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REPORT

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THE ROYAL SOCIETY

for the Promption

OF HEALTH

LOCAL BOARD OF HEALTH

of the



THE CITY OF EDMONTON ALBERTA

1965

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BOARD OF HEALTH, 1965

Dr. H. N. C. Begg, Chairman Ald. Dr. A. C. McGugan Ald. Mrs. J. Kiniski Dr. J. Lauerman (Ald. Dr. M. Weinlos - Alternate) Mrs E. Rogers, Edmonton Public School Board Dr. G. Rene Boileau, Edmonton Separate School Board Dr. B. M. Mackenzie, Edmonton and District Dental Society

EX-OFFICIO MEMBERS

Dr. G. H. Ball, M.O.H. G. B. Lawrence, Secretary

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BOARD OF HEALTH, 1964

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EX-OFFICIO MEMBERS

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Medical Officer	
Medical Officer	L. I. Bertram, M.D.
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Physician, Consultant Psychiatrist	Z. Selinger, M.D., R.C.P.S.(C)
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Dentist	M. Shea, B.Sc., D.D.S.
Director of Nursing	E. Crookshanks, R.N., B.N.
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Divisional Supervisor, Well Baby Clinics	E. R. Leo, P.H.N.
Supervisor Public Health Inspection	G. B. Hill, C.P.H.I.(C)
Milk and Dairy Supervisor	R. B. Meredith, C.P.H.I.(C)
Chief Food Inspector	K. S. Pennifold, D.V.S.
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ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH

Chairman and Members, Local Board of Health

EDMONTON, Alberta

Madam and Gentlemen:

It is a pleasure to present for your consideration the annual report of the City Health Department for the year 1965.

The population as recorded at the municipal census of 1965 was 371,265, an increase of 13,569 or 3.5%. The natural increase was 6,524: 7,045 persons were therefore immigrant to the city.

Over the past five years, the birth rate has fallen by seven births per thousand population to the present rate of 23.4 per thousand population. Comparison suggests that this fall is most marked in the age groups 15 - 19 and 20 - 24 years.

Consequent in all probability to the immediate post war baby boom, the marriage rate at 9.1 per thousand population is beginning to rise. From the foregoing paragraph it would seem that this is the group who, in marriage, are attempting conception control.

Illegitimate births continued to rise in all age groups. In the age groups 15 - 19 years and 20 - 24 years the rise was highest. This, in comparison with the reduction of births in those of this age who are married, is a point worthy of consideration. Some anxiety is felt regarding the increase in illegitimate births cited as being residents. It is impossible to assess the accuracy of the "given" place of residence of the mothers. Certainly it is known that more unmarried mothers are being delivered in city hospitals and fewer in rural area hospitals. There are grounds for questioning whether all those cited as city residents are truly city residents. However, there is little doubt that illegitimacy is rising and this trend is sufficiently marked to justify a reassessment by the community of the measures available to cope with the situation.

The death rate at 5.8 per thousand remains relatively stable. Small increases were recorded in the mortality from heart disease, cancer and central nervous system vascular catastrophe. As the number of aged people in the city becomes greater, so the degenerative diseases increase. The possibility of further measures for prevention and detection of these diseases and rehabilitation of those unfortunate enough to be subject to them is worthy of consideration by the community.

Communicable disease experience in the city was very light. It is five years since there was a case of diphtheria in the city and four years since the last case of poliomyelitis. Infectious hepatitis continued to decline. There were no outbreaks of food poisoning of significance, sporadic cases only being reported. The incidence of gonorrhoea continued to fall although there was a very small rise in syphilis.

Your attention is directed to the preambles of the reports of the various divisions of the Health Department.

In writing this report it is my privilege to record the appreciation of the City Health Department to those groups, public and private, working in the field of health in the city.

I acknowledge with gratitude the interest and assistance so freely and frequently given to us by governments and departments at all levels.

The consideration and support of the Local Board of Health contributed in considerable measure to the successes recorded in this report.

There follows an outline of those achievements of the staff of the Department of sufficient importance to gain print. There are many efforts, large and small, which inevitably are unrecorded. I offer my sincere thanks to all those on the staff who work so hard in the interests of the health of the citizens of Edmonton.

Yours truly,

G. H. BALL, M.B., Ch.B., D.P.H. Medical Officer of Health.

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ORGANIZATION AND ADMINISTRATION

The city of Edmonton, under the Public Health Act of Alberta, constitutes a Health District. The health services are operated by and under the sole control of the Local Board of Health. Representation on the Board is obtained by Council, the school boards, the medical and dental professions. The Board meets monthly.

The chief executives of the Local Board of Health are the Medical Officer of Health and the Deputy Medical Officer of Health.

Organizationally, the Department consists of a number of divisions, each responsible through an administrative chain to the executive. The administrative chain provides resource and supervision to the personnel in the field.

The city is divided into six regions, each tributary to a regional office. The various divisions except administration, are represented in these offices. The divisions are:

Administration:

Under the supervision of the Administrative Secretary performing

i. general office procedures

ii. vital statistics iii. administration in connection with Board of Health meetings.

Medical Division:

Graduate medical officers (full-time) performing general duties in the clinics, in the schools and on the district. School physicians (half-time) and consultant pediatricians.

Nursing Division: (Graduate Public Health and Registered Nurses)

(a) **Infant and Pre-School:** A cadre of specialized nurses, one to each regional office clinic, operating the clinic and ancillary services with and through the district public health nurse.

(b) **Immunization Clinics:** Specialized nurses, one to each regional office clinic, operating the clinic with the assistance of the district public health nurses.

(c) **District Public Health Nursing Services:** Each region is composed of a number of districts, to each of which is allotted a district public health nurse. The district public health nurse is responsible for all nursing service therein. Her efforts are supplemented in certain spheres by the specialized clinic personnel.

Tuberculosis Division:

The core of this division consists of the specialized tuberculosis nursing staff supplied to the Department by the Kinsmen of Edmonton. Control is exercised directly and indirectly in co-operation with the district public health nursing service. Close liaison is maintained with the Tuberculosis Division of the Provincial Health Department.

Environmental Hygiene:

A group of graduate public health inspectors, operating both from the central office and the regional offices, maintaining at this time a completely generalized service. A housing officer provides direct service and back-up to the field inspector in housing control.

Dental Division:

Under the supervision of the Dental Director, a graduate dentist supplies clinical maintenance to the dentally indigent, and dental auxiliaries (hygienists) survey, counsel and apply prophylactic treatment to the pre-school and school children.

Food Inspection Division:

A graduate veterinarian is employed in meat inspection and is responsible directly and indirectly through the Public Health Inspectors for food manufacturing and processing.

Milk and Water Division:

The Milk and Water Division is responsible for the clean and disease-free production of milk and milk products, the supervision of water supplies and swimming pools.

