...	10 "
1	"	1914	...	...	11 "

The number of deaths in each of the last five years is as under :

1921.	1922.	1923.	1924.	1925.
76	85	60	77	74

## TABLES WITH REGARD TO DEATHS FROM PHTHISIS (including transfers)

Year	M		Total	Under 1		1 to 5		5 to 15		15 to 25		25 to 65		65 & over		Death rates
	M	F		M	F	M	F	M	F	M	F	M	F			
1921	40	36	76	—	—	—	1	—	3	8	6	30	26	2	—	1921=0.83
1922	54	31	85	—	—	1	—	1	—	10	6	37	24	5	1	1922=0.93
1923	32	28	60	—	—	—	1	1	1	1	9	28	15	2	2	1923=0.66
1924	39	38	77	—	—	—	—	1	1	5	14	31	23	2	—	1924=0.84
1925	46	28	74	—	—	—	2	—	—	7	6	38	20	1	—	1925=0.81
Totals	211	161	372	—	—	1	4	3	5	31	41	164	108	12	3	

	1921	1922	1923	1924	1925	Totals
Phthisis Deaths in Union Infirmary ...	10	6	12	14	11	53
" " " Chester and other Asylums	3	2	3	3	—	11
" " " Sanatoria outside Wallasey	—	—	—	—	1	1
" " " Transferred from other towns ...	4	7	3	2	4	20

## TUBERCULOSIS SCHEME, 1925.

(MEMO. 37/T. : TABLE I.)

RETURNS SUPPLIED TO THE MINISTRY OF HEALTH IN REGARD TO THE WORK OF THE DISPENSARY  
(OR DISPENSARIES) DURING THE YEAR 1925.

Diagnosis.	Pulmonary.				Non-pulmonary.				Total.				
	Adults.		Children.		Adults.		Children.		Adults.		Children.		Grand Total.
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
A.—New Cases examined during the year (excluding contacts) :—													
(a) Definitely tuberculous ... ..	32	37	6	4	—	2	1	6	32	39	7	10	88
(b) Doubtfully tuberculous ... ..	—	—	—	—	—	—	—	—	5	2	7	7	21
(c) Non-tuberculous ... ..	—	—	—	—	—	—	—	—	18	19	11	6	54
B.—Contacts examined during the year :—													
(a) Definitely tuberculous ... ..	2	4	7	12	—	—	5	8	2	4	12	20	38
(b) Doubtfully tuberculous ... ..	—	—	—	—	—	—	—	—	—	2	13	11	26
(c) Non-tuberculous ... ..	—	—	—	—	—	—	—	—	6	18	29	30	83
C.—Cases written off the Dispensary Register as													
(a) Cured ... ..	5	4	—	—	1	1	—	—	6	5	—	—	11
(b) Diagnosis not confirmed or non-tuberculous (including cancellation of cases notified in error) ... ..	—	—	—	—	—	—	—	—	30	48	71	58	207
D.—Number of Persons on Dispensary Register on December 31st, 1925 :—													
(a) Diagnosis completed ... ..	146	101	68	61	4	5	45	47	150	106	113	108	477
(b) Diagnosis not completed ... ..	—	—	—	—	—	—	—	—	5	7	51	71	134

1. Number of persons on Dispensary Register (9) on January 1st, 1925 ... ..	1,395	10. Number of patients to whom Dental Treatment was given, at or in connection with the Dispensary ... ..	35
2. Number of patients transferred from other areas and of "lost sight of" cases returned in 1925 ... ..	7	11. Number of consultations with medical practitioners:—	
3. Number of patients transferred to other areas and cases "lost sight of" ( <i>i.e.</i> , not attended for two years) ... ..	17 } 711 694 }	(a) At Homes of Applicants ... ..	35
4. Died during the year ... ..	82	(b) Otherwise ... ..	49
5. Number on the books at January 1st, 1926 ... ..	611	12. Number of other visits by Tuberculosis Officers to Homes ... ..	15
6. Number of observation cases under A (b) and B (b) above in which period of observation exceeded two months ... ..	40	13. Number of visits by Nurses or Health Visitors to Homes for Dispensary purposes ... ..	1,448
7. Number of attendances at the Dispensary (including Contacts) ... ..	3,325	14. Number of	
8. Number of attendances of non-pulmonary cases at Orthopaedic Out-stations for treatment or supervision ... ..	57	(a) Specimens of sputum, etc., examined ... ..	356
9. Number of attendances, at General Hospitals or other Institutions approved for the purpose, of patients for ... ..	Nil.	(b) X-ray examinations made in connection with Dispensary work ... ..	20
(a) "Light" treatment ... ..	Nil.	15. Number of Insured Persons on Dispensary Register on the 31st December ... ..	178
(b) Other special forms of treatment ... ..	Nil.	16. Number of Insured Persons under Domiciliary Treatment on the 31st December ... ..	42
		17. Number of reports received during the year in respect of Insured Persons:—	
		(a) Form G.P. 17 ... ..	51
		(b) Form G.P. 36 ... ..	24

(MEMO. 37/T.: TABLE II.)

**RESIDENTIAL INSTITUTIONS.**(A) AVERAGE NUMBER OF BEDS AVAILABLE FOR PATIENTS  
DURING THE YEAR 1925.

	Observation.	Pulmonary Tuberculosis.		Non-Pulmonary Tuberculosis.		Total.
		"Sanatorium" Beds.	"Hospital" Beds.	Disease of Bones and Joints.	Other Conditions.	
Adult Males ...	—	5	7	—	—	12
Adult Females	—	6	7	—	—	13
Children under 15	—	—	8	6	—	14
Total ...	—	11	22	6	—	39

(B) RETURN SHOWING THE EXTENT OF RESIDENTIAL TREATMENT  
DURING THE YEAR 1925.

			In institutions on Jan. 1st.	Admitted during the year.	Discharged during year.	Died in the Institutions.	In Institutions on Dec. 31st
Number of Patients	Children Adults	M.	10	19	19	2	8
		F.	10	27	23	2	12
		M.	8	27	26	—	10
		F.	11	26	18	—	8
Number of Observation Cases ...	Children Adults	M.	—	—	—	—	—
		F.	—	—	—	—	—
		M.	—	3	3	—	—
		F.	—	7	7	—	—
Total ...			39	99	96	4	38

## (MEMO. 37/T.: TABLE III.)

RETURN SHOWING THE IMMEDIATE RESULTS OF TREATMENT OF PATIENTS\* AND OF OBSERVATION OF DOUBTFUL CASES DISCHARGED FROM RESIDENTIAL INSTITUTIONS DURING THE YEAR 1925.

Classification on admission to the Institution.	Condition at time of discharge.	Duration of Residential Treatment in the Institution.												Total.	
		Under 3 months.			3—6 months.			6—12 months.			More than 12 months.				
		M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.		
PULMONARY TUBERCULOSIS.	Class T. B. minus.	Quiescent ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—
		Improved ... ..	—	3	18	1	5	9	—	—	—	—	—	—	36
		No material improvement	—	2	1	—	—	—	—	—	—	—	—	—	3
		Died in Institution ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—
	Class T. B. plus, Group 1.	Quiescent ... ..	—	—	—	—	—	—	1	—	—	—	—	—	1
		Improved ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—
		No material improvement	—	—	—	—	—	—	—	—	—	—	—	—	—
		Died in Institution ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—
	Class T. B. plus, Group 2.	Quiescent ... ..	—	—	—	—	—	—	1	—	—	—	—	—	1
		Improved ... ..	—	1	—	—	—	—	—	—	—	—	—	—	1
		No material improvement	—	—	—	—	—	—	—	—	—	—	—	—	—
		Died in Institution ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—
Class T. B. plus, Group 3.	Quiescent ... ..	—	—	—	—	—	—	—	—	—	—	1	—	1	
	Improved ... ..	1	2	—	6	5	—	1	1	—	1	1	—	18	
	No material improvement	3	1	—	3	1	—	1	—	—	—	—	—	9	
	Died in Institution ... ..	1	1	—	—	1	—	1	—	—	—	—	—	4	
NON-PULMONARY TUBERCULOSIS.	Bones and Joints.	Quiescent or Arrested ... ..	—	—	—	—	—	—	—	—	—	—	—	—	
		Improved ... ..	—	—	—	—	—	1	—	—	—	—	—	1	
		No material improvement	—	—	—	—	—	—	—	—	—	—	—	—	
		Died in Institution ... ..	—	—	—	—	—	—	—	—	—	—	—	—	
	Abdominal	Quiescent or Arrested ... ..	—	—	—	—	—	—	—	—	—	—	—	—	
		Improved ... ..	—	—	7	—	—	1	—	—	1	—	—	9	
		No material improvement	—	—	—	—	—	—	—	—	—	—	—	—	
		Died in Institution ... ..	—	—	—	—	—	—	—	—	—	—	—	—	
	Other Organs.	Quiescent or Arrested ... ..	—	—	—	—	—	—	—	—	—	—	—	—	
		Improved ... ..	—	—	—	—	—	1	—	—	1	—	—	2	
		No material improvement	—	—	—	—	—	—	—	—	—	—	—	—	
		Died in Institution ... ..	—	—	—	—	—	—	—	—	—	—	—	—	
Peripheral Glands.	Quiescent or Arrested ... ..	—	—	—	—	—	—	—	—	—	—	—	—		
	Improved ... ..	—	—	2	—	—	2	—	—	—	—	—	4		
	No material improvement	—	—	—	—	—	—	—	—	—	—	—	—		
	Died in Institution ... ..	—	—	—	—	—	—	—	—	—	—	—	—		
Observation for purpose of diagnosis.		Under 1 week.			1—2 week.			2—4 weeks.			More than 4 weeks.				
	Tuberculous ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Non-tuberculous ... ..	—	—	—	—	—	—	—	—	—	—	—	3	3	
	Doubtful ... ..	—	—	—	—	—	—	—	—	—	—	—	7	7	

\* It should be borne in mind that the definition of "patient" does not include persons in whom a definite diagnosis of tuberculosis has not been made.

## SANATORIA.

There are 22 beds at Mill Lane Sanatorium, chiefly for early and observation cases, a few beds being reserved for advanced cases.

The type of case presenting itself for treatment is still one of advanced disease, and sanatorium treatment in the majority of cases is really only a "patching up." A true sanatorium case is rarely seen in adults in my experience.

## MILL LANE SANATORIUM.

	Adults.	Children.	Total.
Remaining at December 31st, 1924 ...	9	13	22
Admitted Jan. 1st—Dec. 31st, 1925 ...	33	44	77
Discharged Jan. 1st—Dec. 31st, 1925 ...	29	45	74
Fatal Jan. 1st—Dec. 31st, 1925 ...	3	—	3
Remaining at Dec. 31st, 1925 ...	10	12	22

## RESULTS OF TREATMENT.

	Adults.	Children.	
Patients discharged—	Much Improved	44	86%
	No Improvement	—	—
	Would not settle	1	—

## AFTER RESULTS.

At School ...	...	...	...	...	31
Not at School ...	...	...	...	...	5
Below School age ...	...	...	...	...	1
Working ...	...	...	...	...	9
Unable to work ...	...	...	...	...	14
Transferred to Cheshire Joint Sanatorium ...	...	...	...	...	3
Transferred to Harpenden Sanatorium, Herts, for Children ...	...	...	...	...	1
Left District or Died ...	...	...	...	...	7
Re-admitted to Sanatorium ...	...	...	...	...	3
					—
					74
					—

57 children were treated; 45 were discharged; 12 remained on December 31st, 1925. Of the 45 children discharged 68 per cent. attended school. Adults: 29 discharged; 4 died; 2 left the district; 9 were able to work—31 per cent. This is a very good percentage, as they were all advanced cases.

## CHESHIRE JOINT SANATORIUM.

	Male.	Female.	Total.
Remaining at Jan. 1st, 1925 ... ..	5	6	11
Admitted during 1925 ... ..	5	8	13
Discharged ... ..	6	7	13
Died ... ..	—	1	1
Remaining, Dec. 31st, 1925 ... ..	4	6	10

## RESULTS.

Much improved ... ..	3
Improved ... ..	8
No improvement ... ..	2
	—
	13
Working constantly ... ..	7
Unable to work ... ..	3
Left district for Colony ... ..	1
Died ... ..	1
Unemployed ... ..	1

These are very good results considering the type of case met with at the Tuberculosis Dispensary. Nearly all these cases were in Mill Lane Sanatorium and transferred to Cheshire Joint Sanatorium.

## TREATMENT FOR PULMONARY TUBERCULOSIS.

Rest for febrile cases.

Rest, combined with graduated exercises, for afebrile cases is the treatment generally recognised for all cases.

## ADDITIONAL TREATMENT.

Sod.-Morrhuate has been used on two cases with very doubtful results. It and Tuberculin are being largely used by some General Practitioners. I have not seen any good results from their use.

Tuberculin is rarely used by the Tuberculosis Officer. It is quite unscientific unless used for very chronic afebrile cases. Sir Almuth Wright has shown that in all febrile Pulmonary Tuberculosis patients, the antibactericidal power of the blood is at its maximum, therefore, anything which attempts to raise it still more will court disaster. This is what Tuberculin injections try to do. In a very chronic case it will sometimes help to stimulate the tissues, but it must be used in very minute doses, and in my view is a dangerous drug.



Artificial Pneumo-thorax has been used on 6 persons, in only one instance successful. The other cases were all very advanced, and the pleural cavity could not be found. The one patient has had a refill every 4-6 weeks, and has greatly improved.

#### AFTER-CARE.

There is no After-care Committee in Wallasey.

The Tuberculosis Health Visitor keeps in touch with all patients after Sanatorium treatment, and these attend the Dispensary periodically.

#### HOUSING.

This problem is one of great importance in the Anti-Tuberculosis campaign. Enquiries were made in regard to the sleeping accommodation at houses where cases were notified in 1925, and 154 houses were visited. 69 tuberculous persons were said to sleep alone and have separate rooms (44 per cent.); 27 persons sleep alone in separate beds only (17 per cent.); 57 persons occupy a bed with two or more persons (37 per cent.) 1 person occupies a bed with a child. These figures show that 55.2 per cent. of those suffering from Pulmonary Tuberculosis in Wallasey occupy the same room during sleep with other persons, many of whom are children.

The Tuberculosis Officer is frequently asked to see patients in consultation with local doctors. There were 84 such requests during 1925. There were 15 other visits to patients homes for Pension purposes.

#### NON-RESPIRATORY TUBERCULOSIS.

56 cases (23 males, 33 females) of Non-Pulmonary Tuberculosis were notified during the year, compared with

51 cases (27 males, 24 females) in	...	...	...	1924.
31 cases (22 males, 9 females) in	...	...	...	1923.

There has been a great increase in female cases during the past three years. The increase is due to glandular (neck and abdomen) cases. 38, against 36 in 1924, and 11 in 1923.

## SITES OF DISEASE.

	Male.	Female.	Total.
Glands—Neck ... ..	6	14	20
„ Abdomen ... ..	9	9	18
Hand ... ..	1	—	1
Skin ... ..	—	2	2
Bones ... ..	2	1	3
Spine ... ..	1	2	3
Meninges ... ..	1	—	1
Knee ... ..	1	2	3
Hip ... ..	3	—	3
Elbow ... ..	—	1	1

Extra milk is being supplied by the Children's Voluntary Aid Association, of which Miss Rudkin is in charge, in cases recommended by the Tuberculosis Officer.



**DEATHS FROM "OTHER TUBERCULOUS DISEASES"**

(INCLUDING TUBERCULAR MENINGITIS)

**FOR THE PAST FIVE YEARS.**

(and those occurring elsewhere and transferred to Wallasey).

Year.	M.	F.	Under 1	1 to 5	5 to 15	15 to 25	25 to 65	65 & over.
1921	9	11	4	6	—	3	5	2
1922	5	13	—	9	1	3	5	—
1923	10	4	1	6	3	2	2	—
1924	8	5	1	4	2	1	5	—
1925	6	5	1	4	2	2	2	—*
Totals	38	38	7	29	8	11	19	2 (76)

**VISITS RE TUBERCULOSIS.**

	1921	1922	1923	1924	1925	Totals.
No. of First Visits <i>re</i> Phthisis notifications ...	198	160	117	137	108	720
.. Re-visits .. ..	1,710	1,631	1,861	855	581	6,638
.. Visits <i>re</i> .. Deaths ... ..	51	55	35	18	35	194
	1,959	1,846	2,013	1,010	724	7,552
.. First Visits <i>re</i> Non-pulmonary notifications	28	31	31	49	83	222
.. Re-visits .. ..	85	177	138	100	211	711
.. Visits <i>re</i> .. Deaths	4	6	2	3	—	15
	117	214	171	152	294	948
.. Visits to Mill Lane Dispensary... ..	329	291	312	323	306	1,561
.. First Visits to M.L. Dispensary of Contacts	—	17	109	112	38	276
.. " " " " Suspects	—	42	98	95	231	466
.. Enquiry Visits <i>re</i> Pensions Cases... ..	—	29	36	18	2	85

**TABLE SHOWING DISTRIBUTION OF NOTIFICATIONS OF AND DEATHS FROM PHTHISIS AND OTHER TUBERCULOUS DISEASES IN THE WARDS DURING 1921—1925.**

Ward	Phthisis Notifications.					Phthisis Deaths.					Non-Pulmonary Notifications.					Deaths from other Tubercular Diseases.								
	1921	1922	1923	1924	1925	Totals.	1921	1922	1923	1924	1925	Totals.	1921	1922	1923	1924	1925	Totals.	1921	1922	1923	1924	1925	Totals.
	1	14	8	8	10	14	54	6	7	2	9	2	26	1	—	1	1	—	3	—	1	—	—	—
2	7	9	6	2	7	31	7	4	1	4	4	20	3	—	—	—	—	5	2	2	—	—	—	4
3	9	11	10	14	6	50	6	8	6	5	6	31	1	2	2	3	3	11	3	—	—	2	—	5
4	18	10	13	15	10	66	6	3	6	6	8	29	2	1	1	6	5	15	2	1	—	—	3	6
5	15	14	6	21	13	69	3	8	7	5	4	27	3	1	1	1	3	9	1	1	2	—	—	4
6	16	14	9	9	12	60	7	10	5	2	6	30	2	6	1	4	1	14	1	3	1	—	1	6
7	30	16	14	17	27	104	13	8	9	14	9	53	3	3	4	12	7	29	2	3	3	2	2	12
8	28	20	14	32	20	114	10	16	5	6	9	46	7	7	6	7	10	37	5	3	2	2	2	14
9	29	15	9	13	23	89	10	8	4	9	9	40	3	4	2	5	7	21	1	1	—	—	1	3
10	10	19	9	16	16	70	4	4	8	8	9	33	3	3	7	4	5	22	—	1	2	2	—	5
11	4	11	4	7	11	37	1	—	2	2	3	8	1	1	2	5	5	14	1	—	—	3	—	4
12	8	8	5	5	3	29	1	8	3	4	2	18	—	1	1	2	5	9	—	1	1	1	1	4
13	4	2	4	5	9	24	1	1	1	1	2	6	1	—	—	1	1	3	—	—	1	—	—	1
14	6	3	6	3	9	27	1	—	1	2	1	5	1	2	3	—	2	8	1	2	1	1	1	6
<b>Totals</b>	<b>198</b>	<b>160</b>	<b>117</b>	<b>169</b>	<b>180</b>	<b>824</b>	<b>76</b>	<b>85</b>	<b>60</b>	<b>77</b>	<b>74</b>	<b>372</b>	<b>31</b>	<b>31</b>	<b>31</b>	<b>51</b>	<b>56</b>	<b>200</b>	<b>20</b>	<b>18</b>	<b>14</b>	<b>13</b>	<b>11</b>	<b>76</b>

Includes T. Meningitis and other Tuber. Dis.

## COPY OF RETURN—FORM T115A.

CASES OF TUBERCULOSIS REMAINING ON THE MEDICAL OFFICER  
OF HEALTH'S NOTIFICATION REGISTER AT  
DECEMBER 31ST, 1925.

Total Cases.	Pulmonary.			Non-Pulmonary.		
	Males.	Females.	Total.	Males.	Females.	Total.
2,046	860	718	1,578	228	240	468

PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS) REGULATIONS,  
1925.

- (A) Two milkmen examined at Dispensary, both found to be cured cases.
- (B) Nil.
- (C) Nil.

PUBLIC HEALTH ACT, 1925, SECTION 62.

Wallasey obtained the powers of this Section in their Private Act of 1920. Under the provisions of that Act, an order for the compulsory removal to our Sanatorium of a man suffering from Pulmonary Tuberculosis in an advanced stage was obtained. After admission the man made himself such a nuisance by swearing at the Nurses, spitting on the floor, refusing to obey instructions, etc., that he was actually sent out from the Institution. This experience has acted as a deterrent in making further use of the powers. It is difficult to know how to deal with a patient who behaves in this manner, or what sort of disciplinary measures to suggest. If this particular individual had not been discharged from our Hospital all the Nurses would have left.

**PARTICULARS REQUIRED BY MINISTRY.**

(i.) Advanced cases of Pulmonary Tuberculosis are admitted to Mill Lane Sanatorium. A number are also admitted to Tranmere Institution.

- (a) Health Visitor and Clinical Tuberculosis Officer visit advanced cases in their homes, and instruct them in methods of preventing the spread of infection.
- (b) Sputum flasks are provided.
- (c) Disinfectants supplied to patients unable to provide same for themselves.

(iii.) Tuberculous adults requiring any surgical treatment are admitted to the two local Hospitals. Any suspicious case of Tuberculosis occurring in either of the above Institutions is visited by the Clinical T.O., and arrangements are made for transfer, if necessary, to a Sanatorium. All School children, who, in the opinion of the School M.O., are definite or suspicious cases of Tuberculosis are referred to the Tuberculosis Dispensary for examination. School authorities are informed as to the result, and any special treatment required, *i.e.*, exclusion from School, dinners in School, remedying any minor ailment, dental treatment, etc. These children are kept under observation by the Dispensary Staff until diagnosis confirmed. Children suffering from Non-Pulmonary forms of Tuberculosis, *i.e.*, bones, joints and abdomen, are seen by the Orthopædic Surgeon.

(iv.) On receipt of all notifications of Tuberculosis by General Practitioner, a note or form G.P. 17 (revised) is sent to the notifying doctor, unless the patient is sent to the Tuberculosis Dispensary. Records of Progress Form G.P. 36 are sent to and received from doctors. Model Forms Z—Z5, are sent from the Tuberculosis Dispensary. Memo 286 is being satisfactorily adopted.

(v.) Rounding-up is done by the Tuberculosis Health Visitor and repeated examinations are made at the Tuberculosis Dispensary.

(vi.) Health visitor attends at all houses where a primary notification indicates a case of Tuberculosis. Environmental card is filled in, and names and ages of contacts are taken. Frequent visits are made to secure the attendance of contacts at the dispensary.

(vii.) Chief special method used for diagnosis employed is X-ray Radiology. Total number of cases for 1925 = 20. A very much larger number of cases could have been examined with advantage, and so diminish the number of observation cases on the books, and also save a great number of visits by the patient to the dispensary.

- (a) Special method of treatment is Artificial Pneumothorax. Number of cases = 5. One case satisfactory; only tried on advanced cases.
- (b) Sodium Morrhuate injection. Five cases tried; doubtful improvement in one case.
- (c) Graduated exercise and rest.

(viii.) A.P. treatment is only applicable to selected cases, and so cannot be described as a general treatment. Sod. Morrhæte, no results. Graduated exercise and rest when properly used is *the* treatment for Pulmonary Tuberculosis, and is applicable to all cases.

(ix.) All adult patients referred to Private Dental Practitioner and Dental Hospital, Liverpool. All children referred to School dentist at School Clinic. A few adult cases also treated by the School dentist (mainly extractions).

(x.) District nurse from the Nursing Association attends Tuberculosis patients living at home, when necessary. When patient is poor and non-insured, the doctor attached to Central Hospital, Wallasey (General) attends these cases, otherwise panel or private practitioner. There is no scheme for extra nourishment for adults. Relatives of ex-Service men sometimes obtain nourishment from United Services Fund. Children obtain milk from Invalid Children's Association on the recommendation of T.O. The Corporation of Wallasey gives a grant to the Association in proportion to number of cases helped. Children can, in some instances, obtain dinners in Schools.

(xii.) Health visitor visits the cases at the house, and secures their attendance at the dispensary periodically. No after-care.

(xiii.) None. It is exceedingly difficult for healthy persons to obtain employment; still more difficult to find employment for ailing persons.

(xiv.) No shelters provided, gardens not suitable.

(xv.) Clerical work the chief occupation of a large number of cases suffering from Tuberculosis. Overcrowding is one of the chief factors noted in the incidence of Tuberculosis.

(xvi.) Methods employed for the prevention of Tuberculosis :—

- (a) Education of the patient in method of disposal of sputa, sleeping accommodation.
- (b) Examination periodically of contacts.
- (c) Supervision of all children who are contacts, and are under weight and mal-nourished. Monthly examination of these cases at the Tuberculosis Dispensary, a special day each week being set aside for this purpose.



(xvii.) Chief difficulties are :—

- (a) Late notification of cases.
- (b) Neglect on part of patient in not seeking medical advice until too late.
- (c) The Psychological state, also the financial position of the patients prevent them from submitting to sufficient Sanatorium treatment.

(xviii.) Special difficulties encountered. Late notification. The following cases will illustrate one of the difficulties. A woman was sent to the Tuberculosis Dispensary from our local Hospital and was found to be an advanced case of tuberculosis. On visiting the home, the house was discovered to be in a dirty condition, and there were no bedclothes. The husband earned 46s. per week, and there were five children, the eldest 10 years and the youngest 8 months, in 2 rooms—kitchen and bedroom. The mother had never had any medical advice or treatment until she was admitted to our Sanatorium.

The Tuberculosis Officer, asked to visit a case, found three cases, two of whom died within a fortnight. These had not been notified. They were supposed to be suffering from Chronic Bronchitis.

