

Annual report of the Medical Health Officer / City of Winnipeg.

Contributors

Winnipeg (Man.). Health Department.

Publication/Creation

[Winnipeg, [1958]

Persistent URL

<https://wellcomecollection.org/works/uenkebff>

License and attribution

This work has been identified as being free of known restrictions under copyright law, including all related and neighbouring rights and is being made available under the Creative Commons, Public Domain Mark.

You can copy, modify, distribute and perform the work, even for commercial purposes, without asking permission.



Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
<https://wellcomecollection.org>

RCB
30r

CITY OF WINNIPEG
HEALTH DEPARTMENT



THE ROYAL SOCIETY
for the Promotion
OF HEALTH
LIBRARY

ANNUAL REPORT
of the
Medical Health Officer

Year
1958

R.G. Cadham, M.D., D.P.H.



22501421789

CITY HEALTH DEPARTMENT

Winnipeg, 1959

Chairman and Members,
Committee on Public Health and Welfare.

Madam and Gentlemen:

I have the honour to present the annual report and the financial statement of the Health Department for the year 1958.

Some of the highlights of the year were - an increase in the establishment of an Assistant Medical Health Officer to which Dr. J. E. Davies was appointed on July 1st. A Federal Health training grant was obtained for Dr. J. B. Morison, Deputy Medical Health Officer to attend the University of Toronto for a post-graduate course leading to a diploma in public health. A major change in policy was the transfer of the responsibility for supplying drugs and prosthetic appliances to indigent patients from the Department of Public Welfare to the Health Department.

There was a marked drop in the infant mortality rate compared to 1957 mainly as a result of fewer deaths occurring from postnatal asphyxia and atelectasis. The attendance at the expectant mothers' classes showed considerable increase. Two classes were established for the visually handicapped school children. The central registry for handicapped children was extended to include information concerning school children with diabetes and epilepsy.

An outbreak of Poliomyelitis occurred during the summer.

WELLCOME
LIBRARY
Ann Rep
WA28
GC2
W77
1958

Over 400 cases of scarlet fever were reported which is more than has occurred for many years. Fortunately, the disease was very mild and no deaths were reported. Infectious hepatitis continues to become more prevalent. Again, we were fortunate to have a very low death rate from tuberculosis. Our policy of immunizing all school children against poliomyelitis, diphtheria, tetanus and smallpox was continued.

Since the appointment of a full time dental director in late 1957, there has been a marked increase in the efficiency and services of the Child Dental Division. A new two-chair School Dental Clinic was established in the William Whyte School to serve a northern section of the city. We are grateful that our budget has been expanded to assist with the development of this phase of our activities.

In the latter part of the year as the result of a general training school program with the Provincial Health Department, we were able to fill our establishment for sanitary inspectors. Great improvement occurred in the rooming house situation as a result of enforcing regulations governing rooming houses which were passed by the Provincial Legislature in late 1957.

In summary, we have had a very progressive year, and on the following pages are recorded in detail the activities of the Health Department for the year 1958. The support of the Committee on Health as well as that of the other elected representatives to the City Council has been appreciated by myself and all other members of the staff.

Respectfully submitted,

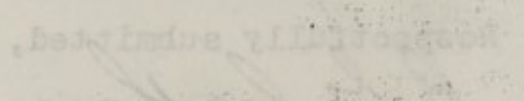
R. G. Cuthbert
Medical Health Officer.

Over 400 cases of scarlet fever were reported which is more than has occurred for many years. Fortunately, the disease was very mild and no deaths were reported. Infectious hepatitis continued to become more prevalent. Again, we were fortunate to have a very low death rate from this disease. Our policy of maintaining all school children against poliomyelitis, diphtheria, tetanus and measles was continued.

Since the appointment of a full time dental director in late 1957, there has been a marked increase in the efficiency and services of the Child Dental Division. A new two-chair School Dental Clinic was established in the William White School to serve a northern section of the city. We are grateful that our budget has been expanded to assist with the development of this phase of our activities.

In the latter part of the year as the result of a general training school program with the Provincial Health Department, we were able to fill our establishment for sanitary inspectors. Great improvement occurred in the rooming house situation as a result of intensive regulations governing rooming houses which were passed by the Provincial Legislature in late 1957.

In summary, we have had a very progressive year, and on the following pages are reported in detail the activities of the Health Department for the year 1957. The support of the Committee on Health as well as that of the other related representatives to the City Council has been greatly appreciated by myself and all other members of the staff.

Respectfully submitted,

Health Officer

C O N T E N T S

Committee on Health, Staff, and Medical Health Officers	1
Division of Vital Statistics	
History, Area and Population.	2
Vital Statistics, As Registered, 1958	3
Summary of Vital Statistics - Residents, 1958	3 - 5
Live Births	6
Order of Birth by Age of Mother	6
Health Tables for the Years - 1911 - 1958	7
Leading Causes of Death - Residents, 1958	8
Deaths of Winnipeg Residents by Cause, Age and Sex.	9 - 13
Infant Deaths, Residents, by Cause, Age and Sex	14 - 15
Infant Mortality, Residents by Districts.	16
Division of Communicable and Other Diseases	
Cases and Deaths.	17
Poliomyelitis	17 - 20
Infectious Hepatitis.	20
Scarlet Fever	20
Measles	20
Tuberculosis Control.	21
Welfare Institutions.	22 - 24
Medical Care.	24
Division of Nursing Services and Dental Services	
Child Care Services	25-26, 32-33
School Health Services.	26 - 30
Day Nurseries and Nursery Schools	29
Oculist's Report.	31
Audiometry Report	31
Victoria Order of Nurses - Summary of Services, 1958	34
Child Dental Services	35 - 39
Division of Inspections and Laboratory	
Inspections Branch.	40 - 41
Food Division	42
Dairy Division.	43
Laboratory.	44
Housing Division.	45
Sanitation and Hygiene.	46 - 47
Financial Statement	48 - 49

C O N T E N T S

1	Committee on Health, Staff, and Medical Health Officers
1	Division of Vital Statistics
1	History, Area and Population
1	Vital Statistics, As Registered, 1928
1	Summary of Vital Statistics - Residents, 1928
1	Live Births
1	Order of Birth by Age of Mother
1	Health Tables for 1928 - 1931 - 1932
1	Leading Causes of Death - Residents, 1928
1	Deaths of Winnipeg Residents by Cause, Age and Sex
1	Infant Deaths, Residents, by Cause, Age and Sex
1	Infant Mortality, Residents by District
1	Division of Communicable and Other Diseases
1	Cases and Deaths
1	Polio-myelitis
1	Infectious Hepatitis
1	Scarlet Fever
1	Diphtheria
1	Tuberculosis Control
1	Welfare Institutions
1	Medical Care
1	Division of Nursing Services and Dental Services
1	Child Care Services
1	School Health Services
1	Day Nurseries and Nursery Schools
1	Occupational Health
1	Additional Report
1	Victoria Order of Nurses - Summary of Services, 1928
1	Child Dental Services
1	Division of Inspections and Laboratory
1	Inspection Branch
1	Food Division
1	Dairy Division
1	Laboratory
1	Sanitation Division
1	Sanitation and Hygiene
1	Sanitary Statement

COMMITTEE ON PUBLIC HEALTH AND WELFARE

Alderman S. Rebchuk, Chairman,
Alderman D. A. Mulligan
Alderman E. I. Tennant
Alderman A. E. Bennett
Alderman H. B. Scott
Alderman J. Penner
His Worship Mayor Juba (ex officio)

STAFF

Medical Health Officer R. G. Cadham, M.D., D.P.H.
Deputy Medical Health Officer. J. B. Morison, M.D.
Assistant Medical Health Officer J. E. Davies, M.B.B.S.
Consultant, Child Care Services. H. Medovy, M.D.
Medical Supervisor in Nursing Homes. G. McInnis, M.D.
Medical Supervisor in Nursing Homes. A. Campbell, M.D.
Director - Child Dental Services C.H. McCormick, D.D.S.,
D.D.P.H.
Director, Public Health Nursing. Miss L. MacKenzie, R.N.,
M.A., P.D.
Chief Health Inspector E. J. Rigby, D.V.M.
Secretary. E. Singleton

COMMITTEE ON PUBLIC HEALTH AND WELFARE

Chairman, E. Robinson
Members, G. A. Walling
J. L. Tamm
A. E. Bennett
H. A. Scott
J. Fennell
His Worship Mayor (ex officio)

STAFF

Medical Health Officer R. G. Graham, M.D., D.T.H.
Deputy Medical Health Officer J. E. Morrison, M.D.
Assistant Medical Health Officer J. E. Davison, M.D., B.S.
Consultant, Child Care Services H. Medovy, M.D.
Medical Supervisor in Nursing Homes G. McManis, M.D.
Medical Supervisor in Nursing Homes A. Campbell, M.D.
Director - Child Dental Services G. H. McCortick, D.D.S.,
D.T.H.
Director, Public Health Nursing Miss L. Mackenzie, R.N.,
M.A., D.P.
Chief Health Inspector W. J. Mackay, D.V.M.
Inspector E. Macdonald

History

From a Hudson's Bay Company trading post (Fort Garry) in 1870, with a population of 215, Winnipeg has grown to the size and finish of a first-class city of approximately 256,000 people. When the City was incorporated in 1873 there was a population of 1,869.