SUMMARY OF STATISTICS

Area of City — 85.6 Square Miles 1965 1964 1963 1962 1961 371,265 357,696 303,756 294,967 276,018 6.8 6.4 6.9 6.7 7.5 2.31 2.02 2.08 1.96 1.7 0101 70.277 66.970 61,555 Population Persons per acre of land 6.7 7.5 1.96 1.76 Cost per capita School enrolment 1.76 89,671 85,341 70,277 66,970 61,555 6,524 7,239 6,705 7,043 6,701 Natural increase of population BIRTHS 10,791 10,791 11,643 12,275 12,593 12,458 8,694 9,271 8,643 8,857 8,428 Total births Resident births only Resident rate per 1,000 population 23.4 25.92 28.45 30.02 30.4 STILLBIRTHS 127 156 142 142 128 97 115 101 91 89 Total stillbirths Resident stillbirths only Resident stillbirths rate per 1,000 living births 11.2 13.3 11.7 10.3 10.5 DEATHS Total deaths 2,828 2,651 2,665 2,652 2,536 Resident deaths only 2,170 2,032 1,938 1,814 1,726 Resident rate per 1,000 population 5.8 5.7 6.4 6.1 6.2 INFANT MORTALITY Total deaths under 274 274 289 1 year of age . 294 337 Resident deaths under 186 174 162 1 year of age 189 200 Resident rate per 1,000 living births 21.7 21.5 20.1 18.3 23.7 NEONATAL DEATHS 16.9 127 147 147 137 127 Resident deaths under 28 days 14.7 15.8 Rate per 1,000 living births 14.3 17.4 MATERNAL MORTALITY .00 0 0 Maternal deaths (Resident only) . 2 2 1 Rate per 1,000 living births23 .00 .23 .11 MARRIAGES 3,374 3,126 3,119 3,208 9.1 8.7 10.3 10.9 3,112 Marriages Rate per 1,000 population

REGISTERED VITAL STATISTICS

11.2

BIRTHS	1965	1964	1963	1962	1961
Total births	10,791	11,643	12,275	12,593	12,458
Resident births only	8,694	8,645	8,643	8,857	8,428
Male	4,529	4,447	4,444	4,507	4,348
Female	4,165	4,198	4,199	4,350	4,080
Double births (Resident only)	89	79	88	84	80
Triple births (Resident only)	1	2			
Resident illegitimate births	892	713	582	603	496
Total illegitimate births	1,186	1,031	916	869	806
MATERNAL PARENTAGE					
Canada	7,102	7,006	7,050	7,063	6,764
British Isles	315	334	295	339	364
Europe and Asia	1,157	1,184	1,157	1,310	1,170
U.S.A	100	103	123	123	110
Other Countries	20	18	18	22	20

THE LOCAL BOARD OF HEALTH

RESIDENT LIVE BIRTHS BY AGE OF MOTHER AND ORDER OF BIRTH 1965

				1905				-		
		5-19 20-24 25-29 30-34 35-39					Over			
	-15	15-19	20-24	25-29	30-34	35-39	40-44	44	Total	%
1st child	2	846	1,375	469	145	46	7	_	2,890	33.3
2nd child		185	1,003	679	304	89	23	3	2,283	26.3
3rd child	-	22	401	616	361	154	25	1	1,580	18.2
4th child		2	129	348	292	140	36	3	950	10.9
5th child			29	127	177	109	40	2	484	5.5
6th child			7	49	85	68	17	3	229	2.6
7th child	-		1	29	39	46	13	1	129	1.5
8th child	-	-	1	6	18	29	14	2	70	.8
9th child		-	2	3	7	18	5	1	36	.4
10th child and										
over	-	-	—	-	11	19	12	-	42	.5
	2	1,055	2,948	2,323	1,440	718	192	16	8,693	100
STILLBIRTHS		1965		1964	19	63	196	2	1961	
Total stillbirths			127	7	156		42	14		128
Resident stillbirths only			97		115		01		1	89
Male			59		55		59		5	42
Female			38		60		42		8	47
Causes of Foetal Deaths:			1965	·					~	
Acute or chronic diseas			1705							
in mother				3						
Diseases and conditions				3						
				9						
of pregnancy				<i>,</i>						
Other maternal causes				-						
Placental and cord condi			39							
Birth trauma				1						
Foetal malformations			(
Other foetal conditions			39	,						
DEATHS			1965		1964	19		1963		1961
Total deaths			2,82		2,651	2,6		2,65		2,536
Resident deaths only			2,170		1,953			1,81		1,726
Male			1,314		1,222			1,14		1,101
Female			850	6	731	7	50	67	1	625
Resident rate per 1,000										
population			:	5.8	5	.4	6.38		6.1	6.2
Racial Origin										
Canada			73	5	693	6	21	57	9	558
British Isles			598	В	526	5	76	57	5	481
Europe and Asia			67	в	584	5	98	52	29	521
U.S.A.			1.5	2	145	1	26	10	5	114
U.S.A			15	2	145		20	10	15	114

PRINCIPAL CAUSES OF DEATH, 1965

		Total	Male	Female	% of Total Deaths	Rate per 100 M Population
420-434	Diseases of heart	697	461	236	32.1	187.7
140-205	Cancer	430	249	181	19.8	115.8
330-334	Vascular lesions affecting					
	central nervous system	228	107	121	10.5	61.4
800-999	External causes		133	49	8.4	49.0
750-776	Diseases of early infancy	165	99	66	7.6	44.4
490-493	Pneumonia	72	40	32	3.3	19.4
410-416	Chronic rheumatic heart disease	23	8	15	1.1	6.2
581	Cirrhosis of liver	21	11	10	1.0	5.7
440-447	Hypertension		4	14	.8	4.8
	All other causes		202	132	15.4	90.0
	Total	2,170	1,314	856	100.0%	584.4

MORTALITY FROM HEART DISEASE

Year	Total Deaths	Deaths From Heart Disease	Percentage of Total Deaths	
1965	 2170	697	32.1	187.7
1964	 1953	622	31.8	173.9
1963	 1938	602	31.1	198.1
1962	 1814	556	30.6	188.4
1961	 1726	557	32.3	201.1

MORTALITY FROM CANCER

Year		Fotal eaths	Deaths From Cancer	Percentage of Total Deaths	
1965		2170	430	19.8	115.8
1964		1953	361	18.5	100.9
1963		1938	336	17.3	110.5
1962	************	1814	342	18.8	115.9
1961		1726	306	17.8	111.2

MORTALITY FROM INTRACRANIAL LESIONS OF VASCULAR ORIGIN

Year	otal eaths	Deaths From This Cause	Percentage of Total Deaths	Rate per 100M Population
1965	 2170	228	10.5	61.4
1964	 1953	169	8.7	47.2
1963	 1938	196	10.2	64.5
1962	 1814	202	11.1	68.4
1961	 1726	177	10.3	64.1

MORTALITY FROM TUBERCULOSIS

Year	Fotal eaths	Deaths From Tuberculosis	Percentage of Total Deaths	Rate per 100M Population
1965	 2170	4	.18	1.1
1964	 1953	9	.46	2.5
1963	 1938	6	.31	2.0
1962	 1814	3	.16	1.0
1961	 1726	6	.34	2.2

MORTALITY FROM PNEUMONIA

Year	D	Total leaths	Deaths From Pneumonia	Percentage of Total Deaths	
1965		2170	72	3.3	19.4
1964		1953	98	5.0	27.4
1963		1938	71	3.7	23.4
1962		1814	66	3.6	22.3
1961		1726	75	4.3	27.1

MORTALITY FROM EXTERNAL CAUSES

	Total Deaths	Deaths From External Causes	Male	Female	Suicide	Homicide	Automobil Accidents	All Other Accidents	Percentag of Deaths	Rate Per 100M Population
1965	 2170	182	133	49	33	3	57	89	8.4	49.0
1964	 1953	174	127	47	39	5	61	69	8.9	48.6
1963	 1938	158	111	47	28	10	50	70	8.2	52.0
1962	 1814	133	91	42	31	3	40	59	7.3	45.0
1961	 1726	124	87	37	25	1	37	61	7.2	44.9

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	1965	1964	1963	1962	1961
Total deaths under 1 year of age	274	274	289	294	341
Resident deaths under 1 vear of age		186	174	162	201
Male	108	119	105	97	124
Female		67	69	65	77
		162	158	144	194
nfant mortality rate per 1,000 living births	21.7	21.5	20.5	18.3	23.7
RACIAL ORIGIN					
Canada	174	168	149	140	161
British Isles	6	6	e	80	7
Europe and Asia	6	14	18	12	30
	6	1	4	2	2
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THE LOCAL BOARD OF HEALTH

