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City of Calgary  
HEALTH DEPARTMENT  
ANNUAL REPORT FOR THE YEAR 1936





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CITY OF CALGARY

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DEPARTMENT OF PUBLIC HEALTH

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ANNUAL REPORT FOR THE YEAR 1936

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LOCAL BOARD OF HEALTH OF THE CITY OF CALGARY

His Worship, Mayor Andrew Davison, Chairman,  
and all Members of the City Council.

Medical Officer of Health. W.H.HILL. M.D. C.M. D.P.H.

Asst: Medical Officer of Health. Geraldine Oakley. M.D.

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CONTENTS

	Page
Introduction	2
Vital Statistics	3 to 11
Marriages	3 and 7
Births and Birth Rate	3 and 6
Stillbirths	3 and 6
Deaths and Death Rate	3,7,10 and 11
Infant Deaths and Infant Death Rate	5, 8 and 31
Causes of Deaths, International List	10 and 11
Maternal Deaths	5, 8 and 9
Communicable Diseases, and Deaths from,	12,13 and 14
Deaths from Tuberculosis, Typhoid, etc.	15
Immunization	16
Serums and Antitoxins issued	17
Quarantine and disinfection	18
Sanitation and Food Inspection	18 and 19
Meat Inspection	19
Milk and Dairy Inspection	20 and 21
Child Welfare - School Children	22 to 26
School Nurses	25 and 26
Dental Inspection and Dental Clinic	26
Child Welfare - Infants and Pre-school Children	27 to 30
Tuberculosis (Calgary Tuberculosis Assn:)	32 and 33
Education	34
Relief Department Investigations	34
Conclusion	34
Financial Statement	36



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To: His Worship The Mayor, Commissioner, and  
Members of the City Council, constituting  
the Local Board of Health of the City of Calgary.

Mrs. Wilkinson and Gentlemen:

I beg to submit herein the report covering the  
activities of the City Health Department for the year 1936

It will be recalled that following the presentation  
of the Annual Report for 1935, Council instituted a Committee  
to consider the report in its many phases, a move that was most  
encouraging in that it served to bring out some of the problems  
obtaining in the Health Department, and stressed some of the  
advantage that resulted from a better appreciation by the  
Committee of matters pertaining to Public Health.

The total departmental cost for the year 1936 was  
\$59,005.12 representing a per capita cost of 70.8 cents per  
annum, a figure which, taking into consideration that it  
includes the cost of School Medical Inspection and services,  
is very moderate.

Calgary, at the present time, is one of four Canadian  
cities that has amalgamated the Department of Public Health with  
the School Medical Service, the other three cities are Toronto,  
Hamilton, and very recently Vancouver. The trend throughout the  
United States is distinctly along this line and it may be said  
rightly so, eliminating as it does overlapping of responsibili-  
ties and therefore expense. It is most desirable to have the  
several activities definitely relating to public health in its  
broad and inclusive sense, function independently, aiming  
always in collective effort at that goal of endeavour that  
constitutes at once a full and efficient programme.

#### VITAL STATISTICS

The Dominion Census of June 1936 showed the population  
of the City of Calgary as being 83,304 a figure not materially  
different from the census of 1931. It is hard to understand why  
there should be no increase in our population. We speak of  
overcrowding in houses that in 1931 housed individual families,  
in blocks heretofore used as office buildings and such like, we  
further have the number of births during the five years and an  
obvious influx of transients, and yet the population is station-  
ary. It would be interesting to discover the number of departures  
from the City and the reasons for going. We know the mortality  
rate is higher than last year.

Again it is pointed out that stress is laid on NET  
figures as being pertinent to actual City conditions. In many  
cases it is also necessary to give the gross figures as a basis  
for comparison in any consideration of figures emanating from  
other centres.

To: His Worship The Mayor, Commissioner, and  
Members of the City Council, consisting  
the Local Board of Health of the City of Calgary.

Mrs. Livingston and Commissioner

I beg to submit herein the report covering the  
activities of the City Health Department for the year 1935

It will be recalled that following the presentation  
of the Annual Report for 1934, Council instructed a Committee  
to consider the report in its many phases, a move that was most  
encouraging in that it served to bring out some of the problems  
obtaining in the Health Department, and stressed some of the  
advantages that resulted from a better organization by the  
Committee of matters pertaining to Public Health.

The total departmental cost for the year 1935 was  
\$52,000.15 representing a per capita cost of 70.8 cents per  
annum, a figure which, taking into consideration that it  
includes the cost of school medical inspection and nurses,  
is very moderate.

Calgary, at the present time, is one of four Canadian  
cities that has amalgamated the Department of Public Health with  
the School Medical Service, the other three cities are Toronto,  
Hamilton, and very recently Vancouver. The trend throughout the  
United States is distinctly along this line and it may be said  
rightly so, considering as it does overlapping of responsibilities  
ties and therefore expense. It is most desirable to have the  
several activities definitely related to public health in its  
broad and inclusive sense, function independently, aiming  
always in collective effort at that goal of endeavor that  
constitutes at once a full and efficient program.

### VITAL STATISTICS

The Dominion Census of June 1931 showed the population  
of the City of Calgary as being 55,506 a figure not materially  
different from the census of 1921. It is hard to understand why  
there should be no increase in our population. We speak of  
overcrowding in houses that in 1931 housed individual families,  
in blocks heretofore used as office buildings and such like, we  
further have the number of births during the five years and an  
obvious influx of transients, and yet the population is station-  
ary. It would be interesting to discover the number of departures  
from the City and the reasons for same. We know the mortality  
rate is higher than last year.

Again it is pointed out that stress is laid on vital  
figures as being pertinent to actual city conditions. In many  
cases it is also necessary to give the gross figures as a basis  
for comparison in any consideration of figures emanating from  
other sources.



## MARRIAGES

The number of marriages performed during the year was 1021 or a rate of 24.5 per thousand population. This is the first reporting of these figures during the present tenure of the M.O.H and therefore there are no figures available in the previous reports as a basis for comparison. In a city of this size, however, such figures have a peculiar similarity and such no doubt is the case here. It is noted that the City of Edmonton invariably has a higher marriage rate than Calgary, which may be accounted for by the fact that Edmonton has a larger foreign-born population and amongst these peoples marriages appear to be more frequent than amongst the Anglo-Saxon race.

## BIRTHS

There were 1274 net births during the year, a figure lower by 16 than the year 1935 and the lowest for the last five years. There has been a general decline in birth rates the world over during the last few years, and this fact is so marked in certain places as to occasion the gravest concern. A glance at the rates for Calgary will serve to illustrate the decline here, although there is no spectacular falling off of the rate as is much in evidence from some of the reports received from elsewhere. There is no doubt that the universality of decline in birth rates has marked bearing on matters of strictly social consideration.

The net number of stillbirths during the year 1936 was 38, a figure not out of line in relationship to the birth rate, and comparing very well with the figures over the last five years. The problem of stillbirth and its causes is much involved and permits much in the way of thought. France has interested herself these past few years in many of the intricacies of this world-wide problem, and it is hoped that the results of the work done in that country with its potential advantages, will reflect on and benefit the area as wide as the problem.

## DEATHS

There occurred during the year 702 deaths, or a rate per thousand of population of 8.4. The rate for 1935 was 7.6 represented by 635 deaths. It will be noted that during the year 1936 there were 67 deaths in excess of the number for 1935 and the year's death rate is the highest for the past five years. In the perusal of the following tables it will be observed there has been a noticeable increase in death from certain causes, which fact is commented upon in the several paragraphs having to do with specific conditions. It is necessary from this on to have recourse to GROSS figures in dealing with matters pertaining to mortality; this by virtue of the fact that in the compilation of the tables having to do with death, we are unable to properly ascertain the place of residence. Our recordings are taken from the files of the Provincial Registrar and our figures must of necessity be gross.

Deaths occurring in the age group from birth to forty years number 279, and from forty on 612, which figures, having regard to our increased death rate, are somewhat in the same proportion as appeared last year.

## MARRIAGES

The number of marriages performed during the year was 1001 or a rate of 24.5 per thousand population. This is the first reporting of these figures during the present tenure of the M.C.C. and therefore there are no figures available in the previous reports as a basis for comparison. It is a city of this size, however, such figures have a peculiar clarity and such no doubt is the case here. It is noted that the City of Edmonton invariably has a higher marriage rate than Calgary, which may be accounted for by the fact that Edmonton has a larger foreign-born population and amongst these people marriages appear to be more frequent than amongst the Anglo-Saxon race.

## BIRTHS

There were 1876 live births during the year, a figure lower by 16 than the year 1925 and the lowest for the last five years. There has been a general decline in birth rates the world over during the last few years, and this fact is so marked in certain places as to occasion the gravest concern. A glance at the rates for Calgary will serve to illustrate the decline here, although there is no spectacular falling off of the rate as in much of the evidence from some of the reports received from elsewhere. There is no doubt that the universality of decline in birth rates has marked bearing on matters of strictly social consideration.

The net number of stillbirths during the year 1926 was 38, a figure not out of line in relationship to the birth rate, and comparing very well with the figures over the last five years. The problem of stillbirths and its causes is much involved and permits much in the way of thought. There has interested herself these past few years in many of the intricacies of this world-wide problem, and it is hoped that the results of the work done in that country with its potential advantages, will reflect on and benefit the area as wide as the problem.

## DEATHS

There occurred during the year 703 deaths, or a rate per thousand of population of 17.5. The rate for 1925 was 17.0 represented by 688 deaths. It will be noted that during the year 1926 there were 87 deaths in excess of the number for 1925 and the year's death rate is the highest for the past five years. In the period of the following tables it will be observed there has been a noticeable increase in death from certain causes, which fact is commented upon in the several paragraphs having to do with specific conditions. It is necessary from this on to have recourse to 1925 figures in dealing with matters pertaining to mortality; this by virtue of the fact that in the compilation of the tables having to do with death, we are unable to properly ascertain the place of residence. Our recordings are taken from the files of the Provincial Registrar and our figures must of necessity be gross.

Deaths occurring in the age group from birth to forty years number 275, and from forty on 428, which figures, having regard to our increased death rate, are somewhat in the same proportion as appeared last year.



The first six causes of death affecting the City over the year are as follows:

Diseases of the heart and circulatory system	219
Cancer	131
Infections and parasitic diseases	79
Diseases of the digestive system	79
Diseases of the respiratory system	72
Diseases of the nervous system	<u>69</u> 649

In passing it will be noted that the above list accounts for 72.4% of the gross total deaths during 1936.

Of the 219 deaths from heart disease, 140 occurred at the age of 60 years and over and, as pointed out last year, reflects on the influence of chronic infections over a number of years. Heart disease has been the premier cause of death the world over for now several years, and this remark permits me to bring out the value of early medical examinations of children in schools, pre-school clinics and such like. The aim is to detect defects early and the early recognition of acute infectious diseases; this procedure obviously designed to prevent the foundation of foci of infection in our children. Infection of any kind to a more or less degree affects the heart muscle and the early removal of these foci of infection will gradually eliminate the picture we are confronted with today, in which we find far too much death as the result of foci being left to exact their death toll in the group above mentioned.

"Public Health is purchasable, within natural limitations a community can determine its own death rate".

Cancer exacted a death toll of 131 during the year or one death in every seven. Cancer is a condition peculiar to the age group of 40 plus. Whereas we find a total of 131 it is noted that 116 occurred in this group. Sixty-one occurred in the group 60 and over. There is an increase in deaths from cancer as from 1935 of 17 cases. In passing, for the little encouragement it gives, we find that cancer exacted one death in seven this year as against one in five usually understood at the present time. I think it is safe to say that cancer is being recognized earlier now and with the promising research being conducted it is hoped we shall see an improvement in this situation ere long.

Infections and parasitic diseases accounted for 79 deaths during the year. This particular cause of death was not shown as one of the first six causes last year but has its place on account of the fact that there were 27 deaths from influenza, 37 from pneumonia, and 12 from tuberculosis. Deaths occurring from diseases other than the three mentioned are relatively within expectations.

Diseases of the digestive system show 79 deaths. This classification includes a number of different conditions relating to the organs of digestion. On analysis it cannot be said

The first six causes of death affecting the City over the year are as follows:

131	Diseases of the heart and circulatory system
73	Cancer
72	Infections and parasitic diseases
72	Diseases of the digestive system
72	Diseases of the respiratory system
62 549	Diseases of the nervous system

In passing it will be noted that the above list accounts for 75.4% of the gross total deaths during 1930.

Of the 219 deaths from heart disease, 140 occurred at the age of 60 years and over and, as pointed out last year, reflects on the influence of chronic infections over a number of years. Heart disease has been the premier cause of death in the world ever for now several years, and this remark permits me to bring out the value of early medical examinations of children in schools, pre-school clinics and such like. The aim is to detect defects early and the early recognition of some infections diseases; this procedure obviously designed to prevent the foundation of foot of infection in our children. Infection of any kind to a more or less degree affects the heart muscle and the early removal of these foot of infection will gradually eliminate the picture we are confronted with today, in which we find far too much death as the result of foot being left to exact their death toll in the group above mentioned.

"Public Health is purchasable, within national limitations a community can determine its own death rate."

Cancer exacted a death toll of 151 during the year or one death in every seven. Cancer is a condition peculiar to the age group of 40 years. Whereas we find a total of 151 in the noted that 115 occurred in this group. Sixty-one occurred in the group 60 and over. There is an increase in deaths from cancer as from 1928 of 14 cases. In passing, for the little encouragement it gives, we find that cancer exacted one death in seven this year as against one in five usually understood as the present time. I think it is safe to say that cancer is being recognized earlier now and with the promising research being conducted it is hoped we shall see an improvement in this situation are long.

Infections and parasitic diseases accounted for 73 deaths during the year. This particular cause of death was not shown as one of the first six causes last year but has its place on account of the fact that there were 87 deaths from influenza, 87 from pneumonia, and 17 from tuberculosis. Deaths occurring from diseases other than the three mentioned are relatively within expectations.

Diseases of the digestive system show 73 deaths. This classification includes a number of different conditions relating to the organs of digestion. On analysis it cannot be said



that the number is large for a city of this size as reference to the tables will show.

Diseases of the respiratory system include such diseases as influenza, pneumonia and tuberculosis, and from this system 72 deaths are reported during the year. During the latter end of 1936 and coincident with other places in the Province there was a marked flare of influenza with 33 deaths and whilst this gives a marked increased death rate from this condition as compared with the previous year, report has it that Calgary did not suffer so severely as did some of the other centres. Not having access to annual reports from other centres as yet, comparison cannot be made. Pneumonia accounted for 51 deaths as against 74 for 1935. Quite half of these deaths occurred in the very early and very late years of life. Such diseases as measles and whooping cough when prevalent exact their toll from pneumonia as a complication in the early years of life, and we find 10 deaths of infants occurred in this classification.