The present Health Department may be said to date from 1900 when the late Dr. A. J. Douglas was appointed the first full time Health Officer.

From 1881 to 1900 Winnipeg had a series of part time Medical Health Officers.

In 1941 amalgamation with the School Medical Services occurred and the services increased and extended to all child caring institutions in the City without distinction. This applies to Medical, Dental and Nursing Services.

The Child Health Services Board was set up to help the Department in a consultative manner, meetings being held at the call of the Chairman. This Board was replaced in 1955 by a monthly meeting of the administrative Officers of the School Board and the Health Department.

The Department has now several Branches to carry out the provisions of the Public Health Act of Manitoba, the Health By-law of the City and a number of other City By-laws.

Area and Population

The City covers a total area of 25 square miles --- land 24.27 square miles (15,535 acres), and water .73 square miles (465 acres). The density of the population is 16.0 persons per acre of land.

For statistical purposes the population for 1958 is 255,510, as determined by the Assessment Commissioner. The natural increase in 1958 (live births less deaths) shows an increase of 3,326.

Male	42	45
Female	44	41
Total	86	86

Rate per 1,000 Live Births	14.6	14.8
----------------------------	------	------

Puerperal Deaths	4	2
------------------	---	---

Rate per 1,000 Live Births	.7	.3
----------------------------	----	----

(Population December 31, 1958 - 255,510)

Vital Statistics As Registered in Winnipeg, 1958

(Including Non-Residents)

	<u>1958</u>	<u>1957</u>
Live Births	8,597	8,829
Deaths	2,858	2,871
Infant Deaths	223	246
Stillbirths	122	134
Puerperal Deaths.	4	2

Summary of Vital Statistics, Residents, 1958

		<u>1958</u>	<u>1957</u>
<u>Live Births</u>	Male	3,034	3,099
	Female	<u>2,858</u>	<u>2,967</u>
	Total	5,892	6,067 /
Rate per 1,000 Population		23.1	23.8
<u>Deaths</u>	Male	1,490	1,502
	Female	<u>1,076</u>	<u>1,048</u>
	Total	2,566	2,551 /
Rate per 1,000 Population		10.0	10.0
Natural Increase		3,326	3,516
<u>Infant Deaths (-1 yr.)</u>	Male	101	94
	Female	54	85
	Total	<u>155</u>	<u>180</u> /
Rate per 1,000 Live Births		26.3	29.7
/ - Sex Undetermined - 1			
<u>Stillbirths</u>	Male	42	45
	Female	44	41
	Total	<u>86</u>	<u>86</u>
Rate per 1,000 Live Births		14.6	14.8
<u>Puerperal Deaths</u>		4	2
Rate per 1,000 Live Births		.7	.3

(Population December 31, 1958, - 255,510)

Live Births, Residents Only

Live births occurring to Winnipeg residents during 1958 numbered 5,892 giving a rate of 23.0 per 1000 population which is a decrease of 3.3% from the rate of 23.8 recorded in 1957. There were 3,034 boys and 2,858 girls born giving a ratio of 1,062 boys to 1000 girls. First children accounted for 2,072 or 35.2% of the total births, second children 1,668 or 28.4%, third children 1,038 or 17.6%, 5,601 or 95.2% included the fifth child. 5,753 or 97.8 were born to mothers between the ages of 15 and 39.

Infant Mortality

There were 155 deaths of infants under one year of age in 1958 giving a rate of 26.3 per 1000 live births. This is a decrease of 11.4% from the high rate of 29.7 recorded in 1957. The chief causes of infant deaths were (1957 figures are shown in brackets) Immaturity 33 (38), Postnatal asphyxia and atelectasis 12 (29), Injury at Birth 20 (17), Pneumonia, all forms 19(20). A detailed list of the causes of infant deaths is on pages 14 and 15 of this report.

Neo-Natal Mortality

Deaths of infants in the first four weeks of life numbered 123 which comprised 79.3% of the total infant deaths under one year of age as compared with 76.1% in 1957 and 71.5% in 1956. The neo-natal mortality rate per 1000 live births was 20.9 which is a decrease of 9.2% from the rate of 22.6 recorded in 1957.

Maternal Mortality

There were 4 deaths from conditions pertaining to childbearing giving a rate of .7 per 1000 live births as compared to 2 deaths in 1957 with a rate of .3 per 1000 live births.

Deaths

There were 2,566 deaths of Winnipeg residents in 1958 giving a rate of 10.0 per 1000 population and is the same as that recorded in 1957.

Heart diseases were again the major cause of death with 958 or 37.3% of all deaths. Cancer was second with 475 or 18.5%. Accidents, poisonings and violent deaths continue to cause over 5% of all deaths.

Eighty-seven percent of Winnipeg resident deaths occur in persons of 45 years of age or more, and 64% occurred in persons 65 years and over. In the broad age group of one year to 44 years, 7% of deaths occurred.

Live Births, Residents Only

- 5 -

Our appreciation is extended to the following for their cooperation during the year.

To Mr. G. L. Gardner, City Clerk, for the use of the registrations of births and deaths occurring in Winnipeg.

To the Registrar of the Cities of St. Boniface and St. James for copies of the registrations of births and deaths occurring to Winnipeg residents in these cities.

To the Provincial Registrar of Vital Statistics for copies of birth and death registrations of Winnipeg residents occurring in other parts of Manitoba.

To the Supervisor of the Tabulating branch, Finance Department, for his assistance and the use of the machines for tabulating the Statistics. 1958 was the first year the Statistics have been kept on punch cards.

	114	404	566	275	91	16	1,668	28.3
	12	238	362	274	129	23	1,038	17.6
	4	72	172	184	106	34	572	9.7
		13	72	85	70	10	252	4.3
		7	56	89	92	37	281	4.8
Known							10	.1
TOTAL	2	594	1,901	1,680	1,040	537	5,892	100.0

Live Births, Residents Only

Year	Number of Births	Rate per 1,000 Population	Infant Deaths	Rate per 1,000 Live Births
1943	4,294	18.9	197	45.9
1944	4,060	17.7	144	35.5
1945	4,210	18.2	134	31.8
1946	5,223	22.6	184	35.2
1947	5,532	23.6	193	34.7
1948	4,779	20.4	153	32.0
1949	4,968	21.2	137	27.6
1950	5,045	21.1	133	26.4
1951	5,254	21.9	115	21.9
1952	5,417	22.5	131	24.2
1953	5,586	23.0	166	29.7
1954	5,920	24.3	145	24.4
1955	6,016	24.2	147	24.4
1956	5,908	23.3	144	24.4
1957	6,067	23.8	180	29.7
1958	5,892	23.1	155	26.3

Order of Birth by Age of Mother

	10-14 years	15-19 years	20-24 years	25-29 years	30-34 years	35-39 years	40 & over	Total	% of Total
1st	2	464	967	450	132	49	8	2,072	35.2
2nd		114	604	568	275	91	16	1,668	28.3
3rd		12	238	362	274	129	23	1,038	17.6
4th		4	72	172	184	106	34	572	9.7
5th			13	72	86	70	10	251	4.3
6th & over			7	56	89	92	37	281	4.8
Unknown								10	.1
TOTAL	2	594	1,901	1,680	1,040	537	128	5,892	100.0

Live Births, Residents Only

Number of Births	Rate per 1,000 Live Births	Rate per 1,000 Live Births
1,000	10.0	10.0
1,050	10.5	10.5
1,100	11.0	11.0
1,150	11.5	11.5
1,200	12.0	12.0
1,250	12.5	12.5
1,300	13.0	13.0
1,350	13.5	13.5
1,400	14.0	14.0
1,450	14.5	14.5
1,500	15.0	15.0
1,550	15.5	15.5
1,600	16.0	16.0
1,650	16.5	16.5
1,700	17.0	17.0
1,750	17.5	17.5
1,800	18.0	18.0
1,850	18.5	18.5
1,900	19.0	19.0
1,950	19.5	19.5
2,000	20.0	20.0

Order of Birth by Age of Mother

0-14 Years	15-19 Years	20-24 Years	25-29 Years	30-34 Years	35-39 Years	40 & Over	Total
114	114	114	114	114	114	114	114
12	12	12	12	12	12	12	12
4	4	4	4	4	4	4	4
13	13	13	13	13	13	13	13
7	7	7	7	7	7	7	7
10	10	10	10	10	10	10	10
194	1,901	1,680	1,040	537	188	2,892	100.0

Table Showing Number of Births, Deaths, and Maternal Mortality With Rates For Years 1911-1958

Average	Births	Rate per 1,000 pop.	Deaths	Rate per 1,000 pop.	Infant Deaths	Rate per 1,000 L.B.	Maternal Mortality	Rate per 1,000 L.B.
1911-1915	5,369	29	2,022	11.1	813	152	35	6.5
1916-1920	5,695	30	2,177	11.5	570	104	35	6.9
1921-1925	5,371	27	1,677	8.5	415	77	25	4.7
1926-1930	4,527	22	1,777	8.7	277	61	26	5.7
1931-1935	3,944	18	1,512	6.9	170	43	20	5.1
1936-1940	3,785	17	1,697	7.7	138	36	17	4.5
1941-1945	4,037	18	1,985	8.7	159	39	10	2.3
1946-1950	5,200	22	2,035	8.7	164	31	4	0.8
1951	5,254	21.9	2,091	8.7	112	21.4	6	1.1
1952	5,417	22.5	2,063	8.6	131	24.2	1	2.9
1953	5,586	23	2,288	9.4	166	29.7	5	5.5
1954	5,920	24.3	2,327	9.6	144	24.3	3	7.7
1955	6,016	24.2	2,332	9.6	147	24.4	4	2.2
1956	5,908	23.3	2,438	9.6	144	29.7	1	3.3
1957	6,067	23.8	2,551	10.0	180	26.3	2	7.7
1958	5,892	23.1	2,566	10.0	155		4	

* 1911-1930 include non-residents. 1931-1958 include residents only.