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S	Total	
		296 Purpura and other haemorrhagic conditions 351 Cerebral spastic infantile paralysis 355 Corebral spastic infantile paralysis 490 Eboar pneumonia 491 Pinacy atypical preumonia 492 Pinacy atypical preumonia 493 Pinacy atypical preumonia 494 Pinacy atypical preumonia 550 Acute bronchitis 560 Other chronic interstitual pneumonia 578 Other diseases of intestines 581 Other diseases of intestines 582 Appendicitis, other 583 Monstrosity 584 Monstrosity 585 Monstrosity 586 Monstrosity 587 Other congenital malformations of 588 Monstrosity 589 Monstrosity 581 Spina bifida and menipaocele 553 Other congenital malformations of 554 Congenital malformations of 555 Congenital malformations of 555 Other congenital malformations of 556 Other congenital malformations of

INFANT MORTALITY, 1965

IMMUNIZATION CLINICS - COMMUNICABLE DISEASE CONTROL

250 daily inoculation clinics were held at the regional offices through the year. The average daily attendance was 405 or 68 per clinic. Between January and April the third annual Sabin oral poliomyelitis

vaccine campaign was undertaken.

1,023 visits in connection with communicable disease were made to adults in their homes.

A lecture series was given to student nurses at the Misericordia and General Hospitals. 367 graduate and undergraduate nurses attended the clinics for teaching purposes.

The city was once more free of diphtheria and poliomyelitis. A downward trend in the incidence of infectious hepatitis continued to be marked, cases recorded in 1965 were approximately half of those recorded in 1962.

Protection against communicable disease depends upon the immunity of the community as a whole. While adults are at great pains to ensure the protection of their children, this does not hold for the adults themselves. The continuing decline in adult immunization against poliomyelitis is a case in point.

	1965	1964	1963	1962	1961
No. of persons receiving 1st doses	32,083	32,801	53,069	29,527	23,050
No. of persons receiving reinforcing doses	12,724	11,570	10,073	14,817	10,961
Total procedures	227,066	230,465	251,086	222,939	203,193
Total attendance	94,338	95,648	125,330	91,794	80,301
Out of town persons attending clinics	883	814	1,348	1,558	1,350
Average daily attendance:					
Main Clinic	88	98	133	111	99
South Side	56	51	72	52	46
Woodcroft	63	94	128	96	91
Eastwood	63	65	87	58	46
Idylwylde	58	60	81	50	37
Jasper Place	51	41	(Opened	August	17, 1964
Mobile	26	17	(Opened	April 9,	1964)

	TOTAL	IMMUNIZATION	STATISTICS, Immunization Clinics	1965 School Health Service
DIPHTHERIA:			8,731	991
Re-inforcing	doses		11,337 44,117	17,117 21,032
WHOOPING COU				
1st doses	dosas		8,400 10,517	—
			42,219	= = =
TETANUS:				
1st doses			10,299	991
			11,223	17,117
			48,314	21,032
TYPHOID:			1,836	
		*********	279	
			5,437	—
SMALLPOX: Smallpox vac	cinations		11,475	22,042
POLIOMYELITIS-	SALK:		100000	
1st doses			9,604 11,852	853
			46,713	20,042
POLIOMYELITIS-	SARIN-			
			8,049	994
Total doses .			15,714	7,421
CHOLERA:				
			449 852	_
			052	
TYPHUS:			257	
			522	_
OTHERS:				
Total doses .			44	-
SCHICK TESTS:			632	-
TUBERCULOSIS TI	ESTS:		705	22,706

COMM	COMMUNICABLE DISEASES, 1961 - 1965	DISEAS	ES, 1961	- 1965							
	1965	965	1964	964	-	1963		1962	-	1961	
	υ	٥	U	٥	υ	٥	υ	٥	υ	٥	
Brucellosis			1	1	1		-				
of the newborn	. 5	1	-		1		. 1	I	I		
Diphtheria carrier	*		°	1	41		1.		•	Ι	
Uysentery Encephalitis			•	14	- 1		4		1		
Food poisoning	. 55	1	39	1	37		88	1	25	1	TH
Food poisoning carrier		"	07	1-	141		141		1		IE I
Measles	291	۰	2169	- 1	1248	-	2817		1184		LOC
Meningitis A (Polio virus)		1			1		1	1	-		CA
Meningitis B (Coxsackie virus)		1	e		-	1	-	1	4	-	L
Meningitis C (Echo Virus)		1	1-	1	•	1	12	1	"	1	BC
Meningitis U (Uthers and unspecified)			- ന	-	~-	-	-		-		AF
Paratvohoid fever	4	1	20	•	-	•	.2		-	1	RD
elitis		1			20		13		50		OF
Rubello Scarlat favor and stream throat	705	1-	310		320		120		26		• +
Typhoid fever		•	5	1	-			1	3		IE/
Typhoid fever carrier		1	-	١	-	1		١	9	1	AL.
Whooping cough	. 51		38	-	102	-	335		62		тн
VENEREAL DISEASES											
Gonorrhoea	. 2020	1.	2428	1.	2645	1.	2208	"	1503	1	
Non-specific urethritis		- 1	181	-1	519	4	494	•	425	-	
TOTAL	. 3414	5	7760	9	5491	7	6570	5	3651	3	
Morbidity per 1,000 population	. 9.1		21.7	-	18.0	0	22.3		13.2	2	
C—Cases D—Deaths											13

14		THE LOCAL BOARD	OF HEALT	н			
s	Non- Resident	∞= <u>6</u> 4 6 4−∞	11	40			
	\$6-52	7 3 4 1 3 4 7 3 6 7 1 7 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	146	234			2
	84-24	°° 8,5] ∞°₁+	151 8	215			1
	41-44	- 4 00 0 00 00	180	254			1
	37-40	-404 - ∞ ⁶ 4 =	142	220		- -	2
	98-88	-∞ <u>-</u> ∞ - 0 0 4	147	212			1
	59-35	°10002 =7 -	150	207			1
	55-28	* 122- 5 ⁰ ³ ³	127 5	211		111.	1
1965	51-24	13 153 4103	185	322			1
EEKS,	02-71	5 1933 0 53 0 5 - 4	186 5	273			1
BY WEEKS,	91.51		155	258			I
DISEASES	51-9	2 5 % 3 % % % % % % % % % % % % % % % % %	170	345			1
	8-2	5 302 5 ⁶ 33	130	323			1
CABLE	1-4		151	340		-	-
COMMUNICABLE	Female	33 33 33 33 33 33 33 33 33 33 33 33 33	725 31	1382		~	2
ŏ	Male	21 243 164 21 21 21 21 21 21 21 21 21 21 21 21 21	1295 76	2032			3
	lotoT	55 55 291 295 295 295 51	2020	3414		m	5
		Diarrhoea of the newborn Dysentery Food poisoning Infectious Hepatitis Measles Meningitis aseptic C Meningitis - meningococcal Paratyphoid fever Rubella Scarlet fever and strep throat Typhoid fever Coroling cough	VENEREAL DISEASES: Gonorrhoea Syphilis	TOTAL	DEATHS:	Infectious Hepatitis Scarlet fever Syphilis	TOTAL