Diseases of the nervous system as the outcome of a number of conditions contracted early in life accounted for 69 deaths as compared with 84 for the year 1935. Of the number quoted 48 occurred in the age group of forty years and over.

#### INFANT MORTALITY

In this division the figures are again gross and show 96 infant deaths for the year. The reporting of this situation is always more or less painful to any Health Department, realizing as we do that far too many babies die from preventable causes. Medical literature is full of this problem and stress is laid on measures designed to bring about marked reduction in these rates. Progress is slow: measures of any kind aiming towards improvement are slow in their acceptance. The problem again is one for all of us and it takes time and a good deal of patience to bring about an appreciation of the underlying problems involved. There seems to be no dearth of workers, publicity or educational measures, but it does seem that a good deal more hammering will have to take place before much in the way of impression is made on the sum total of the problem. In passing it is pointed out that there are but five deaths from diarrhoea and enteritis. This situation has, among other things, its relationship to the milk question and therefore sanitation, and although one death is of grave consequence, the small number serves to point out the relative satisfactory condition of our milk supply. Seven children died of pneumonia and influenza, one half the number for the previous year, and the lowest number for the past five years.

#### MATERNAL MORTALITY

Eleven mothers died during childbirth during the year seven of which were patients from outside the City. The situation is roughly this, half the deaths from abortion are preventable, all are preventable from puerperal sepsis, the best percentage from puerperal toxæmias, and a goodly percentage from the majority of the other causes. Every care for the illegitimate mother, State help for all mothers unable to provide the necessary care and facilities, frequent and early examinations medically,

5  
that the number is large for a city of this size as reference to the tables will show

Diseases of the respiratory system include such diseases as influenza, pneumonia and tuberculosis, and from this system 75 deaths are reported during the year. During the latter end of 1935 and coincident with other places in the Province there was a marked rise of influenza with 55 deaths and whilst this gives a marked increased death rate from this condition as compared with the previous year, report has it that Calgary did not suffer so severely as did some of the other centres. Not having access to annual reports from other centres as yet, comparison cannot be made. Pneumonia accounted for 51 deaths as against 46 for 1935. Quite half of these deaths occurred in the very early and very late years of life. Such diseases as measles and whooping cough when prevalent exact their toll from pneumonia as a complication in the early years of life, and we find 10 deaths of infants occurred in this classification.

Diseases of the nervous system as the outcome of a number of conditions connected early in life accounted for 69 deaths as compared with 84 for the year 1935. Of the number quoted 48 occurred in the age group of forty years and over.

#### INFANT MORTALITY

In this division the figures are again gross and show 98 infant deaths for the year. The reporting of this situation is always more or less painful to any Health Department, realizing as we do that for too many babies die from preventable causes. Medical literature is full of this problem and stress is laid on measures designed to bring about marked reduction in these rates. Progress is also measured of any kind aiming towards improvement and also in their acceptance. The problem again is one for all of us and it takes time and a good deal of patience to bring about an appreciation of the underlying problem involved. There seems to be no dearth of workers, publicity or educational measures, but it does seem that a good deal more hammering will have to take place before much in the way of improvement is made on the sum total of the problem. In passing it is pointed out that there are but five deaths from diarrhoea and enteritis. This situation has, among other things, its relationship to the milk question and therefore sanitation, and although one death is of grave consequence, the small number serves to point out the relative satisfactory condition of our milk supply. Seven children died of pneumonia and influenza, one half the number for the previous year, and the lowest number for the past five years.

#### MATERNAL MORTALITY

Eleven mothers died during childbirth during the year even of which were patients from outside the City. The situation is roughly this, half the deaths from abortion are preventable, all are preventable from puerperal sepsis, the best percentage from puerperal toxemia, and a goodly percentage from the majority of the other causes. Every care for the illiterate mother, State help for all mothers unable to provide the necessary care and facilities, frequent and early examinations medically,



instruction for those who need it at pre-natal classes, are some of the means calculated to improve this situation and bring about a reduction in the maternal death rate, which is long overdue.

Vital Statistics reports in accordance with the form approved by The Canadian Public Health Association, follow:

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The population of the City of Calgary, according to the Dominion Government Census, June 1936, is 83,304.

### BIRTHS

According to the records of the Registrar of Vital Statistics for the year 1936.

Live Births	1636.	Rate per 1000 population	19.6
Stillbirths	52	Rate per 1000 live births	31.8

Included in the above were 362 non-resident births and 14 non-resident stillbirths.

TABLE. No.1.

### LIVE BIRTHS. 1932-1936

Year	Population	No.including Non-resident	Rate per 1000 pop:	No.residents only	Rate per 1000 pop:
1936	83,304	1636	19.6	1274	15.3
1935	83,362	1656	19.9	1290	15.5
1934	83,362	1617	19.4	1302	15.6
1933	83,362	1610	19.3	1295	15.5
1932	83,362	1747	20.9	1459	17.5

TABLE. No.2.

### STILLBIRTHS. 1932-1936

Year	Population	No.including Non-resident	Rate per 1000 pop:	No.residents only	Rate per 1000 pop:
1936	83,304	52	0.62	38	0.46
1935	83,362	51	0.61	34	0.41
1934	83,362	48	0.58	38	0.46
1933	83,362	72	0.86	66	0.79
1932	83,362	64	0.77	57	0.68

information for those who need it at pre-natal classes, are some of the means calculated to improve this situation and bring about a reduction in the maternal death rate, which is four per cent.

Vital Statistics reports in accordance with the form approved by the Canadian Public Health Association, 1913.

The population of the City of Calgary, according to the Dominion Government Census, June 1921, is 22,204.

# FIFTH:

According to the records of the Registrar of Vital Statistics for the year 1921:

Live Births 1921. Rate per 1000 population 19.2  
Stillbirths 28 Rate per 1000 live births 0.15

Included in the above were 108 non-resident births and 14 non-resident stillbirths.

## TABLE No. 1.

### LIVE BIRTHS, 1922-1923

Year	Population	No. including	Rate per	No. resident	Rate per
		Non-resident	1000 pop.	only	1000 pop.
1922	22,204	192	19.2	192	19.2
1923	22,204	192	19.2	192	19.2
1924	22,204	192	19.2	192	19.2
1925	22,204	192	19.2	192	19.2
1926	22,204	192	19.2	192	19.2

## TABLE No. 2.

### STILLBIRTHS, 1922-1923

Year	Population	No. including	Rate per	No. resident	Rate per
		Non-resident	1000 pop.	only	1000 pop.
1922	22,204	28	0.15	28	0.15
1923	22,204	28	0.15	28	0.15
1924	22,204	28	0.15	28	0.15
1925	22,204	28	0.15	28	0.15
1926	22,204	28	0.15	28	0.15



### MARRIAGES

Number of marriages performed in 1936 was 1021

Number of persons married per 1000 population was 24.5

### DEATHS

From all causes a total of 891 deaths were registered, being a rate of 10.7 per 1000 population, including 189 deaths of non-residents.

TABLE No. 3

Mortality Rate (exclusive of stillbirths) 1932-1936

Year	No. of deaths including non-res:	Rate per 1000 population	No. residents only	Rate per 1000 population
1936	891	10.7	702	8.4
1935	783	9.4	635	7.6
1934	732	8.8	605	7.2
1933	697	8.4	567	6.8
1932	749	9.0	601	7.2

TABLE No. 4

CHIEF CAUSES OF DEATH 1934, 1935 and 1936

Abridged International List.No.	Disease	Number of deaths			Rate per 100,000 pop:		
		1936	1935	1934	1936	1935	1934
25, 33, 22 & 24.	Diseases of heart, arteries, kidneys, including apoplexy	274	271	225	328.9	325.1	269.9
15	Cancer, all forms.	122	111	106	146.5	133.2	127.2
27	Pneumonia	51	74	45	61.2	88.5	54.0
42	Violent and accidental deaths	41	33	58	49.2	39.6	69.6
10-11	Tuberculosis (all forms)	16	9	13	19.2	10.8	15.6
18	Diabetes	5	11	7	6.0	13.2	8.4
8	Influenza	33	9	8	39.6	10.8	9.6
1,2,3,4	Communicable diseases (other than T.B. Pneumonia. Flu:	13	3	2	15.6	3.6	2.4
	All other causes	336	262	268	403.3	314.3	322.7

# TABLE 1

Number of persons married in 1955 was 14,500  
 Number of marriages performed in 1955 was 14,500

# TABLE 2

From all causes a total of 501 deaths were registered, being a rate of 10.7 per 1000 population, including 13 deaths of non-residents.

# TABLE 3

Mortality Rate (exclusive of stillbirths) 1953-1955

Year	No. of deaths	Rate per 1000 population	Rate per 1000 population	Rate per 1000 population
			including non-residents	only
1955	501	10.7	702	8.4
1954	485	9.4	688	7.7
1953	478	8.4	608	7.2
1952	457	8.4	567	6.6
1951	442	8.0	501	7.2

# TABLE 4

CAUSES OF DEATH 1953 and 1955

Abridged Internal Cause No.	Disease	1955	1953	1954	1955	1953	1954	1955	Rate per 100,000 pop.
28, 29, 30 & 31	Disease of heart, arteries, kidneys, including angina	275	271	285	338.9	285.1	289.3		
15	Cancer, all forms	102	111	103	145.5	154.2	147.8		
27	Pneumonia	81	74	68	61.2	58.2	55.0		
42	Violent and accidental deaths	41	33	35	43.2	35.5	39.8		
10-11	Tuberculosis (all forms)	16	9	12	19.8	10.8	16.8		
18	Diabetes	5	11	7	6.0	10.8	8.4		
8	Influenza	25	9	8	29.6	10.8	9.5		
1, 2, 3, 4	Communicable diseases (other than T.B. pneumonia, etc.)	13	3	3	16.5	3.6	3.4		
	All other causes	256	202	206	408.7	314.3	322.7		



### INFANT MORTALITY

The infant mortality rate for the municipality, including deaths of non-residents, is presented in the following table for this year and the preceding four years.

TABLE. No. 5

DEATHS OF INFANTS IN THE FIRST YEAR OF LIFE. 1932-1936  
(total number including non-residents)

	1936	1935	1934	1933	1932
Number of infant deaths	96	82	71	64	84
Rate per 1000 live births	58.7	49.5	43.9	39.8	48.1
Number of non-residents included in the above	22	18	10	12	12

TABLE. No. 6

INFANT MORTALITY BY CAUSE OF DEATH. 1932-1936  
(total number including non-residents)

Cause of death	1936 Number	1935 Number	1934 Number	1933 Number	1932 Number
1 Diarrhoea and enteritis	5	4	2	6	12
2 Pneumonia and influenza	7	14	12	14	12
3 Prematurity	41	36	34	17	24
4 Congenital debility, malformations	10	12	9	4	13
5 Injuries at birth	6	2	4	2	3
6 Acute communicable diseases, (whooping cough, measles, scarlet fever, etc)	5	2	-	1	-
7 Other causes	22	12	10	20	20

Of the 96 infant deaths registered this year, 36 occurred within the first twenty-four hours, 19 within the first week, and 5 died being under one month of age, representing 57.6% of the total number.

### MATERNAL DEATHS

The number of deaths of mothers from puerperal causes was 11, including 7 of non-residents; the rate for the municipality is 3.1 per 1000 living births.

# INFANT MORTALITY

The infant mortality rate for the municipality, including deaths of non-residents, is presented in the following table for this year and the preceding four years.

TABLE No. 1

## DEATHS OF INFANTS IN THE FIRST YEAR OF LIFE, 1922-1926

(Total number including non-residents)

	1922	1923	1924	1925	1926
Number of infant deaths	90	82	71	64	84
Rate per 1000 live births	68.9	62.6	53.9	50.9	63.1
Number of non-residents included in the above	28	18	10	12	12

TABLE No. 2

## INFANT MORTALITY BY CAUSE OF DEATH, 1922-1926

(Total number including non-residents)

Cause of death	1922	1923	1924	1925	1926
1 Diphtheria and enteritis	5	4	3	2	12
2 Pneumonia and influenza	7	14	10	14	18
3 Prematurity	41	50	54	17	24
4 Congenital debility, malformations	10	18	9	4	12
5 Injuries at birth	3	2	4	2	2
6 Acute communicable diseases, (whooping cough, measles, scarlet fever, etc.)	2	2	-	1	-
7 Other causes	23	18	10	20	23

Of the 84 infant deaths registered this year, 55 occurred within the first twenty-four hours, 12 within the first week, and 17 being under one month of age, representing 67.6% of the total number.

## MATERNAL DEATHS

The number of deaths of mothers from pregnancy causes was 11, including 7 of non-residents; the rate for the municipality is 5.1 per 1000 living births.



TABLE. No. 7MATERNAL MORTALITY. 1932-1936 (including non-residents)

Year	Live Births	No. of Maternal Deaths.	Rate per 1000 live births
1936	1636	11	6.7
1935	1656	5	3.02
1934	1617	6	3.7
1933	1610	8	4.9
1932	1747	10	5.7

Number of non-residents included in above: 7 for 1936, 1 for 1935, 4 for 1934, 4 for 1933, and 3 for 1932.

The chief causes of maternal deaths during the year 1936, according to residence, are presented in the following table.

TABLE. No. 8.CHIEF CAUSES OF MATERNAL DEATHS

Cause of death	Including non-resident	Resident
Abortions (septic and nonseptic)	4	1
Puerperal toxæmias	3	1
Puerperal sepsis	1	1
Other puerperal causes	3	1

TABLE No. 7

MATERNAL MORTALITY 1922-1926 (including non-residents)

Year	Live Births No. of Maternal Deaths	Rate per 1000 live births
1926	11	6.7
1925	5	5.02
1924	5	5.7
1923	5	6.2
1922	10	6.7

Number of non-residents included is above: 7 for 1926, 1 for 1925, 4 for 1924, 4 for 1923, and 5 for 1922.

The chief causes of maternal deaths during the year 1926, according to residence, are presented in the following table.