Table Showing Number of Deaths and Rate Per 100,000 Population From Certain Diseases for the Years 1911 To 1958

T.B.	Rate per 100,000 population	4 Acute Comm. Diseases	Rate per 100,000 population	Disqases of heart	Rate per 100,000 population	Cancer All forms	Rate per 100,000 population
1911-1915	131	142	78	117	64	87	48
1916-1920	136	135	72	138	73	135	72
1921-1925	94	65	33	174	88	178	90
1926-1930	86	37	18	233	115	209	103
1931-1935	65	15	7	308	141	268	123
1936-1940	52	11	5	450	205	283	129
1941-1945	51	8	4	613	270	324	143
1946-1950	34	4	2	676	291	333	143
1951	27	1	0.4	704	294	355	148
1952	23	-	-	754	315	411	172
1953	16	2	0.8	817	336	435	179
1954	17	1	0.4	872	358	442	182
1955	18	1	0.4	876	359	418	167
1956	11	2	0.8	867	341	464	182
1957	22	3	1.2	922	362	413	162
1958	17	-	-	958	375	475	186

* Measles, Scarlet Fever, Diphtheria, Whooping Cough 1911-1930 include non-residents. 1931-1958 include residents only.

LEADING CAUSES OF DEATHS, 1958, RESIDENTS ONLY

Cause of Death	1 9 5 8		1 9 5 7	
	Number of Deaths	% of Total Deaths	Number of Deaths	% of Total Deaths
Heart Diseases (410-443)	958	37.3	922	36.1
Malignant Neoplasms (140-205)	475	18.5	413	16.2
Vascular Lesions Affecting Central Nervous System (330-334)	317	12.4	291	11.4
Malformations and Diseases of Early Infancy (750-776)	127	4.9	144	5.7
Accidents, Poisonings & Violent Deaths (E800-E999)	139	5.4	133	5.2
Pneumonia (490-493)	110	4.3	127	5.0
Acute Poliomyelitis (080)	5	.2	-	-
Diabetes Mellitus (260)	22	.9	28	1.1
Ulcer of stomach and duodenum (540-541)	16	.6	13	.5
Nephritis & Nephrosis (590-594)	14	.5	24	.9
Intestinal Obstruction and Hernia (560-561, 570)	22	.9	19	.7
Pulmonary Tuberculosis (002)	17	.7	22	.9
Hypertension without mention of Heart (444-447)	10	.4	13	.5
Cirrhosis of Liver (581)	21	.8	27	1.1
Bronchitis (500-502)	13	.5	21	.8
All other causes	300	11.7	354	13.9
	2,566	100.0	2,551	100.0

Causes of Death

The following pages give particulars of the number of deaths of Winnipeg residents for the year 1958, classified according to cause, age and sex. The causes of death are coded according to the Seventh revision of the International Lists of Diseases and Causes of Death.

DEATHS TO WINNIPEG RESIDENTS BY CAUSE, SEX AND AGE - 1958

CAUSE	Male	Female	0 - 28 days	29d. - 1 yr.	1 - 2 yrs.	3 - 4 yrs.	5 - 14 yrs.	15 - 24 yrs.	25 - 34 yrs.	35 - 44 yrs.	45 - 54 yrs.	55 - 64 yrs.	65 - 69 yrs.	70 - 79 yrs.	80 - 89 yrs.	90 yrs. +	TOTAL
Pulmonary Tuberculosis (002)	14	5							1	2	2	5		5	2		17
Other T.B. of respiratory system (001,003-008)	1													1			1
T. B., other forms (010-019)		1												1			1
Syphilis and its sequelae (020-029)	1										1						1
Meningococcal infections (057)	2			2													2
Polio myelitis (080)	4	1		1			1		3								5
Malignant neoplasms including neoplasms of lymphatic and haematopoietic tissues (140-205)	265	210			1	3	2	4	10	24	53	98	63	150	57	10	475
Benign and unspesified neoplasms (210-239)	2	2		1							1		1	1			4
Diabetes Mellitus (260)	8	14								1	1	1	1	14	4		22
Anaemias (290-293)	1	4						1	1				1	1	1		5
Vascular lesions affecting central nervous system (330-334)	144	173	1				3	3	1	3	11	32	37	127	92	10	317

Cause	Male	Female	0 - 28 days	29d. - 1 yr.	1 - 2 yrs.	3 - 4 yrs.	5 - 14 yrs.	15 - 24 yrs.	25 - 34 yrs.	35 - 44 yrs.	45 - 54 yrs.	55 - 64 yrs.	65 - 69 yrs.	70 - 79 yrs.	80 - 89 yrs.	90 yrs. & over	Total
Nonmeningococcal Meningitis (340)	1	1		1		1											2
Chronic rheumatic heart disease (410-416)	17	20							2	3	6	10	6	7	3		37
Arteriosclerotic and degenerative heart diseases (420-422)	516	303		1			1		2	15	68	142	131	288	154	17	819
Other diseases of heart (430-434)	15	16							2	2	2	8	3	7	7		31
Hypertension with heart disease (440-443)	37	34								2	5	11	11	26	15	1	71
Total Heart Diseases (410-443)	585	373		1			1		6	22	81	171	151	328	179	18	958
Hypertension without mention of heart (444-447)	4	6									1	2		1	5	1	10
Influenza (480-483)	2	1								1				1		1	3
Pneumonia (490-493)	68	42		9	3	1	1			2	3	6	7	39	28	11	110
Bronchitis (500-502)	8	5		1							1	1	4	5	1		13

Cause	Male	Female	0 - 28 days	29d. - 1 yr.	1 - 2 yrs.	3 - 4 yrs.	5 - 14 yrs.	15 - 24 yrs.	25 - 34 yrs.	35 - 44 yrs.	45 - 54 yrs.	55 - 64 yrs.	65 - 69 yrs.	70 - 79 yrs.	80 - 89 yrs.	90 yrs. & over	Total
Ulcer of stomach and duodenum (540-541)	14	2									4	3	3	4	2		16
Appendicitis (550-553)	3	1									1			3			4
Intestinal obstruction and hernia (560, 561, 570)	13	9	1							1	1	3	4	7	5		22
Gastritis, duodenitis, enteritis and colitis, except diarrhoea of the newborn (543, 571-572)	7	5		5								1	1	4	2		12
Cirrhosis of Liver (581)	13	8						1	2	3	5	3	2	4	1		21
Nephritis and nephrosis (590-594)	4	10								2	3	2	5	1		1	14
Hyperplasia of prostate (610)	5											1	1	1	2		5
Complications of pregnancy, childbirth and the puerperium (640-652, 670-689)	2	2	2					1	1								4

Cause	Male	Female	0 - 28 days	29d. - 1 yr.	1 - 2 yrs.	3 - 4 yrs.	5 - 14 yrs.	15 - 24 yrs.	25 - 34 yrs.	35 - 44 yrs.	45 - 54 yrs.	55 - 64 yrs.	65 - 69 yrs.	70 - 79 yrs.	80 - 89 yrs.	90 yrs. +	Total
Congenital Malformations (750-759)	17	13	18	5			2	1				1	2		1		30
Birth Injuries, postnatal asphyxia and atelectasis (760-762)	23	9	32														32
Infections of the newborn (763-768)	7	6	13														13
Other diseases peculiar to early infancy and immaturity unqualified (769-776)	32	20	51	1													52
Totals, (750-776)	79	48	114	6			2	1				1	2		1		127
Senility without mention of psychosis, ill defined and unknown causes (780-795)	6	10	3			1				1			2	1	4	4	16

