

Annual report of the Department of Public Health, Province of Alberta.

Contributors

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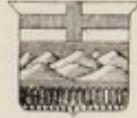
ANNUAL REPORT
OF THE
Department of Public Health
PROVINCE OF ALBERTA
INCLUDING
Vital Statistics Branch
1936

PUBLISHED BY ORDER OF THE LEGISLATIVE ASSEMBLY

EDMONTON:
PRINTED BY A. SHNITKA, KING'S PRINTER
1938



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Edmonton, December 15, 1937.

TO HIS HONOUR

J. C. BOWEN,

Lieutenant Governor of the Province of Alberta.

SIR,—

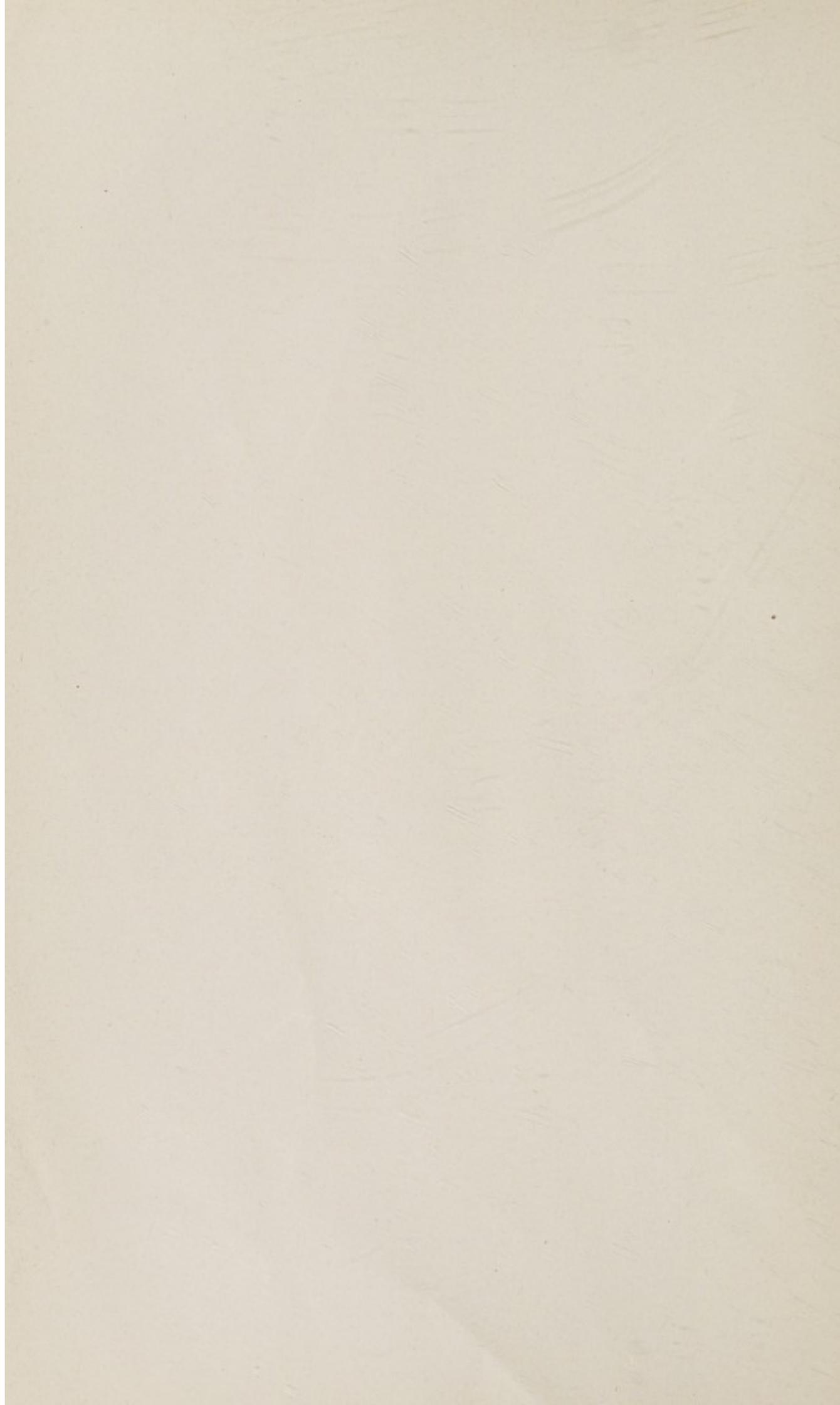
I have the honour to transmit herewith the Annual Report of the Department of Public Health for the year 1936.

I have the honour to be, Sir,

Your obedient servant,

WALLACE WARREN CROSS,

Minister of Health.



Edmonton, December 15, 1937.

TO THE HONOURABLE DR. W. W. CROSS,
Minister of Health,
Administration Building, Edmonton, Alberta.

SIR,—

I have the honour to submit herewith the Eighteenth Annual Report of the Department of Public Health.

I have the honour to be, Sir,

Your obedient servant,

MALCOLM R. BOW, M.D., C.M., D.P.H.,
Deputy Minister.



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CONTENTS

	Page
Summary	7
Communicable Disease Division	21
Public Health Education Division	28
Hospital Inspection Division and Medical Inspector's Report of Operations	29
Private Hospitals	31
Provincial Laboratory	32
Public Health Nursing Division	36
Hospitals Division	40
Division of Social Hygiene	54
Sanitary Engineering Division	56
Dental Hygiene Division	58
Mental Health Division	59
Eugenics Board	61
Mental Hygiene Clinics	62
Provincial Mental Hospital, Ponoka	71
Provincial Auxiliary Hospital, Claresholm	90
Provincial Mental Institute, Edmonton	94
Provincial Training School, Red Deer	109
Central Alberta Sanatorium, Calgary	121

EIGHTEENTH ANNUAL REPORT OF THE
PROVINCIAL DEPARTMENT OF PUBLIC HEALTH, INCLUDING
THE VITAL STATISTICS BRANCH

THE DEPARTMENT

Divisions:

1. Communicable Diseases.
2. Public Health Education.
3. Hospital Inspection.
4. Laboratory.
5. Public Health Nursing.
6. Municipal Hospitals.
7. Social Hygiene.
8. Sanitary Engineering and Sanitation.
9. Dental Hygiene.
10. Mental Health.
11. Institutions: Provincial Mental Hospital, Ponoka.
Provincial Mental Institute, Oliver.
Provincial Training School, Red Deer.
Provincial Auxiliary Hospital, Claresholm.
Central Alberta Sanatorium, Calgary.
12. Vital Statistics.

A report giving a summary of the work of each of these divisions is included herewith.

THE ADVISORY COMMITTEE OF HEALTH

No meeting of the Advisory Committee of Health was held during the year.

PROVINCIAL BOARD OF HEALTH

Six meetings of the Provincial Board of Health were held during the year.

REGULATIONS PASSED DURING THE YEAR

Regulations Governing Mattresses, Upholstering, Wiping Rags and Cotton Waste.

Regulations and Specifications Respecting Swimming Pools and Bathing Places.

Regulations Governing Cemeteries and Burial Grounds.

Regulations Respecting Nuisances and General Sanitation.

Other Regulations passed previous to 1936 were amended or revised as deemed advisable by the Provincial Board of Health.

LEGISLATION PASSED DURING THE YEAR

Tuberculosis Act.

This Act empowers the Minister of Health to take measures for the prevention of tuberculosis and the treatment of tuberculosis patients and for that purpose to operate the Central Alberta Sanatorium, and, with the approval of the Lieutenant Governor in Council, to acquire land, buildings and equipment as suitable for use for the hospitalization of tuberculosis patients, and to enter into agreements with boards of hospitals for the setting apart of any portion of hospitals for the reception, care and treatment of tuberculosis patients.

By Section 4 persons who have been residents of the Province for twelve consecutive months out of the twenty-four months immediately preceding

admission into any sanatorium operated by the Minister shall not be required to pay any fee for hospitalization or treatment therein; other persons are liable to pay such amounts for hospitalization and treatment as may be prescribed by order in council.

Persons admitted to a hospital as tuberculosis patients under the provisions of The Hospitals Act are to continue to be subject to the provisions of that Act until such time as provision is made under the present Act for the transfer of such persons to a sanatorium under the provisions thereof.

Hospitals Act Amendment Act, 1936.

This Act makes new provision for the liability of a local authority for the hospitalization of its indigent sick residents; it makes the local authority liable to pay to a hospital charges for the hospitalization of an indigent sick resident if the case appears to the Superintendent or Medical Officer to be one of sudden and urgent necessity and if he notifies the local authority by registered mail of the admission; and in case of a dispute as to whether or not the patient is an indigent sick resident or that the case is one of sudden and urgent necessity, the dispute is to be referred to a Judge of the District Court for determination.

The case of an expectant mother applying for admission to a hospital and certified by the attending physician as requiring hospitalization is declared to be a case of sudden and urgent necessity.

Sections 7b and 17 and a part of the schedule are struck out.

Municipal Hospital Districts of Cardston and Myrnam Confirmation Act.

This Act ratifies the establishment of the hospital districts named therein.

Public Health Act Amendment Act, 1936.

This Act prohibits any person using for the therapeutic treatment of human beings any radium or radon or any derivative of radium unless he is the holder of a certificate of competency issued by the Senate of the University of Alberta.

Fort Saskatchewan Hospital Fund Act.

This Act deals with a fund of \$5,304.65 collected about twenty-five years ago for the purpose of providing a hospital for the people of Fort Saskatchewan.

It being no longer practicable or convenient to use the fund for the purpose for which it was originally raised, the same was transferred to the council of the town of Fort Saskatchewan upon trust to use the same for the payment of the hospitalization accounts of indigents who are residents of the town of Fort Saskatchewan and its vicinity.

Mental Diseases Act Amendment Act.

Express provision is made for the admission to a mental hospital of drug addicts.

Municipal Hospitals Act, 1929, Amendment Act, 1936.

Section 11 of the Act is amended by empowering a corporation which is a ratepayer to nominate one person who is an officer or employee and resident of the district as a ratepayer of the district.

It also empowers the board to fix by resolution the amount of the normal hospital tax for one ratepayer and to provide that where the amount so fixed is an aliquot part of the annual hospital taxes payable by any ratepayer, the ratepayer may in respect of each such aliquot part after the first, if the ratepayer is a natural person, and in respect of every such aliquot part, if the

ratepayer is a corporation, nominate as a ratepayer of the district one person who is an employee or tenant of the ratepayer and resident in the district.

New provision is made for the inclusion in a proposed hospital district of municipal areas included in an established hospital district.

Section 31 is amended and re-states the qualifications for election to membership of a hospital board.

New provision is made for the disestablishment of a hospital district by the Minister upon it being made to appear that it is the desire of the ratepayers that the district should be disestablished, and for the winding up and adjusting of the affairs of any hospital district which is so disestablished.

New provision is made as to the tax payable in case a minimum tax is fixed by the scheme in cases where the taxes payable in respect of a ratepayer's property are either less or more than the minimum tax.

It also provides that a non-resident may request the secretary-treasurer to assess him for the minimum tax in respect of any property he has in any hospital district and upon being so assessed becomes entitled to hospital facilities as if he were a resident ratepayer.

Section 67 is amended.

Solemnization of Marriage Act Amendment Act, 1936.

Section 22 of the Act is revised by permitting a Judge to make an order dispensing with consent for the marriage of a minor in any case where the consent cannot be obtained.

A fresh provision is made providing for the confirmation by a Judge of the Supreme Court of the marriage in any case in which any question arises as to the regularity of the ceremony by reason of any inadvertent contravention of or non-compliance with any provisions of the Act on the part of the person celebrating the ceremony.

Chiropractic Act Amendment Act, 1936.

New provisions are made for the constitution of an Advisory Board of Examiners, which is to consist of five members appointed by the Minister, of whom four are to be registered chiropractors resident in the Province and graduates of a school of chiropractic which requires for its course of instruction not less than eighteen months resident study within a period not exceeding three years, and the other member is to be a layman who will act as chairman of the Board. It is further provided that if the Minister is unable to constitute the Board in accordance with the foregoing, he may complete the Board by appointing any registered chiropractor or chiropractors in the Province.

DEPARTMENT OF PUBLIC HEALTH

 DEPARTMENT OF PUBLIC HEALTH
 FINANCIAL STATEMENT FOR THE FISCAL YEAR ENDED MARCH 31, 1937

Div. Vote.	Name.	Salaries.	Expenses.	Revenue.
1. 605.	Communicable Disease	\$ 850.00	\$ 24,627.56	\$ 3,404.50
2. 605.	Public Health Education	2,000.00	772.04	.....
3. 603.	Hospital Inspection	2,997.54	838.35	.....
	Grants .....	.....	447,693.60	.....
4. 626.	Laboratory .....	.....	4,750.00	.....
5. 606.	Public Health Nursing and	.....	.....	.....
	621. Clinics	38,639.20	13,310.42	3,675.22
6. 608.	Municipal Hospitals	4,165.71	843.75	.....
7. 610.	Social Hygiene	8,820.10	7,742.69	.....
8. 605.	Sanitary Engineering and Sani- tation	8,127.69	4,488.59	.....
9. 606.	Dental Hygiene .....	.....	.....	.....
10. 622.	Mental Hygiene	1,350.00	7,235.70	.....
	Institutions:			
614-15	Prov. Mental Hospital, Ponoka	265,489.31	149,228.88	129,484.42
623	Prov. Aux. Hospital, Clares- holm	18,317.12	10,036.16	6,557.33
612-25	Prov. Mental Institute, Oliver	93,281.98	42,604.30	50,523.04
613	Prov. Training School, Red Deer	49,925.77	20,835.28	42,194.05
604	Central Alberta Sanatorium, Calgary	121,202.55	143,226.83	49,857.06
619	University Hospital .....	.....	20,000.00	.....
12. 607.	Vital Statistics	14,726.73	4,149.58	40,179.51
609.	Insulin .....	.....	9,365.75	.....
611.	Grants to Homes .....	.....	4,000.00	.....
	Administration	17,180.92	3,749.07	1,272.00
	Full-Time Health Districts .....	.....	8,000.00	.....
		\$647,074.62	\$927,498.55	\$327,147.13
	Total—Public Health Administration			\$1,574,573.17
	Total—Public Health Revenue			327,147.13
	Net Cost Public Health			\$1,247,426.04

VITAL STATISTICS

Vital statistics registrations during 1936 were as follows:

Births	15,786
Marriages	6,020
Deaths	6,147

In all cases where rates are shown, these are based on an estimated population of 772,782 (estimate of the Dominion Bureau of Statistics). In the following table the number of births and the birth rate, the number of marriages and the marriage rate, and the number of deaths and the death rate for each of the years from 1931 to 1936 are shown.

Year	No. of Births	Birth Rate	No. of Marriages	Marriage Rate	No. of Deaths	Death Rate
1931	17,252	23.57	5,142	7.02	5,302	7.24
1932	16,990	22.96	5,054	6.83	5,521	7.46
1933	16,123	21.33	5,389	7.10	5,346	7.06
1934	16,236	21.10	6,053	7.86	5,337	6.93
1935	16,183	21.00	6,010	7.80	5,729	7.40
1936	15,786	20.40	6,020	7.80	6,147	8.00

The birth rate for 1936 is the lowest recorded in the history of the Province. The marriage rate for 1936 is the same as for 1935. The death rate for 1936 is 8.00 as compared with 7.40 for 1935.

General Health Conditions.

There was an increase of 418 deaths in 1936 over the number registered in 1935. The following are the chief causes of death which showed increases: cancer, accidental deaths, influenza, tuberculosis, whooping cough and typhoid fever. (Special reference is made to some of these causes of death later in this report.)

The infantile mortality rate shows a slight increase and the maternal mortality rate shows a very material increase in 1936. Special reference will be made to causes of death responsible for these increases later in this report.

Seventy-three deaths were reported as due to Whooping Cough in 1936 as compared with 43 in 1935. Of the 73 deaths from Whooping Cough, 67 were of children under three years of age, 50 of whom were infants under one year. These statistics indicate that Whooping Cough is one of the most serious diseases affecting children and that it should be treated with much more respect than it has been in past years.

The combined death rate (deaths per 100,000 population) for Diphtheria, Scarlet Fever, Measles and Whooping Cough is 16 as compared with 11 for 1935. The average death rate for the past six years is 10.6.

Forty-seven cases of Diphtheria, with nine deaths, were reported in 1936 as compared with 28 cases and 8 deaths in 1935. The death rate for Diphtheria in 1936 is little changed from that of the previous year.

The Department has continued to supply Diphtheria Toxoid for immunization purposes free of charge. All school districts in the Province were circularized in regard to the vital importance of protecting school and pre-school children against this highly dangerous disease. Full advantage of the service offered by the Department has been taken by a number of districts, but there are still many others in which nothing has been done to safeguard the children of the community from Diphtheria.

During 1936, 2,294 children residing in 77 of the outlying districts of the Province were immunized against Diphtheria by a specially qualified health inspector, part of whose time is devoted to this service.

Fifty-six cases of Smallpox were reported in 1936 and 1 death from this cause, while only 4 cases and no deaths were reported in 1935. Thirty-four of these cases occurred in Calgary during the early months of the year. The prompt action taken in connection with vaccination, however, prevented this outbreak from assuming serious proportions. It can not too often be emphasized that Smallpox and Diphtheria are entirely preventable diseases.

During 1936, 3,017 persons in 77 outlying districts were vaccinated by the health inspector carrying on this work.

One hundred and eleven cases of Typhoid Fever and 20 deaths from this cause were reported in 1936, giving a death rate of 2.6 as compared with 55 cases and 11 deaths and a death rate of 1.4 for 1935. Outbreaks of the disease which occurred in the Slave Lake, Chestermere Lake and Thorsby districts were largely responsible for this increase. The outbreaks in the Slave Lake and Chestermere Lake districts were traced to contaminated water, and the outbreak in the Thorsby district to cheese.

The necessity of being constantly on guard in the supervision and control of water, milk and food supplies has been demonstrated by our experience in 1936. The risk involved in the use of raw water for drinking purposes from streams and irrigation ditches has again to be emphasized.

Eighteen cases of Poliomyelitis and 4 deaths from this disease were reported in 1936 as compared with 162 cases and 15 deaths in 1935. Nine of these 18 cases were reported by cities, 2 by towns and villages, and 7 by rural municipalities. Fourteen were male and 4 were female cases. The distribution of cases by months is as follows: January, 3; February, 1; March, 2; April, 3; August, 2; September, 3; October, 3; December, 1.

The age distribution is as follows: 0-1, 1; 1-4, 4; 5-14, 7; 15-24, 5; 25-44, 1.

As will be noted, only sporadic cases occurred in 1936 as compared with a considerable prevalence of the disease in the previous year.

The number of deaths reported from Influenza for 1936 was 340 as compared with 194 for 1935. Influenza was prevalent over a large section of the Province during the winter months. Pneumonia was responsible for 440 deaths in 1936 as compared with 450 deaths in 1935 and 312 deaths in 1934. It will be noted that these two diseases were accountable for 780 deaths or 12.6% of all deaths reported in the Province for the year. The control of these diseases presents a public health problem of major importance.

Tuberculosis.

Deaths from Tuberculosis reported during 1936 numbered 382 as compared with 329 for the previous year, an increase of 53 deaths. Including the Indian and Metis population the death rate for all forms of Tuberculosis is 49.4 per 100,000 population and for Pulmonary Tuberculosis 38. Excluding the Indian and Metis population, the total deaths from all forms of this disease in 1936 numbered 193, giving a death rate of 22.7 per 100,000 population as compared with a rate of 24.6 for 1935.

The new policy under which free treatment is provided for all residents of the Province suffering from infectious types of Tuberculosis went into effect in June. Under this policy arrangements were made for 65 beds in the General Hospital, Edmonton, 37 in the Royal Alexandra Hospital, Edmonton, 22 in the University Hospital, Edmonton, and 8 beds in a convalescent home in Calgary for men. This represents an increase of 60% in the number of beds available for the admission of patients under the direction of the Department. At the same time provision was made for the extension of the diagnostic service with a view to the early diagnosis of patients suffering from the disease, and the location and control of sources of infection.

During the year 1936, 154 patients were admitted to the Sanatorium and 203 to the above mentioned hospitals. In addition, 532 patients were admitted to other general hospitals of the Province. Detailed information in regard to the classification of these cases will be found in the report of the Tuberculosis Division.

The new policy in connection with the prevention and control of Tuberculosis has marked a great forward step, the results of which will become increasingly apparent in future years.

Diseases of the Heart and Circulatory System.

Eight hundred and one deaths were reported from diseases of the heart in 1936, representing 13% of the total deaths recorded in the Province for the year, giving a death rate of 103.6 per 100,000 population. There were 427 deaths from diseases of the circulatory system in 1936, representing 7% of all deaths registered in the Province, giving a death rate from this cause of 55.2 per 100,000 population. For every 1,000 deaths registered in 1936 from all causes, diseases of the heart and circulatory system were responsible for 200.

Cancer.

The deaths registered as due to cancer in 1936 numbered 641, an increase of 19 deaths over the number registered in 1935, giving a cancer death rate of 82.9 as compared with 79.0 for 1935. Cancer takes rank as the second cause of death in the Province, 10.4% of all deaths registered in 1936 being due to this cause.

The early recognition of cancer and provision for the effective treatment of this disease in the early stages would have saved many lives now lost. The education

of the public so that persons showing any indication of the early manifestations of the disease may be led to seek competent medical advice in the beginning is a matter of major importance from the standpoint of public health.

The Department has co-operated, as in past years, with the Cancer Committee of the Alberta Division of the Canadian Medical Association in connection with its educational programme. One thousand one hundred and forty-three reports of cancer cases were forwarded to the Department by physicians and hospitals during the year, but it has not been possible, with the staff available, to prepare a report on the classification of the cases reported along the lines on which this work was carried out in previous years.

Deaths by Violence.

Deaths due to violence numbered 419 in 1936, an increase of 26 over 1935, representing 6.8% of all deaths registered for the year, and giving a death rate of 54 per 100,000 population. In addition, there were 87 suicides during the year, the same number as reported for 1935. Accidents on the highways were responsible for 96 deaths in 1936, of which 72 deaths occurred in automobile accidents.

The number of deaths occurring yearly as a result of automobile accidents presents a problem which must be of grave concern to those interested in the safety of the public and the promotion of public health. It is noteworthy that this problem is now receiving the serious attention of many concerned with Public Health administration. There is a great need for scientific study of the whole problem in order that we may gain the data required in regard to the various causes, and thus be in a position to intelligently apply the measures that will prove effective in reducing the death rate from this serious hazard.

There were 68 deaths due to drowning in 1936 as compared with 38 from this cause during the previous year. This is the largest number of deaths reported from this cause in the history of the Province. It is apparent that much more serious attention should be given to the education of the public in regard to the hazards connected with swimming and in regard to the use of boats, canoes and other water craft by those who are inexperienced, and who are not competent swimmers.

In the following tables the deaths due to violence are classified:

TABLE 1

Homicides	13
Attack by venomous animals	1
Food poisoning	1
Accidental absorption of toxic gases	10
Other acute accidental poisoning (except by gas)	8
Conflagration	15
Accidental burns (conflagration excepted)	26
Accidental mechanical suffocation	14
Accidental drowning	68
Accidental injuries by firearms	16
Accidental injuries by cutting instruments	8
Accidental injuries from falling, crushing or landslides	194
Injuries inflicted by animals	12
Hunger or thirst	2
Excessive heat	6
Excessive cold	10
Accidental electric shocks	2
Other accidents	17
Violent deaths (accident, suicide or homicide), unknown	1
Total	419

TABLE 2

SPECIAL CLASSES OF ACCIDENTAL DEATHS INCLUDED IN ABOVE

Accidents in mines and quarries	14
Accidents caused by machines	21
Railway accidents	19
Automobile and motorcycle accidents	72
Other land transportation	24
Water transportation	10

Infantile Mortality.

There were 940 deaths of children under one year of age in 1936 as compared with 936 the previous year. The infantile mortality rate for 1936 is 60. The average rate for the five-year period 1931-1935 is 60.1.

We would again direct attention to the higher death rates among children residing in the towns, villages and rural districts of the Province than among those residing in the larger cities. In 1936 the average infantile mortality rate for rural districts (including smaller urban centres) is 67 and for the 7 cities of the Province 45. This means that the infantile mortality rate for the rural districts is 50% higher than that for the 7 cities.

Of the 940 deaths of children under 1 year of age in 1936, 466 occurred within the first month of life, of which 342 occurred within the first week and 175 on the first day of life. This means that 50% of the deaths of children under 1 year of age occurred during the first month of life, 36% during the first week and 18% during the first day of life.

The principal causes of infant deaths registered in 1936 were as follows:

Prematurity	247
Respiratory	138
Gastro-intestinal	92
Acute Contagious	150

The Department would again direct attention to the urgent need of making available to the residents of our rural districts and smaller urban centres the full-time preventive health service enjoyed by the residents of cities in which modern health services are provided.

Maternal Mortality.

Ninety-one deaths were reported from maternal causes in 1936 as compared with 69 in 1935, an increase of 22 deaths. The maternal death rate (deaths per 1,000 living births) in 1936 is 5.8 as compared with the rate of 4.3 for 1935 and 4.99 for 1934. The average maternal mortality rate for the last five years is 4.67. The maternal death-rate could be cut in two if general application were being made of the knowledge we possess in regard to maternal hygiene.

The following were the chief causes of maternal deaths registered in the Province in 1936:

Puerperal Septicaemia	22
Abortion with Septic condition	19
Abortion without Septic condition	5
Puerperal Haemorrhage	10
Puerperal Albuminaria and Eclampsia	10

Full-Time Health Districts.

The work of the two health districts centering on Red Deer and High River, established in 1931, was carried on along the same lines as in previous years. The staff of each of these two health units consists of a medical officer of health with special qualifications for this work, two public health nurses with special training in this field, a qualified sanitary inspector whose time is divided between the two units, and a secretary-technician who has charge of the records, is responsible for the clerical work and stenography and assists in the laboratory.

Through these units health services are made available to the residents of the area such as those enjoyed in the larger centres. Through the operation of these two units in Alberta the value of this preventive service for rural districts has been proven beyond any question. As soon as economic conditions make it possible, this service should be extended along similar lines to all sections of the Province.

The activities of these units include health education, sanitation, prevention and control of tuberculosis, prevention and control of communicable diseases generally, child and maternal hygiene, school hygiene, supervision of food supplies, etc.

The following is a brief summary of the work of each of the above mentioned health units for the year 1936:

	Red Deer	High River
EDUCATIONAL:		
Lectures	143	19
Attendance	3,702	352
Bulletins distributed	11,230	5,464
Letters	1,224	4,666
Conferences	2,385	434
School Health Journal	531	1,157
Pre- and post-natal letters	196	2,383
SANITARY INSPECTIONS:		
Private premises	461	201
Public premises	149	17
Dairies and creameries	238	195
Miscellaneous inspections	695	673
Total inspections	1,635	1,086
COMMUNICABLE DISEASES:		
Visits to cases and suspects	2,003	706
Cases isolated	1,139	872
TUBERCULOSIS CONTROL:		
Cases and contacts examined	103	96
Home visits	326	36
Tuberculin tests		56
LIFE EXTENSION EXAMINATIONS:		
Adult examinations	78	148
IMMUNIZATION:		
Schick tests		22
Toxoid inoculations	1,837	1,393
Dick tests		577
Scarlet fever toxoid inoculations	1,259	20
Anti-smallpox vaccinations	1,486	1,008
Anti-typhoid inoculations	70	45
CHILD HYGIENE:		
Babies and pre-school children examined	415	738
School children examined	2,303	925
Inspected for communicable diseases	1,895	362
Excluded for communicable diseases	217	39
Weighed and measured	2,072	
Follow-up visits	851	55
Number of school visits	701	461
LABORATORY:		
Water samples analyzed	211	139
Milk samples analyzed	112	139
Urinalyses		70
Other laboratory procedures	57	578

Health Education.

Each year the value of a health educational programme is more clearly established. The demand for health information is increasing yearly, and no work gives larger returns for the expenditure made. In view of the limited funds available to the Department for this work, it has only been possible to make a limited service available.

The chief means by which health educational work is carried on are as follows: through the publication of bulletins, lectures, radio talks, movies, health exhibits. During the year a number of new bulletins were printed and many other publications of the Department were revised, making 26 bulletins and leaflets now available for distribution.

Fifteen hundred requests for literature were received during the year, and approximately 17,000 bulletins and leaflets were distributed from the office. Seventy-four lectures were given by the special lecturer with a total attendance of 11,587 persons, of whom 7,770 were of school age. This represents practically only one-half of the service given in previous years, the reduction in the service being necessary because of the reduction in funds available for travelling expenses.

Public Health Nursing and Child Welfare.

There are 21 nurses on the staff of the Department, working under the direction of the Superintendent of the Public Health Nursing Division. Of these, one is in charge of the Child Welfare Clinic serving the Edmonton district, one in charge of the Child Welfare Clinic serving the Calgary district, and one in charge of the clinic serving the Medicine Hat district. Three serve rural municipalities and the urban centres within these municipalities. Fifteen district nurses are stationed in outlying districts in the northern part of the Province.

Three hundred and twenty-seven child welfare clinics were held in Edmonton, Calgary, Medicine Hat and Redcliff, with a total attendance of 14,355 infants and pre-school children.

In the three municipalities served, a generalized public health nursing service is given, a report of which will be found in the report of the Public Health Nursing Division.

The outlying districts are served by district nurses with special qualifications for this work.

Owing to the reduction in funds available, it was not possible to make the travelling child welfare clinic service available this year. As soon as the necessary funds can be provided, this service should be re-established and extended in order that information and advice on infant care may be made available to the mothers in rural areas.

The travelling clinic visited 15 centres in the Province in 1936. This clinic was in the field from May 17th to July 7th. During this time 1,858 persons were examined and 393 operations for the removal of tonsils and adenoids were performed, as well as a considerable number of minor operations. The staff consisted of a surgeon in charge, 1 physician, 2 dentists, 3 nurses and 2 truck drivers, and the same high standard of service was provided as in previous years. The dentists on the staff examined 1,943 children, gave treatment to 463 and extracted 1,120 teeth.

Social Hygiene.

There are four regular clinics conducted by the Division of Social Hygiene, and in addition a clinic at each of the Provincial Gaols. The total number of cases under treatment at all clinics in 1936 was as follows: Syphilis, 979; Gonorrhoea, 1,146; Chancroid, 2; and non-venereal, 739, making a total of 2,866.

The records of the Department show that while in 1920, 16% of those committed to Provincial Gaols were syphilitic, in 1936 only 5% were so. Educational work has been carried on along the same lines as in previous years, but the volume of work has been reduced owing to the reduction in funds available for travelling. Eleven lectures were given during the year to 940 people.

Provincial Laboratory.

During the year 1936, 129,683 examinations were made by the Provincial Laboratory, representing an increase of 15,535 over 1935. These examinations include examinations of water, ice, sewage, milk, examinations required in connection with communicable disease control, examination of pathological material submitted by hospitals and physicians, chicken and cattle blood examinations, medico-legal examinations and many others too numerous to mention.

All vaccines and sera used for the prevention and treatment of communicable diseases are distributed by the Provincial Laboratory.

The Laboratory provides a very efficient service to local boards of health, hospitals and physicians, and this service is of great importance in safeguarding the public health. Some idea of the value of this service from a monetary point of view may be gained from the estimated value of the work done in 1936, viz., \$189,626.

Sanitary Engineering and Sanitation.

All plans and specifications submitted to the Provincial Board of Health for waterworks, sewerage and sewage disposal plants were examined and where approved, certificates issued for the same as required under The Public Health Act.

During the year 589 reports on analyses of water, ice and milk were received from the Director of the Provincial Laboratory. After examination of these reports, the action deemed necessary was taken to remedy conditions requiring attention.

We would again draw attention to the responsibility resting on the municipalities for the safety of public water supplies. Raw water from streams and irrigation ditches is unsafe for human consumption, and municipal authorities which permit the use of the same are courting a disastrous experience. No less responsibility rests on municipalities in the safeguarding of milk supplies. Unfortunately, in a number of instances little is being done by municipal councils to see that all water and milk supplied to their residents is safe for human consumption.

One hundred and eighty-five districts in the Province were visited and inspected by the sanitary inspector, and 10 lumber, tie, sawmill and mining camps were inspected during the year.

Dental Hygiene.

As in previous years, dental service was provided for the patients in all Provincial institutions. A detailed report of this work will be found in the reports of the various Provincial institutions under the direction of the Department. An outline of the dental service provided by the dentists on the staff of the travelling clinic will be found in the report of the travelling clinic.

Hospital Inspection.

Eighty-four approved hospitals in the Province received the Government grant in 1936. Eighty-three private hospitals, largely nursing homes and baby shelters were licensed under the provisions of The Private Hospitals Act. One hundred and fifty-one inspections of hospitals and baby shelters were made during the year.

The number of operations reported by hospitals in 1936 was 31,082. The number of deaths following these operations was 526, giving a mortality rate of 1.69% as compared with a rate of 1.08% for 1935.

The total capacity of approved hospitals, including the Central Alberta Sanatorium, as at the end of 1936 was 4,639 beds, divided as follows:

General	2,428
Maternity	620
Infants	684
Isolation	208
Pediatric	329
Tuberculosis	370

This represents one bed for every 167 of the population, or approximately 6 beds per thousand population.

Patients treated in the approved hospitals in 1936 numbered 86,192, representing 11% of the population of the Province. The average length of stay in hospital, excluding Sanatorium, Orthopaedic and S.C.R. patients, was 11.1 days.

The average cost per patient day in all approved hospitals was \$2.69 as compared with \$2.88 in 1935 and \$2.93 in 1934.

Municipal Hospitals.

There were 21 municipal hospitals in operation during the year, and these provided accommodation for 819 patients, including babies. Eighteen thousand and ninety-nine persons received treatment in these hospitals during the year.

In 1936 there was little change in economic conditions, and this made administration difficult for hospitals in a number of districts. A detailed statement giving general information in regard to hospital administration covering all hospitals in receipt of Government grant will be found in the report of the Hospital Division.

Division of Tuberculosis Control.

The Tuberculosis Act which was proclaimed on June 1st made available free institutional treatment for tuberculosis and clinic diagnostic services to those persons who had resided within the Province for 12 consecutive months out of 24 months immediately preceding application for such treatment or examination. Preference in accommodation is given to pulmonary and other infectious cases of Tuberculosis.

A Division of Tuberculosis Control was established during the year. Dr. A. H. Baker, who has been Medical Superintendent of the Central Alberta Sanatorium since 1920, and who has had charge of Tuberculosis work in the Province since this work was first undertaken as an activity of the Department in 1925, was appointed Director of the new Division. The central office is located at the Sanatorium, from which centre the general administrative work of the division is carried on under Dr. Baker's direction.

A branch administration and Tuberculosis Clinic has been opened in the Edmonton General Hospital. This branch handles most of the work north of Red Deer. Dr. G. R. Davison, formerly travelling diagnostician attached to the Sanatorium staff, is in charge of the northern branch.

Under the new set-up the institutional beds operated by the Department increased from 210 to 342, an increase of approximately 60%. With the establishment of the new Division of Tuberculosis Control provision was made for the extension of diagnostic service. Regular diagnostic clinic service was supplied at the following points during the year: Central Alberta Sanatorium, City Health Department, Calgary; Lethbridge, Medicine Hat, Drumheller, Edmonton, Camrose and Vegreville.

In addition to the above, a travelling clinic was conducted at the following places: Stettler, Innisfail, Red Deer, Bentley, Lacombe, High River, Gleichen Indian School, St. Paul, Elk Point, Vulcan, Hanna, Mannville, Athabasca, Slave Lake, High Prairie, McLennan, Falher, Girouxville, Peace River, Grimshaw, Notikewin, Berwyn, Fairview, Spirit River, Sexsmith, Grande Prairie, Valley View, Grouard, Jossard and Smith. Clinic examinations numbered 2,112 during the year, an increase of 17% over the previous year. Cases of active Tuberculosis discovered numbered 112, and of inactive cases 33. Approximately 60% of those with active Pulmonary Tuberculosis had been admitted for institutional treatment as at December 31st.

As pointed out in an earlier section of this report, the new Tuberculosis set-up marks a great advance in the prevention and control of this disease. With provision for additional accommodation for patients as this becomes necessary and with the extension of diagnostic facilities to make this service available throughout the Province, we may look forward to a definite improvement in the Tuberculosis situation in future years. Tuberculosis is a preventable disease,

and with the development of our new programme Alberta takes its place among the leaders in this field.

Detailed information in regard to the activities of the Division of Tuberculosis Control will be found in the report of that Division.

Mental Hygiene Division.

MOVEMENT OF PATIENTS—MENTAL INSTITUTIONS, 1936

	On Books Jan. 1, 1936		Admissions 1936		Discharges 1936		Deaths 1936		On Books Dec. 31, 1936	
	Psychotic	Mental Defectives	Psychotic	Mental Defectives	Psychotic	Mental Defectives	Psychotic	Mental Defectives	Psychotic	Mental Defectives
Oliver	427	49	72	7	17	...	17	...	465	56
Ponoka	1405	85	691	94	528	22	113	...	1455	157
Red Deer .....	...	214	...	31	...	26	...	10	...	209
Claresholm	98	2	11	1	12	...	1	...	96	3
Totals	1930	350	774	133	557	58	131	10	2016	425

This table indicates that there was an increase in the patient population in Provincial mental institutions of 161 during the year. On December 31, 1935, there were 2,280 patients in all institutions, and on December 31, 1936, there were 2,441. Since the year 1911, when the Provincial Mental Hospital in Ponoka was opened to receive patients, there has been a steady increase of from 5% to 8% annually in the patient population over the preceding year. During 1936 this increase was 7%. During the same period the ratio of hospitalized patients to general population has shown an increase from 156 per 100,000 in 1921 to 316 per 100,000 in 1936.

Congestion of patient population is becoming more acute each year in Provincial mental institutions, and particularly in the Mental Hospital at Ponoka. Increased accommodation to relieve this serious overcrowding is urgently needed. A new unit at Ponoka for the accommodation of active treatment cases is required, and would provide much better facilities for the treatment of early mental cases.

The need for additional accommodation at the Provincial Training School in Red Deer becomes more acute each year, as this institution is filled to the limit of its capacity and there is a long waiting list.

At the beginning of 1936 there were 476 patients in the Mental Institute at Oliver and at the end of the year 521, all chronic male cases. On completion of a small addition to number 3 building, 50 patients were transferred from Ponoka to Oliver early in March.

The Auxiliary Mental Hospital at Claresholm provides accommodation for 100 women patients. The population remains stationary, with the exception of occasional transfers to other institutions, and deaths. There were 100 patients in the institution at the beginning of the year and 99 at the end of the year.

The Provincial Training School for mental defectives at Red Deer provides accommodation for 217 patients, 75% of whom are of the low grade type requiring the maximum of nursing care and supervision. During 1936 there were 31 patients admitted, 12 discharged, and 10 deaths.

Mental Hygiene Clinics.

Regular clinics were held in Edmonton, Calgary, Lethbridge, Medicine Hat and Drumheller, this work being carried on along the same lines as in previous years. In the fall of the year 9 clinics were held in the Grande Prairie and

Peace River districts. Patients are referred to the mental hygiene clinics by local physicians, magistrates, welfare and other organizations. This service should be extended as soon as funds can be made available for this purpose, as the need is great. At all clinics, 393 new cases were presented and in addition 471 follow-up cases were dealt with. Two thousand five hundred and twenty-six cases have been dealt with since these clinics were first established in 1929.

The Department suffered an irreparable loss through the death of Dr. C. A. Baragar, Commissioner of Mental Institutions and Director of Mental Health, in March. Dr. Baragar became head of this service in 1931, coming to Alberta from Manitoba where he had established a reputation as an outstanding administrator and authority in the field of mental hygiene. Under his direction the administration of the Mental Hospital at Ponoka was reorganized and the mental hygiene programme of the Department developed. He was a man of the highest ideals, of broad vision and outstanding ability—a great humanitarian, with whom it was a great privilege to be associated, and to whom this Province will always be debtor.

Eugenics Board.

The work of the Eugenics Board is carried on under the authority of The Sexual Sterilization Act, which was passed in 1929. Five meetings of the Board were held during the year, including four sessions at the Provincial Mental Hospital and one at the Calgary General Hospital. One hundred and ninety-one cases were presented to the Board during the year. Nine hundred and thirteen cases have been presented to and approved by the Board since the Act was proclaimed. Seventy-seven operations were performed during the year by the surgeons appointed by the Board, bringing the total number of operations performed up to the end of 1936 to 475.

Detailed information concerning the work of the mental institutions and mental hygiene clinics will be found in the reports of the institutions and clinics.

General Administration.

A statement of revenue and expenditures for the fiscal year ending March 31, 1937, is included in this report. An analysis of this statement reveals that out of a total expenditure of \$1,574,573.17 the sum of \$1,395,207.42 was expended for the maintenance and operation of Provincial institutions, grants to hospitals and homes, and other treatment services. Only \$179,365.75, which represents 11% of the total budget of the Department, was expended for all other activities including all clinic service, vital statistics, general administration and all preventive services. This means that for every dollar expended by the Department in 1936 only 11c was spent for all purposes other than the maintenance of institutions, aid to hospitals, and grants. Until more funds are made available for preventive health purposes, it is not possible to extend these services to the residents of our rural districts.

In bringing this brief outline of the activities of the Department during 1936 to a close, I desire to express my grateful appreciation of the loyal service and splendid co-operation given by the directors and members of the staff of all divisions of the Department, including the superintendents of all institutions coming under the direction of the Department and the members of the institutional staffs. The Department is most fortunate in the quality of its personnel.

All of which is respectfully submitted.

MALCOLM R. BOW, M.D., C.M., D.P.H.,
Deputy Minister of Public Health.

Communicable Disease Division

TABLE 1

COMMUNICABLE DISEASES AS REPORTED FOR 1935 AND 1936

	1935	1936
Actinomycosis	2	...
Acute Anterior Poliomyelitis	162	18
Chickenpox	1,807	2,786
Diphtheria	28	47
Encephalitis Lethargica	2	...
Erysipelas	39	99
Infectious Mononucleosis	1	...
Measles	6,503	2,843
Meningococccic Meningitis	1	3
Mumps	1,753	1,037
Paratyphoid Fever	5	13
Typhoid Fever	50	98
Pulmonary Tuberculosis	168	356
Rubella	171	8,959
Rocky Mountain Spotted Fever	1	...
Scarlet Fever	642	2,729
Smallpox	5	56
Undulant Fever .....	...	3
Whooping Cough	763	1,793

TABLE 2

TOTAL DEATHS DUE TO COMMUNICABLE DISEASES IN THE PROVINCE OF ALBERTA FOR 1935 AND 1936

	1935	1936
Pneumonia (all forms)	450	440
Influenza (all forms)	194	340
Pulmonary Tuberculosis	266	295
Tuberculosis (all other forms)	63	87
Erysipelas	15	18
Scarlet Fever	8	23
Encephalitis Lethargica	5	3
Whooping Cough	43	73
Diphtheria	8	9
Meningococccic Meningitis	7	7
Typhoid Fever	11	20
Acute Anterior Poliomyelitis	15	4
Smallpox .....	...	1
Measles	27	25

TABLE 3

DEATHS DUE TO COMMUNICABLE DISEASES IN THE CITIES OF EDMONTON AND CALGARY FOR THE YEARS 1935 AND 1936

	Edmonton		Calgary	
	1935	1936	1935	1936
Pneumonia (all forms)	55	56	59	46
Influenza (all forms)	19	47	24	41
Pulmonary Tuberculosis	34	50	7	14
Tuberculosis (all other forms)	12	25	3	6
Diphtheria	2	3	...	...
Whooping Cough .....	...	10	1	5
Poliomyelitis	2	3	3	...
Meningococccic Meningitis	2	...	2	2
Typhoid Fever	3	5	1	4
Erysipelas	4	6	3	5
Scarlet Fever	2	5	...	4
Encephalitis Lethargica .....	...	1	3	...
Measles	3	1	...	2
Smallpox .....	...	...	...	1

TABLE 4

DEATHS DUE TO COMMUNICABLE DISEASES IN THE SMALLER CITIES,
TOWNS AND RURAL DISTRICTS FOR 1935 AND 1936

	1935	1936
Pneumonia (all forms)	336	338
Influenza (all forms)	151	272
Pulmonary Tuberculosis	94	231
Tuberculosis (all other forms)	27	56
Diphtheria	6	6
Whooping Cough	42	58
Poliomyelitis	10	1
Meningococcic Meningitis	3	5
Erysipelas	8	7
Typhoid Fever	7	11
Scarlet Fever	6	14
Encephalitis Lethargica	2	2
Measles	23	22

TABLE 5

DEATHS OF INDIANS IN THE PROVINCE DUE TO COMMUNICABLE
DISEASES FOR 1935 AND 1936

	1935	1936
Pneumonia (all forms)	70	75
Influenza (all forms)	19	41
Pulmonary Tuberculosis	131	157
Tuberculosis (all other forms)	21	32
Whooping Cough	11	30
Poliomyelitis	1	.....
Typhoid Fever	1	1
Measles	12	8

TABLE 6

MORBIDITY AND MORTALITY RATES IN THE MORE COMMON COMMUNICABLE
DISEASES FOR THE YEAR 1936

(Basis of rates—772,782 population)

	Total Cases	Total Deaths	Morbidity rates per 100,000	Mortality rates per 100,000
Acute Anterior Poliomyelitis	18	1	2.3	.....
Cerebro-spinal Meningitis	3	7	.....	1
Diphtheria	47	9	6.0	1
Erysipelas	99	18	13.0	2
Encephalitis Lethargica .....	.....	3	.....	.....
Influenza (all forms)	N.R.	340	.....	44
Mumps	1,037	.....	134.0	.....
Measles	2,843	25	368.0	3
Pulmonary Tuberculosis	356	295	48.0	38
Pulmonary Tuberculosis (Indians excepted) ..	.....	87	.....	11
Pneumonia (all forms)	N.R.	440	.....	57
Smallpox	56	1	7.0	.....
Scarlet Fever	2,729	23	343.0	9
Typhoid Fever	111	20	14.40	2
Whooping Cough	1,793	73	232.0	9

N.R.—Not reportable or not reported.