CHART 1  
 TUBERCULOSIS 1883 TO  
 YEARLY DEATHS per 100000 of Population.  
 ALL AGES AND BOTH SEXES

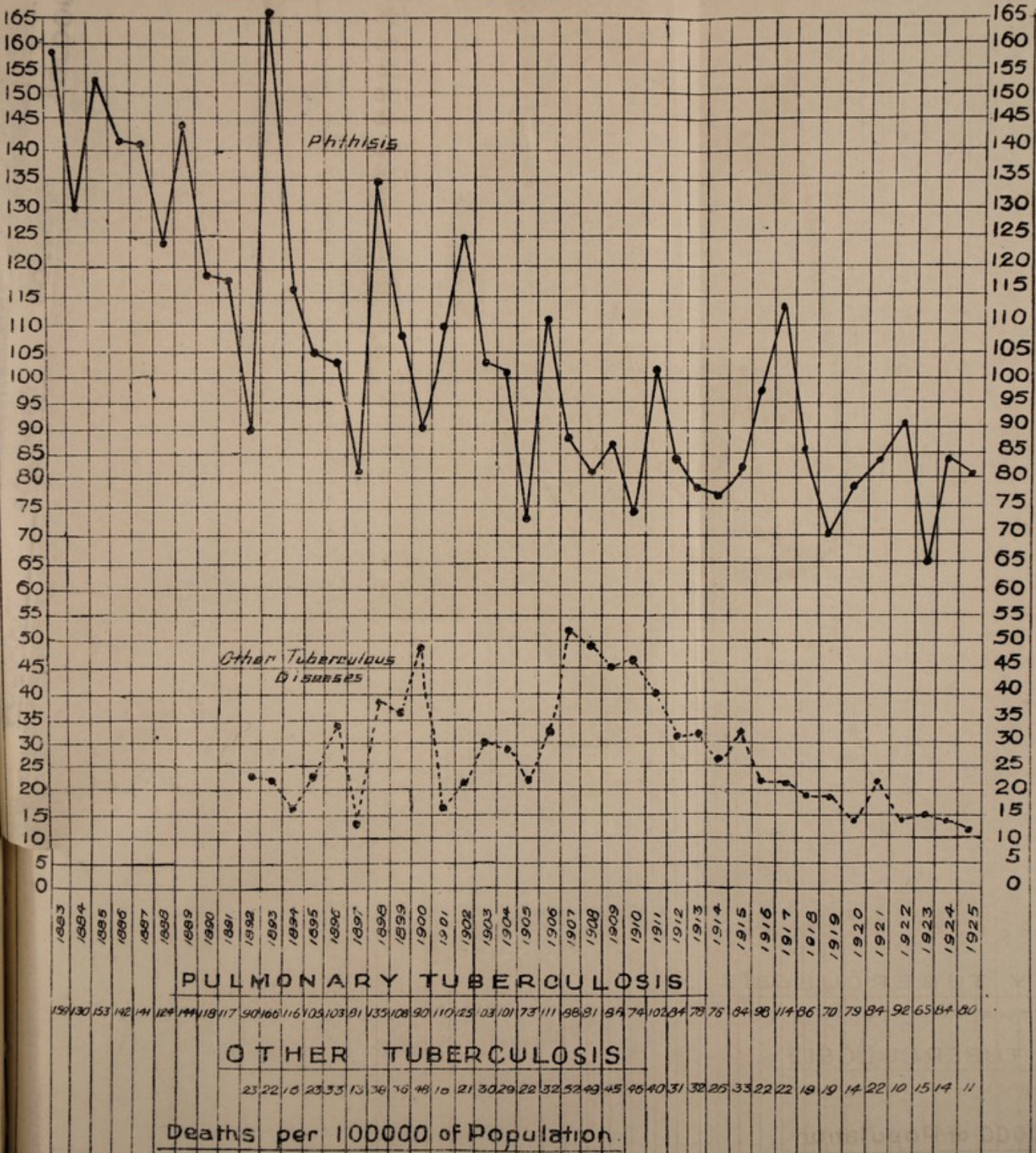
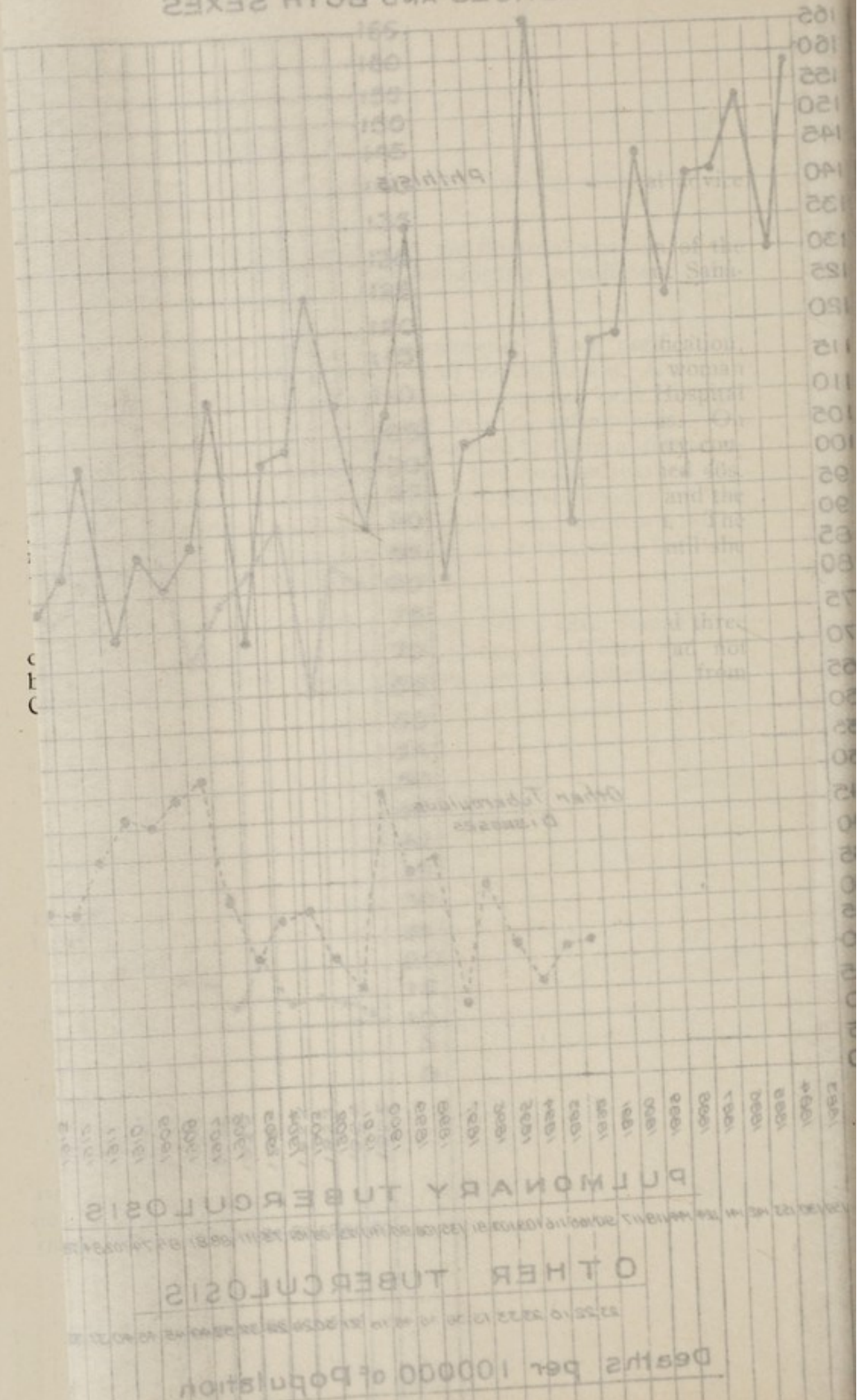
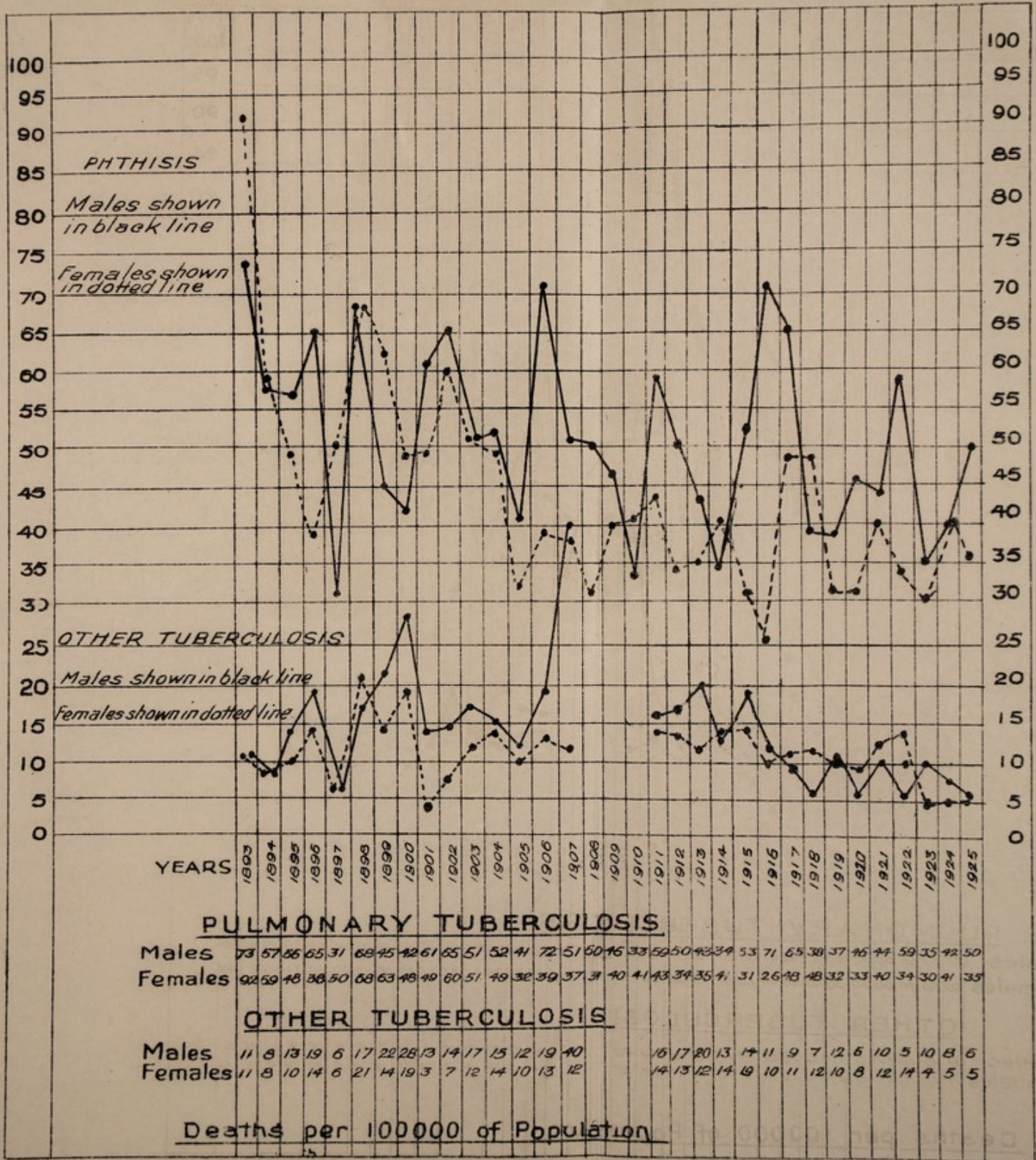


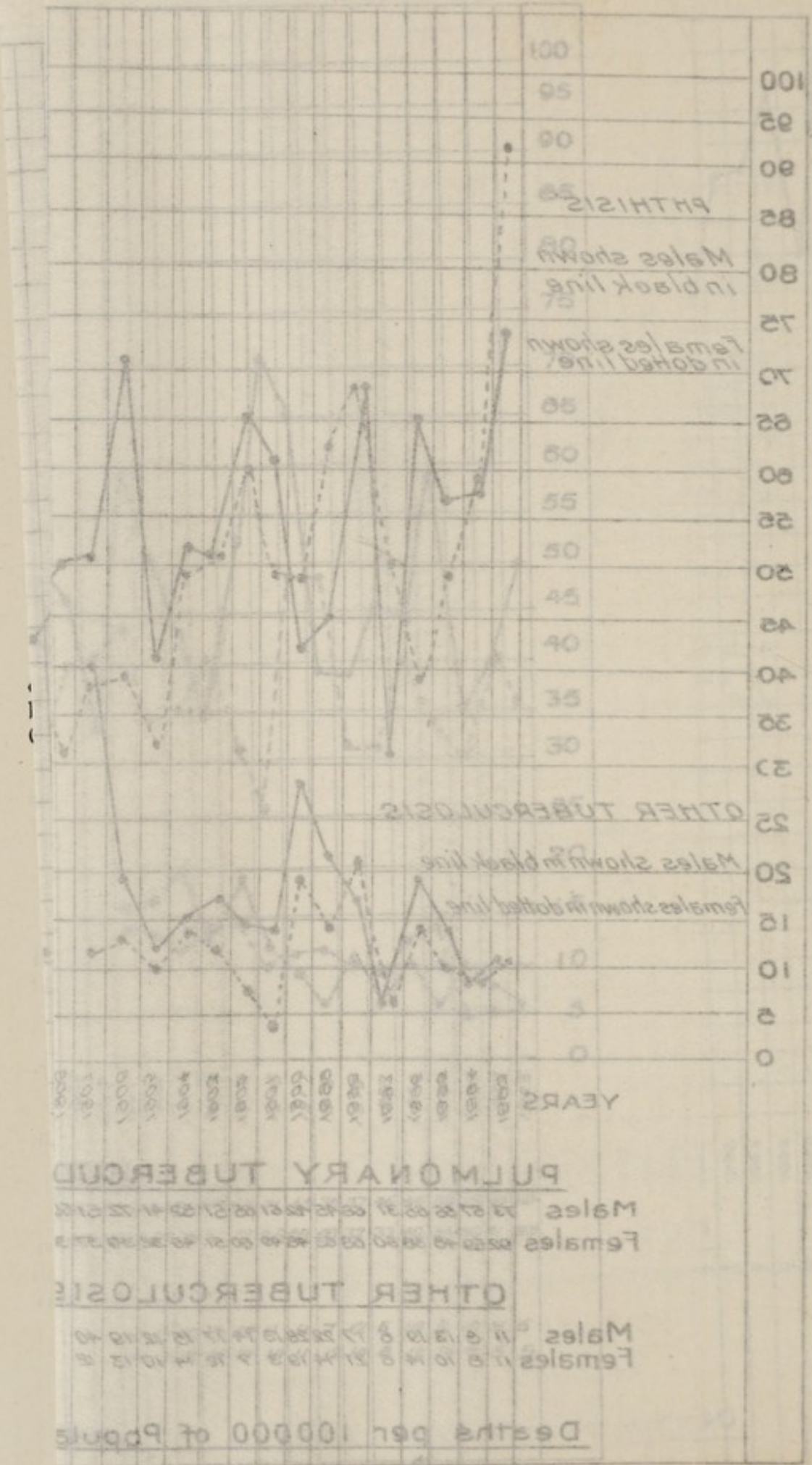
CHART I  
 TUBERCULOSIS 1883 TO  
 YEARLY DEATHS per 10000 of Population  
 ALL AGES AND BOTH SEXES



**CHART 2**  
**TUBERCULOSIS 1893 TO**  
**YEARLY DEATHS per 100.000 of Population**  
**ALL AGES : MALES AND FEMALES**



ALL AGES : MALES AND FEMALES  
 YEARLY DEATHS per 100,000 of Pop.  
 TUBERCULOSIS 1893 TO



Deaths per 100000 of Populs  
 Males 25 28 25 22 20 25 30 28 25 22 20 25 30 28 25 22 20  
 Females 20 22 20 18 15 20 25 22 20 18 15 20 25 22 20 18 15

Males 25 28 25 22 20 25 30 28 25 22 20 25 30 28 25 22 20  
 Females 20 22 20 18 15 20 25 22 20 18 15 20 25 22 20 18 15

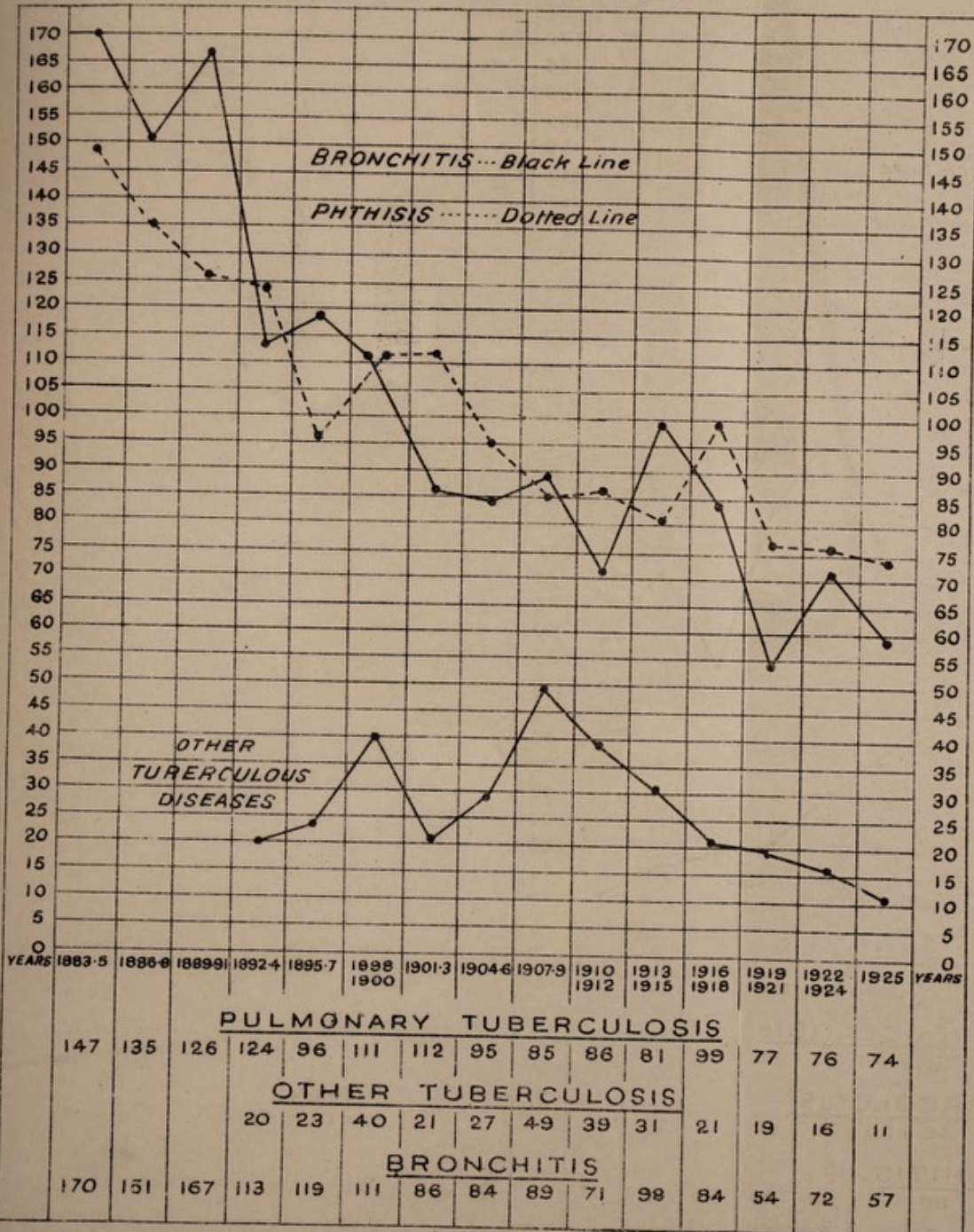
YEARS  
 1893 1894 1895 1896 1897 1898 1899 1900 1901 1902 1903 1904 1905 1906 1907

OTHER TUBERCULOSIS  
 Males shown in black line  
 Females shown in dotted line

PULMONARY TUBERCULOSIS  
 Males shown in black line  
 Females shown in dotted line

100 95 90 85 80 75 70 65 60 55 50 45 40 35 30 25 20 15 10 5 0

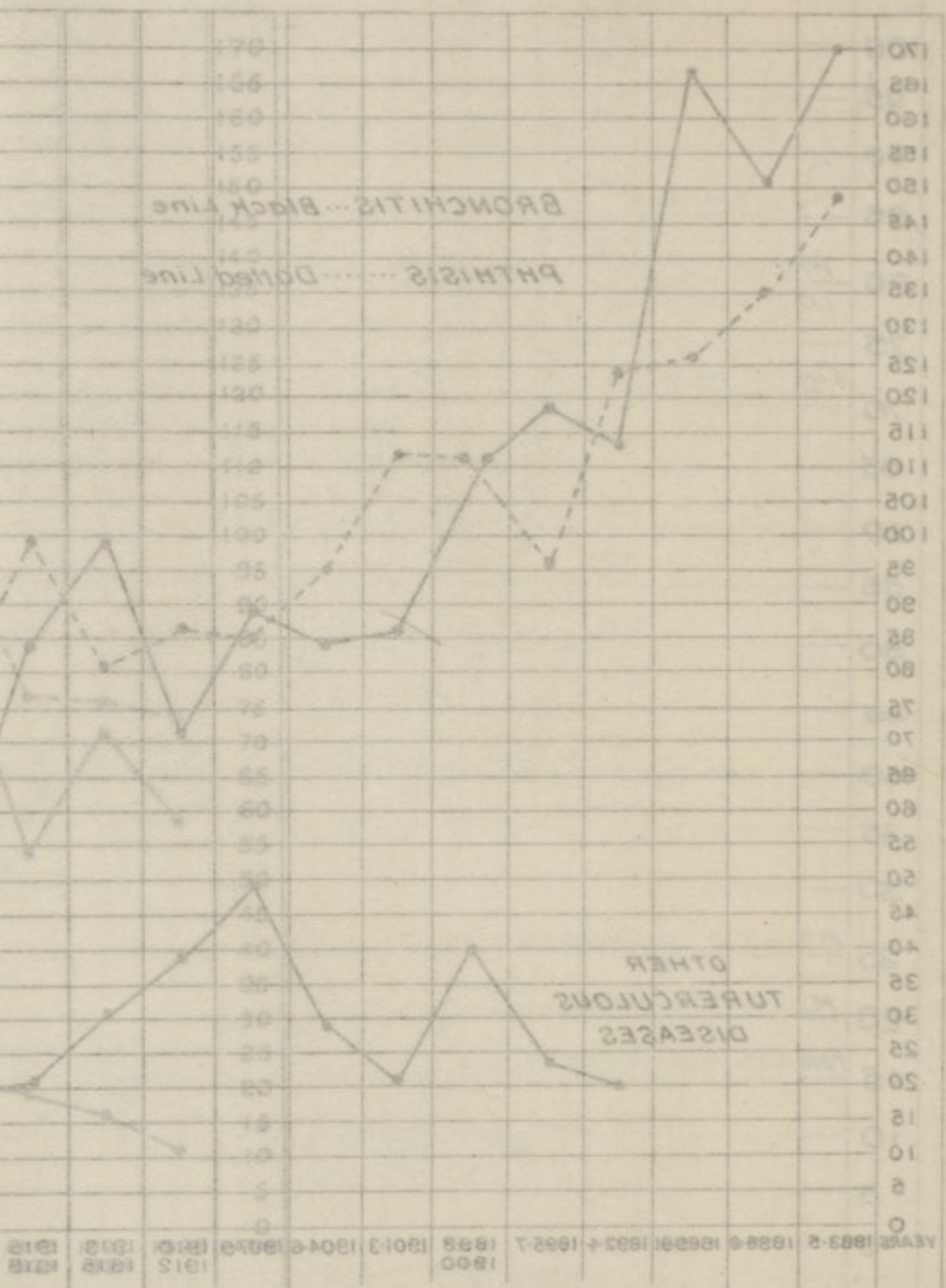
CHART 4  
 TRIENNIAL RATES  
 DEATHS - ALL AGES BOTH SEXES  
 per 100000 of Population since 1883



*In 1906 Tubercular Meningitis, and in 1907 Tubercular Peritonitis were included in OTHER TUBERCULOUS DISEASES. Formerly they had been entered under the headings of Meningitis and Peritonitis simply. The apparent increase is probably due to this cause.*

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 In 1906 Tubercular Meningitis and in 1907 Tubercular Peritonitis  
 were included in OTHER TUBERCULOUS DISEASES. Formerly they  
 had been entered under the headings of Meningitis and Peritonitis.

170	151	167	113	119	111	86	84	89	91	88
<b>BRONCHITIS</b>										
21	34	38	49	38	34	21	27	49	27	40
<b>OTHER TUBERCULOSIS</b>										
147	135	126	124	98	111	112	95	85	85	81
<b>PULMONARY TUBERCULOSIS</b>										







## NUTRITION CLINICS.

During the past two years there has been established in connection with the Tuberculosis Clinic at Mill Lane Dispensary, a Nutrition Clinic. This Clinic is on the lines established in several places in the United States by Dr. Emerson. Dr. Emerson, in his book "Nutrition and Growth," writes as follows:—

"Looking back through 13 years' study of this problem, I find the following ideas to have been considered in turn as primary causes of malnutrition, only to be dismerited or relegated to a position of secondary importance one after the other:—(1) Poverty and insufficient food; (2) improperly cooked food and consequent indigestion; (3) bad air; (4) heredity; (5) syphilis and (6) Tuberculosis."

As a result of his experience he has come to the conclusion that the five chief causes of malnutrition in the order of their importance are:—(1) Physical defects, especially nasopharyngeal obstructions; (2) lack of home control; (3) over-fatigue; (4) improper diet and faulty food habits; (5) faulty health habits. To combat these, therefore, there must be:—(1) Arrangements for the removal of the defects; (2) sufficient home control to ensure good food and good health habits; (3) the prevention of over-fatigue; (4) proper food at regular and frequently sufficient intervals; (5) fresh air by day and by night.

It occurred to me that there was room in Wallasey for a Clinic on the American plan, having regard to the number of children one met with in Schools and at our Tuberculosis Clinic who were obviously ill-nourished, but in whom no disease could be discovered. A Clinic, therefore, was started, and the work has been undertaken by Dr. Morgan, and below will be found details of the scheme and the results, together with observations by Dr. Morgan.

All children attending the dispensary are first of all weighed and a note entered on the case sheet. Their sitting height is taken, together with the chest measurement at the nipple level (Professor Dryer's tables of weight in relation to the trunk length and circumference of the chest have been used in all cases). Notes are then taken as to the time of going to bed and getting up, the amount and kind of food taken, times of meals, condition of teeth, home habits, *e.g.*, bolting of food, rest after food, constipation, etc. A Clinical examination is then made, and any evidence of disease or defects, such as tonsils and adenoids, noted. Each child who does not come up to the standard of weight attends the Dispensary once a week, or once

a month, as occasion demands. They are weighed and measured, the amount of growth noted, together with the increase, if any, of weight. It is to be noted that each one-eighth of an inch increase in trunk length corresponds to a definite increase in weight, and no gain in weight was recorded that did not exceed this definite amount. Advice was given to the parents on all matters needing attention, and endeavour was made to interest the child also in his own condition.