Cause	Male	Female	0 - 28 days	29d. - 1 yr.	1 - 2 yrs.	3 - 4 yrs.	5 - 14 yrs.	15 - 24 yrs.	25 - 34 yrs.	35 - 44 yrs.	45 - 54 yrs.	55 - 64 yrs.	65 - 69 yrs.	70 - 79 yrs.	80 - 89 yrs.	90 yrs. +	Total
Accidents, Poisonings and Violence (<u>External Cause</u>)																	
Motor vehicle accidents (E810-E835)	24	6					4	6	1	3	5	1	3	7			30
All other accidents (E800-E802, E840-E965)	46	26		3	1		2	2	5	5	10	8	4	13	13	6	72
Suicide and self-inflicted injury (E970-E979)	27	10						3	8	5	6	7	7	1			37
Homicide and operations of war (E980-E999)	-	-															-
Total Violent Deaths (E800-E999)	97	42		3	1		6	11	14	13	21	16	14	21	13	6	139
All other diseases (residual)	137	103	2	3		1	1	2	3	9	20	31	28	80	48	12	240
GRAND TOTALS	1,490	1,076	123	32	6	7	14	24	42	84	210	376	327	800	447	74	2,566

INFANT DEATHS, WINNIPEG RESIDENTS, FOR THE YEAR 1957 - BY CAUSE, AGE AND SEX

Code Number	Cause of Death	Total	Male	Female	0-7 Days		8-14 Days		15-21 Days		22d. - 1 mo.		1 mo. - 1 yr.	
					M	F	M	F	M	F	M	F	M	F
751	Spina bifida and meningocele	2	1	1	1								1	
754	Congenital malformations, circulatory system	9	5	4	2	2		3					2	
750, 752, 753, 755-759	All other congenital malformations	12	9	3	6	2		1			1		1	
760-761	Birth Injuries	20	17	3	17	3								
762	Postnatal asphyxia and atelectasis	12	6	6	6	6								
763	Pneumonia of newborn	10	5	5	3	2		2	1	1				
764	Diarrhoea of newborn	-	-	-										
768	Other sepsis of newborn	3	2	1	2			1						
770	Haemolytic disease of newborn (Erythroblastosis)	4	3	1	2	1		1					1	
769, 771, 772	All other defined diseases of early infancy	6	5	1	4	1								
773	Ill-defined diseases peculiar to early infancy	9	5	4	5	4								
774-776	Immaturity with subsidiary condition or unqualified	33	19	14	19	14								
	All other causes	35	24	11	6	3							18	8
	TOTALS	155	101	54	73	38	1	3	5	1	2		20	12

- 14 -

Details of Infant Deaths Listed in "All other causes" for 1953, Residents

No.	Cause of Death	Total	Male		Female	0-7 Days		8-14 Days		15-21 Days		22 d. - 1 mo.		1 mo. - 1 yr.	
						M	F	M	F	M	F	M	F	M	F
053	Septicaemia and Pyaemia	1			1		1								
057	Meningococcal infections	2	2											2	
080	Acute poliomyelitis	1	1											1	
082	Acute infectious encephalitis	1	1											1	
227	Other benign neoplasm of muscular and connective tissue	1			1										1
331	Cerebral haemorrhage	1			1										
340	Meningitis, except meningococcal and tuberculous	1	1				1							1	
474	Acute laryngitis and tracheitis	2	2											2	
490	Lobar pneumonia	1			1										1
491	Bronchopneumonia	7	6		1									6	1
493	Pneumonia, other and unspecified	1	1											1	
501	Bronchitis unqualified	1			1										1
527	Other diseases of lung and pleural cavity	1	1				1								
560	Hernia of abdominal cavity without mention of obstruction	1	1				1								
571	Gastro-enteritis and colitis, except ulcerative, age 4 weeks & over	5	3		2									3	2
675	Delivery complicated by prolonged labour of other origin	2	2				2								
795	Ill-defined and unknown causes or morbidity and mortality	3	2		1		2		1						
E921	Inhalation and ingestion of food causing obstruction or suffocation	1			1										1
E924	Accidental mechanical suffocation in bed and cradle	1			1										1
E936	Other and unspecified accidents	1	1											1	
	TOTALS	35	24		11		6		3					18	8

Cases of Dengue									
Case No.	Age	Sex	Occupation	Onset	Duration	Course	Complications	Outcome	Remarks
1	25	M	Student	10/10/50	10 days	High fever, headache, muscle pain	None	Recovered	Typical dengue fever
2	30	F	Homemaker	12/10/50	12 days	Fever, joint pain, skin rash	None	Recovered	Atypical presentation
3	15	M	Child	15/10/50	8 days	High fever, vomiting	Dehydration	Recovered	Severe case
4	40	M	Worker	18/10/50	14 days	Fever, back pain	None	Recovered	Common case
5	22	F	Teacher	20/10/50	11 days	High fever, fatigue	None	Recovered	Typical case
6	35	M	Engineer	22/10/50	13 days	Fever, muscle aches	None	Recovered	Common case
7	18	F	Student	25/10/50	9 days	High fever, skin rash	None	Recovered	Atypical case
8	45	M	Farmer	28/10/50	15 days	Fever, joint pain	None	Recovered	Common case
9	28	F	Homemaker	30/10/50	12 days	High fever, headache	None	Recovered	Typical case
10	32	M	Worker	01/11/50	14 days	Fever, muscle pain	None	Recovered	Common case

RIVER HEIGHTS

A
Live Births 376
Infant Deaths 0-14d 6
Rate per 100 L.B. 3.2
Inf.Dths.15d.-lyr. 2
Rate per 100 L.B. .5

CRESCENTWOOD

B

Live Births 551
I.D. 0-14d. 6
Rate/100 L.B. 1.1
I.D.15d.-lyr. 1
Rate/100 L.B. .2

C.N.R. tracks

Live Births 406
I.D. 0-14d. 5
Rate/100 L.B. 1.2
I.D.15d.-lyr. 4
Rate/100 L.B. 1.0

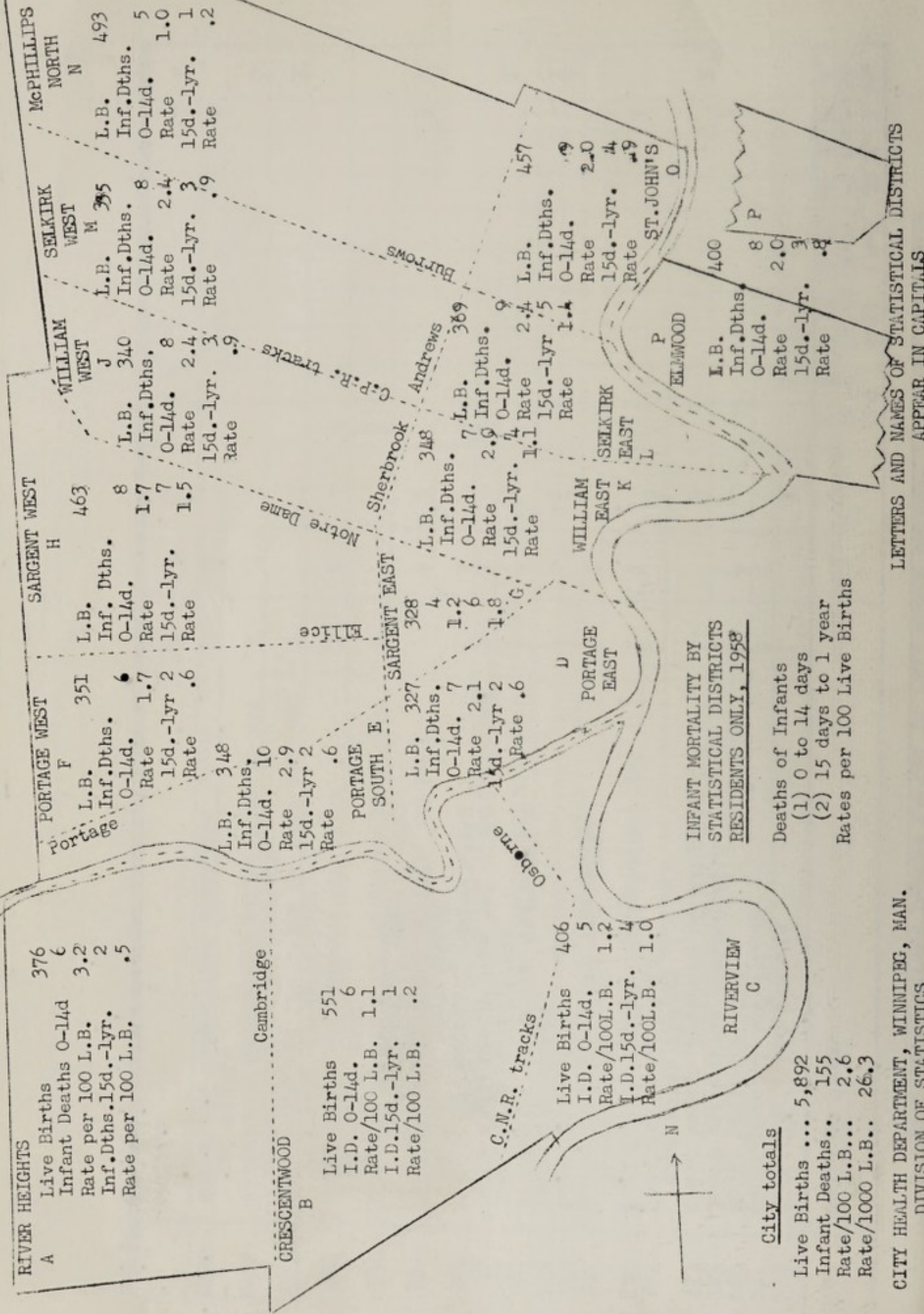
RIVERVIEW

City totals

Live Births ... 5,892
Infant Deaths... 155
Rate/100 L.B... 2.6
Rate/1000 L.B.. 26.3