CASES OF COMMUNICABLE DISEASES REPORTED IN 1936

SCARLET FEVER

1936	Sex		MONTHS												AGES						TOTAL				
	Male	Female	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	0-1	1-4	5-14	15-24	25-44	45-59		60-over	Not Stated		
			628	651	29	22	51	47	98	143	99	55	91	238	178	143	971	102	59	4		1		1279	
Cities:																									
Calgary	7	10	70	67	54	25	17	11	4	16	21	24	33	1	1	12	2	1	1	17	1	1	1	1	
Drumheller	192	170	12	24	22	11	14	8	3	3	8	13	13	1	1	78	35	12	12	362	3	3	3	3	
Edmonton	50	79	12	24	22	11	14	8	3	3	8	13	13	1	1	24	72	16	13	129	3	3	3	3	
Lethbridge	21	36	12	11	2	3	1	2	6	2	1	5	2	2	3	44	5	5	5	57	1	1	1	1	
Medicine Hat	4	12	1	1	1	1	1	1	1	1	1	1	1	1	1	9	6	6	6	16	1	1	1	1	
Red Deer	3	7	1	1	1	1	1	1	1	1	1	1	1	1	1	2	1	2	2	10	1	1	1	1	
Wetaskiwin	144	123	19	32	43	20	13	10	9	5	6	37	43	30	2	28	181	37	14	1	4	4	4	4	
Towns and Villages	278	313	46	62	42	21	17	34	31	15	37	91	120	75	7	83	356	77	51	4	13	13	13	13	
Rural Districts	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Indian Reserve																									
Totals	1328	1401	188	219	215	128	160	209	153	97	161	409	443	347	13	364	1883	281	157	9	22	22	22	22	

CHICKEN-POX

1936	Sex		MONTHS												AGES						TOTAL				
	Male	Female	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	0-1	1-4	5-14	15-24	25-44	45-59		60-over	Not Stated		
			406	330	26	43	11	3	63	120	69	26	30	163	117	65	5	46	655	22		7		1	
Cities:																									
Calgary	2	4	170	46	17	19	20	32	47	49	65	123	340	341	40	261	888	63	16	1	1	1	1	1	
Drumheller	623	646	17	46	17	19	20	32	47	49	65	123	340	341	40	261	888	63	16	1	1	1	1	1	
Edmonton	35	48	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	
Lethbridge	19	17	9	5	5	1	1	1	2	2	1	15	13	5	7	27	2	2	2	2	2	2	2	2	
Medicine Hat	11	13	9	5	5	1	1	1	2	2	1	15	13	5	7	27	2	2	2	2	2	2	2	2	
Red Deer	3	1	2	2	2	1	1	1	2	2	1	2	2	2	1	37	183	19	3	1	1	1	1	1	
Wetaskiwin	106	137	11	40	9	9	21	32	9	1	33	44	28	6	1	37	183	19	3	1	1	1	1	1	
Towns and Villages	208	177	6	35	34	16	48	41	56	23	24	33	47	22	7	50	272	49	7	2	2	2	2	2	
Rural Districts																									
Totals	1413	1373	222	174	76	53	155	227	183	101	153	393	577	472	53	417	2113	162	39	2	2	2	2	2	

ACUTE ANTERIOR POLIOMYELITIS

1936	Sex		MONTHS												AGES						TOTAL				
	Male	Female	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	0-1	1-4	5-14	15-24	25-44	45-59		60-over	Not Stated		
			1 <th>1<th>1<th>1<th>1<th>1<th>1<th>1<th>1<th>1<th>1<th>1<th>1<th>1 <th>1<th>1<th>1<th>1<th>1<td></td><td></td><td></td><td></td> </th></th></th></th></th></th></th></th></th></th></th></th></th></th></th></th></th></th>	1 <th>1<th>1<th>1<th>1<th>1<th>1<th>1<th>1<th>1<th>1<th>1<th>1 <th>1<th>1<th>1<th>1<th>1<td></td><td></td><td></td><td></td> </th></th></th></th></th></th></th></th></th></th></th></th></th></th></th></th></th>	1 <th>1<th>1<th>1<th>1<th>1<th>1<th>1<th>1<th>1<th>1<th>1 <th>1<th>1<th>1<th>1<th>1<td></td><td></td><td></td><td></td> </th></th></th></th></th></th></th></th></th></th></th></th></th></th></th></th>	1 <th>1<th>1<th>1<th>1<th>1<th>1<th>1<th>1<th>1<th>1 <th>1<th>1<th>1<th>1<th>1<td></td><td></td><td></td><td></td> </th></th></th></th></th></th></th></th></th></th></th></th></th></th></th>	1 <th>1<th>1<th>1<th>1<th>1<th>1<th>1<th>1<th>1 <th>1<th>1<th>1<th>1<th>1<td></td><td></td><td></td><td></td> </th></th></th></th></th></th></th></th></th></th></th></th></th></th>	1 <th>1<th>1<th>1<th>1<th>1<th>1<th>1<th>1 <th>1<th>1<th>1<th>1<th>1<td></td><td></td><td></td><td></td> </th></th></th></th></th></th></th></th></th></th></th></th></th>	1 <th>1<th>1<th>1<th>1<th>1<th>1<th>1 <th>1<th>1<th>1<th>1<th>1<td></td><td></td><td></td><td></td> </th></th></th></th></th></th></th></th></th></th></th></th>	1 <th>1<th>1<th>1<th>1<th>1<th>1 <th>1<th>1<th>1<th>1<th>1<td></td><td></td><td></td><td></td> </th></th></th></th></th></th></th></th></th></th></th>	1 <th>1<th>1<th>1<th>1<th>1 <th>1<th>1<th>1<th>1<th>1<td></td><td></td><td></td><td></td> </th></th></th></th></th></th></th></th></th></th>	1 <th>1<th>1<th>1<th>1 <th>1<th>1<th>1<th>1<th>1<td></td><td></td><td></td><td></td> </th></th></th></th></th></th></th></th></th>	1 <th>1<th>1<th>1 <th>1<th>1<th>1<th>1<th>1<td></td><td></td><td></td><td></td> </th></th></th></th></th></th></th></th>	1 <th>1<th>1 <th>1<th>1<th>1<th>1<th>1<td></td><td></td><td></td><td></td> </th></th></th></th></th></th></th>	1 <th>1 <th>1<th>1<th>1<th>1<th>1<td></td><td></td><td></td><td></td> </th></th></th></th></th></th>	1 <th>1<th>1<th>1<th>1<th>1<td></td><td></td><td></td><td></td> </th></th></th></th></th>	1 <th>1<th>1<th>1<th>1<td></td><td></td><td></td><td></td> </th></th></th></th>	1 <th>1<th>1<th>1<td></td><td></td><td></td><td></td> </th></th></th>	1 <th>1<th>1<td></td><td></td><td></td><td></td> </th></th>	1 <th>1<td></td><td></td><td></td><td></td> </th>		1 <td></td> <td></td> <td></td> <td></td>			
Cities:																									
Calgary	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Drumheller	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Edmonton	4	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Lethbridge	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Towns	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	
Rural Districts	5	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	
Totals	14	4	3	1	2	3	3	3	2	3	3	3	3	3	1	1	4	7	5	1	1	1	1	1	

SMALLPOX

1936	Sex		MONTHS												AGES					TOTAL			
	Male	Female	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	0-1	1-4	5-14	15-24	25-44		45-59	60-over	Not Stated
Cities:	16	18		3	30	1											7	15	7	4			
Calgary	1	1																					
Edmonton	2	2				1				1							1	1	1				
Medicine Hat	6	7			1												5	4					
Towns and Villages	1	2															2						
Rural Districts																							
Indian Reserves																							
Totals	26	30	3	3	31	3	6	1		1						3	15	21	10	5	1	1	

CEREBRO-SPINAL MENINGITIS

City:	1	1																				
Calgary	1	1																				
Rural District						1																
Totals	2	1	1	1	1	1	1										1			1		

UNDULANT FEVER

City:	1																					
Edmonton	1		1																			
Town	1																					
Rural District																						
Totals	3		1							2							1		2			3

ERYSIPELAS

Cities:	9	8	1	4																		
Calgary	1	1	1	4																		
Drumheller	30	27	9	6	8	9	4	7	4	2	4	2	2									
Edmonton	1	1																				
Red Deer	6	6	1	2	1	2	1	3	1	1	1	1	3									
Towns	6	3	1	1																		
Rural Districts	1	1																				
Indian Reserves																						
Totals	52	47	11	5	7	12	14	11	10	4	4	7	5	9	1	2	4	13	30	33	14	2

GERMAN MEASLES

Cities:	863	873	241	304	438	344	246	124	11	3	7	12	4	4	2	7	79	1395	225	28	2	1736
Calgary	1	1	5	198	871	1689	1880	633	74	9	9	6	10	10	10	56	500	3780	817	222	19	5394
Drumheller	2382	3012	5	55	70	9	9	17	17	5	5	23	45	45	45	1	15	166	28	9	5	224
Edmonton	104	120	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	147
Lethbridge	58	89	6	83	45	16	21	21	21	1	1	9	43	60	25	1	4	95	65	7	7	172
Medicine Hat	70	102	2	6	7	23	6	8	8	1	1	3	6	11	16	5	5	36	8	3	3	53
Red Deer	27	26	42	135	101	103	73	71	6	4	3	6	11	16	37	12	59	362	205	22	1	571
Wetaskiwin	236	335	16	76	76	111	162	71	38	4	7	18	45	37	1	12	59	362	205	22	1	661
Towns and Villages	313	348	16	76	76	111	162	71	38	4	7	18	45	37	1	12	59	362	205	22	1	661
Rural Districts	313	348	16	76	76	111	162	71	38	4	7	18	45	37	1	12	59	362	205	22	1	661
Totals	4053	4906	304	721	1575	2303	2455	984	176	21	41	90	154	135	83	711	6297	1506	335	27	8959	

TYPHOID FEVER

Cities:	4	15	2	1	8	2	1	1	1	1	5	9	16	2	4	4	2	24	28	27	9	5	3	98
Calgary	7	15	2	1	8	2	1	1	1	1	5	9	16	2	4	4	2	24	28	27	9	5	3	98
Edmonton	3	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Lethbridge	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Medicine Hat	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Red Deer	7	6	3	2	1	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3
Towns and Villages	33	15	2	4	14	7	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3
Rural Districts	33	15	2	4	14	7	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3
Totals	54	44	5	4	19	16	5	9	5	9	16	2	4	4	4	4	2	24	28	27	9	5	3	98

PARATYPHOID FEVER

Cities:	1	8	4	3	1	1	1	1	1	1	2	2	5	1	1	1	1	3	3	6	1	13	
Calgary	1	8	4	3	1	1	1	1	1	1	2	2	5	1	1	1	1	3	3	6	1	13	
Edmonton	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Rural District	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Totals	4	9	5	3	1	1	1	1	1	1	2	2	5	1	1	1	1	3	3	6	1	13	

DIPHThERIA

City:	4	2	2	2	1	1	1	1	1	1	4	4	2	2	3	3	3	3	2	1	1	1	6
Edmonton	4	2	2	2	1	1	1	1	1	1	4	4	2	2	3	3	3	3	2	1	1	1	6
Towns and Villages	5	13	6	3	1	1	1	1	1	1	4	4	2	2	3	3	3	3	4	2	1	1	18
Rural Districts	10	13	4	6	3	1	1	1	1	1	4	4	2	2	3	3	3	3	7	6	5	1	23
Totals	19	28	10	6	5	2	2	2	2	2	10	10	4	4	5	5	5	5	6	17	12	8	47

PULMONARY TUBERCULOSIS

Cities:	24	16	3	3	3	4	2	2	6	6	2	4	4	1	2	5	1	1	24	9	1	40
Calgary	4	6	...	...	...	...	3	2	1	2	2	2	2	1	1	2	1	1	4	...	...	10
Drumheller	45	44	5	4	4	12	6	22	6	3	5	8	9	5	6	21	6	1	44	15	1	89
Edmonton	6	3	1	1	...	...	...	2	...	...	4	1	...	...	1	3	1	2	1	1	1	9
Lethbridge	5	6	...	...	...	...	4	1	1	...	1	4	1	...	2	2	...	8	1	...	11	
Medicine Hat .....	...	2	...	...	...	...	...	1	1	...	1	...	...	...	...	...	...	2	...	...	2	
Red Deer	29	50	5	3	4	3	2	17	11	13	1	6	9	5	3	26	3	37	9	2	2	79
Towns and Villages	58	51	3	6	...	3	7	22	21	14	10	7	13	3	7	28	7	53	13	3	109	
Rural Districts	1	1	...	...	...	...	...	...	1	...	...	...	...	1	...	...	...	2	...	...	2	
Unorganized Territory	1	1	...	...	...	...	...	2	...	...	...	...	1	1	...	3	1	2	...	...	2	
Indian Reserves	1	4	1	1	...	...	...	...	...	...	...	...	1	1	...	3	1	3	...	...	5	
Totals	173	183	18	18	11	22	24	68	47	37	25	32	38	16	4	90	20	176	48	8	10	356

Public Health Education Division

(F. T. Cook, *Lecturer*)

The demand for and appreciation of the health educational services of the Department were well maintained during the year.

Owing to the great reduction in funds available for travelling expenses, the programme of public lectures was greatly reduced, being the smallest since 1927. There were 74 lectures with a total audience of 11,587 people, 7,770 of whom were of school age.

Following out the policy of the Department inaugurated some years ago, of publishing and distributing up to date bulletins, the division greatly increased its activities in this direction during the closing months of the year. This was partly in response to the tremendous increase of requests coming from schools in connection with the new courses of studies introduced by the Department of Education in September for Grades I to VI and for Grade IX.

During the year, 9 new bulletins were printed, and many previous publications revised, making a total of 26 Departmental bulletins and leaflets now available for distribution. In addition, the Department distributes more than 50 leaflets and bulletins published by other organizations, including the Metropolitan Life Insurance Company, the Canadian Tuberculosis Association and the Canadian Welfare Council.

There were 1,500 requests for literature during the year, and approximately 17,000 bulletins and leaflets were distributed from this office, not including pre-natal, post-natal and pre-school letters distributed by the Nursing Division.

Regular weekly radio talks were given during the radio season over CKUA by directors of divisions, heads of institutions, Dr. R. B. Jenkins, and Mrs. Margaret Malone Vant, nutritionist at the University Hospital, who gave a series of talks on Food and Health.

During the Edmonton Exhibition week a particularly fine nutritional exhibit was shown, under the general direction of Mrs. Vant, side by side with a good exhibit on the protection of water supplies under the direction of Mr. D. B. Menzies, provincial sanitary engineer.

Hospital Inspection Branch and Medical Inspector's Report of Operations

(E. A. BRAITHWAITE, M.D., *Inspector of Hospitals*)

With the exception of those in the Peace River area, all approved hospitals in the Province were inspected. The total number of inspections was 76.

The total number of operations, taken from the weekly hospital operation reports, was 31,082, and the number of deaths following operations was 526.

The following is a list of operations performed and deaths which occurred in the approved, municipal and private hospitals during the year 1936:

	Approved	Deaths	Municipal	Deaths	Private	Deaths
GENERAL:						
Abscess	513	26	148	5	1	1
Adenectomy	6	.....	1	.....	.....	.....
Adhesions	161	2	16	.....	5	.....
Albees Operation .....	.....	.....	.....	.....	.....	.....
Amputation	312	2	56	4	7	1
Anus	4	.....	.....	.....	.....	.....
Appendectomy	4957	85	1168	23	21	.....
Arthrodesis	29	.....	1	1	.....	.....
Aspiration	45	2	7	1	1	.....
Bone Graft	4	.....	.....	.....	.....	.....
Bone Plating	8	.....	.....	.....	.....	.....
Bowel	32	20	10	7	1	1
Bronchoscopy	7	.....	.....	.....	.....	.....
Bunionectomy	14	.....	3	.....	.....	.....
Burns	16	.....	.....	.....	.....	.....
Cancer	151	96	9	12	1	.....
Carbuncle	16	1	7	.....	.....	.....
Cauterization	38	.....	3	.....	.....	.....
Cecopexy	8	.....	.....	.....	.....	.....
Cholecystectomy	350	18	67	4	.....	.....
Circumcision	429	7	106	.....	.....	.....
Colostomy	33	1	4	1	.....	.....
Craniotomy	10	.....	.....	.....	.....	.....
Curetting	41	.....	9	.....	.....	.....
Cystectomy	14	.....	.....	.....	.....	.....
Cystoscopy	483	.....	6	.....	.....	.....
Cystotomy	110	1	5	.....	.....	.....
Cysts	39	1	4	.....	1	.....
Decompresia	17	1	1	.....	.....	.....
Dilatation	10	2	2	.....	.....	.....
Dislocation	75	.....	15	.....	.....	.....
Enterectomy	1	1	2	.....	.....	.....
Epididymotomy	7	.....	.....	.....	.....	.....
Examination	107	.....	11	.....	.....	.....
Excision	285	.....	52	.....	1	.....
Extraction Teeth	325	.....	157	.....	2	.....
Fasciotomy	2	.....	1	.....	.....	.....
Fistula	54	2	5	1	.....	.....
Foreign Body	81	.....	6	.....	.....	.....
Fracture	1025	9	228	.....	2	.....
Fulguration	32	.....	6	.....	.....	.....
Gastrectomy	6	1	.....	.....	.....	.....
Gastroenterostomy	71	1	9	.....	.....	.....
Gastrostomy	6	.....	1	.....	.....	.....
Hammer Toe	7	.....	.....	.....	.....	.....
Hare Lip	18	2	2	.....	.....	.....
Haemorrhoidectomy	261	.....	37	.....	1	.....
Herniotomy	595	16	158	5	2	.....
Hydrocele	42	1	6	.....	.....	.....

	Approved	Deaths	Municipal	Deaths	Private	Deaths
Ileocolostomy	29					
Incision	432	1	77	4	2	
Injection	157	1	14			
Jejunostomy	12			1		
Laminectomy	1					
Laparotomy	211	3	36	3	6	
Ligation	43		8			
Lithotomy	1					
Lobectomy	36					
Manipulation	297		31			
Nephrectomy	34	5	4			
Nephrotomy	2					
Orchidectomy	16		2			
Osteoplasty	11					
Osteomyelitis	96	4	16			
Peritonitis	11	16	2	5		
Plaster Cast	190		25			
Plastic	48					
Proctoscopy	37		5			
Prostatectomy	155	16	7	2		
Puncture	14	1				
Pyloroplasty	9		2			
Removal	577	1	108		7	
Repair	344	1	82			
Resection	322	3	31			
Sequestrectomy	9					
Skin Graft	21		8			
Splenectomy	1					
Suturing	286		86		1	
Sympathectomy	1					
Synovectomy	1					
Tenoplasty	1					
Tenotomy	15					
Thoracotomy	7					
Thyroidectomy	365	7	42	2		
Transfusion	541		19	2		
Tumor	118	9	11	2		
Tuberculosis	26	8	5	2		
Urethrotomy	4		2	1		
Varicocele	18		2			
Vasectomy	43					
Wounds	151	7	47	2	4	
OBSTETRICS:						
Abortion	239	6	61	1	2	
Adhesions	14					
Cervix	176	2	31	1	1	
Caesarean Section	51	2	7			
Cauterization	84		9			
Colporrhaphy	63		4	1		
Colpotomy	9		1			
Curretage	603	1	98		1	
Dilatation	322		22		1	
Examination	41		22			
Hysterectomy	193	1	54			
Induction Labor	9	1	3			
Insertion Radium	46					
Oophorectomy	78		9			
Ovariectomy	21		5			
Perineorrhaphy	238	1	17		1	
Salpingectomy	329		44		1	
Salpingo-Oophorectomy	49					
Sterilization	16		4			
Trachelorrhaphy	48		9			
Uterus	145	22	50	4	2	
EYE, EAR, NOSE, THROAT:						
Abscess	24	1	7		1	
Adenoidectomy	52		9			
Antrum	24		2			
Cataract	97	1	2			
Cautery	6		1			
Cysts	3		1			
Dacryocystectomy	7					
Dilatation	4		2			
Enucleation Eye	55		2			
Esophagoscopy	6		1			
Ethmoidectomy	1					
Examination	5		1			
Excision	5		1			
Foreign Body	18		1			

	Approved	Deaths	Municipal	Deaths	Private	Deaths
Glaucoma	3	.....	.....	.....	.....	.....
Iridectomy	52	.....	.....	.....	.....	.....
Mastoidectomy	236	5	18	.....	.....	.....
Myomectomy	1	.....	.....	.....	.....	.....
Myringotomy	2	.....	.....	.....	.....	.....
Paracentesis	60	1	3	.....	.....	.....
Polypi	29	.....	6	.....	.....	.....
Pterygium	11	.....	.....	.....	.....	.....
Submucous Resection	65	.....	1	.....	.....	.....
Synectomy	48	.....	1	.....	.....	.....
Tenotomy	2	.....	.....	.....	.....	.....
Tonsillectomy	3477	1	784	.....	25	.....
Tracheotomy	1	.....	.....	.....	1	.....
Turbineotomy	27	.....	.....	.....	.....	.....
Tonsils and Adenoids	3291	.....	740	.....	9	.....
Total number of operations in hospital					31,082	
Total number of deaths from operation					526	
Percentage					1.06	

In addition to the operations classified above, the following operations were performed by the Travelling Clinic:

Tonsils and Adenoids	393
Circumisions	16
Other Minor Operations	1

Seventy private hospitals and baby shelters were inspected during the year. Owing to bad roads it was impossible to complete the inspections.

Eighty-three licenses were issued.

Five institutions in which children are kept were also inspected.

Provincial Laboratory

(ALLAN C. RANKIN, C.M.G., M.D., D.P.H., *Provincial Bacteriologist*)

Working conditions in the laboratory have not changed during the past year. As previously reported, we have in recent years been carrying on in overcrowded quarters with a complement of staff hardly sufficient to adequately deal with the mass of material sent in for examination. An increase of about 19,000 examinations brings the total for the year to 129,947. Last year's report sets forth the disproportion existing between available funds and the work required.

The nature of the work has not varied, and we continue to be hampered by the amount of material sent for examination in relation to diseases of animals, a matter referred to in last year's report. Various public health problems in relation to the control of infectious and other diseases have received consideration, and the presence of Rocky Mountain Fever has been demonstrated in the Province by recognized laboratory methods. The provisions of section 46 of The Hospital Regulations, again in force, have added to the work of the Department of Pathology for which special funds have been made available.

As yet no provision has been made in connection with the Medico-legal examinations made possible by the trained staff and the equipment of the laboratory.

Our associations with various University Departments are of considerable advantage. The staff have carried out the arduous duties satisfactorily, and I take pleasure in expressing appreciation.

The details of the year's work are included in the accompanying tables.

TABLE No. 1

WORK PERFORMED IN THE PROVINCIAL LABORATORY DURING THE YEAR 1936				
	Total 1935	Total 1936	Increase	Decrease
Sputum	738	773	35	.....
Diphtheria	1,008	1,796	788	.....
Typhoid Fever	274	507	233	.....
Milks	1,953	1,786	.....	167
Waters	1,442	1,863	421	.....
Miscellaneous Examinations	2,680	3,047	367	.....
Mothers' Milks	8	9	1	.....
Urinalysis	157	136	.....	21
Medico-Legal Examinations	16	0	.....	16
Bloods for the Wassermann Test	21,501	23,042	1,541	.....
Smears for the Gonococcus	4,027	4,107	80	.....
Icterus Index Determination	25	21	.....	4
Van Den Bergh Determination	7,142	4,673	.....	2,469
Pathological Histological Material	7,294	8,596	1,302	.....
Blood Smear Examinations	84	99	15	.....
Post-mortem Examinations	211	239	28	.....
Ascheim Zondek Examinations	130	137	7	.....
Cerebro-spinal Fluid Examinations	1,634	1,644	10	.....
Bacteriological Post-mortem Examinations	42	62	20	.....
B. Abortus Examinations	251	438	187	.....
B. Tularensis Examinations	241	438	197	.....
Chicken Blood Examinations	61,678	74,321	12,643	.....
Cattle Blood Examinations	318	1,122	804	.....
Typhoid Vaccine (25 cc. quantity)	187	628	441	.....
Autogenous Vaccine (25 cc. quantity)	43	35	.....	8
B.C.G. Vaccine (10 cc. quantity)	249	289	40	.....
Poliomyelitis Convalescent Serum:				
(20 cc. quantity)	410	38	.....	372
(25 cc. quantity) Toronto .....	.....	25	25	.....
B. Abortus Vaccine (5 cc. quantity)	405	70	.....	335
	114,148	129,947	19,185	3,386

TABLE No. 2

Table No. 2 shows the number of water and milk, special and blood containers prepared and distributed during the year:

	1935	1936
Water Containers	1,126	1,570
Special Containers	1,939	1,907
Wassermann Containers	14,799	22,063
Chicken Blood Containers	61,678	74,321
Total	79,542	99,861

TABLE No. 3

The following table shows the number of cubic centimeters of autogenous and other vaccines prepared and distributed during the year:

	1935	1936
Typhoid Vaccine	4,675 c.c.	15,700 c.c.
Autogenous Vaccine	1,075 c.c.	875 c.c.
B.C.G. Vaccine	2,490 c.c.	2,890 c.c.
Poliomyelitis Convalescent Serum	8,190 c.c.	1,385 c.c.
B. Abortus Vaccine	2,025 c.c.	350 c.c.
Total	18,455 c.c.	21,200 c.c.

Increase in the preparation and distribution of Vaccines and Serums—2,745 c.c.

TABLE No. 4

Table No. 4 shows the detail of some of the work done by the laboratory in relation to the control of infectious diseases:

Diseases	No. of Posi- tives	No. of Nega- tives	No. of Post Offices	No. of Physi- cians	Month.	Sputum.	Diph.	Typhoid Fever.	Total.
Pulmonary Tuberculosis	109	674	.....	.....	Jan.	68	192	27	287
					Feb.	62	125	43	230
					Mar.	61	136	56	253
					April	47	69	25	141
Diphtheria	38	1758	.....	.....	May	79	146	29	254
					June	72	102	44	218
					July	69	102	35	206
					Aug.	58	123	88	269
Typhoid Fever	126	381	.....	.....	Sept.	52	93	63	208
					Oct.	88	554	26	468
					Nov.	47	210	34	291
					Dec.	70	144	37	251
Total			118	297		773	1796	507	3076

TABLE No. 5

Table No. 5 shows the number of blood examinations by the complement fixation test for the diagnosis of syphilis:

Bloods received	23,101
Bloods examined	23,042
Bloods positive to reaction	2,598
Bloods negative to reaction	18,442
Bloods unsuitable for examination	59
Male Bloods examined	12,355
Female Bloods examined	6,051

Out of 23,042 of these the following details can be given:

Male married	2,978
Male married positive	487
Male married negative	2,491
Male single	6,429
Male single positive	945
Male single negative	5,484
Female married	3,476
Female married positive	424
Female married negative	3,052
Female single	2,300
Female single positive	306
Female single negative	1,076

Bloods received from Calgary and south	6,145
Bloods received from north of Calgary	16,897
Number of Blood examinations made in 1935	21,501
Number of Blood examinations made in 1936	23,042
Increase in number of specimens examined	1,541
Increase in per cent.	7.1%

TABLE No. 6

Table No. 6 gives the details of the bacteriological and chemical examination of water performed throughout the year:

Waters	1935	1936
Number of samples of water examined bacteriologically and found fit for human consumption	778	843
Number of samples of water examined bacteriologically and found unfit for human consumption	35	115
Number of samples of water examined bacteriologically and chemically and found fit for human consumption	600	662
Number of samples of water examined bacteriologically and chemically and found unfit for human consumption	40	124
Number of samples of water examined chemically and found fit for human consumption	45	82
Number of samples of water examined chemically and found unfit for human consumption	13	19
Number of samples of ice examined bacteriologically and found fit for human consumption	19	18
Number of samples of ice examined bacteriologically and found unfit for human consumption	1	.....
Total	1,531	1,863

TABLE No. 7

Table No. 7 gives the details of the bacteriological, bacteriological and chemical, and chemical examination of milk performed during the year:

Number of samples of milk examined bacteriologically	1,707	1,574
Number of samples of milk examined bacteriologically and chemically	214	205
Number of samples of milk examined chemically	32	7
Total	1,953	1,786
Number of samples of milk examined showing low butter fat	23	30
Number of pasteurized milk samples examined bacteriologically with a bacterial count above 30,000	51	73
Number of non-pasteurized milk samples examined bacteriologically with a bacterial count above 300,000	73	71
Number of pasteurized milk samples examined	668	667
Number of non-pasteurized milk samples examined	1,285	1,119

SERUMS AND VACCINES DISTRIBUTED JANUARY, 1936, TO DECEMBER, 1936

Smallpox Vaccine:		
10 points	5,975 pkgs.	59,750 points
5 points	138 pkgs.	690 points
Total		60,440 points
Diphtheria Antitoxin:		
1,000 units	1,677 pkgs.	1,677 units
5,000 units	142 pkgs.	710,000 units
20,000 units	340 pkgs.	6,800,000 units
Total		9,187,000 units
Diphtheria Toxoid:		
1 person	2,923 pkgs.	2,923 persons
6 persons	988 pkgs.	5,928 persons
12 persons	1,359 pkgs.	16,308 persons
Total		25,159 persons
Schick Test: 25 persons	155 pkgs.	3,875 persons
Scarlet Fever Antitoxin:		
15 c.c. Vial	303 pkgs.	4,545 c.c.
15 c.c. Syringe	111 pkgs.	1,665 c.c.
2 c.c. Syringe	1,234 pkgs.	2,468 c.c.
Total		8,678 c.c.
6,000 units Vial	138 pkgs.	828,000 units
6,000 units Syringe	478 pkgs.	2,868,000 units
2,000 units Syringe	3,140 pkgs.	6,280,000 units
Total		9,976,000 units

Scarlet Fever Toxin:		
1 person	2,924 pkgs.	2,924 persons
6 persons	2,421 pkgs.	14,526 persons
Total		17,450 persons
(Special Order 100 E doses)		
Dick Test: 10 persons	866 pkgs.	8,660 persons
Tetanus:		
1,500 units	102 pkgs.	153,000 units
5,000 units	5 pkgs.	25,000 units
10,000 units	4 pkgs.	40,000 units
Total		218,000 units
Anti-Meningococcus: 20 c.c. Vial	55 pkgs.	1,100 c.c.
Pertussis:		
5 c.c.	542 pkgs.	2,710 c.c.
20 c.c.	48 pkgs.	560 c.c.
Total		3,270 c.c.
Staphylococcus Toxoid: 2 c.c. Vial	286 pkgs.	572 c.c.
Staphylococcus Antitoxin:		
25 c.c. Vial—None distributed.		
5,000 units	5 pkgs.	25,000 units
10 000 units	19 pkgs.	190,000 units
Total		215,000 units
Anti-Pneumococcus Serum: 10 c.c. Type I	25 pkgs.	250 c.c.

COMMERCIAL VALUE OF WORK IF MINIMUM CHARGE WERE MADE

Sputum	773	\$ 1.00	\$ 773.00
Diphtheria	1,796	1.00	1,796.00
Typhoid Fever	507	1.00	507.00
Milks	1,786	3.00	5,358.00
Waters	1,863	10.00	18,630.00
Miscellaneous Examinations	3,047	3.00	9,141.00
Mothers' Milks	9	2.00	18.00
Urinalysis	136	3.00	408.00
Medico-Legal Examinations	6	5.00	30.00
Bloods for Wassermann Test	23,042	3.50	80,647.00
Smears for the Gonococcus	4,107	1.00	4,107.00
Icterus Index Determination	21	1.00	21.00
Van Den Bergh Determination	4,673	1.00	4,673.00
Pathological Histological Material	8,596	5.00	42,980.00
Blood Smear Examinations	99	2.00	198.00
Ascheim Zondek Test	137	5.00	685.00
Cerebro-spinal Fluid Examinations	1,644	2.00	3,288.00
Post-mortem Examinations (Bacteriological)	62	5.00	310.00
B. Abortus Examinations	438	1.00	438.00
B. Tularensis	438	1.00	438.00
Chicken Blood Examinations	74,321	.05	3,716.05
Cattle Blood Examinations	1,122	.20	224.40
Typhoid Vaccine (25 c.c. quantity)	628	1.00	628.00
Autogenous Vaccine (25 c.c. quantity)	35	5.00	175.00
B.C.G. Vaccine (10 c.c. quantity)	289	3.00	867.00
Poliomyelitis Serum (20 c.c. quantity)	38	2.50	9,500.00
B. Abortus Vaccine (5 c.c. quantity)	70	1.00	70.00
Total	129,683		\$189,626.00
Post-mortem examinations not included.			

Public Health Nursing Division

(KATE S. BRIGHTY, R.N., *Superintendent*)

The total number of districts served by Provincial Public Health nurses are as follows: Edmonton, Calgary, Medicine Hat-Redcliff, Vegreville, Stanmore, Drumheller, Notikewin, Valley View, Kinuso, Fawcett, Peers, Pendryl, Smith, Worsley, Tangent, Lindale, Hines Creek, Blueberry Mountain, Fort Assiniboine, Plamondon, Vauxhall.

There are twenty-two members of the permanent nursing staff. Additional nurses are engaged as required for temporary assistance during the summer months.

The following nurses received appointments during the year: Miss Jean McKinley, Miss Ruth Pugh, Miss Marie J. Swan, Miss Philippa A. Chapman, and Miss Mary J. Plant.

Leave of absence was granted to the following nurses: Miss Olive F. Watherston, to visit Australia, New Zealand and Singapore, in the interests of public health nursing and maternity work; Miss Marjorie Maynes to take a post-graduate course in Public Health at the University of British Columbia; and Miss Evelyn M. Waddell to take the same course at the University of McGill, Montreal.

The work in the cities of Edmonton and Calgary is devoted entirely to child welfare, infant and pre-school clinics with follow-up work in the homes. These clinics are used as teaching centres for medical students, student nurses and students in home economics.

In the City of Edmonton the infant and pre-school clinic is supervised by Miss Blanche Emerson. One hundred clinics were held during the year, with an average attendance of 54, the total attendance being 5,432, and the number of home visits 3,807.

In addition to the above mentioned work, Miss Emerson visited 53 Diabetic cases and inspected 15 children's shelters and private nursing homes. Creche meetings were attended, and mothers of children in attendance at the Creche were investigated as to eligibility for Creche service.

In the City of Calgary the Child Welfare Clinic is supervised by Miss Marion F. Lavell. One hundred and four clinics were held, with an average attendance of 44 and a total attendance of 6,991. A total of 2,446 home visits were made.

An added duty of the Public Health nurse in Calgary is the inspection of baby homes and private hospitals. One hundred and nine interviews and visits of inspection were made in this connection, and 30 investigations were made in connection with Diabetic cases.

In Medicine Hat and Redcliff the work is supervised by Miss M. E. Hagerman. One hundred and twenty-three clinics were held during the year, with a total attendance of 1,932, and 1,576 home visits were made.

In addition to the above mentioned services, the Public Health nurse, Miss M. E. Hagerman, arranged for Mental Hygiene and Tuberculosis clinics, and also assists in the weekly Social Hygiene clinic. In the town of Redcliff assist-

ance was given to the local physician in connection with the vaccination of school children. Similar assistance was given in connection with immunization and vaccination of Medicine Hat school children. A number of trips were made to country points in connection with district nursing service.

In the town of Vegreville and the Municipal District of Norma No. 515, Miss Mary R. Black, Public Health nurse, carries on a generalized programme of public health nursing service and child welfare work. Forty-four child welfare clinics were held during the year, with a total attendance of 352. Inspections of school children are conducted in both town and rural schools, and assistance is given to physicians in connection with immunization against Smallpox and Diphtheria. The nurse visits the homes and keeps a close check on communicable disease cases and contacts.

In the City of Drumheller and surrounding Local Improvement District No. 276 the work is carried on by Miss Ethel Jones, who conducts a generalized programme of public health nursing in that district. An important feature of the work is the inspection of school children. The continued support of the Women's Institute of Drumheller is much appreciated in connection with this division of the work, in that under-nourished children have received a supply of free milk at the lunch hour. Recommendations for the distribution of this supply comes through the Public Health nurse. A weekly Child Welfare Clinic is conducted for infant and pre-school children, Mental Hygiene and Tuberculosis clinics arranged for, nursing assistance at these clinics being given by the Public Health nurse. Through the close co-operation of the Kinsmen Club an extensive Tuberculosis campaign has been launched under the direction of Dr. A. H. Baker, Director, Division of Tuberculosis Control. For this work the services of an additional nurse were required and were provided by the club.

In the Stanmore district, which includes the Municipal District of Richdale No. 274, there is a modified bedside nursing service in addition to the generalized programme of public health nursing conducted by Miss Margaret E. Carpenter, stationed at Stanmore.

The following is the statistical report of the work done in these districts:

STATISTICAL REPORT			
First inspections	1,931	With defective vision	269
Second inspections	802	With defective hearing	64
Classroom inspections	75	With throat symptoms	415
Not vaccinated	851	With adenoid symptoms	65
With defects	1,582	With carious teeth	871
Smallpox vaccinations	1,025	Surgical treatments	67
Diphtheria toxoid	902	Medical treatments	28
Glasses fitted	18	Dental treatments	126
Glasses refitted	11	Schoolroom talks	14
Interviews	172	Home visits	724
Public lectures	4	Malnutrition	170

The First Aid Hospital at the Edmonton Exhibition was in charge of Miss Blanche Emerson, and this Branch was responsible for an exhibit in the Women's Building with a nurse in attendance during the entire week.

Two hundred and eighty-two obstetrical cases were conducted by the District Nursing staff during the year. The nurses on this particular branch of work conduct these maternity cases without an attending physician. No maternal deaths occurred during the current year. Among the cases were several difficult deliveries, including twins. The district nurses are rendering an exceptionally fine type of service in the outlying districts in which they are located.

Miss Amy L. Conroy, P.H.N., in addition to her own district nursing duties, also supervises a teaching centre for district nurses. Miss Amy L. Conroy, Miss

Olive F. Watherston, Mrs. Olga Freifeld, and Mrs. Jessie Hyde are the senior nurses on this service. Through their training abroad as well as in this country they are well equipped to maintain high standards in this particular section of the Nursing Branch, and make a valuable contribution to the service in supervising and encouraging the newer members of the staff as they enter the field. The co-operation and interest on behalf of the local nursing committees in each district has been largely manifested this year in renovations to many of the nurses' cottages, and in raising money for local health projects, especially in local arrangements between the community and the Canadian Dental Hygiene Council.

A new community nursing service was opened in Wanham, in the Peace River country. This effort is supported by the community, a small grant being contributed by the Department. Supervision of the nursing service is given by the Superintendent of Public Health nurses.

I wish to draw attention to such a local programme under which a community can assume most of its own responsibility in connection with a nursing service. Such a service provides opportunity for maintenance of the same standards of teaching that prevail in the Provincial district nursing centres.

The following is the statistical report of the work done in the district nursing centres:

STATISTICAL REPORT

Home visits	4,689	Vaccinated and inoculated	1,480
Office consultations	7,287	Pre-natal consultations	719
Dressings done	1,764	Child welfare consultations	164
Medical cases	4,964	Child welfare visits	318
Surgical cases	627	Deaths, under one year	22
Obstetrical cases	258	Deaths, over one year	27
Abortions	24	Indigent cases sent to hospital	385
Pre-natal visits	382	Dental extractions	117
Pupils inspected	338	Visits to Indian Reserves	31

The Travelling Clinic visited 15 centres in the Peace River district and country west of Edmonton. The itinerary was as follows: Cherhill, Sangudo, Whitecourt, Blue Ridge, Rochfort Bridge, Wildwood, Lindale, Pendryl, Wide-water, Kinuso, Tangent, Donnelly, Wanham, Reno, Smith.

One surgeon, in charge of the clinic, 1 physician, 2 dentists, 3 nurses and 2 truck drivers made up the personnel of the service. The following is the statistical report:

Children examined	1,858	T. & A. operations	393
Recommended for T. & A's	1,143	Circumcisions	16
Recommended for stripping	94	Strippings	52
Recommended for circumcision	53	Minor operations	1
Referred to physician	50	Anaesthetics	552
Referred to hospital	57	Anaesthetics (for teeth only)	149
Prescribed for	173	Vaccinations	789

DENTIST'S REPORT

Children examined	1,943
Recommended for treatment	807
Given treatment	463
Fillings	377
Extractions	1,120

Continued interest on the part of the women of the Province has been shown in connection with the circulation of the Canadian Welfare Council literature distributed by this office. A total of 3,775 sets of pre-natal, post-natal and pre-school letters were mailed in 1936. Literature prepared by the Department of Public Health has also been distributed upon request.

A series of radio talks over CKUA and addresses to women's organizations have been given. Much correspondence dealing with home problems and diets of mothers, infants and the adolescents has been dealt with. An inspection of

each nursing centre in the Province has been made by the Superintendent during the year.

I wish to thank the members of the entire staff of the Nursing Branch for their loyalty and co-operation in the work. Our thanks are also due to the physicians throughout the Province who have so generously given of their time to the Child Welfare clinics. In conclusion I wish to express my sincere appreciation of the splendid co-operation given at all times by service clubs, philanthropic organizations and women's organizations.

Hospitals Division

(L. A. PATTERSON, *Secretary of Department of Public Health*)

The total number of hospitals approved under the provisions of The Hospitals Act of the Province of Alberta, as at the 31st of December, 1936, was 84.

The total grant paid to hospitals and homes for the year 1936 amounts to \$448,270.75.

The approved hospitals had a total bed capacity of 4,639, divided as follows: General 2,428, maternity 620, infants 684, paediatrics 329, isolation 222, tuberculosis 342.

On the basis of a population in the Province of 772,782, we had one hospital bed for every 167 of the population, or 6 beds per thousand population; 86,192 patients were treated during the year, and received 1,092,856 days' treatment. This means that in 1936 hospital treatment was provided for 11 per cent. of the population, or 1 in every 9 persons.

There was an average daily admission of patients to hospital of 236.1. The average number of days spent in hospital by each patient was 12.7.

If the isolation and Sanatorium cases and orthopaedic, S.C.R. and Tuberculosis cases in the University Hospital were eliminated, this would be reduced to an average of 11.1. The average number of patients in hospital daily was 2,994.12, or 1 in every 258.1 of our population. Each bed provided accommodation for 18.5 patients during the year.

The nursing staff of the approved hospitals consisted of 568 graduate nurses, 701 pupils nurses and 219 other attendants.

There were 10 nurses' training schools in the Province, and the number of nurses who graduated during the year was 224. There were 13 dietitians employed.

During the year 9,987 maternity cases were cared for. These cases comprised 11.6 per cent. of the total cases admitted.

Living births were: Male 4,711, female 4,540, making a total of 9,251. Multiple births totalled 73, and there were 256 stillborn.

The maternal deaths reported were 29, thus giving a total death rate of .29 per cent. of total maternity cases admitted, and 3.1 per thousand living births.

The living births in Alberta for 1936 were 15,786. Of this number, 58.6 per cent. took place in Government approved hospitals.

The approved hospitals reported that 26,317 general anaesthetics were administered, and 5 deaths occurred from these.

There were 409 autopsies performed. Infections developed in hospital totalled 251, divided into: Medical 95, surgical 59, obstetrical: mothers 44, infants 53.

The number of communicable disease cases treated, excluding typhoid fever and tuberculosis, totalled 2,513. Typhoid fever numbered 113 and tuberculosis 858 (pulmonary 654, other forms 204).

Amongst other cases treated in hospital there were 1,717 cardiac, 818 rheumatic, 589 goitre, 448 venereal, and 1,118 malignant.

There were 321 deaths within ten days of surgical operations, and 535 within 48 hours after admission. Communicable diseases accounted for 147 deaths.

The approved hospitals reported 169,818 laboratory examinations and 36,137 X-ray examinations.

The total operating expenditure of approved hospitals for the year 1936 was \$2,729,683.17, divided as follows: Administration \$284,477.00, professional care \$1,033,626.00, kitchen and dining room \$645,233.50, general house and property, \$538,380.91, maintenance \$227,965.76.

Earnings of these hospitals amounted to \$3,560,590.76.

On referring to the details of the earnings, a difference will be noted in the total amounts shown as paid by Government grant and the amount stated previously in this report. This is accounted for by the fact that homes have not been included in this report, and quite a number of the hospitals presented financial statements covering a fiscal year which differs from the calendar year.

Of the earnings shown, \$471,916.24 was from Government grant; municipal and other grants, which included amounts paid by municipalities to take care of deficits, amounted to \$279,134.29; patients' fees earned amounted to \$2,355,336.59; donations of cash and services were \$89,137.05; taxes for municipal hospital purposes were \$278,318.43; the sundry earnings amounted to \$86,748.16.

The average cost per patient day was \$2.69. Excluding the Isolation, Junior Red Cross, Sanatorium, University Hospital and hospitals operating incurable wards, the average cost was \$2.59. The average earnings per patient day was \$3.26. The average cost was divided as follows: Administration 10.4%, professional care 37.8%, kitchen and dining room 23.7%, house and property, 19.7%, maintenance 8.4%.

The statistical and financial information given in this report has been obtained from financial and statistical returns received from the approved hospitals for the year 1936.

The following statements are submitted giving the details of each approved hospital in the Province:

No. 1—Bed capacity, number of patients, number of days, nursing staff, etc.

No. 2—Nursing statistics, cases treated, anaesthetics, autopsies, etc.

No. 3—Expenses of administration, professional care, kitchen and dining room, house and property, maintenance, reserves and capital repayments.

No. 4—Revenues.

No. 5—Costs per patient day and earnings per patient day with percentage of costs under the different divisions of expenses.

MUNICIPAL HOSPITALS

The statistics of Municipal Hospitals will be found with the other approved hospitals of the Province.

There were 21 Municipal Hospitals in operation in 1936.

The Onoway Municipal Hospital was closed on June 30, 1936, pending proposed disestablishment.

No. 1—STATISTICS OF ALBERTA HOSPITALS, 1936

Name of Hospital	Bed Capacity										Patients Admitted for Treatment						Nursing Staff			Nurses graduated during year	Affiliation with other hospitals	Dietitians	
	General	Maternity	Infants	Paediatrics	Isolation	Tuberculosis	Total	Private	Semi-Private	Public	Bassinettes	Male	Female	No. of hospital days	Aver. days stay in hospital	Aver. No. of patients in hospital daily	Graduates	Pupil nurses	Other attendants				Nurses' training school
Athabasca, Municipal	27	7	3	3	1	44	20	25	37	7	287	316	6,695	11.1	18.4	7	1	1	1	1			
Banff, Mineral Springs	36	5	4	4	1	50	20	30	13	6	141	172	5,917	18.9	16.2	5	4	4	4	4			
Earthead, Barrhead	8	6	2	2	4	23	1	3	13	6	340	333	6,112	9.1	16.7	4	2	2	2	2			
Bassano, Municipal	16	8	6	2	4	36	10	15	5	6	186	305	4,404	9.0	12.1	5	5	5	5	5			
Bentley, Community	6	2	3	3	1	11	7	4	1	3	131	198	2,455	7.5	7.0	3	3	3	3	3			
Berwyn, Association of Peace	7	4	5	1	1	17	3	6	4	4	37	62	873	8.8	2.4	3	2	2	2	2			
Bonnyville, K.H.P.	15	5	5	5	5	25	6	6	20	5	157	229	5,250	13.6	14.4	3	3	3	3	3			
Bonnyville, St. Louis	23	7	5	5	5	40	6	6	23	5	180	304	5,003	10.3	13.7	4	4	4	4	4			
Calgary, General	149	23	24	19	70	215	27	53	111	24	2,454	3,138	75,186	13.4	206.0	13	100	6	Yes	32	Yes	2	
Calgary, Isolation						70			70		420	422	22,343	26.5	61.2	7							
Calgary, Smallpox																							
Calgary, S.A. Grace	197	31	30	12	10	280	35	48	167	30	2,368	2,906	60,864	11.5	166.7	18	100	4	Yes	24		1	
Calgary, Holy Cross						38			38		33	51	8,287	98.7	22.7	5							
Calgary, Junior R.C.						210			210		186	177	77,188	212.6	211.4	12							1
Calgary, C.A.S.	25	11	10	4	1	50	6	34	10	10	421	619	7,309	7.0	20.0	4	4	4	4	4	4		
Cardston, Municipal	14	6	10	1	1	32	1	2	22	10	311	513	5,635	6.8	15.4	5	5	5	5	5	5		
Carmangay, Carmangay	5	3	3	3	3	8	1	2	2	3	78	102	1,014	5.6	3.0	2	2	2	2	2	2		
Castor, Rosary	20	5	7	7	7	32	17	8	7	7	110	196	2,861	9.4	7.8	4	4	4	4	4	4		
Cereal, General	8	4	2	2	2	18	2	2	4	2	92	134	1,820	8.1	5.0	2	2	2	2	2	2		
Clareholm, General	16	4	3	3	3	23	3	3	16	2	232	268	4,194	8.4	11.5	4	4	4	4	4	4		
Cold Lake, John Nell	12	4	3	3	3	19	3	3	16	3	158	240	4,303	10.8	11.3	4	4	4	4	4	4		
Coleman, Miners' Union	13	5	5	5	5	23	2	2	13	3	140	80	2,359	10.7	6.4	3	3	3	3	3	3		
Consort, Municipal	10	4	4	4	4	23	2	2	12	7	167	328	4,575	9.2	12.5	4	4	4	4	4	4		
Coronation, General	18	4	1	1	1	23	6	2	14	1	117	185	3,105	10.3	8.5	3	3	3	3	3	3		
Daysland, Providence	25	5	5	5	5	34	5	25	4	4	148	173	3,194	9.9	8.7	6	6	6	6	6	6		
Desmarais, St. Martin's	7	4	6	6	6	17	16	16	11	6	102	188	2,339	8.1	6.4	3	3	3	3	3	3		1
Didsbury, General	57	15	15	5	2	96	16	55	10	15	1,458	1,058	27,387	10.9	75.0	14	14	14	14	14	14		
Drumheller, Municipal	38	6	55	5	2	99	6	6	38	55	86	214	4,678	15.6	12.8	2	2	2	2	2	2		
Edmonton, Beulah Home	102	18	18	38	65	241	19	14	190	18	1,712	2,045	43,689	11.6	122.4	26	84	16	Yes	12	Yes	1	
Edmonton, General	125	22	30	13	5	195	27	36	112	20	1,791	2,447	48,769	11.5	133.6	13	76	9	Yes	21	Yes	1	
Edmonton, Misericordia																							
Edmonton, S.A. Grace																							
Edmonton, Royal Alexandra																							
Edmonton, Isolation	250	50	50	50	62	400	20	30	300	50	3,892	5,519	120,496	12.8	330.1	52	114	10	Yes	37	Yes	2	
						38	100		100		420	404	30,353	36.5	82.3	13	9	3					

	247	17	17	52	20	353	19	26	291	17	2,311	2,296	82,874	17.9	227.0	43	89	30	Yes	34	Yes	2
Edmonton, University (Civilian)											545	37	16,822	30.9	46.1							
Edmonton, University (S.C.R.)											45	37	5,687	69.3	15.6							
Edmonton, University (Orthopaedic)											59	30	7,079	79.5	19.4							
Edmonton, University (Tuberculosis)											412	400	7,702	9.5	21.1	7		2				
Edson, St. John's	23	5	5	3	1	37	4	8	20	5	454	587	9,076	8.7	24.9	5		3				
Elk Point, Municipal	12	4	4		1	20	1	2	13	4	454	587	9,076	8.7	24.9	5		3				
Empress, Cottage	12	4	4		1	22			17	5	292	338	4,160	6.6	11.4	4						
Fairview, W.I.	6	3	3			12			3	3	130	167	1,861	6.3	5.1	2						
Fort Vermilion, St. Theresa	4	2	1	1	1	2	3	2	4	1	44	54	1,658	16.9	4.5	1						
Galahad, St. Joseph's	12	5	4	3		24	3	11	6	4	178	234	3,699	8.9	10.1	5						
Grande Prairie, Municipal	33	6	12	4	1	57	3		42	12	534	675	13,858	11.5	38.0	10						1
Hanna, Municipal	37	7	10	4	2	60	4		50	10	381	526	9,149	10.1	25.6	7						
Hardisty, St. Anne's	16	4	4	4		24	4	4	12	4	205	336	4,782	8.8	13.1	4						
High Prairie, Community	4	3	2	1		10	4	3	1	2	71	60	1,410	10.8	3.9	2						
High River, Municipal	29	7	7	4		47	4	36	38	8	370	560	9,967	10.7	27.3	8						
Innisfail, Municipal	30	8	8			46	4		15	4	390	614	11,623	11.6	31.8	5						
Islay, Municipal	11	4	4	4		19	3		7	4	204	106	3,795	12.2	10.4	3						
Jasper, Seton	10	3	4	1		18	3	4	7	4	204	106	3,795	12.2	10.4	3						
Killam, General	8	4	3	1		16	2	4	7	3	105	145	2,562	10.2	7.0	4						
Lacombe, General	10	4	3	1		17	5	4	4	4	226	321	3,314	6.1	9.1	4						
Lamont, Public	50	8	8	7	5	78	9	22	39	8	787	1,171	19,415	9.9	53.2	4		1	Yes	6		
Lethbridge, Galt	71	16	16	8		111	22	20	53	16	1,556	1,755	34,340	10.4	94.0	16		4	Yes	6		
Lethbridge, Isolation						14			14	14	45	57	2,210	21.6	6.1							
Lethbridge, St. Michael's	55	29	21	12	4	121	32	18	50	21	1,404	1,791	29,375	9.2	80.5	33		10				1
Lloydminster, Municipal	37	13	14	6	2	76	6	2	54	14	733	1,013	22,026	12.6	60.3	13		2				
Macleod, General	9	6	6		2	23	1	2	14	6	88	130	2,230	6.1	14.1	3		3				
Mannville, Municipal	6	4	4			14			14	10	156	242	5,165	12.9	14.1	3						
Medicine Hat, General	83	23	22	9	4	141	14	14	91	22	1,190	1,516	28,765	10.6	78.8	8		7	Yes	8		
Medicine Hat, Isolation						14			14	14	11	13	636	26.5	1.7	1						
Mundare, General	13	6	6	1	2	30	4	6	14	6	173	308	3,980	7.9	10.9	2		2				
McLennan, Sacred Heart	15	5	5	1	1	27	3	3	19	5	272	347	7,371	11.9	20.2	4		4				
Nanton, General	5	3	3	1	1	14	4	2	5	3	53	40	988	10.6	2.7	2		3				
Nordegg, General	16					16	4	2	10	2	107	68	1,479	8.4	4.1	1		2				
Olds, General	6	4	4			14	2	5	3	4	201	294	3,252	7.1	9.7	4						
Peace River, Municipal	21	5	4			30	4		22	4	224	343	7,177	12.5	19.5	7						
Pincher Creek, St. Vincent's	18	7				25	5	9	7	4	163	199	3,217	8.8	8.8	4						
Provost, Municipal	15	5	9			29			22	7	232	342	7,190	12.5	19.7	4						
Radway, St. Joseph's	13	4	4	3		24	1		19	4	358	508	6,779	7.8	18.6	6						
Red Deer, Municipal	23	8	9			40	6	10	15	9	291	447	7,208	9.8	19.7	5						
Rimbeay, St. Paul's	10	4	6	3		24	4	14	6	180	247	4,222	9.9	11.5	4							
St. Paul, St. Theresa	18	6	8	2	6	45	5	4	30	6	358	497	6,268	7.3	17.1	7						
Smoky Lake, Geo. McDougall						10			7	3	39	53	650	7.0	1.8	2						
Spirit River, Community	6	1	3			37	4		26	7	530	740	10,131	7.9	27.7	8						
Stettler, Municipal	23	5	7	2		37	4		26	7	530	740	10,131	7.9	27.7	8						
Trochu, St. Mary's	12	7	4	2		25	7	6	8	4	127	170	2,889	9.4	7.9	2						
Vegreville, General	31	12	10	5	2	60	7	14	29	10	686	1,039	14,625	8.5	40.1	7						
Vegreville, R. M. Boswell	14	5	4			23	3	3	13	4	138	204	2,923	8.5	8.0	4				Yes	7	
Vermilion, Municipal	18	8	8	4		38	4		30	8	311	423	8,599	11.7	23.6	6						
Viking, Municipal	14	6				20	14		6	6	262	310	5,813	10.2	15.9	4						
Vilna, Our Lady's	10	4	4	3	1	22	3	4	11	4	164	272	3,924	9.0	10.7	3						

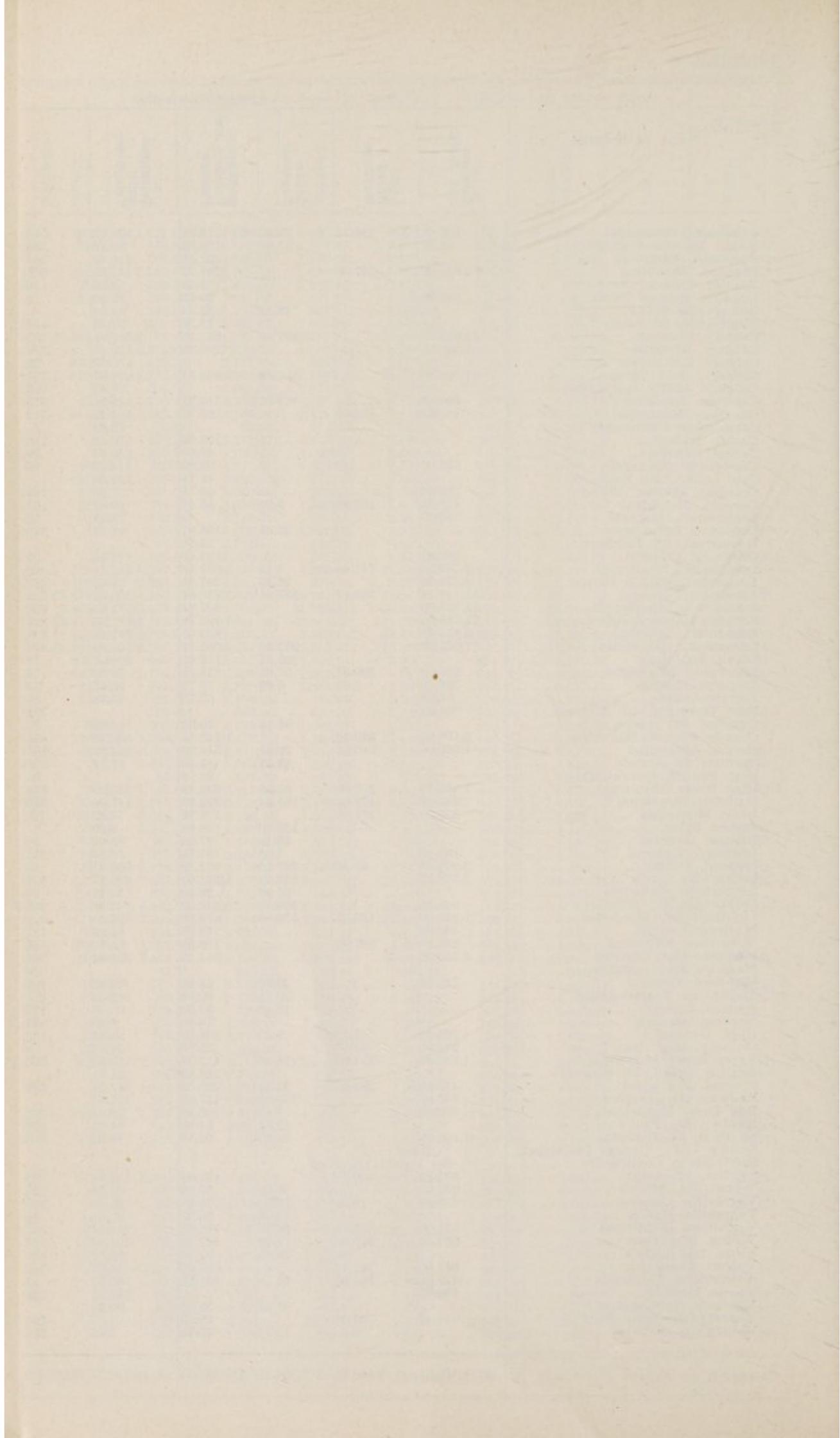
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No. 1—STATISTICS OF ALBERTA HOSPITALS, 1936—Continued