_		THE LOCAL BOARD OF	HEALTH		15
	Non Resident	= <u>6</u> 4 0 4-0	11	37	11111
	Not Stated	1111111111111	16	16	111
	60 & Over	0 4		6	n n
	40-59	- <u>~</u> o 4-		25	- - 9
	50-36	3 ⁰ 4 3 ⁰ 8	1680	1910	111 1
1965	61-51	- 324 24	322 6	496	111 1
BY AGE,	10-14	3] 34 -233-	1 2	195	111 1
	6-5	194 4 4 124 5 1 18 194 18 18 18 18 18 18 18		403	- -
ABLE DIS	1-4	23 3052 306 <u>1</u> 30 23 3252	11	300	
COMMUNICABLE DISEASES	Under 1	م 5 <u>7</u> 10 آگون	11	60	
CON	Female	333 333 333 333 333 333 333 333 333 33	725 31	1382	0 0
	Male	243 153 164 164 21 21 164 21 21 21 21 21 21 21 21 21 21 23 24 21 23 24 21 23 24 21 24 21 24 21 24 21 24 21 24 21 21 21 21 21 21 21 21 21 21 21 21 21	1295 76	2032	m
	Total	2955 2924 2952 2952 2952 2952 2952 2952	2020 107	3414	02 M
		Diarrhoea of the newborn Dysentery Food poisoning Infectious hepatitis Measles Meningitis aseptic B Meningitis aseptic C Meningitis - Meningococcal Paratyphoid fever Rubella Scarlet fever and strep throat Typhoid fever Whooping cough	VENEREAL DISEASES Gonorrhoea Syphilis	TOTAL	DEATHS: Infectious hepatitis Scarlet fever Syphilis TOTAL

TUBERCULOSIS CONTROL

Tuberculosis control was again supported by the Kinsmen Club of Edmonton with co-operation from the Tuberculosis Division of the Provincial Health Department and from the Alberta Tuberculosis Association.

Tuberculosis testing by means of the A. & H. Multiple Puncture Gun was continued in the schools in Grades I, V and IX and all school personnel. Reactors were referred for chest x-rays and family contacts investigated. In certain suspect adult groups, similar surveys were conducted.

Miniature x-ray chest surveys continued both from mobile units and the stationary units in the City Hall and the Unemployment Insurance Building. Since August the only stationary unit is at City Hall.

It appears the incidence of tuberculosis in the city remains high. Citizens should be skin tested or have a chest x-ray at least every two or three years. The mobile unit has been available more widely in the city so that the search for cases has been expanded.

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TUBERCULOSIS CASES NEW TO THE CITY OF EDMONTON, 1965

Total Male Female	- 4-	5-9 10-14	15-19	40-59	60 & Ove Age Not Stated
Pulmonary, active 81 46 35 Pulmonary, inactive 108 48 60 Non-pulmonary, active 18 12 6 Non-pulmonary, inactive 6 2 4	2 4	7 3	3 3 4 1	4 21 7 40 0 3 4 1	17 — 25 3 1 —
TOTAL CASES 213 108 105	2 4	7 4	10 7	5 65	43 3
Morbidity rate per 100,000 population: 54.7	,				
DEATHS: Pulmonary tuberculosis 4 3 1			_	1 —	3 —
Rate per 100,000 population: 1.1					
Total cases on domiciliary treatment as to Visits to cases Visits to contacts Contacts skin tested Contacts referred for x-rays					971 1,125 1,310
ADMISSIONS TO SANATORIUM: New cases Pulmonary Non-pulmonary			acillary		
Old cases reactivated Pulmonary Non-pulmonary					
Total cases on register as to Dec. 31/65	2	,530			
SKIN TESTING SURVEYS: School children and personnel Contacts of school reactors		Number Tested 22,788 1,108		Positive Reactors 836 272	
X-RAY SURVEYS:		.,			
City Hall Unemployment Insurance Building Mobile Unit TOTALS	1,470	1964 6,638 3,130 13,540 23,308	1963 7,022 2,474 10,002 25,283	1962 8,462 2,881 279 11,622	1961 6,984 2,171 16,734 25,889
TOTALS	20,040	20,000	20,200	11,022	20,009

WELL BABY AND PRE-SCHOOL SERVICES

Clinic sessions were held at the six regional offices on 250 days through the year. The average daily attendance was 176 children or 29 to a clinic.

New admissions rose by 1,365, indicating the continued interest and support of parents and indeed of physicians of these clinics.

The routine programme of history and examination, P.K.U. testing, counselling and anticipatory guidance continued.

Classes continue to be held for new mothers in the maternity wards of the hospitals and have been very well received.

Lectures and facilities for field visits continue to be provided to undergraduate and graduate nurses in training at various schools of nursing through the city.

	1965	1964	1963	1962	1961
Total Attendance	42,086	39,292	37,261	39,203	39,201
Under I Year	23,641	22,574	22,464	24,088	24,396
Over 1 year	18,445	16,718	14,797	15,145	14,805
Average daily attendance					
Central Clinic	21	24	25	25	27
South Side Clinic		25	26	25	25
Woodcroft Clinic	34	37	39	38	42
Eastwood Clinic	37	36	39	38	34
Idylwylde Clinic	33	33	33	31	29
Jasper Place	22	(171 cli	nics)		
Mobile	13 3	50'') 14	(38 clinic	:s)	
Total average monthly attendance	3,640	3,274	3,105	3,269	3,267
Total new admissions	9,251	7,881	7,630	7,982	7,657
Under 1 year	6,462	5,854	5,852	6,163	5,938
Over 1 year	2,789	2,027	1,778	1,819	1,719
Discharged	3,171	2,413	7,099	6,702	6,959
Total remaining on roll	34,857	28,772	23,304	23,773	21,493
Home visits	3,805	3,717	4,017	4,529	4,907
Children visited	4,959				
Under 1 year	3,242				
Over 1 year	1,717				
Phenylketonuria tests	8,594	7,127	8,801		
Children tested	4,565	4,206			
Number seen by doctor	533	560	590	715	681
Referred to family doctor	1,203	966	743	773	739
Referred to dentist	. 385				
No. of student days		475	403	420	373
					0.0

SCHOOL HEALTH SERVICES, 1965

At the beginning of the 1965-66 academic year 89,671 students attended 186 city schools, and public health services were provided by three full time physicians, three part time physicians, and 61 district nurses of the Health Department.

Periodic examinations by the medical officers covered Grades I and IX (Grade V being added in selected schools) and all entrants to the school system. Small groups of under-privileged children were examined in the summer before leaving for camping holidays.

All Grade IV classes were audiometrically screened as were all students referred by teachers. After further testing 287 children were examined by medical officers and had individual audiograms made, and their parents were advised whether investigation or treatment was indicated.

Ophthalmic examinations and spectacles, where necessary, were provided for 171 children of indigent parents, and a further 38 were assisted with spectacle repairs.

The third general administration of oral poliomyelitis vaccine took place at the beginning of the year and 7,421 doses were given in the schools. The balance of the immunization program continued as before. Re-inforcing doses of triad (diphtheria, tetanus and poliomyelitis combined) were given Grades I, V and IX and smallpox vaccination was offered in Grades II and VIII. Primary immunization courses against diphtheria and tetanus and against poliomyelitis were arranged for the small group starting school without this protection. There were no unusual outbreaks of communicable disease and the

There were no unusual outbreaks of communicable disease and the school population remained free of paralytic poliomyelitis and diphtheria for the fifth and seventh successive years respectively.

Routine tuberculin testing showed a welcome decline in the positive reactor rates as indicated in the following breakdown, last year's figures being shown in brackets: Grade I - 1% (1.6%), Grade V - 2.9% (3.7%), Grade IX - 5.5% (5.8%).

Education regarding smoking and health remained focussed on the junior high schools. Enthusiastic support was received from the teachers and from the Canadian Cancer Society and the Alberta Tuberculosis Association.

In-service education was steadily carried on throughout the year by monthly general staff meetings, weekly regional staff meetings and evening classes on community mental health services.