INFANT MORTALITY BY STATISTICAL DISTRICTS RESIDENTS ONLY, 1958

Deaths of Infants
(1) 0 to 14 days
(2) 15 days to 1 year
Rates per 100 Live Births



INFANT MORTALITY, 1958, BY DISTRICTS - RESIDENTS ONLY

District	Live Births	Total Infant Deaths		Infant Deaths 0 - 14 days		Infant Deaths 15d. - 1 yr.		Stillbirths		Puerperal Deaths	
		No.	Rate/100 L.B.	No.	Rate/100 L.B.	No.	Rate/100 L.B.	No.	Rate/100 L.B.	No.	Rate/100 L.B.
River Heights	376	8	2.1	6	3.2	2	.5	3	.8	-	-
Crescentwood	551	7	1.3	6	1.1	1	.2	8	1.5	-	-
Riverview	406	9	2.2	5	1.2	4	1.0	2	.5	-	-
Portage East	327	9	2.8	7	2.1	2	.6	6	1.8	-	-
Portage South	348	12	3.4	10	2.9	2	.6	5	1.4	1	.3
Portage West	351	8	2.3	6	1.7	2	.6	3	.9	1	.3
Sargent East	328	10	3.0	4	1.2	6	1.8	5	1.5	-	-
Sargent West	463	15	3.2	8	1.7	7	1.5	4	.9	-	-
William West	340	11	3.2	8	2.4	3	.9	4	1.2	-	-
William East	348	11	3.2	7	2.0	4	1.1	7	2.0	1	.3
Selkirk East	369	14	3.8	9	2.4	5	1.4	8	2.2	-	-
Selkirk West	335	11	3.3	8	2.4	3	.9	8	2.4	-	-
McPhillips North	493	6	1.2	5	1.0	1	.2	9	1.8	1	.2
St. John's	457	13	2.8	9	2.0	4	.9	9	2.0	-	-
Elmwood	400	11	2.8	8	2.0	3	.8	5	1.3	-	-
TOTALS	5,892	155		106		49		86		4	
Rates /100 L.B.			2.6		1.8		.8		1.5		.06
Rates /1,000 L.B.			26.3		18.0		8.3		14.6		.7

Latitude	Longitude	Altitude	Direction	Time	Notes
10° 10' N	105° 10' E	1000	SE	10:00	Clear sky
10° 15' N	105° 15' E	1050	SE	10:15	Light clouds
10° 20' N	105° 20' E	1100	SE	10:30	Light clouds
10° 25' N	105° 25' E	1150	SE	10:45	Light clouds
10° 30' N	105° 30' E	1200	SE	11:00	Light clouds
10° 35' N	105° 35' E	1250	SE	11:15	Light clouds
10° 40' N	105° 40' E	1300	SE	11:30	Light clouds
10° 45' N	105° 45' E	1350	SE	11:45	Light clouds
10° 50' N	105° 50' E	1400	SE	12:00	Light clouds
10° 55' N	105° 55' E	1450	SE	12:15	Light clouds
11° 00' N	106° 00' E	1500	SE	12:30	Light clouds
11° 05' N	106° 05' E	1550	SE	12:45	Light clouds
11° 10' N	106° 10' E	1600	SE	13:00	Light clouds
11° 15' N	106° 15' E	1650	SE	13:15	Light clouds
11° 20' N	106° 20' E	1700	SE	13:30	Light clouds
11° 25' N	106° 25' E	1750	SE	13:45	Light clouds
11° 30' N	106° 30' E	1800	SE	14:00	Light clouds
11° 35' N	106° 35' E	1850	SE	14:15	Light clouds
11° 40' N	106° 40' E	1900	SE	14:30	Light clouds
11° 45' N	106° 45' E	1950	SE	14:45	Light clouds
11° 50' N	106° 50' E	2000	SE	15:00	Light clouds
11° 55' N	106° 55' E	2050	SE	15:15	Light clouds
12° 00' N	107° 00' E	2100	SE	15:30	Light clouds
12° 05' N	107° 05' E	2150	SE	15:45	Light clouds
12° 10' N	107° 10' E	2200	SE	16:00	Light clouds
12° 15' N	107° 15' E	2250	SE	16:15	Light clouds
12° 20' N	107° 20' E	2300	SE	16:30	Light clouds
12° 25' N	107° 25' E	2350	SE	16:45	Light clouds
12° 30' N	107° 30' E	2400	SE	17:00	Light clouds
12° 35' N	107° 35' E	2450	SE	17:15	Light clouds
12° 40' N	107° 40' E	2500	SE	17:30	Light clouds
12° 45' N	107° 45' E	2550	SE	17:45	Light clouds
12° 50' N	107° 50' E	2600	SE	18:00	Light clouds
12° 55' N	107° 55' E	2650	SE	18:15	Light clouds
13° 00' N	108° 00' E	2700	SE	18:30	Light clouds
13° 05' N	108° 05' E	2750	SE	18:45	Light clouds
13° 10' N	108° 10' E	2800	SE	19:00	Light clouds
13° 15' N	108° 15' E	2850	SE	19:15	Light clouds
13° 20' N	108° 20' E	2900	SE	19:30	Light clouds
13° 25' N	108° 25' E	2950	SE	19:45	Light clouds
13° 30' N	108° 30' E	3000	SE	20:00	Light clouds
13° 35' N	108° 35' E	3050	SE	20:15	Light clouds
13° 40' N	108° 40' E	3100	SE	20:30	Light clouds
13° 45' N	108° 45' E	3150	SE	20:45	Light clouds
13° 50' N	108° 50' E	3200	SE	21:00	Light clouds
13° 55' N	108° 55' E	3250	SE	21:15	Light clouds
14° 00' N	109° 00' E	3300	SE	21:30	Light clouds
14° 05' N	109° 05' E	3350	SE	21:45	Light clouds
14° 10' N	109° 10' E	3400	SE	22:00	Light clouds
14° 15' N	109° 15' E	3450	SE	22:15	Light clouds
14° 20' N	109° 20' E	3500	SE	22:30	Light clouds
14° 25' N	109° 25' E	3550	SE	22:45	Light clouds
14° 30' N	109° 30' E	3600	SE	23:00	Light clouds
14° 35' N	109° 35' E	3650	SE	23:15	Light clouds
14° 40' N	109° 40' E	3700	SE	23:30	Light clouds
14° 45' N	109° 45' E	3750	SE	23:45	Light clouds
14° 50' N	109° 50' E	3800	SE	24:00	Light clouds
14° 55' N	109° 55' E	3850	SE	24:15	Light clouds
15° 00' N	110° 00' E	3900	SE	24:30	Light clouds

INFECTIOUS DISEASES - CASES AND DEATHS - 1958

There were 1,323 notifications of infectious diseases in 1958. The total number of deaths was 26 - Tuberculosis - 17 (see Tuberculosis report); Poliomyelitis - 5 (4 - a Winnipeg resident who died in another Province through acquiring the disease in Winnipeg); Infectious Hepatitis - 3; Encephalitis - 1.

<u>CASES AND DEATHS REPORTED:</u>	<u>CASES</u> <u>DEATHS</u>		<u>CASES</u> <u>DEATHS</u>	
	<u>1</u> <u>9</u> <u>5</u> <u>8</u>		<u>1</u> <u>9</u> <u>5</u> <u>7</u>	
Chickenpox	163	-	224	-
Diarrhoea, Infantile	89	-	55	-
Diphtheria	4	-	20	2
Diphtheria Carriers	-	-	11	-
Dysentery, Bacillary	28	-	12	-
Encephalitis, Infectious	3	1	3	-
Erysipelas	8	-	1	-
Hepatitis, Infectious	97	3	91	-
Influenza	9	-	77	-
Measles	304	-	619	-
Men. Meningitis	6	-	10	-
Mumps	88	-	94	-
Poliomyelitis	77	5	1	-
Paratyphoid Fever	-	-	-	-
Scarlet Fever	405	-	61	-
Tuberculosis, Pulmonary	39	17	61	22
Typhoid Fever	-	-	1	-
Tetanus	-	-	1	-
Undulant Fever	-	-	-	-
Whooping Cough	3	-	20	-
Total	<u>1,323</u>	<u>26</u>	<u>1,362</u>	<u>24</u>

POLIOMYELITIS

Seventy-six cases of Poliomyelitis were reported in the City of Winnipeg in 1958. Comparison of the figures for the preceeding year shows that this was a minor epidemic year.