Name of Hospital	Bed Capacity										Patients Admitted for Treatment						Nursing Staff				Nurses graduated during year	Affiliation with other hospitals	Dietitians
	General	Maternity	Infants	Paediatrics	Isolation	Tuberculosis	Total	Private	Semi-Private	Public	Basinettes	Male	Female	No. of hospital days	Aver. days stay in hospital	Aver. No. of patients in hospital daily	Graduates	Pupil nurses	Other attendants				
Vulcan, Municipal	15	6	6	2	2	2	29	2	23	6	192	328	4,681	9.0	12.8	5	5	1	1	13			
Wainwright, Municipal	18	4	4	1	1	1	26	2	20	4	327	378	5,377	7.9	15.3	5	5	2	2	13			
Wayne, General	10	2	3	1	1	1	17	4	8	3	150	128	2,912	10.5	7.9	2	2	1	1	13			
Westlock, Immaculata	26	6	2	2	2	2	34	8	16	6	302	344	5,380	8.3	14.7	5	5	1	1	13			
Wetaskiwin, Community	20	7	9	3	2	1	42	4	29	9	503	625	7,970	7.0	21.8	8	8	1	1	13			
Willingdon, General	4	2	2	2	2	2	8	6	2	2	172	192	1,886	5.2	5.2	2	2	2	2	13			
	2428	620	670	329	222	370	4639	466	2826	654	38,099	48,093	1,092,856	12.7	2994.4	568	701	219	224	13			
Excluding Isolation, Sanatorium, Orthopaedic, S.C.R. and T.B. cases in University Hospital							577				1,764	1,191	170,305										
							4062				36,335	46,902	922,551	11.1	252.75								

No. 3 - EXPENSES OF ALBERTA HOSPITALS 1958

Name of Hospital	Administration										Professional Care of Patients										Kitchen and Dining Room										General House and Property, Including Wages										Maintenance										Capital Expenditures									
	Salaries	Fees	Commodities	Printing	Telephone	Postage	Travel	Supplies	Repairs	Other	Salaries	Fees	Commodities	Printing	Telephone	Postage	Travel	Supplies	Repairs	Other	Salaries	Fees	Commodities	Printing	Telephone	Postage	Travel	Supplies	Repairs	Other	Salaries	Fees	Commodities	Printing	Telephone	Postage	Travel	Supplies	Repairs	Other	Salaries	Fees	Commodities	Printing	Telephone	Postage	Travel	Supplies	Repairs	Other										
Alberta Hospital	1,000.00	100.00	50.00	20.00	10.00	5.00	10.00	10.00	10.00	10.00	1,000.00	100.00	50.00	20.00	10.00	5.00	10.00	10.00	10.00	10.00	1,000.00	100.00	50.00	20.00	10.00	5.00	10.00	10.00	10.00	1,000.00	100.00	50.00	20.00	10.00	5.00	10.00	10.00	10.00	1,000.00	100.00	50.00	20.00	10.00	5.00	10.00	10.00	10.00	1,000.00	100.00	50.00	20.00	10.00	5.00	10.00	10.00	10.00				



No. 4—REVENUE OF ALBERTA HOSPITALS, 1936

Name of Hospital	Grants		Patients' Fees	Donations, Cash and Services	Tax Requisitions	Sundry	Total
	Alberta	Others					
Athabasca, Municipal	\$ 3,041.10		\$ 10,541.43	\$ 114.19	\$ 9,145.58	\$ 1,095.29	\$ 23,937.59
Banff, Mineral Springs	2,661.75		24,662.63	3,327.83		18.70	30,670.91
Barhead, Barhead	2,728.05		15,770.00				18,498.05
Bassano, Municipal	1,981.00		6,564.00		6,360.00	4,163.22	19,068.22
Bentley, Community	1,106.10	\$ 254.00	7,775.50	276.64		1,243.77	9,135.60
Berwyn, R.A. of Peace	364.05	1,733.30	1,398.89	8,960.60			13,056.40
Bonnyville, K.H.P.	2,362.50		8,589.00	3,459.18			16,322.53
Bonnyville, St. Louis	2,251.35	2,023.00	152,631.62	5,000.00			248,703.48
Calgary, General	31,569.05	59,502.81	527.25				35,652.73
Calgary, Isolation	9,690.75	25,434.73					
Calgary, S. A. Grace	2,732.95	1,125.00	5,252.02	577.21		1,591.01	11,278.19
Calgary, Holy Cross	27,370.80	3,200.00	203,188.16	25,179.05		902.61	258,938.01
Calgary, Junior Red Cross	8,471.45		8,017.80	8,017.80			17,391.86
Camrose, St. Mary's	3,290.10				9,957.47	1,577.01	27,550.43
Cardston, Municipal	2,545.65						20,507.44
Carmangay, Carmangay	203.40		24,260.33				3,763.65
Castor, Rosary	1,287.45		6,427.31				7,639.41
Cereal, General	810.50		3,451.68				4,262.18
Clareholm, General	1,863.80	550.00	9,181.50	30.00			11,625.30
Cold Lake, John Neil	1,727.10	1,195.00	8,611.75	23.35			11,537.20
Coleman, Miners' Union	1,061.50		125.00			9,664.48	10,850.98
Consort, Municipal	2,058.75		7,616.25		6,632.56	93.00	16,400.56
Coronation, General	1,397.25		7,405.05	115.00		3.99	8,921.29
Daysland, Providence	1,437.10		12,317.97	3,538.00			17,293.27
Desmarais, St. Martin's	645.00	3,349.50	22.00				4,016.50
Didsbury, General	1,040.40	1,200.00	5,581.00	45.00			7,866.40
Drumheller, Municipal	11,194.85		46,543.84		29,910.00	2,360.31	90,009.00
Edmonton, Beulah Home	3,030.25	800.00	4,671.92	3,246.02		660.54	12,408.73
Edmonton, General	18,995.85	7,650.00	136,955.76	931.78		259.08	164,792.47
Edmonton, Misericordia	23,865.50	12,259.10	137,056.42				173,181.02
Edmonton, Royal Alexandra	53,668.80	65,077.34	319,355.67				438,101.81
Edmonton, Isolation	9,855.00	23,161.10	62,438.98				95,455.08
Edmonton, University	71,359.40	39,598.85	342,695.92				453,654.17
Edson, St. John's	3,465.90	2,500.00	18,472.25				24,438.15
Elk Point, Municipal	3,950.55		10,592.26		9,876.76	842.80	25,262.37
Empress, Cottage	1,872.00		14,187.42	173.30			16,232.72
Fairview, W.I.	837.45	510.00	4,625.00				5,997.57
Fort Vermilion, St. Theresa	548.00	1,904.50	3,675.75	1,365.00		25.12	7,543.25
Galahad, St. Joseph's	1,664.55		5,970.02	2,124.68		50.00	9,759.25
Grande Prairie, Municipal	6,237.00		17,714.67		22,661.21	4,050.70	50,663.58

DEPARTMENT OF PUBLIC HEALTH

No. 4—REVENUE OF ALBERTA HOSPITALS, 1936—Continued

Name of Hospital	Grants		Patients' Fees	Donations, Cash and Services	Tax Requisitions	Sundry	Total
	Alberta	Others					
Hanna, Municipal	\$ 4,148.55		\$ 15,155.70	1,210.00	\$ 27,009.00	5,263.37	\$ 51,576.62
Hardisty, St. Anne's	2,151.90		13,895.00				17,256.90
High Prairie, Community	616.10		2,158.35				2,774.45
High River, Municipal	4,485.15		11,851.10		18,500.00	2,461.01	37,297.26
Innisfail, Municipal	5,230.35		15,531.05		14,621.00	1,250.88	36,633.28
Islay, Municipal	1,069.65		2,220.67		6,800.00	18.00	10,108.32
Jasper, Seton	1,707.75	\$ 2,500.0	15,441.17	432.46			20,081.38
Killam, General	1,074.60		5,370.20	1,440.22			7,885.02
Lacombe, General	1,490.85		8,680.09			197.62	10,368.56
Lamont, Public	9,692.00	3,956.25	43,188.55			11,044.13	67,880.93
Lethbridge, Galt	15,121.24	3,000.00	83,607.21	50.00		3,033.43	104,811.88
Lethbridge, Isolation	994.00		3,194.53			356.24	4,544.77
Lethbridge, St. Michael's	13,078.80	4,585.00	87,641.24	1,268.33	25,628.00	1,211.26	103,199.63
Lloydminster, Municipal	5,347.35		41,858.75			216.97	77,636.07
Macleod, General	1,003.50		4,823.33			157.71	77,083.03
Mannville, Municipal	2,151.90		5,078.20		8,831.00	1,004.48	16,218.81
Medicine Hat, General	14,472.00	6,000.00	72,820.35	1,354.53			95,651.36
Medicine Hat, Isolation	233.10	2,083.32	167.50				2,483.92
Mundare, General	1,791.00		6,151.88	1,365.96		356.44	9,665.28
McLennan, Sacred Heart	3,394.40		12,818.01	3,420.00		257.75	19,890.16
Nanton, General	472.30		2,691.00				3,163.30
Norddegs, General	363.85		717.00	147.65		9,724.51	10,805.36
Olds, General	1,586.25		9,459.35	11.12		2.37	11,195.62
Onoway, Municipal	390.70		840.35		5,582.19	19.05	6,843.41
Peace River, Municipal	3,202.15		15,480.15		12,152.43	1,250.71	32,085.44
Pincher Creek, St. Vincent	1,447.45		8,614.14	10.00			10,071.59
Provost, Municipal	3,022.60		7,895.74	15.00			24,046.39
Radway, St. Joseph's	3,031.20		13,818.75	3,920.00	12,720.00	393.05	21,244.95
Red Deer, Municipal	3,243.60	273.74	18,778.85		1,381.88	475.00	26,350.25
Rimbey, St. Paul's	1,898.55		10,476.20	1,500.15		2,672.18	13,874.90
St. Paul, St. Theresa	2,820.60		13,384.20	5,800.00			22,004.80
Spirit River, Community							
Stettler, Municipal	4,581.30		15,091.39		11,026.30	1,830.59	32,529.58
Trochu, St. Mary's	1,300.05	150.00	4,849.00	3,991.30			10,290.35
Vegreville, General	6,561.45		31,748.00	5,170.00		90.00	43,569.45
Vegreville, R.M.B.	1,528.95	3,107.75	3,478.26	50.00			8,164.96
Vermillion, Municipal	3,981.95		8,878.68		10,622.00	1,010.56	24,493.19
Viking, Municipal	2,368.35		6,825.68		6,500.00	774.67	16,468.70
Vilna, Our Lady's	1,709.15		7,979.75				9,688.90
Vulcan, Municipal	2,101.50		6,617.50		15,061.05	1,117.10	24,897.15

Fort Vermilion	3.61	6.0	20.7	27.7	20.1	25.5	4.55
Galahad, St. Joseph's	4.54	2.4	19.0	11.0	13.6	53.8	2.64
Grande Prairie, Municipal	2.59	11.8	43.6	24.3	14.9	5.4	3.66
Hanna, Municipal	2.68	13.5	37.2	20.7	21.9	6.7	5.64
Hardisty, St. Anne's	2.13	4.8	39.1	30.5	20.2	5.2	3.61
High Prairie, Community	1.90	3.2	27.4	52.9	6.5	9.8	1.97
High River, Municipal	2.53	9.5	39.6	26.0	19.4	6.5	3.74
Innisfail, Municipal	2.03	9.3	36.0	22.0	18.2	14.5	3.15
Islay, Municipal	3.99	12.2	36.7	20.5	22.3	8.3	4.23
Jasper, Seton	3.74	2.7	30.0	28.9	24.2	4.1	4.23
Killam, General	2.76	4.3	28.8	20.7	12.8	23.3	5.29
Lacombe, General	3.20	4.9	46.3	22.1	15.5	11.1	3.08
Lamont, Public	2.53	12.1	31.0	24.6	23.7	8.5	3.13
Lethbridge, Galt	2.46	9.0	35.0	27.3	20.0	8.7	3.49
Lethbridge, Isolation	1.56	5.2	42.5	33.5	12.7	6.0	3.05
Lethbridge, St. Michael's	2.06	7.2	43.0	29.5	17.7	2.9	2.06
Lloydminster, Municipal	1.82	8.3	40.8	24.9	17.5	8.3	3.51
Macleod, General	1.22	5.9	29.8	35.3	17.1	11.8	3.52
Mannville, Municipal	2.04	12.5	24.9	38.6	19.2	4.8	1.38
Medicine Hat, General	2.08	8.9	34.9	28.8	23.9	3.4	3.14
Medicine Hat, Isolation	3.90	1.3	43.6	26.2	4.5	24.4	3.32
Mundare, General	2.02	6.7	41.4	24.5	22.1	5.2	3.90
McLennan, Sacred Heart	2.79	2.3	30.9	24.2	16.9	25.7	2.43
Nanton, General	4.05	6.2	39.6	41.7	8.4	4.0	2.69
Nordegg, General	7.47	1.0	63.7	22.4	5.5	7.31	3.20
Olds, General	2.78	7.3	42.1	22.8	12.2	15.5	7.31
Onaway, Municipal	2.84	14.5	35.7	20.7	18.3	10.8	3.17
Peace River, Municipal	2.20	2.7	35.1	20.0	28.1	14.0	4.51
Pincher Creek, St. Vincent's	1.98	9.8	33.4	31.0	20.8	5.0	3.13
Provost, Municipal	2.21	6.5	43.2	24.4	15.6	10.2	3.34
Radway, St. Joseph's	2.68	10.1	41.5	18.9	19.8	9.7	3.13
Red Deer, Municipal	1.85	6.9	40.1	21.8	24.5	6.6	3.35
Rimbe, St. Paul's	2.49	12.2	32.8	20.4	25.2	9.4	3.29
St. Paul, St. Theresa	2.36	12.4	42.1	22.2	15.5	6.8	3.51
Stettler, Municipal	2.99	5.8	41.9	18.6	20.6	12.9	3.21
Trochu, St. Mary's	2.18	3.0	43.5	27.0	18.8	7.8	3.56
Vegreville, General	2.75	2.9	40.7	19.6	30.2	6.5	2.98
Vegreville, R.M.B.	2.12	8.8	34.4	25.6	23.3	7.9	2.85
Vermilion, Municipal	1.97	1.33	38.8	23.7	18.5	6.6	2.83
Viking, Municipal	2.42	8.6	39.4	23.7	19.5	8.8	2.47
Vilna, Our Lady's	3.10	10.6	35.7	26.4	22.6	4.7	2.47
Vulcan, Municipal	2.63	9.8	41.4	24.5	13.9	10.4	5.32
Wainwright, Municipal	2.45	13.1	31.9	24.8	15.6	14.5	3.35
Wayne, General	2.08	1.8	39.4	25.9	25.0	7.8	2.80
Westlock, Immaculata	2.44	8.0	41.5	25.5	22.5	2.4	3.60
Wetaskiwin, Community	2.03	8.6	42.2	22.2	14.0	13.0	3.13
Willingdon, General							2.25
Average	2.69	10.4	37.8	23.7	19.7	8.4	\$3.26

Division of Social Hygiene

(HAROLD ORR, O.B.E., M.D., D.P.H., F.R.C.P. (C.), *Director*)

Owing to necessary curtailment of expenditures, the educational programme of lectures, etc., has been considerably reduced, but we hope to be in a position to resume it in the near future.

We have continued to direct particular attention to the early detection of neurosyphilis and cardiovascular syphilis, the two types which cause the greatest economic loss.

The following figures indicate the work done in the various clinics during the year:

PROVINCIAL CLINIC, 9912 103rd Avenue, Edmonton

NUMBER OF PATIENTS WITH CLASSIFICATION OF THEIR DISEASES					
Sex.	Syphilis.	Gonorrhoea.	Chancroid.	Non-Venereal.	Totals.
Male	244	320	.....	185	749
Female	155	90	.....	162	407
Totals	399	410	.....	347	1,156

Number and results of Wassermann tests: 2,878 tests, of which 664 were positive.

Number and results of Cerebrospinal fluid tests: 111 tests, of which 36 were positive.

PROVINCIAL CLINIC, 713 3rd Street East, Calgary

NUMBER OF PATIENTS WITH CLASSIFICATION OF THEIR DISEASES					
Sex.	Syphilis.	Gonorrhoea.	Chancroid.	Non-Venereal.	Totals.
Male	283	470	.....	262	1,015
Female	131	159	.....	97	387
Totals	414	629	.....	359	1,402

Number and results of Wassermann tests: 2,645 tests, of which 510 were positive.

Number and results of Cerebrospinal fluid tests: 53 tests, of which 13 were positive.

PROVINCIAL CLINIC, c/o Galt Hospital, Lethbridge

NUMBER OF PATIENTS WITH CLASSIFICATION OF THEIR DISEASES					
Sex.	Syphilis.	Gonorrhoea.	Chancroid.	Non-Venereal.	Totals.
Male	57	20	2	25	104
Female	23	1	.....	1	25
Totals	80	21	2	26	129

Number and results of Wassermann tests: 324 tests, of which 95 were positive.

Number and results of Cerebrospinal fluid tests: 12 tests, of which none were positive.

PROVINCIAL CLINIC, c/o General Hospital, Medicine Hat

NUMBER OF PATIENTS WITH CLASSIFICATION OF THEIR DISEASES					
Sex.	Syphilis.	Gonorrhoea.	Chancroid.	Non-Venereal.	Totals.
Male	9	9	.....	4	22
Female	7	4	.....	3	14
Totals	16	13	.....	7	36

Number and results of Wassermann tests: 113 tests, of which 73 were positive.

Number and results of Cerebrospinal fluid tests: 3 tests, of which 1 was positive.

PROVINCIAL GAOL, Fort Saskatchewan

NUMBER OF PATIENTS WITH CLASSIFICATION OF THEIR DISEASES					
Sex.	Syphilis.	Gonorrhoea.	Chancroid.	Totals.	
Male	19	24	.....	42	
Female	24	24	.....	47	
Totals	43	46	.....	89	

Number and results of Wassermann tests: 1,133 tests, of which 88 were positive.

All admissions to the gaols are examined for evidence of venereal disease—the total for the year in Fort Saskatchewan Gaol being 983 males and 118 females, making a total of 1,101.

PROVINCIAL GAOL, Lethbridge

NUMBER OF PATIENTS WITH CLASSIFICATION OF THEIR DISEASES

Sex.	Syphilis.	Gonorrhoea.	Chancroid.	Totals.
Male	27	27	.....	54

Number and results of Wassermann tests: 411 tests, of which 66 were positive.
 Number and results of Cerebrospinal fluid tests: 6 tests, of which 1 was positive.

CASES REPORTED BY DOCTORS IN THE PROVINCE

Sex.	Syphilis.	Gonorrhoea.	Chancroid.	Totals.
Male	46	49	.....	95
Female	26	5	.....	31
Totals	72	54	.....	126

RECAPITULATION

Of patients treated by the staff of the Division of Social Hygiene during the year 1936:

Sex.	Syphilis.	Gonorrhoea.	Chancroid.	Non-Venereal.	Totals.
Male	639	869	2	476	1,986
Female	340	277	.....	263	880
Totals	979	1,146	2	739	2,866

TOTAL—2,866.

Total number of cases of venereal disease—2,127.

Sanitary Engineering Division

(D. B. MENZIES, B.Sc., C.E., *Provincial Sanitary Engineer*)

During the year 1936 the following Certificates were issued in connection with Sewerage and Waterworks Construction as required under Sections 10 to 15 (inclusive) of The Public Health Act:

1. Vegreville—388/36, Waterworks Construction. Estimated cost, \$7,000.
2. Edmonton—389/36, Waterworks Construction. Cost, \$23,427.01.
3. Edmonton—390/36, Waterworks Extensions. Estimated cost, \$26,573.99.
4. Brooks—391/36, Waterworks Extensions. Estimated cost, \$3,000.

A special effort has been made to impress upon those municipalities using raw untreated water from lakes and rivers the danger of such practice. The fact that a water-borne outbreak has never been encountered is a very poor excuse for neglecting the treatment of surface waters. Whereas in the past the cost of installation of chlorinating equipment has been very high for small municipalities, during recent years new hypochlorinating equipment has come on the market and is now obtainable at much lower costs than has been the case in the past. As a result of this, most municipalities should be able to finance water treatment.

Considerable correspondence has been received during the year requesting information concerning the construction of swimming pools. There is a tendency in certain parts of the Province to neglect the proper treatment of swimming pool water, with the result that the water in some of the pools is of an unsatisfactory nature. This can only be remedied by employing a conscientious pool operator and by providing him with sufficient chemicals and testing equipment to regularly check the water in the pool under his charge.

Special efforts were made to check intestinal disease outbreaks in various parts of the Province and if possible to determine the source of the outbreak. On the whole, very little intestinal disease was traced directly to public water supplies, most cases resulting from the use of raw river or lake water or from the use of contaminated dairy products.

The movement towards having dairy cattle providing milk for table use tested for bovine tuberculosis has progressed very favourably. The people of the Province are much indebted to the local Provincial veterinary surgeons and to the inspectors of the Dominion Health of Animals Branch for their work in eradicating tuberculosis from dairy cattle.

There is still a great deal of laxity exercised throughout the Province in the control of garbage and refuse collection. Steps to better matters have been considered by several municipalities, and it would appear that conditions will be improved during the coming year.

As a result of complaints received by the Provincial Board of Health, and as a result of requests made for assistance, 155 towns and villages were visited by our health inspector. Thirty hamlets were given similar service. Seven lumbering camps were visited, and orders were issued to make necessary changes deemed necessary to provide better sanitary conditions for the workmen employed.

Plans dealing with well construction, milk houses and dairy barns, septic tanks and systems of sewage disposal were provided where requested. Inform-

ation as to various methods of disinfestation was given to those persons seeking such information. The Department also prepared a number of circulars to be used in connection with the new health courses prescribed by the Department of Education for the intermediate schools. Radio addresses dealing with sanitation and general health problems were given over different networks throughout the Province.

During the year the following Regulations were passed by the Provincial Board of Health:

Regulations Nos. 326-346 (inclusive), Governing Mattresses, Upholstering, Wiping Rags and Cotton Waste (O.C. 825-36) (O.C. 826-36).

Regulations Nos. 351-400 (inclusive) and Specifications Respecting Swimming Pools and Bathing Places (O.C. 824-36).

Regulations Nos. 876-886 (inclusive), Governing Cemeteries and Burial Grounds (O.C. 1518-36).

Regulations Nos. 1001-1060 (inclusive), Respecting Nuisances and General Sanitation (O.C. 823-36).

Other Regulations passed previous to 1936 were amended and deleted as deemed advisable by the Provincial Board of Health.

The staff of the Division remains unchanged from what it was at the end of 1935, consisting of a sanitary engineer, one full-time health inspector, one half-time health inspector and one stenographer. The policy of attending to specific complaints and requests, rather than of providing an annual inspection for each town, village and hamlet in the Province will have to be continued until such time as more progress has been made in the establishment of new health units. When such steps have been taken, conditions within the Province from a sanitary standpoint should improve considerably.

Dental Hygiene Division

(Dr. E. A. HEACOCK, L.D.S., D.D.S.)

This Division provides dental services for all Provincial institutions except the Provincial Mental Hospital at Ponoka, at which institution there is a full-time dentist. The following institutions are visited at more or less regular intervals: The Provincial Sanatorium, the Provincial Mental Institute, the Provincial Auxiliary Hospital and the Provincial Training School for mental defectives. In addition, there are now tuberculosis wards in the University, General and Royal Alexandra hospitals in Edmonton, and these also are served.

Owing to the large number of new patients admitted to the Sanatorium, this institution is visited every six weeks, and similar special attention is given to the other tuberculosis wards. During the summer months when the Provincial Dentist served on the travelling clinic staff, Dr. Gordon Sutherland served the Edmonton wards and Dr. Hood of Calgary the Sanatorium.

The travelling clinic was in the field from May 17th to July 7th, and 15 centres were visited. Dental services are one of the most important features of the travelling clinic. In addition to work done, contacts are made with parents and community leaders, and valuable educational work is accomplished. Dr. H. A. Gilchrist was again a member of the clinic staff.

A summary of work done by the clinic will be found in the report of the Nursing Division and at the institutions in the various institutional reports.

Radio Talks on Oral Hygiene were given over CKUA by Dr. H. A. Gilchrist.

Mental Health Division

Separate reports are submitted for each branch of this Division:

Eugenics Board,
Mental Health Clinics,
Provincial Mental Hospital, Ponoka, including Provincial Auxiliary Hospital, Claresholm,
Provincial Mental Institute, Edmonton,
Provincial Training School, Red Deer.

The institutional population again shows a definite increase. On January 1st, 1936, this stood at 2,280 (males 1,447, females 833), and on December 31st, 1936, at 2,441 (males 1,568, females 873), an increase of 161—males 121, females 40.

From the time the first Provincial Mental Hospital was opened in 1911 there has been a steady increase in population of from 5% to 8% annually over the preceding year, which means on an average a progressive absolute increase in numbers each year. This increase was 7% during 1936.

During the same period the ratio of hospitalized mental patients to population has shown a steady increase from 156 per 100,000 in 1921, to 316 in 1936. While this is serious and should inspire serious thought with respect to prevention, it need not cause undue alarm, as even yet Alberta stands second lowest in this respect among the provinces of Canada. This latter fact suggests that further increases may be expected, there being no reason to suppose that Alberta is in reality more favoured than the majority of the other provinces with respect to the incidence of mental diseases and mental defect.

Admission rates as well as residence rates have risen in recent years. In 1936 there were 907 admissions to all mental institutions as compared with 768 in 1935. The rise in admission rates in 1934, 1935 and 1936 is due in part to the greater number of early, mild and temporary cases seeking such assistance as the mental hospitals are able to provide, as shown by the rising proportion of voluntary admissions; and in part to the greater number of mental defectives who are being forced into the institutions for one reason or another. Largely on account of this last group, the acceleration in discharges is not keeping pace with the acceleration in admissions.

At the Provincial Mental Hospital at Ponoka there were 785 admissions and 603 discharges, being an increase in the population of 127 patients. No additional accommodation was provided during the year, and the overcrowding of recent years has increased. It has been necessary to take advantage of every possible opportunity to discharge patients. Notwithstanding this, there is an annual increase of approximately 125 patients. There is no immediate relief in sight for the overcrowding either on the male or female wards.

The ratio of staff to the patient population is below the accepted standard, and this condition interferes with adequate supervision and treatment. The reception wards have been kept free from overcrowding in an effort to facilitate recovery in the new cases.

The congestion in the hospital as a whole might be relieved to some extent if adequate provision were made for the care of mental defectives and senile cases elsewhere. Many of the senile cases might be cared for in reliable homes if some compensation were granted those who were looking after them.

The medical staff is not sufficiently large to give the individual care which is desired in the treatment of mental cases. Efforts are being made to train

both the nursing and attendant staff, and this also takes up a considerable amount of the time of the medical officers.

Similar overcrowding conditions prevail at the Provincial Training School at Red Deer. Reference has already been made to the accumulation of mental defectives at Ponoka, for the want of room in other institutions. Many of the patients at Red Deer who have been there for many years are moving into older age groups, and thus constituting further problems.

The addition of a new building at Oliver, which at the time of writing is well under way and which will probably be opened in the spring of 1938, will do much to relieve the immediate pressure at Ponoka, but there will have to be further expansion in the near future.

The facilities provided by the Psychopathic Ward, University Hospital, which was closed in 1933, continue to be greatly missed, both as a suitable centre for the observation and treatment of mild, borderline and doubtful cases and as a teaching centre.

Mental hygiene clinics were held in Edmonton, Calgary, Lethbridge, Medicine Hat, Drumheller, and numerous other places in the Peace River district. The examinations were carried out by the Acting Medical Superintendent or one of the medical officers of the Provincial Mental Hospital. A great variety of cases were examined, and some follow-up work was done on the cases discharged from the various mental institutions as well as some of the eugenics cases. The clinics continue to be of great service to the medical profession and the public at large, and are of undoubted economic value to the Province. This is a type of work that should be greatly extended.

The report of the Eugenics Board shows that a total of 191 cases were presented to and passed by the Board in 1936, and 77 were performed.

Radio talks over CKUA were given during the year by various members of the institutional staff on subjects related to mental health.

Attention must again be directed to the splendid work that is being done by the superintendents of the service and the members of their respective staffs.

TABULATED SUMMARY

A.—INSTITUTIONS—MOVEMENT OF PATIENTS

Institutions	In Residence Jan. 1/36			Admissions 1936			Discharges 1936			Deaths 1936			In Residence Dec. 31/36		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Oliver	476	.....	476	79	.....	79	17	.....	17	17	.....	17	521	.....	521
Ponoka	861	629	1490	470	315	785	331	219	550	61	52	113	939	673	1612
Red Deer	110	104	214	12	19	31	12	14	26	2	8	10	108	101	209
Claresholm	.....	100	100	.....	12	12	.....	12	12	.....	1	1	.....	99	99
Totals	1447	833	2280	561	346	907	360	245	605	80	61	141	1568	973	2441

ADMISSIONS—BROAD DIAGNOSTIC DIVISION

	Psychotic			Not Psychotic			Mentally Defective			Totals.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Oliver	64	.....	64	8	.....	8	7	.....	7	79	.....	79
Ponoka	319	236	555	96	40	136	55	39	94	470	315	785
Red Deer	.....	.....	.....	.....	.....	.....	12	19	31	12	19	31
Claresholm	.....	12	12	.....	.....	.....	.....	.....	.....	.....	12	12
Totals	383	248	631	104	40	144	74	58	132	561	346	907

B.—CLINICS SUMMARY

	1935			1936			Total New cases since 1929
	Clinics	New Cases	Follow-ups	Clinics	New Cases	Follow-ups	
Edmonton	50	103	124	39	66	117	827
Calgary	23	86	228	21	76	227	777
Lethbridge	12	90	65	11	39	57	413
Medicine Hat	3	61	5	4	92	26	264
Drumheller	2	23	10	3	24	26	47
Peace River	.....	.....	.....	9	96	18	198
Totals	90	363	432	87	393	471	2526

The Eugenics Board, Province of Alberta

(J. M. MACEachran, M.A., Ph.D., *Chairman*)

The Eugenics Board functioned regularly during the year 1936. The Board met four times at the Provincial Mental Hospital and once at the Calgary General Hospital. The meetings were held in February, May, September and November. While the Board did not convene at the Provincial Training School, Red Deer, 9 cases from there were considered at the meetings held at the Provincial Mental Hospital.

During the year 1936, in all, 191 cases were presented and passed at the Board sessions. This number was composed of 103 male cases and 88 female cases. The Board has considered and passed 913 cases to the end of 1936, this total being made up of 445 male cases and 468 female cases. In the year 1936 the number of operations performed was 77, there being 35 operations on male cases and 42 operations on female cases. Including the 1936 cases, there have been 475 operations for sterilization—162 males and 313 females. All of the operations in 1936 were performed by Dr. L. C. Conn and Dr. Robert O'Callaghan, surgical consultants to the Mental Hospital service.

The tables following present an analysis of the 475 cases operated on, to December 31st, 1936:

TOTAL NUMBER OF CASES OPERATED ON TO DECEMBER 31, 1936			
Total number of cases			475
Total male cases	162 (34.1%)		
Total female cases	313 (65.9%)		
Psychotic Group:	Number	Percent. of Group	Percent. of Total
Schizophrenia	79	56.1	16.7
Manic Depressive	35	24.8	7.4
Epileptic	14	9.9	2.9
Organic Types and G.P.I.	13	9.2	2.7
Totals	141	100.0	29.7
Defective Group:			
Mental Defectives with Psychosis	52	17.2	10.9
Mental Defectives	228	75.2	48.0
Mental Defectives with Epilepsy	23	7.6	4.8
Totals	303	100.0	63.7
Other Types and Undiagnosed Psychosis	31	100.0	6.5
Grand Totals	475	100.0	100.0

The amount of follow-up work that it was possible to do in 1936 was quite inadequate, as has been the case for several years. The work urgently requires one more worker, at least, available for Eugenics Board and case follow-up work. Reports on cases in general have been of a satisfactory nature, and do not indicate adverse effects from the sterilization operation.

In conclusion, I wish, on behalf of the Board, to express our appreciation of the splendid co-operation we have always received from the officers of the mental institutions and the mental hygiene clinics. I should like to mention particularly the very valuable assistance accorded to us by the late Dr. Baragar, at a time when sympathetic understanding and expert knowledge were so important in determining the general policy of the Board in dealing with difficult cases.

Mental Hygiene Clinics

The mental hygiene work in Alberta was carried on during 1936 without any curtailment of service, but without any new centres being established. The work suffered two great losses during the early months of the year. Dr. George A. Davidson, who had been Superintendent of the Provincial Mental Hospital, Ponoka, and who was intimately associated with the mental hygiene work, left the service of the Department at the first of the year to take up work in British Columbia; Dr. C. A. Baragar, Commissioner of Mental Institutions and Director of Mental Health, died in March, 1936. Dr. Baragar, as well as being the integrating head of the mental health service in the Province, was vitally interested in the mental health clinics, and took personal charge of approximately half of them. In the loss of the services of Dr. Baragar and Dr. Davidson, one by death and the other by removal, the mental health service in the Province suffered a severe blow. However, the work has been very ably taken over by Dr. R. R. MacLean, Acting Medical Superintendent of the Provincial Mental Hospital, Ponoka, and has been efficiently carried on.

During the early months of the year 1936 there was a falling-off in the work at some of the clinic centers. This was due to several reasons. Because of the loss of both Dr. Baragar and Dr. Davidson at approximately the same time, it was necessary to call on several other physicians in the service to take charge of the clinic work in the south of the Province. These physicians carried on very successfully, but for the first few clinics were not as familiar with the work as Dr. Baragar and Dr. Davidson had been. Also the adverse weather conditions at several of the clinic points cut down the attendance at individual clinics very noticeably. However, by the latter half of the year the clinic service had been placed on a well organized basis again, and the attendance at the clinics quickly came back to its normal level.

During the first six months of the year Dr. T. C. Michie, of the Provincial Mental Hospital staff, and Dr. W. L. Valens, then Superintendent of the Provincial Auxiliary Hospital, Claresholm, took charge of the major number of clinics in the south of the Province—that is, at Calgary, Lethbridge, and Medicine Hat. Dr. R. R. MacLean was able to attend a few of the clinics. With the opening of the clinics again after the mid-summer holiday season, Dr. R. R. MacLean took personal charge of most of the clinics in the south. Those that he was not able to attend were taken by Dr. T. C. Michie.

The Grande Prairie and Peace River country was visited in the fall of 1934, when a series of clinics was held under the direction of Dr. C. A. Baragar. This series proved very successful. It was not possible to hold a similar series in 1935, but in the fall of 1936 the Grande Prairie and Peace River districts were again visited, and the second successful series of clinics was held. Dr. R. R. MacLean, Acting Medical Superintendent of the Provincial Mental Hospital, was in charge.

Brief comments are made in the following paragraphs on the work at each of the clinic centres. The plan of making one consolidated report without making, in addition, separate reports for each of the clinics seemed quite satisfactory for the 1935 mental hygiene work. This plan is being followed again for the 1936 report.

Edmonton.

The clinic in Edmonton was in charge of Dr. W. J. McAlister, Superintendent of the Provincial Mental Institute, during the whole of 1936. Late in 1935 the clinic quarters were moved from the Outdoor Clinic to the Civic Block. Our clinic activities have been carried on in these new quarters throughout 1936. Our sincere thanks are again given to Dr. Jenkins, Medical Health Officer for Edmonton, for his unfailing co-operation and help in the clinic work. We appreciate very much the services of Miss Chisholm, a nurse on the staff of Dr. Jenkins' office, who has very ably assisted us at the Monday afternoon clinics. We wish to thank, also, Miss Emerson, Public Health nurse, Miss Griffiths and Miss Christianson, of the City Health and Baby Clinic services, for the assistance which they have given us.

The new cases handled in 1936 show a decrease over the new cases in 1935. However, while there were 50 clinics in 1935, there were only 39 in 1936. Also, due to general re-arrangement of duties, the social worker was not able to spend as much time as formerly in Edmonton, and found it more difficult to spend much time outside of the actual clinics on clinic cases and work. With additional personnel there is no doubt that the work of the Edmonton Clinic could be increased and made more thorough. It is felt, however, that the clinic services at present offered are valuable, and are being taken advantage of by the people in the city and district.

Calgary.

The Calgary Clinic was successfully carried on during 1936. The number of new cases showed a decrease of 10, but there was no decrease in the number of follow-ups and interviews. During the year there were 21 clinics held as against 23 during 1935. The clinics continued to be held every other Wednesday in the City Hall.

Dr. R. R. MacLean and Dr. T. C. Michie were in charge of the major number of clinics. Dr. C. A. Baragar attended the two clinics held in the month of January.

We continued to enjoy the very able assistance of Miss Lavell and Miss Craig, of the Baby and Pre-school Clinic. The fact that these nurses are willing to handle our appointment list and give general information about our clinics in Calgary has been a very great help to the clinic work.

Lethbridge.

There were 11 clinics held in Lethbridge during the year 1936. During 1935, 12 clinics were held. The number of new cases handled shows quite a marked drop. There were 90 new cases in 1935 and 39 in 1936. During the winter months of 1936 we seemed particularly unfortunate, in that the weather on several clinic visits was so severe and the roads were so drifted that cases could not get in from outside the city. This is the first year that the weather conditions have really affected our clinic attendance in Lethbridge. It is felt, also, that the clinic work in Lethbridge would benefit quite definitely if the social worker were able to spend some time in the district other than for the actual clinic itself. This is a practical impossibility under the present arrangements. Despite the apparently poor showing made during 1936, we feel quite definitely that the Lethbridge Clinic continues to be a healthy one.

The clinics at Lethbridge are still being held at the Nursing Mission. Miss Tilley, who is in charge of the Mission, has given us unfailing assistance and has looked after our appointment list. We very much appreciate this help.

Medicine Hat.

During the year 1936 four successful clinics were held in Medicine Hat. These were two-day clinics in each case. On the first day of each clinic trip cases were examined at the General Hospital, where accommodation was very kindly provided for us. On the second day of each trip we worked in the schools themselves, examining cases reported by the school teachers and principals.

The physician in Medicine Hat have continued to be most co-operative, and have reported a number of cases. We feel we are especially indebted to Miss Hagerman, Public Health nurse, who has looked after our appointment list for cases examined at the hospital, and has given invaluable assistance at the clinic itself. Miss Smith, of the School Health Service, has been of great assistance in the handling of cases seen in the schools.

Dr. C. A. Baragar was in charge of the first clinic held in 1936. Dr. W. L. Valens was in charge of the second clinic, and Dr. R. R. MacLean was in charge of the last two clinics.

Drumheller.

Three clinics were held in Drumheller during 1936. In all, 24 new cases were seen and examined and, in addition, 26 consultations and interviews were given. The clinics in Drumheller are held at rather irregular intervals, arrangements being made to visit the city when there is a sufficient number of suitable cases to be examined.

The clinics in Drumheller are held in the rooms provided for the Public Health nurse. Miss Ethel Jones, Public Health nurse in the district, has very ably assisted us in our work and in addition, has been chiefly responsible for getting in touch with the cases and making arrangements for their examination at the clinic. We appreciate very much the assistance Miss Jones has given the work.

Dr. R. R. MacLean was in charge of the clinics in Drumheller.

Grande Prairie and Peace River.

The Grande Prairie and Peace River districts were visited in October, 1936. A series of 9 clinics was held over a period of two weeks. Clinics were held at the following points: Grande Prairie, Hythe, Sexsmith, Spirit River, Fairview, Brownvale district, Berwyn, Peace River and McLennan.

We worked in close co-operation with the two school inspectors in the districts visited—Inspector L. A. Walker of Grande Prairie and Inspector Geo. Wilson of Peace River. As well, we were able to examine cases of a suitable nature reported by the physicians in the districts through which we passed. Inspector Walker and Inspector Wilson did a great deal of work in getting in touch with suitable cases in and through the schools and in arranging accommodation for the holding of the clinics. We appreciate this very much indeed. In all, on the two weeks' trip 96 new cases were seen and examined.

During the trip, at all but one of the points where clinics were held, informal talks were given by Dr. R. R. MacLean and the social worker on some of the phases of mental disorders and their treatment, and on mental tests and testing. At most of the points the inspectors had arranged with the teachers from adjacent districts to come in to the clinic points for the talks given.

Dr. R. R. MacLean was in charge of the clinics throughout.

The social worker attended all the clinics held throughout the year with the exception of two or three, which he was not able to attend because of the

pressure of other work. More efficient work could be done from the social work angle were additional personnel available. This, of course, has been recognized for some time.

The tables which follow are largely self-explanatory. Notes have been appended to several to cover certain points. As in last year's report, a definite attempt has been made to prevent tables from being too cumbersome, and cases have been grouped under general rather than under too detailed headings. There has been a slight re-arrangement of the order in which the tables are given.

It may be noted that 35 cases, or 8.9% of the total of new cases, were in the pre-school group. Two hundred and fifty-eight, or 65.6%, were between 7 and 18 years, inclusive, and 100, or 25.4%, were over 18 years of age. In all the clinics 393 new cases were seen and examined, as against a total of 363 during 1935.

TABLE No. 1
SUMMARY OF CASES EXAMINED AND FOLLOW-UP WORK

Place	1935				1936				Total New Cases Since 1929
	No. Clinics	New Cases	Follow-ups, Interviews	Total Load	No. Clinics	New Cases	Follow-ups, Interviews	Total Load	
Edmonton	50	103	124	227	39	66	117	183	827
Calgary	23	86	228	314	21	76	227	303	777
Lethbridge	12	90	65	155	11	39	57	96	413
Medicine Hat	3	61	5	66	4	32*	26	118	264
Drumheller	2	23	10	33	3	24	26	50	47
Grande Prairie	.....	.....	.....	.....	.....	.....	.....	.....	.....
Peace River	.....	.....	.....	.....	9	96†	18	114	198
Totals	90	363	432	795	87	393	471	864	2526

NOTE: The follow-ups and interviews given here include interviews on provincial mental institution cases, which in most cases are reports or interviews on institution cases or ex-cases.
*This includes a school group of 23 who were given group intelligence tests. Only a few of this group were examined by the clinic physician.
†This includes a school group of 32 who were given a group intelligence test. None of these were examined by the clinic physician.
The clinics held in Medicine Hat during 1936 were two-day clinics in each case.

TABLE No. 2
AGE AND SEX CLASSIFICATION OF CLINIC CASES, 1936

Age Group	Edmonton		Calgary		Lethbridge		Medicine Hat		Drumheller		Gr. Prairie-Peace River Districts		Totals		Percentages			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
0-4	1	2	5	4	0	1	2	1	0	0	0	0	0	0	8	9	3.8	4.9
5-9	6	1	9	3	3	1	12	39	5	3	8	20	10	30	70	30	33.2	16.5
10-14	12	5	9	10	1	2	11	8	2	2	4	27	25	52	62	52	29.4	28.6
15-19	10	10	1	18	4	1	3	1	0	1	1	4	8	12	22	39	10.8	21.4
20-24	2	3	2	1	4	1	0	4	1	0	1	0	0	0	9	9	4.3	4.9
25-29	0	1	0	3	2	2	0	1	0	1	1	0	0	0	2	2	0.9	4.4
30-34	2	2	1	4	1	2	3	1	0	2	2	0	1	1	7	12	3.3	6.6
35-39	3	1	2	0	4	0	0	5	1	3	4	0	0	0	10	9	4.7	4.9
40-44	1	1	0	1	0	1	1	1	1	0	1	0	0	0	3	4	1.4	2.2
45-49	2	0	1	0	2	2	4	1	1	2	1	0	1	1	8	3	3.8	1.6
50-54	0	0	0	0	2	0	2	1	3	0	0	0	0	0	4	1	1.9	0.6
55-59	0	0	0	1	1	1	2	1	2	0	0	0	0	0	2	3	0.9	1.6
60 and over	1	0	0	1	0	0	1	1	2	0	0	0	0	0	2	2	0.9	1.1
Unknown	0	0	0	0	1	0	1	1	2	0	0	0	0	0	2	1	0.9	0.6
Totals	40	26	30	46	25	14	53	39	11	13	24	52	44	96	211	182	100%	

TABLE No. 3
 CLASSIFICATION OF NEW CLINIC CASES ACCORDING TO INTELLIGENCE QUOTIENT, 1936
 INTELLIGENCE QUOTIENTS OF 75 AND LESS

I.Q. Range	Edmonton		Calgary		Lethbridge		Medicine Hat		Drumheller		Gr. Prairie-Peace River District		Totals			
	M.	F. T.	M.	F. T.	M.	F. T.	M.	F. T.	M.	F. T.	M.	F. T.	M.	F. T.		
0-25	2	0	0	1	0	0	0	0	0	0	0	0	0	2	1	3
26-50	8	5	5	10	0	0	2	1	3	1	1	2	1	0	1	17
51-75	12	6	18	7	6	13	11	3	14	3	1	4	11	6	17	53
Totals	22	11	33	12	17	29	13	4	17	4	2	6	12	6	18	72

NOTE: Total number of new cases in 1936 was 393. Thus of those given a definite rating, 116 cases, or approximately 29.5%, graded with intelligence quotients below 76.

TABLE No. 4a
GIVEN CAUSES OF MENTAL DEFICIENCY IN NEW CLINIC CASES, 1936

Given Causes	Clinic Centers						Totals
	Edmonton	Calgary	Lethbridge	Medicine Hat	Drumheller	Gr. Prairie- Peace R. Dists.	
Some positive heredity known	13	11	2	3	3	10	44
Sickness, injury, epilepsy	2	1	0	0	1	0	4
Unknown	18	17	11	12	2	8	68
Totals	33	29	13	17	6	18	116

TABLE No. 4b
MAJOR COMPLICATIONS OF MENTALLY DEFICIENT CLINIC CASES, 1936

Major Complications	Clinic Centers						Totals
	Edmonton	Calgary	Lethbridge	Medicine Hat	Drumheller	Gr. Prairie- Peace R. Dists.	
Behaviour problem other than Sex Deficiency	21	12	5	6	3	7	54
Sex problem	4	4	0	0	0	0	8
Psychoneurotic Reaction, Instability	1	3	3	1	0	0	8
Cerebral Diplegia	0	0	0	1	0	0	1
Epilepsy	2	1	1	0	0	0	4
Freidreich's Ataxia	0	0	0	1	0	0	1
General Retardation, no other specific problem	5	9	1	8	2	11	36
Physical Disability	0	0	3	0	1	0	4
Totals	33	29	13	17	6	18	116

TABLE No. 5a
CLASSIFICATION OF NEW CLINIC CASES, 1936

Pre-School Age Group (0 to 6 years) Nature of Cases	Clinic Centers						Totals
	Edmonton	Calgary	Lethbridge	Medicine Hat	Drumheller	Gr. Prairie- Peace R. Dists.	
Examination and Report	1	7	0	6	1	2	17
Mental Deficiency	2	4	0	2*	1	0	9
Epilepsy	0	0	1†	1	1	0	3
Blindness, Nervousness	2	0	0	0	0	0	2
Other conditions	0	1	1	2	0	0	4
Totals	5	12	2	11	3	2	35

*one case, mental deficiency with infantile diplegia.

†Epilepsy with mental deficiency.

TABLE No. 5b
CLASSIFICATION OF NEW CLINIC CASES, 1936

School Age Group (7 years to 18 years) Nature of Case	Clinic Centers						Totals
	Edmonton	Calgary	Lethbridge	Medicine Hat	Drumheller	Gr. Prairie- Peace R. Dists.	
Behaviour problem, without Mental Deficiency (I.Q. over 75)	11	8	3	3	1	8	34
Mental Deficiency without other specific problems	5	7	0	8	1	6	27
Mental Deficiency with Behaviour problems, including Theft	18	6	2	4	4	11	45
Mental Deficiency with Sex Delinquency	4	2	0	0	0	0	6
Mental Deficiency with Physical Defect	0	0	3	1	0	1	5
Mental Deficiency with Speech Defect	0	1	0	0	0	1	2
Backward in school without Deficiency (I.Q. over 75)	0	5	0	21	0	18	44
Definite Delinquency without Mental Deficiency	3	10	0	0	0	0	13
Examination and Report, no specific problem	0	2	0	16	0	39	57
Epilepsy	1	2*	0	0	4*	0	7
Nervousness, Stammering	0	3	1	0	1	4	9
Other conditions	0	2	1	1	1	4	9
Totals	42	48	10	54	12	92	258

*One case in each group epileptic and mentally deficient.

TABLE No. 5c
CLASSIFICATION OF NEW CLINIC CASES, 1936

Adult Group (over 18 years) Nature of Cases	Clinic Centers						Totals
	Edmonton	Calgary	Lethbridge	Medicine Hat	Drumheller	Gr. Prairie- Peace R. Dists.	
Mental Deficiency with Behaviour problems	2	7	5	1	0	0	15
Mental Deficiency with Sex Delinquency	1	2	0	0	0	0	3
Psychoneurosis, Psychopathic Personality	4	1	6	8	2	0	21
Psychosis (other than G.P.I.)	7	2	8	10	3	1	31
General Paresis of Insane	0	1	0	0	0	0	1
Arteriosclerosis, Disseminate Sclerosis	0	0	1	3	0	0	4
Post Encephalitis	0	0	2	0	2	0	4
Epilepsy	2*	0	1	1	1	1	6
Freidreich's Ataxia	0	0	0	1	0	0	1
Other conditions	3	3	4	3	1	0	14
Totals	19	16	27	27	9	2	100
Grand Totals	66	76	39	92	24	96	393

*Both cases are also mentally deficient.

DEPARTMENT OF PUBLIC HEALTH

TABLE No. 6
AGENCIES REFERRING NEW CASES, 1936

Agency	Edmonton	Calgary	Lethbridge	Medicine Hat	Drumheller	Gr. Prairie- Peace R. Dist.	Totals
School Teachers and Officials.....	1	14	1	53	1	84	154
Doctors, including Medical Health Officers and Clinics	15	15	20	35	14	7	106
Provincial Child Welfare, Children's Aid, Juvenile Court	30	13	1	0	1	0	45
Police, Provincial Jails, other Courts.....	1	0	7	0	0	0	8
Parents, Relatives, Friends	7	20	7	2	1	4	41
Homes, as Mountview, Woods, Kiwanis, Y.W.C.A.	3	9	0	0	0	0	12
Provincial Health Department (other than Child Welfare)	7	0	0	2	6	0	15
Relief Departments	2	0	0	0	0	0	2
Self	0	2	1	0	1	1	5
Other Agencies	0	2	2	0	0	0	5
Totals.....	66	76	39	92	24	96	393

TABLE No. 7
CHIEF RECOMMENDATIONS AS TO TREATMENT OF NEW CLINIC CASES, 1936
Clinic Centers

Chief Recommendations	Edmonton	Calgary	Lethbridge	Medicine Hat	Drumheller	Gr. Prairie- Peace R. Dist.	Total
Admission to Provincial Mental Hospital or Institute	5	7	6	6	3	0	27
Admission to Provincial Training School or similar institution	12	10	3	2	3	3	33
Treatment by own Doctor or other Clinics	3	10	9	18	4	7	51
Treatment given, including direct treatment for epilepsy	1	1	0	2	4	0	8
Continue home, institutional or school life, with return visits to Clinic.....	7	18	3	28	1	42	99
Change in home routine and care, or in home discipline	13	7	1	6	1	6	34
Modified school programme, or special class including vocational training	3	4	0	18	1	25	51
More social contacts and wider interests, re-establishment of self-confidence.....	3	0	5	7	2	4	21
Sterilization and supervision	5	8	0	0	1	0	14
Placement under careful supervision and control	7	4	1	1	0	1	14
Return to Clinic for further examination.....	0	4	6	0	2	5	17
Other recommendations, usually including a discussion of situation with patient or parent	7	3	5	4	2	3	24
Totals.....	66	76	39	92	24	96	393

Provincial Mental Hospital, Ponoka, Alberta

(R. R. MacLEAN, M.D., *Acting Medical Superintendent*)

The movement of patients is set forth in Table 1.