EXAMINATIONS BY MEDICAL OFFICERS:

EXAMINATIONS DI MEDICAL OFFICERS.	
Complete periodic examinations	
Examinations on special referral	
Re-examination	
Total number of examinations	
Number of pupils with defects	
Parents invited to examinations	
Parents present at examinations	
Pupils referred to physicians	938
Pupils referred to dentists	
EXAMINATIONS BY NURSES:	
Periodic examinations	48,818
Examinations on special referral	
Re-examinations	8,604
Partial examinations	
Total number of examinations	
Number of pupils with defects	
Pupils referred to physicians	
Pupils referred to dentists	
AUDIOMETRIC SURVEY:	
Number group-tested	9,552
Failures	
Number tested individually	
Referred for audiograms	
SCHOOL NURSING SERVICES:	
Home visits	6,596
Consultations with physicians	
Consultations with teachers	
Consultations with parents	
Consultations with others	
Pupils given first-oid	
Lectures and talks	
Field work sessions with students	

REGISTER OF PHYSICALLY HANDICAPPED CHILDREN

At the end of 1965 this register covered 2,383 disabilities in 2,295 children resident in Edmonton. Those with records classed as active were followed up by the staff on a regular basis. Where it appeared that further reviews were not required the records were transferred to the inactive file. Table I below gives a breakdown by numbers and Table II lists the

percentages of the cases in the registry.

Table I DISABILITY	PRE	-SCHOOL	L		SCHOOL	L
	0	é		61	ve	
	Active	Inactive	otal	Active	Inactive	tal
ORTHOPEDIC:	Ac	lno	To	Ac	Ĕ	Total
Congenital	60	50	110	17	47	64
Muscular Dystrophy	2	-	2	9	2	11
Osteochondroses	3		3	9	25	34
Rheumatoid Arthritis	3	_	3	17	5	22
Post Traumatic	1	-	1	3	6	9
Miscellaneous	1	-	1	13	14	27
			100			167
NFECTIVE AND PARASITIC:			120			10/
Poliomyelitis				24	46	70
Tuberculosis—Respiratory	_			4	29	33
-Bone and Joint				-	3	33
-Other				2	8	10
Other			_	-	1	1
Unit						
			-			117
EOPLASTIC:						
Benign-Haemangioma	3	1	4	2	3	5
Other	4	2	6	4	4	8
Malignant—Central Nervous System	-	-	_	5		5
—Leukaemia	1	-	1	2	-	
-Other	1	-		11	-	11
			12			31
LLERGIC, ENDOCRINAL, METABOLIC A	ND NUT	RITIONA	L			
Asthma	6	-	6	36	67	103
Diabetes	5		5	36	25	61
Other-Allergic	1	2	3	9	22	31
-Endocrinal	-	-	-	10	11	21
Metabolic & Nutritional	9	-	9	11	3	14
			23			230
SISEASES OF BLOOD AND BLOOD PRIMA	ARY ORG	ANS	20			200
Haemophilia		-		7	3	10
Purpura	-			-	3	3
Miscellaneous	-	-	-	3	3	e
			-			19
AENTAL, PSYCHONEUROTIC AND PERSONALITY DISORDERS	1		1	34	23	57
				54	20	57
ISEASES OF THE NERVOUS SYSTEM:						
Cerebral palsy		1	11	29	36	65
Epilepsy		-	20	138	94	232
Hydrocephalus		-	7	5	6	11
Spina bifida and meningocele Other	7	2	7	4	5	9
Other	10	2	12	27	36	63
			59			380
DISEASES INVOLVING LOSS OF SPECIAL	SENSES.					
	SEMSES:					
	4	1	5	8	11	10
Eyes—Cataract	4	1	5	8	11	
	-	1	5 21	8 4 28	11 4 62	19 8 90

20 THE LOCA	L BOARD	OFH	IEALTH			
DISABILITY	PRE	-зсноо	L		сноо	L
	Active	Inactive	Total	Active	Inactive	Total
Ears—Impaired hearing —Other		_	7 1	61 3	63 1	124
			43			318
DISEASES OF CIRCULATORY SYSTEM:						
Congenital	28	3	31	63	44	107
Rheumatic fever		-	5	92	149	241
Other		4	24	6	8	14
			60			362
DISEASES OF RESPIRATORY SYSTEM		3	3	3	9	12
DISEASES OF DIGESTIVE SYSTEM						
Coeliac disease	. 14	11	25	3	13	16
Hare Lip and/or cleft palate		7	24	4	14	18
Hirschsprung's disease		1	4	_	3	
Megacolon		-			1	1
Other		1	6	9	8	17
			59			35
DISEASES OF THE						
GENITO-URINARY SYSTEM	. 12	5	17	34	28	62
CONGENITAL MALFORMATIONS	. 31	15	46	18	43	61
BIRTH INJURIES		1	1	1	-	1
SPEECH DEFECTS	_ 2	1	3	55	18	73
OTHER	_ 1	1	2	4	5	5
Table II GROUP			DEDCE			
Orthopedic			26.7	NT OF TO	8.6	
Infective and parasitic					6.0	
Neoplastic			2.7		1.6	
Allergic, endocrinal, metabolic and nutr			5.1		11.9	
Diseases of blood and blood primary or						
Mental, psychoneurotic and personality			.2		2.9	
Diseases of the nervous system			13.1		19.6	
Diseases involving loss of special senses			9.6		16.4	
Diseases of circulatory system			13.4		18.7	
Diseases of respiratory system			.7		.6	
Diseases of digestive system			13.1		1.8	
Diseases of genito-urinary system			3.8		3.2	
Congenital malformation			10.2		3.2	
Birth injuries			.2		.05	
Speech defects			.7		3.8	
Cult						

DIABETES DETECTION SURVEY

The first continuing Diabetes Detection Survey in Canada was initiated in the City Health Department in Edmonton in 1965. This is a co-operative endeavour, supported by organized medicine, and financed by the Canadian Diabetic Association and the Edmonton Civic Employees' Welfare Chest Fund.

Urine glucose test strips are given to those reporting to the miniature x-ray unit operated by the Alberta Tuberculosis Association. The strips are returned to the Edmonton Branch of the Diabetic Association and suspect cases are referred for follow up. Investigation may be completed through the courtesy of physicians operating private laboratories in the city.

of physicians operating private laboratories in the city. 5,332 test strips were distributed (3,682 to Edmonton citizens). 2,502 were returned to the Diabetic Association. 23 people were diagnosed as being diabetic.

1-age	35
11-oge	45-54
	55-64

Other _

2—age 65-74 3—age 75 1—age not stated.

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DENTAL DIVISION

1. School Dental Examinations:

The school dental teams completed dental inspections for school children of grades 1 to 8 inclusive and examined 71,940 children in 201 schools out of a total school population of 89,671. There were 38,962 (54.3%) children with dental decay and 27,797 (38.6%) with no visual dental defects.

Number of schools completed	201	
Number of children inspected	71,940	
Number with dental decay	38,962	(54.3%)
Number with poor oral hygiene	4,154	(5.8%)
Number who have lost baby teeth early	7,382	(10.2%)
Number with crooked teeth and/or bite	4,808	(6.7%)
Number with no visual dental defects	27,797	(38.6%)

2. Dental Clinical Treatment Service:

This service provided for school children of marginal and part-time wage earning groups. For these even a modest medical or dental expense presents a financial hardship. Application for this service is made annually. There is no direct cost to parents or guardians of needy children who receive dental treatment at the City Dental Clinics.

Dental Treatment Service Summary:

Number of appointments made	2,094	
Number of appointments missed	168	(8.0%)
Number of silver amalgam fillings (sfcs)	3,194	
Number of fillings requiring an anodyne base	279	
Number of anterior silicate fillings	270	
Number of extractions	1,270	
Number of other operations	36	
Number of emergency cases	119	
Number of cases completed	485	
Number of children on the waiting list	408	

3. Pre-School Dental Program:

This is a dental health service for four-year old pre-school children in conjunction with the Well Baby Clinic Services. These children are brought in by appointment to the regional clinics for the following dental services rendered by dental hygienists.