There were 312 children examined. 96 were of normal weight, and showed no evidence of disease. 97 suffered from Tuberculosis in some form or other, 119 were under-nourished and under weight, but no evidence of any disease could be discovered. Of these 119 children, 63 (or 53 per cent.) did not have sufficient sleep, 26 (or 22 per cent.) were wrongly and/or insufficiently fed, the chief articles of diet being white bread, margarine and tea, no meat or milk being given; 18 (or 15 per cent.) had faulty health habits, and 12 (or 10 per cent.) had a combination of bad home habits, lack of sleep, and poor diet.

The following hours of sleep, as being necessary for the various ages of children, were impressed upon the parents:—

Six months	...	...	...	...	18 hours.
1 to 5 years	...	...	...	...	14 „
5 to 10	„	...	...	...	12 „
10 to 13	„	...	...	...	11 „
13 to 20	„	...	...	...	9 „
Adults	...	...	...	...	8 „

40 of the 63 children suffering from insufficient sleep were sent to bed early, and the improvement in their condition was very marked.

15 of these children commenced to go to bed early for a few months greatly improved in weight and health, but during the summer months went to bed later and relapsed. 8 children did not alter their habits and did not improve. These children continued to grow at the same rate even if they went to bed later, but their weight remained stationary, or only slightly increased. There was, therefore, actually a considerable loss of weight.

Of the 26 children who had had insufficient diet according to the caloric calculation, each was given a pint of cow's fresh milk daily, plus a drachm of cod liver oil; the result was that 15 children gained weight rapidly, 11 improved much more slowly, and their parents ceased to bring them to the Clinic.

18 children had bad home habits, *e.g.*, feeding the child between meals, bolting food, running about during meal time, reading in bed, allowing the child to pick and choose his own food. Of these 18 children, all started to improve for a few weeks, but 16 then relapsed or ceased to attend owing to poor parental control. 4 of these cases were admitted to Mill Lane Sanatorium for observation. One gained  $5\frac{1}{2}$  lbs. in a month, two 4 lbs. in a month, three 8 lbs. in 6 weeks, another 6 lbs. in 8 weeks.

Of the 12 children whose malnutrition was attributed to different causes, 6 improved very markedly, 4 improved but relapsed, and 2 showed no improvement.

### VENEREAL DISEASES.

(a) The Venereal Diseases Officer attends the following Clinics at Mill Lane Dispensary :—

Mondays	... ..	Females,	5-30 p.m. to 7-0 p.m.
Wednesdays	... ..	Males,	6-30 p.m. to 7-30 p.m.
Fridays	... ..	Males,	2-30 p.m. to 4-0 p.m.

Irrigation daily between 6-0 and 7-0 p.m. Special arrangements are made to suit cases that cannot attend at the appointed hours. A number irrigate at home after instruction. Free treatment is given at all Clinics.

The number of new cases in each of last three years was as follows :—

1923 :	90 (45 Gonorrhœa, 22 Syphilis).	1,182 attendances.
1924 :	99 (45 Gonorrhœa, 21 Syphilis).	2,623 attendances.
1925 :	63 (28 Gonorrhœa, 12 Syphilis and 2 Soft Chancre).	1,823 attendances.

Of the 63 new cases in 1925, 21 were found to be non-Venereal.

Of the genuine 42 cases in 1925, 12 were due to Syphilis, 28 to Gonorrhœa, and 2 to Soft Chancre.

Number of attendances :—

1923.		1924.		1925.	
Male.	Female.	Male.	Female.	Male.	Female.
905	278	2,308	315	1,658	222

It is interesting to note the increased number of attendances as compared with the number of cases. This shows that each individual attends more frequently for treatment.

The total attendances for irrigation purposes were 1,045.

30 blood specimens for Wassermann Reaction were sent from the Clinic during the year.

Gonorrhœa specimens are examined at the Laboratory, Mill Lane Hospital.

81 were examined for Gonococci.  
2    "       "       Spirochetes.

Six female patients were visited by the V.D. Nurse, and all attended the Clinic.

Male patients are mostly sailors, who have travelling cards issued to them so that continuity of treatment can be carried out at various ports of call.

The provision made for treatment is quite adequate. A considerable number of Wallasey patients attend the Liverpool Centres.

The scheme of treatment would appear to be satisfactory as it stands.

Co-operation of the medical profession is obtained. 10 of the 63 new cases in 1925, for example, were referred by general practitioners. 23 slides were examined for Gonococci, and also 45 bloods for Wassermann Reaction for these doctors.

Posters are displayed in the various public lavatories and urinals, urging the importance of early treatment, and pointing out how free treatment can be obtained. 12 new cases came as a result of reading these.

Private talks are given at the Clinic, urging patients to continue treatment until pronounced cured.

All the doctors in the area are quite familiar with the facilities provided for diagnosis and treatment.

There are 10 medical practitioners who are qualified to receive free supplies of Arsenobenzol.

There were 25 applications from private practitioners for Salvarsan substitutes.

No action has been taken under V.D. Act, 1917.

**RETURN relating to all persons who were treated at the Treatment Centre at Mill Lane Hospital, Wallasey, during the year ended the 31st December, 1925.**

	Syphilis		Soft Chancre		Gonorrhœa		Conditions other than Venereal.		Total	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1. Number of cases which—										
(a) at the beginning of the year under report were under treatment or observation for... ..	26	10	2	—	48	3	—	—	76	13
(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 ... ..	—	—	—	—	—	—	—	—	—	—
Total—Items 1 (a) and 1 (b)...	26	10	2	—	48	3	—	—	76	13
2. (a) Number of cases dealt with at the Treatment Centre during the year for the first time... ..	9	3	2	—	24	4	20	1	55	8
*Total—Items 1 (a), 1 (b) & 2 (a)...	35	13	4	—	72	7	20	1	131	21
(b) Number of cases included in Item 2 (a) known to have received previous treatment at other Centres for the same infection ... ..	—	—	—	—	—	—	—	—	—	—
3. Number of cases which ceased to attend—										
(a) before completing the first course of treatment for... ..	—	—	—	—	8	—	—	—	8	—
(b) after one or more courses but before completion of treatment for ... ..	3	—	—	—	—	—	—	—	3	—
(c) after completion of treatment, but before final tests as to cure of ... ..	1	—	—	—	12	—	—	—	13	—
4. Number of cases transferred to other Treatment Centres after treatment for ... ..	2	—	—	—	3	2	—	—	5	2
5. Number of cases discharged after completion of treatment and observation for ... ..	8	1	2	—	15	—	17	1	42	—
6. Number of cases which, at the end of the year under report, were under treatment or observation for ... ..	21	12	2	—	34	5	3	—	60	17
Total*—Items 3, 4, 5 and 6... ..	35	13	4	—	72	7	20	1	131	21
7. Out-patient attendances—										
(a) For individual attention by the Medical Officer... ..	220	152	32	—	325	66	36	4	613	222
(b) For intermediate treatment, e.g., irrigation, dressings, etc.	—	—	12	—	1,033	—	—	—	1,045	—
Total attendances ... ..	220	152	44	—	1,358	66	36	4	1,658	222
8. Aggregate number of "In-patient days" of treatment given to persons who were suffering from ... ..	—	—	—	—	—	—	—	—	—	—
	For detection of									
	Spirochetes.		Gonococci.		Other Organisms.		For Wassermann Reaction.			
9. Examinations of Pathological material:—										
(a) Specimens which were examined at, and by the Medical Officer of, the Treatment Centre... ..	2		81		—		—			
(b) Specimens from persons attending at the Treatment Centre which were sent for examination to an approved laboratory ...	—		—		—		30			

\* The total of Items 1 (a), 1 (b) and 2 (a) in the vertical columns headed Syphilis, Soft Chancre, and Gonorrhœa should agree with the corresponding total of Items 3, 4, 5 and 6.

*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.	Wallasey.	Birkenhead.	Liverpool.	Bolton.	Total
Syphilis ... ..	11	—	1	—	12
Soft Chancre ... ..	2	—	—	—	2
Gonorrhœa ... ..	24	2	1	1	28
Conditions other than venereal ...	20	1	—	—	21
Total ... ..	57	3	2	1	63
B.† Total number of attendances of all patients residing in each area ... ..	1,859	12	5	4	1880
C.† Aggregate number of "In-patient days" of all patients residing in each area ... ..	—	—	—	—	164
D. Number of doses of arsenobenzol compounds given in the :— 1. Out-patient Clinic ... .. 2. In-patient dept. to patients residing in each area.	—	—	—	—	Nil.

E. Names of arsenobenzol compounds used in the treatment of Syphilis and the usual initial and final doses.—Stabilarsan :—Males, .45 gr. to .6 gr. ; Females, .3 gr. to .45 gr. ; Children, .05 gr. to .3 gr. Stepharsenol, .36gr. to .6 gr.

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.—As stated in St. Thomas' Hospital Venereal Disease Department in St. Thomas' Hospital Gazette, Vol. XXIX., 1923.

G. Nature of tests applied in deciding as to discharge of patients referred to in Item 5 on previous page.—Syphilis : No signs or symptoms for two years and negative Wassermann tests. Gonorrhœa : Absence of threads from urine—absence of pus cells and gonococci after prostatic massage and passage of a bougie.

† The totals in Item A should agree with the corresponding totals in Item 2 (a) on the previous page, and the totals in Items B and C should agree with the respective totals in Items 7 and 8 on the previous page.

## ANNUAL RETURN FROM PATHOLOGICAL LABORATORY—LIVERPOOL UNIVERSITY.

Pathological Examinations made in the Bacteriological Laboratory during the year ending on the 31st December, relating to persons residing in the County Borough of Wallasey:—

Nature of Test.	1921.				1922.				1923.				1924.				1925.			
	Qtr	No. of Tests.	Fee per Test.	Cost.	Qtr	No. of Tests.	Fee per Test.	Cost.	Qtr	No. of Tests.	Fee per Test.	Cost.	Qtr	No. of Tests.	Fee per Test.	Cost.	Qtr	No. of Tests.	Fee per Test.	Cost.
For detection of Spirochetes .....	1	—	s. d.	£ s. d.	1	—	s. d.	£ s. d.	1	—	s. d.	£ s. d.	1	—	s. d.	£ s. d.	1	—	s. d.	£ s. d.
	2	—	—	—	2	—	—	—	2	2	3 6	7 0	2	—	—	—	2	—	—	—
	3	—	—	—	3	—	—	—	3	—	—	—	3	—	—	—	3	—	—	—
	4	—	—	—	4	—	—	—	4	—	—	—	4	—	—	—	4	—	—	—
For Practitioners	1	—	—	—	1	—	—	—	1	—	—	—	1	—	—	—	1	—	—	—
	2	—	—	—	2	—	—	—	2	—	—	—	2	—	—	—	2	—	—	—
	3	—	—	—	3	—	—	—	3	—	—	—	3	—	—	—	3	—	—	—
	4	—	—	—	4	—	—	—	4	—	—	—	4	—	—	—	4	—	—	—
For detection of Gonococci .....	1	3	3 6	3 6 6	1	10	3 6	4 14 6	1	—	—	—	1	—	—	—	1	—	—	—
	2	2	—	—	2	7	—	—	2	—	—	—	2	—	—	—	2	—	—	—
	3	6	—	—	3	4	—	—	3	—	—	—	3	—	—	—	3	—	—	—
	4	8	—	—	4	6	—	—	4	—	—	—	4	—	—	—	4	—	—	—
For Wassermann reaction .....	1	3	3 6	2 2 0	1	—	3 6	1 15 0	1	—	—	—	1	—	—	—	1	—	—	—
	2	1	—	—	2	2	—	—	2	—	—	—	2	—	—	—	2	—	—	—
	3	3	—	—	3	6	—	—	3	—	—	—	3	—	—	—	3	—	—	—
	4	5	—	—	4	2	—	—	4	—	—	—	4	—	—	—	4	—	—	—
Totals .....	1	17	5 0	16 15 0	1	21	5 0	16 15 0	1	—	—	—	1	—	—	—	1	—	—	—
	2	24	—	—	2	10	—	—	2	—	—	—	2	—	—	—	2	—	—	—
	3	11	—	—	3	16	—	—	3	—	—	—	3	—	—	—	3	—	—	—
	4	15	—	—	4	20	—	—	4	—	—	—	4	—	—	—	4	—	—	—
	163*	—	38 8 6	151	—	—	34 19 6	108	—	—	26 12 0	114	—	—	28 4 0	78	—	—	19 5 6.	

\* plus 1 Stillbirth - 10/6 in 1921.

† Stillbirth. in 1923.

## HOUSING.

### GENERAL HOUSING CONDITIONS.

Although the number of new houses built in Wallasey last year is probably equal to that of any town of its size in the country, and is fully equal to pre-war numbers, it still remains a fact that the housing shortage continues to be acute. This is probably accounted for by the fact that the houses being built are of a fairly large type, and moreover, are not in those portions of the district where the artizan classes have resided hitherto. The Borough Engineer informs me that the number of applicants on the list for Corporation houses is approximately 1,700. Of these, 375 are already in occupation of a house of their own, and 1,325 are in occupation of rooms or part of a house only. Wallasey, as before stated, is largely a residential place. There are very few local industries at the moment which can provide employment for men and girls. It is not quite obvious, therefore, why there should be such an acute shortage of houses for artizans, except on the ground that the work of many of the artizans lies outside the Borough, *e.g.*, in Birkenhead or Liverpool.

For the moment practically all work in connection with overcrowding is in abeyance. In view of the housing shortage, there is a not unnatural unwillingness on the part of both the Health Committee and the Bench to turn people out into the street. Some gross cases occasionally come to the notice of the local authority, and such cases, by the exercise of a little patience and pressure, have been abated. It is a most difficult, and in most cases an impossible, procedure under present conditions, to get people out of a house when they are already in. In our last Parliamentary Bill an attempt was made to obtain powers whereby houses could be sub-let only with the consent of the Local Authority, the sole idea being the *prevention* of overcrowding, for it is one's experience that the most grossly overcrowded houses are those in which a house or part of a house has been sub-let when there was already barely sufficient room in it for the existing members of the family. When the second family arrives, sooner or later the overcrowding comes to the notice of the Local Authority, when, as before stated, it is almost impossible to do anything; but if sub-letting were illegal unless with the consent of the Local Authority, it would be possible to prevent the second family from being taken in, and in my view this is the only way of *preventing* overcrowding at the present moment. Having a house too small for the members of one's own family is one thing, but wilfully taking another family into the house already too small is another thing, and should be made an offence.



Additional powers are also necessary to deal with the conversion of houses into flats. No plans need to be submitted unless there is some structural alteration. When structural alterations are made, the conditions are fairly satisfactory, but the so-called conversion of a house into flats without any alterations is often merely a disguise for profiteering. It is, in fact, the sub-letting of a house by a landlord instead of by a tenant, and no extra provision is made in the shape of extra kitchen accommodation, w.c. accommodation, or water supply, for the additional families taken in. These cases are only discovered by the Inspector on his rounds. Several have been discovered quite recently, but there are no doubt many others of which the Local Authority has no knowledge. The housing shortage also gives to landlords without consciences the opportunity to exact, in many instances, exorbitant rents for vacant houses, and to tenants of houses the opportunity of extracting exorbitant rents for portions of the houses they occupy, often obtaining for a portion of the house more than they pay for the whole house to the landlord. Persons letting rooms in many instances also make exorbitant charges which those in urgent need of a house, for instance, if they have children, willy nilly have to pay, or be homeless. The Rents Restriction Act certainly limited the amount which should be paid to the landlord. If there is any renewal of that Act it might, with advantage, enact that the amount to be paid by the sub-tenant for a portion of the house, should be an amount proportionate to that paid by the chief tenant for the whole of the house.

## HOUSING.

## GENERAL HOUSING CONDITIONS.

Number of houses.—According to information supplied by the Borough Treasurer from his rate books, the number of houses in the Borough at the end of 1925 was 20,765, an increase of 345 as compared with 1924. This figure includes, of course, a certain number of flats which have been formed in recent years from existing houses. The number of new houses certified during the year was 457, as will be seen from the following Table supplied by the Borough Engineer and Surveyor:—

## NUMBER OF NEW HOUSES CERTIFIED DURING THE YEAR 1925.

WEEKLY RENTALS.	New Brighton.	Upper Brighton.	North Liscard.	South Liscard.	North Egremont.	South Egremont.	North Seacombe.	South Seacombe.	Somerville.	Poulton.	Marlowe.	St. Hillary.	Warren.	Wallasey.	Total.
5s. to 7s. 6d.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
7s. 6d. to 9s.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
9s. and over	17	22	8	—	12	—	—	—	36	103	149	29	55	26	457

NOTE.—114 of the above (20 in Somerville Ward and 94 in Poulton Ward) were Local Authority State Assisted houses.

## NUMBER OF HOUSES IN COURSE OF ERECTION, 1st JANUARY, 1926.

5s. to 7s. 6d.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
7s. 6d. to 9s.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
9s. and over	12	2	2	—	1	—	—	—	100*	41*	31	50	23	17	279

NOTE.—106 of these (74 in Somerville Ward and 32 in Poulton Ward) are Local Authority State Assisted houses.

## INHABITED HOUSES.

The following Table shows the number of INHABITED HOUSES in the Borough at the end of each year since 1911 (from figures supplied by the Borough Treasurer):—

Year.	Totals.	Increase on previous year.	Year.	Totals.	Increase on previous year.
1911	16,957	715	1919	19,289	43
1912	17,522	565	1920	19,350	61
1913	17,936	414	1921	19,503	153
1914	18,476	540	1922	19,653	150
1915	18,918	442	1923	19,841	188
1916	18,950	32	1924	20,420	579
1917	19,186	136	1925	20,765	345
1918	19,246	60			

The number of Empty Houses at December 31st, 1925 (as per Borough Treasurer's figures) was 363.

NUMBER OF INHABITED HOUSES IN THE WARDS ON JANUARY 1ST OF EACH YEAR.  
(Figures supplied by Borough Treasurer).

Wards.	1st Jan., 1921.	Wards.	At 1st January					Uninhabited Houses at Dec. 31st, 1925.
			1922.	1923.	1924.	1925.	1926.	
1. New Brighton ...	1,885	1. New Brighton ...	1542	1,554	1,593	1,679	1,643	43
2. Upper Brighton ...	1,966	2. Upper Brighton ...	1591	1,589	1,590	1,619	1,632	31
3. North Liscard ...	1,820	3. North Liscard ...	1548	1,544	1,534	1,556	1,551	27
4. South Liscard ...	1,785	4. South Liscard ...	1460	1,455	1,451	1,459	1,446	22
5. North Egremont ...	1,387	5. North Egremont ...	1468	1,470	1,455	1,478	1,488	8
6. South Egremont ...	2,178	6. South Egremont ...	1524	1,523	1,525	1,529	1,512	25
7. North Seacombe ...	1,431	7. North Seacombe ...	1527	1,525	1,531	1,503	1,517	14
8. South Seacombe ...	1,544	8. South Seacombe ...	1417	1,423	1,418	1,416	1,441	6
9. Poulton ...	2,328	9. Somerville ...	1579	1,575	1,572	1,598	1,588	24
10. Wallasey ...	3,026	10. Poulton ...	1300	1,298	1,335	1,401	1,482	24
Totals ...	19,350	11. Marlowe ...	996	1,069	1,105	1,347	1,493	37
		12. St. Hilary ...	1434	1,453	1,530	1,613	1,640	41
		13. Warren ...	1243	1,301	1,320	1,338	1,389	29
		14. Wallasey ...	874	874	882	884	943	32
		Totals ...	19,503	19,653	19,841	20,420	20,765	363 empty

Revised Wards.

In 1920 (towards latter end) Wards were adjusted and increased to 14.

## HOUSES CONVERTED INTO FLATS.

1920	...	...	...	...	...	5
1921	...	...	...	...	...	8
1922	...	...	...	...	...	14
1923	...	...	...	...	...	7
1924	...	...	...	...	...	6
1925	...	...	...	...	...	2
						—
			Total	...	...	42
						—

## HOUSING SCHEMES.

The particulars of last year's Housing Schemes are as follows :

Scheme.	No. in Contract.	Date Commenced.	Occupied to date.	Now in course of erection.
SCHEME 4— Surrey Street ...	56	Dec., 1924	28	28
SCHEME 5— Mostyn Street ...	59	June, 1924	59	—
SCHEME 6— Easteroft Road .	94	March, 1925	29	65
Totals ... ..	209		116	93
Also SCHEME 3— Tenant—Ownership Belvidere Road	32	Sept., 1925	—	32

The number of houses contemplated during the present year is as follows :—

	Approximate number which will be accommodated on Site.	Approximate number to be built during 1926.
SCHEME 7— Brickworks Land	270	130
SCHEME 8— Vernon's Land ...	230	50
Totals ... ..	500	180
SCHEME 3— Belvidere Road Tenant—Ownership Further contracts.	*162	30

\*Of this number 30 are already erected and occupied and a further 32 are at present in course of erection.

TABLE SHOWING NUMBER OF GAS FIRES PROVIDED IN THE CORPORATION HOUSING SCHEMES.

Scheme and Contract No.	Location.	Total No. of Houses.	No. of Parlour Houses.	No. of Non-parlour Houses.	Room in which Gas Fire is fixed.			Total Gas Fires.	Remarks.
					Parlour.	Bed 1.	Bed 2.		
SCHEME 1— Contract No. 1	{ Poulton Rd. and Alderley Road	33	18	15	—	—	—	—	—
SCHEME 2— Contract No. 1	Woodstock Road	47	47	—	—	—	—	—	—
SCHEME 2— Contracts 2-6	{ Mill Lane, Ruskin Avenue, Rostherne Ave.	56	56	—	56	56	168	—	—
SCHEME 2— Contract No. 7	Rostherne Ave.	14	—	14	—	14	14	—	—
SCHEME 2— Contracts 8 and 10	{ Ruskin Avenue, Lynwood Ave. and Love Lane	42	15	27	15	42	57	—	—
SCHEME 2— Contract No. 9	Lynwood Ave.	12	—	12	—	12	12	—	—
SCHEME 3— Contract No. 1	Belvidere Road Tenant—Ownership	30	30	—	16	16	32	—	—
SCHEME No. 3— Contract No. 2	Ditto.	32	32	—	7	8	15	Electric Radiator substituted for Gas.	—
SCHEME 4—	Poulton Rd. and Surrey Street	56	26	30	—	12	12	—	—
SCHEME 5—	Mostyn St. and Norwood Rd.	59	35	24	—	22	22	—	—
SCHEME 6—	Eastcroft Road (Steel Frame)	94	57	37	—	37	37	—	—
		475	316	159	94	219	369		

**HOUSING, TOWN PLANNING, Etc., ACTS, 1909 and 1919 AND  
HOUSING ACT, 1925, Etc.**

UNFIT DWELLING-HOUSES.

I.—INSPECTION.

(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) ... ..	7,469
(2) Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910 ... ..	1,898
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ... ..	3
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation ... ..	16

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

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers ... ..	2,498
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III.—ACTION UNDER STATUTORY POWERS.

*A. Proceedings under Section 28 of the Housing, Town Planning, etc., Act, 1919.*

(1) Number of dwelling-houses in respect of which notices were served requiring repairs... ..	91
(2) Number of dwelling-houses which were rendered fit—	
(a) by owners (including 4 from 1924) ... ..	84
(b) by Local Authority in default of owners ... ..	—
(c) outstanding at Jan. 1st, 1926 ... ..	11
(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close ... ..	—

B. *Proceedings under Public Health Acts.*

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied... ..	2,677
(2) Number of dwelling-houses in which defects were remedied :—	
(a) by owners (including 133 from 1924)... ..	2,670
(b) by Local Authority in default of owners (Bins)	10
(c) outstanding at Jan. 1st, 1926 ... ..	130

C. *Proceedings under Sections 17 and 18 of the Housing, Town Planning, etc., Act, 1909.*

(1) Number of representations made with a view to the making of Closing Orders ... ..	3
(2) Number of dwelling-houses in respect of which Closing Orders were made ... ..	3
(3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit ... ..	—
(4) Number of dwelling-houses in respect of which Demolition Orders were made ... ..	—
(5) Number of dwelling-houses demolished in pursuance of Demolition Orders ... ..	1
(6) Number of Demolition Orders quashed on appeal by Ministry on condition that premises would not again be used for dwelling purposes ... ..	2

## SANITARY ADMINISTRATION.

The Staff of the Department consists of:—

*Medical Officer of Health, Administrative Tuberculosis Officer,  
and School Medical Officer.†*

T. W. NAYLOR BARLOW, O.B.E., M.R.C.S. (Eng.), L.R.C.P. (Lond.),  
D.P.H. (Camb.), F.R.S. (Edin.); of Lincoln's Inn, Barrister-at-Law.

*Assistant Medical Officer of Health, Assistant Child Welfare Medical Officer,  
and Assistant School Medical Officer.†*

W. WRIGLEY STACEY, M.B., Ch. B., D.P.H.,

*Assistant Medical Officer of Health and Tuberculosis Officer,  
FRANK CYRIL MORGAN, M.R.C.S., L.R.C.P., D.P.H.*

*Ante-Natal Medical Officer.†*

PHOEBE A. INCE, M.D. (Part time).

*Chief Sanitary Inspector.†*

\*\*THOMAS NICHOLSON CLEATOR.

*Assistant Sanitary Inspectors.*

\*\*ALBERT HENRY ORMESHER,

\*\*HIRAM THOMAS IRVING.

*Health Visitors.*

\*MISS ISABELLA BIRRELL,†

\*MISS ALICE BARWISE,†

\*MISS RUTH M. QUINTON.†

*Meat Inspector and Inspector under the Contagious Diseases (Animals) Acts.*

CHARLES HORSFALL SCOTT.

*Child Welfare Nurse and V.D. Nurse (Trained Nurse)†*

MISS B. HANSEN (C.M.B.) (Certif.)

*Tuberculosis Nurse,*

MISS ANNIE LEE GLASSEY (C.M.B. and Health Visitor's Certificates).†

*Public Analyst (Part-time Officer),*

T. R. HODGSON, M.A.

*Weights and Measures and Food and Drugs Inspectors,*

JAMES TUDOR,

G. W. BURFORD.

*Administrative Assistant,*

JOHN McNALLY.

*Clerks.*

\*FRANK ALDRED,

NORMAN SQUIRE,

MISS D. WITTER,

J. H. O'BRIEN.

\*Holds a Sanitary Inspector's Certificate.

\*\*Holds a Meat Inspector's Certificate.

†Those to whose salary contribution is made under the Public Health Acts or by Exchequer Grants, are marked†.