1953 - 763 cases	1956 - 2 cases
1954 - 23 cases	1957 - 2 cases
1955 - 3 cases	1958 - 76 cases

Virology study of this outbreak subsequently showed that it was due to Type I Poliomyelitis Virus. Altogether, 73 out of the 76 cases were examined for virus isolation in the faeces or in post mortem material or for virus identification by paired sera. This work was carried out at the Virus Laboratory at the Winnipeg General Hospital under the direction of Dr. J. C. Wilt.

The following results were obtained:

No. of Cases examined	73
No. of results.	66
Polio Virus Type I.	53
ECHO 6.	1
Unidentified Virus.	1
Negative Isolation.	11

CASES BY AGE AND SEX DISTRIBUTION

TABLE I

Age Group	Total	% of Total	<u>M A L E</u>		TOTAL	<u>F E M A L E</u>		TOTAL
			With Paralysis	Without Paralysis		With Paralysis	Without Paralysis	
0 - 4	28	36.8	13	3	16	10	2	12
5 - 9	13	17.1	8	3	11	1	1	2
10-14	4	5.3	2	1	3	0	1	1
15-19	2	2.6	0	0	0	1	1	2
20-29	20	26.3	9	5	14	2	4	6
30-39	6	7.9	3	1	4	2	0	2
40 & over	3	4.0	1	0	1	0	2	2
Total	76	100.0	36	13	49	16	11	27

AGE AND SEX DISTRIBUTION

Table I shows the age and sex distribution of the reported cases in the 1958 outbreak:

- The highest incidence (36.8%) of the disease occurred in the 0 - 4 year age group.
- The lowest incidence (2.6%) of the disease occurred in the 15-19 year age group. In the 1953 epidemic in Winnipeg, the lowest incidence was also in this age group.
- Thirty-eight per cent of the cases were in persons 20 years of age or older.
- There was a considerably higher incidence in all age groups in males than in females.

PARALYSIS - MORTALITY

68.4% of the patients had some degree of paralysis. In the 0 - 4 year age group, 82.1% of cases were paralytic. The outbreak resulted in 6 deaths, giving a mortality rate of 7.9. These occurred in three men, one woman, one five year-old boy and an infant of five months.

The following results were obtained:

No. of cases examined	73
No. of results	66
Polio Virus Type 1	33
ECMO	1
Unidentified Virus	1
Negative Test	11

TABLE I

BY AGE AND SEX DISTRIBUTION

AGE	MALES		FEMALES		TOTAL
	With	Without	With	Without	
0-4	13	13	16	20	49
5-9	13	13	11	1	38
10-14	13	13	11	1	38
15-19	13	13	11	1	38
20-24	13	13	11	1	38
25-29	13	13	11	1	38
30-34	13	13	11	1	38
35-39	13	13	11	1	38
40-44	13	13	11	1	38
45-49	13	13	11	1	38
50-54	13	13	11	1	38
55-59	13	13	11	1	38
60-64	13	13	11	1	38
65-69	13	13	11	1	38
70-74	13	13	11	1	38
75-79	13	13	11	1	38
80-84	13	13	11	1	38
85-89	13	13	11	1	38
90-94	13	13	11	1	38
95-99	13	13	11	1	38
100+	13	13	11	1	38
Over	13	13	11	1	38
Total	130	130	130	130	260

TABLE II

BY AGE AND SEX DISTRIBUTION

- Table II shows the age and sex distribution of the patients in the 1955 outbreak:
- The highest incidence (26.3%) of the disease occurred in the 0-4 year age group.
 - The lowest incidence (2.6%) of the disease occurred in the 15-19 year age group. In the 1955 epidemic in Wisconsin, the lowest incidence was in the age group.
 - Eighty per cent of the cases were in persons 20 years of age or older.
 - There was a considerable higher incidence in all age groups in males than in females.

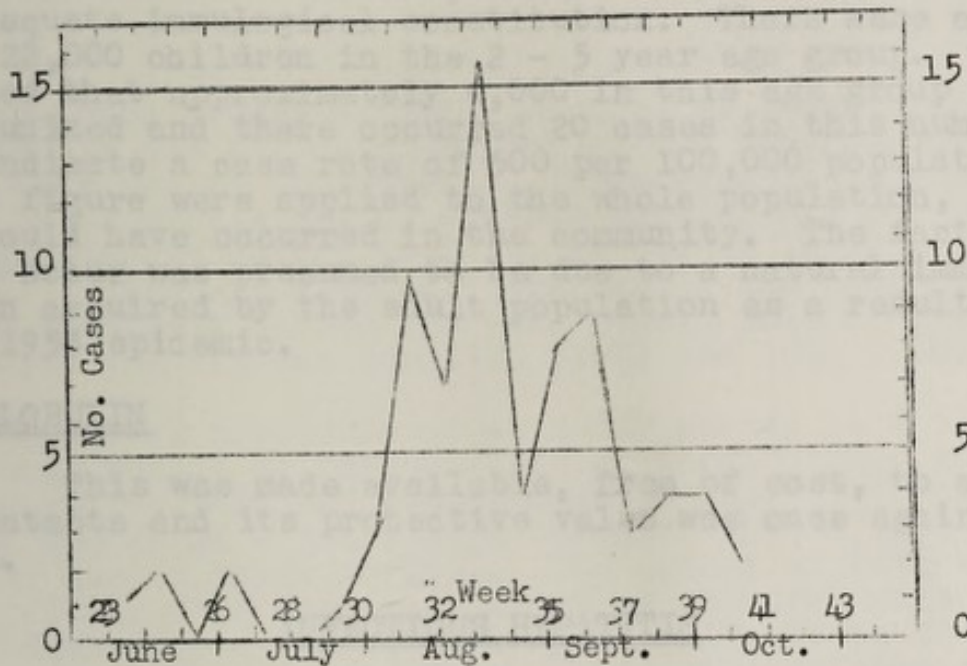
TABLE III

BY AGE AND SEX DISTRIBUTION

68.4% of the patients had some degree of paralysis. In the 0-4 year age group, 82.1% of cases were paralyzed. The outbreak peaked in 1955, giving a mortality rate of 7.9. These occurred in 1955, one woman, one five-year-old boy and 11 infants of live births.

EPIDEMIOLOGICAL VARIATION

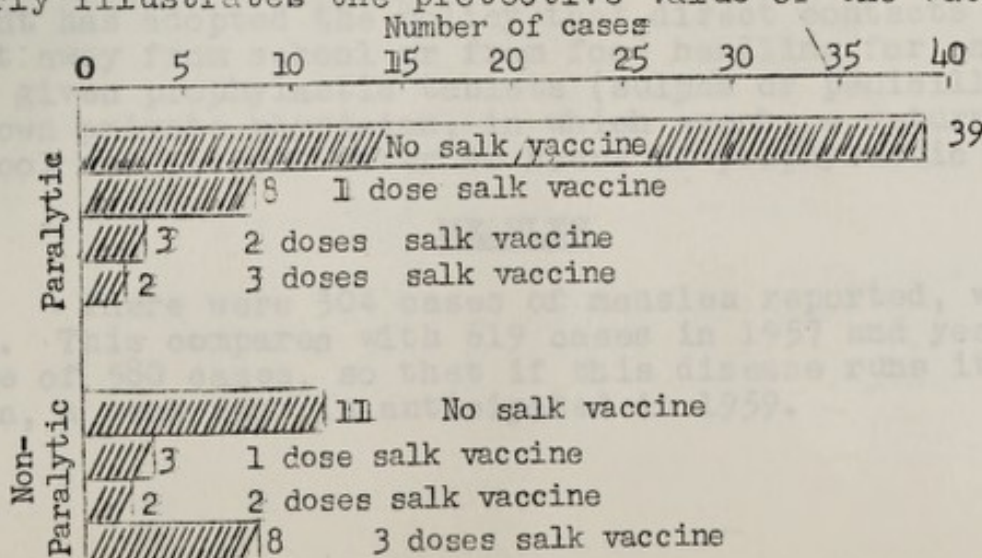
Figure I shows the case reports as notified week by week.



The peak of the epidemic occurred in the 11th week. Up to this week, the rise in the number of cases notified followed the pattern exhibited in previous outbreaks. Thereafter, however, a difference was noted in that a secondary peak occurred in the 13th and 14th weeks. This was coincident with the opening of schools. It was presumed that this peak was due to a carrier state of the virus in the school population (almost 100% immunized) back to the home and subsequent dissemination of the virus in the relatively unimmunized parental population.