TABLE No. 8

CHIEF CAUSES OF MATERNAL MORTALITY

Causes of death	Including non-resident residents
Abortions (legal and non-legal)	1
Puerperal pyrexia	1
Puerperal sepsis	1
Other puerperal causes	1



# CAUSES OF DEATH

In accordance with the recommended practice the causes of death are presented, using the Abridged International List as follows:

## ABRIDGED INTERNATIONAL LIST CAUSES OF DEATH. REVISION OF 1929

List No.	Disease	Number. Including Non-resident	Number Residents only.
1	Typhoid and paratyphoid fever	4	3
3	Smallpox	1	1
4	Measles	1	1
5	Scarlet Fever	3	3
6	Whooping Cough	4	3
7	Diphtheria	-	-
8	Influenza	33	27
10	Tuberculosis of the respiratory system	11	9
11	Other forms of tuberculosis	5	3
12	Syphilis	5	5
14	Other infections and parasitis diseases	12	6
15	Cancer and other malignant tumors	122	100
16	Tumors, non-malignant tumors	9	3
17	Chronic rheumatism and gout	16	13
18	Diabetes mellitus	5	5
19	Alcoholism (acute and chronic)	2	2
20	Other general diseases and chronic poisonings	32	26
21	Progressive locomotor ataxia and general paralysis of the insane	1	1
22	Cerebral hemorrhage, cerebral embolism and thrombosis	32	29
23	Other diseases of the nervous system and of the organs of special sense	36	27
24	Diseases of the heart	162	141
25	Other diseases of the circulatory system	57	48
26	Bronchitis	7	5
27	Pneumonias	51	37
28	Other diseases of the respiratory system (tuberculosis excepted)	14	12
29	Diarrhoea and enteritis	10	8
30	Appendicitis	25	12
31	Diseases of the liver and biliary passages	15	13
32	Other diseases of the digestive system	29	23
33	Nephritis	23	18
34	Other diseases of the genito-urinary system	16	12
35	Puerperal septicaemia	1	1
36	Other diseases of pregnancy, childbirth and the puerperal state	10	3
37	Diseases of the skin, bones, and organs of locomotion	10	9
38	Congenital debility and malformations, premature birth, etc,	65	50
39	Senility	8	8
40	Suicide	8	5
41	Homicide	-	-
42	Violent or accidental deaths (suicide and homicide excepted)	41	26
43	Cause of death not specified or ill-defined	5	4
		<u>891</u>	<u>702</u>

## CAUSES OF DEATH

In accordance with the recommended practice the causes of death are presented, using the Abbreviated International List as follows:

## ABBREVIATED INTERNATIONAL LIST CAUSES OF DEATH, REVISION OF 1959

Number	Resistant	Including	Disease	List No.
1	4	4	1 Typhoid and paratyphoid fever	1
2	1	1	2 Bacillary dysentery	2
3	1	1	3 Malaria	3
4	2	2	4 Scarlet fever	4
5	1	1	5 Whooping cough	5
6	1	1	6 Diphtheria	6
7	1	1	7 Tetanus	7
8	1	1	8 Infectious mononucleosis	8
9	1	1	9 Tuberculosis of the respiratory system	9
10	1	1	10 Other forms of tuberculosis	10
11	1	1	11 Syphilis	11
12	1	1	12 Other infectious and parasitic diseases	12
13	1	1	13 Cancer and other malignant tumors	13
14	1	1	14 Tumors, non-malignant	14
15	1	1	15 Chronic rheumatism and gout	15
16	1	1	16 Diabetes mellitus	16
17	1	1	17 Alcoholism (acute and chronic)	17
18	1	1	18 Other general diseases and chronic poisonings	18
19	1	1	19 Progressive locomotor ataxia and general paralysis of the insula	19
20	1	1	20 Cerebral hemorrhage, cerebral embolism and thrombosis	20
21	1	1	21 Other diseases of the nervous system and of the organs of special senses	21
22	1	1	22 Diseases of the heart	22
23	1	1	23 Other diseases of the circulatory system	23
24	1	1	24 Bronchitis	24
25	1	1	25 Pneumonia	25
26	1	1	26 Other diseases of the respiratory system (tuberculosis excepted)	26
27	1	1	27 Diarrhea and enteritis	27
28	1	1	28 Appendicitis	28
29	1	1	29 Diseases of the liver and biliary passages	29
30	1	1	30 Other diseases of the digestive system	30
31	1	1	31 Hemiplegia	31
32	1	1	32 Other diseases of the genito-urinary system	32
33	1	1	33 Traumatic asphyxia	33
34	1	1	34 Other diseases of pregnancy, childbirth and the puerperal state	34
35	1	1	35 Diseases of the skin, bones, and organs of locomotion	35
36	1	1	36 Congenital malformations and malformations of function	36
37	1	1	37 Senility	37
38	1	1	38 Suicide	38
39	1	1	39 Homicide	39
40	1	1	40 Violent or accidental deaths (accidents and homicide excepted)	40
41	1	1	41 Causes of death not specified or ill-defined	41
42	1	1	42	42



## DEATHS BY AGE AND SEX. 1936

	Males	Females	Under 24 yrs.	Under 1 yr.	1 - 4 yrs.	5 - 19 yrs.	20 - 39 yrs.	40 - 59 yrs.	60 yrs. up	TOTALS
1 Infections and parasitic Diseases	45	34	-	7	4	11	20	20	17	79
2 Cancer and other tumors	67	64	-	1	-	1	13	55	61	131
3 Rheumatism. Diseases of nutrition and general dis:	15	19	-	1	3	3	3	16	8	34
4 Diseases of the blood and blood-forming organs	9	10	-	-	-	3	3	8	5	19
5 Chronic poisonings and intoxications	1	1	-	-	-	-	2	-	-	2
6 Dis: of the nervous system and organs special sense	31	38	-	5	3	4	9	13	35	69
7 Diseases of the circulatory system	129	90	-	-	-	3	11	65	140	219
8 Diseases of the respiratory system	49	23	-	10	2	7	6	21	26	72
9 Diseases of digestive system	51	28	-	5	5	9	13	24	23	79
10 Diseases of the genito-urinary system	27	12	-	-	-	3	7	7	22	39
11 Dis: of pregnancy, childbirth, puerperal state	-	11	-	-	-	3	8	-	-	11
12 Diseases of skin and cellular tissue	6	1	-	-	-	1	2	-	4	7
13 Diseases of bones and organs of locomotion	2	1	-	1	-	1	-	-	1	3
14 Congenital malformations	2	7	-	8	-	1	-	-	-	9
15 Diseases of early infancy	31	25	38	18	-	-	-	-	-	56
16 Senility	3	5	-	-	-	-	-	-	8	8
17 Violent or accidental deaths	40	9	1	-	2	5	10	18	13	49
18 Ill-defined causes of death	2	3	-	1	1	1	-	1	1	5
TOTALS	510	381	39	57	20	56	107	248	364	891





German Measles occupied the premier place amongst the communicable diseases with a total of 1736 cases. German Measles is outstanding or was more from the angle of inconvenience rather than from any question of seriousness of the condition. Heretofore, owing to the lengthy incubation period (approximately 3 weeks) a contact was kept out of school for that period plus eight days quarantine in the event the disease was contracted. In view of this being a mild condition with nothing in the way of complication, The Provincial Government amended the regulations making this a notifiable disease only with no restrictions on contacts.

Scarlet Fever was troublesome throughout the year and assumed epidemic proportions in June. There were 1279 cases in all. Early in the epidemic confusion arose in diagnosis as between this disease and German Measles, in view of in times the great similarity. There is no doubt that as a result some of the missed cases added to the spread. The limited Isolation Hospital accommodation was a great disadvantage and by having to quarantine many families at home, spread took place in families and among neighboring children, because of the mildness of the disease and the reluctance of some parents to observe strict quarantine. Three deaths occurred from scarlet fever and there were a number of complications, particularly Otitis Media (middle ear disease). A surprising number of adults contracted the disease.

Chickenpox saw an incidence of 736 cases. The condition is mild and beyond possibly the confusion with smallpox, there is little or nothing to it. This disease also has been relegated to the category of being a notifiable disease only.

Calgary experienced an outbreak of smallpox in March with 34 cases reported. It is possible as many more cases occurred but being of a very mild type was diagnosed as chickenpox, and it was only on the appearance of a more classical case that the condition came to light. One death occurred from the definite hemorrhagic type. This outbreak was the means of having approximately 15,000 children protected by vaccination. It was little short of remarkable how control was established following the definite recognition of the disease and we were fortunate in being able to bring about isolation immediately by opening the West block of the Isolation Hospital which had been closed for five years.

We are happy to report another year without a case of diphtheria, making the fourth consecutive year during which there has been an absence of the disease in Calgary. This record is peculiar to Calgary and it is not thought equalled by a city of this size in Canada.

There were no cases of infantile paralysis (Anterior Poliomyelitis) reported during the year 1936.

There were three cases of typhoid fever reported and three deaths during the year. A fourth death was a resident from a country point brought into Calgary for hospitalization. Of the three Calgary cases one was definitely known to have contracted the disease while nursing a case in the country, another, a traveller, we have every reason to think got the infection at some country point, and the third, a girl of 14 years, had not been out of town and we could not find the source of infection.

Calgary experienced two cases of Cerebro-Spinal Meningitis (Meningococcic type) and both proved fatal.

## COMMUNICABLE DISEASE

German measles is a communicable disease with a latent period of 15-20 days. German measles is outstanding or was more from the angle of investigation rather than from any question of seriousness or the condition. Heretofore, owing to the long incubation period (approximately 2 weeks), a contact was kept out of school for that period plus a little extra time in the event the disease was contracted. In view of this being a mild condition with nothing in the way of complication, the Provincial Government amended the regulations making this a notifiable disease only with no restriction on contacts.

Scarlet fever was troublesome throughout the year and assumed epidemic proportions in June. There were 1278 cases in all. Early in the epidemic confusion arose in diagnosis as between this disease and German measles, in view of the great similarity. There is no doubt that as a result some of the mixed cases added to the spread. The limited Isolation Hospital accommodation was a great disadvantage and by having to quarantine many families at home, spread took place in families and among neighboring children. Because of the mildness of the disease and the reluctance of some parents to observe strict quarantine, some cases occurred from scarlet fever and there were a number of complications, particularly Otitis Media (middle ear disease). A surprising number of adults contracted the disease.

Chickengox saw an incidence of 750 cases. The condition is mild and beyond possibly the confusion with measles, there is little or nothing to it. This disease also has been reported in the category of being a notifiable disease only.

Calgary experienced an outbreak of measles in March with 84 cases reported. It is possible as many more cases occurred but being of a very mild type was diagnosed as chickengox, and it was only on the appearance of a more classical case that the condition came to light. One death occurred from the definite hemorrhagic type. This outbreak was the means of having approximately 15,000 children protected by vaccination. It was a little short of remarkable how control was maintained following the definite recognition of the disease and we were fortunate in being able to bring about isolation immediately by opening the West block of the Isolation Hospital which had been closed for five years.

We are happy to report another year without a case of diphtheria, making the fourth consecutive year during which there has been an absence of the disease in Calgary. This record is peculiar to Calgary and it is not thought equalled by a city of this size in Canada.

There were no cases of infantile paralysis (Asterion Polio-myelitis) reported during the year 1955. There were three cases of typhoid fever reported and three deaths during the year. A fourth death was a resident from a country point brought into Calgary for hospitalization. Of the three Calgary cases one was definitely known to have contracted the disease while traveling a case in the country, another, a traveler, we have every reason to think got the infection at some country point, and the third, a girl of 14 years, had not been out of town and we could not find the source of infection. Calgary experienced two cases of Cerebro-Spinal Meningitis (Meningococcal type) and both proved fatal.



COMMUNICABLE DISEASESTABLE. No. 9.REPORTED CASES AND DEATHS FROM COMMUNICABLE DISEASES

Disease	Age groups							
	0-4 years		5-14 years		15 and over		Totals	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
Cer.Spinal Meningitis	1	1	-	-	1	1	2	2
Chickenpox	52	-	655	-	29	-	736	-
Diphtheria	-	-	-	-	-	-	-	-
German Measles	86	-	1394	-	256	-	1736	-
Influenza	-	2	-	-	-	25	-	27
Measles	13	1	95	-	31	-	139	1
Mumps	-	-	81	-	23	-	104	-
Paratyphoid Fever	-	-	1	-	3	-	4	-
Pneumonia(all forms)	-	7	-	1	-	29	-	37
Poliomyelitis	-	-	-	-	-	-	-	-
Puerp:Septicaemia	-	-	-	-	-	1	-	1
Scarlet Fever	143	-	976	1	160	2	1279	3
Septic Sore Throat	-	1	-	-	-	-	-	1
Smallpox	-	-	6	-	28	1	34	1
Tuberculosis(all forms)	-	-	-	-	8	12	8	12
Typhoid Fever	-	-	1	1	2	2	3	3
Undulent Fever	-	-	-	-	-	-	-	-
Whooping Cough	85	3	121	-	6	-	212	3
TOTALS	380	15	3330	3	547	73	4257	91

## COMPARATIVE TABLE

TABLE No. 2

## REPORTING CASES AND DEATHS FOR GOVERNMENT MEMBERS

Disease	1st year	2nd year	3rd year	4th year	5th year	6th year	7th year	8th year	9th year	10th year	Total
Cor. Spinal Meningitis	1	-	-	-	-	-	-	-	-	-	1
Chickens	88	-	-	-	-	-	-	-	-	-	88
Diphtheria	-	-	-	-	-	-	-	-	-	-	-
German Measles	88	-	-	-	-	-	-	-	-	-	88
Influenza	-	-	-	-	-	-	-	-	-	-	-
Measles	18	-	-	-	-	-	-	-	-	-	18
Mumps	-	-	-	-	-	-	-	-	-	-	-
Paratyphoid Fever	-	-	-	-	-	-	-	-	-	-	-
Protonia (all forms)	-	-	-	-	-	-	-	-	-	-	-
Polymyositis	-	-	-	-	-	-	-	-	-	-	-
Post-Septicemia	-	-	-	-	-	-	-	-	-	-	-
Scarlet Fever	148	-	-	-	-	-	-	-	-	-	148
Scarlet Spot Fever	-	-	-	-	-	-	-	-	-	-	-
Smallpox	-	-	-	-	-	-	-	-	-	-	-
Tuberculosis (all forms)	-	-	-	-	-	-	-	-	-	-	-
Typhoid Fever	-	-	-	-	-	-	-	-	-	-	-
Unlabeled Fever	-	-	-	-	-	-	-	-	-	-	-
Whooping Cough	88	-	-	-	-	-	-	-	-	-	88
TOTALS	588	18	588	8	588	8	588	8	588	8	588