## SANITARY CIRCUMSTANCES OF THE DISTRICT.

### WATER SUPPLY.

The water supply of the Borough is partly from wells in new red sandstone, 320 to 900 feet deep, reinforced by a supply from Lake Vyrnwy, upland surface water. No filtration is necessary. The service is a constant one, and the supply ample and pure. No contamination from lead has been discovered during the year. The Corporation have an arrangement with the Liverpool Corporation under which the latter supply up to 1,800,000 gallons daily from Lake Vyrnwy. A further supply for the future has also been arranged for with the Birkenhead Corporation of up to 300,000 gallons per day, increasing 100,000 gallons per day each year to a maximum of 2,000,000 gallons.

The volume of water supplied and the average consumption per head, etc., in each of the past five years were:—

	1921.	1922.	1923.	1924.	1925.
Nett Gallons, supplied	1,061,320,464	1,046,083,415	1,024,231,480	1,018,538,199	1,068,560,882
Average consumption per day per head, Gallons ... ..	31·15	31·32	30·50	30·25	31·82
<i>Viz: for drinking and other purposes ...</i>	<i>25·56</i>	<i>25·76</i>	<i>24·61</i>	<i>24·25</i>	<i>25·52</i>
<i>Shipping, watering streets, etc. ... ..</i>	<i>5·59</i>	<i>5·56</i>	<i>5·89</i>	<i>6·0</i>	<i>6·30</i>
Water used for sewers and drains ... ..	5,233,010	4,125,000	4,095,000	4,328,000	4,156,000

### SEWERAGE AND DRAINAGE.

The water-carriage system obtains throughout the Borough, and the crude sewage is discharged into the Mersey below low-water level.

The growth of Wallasey has been extremely rapid, with the result that most of the house drains are new, and have been constructed under modern bye-laws and strict supervision. All new house drains are subjected to a smoke test before being finally covered, while every year a number of the drains of old houses are re-laid.

Under the supervision of the Borough Surveyor the following sewers have either been reconstructed or repaired during the past five years:—

1921.—Passage at rear of 47 to 51, Demesne Street.

Rowson Street, brick sewer for a distance of 112 yards south of Albion Street.

1922.—Rowson Street, brick sewer for a distance of 182 yards south of Albion Street.

1923.—Rowson Street, brick sewer for a distance of 50 yards south of Albion Street.

1924.—Nil.

1925.—School Lane, 233 yards of 15in. and 12in. diameter pipes. Church Street, 40 yards of brick sewer.

In addition to the above a considerable amount of storm relief work has been carried out each year. The sewers have been regularly flushed, and the manholes, gullies, etc., cleaned and repaired.

Particulars with regard to the work of drain flushing carried out by the Health Department will be found on page 116.

Under the supervision of the Health Department also the drainage systems of the following houses have been :—

(A) Entirely Reconstructed.		(B) Partially Reconstructed.	
1921	... 4 houses.	... 3 houses.	
1922	... 6 "	... 6 "	
1923	... 9 "	... 1 "	
1924	... 14 "	... 11 "	
1925	... 6 "	... 3 "	

### SANITARY INSPECTION OF THE DISTRICT.

#### WORK OF THE DISTRICT INSPECTORS DURING 1925.

		NUISANCES.		
Number of	houses visited	...	...	5,218
"	apartments visited	...	...	19,865
"	houses found in a dirty condition	...	...	23
"	apartments found	"	"	50
"	"	"	in an overcrowded condition	12
"	"	"	with defective, insufficient or choked drains	462
"	"	"	with defective sash cords, windows, etc.	146
"	"	"	without supply of water for drinking, domestic or sanitary purposes	5
"	"	"	with defective boilers, flues, etc.	132
"	"	"	with defective or insufficient W.C. basins, flushing cisterns, putty joints, traps, waste-pipes, soil-pipes and/or channellings...	815
"	"	"	with defective yard or passage surfaces	226
"	"	"	with defective floors	96
"	"	"	with insufficient ventilation	—
"	"	"	vacant or insecure against misuse by general public	—
"	"	"	with damp or defective walls	171
"	"	"	with defective roofs, gutters and down-spouts	533
"	"	"	without proper and sufficient ashpits or ashbins	1,297
"	"	"	with dirty yard surfaces	18
"	"	"	with offensive accumulations requiring removal	21

Number of	offensive ditches and ponds requiring cleansing	...	...	...	...	—
"	cesspools inspected	...	...	...	...	—
"	matters referred to other departments	...	...	...	...	234
"	matters referred from other departments (bins, etc.)	...	...	...	...	735
"	informations laid in respect of nuisances	...	...	...	...	9
"	convictions obtained	...	...	...	...	6
"	Magistrates' Orders obtained	...	...	...	...	6
"	Nuisances abated and cases withdrawn on payment of costs	...	...	...	...	3
Amount of	fines and costs	...	...	...	...	£2/10/0

## SMOKE NUISANCES.

## STEPS TO PREVENT SMOKE NUISANCES.

Number of	observations made	...	...	...	...	29
"	Notices served in respect of black smoke (verbal)...	...	...	...	...	1
"	Informations laid in default of compliance with Notice	...	...	...	...	—
"	Informations laid in default of compliance with order	...	...	...	...	—
Amount of	Fines and Costs	...	...	...	...	—

## BYE-LAWS WITH RESPECT TO NUISANCES.

Number of	inspections of stable yards	...	...	...	...	742
"	re-inspections	...	...	...	...	42
"	Notices served to empty manure pits	...	...	...	...	39
"	Informations laid in default of compliance with notice	...	...	...	...	—
"	Stable yards without sufficient manure pits...	...	...	...	...	—
"	notices served to provide manure pits	...	...	...	...	—
"	notices served to provide stables with sufficient paving and/or drainage	...	...	...	...	—

## ABATEMENT OF NUISANCES.

Number of	preliminary notices issued for the abatement of nuisances...	2,817
"	Statutory Notices issued	518
"	re-inspections of nuisances	9,111

## DRAIN TESTING.

Number of	houses at which drains or branches have been specially tested by means of smoke or water	...	...	...	...	35
-----------	--	-----	-----	-----	-----	----

## EXAMINATION OF UNDERGROUND DRAINS.

Number of	applications made to Council under Section 41 of the Public Health Act, 1875, to lay bare pipes and traps	...	...	...	...	—
-----------	---	-----	-----	-----	-----	---

## CELLAR DWELLINGS.

Cellars found	occupied as dwellings*...	...	...	...	...	—
Notices served	to vacate same	...	...	...	...	—

## COURT AND ALLEY INSPECTION.

Number of	visits to courts and alleys	...	...	...	...	9
"	W.C.'s found clean	...	...	...	...	14
"	" found dirty	...	...	...	...	—
"	" re-inspected	...	...	...	...	—
"	" cleansed	...	...	...	...	—

## INSPECTION OF ICE CREAM CARTS, &amp;c.

Number of	visits to premises where Ice Cream is manufactured or sold	...	...	...	...	5
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**SPECIAL COMPLAINTS.**

Number of special complaints received and dealt with... .. 1,496

**HOUSES WITH INSUFFICIENT ASHPITS.**

Number of houses found without sufficient ashpits or ashbins... .. 1,297  
 „ offensive ashpits abolished ... .. 88

**MARINE STORE INSPECTION.**

Number of premises entered on Register ... .. 3  
 „ inspections ... .. 8  
 „ offensive conditions discovered at time of visit, and for  
 which notices were served ... .. —

**INSPECTION OF TENTS, VANS AND SHEDS.**

Number of visits paid to encampments and caravans ... .. 38  
 „ tents, vans, and sheds inspected ... .. 801

With regard to the last named item (Tents, Vans, etc.) a difficulty experienced is that of getting rid of caravans and the like when they have been on a site for six months before being discovered (and where they happen to be placed in an isolated part of the district this is quite possible). The only method of dealing with them in such an event is indirectly under the Building Bye-laws for using the structure as a dwelling without a certificate of habitation. An effective remedy, in my opinion, would be to make it an offence for anyone to occupy a tent, van or shed without the previous sanction of the Local Authority, and for the infliction of a penalty. At present the Authority has power to prevent the occupation of a structure if the conditions and environment are unsatisfactory.

**OTHER INSPECTIONS.**

**PUBLIC BUILDINGS,**

Number of visits to Public Buildings (Conveniences)... .. 25  
 „ „ Railway Stations ( Do. ) ... .. 1  
 „ „ Schools ... .. 18  
 „ „ Hotels ... .. —  
 „ „ Common Conveniences ... .. —  
 „ „ Public Conveniences ... .. —  
 „ „ „ Urinals ... .. —

**CANAL BOAT INSPECTION.**

The number of boats inspected was ... .. 82  
 Number of boats on which infringements were found ... .. 2  
 Number of infringements ... .. 2

**PARTICULARS AS TO INFRINGEMENTS.**

Captain not being in possession of one of the Certificates of  
 Registration ... .. —  
 Painting ... .. 1  
 Cabins not being weather-proof and dry ... .. —  
 Cabin coal locker defective ... .. 1  
 Defective decks ... .. —  
 Notices sent in respect of infringements ... .. 2  
 Legal proceedings were not taken in any case.

The Council is not a Registration Authority.

**OTHER SANITARY WORK.****FLUSHING.**

The work of flushing the drains from house to house has been continuously carried out by three gangs of men throughout the year.

**HOUSE TO HOUSE WORK.**

Number of	Visits to streets	...	...	...	...	...	3,008
"	" houses	...	...	...	...	...	37,157
"	yard W.C.'s flushed	...	...	...	...	...	35,729
"	yard gullies flushed	...	...	...	...	...	119,172
"	drains found choked	...	...	...	...	...	7,918
"	drains cleared	...	...	...	...	...	7,689

**SPECIAL FLUSHING IN INFECTIOUS CASES.**

Number of	visits to streets	...	...	...	...	...	317
"	" houses	...	...	...	...	...	317
"	yard W.C.'s flushed	...	...	...	...	...	317
"	yard gullies flushed	...	...	...	...	...	1,064
"	drains found choked	...	...	...	...	...	45
"	drains cleared	...	...	...	...	...	45

**FLUSHING OF SCHOOLS, HOSPITALS, ETC.**

Number of	visits to streets	...	...	...	...	...	74
"	schools, public buildings, etc.	...	...	...	...	...	74
"	yard W.C.'s flushed	...	...	...	...	...	719
"	yard gullies flushed	...	...	...	...	...	3,286
"	drains found choked	...	...	...	...	...	233
"	drains cleared	...	...	...	...	...	233

**BACK PASSAGES.**

NUMBER OF SPECIAL FLUSHINGS IN HOT WEATHER	...	...	...	291
--	-----	-----	-----	-----

**SMOKE NUISANCES.**

The subject of smoke abatement has been mentioned in health lectures, and an attempt has been made to formulate a strong public opinion on the matter.

Observations are frequently made of works chimneys, of which there are only some 57, but, generally speaking, it is rare to find any of them emitting dense, black smoke in such quantities as to constitute a nuisance capable of being dealt with under the P.H.A. The chief offending chimney is one belonging to the Corporation, but as a result of the alterations in connection with the new floating roadway, this chimney will shortly cease to be used.

Practically the whole of the smoke in Wallasey comes from domestic fires. Below will be found the number of gas fires in Wallasey, showing the increase during the last four years. We may say that during the year ended 31st December, 1925, 3,150 gas appliances were supplied in this district, consisting of gas fires, wash boilers and water heaters, etc.

YEAR.	FIRES IN USE.						INCREASE.
1921	...	...	...	6,789	...	...	—
1922	...	...	...	6,898	...	...	109
1923	...	...	...	7,669	...	...	771
1924	...	...	...	8,468	...	...	799
1925	...	...	...	9,070	...	...	602
							2,281

A table showing the provision of gas fires in connection with the Corporation Housing Schemes will be found on page 108.

#### ATMOSPHERIC POLLUTION.

No atmospheric readings have been taken for the simple reason that, Wallasey being largely a residential place with comparatively few works, they would not represent smoke, etc., deposits for which Wallasey is responsible, because, if the wind is from the East, South or South-west, it blows the smoke from the neighbouring boroughs, and is deposited here.

## FACTORY AND WORKSHOP ACT, 1901.

### 1.—INSPECTION.

INCLUDING INSPECTIONS MADE BY SANITARY INSPECTORS.

Premises.	Inspections.	Number of Written Notices.	Prosecutions.
FACTORIES ... .. (Including Factory Laundries) ...	255	19	...
WORKSHOPS ... .. (Including Workshop Laundries) ...	648	20	...
WORKPLACES ... .. (Other than Outworkers' premises included in Part 3 of this Report)	84	1	...
Total ... ..	987	40*	—

\* Verbal Notices : 12.

### 2.—DEFECTS FOUND.

Particulars.	No. of Defects			Number of Prosecu- tions.
	Found.	Remedied.	Referred to H.M. Inspector.	
<i>Nuisances under the Public Health Acts :—</i>				
Want of Cleanliness ... ..	13	13	...	...
Want of Ventilation ... ..	...	...	...	...
Overcrowding ... ..	...	...	...	...
Want of Drainage of Floors ...	...	...	...	...
Other Nuisances ... ..	8	8	...	...
<i>Sanitary Accommodation :</i>				
Insufficient ... ..	5	5	...	...
Unsuitable, Defective or Dirty	11	11	...	...
Not Separate for Sexes ... ..	...	...	...	...
<i>Offences under the Factory and Workshop Act :—</i>				
Illegal Occupation of Under- ground Bakehouse (s. 101) ...	...	...	...	...
Breach of Special Sanitary Requirements for Bake- houses (ss. 97 to 100) ...	9	9	...	...
Other offences (excluding offences relating to outwork which are included in Part 3 of this Report) ... ..	...	...	...	...
Totals ... ..	46	46	...	...

## FACTORIES.

For the most part the law relating to Factories is administered by the Home Office.

255 visits were, however, made to factories, these being chiefly in reference to sanitary accommodation.

The number of Factories on the Register is as follows:—

TRADE.	Number on Register.	Number of Visits.
Bakers ... ..	9	72
Confectioners ... ..	2	2
Boot Makers and Repairers ... ..	21	34
Laundries ... ..	17	34
Wheelwrights and Smiths ... ..	2	4
Joiners ... ..	6	7
Coffin Makers ... ..	1	3
Motor Engineers ... ..	8	12
Stonemasons ... ..	1	2
Printers ... ..	3	6
Artificial Manure Makers ... ..	1	1
Fountain Pen Makers ... ..	1	2
Boat Builders ... ..	2	3
Firelighter Manufacturers ... ..	9	9
Timber Merchants ... ..	2	2
Flour Millers ... ..	3	4
Spring Makers ... ..	1	2
Provender Dealers ... ..	3	5
Brick Makers ... ..	3	6
Brewers ... ..	1	1
Engineers ... ..	6	4
Concrete Makers ... ..	—	—
Oil Storages ... ..	2	2
Creosoting Works ... ..	—	—
Ore Merchants ... ..	1	1
Treacle Works ... ..	1	1
Leather Belting Manufacturers... ..	1	1
Destructor Works ... ..	1	1
Tramway Depot and Electricity Works ... ..	4	3
Gas and Water Works ... ..	1	1
Smokeless Fuel Works ... ..	—	—
Insulating Works ... ..	1	1
Cereal Mills ... ..	1	1
Builders' Merchants ... ..	2	5
Ice Maker ... ..	—	—
Lock Manufacturer ... ..	1	2
Biscuit " ... ..	1	1
Fruit Merchant ... ..	—	—
Mineral Water Manufacturer ... ..	2	5
Varnish Makers ... ..	1	1
Chain Maker ... ..	—	—
Corn Warehouses ... ..	1	—
Waterproof Manufacturers ... ..	1	1
Nut Cracking Works ... ..	1	2
Pharmacy ... ..	1	1
Metal Stamp and Pressed Tool Manufacturers ... ..	1	1
Pipe Cleaner Manufacturers ... ..	2	2
Leather Dressers ... ..	1	1
Tie Knitters ... ..	1	1
Wringing Machine Repairers ... ..	1	3
Ice Cream Makers ... ..	1	3
TOTALS ... ..	133	255



All the Workshops and Workplaces on the Register were regularly inspected, with the result as shown in the Summary which follows.

### WORKSHOPS.

The number of Workshops on the Register approximately is as follows :—

TRADE.	Number on Register.	Approximate Number of Persons Employed.	Number of Visits.
Bakers ... ..	54	103	126
Confectioners ... ..	56	131	179
Laundries ... ..	18	41	53
Tailors ... ..	23	47	32
Dressmakers and Milliners ...	49	108	99
Bootmakers and Repairers ...	56	84	81
Cabinet Makers and Upholsterers	22	43	24
Watchmakers and Repairers ...	6	11	9
Tinsmiths & Sheet Metal Workers	4	7	4
Saddlers and Leather Workers ...	2	2	4
Leadlight Manufacturers ...	1	4	2
Picture Framers ... ..	1	1	2
Printers ... ..	4	5	4
Photographers ... ..	1	4	1
Coffin Makers ... ..	2	2	2
Dry Cleaners ... ..	1	2	3
Chocolate Makers ... ..	1	2	—
Joiners ... ..	4	7	4
Coach Builders ... ..	1	2	3
Ice Cream Works ... ..	1	2	4
Motor Repairers ... ..	4	14	4
Boat Builders ... ..	1	2	1
Cycle Repairers ... ..	3	5	4
Electric Toy Manufacturers ...	1	2	1
Sweet Manufacturers ... ..	1	2	—
Scale Repairers ... ..	1	2	1
Wireless Outfitters' ... ..	1	2	1
Totals ... ..	319	637	648

### WORKPLACES.

The number of Workplaces on the Register approximately is as follows :—

TRADE.	Number on Register.	Approximate Number of Persons Employed.	Number of Visits.
Cycle Builders and Repairers ...	10	21	15
Wheelwrights and Smiths ...	12	34	15
Joiners ... ..	19	40	19
Wringing Machine Repairers ...	—	—	—
Motor Engineers and Repairers	14	30	25
Stonemasons ... ..	2	6	1
Stevedores ... ..	—	—	—
Timber Yard ... ..	1	3	1
Bottle Washers ... ..	1	3	2
Shippers ... ..	4	320	4
Coach Builders ... ..	—	—	—
Scale Repairers ... ..	1	2	2
Totals ... ..	64	459	84

3.—HOME WORK.

NATURE OF WORK.	OUTWORKERS' LISTS, SECTION 107.							OUTWORK IN UNWHOLESALE PREMISES, SECTION 108.			OUTWORK IN INFECTED PREMISES, SECTIONS 109, 110.				
	Lists Received from Employers.				Prosecutions			Instances.	Notices served.	Prosecutions.	Instances.	Orders made (S. 110).	Prosecutions (Sections 109, 110).		
	Sending twice in the year		Once in the year		Falling to keep or permit inspection of lists.	Falling to send lists.	(8)							(9)	(10)
Lists.	Con-tractors	Work-men.	Lists.	Con-tractors				Work-men.	Outworkers.						
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)
Wearing Apparel Making, &c.	4	—	16	2	1	11	—	—	—	—	—	—	—	—	—

4.—REGISTERED WORKSHOPS (S. 131).

	Number	Number
Bakers	...	54
Confectioners	...	56
Laundries	...	18
Tailors	...	23
Dressmakers and Milliners	...	49
Bootmakers and Repairers	...	56
Cabinet Makers and Upholsters	...	22
Watchmakers & Repairers	...	6
Tinsmiths & Sheet Metal Workers	...	4
Saddlers and Leather Workers	...	2
Leadlight Manufacturers	...	1
Blacksmiths	...	—
Wireless Outfitters	...	1
Scale Repairers	...	1
Dry Cleaners	...	1
Total number of Workshops on Register	...	319

5.—OTHER MATTERS.

Class.	Number.
Matters notified to H.M. Inspector of Factories:—	
Failure to affix Abstract of the Factory and Workshop Act (S. 133) ... ..	1
Action taken in matters referred by H.M. Inspectors as remediable under the Public Health Acts, but not under the Factory and Workshop Act (S. 5)—	
Notified by H.M. Inspector ... ..	2
Reports (of action taken) sent to H.M. Inspector	2
Other matters notified to H.M. Inspector of Factories	1
Underground Bakehouses (S. 101):—	
Certificates granted during the year ... ..	6
In use at the end of the year ... ..	5

OUTWORKERS.

69 visits were paid during the year to the homes of Outworkers. In no case, however, was it found necessary to serve notices.

## SALE OF FOOD AND DRUGS ACTS.

Summary of samples submitted during the year to the Public Analyst :—

## PROSECUTIONS.

Name of Sample.	No. of Samples Analysed.	No. of Samples Genuine.	No. of Samples Certified Adulterated.
Milk ... ..	171	151	20
Hot Milk ... ..	3	3	—
Skimmed Milk ... ..	1	1	—
Buttermilk ... ..	4	4	—
Condensed Milk ... ..	11	11	—
Dried Milk ... ..	3	3	—
Butter ... ..	33	33	—
Lard ... ..	31	31	—
Cheese ... ..	19	19	—
Cream Cheese ... ..	6	2	4
Coffee ... ..	25	24	1
Cocoa... ..	2	2	—
Pepper ... ..	2	2	—
Jam ... ..	1	1	—
Potted Shrimps ... ..	3	1	2
Sausages ... ..	3	2	1
Arrowroot ... ..	1	1	—
Ground Ginger ... ..	7	7	—
Cream of Tartar ... ..	5	5	—
Soda Water ... ..	1	1	—
Whisky ... ..	3	3	—
Rum ... ..	1	1	—
Totals ... ..	336	308	28

## PROSECUTIONS.

Proceedings were instituted in the following cases:—

Milk.	10% deficient in fat.	Fined 5s. and 15s. costs.
	7% deficient in fat.	Fined 5s. and 15s. costs.
	4% deficient in fat.	Dismissed on payment of £1 costs
	1·5% added water.	Fined 5s. and 15s. costs.
	2% added water.	Fined 5s. and 15s. costs.
	1·5% added water.	Fined 5s. and 15s. costs.
	6% deficient in fat.	Dismissed.
	2% deficient in fat.	Dismissed.
	6% deficient in fat.	Dismissed.
	6% deficient in fat.	Dismissed.
	6% deficient in fat.	Withdrawn.
	3% deficient in fat.	Withdrawn.
	7% deficient in fat.	Withdrawn.
	13% deficient in fat and 25 grains per gallon boric acid.	} Fined £7 and £2 17s. costs.
	3% added water.	
		Dismissed on payment of 15s costs.
	3% added water.	Fined £1 and 15s. costs.
	10% added water.	Fined £5 and 15s. costs.
	12% deficient in fat.	Fined £1 and 15s. costs.
	4% added water.	Fined £1 and 15s. costs.
	13% deficient in fat.	Fined £1 and 15s. costs.
Cream Cheese made from Skimmed Milk		Fined £1 and £4 4s. costs.

Prosecutions were not instituted in regard to:—

One sample of Coffee, three samples of Cream Cheese, two samples of Potted Shrimps, and one sample of Sausages. These were test samples and no action was taken.

The adulterations of all samples submitted for analysis was 8·3%, as against 5·5% for last year.

## BOROUGH ANALYST'S REPORT.

The Borough Analyst reports:—

“ During the past year, I received the following samples for analysis:—

Under the Sale of Food and Drugs Acts ... ..	322
Under the Public Health (Regulations as to Food) Act, 1907 ... ..	27
	349

Particulars of these samples and the number of adulterated samples are as follows:—

	Total.	Adulterated.
Milk ... ..	175	20
Butter ... ..	33	—
Buttermilk ... ..	4	—
Lard ... ..	31	—
Cheese ... ..	25	4
Cocoa ... ..	2	—
Coffee ... ..	25	1
Spirits ... ..	4	—
Confectionery and Jam ... ..	1	—
Pepper ... ..	2	—
Drugs ... ..	5	—
Miscellaneous Samples ... ..	15	3
	322	28

The 27 samples under the Public Health (Regulations as to Food) Act, 1907, were: 13 samples of Preserved Cream, all of which complied with the Public Health (Milk and Cream) Regulations, 1912, Amendment Order, 1917; 11 samples of Condensed Milk, all of which complied with the Public Health (Condensed Milk) Regulations, 1923; and three samples of Dried Milk, all of which complied with the Public Health (Dried Milk) Regulations, 1923.

I have the honour to be,

Mr. Chairman and Gentlemen,

Your obedient Servant,

(Signed) T. R. HODGSON,

M.A. (Cantab), F.I.C., F.C.S.,  
Borough Analyst.”

### MILK SUPPLY.

The bulk of the wholesale trade in milk in Wallasey is in the hands of some half-dozen dealers, who retail the milk themselves, and also supply many smaller retailers, many of whom are in a small way of business. The supplies come chiefly from the rural districts of Cheshire, Flintshire, Shropshire and Denbighshire.

The number of registered dealers in the Borough is 123.

The daily quantity of milk coming into the town is estimated as 5,000 gallons.

Judging from the number of applications which come before the Health Committee for registration, one would imagine that the business of retailing milk is a profitable one. In the year 1925, for example, there were no fewer than 30 applications.

There is no occasion for me to stress the importance of milk as an article of diet. Everybody knows nowadays that all children up to, at any rate, 5 years of age should take at least a pint of milk a day; that milk is the source from which they obtain their supplies of calcium, which is so very necessary for the development of parts of their frames. Everyone knows that milk is the staple, and often the only diet allowed in many illnesses. Everybody knows, also, that in itself milk forms a fine culture medium for bacteria, which multiply in it at a great rate, and that, on this account, it must be produced and handled with exceedingly great care. If otherwise it may be dangerous to drink. Everyone knows, also, that the Tubercle Bacillus is found in milk, and is a prolific cause of tubercular disease in childhood. It is, therefore, most important to the health of the community not only that milk should be produced from cattle free from Tuberculosis, but that it should be produced and handled in as cleanly a manner as possible. Many people engaged in the milk trade in its various branches seem to imagine that the production of clean milk is a costly process, and requires extensive re-building of shippens, the provision of expensive plant, and so on. Experience has shown that it requires none of these things, and that the cleanliness of milk does not depend so much upon the structural condition of the shippens as upon the condition as regards cleanliness of the cows, of the milkers and their methods of milking, and also of the utensils used. It is not an expensive matter to keep all these clean. It requires, mainly, soap and water and the exercise of common sense.