PATIENT-POPULATION CHANGES

There were 1,490 patients—861 male and 629 female—in residence on January 1st, 1936. There was an increase of 104 patients over the preceding year. On December 31st, 1936, the population was 1,612, representing an actual increase of 122 patients during 1936. No additional accommodation had been provided and, except for the fact that 97 patients were transferred to other institutions in the Province, there was no provision for the increase. The increase of 122 patients was over and above the 97 patients so transferred. Overcrowding has become very acute. In practically every instance the population of the individual wards has been doubled. In the interests of the new cases and to give them a better chance for improvement or recovery, the population of the admission wards has been kept at a minimum. Such a procedure is felt to be quite justified. New buildings must be constructed or admissions will have to be limited to the most urgent cases only.

ADMISSION OF PATIENTS

The total number of admissions for the year was 785—470 male and 315 female. First admissions totalled 557 (70.9%), re-admissions 192 (24.5%), and transfers 36 (4.5%). First admissions by voluntary admission numbered 128 (22.9%). The balance of 429 (77.1%) were admitted by other methods, the majority having been committed by Warrant of the Attorney General. A large number were admitted, as formerly, for special treatment for syphilis in its various forms, drug addiction and observation, and were classified as "without psychosis".

The nationalities were as follows, according to figures and percentages: Canadian born, 374 (47.7%); natives of Great Britain or British possessions, 144 (18.3%); natives of the U.S.A., 96 (12.2%); from other countries, 171 (21.8%).

SEPARATIONS OF PATIENTS

During the year 663 patients were discharged from the Hospital, according to Table 1 (Discharges).

The discharge rate, exclusive of transfers, deportations, deaths and elopements, was 56.9% of the total admission rate. The death rate, based on the total number under treatment and observation, was 4.96%. There was an increase in the number of deaths for the year, but no material increase in the death rate. In view of the intense overcrowding and further increase in the hazards as a result of this, the institution was very fortunate in being able to keep down the death rate. Broncho-pneumonia was by far the commonest cause of death, but tuberculosis also figured prominently. The influenza epidemic which swept through the institution, especially the male side, was particularly

hard on the elderly patients, and many survived but a few days after the onset of the illness.

ACCIDENTS

There were comparatively few accidents which might be considered as major. The staff on the wards must be complimented for the supervision they have given the patients, despite the congestion. Great concern is felt for the safety of a large number of defenceless patients on the overcrowded wards. In some instances there is scarcely enough room for the patients to sit about comfortably, and when moving about there is great liability to being pushed or attacked as a result of coming into physical contact with others. There was one suicide by strangulation. Accidents of all descriptions are reported on the regular forms, facilitating investigation and treatment. Four or five members of the staff themselves met with accidents in the course of their duties. None of these were of a serious nature.

ELOPEMENTS

There were fewer elopements in 1936—19 male patients effected their escape and 36 patients in all attempted to elope. It would appear obvious from these figures that the vigilance of the staff has been greater. Considering that parole of the grounds had been granted to a large number of patients, there were comparatively few elopements.

GENERAL HEALTH

The general health of patients and staff was very good until the fall and winter months, when the influenzal epidemic occurred. Whereas many of the elderly patients succumbed to broncho-pneumonia, the younger patients stood their illnesses well, and there was no serious illness in the case of the staff. The patients received typhoid inoculations on admission. Regular physical examinations, including X-ray plates of the chest, were carried out on all new members of the staff, routinely.

CLINICAL WORK

Owing to the large number of admissions and the fact that there were fewer members on the medical staff than in 1935, it was necessary for all concerned to work diligently in order to keep the records in order. Notwithstanding the increase in work, there was no obvious change in the high calibre of the records. The high admission rate means so much routine investigation, it is well nigh impossible to give the individual patient the amount of attention which should be devoted to him.

Staff conferences were held four times a week, or more often if necessary. New cases and cases for review or special consideration were presented at the conferences.

Medical staff meetings were held regularly, on Tuesday evenings, fortnightly. Invitations were sent to physicians in the neighbouring districts to attend the meetings. This year special papers dealt with psychiatric and psychological topics. It was thought advisable to do this in order to brush up in the particular field in which we work. Medical journals were reviewed as formerly.

A great number of luetic patients received malaria and other special types of treatment.

Drug and alcoholic addicts accounted for about 70 of the admissions. In most instances these patients had been here before, and it was thought that very few were helped materially by treatment. Furthermore, as they seemed to constitute an unfavourable influence on *bona fide* mental cases, a recom-

mendation is being made to the Department of Health to change The Mental Diseases Act so that in future it will not be necessary to commit these cases to this hospital.

Efforts were made to give fair trial to newer methods of treatment and new drug preparations, as accounts have appeared in the literature describing their values.

It is regrettable that more time could not be devoted to research or to the preparation of papers for publication. The members of the staff are most anxious to do something in this respect, but time does not permit if the regular routine is to be maintained.

The Acting Medical Superintendent conducted the majority of the Mental Hygiene clinics in Calgary, Lethbridge, Medicine Hat, Drumheller, and a two weeks' clinic in the Peace River country. Other members of the medical staff conducted the clinics from time to time. Infrequent visits were paid to the Auxiliary Hospital at Claresholm for discussion of the problems of that institution.

DENTAL CLINIC

The Dental Department functioned in its usual efficient manner. Dr. S. M. Snedden has been on duty regularly, and must again be complimented for the way in which he conducts this rather difficult service in an institution of this size. Routine examination of new patients is carried out, and emergency cases receive immediate treatment. The patients on the continued treatment wards are seen in turn, but the increase in the admission rate and the increase in population has made it difficult for the dentist to see each patient as often as might be desired.

The following is a summary of the work done in this department:

Full upper and lower dentures	70	General Anaesthetic	25
Partial upper dentures	3	X-Rayed	4
Full upper dentures	37	Gold Crowns	7
Partial lower dentures	1	Gold Inlays	2
Full lower dentures	33	Extractions	1650
Re-setting dentures	2	Abscessed Teeth	52
Repaired dentures	35	Examinations and treatments	2851
Treatments	583	Prophylactic treatments	68
Fillings	294		

Among his other duties, Dr. Snedden visits the Auxiliary Hospital in Claresholm and attends to the work there annually.

X-RAY DEPARTMENT

Miss Matilda McCaughey has been carrying on the X-ray work in conjunction with her duties as surgical nurse. She has given excellent service considering the fact that the X-ray machine is out of date. A new machine should be obtained as soon as possible, so that more up-to-date work can be done and to eliminate the possibility of accidents which might occur when using older machines which are not properly insulated.

The following is an account of the plates which were taken:

Chest	208	Kidney and Bladder	2
Teeth	78	Lumbar Vertebrae	8
Head	48	Cervical Spine	2
Pelvis	6	Ribs	7
Barium G.I.T.	13	Leg	6
Ankle	3	Tibia	1
Shoulder	10	Mandible	4
Hand	8	Gall Bladder	0
Foot	2	Abdomen	4
Hip	12	Femur	3
Forearm	2	Sinuses	6
Elbow	5	Stomach and Duodenum	16
Wrist	15	Heart and Vessels	2
Knee	8		

HYDROTHERAPY

This department, under Mr. Gill's supervision, has been functioning quietly and very satisfactorily. Prolonged baths, electric cabinets, packs and massage again made up the chief items of treatment. Drug addicts and alcoholics received eliminative therapy in this department. On the whole, the results from the various forms of treatment were better than during the previous year.

An ultra-violet light would be a most desirable acquisition in this department. It might be used to great advantage in the treatment of indolent skin diseases and for debilitated cases. Many such conditions arise during the winter months when natural sunlight is at a premium.

OCCUPATIONAL THERAPY

Miss Crysler, assisted by Miss Bier as well as a number of the regular attendant staff, has been directing the activities of this department as before. Reports indicate that there has been an increase in the number of patients engaged in the work of this department. This increase has been particularly noticeable in the case of female patients.

Exhibits were sent to the Edmonton Exhibition, and smaller exhibits were sent to the Lacombe and Crossfield fairs. It is thought that a similar exhibit should be sent to the Calgary Exhibition, but the cost of floor space has been prohibitive.

A very successful bazaar was held in the fall, and the proceeds from the sale of home cooking, as well as from serving tea, were used for the purpose of purchasing books for the patients' library and for recreational supplies as well. The ladies from the cottages very kindly donated the home cooking and assisted in the sale and in the serving of tea.

A large number of new books were purchased for the library, which is at the disposal of the patients and staff. The circulation among the patients has increased materially, and it is noticed that non-fiction is very popular. One of the male patients is librarian, and his services are considered most satisfactory. The room in which the books are housed was remodeled to suit the purposes, under the directions of the Superintendent of Building Maintenance.

The printing press and book-binding department, under Mr. Frederickson's supervision, were carried on in conjunction with the occupational therapy. A large number of male patients work in this department. Hospital forms for our own use, as well as for other institutions in the Province, have been made. Announcements for dances and other functions, as well as the invitations to the graduation exercises, were also made in this department. A great many of the books donated for the use of the patients by public libraries were in need of binding, and this was done here.

Patients working in the occupational departments are taken to the recreation hall, for walks or the baseball diamond for exercise. In the recreation hall, bingo, shuffle board and badminton were very popular. Much more could be done providing a larger number of staff members was at our disposal.

Two new occupational pursuits are deserving of special mention. An enclosure near the hospital buildings has been converted into a recreational garden. It is a grassy plot provided with deck chairs and settees and suitably decorated. The female patients do their work in this garden, weather permitting, instead of being confined to occupational rooms in the hospital.

A plot of ground was set aside for garden purposes for the use of elderly female cases. They have enjoyed it immensely, and have taken a great deal of pride in its appearance.

RECREATION AND ENTERTAINMENT

Except for the entertainment provided through the efforts of the occupational therapists, this department of the hospital activities is certainly in need of development.

Patients' dances are held fortnightly during the winter months. A larger number are now attending these, and the patients look forward to them and enjoy them immensely.

The talking machine has not as yet been installed, and one cannot too strongly recommend that something be done about it very shortly. It is a valuable adjunct to the care and treatment of mental cases. It not only provides them with entertainment, but keeps them in contact with events of the outside world, thereby stimulating their interest.

The Christmas entertainment was given by the Young People's Society of the Baptist Church of the town of Ponoka. It was much enjoyed and appreciated.

The Annual Sports' Day was held in June. The weather was inclement, unfortunately, but the patients appeared to enjoy themselves nevertheless. Residents of the town assisted in directing the sports and judging the contests.

During the winter months a great many members of the staff and patients took advantage of the skating rink. Music was provided by the electric machine which had been purchased by public subscription among the members of the staff the year before. The senior hockey team was not much in evidence, but the junior team, composed of boys from the cottages, showed great promise, and the games were well patronized.

Staff dances were held regularly and were very popular.

The "At Home" was held during the last week in December. The attendance was greater than ever before, and the entertainment provided for the children and adults was much enjoyed by all present.

The new tennis courts were in use. The game was particularly popular in the early part of the season. The grounds surrounding the tennis courts were attractively laid out and seeded to grass by the hospital gardener.

RELIGIOUS SERVICES

Denominational services were held regularly. The clergymen render a great service to the patients and the hospital, and are deserving of much credit and thanks. They are always ready and most willing and anxious to visit the hospital and give spiritual advice to the sick patients and others who wish to see them.

SOCIAL SERVICE

Mr. Kibblewhite has carried out this branch of the work to complete satisfaction. There has been considerable increase in the work of this department as a result of the increase in patient population, admissions and discharges. There are additional demands for his services in connection with the work of the Eugenics Board. One must again express regrets over the fact that it is quite impossible to do as much follow-up work as is indicated because of the lack of staff for this purpose.

SURGICAL SERVICE

The surgery, with very few exceptions and only in the case of an emergency, has been done by Dr. L. C. Conn of Edmonton and Dr. R. O'Callaghan of Calgary. These surgeons are at our disposal for any type of work which may be indicated. Approximately the same number of cases was operated upon, and

the results have been very gratifying. During the latter part of the year the surgical service has been under the direction of Dr. A. D. MacPherson. The work has been carried out most efficiently, and due credit must be given the members of the medical staff, the surgical nurse and others who have contributed so much to its success. The death rate has been very low considering the large number of cases done, many of which were comparatively poor risks.

During the year 63 major operations were performed and 44 minor operations, a total of 107. A summary of the work done is given herewith:

Operation.	Male.	Female.	Total.	Operation.	Male.	Female.	Total.
Vasectomy	37	.....	37	Circumcision	1	.....	1
Salpingectomy .....	.....	40	40	Resection	1	.....	1
Appendectomy	1	1	2	Amputation of Leg	2	.....	2
Herniotomy	10	.....	10	Hernioplasty	1	.....	1
Removal of Lipomas	1	.....	1	Removal of piece of			
Thyroidectomy	1	1	2	Upper Jaw	1	.....	1
Cholecystotomy	1	.....	1	Removal of Bullet	1	.....	1
Laparotomy	1	1	2	Cholecystectomy	1	.....	1
Haemorrhoidectomy	3	.....	3	Passing Sound	1	.....	1

NURSES' TRAINING SCHOOL

The fourth annual graduation exercises of the nurses and attendants were held on June 4th. The exercises were of particular interest this year owing to the fact that the first class in the combined course of mental and general nursing was graduating. Five nurses successfully completed the course, and reports concerning the work of these nurses in the various affiliated training schools were very encouraging. Two attendants received their certificates, having completed the three years' training. It is very regrettable that Dr. Baragar did not survive long enough to see the fruits of his labours in connection with the establishing of a special course in psychiatric and general nursing.

A post-graduate course was given as formerly, and eight nurses received their certificates following the year's work.

The lectures and clinics to the various nurses and attendants in training were willingly given by the medical and nursing staffs.

Ten nurses were granted two years' leave of absence without pay in order to affiliate with the training schools in the general hospitals in Edmonton and Calgary.

The following constitutes the allotment of our nurses in training to the various affiliated schools: Calgary General, 2; Edmonton General, 2; Holy Cross, 2; Royal Alexandra, 2; University Hospital, 2.

Miss Lynch, the Superintendent of Nurses, returned from a year's leave of absence, during which she did post-graduate work in Montreal. She was not present for graduation, but brought many new ideas from the east which were of considerable value to the training school.

Miss Hilda Bennett had acted in the capacity of Acting Superintendent of Nurses during Miss Lynch's absence and Miss C. N. Jackson was instructor during that period. The work of the training school was carried out very creditably by them.

TEACHING OF MEDICAL STUDENTS

The final year students in medicine at the University of Alberta came in groups for a period of two weeks, during which time they were given lectures and clinics by the members of the medical staff of the hospital. While in residence here the students assisted with the histories and attended all regular conferences and medical meetings. It is thought that they derive a good deal of practical benefit from their sojourn.

MEDICAL LIBRARY

Several new volumes were added to the medical library. The medical staff and the medical students make good use of the library, which contains a very up to date collection of medical, surgical, psychiatric and other text-books, reference books and medical journals.

VISITORS

The Honourable William Aberhart, the Premier, and Dr. W. W. Cross, the Minister of Health, attended the nurses' graduation exercises, together with Dr. Bow. They also visited the wards. Dr. Cross and Dr. Bow visited the hospital on other occasions during the year. The hospital was also favoured by visits from various members of the Government.

Countless numbers of friends and relatives of the patients visited during the year, and many were shown about the institution. An effort was made to interview the relatives by the Superintendent and other members of the medical staff.

Regular meetings of the Eugenics Board were held at about two monthly intervals. The Board does not constitute an official visiting committee, but displays a great deal of interest in the functioning of the hospital.

A Visiting Board composed of reputable citizens of the Province would no doubt be of great value and assistance in the successful administration of such an institution. The details in connection with the functioning of the hospital and the problems with which it is confronted could only be grasped by those who would spend some time in and about the hospital at regular intervals. Recommendations made by such a board would no doubt carry great weight and aid the Department in the development and maintenance of an up to date and satisfactory service.

ACCOMMODATION AND ALTERATIONS

No additional accommodation has been provided, and the overcrowding has become very acute and has long since reached a critical stage. New buildings will have to be erected in the very near future to take care of the increase in population for both male and female patients. Unfortunately, the buildings appear to be deteriorating quite rapidly, and a considerable amount will have to be spent in keeping them under repair. Strenuous efforts have been made to maintain the general health of the patient population, but the hazards of overcrowding make it most difficult.

DEPARTMENT ACTIVITIES

Laundry.—The work of this department has increased materially. It will no doubt be necessary to increase the staff very shortly, although many patients assist with the work.

There is urgent need of additional equipment. Extensive alterations and additions were made recently, but there is insufficient machinery with which to do the work without considerable rush. Efficiency has been maintained nevertheless.

Tailor Shop.—Mr. W. G. Potter directs the activities of this department, making patients' clothing and attendants' uniforms as well as doing a great deal of repair work. Several patients assist in the work. The work was carried on very quietly and efficiently.

Occupational Carpenter Shop.—This department works under Mr. George Watt's jurisdiction. Besides repairing furniture, much carpenter work and building repair is done by this department.

SEWING ROOM.—Miss Naunton directs this department very efficiently. Patients' dresses and nurses' uniforms are made. Several patients assist with the work. The dresses which are made in this department are very stylish and serviceable, and at times patients may even offer comments as to their individual likes and dislikes.

The Stores.—Mr. Walter Mason, who has been in charge of this department, is to be complimented on the very efficient manner in which he has carried on the work. With the increase in population his duties have increased. The nature of the work demands most careful attention and scrutiny.

Kitchens and Dining Rooms.—This department has been functioning most efficiently despite a great many handicaps. The number of meals has increased, yet there has been no increase in the facilities for preparing them. Additional space must be provided if the standard of the meals is to be kept at a high level. There is a great deal of overlapping—that is, the bakeshop has to be used at times by the kitchen staff proper. A new oven is needed and additional floor space for the work in the kitchen.

Gardens and Grounds.—Strenuous efforts were made by the gardener to provide fresh greens and vegetables for as long a period in the summer as possible. The staff and patients were particularly pleased with the ripe tomato crop. The gardener also raised several hives of bees and provided a large amount of honey for the use of the staff and patients.

The grounds were kept in excellent condition, and flowers, trees, shrubs and hedges were planted and maintained. Visitors and relatives of the patients regularly commented on the beauty of the hospital grounds.

Farm.—Mr. McKinnon provided the hospital with vast quantities of vegetables and kept the outlay for the purchase of these from other sources at a minimum.

It was necessary to increase the cattle herd to keep up the supply of milk.

Chicken Ranch.—Mr. C. W. Carleton has been conducting this department. In addition to supplying the hospital with fresh eggs and poultry, a large number of turkeys were raised for the Christmas and New Year season. Additions were made to the buildings to accommodate the increase in the flocks.

STAFF CHANGES

The year was ushered in by a radical change in the organization. Dr. Davidson's resignation took effect January 1st. Dr. Baragar, Commissioner of Mental Institutions, was then appointed Superintendent, but did not survive long to fill the post. During the early part of the year he developed sinusitis, which undermined his general health, and it eventually became necessary for him to enter the University Hospital, Edmonton, for special treatment. After several weeks in the hospital, when it appeared that recovery might take place, pneumonia set in, and he died on March 8th. Thus was removed the great driving force of the department of Mental Diseases of Alberta. Dr. Baragar had come to Alberta in 1930 and had been given the task of re-organizing the Department of Mental Diseases and Mental Institutions. He had worked indefatigably, never sparing himself. He re-organized the whole department and brought about many changes, particularly in this institution. Outstanding in his work was the organization for the training of nurses and attendants. He had worked particularly hard in organizing the combined course in psychiatric and general nursing for the nurses, and, unfortunately, did not live to witness the first graduation. His loss has been felt not only in the department and in this institution, but in the Province as a whole. His ability was also recognized in other parts of the Dominion. He made lasting contributions to the care

and treatment of mental cases and the organization of hospitals and other services in this connection.

About the middle of March, following the death of Dr. C. A. Baragar, Dr. R. R. MacLean was appointed Acting Medical Superintendent, the appointment being retroactive to March 1st.

Dr. T. C. Michie, who had been acting as physician in charge of the female side, was appointed Acting Assistant Superintendent, but retained his former service. Dr. Michie has been giving excellent service, and has proven himself to be most capable.

Dr. A. D. MacPherson returned to the service after a year's post-graduate internship in the Vancouver General Hospital. He was given charge of the male side and the surgical service.

Miss Lynch, the Superintendent of Nurses, returned from her post-graduate course in nursing at the McGill University. She was given a hearty welcome upon her return to the service. She reported that her course had been most instructive, and immediately placed the benefits of her recent experience at the disposal of the training school.

Miss Hilda Bennett, who had been carrying on with Miss Lynch's work very creditably during the latter's absence, left the service to go to Toronto for further study.

Miss C. N. Jackson was appointed Instructor of Nurses to fill the position vacated by Miss Bennett. Miss Jackson is very well trained, having completed the regular three years' general nursing course and subsequently proceeding to the degree of Bachelor of Science in Nursing.

Miss Jean Bier was appointed to the occupational staff to fill the position vacated by Miss Gertrude Watt. Miss Bier obtained her special training in occupational therapy in the east, and has given satisfactory service from the time of her appointment.

Mr. L. Peers was appointed Superintendent of Building Maintenance. He immediately set about the task of repairing the buildings as a whole, and has done much valuable work already.

CONCLUSION

The most momentous event of the year was the untimely death of Dr. Baragar. This, occurring so soon after Dr. Davidson's resignation and withdrawal from the service, would have made the task of carrying on the work most difficult had it not been for the whole-hearted co-operation of the other members of the staff.

Overcrowding has increased and again dominates the picture. All services are taxed to their utmost, and the situation has become not only serious, but very grave. The health and safety of the patients and staff are at stake, and additional accommodation should, and must, be provided if admissions are to continue. Much of the progress made in recent years will be lost if some relief is not given to the overcrowding in the very near future.

There were many staff changes of major and minor importance. It was very difficult to maintain the nursing establishment, especially in connection with the graduate nurses. It would appear there are many openings for them, and they do not remain long in one place. The new class of graduates returned to the hospital from their affiliated schools after the completion of their course. This helped the general situation.

The department heads and employees of the hospital generally are to be thanked and complimented for their hearty co-operation.

Might I express, on my own and the behalf of the staff of the hospital, pleasure and appreciation for the co-operation received from the Minister of Health, the Deputy Minister of Health and the late Commissioner of Mental Institutions.

Attached is the report from Dr. M. Carnat, Medical Officer in charge of the Provincial Auxiliary Hospital, Claresholm, on behalf of Dr. W. L. Valens, who has since left the service, covering the activities of that institution.

TABLE No. 1
MOVEMENT OF PATIENT POPULATION DURING 1936

	Male	Female	Total	Male	Female	Total
In residence Dec. 31, 1935				858	627	1485
On leave of absence				3	2	5
				<u>861</u>	<u>629</u>	<u>1490</u>
Admissions:						
First Admissions:						
(a) Voluntary	79	49	128			
(b) Certificates	42	55	97			
(c) Warrant	211	100	311			
(d) M.D. Act	12	9	21			
Re-admissions:						
(a) Voluntary	22	22	44			
(b) Certificates	4	11	15			
(c) Warrant	78	48	126			
(d) M.D. Act	4	3	7			
Transfers	18	18	36			
				<u>470</u>	<u>315</u>	<u>785</u>
				<u>1331</u>	<u>944</u>	<u>2275</u>
Discharges:						
(a) As recovered	42	46	88			
(b) As improved	86	70	156			
(c) As unimproved	21	17	38			
(d) As without psychosis	103	62	165			
(e) Transfers	76	21	97			
(f) Deported to other countries	3	3	6			
Deaths	61	52	113			
				<u>392</u>	<u>271</u>	<u>663</u>
In residence December 31st, 1936				<u>939</u>	<u>673</u>	<u>1612</u>

TABLE No. 2
SHOWING THE PSYCHOSES IN THOSE ADMITTED DURING 1936

Psychoses	Male	Female	Total
1 Traumatic psychoses .....	...	...	...
2 Senile psychoses	11	14	25
3 Psychoses with cerebral arteriosclerosis	25	15	40
4 General paralysis	23	2	25
5 Psychoses with cerebral syphilis	1	...	1
6 Psychoses with Huntington's Chorea	1	1	2
7 Psychoses with brain tumour	1	...	1
8 Psychoses with other brain or nervous diseases:			
(a) Cerebral embolism	1	1	2
(b) Disseminated sclerosis	1	...	1
(c) Encephalitis lethargica	2	2	4
(d) T.B. meningitis .....	...	1	1
(e) Tabes dorsalis	1	...	1
(f) Undetermined	1	...	1
9 Alcoholic psychoses:			
(a) Delirium tremens	5	...	5
(b) Chronic hallucinosis	1	...	1
(c) Acute alcoholism .....	...	1	1
(d) Chronic alcoholism	1	...	1
(e) Paranoid reaction	1	...	1
10 Psychoses due to drugs and other exogenous toxins .....	...	...	...
11 Psychoses with pellagra .....	...	...	...
12 Psychoses with other somatic diseases:			
(a) Toxic delirium .....	...	2	2
(b) Diabetic mellitus	1	...	1
(c) Cardio-renal vascular disease	1	...	1
(d) Pseudo-paresis .....	...	1	1
13 Manic-depressive psychoses:			
(a) Manic phase	17	24	41
(b) Depressive phase	23	26	49
(c) Hypomania	3	4	7
(d) Circular type .....	...	2	2
(e) Mixed type .....	...	1	1
14 Involutional Melancholia	4	5	9
15 Dementia Praecox (Schizophrenia):			
(a) Paranoid type	45	21	66
(b) Catatonic type	88	68	156
(c) Hebephrenic type	2	1	3
(d) Simple type	2	...	2
(e) Undefined	6	2	8
16 Paranoia and Paranoid Conditions	14	3	17
17 Epileptic psychoses	5	7	12
18 Psychoneuroses and neuroses:			
(a) Neurasthenic type	1	3	4
19 Psychoses with psychopathic personality .....	...	...	...
20 Psychoses with mental deficiency	24	25	49
21 Undiagnosed psychoses	7	4	11
22 Without psychoses	1	4	5
(a) Epilepsy	4	3	7
(b) Alcoholism	9	1	10
(c) Drug addiction	38	17	55
(d) Mental deficiency	55	39	94
(e) Huntington's Chorea	1	...	1
(f) Neuro-syphilis	33	2	35
(g) Cerebral syphilis	1	...	1
(h) Somatic syphilis	1	...	1
(i) Psychopathic personality	1	3	4
(j) Psychoneuroses	1	4	5
(k) Chronic encephalitis	1	3	4
(l) Disseminated sclerosis	1	...	1
(m) Cerebral arteriosclerosis	1	1	2
(n) Metastatic carcinoma vertebrae .....	...	1	1
(o) Undiagnosed	3	1	4
Total	470	315	785

TABLE No. 3
MARITAL CONDITION OF PATIENTS ADMITTED DURING 1936 WITH REFERENCE TO PRINCIPAL PSYCHOSES

Psychoses	Single		Married		Widowed		Separated		Divorced		Total	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1 Traumatic psychoses	4	1	5	9	3	8	11	1	1	1	11	14
2 Senile psychoses	4	4	12	8	6	6	12	2	1	3	25	15
3 Psychoses with cerebral arteriosclerosis	3	3	13	1	4	4	4	2	1	3	23	2
4 General paralysis	1	1	1	1	1	1	1	1	1	1	1	1
5 Psychoses with cerebral syphilis	1	1	1	1	1	1	1	1	1	1	1	1
6 Psychoses with Huntington's Chorea	1	1	1	1	1	1	1	1	1	1	1	1
7 Psychoses with brain tumour	1	1	1	1	1	1	1	1	1	1	1	1
8 Psychoses with other brain or nervous diseases:												
(a) Cerebral embolism	1	1	1	2	1	1	1	1	1	1	1	2
(b) Disseminated sclerosis	1	1	1	1	1	1	1	1	1	1	1	1
(c) Encephalitis lethargica	1	2	3	1	1	1	1	1	1	2	2	4
(d) T.B. meningitis	1	1	1	1	1	1	1	1	1	1	1	1
(e) Tabes dorsalis	1	1	1	1	1	1	1	1	1	1	1	1
(f) Undetermined	1	1	1	1	1	1	1	1	1	1	1	1
9 Alcoholic psychoses:												
(a) Delirium tremens	3	3	3	2	2	2	2	1	1	1	5	5
(b) Chronic hallucinosis	1	1	1	1	1	1	1	1	1	1	1	1
(c) Acute alcoholism	1	1	1	1	1	1	1	1	1	1	1	1
(d) Chronic alcoholism	1	1	1	1	1	1	1	1	1	1	1	1
(e) Paranoid reaction	1	1	1	1	1	1	1	1	1	1	1	1
10 Psychoses due to drugs and other exogenous toxins	1	1	1	1	1	1	1	1	1	1	1	1
11 Psychoses with pellagra	1	1	1	1	1	1	1	1	1	1	1	1
12 Psychoses with other somatic diseases:												
(a) Toxic delirium	1	1	1	1	1	1	1	1	1	1	1	1
(b) Diabetic mellitus	1	1	1	1	1	1	1	1	1	1	1	1
(c) Cardio-renal vasc. disease	1	1	1	1	1	1	1	1	1	1	1	1
(d) Pseudo-paresis	1	1	1	1	1	1	1	1	1	1	1	1
13 Manic-depressive psychoses:												
(a) Manic phase	9	5	14	8	17	25	1	1	1	1	17	24
(b) Depressive phase	8	1	9	14	23	37	1	2	3	1	23	26
(c) Hypomania	2	2	2	3	1	4	1	1	1	1	3	4
(d) Circular type	1	1	1	1	1	1	1	1	1	1	2	2
(e) Mixed type	1	1	1	1	1	1	1	1	1	1	1	1
14 Involuntal Melancholia	1	1	1	1	1	1	1	1	1	1	1	1
15 Dementia praecox (schizophrenia):												
(a) Paranoid type	28	10	38	14	8	22	2	2	4	1	1	2
(b) Catatonic type	73	26	99	12	38	50	1	1	2	2	88	68
(c) Hebephrenic type	2	1	3	1	1	1	1	1	1	1	2	1
(d) Simple type	1	1	1	1	1	1	1	1	1	1	2	2
(e) Undefined	4	1	5	1	1	2	1	1	1	1	6	2
16 Paranoia and paranoid conditions	1	1	2	11	2	13	1	1	1	1	14	3
17 Epileptic psychoses	4	6	10	1	1	2	1	1	1	1	5	7
18 Psychoneuroses and neuroses:												
(a) Neurasthenic type	1	2	3	1	2	3	1	1	1	1	1	3

19 Psychoses with psychopathic personality	18	8	26	6	13	19	2	2	2	2	2	24	25	49				
20 Psychoses with mental deficiency	3	3	3	3	2	5	1	2	3	1	1	7	4	11				
21 Undiagnosed psychoses	4	2	6	1	1	1	6	1	7	2	2	4	3	7				
22 Without psychoses:	1	1	1	1	1	1	1	1	1	1	1	1	1	1				
(a) Epilepsy	20	4	24	8	3	11	3	3	3	7	7	38	17	55				
(b) Alcoholism	51	28	79	4	9	13	2	2	2	14	14	55	39	94				
(c) Drug addiction	1	1	1	1	1	1	1	1	1	1	1	1	1	1				
(d) Mental deficiency	14	14	14	16	2	18	1	1	1	1	1	33	2	35				
(e) Huntington's Chorea	1	1	1	1	1	1	1	1	1	1	1	1	1	1				
(f) Neuro-syphillis	1	1	1	1	1	1	1	1	1	1	1	1	1	1				
(g) Cerebral syphillis	1	1	1	1	1	1	1	1	1	1	1	1	1	1				
(h) Somatic syphillis	1	2	2	1	1	2	1	1	1	1	1	1	1	1				
(i) Psychopathic personality	1	1	2	1	1	2	1	1	1	1	1	1	3	4				
(j) Psychoneuroses	1	1	2	1	1	2	1	1	1	1	1	1	4	5				
(k) Chronic encephalitis	1	2	2	1	1	2	1	1	1	1	1	1	3	4				
(l) Disseminated sclerosis	1	1	1	1	1	1	1	1	1	1	1	1	1	1				
(m) Cerebral arteriosclerosis	1	1	1	1	1	1	1	1	1	1	1	1	1	1				
(n) Cerebral arteriosclerosis	1	1	1	1	1	1	1	1	1	1	1	1	1	1				
(o) Metastatic carcinoma vertebrae	2	1	1	1	1	2	1	1	1	1	1	3	1	4				
(o) Undiagnosed	2	1	1	1	1	2	1	1	1	1	1	3	1	4				
Total	267	107	374	154	158	312	22	32	54	18	17	35	9	1	10	470	315	785

TABLE No. 4
AGES OF PATIENTS ADMITTED DURING 1936

Ages	First Admissions		Re-admissions		Male	Female	Total
	Male	Female	Male	Female			
Under 15 years	6	4	2	...	8	4	12
15 to 19 years	16	23	10	5	26	28	54
20 to 24 "	31	28	6	11	37	39	76
25 to 29 "	45	30	22	14	67	44	111
30 to 34 "	39	23	21	15	60	38	98
35 to 39 "	40	24	18	7	58	31	89
40 to 44 "	36	17	11	10	47	27	74
45 to 49 "	37	18	15	14	52	32	84
50 to 54 "	25	13	11	9	36	22	58
55 to 59 "	25	11	3	9	28	20	48
60 to 64 "	14	9	2	2	16	11	27
65 to 69 "	10	5	3	3	13	8	21
70 and over	20	8	2	3	22	11	33
Total	344	213	126	102	470	315	785

TABLE No. 5
NATIVITIES OF PATIENTS ADMITTED DURING 1936

Nativities	Male	Female	Total	Nativities	Male	Female	Total
Canada	216	158	374	France	2	4	6
Newfoundland	1	1	2	Germany	12	6	18
England	47	32	79	Hungary	5	2	7
Scotland	21	17	38	Italy	1	1	2
Ireland	12	5	17	Jugo-Slavia	1	...	1
Wales	2	2	4	Lithuania	4	...	4
Other British Possessions	2	3	5	Norway	8	1	9
U.S.A.	55	41	96	Paraguay	1	1	2
Austria	15	6	21	Poland	18	18	36
Alsace	1	...	1	Roumania	6	...	6
Belgium	1	1	2	Russia	9	6	15
Bohemia	1	...	1	Sweden	15	1	16
China	3	...	3	Switzerland	1	...	1
Czecho-Slovakia	4	2	6	Ukrainia	1	3	4
Denmark	6	1	7	Total	470	315	785
Esthonia	...	2	2				
Finland	1	1	2				

TABLE No. 6
PLACE OF RESIDENCE OF PATIENTS ADMITTED DURING 1936

Place of Residence	Male	Female	Total	Place of Residence	Male	Female	Total
Abilene	1	...	1	Carsland	1	...	1
Alhambra	...	1	1	Carstairs	...	1	1
Andrew	1	...	1	Castor	1	2	3
Ardmore	1	...	1	Cereal	1	...	1
Ardrossan	...	1	1	Champion	...	1	1
Arrowwood	...	1	1	Chancellor	1	...	1
Arvilla	1	...	1	Chauvin	1	...	1
Athabasca	1	...	1	Chigwell	...	1	1
Banff	2	1	3	Chip Lake	1	...	1
Barons	1	...	1	Chipman	1	...	1
Barrhead	1	1	2	Chisholm	1	...	1
Bassano	...	1	1	Claresholm	1	...	1
Battle Bend	1	...	1	Clive	...	1	1
Bawlf	1	...	1	Clover Bar	2	...	2
Beaver Dam	...	1	1	Clyde	3	...	3
Belloy	...	1	1	Coaldale	...	1	1
Bellevue	...	1	1	Coalhurst	2	1	3
Bentley	2	...	2	Coalspur	1	...	1
Bindloss	...	1	1	Coleman	1	1	2
Big Valley	1	...	1	Conklin	1	...	1
Blackie	...	2	2	Connor Creek	1	...	1
Blackfalds	2	...	2	Coronation	2	1	3
Blairmore	1	...	1	Coutts	1	...	1
Bonanza	1	...	1	Craigmyle	1	...	1
Bondiss	...	1	1	Crossfield	1	1	2
Boscombe	1	...	1	Dalemead	1	...	1
Botha	...	1	1	Dapp	1	...	1
Breton	1	...	1	Daysland	1	...	1
Bruderheim	2	1	3	Del Bonita	1	...	1
Buck Creek	1	...	1	Delburne	1	1	2
Byemoor	1	...	1	Delia	...	1	1
Calgary	95	59	154	Desjarlais	1	...	1
Camrose	3	...	3	Detroit (Michigan)	...	1	1
Cardston	2	...	2	Derwent	...	1	1
Caroline	1	...	1	Didsbury	1	...	1
Carrot Creek	1	...	1	Dodds	1	...	1

Place of Residence	Male	Female	Total	Place of Residence	Male	Female	Total
Donaldald	1	1	2	Lisburn	1	1	2
Doris	1	1	2	Lochearn	1	1	2
Drumheller	4	4	8	Lloydminster	1	2	3
Duchess	1	1	2	Lougheed	1	1	2
Duffield	1	1	2	Loyalist	1	1	2
Edmonton	91	58	149	Lymburn	1	1	2
Eagle Hill	1	1	2	Macleod	1	1	2
Eaglesham	1	1	2	Magrath	1	1	2
East Coulee	1	1	2	Mannville	1	1	2
Eckville	2	3	5	Manola	1	1	2
Edson	1	1	2	Manyberries	1	1	2
Edward	1	1	2	Marwayne	1	1	2
Ellscoff	1	1	2	Mayerthorpe	1	1	2
Elnora	2	1	3	McLennan	1	1	2
Endiang	1	1	2	Meanook	1	1	2
Entwistle	3	3	6	Medicine Hat	3	3	6
Erskine	1	1	2	Metiskow	1	1	2
Evergreen	1	1	2	Midnapore	1	1	2
Fairydell	1	1	2	Millet	3	1	4
Fairview	1	1	2	Minburn	1	1	2
Falher	1	2	3	Mirror	1	1	2
Falun	1	1	2	Monitor	2	1	3
Farrow	1	1	2	Morningside	1	1	2
Flatbush	1	1	2	Morinville	1	1	2
Fort Assiniboine	2	2	4	Mulhurst	1	1	2
Fort George, B.C.	1	1	2	Mundare	1	1	2
Fort Saskatchewan	1	2	3	Munson	1	1	2
Fort Vermillion	2	2	4	Mynam	2	2	4
Frains	1	1	2	Nacmine	1	1	2
Gadsby	1	1	2	Nanton	2	1	3
Genesee	2	2	4	Nemiscam	1	1	2
Gibbons	1	1	2	Nevis	1	2	3
Gleichen	1	2	3	Newcastle	1	1	2
Glenwood	1	1	2	New Dayton	1	1	2
Goodfish Lake	1	1	2	Nobleford	1	1	2
Goodwin	1	1	2	Nordegg	1	1	2
Graminia	1	1	2	Northmark	1	1	2
Grande Prairie	2	2	4	Nose Creek	1	1	2
Grantham	1	1	2	Ogden	1	1	2
Granum	1	1	2	Ohaton	1	1	2
Grassland	1	1	2	Olds	3	3	6
Grimshaw	1	1	2	Onoway	1	2	3
Gunn	1	1	2	Opal	1	1	2
Haight	1	1	2	Oyen	1	1	2
Hairy Hill	1	1	2	Parkland	1	1	2
Halcourt	2	2	4	Paradise Valley	1	1	2
Halkirk	1	1	2	Patricia	1	1	2
Hanna	1	1	2	Pashley	1	1	2
Hardisty	1	1	2	Peace River	3	3	6
Hartell	1	1	2	Peers	1	1	2
Haynes	1	1	2	Pembina	1	1	2
Hay Lakes	2	2	4	Penhold	1	1	2
Heisler	1	1	2	Pincher Creek	2	2	4
Hemaruka	1	1	2	Pinedale	1	1	2
Hespero	1	1	2	Ponoka	4	3	7
High Prairie	1	1	2	Point Brule	1	1	2
High River	2	1	3	Prestville	1	1	2
Hilda	1	1	2	Provost	1	2	3
Hinton	1	1	2	Queenstown	1	1	2
Holden	1	2	3	Ranfurly	2	2	4
Hondo	1	1	2	Raymond	1	1	2
Huxley	1	1	2	Red Deer	8	2	10
Innisfail	1	2	3	Retlaw	1	1	2
Irma	2	2	4	Ribstone	2	2	4
Iron Springs	1	1	2	Rimbey	2	1	3
Irvine	2	2	4	Riviere Que Barre	1	1	2
Islay	1	1	2	Rochfort Bridge	1	1	2
James River Bridge	1	1	2	Rocky Mountain House	1	1	2
Jasper	3	3	6	Rosalind	1	1	2
Jumping Pound	1	1	2	Rumsey	1	1	2
Killam	1	1	2	St. Albert	2	1	3
Kingman	2	2	4	St. Edouard	1	1	2
Kinsella	1	1	2	Ste. Lina	1	1	2
Kinuso	1	1	2	St. Michael	2	2	4
Kitscoty	1	1	2	St. Paul	1	1	2
Lacombe	4	3	7	Schuler	1	1	2
Lac La Biche	1	1	2	Scollard	1	1	2
Lac Magloire	1	1	2	Scotswood	1	1	2
Lake Eliza	1	1	2	Sedgewick	1	1	2
Lamont	1	1	2	Sexsmith	1	1	2
Lavoy	1	1	2	Shoal Lake	1	1	2
Leavitt	1	1	2	Sibbald	1	1	2
Leduc	2	1	3	Smoky Lake	1	1	2
Legal	1	1	2	Sniatyn	1	1	2
Leslieville	1	1	2	South Cooking Lake	1	1	2
Lethbridge	10	8	18	Spring Coulee	1	1	2
Lindbergh	1	1	2				

DEPARTMENT OF PUBLIC HEALTH

Place of Residence	Male	Female	Total	Place of Residence	Male	Female	Total
Spruce Grove	1	.....	1	Two Hills .....	.....	1	1
Standard	1	.....	1	Vegreville .....	.....	2	2
Stanmore	1	.....	1	Vermilion	3	1	4
Standoff .....	.....	1	1	Viking .....	.....	3	3
Stavely	2	.....	2	Vilna	1	1	2
Stettler	1	2	3	Vlmy	3	.....	3
Stony Plain	2	.....	2	Violet Grove	1	.....	1
Strathmore	2	.....	2	Wainwright	1	1	2
Streamstown	1	1	2	Wanham	2	.....	2
Success, Sask.	1	.....	1	Warrensville	1	.....	1
Sunnybrook	1	.....	1	Waskatenau	1	1	2
Swalwell	1	.....	1	Waterglen	1	.....	1
Sylvan Lake .....	.....	1	1	Wayne	3	.....	3
Taber	2	1	3	Westlock	4	.....	4
Tangent	1	.....	1	Westrose .....	.....	1	1
Tawatinaw	1	1	2	Wetaskiwin	5	2	7
Tees	1	.....	1	Whitcourt .....	.....	1	1
Tepee Creek	2	.....	2	Whitelaw	2	.....	2
Therien	1	.....	1	Wildwood	1	.....	1
Thorsby .....	.....	1	1	Willingdon	1	1	2
Tiger Lily .....	.....	1	1	Woking	1	1	2
Tilley .....	.....	2	2	Woodbend	1	.....	1
Tofield	1	1	2	Woodglen	1	.....	1
Tomahawk	1	.....	1	Wood River .....	.....	1	1
Tudor	1	.....	1	Worsley .....	.....	1	1
Twin Butte	1	.....	1	Wostock .....	.....	1	1
Twin River	1	.....	1				
				Total	470	315	785

TABLE No. 7
DISCHARGES, CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES AND CONDITION ON DISCHARGE
FOR THE YEAR 1936

	Psychoses			Recovered			Improved			Unimproved		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1 Traumatic												
2 Senile	3	3	6				3		3		3	3
3 With cerebral arteriosclerosis	9	6	15	3	2	5	6	3	9		1	1
4 General paralysis	10	3	13				10	3	13			
5 With cerebral syphilis												
6 With Huntington's Chorea												
7 With brain tumour												
8 With other brain or nervous diseases	1	1	2				1		2			
9 Alcoholic	8		8	2		2	6		6			
10 Due to drugs and other exogenous toxins												
11 With pellagra												
12 With other somatic diseases		4	4		4	4						
13 Manic-depressive	31	41	72	18	21	39	13	20	33			
14 Involutional melancholia	2	3	5				2		2			
15 Dementia praecox (Schizophrenia)	63	45	108	12	15	27	36	23	59	15	7	22
16 Paranoia and paranoid conditions	5	4	9				1	3	4	4	1	5
17 Epileptic	4	5	9	1		1	2	4	6	1	1	2
18 Psychoneuroses and neuroses	1	2	3				1	1	2		1	1
19 With psychopathic personality	1		1	1		1						
20 With mental deficiency	10	12	22	4	2	6	4	8	12	2	2	4
21 Undiagnosed	3	7	10	2	2	4	1	5	6			
22 Without psychoses	104	62	166									
Total	255	198	453	43	46	89	86	71	157	22	19	41

TABLE No. 9
RECORD OF DEATHS DURING 1936

Register No.	Sex.	Age.	Time in Hospital.			Cause of Death.
			Years.	Months.	Days.	
7557	F	70	....	....	21	Broncho-pneumonia; somatic syphilis.
7503	M	53	....	....	2	Exhaustion with tabo-paresis.
4881	M	65	5	1	9	Broncho-pneumonia; generalized arterio-sclerosis.
7596	F	56	....	....	10	Broncho-pneumonia; exhaustion.
6505	M	54	1	9	18	Huntington's Chorea.
3879	M	29	8	4	25	Bilateral broncho-pneumonia.
5621	F	80	3	9	19	Broncho-pneumonia; generalized arterio-sclerosis; pituitary tumour.
6526	F	18	1	3	26	Broncho-pneumonia.
1388	F	48	17	7	27	Cerebellar abscess.
6931	M	71	1	1	28	Exhaustion with generalized arterio-sclerosis.
1424	F	72	17	6	22	Chronic myocarditis.
4605	F	27	6	4	29	Acute suppurative parotitis; broncho-pneumonia; septicaemia.
7651	M	76	....	....	8	Broncho-pneumonia; rodent ulcer right side of face.
5870	F	44	3	4	6	Status epilepticus.
7287	M	71	....	....	8	Cardiorrhhexus; coronary thrombosis.
3683	F	64	9	1	4	Broncho-pneumonia.
6819	F	63	1	4	3	Broncho-pneumonia.
7633	F	87	....	....	1	Broncho-pneumonia; coronary sclerosis.
6815	M	61	1	5	9	Broncho-pneumonia.
7533	M	35	....	....	3	Brain tumour.
7730	M	43	....	....	4	Exhaustion; acute mania.
3785	F	39	8	10	9	Pneumonia; multiple lung abscesses.
7141	M	76	1	....	....	Broncho-pneumonia; cerebral degeneration.
5668	F	24	3	10	25	Broncho-pneumonia following status epilepticus.
3300	M	36	10	5	18	Perforation of intestine, shock; general paresis.
6643	M	35	1	9	23	Bilateral pulmonary tuberculosis.
7754	M	82	....	....	12	Cerebral arteriosclerosis; heart failure.
3127	M	88	11	1	20	Chronic myocarditis; generalized arterio-sclerosis.
7610	F	69	....	....	3	Cerebral arteriosclerosis with degeneration; cardiac failure.
1584	F	42	17	....	14	Epilepsy; rodent ulcer.
6069	M	29	3	....	13	Bilateral pulmonary tuberculosis.
7612	M	88	....	....	3	Senility; heart failure.
5594	M	34	4	1	5	Broncho-pneumonia.
7792	M	66	....	....	4	Cerebral haemorrhage; cerebral arterio-sclerosis.
7801	F	41	....	....	3	Acute alcoholism; chronic morphinism.
5683	M	24	3	11	5	Broncho-pneumonia; multiple abscesses with toxæmia.
5924	M	59	3	4	28	Pulmonary tuberculosis.
5609	M	45	4	1	5	Lobar pneumonia.
7785	M	51	....	....	13	Chronic interstitial nephritis.
6324	F	24	2	5	24	Tuberculous broncho-pneumonia.
2266	F	46	14	8	4	Myocarditis.
6231	M	71	2	8	16	Broncho-pneumonia.
7732	M	48	....	....	1	Lobar pneumonia; malaria; general paresis.
7484	F	33	....	....	6	Exhaustion due to manic excitement; purulent axillary adenitis.
7524	M	85	....	....	4	Broncho-pneumonia.
7824	F	31	....	....	3	Poisoning by bi-chloride of mercury, accidental.
7831	M	63	....	....	2½	Ulceration of small intestines with perforation and haemorrhage.
7692	M	72	....	....	2	Acute pneumonia.
7829	M	44	....	....	10	Acute myocarditis; general paresis.
6446	M	82	2	3	....	Septicaemia; cellulitis of left leg.
6607	F	54	1	11	20	Bilateral pulmonary tuberculosis.
5877	F	56	3	4	25	Broncho-pneumonia.
7377	F	79	....	....	9	Cerebral haemorrhage.
7348	F	87	....	....	8	Broncho-pneumonia.
5968	F	59	3	4	26	Broncho-pneumonia.
6378	F	41	2	4	29	Carcinoma of left breast; Metastases in liver.
5716	F	34	3	11	27	Cerebral haemorrhage.
2951	F	35	12	....	25	Pernicious anaemia; acute parotitis.
6461	F	30	2	4	1	Exhaustion due to disseminated sclerosis.
5805	M	70	3	10	3	Broncho-pneumonia.
7865	F	64	....	....	1	Chronic myocarditis; cerebral softening.
4476	M	88	7	3	3	Bilateral broncho-pneumonia.
7204	F	21	1	2	6	Tuberculosis, pulmonary and interstitial.
7941	M	62	....	....	20	Cerebral haemorrhage; cerebral arterio-sclerosis.
7204	M	62	....	....	6	Myocarditis; syphilis.
7823	M	30	....	....	2	Circulatory failure; adhesive pericarditis.
7745	F	63	....	....	3	Broncho-pneumonia; cystitis and pyelitis.

Register No.	Sex.	Age.	Time in Hospital.			Cause of Death.
			Years.	Months.	Days.	
7936	M	27	....	....	29	Suffocation by hanging.
7960	F	63	....	....	17	Cerebral haemorrhage.
7233	M	53	1	2	1	Undifferentiated psychosis; coronary sclerosis.
7380	M	71	....	11	7	Coronary sclerosis; generalized arterio-sclerosis.
6398	F	70	2	6	21	Chronic myocarditis; acute pyelitis.
6129	F	82	3	2	6	Broncho-pneumonia.
7849	F	34	....	2	19	Broncho-pneumonia; peritonitis and liver abscess.
7583	M	55	....	7	16	Lobar pneumonia; general paresis.
6866	M	76	1	9	9	Chronic myocarditis.
6055	M	38	3	4	16	Acute tuberculous broncho-pneumonia; general paresis.
8034	F	16	....	....	6	Miliary tuberculosis.
7510	F	36	....	9	16	Lobar pneumonia.
6572	F	30	2	3	25	Pulmonary tuberculosis.
7953	F	49	....	2	....	Chronic myocarditis.
8057	F	18	....	....	7	Exhaustion due to catatonic excitement.
6748	F	38	2	1	10	Tuberculosis broncho-pneumonia; pulmonary tuberculosis.
8070	M	75	....	....	18	Myocarditis; senile psychosis.
7903	M	63	....	3	9	Myocarditis with cerebral softening.
5850	M	62	3	11	24	Exhaustion due to involutional melancholia.
7883	M	62	....	3	18	Acute purulent bronchitis; arteriosclerosis.
7452	M	25	1	....	....	Bilateral broncho-pneumonia; brain tumour.
8066	F	30	....	1	4	Ovarian cyst (multo-ocular cystadenoma).
5819	F	48	4	1	....	Pulmonary tuberculosis and tuberculous pericarditis.
7958	F	61	....	3	19	Broncho-pneumonia; senile psychosis.
8105	M	52	....	1	6	Cellulitis of left arm with toxæmia.
8119	M	44	....	1	5	General paresis; exhaustion.
8145	F	52	....	....	25	Chronic myocarditis and endocarditis.
7089	M	23	1	8	2	Pulmonary tuberculosis.
6424	F	66	2	8	11	Angina pectoris.
7902	M	18	....	5	2	Broncho-pneumonia; cirrhosis of liver.
5082	F	74	5	4	20	Hypostatic broncho-pneumonia.
8173	M	73	....	....	27	Myocarditis.
4716	M	65	6	11	1	Acute pneumonic phthisis.
6817	M	52	2	1	27	Broncho-pneumonia; abscess of leg; general paresis.
8102	F	76	....	2	11	Broncho-pneumonia; fractured femur.
8185	M	23	11	1	5	Status epilepticus.
5599	F	32	4	8	19	Pulmonary tuberculosis.
3702	M	68	9	10	4	Coronary thrombosis.
2555	M	46	14	2	12	Pulmonary tuberculosis.
7338	M	61	1	4	21	Miliary tuberculosis; chronic myocarditis.
8250	M	45	....	....	12	General peritonitis due to perforated ulcer; syphilis with aortitis.
3508	F	52	10	5	12	Myocarditis.
8284	F	23	....	....	1	Terminal broncho-pneumonia; toxæmia; pregnancy.
4937	M	55	6	5	13	Broncho-pneumonia; pyæmia with abscess.
8158	M	67	....	2	8	Broncho-pneumonia; brain tumour.
6251	M	53	3	4	6	Broncho-pneumonia; general paresis.