COMMUNICABLE DISEASES REPORTED, 1936

(shown by months)

	Jan	Feb	Mar	Apr	May	Jun	Jly	Aug	Sep	Oct	Nov	Dec	Totals		
Smallpox	-	3	30	1	-	-	-	-	-	-	-	-	34		
Diphtheria	-	-	-	-	-	-	-	-	-	-	-	-	-		
Scarlet Fever	29	22	51	47	98	143	99	55	91	238	228	178	1279		
Typhoid fever	-	-	1	1	-	-	1	-	-	-	-	-	3		
Paratyphoid Fever	-	-	-	3	1	-	-	-	-	-	-	-	4		
Measles	21	21	15	24	10	10	3	1	7	14	8	5	139		
German Measles	24	130	44	38	34	42	46	124	11	3	7	12	4	2	1736
Mumps	38	19	13	12	10	5	2	-	-	2	1	2	104		
Chickenpox	26	43	11	3	63	120	69	26	30	163	117	65	736		
Erysipelas	1	4	-	-	2	3	2	-	-	1	2	2	17		
Whooping Cough	14	7	12	45	36	29	14	8	5	9	10	23	212		
Pul: Tuberculosis	2	-	2	2	1	-	-	1	-	-	-	-	8		
Cer: Spinal Meningitis	-	1	1	-	-	-	-	-	-	-	-	-	2		
Ant: Poliomyelitis	-	-	-	-	-	-	-	-	-	-	-	-	-		
TOTALS	372	424	574	482	467	434	201	94	140	439	370	277	4274		

## COMMUNICABLE DISEASES REPORTED, 1938

(shown by region)

Totals											
Ant: Polio-myelitis	-	-	-	-	-	-	-	-	-	-	-
Cor: Spinal Meningitis	-	1	1	-	-	-	-	-	-	-	-
Pol: Tuberculosis	3	3	3	1	-	1	-	-	-	-	-
Whooping Cough	14	7	13	43	36	23	14	3	9	10	213
Erysipelas	1	4	-	-	3	3	3	-	1	3	14
Chickenpox	66	43	11	3	63	30	62	23	30	62	736
Mumps	53	12	13	12	10	3	2	-	2	1	104
German Measles	241	104	33	43	11	3	7	13	4	3	1736
Measles	21	21	11	22	10	2	1	7	14	3	139
Paratyphoid Fever	-	-	-	3	1	-	-	-	-	-	4
Typhoid Fever	-	7	1	1	-	1	-	-	-	-	3
Borrel's Fever	62	62	51	47	32	43	32	32	32	32	1879
Diphtheria	-	-	-	-	-	-	-	-	-	-	-
Smallpox	-	3	36	1	-	-	-	-	-	-	36



TABLE. No. 10.

## REPORTED CASES AND DEATHS FROM TUBERCULOSIS 1932-1936

Year	Cases Reported	Number deaths in City	Number of deaths Sanatoria outside	Total Deaths	Rate per 100000 population
1936	8	16	4	20	24.0
1935	27	8	6	14	16.8
1934	38	10	11	21	25.2
1933	30	18	7	25	30.0
1932	8	23	8	31	37.2

TABLE. No. 11

## REPORTED CASES AND DEATHS FROM SCARLET FEVER, DIPHTHERIA, WHOOPING COUGH AND MEASLES 1934-1936

	Cases			Deaths			Rate per 100000 population		
	1936	1935	1934	1936	1935	1934	1936	1935	1934
Scarlet Fever	1279	166	93	3	-	-	3.6	-	-
Diphtheria	-	1	-	-	-	-	-	-	-
Whooping Cough	212	217	166	4	1	-	4.8	1.2	-
Measles	139	1492	14	1	1	-	1.2	1.2	-

Included in the above is one non-resident death from whooping cough.

TABLE. No. 12.

REPORTED CASES AND DEATHS FROM TYPHOID FEVER 1932-1936  
(total number including non-residents)

Year	Cases	Deaths	
		Number	Rate per 100000 population
1936	3	4	4.8
1935	2	1	1.2
1934	3	2	2.4
1933	4	-	-
1932	5	2	2.4

Number of deaths of non-residents included in the above are:  
1936 one, 1935 one, 1934 one, 1933 nil, and 1932 one.

TABLE 10. 10. 10. REPORTED CASES AND DEATHS FROM TYPHOID FEVER 1922-1926

Year	Cases Reported	Number Deaths in City	Number Deaths Outside City	Total Deaths	Rate per 100,000 population
1922	8	16	4	20	24.0
1923	27	8	6	14	16.8
1924	28	10	11	21	25.2
1925	30	16	7	23	27.6
1926	8	23	8	31	37.2

TABLE 10. 11. REPORTED CASES AND DEATHS FROM SCARLET FEVER 1922-1926

Year	Cases Reported	Number Deaths in City	Number Deaths Outside City	Total Deaths	Rate per 100,000 population
1922	1279	167	20	187	22.8
1923	1	-	-	-	-
1924	212	615	103	730	88.8
1925	155	103	14	172	20.6
1926	1	1	1	3	3.6

Included in the above is one non-resident death from whooping cough.

TABLE 10. 12. REPORTED CASES AND DEATHS FROM DYPHTERIA 1922-1926

Year	Cases Reported	Number Deaths in City	Number Deaths Outside City	Total Deaths	Rate per 100,000 population
1922	2	-	-	-	-
1923	2	-	-	-	-
1924	2	-	-	-	-
1925	4	-	-	-	-
1926	8	-	-	-	-

Number of deaths of non-residents included in the above are: 1922 one, 1923 one, 1924 one, 1925 one, 1926 one.



The department was very active in conferring immunity against those conditions for which we have active immunizing agents. The occurrence of scarlet fever in epidemic proportions and the outbreak of smallpox accounted for this. This year saw the introduction of the combined method of conferring immunity against both scarlet fever and diphtheria. Sixty-one availed themselves of this form of immunity, the efficiency of which bids fair to be most promising.

It was suggested in 1936 that all incoming groups of pupil nurses at the General Hospital submit themselves to immunizing measures against scarlet fever before entering training. It has happened in the past that on going to the Isolation Hospital for their training in that line, one or two of the pupils have contracted scarlet fever. In the reading of the tests to determine immunity in the first group so immunized, it was found that all but two were immune and these two have been given a further inoculation which no doubt will render them immune.

The following is a statement of the work in this connection:

DIPHTHERIA TOXOID. Quantity distributed by the department during the year 1936 was sufficient for 749 persons.

Number of persons who received the three doses in this department was 402.

SMALLPOX VACCINE. Total number of capillary tubes of vaccine distributed by the department in 1936 was 14,960.

Number of persons vaccinated by the department staff was 4462 in the office and 2568 in schools. Total 7030.

SCARLET FEVER TOXIN. Quantity distributed by the department during 1936 was sufficient for 651 persons.

Number of persons given the five doses by the department staff was 131.

COMBINED SCARLET FEVER TOXIN AND DIPHTHERIA TOXOID.

Number of persons given the combined treatment by department staff was 61.

The work done by the nurse in this connections is as follows:

	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec	Totals
Inoculations	135	87	115	155	123	173	145	124	141	188	238	341	1965
Swabs taken	2	13	11	4	3	1	9	9	6	-	1	2	61
Vaccinations	132	82	93	71	110	28	23	12	19	19	10	6	4462
Schick Tests made	-	17	-	-	1	-	16	1	-	1	-	2	38
Dick Tests made	-	-	12	-	-	12	1	2	-	20	3	30	80
Investigations made	35	63	21	54	68	48	32	22	13	54	42	38	490
Total visits made	171	180	76	142	151	123	123	141	73	131	128	126	1565

# INVESTIGATION REPORT

The department was very active in conducting laboratory against these conditions for which we have active laboratory units. The occurrence of scarlet fever in children was reported and the outbreak of scarlet fever was reported for this year. The laboratory of the department is now conducting an investigation of the occurrence of scarlet fever and diphtheria. Sixty-two children of this form of immunity, the efficiency of which is to be most promising.

It was suggested in 1923 that all laboratory groups of public health at the General Hospital should be organized to investigate the occurrence of scarlet fever and diphtheria. It was suggested in the past that on going to the General Hospital for their training in scarlet fever, one or two of the public have contracted scarlet fever. In the reading of the tests for scarlet fever in the first group as determined, it was found that all but two were immune and these two have been given a further inoculation which no doubt will render them immune.

The following is a statement of the work in this connection:

connection:

DIPHTHERIA TOXIN. Quantity distributed by the department during the year 1923 was sufficient for 750 persons.

Number of persons who received the three doses in this department was 402.

SHARLOT WACCHER. Total number of scarlet fever cases of vaccine distributed by the department in 1923 was 12,000.

Number of persons vaccinated by the department in 1923 was 645 in the office and 200 in schools. Total 845.

SCARLET FEVER TOXIN. Quantity distributed by the department during 1923 was sufficient for 411 persons.

Number of persons given the five doses by the department staff was 111.

COMBINED SCARLET FEVER TOXIN AND DIPHTHERIA TOXIN. Number of persons given the combined treatment by department staff was 41.

The work done by the nurse in this connection is as follows:

Follows:

Year	Scarlet fever toxin	Diphtheria toxin	Combined treatment	Total
1923	402	111	41	554
1922	350	100	30	480
1921	300	90	20	410
1920	250	80	10	340
1919	200	70	10	280
1918	150	60	10	220
1917	100	50	10	160
1916	50	40	10	100
1915	40	30	10	80
1914	30	20	10	60
1913	20	10	10	40
1912	10	10	10	30
1911	10	10	10	30
1910	10	10	10	30
1909	10	10	10	30
1908	10	10	10	30
1907	10	10	10	30
1906	10	10	10	30
1905	10	10	10	30
1904	10	10	10	30
1903	10	10	10	30
1902	10	10	10	30
1901	10	10	10	30
1900	10	10	10	30



SERA AND VACCINES USED BY THE CITY OF CALGARY  
OR DISTRIBUTED TO CALGARY PHYSICIANS IN 1936  
SUPPLIED BY PROVINCIAL BOARD OF HEALTH, EDMONTON.

Anti-Tetanus Antitoxin. 1500 units. prophylactic dises.	7
Combined Pertussis Vaccine (Whooping Cough) 5.cc's.	146
Diphtheria Antitoxin. 5000 units (treatment)	62
" " 20000 units (treatment)	9
" " 1000 units (prophylactic)	12
Scarlet Fever Antitoxin. 6000 units (treatment)	690
" " " 2000 " (prophylactic)	449
Material for the Schick Test (packages)	22
" " " Dick " "	133
Diphtheria Toxoid. pkgs for one person.	749
Scarlet Fever Toxin, " " "	651
" " " pkgs for 6 persons	6
Typhoid and Paratyphoid Vaccines. 25 cc's	66
Smallpox Vaccine. capillary tubes	14,960

Material for treatment is "chargeable"

Material for prevention is issued free.





Again we have to report a very active year in this regard. As always the case during epidemics of one sort or another, the duties of the Quarantine Officer in the maintenance of communicable disease regulations early got out of hand and it was impossible for this officer to keep up with the work. As a consequence, the whole staff had to assist in addition to their regular duties. During the year 1936 as in 1935 quarantine duties have been very heavy and the departmental energies have been taxed to the utmost. This situation has always been more or less of a problem and necessitates leaving other phases of work until the epidemic or epidemics subside. It is not considered wise to have the Dairy Inspectors associated in any way with communicable diseases but under the stress of circumstances as mentioned before, it became an absolute necessity to detail the entire staff on control duty at various times. The quarantine officer has perforce to be on duty at all hours, seven days a week.

Details of the work in this connection follow:

	Jan	Feb	Mar	Apr	May	Jun	Jly	Aug	Sep	Oct	Nov	Dec
Quarantines	295	401	561	441	387	359	102	53	98	228	192	157
Released from quar:	187	326	555	472	383	453	154	44	49	89	193	190
Patients moved to hospital	29	20	59	45	67	76	74	52	70	84	97	85

This shows a total of 3274 places quarantined, 3095 places released from quarantine and 758 patients moved to hospital in the communicable diseases ambulance.

### SANITATION

The Chief Sanitary Inspector and his two assistants have been very actively engaged throughout the entire year and whilst present financial conditions do not permit much in the way of new structure and expensive improvement, yet a good deal has been accomplished of distinct improvement nevertheless.

In addition to the many phases coming within the scope of sanitary inspection, a continuation of the effort started in 1935 to improve sanitary conditions in common rooming houses was carried on. It is known that a good deal of overcrowding obtains in these premises as well as in light-housekeeping suites, but for the lack of available space, it was considered best to literally mark time until some programme was evolved to ease the situation.

Several surveys of rooming houses were undertaken, stress being laid on sanitary improvement, and whilst it is admitted the overcrowding has not abated, a good deal of renovation has been taken care of and a vast amount of cleansing has been accomplished in addition to a much needed replacement of worn out and distinctly shabby furniture, bedding, floor covering, etc.

One or two places long used as rooming houses or light-housekeeping suites have been condemned, others were closed temporarily pending completion of repairs and cleansing.

The production, preparation, distribution and handling of foodstuffs has been rigidly supervised and sanitary regulations in this regard stressed and enforced.

Again we have to report a very active year in this regard. As always the case during the period of the last or another, the duties of the Quarantine Officer in the maintenance of communicable disease regulations only got out of hand and it was impossible for this officer to keep up with the work. As a consequence, the whole staff had to assist in addition to their regular duties. During the year 1955 as in 1954 quarantine duties have been very heavy and the departmental expenses have been added to the account. This situation has always been one of a problem and necessitates leaving other phases of work until the epidemic or epidemic subsides. It is not considered wise to have the Daily Reports associated in any way with communicable diseases but under the stress of circumstances as mentioned before, it became an absolute necessity to detail the entire staff on control duty at various times. The quarantine officer has therefore to be on duty at all hours, seven days a week.

Details of the work in this connection follow:

Quarantine	Released from Quarantine	Patients moved to hospital
Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec	255 401 501 551 551 551 551 551 551 551 551 551	185 185 185 185 185 185 185 185 185 185 185 185

This shows a total of 5575 patients quarantined, 5035 patients released from quarantine and 185 patients moved to hospital in the communicable diseases division.