During the last 5 years we have continued the practice of taking samples of milk for Bacteriological Examination, with the results as shown in the following table:—

	1921	1922	1923	1924	1925	Total.	Remarks.
No. of Samples sent for Bacteriological Examination	13	11	37	18	30	109	—
Ditto found Tubercular ...	—	2	1	2	1	6	(or 5.5% of samples)
No. of latter imported ...	—	2	1	2	1	6	—
No. of Samples found with Colon Bacillus in 1 c.c. ...	8	8	29	16	25	86	Average 78.9%
Ditto do. in 1/100 c.c. ...	Nil	Nil	14	9	17	40	36.7%

Many of the samples contained Colon Bacillus in much weaker dilutions, *e.g.*, two samples showed it in a dilution of one-millionth part of a cubic centimetre. This table shows that 5.5 per cent. of the samples taken were tubercular, and it may be remarked that none of these samples were from milk produced in the shippens situated within the Borough. The micro-organism called the Colon Bacillus is one associated with dung, and should not be present in clean milk. It is, therefore, very disconcerting to find that in practically 79 per cent. of all the samples taken this Bacillus was found, and in nearly 37 per cent. it was found in dilutions which would point to serious contamination. Some of the samples, indeed, were exceedingly bad. Now it is impossible for the Medical Officer to state definitely where this Bacillus entered the milk. If a note be addressed to the retailer the farmer is blamed. The responsibility, however, lies between them, and, judging from my experience in visiting farms which have supplied milk to this Borough, I would say that the fault lies in large measure with the producers, but the retailers cannot devolve their responsibility quite so easily, for it would be idle to imagine that the methods of distribution in Wallasey in every instance are perfect: they are very far from being so. Those engaged in the milk business are not always so receptive of suggestions as could be wished. For example, when the Health Committee laid it down that all who had to insert their arms into tankards to draw milk therefrom should wear clean armllets, there was a very great disinclination on the part of many to adopt this very simple, very inexpensive, but very necessary precaution.

A few years ago all milk used to be delivered to houses in cans. Now a very large proportion is delivered in bottles. The distribution of milk in bottles is an ideal method, provided the bottles are filled at the dairy, and *proper facilities are provided, and used, for the cleansing of the bottles provided.* It may

be stated, at once, that the facilities for cleansing bottles in many instances leave a good deal to be desired, and steps are being taken to ensure the provision of proper facilities. Can anything further be done to ensure a clean milk supply more than what has been referred to above? The public are the sufferers, and the public themselves wield a very powerful weapon, of which they have not yet made any use. In the first place I think it is the duty of wholesalers to refuse to deal with farmers who decline to put into practice simple, commonsense, methods in regard to the clean production of milk. That would have a great influence in preventing filth getting into the milk at its source. Then it appears to me that the consumers should take the trouble to visit the places from which they purchase milk and see for themselves the conditions under which the milk is handled. If they transferred their custom from those places where the conditions were unsatisfactory to those places where the conditions were satisfactory, that also would provide a tremendous stimulus to the improvement of the methods locally. It is astonishing how little interest the majority of people take in a matter of this kind. They have no hesitation about writing to the Local Authority about milk which is delivered to them unclean, but if they were to go and pay an occasional visit to their own milk dealer, they would aid the efforts of the Sanitary Authority enormously. A threat to withdraw custom is a very potent weapon.

### MILK AND CREAM REGULATIONS.

#### 1.—MILK AND CREAM NOT SOLD AS PRESERVED CREAM.

	(a) Number of Samples examined for the presence of a preserva- tive.	(b) Number in which Pre- servative was reported to be present, and per- centage of preservative found in each Sample.
Milk ... ..	175	1
Cream ... ..	—	—

Nature of preservative in each case in Column (b) and action taken under the Regulations in regard to it—25 grains per gallon Boric Acid. Fined £5 and £2 2s. 0d. Costs.

#### 2.—CREAM SOLD AS PRESERVED CREAM.

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



(i) Correct statements made	...	...	...	13
(ii) Statements incorrect	...	...	...	—
Total	...	...	...	<u>13</u>

(iii) Percentage of preservative found in each sample :—

0·25	0·20	0·35	0·24	0·27	0·25	0·32
0·24	0·39	0·25	0·18	0·19	0·21	

Percentage stated on Statutory label—0·40%.

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

(i) Above 35%	...	...	...	...	...	13
(ii) Below 35%	...	...	...	...	...	—
Total	...	...	...	...	...	<u>13</u>

(c) Instances where (apart from analysis) the requirements as to labelling a declaration of preserved cream in Article V. (1) and the provisions in Article V. (2) of the Regulations have not been observed :—

Article V. (i.)	...	...	...	...	...	Nil.
Article V. (ii.)	...	...	...	...	...	Nil.

(d) Particulars of each in which the Regulations have not been complied with, and action taken :—None.

### 3.—THICKENING SUBSTANCES.

No evidence of their addition to cream or to preserved cream.

### MEAT INSPECTION.

All Butchers' Shops in the Borough are regularly visited by the Meat Inspector, as are also the Wallasey and Alfred Lairages, in which the bulk of the meat sold in the district is killed.

#### SLAUGHTER-HOUSES (PRIVATE).

		In 1920.	In Jan., 1925.	In Dec. 1925.
No. Registered	...	2	2	2
„ Licensed	...	2	2	1
Total	...	<u>4</u>	<u>4</u>	<u>3</u>

There is no Public Abattoir.

There are no special inspection arrangements as to time of slaughter, but the Meat Inspector examines the carcasses of all the animals after slaughter, and the local butchers are in the habit of ringing up to request a visit from that Officer when they discover any sign of disease during the slaughtering of the animal. I think it may be said that no carcass leaves any of the slaughter-houses or lairages in the Borough without an inspection of the offal and the carcass by the Meat Inspector. The following tables give details with regard to inspection during the past year:—

#### SHOP AND SLAUGHTER-HOUSE INSPECTION.

Number of visits to Shops and Private Slaughter-houses ... ..	2,198
Amount of Meat seized and destroyed as unfit for human food consisting of :	
Beef ... ..	12,587 lbs.
Mutton ... ..	835 "
Veal ... ..	1,720 "
Offal ... ..	4,780 "
Pork ... ..	916 "
Lamb ... ..	37 "
Total ... ..	19,875 lbs.

Number of visits to pork shops and premises where meats are prepared for sale ... ..	1,905
" " butchers' shops ... ..	3,971
" " fish and poultry shops ... ..	2,525
" " fried fish shops ... ..	654
" inspections of hawkers' carts and baskets ... ..	356

#### INSPECTION OF CATTLE PENS.

Number of visits paid during the year ... ..	4,284
--	-------

#### INSPECTION OF PIGGERIES.

Number of Piggeries in the Borough ... ..	8
" inspections paid ... ..	936

#### NUMBER OF ANIMALS SLAUGHTERED AT THE WALLASEY AND ALFRED LAIRAGES DURING THE YEAR 1925.

Lairages.	Foreign.		Coastwise.		
	Oxen.	Sheep.	Oxen & Calves.	Sheep, Lambs, Goats.	Pigs.
*Wallasey ... ..	18,901	—	—	106,419	143
*Alfred ... ..	2	—	—	—	—
Totals ... ..	18,903	—	—	106,419	143

\*These figures are supplied by the Mersey Docks and Harbour Board.

TABLE SHOWING (A) AMOUNT OF TUBERCULOUS MEAT DESTROYED.

	Private Slaughter Houses.		Lairages.	
	<i>Carcases.</i>	<i>Quarters.</i>	<i>Carcases.</i>	<i>Quarters.</i>
BEEF ... ..	6	2	2	2
MUTTON ... ..	—	—	—	—
PORK ... ..	—	1	—	—
VEAL ... ..	—	—	—	—

(B) AMOUNT DESTROYED FOR OTHER CAUSES.

	Private Slaughter Houses		Lairages.	
	<i>Carcases.</i>	<i>Quarters.</i>	<i>Carcases.</i>	<i>Quarters.</i>
BEEF ... ..	1	8	4	123
MUTTON ... ..	14	2	45	34
PORK ... ..	6	1	—	—
LAMB ... ..	2	—	2	—
VEAL ... ..	18	—	255	—
GOATS ... ..	—	—	—	—
Totals ...	41	11	306	157

Amount of Meat taken from the Lairages and destroyed as unfit for human food ... .. 48,227 lbs.

	1925.
Beef ... ..	20,904
Mutton ... ..	3,797
Lamb ... ..	104
Offal ... ..	8,573
Veal ... ..	14,900
Pork ... ..	49
	<u>48,227</u>

TABLE showing the number of ANIMALS LANDED AT WALLASEY and ALFRED LAIRAGES, and passed through ALIVE to various parts of the Kingdom :—

Oxen and Calves.	Lambs, Sheep and Goats.	Pigs.
18,903	106,419	143

## INSPECTION OF LAIRAGES.

Number of visits paid to the Wallasey and Alfred Lairages during the year :—

1921	...	...	...	...	1,192
1922	...	...	...	...	1,195
1923	...	...	...	...	1,219
1924	...	...	...	...	1,229
1925	...	...	...	...	1,184

## OTHER FOODS.

FOOD (OTHER THAN BUTCHERS' MEAT) SEIZED DURING 1925.

						lbs.
Peaches	...	...	...	...	...	16
Tomatoes	...	...	...	...	...	6
Corned Beef	...	...	...	...	...	240
Cocoanuts	...	...	...	...	...	1,000

## MEAT REGULATIONS.

Before the meat regulations came into force in 1925 the Medical Officer of Health met the local meat traders in conference, explained the regulations, and asked for their co-operation. This co-operation has been given in a very praiseworthy manner, and improvement has resulted. It is now the usual practice for butchers' shop windows to be closed on windy or dirty days, and there is a distinct improvement in the methods of meat carriage to retail shops. No prosecutions have been undertaken, but it has been found necessary to bring to the notice of individual traders such faults as hanging meat outside the shop, and not efficiently covering meat in transit, and in every case so far the wishes of the department have been complied with.

## INSPECTION OF PLACES WHERE FOOD IS PREPARED.

There are 65 places where food for human consumption is prepared. Sausages, 60; black puddings, 7; polonies, 6; pressed beef and brawn, 12; pressed tongue, 7; spice balls, 3; preserved (potted) meats, 5; pies, 5; tripe, 1. Special attention is paid to the cleanliness of the utensils and the workers, as well as the means of storage of food prior to preparation. Inspections are made as often as necessary, and not less often than once a week.

### BAKEHOUSES.

At the end of the year there were 121 bakehouses in occupation.

The number of underground bakehouses is now reduced to 6.

The number of confectionery bakehouses is increasing. Owing to the shop and housing shortage quite a number of confectionery bakehouses have been established in premises which are by no means ideal for the purpose, but which under existing legal provisions there is no power to prevent. It is not unusual to find application made for permission to use as a confectionery bakehouse, a kitchen, or even a scullery or back kitchen, of a private house. Such bakehouses often have sufficient light and sufficient ventilation. They also have no drain opening within the bakehouse, so they, therefore, comply with the necessary statutory conditions; but when they are used, as some of them are, for domestic as well as business purposes, and when the necessary utensils and food materials are provided, there is great lack of room, and consequently it is difficult to keep them as clean as they should be. In my view the combination of domestic and public cooking is incompatible. Lack of working space and of room for storage are the main disadvantages, and with the best will in the world it is not possible for the occupants to keep such places in an entirely satisfactory condition.

The following is a summary of the work of inspection during the year in connection with Bakehouses :—

#### BAKEHOUSES.

Number on Register	...	...	...	...	...	63
„ of visits made	...	...	...	...	...	198
„ re-visits	...	...	...	...	...	12
„ bakehouses found dirty (walls and ceilings)	...	...	...	...	...	7
„ notices issued for limewashing	...	...	...	...	...	7
„ bakehouses limewashed without notice	...	...	...	...	...	—
„ notices issued for defective drainage	...	...	...	...	...	1
„ „ „ walls and floors	...	...	...	...	...	1
„ „ „ to repair defective ceilings	...	...	...	...	...	—
„ „ „ to cleanse tables, utensils, &c.	...	...	...	...	...	—
„ „ „ to clean areas	...	...	...	...	...	—
„ references to Factory Inspector	...	...	...	...	...	—

## CONFECTIONERY BAKEHOUSES.

Number on Register	...	...	...	...	...	...	58
„ of visits made	...	...	...	...	...	...	181
„ re-visits	...	...	...	...	...	...	4
„ found dirty (walls and ceilings)	...	...	...	...	...	...	1
„ notices issued for limewashing	...	...	...	...	...	...	1
„ bakehouses limed without notice	...	...	...	...	...	...	—
„ notices issued for defective drainage, &c.	...	...	...	...	...	...	—
„ „ „ to cleanse floors, utensils, &c.	...	...	...	...	...	...	1
„ „ „ for various defects	...	...	...	...	...	...	—
„ references to Factory Inspector	...	...	...	...	...	...	—

**ADMINISTRATION OF DAIRIES, COWSHEDS AND MILKSHOPS  
ORDERS.**

The number of Cowkeepers on the register at December 31st was 2 and the number of cows 28. Fifty-two visits were paid during the year.

The following is a summary showing the work of inspection during the year in connection with:—

DAIRIES, COWSHEDS AND MILKSHOPS.

Number of Milkshops on Register at Dec. 31st	...	...	...	...	...	123
„ shippens with Milkstores attached	...	...	...	...	...	2
„ inspections made	...	...	...	...	...	440
„ notices served for defects	...	...	...	...	...	1
„ notices served <i>re</i> utensils and covering of milk vessels	...	...	...	...	...	1
„ notices served requiring the removal of manure	...	...	...	...	...	—
„ notices served requiring liming or cleansing	...	...	...	...	...	9
„ notices complied with	...	...	...	...	...	—
„ visits to unregistered premises selling milk	...	...	...	...	...	—
„ licensed sellers of certified milk	...	...	...	...	...	10
„ licensed sellers of pasteurized milk*	...	...	...	...	...	—

\*1 Since Licensed.

**CONTAGIOUS DISEASES (ANIMALS) ACTS AND ORDERS.**

The following is a summary of the work done under the above :—

Number of Licences received from other Authorities with regard to the removal of swine... ..	280
„ swine referred to in such Licences ... ..	1,387
„ visits in connection therewith ... ..	540
„ Licences received from other Authorities with regard to the removal of sheep and lambs ...	38
„ sheep and lambs referred to in such Licences ...	623
„ visits in connection with such Licences ... ..	46
„ Swine Movement Licences issued from this district ... ..	152
„ swine referred to in such Licences ... ..	888
„ Cattle Movement Licences issued... ..	102
„ Cattle referred to in such Licences ... ..	221
„ Sheep and Lambs Movement Licences issued ...	40
„ Sheep and Lambs referred to in such Licences ...	396
„ cases of Parasitic Mange notified ... ..	2
„ visits to same ... ..	82
„ horses examined ... ..	174
„ swine examined ... ..	18
„ stables disinfected ... ..	—

Under the Tuberculosis Regulations of the Board of Agriculture a Veterinary Surgeon was appointed in 1913.

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

One of the Sanitary Inspectors was appointed Rat Officer in 1920, and steps have been taken each year since to deal effectively with rats and mice. His work mainly consists of interviewing and explaining to occupiers different methods suggested by the Ministry of Agriculture for ridding their premises of these pests, and up to the present with one exception it has not been found necessary to issue any notices upon occupiers for failing in their duties. In the exception referred to it was necessary to issue a summons, a fine being inflicted.

The Corporation in their desire to give every assistance to occupiers, purchased a number of trays for the use of bird lime and "All Climes" rat preparation; Cardo's break-back spring trap, and one wire cage trap. All are in use.

These traps are lent to occupiers on payment of a deposit equal to the cost of the trap. A type-written list of recipes is also left with occupiers of infested premises, so that they may vary their baits.

#### NATIONAL RAT WEEK.

A few days prior to National Rat Week, in November each year, circulars and pre-paid post cards were forwarded to occupiers of all premises which were likely to harbour rats, asking for their co-operation in the endeavour to make the week a successful one, and for information as to the results of any action taken by them. A letter was also sent to the local chemists enclosing a window display card intimating that effective poisons could be obtained at their establishments, and that any further advice and assistance could be had on applying at the Health Department during specified hours.

The premises to which circulars were sent included Stable Yards, Flour Mills, various Works, Theatres, Picture Houses, Marine Stores, Cowsheds, Slaughter-houses and Lairages, Market Gardens, etc.

#### SUMMARY OF THE WORK DONE UNDER THE RATS AND MICE DESTRUCTION ACT IN EACH OF THE PAST FIVE YEARS.

	1921	1922	1923	1924	1925
No. of complaints received	33	35	31	39	30
Re-visits ... ..	60	66	49	58	129
Baits laid ... ..	5,480	2,190	628	812	*884
Baits consumed ... ..	4,952	1,306	400	586	678
Dead rats ... ..	1,005	232	217	461	323
Trays in use ... ..	6	6	6	6	6
Traps in use ... ..	5	4	4	4	4
RAT WEEKS					
(included above)					
Circulars issued ... ..	175	195	216	233	212
Replies received ... ..	14	8	53	11	14
No. of rats killed ... ..	67	139	110	302	315
No. of baits laid ... ..	1,785	616	208	366	860
No. of baits consumed ... ..	1,325	564	160	—	654
Cards given to Chemists ... ..	40	40	40	40	40
Large posters on hoardings 7 days before and during Rat Week ... ..	—	—	—	80	80

\*It is impossible to get correct figures for baits laid and consumed.



**ADOPTIVE AND OTHER ACTS, Etc.**

The following is a list of

**ACTS, ORDERS, BYE-LAWS, REGULATIONS, Etc.,**

under which the Department works :—

**HEALTH, HOUSING, Etc.****ACTS.**

Public Health Act, 1875.

„ (Amendment) Acts, 1879, 1890, 1896, 1907 (Secs. 85 and 86, and Part 6), 1925 (Parts 2, 3, 4, 5).

Local Government Acts, 1888, 1894.

Wallasey Local Board Act, 1890.

Wallasey Improvement Act, 1901.

Wallasey Tramways and Improvement Act, 1906.

Wallasey Corporation Act, 1920.

Town's Improvement Clauses Act, 1847.

Housing of the Working Classes Acts, 1890 (Part 3) and 1903.

Housing, Town Planning, etc., Acts, 1909 and 1919.

Rent, etc., Restriction Acts, 1919, 1920 and 1923.

Housing Act, 1925.

Canal Boats' Acts, 1877 and 1884.

Quarry Fencing Act, 1887.

Rag Flock Act, 1911.

Fabrics (Misdescription) Act, 1913.

**ORDERS, BYE-LAWS, Etc.**

Sanitary Officers' Order, 1922.

Bye-laws with respect to Nuisances, 1886.

„ „ „ Houses Let in Lodgings, 0000.

„ „ „ Common Lodging Houses, 1886.

„ „ „ Offensive Trades (Various).

„ „ „ Slaughter-houses, 1886.

„ „ „ Tents, Vans, and Sheds, 1908.

„ „ „ New Street and Buildings

and

**MISCELLANEOUS ORDERS, Etc., of the Ministry of Health.**

**INFECTIOUS NOTIFIABLE DISEASES.****ACTS.**

Epidemic and other Diseases (Prevention) Act, 1883.

Infectious Disease (Notification) Acts, 1889 and 1899.

Prevention and Treatment of Disease Act, 1913.

Isolation Hospitals Acts, 1893, 1901.

Vaccination Act, 1898.

Veneral Disease Acts, 1916, 1917.

## REGULATIONS, ORDERS, Etc.

- Public Health (Notification of Infectious Disease) Regulations, 1918.
- „ (Acute Encephalitis Lethargica and Acute Polio-encephalitis) Regulations, 1918 and 1919.
- „ (Cerebro-Spinal Fever) Regulations, 1918 and 1919.
- „ (Acute Polio-myelitis) Regulations, 1912.
- „ (Pneumonia, Malaria, Dysentery, Trench Fever) Regulations, 1918 and 1919.
- „ (Ophthalmia Neonatorum) Regulations, 1914.
- „ (Small-pox Prevention) Regulations, 1917.
- Prevention of Epidemic Diseases (Regulations as to Plague), 1919.
- Influenzal Pneumonia, etc., General Order, 1919.
- Diphtheria (Anti-toxin) Order, 1910.
- Notification and Treatment of Cerebro-Spinal Fever and Acute Polio-myelitis, 1912 and 1915.
- Miscellaneous Statutory Rules, Orders, etc.

## TUBERCULOSIS.

## ACTS AND REGULATIONS.

- National Health Insurance Acts, 1911 and 1924.
- Public Health (Tuberculosis) Regulations, 1908, 1911, 1912, 1916, 1921, 1924 and 1925.
- Tuberculosis (Domiciliary Treatment) Order, 1916.
- Miscellaneous Orders, etc., of the Ministry of Health.

## MATERNITY AND CHILD WELFARE.

## ACTS, ORDERS, Etc.

- Midwives' Acts, 1902 and 1918.
- Notification of Births Act, 1907.
- Maternity and Child Welfare Act, 1918.
- Rules of the Central Midwives' Board.
- Miscellaneous Orders, etc., of the Ministry of Health.

## CONTAGIOUS DISEASES (ANIMALS).

## ACTS, ORDERS, Etc.

- Contagious Diseases (Animals) Acts, 1894 to 1925.
- Tuberculosis (Animals) Acts, 1913, 1914.
- „ „ Order, 1925.
- Anthrax Order, 1910.
- Parasitic Mange Order, 1911.
- Swine Fever Regulations.
- Rabies Order, 1919.

Glanders or Farcy Order, 1920.  
 Foot and Mouth Disease Orders.  
 " (Packing Materials) Order, 1926.  
 Miscellaneous Orders, etc., of the Ministry of Agriculture.

#### FOODS AND DRUGS.

##### ACTS.

Food and Drugs Acts, 1875, 1879, 1899, 1907.  
 Margarine Act, 1887.  
 Butter and Margarine Act, 1907.  
 Wallasey Corporation Act, 1920.  
 Sale of Horse-flesh Act, 1889.

##### REGULATIONS.

Public Health (Regulations as to Food) Act, 1907.  
 " (Shellfish) Regulations, 1915.  
 " (Foreign Meat) Regulations, 1908.  
 " (Unsound Food) Regulations, 1908.  
 " (Meat) Regulations, 1924.  
 Miscellaneous Orders, etc., of the Ministry of Health.

#### MILK.

##### ACTS.

Milk and Dairies (Consolidation) Act, 1915.  
 " (Amendment) Act, 1922.  
 Wallasey Corporation Act, 1920.

##### ORDERS, REGULATIONS, Etc.

Dairies, Cowsheds, and Milk Shops Orders, 1885, 1886 and 1899.  
 Milk and Dairies Order, 1926.  
 Sale of Milk Regulations, 1901.  
 Public Health (Milk and Cream) Regulations, 1912 and 1917.  
 Milk (Special Designations) Order, 1923.  
 Public Health (Condensed Milk) Regulations, 1923.  
 " (Dried Milk) Regulations, 1923.  
 Miscellaneous Orders, etc., of the Ministry of Health.

#### FACTORIES, WORKSHOPS, Etc.

##### ACTS, ORDERS, Etc.

Factory and Workshops Acts, 1891, 1895, 1901.  
 " Act (Laundry Supervision), 1907.  
 Sanitary Accommodation in Factories and Workshops Order, 1903.  
 Home Office Orders (Various).

## CANAL BOATS.

## ACTS, ORDERS, ETC.

- Canal Boats Acts, 1877 and 1884.  
 „ Regulations, 1878.  
 „ Order, 1922.

## RAT DESTRUCTION.

## ACTS, ORDERS, ETC.

- Rats and Mice (Destruction) Act, 1919.  
 Rats Orders, 1918 and 1919.  
 Prevention of Epidemic Disease (Regulations as to Plague and Rat Destruction), 1919.

## WEIGHTS AND MEASURES.

## ACTS.

- Weights and Measures Acts, 1878, 1889, 1892, 1893, 1919.  
 Sale of Bread Act, 1836.  
 Sale of Tea Act, 1922.  
 Licensing Act, 1872.  
 Merchandise Marks Act, 1887.  
 Factories and Workshops Act, 1901.

## REGULATIONS.

- Weights and Measures Regulations, 1907.

**METEOROLOGICAL.**

Owing to the conversion of Marine Park into Bowling Greens and Tennis Courts, it was necessary to transfer the Meteorological Instruments in December, 1924, to the Municipal Golf Links. The site and instruments were inspected by a representative of the Air Ministry, and the Station was officially recognised as a Class A Station as and from the 4th February, 1925, when it was arranged that weather reports should be telegraphed each day throughout the year.

List of instruments at Corporation's Meteorological Station, Warren Park, Wallasey.

- 1 Standard Fortin Barometer (Casella).  
 Stevenson Screen.  
 1 Mason's Hygrometer (Casella).  
 A Maximum Thermometer (Negretti and Zambra).  
 1 Minimum Thermometer (Negretti and Zambra).  
 1 5in. Raingauge and Measure (Negretti and Zambra).  
 1 8in. Automatic Recording Raingauge (Casella).  
 1 Campbell-Stokes Sunshine Recorder (Hicks).  
 1 Barograph.  
 1 Wind Vane.

### POPULATION, HOUSING, Etc.

The following Tables have been extracted from the Census Returns, and will prove interesting and of value to those who desire to be thoroughly conversant with the Social Conditions of the Borough. Other particulars with regard to population, etc., will be found in the early portion of this Report, under "Natural and Social Conditions of the District."

#### POPULATION.

#### LOCAL AGE AND CONDITION DISTRIBUTIONS. CHESHIRE COUNTY AND COUNTY BOROUGH.

Area.	Average age.		Age distribution per 1,000 of each sex. (Ages last birthday).								Marital condition distribution per 1,000 of each sex.						Number of Married Women aged less than 45 per 1,000 females of all ages.	Number of Females per 1,000 Males.
	Males.	Females.	Males.				Females.				Males.			Females.				
			0-4	5-19	20-39	40-	0-4	5-19	20-39	40-	Single.	Married.	Widowed and Divorced.	Single.	Married.	Widowed and Divorced.		
Adm. County of Chester (with associated County Boroughs). Birkenhead C.B. ...	30.1	31.0	89	289	304	318	78	261	328	333	545	420	35	538	381	81	231	1,114
Chester, City and County of. Stockport C.B. ...	28.3	29.1	104	309	306	281	99	287	322	292	581	386	33	557	365	78	240	1,062
Wallasey C.B. ...	29.8	31.3	95	281	311	313	79	262	334	325	564	398	38	550	365	85	228	1,095
...	30.5	32.1	82	280	309	329	70	248	337	345	511	453	36	520	392	88	239	1,167
...	30.0	32.2	85	293	306	316	67	250	338	345	550	420	30	542	364	94	224	1,209

SUMMARY OF OBSERVATIONS TAKEN AT CORPORATION'S METEOROLOGICAL STATION, 1921-1925.