PROVINCIAL AUXILIARY HOSPITAL, CLARESHOLM, ALBERTA

Movements of Patients.—On January 1, 1936, there were 100 patients in residence. As usual, transfers to this hospital from the Provincial Mental Hospital and returning of patients from here to the Provincial Mental Hospital accounted for the main movement of patients. There were 12 patients transferred from the Provincial Mental Hospital. There was 1 deportation, 1 death, and 2 discharges.

Accidents and Elopements.—There were no elopements. There was only one accident of a serious nature. An elderly lady (No. 4266) fractured her left femur when she fell to the floor. She was hospitalized in the Claresholm General Hospital from January 12 to March 18. A good result was obtained, and this patient is now up and about.

General Health.—With the exception of a mild epidemic of influenza among both staff and patients during the latter part of the year, there was little illness

in the hospital. The majority of patients continued to spend a large portion of time in the open air.

Dentistry.—Dr. S. N. Snedden spent two days here during August carrying out the dental work on the patients.

Occupational Therapy.—An attempt was made to interest as many patients as possible in some form of constructive endeavour. In addition to the employment of patients in routine work of the hospital, in the wards, dormitories, dining rooms, a special occupational therapy class under the supervision of a nurse attendant was conducted. Many patients spent much time during the summer working about the gardens and grounds under the supervision of a nurse attendant.

Lectures.—The Medical Officer spoke upon request to various local organizations on various mental health problems.

Library.—Our library was given considerable usage by the patients. Several donations of books were received from citizens of Claresholm. There are now over 250 books in the library.

Religious Services.—Services have been conducted every Sunday afternoon in the hospital, the Rev. R. W. Dalglish and the Rev. Canon W. J. Merrick alternating. Father Hughes held monthly services at the church for all Roman Catholic patients who wished to attend. All services were well attended.

Recreation and Entertainment.—Regular matinees once every two weeks during the year were provided in the local theatre for all patients who wished to attend. Those unable to walk were taken to the theatre by automobile. These entertainments were thoroughly enjoyed by all attending.

The United Church Choir visited the hospital and presented a program of Easter music on April 9.

On May 22, the Nazarene Male Quartet came and presented a program of sacred music.

On August 13 the annual Sports' Day was held on the hospital grounds. Prizes were provided for the various events and refreshments were served.

On October 31 the members of the Claresholm's Men's Club visited the hospital and presented an enjoyable musical entertainment, followed by an hour of music and dancing. Refreshments were served.

On December 20 all patients who so desired visited the United Church, where a special Christmas service was held.

The patients enjoyed all the above entertainments and, in addition to these, several entertainments were arranged by the staff for the various holidays.

Staff Changes.—The year was marked by several changes in the staff. The Matron, Miss R. Poile, resigned in February. Her resignation was accepted with regret, and she was replaced by Miss L. Strandberg, who has carried on in a very creditable manner. Miss Jean Gordon, the dietitian housekeeper, resigned in October to take a position at the Olds School of Agriculture, and was replaced by Miss Dorothy Browning, who has capably filled the position. There were three resignations from the nursing and domestic staff. The positions have been filled. The members of the staff have continued to give efficient service throughout the year.

Visitors.—The hospital was visited periodically by the Medical Superintendent of the Provincial Mental Hospital. Many relatives and friends of patients visited the hospital. Many people of the community have continued to take a keen interest in the institution, visiting it and frequently offering their services in various ways. Their co-operation is gratefully acknowledged.

Gardens and Grounds.—The results of the work done in the garden and the grounds was very disappointing. There was a marked lack of moisture. No rain fell from early June until late in the fall. The garden did not provide sufficient vegetables for the hospital, and it was necessary to have the supplies shipped in. Many of the trees that were planted in the spring and during the previous year died. The lawns suffered from the drought. However, the gardener did work hard, and did the best he could under the circumstances.

Water Supply.—Because of the drought condition there was a marked shortage of water. The hospital secures its water supply from the town system. The supply was very limited at times, and water was only available for a few hours per day during the latter part of the summer. Fortunately new wells were drilled, and a sufficient amount obtained to supply the needs of the institution from October on.

Conclusion.—The staff co-operated well, maintaining a high standard of efficiency. The happy relationship between the residents of the town and neighboring territory and the hospital has continued. The past year has been successful in the operation of the hospital.

TABLE No. 1
MOVEMENT OF PATIENT POPULATION DURINGG 1936

In Residence January 1, 1936	Male Female Total			Male Female Total		

Admissions:				100		100
First Admissions:						
(a) Voluntary			
(b) Certificate			
(c) Warrant			
(d) Order			
(e) Transfers	12	12			
Re-admissions:						
(a) Voluntary			
(b) Certificate			
(c) Warrant			
(d) Order			
(e) Transfers			
Total	12	12
Discharged during the year:				112	112
(a) As recovered			
(b) As improved	1	1			
(c) As unimproved	1	1			
(d) As without psychosis			
(e) Transferred to other hospitals	9	9			
(f) Eloped			
(g) Deported to other countries	1	1			
(h) Deaths	1	1			
Total	13	13
In residence at end of year.....				99	99

TABLE No. 2
SHOWING THE DIAGNOSIS OF THOSE IN RESIDENCE DECEMBER 31, 1936

	Male	Female	Total
1 Traumatic psychoses			
2 Senile psychoses		2	2
3 Psychoses with cerebral arteriosclerosis		2	2
4 General paralysis		1	1
5 Psychoses with cerebral syphilis			
6 Psychoses with Huntington's Chorea			
7 Psychoses with brain tumour			
8 Psychoses with other brain or nervous diseases:			
(a) Chronic encephalitis		1	1
(b) Disseminated sclerosis			
(c) Tuberculous meningitis			
(d) Undefined			
9 Alcoholic psychoses:			
(a) Delirium tremens			
(b) Chronic alcoholism			
(c) Deterioration			
10 Psychoses due to drugs and other esogenous toxins			
11 Psychoses with pellagra			
12 Psychoses with other somatic diseases:			
(a) Post-infectious			
(b) Diabetes			
13 Manic-depressive psychoses:			
(a) Manic phase		2	2
(b) Depressive phase		3	3
(c) Mixed			
(d) Circular			
14 Involutional melancholia		2	2
15 Dementia praecox (Schizophrenia):			
(a) Paranoid		19	19
(b) Catatonic		21	21
(c) Hebephrenic		8	8
(d) Simple		2	2
(e) Mixed			
16 Paranoia and paranoid conditions		20	20
17 Epileptic psychoses		1	1
18 Psychoneuroses and neuroses:			
(a) Hysterical type			
(b) Psychasthenic type			
(c) Neurasthenic type			
(d) Anxiety state			
19 Psychoses with psychopathic personality			
20 Psychoses with mental deficiency		11	11
21 Undiagnosed psychoses		1	1
22 Without psychoses:			
(a) Epilepsy			
(b) Alcoholism			
(c) Drug addiction			
(d) Psychopathic personality			
(e) Mental deficiency		3	3
(f) Psychoneuroses			
(g) Hysterical episodes			
(h) Organic nervous disease			
(i) Disseminated sclerosis			
(j) Sacro-iliac arthritis			
(k) Neuro-syphilis			
(l) Sex perversions			
(m) For consideration by Eugenics Board			
Total.....		99	99

TABLE No. 3
RECORD OF DEATHS DURING 1936

Register No.	Sex.	Age.	Time in Ment. Hosp.			Cause of Death.
			Years.	Months.	Days.	
4785	F	51	6	3	16	Chronic rheumatism; osteo-arthritis.

Provincial Mental Institute, Edmonton

(W. J. McALLISTER, M.D., *Medical Superintendent*)

GENERAL REMARKS

There were 476 patients on our books as at January 1st, 1936. Of these, 466 were actually in residence. During the year we admitted a total of 79 patients, 68 being transfers from Ponoka. This gave us a total number of 521 patients as at the end of the calendar year 1936. Our total discharges were 34. Seventeen died, 10 of whom were past 70 years of age. There were no cases of suicide. However, I regret to report one case of homicide. This was thoroughly investigated, and the management was exonerated from any gross negligence in the matter. The patient responsible was later transferred to Ponoka.

Expenditures were again kept well within the budgetary estimate, with little or no loss of administrative efficiency.

INSTITUTIONAL ACTIVITIES

Occupational Therapy.

Occupation as a therapeutic measure was again stressed. Out of a total population of 521, all but approximately 120 patients were doing some useful work, either within or without the institution. The majority unfortunately were incapable of anything more constructive than routine ward duties due to their physical disabilities or mental deterioration. Special therapeutic work was carried on as usual. This activity employed only a limited number, as we have to select our workers, and facilities are more or less limited. Much material was completed and practically all of it disposed of either at the annual Edmonton Exhibition or subsequently from orders received at that time.

Religious Services.

Routine Protestant and Catholic services were regularly held. Attendance at these services are quite voluntary, but we find that a goodly percentage of the patients are interested. The average attendance at the Protestant services was from 135 to 140, and the Catholic attendance was approximately fifty-five. Four Protestant clergymen rotate in service every Sunday afternoon, while the Roman Catholic service is held on the first Monday of each month.

Lectures.

The usual lectures were given and examinations held for promotion purposes. There are many difficulties attending this branch of our work. Many of the staff live in the city, and as a consequence find it difficult to attend. However, the work is made as practical as possible, and there is no question but that such a course of training is of real value to the individual attendant and to the institute.

Recreation.

Nothing further was done leading to an increase in our facilities for recreation purposes. This has been rectified to a certain extent in our budget for 1937-38, and we hope it will be possible to re-establish our moving picture activity sometime this year. A recreation hall would fill a real need for moving pictures,

concerts, physical training, etc. The radio continues to be duly appreciated by practically all patients.

Dental Services.

Dr. Heacock was in routine attendance throughout the year and gave satisfactory services. Perusal of Table No. 6 will show the amount of valuable work done both in prophylaxis and treatment.

Health.

The general health of the population was most satisfactory. There were no serious epidemics, although there were a number of cases of influenza and about a dozen cases of measles. Fortunately there were no deaths or serious complications. Nursing service continued efficient and satisfactory. Diagnostic facilities continue very limited, hence I feel the time has arrived when we should at least consider the installation of a portable X-ray machine. It is difficult and very inconvenient at times to take patients into Edmonton for X-ray diagnosis. Other minor changes which we trust will make for greater hospital efficiency are contemplated this year, viz., grouping of the sterilizer, dispensary and surgery nearer to the infirmary and hospital ward.

Institutional Progress.

Mention was made in the last Annual Report of the new wing which was in process of construction during 1935. This was completed and occupied in March, 1936. The 1936-37 estimates provided for an additional unit for disturbed patients, but unfortunately nothing was done leading to its completion. As a result, we were unable to relieve to any appreciable extent the marked overcrowding which continues to exist at Ponoka. It is confidently hoped this new construction will be completed this year.

Farm.

The Oliver Farm is now a department of the Provincial Mental Institute. Co-operation has been satisfactory, and distinct progress made under the new management in an effort to convert an annual loss into a profit. In fact, there was a profit last year of \$2,130.00, the first in many years, reflecting much credit on Mr. Shearer, the manager, and his staff. A copy of the financial statement is herewith appended.

Miscellaneous.

Expenditures were kept well within the estimates without any material sacrifice of efficiency or adequate care of the patients. Quality of food served is of a high standard, and care is taken to see that the patients receive a fairly balanced diet at all times. Food waste is kept to an absolute minimum.

The usual routine extra-institutional activities were carried on by the Superintendent. Dr. Hincks visited the institute in February of this year, and complimented the management following his inspection.

The health of the staff has for the most part been good. I regret having to record the passing of two valued members during the year—Mr. Rigby, our baker, died in August, and Mr. Swan, of the attendant staff, in December.

It affords me real pleasure to express my appreciation of the loyalty and devotion to duty shown by each member of the staff. But to hold our trained employees and maintain the valued *esprit de corps* now existing, I would urge that serious consideration be given to the immediate renewal of statutory increases, to a discontinuance of the "voluntary contribution," and to an adjust-

ment of such just grievances of the attendant staff as have been presented to the Minister from time to time.

I also wish to record the courtesy and close co-operation shown by the Minister and Dr. Bow, the Deputy Minister of Public Health, and by the Department of Public Works in the person of Mr. Stacey, Superintendent of Maintenance and Construction, Mr. Cameron, head carpenter, and Mr. Muir, head engineer.

Finances.

At the close of the financial year there was an unexpended balance of \$1,775.26 on our estimated requirements, showing a decrease in costs of 1.4 cents per patient day as compared with 1935-36.

Transfer of 50 patients from Ponoka at the beginning of the year increased the hospital days by about 6,000. This would account in part for the decrease in per capita expenditure as, on the whole, prices were on the upward trend during the year.

TABLE No. 1
MOVEMENT OF POPULATION

	Males	Females	Total
Patients on Books Jan. 1st, 1936:			
(a) In Hospital	466	.....	466
(b) On Probation	6	.....	6
(c) Elopements	3	.....	3
(d) On Parole	1	.....	1
Total	476	.....	476
Admissions During Year:			
(a) First Admissions	8	.....	8
(b) Re-admissions	2	.....	2
(c) Transfers	68	.....	68
(d) University Hospital	1	.....	1
Total	79	.....	79
Total Received During Year:			
(a) Transfers	68	.....	68
(b) Re-admissions	2	.....	2
(c) By Warrant	2	.....	2
(d) Voluntary	2	.....	2
(e) By Certificate	4	.....	4
(f) From University Hospital	1	.....	1
Total	79	.....	79
Total on books during year	555	.....	555
Discharged During Year:			
(a) As Recovered .....	.....	.....	.....
(b) Improved	7	.....	7
(c) Unimproved	5	.....	5
(d) Without psychosis .....	.....	.....	.....
(e) Transfers	5	.....	5
(f) Died During Year	17	.....	17
Total	34	.....	34
Patients on Books End of Year:			
(a) In Hospital	513	.....	513
(b) On Probation	5	.....	5
(c) In University Hospital	1	.....	1
(d) Elopements	2	.....	2
Total	521	.....	521
Total Admitted Since Opening	799	.....	799
Total Discharged Since Opening	216	.....	216
Total Died Since Opening	109	.....	109

TABLE No. 2
NUMBER OF OFFICERS AND EMPLOYEES

	Males	Female	Total
Medical Superintendent	1	.....	1
Medical Officer	1	.....	1
Dentist (part time)	1	.....	1
Administrative Assistant	1	.....	1
Bursar	1	.....	1
Storekeeper	1	.....	1
Stenographer and Clerk	1	1	2
Night Supervisor	1	.....	1
Graduate Nurse .....	.....	1	1
Other Female Nurses .....	.....	.....	.....
Male Attendants	48	.....	48
Social Workers .....	.....	.....	.....
Teachers .....	.....	.....	.....
Occupational Therapist	1	.....	1
Kitchen and Bakery	3	.....	3
Laundry	1	1	2
Gardeners and Assistants	3	.....	3
Engineers and Mechanics	9	.....	9
Other Male Employees	6	.....	6
Other Female Employees .....	.....	.....	.....
Total	79	3	82

TABLE No. 3
PSYCHIATRIC AND INDUSTRIAL CLASSIFICATION OF PATIENTS

	Males	Females	Total
Patients Insane	472	.....	472
Epileptic (not insane)	3	.....	3
Mental Deficiency (not insane)	42	.....	42
Alcoholics (not insane) .....	.....	.....	.....
Drug Addicts (not insane) .....	.....	.....	.....
Neurosyphilitics (not insane) .....	.....	.....	.....
All other types (not insane)	4	.....	4
Total Population	521	.....	521
Industrial Workers	33	.....	33
Garden Workers	41	.....	41
Internal Workers	299	.....	299
External Workers	24	.....	24
Doing no work	116	.....	116
On Probation, Parole, etc.	8	.....	8
Total Population	521	.....	521

TABLE No. 4
NATIVITY OF PATIENTS IN RESIDENCE

Males Females Total			Males Females Total				
Canada	165	.....	165	Japan	2	.....	2
Australia	1	.....	1	Norway	17	.....	17
Austria	38	.....	38	Poland	9	.....	9
Belgium	3	.....	3	Roumania	4	.....	4
China	3	.....	3	Russia	25	.....	25
Denmark	4	.....	4	Scotland	20	.....	20
England	63	.....	63	Sweden	12	.....	12
Finland	6	.....	6	Switzerland	4	.....	4
France	2	.....	2	United States	75	.....	75
Germany	13	.....	13	Wales	6	.....	6
Holland	3	.....	3	Other countries	15	.....	15
Hungary	1	.....	1	Unascertained	14	.....	14
Ireland	9	.....	9	Total	521	.....	521
Italy	7	.....	7				

TABLE No. 5
CITIZENSHIP OF PATIENTS IN RESIDENCE

	Males	Females	Total
Citizen by Birth	166	.....	166
Citizen by Naturalization	24	.....	24
Aliens	220	.....	220
Unascertained	10	.....	10
British Birth out of Canada	101	.....	101
Total	521	.....	521

TABLE No. 6
DENTAL REPORT

	Males	Females	Total
Patients Examined	482	.....	482
Patients Treated	185	.....	185
Prophylactic Treatments	106	.....	106
Fillings	75	.....	75
Extractions	291	.....	291
New Dentures	4	.....	4
Dentures Repaired	2	.....	2
General Anaesthetics for Extractions	18	.....	18

TABLE No. 7
AGE AT ADMISSION AND PRINCIPAL PSYCHOSES

Psychoses	Total		Under 15 years		15 to 19		20 to 24		25 to 29		30 to 34		35 to 39	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1 Traumatic	11	11												
2 Senile	16	16												
3 Cerebral Arteriosclerosis	14	14												
4 General Paralysis	1	1					1	1	1	1	2	2	2	2
5 With Cerebral Syphilis	1	1												
6 With Huntington's Chorea	1	1												
7 With Brain Tumour	2	2												
8 With Other Brain Diseases	5	5											1	1
9 Alcoholic														
10 Due to Drugs														
11 With Pellagra														
12 With Other Somatic Diseases														
13 Manic Depressive	20	20					1	1			3	3	2	2
14 Involutional Melancholia	294	294					45	45	70	70	63	63	45	45
15 Schizophrenia	63	63					2	2	2	2	4	4	5	5
16 Paranoia and Paranoid Conditions	10	10							4	4	1	1	2	2
17 Epileptic Psychoses	2	2												
18 Psychoneuroses and Neuroses	33	33	1	1	1	1	2	2	1	1	1	1	8	8
19 With Psychopathic Personality														
20 With Mental Deficiency														
21 Undiagnosed Psychoses														
22 Without Psychoses:														
A	3	3			1	1	8	8	3	3	1	1	1	1
E	42	42	4	4	9	9	1	1	6	6	6	6	1	1
F	4	4	1	1	1	1							1	1
Total	521	521	6	6	22	22	59	59	86	86	88	88	67	67

TABLE No. 7 (a)
AGE AT ADMISSION AND PRINCIPAL PSYCHOSES

Psychoses	40 to 44		45 to 49		50 to 54		55 to 59		60 to 64		65 to 69		70 & Over		Unascertained		
	M.	F.	M.	F.	M.	F.											
1 Traumatic																	
2 Senile																	
3 Cerebral Arteriosclerosis																	
4 General Paralysis	4	4	3	3	1	1	2	2	1	1	2	2	6	6	1	1	
5 Cerebral Syphilis																	
6 Huntington's Chorea																	
7 Brain Tumour																	
8 Other Brain Diseases	2	2	1	1	1	1	1	1									
9 Alcoholic																	
10 Due to Drugs																	
11 Pellagra																	
12 Somatic Disease																	
13 Manic Depressive	2	2	3	3	3	3	5	5			1	1					
14 Involutional Melancholia																	
15 Schizophrenia	26	26	18	18	8	8	3	3	1	1							
16 Paranoia and Paranoid Conditions	16	16	8	8	17	17	8	8	1	1	2	2					5
17 Epileptic Psychoses																	
18 Psychoneuroses and Neuroses																	
19 Psychopathic Personality																	
20 Mental Deficiency	2	2	2	2	2	2	3	3	1	1							
21 Undiagnosed																	
22 Without Psychoses:																	
A	1	1															
F	5	5	2	2	3	3	1	1									
F							1	1									
Total	58	58	38	38	40	40	26	26	8	8	5	5	12	12	6	6	6

TABLE No. 8
DEGREE OF EDUCATION OF FIRST ADMISSIONS WITH PRINCIPAL PSYCHOSES

Psychoses	Total		Illiterate		Reads and Writes		Common School		High School		University		Unaccredited	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1 Traumatic	11	11	3	3	3	3	4	4					1	1
2 Senile	16	16	3	3	7	7	6	6						
3 Cerebral Arteriosclerosis	14	14			7	7	5	5	2	2				
4 General Paralysis	1	1			1	1								
5 With Cerebral Syphilis	1	1			1	1								
6 With Huntington's Chorea	1	1			1	1								
7 With Brain Tumour	2	2					2	2						
8 With Other Brain Diseases	5	5	1	1	1	1	1	1	1	1	1	1		
9 Alcoholics														
10 Due to Drugs														
11 With Pellagra														
12 With Other Somatic Diseases	20	20			5	5	12	12	2	2			1	1
13 Manic Depressive	294	294	15	15	123	123	113	113	15	15	5	5	23	23
14 Involuntional Melancholia	63	63	4	4	21	21	31	31	4	4			3	3
15 Schizophrenia	10	10	3	3	5	5	2	2						
16 Paranoia and Paranoid Conditions	2	2			1	1	1	1						
17 Epileptic Psychoses	33	33	7	7	14	14	9	9	2	2			1	1
18 Psychoneuroses and Neuroses														
19 Psychopathic Personality														
20 With Mental Deficiency	3	3	1	1	1	1	1	1						
21 Undiagnosed Psychoses	42	42	14	14	19	19	8	8					1	1
22 Without Psychoses:	4	4			1	1	3	3						
A	521	521	51	51	210	210	198	198	26	26	6	6	30	30
E														
F														
Total	521	521	51	51	210	210	198	198	26	26	6	6	30	30

TABLE No. 9
ENVIRONMENT OF FIRST ADMISSIONS WITH PRINCIPAL PSYCHOSES

Psychoses	Total		2,500 and over		Urban		Rural		Unascertained	
	M.	F.	T.	M.	F.	T.	M.	F.	M.	F.
1 Traumatic	11	11	22	2	2	4	8	1	1	1
2 Senile	16	16	32	5	5	10	11	11	11	11
3 Cerebral Arteriosclerosis	14	14	28	6	6	12	8	8	8	8
4 General Paralysis	1	1	2	1	1	2	1	1	1	1
5 Cerebral Syphilis	1	1	2	1	1	2	1	1	1	1
6 Huntington's Chorea	1	1	2	1	1	2	1	1	1	1
7 With Brain Tumour	2	2	4	1	1	2	1	1	1	1
8 Other Brain Diseases	5	5	10	1	1	2	4	4	4	4
9 Alcoholics	20	20	40	4	4	8	16	16	16	16
10 Due to Drugs	294	294	588	85	85	170	190	190	190	190
11 With Pellagra	63	63	126	13	13	26	49	49	49	49
12 Other Somatic Disease	10	10	20	1	1	2	8	8	8	8
13 Manic Depressive	2	2	4	1	1	2	1	1	1	1
14 Involuntional Melancholia	33	33	66	8	8	16	25	25	25	25
15 Schizophrenia	3	3	6	1	1	2	2	2	2	2
16 Paranoia and Paranoid Conditions	42	42	84	12	12	24	28	28	28	28
17 Epileptic Psychoses	4	4	8	2	2	4	2	2	2	2
18 Psychoneuroses and Neuroses	521	521	1042	143	143	286	353	353	353	353
19 Psychopathic Personality	3	3	6	1	1	2	2	2	2	2
20 With Mental Deficiency	4	4	8	2	2	4	2	2	2	2
21 Undiagnosed	3	3	6	1	1	2	2	2	2	2
22 Without Psychoses:										
A	3	3	6	1	1	2	2	2	2	2
F	42	42	84	12	12	24	28	28	28	28
F	4	4	8	2	2	4	2	2	2	2
Total	521	521	1042	143	143	286	353	353	353	25

TABLE No. 10
ECONOMIC CONDITION OF FIRST ADMISSIONS WITH PRINCIPAL PSYCHOSES

Psychoses	Total		Dependent.		Living on Daily Earnings		Comfortable, Ample for 4 months		Unascertained	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1 Traumatic	11	11	3	3	5	5	1	1	2	2
2 Senile	16	16	5	5	9	9	2	2	1	1
3 Cerebral Arteriosclerosis	14	14	6	6	5	5	2	2	1	1
4 General Paralysis	1	1	1	1	1	1				
5 With Cerebral Syphilis	1	1	1	1						
6 With Huntington's Chorea	2	2	1	1	1	1				
7 With Brain Tumour	5	5	3	3	1	1	1	1		
8 With Other Brain Diseases										
9 Alcoholics										
10 Due to Drugs										
11 With Pellagra										
12 With Other Somatic Diseases	20	20	8	8	11	11	1	1		
13 Manic Depressive	294	294	111	111	157	157	8	8	18	18
14 Involuntional Melancholia										
15 Schizophrenia	63	63	19	19	41	41	3	3		
16 Paranoia and Paranoid Conditions	10	10	8	8	2	2				
17 Epileptic Psychoses	2	2			2	2				
18 Psychoneuroses and Neuroses	33	33	20	20	11	11	2	2		
19 With Psychopathic Personality										
20 With Mental Deficiency	3	3	1	1	1	1	1	1	1	1
21 Undiagnosed	42	42	38	38	2	2	1	1	1	1
22 Without Psychoses:	4	4	4	4						
A										
E										
F										
Total	521	521	229	229	248	248	22	22	22	22

TABLE No. 11
USE OF ALCOHOL BY FIRST ADMISSIONS WITH PRINCIPAL PSYCHOSES

Psychoses	Total		Abstinent		Temperate		Intemperate		Unascertained	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1 Traumatic	11	11	3	3	5	5	1	1	2	2
2 Senile	16	16	2	2	12	12	1	1	1	1
3 Cerebral Arteriosclerosis	14	14	1	1	11	11	1	1	2	2
4 General Paralysis	1	1	1	1	1	1	1	1	1	1
5 Cerebral Syphilis	1	1	1	1	1	1	1	1	1	1
6 Huntington's Chorea	2	2	2	2	1	1	1	1	1	1
7 Brain Tumour	5	5	1	1	1	1	5	5	1	1
8 Other Brain Diseases	20	20	2	2	13	13	3	3	2	2
9 Alcoholic	294	294	36	36	181	181	29	29	48	48
10 Due to Drugs	63	63	8	8	32	32	15	15	8	8
11 With Pellagra	10	10	2	2	6	6	1	1	1	1
12 With Other Somatic Diseases	2	2	1	1	1	1	1	1	1	1
13 Manic Depressive	33	33	9	9	18	18	4	4	2	2
14 Involuntional Melancholia	3	3	3	3	3	3	3	3	3	3
15 Schizophrenia	42	42	20	20	17	17	5	5	5	5
16 Paranoia and Paranoid Condi- tions	4	4	2	2	2	2	2	2	2	2
17 Epileptic Psychoses	521	521	87	87	302	302	60	60	72	72
18 Psychoneuroses and Neuroses	3	3	3	3	3	3	3	3	3	3
19 Psychopathic Personality	42	42	20	20	17	17	5	5	5	5
20 Mental Deficiency	4	4	2	2	2	2	2	2	2	2
21 Undiagnosed	4	4	2	2	2	2	2	2	2	2
22 Without Psychoses:										
A	3	3	3	3	3	3	3	3	3	3
E	42	42	20	20	17	17	5	5	5	5
F	4	4	2	2	2	2	2	2	2	2
Total	521	521	87	87	302	302	60	60	72	72

TABLE No. 12
MARITAL CONDITION OF FIRST ADMISSIONS WITH PRINCIPAL PSYCHOSES

Psychoses	Total		Single		Married		Widowed		Separated		Divorced		Unascertained	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1 Traumatic	11	11	4	4	3	3	2	2	1	1	2	2	2	2
2 Senile	16	16	9	9	3	3	3	3	1	1	1	1	1	1
3 Cerebral Arteriosclerosis	14	14	2	2	11	11	1	1	1	1	1	1	1	1
4 General Paralysis	1	1	1	1	1	1	1	1	1	1	1	1	1	1
5 Cerebral Syphilis	1	1	1	1	1	1	1	1	1	1	1	1	1	1
6 Huntington's Chorea	1	1	1	1	1	1	1	1	1	1	1	1	1	1
7 Brain Tumour	2	2	2	2	2	2	1	1	1	1	1	1	1	1
8 Other Brain Diseases	5	5	2	2	2	2	1	1	1	1	1	1	1	1
9 Alcoholic	20	20	7	7	11	11	2	2	2	2	2	2	2	2
10 Due to Drugs	294	294	240	240	37	37	5	5	3	3	3	3	3	3
11 With Pellagra	63	63	37	37	21	21	2	2	2	2	2	2	2	2
12 With Somatic Diseases	10	10	8	8	2	2	1	1	1	1	1	1	1	1
13 Manic Depressive	20	20	7	7	11	11	2	2	2	2	2	2	2	2
14 Involutional Melancholia	294	294	240	240	37	37	5	5	3	3	3	3	3	3
15 Schizophrenia	63	63	37	37	21	21	2	2	2	2	2	2	2	2
16 Paranoia and Paranoid Conditions	10	10	8	8	2	2	1	1	1	1	1	1	1	1
17 Epileptic Psychoses	2	2	1	1	1	1	1	1	1	1	1	1	1	1
18 Psychoneuroses and Neuroses	33	33	28	28	4	4	1	1	1	1	1	1	1	1
19 Psychopathic Personality	3	3	2	2	1	1	1	1	1	1	1	1	1	1
20 Mental Deficiency	42	42	40	40	2	2	2	2	2	2	2	2	2	2
21 Undiagnosed	4	4	3	3	1	1	1	1	1	1	1	1	1	1
22 Without Psychoses:	521	521	383	383	102	102	16	16	4	4	7	7	9	9
A	3	3	2	2	1	1	1	1	1	1	1	1	1	1
E	42	42	40	40	2	2	2	2	2	2	2	2	2	2
F	4	4	3	3	1	1	1	1	1	1	1	1	1	1
Total	521	521	383	383	102	102	16	16	4	4	7	7	9	9

TABLE No. 13
INCREASE OF PATIENTS DURING THE YEAR WITH PRINCIPAL PSYCHOSES

Psychoses	Total		1st Admission		Re-Admission		Transfer	
	M.	F.	M.	F.	M.	F.	M.	F.
1 Traumatic	5	5	5	5				
2 Senile	7	7	1	1			6	6
3 Cerebral Arteriosclerosis	1	1	1	1				
4 General Paralysis	1	1						
5 Cerebral Syphilis	1	1						
6 Huntington's Chorea	1	1					1	1
7 Brain Tumour								
8 Other Brain Diseases								
9 Alcoholic								
10 Due to Drugs								
11 With Pellagra								
12 Other Somatic Diseases								
13 Manic Depressive	6	6					6	6
14 Involitional Melancholia	39	29			1	1	38	38
15 Schizophrenia	4	4			1	1	3	3
16 Paranoia and Paranoid Conditions	1	1					1	1
17 Epileptic Psychoses								
18 Psychoneuroses and Neuroses								
19 Psychopathic Personality								
20 Mental Deficiency	7	7					7	7
21 Undiagnosed								
22 Without Psychoses:								
A								
D	7	7	1	1			6	6
E	1	1			1	1		
F	1	1						
Total	79	79	8	8	3	3	68	68

TABLE No. 14
DECREASE OF PATIENTS DURING THE YEAR WITH PRINCIPAL PSYCHOSES

Psychoses	Total		Recovered		Discharged Improved		Unimproved		Transfer		Death	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1 Traumatic	7	7									7	7
2 Senile	1	1									1	1
3 Cerebral Arteriosclerosis												
4 General Paralysis												
5 Cerebral Syphilis												
6 Huntington's Chorea												
7 Brain Tumour	2	2									2	2
8 Other Brain Diseases												
9 Alcoholic												
10 Due to Drugs												
11 With Pellagra												
12 Other Somatic Diseases	4	4	1	1					1	1	2	2
13 Manic Depressive	1	1									1	1
14 Involutional Melancholia	9	9	2	2			2	2	3	3	2	2
15 Schizophrenia	4	4	2	2					1	1	1	1
16 Paranoia and Paranoid Conditions												
17 Epileptic Psychoses												
18 Psychoneuroses and Neuroses												
19 Psychopathic Personality												
20 Mental Deficiency												
21 Undiagnosed												
22 Without Psychoses:												
A	1	1	1	1			1	1			1	1
E	5	5					3	3			1	1
F												
Total	34	34					5	5	5	5	17	17

TABLE No. 15
CAUSE OF DEATH—PRINCIPAL PSYCHOSES—AGE AT DEATH—DURATION OF HOSPITAL LIFE

Psychoses	Total			Cause of Death	Age	Duration of Hospital Life		
	M.	F.	T.			Years	Months	Days
2 Senile	7	.....	7	Chronic Myocarditis	75	.....	7	3
				"	84	.....	7	6
				"	90	.....	9	19
				"	76	.....	5	9
				"	80	.....	6	.....
				Cerebral Haemorrhage	82	.....	10	22
				"	76	.....	.....	23
3 Cerebral Arteriosclerosis	1	.....	1	Myocarditis and Arteriosclerosis	79	.....	7	23
8 Other Brain Diseases	2	.....	2	Chronic Encephalitis	31	.....	6	28
				Bronchial Pneumonia	20	.....	5	.....
13 Manic Depressive	2	.....	2	Homicide	72	.....	8	10
				Chronic Myocarditis	75	.....	7	14
14 Involuntional Melancholia	1	.....	1	Intestinal Obstruction	48	.....	5	.....
15 Schizophrenia	2	.....	2	Pulmonary Tuberculosis	45	.....	8	9
				Chronic Myocarditis	54	.....	8	17
16 Paranoia and Paranoid Conditions	1	.....	1	Cerebral Haemorrhage	38	.....	8	24
22E Without Psychosis	1	.....	1	Chronic Tubercular Peritonitis	41	.....	7	27
Total	17	.....	17					

DEPARTMENT OF PUBLIC HEALTH

TABLE No. 16
RELIGION OF PATIENTS IN RESIDENCE

	Males	Females	Total
Baptists	18	.....	18
Episcopalians	76	.....	76
Jews	7	.....	7
Presbyterians	63	.....	63
Roman Catholics	133	.....	133
United Church	44	.....	44
Other Denominations	153	.....	153
Unascertained	27	.....	27
Total	521	.....	521

TABLE No. 17
OCCUPATION OF PATIENTS IN RESIDENCE

	Males	Females	Total
Professional	2	.....	2
Commercial	13	.....	13
Agricultural	173	.....	173
Mechanics Outdoor	20	.....	20
Mechanics Sedentary	33	.....	33
Domestic Service	1	.....	1
Education	3	.....	3
Miners, Engineers, Carpenters, Painters	33	.....	33
Labourers	192	.....	192
No Occupation	34	.....	34
Unascertained	17	.....	34
Total	521	.....	521

Provincial Training School, Red Deer

(D. L. McCULLOUGH, B.A. (Sen. Mod.), M.B., D.P.H., D.P.M.,
Medical Superintendent)

MOVEMENT OF POPULATION

During the year accommodation was increased by 1 bed, bringing the total capacity to 217.

Detailed movement of patients and other statistical information will be found in the tables at the end of this report. The following are the chief points of interest:

Thirty-one patients were admitted—20 first admissions, 4 re-admissions and 7 transfers from Ponoka or Oliver. Only 2 of the first admissions were committed by Court proceedings. All others were "voluntary." The 4 re-admissions consisted of 1 boy brought back by his parents for misbehaviour and disobedience, 1 girl returned for inefficiency, and 2 girls apprehended at the request of the Medical Superintendent for undesirable conduct.

I would like to direct particular attention to the number of mental defectives of school age admitted by transfer from mental institutions. Two of the 7 were only 11 years old, one was 12, and one 13. All had been admitted to Ponoka for lack of accommodation in the Training School. In addition to these 7 transfers, several of the first admissions to the Training School were only made possible by first transferring some older patient to Ponoka or Oliver, so that the situation is really worse than the numbers of incoming transfers would indicate. From whatever angle this situation is viewed it is a thoroughly unsatisfactory one, and emphasizes the crying-out need for more accommodation. To place children of school age (even though they are mentally deficient) amongst the adult insane is unfair to both types of patient as well as to the mental institutions, already so distressingly overcrowded.

At the end of the year there were 110 mental defectives, not insane, in Ponoka, 28 in Oliver, 18 in Claresholm—a total of 156. Not all of these would be suitable for the Training School even if we had accommodation, but many of them would. In addition to this 156 in residence in the mental institutions and the 209 in the Training School, there are 250 cases awaiting admission and 620 reported, a total ascertainment of 1,235 out of a probable total of 6,000 defectives for the whole Province.

Thirty-six patients left the Training School, 14 of whom were discharged, 12 transferred to Ponoka or Oliver, and 10 died. Of the 14 patients discharged, 10 were returned to their parents or relatives and 4 went to work. All but 1 of the former group and 2 of the latter group are so far adjusting very well. Of the 12 patients transferred to mental institutions, 7 were sent there solely to make room for younger cases in the Training School, 3 because they were psychotic (insane), 1 boy because of dangerous tendencies culminating in a vicious assault on another patient, and 1 girl for a goitre operation. Of the 10 deaths, no less than 6 were attributable to influenza, and 7 of the 10 were idiots.

Reference to Table 15 shows that 9 cases (4 males and 5 females) were eugenically sterilized during the year. This makes a total of 94 cases pre-

sented to the Board since The Sterilization Act came into force, 85 of whom (35 males and 50 females) have been sterilized. Thirty-six of the 85 are still in residence. These, with 6 of the 20 sterilized before admission, brings the total still under control to 42, or 20.09% of our population. Three of the discharged cases are happily married, 20 are in other institutions, and the majority of the remainder have been well behaved and given no trouble. Only four have given cause for criticism.

HEALTH OF PATIENTS AND STAFF

A wide-spread outbreak of influenza of a severe abdominal type occurred towards the end of January, gradually giving place to influenza of the respiratory type and reaching epidemic proportions from the last week of February to the middle of March. For ten days during the height of the epidemic 40 to 80 patients were confined to bed daily, the peak number—86 ambulant patients and 6 staff. Only 61 of the 217 patients and a minority of the staff escaped altogether or had mild attacks. Many activities had to be cancelled, the schoolrooms closed and the teachers used for general duties. Five deaths resulted from influenzal broncho-pneumonia and 1 from acute bedsores, the result of severe abdominal influenza in a bedridden cripple. During the summer months 104 patients and 10 of the staff contracted German measles, 5 patients and 2 of the staff had scarlet fever, and 2 patients had erysipelas. One of the latter, a Mongolian idiot, died. In the early fall abdominal influenza again became very prevalent, and in a few cases was of a severe type. Towards the end of the year there were 23 cases of chickenpox.

Apart from these epidemics, the usual amount of ordinary sickness and minor accidents prevailed amongst the patients, but there was an unusual amount of ill-health amongst the staff; sore throats with swollen glands, severe sinusitis, several acute otitis medias, 1 appendectomy, several tonsillectomies, a palmar abscess, a case of gallstone colic, and an almost fatal case of anaphylactic shock. This, with the various epidemics, made the work particularly heavy and strenuous, and I have nothing but the heartiest commendation for the way in which the staff faced their difficulties. Had it not been for the recent provision in the estimates for "holiday and sick relief," it would have been impossible to carry on.

PATIENT ACTIVITIES

As far as possible, all the usual recreational, educational and character building activities were actively maintained.

The boys' hockey team had several matches with scratch teams from town, and played very creditably, losing two and winning one.

The usual afternoon party for 50 of the school age children and a dance in the evening for about 80 of the "workers" were held for New Year and Hallowe'en—the latter in fancy dress and masquerade.

A Sports Day was held in June, and despite heavy showers 110 patients thoroughly enjoyed the afternoon competitions and the evening ball game.

From June to September 114 patients attended camp in groups of 15 to 17, in all cases spending six days in the open. Thirteen less capable or severely handicapped patients also went to the camp grounds for odd days.

Seventy-one patients were able to attend the Red Deer Fair, and enjoyed the grand stand entertainments, through the courtesy of the Fair Board.

The Mother Superior and Sisters very hospitably entertained 35 of the girls at St. Joseph's Convent one afternoon in August.

Following the procedure of the previous year, the Christmas Concert was again given twice—in the afternoon for the younger children and in the evening for the "workers" and visitors. A three-act sketch written by Mr. J. Sinclair of the staff, and staged by the Scouts, was the outstanding item in a programme rather too long for the youngest children, but well up to standard.

Owing to the impossibility of getting all the patients into the "gymnasium" for the main Christmas Tree, a separate small tree and distribution of presents was held in the infirmary for the cripples and children in that section. This relieved the congestion in the "gymnasium," but the need for a proper recreation room for these and other functions becomes more urgent every year as the average age of the patients increases.

The Scouts and Cubs (2 patrols and 3 sixes), the Guides and Brownies (2 patrols of each) met regularly. Mr. Backman, the Provincial Secretary, visited the Scouts and Cubs several times, and most of them saw some nature and Scout films which he showed in the Town Hall. The Guides and Brownies were visited and inspected by Mrs. Pardee, Provincial Commissioner, and Mrs. Frame, District Commissioner, and attended, as guests, the display of the Red Deer Guides given in the high school.

The five Sunday School groups, with few exceptions, met regularly, and now average about 80.

The girls' clubs under the direction of the Matron met a number of times and discussed topics generally of their own choosing, mostly matters of personal hygiene and deportment.

Forty-eight girls attended the evening cooking classes, including this year a larger number of school girls for an elementary course—six girls in each class and six classes in each course.

The occupational groups were fully occupied and made consistent progress. The junior carpentry class was subdivided into a younger and less capable group from 1:30 to 2:30 p.m., and the boys of the grade school from 2:30 to 4:00 p.m. One or two of the latter boys made splendid progress in repairing and binding our older library books. The senior carpentry class helped actively with building at the camp grounds, a sleeping shack to accommodate 17 patients and 2 staff; with the dismantling and rebuilding of the entrance to the root house; cut, trimmed and hauled trees for a hog-pen, and mortised, tennoned and put together 27 storm windows for the laundry and sewing room—this latter work, of course, having been laid out by the carpenter. Under his direction they helped also with the making of two grain boxes for the farm, two show cases for the Edmonton Exhibition and Red Deer Fair, and the laying of a cement floor. Lack of room in the carpenter shop and consequent overcrowding are still a great handicap to this group and a hindrance to even better work.

A re-alignment of the duties of the male staff and the appointment of Mr. Moyse as Chief Attendant has led to a very noticeable improvement in the work and personality of the outside workers.

There is little change to record amongst the girls who, from the indoor nature of their work, have all along had closer and more adequate supervision in all departments.

Twenty-five patients were allowed home at various times for holidays lasting from a few days to several weeks. Two boys attended camp at one of the beaches, their fees being paid by their charge nurse. Many patients were again taken down town or out for the day or week-end by various members of the staff—voluntarily and in their own spare time. I would like to record my warm

appreciation of such genuine and unselfish interest in the welfare of their patients by so many of the staff, both male and female, nursing and non-nursing.

STAFF CHANGES AND ACTIVITIES

Thirteen of the staff resigned, 4 to get married, 2 for training in general hospitals, the others for various reasons. Two were dismissed. One, a general graduate, was seconded to Ponoka for a year's post-graduate study in psychiatry.

Two nurses and 1 attendant passed their first year examination, 5 completed the intermediate year, and 1 her final year. Ten of the nursing staff and 2 of the general staff secured their first year St. John's Ambulance certificates, the lectures having been given by Dr. G. M. Little of the Red Deer Full-time Health Unit.

Many enjoyable social evenings were arranged by the Civil Service Association, as well as farewell and presentation parties for those leaving. Two of the latter took the form of banquets in the Auditorium Hotel, one in honor of Miss Walt, for 7 years school teacher, and one for Miss Boyarzin, for 5 years head cook.

At all times the loyalty of the members of the Civil Service Association to the Training School has been unquestioned, and their contribution to the happiness of the staff as a whole has been most acceptable.

INSTITUTIONAL PROGRESS

The only new construction during the year was a farm implement shed measuring 24' × 60'.

An auxiliary booster pump was installed in the pump-house to maintain water pressure throughout the institution when the water-tower pressure is not available.

The roof of the boys' cottage was overhauled and shingles replaced where needed.

The kitchen range, practically burnt out and much too small for our requirements, was replaced by a reconditioned 3-oven French range, the bake oven was moved, and more cupboards, shelves and bins installed.

The radiators in the gymnasium annex, formerly suspended from the ceiling, were brought down on the walls as far as possible, and one installed at floor level, greatly increasing the comfort of this section in cold weather.

A new ceiling fan was installed in the drying cabinet in the laundry, the old one having been in continuous use since 1932.

The lighting in the main offices was greatly improved by the installation of new fixtures in better positions.

Much other maintenance work of a minor nature, but none the less valuable, was effected.

Owing to the very dry season the grounds were not particularly attractive during the summer, the foliage of the plants being poor and the flowers turning to seed early. The boys, nevertheless, worked with a will tending the flower beds, cutting the laws, and keeping the pathways clean and tidy. Their allotments—twenty in number—carefully tended and liberally watered, produced remarkably fine blooms, which were a great source of pleasure to themselves and all who saw them.

A section of the main drive (from the front gate to the town water reservoir) was widened about 10 feet and heavily cindered as well as a new sidewalk alongside it.

The garden crop was considerably below our average, but better than most vegetable crops in the district, and will probably suffice for our needs.

Perhaps the greatest progress of the year was made on the farm, where the acquisition of 135 acres in 1935 and the necessary farm machinery in the spring of 1936 should not only enable us, in time, to provide for our needs, but makes possible the training of the boys in farm work. This lack of practical farm experience has always been a great hindrance to training, and accounts for the small number of boys discharged. Fifteen acres were brushed, broken and fenced, the boys working well at the brushing and fencing. Twenty acres were sown to permanent pasture, from which results in the fall were disappointing owing to the drought. Sixty acres were soon to wheat, barley and oats, from which there was a fair yield considering the season. Even the school boys, who have always helped harvest the garden crop, helped with the haying and field harvest.

Hog production was greatly increased. In addition to supplying all our needs, there were 16 hogs available for sale. Although we more than doubled our egg production, we still supply only about one-third of our requirements during the early summer months and have to purchase for the balance of the year.

A small flock of turkeys was commenced, hatching from eggs, and enabled use to reduce our purchases at Christmas. Next year we should be independent of the market. These increases have kept six boys constantly occupied all year at the barns where formerly two or three were all we could employ, and the boys have been changed periodically to vary their work and give training to the greatest number.

EXTRA-INSTITUTIONAL ACTIVITIES

The number of visitors who have come to see through the Training School and the number of enquiries as to our work increases yearly. Addresses on the subject of Mental deficiency, or describing the work of the Training School, were given during the year to the Annual Convention of the Alberta Council for Family and Child Welfare in Calgary, the Women's Institute Constituency Convention at Leslieville, the Teachers' Convention in Lacombe, the Women's Institute at Mirror, as well as to several groups in Red Deer.

Displays of fancy work and carpentry were made at the Edmonton Exhibition and Red Deer Fair in the nature of a silent exhibit. A window display of occupational work was also made during the week of the Red Deer Shopping Carnival, and a display contributed to the Red Deer Horticultural Show.

As in other years, a number of patients brought to the Training School by parents were examined and advice given as to training. A number of psychiatric and neurological cases were seen locally in consultation.

All the final year medical students of the University and a class of post-graduate nurses from the Provincial Mental Hospital come to the Training School in groups during the winter for a demonstration of cases and to see the various phases of our work.

I cannot close this section without referring with deep regret to the death of Dr. C. A. Baragar, Commissioner of Mental Institutions and Director of Mental Health. His periodic visits had won him many friends at the Training School; his warm-hearted interest in the patients, his understanding of our needs, and his ability to co-ordinate our work with that of the Mental Hygiene Clinics and the other institutions were not least among the many admirable qualities for which he will long be remembered.

RECOMMENDATIONS AND THANKS

More accommodation is urgently needed. Forty-seven new applications for admission were received during the year, only 13 of whom were admitted. One of the latter, a bedridden infirmity patient of 21, had been awaiting admission for eight years. Despite the large number of defective, not insane, admitted to the mental hospitals, there are still 250 names on the waiting list and 626 suspects. In the face of such a situation any type of building, whether it be an infirmity, a farm dormitory, a building for school children only, or for adolescent girls only, would be welcome. It would relieve much of the pressure from without, and by allowing better segregation and classification of the various types already in the Training School, would facilitate training and improve results.

As assistant medical officer is also needed to take over the routine clinical work and leave the Medical Superintendent free to supervise and organize various intra-institutional and extra-institutional activities. It would also make possible an out-patient department which, even if only acting in an advisory capacity, would be of great service to many parents, could function as a mental hygiene centre for the district, and would be a valuable asset in the training of the nursing staff.

The need for a larger recreation room and additional room in the carpenter's shop have already been referred to. Both are greatly needed.

The fence around the low grade playground urgently needs replacing—part of it has stood for eighteen years.

A new tubular fire-escape would be advisable.

A mechanical drier in the laundry would greatly lessen the load in that department. The present drying cupboards prove increasingly inadequate. The number of articles laundered for the past five years have been: 1931, 255,489; 1932, 386,660; 1933, 308,450; 1934, 300,618; 1935, 326,911; 1936, 339,790. These figures speak for themselves.

In conclusion, I would like to express my thanks to all members of the staff for another year of faithful attention to duty and devotion to the interests of the patients; and more especially to the Matron, Miss Holmes, and the Bursar, Mr. Elgood, for their very active help and co-operation at all times. I wish to mention particularly Mr. Elgood's efficiency and capable business management. I greatly appreciate the way in which in all his plans for development of the farm, as well as in other institutional activities, he has managed to combine the ideal of the fullest training for the boys with that of the greatest economy in operation. My thanks are also due to the various doctors in Red Deer who have voluntarily given thought and time to giving lectures to the nurses; to Dr. W. J. McAlister and Dr. R. R. MacLean, Superintendents at Oliver and Ponoka respectively, for their splendid co-operation at all times both in regard to their institutions and the mental hygiene clinics, and in the latter connection also to Mr. Kibblewhite; to Mr. Stacey, Superintendent of Buildings; to Dr. M. R. Bow, Deputy Minister, whose occasional visits and constant helpfulness are always appreciated.