### LABORATORY

The Chief Sanitary Inspector and his two assistants have been very actively engaged throughout the entire year and so far present financial conditions do not permit much in the way of new equipment and expensive laboratory work. A good deal has been accomplished of diagnostic laboratory work within the scope of available resources, a continuation of the work started in 1955 to improve sanitary conditions in common rooming houses was carried on. It is known that a good deal of overcrowding exists in these premises as well as in light-houses and others, but for the lack of available space, it was impossible to do anything more than until some programme was devised to ease the situation. Several surveys of rooming houses were undertaken, action being taken to sanitary improvement, and while it is admitted the overcrowding has not abated, a good deal of improvement has been taken care of and a vast amount of educating has been accomplished in addition to a much needed replacement of worn out and faulty sanitary furniture, bedding, floor covering, etc. One or two places have been used as rooming houses or light-housekeeping units have been converted, others were closed temporarily pending completion of repairs and cleaning. The production, preparation, distribution and handling of foodstuffs has been rigidly supervised and sanitary regulations in this regard stressed and enforced.



As mentioned above duties attaching to this division have been excellently performed and the following table shows the amount of work involved:

	Jan	Feb	Mar	Apr	May	Jun	Jly	Aug	Sep	Oct	Nov	Dec	Total
Inspections made	782	746	740	819	793	880	468	793	897	815	814	786	9333
Notices issued - written	23	7	23	32	21	31	24	23	17	23	18	16	258
Notices issued - verbal	142	151	185	172	158	167	101	164	123	143	148	41	1695
Complaints received	21	23	47	58	73	58	36	39	38	48	39	18	498
Complaints justified	18	21	39	48	67	47	28	36	34	39	36	13	426

It was not found necessary to institute prosecution in any case during the year. When occasion suggested such action we were eventually able to have the matters adjusted satisfactorily without resort to drastic procedure.

#### MEAT INSPECTION

One officer takes care of the duties in this division of service and is in charge of meats processed at the Leimbock Abattoir, the only abattoir in the City which is not under Dominion Government Inspection. In addition this officer attends at the Meat Inspection Room each morning to inspect veal carcasses brought in by farms and others for subsequent consumption in Calgary.

The work in this connection has been satisfactorily discharged during the year.

Commencing January 3rd 1936, a scale of fees for inspection was instituted at both the Meat Inspection Room and the Leimbock Abattoir, and following minor changes, has been in effect throughout the year. The revenue accruing to the City as a result amounted to \$1,377-30 a revenue which it is felt is warranted.

The following table shows the work in this connection.

	Jan	Feb	Mar	Apr	May	Jun	Jly	Aug	Sep	Oct	Nov	Dec	Total
<b>SUBMITTED</b>													
Beef	250	285	202	226	247	253	200	237	271	381	288	234	3074
Veal	209	145	207	233	199	201	277	232	351	367	173	238	2832
Hogs	58	46	88	77	85	84	69	44	30	35	64	67	747
Sheep & Lamb	10	1	1	5	27	88	115	41	55	42	27	3	415
<b>CONDEMNED</b>													
Beef	5 $\frac{1}{2}$	7	5	5	7	5	6	7 $\frac{1}{2}$	5	3	21	11	88
Veal	1 $\frac{1}{2}$	1	-	2	1	1	1	2	2	-	2	2	15 $\frac{1}{2}$
Hogs	5 $\frac{1}{4}$	6 $\frac{1}{2}$	7 $\frac{1}{2}$	10	12 $\frac{1}{2}$	12 $\frac{1}{2}$	13	10	2	3 $\frac{1}{2}$	8 $\frac{1}{2}$	8	99 $\frac{1}{4}$
Sheep & Lamb	-	-	-	-	-	1	2	3 $\frac{1}{4}$	$\frac{1}{4}$	-	1	-	7 $\frac{1}{2}$
Beef heads	10	2	10	8	5	11	13	16	8	15	20	9	127
Beef hearts	5	8	9	8	12	4	10	10	7	11	22	16	122
Beef Livers	66	46	45	57	63	40	39	61	48	70	62	60	657
Veal Livers	3	4	15	12	6	8	13	14	16	15	13	15	134
Hog heads	13	6	30	13	22	28	10	15	17	7	12	20	193
Hog hearts	1	-	3	8	-	4	-	-	17	1	-	12	46
Hog livers	22	22	32	30	45	46	34	29	-	23	33	39	355
Sheep livers	-	-	-	-	11	35	61	34	28	33	20	3	225





MILK AND DAIRY INSPECTION

This work has to do with the sanitary control of the production, processing, handling and distribution of milk and involves continuous supervision over the entire milk shed, which has a considerable radius. One inspector assumes charge of the production on the numerous farms and the other supervises the distribution and handling in the city, as also the sanitary control of the several cowkeepers within the City Limits.

It came to the notice of the department in 1935 and again in 1936, that there is a strong feeling among certain shippers that the annual license fee is in excess of what it should be. So strong was this impression that representations were made to the City Council to have the fee reduced from its present \$10.00 to \$5.00. The present fee is more or less based on the expense entailed by the City in the maintenance of sanitary control which exceeds \$6000 per year. The expense of control is approximately \$800 per year more than the total amount collected in fees from this industry. It is true that the City of Edmonton has a license fee of \$5.00 but their milk shed is confined within a radius of fifteen miles. Calgary's milk shed is quite extensive and it is necessary at times for the inspector to spend a whole week at various points to adequately cover the district.

Some time ago a milk condensary was established in Red Deer and in the interests of their supply they tap a district South of Red Deer that overlaps the Northern part of our district where a large portion of our cream supply is produced. There is no license fee charged in Red Deer and the basis on which their milk supply is purchased is 30 cents per pound of butter fat, a price which would seem to be in excess of that paid by the one plant in Calgary obtaining milk and cream from this district. The contention is that if the farmer gets less in Calgary than he could get in Red Deer, it would pay him to ship to Red Deer, especially as there is a \$10.00 license fee charged those who ship milk or cream to Calgary. The district referred to, in the main, ships cream, the skim milk is retained by the farmer as food for his stock. If he ships milk to Red Deer he gets a little better price on a cream basis but he does not have the advantage of retaining the skim milk which is of value for the feeding of his stock. This argument will obviously offset the one having to do with the \$10.00 license fee. If any number of these farms do ship to Red Deer, it may at times occasion some shortage in the supply of table cream and cream for the manufacture of ice cream to Calgary. These are not the only arguments existent and it is true that the whole question of production, processing, and eventual consumption is much involved, and the ironing out of the many difficulties and intricacies involving every phase is long past due.

The work in this branch of the department was very satisfactorily carried out during the year and the following tables show the amount of work involved:

# MILK AND DAIRY INSPECTION

This work has to do with the sanitary control of the production, processing, handling and distribution of milk and involves continuous supervision over the entire milk shed, which has a considerable radius. One inspector examines change of the production on the numerous farms and the other supervises the distribution and handling in the city as also the sanitary control of the several cooperatives within the City limits.

It came to the notice of the department in 1925 and again in 1926 that there is a strong feeling among certain shippers that the annual license fee is in excess of what it should be. It is known that this inspection that representations were made to the City Council to have the fee reduced from the present \$10.00 to \$5.00. The present fee is same as fees based on the expenses incurred by the City in the maintenance of sanitary control which exceeds \$8000 per year. The expense of control is approximately \$800 per year more than the total amount collected in fees from this industry. It is known that the City of Edmonton has a license fee of \$5.00 per dairy which is contained within a radius of fifteen miles. Calgary's milk shed is quite extensive and it is necessary at times for the inspector to spend a whole week at various points to adequately cover the district.

Some time ago a milk condenser was established in Red Deer and in the interests of their supply they ran a district South of Red Deer that overlaps the northern part of our district where a large portion of our cream supply is produced. There is no license fee charged in Red Deer and the cream on which their milk supply is purchased is 50 cents per pound of butter fat, a price which would seem to be in excess of that paid by the one plant in Calgary obtaining milk and cream from this district. The contention is that if the former price paid in Calgary then he could not in Red Deer, it would pay him to ship to Red Deer, especially as there is a \$10.00 license fee charged there who ship milk or cream to Calgary. The district referred to, in the main, ships cream, the milk is retained by the farmer as food for his stock. If he ships milk to Red Deer he gets a little better price on a cream basis but he does not have the advantage of retaining the milk which is of value for the feeding of his stock. This argument will obviously offset the one having to do with the \$10.00 license fee. If any number of these farms do ship to Red Deer, it may at times occasion some shortage in the supply of table cream and cream for the manufacture of ice cream in Calgary. There are not the only arguments advanced and it is true that a whole question of production, processing, and eventual consumption is much involved, and the working out of the many difficulties and intricacies involving every phase is long and slow.

The work in this branch of the department was very satisfactorily carried out during the year and the following tables show the amount of work involved:



## MILK INSPECTION

	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec	Total
Inspections in country	117	47	48	83	83	81	142	2	113	164	94	81	1055
Inspections in City	105	150	474	440	425	301	161	89	172	71	140	177	2705
Complaints received	2	2	2	2	3	4	2	-	2	3	-	2	24
Complaints justified	1	1	1	1	2	2	2	-	2	1	-	1	14
Notices issued written	27	22	28	25	22	22	69	59	42	37	19	34	406
Notices issued verbal	17	11	10	17	14	11	12	2	11	10	7	11	133
Licenses suspended	1	-	1	1	-	-	1	1	1	-	1	1	8
Prosecutions	-	6	-	-	-	-	-	-	-	-	-	-	6
Permits issued:													
Dairymen	357	-	-	-	2	-	3	-	-	1	-	-	363
Vendors	244	-	-	-	-	-	-	-	-	-	-	-	244
Cowkeepers	183	-	3	2	-	4	4	2	5	4	-	-	207
Wagons	120	-	-	-	-	-	-	-	-	-	-	-	120
Past;plants	4	-	-	-	-	-	-	-	-	-	-	-	4
Sediment tests made	406	265	251	309	240	197	313	309	388	312	240	330	3560
Methylene Blue Reductase tests	405	252	248	309	240	197	313	309	389	309	237	330	3538
Butter Fat Tests	59	51	41	41	43	35	42	42	43	40	40	40	517
Total milk and cream samples	752	453	459	575	436	281	589	571	733	578	455	614	6496
Water samples taken	7	-	-	-	-	-	-	-	-	1	1	3	12

Of the 3256 sediment tests made of producers shipments of milk, 2909 or 89.3% graded Good, 182 or 5.6% graded Fair, and 165 or 5.1% graded Bad.

Of the 304 sediment tests made of samples of retail milk, 301 or 99.0% graded GOOD, 1 or 0.32% graded FAIR and 2 or 0.68% graded BAD.

Of the 3108 reductase tests of producers shipments, 2874 or 92.4% graded No.1, 224 or 7.2% graded No.2, and 10 or 0.4% graded No.3.

Of the 78 reductase tests of retail samples of pasteurized all graded No.1.

Of the 304 reductase tests of samples of retail raw milk, 303 or 99.3% graded No.1, and 2 or 0.4% graded No.2.

This grading in accordance with Standard Methods of American Public Health Association.

The average per capita consumption of milk per day is 0.62 pints.





## CHILD WELFARE SECTION

The work in this Division is under the control of Dr. Geraldine Oakley, and covers the activities resulting from School Medical Inspection Service, examinations in the Pre-School Clinic, the Infant Clinic, and the exercise of supervision over the School and Pre-School Dental Services. The attendance at these several clinics since the amalgamated services were inaugurated has increased very considerably, entailing much extra office work, filing, etc. There is no doubt that owing to this and as time goes along these increasing secretarial duties will demand extra office staff.

Dr. Oakley's report follows:

TOTAL EXAMINATIONS OF SCHOOL CHILDREN MADE BY TWO EXAMINING  
PHYSICIANS (one on part-time).

	<u>Re-exams.</u>	<u>Beginners</u>	<u>Totals</u>
Physical examinations made	4761	1422	6183
Special cases	1826		1826
Not vaccinated	1944	727	2671
10% or more below normal weight	745	155	900
7-10% below normal weight	570	168	738
Enlarged glands	109	88	197
Enlarged thyroid	32	4	36
Anaemia	16	2	18
Cardiac disturbance	61	9	70
Chorea	7	4	11
Pulmonary disturbance:			
General	2	5	7
Suspected T.B.	0	1	1
Bronchitis	2	3	5
Asthma	1	0	1
Skin diseases:			
Acne	3	0	3
Scabies	11	2	13
Impetigo	6	0	6
Eczema	0	3	3
Miscellaneous	12	5	17
Digestive disturbance	3	1	4
Defective Vision	544	50	594
Other eye defects	1	0	1
Defective hearing	61	26	87
Enuresis	0	6	6
Defective extremities	22	3	25
Defective spine & posture	7	2	9
Defective chest	1	1	2
Defective nasal breathing	128	63	191
Enlarged adenoids & tonsils	199	72	271
Mod. " " "	471	271	742
Psychological abnormalities:			
Behaviour problems		9	9
Mental		1	1
Unclassified medical defects:			
Obesity	16	4	20
Epilepsy	1	0	1

## CHILD WELFARE DIVISION

The work in this Division is under the control of Dr. Geraldine Oakley, and covers the activities resulting from School Medical Inspection Services; examinations in the Pre-School Clinic, the Infant Clinic, and the extension of supervisory work to the School and Pre-School Dental Services. The attendance at these several clinics since the organized services were inaugurated has increased very considerably, resulting much extra office work, filing, etc. There is no doubt that owing to this and as time goes along there increasing extra-duty duties will demand extra office staff.

Dr. Oakley's report follows:

TOTAL EXAMINATIONS OF SCHOOL CHILDREN MADE BY TWO EXAMINING PHYSICIANS (one on part-time).