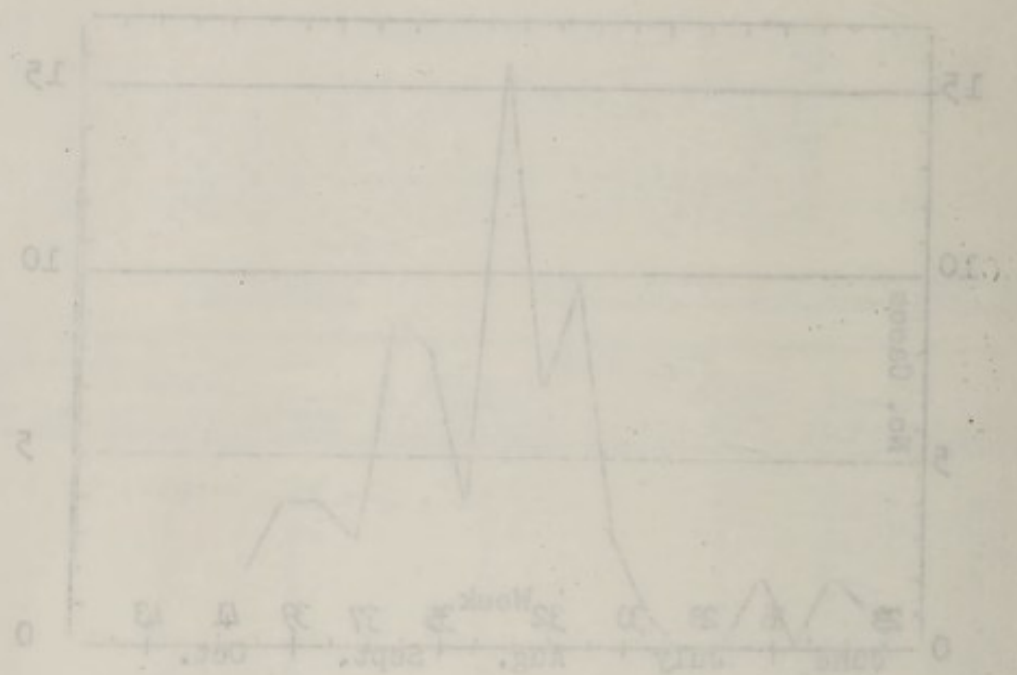
IMMUNOLOGICAL STATUS OF CASES

The value of poliomyelitis immunization in protection against paralysis was amply exhibited in this outbreak. Figure 2 clearly illustrates the protective value of the vaccine.



EPIDEMIOLOGICAL VARIATION

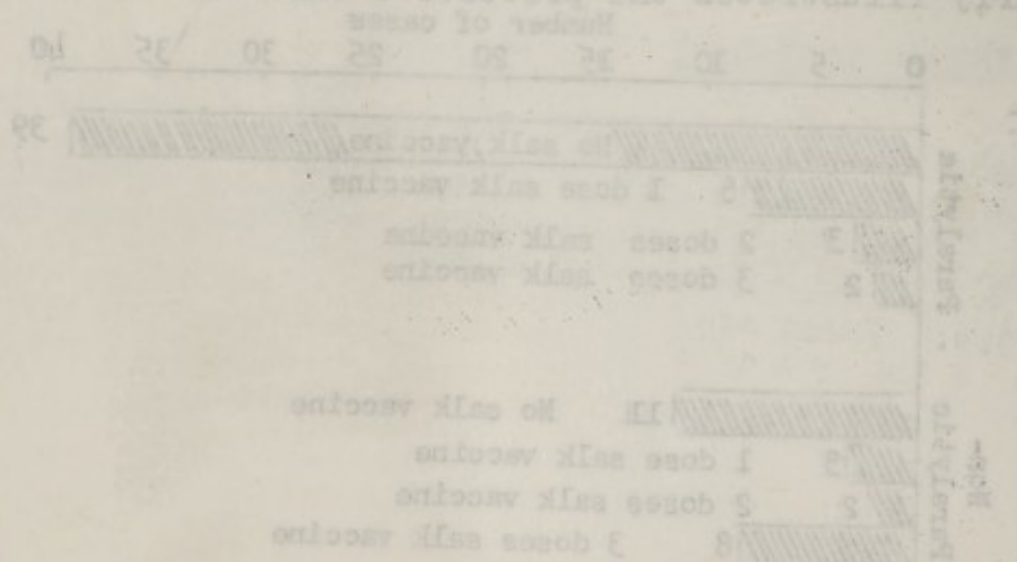
Figure 1 shows the case reports as notified week by week.



The peak of the epidemic occurred in the 12th week. Up to this week, the rise in the number of cases notified followed the pattern exhibited in previous outbreaks. Thereafter, however, a difference was noted in that a secondary peak occurred in the 14th week. This was coincident with the opening of schools. It was presumed that this peak was due to a carrier state of the virus in the school population (almost 100% immunized) back to the home and subsequent dissemination of the virus in the relatively unimmunized parental population.

IMMUNOLOGICAL STATUS OF CASES

The value of poliovaccinist immunization in protection against paralytic was amply exhibited in this outbreak. Figure 2 clearly illustrates the protective value of the vaccine.



There were only two instances of paralytic Poliomyelitis in patients who had received three doses of vaccine. In one of these, there was incorrect spacing of the vaccine inoculation and in the other, there was evidence to suggest an inadequate immunological constitution. There were approximately 22,000 children in the 2 - 5 year age group. It was estimated that approximately 4,000 in this age group were not immunized and there occurred 20 cases in this number. This would indicate a case rate of 500 per 100,000 population and if this figure were applied to the whole population, some 1,200 cases would have occurred in the community. The fact that this did not occur was presumed to be due to a natural immunity which had been acquired by the adult population as a result of exposure to the 1953 epidemic.

GAMMA GLOBULIN

This was made available, free of cost, to all household contacts and its protective value was once again demonstrated.

INFECTIOUS HEPATITIS

There were 97 cases and three deaths. This is the highest number of cases and of deaths since the records were compiled in 1952. The average over the last five years has been 66, and there have been only two deaths in all the years, preceeding this year. Here too, Gamma Globulin has been made available to all direct contacts and if given long enough, it has been found to be highly successful in prevention of the spread of the disease within the home contacts. A letter to this effect was circulated in the Manitoba Medical Review to all Medical Practitioners in the Winnipeg area.

SCARLET FEVER

This year has seen a considerable increase in the number of cases of scarlet fever notified (405 cases) as compared to 61 in 1957. Universally the disease has been mild and infecting chiefly the school population. The Health Department has adopted the policy that direct contacts should be kept away from school or from food handling for one week, unless given prophylactic tablets (sulpha or penicillin) by their own private physician, in which event, a return to work or school was allowed after 48 hours of prophylactic therapy.

MEASLES

There were 304 cases of measles reported, with no deaths. This compares with 619 cases in 1957 and yearly average of 580 cases, so that if this disease runs its normal pattern, a peak year is anticipated in 1959.

There were only two instances of paralytic Polio-
myelitis in patients who had received three doses of vaccine.
one of these, there was no direct evidence of the vaccine
connection and in the other, there was evidence to suggest
that the vaccine was the cause. There were approxi-
mately 22,000 children in the 2 - 5 year age group. It was
estimated that approximately 4,000 in this age group were
immunized and there were 70 cases in this group. This
indicates a case rate of 500 per 100,000 population and
this figure was applied to the whole population, some 1,200
cases would have occurred in the community. The fact that this
disease was prevented to be due to a natural immunity which
had been acquired by the adult population as a result of exposure
to the 1955 epidemic.

NEW GERMANY

This was made available, free of cost, to all house-
hold contacts and its protective value was once again demon-
strated.

NEWCASTLE

There were 97 cases and three deaths. This is the
highest number of cases and of deaths since the records were
kept in 1955. The average over the last five years has
been 66, and there have been only two deaths in all the years.
During this year, New South Wales has been made
responsible for all direct contacts and in other parts of the
country, to be highly successful in prevention of the
spread of the disease while the home approach. A letter to
all Medical Practitioners in the Newcastle area.

NEWCASTLE

This year has seen a considerable increase in the
number of cases of scarlet fever (405 cases) as com-
pared to 31 in 1957. Unfortunately the disease has been mild
and affecting chiefly the school population. The Health De-
partment has adopted the policy that direct contacts should
be kept away from school or from food handling for one week,
unless given prophylactic penicillin (or penicillin) by
their own private physician, in which case, a return to work
or school was allowed after 48 hours of prophylactic therapy.

NEWCASTLE

There were 304 cases of measles reported, with no
deaths. This compares with 619 cases in 1957 and yearly
average of 300 cases. As this disease runs the normal
pattern, a peak year is anticipated in 1959.

TUBERCULOSIS CONTROL 1958

Continued progress in the control of Tuberculosis is reflected in the following report of the Tuberculosis Division of the City Health Department. There were 16 deaths in Winnipeg due to Tuberculosis giving a death rate of 6.3 per 100,000. This compares with 22 deaths in 1957, 21 deaths in 1950, and 52 deaths in 1940. There was a monthly average of 148 patients in the various Sanatoria during the year 1958. This figure, is well below the figures for 1954 (191) and 1955 (166).