TABLE 1
MOVEMENT OF FEEBLE-MINDED POPULATION

Defectives on books of institution at January 1, 1936:				Male	Female	Total
In the Provincial Training School.....				100	104	214
ADMISSIONS:				Male Female Total		
1. First admissions, voluntary	7	11	18			
2. Re-admissions	1	2	3			
3. Transfers:						
P.M.H., Ponoka	3	4	7			
P.M.I., Edmonton	1		1			
4. First admissions, Court Order		2	2			
Total number of admissions.....				12	19	31
Total number of defectives on the books during 1936				122	123	245
OUTGOING:				Male Female Total		
1. Paroles	4	10	14			
2. Transfers:						
P.M.H., Ponoka	8	2	10			
P.M.I., Edmonton		2	2			
3. Deaths	2	8	10			
Total number of outgoing				14	22	36
Defectives on books of the institution at December 31st, 1936				108	101	209

TABLE 2
RESPONSIBILITY FOR MAINTENANCE OF PATIENTS IN RESIDENCE
AT DECEMBER 31, 1936

	In Residence	Percentage
Wards of the Province of Alberta	37	17.17
Wards of the Municipal Districts of Alberta	141	67.47
Wards of the Department of Municipal Affairs of Alberta.....	25	11.96
Private cases in residence during 1936	1	.48
Wards of the Department of Pensions and Health, Ottawa.....	2	.95
Wards of the Dominion Government	2	.95
Wards of the Official Guardian	1	.48
Total	209	

TABLE 3
MENTAL STATUS OF FIRST ADMISSIONS, RE-ADMISSIONS AND TRANSFERS

Mental Status	First Admissions			Re-admissions			Transfers			Total		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Idiot	2	4	6							2	4	6
Imbecile	3	5	8				3		3	6	5	11
Moron	2	4	6		2	2	1	4	5	3	10	13
Borderline				1		1				1		1
Totals	7	13	20	1	2	3	4	4	8	12	19	31

TABLE 4 (a)
NATIVITY OF ADMISSIONS AND OF PARENTS OF ADMISSIONS

Nativity	Patients			Parents of Male Patients			Parents of Female Patients		
	Male	Female	Total	Fathers	Mothers	Total	Fathers	Mothers	Total
Alberta	10	15	25	3	3	6		3	3
Other Provinces	2	2	4	5	4	9	3	4	7
England					3	3	1	2	3
Scotland							1		1
Wales				1		1			
United States							3	1	4
Norway	1	1	2	2	1	3	1	2	3
Austria				1		1	3	2	5
Russia							3	2	5
Germany							1		1
France					1	1			
Unascertained	1	1	2				3	3	6
Totals	12	19	31	12	12	24	19	19	38

TABLE 4 (b)
NATIVITY OF PATIENTS AND OF PARENTS OF PATIENTS

Nativity	Patients			Parents of Male Patients			Parents of Female Patients		
	Male	Female	Total	Fathers	Mothers	Total	Fathers	Mothers	Total
Alberta	78	73	151	6	10	16	1	7	8
Other Provinces	15	16	31	26	25	51	30	31	61
British Isles	3	3	6	30	28	58	19	26	45
United States	8	6	14	11	16	27	21	13	34
Norway	1	1	2	4	3	7	3	3	6
Sweden	1	1	2	2	2	4	1	2	3
Denmark	1	1	2	3	1	4	1	1	2
Holland	1	1	2	2	1	3	1	1	2
Austria	1	1	2	3	3	6	8	6	14
Russia	1	1	2	5	5	10	3	2	5
Germany	1	1	2	3	2	5	1	1	2
France	1	1	2	1	1	2	1	1	2
Unknown	2	1	3	13	11	24	13	10	23
Totals	108	101	209	108	108	216	101	101	202

TABLE 5 (a)
AGE OF ADMISSIONS CLASSIFIED WITH REFERENCE TO MENTAL STATUS

Age Group	Idiot			Imbecile			Moron			Borderline		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
5-9	1	1	2	2	2	4	1	1	2	1	1	2
10-14	2	2	4	2	1	3	1	2	3	1	1	2
15-19	2	2	4	2	1	3	1	6	7	1	1	2
20-24	1	1	2	1	1	2	2	2	4	1	1	2
Totals	2	4	6	6	5	11	3	10	13	1	1	2

TABLE 5 (b)
AGE OF TOTAL POPULATION CLASSIFIED WITH REFERENCE TO MENTAL STATUS

Age Group	Idiot			Imbecile			Moron			Borderline			Dull			Total
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	
0-4	1	1	2	8	4	12	4	1	5	1	2	3	1	1	2	31
5-9	4	5	9	13	9	22	7	7	14	2	2	4	1	1	2	52
10-14	7	6	13	8	8	16	9	12	21	1	1	2	1	1	2	56
15-19	9	8	17	5	8	13	3	2	5	2	2	4	1	1	2	36
20-24	10	6	16	4	10	14	1	1	2	1	1	2	1	1	2	21
25-29	1	5	6	2	2	4	1	1	2	1	1	2	1	1	2	6
30-34	1	3	4	1	1	2	1	1	2	1	1	2	1	1	2	2
35-39	1	1	2	1	1	2	1	1	2	1	1	2	1	1	2	3
40 and up	1	1	2	1	1	2	1	1	2	1	1	2	1	1	2	3
Total	33	33	66	42	40	82	24	24	48	5	4	9	3	1	4	209

TABLE 6
ENVIRONMENT OF ADMISSIONS

Environment	Idiot			Imbecile			Moron			Borderline		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Urban	1	1	2	2	1	3	1	3	4	1	1	2
Rural	1	3	4	4	4	8	2	7	9	1	1	2
Totals	2	4	6	6	5	11	3	10	13	1	1	2

TABLE 7
RELIGION OF ADMISSIONS

Denominations	Idiot			Imbecile			Moron			Borderline		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
United Church	1	1	2	1	1	2	2	2	4	1	1	2
Church of England	1	1	2	1	1	2	2	2	4	1	1	2
Roman Catholic	1	1	2	2	2	4	1	2	3	1	1	2
Greek Catholic	2	2	4	1	1	2	1	1	2	1	1	2
Lutheran	1	1	2	1	1	2	2	2	4	1	1	2
Presbyterian	1	1	2	1	1	2	1	1	2	1	1	2
Pentecostal	1	1	2	1	1	2	1	1	2	1	1	2
Unascertained	1	1	2	1	1	2	2	2	4	1	1	2
Totals	2	4	6	6	5	11	3	10	13	1	1	2

TABLE 8
ECONOMIC CONDITION OF FAMILIES OF ADMISSIONS CLASSIFIED WITH
REFERENCE TO MENTAL STATUS

Economic Condition	Idiot			Imbecile			Moron			Borderline		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Comfortable				1		1						
Marginal	1	4	5	5	1	6	1	5	6			
Dependent	1		1		4	4	2	5	7	1		1
Totals	2	4	6	6	5	11	3	10	13	1		1

TABLE 9 (a)
DISCHARGES CLASSIFIED WITH REFERENCE TO MENTAL STATUS AND
CHRONOLOGICAL AGE

Age Group	Imbecile			Moron			Borderline			Backward			Years of Residence
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	
15-19	1												0/4
		1	2										5/1
				1									1/8
				1	2								0/2
							1	1					1/5
									1	1			2/11
20-24				1									1/3
				1									5/5
				1	3								9/0
25-29				1									0/6
				1									0/9
				1	3								6/5
30-35		1	1										14/9
5-9				1	1								2/1
Totals	1	2	3	1	8	9	1	1	1	1	1	1	51/9

TABLE 9 (b)
TRANSFERS CLASSIFIED WITH REFERENCE TO MENTAL STATUS AND
CHRONOLOGICAL AGE

Age Group	Idiot			Imbecile			Moron			Borderline			Years in Residence
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	
10-14										1	1		3/5
15-19	1		1										10/9
				1	1								6/11
							1	1					1/7
20-24				1									12/0
				1									14/0
				1	3								2/10
25-29	1		1										9/7
				1	1		1						10/10
							1						2/9
35-39				1	1								12/9
40-up							1	1					3/4
Totals	2		2	5	1	6		3	3	1		1	90/9

TABLE 10
DEATHS

Causes of Death	Idiot			Imbecile			Moron			Age	Years of Residence
	M.	F.	T.	M.	F.	T.	M.	F.	T.		
Broncho-pneumonia	1									16/7	6/1
		1	2							12/9	2/2
				1	1					41/2	12/9
							1	1		25/3	14/3
Erysipelas	1	1								19/1	0/1
Spontaneous Pneumothorax	1	1								16/4	6/3
Lobar Pneumonia	1	1								21/4	0/2
Pulmonary Tuberculosis	1	1								20/11	14/3
Bedsore	1	1								24/1	12/11
Malignant Ovarian Growth				1	1					30/11	13/5
Totals	2	5	7	2	2		1	1			82/4

TABLE 11
SOME OF THE TYPES IN RESIDENCE

Classification	Idiot			Imbecile			Moron			Total			%
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	
Infirmity Type:													
(a) Physically helpless	11	6	17	4	2	6				15	8	23	11.00
(b) Mentally helpless	15	18	33	5	1	6		1	1	20	20	40	19.14
M.D. and Epileptic	17	14	31	11	4	15	3	5	8	31	23	54	25.83
M.D. and Psychopathic				1	3	4	1	2	3	2	5	7	3.35
M.D. and Psychotic	1	2	3		1	1		1	1	1	4	5	2.39
Mongols and Mongoloid	2	2	4	7	1	8	1		1	10	3	13	6.22
Totals	46	42	88	28	12	40	5	9	14	79	63	142	67.93

TABLE 12
APPLICATIONS AWAITING ADMISSION

Applications dated:	Male Female Total			Applications dated:	Male Female Total		
	M.	F.	T.		M.	F.	T.
1924-25-26	15	15	30	1933	5	10	15
1927	2	6	8	1934	15	17	32
1928	6	2	8	1935	29	20	49
1929	11	5	16	1936	17	17	34
1930	17	12	29				
1931	3	11	14	Totals	125	125	250
1932	5	10	15				

TABLE 13
REPORTED SUSPECTS

Reported prior to 1927	Male Female Total			Reported during:	Male Female Total		
	M.	F.	T.		M.	F.	T.
Reported during:	202	133	335	1933	8	12	20
1927	12	17	29	1934	6	11	17
1928	18	18	36	1935	11	7	18
1929	29	26	55	1936	21	7	28
1930	22	20	42				
1931	17	4	21	Totals	353	267	620
1932	7	12	19				

TABLE 14
SUMMARY OF REPORTED DEFECTIVES

	Male	Female	Total
Applicants (Table 12)	125	125	250
Suspects (Table 13)	353	267	620
In residence at Red Deer	108	101	209
Oliver	28		28
Ponoka	69	41	110
Claresholm		18	18
Totals	683	552	1235

TABLE 15
EUGENICS SUMMARY

	Male	Female	Total
A—Training School Cases:			
Presented and approved—(P.T.S.)	40	52	92
Presented and approved—(Out-Patients)	1	1	2
Total	41	53	94
Operations	35	50	85
Total	35	50	85
Paroled, transferred, etc.	20	29	49
In Residence	15	21	36
B—Sterilized prior to admission		20	20
Paroled, transferred, etc.		14	14
In Residence		6	6
C—Total Number in Residence	15	27	42
Percentage of Population—20.09%			

TABLE 16
STAFF

	Male	Female	Total		Male	Female	Total
Medical Superintendents	1		1	Kitchen Staff	3		3
Bursars	1		1	Dining Room Staff	2		2
Dentists, part time	1		1	Maids	3		3
Graduate Nurses	2		2	Laundry Room Staff	3		3
Other Nurses	13		13	Sewing Room Staff	2		2
Teachers of Grade subjects	1		1	Gardeners	1		1
Teachers of Special subjects	2		2	Farmers	1		1
Matrons	1		1	Boiler Room Staff	6		6
Attendants	5		5	Maintenance Staff	3		3
Social Workers, voluntary	1		1				
Stenographers	2		2	Totals	21	34	55
Clerks	1		1				

TABLE 17
SEWING ROOM

SUMMARY OF ARTICLES MADE AND REPAIRED IN 1936

Articles	Quantity	Articles	Quantity
Aprons: Gingham, white, burlap	171	Press and mangle sheets	21
Bags, Laundry, stocking, mail	16	Petticoats	13
Bibs	10	Rompers	4
Bureau scarves, table ends, etc.	61	Sheets	214
Bloomers	176	Serviettes	24
Bedjackets	54	Skirts	7
Blouses	32	Shrouds	7
Brassieres	11	Sleeves, canvas	27
Chemises	115	Suits, canvas	3
Combinations	31	Towels, tea	162
Cloths: Table	22	Huck	151
Wash	61	Ties	10
Curtains	37	Uniforms, Nurses, remodelled	20
Covers: Couch, mattress, dressing, heater	60	Nurses, new	105
Coats: Butcher, carpenter	2	Aprons	2
Cushions	2	Caps	29
Dresses	177	Bibs	3
Diapers	241	Dining Room dresses	7
Garters, pairs	41	Dining Room bloomers	3
Handkerchiefs	168	Miscellaneous	31
Kneelers	126	Total number of articles manufactured	2,771
Mitts	10	Total number of articles repaired	52,596
Nightgowns	167		
Pillow cases	137		
1931—Total number of articles manufactured			2,988
Total number of articles repaired			30,848
1932—Total number of articles manufactured			2,758
Total number of articles repaired			38,371
1933—Total number of articles manufactured			2,729
Total number of articles repaired			40,941
1934—Total number of articles manufactured			3,204
Total number of articles repaired			42,495
1935—Total number of articles manufactured			2,958
Total number of articles repaired			43,272

TABLE 18
LAUNDRY

1932—Total number of articles Laundered	286,660
1933—Total number of articles Laundered	308,460
1934—Total number of articles Laundered	300,618
1935—Total number of articles Laundered	326,911
1936—Total number of articles Laundered	339,790

TABLE 19
FARM AND GARDEN PRODUCE FOR HOME CONSUMPTION

Product	1934	1935	1936
Beans, French	1,100	1,265	980
Beans, Windsor			
Beets	3,280	4,550	4,200
Cabbage, Dutch	3,000	8,000	7,010
Cabbage, Red	190	260	
Carrots	8,000	8,500	8,050
Cauliflower	340	1,620	945
Celery		1,150	652
Corn on the Cob			710
Cucumbers	289	254	267
Lettuce	1,675	1,427	1,224
Onions, common	2,200	2,500	4,020
Onions, pickling	185	170	
Parsnips	3,840	5,200	4,200
Potatoes	45,695	108,000	78,662
Peas, green	935	1,480	895
Radish	661	423	199
Rhubarb	1,365	2,695	1,660
Spinach	1,015	1,430	422
Swiss Chard	1,635	1,355	1,040
Tomatoes	680	421	457
Turnips	9,200	10,100	18,745
Vegetable marrow			466

FARM PRODUCE

	1934	1935	1936
Eggs	361	356 ³ / ₄	655 doz.
Chicken, killed, dressed		429	363 lbs.
Pork, killed, dressed	5,660	4,468	5,740 lbs.
Wheat			475 bus.
Oats			1,096 bus.
Barley			228 bus.
Hay, timothy	4	10	15 ton

TABLE 20
HOME CANNING

Kinds	Quantity
JAMS:	
Vegetable Marrow	50 qts.
Black Currant	130 qts.
PRESERVES:	
Saskatoons	14 qts.
Black Currants	13 qts.
Rhubarb	97 qts.
PICKLES:	
Tomato	22 qts.
Mustard	40 qts.
Red Cabbage	82 qts.
Onion	28 qts.
Beet	18 qts.
Cabbage with Mustard Seed	48 qts.
RELISHES:	
Rhubarb	14 qts.
Cho Cho	44 qts.
Horseradish	3 qts.
Celery	26 qts.
Total	629 qts.

Central Alberta Sanatorium, Calgary

(A. H. BAKER, M.D., *Medical Superintendent*)

The year 1936 saw a great change in anti-tuberculosis work. The Tuberculosis Act, which was proclaimed on June 1st, made available free institutional treatment for tuberculosis and clinic diagnostic service, to those persons who had resided in the Province for twelve consecutive months out of the twenty-four immediately preceding application for such treatment or examination. Alberta is the second Province to provide free tuberculosis treatment. Preference in accommodation is given to pulmonary and other infectious cases of tuberculosis.

A Tuberculosis Division was created within the Health Department, and the Medical Superintendent of the Central Alberta Sanatorium was named as Director. The central office is located at the Sanatorium, and receives reports of all work done by the Division throughout the Province. Applications for treatment are received and beds allocated, necessary records of the tuberculosis situation by municipalities and electoral divisions are kept, and the general administration work of the Division is carried out.

A branch administration and tuberculosis clinic has been opened in the Edmonton General Hospital, which handles most of the work north of Red Deer. The office is in charge of Dr. G. R. Davison, formerly the travelling diagnostician attached to the Sanatorium staff.

Bed Accommodation.

Institutional beds are available at the Sanatorium, Calgary, and in three Edmonton hospitals. The Sanatorium provides 210 beds.

The General Hospital, Edmonton, equipped the third and fourth floors of the new wing for tuberculosis work, and provided on June 3rd, 50 beds. In November these were increased to 65. These beds are all in the fireproof section and are easily accessible to the X-ray, laboratory and operative departments of the hospital.

In the Royal Alexandra Hospital, the third floor of the Isolation Building has been taken over, with accommodation for 37 patients. The hospital has generously co-operated in installing an X-ray machine on this floor, so that the unit is self-contained.

The third floor of the south wing of the University Hospital, commonly designated as the Tuberculosis Section, has been occupied and provides 22 beds.

During the latter part of the year a convalescent home for 8 male patients was opened in the Kerriemuir Nursing Home, Calgary. This experiment proved very successful in the readjustment of patients from institutional to home life, and at a cost much less than in active treatment beds.

In these ways the institutional beds operated by the Department increased from 210 to 342. This has been an increase of over 60%, and at the end of the year was meeting the demand for beds, in spite of the fact that the number seeking treatment was much increased. Including those already in Edmonton hospitals who were accepted for free treatment, the applications from June 1st to December 31st increased by 88.4% over the corresponding period in 1935.

New Personnel:

Dr. G. R. Davison, as mentioned, is in charge of the Edmonton Clinic and Office, and physician to the 65 General Hospital patients, including the out-patients attached to this hospital for pneumothorax treatment.

Dr. W. H. Scott, of the medical staff of the University Hospital, serves as part-time physician in charge of both in and out patients at this hospital.

Dr. Irving Bell, Professor of Therapeutics, serves as part-time physician in charge of the female patients at the Royal Alexandra Hospital, including the out-patients.

Dr. J. B. McKay, of the Royal Alexandra staff, serves as part-time physician to the male patients of this hospital.

Miss C. Lonsdale, R.N., formerly with the Health Department as nurse, has charge of the Edmonton office as nurse-stenographer.

The Edmonton Tuberculosis Clinic:

This was conducted for some years in quarters kindly provided by the University Hospital in its out-patient clinic, but with the enlarging of the work has now been comfortably and very conveniently housed in the General Hospital, where X-ray and operative facilities are available. This change has contributed much to the convenience of patients and to the efficiency of the work.

Miss C. Davidson, tuberculosis nurse for Edmonton and district, provided by the Kinsmen Club, shares the clinic office. In this way all tuberculosis activities of Edmonton and district, as well as of more remote portions of this part of the Province, are centralized in one office, resulting in greater efficiency and no overlapping of effort.

Out-Patient Treatment Clinics:

Institutional patients who are receiving pneumothorax or lung collapse treatment, and who are fit to live at home and in some instances to work, provided they have facilities for occasional specific treatment, are now able to do so. Such service is being provided at the Sanatorium, Calgary, at the Edmonton General Hospitals, at Vermilion, Medicine Hat, and Lethbridge.

Diagnostic Clinics and Follow-up Service:

As noted, free examinations, including X-ray, are being supplied to as large a proportion of the population as the facilities permit. However, this service is for the discovery and prevention of tuberculosis, and is limited to the following three classes:

1. Those known to have had tuberculosis.
2. All intimate contacts of the above.
3. Those referred by practicing physicians as having, or suspected of having, tuberculosis.

Such regular clinic service is supplied at the following points: Central Alberta Sanatorium, Calgary City Health Department, Lethbridge, Medicine Hat, Drumheller, Edmonton, Camrose and Vegreville. It is expected that other points will be added to this list.

In addition to the above, a travelling clinic has been conducted at the following places: Stettler, Innisfail, Red Deer, Bentley, Lacombe, High River, Gleichen Indian School, St. Paul, Elk Point, Vulcan, Hanna, Innisfree, Mannville, Athabasca, Slave Lake, High Prairie, McLennan, Falher, Girouxville, Peace River, Grimshaw, Notikewin, Berwyn, Fairview, Spirit River, Sexsmith, Grande Prairie, Valley View, Grouard, Jousard and Smith.

Clinic examinations numbered 2,112, an increase of 17% over last year. Cases of active tuberculosis discovered were 112, and of inactive 33. Approximately 60% of those with active pulmonary tuberculosis had been admitted for institutional treatment as at December 31st.

The Practicing Physicians as Case Finders:

The practicing physicians still continue as the major agency in discovering new cases of tuberculosis. Over three times as many were referred for treatment by the medical profession at large as were referred from our clinics.

CLINIC REPORT, 1936

Date	Place	New Exams.	New Cases Tb. Act.	New Cases Tb. Inact.	Review Cases.	Total
Jan. 22-23	Lethbridge	26			17	43
Mar. 31 to April 1	Stettler	13	1		1	14
May 20-22	Drumheller	21	1		27	48
May 27-29	Medicine Hat	20	4	2	21	41
June 9-19	Lethbridge	24	4	4	25	49
July 13	Innisfail	7	1		9	16
July 14	Red Deer	11	2		19	30
July 15	Bentley	2			19	21
July 16	Lacombe	15	1		22	37
July 28	Drumheller	30	1		5	35
July 23-24	High River	30			39	69
Aug. 19-29	St. Paul	123	14	7	9	132
Aug. 21	Elk Point	49	2	1		49
Aug. 24 to Sept. 15	Peace River District	97	10	2	27	124
Aug. 26-27	Vulcan	15		1	13	28
Sept. 2	Hanna	24	2		3	27
Sept. 2	Vegreville	6			11	17
Sept. 3	Drumheller	17	2		8	25
Sept. 22-23	Lethbridge	33	2	2	10	43
Oct. 1	Drumheller	11		1	6	17
Oct. 7	Innisfree	17	2		9	26
Oct. 8	Mannville	15			5	20
Oct. 14	Camrose	25	1		2	27
Oct. 21-22	Medicine Hat	9	1		28	37
Nov. 4	Vegreville	27	4	1	9	36
Nov. 5	Drumheller	11	2		3	14
Nov. 18-20	Gleichen	36	2		178	214
Nov. 24-25	Lethbridge	19			19	38
Dec. 3	Drumheller	11			9	20
Dec. 16	Camrose	27		4	1	28
	Central Alberta Sanatorium	159	22	1	121	280
	Edmonton	140	19	7	151	291
	Caigary	113	12		103	216
Total		1183	112	33	929	2112

Work Among the Indians:

Report of survey of Indian Schools, Blackfoot Reserve, Gleichen, in November, shows that 189 pupils were examined. Twenty-three were new pupils this year. Of these 23, 20 were reactors to tuberculin, showing that of this year's class nearly all had been infected. Two of the 23 had definite X-ray evidence of pulmonary tuberculosis. Fifteen pupils were considered to have active pulmonary tuberculosis.

Twenty-eight cases diagnosed active diseases in 1935 were classified in 1936 as follows: Improved, 17; worse, 7; unchanged, 4.

Dr. H. H. Stephens, who had charge of the survey, reported as follows: "It is evident that there has been considerable progress made in 1936 in the control of tuberculosis on the Reserve."

The survey of the Blood Reserve at Cardston was conducted this year by Dr. L. M. Mullen, a former member of the Sanatorium staff, who is practicing in Cardston in association with Dr. J. K. Mulloy. Dr. Mullen reports in part as follows:

"Of the admissions, 42 are positive reactors. This is 71.1% as compared with 54.5% last year. I have no explanation for this change. Two hundred

and sixteen of the total school population of 268 are positive reactors. This gives a percentage of 80.6 as compared with 77.3 last year. This is accounted for by the high percentage of positives in the new admissions. Two cases of active tuberculosis were among the new admissions; 25 of the observation cases were in this group. Thus 45.7% of the new admissions show evidence of active or latent diseases, as compared with 32.8% of the general school population."

It is apparent from these two reports that much has yet to be accomplished in reducing the incidence of this disease among the Indians. Improvement in the general situation will no doubt be more rapid when more effective methods of tuberculosis control are in operation on the various Indian Reserves.

Deaths as recorded by the Registrar of Vital Statistics: White, 194; Metis, 27; Indian, 161. Total, 382.

Voluntary Agencies:

Edmonton—The Kinsmen Club has continued its splendid anti-tuberculosis work in the city and district. It conducts the seal sale, and from the funds provide a full-time tuberculosis nurse for the City of Edmonton. By this means a very effective work is being done in home visiting, in education, and in arranging for necessary clinic examinations. Miss Davidson, who has this work in hand, has a very thorough understanding of the local situation.

Calgary—The Tuberculosis Society has co-operated admirably throughout the year. This work is along lines similar to that of the Kinsmen Club in Edmonton. The tuberculosis nurse, Miss H. Acton, in so far as possible, keeps a close check on this disease here. Her office and our clinic quarters are situated in the City Health Department, so that no overlapping occurs with the City Department's activities.

Lethbridge—The Nursing Mission, under the able direction of Miss A. M. Tilley, has again given very valuable service. Supervision is given to tuberculous families and individuals who require it, and all arrangements are made for regular clinics, as well as the necessary follow-up work. The Mission supplies the nurse in attendance at the clinics.

Medicine Hat—The Seal Sale Committee conducts the annual sale and assists in anti-tuberculosis measures. Clinic arrangements are made by Miss Hagerman, Public Health nurse.

Drumheller—The Kinsmen Club, through the seal sale and school survey, have done much to educate the people of this district in regard to tuberculosis and the value of preventive measures. They work in close harmony with Miss Jones, Public Health nurse, and have made the Drumheller Clinic a very live one.

Red Deer—The Rotary Club handles the seal sale and have been able to assist Dr. Little, Health Officer, in the preventive work of the health unit.

High River—The Rotary Club carries on a work similar to that in Red Deer, with the assistance of Dr. W. G. Saunders, Health Officer, and has been able to make our clinics comprehensive in extent.

Medical Profession: As already stated, the members of this profession are the greatest factor in discovering tuberculosis in unsuspected places. They visit the public throughout the entire year. It is a pleasure to acknowledge the splendid support and co-operation given to the Tuberculosis Division by the practicing physicians of the Province from the extreme north to the international boundary.

Number Treated:

The number treated by the Division in institutions was 545, an increase of 194 over last year, or 55.3%.

Deaths:

Excluding Indians, 71% of the deaths from tuberculosis occurred in institutions or in the hospitals of the Province.

An effort has been made to present concisely the present set-up for anti-tuberculosis work in the Province, and in addition to present an outline of the activities carried out during the year. It is realized that still more energetic effort is necessary, directed into other fields of activity, if the widespread hold this disease has on the people of Alberta is to be diminished in a progressive manner, which we have reason to believe is possible. To this end the programme for 1937 is still more comprehensive.

Central Alberta Sanatorium:

This institution has operated along the usual lines of other years, except in so far as the developments have reduced the great demand for beds, and have much augmented the demands on the administrative and professional sections of the staff.

Medical—During a portion of the year a number of the male convalescent patients were placed in a suitable home in Calgary. This venture gave a splendid opportunity to test out certain patients before discharging them to their homes. Here they received a minimum of medical supervision, and I am pleased to report that the favourable results exceeded all expectations, and the patients showed that they had learned the lesson of self-preservation.

Staff Changes—Miss K. Connor, R.N., joined the staff on January 1st as Matron. Miss Connor is a graduate of Toronto General Hospital, and came to us with post-graduate experience in infectious diseases in Cleveland and in tuberculosis work in British Columbia, where she had supervision of the tuberculosis pavilion of the Vancouver General Hospital.

Dr. J. C. McPherson, a graduate of the University of Alberta, joined the staff on July 1st, succeeding Dr. G. R. Davison, who was transferred to the clinic in Edmonton.

Nursing Service—This department has maintained the same establishment and continued its tradition of efficient, loyal service.

Dietary Department—Miss McLeay, Dietitian, reports 318,850 meals served at a food cost per person per meal of 12.23 cents.

Administration—The Bursar, Col. E. R. Knight, presents the following facts: Average patient day strength, 208; per diem cost, including all clinic services, \$2.25. This is a reduction of 5% from the 1935 per diem cost.

School—As reported last year, a number of patients pursued correspondence courses, kindly arranged by Mr. G. F. McNally, Deputy Minister of Education. All who wrote Departmental examinations passed. A number of patients were able to study through the kindness of the Military, Armistice and Provincial Chapters I.O.D.E., who forwarded school books. The need of a full-time teacher is still felt, since there is a large group of patients of school age who are missing necessary training.

Entertainment—A new venture has been undertaken in the publication by patients of a sanatorium monthly, "The Cheer-U-Upper." The combination of sense and nonsense contributed and edited by patients has proven very much worth while, and the editorial board is to be congratulated on the splendid contribution being made to the life not only of the Sanatorium, but to the hospital sections in Edmonton.

To our many friends we are indebted for whist drives, books, periodicals, concerts, plays, drives, passes to shows, games and Stampede. These many

interests, along with the radio and movies, help to keep the morale of patients and staff at a high standard.

Guests—On March 10th the Calgary Medical Society held their regular monthly meeting in the recreation room. The members of the medical staff addressed the meeting and demonstrated various procedures.

On April 24th the Calgary Public Health Group of the Provincial Registered Nurses were entertained informally at supper by the nursing staff of the Sanatorium. Later Dr. Baker spoke briefly on tuberculin testing, and explained the various types of collapse therapy used in the treatment of pulmonary tuberculosis.

About one hundred members of the Alberta Registered Nurses Association visited the Sanatorium on the afternoon of June 24th. A programme of demonstrations and lectures on the newer methods of treatment in tuberculosis was given by various staff members. Tea was served on the lawn to the guests at 5 o'clock.

Sixty delegates to the combined Convention of the Alberta Hospital Association and the Municipal Health Association were entertained at luncheon on November 17th. This was followed by an address from Dr. Baker outlining the work being done by the Tuberculosis Division of the Department of Public Health. The guests were then shown through the institution by members of the staff.

Divine Services—Throughout the year divine services have been held regularly, and the attendance by patients indicates their appreciation. At all times the clergy of various denominations have freely given of their time to serve. It is a pleasure to mention those who in particular have been most associated with the work: Rev. Father MacDonald, Rev. Father Clancy, Rev. Mr. Aldridge, Rev. Mr. Roe, The Ven. Archdeacon Swanson, Rev. Mr. Unterschultz.

It is with pleasure that I acknowledge the splendid help given by the Honourable the Minister, Dr. W. W. Cross, and by Dr. M. R. Bow, Deputy Minister, who have made possible whatever progress has been achieved during the year. I wish also to express my sincere appreciation of the helpful co-operation extended by Dr. A. F. Anderson, Medical Superintendent of the Royal Alexandra Hospital, by Dr. R. T. Washburn, Medical Superintendent of the University Hospital, and by the Rev. Sister Superior of the Edmonton General Hospital.

To the members of our staff who have contributed advice, encouragement and personal services, may I extend my thanks.

STATISTICAL REPORT, 1936

TOTAL NUMBER OF PATIENT DAYS		INFIRMARY DAYS		
D.P.N.H.	1,341	D.P.N.H.		1,053
Civilian	75,847	Civilian		59,203
	<u>77,188</u>			<u>60,256</u>
		D.P.N.H.	Civilian	Total
Patients in Sanatorium Jan. 1, 1936		4	202	206
Patients treated in 1936		13	347	360
Remaining in Sanatorium Jan. 1, 1937		3	211	214
Classification on Admission of 154 Patients who entered the Sanatorium in 1936, is as follows:				
No disease				2
Undiagnosed				2
Tuberculosis, inactive				8
Non-Tuberculous				18
				<u>30</u>
Non-Pulmonary Tuberculosis				4
Pulmonary Tuberculosis—Minimal				7
Mod. Adv.				33
Far Adv.				80
				<u>124</u>
				<u>154</u>

No. of cases of active tuberculosis with positive sputum on admission.....	89
No. of cases of active tuberculosis developing positive sputum here	5
No. of cases of active tuberculosis with sputum persistently negative.....	30

124

Cases of active pulmonary tuberculosis with negative sputum on admission were 31, or 25.8%, 5 of whom later developed a positive sputum.

RE-ADMISSIONS

Non-Tuberculous	2
Tuberculosis, inactive	5
Active Pulmonary Tuberculosis	23
	30

Re-admissions formed 19.1% of the 120 cases of active pulmonary tuberculosis admitted in 1936.

LABORATORY REPORT

Sputum Examinations:	
In-Patients	2,764
Out-Patients	185
Staff	1
	2,950
Other Examinations:	
Urinalyses	1,807
Blood counts	1,677
Guinea pig inoculations	40
Guinea pig autopsies	45
Others	97
	3,666
	6,617

DENTAL REPORT

No. of patient examinations	366
No. of patient treatments	274
No. of prophylactic treatments	117
No. of fillings	225
No. of extractions	152
No. of new dentures	6
No. of dentures repaired	3

HELIO THERAPY REPORT

	No. Treated	No. Treatments	Total Time
Solar laryngoscopic	8	1,119	65 hours
Sun treatments (general)	34	1,838	1,459 hours
Air baths	178	11,875	9,892 hours
Alpine Lamp	32	3,762	

X-RAY SUMMARY

Films Used:		Fluoroscopic Examinations:	
14 x 17	1,570	Gas cases	3,061
11 x 14	16	Chest (others)	278
10 x 12	49	G.I. Tract	175
8 x 10	9	Barium En.	6
Dentals	114	Chest (Lipiodol)	5
	1,758	Abdomen (Lipiodol)	2
		Oesophagus (Barium)	2
Parts X-Rayed:		Special Examinations:	
Chest	1,050	Lipiodol (chest)	5
Sinuses	6	Lipiodol (abdomen)	2
Pelvis	6	Diodrast (kidneys)	2
Spine	24	Barium Meals (G.I.T.)	35
Leg	1	Barium Enemata (Colon)	3
Shoulder	4	Iodeikon (gall bladder)	4
Hand	2		51
Hips	6		
Knee	2	Total individuals examined	724
Foot	1	Total radiographic examinations	1,168
Arm	1	Total patients treated	2
Elbow	1	Total treatments given	6
Sacrum	1		
Teeth	17		
G.U. Tract	3		
Gall Bladder	4		
G.I. Tract	35		
Oesophagus	2		
Abdomen	2		
	1,168		
Films referred for interpretation			437
Clinic films made and interpreted:			
Innisfail	20	Peace River	52
Red Deer	36	Gleichen	214
Bentley	20		600
Lacombe	32	Other Clinic films interpreted	373
High River	72	Central Alberta Sanatorium films in-	
St. Paul	96	terpreted	1,168
Elk Point	28		
Vulcan	30	Total	2,578

OPERATING ROOM SUMMARY

Collapse Treatment:	
1. Pneumothorax:	
Under treatment Jan. 1, 1936	93
New cases begun 1935	30
Cases under treatment admitted and carried on	4
Total number treated during year	127
Number discontinued during year	45
Number under treatment at end of year	82
Number unsuccessfully attempted	18
Pneumothorax refills during year	3,564
2. Pneumolysis	4
3. Phrenic crush	3
4. Thoracoplasty—1 complete, 1 partial	2
5. Oleothorax refills	53
Intravenous Injections:	
Calcium Chloride	808
Sancocrysin	332
Saline and Glucose	8
Aspirations from Pleural Cavity:	
Air	39
Serious fluid with irrigation	51
Purulent fluid with irrigation	89
Other Treatments:	
Thoracoscopic examinations	2
Rib resection	1
Basal metabolism	1
Cystoscopic examination	1
Suprapubic cystotomy	1
Spinal punctures	3
Lipiodol injections into trachea	5
Dilations of urethral stricture	20
Cauterizations of cervix	10
Pelvic examinations	4
Aspirations of abscess	7
Plaster jackets	15
Plaster shells	6
Plaster splint	1
Plaster boots	2

DONATIONS AND ENTERTAINMENTS

CONCERTS—Mr. Max Bishop and party; St. Barnabas Choir; Mrs. Lampard and party; Excelsior Glee Club; Miss Murdoch's School of Dancing (arranged by the Red Cross Society); Salvation Army Band; Elk's Band; Premier Band.

PARTIES—Garden Party, Hallowe'en Party.

WHIST DRIVE—Recreation Committee; Military Chapter I.O.D.E.

TOURNAMENTS—Cribbage Tournament, Recreation Committee; Billiard Tournament, Recreation Committee.

PASSES—The various Moving Picture Houses; Calgary Exhibition and Stampede.

DRIVES—Mr. N. Christie; Mr. J. Farish; T. Eaton Company; Hudson's Bay Company; Rotary Club; Kiwanis Club; Starr's Ambulance; Roy's Ambulance; Armstrong's Ambulance; Elk's Club.

BOOKS—Calgary School Board (High School books); Provincial Chapter I.O.D.E. (complete set text-books Grades I to IX); Military Chapter I.O.D.E. (High School text-books); Armistice Chapter I.O.D.E., through Mrs. Newman, Sr. (two sets book-keeping books); Mr. Blatchford.

MAGAZINES AND PAPERS—Mrs. Eric Harvey; Hon. Lieut.-Col. J. H. Woods; Rotary Club, Calgary; Red Deer Advocate; Mr. G. Wright, Sr.; Canadian Bag Company; Western Catholic Publishing Co.; Sign Publishing Co.; Ukrainian Publishing Companies; United Grain Growers' Recreation Committee; Salvation Army; Anonymous Friends.

MISCELLANEOUS—Elk's Club of Calgary, Billiard Balls; Mrs. E. S. McRory, Playing Cards; Mr. J. Condon, Flowers and Candy.

DONATIONS, Christmas, 1936—Samaritan Club, Cheque; Interlake Tissue Co., Serviettes; Hon. R. B. Bennett, Candy for staff; Ontario Laundry Co., Candy and Cigarettes; Mr. and Mrs. W. Rathbun, Biscuits; Union Milk Co., Ice Cream; Leyden's Funeral Home, Candy and Cigarettes; Calgary Branch Red Cross Society, Concert and Parcels for all patients; Catholic Women's League, Parcels for patients; Children's Hospital Aid, Parcels for children; Ladies of Ste. Famille, Parcels for French patients; Rotary Club, Calgary, Magazines; Military Chapter I.O.D.E., Parcels for ex-soldiers; Mr. J. Condon, Candy for staff and patients.

CLASSIFICATION OF DISCHARGED PATIENTS, 1936

	On Admission.			Residence		On Discharge					
	No.	%	T.B. %	Not over 31 days	Over 31 days	A.	AA.	Q.	I.	U.	D.
I. No Disease	2			2							
II. Undiagnosed	2			2							
III. Non-T.B.	20			12	8				7		1
IV. T.B. Inactive	10			6	4				1	3	
	<u>34</u>	<u>23.3</u>		<u>22</u>	<u>12</u>				<u>8</u>	<u>3</u>	<u>1</u>
V. T.B. Pulmonary—											
(1) Clinical (no bacilli found):											
Minimal	A	2			2			1		1	
	B										
	C										
Mod. Adv.	A	10		1	9			2	6	1	
	B	1			1			1			
	C	2			2			2			
Far Adv.	A	2			2			1	1		
	B	2			2			1	1		
	C	2			2				2		
		<u>21</u>	<u>14.4</u>	<u>18.8</u>	<u>1</u>	<u>20</u>		<u>8</u>	<u>10</u>	<u>2</u>	
(2) Positive (bacilli found):											
Minimal	A	1			1			1			
	B										
	C										
Mod. Adv.	A	8			8			2	6		
	B	3			3			1		1	1
	C										
Far Adv.	A	26			26	1		5	20		
	B	20			20			3	10	3	4
	C	26			26			1	5	4	16
Apparently Hopeless		3		1	2						2
		<u>87</u>	<u>59.6</u>	<u>77.7</u>	<u>1</u>	<u>86</u>	<u>1</u>	<u>13</u>	<u>14</u>	<u>8</u>	<u>23</u>
Total Pul. T.B. Active		<u>108</u>			<u>2</u>	<u>106</u>	<u>1</u>	<u>21</u>	<u>51</u>	<u>10</u>	<u>23</u>
VI. Non-Pul. T.B.		4	2.7	3.5		4			3	1	
Total "Treated" Patients						122	1	21	62	14	24
Patients not here over 31 days										23	1
Grand Total		<u>146</u>			<u>24</u>	<u>122</u>	<u>1</u>	<u>21</u>	<u>62</u>	<u>37</u>	<u>25</u>

Explanation of Abbreviations and Terms Used: The standard of classification is that of the National Tuberculosis Association. "Minimal," "Moderately Advanced" and "Far Advanced" refer to anatomical extent of disease, while "A," "B" and "C" signify symptoms in order of increasing severity. "A" Arrested, "AA" Apparently Arrested, "Q" Quiescent, "I" Improved, "U" Unimproved, and "D" Died.

N.B.—Only those in residence over 31 days are classed as "Treated".

NOTE.—Of the above discharged patients, 13 were transferred to the Edmonton Sanatoria.

CLASSIFICATION OF 146 DISCHARGED PATIENTS

No disease	2
Undiagnosed	2
Non-Tuberculous	20
Tuberculosis, Inactive	10
Tuberculosis, Pulmonary, Active	108
Tuberculosis, Non-pulmonary	4
	<u>146</u>

CLASSIFICATION ON DISCHARGE OF 106 "TREATED" CASES OF PULMONARY TUBERCULOSIS

On Admission	On Discharge			
	Number.	Improvement.	No Improvement.	Died.
Minimal	3	3	1	
Moderately advanced	23	20	2	1
Far advanced	78	51	7	20
Apparently hopeless	2			2
	<u>106</u>	<u>73</u>	<u>10</u>	<u>23</u>

DIAGNOSIS OF NON-TUBERCULOUS CASES DISCHARGED IN 1936

Actinomycosis	1	Gingivitis	1
Anaemia	2	Pleuritis	2
Bronchogenic Carcinoma	1	Pneumonitis	3
Bronchopneumonia with Bronchiectasis	1	Upper respiratory infection	1
Cholelithiasis	1	Osteoarthritis of spine	1
Debility	2	Pleural empyema	2
Foreign body in lung with abscess	1		
Pulmonary abscess	1		20
I.—SEX:		II.—SOCIAL:	
Male	73	Single	74
Female	73	Married	69
		Widowed	3
	146		

III.—AGE ON ADMISSION:	Active T.B.	Non-T.B. and Inactive	Total
From 5 to 9 years		1	1
From 10 to 14 years	2	1	3
From 15 to 19 years	12	2	14
From 20 to 29 years	49	12	61
From 30 to 39 years	29	6	35
From 40 to 49 years	14	6	20
From 50 to 59 years	4	5	9
From 60 to 69 years	2	1	3
	112	34	146

IV.—RELIGION:	Active T.B.	Non-T.B. and Inactive	Total
Baptist	14		14
Brethren	1		1
Church of England	23		23
Congregational	1		1
Greek Orthodox	5		5
Hebrew	1		1
Lutheran	14		14
Latter Day Saint	1		1
Nazarene		1	1
Presbyterian		16	16
Roman Catholic		27	27
Greek Catholic		5	5
United		34	34
Undenominational		3	3
			146

V.—OCCUPATIONS—WOMEN:	Active T.B.	Non-T.B. and Inactive	Total
Bookkeeper	1		1
Saleslady	1		1
Nurse	3	1	4
Housewife	31	5	36
Housework	10	3	13
Teacher	2	1	3
Student	8	2	10
Waitress	1	1	2
At Home	1	2	3
	58	15	73

VI.—OCCUPATIONS—MEN:	Active T.B.	Non-T.B. and Inactive	Total
Brakesman		1	1
Car Repairer (Railway Shops)	1		1
Clerical Worker	8	1	9
Chemical Engineer	1		1
Coal Miner	2		2
Cook		1	1
Cream Grader	1		1
Dairyman	1		1
Farmer	13	7	20
Gardener	1		1
Grain Buyer	1		1
Garage Manager	1		1
Glazier		1	1
Labourer	7	4	11
Laundryman	1		1
Mattress Maker	1		1
Orderly	2		2
Priest	1		1
Radio Operator	1		1
Salesman in Store	2		2
Salesman (Travelling)	2	1	3
Sales Engineer	1		1
Shoe Repairer	1		1
Storekeeper		1	1
Student	3	2	5
Tile Maker	1		1
Tinsmith	1		1
	54	19	73

VII.—NATIVITY:	Active T.B.	Non-T.B. and Inactive	Total
Alberta	30	11	41
Canada	25	9	34
Austria	2	1	3
China	2	...	2
Denmark	2	...	2
England	13	4	17
Hungary	3	1	4
Ireland	3	...	3
Lapland	1	...	1
Newfoundland	1	...	1
Norway	3	...	3
Poland	8	1	9
Russia	1	1	2
Scotland	5	2	7
Sweden	1	1	2
United States	9	3	12
Wales	2	...	2
Ukraine	1	...	1
	112	34	146

VIII.—LENGTH OF RESIDENCE IN ALBERTA:	Active T.B.	Non-T.B. and Inactive	Total
Born in Alberta	30	11	41
Under 1 year in Alberta	1	...	1
From 1 to 2 years in Alberta	4	1	5
From 3 to 5 years in Alberta	10	2	12
From 6 to 9 years in Alberta	16	3	19
From 10 to 14 years in Alberta	8	5	13
From 15 to 19 years in Alberta	15	...	15
From 20 to 30 years in Alberta	21	10	31
Over 30 years	7	2	9
	112	34	146

IX.—RACIAL ORIGIN:	Active T.B.	Non-T.B. and Inactive	Total
Austrian	1	...	1
Metis	6	1	7
Danish	3	1	4
Chinese	2	...	2
Dutch	1	...	1
English	30	9	39
French	5	1	6
German	7	3	10
Hungarian	3	1	4
Irish	12	7	19
Lapp	1	...	1
Jewish	...	1	1
Norwegian	5	1	6
Polish	4	...	4
Roumanian	1	...	1
Russian	2	...	2
Swedish	1	1	2
Scotch	18	8	26
Ukrainian	8	...	8
Welsh	2	...	2
	112	34	146

RESIDENCE OF DISCHARGED PATIENTS IN 1936

CITIES:			
Calgary	28	Medicine Hat	4
Edmonton	19	Lethbridge	3
Drumheller	4		
TOWNS:			
Blairmore	1	Hanna	2
Brooks	1	Innisfail	1
Cardston	3	Leduc	2
Claresholm	1	Mundare	1
Coleman	1	Peace River	1
Grande Prairie	1	Ponoka	3
Granum	1	Vermilion	1
VILLAGES:			
Blackie	1	Lamont	1
Cochrane	2	Millet	1
Irricana	1	Provost	1
Lavoy	2		

LOCAL IMPROVEMENT DISTRICTS:

No. 5	1	No. 770	1
No. 38	1	No. 793	1
No. 67	1	No. 826	1
No. 183	1	No. 855	1
No. 276	1	No. 887	1
No. 607	1	No. 964	1

MUNICIPAL DISTRICTS:

No. 39	1	No. 458	1
No. 189	1	No. 484	1
No. 190	1	No. 486	2
No. 220	1	No. 487	1
No. 241	1	No. 512	2
No. 303	2	No. 513	1
No. 305	1	No. 515	1
No. 308	2	No. 518	1
No. 310	1	No. 519	1
No. 311	2	No. 544	1
No. 338	1	No. 545	1
No. 340	1	No. 547	2
No. 361	1	No. 548	1
No. 362	1	No. 549	1
No. 365	1	No. 551	1
No. 395	1	No. 574	1
No. 398	1	No. 576	1
No. 399	1	No. 580	2
No. 400	1	No. 858	1
No. 427	1		
No. 453	1		
			146

EDMONTON SANATORIA

STATISTICAL REPORT, 1936

Patients in Sanatoria, June 1st, 1936	38
Patients treated in 1936	203
Patients remaining in Sanatoria, Dec. 31, 1936	113
Total number of patient days	19,410

CLASSIFICATION ON ADMISSION OF 203 PATIENTS ADMITTED TO
SANATORIA IN 1936

No disease	1	Pul. Tuberculosis, Minimal	18
Undiagnosed	4	Pul. Tuberculosis, Mod. Adv.	56
Tuberculosis, inactive	1	Pul. Tuberculosis, Far Adv.	105
Non-Tuberculous	11		
Non-Pulmonary Tuberculosis	7		203

LABORATORY REPORT

Sputum Examinations:		Other Examinations:	
In-Patients	1,491	Urinalyses	318
Out-Patients	42	Blood counts	460
	1,533	Guinea pig inoculations	6
		Guinea pig autopsies	6
		Others	195
		Gastric analyses	4
			989

X-RAY REPORT

Radiographic:		Pyelogram		1
Chest	644	Electrocardiograph	1	
Sinuses	3	Fluoroscopic:		
Spine	6	Gas Cases	995	
Pelvis	1	Chest	412	
Stomach	1	G.I. Tract	14	
Teeth	1	Barium Enema	1	
G.I. Tract	5	Lipiodol in Bronchi	1	
G.U. Tract	1	Lipiodol in Sinus	1	
Knee	1	Mythlene Blue	1	
Barium Series	8			

OPERATING ROOM SUMMARY

Collapse Treatment:		Other treatments:	
New cases begun 1936	28	Chest Aspirations	38
Cases under treatment, admitted and carried on	31	Calcium Chloride	212
Total number treated in year	59	Pleural Irrigations	3
Number discontinued in year	9	Cystoscopy	2
Under treatment at end of year	50		
Pneumothorax refills during year	860	Quarts Lamp Treatments	151

CLASSIFICATION OF DISCHARGED PATIENTS, 1936

		On Admission.		Residence		On Discharge					
		No.	%	Not over 31 days	Over 31 days	A.	AA.	Q.	I.	U.	D
I. No Disease		1	.....		1				1		
II. Undiagnosed		4	.....	4							
III. Non-Tuberculous		11	.....	7	4					4	
IV. T.B. Inactive		1	.....	1							
		17	20.0	12	5				1	4	
V. T.B. Pulmonary—											
(1) Clinical:											
Minimal	A	11	.....	4	7	2		1	4		
	B		.....							
	C		.....							
Mod. Adv.	A	13	.....	4	9	2			6	1	
	B	2	.....	1	1						1
	C	1	.....		1						1
Far Adv.	A	1	.....		1					1	
	B		.....							
	C		.....							
		28	.....	9	19	4		1	10	2	2
(2) Positive—											
Minimal	A		.....							
	B		.....							
	C	2	.....	1	1						1
Mod. Adv.	A	6	.....	1	5				5		
	B		.....							
	C	1	.....	1							
Far. Adv.	A	5	.....		5				4	1	
	B	8	.....	1	7				1		6
	C	14	.....	3	11				2	1	8
		36	.....	7	29				12	2	15
Total Pul. T.B. Active		64	75.3	16	48	4		1	22	4	17
VI. Non-Pul. T.B.		4	4.7	1	3				2	1	
Total "Treated "					56	4		1	25	9	17
Patients here under 31 days				29		2			11	12	4
Grand Total		85	.....	29	56	6		1	36	21	21

TRANSFERS—Three patients were transferred from one Edmonton Sanatorium to another; 2 patients were transferred to the Central Alberta Sanatorium.