Physical examinations made	Examinations	Part-time	Totals
Special cases	1,001	1,001	2,188
Not vaccinated	1,001	1,001	1,001
10% or more below normal weight	742	100	842
7-10% below normal weight	270	100	370
Enlarged glands	100	100	200
Enlarged thyroid	20	20	40
Anaemia	10	10	20
Cardiac disturbance	10	10	20
Chorea	7	7	14
Pulmonary disturbance:			
General	2	2	4
Suspected T.B.	0	0	0
Bronchitis	2	2	4
Asthma	1	1	2
Skin diseases:			
Acne	2	2	4
Scabies	11	11	22
Impetigo	2	2	4
Eczema	0	0	0
Miscellaneous	12	12	24
Digestive disturbance	2	2	4
Defective vision	244	244	488
Other eye defects	1	1	2
Defective hearing	61	61	122
Emphysema	0	0	0
Defective extremities	22	22	44
Defective spine & posture	7	7	14
Defective chest	1	1	2
Defective nasal breathing	128	128	256
Enlarged adenoids & tonsils	100	100	200
Mod.	471	471	942
Psychological abnormalities:			
Behavior problems	0	0	0
Mental	1	1	2
Unidentified medical defects	10	10	20
Obesity	1	1	2
Epilepsy	1	1	2



## Unclassified medical defects (continued)

	<u>Re-exams.</u>	<u>Beginners</u>	<u>Totals</u>
Muscular atrophy	0	1	1
Worms	0	3	3
Glandular disturbance	0	1	1
Unclassified	2	0	2
Unclassified surgical defects:			
Hernia	3	7	10
Cleft palate	3	0	3
Phimosis	6	16	22
Unclassified	2	0	2
Received Toxoid	548	284	832
Number O.K.	1981	492	2473
Parents invited	10	1490	1500
Parents present	10	1176	1186

The number of complete physical examinations, 6183, is lower than usual because of the epidemic of Smallpox in February and March. A large portion of the time ordinarily devoted to physical examination had to be spent in vaccinating. Vaccinations were performed in the schools of the districts most affected and also at the City Hall office. The disease first appeared in the King Edward district. Several cases of Chickenpox had been reported there, and a more thorough checkup proved them to be mild cases of Smallpox. Fortunately, practically all of the cases were of a mild nature and the disease was stamped out in about six weeks. The annual report for 1935 gave the percentage of school children who were not vaccinated as 63.6%. The percentage in 1936 was 43.2, a reduction of 20%.

During the first few months of the year a few odd cases of Scarlet Fever were reported. In April the number of cases among school children increased to 29. May and June showed a further slight increase. During the Fall months the disease was widespread. It reached its peak in October when 238 cases for the whole city were reported, about two-thirds of which were school children. In November and December there was a gradual decrease in the prevalence of this disease. It is to be hoped that more parents will take advantage of the prophylactic measures provided for the prevention of Diphtheria and Scarlet Fever. The toxoid inoculation for the prevention of Diphtheria has been thoroughly tried out over a long period of years and its reliability can be vouched for. A scheme of combining the toxoid inoculation for Diphtheria with a similar inoculation for the prevention of Scarlet Fever has now been worked out. Five doses of the combination are given at intervals of one or two weeks as directed. These inoculations are given free by the local Health Department to children who present themselves at the office with a card giving the parents' consent.

900 children, or 14.5% were found to be 10% or more below average weight for their age and height. This percentage is exactly the same as was found last year. Another 738, or 11.9% were between 7 and 10% below average weight. Efforts are constantly being made by this department to combat underweight. Recent





arrivals to the city from rural districts are frequently mal-nourished and make it difficult to bring about a reduction in the number of underweights. Approximately 800 half-pint bottles of milk are distributed daily to these children at school recess during the winter months.

36 children, or .58%, had some enlargement of the thyroid gland. Two cases of toxic goitre were found, but the others were simple enlargement only. Iodine tablets are given free to most of these cases.

594 or 9.6% of the children examined required glasses, or a change of glasses. The sight-saving class takes care of 20 of the worst cases. Free glasses were supplied to 160 cases.

87, or 1.4%, have defective hearing. We have a list of 9 children so deaf as to make lip-reading advisable. Another 12 have defective speech which could be markedly improved by special exercises. A special teacher trained for this work could take care of these two types of handicapped children. It is to be hoped such a class may be started in the near future.

70, or 1.1% have an organic heart condition. This percentage is exactly the same as that found last year. Most of the heart lesions followed tonsillitis, chorea, or rheumatism. A few are congenital.

271, or 4.38% had enlarged or diseased tonsils, the removal of which was urgently advised. We referred a total of 814 cases of abnormal tonsils to the family physician, but most of the additional cases of these were not serious. Members of the Calgary Medical Association operated free on a number of these cases for whom treatment could not have been secured otherwise.

19 children were referred to the T.B. Clinic for a chest examination. Several of these are being kept under observation. One child was found to be moderately active and was excluded from school.

Ten cases were referred to the Behaviour Clinic conducted by the Provincial Health Department. Principals referred an additional dozen cases.

2473, or 40.1% of the children examined were found to be quite O.K.

1186, or 79% of the parents attended the physical examination of their child made at the time of his entering school.

arrivals to the city from rural districts are frequently malnourished and make it difficult to obtain about a reduction in the number of underweight. Approximately 800 half-pint bottles of milk are distributed daily to these children at school recess during the winter months.

36 children, or 1.5%, had some enlargement of the thyroid gland. Two cases of toxic goitre were found, but the others were simple enlargement only. Iodine tablets are given free to most of these cases.

64 or 2.6% of the children examined required glasses, or a change of glasses. The eight-year-old class takes care of 30 of the worst cases. Free glasses were supplied to 150 cases.

87, or 3.5%, have defective hearing. We have a list of 9 children so deaf as to make lip-reading advisable. Another 12 have defective speech which could be markedly improved by special exercises. A special teacher trained for this work would take care of these two types of handicapped children. It is to be hoped such a class may be started in the near future.

70, or 2.8%, have an organic heart condition. This percentage is exactly the same as that found last year. Most of the heart lesions followed tonsillitis, scarlet fever, or rheumatism. A few are congenital.

87, or 3.5%, had enlarged or diseased tonsils, the removal of which was urgently advised. We referred a total of 816 cases of abnormal tonsils to the family physician, but most of the additional cases of these were not serious. Members of the Calgary Medical Association operated free on a number of these cases for whom treatment could not have been secured otherwise.

19 children were referred to the T.B. Clinic for a chest examination. Several of these are being kept under observation. One child was found to be moderately active and was excluded from school.

Ten cases were referred to the Behaviour Clinic conducted by the Provincial Health Department. Principals referred an additional seven cases.

1475, or 60.1% of the children examined were found to be quite O.K.

1186, or 47% of the parents attended the physical examination of their child made at the time of the entering school.



Cases referred to family physician throughout year

Cases treated by family physician throughout year

Malnutrition	10	4
Anaemia	4	0
Behaviour problems	2	2
Enlarged Thyroid	18	9
Nervous disorders	7	7
Cardiac	3	1
Ringworm	1	2
Eczema	1	1
Impetigo	1	2
Scabies	7	5
Miscellaneous	1	2
Defective vision	436	234
Other eye defects	5	2
Asthma	1	0
Defective hearing	43	11
Defective nasal breathing	8	0
Abnormal adenoids & tonsils	814	209 operations 6 treatments
Pulmonary disturbance	3	1
Enlarged glands	3	2
Unclassified medical defects:		
Obesity	3	0
Quinsy	1	1
Meniere's Disease	1	1
Worms	2	2
Unclassified	2	2
Unclassified surgical defects:		
Orthopaedic	2	2
Appendicitis	1	1
Hernia	4	1
Fracture	2	2
Minor Surgery	3	3
Phimosi	21	1
Mastoid	1	1
Lumbago	1	0
Unclassified	4	4
Totals .....	1416	521

REPORT OF DISTRICT NURSES (9 nurses)

Re-admissions	1	Tonsils and adenoids	570
Health Talks	273	Enlarged glands	123
No. in class inspections	80,591	Orthopaedic defects	25
Special inspections	31,144	Malnutrition	426
Referred to Medical Inspector	1,214	Smallpox	1
Phones and Notes	4,148	Whooping Cough	26
Treatments	3,265	Scarlet Fever	172
Exclusions	215	Chickenpox	247
Pediculosis	11	Conjunctivitis	40
Eye defects	611	Tonsillitis	31
Ear defects	67	Scabies	29
Defective nasal breathing	75	Ringworm	13

Cases referred to family  
physician throughout year

Cases referred to family  
physician throughout year

Malnutrition	10	4
Anemia	4	3
Behavior problems	18	3
Enlarged thyroid	18	3
Nervous disorders	7	3
Cervical	3	3
Rhinorrhea	1	1
Ecema	1	1
Impetigo	1	1
Scabies	1	1
Miscellaneous	11	3
Defective vision	428	24
Other eye defects	5	2
Asthma	1	0
Defective hearing	25	11
Defective nasal breathing	0	0
Abnormal adenoids & tonsils	814	209 operations 6 treatments
Pulmonary & pleuritic	5	1
Enlarged glands	5	2
Unclassified medical defects		
Osteitis	8	0
Gonorrhea	1	1
Meniere's Disease	1	1
Vernix	3	8
Unclassified	5	3
Unclassified surgical defects		
Orthopedic	8	3
Appendicitis	1	1
Hernia	4	1
Fracture	3	2
Minor surgery	5	2
Rhinoma	21	1
Nasoids	1	1
Lamago	1	0
Unclassified	4	4
TOTAL	1010	321

REPORT OF TREATMENT NUMBER (2 Cases)

Es-schistosomes	1	270
Health Tails	278	122
No. in class inspection	80,001	28
Special inspection	51,144	428
Referred to Medical Inspector	1,414	1
Phonics and Notes	4,148	20
Treatments	2,208	172
Examinations	318	247
Pediatric	11	40
Eye defects	511	31
Ear defects	07	29
Defective nasal breathing	75	18
Rhinorrhea		
Scabies		
Tonsillitis		
Conjunctivitis		
Cholera		
Enlarged glands		
Orthopedic defects		
Malnutrition		
Enlarged thyroid		
Nervous disorders		
Cervical		
Rhinorrhea		
Ecema		
Impetigo		
Scabies		
Miscellaneous		
Defective vision		
Other eye defects		
Asthma		
Defective hearing		
Defective nasal breathing		
Abnormal adenoids & tonsils		
Pulmonary & pleuritic		
Enlarged glands		
Unclassified medical defects		
Osteitis		
Gonorrhea		
Meniere's Disease		
Vernix		
Unclassified		
Unclassified surgical defects		
Orthopedic		
Appendicitis		
Hernia		
Fracture		
Minor surgery		
Rhinoma		
Nasoids		
Lamago		
Unclassified		



Impetigo	22	Eczema	26
Measles	434	Mumps	11
Home visits made	5661	Pre-school visits made	43
			256

### REPORT OF THE DENTAL CLINIC

It will be noted that 15,060 pupils were inspected by the school dentist. All pupils in the public schools were examined once and most of the lower grades (from 1 to 4 inclusive) were examined twice. The number with perfect teeth at time of inspection was 4466 or 29.6%.

A total of 8614 cases were cared for at the clinic. 394 extractions of permanent teeth and 2383 extractions of primary teeth were performed. A total of 9339 fillings were inserted.

#### Treatments:

Silver Nitrate Reduction	3004
Opened pulp	354
Lanced abscess	9

#### Extractions:

Permanent	394
Deciduous	2383
Gas anaesthetic	5

#### Fillings:

Various	9044
Copper Amalgam Bases	264
Copper Cement Bases	31

No treatment given	297
Refused treatment	120
Prophylaxis	156
Frenum cauterization	2
Miscellaneous operations	217
Total operations	15,643
Completed cases	6974

#### Total number teeth treated:

Permanent	7178
Deciduous	<u>4760</u>
	11,938

New patients	1478
New cases current year	3852
Re-appointments	2614
Emergency cases	636
Total number of patients treated	8614

Number inspected	15,060
Number needing treatment	8084
Need nothing at date of inspection	2526
Number found to be O.K	4466

#### Defective teeth:

Permanent	11,050
Deciduous	<u>4,737</u>
	15,787

Number of talks given by dentists in schools to Grade VIII students during the year was 26.

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Respectfully submitted,

GERALDINE OAKLEY. M.D.

Assistant Medical Officer of Health.

55  
11  
45  
208

Home visit made  
5001  
444  
444  
444

Inspected  
Mental  
Home visit made

REPORT OF THE DENTAL CLINIC

It will be noted that 15,000 pupils were inspected by the school dentist. All pupils in the public schools were examined and most of the lower grades (from 1 to 4 inclusive) were examined twice. The number with perfect teeth at time of inspection was 444 or 29.6%.

A total of 5014 cases were noted for the clinic. 100 extractions of permanent teeth and 2885 extractions of primary teeth were performed. A total of 9500 fillings were inserted.

Extractions:		Fillings:	
Permanent	100	Various	9500
Primary	2885	Copper Amalgam Cases	4750
Decayed	5	Copper Cement Cases	4750
Decayed	5		
Total number teeth treated:		Total number teeth treated:	
Permanent	11,385	Permanent	11,385
Primary	2,890	Primary	2,890
Decayed	10	Decayed	10
Decayed	10	Decayed	10
New patients:		New patients:	
New cases current year	1475	New cases current year	1475
Re-examinations	4014	Re-examinations	4014
Emergency cases	845	Emergency cases	845
Total number of patients treated	6334	Total number of patients treated	6334
Defective teeth:		Defective teeth:	
Permanent	11,385	Permanent	11,385
Primary	2,890	Primary	2,890
Decayed	10	Decayed	10
Decayed	10	Decayed	10

Number of cases given by dentists in schools to Grand VII schools during the year was 50.

Respectfully submitted,

JOSEPHINE CARLSON, D.D.

Assistant Medical Officer of Health.



This clinic, whilst part of the division supervised by Dr. G. Oakley, is directly under the supervision of Miss. M. F. Lavell, a Registered Nurse with Public Health Training, on the staff of the Provincial Department of Health and detailed for duty in Calgary on this special work. This clinic forms a very important factor in our activities and enjoys a well merited popularity.

At the time of amalgamation of the Health Services it was thought well to establish a filing system with a card for each City birth registered. Pertinent information is given by the attending physician and the cards are kept on file until the child enters school when the card is transferred to the school and follows the child through its entire school life. In time we will have a complete physical history relating to any one child from the date of its birth. The following is Miss Lavell's report:

Dr. W. H. Hill.  
Medical Officer of Health.

Dear Sir:

The following is the report of the Infant and Pre-school Clinic for the year 1936.

Place: Clinic rooms are on the top floor of the City Hall and are open five afternoons of each week.

Staff: One Pediatrician on two afternoons of each week.  
One physician from School Medical Staff on one afternoon of each week.  
One Public Health Nurse, detailed for this duty from the staff of the Provincial Department of Health.  
One Nurse appointed by City of Calgary.  
One clerk - half-time.  
A nurse in training from either the General Hospital or the Holy Cross Hospital, comes two days each week for instruction and training.