MONTH.	MEAN TEMPERATURE.					RAINFALL IN INCHES.										SUNSHINE.										NUMBER OF DAYS OF FROST.					NUMBER OF DAYS OF SNOWFALL.					MEAN BAROMETER (In Inches).														
						TOTAL.					MEAN DAILY.					NUMBER OF DAYS WITH .01 OR MORE.					TOTAL (HOURS).					MEAN DAILY.					NUMBER OF DAYS WITH SUNSHINE.																			
	1921	1922	1923	1924	1925	1921	1922	1923	1924	1925	1921	1922	1923	1924	1925	1921	1922	1923	1924	1925	1921	1922	1923	1924	1925	1921	1922	1923	1924	1925	1921	1922	1923	1924	1925	1921	1922	1923	1924	1925	1921	1922	1923	1924	1925	1921	1922	1923	1924	1925
	1921	1922	1923	1924	1925	1921	1922	1923	1924	1925	1921	1922	1923	1924	1925	1921	1922	1923	1924	1925	1921	1922	1923	1924	1925	1921	1922	1923	1924	1925	1921	1922	1923	1924	1925	1921	1922	1923	1924	1925	1921	1922	1923	1924	1925	1921	1922	1923	1924	1925
JANUARY	45.7	39.69	43.74	41.20	43.1	3.642	3.875	1.790	2.120	1.59	-.118	-.125	-.088	-.088	-.051	21	24	20	19	11	35.0	27.5	22.5	24.7	20.0	1.13	1.21	1.05	1.12	1.25	17	12	14	11	18	—	7	—	4	4	—	5	—	2	—	29.69	29.85	30.06	29.75	29.64
FEBRUARY	41.33	40.71	42.81	39.49	41.8	1.85	2.975	2.660	7.05	4.86	-.007	-.106	-.128	-.024	-.174	3	19	21	11	22	63.2	75.8	56.2	52.6	79.5	2.66	2.68	1.95	1.80	2.83	17	19	19	19	21	1	6	2	7	10	—	1	7	1	—	30.23	29.79	29.81	29.56	29.42
MARCH	45.47	41.14	44.56	40.87	41.9	1.970	1.375	1.415	7.90	.92	-.064	-.044	-.046	-.025	-.03	22	11	13	6	13	102.0	116.0	104.0	142.7	105.7	3.29	3.74	3.32	4.6	3.41	21	23	26	26	23	2	3	—	11	10	—	2	—	2	1	29.92	29.80	29.94	29.74	29.22
APRIL	46.59	42.44	46.79	47.74	48.0	1.211	2.060	2.331	1.710	1.59	-.040	-.069	-.077	-.053	.5	16	12	14	16	22	4	187.6	143.3	146.2	157.9	7.44	6.25	4.67	4.87	5.96	29	26	24	24	29	—	2	—	5	10	—	—	—	—	—	30.14	29.82	29.62	29.81	29.83
MAY	51.73	54.23	49.21	54.64	52.8	1.812	1.520	2.730	5.850	2.915	-.054	-.046	-.088	-.188	-.064	17	10	17	23	20	250.0	233.2	209.9	182.1	137.0	8.07	7.34	6.77	5.87	4.42	29	30	30	29	28	—	—	—	—	—	—	—	—	—	—	29.26	30.13	29.76	*	29.73
JUNE	56.65	57.15	53.56	57.30	59.4	1.121	1.990	4.33	2.090	3.05	-.064	-.014	-.049	-.061	.4	14	10	15	1	246.2	207.9	160.9	180.7	264.2	8.20	6.93	3.61	6.02	8.81	27	28	25	28	30	—	—	—	—	—	—	—	—	—	—	30.23	30.10	30.06	29.86	30.17	
JULY	64.85	57.33	62.32	61.41	62.4	1.990	3.940	2.843	3.990	2.48	-.022	-.127	-.099	-.123	-.08	14	17	16	16	10	247.0	170.9	162.9	141.0	176.3	8.22	5.83	5.31	5.84	5.68	29	27	29	21	30	—	—	—	—	—	—	—	—	—	—	29.84	29.91	29.39	29.80	29.92
AUGUST	59.36	57.29	59.44	58.41	61.0	3.607	2.710	2.820	2.200	2.97	-.141	-.103	-.091	-.169	-.086	23	19	23	23	21	126.8	132.3	171.7	147.1	143.7	4.05	4.56	5.34	4.59	4.14	28	27	27	26	25	—	—	—	—	—	—	—	—	—	—	29.94	29.97	29.81	29.74	29.96
SEPTEMBER	58.11	54.96	55.64	56.87	54.3	1.645	2.760	3.330	3.440	3.715	-.054	-.093	-.118	-.121	-.124	8	16	19	20	21	163.2	96.7	133.0	109.3	127.9	5.51	3.32	3.16	3.65	4.28	30	22	27	23	23	—	—	—	—	—	—	—	—	—	—	30.08	29.97	29.81	29.74	29.55
OCTOBER	56.32	49.23	50.52	51.41	51.9	3.170	3.05	4.360	3.985	3.41	-.102	-.069	-.140	-.129	-.11	12	5	26	15	18	120.0	112.7	99.8	89.4	66.2	3.87	3.36	3.19	2.88	2.16	26	25	23	23	22	—	—	—	—	—	—	—	—	—	—	30.11	30.08	29.56	29.90	29.88
NOVEMBER	41.74	44.83	41.02	46.71	41.7	2.095	2.360	3.830	1.890	3.21	-.069	-.079	-.127	-.063	-.107	12	14	18	17	13	42.6	58.0	67.7	31.1	61.4	1.42	1.93	2.29	1.03	2.11	16	20	20	14	13	5	—	—	—	—	—	—	—	—	—	30.17	30.13	29.60	30.06	29.97
DECEMBER	45.27	44.11	40.92	46.05	38.7	3.725	3.565	4.383	3.010	2.37	-.129	-.115	-.141	-.113	-.076	23	21	22	17	19	8.50	6.2	16.9	33.8	43.7	-.28	-.19	-.34	1.16	1.73	14	8	19	17	16	2	—	2	—	21	—	—	—	—	—	30.07	29.72	29.82	29.85	29.71

\* Barometer being overhauled.

STATE OF NEW YORK

Name of the Corporation	Capital Stock	Surplus	Total
The Bank of New York	10,000,000	2,000,000	12,000,000
The City Bank	8,000,000	1,500,000	9,500,000
The Farmers Loan and Trust	12,000,000	3,000,000	15,000,000
The National City Bank	9,000,000	1,800,000	10,800,000
The Manhattan Company	7,000,000	1,200,000	8,200,000
The Commercial Union Assurance	6,000,000	1,000,000	7,000,000
The Mutual Life Insurance	5,000,000	900,000	5,900,000
The Fire Insurance	4,000,000	700,000	4,700,000
The Marine Insurance	3,000,000	500,000	3,500,000
The Life Insurance	2,000,000	400,000	2,400,000
The Fire and Marine	1,500,000	300,000	1,800,000
The Life and Fire	1,000,000	200,000	1,200,000
The Fire and Life	800,000	160,000	960,000
The Life and Marine	600,000	120,000	720,000

## CENSUS POPULATION.

POPULATION AT CENSUS OF						Inter-censal Variation.
1911			1921			
M.	F.	Total.	M.	F.	Total.	
35,381	43,123	78,504	41,101	49,708	90,809	12,305 (15·7%) Increase.

The increase for the County as a whole was 6·2%.

The excess of Births over Deaths in the 1911—1921 periods was 6,626; the gain by immigration being 5,679.



POPULATION (PRIVATE FAMILIES AND DWELLINGS).

The following figures are an extract from Table 3 of the Census report.

County Boroughs, Municipal Boroughs, Urban Districts, Rural Districts, Wards and Civil Parishes.	Area in Statute Acres (Land and Inland Water).	TOTAL POPULATION.							Private Families and Dwellings (See Definitions following this table).			
		1911		1921			Private Families.	Popula- tion in Private Families.	Struc- turally Separate Dwell- ings occupied.	Rooms occupied.	Rooms per Person.	
		Persons	Persons	Males	Females	Per- sons per Acre.						
		c	d	e	f	g	h	i	j	k	l	
WALLASEY C. B. ...	3,324	78,504	90,809	41,101	49,708	27.3	20,849	18,628	110,768	1.26		
Wards:												
a* No. 1 New Brighton ...	232	6,478	8,422	3,435	4,987	36.3	1,704	1,404	10,026	1.34		
" 2 Upper Brighton ...	141	6,470	7,174	3,070	4,104	50.9	1,740	1,534	10,212	1.43		
" 3 North Liscard ...	179	6,377	6,686	3,017	3,669	37.4	1,568	1,449	9,384	1.48		
" 4 South Liscard ...	91	6,378	6,755	2,971	3,784	74.2	1,637	1,403	8,554	1.27		
" 5 North Egremont ...	89	6,423	6,503	2,898	3,605	73.1	1,595	1,407	8,700	1.34		
" 6 South Egremont ...	92	6,427	6,676	3,001	3,675	72.6	1,656	1,467	8,677	1.31		
" 7 North Seacombe ...	77	7,420	8,005	3,795	4,210	104.0	1,800	1,478	7,348	0.92		
" 8 South Seacombe ...	203	7,223	7,842	3,980	3,862	38.6	1,557	1,409	6,417	0.84		
a* " 9 Somerville ...	230	5,670	7,295	3,547	3,748	31.7	1,628	1,528	8,165	1.15		
a* " 10 Poulton ...	245	4,159	6,132	3,042	3,090	25.0	1,307	1,177	5,999	1.07		
a* " 11 Marlowe ...	226	3,120	4,235	1,872	2,363	18.7	1,020	940	5,216	1.25		
" 12 St. Hilary ...	206	4,774	5,800	2,583	3,217	28.2	1,483	1,364	8,051	1.39		
" 13 Warren ...	440	4,471	5,105	1,970	3,135	11.6	1,207	1,173	9,019	1.84		
a* " 14 Wallasey ...	873	3,114	4,179	1,920	2,259	4.8	947	895	5,000	1.27		

\* Area altered or created during 1911—1921 intercensal period.

a The large increase of population in these wards is attributed partly to the presence of summer visitors and partly to residential development.

## DEFINITIONS.

PRIVATE FAMILY.—Any person or group of persons included in a separate return as being in separate occupation of any premises or part of premises is treated as a separate family for Census purposes, lodgers being so treated only when returned as boarding separately and not otherwise. Private families comprise all such families with the exception of those enumerated in (i) Institutions or (ii) business establishments or boarding houses in which the number of resident trade assistants or resident boarders exceeds the number of members of the employer's or householder's family (including private domestic servants).

STRUCTURALLY SEPARATE DWELLINGS.—A structurally separate dwelling has been defined for the Census as any room or set of rooms, intended or used for habitation, having separate access either to the street or to a common landing or staircase. Thus each flat in a block of flats is a separate unit; a private house which has not been structurally subdivided is similarly a single unit whether occupied by one family or by several families. But where a private house has been subdivided into maisonnettes or portions, each having its front door opening on to the street or on to a common landing or staircase to which visitors have access, then each such portion is treated as a separate unit.

Where an undivided private house is used partly for business or professional purposes, it is treated as occupied by a private family unless the portion used for non-domestic purposes consists of at least three rooms and is more than one quarter of the whole. The dwellings shown in this Table are those occupied by private families only.

ROOMS.—For the purpose of the Census the rooms enumerated are the usual living rooms, including bedrooms and kitchens, but excluding sculleries, landings, lobbies, closets, bathrooms, or any warehouse, office, or shop rooms.

## PRIVATE FAMILIES.

CLASSIFIED BY SIZE OF FAMILY, ROOMS OCCUPIED, AND DENSITY OF POPULATION.

(Extract from Table XI., Census Report, 1921.)

NOTE.—Where more than one family is enumerated within a structurally separate dwelling, each is classified according to the rooms it severally occupies and not to the total number of rooms in the dwelling. If, as occasionally happens, one of the rooms is shared by two families (the allotment to each family being say  $4\frac{1}{2}$  and  $3\frac{1}{2}$  in an 8-roomed dwelling) the families are classified to the next higher integral number of rooms (5 and 4 respectively).

Number of Persons in Family.	Total Private Families.		Population in Private Families.	Rooms occupied.	Average Number of Rooms per Person.
	No.	%			
1 ... ..	1,012	4.9	1,012	3,428	3.39
2 ... ..	3,466	16.6	6,932	15,825	2.28
3 ... ..	4,393	21.1	13,179	22,839	1.73
4 ... ..	4,088	19.6	16,352	22,861	1.40
5 ... ..	3,046	14.6	15,230	17,478	1.15
6 ... ..	2,070	9.9	12,420	12,195	0.98
7 ... ..	1,174	5.6	8,218	6,884	0.84
8 ... ..	735	3.5	5,880	4,120	0.70
9 ... ..	433	2.1	3,897	2,522	0.65
10 ... ..	244	1.2	2,440	1,459	0.60
11 ... ..	100	0.5	1,100	583	0.53
12 ... ..	49	0.2	588	314	0.53
13 ... ..	17	0.1	221	118	0.53
14 ... ..	7	0.0	98	40	0.41
15 and over ...	15	0.1	242	102	0.42
Total Private Families ...	20,849	100.0	—	—	—
Population in Private Families	—	—	87,809	—	—
Rooms occupied ...	—	—	—	110,768	1.26

This table means, for example, that each of 21.1% of the families in Wallasey numbers 3 persons, that the total population of these families is 13,179, and that they occupy 22,839 rooms; and so on.

**POPULATION.**

AGES (QUINQUENNIAL GROUPS) AND MARITAL CONDITION, WALLASEY, C.B.

(Extract from Table 14 of Census Report).

Age last Birthday.	Persons.	Males.					Females.					Percentages.	
		Total.	Single.	Married.	Widowed.	Divorced.	Total.	Single.	Married.	Widowed.	Divorced.	Males.	Females.
All Ages } No. / %	90,809 / —	41,101 / 100.0	22,618 / 55.0	17,245 / 42.0	1,223 / 3.0	15 / 0.0	49,708 / 100.0	26,928 / 54.2	18,069 / 36.4	4,687 / 9.4	24 / 0.0	Sex per centages. / 45.3	54.7
0—4	6,825	3,475	3,475	—	—	—	3,350	3,350	—	—	—	8.5	6.7
5—9	7,912	4,062	4,062	—	—	—	3,850	3,850	—	—	—	9.9	7.7
10—14	8,226	4,103	—	—	—	—	4,123	—	—	—	—	10.0	8.3
15—19	8,339	3,871	6	1	1	—	4,461	4,413	48	—	—	9.4	9.1
20—24	7,581	3,220	380	1	1	—	4,361	3,499	846	15	1	7.8	8.8
25—29	7,308	3,175	1,457	7	1	1	4,133	2,063	2,001	67	2	7.7	8.3
30—34	7,135	3,003	2,191	24	2	2	4,132	1,366	2,600	163	3	7.3	8.3
35—39	7,361	3,190	2,582	52	6	6	4,171	1,114	2,847	207	3	7.8	8.4
40—44	6,920	2,977	2,547	68	2	2	3,943	858	2,787	294	4	7.2	7.9
45—49	6,434	2,921	2,517	89	2	2	3,513	661	2,443	405	4	7.1	7.1
50—54	4,972	2,264	1,930	118	1	1	2,708	549	1,713	446	—	5.5	5.4
55—59	3,840	1,700	1,436	126	1	1	2,140	373	1,206	560	1	4.1	4.3
60—64	2,956	1,211	968	159	—	—	1,745	283	811	647	4	2.9	3.5
65—69	2,209	927	673	200	—	—	1,282	199	436	646	1	3.2	2.6
70—74	1,418	537	332	166	—	—	881	110	215	555	1	1.3	1.8
75—79	909	314	165	131	—	—	595	71	96	428	—	0.8	1.2
80—84	350	110	51	57	—	—	240	36	17	187	—	0.3	0.5
85—89	94	25	10	15	—	—	69	8	3	58	—	0.1	0.1
90—94	15	8	—	8	—	—	7	1	—	6	—	0.0	0.0
95 and over	5	1	—	1	—	—	4	1	—	3	—	0.0	0.0

WALLASEY C.B.

No.	Name	Age	Sex
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	...	...	...

INSTITUTION FOR THE DEAF AND MUTE  
 1880  
 BOARD OF DIRECTORS

## HOUSING.

The following Table is an extract from the Registrar-General's Census Report for the County of Chester.

HOUSING OF PRIVATE FAMILIES, '1921. CHESHIRE ADMINISTRATIVE COUNTY  
(WITH ASSOCIATED COUNTY BOROUGHES).

Urban or rural area.	Percentage of Structurally Separate Dwellings Returned as			Rooms per Dwelling.	Families per Dwelling.	Persons per Family.		Rooms per Person.			Increase or Decrease (—) in Dwellings, 1911-1921.*		Increase or Decrease (—) in Private Families, 1911-1921.		Surplus or Deficiency (—) of Rooms in 1921 on basis of England and Wales Standard, 1911.†		Population living more than 2 Persons to a Room.			
	Private Houses.	Maisonnettes, Flats, Tenements, etc.	Attached to Shops, Offices, Warehouses, etc.			1921.	1921.	1921.	1911.	All Private Families, 1921.	Families in 1-9 rooms.		No.	Per cent.	No.	Per cent.	No.	Percentage of Standard Number.	Population.	
				1921.	1911.	1921.	1911.	1921.	1911.		1921.	1911.							1921.	1911.
Col. a	b	c	d	e	f	g	h	k	l	m	n	o	p	q	r	s	t	u	v	w
Birkenhead C.B. ... ..	89	2	9	5.31	1.18	4.45	4.72	1.01	0.97	1.02	2,057	8.3	4,785	17.9	-7,306	-5.2	17,589	9,929	12.6	7.8
Chester, City and County of, C.B.	93	1	6	5.00	1.05	4.38	4.43	1.08	1.03	1.08	118	1.4	429	5.1	-283	-0.7	4,665	2,998	12.0	8.0
Stockport C.B. ... ..	94	0	6	4.55	1.02	4.00	4.16	1.12	1.11	1.09	1,858	6.6	2,114	7.5	-2,115	-1.6	6,628	5,871	5.5	5.0
Wallasey C.B. ... ..	94	0	6	5.95	1.12	4.21	4.58	1.26	1.23	1.25	2,405	14.7	4,052	24.1	13,177	14.4	4,977	2,543	5.7	3.3
Administrative County and associated County Boroughs	94	0	6	5.12	1.06	4.20	4.41	1.15	1.11	1.13	15,154	7.2	23,578	11.1	26,063	2.5	68,560	47,687	6.9	5.1
Range of Variations { Maximum ...	98	2	11	7.14	1.18	4.95	5.36	1.68	1.52	1.49	—	45.8	—	50.9	—	32.3	—	—	13.3	11.5
{ Minimum ...	89	—	2	4.19	1.00	3.69	3.89	0.87	0.87	0.85	—	-0.6	—	-0.2	—	-8.3	—	—	1.0	0.6

\* Dwellings occupied by private families only were not identified at the 1911 Census and the increase (or decrease) shown here is the increase (or decrease) in total dwellings.

A glance at column (c) shows that in the matter of rooms per dwelling (5.95), Wallasey stands highest among the County Boroughs of Chester. As a matter of fact, there are only four Districts (Urban or Rural) in the whole of the County in which the number of rooms per dwelling is greater than in Wallasey.

The number of families per dwelling (column f) in Wallasey (1.12) is exceeded by Birkenhead (1.18).

As the Registrar-General remarks:—

"For the most direct index of comparative housing, the room density, or average number of rooms per person, will generally be sought as combining in one figure the effect of the variation of size of dwellings in association with the corresponding variation in size of families and number of families per dwelling."

† The standard number of rooms has been obtained by multiplying the population in families of each size by densities (rooms per person) obtained from Table VI. of R.G.'s. Census Returns.

The room density in Wallasey (column k) is 1.26 per person, and is the highest of the County Boroughs. The variation throughout the County ranges from 1.68 to .87, Wallasey occupying 18th place in the 57 districts tabulated by the Registrar-General.

Column (r) is particularly interesting, showing as it does, that in the matter of room density, Wallasey has, on the basis of the England and Wales Standard, 1911, a surplus of 13,177 rooms, or slightly more than half of the surplus for the whole County, viz., 26,063, the percentage standard being + 14.4 and + 2.5 respectively, Wallasey being eighth in the County.

The last column (w), which gives figures in relation to the population living more than two in a room, show that the percentage total of private family population is 5.7 for Wallasey. The figure for the whole of the County is 6.9. Note increase since 1911.

1884

The following table shows the results of the experiments conducted during the year 1884, in connection with the study of the effects of the various factors on the growth of the plants.

No.	Plant	Height	Weight	Remarks
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	...	...	...	...

The results of the experiments show that the growth of the plants is influenced by the various factors mentioned above. The most important factors are the amount of light, the amount of water, and the amount of food. The plants which received the most light and water grew the tallest and the heaviest. The plants which received the least light and water grew the shortest and the lightest. The results of the experiments also show that the growth of the plants is influenced by the amount of food. The plants which received the most food grew the tallest and the heaviest. The plants which received the least food grew the shortest and the lightest.

COUNTY BOROUGH OF WALLACE  
EDUCATION COMMITTEE

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## APPENDIX.

REPORT WITH REGARD TO THE MEDICAL  
INSPECTION OF SCHOOL CHILDREN  
DURING 1925.

ANNUAL REPORT

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MEDICAL INSPECTION OF  
SCHOOL CHILDREN

For the Year 1925



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APPENDIX

REPORT WITH REGARD TO THE MEDICAL  
INSPECTION OF SCHOOL CHILDREN  
DURING 1911

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COUNTY BOROUGH OF WALLASEY  
EDUCATION COMMITTEE.



# ANNUAL REPORT

ON THE

MEDICAL INSPECTION OF  
SCHOOL CHILDREN

For the Year 1925.

**STAFF.**

T. W. NAYLOR BARLOW, O.B.E., M.R.C.S. (Eng.),  
L.R.C.P. (Lond.), D.P.H. (Camb.), of Lincoln's Inn,  
Barrister-at-Law, F.R.S. (Edin.),  
*Medical Officer of Health and School Medical Officer.*

W. WRIGLEY STACEY, M.B., Ch.B., D.P.H.,  
*Assistant Medical Officer of Health and Assistant School  
Medical Officer.*

C. JOINSON LUYA, L.D.S.,  
*School Dentist.*

Miss E. W. NICHOLLS (*Certificate Royal Sanitary Institute*),  
AND  
Mrs. B. CHAPPELLS (*Trained Nurse*),  
*School Nurses.*

Miss M. OGLE,  
(*Certificates Chartered Society of Massage and Medical  
Gymnastics, Diploma Liverpool University in Massage, etc.*),  
*Masseuse.*

H. R. BICKERTON, B.A., M.B., Ch.B., M.R.C.S., L.R.C.P.  
(*Eyes*);  
C. YORKE, M.D., Ch.B., B.S., F.R.C.S. (*Tonsils and  
Adenoids*).  
T. HARTLEY MARTIN, M.B., Ch.B. (*Orthopædic*);  
*Visiting Specialists.*

G. E. HUGHES, Education Office (*Secondary Schools*),  
R. L. BASCOMBE, Education Office (*Elementary Schools*),  
*Clerical Assistants.*

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**SCHOOL ACCOMMODATION.**

*ELEMENTARY EDUCATION.*

The accommodation at the Council Schools is for 8,154 scholars, and in the non-provided Schools is 3,315, or a total of 11,469.

*HIGHER EDUCATION.*

NAME	ACCOMMODATION.
WALLASEY GRAMMAR SCHOOL ... ..	540
WALLASEY HIGH SCHOOL FOR GIRLS ... ..	525
OLDERSHAW SCHOOL FOR BOYS ... ..	360
OLDERSHAW SCHOOL FOR GIRLS ... ..	360

TOWN HALL, WALLASEY,

April, 1926.

To the CHAIRMAN and MEMBERS  
of the EDUCATION COMMITTEE.

LADIES AND GENTLEMEN,

I beg to submit the Annual Report for the year 1925 on the Medical Inspection of Children in the Elementary and Secondary Schools.

In it is included a report by Dr. T. Hartley Martin on the Orthopædics work, and one from Mr. C. Joinson Luya, the School Dentist. Dr. W. Wrigley Stacey, the Assistant School Medical Officer, is mainly responsible for the other portions of the Report, and the comments are largely his.

From a preventive point of view it would be difficult to exaggerate the importance of the work of School Medical Inspection. Not the least of the benefits following upon its institution has been the educative effect, not only on the children, but on the parents. It has been the means of bringing pointedly to the notice of both the value of good health, and has enlightened them to a very considerable extent as to how to maintain it.

As in former years, the bulk of the cases attending the Minor Ailments Clinic have been suffering from skin troubles due, in the main, to uncleanliness, faulty conditions, and lack of control of the children at home; the children from some families are almost continuously in attendance at the Clinic. There has been a considerable decrease in the number of cases of Ringworm and Scabies.

The arrangements for the treatment of eyes are eminently satisfactory. The same comment might be made with regard to Tonsils and Adenoids, but the lack of an Ear Specialist has often been felt, and in the near future the Committee might take into consideration the question of appointing one. I may remark, also, that there is more dental work required to be done than one man can possibly get through, and when considering developments, the question of appointing another Dentist should not be lost sight of. The importance of the satisfactory condition of the teeth in promoting and maintaining good health need hardly be stressed in these days, and although Dentists were at one time looked upon with fear and trembling, and, moreover, as something of a luxury, a different point of view now prevails.

The work in the Orthopædic Department is developing satisfactorily.

In conclusion, I have to acknowledge, as heretofore, the kind consideration which the Chairman and the Committee have invariably given to any recommendations made to them. The spirit of co-operation is a marked feature of the School welfare work in Wallasey, and I should like to express my hearty thanks to the whole of the Staff for the admirable work which they have done, and, in addition to the Staff, I must not fail to acknowledge with thankfulness the assistance of the Director of Education and the Teachers in the Schools.

I am,

Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

T. W. N. BARLOW,

*School Medical Officer.*

## GENERAL.

It is the expressed desire of the Board of Education that a much more detailed account of the work done, and on various matters connected with the work, be submitted to them this year. Opportunity is therefore taken to enlighten those who do not know, and a remembrancer to those who do, of the procedure adopted in Medical Inspection.

The Board's schedule of medical inspection has been followed, and children are medically examined at the following age groups.

ADMISSIONS	...	...	...	Ages 4 to 6.
INTERMEDIATES	...	...	...	Ages 8 to 9.
LEAVERS	...	...	...	Ages 12 to 13.

This applies to the Elementary Schools. In the Secondary Schools all admissions are examined, and thereafter from the age of 12 years an annual inspection of each scholar is made until the leaving age of 16 years.