DIAGNOSIS OF NON-TUBERCULOUS CASES DISCHARGED IN 1936

Adhesive pleuritis	1	Post pneumonic debility	1
Bronchiectasis	1	Pelvic condition	1
Chronic bronchitis	2	Sacroiliac osteomyelitis	1
Emphysema and cardiac strain	1		
Lung abscess	2		11
Lobar pneumonia	1		

I.—SEX:

Male	51
Female	34
	85

II.—SOCIAL:

Single	35
Married	49
Divorced	1
	85

III.—AGE ON ADMISSION:

	Active T.B.	Non-T.B. and Inactive	Total
From 5 to 9 years	3		3
From 10 to 14 years	2	2	4
From 15 to 19 years	5	2	7
From 20 to 29 years	23	7	30
From 30 to 39 years	15	3	18
From 40 to 49 years	13	4	17
From 50 to 59 years	3	1	4
From 60 to 69 years	2		2
	66	19	85

IV.—RELIGION:

Baptist	2	Methodist	2
Church of England	10	Roman Catholic	23
Christian Scientist	1	Presbyterian	3
Greek Catholic	11	United	3
Greek Orthodox	2	Unknown	19
Moravian	1		
Lutheran	8		85

V.—OCCUPATIONS—WOMEN:			
	Active T.B.	Non-T.B. and Inactive	Total
Housewife	11	10	21
Student	6	2	8
Child	2	.....	2
Cook .....	.....	1	1
Dietitian	1	.....	1
At Home	1	.....	1
	<hr/> 21	<hr/> 13	<hr/> 34

VI.—OCCUPATIONS—MEN:			
	Active T.B.	Non-T.B. and Inactive	Total
Child .....	.....	1	1
Clerk	4	.....	4
Farmer	16	4	20
Labourer	7	1	8
Miner	2	.....	2
Shoemaker	2	.....	2
Student	3	.....	3
Laundryman	1	.....	1
Stock Buyer	1	.....	1
Teacher	2	.....	2
Upholsterer	1	.....	1
Unemployed	2	.....	2
Painter and Decorator	1	.....	1
Salesman	1	.....	1
Tailor	1	.....	1
Taxi Driver	1	.....	1
	<hr/> 45	<hr/> 6	<hr/> 51

VII.—NATIVITY:			
	Active T.B.	Non-T.B. and Inactive	Total
Alberta	14	8	22
Canada	15	3	18
Austria	2	.....	2
China	1	1	2
England	3	1	4
Finland	2	.....	2
Germany .....	.....	1	1
Ireland	2	.....	2
Newfoundland	1	.....	1
Poland	8	3	11
Scotland	2	.....	2
Sweden	3	.....	3
Ukraine	2	.....	2
United States	5	.....	5
Wales	1	.....	1
Roumania .....	.....	1	1
Unknown	5	1	6
	<hr/> 66	<hr/> 19	<hr/> 85

VIII.—LENGTH OF RESIDENCE IN ALBERTA:			
	Active T.B.	Non-T.B. and Inactive	Total
Born in Alberta	18	8	26
1 to 3 years in Alberta	2	1	3
3 to 5 years in Alberta	3	.....	3
6 to 9 years in Alberta	9	1	10
10 to 14 years in Alberta	4	3	7
15 to 19 years in Alberta	1	.....	1
20 to 30 years in Alberta	21	3	24
Over 30 years	3	.....	3
Unknown	5	3	8
	<hr/> 66	<hr/> 19	<hr/> 85

IX.—RACIAL ORIGIN:			
	Active T.B.	Non-T.B. and Inactive	Total
Chinese	2	.....	2
English	5	.....	5
Finnish	2	.....	2
French	3	2	5
German	4	2	6
Irish	5	.....	5
Indian	1	.....	1
Metis	9	4	13
Negro	1	.....	1
Norwegian	2	1	3
Polish	7	2	9
Russian	1	.....	1
Scotch	10	1	11
Swedish	3	.....	3
Ukrainian	7	4	11
Welsh	1	.....	1
Unknown	3	3	6
	<hr/> 66	<hr/> 19	<hr/> 85

RESIDENCE OF 85 PATIENTS DISCHARGED IN 1936

CITIES:

Edmonton		29
Red Deer		1

 30

TOWNS:

Athabasca	2	Morinville	1
Camrose	1	Ponoka	1
Coronation	1	Tofield	1
Grouard	1		
Leduc	1		
Lacombe	2		

 11

VILLAGES:

Clyde	1	New Norway	1
Ferintosh	1	Rocky Mountain House	1
Heisler	1	Smoky Lake	1
Innisfree	3	Strome	1
Myrnam	2		
Mannville	1		

 13

LOCAL IMPROVEMENT DISTRICTS:

No. 467	1	No. 733	1
No. 628	1	No. 830	1
No. 669	1		

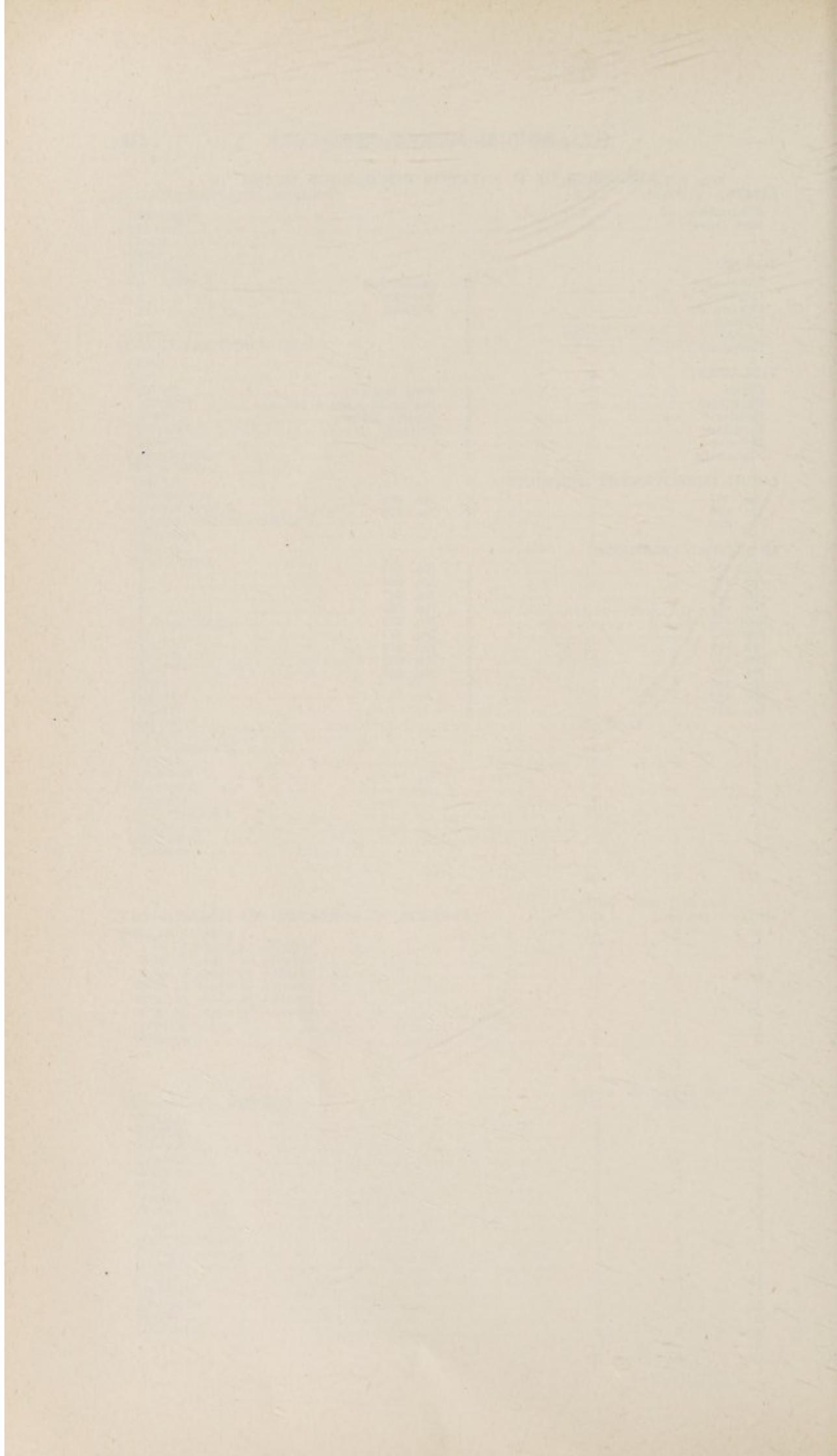
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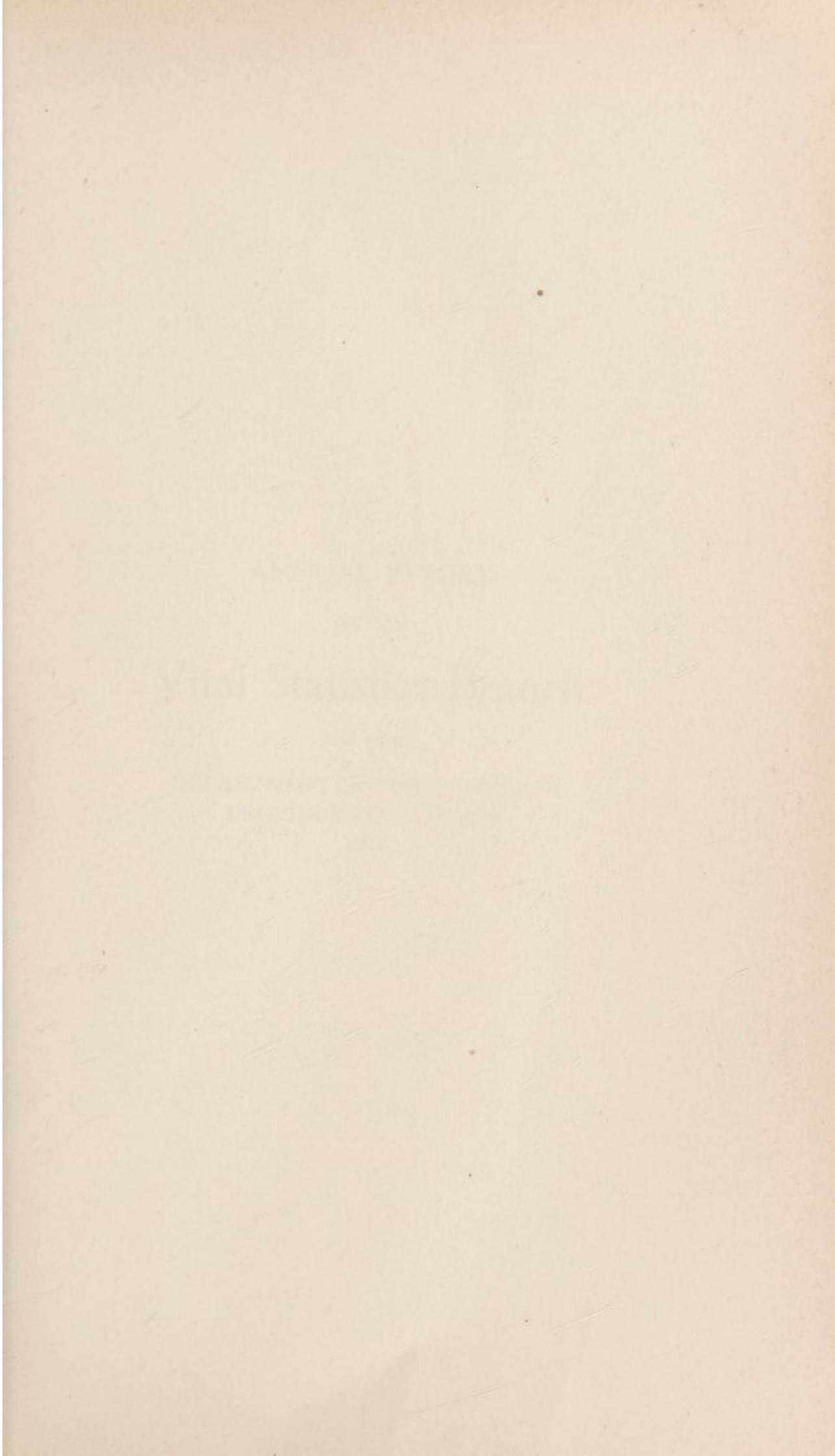
MUNICIPAL DISTRICTS:

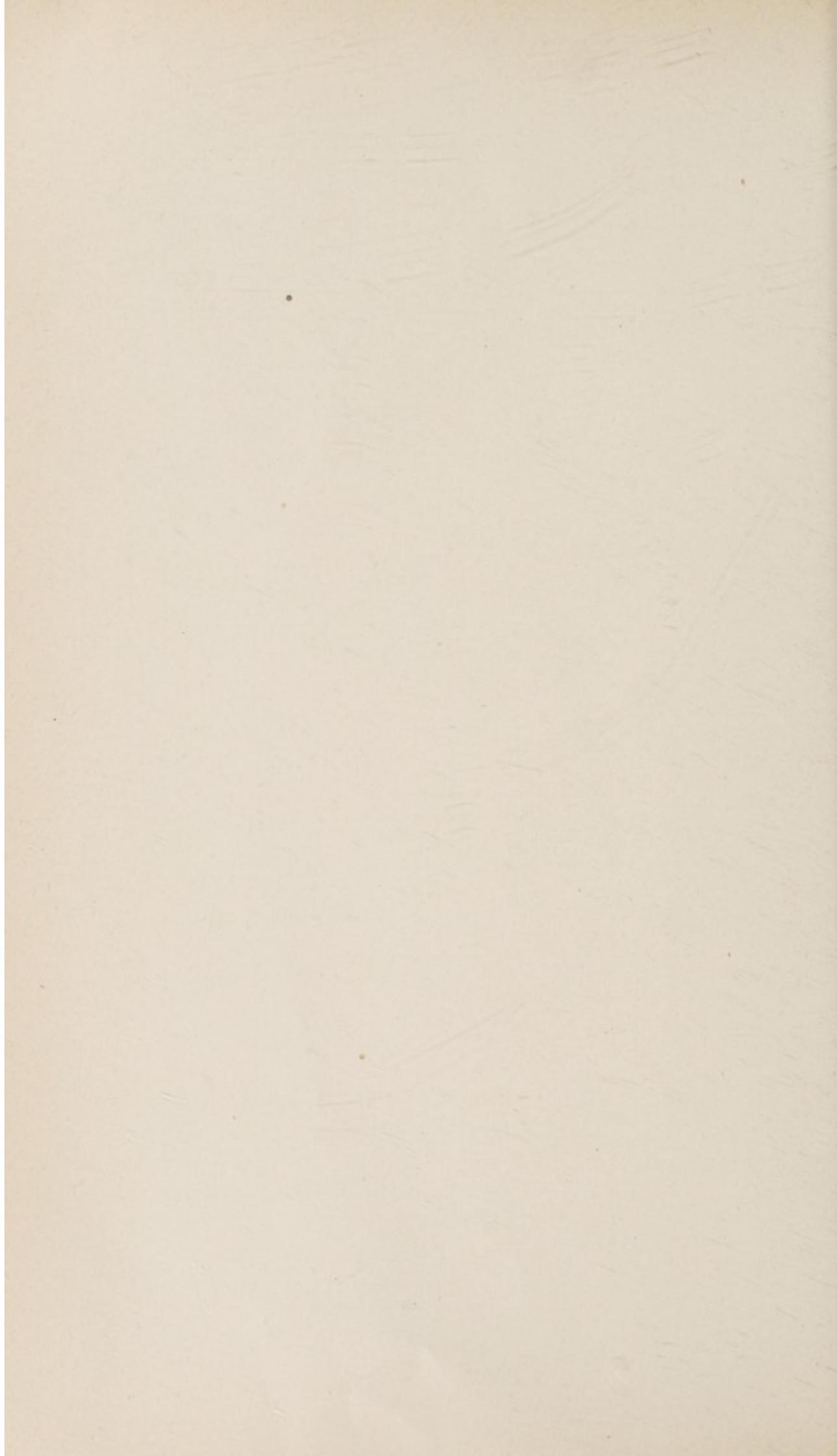
No. 426	1	No. 544	1
No. 427	1	No. 546	1
No. 452	1	No. 547	1
No. 458	2	No. 551	2
No. 462	1	No. 573	1
No. 512	2	No. 577	1
No. 514	1	No. 578	1
No. 517	1	No. 638	2
No. 519	1	No. 667	1
No. 520	1		
No. 522	1		
No. 543	2		

 26

 Total 85







ANNUAL REPORT
OF THE
Vital Statistics Branch
OF THE
DEPARTMENT OF PUBLIC HEALTH
PROVINCE OF ALBERTA
1936

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1928

CONTENTS

	Page
Intrdouctory Letter	5
Population Statistics by Divisions	9
Summary of Births, Deaths and Marriages in Alberta	14
Births—By Months	16
Births—Legitimate, Illegitimate and Plural	19
Births—According to Birthplace of Parents	20
Births—According to Ages of Parents	22
Births—According to Racial Origin of Parents	24
Births—Non-resident Mothers in Alberta	26
Births—Resident and Non-resident Mothers in Cities	26
Births—Order of Birth—By Age of Mother	27
Deaths of Children—Specified Causes, by Months	28
Infantile Death Rates	29
Deaths of Children—Specified Causes, by Ages	30
Deaths of Children—According to Residence of Decedents	32
Births and Deaths by Municipalities	33
Deaths—Causes by Sex and Age in Whole Province	48
Deaths—Causes by Months for Whole Province	66
Deaths—Causes by Sex and Age in Edmonton	83
Deaths—Causes by Sex and Age in Calgary	96
Deaths—Accidental for Whole Province	108
Deaths—According to Residence of Decedents	109
Deaths—Non-resident in Alberta	109
Deaths—From Selected Causes, Numbers and Rates	110
Marriages—By Months	112
Marriages—By Conjugal Condition	112
Marriages—By Ages	113
Marriages—By Birthplace	114
Marriages—By Religious Denominations	116
Divorces	117
Births—Indian	118
Deaths—Indian Children by Specified Causes	118
Deaths—Indians by Sex and Age	119
Birth, Marriage, Death and other Rates for Various Years	126
Deaths and Rates from Puerperal Conditions	126
Summary	127

100
101
102
103
104
105
106
107
108
109
110
111
112
113
114
115
116
117
118
119
120
121
122
123
124
125
126
127
128
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VITAL STATISTICS BRANCH

(Donald MacKie, Deputy Registrar General)

The chief Vital Statistics features of the year 1936 for the Province of Alberta reveal a decrease in the birth rate, a slight increase in the marriage rate, and a decided increase in the general death rate. There are also increases in the infantile mortality and maternal death rates.

The birth rate has established a new low record. Every year since 1931 the trend has been steadily downwards, each year being lower than the preceding one; it is still, however, a fraction above the birth rate of Canada as a whole.

Deaths from epidemic and contagious diseases have all increased with the exception of measles, which is practically stationary, and poliomyelitis, which is substantially reduced. Influenza has almost doubled, and is the highest since the year 1929. The cancer death rate continues to increase steadily, and is the highest yet recorded, being second only in the number of deaths to heart disease. Pneumonia takes third place in the number of deaths, and is slightly lower than last year but higher than the average of the preceding five years. The rate for violent deaths is also higher than it has been for the past five years, a large part of this increase being due to the unusual number of deaths from drowning.

The population of the Province for the year 1936 as shown by the Dominion census for that year is 772,782. All rates in this report have therefore been based on that figure.

Births

The number of living children born and registered during the year amounted to 15,786, constituting a birth rate of 20.4 per 1,000 population. This is 397 fewer births than the number for the previous year, and is a decrease of .6 in the rate. Comprising the 15,786 births were 8,081 males and 7,705 females, a ratio of 1,049 males to 1,000 females, which is two less than the average number of males for the preceding ten years. There were 378 twins born during the year and 15 triplets. Illegitimate births numbered 607, being seven less than the number for the preceding year and constituting a rate of 3.8 per 100 births.

Of the total births registered, 7,096 occurred in cities and towns of over 1,000 population, 7,869 in the rural districts, and 821 on Indian reservations. In the four large cities, the births were as follows: Edmonton 2,317, Calgary 1,623, Lethbridge 580, and Medicine Hat 326.

For purposes of comparison, the following are the birth rates for Canada, the Provinces, Great Britain and certain other countries of the world for the year 1936. The greater portion of these rates, as also other international rates published in this report, have been taken from the Annual Report of the Registrar General for Scotland.

BIRTH RATES

Canada	20.0	Hungary	20.0
Prince Edward Island	21.5	Northern Ireland	20.0
Nova Scotia	21.7	Irish Free State	19.6
New Brunswick	24.1	Germany	19.0
Quebec	24.3	Scotland	17.9
Ontario	16.9	Czecho Slovakia	17.4
Manitoba	18.1	New Zealand	16.6
Saskatchewan	20.5	Switzerland	15.6
ALBERTA	20.4	France	15.0
British Columbia	14.0	England and Wales	14.8
Italy	22.2	Norway	14.8
Netherlands	20.1	Austria	13.1

Marriages

There were 6,020 marriages registered during the year. This number is 10 more than that of the previous year, and is 491 more than the average of the five preceding years, and constitutes a rate of 7.8 per 1,000 population.

For purposes of comparison, the following are the marriage rates per 1,000 population for Canada, the Provinces, Great Britain and certain other countries of the world for the year 1936:

MARRIAGE RATES

Canada	7.3	Hungary	8.5
Prince Edward Island	6.5	Poland	8.4
Nova Scotia	7.6	Czecho Slovakia	8.0
New Brunswick	7.8	Norway	7.8
Quebec	7.0	Scotland	7.6
Ontario	7.5	Netherlands	7.5
Manitoba	8.1	Italy	7.2
Saskatchewan	6.6	Northern Ireland	7.1
ALBERTA	7.8	Switzerland	7.1
British Columbia	7.3	Austria	6.9
New Zealand	9.2	France	6.7
Germany	9.1	Irish Free State	5.0
England and Wales	8.7		

Of the 6,020 marriages, 142 are brides of 16 years of age and under, 1,204 are between the ages of 17 and 19, and 2,778 between the ages of 20 and 24. There were 55 grooms and 31 brides over 60 years of age, 14 of these grooms and 7 of the brides being over 70 years of age. The number of marriages in the four large cities are as follows: Edmonton 1,415, Calgary 1,021, Lethbridge 233, and Medicine Hat 187.

There were 209 divorces granted by decree absolute during the year, which is exactly the same number as that of the previous year, and 45 more than the average of the preceding five years; 74 were granted to husbands and 135 to wives. In addition to the divorces, 7 decrees of nullity were issued.

Deaths

During the year, deaths (including Indians) numbered 6,147; of these, 3,610 were males and 2,537 were females. This number is 418 more than in the previous year and constitutes a death rate of 8.0 per 1,000 population, being an increase of .7 over the previous year. There were 279 males and 237 females 80 years of age or over at time of death, whilst 2 males and 3 females were centenarians.

For purposes of comparison, the following are the death rates per 1,000 population for Canada, the Provinces, Great Britain and certain other countries of the world for the year 1936:

DEATH RATES

Canada	9.7	Hungary	14.2
Prince Edward Island	11.1	Poland	14.2
Nova Scotia	10.8	Italy	13.5
New Brunswick	11.0	Scotland	13.4
Quebec	10.3	Czecho Slovakia	13.3
Ontario	10.2	Austria	13.2
Manitoba	8.7	England and Wales	12.1
Saskatchewan	6.8	Germany	11.8
ALBERTA	8.0	Switzerland	11.4
British Columbia	9.6	Norway	10.3
France	15.3	New Zealand	8.8
Irish Free State	14.4	Netherlands	8.7
Northern Ireland	14.3		

Heart disease was the most frequent cause of death, the rate being 103 per 100,000 population. Deaths from malignant disease persistently increase, the rate being 82 compared with 79 for the previous year. In both sexes the digestive organs were most frequently affected, the other principal male organs being the genito-urinary system and respiratory system, and the principal female sites, the genitalia and breasts. Pneumonia was the third highest cause of death, accounting for 440 with a death rate of 57, and which was followed closely by deaths from violence with a rate of 54 and 419 deaths; of this number 325 were males and 94 were females. Pulmonary tuberculosis accounted for 294 deaths, giving a rate of 38 per 100,000 population, although this rate is 4 higher and the deaths 28 more than last year, there is an actual decrease amongst the white population, the Indian population being accountable for the whole of the increase. The general trend of this disease over a number of years is downwards. There was a large increase in the deaths from influenza, the number of deaths being 340 and the rate 44, compared with 194 deaths and a rate of 24 for the previous year. In the other contagious diseases class, as compared with the previous year, the deaths from whooping cough increased from 43 to 73, diphtheria from 8 to 9, typhoid fever from 11 to 20, and scarlet fever from 8 to 23. Measles decreased from 27 to 25 and poliomyelitis from 15 to 4. The deaths from puerperal causes (childbirth) numbered 91, as compared with 69 for the previous year, being a death rate of 5.8 per 1,000 births.

The following table shows certain principal causes of death during the year. Both the actual number and the rate per 100,000 population of each is given, together with the figures for the four preceding years.

Causes of Death	1936		1935		1934		1933		1932	
	Number of Deaths	Rate per 100,000 Population	Number of Deaths	Rate per 100,000 Population	Number of Deaths	Rate per 100,000 Population	Number of Deaths	Rate per 100,000 Population	Number of Deaths	Rate per 100,000 Population
Diseases of the Heart	801	103	826	105	835	108	749	99	762	102
Cancer	640	82	622	79	572	74	590	78	539	72
Violent Deaths (Suicides excepted)	419	54	393	50	382	49	378	50	341	46
Pneumonia (all forms)	440	57	450	57	312	41	327	43	362	47
Pulmonary Tuberculosis	294	38	266	34	262	34	305	40	313	38
Diseases of the Arteries	427	55	404	51	305	39	295	37	283	36
Influenza	340	44	194	24	141	18	223	29	297	38
Nephritis	190	24	194	24	196	25	194	26	218	32
Appendicitis	155	20	156	20	131	18	130	17	137	19
Cerebral Haemorrhage	105	13	113	14	140	18	127	17	149	21
Diarrhoea and Enteritis	124	16	88	11	108	14	116	15	150	20
Suicides	87	11	84	11	106	14	85	11	96	13
Puerperal Causes	91	11	69	9	81	11	73	10	64	9
Diabetes Mellitus	70	9	71	9	69	9	57	8	67	9
Whooping Cough	73	9	43	5	52	7	55	7	34	3
Diphtheria	9	1	8	1	8	1	6	1	10	1
Measles	25	3	27	3	1	.....	6	1	14	2
Typhoid and Paratyphoid Fever	20	2	11	1	8	1	6	1	9	1
Scarlet Fever	23	3	8	1	5	1	5	1	4	1
Poliomyelitis	4	.....	15	2	4	1	8	1	14	2

The foregoing list comprises 4,337 deaths and amounts to 70.5 of the total deaths for the year.

The deaths of children under one year of age numbered 940 and is 4 more than the number for the previous year, but owing to the smaller number of births the rate per 1,000 has increased from 58 for the previous year to 60 for this year, and is equal to the average of the five preceding years.

The following table gives, for purposes of comparison, the infantile mortality rates per 1,000 births for Canada, the Provinces, Great Britain, and certain other countries of the world for the year 1936:

INFANT MORTALITY RATE PER 1,000 BIRTHS

Canada	66	Czecho Slovakia	124
Prince Edward Island	69	Italy	99
Nova Scotia	66	Scotland	82
New Brunswick	77	Northern Ireland	77
Quebec	83	Irish Free State	74
Ontario	55	France	67
Manitoba	61	Germany	66
Saskatchewan	54	England and Wales	59
ALBERTA	60	Switzerland	47
British Columbia	44	Netherlands	39
Poland	141	New Zealand	31
Hungary	140		

The number of deaths by suicide is 87, an increase of 3, whilst the deaths by murder and manslaughter were 13, a decrease of 12 from the year 1935.

Stillbirths numbered 376, being 13 more than the number for the previous year.

DIVISIONS OF ALBERTA FOR CENSUS AND VITAL STATISTICS PURPOSES

As the Province of Alberta is not divided into Counties, and the political divisions are not permanently fixed, it has been found advisable to use as smaller areas, the Dominion Census Divisions.

These Divisions are fixed, and as the population increases, may be subdivided without destroying their value for purposes of Vital Statistic comparison with preceding years.

The following table shows these Census areas divided into Municipalities, Local Improvement Districts, Cities, Towns and Villages with the 1936 and 1931 official Division population figures.

POPULATION OF CENSUS DIVISIONS OF ALBERTA CLASSIFIED BY MUNI-
CIPALITIES FOR CENSUS YEARS, 1936 AND 1931

Census Divisions and Municipalities	Population		Census Divisions and Municipalities	Population	
	1936	1931		1936	1931
Province	772,782	731,605	Division No. 2—Continued:		
Division No. 1: Medicine Hat	29,699	28,849	Towns—Continued:		
1 L.I.D.	93	90	Coleman	2,129	1,704
2 L.I.D.	162	128	Diamond City	143	119
3 L.I.D.	172	152	Granum	255	329
4 L.I.D.	555	526	Macleod	1,365	1,447
5 L.I.D.	1,251	1,097	Magrath	1,217	1,224
6 L.I.D.	643	678	Pincher Creek	999	1,024
31 L.I.D.	64	38	Raymond	2,094	1,849
32 L.I.D.	592	580	Villages:		
33 Flowery Plains	533	477	Coaldale	255	251
34 Burlington	958	793	Coalhurst	774	953
35 L.I.D.	430	307	Cowley	141	151
36 Warner	1,305	1,214	Frank	258	268
61 L.I.D.	821	808	Monarch	103	117
62 L.I.D.	716	684	Pincher City	38	45
63 L.I.D.	625	570	Stirling	392	376
64 Forty Mile	1,148	1,060	Division No. 3: Bow	14,710	15,066
65 Eureka	1,190	1,148	96 McLean	1,234	713
66 L.I.D.	2,549	2,082	121 L.I.D.	2,785	452
91 L.I.D.	1,170	1,115	122 L.I.D. Pt. Jubilee	2,020	
92 Excelsior	974	905	123 Pt. Bow Slope	4,416	209
93 L.I.D.	890	852	125 L.I.D.	435	713
94 Bow Island	614	605	127 Pt. Clifton	914	
Cities:			Towns:		
Medicine Hat	9,592	10,300	Bassano	574	615
Towns:			Brooks	697	708
Bow Island	308	314	Redcliffe	990	1,192
Irvine	278	234	Villages:		
Taber	1,341	1,279	Duchess	150	114
Villages:			Empress	303	314
Burdett	90	121	Enchant	83	92
Milk River	326	350	Jenner	49	62
Warner	309	342	Retlaw	60	84
Division No. 2: Macleod	57,499	57,186	Division No. 4: Nanton	28,285	29,067
7 L.I.D.	330	369	97 L.I.D.	2,933	2,258
8 L.I.D.	1,394	1,474	98 Little Bow	1,526	1,589
9 L.I.D.	1,547	1,580	127 Clifton Pt.	867	
10 Cochrane	1,613	1,320	128 Harmony	1,052	1,157
37 Sugar City	2,192	1,993	129 Clear Lake	2,021	2,231
38 L.I.D.	1,176	1,276	130 L.I.D.	348	395
39 Kerr	1,830	2,007	131 L.I.D.	38	46
40 Castle River	606	540	157 Marquis	1,773	1,923
67 L.I.D.	4,635	4,691	158 Royal	1,580	1,751
68 L.I.D.	2,467	2,340	159 Riley	1,834	1,959
69 Bright	1,198	1,442	160 L.I.D.	676	381
70 Livingstone	1,466	1,502	161 L.I.D.	43	40
71 L.I.D.	4,369	4,282	189 Dinton	1,887	1,990
99 Argyle	1,811	1,900	190 Sheep Creek	1,978	1,988
100 L.I.D.	571	677	191 Stockland	2,957	2,907
101 L.I.D.	173	192	192 L.I.D.	9	8
Indian Reserves	1,991	1,798	Unorganized parts	4	
Cities:			Towns:		
Lethbridge	13,523	13,489	High River	1,359	1,459
Towns:			Nanton	709	739
Blairmore	1,682	1,629	Okotoks	571	760
Cardston	1,711	1,672	Stavelly	301	303
Claresholm	1,051	1,156	Vulcan	869	803

POPULATION OF CENSUS DIVISIONS OF ALBERTA CLASSIFIED BY MUNICIPALITIES FOR CENSUS YEARS, 1936 AND 1931—Continued

Census Divisions and Municipalities	Population		Census Divisions and Municipalities	Population	
	1936	1931		1936	1931
Division No. 4—Continued:			Division No. 6—Continued:		
Villages:			Olds	1,197	1,056
Arrowwood	252	293	Strathmore	531	523
Barons	264	284	Three Hills	659	581
Black Diamond	657	683	Villages:		
Blackie	225	251	Acme	291	234
Carmangay	234	279	Airdrie	214	198
Cayley	135	127	Albert Park	332	
Champion	328	310	Beiseker	230	230
Lomond	127	176	Carbon	374	355
Milo	136	135	Carstairs	356	387
Nobleford	117	143	Cluny	142	134
Turner Valley	475	656	Cochrane	336	293
			Crossfield	333	321
Division No. 5: Acadia	21,391	26,651	Forest Lawn	471	
122 Pt. Jubilee	154		Hussar	104	151
214 Berry Creek	1,793	581	Irricana	160	161
241 Acadia	826	1,029	Langdon	101	83
242 Cereal	1,176	1,103	Newcastle	1,278	304
243 Collholme	496	807	Rockyford	211	194
271 Bertawan	853	1,186	Rosebud	114	101
272 Golden Centre	790	1,227	Standard	205	218
273 Sounding Creek	345	740	Swalwell	112	95
274 Richdale	536	788	Trochu	464	506
275 Hand Hills	1,097	1,189			
276 Pt. L.I.D.	2,436		Division No. 7: Battle River	37,647	38,106
277 Michichi	1,290	2,178	305 Pt. Dowling Lake	168	
301 Canmer	534	814	331 L.I.D.	1,069	1,180
302 Stewart	678	372	332 L.I.D.	806	1,015
303 Wiste	817	1,199	333 L.I.D.	1,130	1,255
304 Hiram	539	796	334 Coronation	1,941	2,022
305 Dowling Lake	1,285	1,482	361 Rosenheim	1,470	1,744
306 Lambton	1,390	1,651	362 Hillcrest	1,176	1,200
307 Starland	1,297	1,446	363 Stocks	1,173	1,186
Towns:			364 Flagstaff	1,796	1,683
Hanna	1,405	1,490	365 Progress	2,262	1,999
Youngstown	187	372	391 Sifton	1,477	1,475
Villages:			392 Vale	1,044	958
Cereal	131	185	393 Huamha	1,275	1,233
Chinook	134	176	394 Asquith	1,235	1,205
Craigmyle	214	236	395 Wheatland	1,809	1,819
Delia	279	286	421 Ribstone	1,644	1,452
Morrin	146	149	422 Gilt Edge	1,767	1,674
Munson	146	164	423 Battle River	1,530	1,466
Oyen	298	401	424 Kinsella	1,240	1,237
Richdale	38	44	425 Stirling	2,049	1,925
Rumsey	81	83	455 Iron Creek	2,270	2,121
			Towns:		
Division No. 6: Calgary	141,806	140,624	Castor	592	634
123 Pt. Bow Slope	547		Coronation	605	738
217 L.I.D.	704	794	Hardisty	524	428
218 Blackfoot	1,528	1,590	Wainwright	1,048	1,147
219 Bow Valley	1,738	1,679	Villages:		
220 Shepard	2,057	3,048	Alliance	263	260
221 Springbank	2,539	2,166	Cadogan	84	128
222 L.I.D.	471	438	Chauvin	321	269
247 L.I.D.	958	1,073	Compeer	88	94
248 Grasswold	1,421	1,448	Consort	252	299
249 Keoma	1,518	1,525	Czar	138	140
250 Beddington	2,259	2,272	Edgerton	222	189
251 L.I.D.	1,472	1,427	Forestburg	226	291
252 L.I.D.	350	277	Galahad	152	150
276 L.I.D. Pt.	2,850		Hughenden	203	191
278 Carbon	1,896	5,365	Irma	240	196
279 Norquay	2,342	2,170	Killam	329	326
280 Rosebud	2,366	2,177	Lougheed	217	218
281 Beaver Dam	2,282	1,926	Monitor	99	137
282 L.I.D.	953	593	Provost	490	533
308 Ghost Pine	2,340	2,129	Sedgewick	353	338
309 Stauffer	2,327	2,027	Strome	210	172
310 Mountain View	2,748	2,506	Veteran	180	180
311 Westerdale	2,631	2,420	Viking	480	492
Unorganized Parts	1,752	2,238			
Indian Reserves	1,882	2,109	Division No. 8: Red Deer	65,439	61,016
Banff	2,037	2,519	336 Success	1,427	1,705
Cities:			337 Vimy	1,015	1,074
Calgary	83,407	83,761	338 Hays	2,736	2,364
Drumheller	2,912	2,987	339 Pine Lake	2,442	2,098
Towns:			340 Arthur	2,487	2,177
Didsbury	846	801	366 Dublin	1,322	1,425
Gleichen	458	514	367 Waverly	2,601	1,995

POPULATION OF CENSUS DIVISIONS OF ALBERTA CLASSIFIED BY MUNICIPALITIES FOR CENSUS YEARS, 1936 AND 1931—Continued

Census Divisions and Municipalities	Population		Census Divisions and Municipalities	Population	
	1936	1931		1936	1931
Division No. 8—Continued:			Division No. 10: Victoria	61,358	58,049
396 Haig	1,572	1,486	451 Merton	1,948	1,792
397 Lakeside	1,615	1,622	452 Grizzly Bear	1,553	1,396
398 Lamerton	2,600	2,205	453 Buffalo Coulee	1,554	1,292
399 Crown	4,105	3,689	454 Lakeview	1,548	1,525
426 Melrose	2,874	2,537	481 Wellington	2,124	1,888
427 Evergreen	2,788	2,592	482 Vermilion Valley	2,052	1,843
428 Waterglen	1,510	1,386	483 Melberta	2,019	1,992
429 Fertile Valley	4,512	3,856	484 Birch Lake	2,478	2,312
456 Parkland	2,858	2,971	485 Patricia	2,284	2,111
457 Lloyd George	2,973	2,791	486 Beaver Lake	3,168	3,028
458 Montgomery	3,553	3,329	511 Streamstown	2,641	2,254
459 Bigstone	3,452	2,807	512 Ethelwyn	3,302	3,035
Indian Reserves	1,199	1,141	513 Ukrainia	3,365	3,245
Cities:			514 Sobor	3,460	3,326
Red Deer	2,384	2,344	515 Norma	3,301	3,201
Wetaskiwin	2,058	2,125	516 The Pines	3,702	3,464
Towns:			545 Eagle	4,255	4,100
Big Valley	359	455	546 Wostok	4,733	4,584
Camrose	2,263	2,258	547 Leslie	3,666	3,725
Daysland	366	404	Towns:		
Innisfail	1,124	1,024	Lloydminster Pt.	498	539
Lacombe	1,414	1,259	Vegreville	1,672	1,659
Ponoka	1,045	836	Vermilion	1,291	1,270
Stettler	1,202	1,219	Villages:		
Villages:			Andrew	137	115
Alix	333	241	Bruderheim	253	280
Bashaw	423	385	Chipman	249	284
Bawlf	236	183	Derwent	144	107
Bittern Lake	32	47	Holden	273	230
Blackfalds	105	84	Innisfree	245	227
Botha	98	107	Islay	155	141
Clive	242	215	Kitscoty	254	280
Delburne	236	193	Lamont	470	507
Donalda	182	169	Lavoy	151	151
Edberg	110	131	Mannville	370	307
Elnora	149	153	Minburn	132	119
Erskine	164	174	Mundare	777	832
Ferintosh	120	161	Myrnam	159	131
Gadsby	139	144	Ranfurly	112	122
Halkirk	139	160	Ryley	268	236
Heisler	156	125	Two Hills	200	149
Millet	357	300	Willingdon	395	250
Mirror	585	534	Division No. 11: Edmonton	139,017	126,832
New Norway	177	142	487 Cornhill	2,936	2,753
Ohaton	46	69	488 Black Mud	4,005	3,797
Penhold	94	125	489 Liberty	4,993	4,662
Division No. 9: Rocky Mountain House	29,859	24,503	490 Pioneer	3,223	2,603
312 Waterloo	1,343	1,008	491 L.I.D.	1,226	907
341 Poplar Grove	3,003	2,540	517 Clover Bar	2,997	2,754
342 Raven	2,242	1,712	518 Strathcona	3,871	3,555
343 Prairie Creek	846	610	519 Spruce Grove	4,251	3,499
344 L.I.D.	74	48	520 Inga	3,096	2,851
371 Golden West	2,526	2,266	521 Tomahawk	1,705	1,432
400 Lorne	2,584	2,284	548 Sturgeon	4,911	4,302
401 Lochearn	2,913	2,221	549 Ray	3,523	3,558
403 L.I.D.	363	347	550 Woodford	2,960	2,408
430 Blindman	1,599	1,376	551 Morthen	2,763	2,224
431 Last West	1,736	1,074	Indian Reserves	954	336
432 L.I.D.	53	17	Cities:		
433 L.I.D.	164	24	Edmonton	85,774	79,197
434 L.I.D.	287	366	Towns:		
460 Columbia	1,646	1,104	Beverly	998	1,111
461 L.I.D.	1,127	712	Fort Saskatchewan	899	1,001
462 L.I.D.	307	101	Leduc	926	900
463 L.I.D.	90		Morinville	554	570
466 L.I.D.	1,790		St. Albert	811	825
Unorganized Parts	1,094	2,895	Stoney Plain	499	497
Indian Reserves	95	249	Tofield	544	497
Jasper	1,322	1,230	Villages:		
Villages:			Alberta Beach	57	38
Bentley	250	233	Hay Lakes	156	125
Bowden	270	233	Onoway	128	149
Eckville	159	169	Seba Beach	59	41
North Red Deer	359	318	Wabamun	198	164
Rimbey	313	304	Division No. 12: Edson	16,024	13,815
Rocky Mountain House	652	646	466 L.I.D. pt.	1,704	
Sylvan Lake	652	416	493 L.I.D.	26	4

POPULATION OF CENSUS DIVISIONS OF ALBERTA CLASSIFIED BY MUNICIPALITIES FOR CENSUS YEARS, 1936 AND 1931—Continued

Census Divisions and Municipalities	Population		Census Divisions and Municipalities	Population	
	1936	1931		1936	1931
Division No. 12—Continued:			Division No. 14—Continued:		
522 Rocky Rapids	1,728	1,148	726 L.I.D.	396	274
523 L.I.D.	87	13	727 L.I.D.	86	76
525 L.I.D.	24	24	728 T. 71-74, R. 22-24, W. 4, N. of Athabasca R.	26	.....
526 L.I.D.	136	116	729 L.I.D.	218	120
527 L.I.D.	490	244	Indian Reserves	21	.....
552 Pembina	2,431	2,041	Towns:		
553 L.I.D.	1,037	728	Athabasca	608	573
554 L.I.D.	870	685	Villages:		
555 L.I.D.	733	655	Barrhead	307	222
556 L.I.D.	240	274	Clyde	153	186
558 L.I.D.	59	57	Lac La Biche	410	313
582 Kitchener	2,478	2,340	Legal	394	350
583 L.I.D.	759	654	Smoky Lake	428	366
584 L.I.D.	574	543	Westlock	507	536
612 L.I.D.	472	341	Waskatenau	241	.....
Territorial Units 615, 585	18	12			
Unorganized Parts	199	1,133	Division No. 15: Clearwater	15,739	13,664
Towns:			613 L.I.D.	182	53
Edson	1,600	1,547	641 L.I.D.	804	543
Villages:			642 L.I.D.	22	9
Entwistle	150	189	705 L.I.D.	24	24
Mayerthorpe	209	159	706 L.I.D.	292	270
Division No. 13: Beaver R.	30,602	24,936	707 L.I.D.	209	141
541 L.I.D.	910	745	708 L.I.D.	84	25
542 Lincoln	1,249	933	709 L.I.D.	31	42
543 Laurier	3,141	2,646	710 L.I.D.	82	78
544 Champlain	2,399	2,257	730 L.I.D.	156	175
571 L.I.D.	267	65	731 L.I.D.	431	363
572 Bonnyville	1,859	1,419	732 L.I.D.	670	578
573 St. Vincent	2,951	2,554	733 L.I.D.	678	504
574 St. Lina	1,146	817	734 L.I.D.	112	149
575 Vilna	3,903	3,756	735 L.I.D.	164	147
601 L.I.D.	1,195	760	736 L.I.D.	56	41
602 L.I.D.	1,567	1,105	737 L.I.D.	61	23
603 L.I.D.	1,016	615	738 L.I.D.	621	414
604 L.I.D.	640	497	764 L.I.D.	1,420	1,333
605 Ashmont	1,814	1,616	765 L.I.D.	1,176	1,101
631 L.I.D.	951	677	766 L.I.D.	534	503
633 L.I.D.	44	82	767 L.I.D.	84	24
634 L.I.D.	255	186	794 L.I.D.	180	141
635 L.I.D.	915	568	795 L.I.D.	802	648
663 L.I.D.	17	.....	796 L.I.D.	2,791	2,408
664 L.I.D.	22	13	824 L.I.D.	18	10
666 L.I.D.	545	320	825 L.I.D.	251	215
695 L.I.D.	308	218	826 L.I.D.	764	891
Territorial Units 632, 661	5	5	855 L.I.D.	577	477
Indian Reserves	1,720	1,514	Territorial Units 622, 670, 676, 677, 678, 679 and un- organized parts	148	47
Villages:			Indian Reserves	963	909
Bellis	127	117	Towns:		
Bonnyville	433	362	Grouard	185	261
St. Paul	950	938	Peace River	883	864
Vilna	253	151	Villages:		
Division No. 14: Sturgeon	45,790	39,508	Falher	284	253
576 Smoky Lake	4,319	4,268	Division No. 16: Peace River	29,204	27,945
577 Unity	4,871	4,919	739 Grande Prairie	2,388	2,389
578 Opal	3,318	3,286	740 Bear Lake	2,815	2,683
579 Hazelwood	3,627	3,438	741 L.I.D.	1,599	1,566
580 Lockerbie	2,845	2,444	742 L.I.D.	466	460
581 Pershing	2,158	1,664	769 L.I.D.	661	514
606 L.I.D.	148	131	770 L.I.D.	981	871
607 L.I.D.	1,828	887	771 L.I.D.	1,850	1,730
608 Tawatinaw	2,223	8,147	772 L.I.D.	1,193	1,358
609 Pibroch	2,380	2,210	797 L.I.D.	658	549
610 Shoal Creek	2,553	2,095	800 L.I.D.	336	296
611 L.I.D.	909	406	801 L.I.D.	173	167
636 L.I.D.	540	217	827 L.I.D.	126	161
637 Cartier	1,413	1,273	828 L.I.D.	633	381
638 Nelson	1,701	1,486	829 Spirit River	1,890	1,800
639 L.I.D.	848	757	830 L.I.D.	878	738
640 L.I.D.	953	687	831 L.I.D.	520	487
665 L.I.D.	1,151	1,130	857 Peace	2,155	1,990
667 L.I.D.	1,622	1,342	858 Fairview	2,443	2,264
668 Grosmont	805	886	859 L.L.D.	705	519
669 L.I.D.	506	79	886 L.I.D.	497	508
696 L.I.D.	212	144	887 L.I.D.	744	525
697 L.I.D.	572	499	888 L.I.D.	597	581
698 L.I.D.	34	40			
699 L.I.D.	459	357			

POPULATION OF CENSUS DIVISIONS OF ALBERTA CLASSIFIED BY MUNICIPALITIES FOR CENSUS YEARS, 1936 AND 1931—Continued

Census Divisions and Municipalities	Population		Census Divisions and Municipalities	Population	
	1936	1931		1936	1931
Division No. 16—Continued:			Division No. 16—Continued:		
889 L.I.D.	574	425	Fairview	393	260
890 L.I.D.	58	34	Grimshaw	129	137
891 L.I.D.	114	77	Hythe	260	278
916 L.I.D.	237	231	Sexsmith	298	304
917 L.I.D.	338	298	Spirit River	234	232
Unorganized Parts	220	72	Wembley	173	183
Indian Reserves	83	1,068			
Towns:			Division No. 17: Athabasca	8,713	5,788
Grande Prairie	1,478	1,464	Remainder of the Province		
Villages:			comprising northern parts	5,465	4,312
Beaver Lodge	203	211	Indian Reserves	3,248	1,476
Clairmont	104	110			

Grande Prairie	153	90	63	51	29	22	5	2	2	2	22	18	5	59
Hanna	115	58	57	31	13	18	2	2	2	2	11	15	3	28
High River	111	59	52	38	20	18	3	2	2	2	15	15	3	27
Innisfail	158	76	82	46	27	19	3	2	2	2	24	17	1	34
Lacombe	81	43	38	31	19	12	3	2	2	2	16	8	1	27
Macleod	37	15	22	20	13	7	1	2	2	2	13	5	1	20
Magrath	18	8	10	5	4	1	1	1	1	1	3	1	1	17
Raymond	27	10	17	9	4	5	1	1	1	1	3	2	1	15
Stettler	116	55	61	43	30	13	1	2	2	2	28	11	3	50
Taber	31	20	11	1	1	1	1	1	1	1	1	1	1	23
Vegreville	189	92	97	56	32	24	4	3	3	3	27	17	3	50
Vermilion	129	59	70	23	15	8	2	4	4	4	13	4	1	51
Wainwright	61	27	34	25	15	10	2	2	2	2	13	7	5	41

TABLE 2.—BIRTHS (EXCLUSIVE OF STILLBIRTHS) BY MONTHS, CLASSIFIED AS RURAL AND URBAN, BY DIVISIONS FOR THE PROVINCE OF ALBERTA, 1936

MONTHS	Total	MONTHS											
		January	February	March	April	May	June	July	August	September	October	November	December
ALBERTA	15786	1315	1283	1474	1400	1459	1293	1369	1363	1299	1232	1130	1169
Rural.....	8576	734	748	791	795	800	659	716	742	710	659	608	614
Urban.....	7210	581	535	683	605	659	634	653	621	589	573	522	555
DIVISION No. 1—MEDICINE HAT	533	50	47	45	35	48	46	49	36	36	42	55	44
Rural.....	176	14	19	22	14	14	12	20	10	9	11	19	12
Urban.....	357	36	28	23	21	34	34	29	26	27	31	36	32
City of Medicine Hat.....	326	28	27	17	19	33	31	27	26	26	27	34	31
Town of Taber.....	31	8	1	6	2	1	3	2	...	1	4	2	1
DIVISION No. 2—MACLEOD	1385	105	99	122	144	128	117	128	118	126	91	90	117
Rural.....	441	34	43	42	38	38	38	39	41	39	26	34	29
Urban.....	944	71	56	80	106	90	79	89	77	87	65	56	88
City of Lethbridge.....	580	41	32	52	50	53	61	62	48	53	41	30	57
Town of Blairmore.....	24	2	1	2	4	3	8	3	2	1	1	3	2
Cardston.....	156	10	11	10	25	20	8	11	7	18	10	14	12
Clareholm.....	54	3	3	4	7	4	7	7	4	6	5	5	6
Coleman.....	48	5	4	2	7	4	4	1	6	3	4	3	5
Macleod.....	37	5	2	5	10	...	4	4	1	5	2	1	2
Magrath.....	18	2	2	2	...	4	2	3	1	2	2	...	2
Raymond.....	27	3	3	3	3	2	...	1	4	2	1	1	4
DIVISION No. 3—BOW	253	18	22	18	21	24	26	18	25	24	23	16	18
Rural.....	253	18	22	18	21	24	26	18	25	24	23	16	18
DIVISION No. 4—NANTON	316	22	26	39	33	15	22	27	28	39	29	15	21
Rural.....	205	13	13	26	18	10	13	18	17	28	22	12	15
Urban.....	111	9	13	13	15	5	9	9	11	11	7	3	6
Town of High River.....	111	9	13	13	15	5	9	9	11	11	7	3	6
DIVISION No. 5—ACADIA	220	23	27	26	19	12	18	18	19	13	15	12	18
Rural.....	105	15	11	11	10	4	7	6	12	7	7	7	8
Urban.....	115	8	16	15	9	8	11	12	7	6	8	5	10
Town of Hanna.....	115	8	16	15	9	8	11	12	7	6	8	5	10

DIVISION No. 6—CALGARY	2589	204	215	240	206	250	234	239	214	208	197	192	190
Rural	651	49	60	59	59	54	62	73	51	49	50	45	49
Urban	1938	155	190	147	196	172	166	163	163	159	147	147	141
City of Calgary	1623	131	129	163	123	165	142	142	142	128	118	124	116
Drumheller	230	19	14	19	19	25	22	19	14	23	21	16	19
Town of Olds	85	5	12	8	5	6	8	5	7	8	8	7	6
DIVISION No. 7—BATTLE RIVER	696	53	54	67	66	79	53	51	70	58	59	49	37
Rural	635	52	51	65	60	67	49	47	62	53	49	46	34
Urban	61	1	3	2	6	12	4	4	8	5	10	3	3
Town of Wainwright	61	1	3	2	6	12	4	4	8	5	10	3	3
DIVISION No. 8—RED DEER	1357	132	93	141	114	109	99	117	119	117	127	98	91
Rural	557	64	43	61	51	53	34	41	41	47	52	35	35
Urban	800	68	50	80	63	56	65	76	78	70	75	63	56
City of Red Deer	124	13	5	19	7	4	16	11	9	12	17	6	5
Wetaskiwin	169	16	15	15	8	12	10	18	23	15	16	8	13
Town of Camrose	123	12	8	6	12	6	13	5	12	7	10	13	19
Innisfail	158	8	5	19	10	18	9	15	17	14	16	19	8
Lacombe	81	9	3	8	9	7	6	8	5	7	8	7	4
Ponoka	29	1	3	2	4	3	3	5	2	3	2	2	2
Stettler	116	9	11	11	13	9	8	14	10	12	6	8	5
DIVISION No. 9—ROCKY MOUNTAIN HOUSE	459	35	30	40	46	34	39	35	50	33	42	27	48
Rural	459	35	30	40	46	34	39	35	50	33	42	27	48
DIVISION No. 10—VICTORIA	1339	82	110	124	116	134	110	94	125	123	108	116	97
Rural	1021	66	91	95	97	93	80	74	93	95	75	87	75
Urban	318	16	19	29	19	41	30	20	32	28	33	29	22
Town of Vegreville	189	10	11	20	13	20	22	11	16	14	19	20	13
Vermillion	129	6	8	9	6	21	8	9	16	14	14	9	9
DIVISION No. 11—EDMONTON	3025	262	244	293	272	270	266	282	236	222	227	216	235
Rural	708	59	68	64	71	75	53	65	47	52	47	52	55
Urban	2317	203	176	229	201	195	213	217	189	170	180	164	180
City of Edmonton	2317	203	176	229	201	195	213	217	189	170	180	164	180
DIVISION No. 12—EDSON	315	17	29	24	29	33	21	35	35	27	15	22	28
Rural	219	12	23	17	24	23	17	27	22	13	10	14	17
Urban	96	5	6	7	5	10	4	8	13	14	5	8	11
Town of Edson	96	5	6	7	5	10	4	8	13	14	5	8	11
DIVISION No. 13—BEAVER RIVER	894	74	85	71	81	94	54	81	82	73	87	42	70
Rural	894	74	85	71	81	94	54	81	82	73	87	42	70
DIVISION No. 14—STURGEON	1059	100	103	88	99	103	85	84	86	97	77	75	62
Rural	1059	100	103	88	99	103	85	84	86	97	77	75	62
DIVISION No. 15—CLEARWATER	442	50	35	47	37	38	29	29	38	38	31	41	29
Rural	442	50	35	47	37	38	29	29	38	38	31	41	29

TABLE 2.—BIRTHS (EXCLUSIVE OF STILLBIRTHS) BY MONTHS, CLASSIFIED AS RURAL AND URBAN, BY DIVISIONS FOR THE PROVINCE OF ALBERTA, 1936—Continued

	Total	MONTHS											
		January	February	March	April	May	June	July	August	September	October	November	December
DIVISION No. 16—PEACE RIVER	659	64	48	66	63	58	58	61	60	45	45	46	45
Rural	506	55	35	51	50	46	45	38	43	33	33	38	33
Urban	153	9	13	15	13	12	13	23	17	12	12	8	12
Town of Grande Prairie	153	9	13	15	13	12	13	23	17	12	12	8	12
DIVISION No. 17—ATHABASCA	245	24	16	23	19	30	16	21	22	20	17	18	19
Rural	245	24	16	23	19	30	16	21	22	20	17	18	19

TABLE 3.—BIRTHS (EXCLUSIVE OF STILLBIRTHS) CLASSIFIED AS LEGITIMATE OR ILLEGITIMATE FOR THE PROVINCE AND IN CITIES OF 5,000 POPULATION AND OVER, 1936

Province and Cities	Total Births			Legitimate			Illegitimate		
	Total	Male	Female	Total	Male	Female	Total	Male	Female
TOTAL FOR THE PROVINCE	15786	8081	7705	15179	7777	7402	607	304	303
Calgary	1623	824	799	1522	772	750	101	52	49
CITIES:									
Edmonton	2317	1175	1142	2086	1061	1025	231	114	117
Lethbridge	580	297	283	570	291	279	10	6	4
Medicine Hat	326	181	145	315	177	138	11	4	7

TABLE 4.—PLURAL BIRTHS CLASSIFIED TO SHOW THE NUMBER OF CHILDREN BORN ALIVE AND STILLBORN BY SEX, IN THE PROVINCE OF ALBERTA, 1936

Classification of Births	Total
CASES OF TWINS	189
Two males (both living)	60
One male and one female (both living)	59
Two females (both living)	48
One male living and one male stillborn	6
One male living and one female stillborn	3
One male stillborn and one female living	5
One female living and one female stillborn	6
Two males (both stillborn)	2
CASES OF TRIPLETS	5
Three males (all living)	2
Two males and one female (all living)	1
One male and two females (all living)	1
One male and one female living and one male stillborn	1
Total multiple confinements	Number 194
Male	214
Female	179
Total single live births	Number 15418
Male	7883
Female	7535
Total single stillbirths	Number 351
Male	196
Female	155
Total confinements	15963

NOTE.—Included with single live births is one twin which was born in Alberta in November, 1936. The other twin was born in Saskatchewan in January, 1937.