Routine of work:

1. Cards made out at birth registration to follow through school age.
2. Invitations to attend clinic sent out to mothers.
3. Questionnaire sent to family physicians concerning birth and home conditions.
4. Where home conditions considered inadequate, families are visited by the School Nurse of the district and advised of the clinic.
5. All families attending clinic are visited by clinic nurses and kept in touch with periodically.
6. At six months notices are sent to all births registered advising protection against diphtheria.
7. After three years a special appointment is made for every child to be given a complete physical examination. Where defects are found among those in poor circumstances, the case is followed up by clinic nurses.

Clinics: Two afternoons a week for infants and pre-school children, with pediatrician and nurses in attendance.

# REPORT OF THE 1906-1907 YEAR

This clinic, which is part of the Division supervised by Dr. G. C. Goring, is directed under the supervision of Miss J. E. Lavelle, a Registered Nurse with Public Health Training, on the staff of the Provincial Department of Health and detailed for duty in Calgary on this special work. This clinic is a very important factor in the activities and enjoys a well merited popularity. At the time of organization of the Health Division it was thought well to establish a clinic system with a staff for each City birth registered. Treatment is given by the attending physician and the cards are kept on file until the child enters school when the card is transferred to the school and follows the child through its entire school life. In time we will have a complete physical history relating to any one child from the date of its birth. The following is Miss Lavelle's report:

Dr. W. H. Hill,  
Medical Officer of Health.

Dear Sir:

The following is the report of the Infant and Pre-school Clinic for the year 1906.

Places: Clinic rooms are on the floor of the City Hall and are open five afternoons of each week.

Staff: One Registered Nurse on two afternoons of each week. One Registered Nurse School Medical Staff on one afternoon of each week. One Public Health Nurse, detailed for this duty from the staff of the Provincial Department of Health. One Nurse assigned by City of Calgary. One clerk - half-time. A nurse is assigned from either the General Hospital or the West-End Hospital, comes two days each week for instruction and training.

Routine of work: Cards kept and birth registration is followed through school age. Investigation to record clinic sent out to mothers. Questionnaire sent to family physicians concerning birth and home conditions. Where home conditions considered inadequate, families are visited by the School Nurse of the district and advised of the clinic. All families attending clinic are visited by clinic nurse and kept in touch with periodically. At six months' notice are sent to all birth registrars and advising protection against diphtheria. After three years a special agreement is made for every child to be given a complete physical examination, where defects are found among those in good circumstances, the case is followed up by clinic nurse.

Clinical: Two afternoons a week for infants and pre-school children with physician and nurse in attendance.



One afternoon each week for examination of pre-school children with School Doctor in attendance  
Two afternoons each week for infants and pre-school children with nurses only in attendance.

Attendance: Total for the year 6991  
Individual cases 2615  
Number of new cases 843

Seen by Dr. E.B. Roach. (Pediatrician) 104 afternoons  
Infants 2133, Pre-school 998, Total 3131, Average 30.  
(Includes 457 complete physical examinations of pre-school children in the 3-4 year group, of whom 104 without defect)

School doctors made 412 complete physical examinations of pre-school children in the 3-4 year group, 140 of whom were found to be without defect.

406 appointments in this class were not kept.

Seen by nurses only. 254 afternoons.

Infants 2277, Pre-school 1161, Total 3438, Average 14.

Causes having effect on attendance: Epidemic of German measles in February and March.  
Outbreak of smallpox in March.  
Scarlet fever prevalent throughout the year, reaching epidemic proportions in last three months.

Infectious diseases found.	Chickenpox	3	Whooping Cough	2
	German measles	2	Scarlet Fever	1

Visits made:	To homes by the clinic nurses	1731	
	Re birth registration by School Nurses	478	
	Calls made where people not found	<u>237</u>	2446

Feeding:	Breastfed	817	Bottle	1657
	Mixed	464	Others	1474

Defects found:	Infants	Pre-school
Eyes	27	45
Ears	21	48
Tonsils	12	290
Adenoids	2	96
Malnutrition	11	98
Eczema	33	24
Diarrhoea	46	
Hernia	20	9
Impetigo	5	11
Phimosis	9	40
Mouth	5	8
Thrush	5	
Throat	8	6
Nose	4	5
Teeth	1	516
Anaemia	6	12
Congenital malformations	7	5
Mentally deficient	1	2
Rickets	3	4

One afternoon each week for examination of pre-school children with school doctor in attendance.  
Two afternoons each week for infants and pre-school children with nurse only in attendance.

Attendance: Total for the year 6991  
Individual cases 2375  
Number of new cases 885

Examined by Dr. J. A. Hagan (Pediatrician) 104 afternoons  
Infants 1157, Pre-school 1285, Total 2442, Average 30.  
(Includes 400 complete physical examinations of pre-school children in the 3-4 year group, of whom 104 without defect)  
School doctors made 412 complete physical examinations of pre-school children in the 3-4 year group, 240 of whom were found to be without defect.

408 appointments in this class were not kept.  
Seen by nurse only 1536 afternoons.  
Infants 1157, Pre-school 1187, Total 2344, Average 18.

Canine having Epidemic of German measles in February and March.  
Effect on Epidemic of measles in March.  
Attendance German measles prevalent throughout the year, resulting epidemic proportions in last three months.

Infectious diseases German measles 2  
Scarlet fever 2  
Whooping cough 2  
Total 6

Visits made To homes by the clinic nurses  
To make registration by school nurses  
Total 2442  
1931

Postings: Hospital 517  
Home 408  
Office 1016  
Total 1941

Defects found:	Infants	Pre-school
Rickets	2	4
Generalized malnutrition	1	2
Acute otitis media	7	5
Anemia	6	12
Tooth	1	210
Hoarseness	4	8
Throat	2	8
Thrush	1	2
Scabies	1	2
Impetigo	6	11
Furunculosis	20	9
Diarrhea	46	24
Constipation	22	24
Exanthematous	11	28
Atopy	2	25
Tonsillitis	12	250
Ear	21	48
Eye	27	48



Defects found (ctd)		Infants	Pre-school
Herpes		1	2
Glands		4	28
Orthopedic		1	15
Scabies			4
Cardiac disturbance			4
Pulmonary disturbance			1
Nervous disorders			5
Epilepsy			1
Syphilis			1
Other conditions		53	100

Deaths: Infants 3, Pre-school 5, Total 8.

Referred to family physicians: Infants 12, Pre-school 76, Total 88.

Immunization: Number protected against diphtheria 282  
 " " " smallpox 241  
 " " " scarlet fever 14

This protection given either at Health Department or by their own family physicians.

Discharges: Infants 87 Pre-school 658. Total 745  
 Readmissions: Infants 6, Pre-school 62, Total 68  
 Transferred from infants to pre-school (over 2 yrs) 456

Dental Clinics: Treated by Dr. E.R.Upton. 279 appointments not kept 58  
 " " School Dentists 134. " " " 34

Eye, Ear, Nose and Throat:	Operations: Tonsils and adenoids	80	
	Adenoids only	1	
	Mastoids	4	
	Probing tear duct	1	
	Ear drum	1	
	Needling cataract	<u>1</u>	88

Of these:

62 were done free of charge after investigation

7 paid hospital fee only

19 paid full fee of \$10.00

Total collected by Clinic was \$95.00

Treatments: of the Eyes	778	
Ears	423	
Nose and throat	153	
Refractions and prescriptions for glasses	16	Total 1370

Of these, 220 were individual cases.

Mastoid dressings done by specialist at homes and in hospitals was 37. Other home visits by specialist 3

Pre-Natal: Number of pre-natal letters sent out by clinic 16  
 Weekly classes on Monday afternoons held by V.O.N.

Defects found (odd)

Other conditions	85	100
Syphilis	1	1
Epilepsy	1	1
Nervous disorders	1	1
Pulmonary disorders	1	1
Cardiac disorders	1	1
Scarlet	1	1
Cyrtopodia	1	1
Glaucoma	1	1
Hepatitis	1	1

Deaths:

Infants 3, Pre-school 5, Total 8.

Referred to

family physicians: Infants 12, Pre-school 75, Total 87.

Immunization: Number protected against diphtheria

233  
241  
14

This protection given either at Health Department or by their own family physicians.

Discharges:

Infants 87 Pre-school 238, Total 325

Readmissions: Infants 6, Pre-school 63, Total 69

Transferred from infants to pre-school (over 2 yrs) 236

Dental Clinics:

Treated by Dr. E.H. Gorton, 879 appointments not kept 50  
School dentists 104

Eye, Ear, Nose and Throat:

Operations: Tonsils and adenoids	80
Adenoids only	1
Exstirpation	1
Probing ear and	1
Ear drums	1
Waxing ears	1

Of these:

82 were done free of charge after investigation

7 paid hospital fee only

12 paid full fee of \$10.00

Total collected by Clinic was \$10.00

Treatments: Of the Eyes

778  
425

Nose and throat 123

Referrals and prescriptions

for glasses 16 Total 1270

Of these, 820 were individual cases.

Massed glasses done by specialists at home and

in hospitals was 27. Other home visits by specialists 2

Pre-Natal:

Number of prenatal visits sent out by clinic 16  
Weekly classes on Monday afternoon held by V.C.N.



Donations of 3 gallons of Cod Liver Oil by the Good Cheer Club.  
 supplies: Substantial quantity of Cod Liver Oil and Infant Foods  
 from the firm of Mead, Johnson and Company.  
 Milk from the Sunshine Fund.  
 Layettes from the North Hill Club.  
 Clothes from private individuals.  
 Drug samples from Drs. McEachern, Merritt, McFarlane.  
 Public Health Literature from Metropolitan Life  
 Insurance Company.

Private                      Inspections and interviews in connection with  
 Hospitals                  private hospitals and homes for the care of  
 and Baby Homes:        children during the year were 109.

Insulin:                    Number of investigations made for the Provincial  
                                 Board of Health regarding supply of insulin to  
                                 those unable to pay was 30.

Pupil Nurses:        Six pupil nurses completed the part-time course  
                                 of instruction and demonstration.

Respectfully submitted.

M. F. LAVELL.

Provincial Public Health Nurse.

Donations of 2 gallons of Cod Liver Oil by the Good Cheer Club.  
 Substantial quantity of Cod Liver Oil and Infant Food  
 from the City of New York, Johnson and Company.  
 Milk from the Manhattan Hotel.  
 Laxatives from the New York City.  
 Cigars from private individuals.  
 Free samples from Dr. Williams, Dr. Williams, Dr. Williams.  
 Public Health Literature from Metropolitan Life  
 Insurance Company.

Insulin: Insulin was administered in connection with  
 private hospitals and homes for the care of  
 and Baby House, children during the year 1934.  
 Number of investigations made for the Provincial  
 Board of Health regarding supply of insulin to  
 those unable to pay was 12.

Public Nurses: Six public nurses completed the part-time course  
 of instruction and demonstration.

Respectfully submitted,

M. E. JAVIER.

Provincial Public Health Nurse.



# PRE-SCHOOL CLINIC

31

## Report of Survey made of Infant Deaths for the year 1936

Under one week		Under one month		Under three months	
Premature births	32	Premature births	1	Intestinal	1
Cong:Malformation	6	Cong:Malformation	1	(Average home,boiled	
Broncho Pneumonia	1	Osteomyelitis	1	milk and lactic acid)	
Birth injuries	4			Broncho Pneumonia	3
				Cong: Malformation	
				and disease	4
				Whooping Cough	2
				Measles	1
				Meningitis	1
Under six months		Under nine months		Under one year	
Pneumonia	2	Pneumonia	3	Pneumonia	2
Intestinal	1	Intestinal	2		
(Good home, digest		(1.Good home, severe			
ive trouble since		case of eczema Un-			
birth)		able to retain food)			
Cong:Malformations	1	(2.Average home.			
Meningitis	1	Suddenly ill, vom-			
		ited twice, no diarr-			
		hoea)			
		Whooping Cough	1		
		Respiratory Infection	1		

-----

59% of deaths under one week.	46% premature births
17% congenital malformations and	15% chest conditions
11% infectious diseases	5.5% Intestinal
5.5% birth injuries.	

Birth Rate	gross 19.6	Death Rate	gross 58.7
" "	net 15.3	" "	net 58.1
Stillbirths	gross 52 (number)	Maternal death rate, gross	6.7
" "	net 38 (number)	" " " "	net 3.1

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This work is sponsored by the Calgary Tuberculosis Association, a group of public-spirited women who lend their efforts in this regard, and employ Miss. H. B. Acton, a Registered Nurse to take charge.

I repeat what I have stated before that tuberculosis control is as much a part of the responsibilities of any Health Department as is the control of any other communicable disease. With this in mind a good deal of interlocking exists as between the activities of the Tuberculosis Association and the Health Department. Miss Acton has her office in the Health Department Offices, the Association enjoys the privileges of the City Garage, milk for needy patients and contacts is largely supplied by the City, as occasion demands Miss Acton assists the other nurses of the department and the Health Department Nurses also assist her in her work. The Association Nurse is practically an integral part of the Department, practically the only thing the City does not do is pay her salary. It is recommended that the City assume entire responsibility for this work at as early a date as possible.

Miss Acton's report for 1936 follows:

Dr. W. H. Hill.  
Medical Officer of Health.

Dear Sir:

Following is a report of the work of the Calgary Tuberculosis Association and the Chest Clinic for the year 1936.

The number of clinics held during the year was 43 at which 206 adults and 53 children were examined. The Chest Clinic is held on Wednesday afternoons from 2 until 5 in the Health Department Offices, one of the doctors from the Central Alberta Sanatorium being in attendance.

During the year a total of 924 vits were made to homes of patients and suspects and 213 visits were made to other places indirectly in connection with the same work.

The number interviewed at the office, other than those attending the Chest Clinic, was 274.

As a result of a new policy put into effect by the Provincial Government 1st June 1936, the care of tubercular patients in the Central Alberta Sanatorium and a number of other hospitals in the Province, was assumed by the Government. This would appear to be a step in the right direction, relieving the patients of the financial worry as it does, the trend is to more rapid recovery, something for which we are truly thankful.

During the year the social service work and preventive work in connection with this activity has been carried on with a marked degree of success, consistent with the funds and facilities at our disposal.

The Annual Seal Sale was carried out as usual and while returns are gratifying when we consider present day conditions and the many demands made upon the community, yet the amount received was lower than expected.

## TUBERCULOSIS CONTROL

This work is sponsored by the Calgary Tuberculosis Association, a group of public-spirited women who found their efforts in this regard, and employ Miss M. E. Anton, a Registered Nurse to take charge.