- (a) Dental inspection.
- (b) Consultation and counselling with the parent or guardian regarding the dental hygiene and dental care for the child.
- (c) Prophylaxis (cleaning) and topical stannous fluoride application.
- (d) Referral to a dentist in the case of children who have never been examined by a family dentist.

Pre-School Dental Service Summary:

Number of appointments made	1,749	
Number of appointments missed	209	(11.9%)
Number who received dental inspection	1,536	
Number who refused dental inspection	4	
Number of parent interviews	1,538	
Number of children under care of dentist	1,448	
Number of children with no family dentist	72	
Number of children referred to a dentist	99	
Number of appointments made for stannous		
fluoride and prophylaxis treatment	1,894	
Number of appointments missed	221	(11.6%)
Number who received topical stannous		
fluoride and prophylaxis treatment	1,671	
Number of children on waiting list	173	

4. Pre-School Dental Recalls:

These are five-year old pre-school children who received their second consecutive annual dental inspection, prophylaxis and topical stannous fluoride treatment.

Number of appointments made	1,134	
Number of appointments missed	138	(12.1%)
Number of children who received a topical stannous		
fluoride and prophylaxis treatment	994	
Number of children who refused treatment	2	

5. Pre-school Five-Year Old Dental Health Service:

These are five year old pre-school children who received the		
inspection, prophylaxis and topical stannous fluoride treatment by	appoi	ntment.
Number of appointments made	800	
Number of appointments missed	112	(14.0%)
Number of five-year old children who received a dental inspection,		
prophylaxis and topical stannous fluoride treatment	688	
Number of five-year old children on the waiting list	33	

6. School Stannous Fluoride Program:

School Children who qualify for the dental clinical treatment in the city dental clinics and have the dental work completed also qualify for the prophylaxis and stannous fluoride preventive treatment service.

Number of appointments made	441	
Number of appointments missed	49	(11.0%)
Number of school children who received a prophylaxis and		
stannous fluoride topical treatment	392	
Number of school children on the waiting list	10	

7. Playschool Dental Health Program:

In April of 1965 a dental inspection program was initiated in the Playschools of Edmonton similar to that carried out in the elementary and junior high schools. This playschool population corresponds to the Kindergarten population in other provinces in Canada. The total enrollment is about 3,500 and every child enrolled is eligible for registration in grade 1 in the elementary school, the following school term. It was not possible to complete the dental inspections in all the playschools.

From the total number of 3,500 registered playschool children 1,973 (57%) were examined by dental hygienists. The following information was obtained regarding their dental health level.

Playschool children with dental decay	46%
Playschool children with missing teeth prematurely due to extractions	12%
Playschool children with crooked teeth or bite	1%
Playschool children with no visual dental defects	55%

8. Pre-School and School Dental Survey:

This is a detailed dental examination of each 4-year-old pre-school child and a random sample of the 5-year-old pre-school and school children. The random sample consists of every fifth child in the playschool population, every tenth child in grades 1, 2, 4, 6 and 8 corresponding to ages 6, 7, 9, 11 and 13 years and every fifth high school student in grades 10, 11 and 12 corresponding to ages 15, 16 and 17 years.

This survey provides us with precise statistical dental data on which we can base the dental health level of pre-school and school children in the city of Edmonton.

The I.B.M. sense card is used for recording the detailed dental data in regard to the statistical sample obtained in our dental survey. The need for subsequent manual tabulation is therefore eliminated as these cards are processed by the computer, and the results tabulated on a "print-out" form.

This is a standardized dental examination and tabulation procedure which make the dental data useful in compiling provincial and national dental health indices. Its primary use for the City of Edmonton Health Department is to compare dental health levels of children from year to year, evaluate our dental program and its progress.

			THE	LOC	AL	BO	ARD	OF	H	EAL	ТН				23
	EG.)	1964- 1965	35.45	18.18	20.12	22.24	16.39	12.48	10.10	6.63	14.16	9.09	8.60	3.57	7.1.7
	DENTAL NEGLECT (NEG.	1963- 1964	34.76	15.34	1	28.82	12.99	10.56	12.75	8.19	15.23	1		I	1
	NEG	1962- 1963	39.33	1	1	29.11	15.33	14.14	14.83	11.00	17.27	1	1	I	Т
	z	1964-	1.33	3.03	4.44	9.97	9.93	4.57	2.18	3.93	6.44	7.95	7.53	9.52	8.30
	EXTRACTION ONLY (E)	1963- 1964	3.87	4.76	1	9.34	11.57	6.02	3.33	2.94	6.88	1	1	I	1
	EX	1962- 1963	3.83	1	1	9.86	9.73	6.58	3.04	4.64	7.20	1	1	1	1
	RIES C.)	1964- 1965	13.71	27.27	21.30	28.22	40.40	49.74	46.73	51.55	42.51	52.27	45.16	42.86	46.80
ц	PARTIAL CARIES CARE (P.C.C.)	1963- 1964	17.34	31.22	1	28.02	40.39	53.55	48.34	47.06	42.90	1	1	1	1
TERM PERCENT	PART	1962- 1963	16.17	1	1	25.51	43.07	49.44	46.77	52.32	42.70	1	Ι	Ι	1
F ,	ARIES C.)	1964-	6.36	6.49	5.02	4.60	8.11	6.15	5.74	6.21	6.15	14.77	17.20	21.43	17.74
1964-65 SCHOOL FAL CARE LEVEL	COMPLETE CARIES CARE (C.C.C.)	1963- 1964	7.02	4.23	1	4.83	6.41	8.38	6.27	7.56	6.62	1	1	1	1
DENTAL C	COMP	1962- 1963	5.67	1	1	10.33	15.87	14.00	11.11	15.16	14.38	Ι	Ι	1	T
DE	,D.)	1965	42.88	43.51	49.11	34.97	25.17	27.07	35.25	31.68	30.74	15.91	21.50	22.62	20.00
	NO DENTAL DEFECTS (N.D.)	1963-	37.02	44.44	1	28.99	28.65	21.49	29.22	34.24	28.37	1	1	1	1
	DEF	1962- 1963	35.00	1	1	25.20	16.00	15.69	18.06	16.87	18.39	I	I	1	1
	(Ż	1964-	1,430	462	338	652	604	569	505	483	2,811	88	93	84	265
	SAMPLE SIZE (N)	1963-	1,240	189	1	621	562	549	510	476	2,718	1	1	I	1
	SAM	1962-	009	I	1	639	750	714	526	409	3,038	I	1	I	T
	AGE		4	5 (Recalls)	5 (Playschool)	9	7	6	11	13	Combined 6, 7, 9, 11, 13 years	15	16	17	Combined 15, 16, 17 years

DENTAL HEALTH SERVICES 1964-65 SCHOOL TERM

GENERAL PUBLIC HEALTH NURSING

This is the arm of the department working directly with families and others in the community delivering personal service in a traditional public health nursing programme. Health promotion by active prevention, counselling and health education is offered to the infant ,pre-school, school child and the adult, indeed to all within the community.

Working with various divisions of the department, the district nursing service provides:

- 1. Continuity from the clinics to the infant and pre-school groups.

- The school health programme.
 Communicable disease control in the field, tuberculosis control.
 Assistance through counselling in family problems, mental health and geriatrics.

Over a two year period, a cadre of public health nurses from this department have been receiving instructions each week in mental hygiene. The later part of the year saw the introduction of follow-up services for selected patients discharged from the psychiatric ward of the Royal Alexandra Hospital. This scheme is being operated with the support and approval of the medical profession and it is hoped will prove a satisfactory pilot project.