Children born to married mothers																																			
15179	3156	1353	1691	153	921	115	58	2	15	148	219	275	72	2263	6	1	149	19	695	65	19	60	21	509	572	96	257	50	339	51	6	1778	26	9	
7777	1612	720	860	68	490	61	27	2	11	75	105	144	38	1140	1	1	71	7	345	28	8	29	11	274	304	46	136	20	178	26	5	909	22	4	
7402	1544	633	831	85	431	54	31	...	4	73	114	131	34	1123	6	...	78	12	350	37	11	31	10	235	268	50	121	30	161	25	1	869	14	5	
Children born to unmarried mothers																																			
607	103	55	56	3	29	4	1	...	1	5	5	7	4	62	...	4	...	111	4	6	20	18	1	9	3	16	1	77	2
304	58	28	29	3	12	2	1	1	4	3	3	28	...	3	...	58	3	2	8	7	1	2	2	6	1	40	1
303	45	27	27	...	17	2	1	...	...	4	1	4	1	34	...	1	...	53	...	...	1	4	12	11	...	7	1	10	...	...	37	1	...	...
Children born to all mothers																																			
15786	3259	1408	1747	156	950	119	59	2	16	153	224	282	76	2325	6	1	153	19	806	65	19	64	27	529	590	97	266	53	355	52	6	1855	38	9	
8081	1670	748	889	71	502	63	27	2	12	76	109	147	41	1168	1	1	72	7	403	28	8	32	13	282	311	47	138	22	184	27	5	949	23	4	
7705	1589	660	858	85	448	56	32	...	4	77	115	135	35	1157	6	...	81	12	403	37	11	52	14	247	279	50	128	31	171	25	1	906	15	5	

TABLE 14.—TOTAL DEATHS (EXCLUSIVE OF STILLBIRTHS) AND DEATHS IN INSTITUTIONS OF CHILDREN UNDER ONE YEAR OF AGE, CLASSIFIED ACCORDING TO RESIDENCE OF DECEDENTS, IN CITIES OF 5,000 POPULATION AND OVER, IN THE PROVINCE OF ALBERTA, 1936

Cities	All Deaths under one year						Deaths in Institutions						Deaths elsewhere than in Institutions																
	Residents			Non-resident in city where death occurred and			Residents			Non-resident in city where death occurred and			Residents			Non-resident in city where death occurred and													
	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female											
Calgary	86	48	38	68	36	32	16	10	6	3	3	65	34	31	47	22	25	15	9	6	3	21	14	7	20	13	7	1	1
Edmonton	94	48	46	62	29	33	32	19	13	78	41	37	46	22	24	22	19	13	16	7	9	16	7	9	7	9	7	9	
Lethbridge	25	13	12	13	5	8	12	8	4	23	12	11	11	4	7	12	8	4	2	1	1	2	1	1	2	1	1	2	2
Medicine Hat	17	8	9	12	4	8	5	4	1	13	6	7	10	4	6	3	2	1	4	2	2	2	4	2	2	2	2	2	2

TABLE 15.—TOTAL DEATHS (EXCLUSIVE OF STILLBIRTHS) AND DEATHS IN INSTITUTIONS, OF CHILDREN UNDER ONE YEAR OF AGE, SHOWING THE NUMBER NON-RESIDENT IN THE PROVINCE OF ALBERTA, 1936

	All Deaths under one year						In Institutions					
	Total			Non-resident in Province			Total			Non-resident in Province		
	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female
Total for the Province	940	530	410	9	7	2	386	205	181	9	7	2

TABLE 16.—POPULATION, BIRTHS, DEATHS, RATES AND SELECTED CAUSES OF DEATH (EXCLUDING INDIANS), BY MUNICIPALITIES (EXCLUDING CITIES) TRANSFERRED TO REGULAR RESIDENCE, 1936

DIVISION No. 1—MEDICINE HAT

Municipality No.	Population, 1936	Number of Births	Birth Rate per 1,000	Number of Deaths	Death Rate per 1,000	Number of Deaths (under 1 year)	Infant Mortality Rate (per 1,000 births)	Number of Stillbirths	Typhoid and Paratyphoid	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Acute Poliomyelitis	Meningococcal Meningitis	Pulmonary Tuberculosis	Tuberculosis (other forms)	Cancer (all forms)	Diabetes	Pernicious Anaemia	Apoplexy, Cerebral Haemorrhage & Thrombosis	Heart Diseases (all forms)	Diseases of the Arteries	Pneumonia (all forms)	Diarrhoea and Enteritis (under 2 years of age)	Diarrhoea and Enteritis (over 2 years of age)	Appendicitis	Nephritis (acute and chronic)	Puerperal State	Violent Deaths (suicides and homicides excepted)																		
1	93	2	22	4	44																									1																			
2	162	3	19																																														
3	172	3	17																																														
4	555	2	4	5	9															2																													
5	1251	19	15	3	2			1																							1																		
6	975	17	17	7	7	1	59																								1																		
31	64																														1																		
32	592	17	29	4	7			1																																									
33	533	9	17	4	8																																												
34	958	34	35	12	13	1	29																								1																		
35	430	6	14	1	2																																												
36	1614	60	37	9	6	2	33																																										
61	821	18	12	8	10	3	67																																										
62	716	11	15																																														
63	625	4	6	2	3																																												
64	1148	13	11	5	4	2	154																																										
65	1190	16	13	8	7	4	250	1																																									
66	3879	88	23	15	4	3	34	2																																									
91	1446	37	26	9	6	3	81	2																																									
92	974	20	21	5	5			1																																									
93	890	20	22	5	6																																												
94	1009	32	32	7	7	1	31																																										
Total	20097	431	21.4	113	5.6	20	46.4	8			1			7			1	1	13	2	1	1	9	8	10	1	8	6		7																			
Death Rate per 100,000 Population																																																	
											5				35			5	5	65	10	5	5	45	40	50	5	40	30			35																	

TABLE 16.—POPULATION, BIRTHS, DEATHS, RATES AND SELECTED CAUSES OF DEATH (EXCLUDING INDIANS), BY MUNICIPALITIES (EXCLUDING CITIES) TRANSFERRED TO REGULAR RESIDENCE, 1936—Continued

DIVISION No. 2—MACLEOD

Municipality No.	Population, 1936	Number of Births	Birth Rate per 1,000	Population	Number of Deaths	Death Rate per 1,000	Number of Deaths (under 1 year)	Infant Mortality Rate (per 1,000 births)	Number of Stillbirths	Typhoid and Paratyphoid	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Acute Poliomyelitis	Meningococcal Meningitis	Pulmonary Tuberculosis	Tuberculosis (other forms)	Cancer (all forms)	Diabetes	Pernicious Anaemia	Apoplexy, Cerebral Haemorrhage & Thrombosis	Heart Diseases (all forms)	Diseases of the Arteries	Pneumonia (all forms)	Diarrhoea and Enteritis (under 2 years of age)	Diarrhoea and Enteritis (over 2 years of age)	Appendicitis	Nephritis (acute and chronic)	Puerperal State	Violent Deaths (suicides and homicides excepted)	
7	330	6	18	1	3	9	2	63	1	1								1		2			2	6	1	1						1	1
8	1394	32	23	5	4	2	5	50	1											1			2	1	1	1						1	1
9	3245	101	31	23	7	2	4	43	2											1			1	1	1	1						3	2
10	1613	33	20	6	4	2	6	43	2											1			1	1	1	1						2	2
37	4668	138	30	32	7	4	4	43	2											1			1	1	1	1						2	2
38	2393	92	38	17	7	4	4	43	2											1			1	1	1	1						2	2
39	2867	42	15	19	7	2	4	43	2											1			1	1	1	1						2	2
40	606	11	18	4	7	1	1	91	3											1			1	1	1	1						2	2
67	4890	98	20	23	5	5	4	41	2											1			1	1	1	1						1	3
68	3487	49	14	24	7	4	4	82	2											1			1	1	1	1						1	5
69	2564	51	20	33	13	4	4	78	1											1			2	2	2	2						1	1
70	1607	23	14	10	6	6	6	46	4											2			2	2	2	2						1	15
71	8426	109	13	69	8	5	4	67	4											3			2	2	2	2						2	2
99	3116	45	14	41	13	3	3	67	4											2			2	2	2	2						2	2
100	571	3	5	1	2	2	2	67	4											1			1	1	1	1						2	2
101	173	1	6	1	6	6	6	67	4											1			1	1	1	1						2	2
Total	41950	834	19.9	309	7.4	39	46.8	17	17	3	7	1	2	1	6	14	14	6	1	25	4	1	11	51	19	30	4	7	10	8	32	76	
										Death Rate per 100,000 Population																							
										7										17 24 19													

TABLE 16.—POPULATION, BIRTHS, DEATHS, RATES AND SELECTED CAUSES OF DEATH (EXCLUDING INDIANS), BY MUNICIPALITIES (EXCLUDING CITIES) TRANSFERRED TO REGULAR RESIDENCE, 1936—Continued

DIVISION No. 5—ACADIA

Municipality No.	Population, 1936	Number of Births	Birth Rate per 1,000 Population	Number of Deaths	Death Rate per 1,000 Population	Number of Deaths (under 1 year)	Infant Mortality Rate (per 1,000 births)	Number of Stillbirths	Typhoid and Paratyphoid	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Acute Poliomyelitis	Meningococcal Meningitis	Pulmonary Tuberculosis	Tuberculosis (other forms)	Cancer (all forms)	Diabetes	Periculous Anaemia	Apoplexy, Cerebral Haemorrhage & Thrombosis	Heart Diseases (all forms)	Diseases of the Arteries	Pneumonia (all forms)	Diarthra and Enteritis (under 2 years of age)	Diarthra and Enteritis (over 2 years of age)	Appendicitis	Nephritis (acute and chronic)	Puerperal State	Violent Deaths (suicides and homicides excepted)				
122 Pt.	154	1	6	1	6	9	9	1															1	1	3	1	1	1	1	1	1				
214	1793	25	14	17	9	4	4	1															2	1	1	1	1	1	1	1	1				
241	826	9	11	3	3	4	4																3	1	1	1	1	1	1	1	1	1			
242	1605	22	14	10	6	6	6																1	1	1	1	1	1	1	1	1	1	1		
243	496	4	8	2	4	4	4																1	1	1	1	1	1	1	1	1	1	1		
271	853	8	9	3	3	4	4																1	1	1	1	1	1	1	1	1	1	1		
272	790	19	24	2	3	3	3																1	1	1	1	1	1	1	1	1	1	1	1	
273	666	11	17	5	8	8	8																1	1	1	1	1	1	1	1	1	1	1	1	
274	575	13	23	4	7	7	7																1	1	1	1	1	1	1	1	1	1	1	1	
275	1097	20	18	2	2	2	2																1	1	1	1	1	1	1	1	1	1	1	1	
276 Pt.	2436	23	16	12	8	8	8																1	1	1	1	1	1	1	1	1	1	1	1	1
277	1436	23	16	12	8	8	8	2															2	1	1	1	1	1	1	1	1	1	1	1	1
301	534	3	6	4	7	7	7																1	1	1	1	1	1	1	1	1	1	1	1	1
302	678	2	3	2	3	3	3																1	1	1	1	1	1	1	1	1	1	1	1	1
303	817	11	13	2	2	2	2																1	1	1	1	1	1	1	1	1	1	1	1	1
304	539	11	20	1	2	2	2																1	1	1	1	1	1	1	1	1	1	1	1	1
305 Pt.	2691	46	17	22	8	8	8	3															5	5	2	2	2	2	2	2	2	2	2	2	2
306	1884	33	18	10	5	5	5	2															2	2	2	2	2	2	2	2	2	2	2	2	2
307	1525	23	15	9	6	6	6	1															1	1	1	1	1	1	1	1	1	1	1	1	1
Total	21395	284	15.0	111	5.9	8	28.1	8	1	1	1	1	1	4	21	5	5	5	58	5	16	3	100	69	37	5	5	16	16	5	21	5	21		

Death Rate per 100,000 Population

All rates worked with population of 18,959 (which is less M.D. 276).

TABLE 16.—POPULATION, BIRTHS, DEATHS, RATES AND SELECTED CAUSES OF DEATH (EXCLUDING INDIANS), BY MUNICIPALITIES (EXCLUDING CITIES) TRANSFERRED TO REGULAR RESIDENCE, 1936—Continued

DIVISION No. 13—BEAVER RIVER

Municipality No.	Population, 1936	Number of Births	Birth Rate per 1,000	Population	Number of Deaths	Death Rate per 1,000	Number of Deaths (under 1 year)	Infant Mortality Rate (per 1,000 births)	Number of Stillbirths	Typhoid and Paratyphoid	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Acute Poliomyelitis	Meningococcal Meningitis	Pulmonary Tuberculosis	Tuberculosis (other forms)	Cancer (all forms)	Diabetes	Pernicious Anaemia	Apoplexy, Cerebral Hemorrhage & Thrombosis	Heart Diseases (all forms)	Diseases of the Arteries	Pneumonia (all forms)	Diarrhoea and Enteritis (under 2 years of age)	Diarrhoea and Enteritis (over 2 years of age)	Appendicitis	Nephritis (acute and chronic)	Puerperal State	Violent Deaths (suicides and homicides excepted)	
541	910	15	16	4	4	4	3	94	3	3	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
542	1249	32	26	16	16	13	6	63	4	3	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
543	4091	96	23	21	5	6	6	100	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
544	2399	60	25	20	8	6	6	100	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
571	267	2	7	2	7	2	7	2	7	2	7	2	7	2	7	2	7	2	7	2	7	2	7	2	7	2	7	2	7	2	7	2	7
572	2291	109	48	14	6	3	29	4	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
573	2951	86	29	23	8	5	58	2	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
574	1146	27	23	5	4	1	37	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
575	4283	114	27	7	7	7	61	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
601	1195	29	24	8	7	1	34	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
602	1567	40	26	8	5	1	25	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
603	1016	28	27	12	12	4	143	2	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
604	640	30	47	10	16	3	100	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
605	1814	35	19	7	4	6	6	6	6	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
631	951	26	27	6	6	6	6	6	6	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
632	3	3	44	3	3	3	3	3	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
633	44	44	44	44	44	44	44	44	44	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
634	255	1	4	1	4	1	4	1	4	1	4	1	4	1	4	1	4	1	4	1	4	1	4	1	4	1	4	1	4	1	4	1	4
635	915	16	17	4	4	2	125	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
661	661	2	2	2	2	2	2	2	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
663	17	17	17	17	17	17	17	17	17	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
664	22	22	22	22	22	22	22	22	22	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
666	545	10	18	4	7	3	300	4	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
695	308	5	16	4	7	3	300	4	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Total	28881	761	26.3	194	6.7	45	59.1	21	21	1	1	3	10	3	17	4	14	7	45	7	2	1	4	19	7	16	6	3	6	5	7	14	
Death Rate per 100,000 Population																												48					

TABLE 16.—POPULATION, BIRTHS, DEATHS, RATES AND SELECTED CAUSES OF DEATH (EXCLUDING INDIANS), BY CITIES, 1936—TRANSFERRED TO REGULAR RESIDENCE

Cities	CITIES																																										
	Population, 1936	Number of Births	Birth Rate per 1,000 Population	Number of Deaths	Death Rate per 1,000 Population	Number of Deaths (under 1 year)	Infant Mortality Rate (per 1,000 births)	Number of Stillbirths	Typhoid and Paratyphoid	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Acute Poliomyelitis	Meningococcal Meningitis	Pulmonary Tuberculosis	Tuberculosis (other forms)	Cancer (all forms)	Diabetes	Pernicious Anaemia	Apoplexy, Cerebral Haemorrhage & Thrombosis	Heart Diseases (all forms)	Diseases of the Arteries	Pneumonia (all forms)	Diarrhoea and Enteritis (under 2 years of age)	Diarrhoea and Enteritis (over 2 years of age)	Appendicitis	Nephritis (acute and chronic)	Fuereperal State	Violent Deaths (suicides and homicides excepted)												
Edmonton	85774	1446	16.9	703	8.2	67	46.3	47	4	1	4	10	1	35	1	16	6	94	8	3	28	118	53	42	8	1	11	29	6	45													
Death Rate per 100,000 Population								5		1		1		41		19		7		110		9		33		138		62		49		9		1		13		34		7		52	
Calgary	83407	1272	15.2	746	8.9	72	56.6	34	3	1	4	4	...	33	...	2	18	2	112	10	8	17	152	69	42	6	...	11	30	5	29												
Death Rate per 100,000 Population								4		1		5		40		2		2		134		12		20		182		83		50		7		13		36		6		35			
Lethbridge	13523	238	17.6	115	8.5	13	54.6	5	...	...	1	...	...	4	...	...	2	...	11	7	1	4	22	8	5	3	1	2	4	1	4						
Death Rate per 100,000 Population								...		7		...		30		15		81		52		7		163		59		37		22		7		15		30		7		30			
Medicine Hat	9592	121	12.6	101	10.5	10	82.6	6	...	1	...	...	...	5	...	...	3	1	12	1	...	4	20	7	8	1	...	3	3	2	7							
Death Rate per 100,000 Population								10			52		31		10		125		10		209		73		83		10		31		31		21		73					

Red Deer	2384	41	17.2	25	10.5	5	122.0	4	3	1	1	4	2	1	1	1
Death Rate per 100,000 Population									126	42	42	168	84	42	42	42

Drumheller	2912	76	26.1	33	11.3	6	78.9	5	1	2	1	1	2	2	2	1
Death Rate per 100,000 Population									137	69	34	34	69	69	69	34

Wetaskiwin	2058	38	18.5	22	10.7	2	52.6	2	2	2	1	4	1	1	1	2
Death Rate per 100,000 Population								97	97	49	49	194	49	49	49	97

48	(a) Of the uterus	Female	30	1	3	5	4	2	2	2	5	3	1	2
	(b) Of the cervix uteri	Female	20	6	2	1	2	1	3	1	2	1	1	1
49	Cancer of other female genital organs	Female	15	1	2	1	3	3	1	3	2	2	2	4
50	Cancer of the breast	Male	61	5	7	7	3	5	4	6	4	4	5	4
		Female	16	2	2	2	1	1	2	4	1	1	1	1
51	(a) Of the bladder	Male	9	3	2	2	1	1	1	1	1	1	1	4
	(b) Of the kidney	Male	20	2	2	2	1	2	1	2	1	2	3	4
	(c) Of the prostate gland	Male	1	1	1	1	1	1	1	1	1	1	1	1
	(d) Of the testicles and annexa	Male	2	1	1	1	1	1	1	1	1	1	1	1
	(e) Of other male genito-urinary organs	Male	13	1	2	3	1	1	1	2	1	1	2	2
52	Cancer of the skin	Female	2	1	1	1	1	1	1	1	1	1	1	1
		Male	2	1	1	1	1	1	1	1	1	1	1	1
53	(a) Of the eye and orbit	Female	1	1	1	1	1	1	1	1	1	1	1	1
	(b) Of the circulatory system	Female	5	1	1	1	1	1	1	1	1	1	1	1
	(c) Of the glandular system	Female	6	1	1	1	1	1	1	1	1	1	1	1
	(d) Of the female urinary organs	Female	9	2	2	2	1	1	1	1	1	1	1	2
	(e) Of the bones and joints	Female	7	1	1	1	1	1	3	1	1	1	1	2
	(f) Of the brain	Female	3	1	2	1	1	2	1	1	1	2	1	1
	(g) Of the spine and spinal cord	Female	2	1	1	1	1	1	1	1	1	1	1	1
	(h) Of the neck	Female	1	1	1	1	1	1	1	1	1	1	1	1
	(i) Of the abdomen	Female	2	1	1	1	1	1	1	1	1	1	1	1
	(j) Of other specified organs	Female	4	1	1	1	1	2	1	1	1	1	1	1
	(k) Multiple cancer	Female	3	1	1	1	1	1	1	1	1	1	1	1
	(m) Of unspecified or unknown location	Female	1	1	1	1	1	1	1	1	1	1	1	1
54	Non-malignant tumours	Total	13	5	1	2	3	4	3	3	2	1	1	2
	(a) Of the ovary	Female	31	1	1	2	3	1	1	1	1	1	1	3
	(b) Of the uterus	Female	6	1	1	1	1	1	1	1	1	1	1	1
	(c) Of other female genital organs	Female	14	1	2	2	1	3	1	2	1	1	1	2

TABLE 18.—CAUSES OF DEATH FOR EACH SEX BY MONTHS, FOR THE WHOLE PROVINCE, 1936—Continued

CAUSES OF DEATH	Total	MONTHS											
		January	February	March	April	May	June	July	August	September	October	November	December
(d) Of the brain	4	1	1	2	1	1	1	1	1	1	1	1	1
(e) Of the thyroid gland	2	1	1	1	1	1	1	1	1	1	1	1	1
(f) Of the prostate gland	4	1	1	1	1	1	1	1	1	1	1	1	1
(g) Of other or unspecified sites	7	2	1	1	2	1	1	1	1	1	1	1	1
55 (d) Tumours of the brain, nature not specified	5	2	1	1	1	1	1	2	1	1	1	1	1
(g) Tumours of other or unspecified sites, nature not specified	3	1	1	1	1	1	1	1	1	1	1	1	1
	1	1	1	1	1	1	1	1	1	1	1	1	1
	1	1	1	1	1	1	1	1	1	1	1	1	1
CLASS III.—RHEUMATIC DISEASES, DISEASES OF NUTRITION AND OF THE ENDOCRINE GLANDS AND OTHER GENERAL DISEASES	199	13	22	12	17	16	27	17	12	13	15	14	21
Male	92	6	11	5	7	9	11	7	5	7	5	6	13
Female	107	7	11	7	10	7	16	10	7	6	10	8	8
56 Acute rheumatic fever	33	3	3	3	4	3	3	3	3	2	2	2	4
57 Chronic rheumatism, osteo-arthritis	28	2	2	2	3	3	3	3	1	4	2	2	3
59 Diabetes mellitus	3	1	1	1	1	1	1	1	1	1	1	1	1
60 Scurvy	3	1	1	1	1	1	1	1	1	1	1	1	1
63 Rickets	34	2	5	3	3	4	4	2	2	3	2	2	5
64 Osteomalacia	36	2	5	3	1	3	6	4	5	3	2	2	2
65 Diseases of the pituitary gland	1	1	1	1	1	1	1	1	1	1	1	1	1
66 Diseases of the thyroid and parathyroid glands	1	1	1	1	1	1	1	1	1	1	1	1	1
(a) Simple goitre	6	2	3	2	2	2	7	1	1	1	1	3	4
Male	28	2	3	1	2	3	7	1	1	1	1	3	4
Female	4	1	1	1	1	1	2	1	1	1	1	1	1

TABLE 18.—CAUSES OF DEATH FOR EACH SEX BY MONTHS, FOR THE WHOLE PROVINCE, 1936—Continued

CAUSES OF DEATH	Total	MONTHS											
		January	February	March	April	May	June	July	August	September	October	November	December
CLASS VI—DISEASES OF THE NERVOUS SYSTEM AND OF THE ORGANS OF SPECIAL SENSE	Total	17	25	18	33	26	15	22	23	20	23	24	24
	Male	13	15	9	23	19	7	16	15	12	18	18	16
	Female	4	10	9	10	7	8	6	8	8	5	6	8
78 Encephalitis (non-epidemic)	Male		1			1	1	2			2		1
	Female				1								1
79 Simple meningitis	Male	1	1			2		2					
	Female	1	1			2		1	1			1	1
80 Progressive locomotor ataxia (tabes dorsalis)	Male				1		1	2					
	Female				1		1						
81 Other diseases of the spinal cord	Male		1		2								
	Female												
82 Cerebral haemorrhage, cerebral embolism and thrombosis	Total	5	9	6	7	3	3	4	4	4	10	8	7
	Male	2	3	2	3	2	3	3	6	4	2	3	2
	Female	3	6	4	4	1	3	1	4	4	8	5	5
(a) Cerebral haemorrhage	Male	5	3	2	3	2	3	3	3	3	4	3	2
	Female	2	9	6	6	3	3	3	4	4	9	7	7
(b) Cerebral embolism and thrombosis	Male	1	2	2	2	1	3	2	6	3	1	2	1
	Female	1									1		
(c) Softening of the brain	Male												
	Female												
(d) Hemiplegia and other paralysis, cause not specified	Male				1			1					
	Female		1		1			1				1	
83 General paralysis of the insane	Male	1			1	2		1	1	1		1	1
	Female											3	1
84 (a) Dementia praecox	Male							2					
	Female				2								
(b) Other psychoses	Male			1									
	Female												
85 Epilepsy	Male			1		2		1		1			
	Female			2				2		2			
86 Convulsions (under 5 years of age)	Male		1	2	2	2	1	1	1	2	1	1	1
	Female		1	2	5	2	1	1	1	1	1	1	1
87 Other diseases of the nervous system	Male	4	1	1	1	3		2	2	2	2	2	2
	Female	4	1	4	1	1		1	1	1	1	1	1
(a) Chorea	Male							2	1	1			
	Female							1					

TABLE 18.—CAUSES OF DEATH FOR EACH SEX BY MONTHS, FOR THE WHOLE PROVINCE, 1936—Continued

CAUSES OF DEATH	Total	MONTHS												
		January	February	March	April	May	June	July	August	September	October	November	December	
120 (a) Diarrhoea and enteritis (2 years and over)	10	1	1	2	1	3	1	2	3	1	1	1	1	1
(b) Ulceration of the intestines (2 years and over)	14	1	1	1	1	1	1	1	1	1	1	1	1	1
121 Appendicitis	8	2	1	1	1	1	1	1	1	1	1	1	1	1
122 (a) Hernia	100	10	6	9	8	13	10	10	7	9	7	4	4	7
(b) Intestinal obstruction	55	8	6	6	6	2	5	4	4	3	8	1	1	2
123 Other diseases of the intestines	25	1	2	4	4	2	1	1	3	3	4	2	2	2
124 (a) Cirrhosis of the liver, specified as alcoholic	18	1	1	3	2	1	1	1	1	3	1	1	1	3
(b) Cirrhosis of the liver, not specified as alcoholic	22	3	5	1	1	2	1	2	2	1	2	2	1	3
125 (a) Yellow atrophy of the liver	12	1	1	1	1	1	1	2	3	2	1	2	1	2
(b) Other diseases of the liver	7	2	2	1	1	1	1	1	1	1	1	1	1	2
126 Biliary calculi	3	1	1	1	1	1	1	1	1	1	1	1	1	1
127 Other diseases of the gall-bladder and biliary passages	2	1	1	1	1	1	1	1	1	1	1	1	1	1
128 Diseases of the pancreas	13	2	2	1	2	2	1	1	1	1	1	1	1	3
129 Peritonitis, cause not specified	5	1	1	1	1	1	1	1	1	1	1	1	1	1
CLASS X.—DISEASES OF THE GENITO-URINARY SYSTEM	1	1	1	1	1	1	1	1	1	1	1	1	1	1
130 Acute nephritis (including unspecified, under 10 years of age)	4	1	1	1	1	1	1	1	1	1	1	1	1	1
131 Chronic nephritis	10	2	1	1	1	2	1	1	1	1	1	2	2	2
Total	291	31	27	23	25	31	22	29	21	17	22	20	23	23
Male	177	17	23	12	16	19	16	22	13	7	12	11	9	9
Female	114	14	4	11	9	12	6	7	8	10	10	9	14	14
Male	6	1	1	1	1	1	1	1	1	1	1	1	1	1
Female	82	10	12	6	6	11	6	7	8	4	3	6	3	6
Male	75	9	2	7	7	8	4	4	5	9	7	6	3	7
Female	7	1	1	1	1	1	1	1	1	1	1	1	1	1

TABLE 18.—CAUSES OF DEATH FOR EACH SEX BY MONTHS, FOR THE WHOLE PROVINCE, 1936—Continued

CAUSES OF DEATH	Total	MONTHS												
		January	February	March	April	May	June	July	August	September	October	November	December	
(b) Puerperal tetanus	Female	1	1	1	1	1	1	1	2	2	1	1	1	2
146 Puerperal albuminuria and eclampsia	Female	2	1	1	1	1	1	1	1	1	2	1	1	2
147 Other toxæmias of pregnancy	Female	1	1	1	1	1	1	1	1	1	1	1	1	1
148 (a) Puerperal phlegmasia alba dolens and thrombosis	Female	1	1	1	1	1	1	1	1	1	1	1	1	1
(b) Puerperal embolism	Female	1	1	1	1	1	1	1	1	1	1	1	1	1
(c) Puerperal sudden death	Female	1	1	1	1	1	1	1	1	1	1	1	1	1
149 (a) Caesarean operation	Female	1	1	1	1	1	1	1	1	1	1	1	1	1
(b) Other surgical operations and instrumental delivery	Female	1	1	1	1	1	1	1	1	1	1	1	1	1
(c) Dystocia	Female	1	1	1	1	1	1	1	1	1	1	1	1	1
(d) Rupture of uterus in parturition	Female	1	1	1	1	1	1	1	1	1	1	1	1	1
(e) Other accidents of childbirth	Female	1	1	1	1	1	1	1	1	1	1	1	1	1
150 (b) Other or unspecified condition of the puerperal state	Female	1	1	1	1	1	1	1	1	1	1	1	1	1
CLASS XII.—DISEASES OF THE SKIN AND CELLULAR TISSUE.														
151 Carbuncle	Total	20	3	3	3	3	3	3	4	4	4	4	4	2
	Male	17	3	3	3	3	3	3	3	3	3	3	3	2
	Female	3	1	1	1	1	1	1	1	1	1	1	1	1
152 Cellulitis, acute abscess	Male	1	1	1	1	1	1	1	1	1	1	1	1	1
	Female	9	1	1	1	1	1	1	2	2	4	4	4	1
153 Other diseases of the skin and annexa and of the cellular tissue	Male	2	1	1	1	1	1	1	1	1	1	1	1	1
	Female	7	2	2	2	2	2	2	1	1	1	1	1	1

TABLE 18.—CAUSES OF DEATH FOR EACH SEX BY MONTHS, FOR THE WHOLE PROVINCE, 1936.—Continued

CAUSES OF DEATH	Total	MONTHS														
		January	February	March	April	May	June	July	August	September	October	November	December			
		Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
(d) Athrepsia	12	2	1	2	2	1	1	1	1	1	1	1	1	2	2	2
(e) Others, including lack of care	16	2	3	1	2	5	2	1	1	1	1	1	1	1	1	1
(f) No cause given, no doctor in attendance	10	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Female	11	1	1	2	1	2	2	1	1	1	1	1	1	1	1	1
CLASS XVI.—SENILITY	69	4	6	4	15	9	5	6	5	2	4	4	2	4	4	5
162 (a) With senile dementia (70 years and over)	37	2	5	2	6	4	3	5	2	1	3	1	1	3	4	4
(b) Without senile dementia (70 years and over)	32	2	1	2	9	5	2	1	3	1	1	1	1	1	1	1
(c) Premature senility (55 years but under 70 years)	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Female	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Male	33	2	5	1	5	4	3	5	2	1	2	1	1	2	1	3
Female	28	2	1	2	8	4	1	1	3	1	1	1	1	1	1	1
Female	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
CLASS XVII.—VIOLENT OR ACCIDENTAL DEATHS	506	33	28	46	31	49	34	69	72	38	33	33	38	33	41	32
163-171 Suicides	402	27	22	32	25	36	30	59	55	33	26	33	33	26	32	25
163 Suicide by solid or liquid poisons or by absorption of corrosive substances	104	6	6	14	6	13	4	10	17	5	7	5	7	7	9	7
164 Suicide by poisonous gas	77	7	3	15	7	6	6	6	5	6	3	6	6	3	7	6
165 Suicide by hanging or strangulation	10	1	1	1	1	1	1	1	2	3	1	3	3	1	1	1
166 Suicide by drowning	9	1	1	3	2	1	1	1	1	1	1	1	1	1	1	1
167 Suicide by firearms	5	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
168 Suicide by cutting or piercing instruments	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Female	14	1	1	2	2	2	1	3	1	1	1	1	1	1	1	2
Male	2	1	1	1	1	2	1	2	1	1	1	1	1	1	1	1
Female	8	1	1	1	1	2	1	2	1	1	1	1	1	1	1	1
Male	37	4	3	8	1	3	4	1	1	5	2	5	2	5	2	5
Female	2	1	1	1	2	1	1	1	1	1	1	1	1	1	1	1
Female	5	1	1	1	2	1	1	1	1	1	1	1	1	1	1	1

TABLE 21.—SPECIAL CLASSES OF ACCIDENTAL DEATHS SUBDIVIDED
ACCORDING TO NATURE OF ACCIDENT, 1936

CAUSES OF DEATH		Total	Male	Female
	A.—Accidents in mines and quarries	14	14	.....
178	Accidental absorption of toxic gases	1	1	.....
181	Accidental burns (conflagration excepted).....	1	1	.....
185	Accidental injury by cutting or piercing instruments.....	1	1	.....
186	Accidental injury by fall, crushing or land-slide.....	10	10	.....
190	Excessive cold	1	1	.....
	B.—Accidents caused by machines	21	20	1
181	Accidental burns (conflagration excepted).....	1	1	.....
186	Accidental injury by fall, crushing or land-slide.....	20	19	1
	C.—Railway Accidents	19	19	.....
178	Accidental absorption of toxic gases	2	2	.....
186	Accidental injury by fall, crushing or land-slide.....	16	16	.....
193	Accidents due to electric currents	1	1	.....
	E.—Automobile and motor-cycle accidents	72	53	19
178	Accidental absorption of toxic gases	2	2	.....
186	Accidental injury by fall, crushing or land-slide.....	70	51	19
	F.—Other land transportation	24	22	2
183	Accidental drowning	2	2	.....
186	Accidental injury by fall, crushing or land-slide.....	20	18	2
194	Other accidents	2	2	.....
	G.—Water transportation	10	9	1
183	Accidental drowning	10	9	1
	H.—Air transportation	1	1	.....
186	Accidental injury by fall, crushing or land-slide.....	1	1	.....

TABLE 22.—TOTAL DEATHS (EXCLUSIVE OF STILLBIRTHS) AND DEATHS IN INSTITUTIONS, CLASSIFIED ACCORDING TO RESIDENCE OF DECEDENTS IN CITIES OF 5,000 POPULATION AND OVER, IN THE PROVINCE OF ALBERTA, 1936

Cities	All Deaths						Deaths in Institutions						Deaths elsewhere than in Institutions																								
	Total			Residents			Non-resident in city where death occurred and			Total			Residents			Non-resident in city where death occurred and																					
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total																			
Calgary	887	504	383	690	388	302	180	105	75	17	11	6	551	328	223	379	224	155	160	96	64	12	8	4	336	176	160	311	164	147	20	9	11	5	3	2	
Edmonton	1100	660	440	661	388	273	419	259	160	20	13	7	844	527	317	426	265	161	403	252	151	13	10	5	256	133	123	235	123	112	16	7	9	5	3	2	
Lethbridge	189	112	77	103	57	46	85	55	30	1	1	1	152	90	62	67	36	31	84	54	30	1	1	1	1	37	22	15	36	21	15	1	1	1	1	1	1
Medicine Hat	160	86	74	93	46	47	56	36	20	11	4	7	118	67	51	55	30	25	53	34	19	10	3	7	42	19	23	38	16	22	3	2	1	1	1	1	1

TABLE 23.—TOTAL DEATHS (EXCLUSIVE OF STILLBIRTHS) AND DEATHS IN INSTITUTIONS, SHOWING THE NUMBER NON-RESIDENT IN THE PROVINCE OF ALBERTA, 1936

Total for the Province	All Deaths						In Institutions							
	Total			Non-resident in Province			Total			Non-resident in Province				
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
	6147	3610	2537	106	72	34	3069	1825	1244	75	50	25		

115 Diseases of buccal cavity and annexa and of the pharynx and tonsils	6.3	49	4	5	7	1	3	6	5	2	6	5	3	2
116-118 Diseases of the stomach	10.4	80	5	1	1	1	1	1	7	13	22	10	15	4
119, 120 Diarrhoea and enteritis	16.1	124	82	15	1	1	1	3	3	3	4	5	3	2
121 Appendicitis	20.1	155	5	12	18	16	19	28	15	15	18	9	4	1
122 Hernia, intestinal obstruction	9.8	77	5	5	1	1	1	2	3	12	14	16	13	6
124 Cirrhosis of the liver	2.6	20	20	2	1	1	1	1	1	1	4	9	3	2
125-127 Other diseases of the liver and gall-bladder	8.5	65	190	3	1	1	4	5	6	12	8	18	10	6
130-132 Nephritis	24.6	190	62	3	1	1	4	5	14	20	33	29	53	27
137 Diseases of the prostate	8.0	91	85	9	2	1	1	2	38	34	11	1	1	14
140-150 Puerperal causes	11.8	91	100	9	2	1	1	2	38	34	11	1	1	14
157 Congenital malformations	13.0	100	85	9	2	1	1	2	38	34	11	1	1	14
158-161 Diseases of early infancy	50.4	389	389	9	2	1	1	2	38	34	11	1	1	14
162 Semility	8.9	69	69	12	46	22	25	73	67	67	70	1	34	34
163-198 Violent deaths	65.5	506	12	46	22	25	25	73	67	67	70	1	34	34
Suicides	11.3	87	1	1	1	1	1	1	1	1	1	1	1	1
Homicides	1.7	13	1	1	1	1	1	1	1	1	1	1	1	1
Accidental drowning	8.5	68	14	14	5	13	5	16	4	3	8	1	1	1
Accidents in mines and quarries	1.8	14	1	1	1	1	1	1	1	1	1	1	1	1
Railway accidents	2.5	19	1	1	1	1	1	1	1	1	1	1	1	1
Street car accidents	9.3	72	1	1	7	2	7	14	9	12	11	8	1	1
Automobile and motor-cycle accidents	3.1	24	2	2	1	1	1	2	2	3	4	6	3	3
Accidents in other land transportation	0.1	1	1	1	1	1	1	1	1	1	1	1	1	1
Accidents in air transportation	27.2	208	12	27	10	7	5	21	18	26	23	27	23	9
Other violent deaths	47.4	366	48	23	16	11	25	21	27	40	44	54	41	16
Total specified causes	792.1	6115	935	295	137	125	174	401	393	511	811	868	948	517
Unspecified or ill-defined causes	4.0	32	5	8	1	2	1	1	1	3	2	6	1	1
All causes	796.1	6147	940	303	138	127	175	402	394	514	813	874	949	518

TABLE 25.—MARRIAGES IN THE PROVINCE OF ALBERTA, BY MONTHS, 1936

	Total	MONTHS											
		January	February	March	April	May	June	July	August	September	October	November	December
Edmonton	1415	64	77	63	97	85	149	146	138	124	187	148	137
Calgary	1021	66	46	56	76	56	117	95	106	106	106	91	100
Lethbridge	233	11	12	15	8	14	29	23	18	33	31	22	17
Medicine Hat	187	10	5	10	9	15	18	20	18	24	31	13	14
Red Deer	98	5	4	7	3	1	7	9	12	6	21	14	9
Wetaskiwin	50	4	2	1	3	3	4	5	4	3	6	7	8
Drumheller	75	3	9	5	2	3	4	6	6	7	10	10	10
Rural Districts	2941	189	171	130	201	130	309	250	219	207	443	447	245
Total for the Province	6020	352	326	287	399	307	637	554	521	510	835	752	540

TABLE 26.—MARRIAGES—CONJUGAL CONDITION OF CONTRACTING PARTIES, 1936

	Total Marriages	Marriages between						Per cent. of Bridegrooms who were			Per cent. of Brides who were					
		Bachelors and		Widowers and		Divorced men and		Bachelors	Widowers	Divorced	Spinsters	Widows	Divorced			
		Spinsters	Widows	Spinsters	Widows	Spinsters	Widows	Divorced Women	Divorced Women	Spinsters	Widows	Divorced				
Total for the Province	6020	5348	154	86	169	114	23	98	14	14	92.8	5.1	2.1	93.3	4.7	2.0

TABLE 30.—NULLITIES AND DIVORCES BY JUDICIAL DISTRICTS FOR THE YEAR 1936

Judicial Districts	Nullities			Divorces		
	Number of Nullities	Granted to Husband	Granted to Wife	Number of Divorces	Granted to Husband	Granted to Wife
Edmonton	3	.....	3	88	27	61
Calgary	4	.....	4	84	27	57
Medicine Hat .....	.....	.....	.....	5	2	3
Lethbridge .....	.....	.....	.....	18	9	9
Red Deer .....	.....	.....	.....	3	2	1
Macleod .....	.....	.....	.....	1	1	.....
Grande Prairie .....	.....	.....	.....	1	.....	1
Vegreville .....	.....	.....	.....	5	3	2
Drumheller .....	.....	.....	.....	3	2	1
Camrose .....	.....	.....	.....	1	1	.....
Total	7	.....	7	209	74	135

DIVORCES IN ALBERTA SINCE THE PASSING OF THE ACT

Year	Granted to Husband	Granted to Wife	Total
1919	3	3	6
1920	74	26	100
1921	53	37	90
1922	80	49	129
1923	57	32	89
1924	66	53	119
1925	59	42	101
1926	79	75	154
1927	83	66	149
1928	91	84	175
1929	77	71	148
1930	64	87	151
1931	69	87	156
1932	68	81	149
1933	56	79	135
1934	62	106	168
1935	74	135	209
1936	74	135	209

TABLE 31.—BIRTHS OF INDIANS (EXCLUSIVE OF STILLBIRTHS), BY MONTHS, IN THE PROVINCE OF ALBERTA, 1936

	Total	Months											
		January	February	March	April	May	June	July	August	September	October	November	December
Total for the Province	821	78	69	74	69	67	58	80	69	80	59	54	64

TABLE 32.—BIRTHS OF INDIANS (EXCLUSIVE OF STILLBIRTHS), CLASSIFIED AS LEGITIMATE OR ILLEGITIMATE, IN THE PROVINCE OF ALBERTA, 1936

	Total Births			Legitimate			Illegitimate		
	Total	Male	Female	Total	Male	Female	Total	Male	Female
Total for the Province	821	414	407	710	356	354	111	58	53

TABLE 33.—DEATHS OF INDIAN CHILDREN (EXCLUSIVE OF STILLBIRTHS) FROM CERTAIN SPECIFIED CAUSES IN FIRST YEAR OF LIFE FOR EACH SEX, IN THE PROVINCE OF ALBERTA, 1936

Causes of Death	Total	Male	Female
ALL CAUSES	164	90	74
7 Measles	3	1	2
8 Scarlet fever			
9 Whooping-cough	22	10	12
10 Diphtheria			
11 Influenza	9	6	3
23 Tuberculosis of the respiratory system	20	10	10
24 Tuberculosis of the meninges and central nervous system	7	4	3
25-32 Tuberculosis, other forms	2	2	
67 Diseases of the thymus gland	1	1	
79 Simple meningitis	2	1	1
86 Convulsions	2	2	
106 Bronchitis	4	1	3
107 Bronchopneumonia	17	9	8
108, 109 Pneumonia	24	14	10
115 Diseases of the buccal cavity and annexa and of the pharynx and tonsils (including adenoid vegetations)	1	1	
119 Diarrhoea and enteritis	14	10	4
157 (c) Congenital malformations of the heart	2		2
158 Congenital debility	5	3	2
159 Premature birth	13	9	4
160 Injury at birth	3	2	1
161 Other diseases peculiar to early infancy (under 3 months)	9	2	7
(a-e) Specified diseases	2		2
(f) No cause given, no doctor in attendance	7	2	5
176-198 Other external causes	1	1	
Other specified causes	2	1	1
199-200 Unspecified or ill-defined causes	1		1

TABLE 35.—BIRTH, MARRIAGE, DEATH AND OTHER RATES PER 1,000 POPULATION FOR THE YEARS 1921-1936

	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935	1936
Birth Rate	27.89	26.44	25.75	24.74	25.02	23.79	24.03	24.79	26.19	26.74	23.57	22.96	21.33	21.10	21.0	20.4
Marriage Rate	7.92	6.99	6.09	7.50	7.27	7.40	7.58	9.12	9.29	8.08	7.02	6.83	7.10	7.87	7.7	7.8
Death Rate	8.39	8.62	8.06	8.30	7.86	8.49	8.16	9.00	9.65	8.33	7.24	7.46	7.07	6.93	7.3	8.0
Rate of Natural Increase	19.50	17.83	18.75	16.42	16.16	15.31	15.87	15.79	16.54	18.41	16.32	15.50	14.24	14.01	14.0	12.5
Infantile Death Rate (per 1,000 births)	85.65	91.93	90.54	82.40	72.90	81.63	74.51	76.50	77.40	63.57	69.38	58.68	59.90	54.89	57.8	60.0
Puerperal Death Rate (per 1,000 births)	7.24	6.68	5.50	6.18	5.76	5.82	6.38	6.75	7.26	6.46	5.04	3.76	4.43	4.99	4.2	5.8

TABLE 36.—DEATHS AND DEATH RATES FROM PUERPERAL CONDITIONS, 1936

	Births	Deaths from Puerperal Conditions	Death Rate per 1,000 Births
Whole Province	15786	91	5.8
City of Edmonton	2317	13	5.6
City of Calgary	1623	11	6.7
Small Cities	1429	12	8.4
Rural Districts	10407	55	5.3

TABLE 37.—VITAL STATISTICS, 1905 TO 1936 INCLUSIVE

Year	Population	Births	Marriages	Deaths	Excess of Births over Deaths
1905		421	187	114	307
1906	185,000	3,003	927	1,091	1,912
1907	236,000	4,732	1,907	1,578	3,154
1908	266,000	5,973	2,032	2,188	3,785
1909	301,000	6,897	2,384	2,662	4,235
1910	336,000	8,321	3,086	3,526	4,705
1911	374,000	8,813	3,630	3,618	5,195
1912	400,000	10,284	4,429	4,232	6,052
1913	429,000	11,871	5,053	4,432	7,439
1914	459,000	13,685	4,623	4,147	9,538
1915	480,000	13,452	4,202	3,588	9,864
1916	496,000	13,331	4,230	4,058	9,273
1917	508,000	13,576	4,270	4,047	9,529
1918	522,000	14,890	4,048	7,924	6,966
1919	541,000	14,130	4,718	5,507	8,623
1920	565,000	16,565	5,110	5,675	10,890
1921	588,000	16,414	4,661	4,940	11,474
1922	592,000	16,163	4,272	5,281	10,882
1923	593,000	15,153	4,117	4,843	10,320
1924	597,000	14,598	4,160	4,907	9,691
1925	602,000	15,014	4,363	4,717	10,297
1926	608,000	14,455	4,498	5,156	9,299
1927	633,000	14,897	4,707	5,059	9,838
1928	658,000	15,692	5,776	5,699	9,993
1929	684,000	16,924	6,004	6,239	10,685
1930	708,000	17,649	5,334	5,396	12,153
1931	732,000	17,252	5,142	5,302	11,950
1932	740,000	16,990	5,054	5,521	11,469
1933	748,000	16,123	5,389	5,346	11,093
1934	756,000	16,236	6,053	5,337	10,899
1935	770,000	16,183	6,010	5,729	10,454
1936	772,782	15,786	6,020	6,147	9,639

POPULATION, BIRTH, MARRIAGE AND DEATH RATES, 1936

Population	772,782
Birth Rate per 1,000	20.4
Marriage Rate per 1,000	7.8
Death Rate per 1,000	8.0

RATIO OF MALE TO FEMALE BIRTHS, AND OF BIRTHS TO DEATHS

Year	Births of Males to 1,000 Births of Females	Ratio of Births to Deaths	Year	Births of Males to 1,000 Births of Females	Ratio of Births to Deaths
1905	1.059	3.11	1921	1.055	3.32
1906	1.094	2.07	1922	1.034	3.06
1907	1.075	2.96	1923	1.072	3.13
1908	1.077	2.73	1924	1.036	2.97
1909	1.086	2.59	1925	1.042	3.18
1910	1.065	2.69	1926	1.053	2.80
1911	1.103	2.43	1927	1.065	2.94
1912	1.084	2.43	1928	1.064	2.75
1913	1.053	2.67	1929	1.042	2.71
1914	1.081	3.30	1930	1.027	3.21
1915	1.100	3.47	1931	1.075	3.25
1916	1.063	3.29	1932	1.052	3.08
1917	1.061	3.25	1933	1.053	3.01
1918	1.069	1.88	1934	1.032	3.04
1919	1.074	2.56	1935	1.055	2.81
1920	1.055	2.92	1936	1.049	2.57