Each department of each School notifies the Education Office of the number of children of each age group and sex who are due for medical inspection. The parent of each child is then notified of the day and hour when the inspection will take place, with a request that the presence of one or both parents at the inspection would be greatly appreciated. About 70 per cent. of parents attend these inspections. Twenty children are examined at each session (morning and afternoon) and five are taken each half-hour, thus allowing six minutes for each child. Five parents are notified for each half-hour. This is an innovation of two years' standing, and was instituted firstly to avoid wasting a parent's time, and secondly to prevent, so far as possible, interference with the school routine. This method has been successful, and greatly appreciated by the parents.

Any absentee from such inspection is placed on the list for the next visit of the doctor to that department.

This work is done entirely from the Education Office.

### Co-ordination.

The Medical Staff consists of :

- (1) The M.O.H., who is also Administrative Tuberculosis Officer, Schools Medical Officer and Child Welfare Medical Officer. The importance of these appointments being invested in the M.O.H. cannot be sufficiently stressed, as it is through him alone that efficiency and progress can be made; unless this procedure is adopted there is a danger of the establishment of so-called water-tight compartments (an impossibility in actual practice), which constitute a deterring factor in the smooth running of every-day work.
- (2) The Assistant M.O.H. is the Medical Inspector at the Schools, and attends the Child Welfare Clinic.
- (3) The Tuberculosis Officer has charge of a Nutrition Clinic, which is of great assistance to the Schools.
- (4) The Orthopædic Surgeon who has charge of all crippling defects.
- (5) The Eye Specialist, who is responsible for the correction of errors of refraction, and who gives advice on the difficult eye affections which from time to time are under treatment at the Minor Ailment Clinic.
- (6) The Dental Surgeon.
- (7) Two School Nurses, and one Masseuse.

At the School Clinic provision has been made for the treatment of Minor Ailments, Orthopædic, Dental and Eye cases, and has the great advantage of being entirely self-contained, and entirely clinical.

The Nutrition Clinic is held at the Dispensary, for knowing that Malnutrition is the precursor of Tuberculosis, it is best to be in the hands of the Tuberculosis Officer.

The Assistant Medical Officer attends the School Clinic daily, and having attended as many cases as is possible in the allotted time, he is accompanied by one of the School Nurses to the School under inspection. The other nurse remains at the Clinic to attend the patients, and carry out the Doctor's instructions as regards treatment of their ailments. Any case presenting itself after the Doctor's departure, is seen by him the next morning. Each nurse attends her own schools, and in the afternoons when not engaged in Medical Inspection is either doing a cleansing survey, or visiting on the district.

At the Inspection, all children who are in need of treatment are reported to the office, or the Clinic as the case requires. All cases requiring observation are entered on a card, which is retained at the Clinic until the next inspection at the same School, when the children are again inspected, as re-examinations, and progress or otherwise entered on each observation card. The treatment cases whose parents have not been present at the inspection, are made the object of special visits by the nurse, who conveys the Doctor's opinion of the case, and the procedure to be adopted.

At these Inspections the teachers are encouraged to bring forward all children about whom they are anxious, either on physical or mental grounds, and if they cannot be dealt with on the School premises, arrangements are made to suit the parents' convenience for them to see the Doctor at the School Clinic.

At the conclusion of the Inspection, the medical cards are sent to the office for statistical purposes, and from which the various tables embodied in the Annual Report are compiled, after which the cards are returned to their respective Schools, there filed until the next examination of these children is due—when the whole process aforementioned is repeated.

Such in brief is the machinery of the School medical service, and it should not be difficult for any person on reflection to see what a powerful means of improving the health of the rising generation it is.

The various Clinics being established in one building enables the Clinical Medical Officer to immediately put into operation any form of treatment that may be necessary, without undue delay, and without the customary interdepartmental clerical work.

The S.M.O. being the M.O.H. further strengthens his position as the centre of the Public Health circle, and brings the health of the School child into the health of the community of which the child is surely an integral part, not an isolated unit.

There are no Nursery Schools in Wallasey. Debilitated children under School age are supervised by the Health Visitors, and, when necessary, are put by them in touch with charitable organisations. Suitable cases are referred to the Nutrition Clinic held at Mill Lane Dispensary.

Arrangements are made in every School in case of necessity for warming dinners.





## MEDICAL TREATMENT.

### Cleanliness.

It is very rare that the Medical Inspections reveal glaring cases of uncleanness. I believe that even the worst offenders rise to this occasion, showing they have not lost that self-respect without which life would be dreadful to contemplate. It is on the surprise visits, or Cleansing Surveys, that practically all the offenders are caught, and I believe I am justified in saying that the more the Cleansing Surveys the cleaner the children and the less the number of bad cases found. 17,100 children were examined and re-examined, and 671 were found unclean (3.9 per cent.). Last year 21,438 children were examined and 771 found unclean (3.5 per cent.). The number of Cleansing Surveys held was 84, and special visits to Schools 237. Visits to the homes by the School Nurses in connection with uncleanness were 715. 9 children were excluded for pediculosis of the head and 2 for pediculosis of the body. In no case was it necessary to report to the National Society for the Prevention of Cruelty to Children. A large number of these uncleanly children belong to a small group of families, and perhaps a distant view of the Inspector may light up the flickering embers of a dying conscience in the parents, and spur it on to renewed efforts to maintain a certain standard of cleanliness, thereby avoiding a more personal interview with him and the authorities.

### Minor Ailments.

The new cases seen at the Minor Ailment Clinic during the year were 870. Of these 65 were of such a nature as required treatment elsewhere; the remainder were cured at the Clinic and necessitated 4,723 dressings. The bulk of the cases were skin ailments, *e.g.*, impetigo, septic conditions, and ringworms. For comparison I show the following table:—

	Year 1925	1924	1923	1922	1921
Ringworm (Body and Scalp)	59	84	101	119	113
Impetigo . . . . .	192	138	72	89	151
Other Skin Affections . . . . .	273	285	286	358	374

My experience of Ringworm treatment is that no single method is equally applicable to all cases; and it has been my misfortune when feeling buoyed with some new method to find some cases which do not react to that particular method, consequently cases are dealt with on their merit. The utmost precaution is taken to prevent infection of other children, and as the figures show, with a fair degree of success.

Impetigo and septic conditions of the skin, are bound to occur so long as children are children: their exuberant spirits must have an outlet, and some being more prone to fall than others, broken knees and knuckles and scarred faces must result, but for the most part they are soon healed, especially those who attend the Clinic as soon as the injury is done, and no material loss of School time results.

### Diseases of the Ear.

Forty-nine cases of Otorrhœa attended for treatment, many of these were cases which had received treatment previously, and discharged as temporarily cured. Enquiry into the cause of this condition led us no further in the problem, than what is already known—Measles (very rarely Scarlet Fever nowadays), severe Catarrhal conditons, *e.g.*, Influenza colds, and Pneumonia, were each given as the commencement of Otorrhœa. In many cases the condition arose when the child began teething, and no doubt is merely a coincidence just as Bronchitis and Diarrhœa are so often associated with teething; there is no doubt of the fact that frequent catarrh of the mucous membrane (adenoid tissue) of the nasopharynx plays a most important part in the onset of otorrhœa, and the remarks made under the heading of Tonsils and Adenoids are equally applicable here. Keep the nose clean—flood it with fresh air—and blow each nostril separately, so as not to force infective material down the Eustachian Tube; and many cases may escape this disease, with its physical defect—deafness.

### Eyes.

During the year 410 cases of defective vision were dealt with at the Clinic. 363 were from the Elementary Schools, and 47 from the Secondary Schools: of these 275 Elementary School children, and 47 Secondary School children were provided with the prescribed glasses under the Local Education Authority's scheme—eight received other forms of treatment, and 80 Elementary and four Secondary children were considered to require no treatment.

The chief defects were:

Compound Hypermetropic Astigmatism	...	89
Simple Myopia	... ..	63
Compound Myopic Astigmatism	... ..	49
Hypermetropia	... ..	37

Eleven operations for Strabismus (squint) were performed at the Central Hospital this year, as against five operations last year.

In cases of squint, it is of great importance that the lazy eye (squint) should be made to do a certain amount of work, and to ensure this branch of treatment being carried out, eye shades are given to each infant department, with full directions as to their use, for the infants suffering from this disease.

#### Treatment of Defects of Nose and Throat.

The Tonsils and Adenoids Clinic was inaugurated, November, 1920, and at the end of December, 1925, 339 children had received operative treatment. The majority of these (249) took place in 1920 and 1921. The number of cases undergoing operation at each session was 12; the average yearly number of cases referred for treatment is 25. When the waiting list of 235 cases had been worked off, it followed that two sessions a year would be the limit of utilising this Clinic. This meant that some children would have a considerable time to wait until they could receive the necessary treatment, consequently the original scheme had to be altered to the requirements, and with the sanction of the Board each case is now sent to the Central Hospital, receiving operative treatment not later than a fortnight from the time the parent is advised as to the child's condition.

In the Annual Report of 1923 there is an account of an investigation into the results which followed the operation for enucleation of tonsils and removal of adenoid tissue. 251 cases were enquired into, and 33 per cent. of them occurred in the 6-7th year. A similar prevalence at this year period has been noticed by other investigators, and operative measures have been advocated by some at a much earlier period.

It must not be thought that this is the whole line of treatment, indeed it is but a very small part of it, for great as the immediate result of the operation is, and it undoubtedly is, unless efficient *after* treatment is carried out, the adenoidal condition tends to and does recur. This after-treatment consists of keeping the nasal passages clean, and to ensure proper breathing. This treatment has had excellent results in many of the border-line cases, and has probably rendered the operation unnecessary.

Parents should be taught that in infancy the cleansing of the infant's nose is essential; the "dummy teat" should not be used; and with the advent of the teeth the abolition of pap food and the substitution of hard foods exercises the jaws and widens the mouth, and consequently the nasal passages, thus ensuring the means for correct and proper breathing. These lessons should also be impressed upon the children later, when they can understand the great importance of cleaning each nostril separately,

and when cleansed of its mucus, to breathe through it. I feel sure if these methods were adopted by parent and child, one would hear considerably less of "Adenoids."

(3) SCHOOL HYGIENE.

With the exception of the following Schools:—

St. Paul's.	} Which are definitely condemned
St. Mary's.	
Magazine Lane.	
Egerton Street.	

The Schools are in good condition generally. A few observations could be made, such as—

(1) In one School the lighting is poor with regard to the Scholars, being either in front or behind them, whilst at work, but quite sufficient in amount, *i.e.*, sufficient window area for height of room and floor space (St. Joseph's).

(2) Though throughout the Schools central heating is the rule, fireplaces are also in use in some Schools, *e.g.*, Central School (thus pointing to the inadequacy of the boiler). It appears that whilst the rooms nearest the source of heat are in excess of usual temperatures, the more distant classrooms are much below the recognised temperature, say, about 56 deg., and at times must have recourse to ordinary fires.

There are no special arrangements made in any School for drying clothes; they dry according to their means. No child is allowed to sit in wet clothes.

Arrangements are made in every School, in case of necessity, for warming dinners.

During the year there have been 25 operations for T. and A.

Age.	Boys.	Girls.
5    ...    ...	—    ...    ...	2
6    ...    ...	5    ...    ...	2
7    ...    ...	2    ...    ...	2
8    ...    ...	3    ...    ...	1
9    ...    ...	1    ...    ...	0
10    ...    ...	0    ...    ...	1
11    ...    ...	0    ...    ...	1
12    ...    ...	1    ...    ...	2
13    ...    ...	0    ...    ...	2
	—	—
	12	13

Of these—

I boy aged 7 years	was detained in hospital	1 night.
1 girl „ 11	„ „ „ „ „	2 nights.
1 girl „ 13	„ „ „ „ „	1 night.

17 cases occurred during the 5 to 8-year period, and once more the importance of Nasal Hygiene must be emphasised.

During the year 1925, 149 children have been examined for employment.

	Boys.	Girls.
Newspapers	74 ...	17
Milk ...	57 ...	1

And 16 theatrical licences granted.

#### Classes for Stammerers.

Special classes for the treatment of stammerers were first established in Wallasey in October, 1920. Three classes were formed, two for boys and one for girls, the number of children in each class being about fifteen. The work has throughout been done by Miss Hilda Beer, L.R.A.M., who is specially qualified, and holds the diploma for speech training. The classes have been regularly visited by the Assistant School Medical Officer, and no children have been discharged as cured until he has issued medical certificates recording their fitness for discharge.

Since the opening of the classes in 1920, 133 children (79 boys and 54 girls) have received treatment, and 32 of these (16 boys and 16 girls) have been discharged as cured.

In most cases the improvement is great, only a very few children appear to derive little benefit from the classes. At present 41 children (30 boys and 11 girls) are in attendance.

It is highly satisfactory that every case of severe stammering reported from the Schools has either received or is now receiving treatment. The chief difficulty is the fact that many boys and girls leave School before their treatment is completed. They leave at the end of the term in which they reach the age of 14, and when they leave School their treatment ceases. If they were to continue the exercises prescribed by the teacher according to the instructions given to them before leaving, their cure might be assured; but many of them are unlikely to do so, and thus much of the benefit they have derived will be lost. As stated in last year's report, the success of the treatment depends very much upon the parents, who should ascertain what is required, and give all possible encouragement and assistance to their children in carrying out the teacher's instructions.

### **Co-operation of Voluntary Bodies.**

The Wallasey Invalid Children's Aid Association give milk to mal-nutritified children.

The local branch of the N.S.P.C.C. also co-operates in making parents provide proper treatment for their children, and in bringing indifferent parents up to a proper appreciation of their responsibilities.

### **Following-up.**

Very complete arrangements have been made for the following up of children suffering from physical defects. (See "Orthopædics Scheme.")

### **Infectious Disease.**

The means taken to detect and prevent the spread of infectious diseases in the Schools are those which have been adopted for many years past. The teachers exclude any ailing child, and forward the name to the Health Office. The case is then visited by one of the Health Visitors, and on her report, suitable action is taken, both as regards treatment and exclusion from School, together with the exclusion of other members of the family when necessary. In the event of there being an abnormal number of cases of any particular disease in a class or School, individual Scholars of the class or department are examined by the School Medical Officer.

### **DENTAL CLINIC.**

The following is the report of the School Dentist on the work carried out during the year 1925.

The figures indicating the amount of work carried out only differ from those of previous years in a slight degree, but in one or two cases the differences are worthy of comment, particularly in the case of the number of half-days devoted to inspection in Schools. These show an increase of time spent on inspection of well over 50 per cent. This increase is due to several causes. The number of cases to be inspected in each School has been steadily increasing since 1920, and will not reach its maximum amount until 1927, in which year I will be liable to examine the maximum number of children possible under the present system. During 1924 I found that, in my effort to devote time to treatment rather than examination, I was being compelled to hurry the examinations in rather an undesirable manner, and therefore during 1925 I decided to spend more time on the examination.

The examination of the earlier age groups (6-8) who have not been treated previously is fairly simple, as my own system in such cases is to divide them into those requiring treatment, and those not, without going into details, as with these children it is always necessary to explain details to the parents, and it is as well to enter the details of treatment on the dental cards at the same time. I have introduced, in connection with these cases particularly, and with the others generally, a new system which seems to be giving excellent results. I take to the Schools a number of the notes (copies of which I include with the report) and address them to the parents of children to whom they apply, and request the children to deliver them to the parents when they get home from School. I have always thought that the parents would pay more attention to the notices they receive requesting them to attend the Clinic, if they knew exactly why they were sent out, and the results have fully borne out that view. Practically every case to which such a notice has been sent has attended. The filling in and addressing of these notices during the examination, however, takes up a considerable time, though I must say I think it is time well spent. The largest amount of time is taken up in examining cases which have been examined and treated in previous years, and these are the cases which increase in number every year, and will continue to do so until 1927—for instance in Riverside School the number of re-examination cases has increased as follow:—

1920	...	0	1923	...	223
1921	...	2	1924	...	332
1922	...	81	1925	...	384

The examination in detail and charting of nearly four hundred mouths takes some considerable time. I had hoped to make a complete circuit of examination and treatment of all Schools during the year, but this I found was not possible, Somerville School having been only partly examined and treated, whilst Manor Road School had to be left until early the following year. I am inclined to doubt the possibility of making a complete circuit of the Schools in less than eighteen months, when the maximum number of children is liable to examination and treatment. The number of half-days devoted to treatment during the year was less than in previous years owing to this fact, but I am glad to state that the attendance at the Clinic was slightly greater than the previous year, and the number of fillings carried out was also increased. A curious fact that has struck me is that as I am dealing with older children (say over 10) a certain drop in attendance is apparently due to the fact that, under that age, parents who wish a child to receive dental attention will bring it along willy nilly, but that

as they grow older, if the child objects, the parents are unable or unwilling to persuade it to attend. It is a matter of technical interest that for the fillings I am carrying out, I have dropped the use of what is known as copper amalgam, as I found its results are not permanent enough, and have reverted to a good silver amalgam. The clerical work at the Clinic has little by little become very large, particularly now that the Clinic is fee-paying. It has now become quite out of the question for the services of the dental clerk to be dispensed with—indeed the absence of the clerk unwell even for a day leaves me in a most hopeless muddle. During the last two years I have been slowly coming to the conclusion that the use of a local anæsthetic for extractions needed supplementing on occasions by the use of a general anæsthetic. An anæsthetist has now been appointed, and will attend once a month during the year. I feel certain myself that at the end of the year his services will be needed more often than that, as I find that parents are often most anxious, when a number of extractions need doing, to have them done all at once under a general anæsthetic. I have been compelled on many occasions during the last year to advise parents that it would be more satisfactory to take children to a local private Dentist for the purpose of having a general anæsthetic, which I have been unable to administer, and though this is quite satisfactory when they can afford the fee, it was most awkward when that was not possible. Any arrangement whereby an X-ray photograph could be done at the Victoria Central Hospital would be most welcome. They are not often necessary, but when they are, it is usually an urgent case. I would like to mention one or two facts in connection with the actual handling of children and parents at the dental Clinic, at the risk of repeating previous reports. Parents refusing treatment for children and parents stating they are arranging for private treatment are followed up to a certain extent by the School nurses, but no effort is made to coerce those refusing treatment. Personally, I think it a great mistake to attempt to treat children whose parents are at all unwilling, and indeed I am careful to avoid doing so. The results of a piece of misfortune in attending such a case would be most unpleasant for everybody concerned, and even in dental surgery such things can happen—for instance if a child should happen to be a hæmophilic, unknown to everybody, and the fact only discovered by the extraction of a tooth at the Clinic. Peaceful persuasion and gradual education of parents who attend the Clinic with children gives much the best results, as I have found. I encourage parents to attend the Clinic with their children (many dental Clinics refuse to allow the parents to be present) especially in cases where I think there is liability of anything out of the normal (for example a nasty extraction).



I refuse to attend to the child until I have seen a parent and explained the matter; but in the event of their attending the Clinic and not wishing to be present in the surgery when treatment is being carried out, in that case I raise no objection to their retiring to the waiting-room after I have had a talk with them. I conclude my Report this year with a brief *resumé* of the manner in which dental examination and treatment is carried out at the Wallasey Clinic:—

- (1) Education Office notifies Head Teachers of a School that Dentist will visit and examine on given date.
- (2) Dental charts are forwarded to School in question, where they are sorted and distributed to children.
- (3) Children are examined one by one, each child handing in its card, which is marked and retained by the Dentist.
- (4) Cards are taken back to Clinic, where they are sorted into those requiring treatment and those not.
- (5) Lists of appointments are made at Clinic for given dates and times, and forwarded to Education Office.
- (6) Education Office notifies parents of children and also heads of School concerned.
- (7) Education Office returns list of appointments to Dental Clinic with cases marked "Fee to be paid," or "Free case."
- (8) Children attend Clinic and receive attention.
- (9) Particulars of treatment are entered in register, with time of arrival and departure at Clinic of child.
- (10) Particulars of fee paid are entered in special register.
- (11) Parent or child is given receipt (if fee paid) and small card for School, showing time of arrival and departure at Clinic.
- (12) Fresh appointment made for such cases as cannot be completed in one visit.

I have the honour to remain,

Your obedient Servant,

C. JOINSON LUYA, L.D.S.

(B.)

WALLASEY EDUCATION COMMITTEE.

SCHOOL CLINIC,  
55, CHURCH STREET, WALLASEY,

.....192...

DEAR MADAM,

I have to-day inspected the teeth of your child.....  
and find.....of the second teeth beginning to decay.  
Immediate treatment will preserve these teeth and prevent the  
need of their future extraction.

An appointment to carry out the necessary dental treatment  
will be made shortly, and you will be notified of the date and  
time in advance, in order that you may, if you wish, accompany  
the child to the School Clinic.

Yours faithfully,

\_\_\_\_\_  
School Dental Surgeon.

(C.)

WALLASEY EDUCATION COMMITTEE.

SCHOOL CLINIC,  
55, CHURCH STREET, WALLASEY,

.....192...

DEAR MADAM,

I have to-day inspected the teeth of your child.....  
and find one tooth is badly abscessed. This condition is very  
bad for the general health, and also tends to spoil the other  
teeth.

An appointment to carry out the necessary dental treatment  
will be made shortly, and you will be notified of the date and  
time in advance, in order that you may, if you wish, accompany  
the child to the School Clinic.

Yours faithfully,

\_\_\_\_\_  
School Dental Surgeon.

### Open-Air Education.

In considering the provision of facilities for open-air education in Wallasey, it is important to remember that Wallasey is very well provided with open spaces, public parks, and recreation grounds amounting to a total area of 176 acres, and in addition there is a wide expanse of seashore available for children's recreation.

- (1) Playground Classes.—When the weather permits, full advantage is taken of the School playgrounds for class teaching.
- (2) School journeys in connection with Nature lessons, outdoor sketching, etc., are organised by Head Teachers according to their individual requirements.
- (3) School Camps have not been found necessary.
- (4) Open-air Classrooms.—In our modern Schools many classroom doors open on to the playground, and windows and doors are arranged so as to secure open-air conditions as far as possible.
- (5 & 6) Arrangements are in hand for establishing an Open-air School for delicate children in one of our newly-acquired spaces.

### Physical Training.

The Syllabus of Physical Training for Schools, issued by the Board of Education in 1919, forms an integral part of the curriculum of every School under the Authority. In the autumn of 1924, a Refresher Course of Instruction in Physical Training was organised for the teachers, and has had excellent results. The Board of Education's suggestions in regard to games have also been adopted in every School.

### Provision of Meals.

During the year 1925-26 the number of meals supplied to children attending School were 15,411. The dietaries are supervised and approved by the School Medical Officer.

Suitable and adequate arrangements are made for preparing and serving the meals, and for the supervision of the children during meal-times.

### School Baths.

The provision of School Baths has not yet been considered necessary, but facilities are granted to the School children at the Public Baths.

The number of children's attendances at the swimming classes during the year ending October, 1925, was 13,052 by the boys and 12,411 by the girls.

In 1925 a Course of Instruction in Swimming and Life-saving was organised for the teachers.

### **Blind, Deaf, Defective, and Epileptic Children.**

Cases are reported (1) by the Head Teachers, (2) by the Attendance Officers engaged in house-to-house visitation for census work.

Each case is specially examined by the School Medical Officer and by a member of the staff of the Director of Education, who report whether the child is fit for (1) an Elementary School, (2) a special class for dull and backward children (3) a special School—day or residential—or whether it is unsuitable for a special School.

All uneducable cases are reported to the Committee for the Care of the Mentally Defective.

The Special School for Physically Defective Children has at present 15 children on roll—8 girls and 7 boys.

### **ORTHOPÆDIC CLINIC.**

The following is Dr. T. Hartley Martin's report on the working of the Wallasey Orthopædic Clinic during the past 12 months.

Once-monthly Clinics have been held, and once-weekly attendances have been made by the After-care Sister. 74 new cases have been referred for examination, and 330 re-examinations of old cases have been made. These figures analysed according to the age of the child are :—

NEW CASES.	Under School Age.	Of School Age.	Over School Age.
Non-Tuberculous ...	29	30	2
Tuberculous ... ..	2	9	1
RE-EXAMINATIONS.			
Non-Tuberculous ...	77	198	10
Tuberculous ... ..	3	35	7

The following table shows the number of new cases referred year by year for examination, classified according to disease categories :—

	1921	1922	1923	1924	1925
Infantile Paralysis ... ..	19	9	6	6	9
Spastic Paralysis ... ..	1	3	6	5	5
Rickets ... ..	6	2	4	14	16
T. B. Arthritis and Osteitis.	15	8	14	9	12
Non-T.B. „ „ ... ..	—	—	—	—	4
Deformities—Congenital ...	2	1	4	5	4
„ Acquired ... ..	4	1	4	11	15
Diagnosis ... ..	—	—	2	9	8
Totals ... ..	47	24	40	59	73

The numbers on the register at the end of 1925, are:—

	Under School Age.	Of School Age.	Over School Age.	Totals.	Disch. in 1925.
Infantile Paralysis ... ..	2	22	1	25	4
Spastics ... ..	—	14	1	15	2
Rickets ... ..	23	3	1	27	7
Tuberculous—					
Osteitis and Arthritis	3	9	—	12	20
Non-T.B. „ „ ... ..	—	7	1	8	1
Deformities—					
Congenital ... ..	3	9	—	12	1
Acquired ... ..	1	17	1	19	9
Diagnosis ... ..	1	2	—	3	11
Totals ... ..	33	83	5	121	55

Of the 177 cases who have been on the attendance register during the past year 15 only were admitted to hospital. The cases were:—

Infantile Paralysis ... ..	1
Rickets ... ..	8
Congenital deformities... ..	3
Acquired deformities ... ..	2
Arthritis—Non-T.B. ... ..	1

The total number of days spent in hospital by these cases was 211. One case stayed 99 days, the average duration of stay of the remaining 14 was eight days.

The opening of the workshops at Leasowe has greatly facilitated the work of the Clinic. Such splints, appliances and boots, or such alterations and repairs to same as are required can now be provided more cheaply and much more expeditiously than was formerly the case to the advantage of all concerned.

The action of the Education Committee in undertaking the enquiry into the ability of parents to pay for such requirements, and in giving assistance to those parents unable to pay, has been an excellent step, and the work in the Clinic is greatly assisted by this procedure.

The action of the Health Committee in allowing certain cases of rickets to be admitted to the hospital at Mill Lane has been helpful, and it is felt that if a "light department" could be provided at this hospital it would be of much benefit to this type of case, and could also be utilised for all cases of rickets whether they required in-patient treatment or not.