I repeat what I have stated before that tuberculosis control is as much a part of the responsibilities of any Health Department as is the control of any other communicable disease. With this in mind a good deal of understanding exists as between the activities of the Tuberculosis Association and the Health Department. Miss Anton has her office in the City Garage, the Association enjoys the privileges of the City Garage, milk for needy patients and contacts is largely supplied by the City, as occasion demands Miss Anton assists the other nurses of the department and the Health Department Nurses also assist her in her work. The Association Nurse is practically an integral part of the Department, practically the only thing the City does not do is pay her salary. It is recommended that the City assume entire responsibility for this work at an early date as possible. Miss Anton's report for 1935 follows:

Dr. W. H. Hill  
Medical Officer of Health

Dear Sir:

Following is a report of the work of the Calgary Tuberculosis Association and the Chest Clinic for the year 1935.

The number of clinics held during the year was 45 at which 806 adults and 55 children were examined. The Chest Clinic is held on Wednesday afternoons from 2 until 5 in the Health Department Office, one of the doctors from the Central Alberta Sanatorium being in attendance.

During the year a total of 545 visits were made to homes of patients and contacts and 213 visits were made to other places indirectly in connection with the same work.

The number interviewed at the office, other than those attending the Chest Clinic, was 374.

As a result of a new policy put into effect by the Provincial Government last June 1935, the care of tubercular patients in the Central Alberta Sanatorium and a number of other hospitals in the Province, was assumed by the Government. This would appear to be a step in the right direction, relieving the patients of the financial worry as it does, the trend is to have rapid recovery, something for which we are truly thankful.

During the year the social service work and preventive work in connection with this activity has been carried on with a marked degree of success, consistent with the funds and facilities at our disposal.

The Annual Bazaar Sale was carried out as usual and while returns are gratifying when we consider present day conditions and the many demands made upon the community, yet the amount received was lower than expected.



## CHEST CLINIC

## 1. NEW EXAMINATIONS

	Number	Contact
(1) Tuberculosis: (a) Pulmonary. Active	12	6
Inactive	-	-
(b) Non-pul. Active	-	-
Inactive	-	-
(2) Suspect, or under observation	15	4
(3) Non-tuberculous	-	-
(4) No disease	83	26
(5) Examination incomplete	3	1
Total	113	37

## 2. RE-EXAMINATIONS

(1) Tuberculosis: (a) Ex-Sanatorium		
Pul: able to work	17	7
unable to work	15	-
Pul:- Able to work	5	-
unable to work	13	4
(2) Suspect or under observation	12	9
(3) Non-tuberculous	-	-
(4) No disease	38	30
(5) Disposition of previous suspects. { Suspect	-	-
{ Definite T.B.	-	-
{ Non-tuberculous	-	-
{ No disease	-	-
(6) Examination incomplete	3	2
Total	103	52
Grand total	216	89

Respectfully submitted,

H. B. ACTON, Reg. Nurse.

Nurse in charge.





### EDUCATIONAL

The department has an extensive mailing list and a good deal of correspondence and statistical data is exchanged between Calgary and other centres in Canada and the United States. Valuable information is thus made available and as a result Calgary is in line coincident with improvement elsewhere.

Dr. G. Oakley and your Medical Officer of Health have given a great many addresses throughout the year and it is hoped a goodly measure of appreciation of the problems relating to community health has resulted. These addresses involve a good deal of time but are most important and it is further hoped that sufficient time will be available to continue them.

During the winter months and in accordance with the rulings of the Senate of the University of Alberta, the Medical Officer of Health delivered a course of lectures on public health to the student nurses at the General Hospital and the Holy Cross Hospital.

The School Nursing Staff have carried on their instructional talks in the schools and there is no doubt they have been of inestimable value in furthering the cause of public health.

### RELIEF DEPARTMENT

During the year 2516 investigations and examinations in connection with the work required by the City from Relief Recipients were attended to by your Medical Officer of Health. This work has assumed proportions that requires a good deal of time to say nothing of much patience. Each case is weighed in its entirety before a decision is given and the sparse number of complaints would lead to the belief that the work in this regard is being satisfactorily discharged.

### CONCLUSION

It is noted in the report of the Infant and Pre-school Clinic, reference is made to donations of cod liver oil and such-like, thus providing an opportunity to supply needy patients. Our thanks to the donors are truly heartfelt.

The department wishes to go on record in expressing its sincere thanks to His Worship The Mayor, Ex-Commissioner Riley, and the Members of the City Council, for the much appreciated help, support and timely advice throughout the year. To the Calgary School Board for their continued cooperation. To the Metropolitan Life Insurance Company for their continued generous supply of Public Health Literature on nearly every phase of public health. To the Provincial Department of Health for their cooperation and courtesy at all times. To the Calgary Tuberculosis Association and the Victorian Order of Nurses for continuing to conduct their respective clinics. To the Superintendent and Medical Staff of the Central Alberta Sanatorium for their attendance at the Weekly Chest Clinics and their kindness at all times. To the Calgary Medical Society for their cooperation and readiness to assist in our work.

The Medical Officer of Health appreciates the opportunity that is presented by way of the Annual Report to offer his sincere thanks to the individual members of the Health Department Staff.

## THE DEPARTMENT

The Department has an extensive mailing list and a good deal of correspondence and statistical data is exchanged between Calgary and other centres in Canada and the United States. Valuable information is thus made available and as a result Calgary is in line with the best in the world.

Dr. G. Oakley and your Medical Officer of Health have given a great many addresses throughout the year and it is hoped a goodly measure of appreciation of the problems relating to community health has resulted. These addresses involve a good deal of time but are most important and I further hoped that sufficient time will be available to conduct them.

During the winter months and in accordance with the policy of the Senate of the University of Alberta, the Medical Officer of Health delivered a course of lectures on public health to the students at the General Hospital and the Holy Cross Hospital.

The School Nursing Staff have carried on their instructional talks in the schools and there is no doubt they have been of inestimable value in furthering the cause of public health.

## HEALTH DEPARTMENT

During the year 1935 investigations and examinations in connection with the work reported by the City of Health. Recipients were attended to by your Medical Officer of Health. This work has assumed proportions that require a good deal of time to say nothing of much patience. Each case is weighed in its entirety before a decision is given and the greater number of complaints would lead to the belief that the work in this regard is being satisfactorily discharged.

## CONCLUSIONS

It is noted in the report of the Infant and Pre-school Clinic, reference is made to donations of cod liver oil and such like, thus providing an opportunity to supply needy patients. Our thanks to the donors are hereby tendered.

The Department wishes to go on record in expressing its sincere thanks to His Worship the Mayor, Ex-Councillor Riley, and the Members of the City Council, for the much appreciated help, support and timely advice throughout the year. To the Calgary School Board for their continued cooperation. To the Metropolitan Life Insurance Company for their continued generous supply of Public Health Insurance on nearly every phase of public health. To the Provincial Department of Health for their cooperation and courtesy at all times. To the Calgary Tuberculosis Association and the Victorian Order of Nurses for continuing to conduct their respective clinics. To the Superintendent and Medical Staff of the Central Alberta Sanatorium for their attendance at the weekly Guest Clinics and their kindness at all times. To the Calgary Medical Society for their cooperation and readiness to assist in our work.

The Medical Officer of Health appreciates the opportunity that is presented by way of the Annual Report to offer his sincere thanks to the individual members of the Health Department staff.



The duties attaching to this office have increased very markedly in the last two or three years and it oftentimes becomes necessary to enlist the help of one or all in the completion of certain work. No matter what the hour or day, or the nature of the work, this help has always been given unstintingly, cheerfully and with the painstaking effort demanded on such occasions, and it is with this in mind that I offer these thanks and enjoy, it is thought, a pardonable pride in being associated with a body of men and women at once so conscientious and efficient.

Respectfully submitted,

W. H. HILL. B.A. M.D. C.M. D.P.H.

WHH/C

Medical Officer of Health.

Medical and Dental Supplies and Services	1,008.00	843.33
First Aid Kits for School Children	800.00	870.82
First Aid Kits for Unaccompanied School Children	2,362.14	949.98
Street Railway Tickets	178.00	128.00
Asst. Attending (Doctor and Nurses)	408.00	318.00
Stationery and Printing	197.30	310.12
Office Furniture	275.00	377.75
Remodelling Offices, Top Floor City Hall	—	1,041.88
Light and Telephone	—	160.00
	31,944.30	31,173.04
Expended by School Board to April 30th 1935	—	10,117.19
	31,944.30	31,290.23
INFANT AND PRE-SCHOOL CLINIC		
Salaries	1,371.00	1,382.50
Professional Services (Pediatricians)	843.00	880.00
Street Railway Tickets	120.00	120.00
Light and Telephone and Dental Services	1,300.00	1,345.00
Supplies	42.70	38.30
Rent of Offices	—	300.00
	3,604.70	3,954.70
STAFF		
Health Department (General)	21,456.12	22,048.67
General Medical and Dental Services	31,944.30	31,290.23
Infant and Pre-school Clinic	3,604.70	3,954.70
	56,999.12	57,293.60

Per-capita expenditures: 1933 70.6 cents 1934 71.4 cents

#### EXPENDITURE FOR THE PAST FIVE YEARS

Year	1930	1931	1932	1933	1934
Per capita	68.14	69.54	70.60	71.40	72.84
(Expenditures for Health Services, exclusive of May 1935)					

The duties attaching to this office have increased very markedly in the last two or three years and it often becomes necessary to enlist the help of one or all in the completion of certain work. No matter what the hour or day or the nature of the work, this help has always been given unflinchingly, cheerfully and with the painstaking effort demanded on such occasions, and it is with this in mind that I offer these thanks and enjoy, it is thought, a pardonable pride in being associated with a body of men and women at once so conscientious and efficient.

Respectfully submitted,

W. H. HILL, B.A., M.B., O.E., D.P.H.

Medical Officer of Health.

WHVC



# FINANCIAL STATEMENT

36

	1936	1935
HEALTH DEPARTMENT (General)		
Salaries	15,768.72	15,115.84
Serums, Amtitoxin, etc	1,144.03	253.85
Disinfectants	436.54	138.94
Laboratory Services (to City Lab)	1,200.00	1,200.00
Auto Maintenance (2 City 5 Allowances)	2,390.46	2,001.76
Sundries	289.07	319.78
Stationery and Printing	347.24	229.86
Postage	217.84	145.00
Street Railway Tickets	150.00	150.00
Isolation Ambulance Hire	1,128.00	276.00
Milk Inspection Expenses	104.41	108.74
Meat Inspection Expenses and Rent	279.81	254.28
Rent of Offices	- --	1,365.00
	23,456.12	22,292.55
SCHOOL MEDICAL INSPECTION AND SERVICES		
Salaries	26,788.99	16,939.42
Medical and Dental Supplies and Sundries	1,008.09	545.35
Free Glasses to School Children	560.60	270.61
Free Milk to undernourished School Children	2,362.14	968.92
Street Railway Tickets	178.00	128.00
Auto Allowances (Doctor and Nurses)	432.00	216.00
Stationery and Printing	337.96	310.42
Office Furniture	276.52	377.75
Remodelling Offices, Top Floor City Hall.	--	1,261.55
Light and Telphones	--	160.02
	31,944.30	21,178.04
Expended by School Board to April 30th 1935	--	12,117.18
	31,944.30	33,295.22
INFANT AND PRE-SCHOOL CLINIC		
Salaries	1,371.00	1,331.50
Professional Services (Pediatrician)	520.00	530.00
Street Railway Tickets	120.00	120.00
E.E.N & T.Specialist and Dental Services	1,550.00	1,535.00
Sundries	43.70	28.26
Rent of Offices	--	390.00
	3,604.70	3,934.76
SUMMARY		
Health Department (General)	23,456.12	22,292.55
School Medical and Dental Services	31,944.30	33,295.22
Infant and Pre-school Clinic	3,604.70	3,934.76
	\$59,005.12	\$59,522.53

Per-capita expenditure: 1936 70.8 cents 1935 71.4 cents

## EXPENDITURE FOR THE PAST FIVE YEARS

Year	1932	1933	1934	1935	1936
	29,142.02	26,554.03	25,126.74	59,522.53	59,005.12
Per capita	34.9¢	31.8¢	30.1¢	71.4¢	70.8¢
(Amalgamation of all Health Services, effective 1st May 1935)					

## FINANCIAL STATEMENT

1935 1934

## HEALTH DEPARTMENT (General)

Salaries	15,768.72	15,115.84
Bonus, Antitoxin, etc	1,144.03	255.85
Dietitians	438.84	158.94
Laboratory Services (to City Lab)	1,200.00	1,200.00
Auto Maintenance (2 City 5 Allowances)	2,320.45	2,001.78
Sundries	282.07	219.78
Stationery and Printing	247.84	222.85
Postage	217.84	145.00
Street Railway Tickets	150.00	150.00
Isolation Ambulance Hire	1,128.00	276.00
Milk Inspection Expenses	104.41	108.74
Meat Inspection Expenses and Rent	272.81	254.28
Rent of Offices	--	1,368.00

22,456.12 22,325.85

## SCHOOL MEDICAL INSPECTION AND SERVICES

Salaries	22,788.92	16,232.42
Medical and Dental Supplies and Sundries	1,008.00	545.35
Free Glasses to School Children	380.80	270.51
Free Milk to Undernourished School Children	2,322.14	268.92
Street Railway Tickets	178.00	128.00
Auto Allowances (Doctor and Nurses)	438.00	212.00
Stationery and Printing	237.28	210.42
Office Furniture	276.82	277.78
Remodeling Offices, Top Floor City Hall	--	1,261.85
Light and Telephones	--	160.02

21,244.80 21,178.04

Expended by School Board to April 30th 1935

21,244.80 21,178.04

## INFANT AND PRE-SCHOOL CLINIC

Salaries	1,871.00	1,321.50
Professional Services (Pediatrician)	220.00	220.00
Street Railway Tickets	120.00	120.00
E.E.H. & T. Specialist and Dental Services	1,550.00	1,225.00
Sundries	43.70	28.28
Rent of Offices	--	220.00

2,604.70 2,534.78

## SUMMARY

Health Department (General)	22,456.12	22,325.85
School Medical and Dental Services	21,244.80	21,178.04
Infant and Pre-school Clinic	2,604.70	2,534.78

\$46,305.12 \$46,038.67

Per-capita expenditures: 1935 70.8 cents 1934 71.4 cents

## EXPENDITURE FOR THE PAST FIVE YEARS

Year	1935	1934	1933	1932	1931
Per capita	70.8	71.4	70.1	61.8	64.9
(Amalgamation of all Health Services, effective Jan. 1, 1935)	22,325.85	22,325.85	22,325.85	22,325.85	22,325.85