During the year, 13,357 home visits were made regarding a very wide variety of health problems.

Prenatal Education	16
Infant	1,877
Pre-school Child	3,104
School Child	6,596
Communicable Disease	1,023
Tuberculosis	1,253
Mental Hygiene	120
Geriatrics	41
Family Problem	725
Other	629
Visits to Playschools, Nurseries, etc.	330
Visits to Nursing Homes and Homes for the Aged	15
Field Work Sessions with Students	304
Lectures and Talks	380

HOSPITALS AND INSTITUTIONS

Beds available for the acute and chronically ill and for the care of the aged:

HOMES FOR THE AGED	
	1,370
AUXILIARY HOSPITALS:	
Allan Gray	. 50
Good Samaritan	
Norwood	
St. Joseph's Hospital	
CONVALESCENT HOSPITAL:	594
Glenrose Provincial General Hospital	
ACTIVE TREATMENT HOSPITALS:	
General Hospital	
Misericordia Hospital	
Royal Alexandra Hospital	
University of Alberta Hospital	
Charles Camsell Hospital	
Aberhart Memorial Sanatorium	
	3,302

THE LOCAL BOARD OF HEALTH

VICTORIAN ORDER OF NURSES

A steady increase in total visits has been made in the past five years which indicates the continuing need for service in this area. Approximately 60% of the visits made in the past year were for nursing care and treatment to the elderly, 15% to other adults, 7% to children under 16 years of age and the remaining 18% were for health teaching, mainly in the maternity field. Additional activities carried on by this branch are prenatal classes and a hospital referral program in three of our local hospitals — University of Alberta Hospital, Misericordia Hospital and the Royal Alexandra Hospital which discontinued their service in June 1965 due to a financial deficit at the hospital. Through these referral programs, the individual patient can receive continuity of care in all fields when he goes from hospital to home. In such cases, the Victorian Order of Nurses supplies medical and surgical care such as dressings, irrigations and injections at the direction of the physician in charge. The chronically ill and aged receive nursing care and rehabilitation, e.g. cerebral palsy, diabetics, cystic fibrosis, arthritis, etc.

Victorian Order of Nurses' service is available in the home on an hourly basis to everyone in the community. Emergency calls only are answered after 5:00 p.m., on weekends and holidays, these calls must be under the direction of a doctor.

The fee is based on the cost per visit with adjustment made to suit the individual budget, no patient is refused service because of inability to pay.

	1965	1964	1963	1962	1961
Prenatal care visits	0	0	2	7	4
Prenatal instructions - visits	25	4	15	102	125
Postnatal care	1	6	10	27	8
Postnatal instructions	1,706	1,784	2,252	2,025	2,250
Newborn care	28	56	200	116	149
Newborn instructions	3,086	3,123	4,544	3,651	2,151
Medical and Surgical, etc.	18,220	17,064	15,036	13,123	14,254
Total visits	23,066	23,784	22,535	19,051	18,937
Prenatal clinics held	87	84	95	85	78
Enrolment	152	167	186	161	268
Average attendance	10	11	12	12	11

ENVIRONMENTAL HYGIENE

In January of 1965, centralized control of routine inspections was undertaken. The effectiveness and improvement in reporting and recording is evident from the statistics subsequently given.

In July, a housing by-law was passed by council. The Local Board of Health thereupon appointed a housing officer who operates both directly and as back up to the field inspectors. Unfortunately, owing to staff shortages endeavours in this area have been limited. Nevertheless, ten dwellings and apartments were placarded and closed as unfit for human occupancy. Material improvements were effected in 39 other buildings and minor improvements in many others.

The proposals for the institution of urban renewal schemes in the city are viewed with satisfaction. While this city is fortunate in that the majority of dwellings are new, nevertheless some are deteriorating rapidly and in addition there are many old buildings unfit for occupancy. However until alternate accommodation within the financial means of the occupants is provided, little can be done with basically unsound structures.

There also remains the problem of the lowest social stratum of society there is little point in placing these people in good accommodation. Concern is also felt for many of the elderly living under substandard conditions, yet it is true that many are unwilling to move to better accommodation even though this is economically feasible.

Much has been heard of atmospheric pollution in the city. The Sanitary Engineering Division continued to fulfill their responsibilities. The City Engineers, at the request of the Province, have ceased open face burning at the nuisance grounds. All garbage received at the nuisance grounds is tipped into sanitary landfills. Meanwhile this Department has served notice on all those operating substandard non-conforming domestic type incinerators.

A survey has been taken of the packing plants and feedlots in the northeast area of the city by the Sanitary Engineers and this Department in relation to odor control. Modifications have been requested which it is hoped will give material improvement relating to offensive odors.

Meanwhile a study of the recently amalgamated suburb of Jasper Place has been completed relating to those dwellings not connected to the sewer and public water supplies. There are many such dwellings in Jasper Place. Unfortunately a considerable number are owned by absentee landlords and difficulty will be experienced in achieving the required connections.

An ambulance by-law was passed and certain standards were implemented. In the past two years, material improvement has taken place in the services offered.

INSPECTIONS:	1965	1964
Bakeries		374
Barber shops and beauty parlors		300
Dwellings		117
Hotels, lodging houses and apartments		470
Schools, kindergartens, homes for the aged		404
Stores, butcher shops, etc.		1,516
Restaurants		2,761
Streets, lanes, dumps, etc Follow-up inspections		81
Miscellaneous (includes public places, recreation, motels,	1,/01	
laundries and beverage rooms		2,152
idunaries and beverage rooms		2,152
	13,605	8,175
NOTICES:		
Written	1,070	1,005
Verbal		858
COMPLAINTS:		
Received from public	747	445
Justified		420
Received from other departments		8
Referred to other departments		7
The complaints were made up as follows:		
Garbage, streets and lanes		29
Vermin		67
Housing, plumbing and drainage		91
Food and drink		87
Animals		69
Odors, smoke, air pollution		21 81
Miscellaneous		01
LICENSES:		
License applications investigated		4,155
PLUMBING:		
Sewer and water notices issued	4	4
Plumbing permits issued		3,815
Plumbing permits issued for old buildings		23
Alterations to existing plumbing (fixtures)		2,697
Privies eliminated through installation of plumbing		23
OTHER:		
Establishments closed	1	2
Number of student days		36
Poison gas fumigation		6

Atmospheric Pollution:

The Provincial Health Department Sanitary Engineering Division have continued to fulfill their responsibility in the supervision and control of air pollution in Edmonton.

Regular sampling is undertaken of:

Dustfall	Calcium content in dustfall
Hydrogen sulphide	Total sulphuration (Sulphur dioxide)
Smoke	Oxides of nitrogen
Total oxidents	Suspended particulate matter.

Wind data is taken from the Department of Transport station at the municipal airport.

In all, some 14 stations are maintained for sampling purposes.

Total Dustfall:

The 1965 average dustfall presented a small increase of under 3% over the 1964 average dustfall. This is largely attributable to increases in the industrial northwest stations in the fall months. Normally the levels recorded remain below the Provincial standards.

Calcium content in dustfall:

An overall increase of 89% above 1964 average was recorded.

Hydrogen Sulphide:

At the three stations within the city representing the northwest area, city centre and the east end of the city, levels remained essentially similar to those prevailing through 1964.

Total Sulphuration: (sulphur dioxide):

An increase of 41% above the 1964 level was recorded in 1965.

Smoke:

In the centre of the city, a relatively high level of smoke pollution appeared to prevail. In peripheral areas, a fall from the 1964 levels took place.

Oxides of Nitrogen:

A decrease of 38% was recorded in the yearly average of 1965 over 1964, however the peak levels reached were higher in 1965 than in 1964.