It is necessary that some indication should be given of the results achieved, and the following table, though complicated, will give some idea of the numbers of cases which are discharged from the Clinic year by year, with the reasons for their discharge:—

Diagnosis.		Condition on discharge.					
		Cured.	Relieved.	Over age. Relieved.	Over age, requiring further treatment.	Left district.	Died.
Infantile Paralysis ... ..	1921, 22, 23	7	—	—	—	1	—
	1924	1	1	—	—	1	—
	1925	—	2	1	—	1	—
Spastic Paralysis ... ..	1921, 22, 23	—	—	—	—	1	—
	1924	—	—	—	1	1	1
	1925	—	—	—	—	1	—
Rickets ... ..	1921, 22, 23	6	—	—	—	—	—
	1924	1	—	—	1	1	—
	1925	7	—	—	—	—	—
T.B. Osteitis & Arthritis ...	1921, 22, 23	8	—	—	—	1	1
	1924	6	—	—	—	—	1
	1925	7	—	—	1	1	1
Non-T.B. do. do. ... ..	1921, 22, 23	—	—	—	—	—	—
	1924	1	—	—	—	—	—
	1925	1	—	—	—	—	—
Deformities—Congenital ...	1921, 22, 23	2	—	—	—	—	—
	1924	—	—	—	—	—	—
	1925	—	—	1	—	—	—
Deformities—Acquired ...	1921, 22, 23	4	—	—	—	—	—
	1924	2	—	—	—	—	—
	1925	8	1	—	—	—	—
Totals ... ..		61	4	2	3	9	4

The term "relieved" is used when it is felt that a "cure" cannot be claimed.

In addition to the above, 12 cases in 1924 and 10 cases in 1925 of Non-Osseous Non-Pulmonary Tuberculosis were discharged to the Tuberculosis Officer for after-care. Also, three cases in 1924 and 11 cases in 1925 were discharged after being kept under observation—no lesion being found.

The work of the Massage and Remedial Exercise Department still continues to be of great help, and the demands are still greater than can be met. 88 cases have been on the massage register during the year, and 3,308 attendances have been made for treatment by these cases.

In 36 of the above 88 the treatment has been terminated because of success having been achieved, but 47 new cases were referred for treatment during the year.

A need has been felt for accessory treatment in this department in the form of Radiant Heat, especially in cases of Infantile Paralysis, and it is urged that two Murray Levick (incandescent filament) lamps would greatly facilitate the work of this department (cost £5 15s. 0d. each).

The co-operation of the Wallasey Invalid Children's Association continues to be of great help in the work of the Clinic. Cases requiring extra nourishment, tonics, and cod liver oil are referred to them, and their assistance is often sought in securing short periods of treatment in convalescent homes.

It can safely be said that the Orthopædic Scheme is now working satisfactorily, and that the three essentials to success are provided, viz. : early ascertainment, early and continuous treatment, and continued after-care. In ascertainment the members of the medical profession have begun to co-operate, and the work of the Child Welfare Department, the School Medical Service, and the Health Department, continues to be of the greatest assistance.

Early ascertainment enables early diagnosis, and early treatment to be undertaken either at the Clinic or in hospital, and since the former provides the necessary massage and remedial exercise treatment, and the latter is used for plaster work and for radiographical examination in addition to in-patient treatment, and can now provide the necessary splints, appliances and boots, nothing is lacking to secure efficient treatment.

After-care is provided through the After-care Sister who regularly inspects all boots and appliances worn, and who instructs parents in the correct methods of using them. The anxious parents are thus helped in their desire to secure treatment for their children, and the dilatory parent is encouraged to persevere with what is known to be necessary to secure relief for their children.

The success of the Orthopædic Scheme is assured if these essentials can be maintained.

T. HARTLEY MARTIN,

M.B., Ch.B.



## WALLASEY EDUCATION COMMITTEE.

MEDICAL INSPECTION, 1925.Elementary Schools.

TABLE I.

RETURN OF MEDICAL INSPECTIONS.(A) ROUTINE MEDICAL INSPECTIONS.

NUMBER OF CODE GROUP INSPECTIONS	...	...	...	197
ENTRANTS	...	...	...	1440
INTERMEDIATES	...	...	...	909
LEAVERS	...	...	...	769
			TOTAL	3118
				<u>3118</u>
NUMBER OF OTHER ROUTINE INSPECTIONS...	...	...	...	—

(B) OTHER INSPECTIONS.

NUMBER OF SPECIAL INSPECTIONS—BOYS	...	...	158	
.. .. GIRLS	...	...	209	
			<u>367</u>	
.. REINSPECTIONS	...	...	485	
			<u>485</u>	
			TOTAL	852
				<u>852</u>

\*Does not include employment cases.

TABLE II.

(A) RETURN OF DEFECTS FOUND IN THE COURSE OF MEDICAL INSPECTION, Year Ended December 31st, 1925.

Defect or Disease.	Routine Inspections.		Specials.	
	Number referred for Treatment.	Number requiring to be kept under observation.	Number referred for Treatment.	Number requiring to be kept under observation.
MALNUTRITION ... ..	—	1	3	—
UNCLEANLINESS— See Table IV., Group V.				
SKIN—				
Ringworm—Scalp ... ..	11	—	4	—
Body ... ..	—	—	1	—
Scabies ... ..	—	—	1	—
Impetigo ... ..	14	2	6	1
Other Diseases (Non-Tubercular) ... ..	17	7	15	—
EYE—				
Blepharitis ... ..	9	2	1	—
Conjunctivitis ... ..	2	—	3	—
Keratitis ... ..	—	—	—	—
Corneal Ulcer ... ..	—	—	1	—
Corneal Opacities ... ..	1	1	—	—
Defective Vision ... ..	139	160	228	2
Squint ... ..	24	9	11	—
Other conditions ... ..	4	—	4	3
EAR—				
Defective Hearing ... ..	17	3	3	—
Otitis Media ... ..	—	—	—	—
Other Ear Diseases ... ..	11	8	3	—
NOSE AND THROAT—				
Enlarged Tonsils ... ..	3	25	—	6
Adenoids ... ..	1	3	—	1
Enlarged Tonsils and Adenoids ... ..	4	13	1	—
Other conditions ... ..	3	2	4	1
ENLARGED CERVICAL GLANDS (Non-Tubercular) ... ..	3	7	5	—

TABLE II.—Continued.

Defect or Disease.	Routine Inspections.		Specials.	
	Number referred for Treatment.	Number requiring to be kept under observation.	Number referred for Treatment.	Number requiring to be kept under observation.
DEFECTIVE SPEECH ... ..	25	11	1	1
TEETH—				
(Dental Diseases) ... ..	221	—	—	—
HEART AND CIRCULATION—				
Heart Disease—				
Organic ... ..	1	13	—	—
Functional ... ..	1	4	—	—
Anæmia ... ..	28	3	—	—
Other Defects ... ..	—	1	3	2
LUNGS—				
Bronchitis... ..	13	2	1	—
Other Non - Tubercular Diseases ... ..	1	1	2	1
TUBERCULOSIS—				
Pulmonary—				
Definite ... ..	6	3	—	—
Suspected ... ..	1	2	—	—
Non-Pulmonary—				
Glands ... ..	2	1	—	—
Spine ... ..	—	1	—	—
Hip ... ..	—	2	—	—
Other Bones and Joints.	—	3	—	—
Skin ... ..	—	—	—	—
Other forms ... ..	2	2	—	—
NERVOUS SYSTEM—				
Epilepsy ... ..	—	1	1	—
Chorea ... ..	—	2	—	—
Other conditions ... ..	1	—	2	—
DEFORMITIES—				
Rickets ... ..	1	10	1	—
Spinal Curvature ... ..	2	—	—	—
Other Forms ... ..	9	6	1	—
OTHER DEFECTS & DISEASES	42	17	34	7

Number of Individual Children found at Routine Medical Inspection to require treatment (excluding Uncleanliness and Dental Diseases)—336.

TABLE II.—Continued.

**(B) NUMBER OF INDIVIDUAL CHILDREN FOUND AT ROUTINE MEDICAL INSPECTION TO REQUIRE TREATMENT.**

(Excluding Uncleanliness and Dental Diseases).

Group. (1)	Number of Children.		Percentage of Children found to require treatment. (4)
	Inspected. (2)	Found to require treatment. (3)	
<b>CODE GROUPS—</b>			
Entrants ... ..	1440	127	8.8
Intermediates ... ..	909	110	12.1
Leavers ... ..	769	99	12.8
TOTAL (Code Groups) ...	3118	336	10.7
Other Routine Inspections ...	—	—	—

**(C) TABLE SHOWING NUMBER OF INSPECTIONS (ROUTINE and SPECIAL) AND THE NUMBER AND PERCENTAGE REFERRED FOR TREATMENT IN THE PAST FIVE YEARS.**

	1921	1922	1923	1924	1925
Number of Inspections.	3,899	3,676	3,502	3,469	3,485
<b>DISEASED CONDITIONS :</b>	No. %	No. %	No. %	No. %	No. %
External Eye Diseases.	105 (2.6)	87 (2.3)	91 (2.5)	28 (0.8)	17 (0.4)
Defective Vision and Squint .....	320 (8.2)	334 (9.0)	315 (8.9)	411 (11.8)	402 (11.5)
Ear Disease or Defect...	126 (3.2)	61 (1.6)	71 (2.0)	37 (1.0)	34 (0.9)
Throat and Nos: Defects.....	102 (2.6)	47 (1.2)	23 (0.6)	25 (0.7)	16 (0.4)
Diseases of Heart and Circulation .....	9 (0.2)	47 (1.2)	28 (0.7)	38 (1.0)	33 (0.9)
Lung Disease (Non-Tubercular) ...	13 (0.3)	40 (1.0)	25 (0.7)	11 (0.3)	17 (0.4)
Tuberculosis (all forms)	12 (0.2)	19 (0.5)	13 (0.3)	9 (0.4)	10 (0.2)
Malnutrition.....	Nil.	11 (0.3)	6 (0.1)	11 (0.3)	3 (0.08)
Skin Diseases .....	676 (17.3)	596 (16.2)	520 (14.6)	63 (1.8)	69 (1.9)

TABLE III.

NUMBER OF INDIVIDUAL CHILDREN SAID TO BE IN THE AREA

**RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA, 1925.**

	Boys.	Girls	Total
<b>BLIND (including Partially Blind).</b>			
(1) Suitable for training in a School or Class for the Totally Blind—			
Attending Certified Schools or Classes for the Blind ... ..	5	—	5
Attending Public Elementary Schools ...	—	—	—
At other Institutions ... ..	—	—	—
At no School or Institution ... ..	—	—	—
(2) Suitable for training in a School or Class for the Partially Blind—			
Attending Certified Schools or Classes for the Blind ... ..	—	—	—
Attending Public Elementary Schools ...	—	—	—
At other Institutions ... ..	—	—	—
At no School or Institution ... ..	—	—	—
<b>DEAF (including Deaf and Dumb and Partially Deaf).</b>			
(1) Suitable for training in a School or Class for the Totally Deaf or Deaf and Dumb—			
Attending Certified Schools or Classes for the Deaf ... ..	5	5	10
Attending Public Elementary Schools ...	—	—	—
At other Institutions ... ..	—	—	—
At no School or Institution ... ..	1	—	1
(2) Suitable for training in a School or Class for the Partially Deaf—			
Attending Certified Schools or Classes for the Deaf ... ..	—	—	—
Attending Public Elementary Schools ...	—	—	—
At other Institutions ... ..	—	—	—
At no School or Institution ... ..	—	—	—

Boys. Girls. Total

## MENTALLY DEFECTIVE.

Feeble-minded (cases not notifiable to the Local Control Authority)—

Attending Certified Schools for Mentally Defective Children ... ..	—	—	—
Attending Public Elementary Schools ...	20	16	36
At other Institutions ... ..	—	—	—
At no School or Institution ... ..	3	3	6

Notified to the Local Control Authority during the year—

Feeble-minded ... ..	1	—	1
Imbeciles ... ..	—	—	—
Idiots ... ..	—	—	—

## EPILEPTICS.

Suffering from severe Epilepsy—

Attending Certified Special Schools for Epileptics ... ..	1	—	1
In Institutions other than Certified Special Schools ... ..	—	—	—
Attending Public Elementary Schools ...	—	—	—
At no School or Institution ... ..	—	—	—

Suffering from Epilepsy which is not severe—

Attending Public Elementary Schools ...	1	—	1
At no School or Institution ... ..	—	—	—

## PHYSICALLY DEFECTIVE.

Infectious Pulmonary and Glandular Tuberculosis—

At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board...	—	—	—
At other Institutions ... ..	—	—	—
At no School or Institution ... ..	—	—	—

Non-infectious but active Pulmonary and Glandular Tuberculosis—

At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board...	23	14	37
At Certified Residential Open Air Schools ...	—	—	—
At Certified Day Open Air Schools ... ..	—	—	—
At Public Elementary Schools ... ..	46	38	84
At other Institutions ... ..	4	—	4
At no School or Institution ... ..	—	1	1

Delicate Children (e.g., pre or latent Tuberculosis,  
Malnutrition, Debility, Anæmia, etc.)

At Certified Residential Open Air Schools ...	—	—	—
At Certified Day Open Air Schools ...	—	—	—
At Public Elementary Schools ...	56	61	117
At other Institutions ...	7	6	13
At no School or Institution ...	—	1	1

Active Non-Pulmonary Tuberculosis—

At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board ...	11	11	22
At Public Elementary Schools ...	23	22	45
At other Institutions ...	1	3	4
At no School or Institution ...	2	2	4

Crippled Children (other than those with active  
Tuberculosis diseases), e.g., Children  
suffering from Paralysis, etc., and includ-  
ing those with severe heart disease—

At Certified Hospital Schools ...	—	—	—
At Certified Residential Cripple Schools ...	—	—	—
At Certified Day Cripple Schools ...	2	4	6
At Public Elementary Schools ...	33	37	70*
At other Institutions ...	—	—	—
At no School or Institution ...	4	5	9
At Secondary Schools ...	4	6	10

\* Includes 2 in Special Class.

TABLE IV.—TREATMENT OF DEFECTS OF CHILDREN DURING 1925.

**Group I.—TREATMENT OF MINOR AILMENTS.**

(Excluding Uncleanliness, for which see Group V.)

Disease or Defect.	Number of Children Treated.		
	Under Local Education Authority's Scheme.	Otherwise.	Total.
<b>SKIN—</b>			
Ringworm—Scalp ... ..	30	—	30
Body ... ..	29	—	29
Scabies ... ..	6	—	6
Impetigo ... ..	192	—	192
Minor Injuries ... ..	42	17	59
Other Skin Diseases ... ..	270	3	273
EAR DISEASE (Otorrhœa) ... ..	41	8	49
EYE DISEASE (External and other)... ..	97	2	99
MISCELLANEOUS ... ..	98	35	133

**Group II.—TREATMENT OF VISUAL DEFECTS.**

(Excluding Minor Eye Defects in Group I.)

## Submitted to Refraction—

Under Local Education Authority's Scheme (Clinic or Hospital) ... ..	363
By Private Practitioner or Hospital ... ..	7
Otherwise ... ..	—
	370
For whom Glasses were prescribed ... ..	275
For whom Glasses were provided ... ..	275
Recommended for Treatment other than by Glasses ... ..	—
Received other Forms of Treatment ... ..	8
For whom no Treatment was considered necessary ... ..	80

**Group III.—TREATMENT OF DEFECTS OF NOSE AND THROAT.**

## Received Operative Treatment—

Under Local Education Authority's Scheme (Clinic or Hospital) ... ..	25
By Private Practitioner or Hospital ... ..	—
	25
Received other forms of Treatment ... ..	—



TABLE IV.—Continued.

## Group IV.—TREATMENT OF DENTAL DEFECTS.

NUMBER OF CHILDREN DEALT WITH DURING 1925.

## INSPECTED BY DENTIST—

	Routine Age Groups.	}	Age 5 years	...	...	...	—	} Total 4321
			" 6 "	...	...	...	633	
			" 7 "	...	...	...	610	
			" 8 "	...	...	...	711	
			" 9 "	...	...	...	721	
			" 10 "	...	...	...	717	
			" 11 "	...	...	...	586	
			" 12 "	...	...	...	254	
			" 13 "	...	...	...	89	
			" 14 "	...	...	...	—	
Specials ...	...	...	...	...	...	...	229	
			Grand Total	...	...	...	4550	
								==
REFERRED FOR TREATMENT	...	...	...	...	...	2667		
*Specials	...	...	...	...	...	229		
							2896	
ACTUALLY TREATED	...	...	...	...	...	1561		
*Specials	...	...	...	...	...	229		
							1790	
RETREATED (result of periodical examination)	...	...	...	...	...	1187		

\*Includes 40 cases from the Secondary Schools.

TABLE IV.—Continued.

**PARTICULARS OF TIME GIVEN AND OF OPERATIONS  
UNDERTAKEN.**

SCHOOL DENTIST'S REPORT FOR THE YEAR 1925.

Number of half-days devoted to Inspection	...	...	...	...	...	...	...	42
Number of half-days devoted to Treatment	...	...	...	...	...	...	...	439
								481
								481
Total number of attendances made by children	...	...	...	...	...	...	...	3033
Number of Permanent Teeth—								
Extracted	...	...	...	...	...	...	...	243
Filled	...	...	...	...	...	...	...	1220
Number of Temporary Teeth—								
Extracted	...	...	...	...	...	...	...	1884
Filled	...	...	...	...	...	...	...	140
Total number of Fillings	...	...	...	...	...	...	...	1360
Total number of Extractions	...	...	...	...	...	...	...	2127
*Number of administrations of general anæsthetics	...	...	...	...	...	...	...	33
Number of other operations—								
Permanent	...	...	...	...	...	...	...	229
Temporary	...	...	...	...	...	...	...	61

\*Nitrous Oxide.

**Group V.—UNCLEANLINESS AND VERMINOUS CONDITIONS.**

(1) Average number of Visits per School made during the year by the School Nurses	...	...	...	...	21·4
(2) Total number of Examinations of Children in the Schools by School Nurses	...	...	...	...	17,100
(3) Number of individual children found unclean	...	...	...	...	671
(4) Number of children cleansed under arrangements made by the Education Authority	...	...	...	...	—
(5) Number of cases in which legal proceedings were taken—					
(a) Under the Education Act, 1921	...	...	...	...	—
(b) Under School Attendance Byelaws	...	...	...	...	—

**VERMINOUS CHILDREN FOUND ON SCHOOL INSPECTIONS  
IN 1925.**

School.	Percentage found Verminous.		
	Infants.	Girls.	Boys.
St. Paul's .....	8%	15%	6%
St. Joseph's .....	11%	5%	3%
Riverside (Council) .....	6%	1·5%	3%
Somerville (Council) .....	5%	10%	3%
Poulton (Council) .....	5%	5%	3%
St. George's Road (Council) .....	6%	11%	1%
Vaughan Road (Council) .....	Nil.	5%	3%
St. James's .....	5%	5%	3%
Magazine Lane .....	8%	5%	3%
SS. Peter and Paul .....	5%	5%	3%
Central (Council).....	—	4%	2%
St. Mary's .....	5%	40%	7%
Manor Road (Council) .....	5%	10%	5%
St. Alban's .....	8%	18%	3%
Church Street (Council) .....	5%	5%	3%

# MEDICAL INSPECTION 1925.

## Secondary Schools.

TABLE I.

### RETURN OF MEDICAL INSPECTIONS.

#### (A) ROUTINE MEDICAL INSPECTIONS.

NUMBER OF AGE GROUP INSPECTIONS ... .. 95

Age Groups.				Boys.	Girls.	Total.
ENTRANTS	Under 12	...	...	179	149	328
INTERMEDIATES	{	12	...	131	94	} 775
		13	...	156	125	
		14	...	154	115	
LEAVERS	{	15	...	121	100	} 350
		Over 15	...	67	62	
Totals				808	645	1,453

NUMBER OF OTHER ROUTINE INSPECTIONS ... .. —

#### (B) OTHER INSPECTIONS.

NUMBER OF SPECIAL INSPECTIONS ... .. 6

NUMBER OF RE-INSPECTIONS ... .. —

TOTAL ... .. 6

(A) SECONDARY SCHOOLS.—TABLE II.  
**RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN  
 THE YEAR ENDED 31st DECEMBER, 1925.**

Defect or Disease.	Routine Inspections.		Special Inspections.	
	Number referred for Treatment.	Number requiring to be kept under observation.	Number referred for Treatment.	Number requiring to be kept under observation.
<b>Malnutrition</b> ... ..	—	—	—	—
<b>Skin—</b>				
Ringworm—Head ... ..	—	—	—	—
Body ... ..	—	—	1	—
Scabies ... ..	—	—	—	—
Impetigo ... ..	—	—	—	—
Other Diseases (Non-Tubercular) ... ..	15	2	1	—
<b>Teeth—</b>				
Decayed (4 or less) ... ..	78	—	—	—
" (over 4) ... ..	—	—	—	—
Sepsis ... ..	—	—	—	—
Other Defects ... ..	89	5	—	—
<b>Nose and Throat—</b>				
Enlarged Tonsils only ... ..	1	1	—	—
Adenoids only ... ..	—	—	—	—
Enlarged Tonsils and Adenoids ... ..	—	—	—	—
Other Conditions ... ..	4	—	2	—
<b>Enlarged Cervical Glands—</b>				
Non-Tubercular ... ..	1	1	—	—
<b>Eye—</b>				
Blepharitis ... ..	5	3	—	—
Conjunctivitis ... ..	—	—	—	—
Keratitis ... ..	—	—	—	—
Corneal Ulcer ... ..	—	—	—	—
Corneal Opacities ... ..	—	2	—	—
Ptosis ... ..	—	—	—	—
Defective Vision (excluding Squint) ... ..	72	221	—	1
Squint ... ..	1	1	—	—
Colour Sense ... ..	—	—	—	—
Other Conditions ... ..	—	2	—	—
<b>Ear—</b>				
Defective Hearing ... ..	—	6	—	—
Otitis Media ... ..	—	—	—	—
Other Diseases ... ..	—	8	—	—
<b>Defective Speech</b> ... ..	1	3	—	—
<b>Thorax (Shape and Development)</b> ... ..	—	2	—	—
Carried forward ...	267	257	4	1

TABLE II.—Continued.

Defect or Disease.	Routine Inspections.		Special Inspections.	
	Number referred for Treatment.	Number requiring to be kept under observation.	Number referred for Treatment.	Number requiring to be kept under observation.
Brought forward ...	267	257	4	1
<b>Heart and Circulation—</b>				
Heart Disease—				
Organic ... ..	—	13	—	—
Functional ... ..	—	—	—	—
Anæmia ... ..	13	2	—	—
Other Defects ... ..	—	—	—	—
<b>Lungs—</b>				
Bronchitis... ..	3	—	—	—
Other Non-Tubercular Diseases ... ..	—	1	—	—
<b>Tuberculosis—</b>				
Pulmonary—Definite ...	—	1	—	—
" Suspected ...	—	—	—	—
Non-Pulmonary—				
Glands ... ..	—	—	—	—
Spine ... ..	—	—	—	—
Hip ... ..	—	—	—	—
Other Bones and Joints	—	—	—	—
Skin ... ..	—	—	—	—
Other Forms ... ..	—	—	—	—
<b>Nervous System—</b>				
Headache ... ..	2	2	—	—
Signs of Overstrain ...	1	—	—	—
Epilepsy ... ..	—	—	—	—
Chorea ... ..	—	1	—	—
Other Diseases ... ..	—	1	—	—
<b>Digestion or Constipation—</b>	8	3	—	—
Other conditions ... ..	—	—	—	—
<b>Deformities and Defects—</b>				
Rickets ... ..	—	—	—	—
Spinal Curvature ... ..	2	2	—	—
Flat Foot ... ..	2	1	—	—
Other Deformities or Defects ... ..	4	6	1	—
<b>Catamenia ... ..</b>	—	1	—	—
Total ... ..	302	291	5	1

TABLE II.—Continued.

**(B) NUMBER OF INDIVIDUAL CHILDREN FOUND AT ROUTINE MEDICAL INSPECTION TO REQUIRE TREATMENT.**

(Excluding Uncleanliness and Dental Diseases.)

Group. (1)	Number of Children.		Percentage of Children found to require treatment. (4)
	Inspected. (2)	Found to require treatment. (3)	
Entrants ... ..	328	44	13.4
Intermediates ... ..	775	68	8.7
Leavers ... ..	350	23	6.5
Total ... ..	1453	135	9.3
Other Routine Inspections ...	—	—	—

TABLE III.

**RETURN OF ALL EXCEPTIONAL CHILDREN.**

Table III. in Elementary School Statistics covers the area.

## SECONDARY SCHOOLS.—TABLE IV.

RETURN OF DEFECTS TREATED DURING THE YEAR ENDED  
31st DECEMBER, 1925.

## Group I.—Treatment of Minor Ailments (excluding Uncleanliness.)

Defect or Disease.	Number of Pupils Treated.		
	Under L.E.A.'s Scheme.	Otherwise.	Total.
<b>Skin—</b>			
Ringworm—Head ... ..	—	—	—
Body ... ..	—	1	1
Scabies ... ..	—	—	—
Impetigo ... ..	—	—	—
Minor Injuries ... ..	—	—	—
Other Skin Diseases ... ..	—	7	7
<b>Ear—</b>			
Otitis Media, etc. ... ..	—	—	—
<b>Eye—</b>			
External and other ... ..	1	4	5
<b>Orthopædic Treatment</b> ... ..	6	—	6
<b>Miscellaneous</b> ... ..	—	4	4

## Group II.—Treatment of Visual Defects.

Submitted to Refraction—		
Under Local Education Authority's Scheme ...		51
By Private Practitioner or Hospital ... ..		25
Otherwise ... ..		—
		76
For whom Glasses	(a) Under L.E.A.'s Scheme	47
were prescribed	(b) Otherwise ... ..	25
		72
For whom Glasses	(a) Under L.E.A.'s Scheme	47
were provided	(b) Otherwise ... ..	25
		72
Recommended for Treatment other than by Glasses ...		—
Received other forms of Treatment ... ..		—
For whom no Treatment was considered necessary ...		4

## Group III.—Treatment of Defects of Nose and Throat.

Received Operative Treatment—		
Under Local Education Authority's Scheme ... ..		—
By Private Practitioner or Hospital ... ..		—
Received other forms of Treatment ... ..		—



## SECONDARY SCHOOLS.—TABLE IV.

## Group IV.—Treatment of Dental Defects.

Defect or Disease.	Number of Pupils Treated.		
	Under L.E.A.'s Scheme.	Otherwise.	Total
DENTAL.—Specials ... ..	*40	53	93

\*Included in the Elementary School Statistics.

## Group V.—Uncleanliness and Verminous Conditions.

Only Elementary Schools come under this arrangement.