Total Oxidents:

Because of technical difficulties, comparative readings for 1964 are unavailable. However, it would appear that a decrease in the fall seasonal mean took place.

Suspended Particulate Matter:

A decrease of 5% over the 1964 reading was recorded in 1965.

In Summary:

- Smoke and dust have increased slightly, but are not near the adverse level. Persistant enforcement of regulations in commercial areas is necessary to maintain a low level of pollution.
- Oxides of nitrogen and oxident data available tends to indicate that the pollution level remains unchanged.
- Hydrogen sulphide and total sulphuration (sulphur dioxide) also indicate a steady pollution level; however, a few isolated cases effected the overall average.

THE LOCAL BOARD OF HEALTH

FOOD INSPECTION

The opening of the food control division of the Provincial Laboratory has provided a much needed and appreciated service. Forthcoming regulations on sampling of food and drink will facilitate much needed expansion in the control and up-grading of food quality. Nevertheless further regulation and prescription of standards are required concerning processing, transportation and warehousing.

of standards are required concerning processing, transportation and warehousing. At this time surveys are being initiated in concert with the Provincial Laboratory to study the over-all picture of food quality in the city.

Meanwhile a shift to Federal supervision is taking place in the packing plant operations and one small plant only remains under local supervision.

MEA	TS INSPECTED	AND				
BEEF:				casses lemned (Portions	(lbs.)
Abscess				_	4	4(
Abscess multiple				1	178	2,34
Actinomycosis				_	38	76
Septicemia				4	50	1,575
Bruised				3		
				7	-	1,010
Emaciation					-	2,365
Mucoid degeneration					-	500
Uraemia				1	-	280
Black Leg				1	-	500
Total inspected, 1965		1,	928			
Total inspected, 1964		2,	155			
Total inspected, 1963		3,	205			
Total inspected, 1962		4,	889			
VEAL:						
Abscess					1	30
Adhesions				_	1	
Parasites					2	10
Urgemig				2	_	400
Total inspected, 1965			92	-		
Total inspected, 1964			87			
Total inspected, 1963			69			
			213			
Total inspected, 1962			213			
MUTTON:						
Parasites					5	2
Total inspected, 1965			37			
Total inspected, 1964			35			
Total inspected, 1963			50			
Total inspected, 1962			64			
PORK:						
Bruised				-	6	16
Parasites					199	1,000
Septicemia				3	_	460
Tuberculosis				_	116	1,160
					1.10	1,100
Total inspected, 1964						
			161			
Total inspected, 1963						
Total inspected, 1962						
	DISEASED	ANIM				
			1965	1964	1963	1962
Beef			229	246	308	545
Veal			2	2	1	11
Mutton			5	6	6	6
Pork			186	560	858	1,422
Total amount of meat conden	nned (lbs.)		12,565	13,140	15,548	28,602
	S FOUND TO		ECTED			
PORK:		ar inte	LUILD			
Infected			114	219	384	810
Percent			5.6			6.49
FOOD:			5.0	0.1.	5.50	0.4)
			124	01		
Complaints processed			136	81		
Samples submitted to Pro			175	159	27	_
Foodstuffs condemned lbs						
fire, flood, etc			1,715	600	209	
Ecostuffe condemned lbe	- other reasons		2443	184 C	35	

463

2,681

35

Foostuffs condemned lbs. - other reasons

MILK AND WATER REPORT

The quality of the public water supply in this city remained constantly good throughout the year.

Equally so, milk and cream supplies have been satisfactory. In the latter part of the year, no doubt due to the poor quality of feed supplies available following an unsatisfactory summer, fresh milk was inclined to be in short supply and supplementation proved necessary.

Of necessity, as the population rises, the milk shed grows in area and in numbers of producers and the time approaches when additional inspection staff will prove necessary.

The control of swimming pools, especially the semi-private swimming pools, has on occasion given cause for anxiety. This department does not accept the responsibility for the supervision of private swimming pools but assistance will be given on request. There is reason to believe that many are poorly operated and may constitute a hazard to those using them.

	1965		196	4
		No. of	Total No.	No. of
INSPECTIONS:	Premises	Inspections	Premises	Inspections
			1000500	and the second second
Producer-shippers, milk		1,177	467	1,053
Producer-shippers, cream		38	18	57
Producer-contacts		158		165
Pasteurization plants-contacts Pasteurization plants		223 233		204 207
Vehicles		672	6	570
Others, complaints, etc.		24		10
oniera, complainta, etc.		24		10
LICENSES AND PERMITS:				
Retail milk certificates issued		813		785
Dairy licenses issued		501		485
Dairy licenses refused		—		_
Dairy licenses suspended temporarily		—		—
SAMPLES:				
Milk samples taken, retail		504		706
Milk samples taken, shippers		4,959		5,286
Cream samples taken		409		227
Chocolate milk samples		5		_
TESTS-MILK:				
Standard plate count tests		918		933
Coliform tests		918		933
Phosphatase tests		918		933
Methylene blue tests		4,957		5,196
Butterfat tests		918		933
RESTAURANTS AND BEVERAGE ROOMS:				
Swab tests - restaurant utensils		234		368
Swab tests - beer glasses		58		
Plate counts - beer glasses		29		—
WATER:				
Standard plate count tests		1,742		2,188
Coliform tests Chlorine content checks		1,742		2,188
Raw river water plate count tests		38		1,258
SWIMMING POOLS:				
Plate count tests		1,508		1,286
Coliform tests		1,508		1,286
Inspections		449		354

457	6,300 2,946	010	296	496	205	817	106	802			Sental Special Services fotal
EXPENDITURES, 1965	Furniture and equipment6, Eye glasses2,	and stationery		Telephones, advertising and travel 4,				Cost nor conito \$2 31		CLASSIFICATION OF EXENDITURES, 1965	tration Communi- cable Disease Control Meat Meat Meat Control Control Control Control Control Control
Salaries	Eye glasses	Medical supplies Printing, postage	Transportation and cars	Telephones, a Uniforms	Miscellaneous	Insurance and pensions	Space and maintenance	Cost nor	ind inco		-sinimbA

		_	_	_					_			
Total Expenditure	\$671,457	6,300	2,946	7,010	9,293	30,296	4,496	876	4,205	42,817	80,106	\$859,802 100%
Special Services	\$7,354	1	1	185	161	894	1	1	1,011	1	1	\$9,635
Dental noisivia	\$63,993	230	1	1,163	1,338	1,330	576	166	871	3,904	12,970	\$86,541
School Health Services	\$352,993	4,933	2,946	3,517	4,481	15,648	1,159	148	538	18,977	14,299	\$419,639 48.8%
noitatina2	\$66,581	45	1	I	209	6,770	178	367	203	1	5,253	\$79,606
Mell Baby	\$63,998	216	1	358	710	2,709	835	1	909	1	21,297	\$90,729 10.6%
Food and Meat Control	\$10,661	I	1	1	4	420	1	1	27	1	1	\$11,112 1.3%
Milk and Dairy Supervision	\$16,325	1	1	34	16	2,045	88	1	76	1	1	\$18,584 2.2%
Communi- cable Disease Control	\$60,509	435	1	1,735	525	1	1,125	195	582	916	20,833	\$86,855
-sinimbA noiton	\$29,043	- 441	1	- 18	- 1,819	- 480	- 535	1	- 291	- 19,020	- 5,454	\$57,101 6.6%
	Salaries	Furniture and equipment	Eye glasses	Medical supplies	Printing, postage and stationery	Transportation and cars	Telephones, advertising and travel	Uniforms	Miscellaneous	Insurance and pensions	Space and maintenance	TOTALS

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THE LOCAL BOARD OF HEALTH