The normal procedure of an x-ray survey (4 x 5) of Civic Employees, Public Welfare Clientele, Needle Trade etc., was not carried out as this had been completed in 1957. This will explain why the number of 4 x 5 x-rays taken in 1958 (7,272) is almost half the number taken in 1957. The number of individuals x-rayed by the 70 mm. Unit was also halved as children under 15 were no longer included in the Survey. Tuberculin Tests of all the University Students was done and only the positive reactors were subjected to a chest x-ray.

Opportunities for employees to have a Chest x-ray was provided at 85 sites to 478 offices, business and other industrial concerns. In all there was 84.8% attendance and 25,115 x-rays were taken. A total of 32,387 x-rays were taken by all means during 1958. Seven new cases of Pulmonary Tuberculosis were discovered by this Department. This represents 12.7% of the total number of new active pulmonary cases detected by all agencies such as private physicians, sanatoria, hospitals, private and public clinics and gives a ratio of one new case for every 4,627 individuals x-rayed.

It should be further mentioned that several individuals were found to be suffering from alternative Lung Pathology and Associated Cardiovascular Disease. They were advised to consult their own private physician for further advice or treatment.

TUBERCULOSIS CONTROL 1958

- 21 -

Continued progress in the control of Tuberculosis is reflected in the following report of the Tuberculosis Division of the City Health Department. There were 10 deaths in 1957, 21 deaths in 1958, and 22 deaths in 1959. There was a monthly average of 148 patients in the various sanatoria during the year 1958. This figure is well below the figures for 1954 (191) and 1955 (165).

The normal procedure of an x-ray survey (4 x 5) of Civilian Employees, Public Welfare Clients, Needle Trade etc., was not carried out as this had been completed in 1957. This will explain why the number of 4 x 5 x-rays taken in 1958 (7,375) is almost half the number taken in 1957. The number of individuals x-rayed by the 70 mm. Unit was also halved as children under 15 were no longer included in the survey. Tuberculin tests of all the University Students was done and only the positive reactors were subjected to a chest x-ray.

Opportunities for employees to have a Chest x-ray was provided at 85 sites to 178 offices, business and other industrial concerns. In all there was 84,882 attendance and 25,115 x-rays were taken. A total of 32,387 x-rays were taken by all means during 1958. Seven new cases of Pulmonary Tuberculosis were discovered by this Department. This represents 12.7% of the total number of new active pulmonary cases detected by all agencies such as private physicians, sanatoria, hospitals, private and public clinics and gives a ratio of one new case for every 2,627 individuals x-rayed.

It should be further mentioned that several individuals were found to be suffering from alternative Lung Pathology and Associated Cardiovascular Disease. They were advised to consult their own private physician for further advice or treatment.

WELFARE INSTITUTIONS FOR THE AGED.

The City Health Department spends a considerable amount of its efforts in the regulation and supervision of welfare institutions. These institutions assume the responsibility of care and supervision of individuals unable to care for themselves. They are licensed by the City of Winnipeg under the Welfare Institutions By-Law. The responsibility of the Health Department is to ensure that physical facilities meet licensing requirements and that adequate care is being administered. These institutions consist of day nurseries, nursery schools, child caring institutions, boarding care homes, and nursing homes. The first three are concerned with care of children and are dealt with elsewhere in the annual report. The latter two care for long term illnesses not requiring active hospital care.

Nursing Homes are for patients with disabilities requiring the skilled nursing care of a registered nurse. Boarding Care Homes need only supply the services and supervision of a licensed practical nurse. The majority of long term illnesses occur in older persons and the need for these institutions is increasing each year with the increase in older population, and increased survival time in long term illnesses.

In the fifteen years between 1941 - 1956 the population of Winnipeg over 65 has increased from 14,142 to 27,727, an increase of 96%, compared to general population increase of less than 15%. Between 1911 and 1956 the population over 65 has increased 14.5 times as rapidly as the general population.

Year	Population of Winnipeg	Population over 65	% over 65
1911	136,035	2,057	1.5%
1941	221,960	14,142	6.4%
1956	255,093	27,727	10.9%

Winnipeg licenses both proprietary and non-proprietary institutions. The latter are non-profit institutions operated by voluntary boards or religious bodies. They are larger institutions and are situated in buildings designed as institutions, and some have very elaborate facilities. Four of these are licensed, one as a boarding care home, three as nursing homes.

Four boarding care, and eighteen nursing homes of the proprietary type were licensed in 1958. These institutions are operated by individuals as a means of livelihood. They are all converted from older homes, some with extensive alterations and additions. A number of Winnipeg residents are placed in two non-proprietary institutions outside of Winnipeg licensed by the Provincial Government.

WELFARE INSTITUTIONS FOR THE AGED

The City Health Department spends a considerable amount of effort in the regulation and supervision of welfare institutions. These institutions assume the responsibility of care and supervision of individuals unable to care for themselves. They are licensed by the City of Winnipeg under the Welfare Institutions By-law. The responsibility of the Health Department is to ensure that physical facilities meet licensing requirements and that adequate care is being administered. These institutions consist of day nurseries, nursery schools, child caring institutions, boarding and nursing homes. The first three are concerned with care of children and are dealt with elsewhere in the annual report. The latter two care for lone term illnesses not requiring active hospital care.

Nursing Homes are for patients with disabilities requiring the skilled nursing care of a registered nurse. Boarding Care Homes need only supply the services and supervision of a licensed practical nurse. The majority of lone term illnesses occur in older persons and the need for these institutions is increasing each year with the increase in older population, and increased survival time in lone term illnesses.

In the fifteen years between 1911 and 1926 the population of Winnipeg over 65 has increased from 15,112 to 22,727, an increase of 50%, compared to general population increase of less than 15%. Between 1911 and 1926 the population over 65 has increased 1.5 times as rapidly as the general population.

Year	Population of Winnipeg	Population over 65	% over 65
1911	136,035	15,112	1.1%
1921	152,500	18,112	1.2%
1926	255,035	22,727	10.3%

Winnipeg has numerous both proprietary and non-proprietary institutions. The latter are non-profit institutions operated by voluntary boards or religious bodies. They are further institutions and are situated in buildings designed as institutions and some have very elaborate facilities. Four of these are licensed, one as a boarding care home, three as nursing homes. Four boarding care, and eighteen nursing homes of the proprietary type were licensed in 1928. These institutions are operated by individuals as a means of livelihood. They are all converted from other homes, some with extensive alterations and additions. A number of Winnipeg residents are placed in

The Chief Health Inspector and one Housing Inspector carry out all inspections of welfare institutions with regard to environmental facilities.

Two full time Nursing Supervisors are assigned to welfare institutions. These supervisors process placement of patients, supervisenursing services in the institutions, and offer consulting services to the operators, and to families planning a private placement.

All applications for boarding care or nursing home placement with financial assistance by the Public Welfare Department are first referred to these Nursing Supervisors. The patient is visited and all details are gathered, including a medical report from the referring physician. In discussion with a physician of the Health Department a decision is made as to suitability of placement. If placement is not indicated the family is advised on other community facilities. If the patient requires more active treatment than given in a nursing home, referral to a general hospital or to the Municipal Hospitals may be recommended.

496 applications for placement were received in 1958. Of these 239 were placed in nursing homes, and 31 in boarding care homes (only 54% of the applications). 33 were found to be financially responsible for their own placement or non-residents of Winnipeg. 32 were admitted to the Municipal hospitals, and 4 to the Winnipeg General Hospital. 27 were admitted to old folks homes, but many of these were to the Jewish Old Folks Home, which has facilities almost comparable to a general hospital. 130, or over 28% were not placed. Some of these died before placement, some refused nursing home placement and in many the family reconsidered and suitable arrangements were made outside. In addition to the above, many re-admissions were processed.

A register of occupancy of all Boarding Care and Nursing Homes beds is maintained in the department, and this is brought up to date daily by the clerk assigned to the Nursing Home Supervisors.

Each home is visited regularly by the Nursing Supervisors to assist the operator in maintaining good nursing standards. All accidents or unusual incidents must be reported to the Health Department under the regulations of the By-Law. These reports often indicate needs for improved nursing service. All staff changes are reported to the Health Department and supervision is maintained to ensure adequate staffing.

The nutritionist of the department spends much of her time on these homes. She acts as a consultant on nutrition, giving advice on meal planning and preparation. Regular visits are made to the homes to see the meals are served and give advice.

The Chief Health Inspector and one Housing Inspector carry out inspections of welfare institutions with regard to environmental

Two full time Nursing Supervisors are assigned to welfare institutions. These supervisors process placement of patients, review nursing services in the institutions, and offer consulting fees to the operators, and to families planning a private

All applications for boarding care or nursing home placement financial assistance by the Public Welfare Department are referred to these Nursing Supervisors. The patient is visited all details are gathered, including a medical report from the attending physician. In discussion with a physician of the Health Department a decision is made as to suitability of placement. If placement is not indicated the family is advised on other community facilities. If the patient requires more active treatment than in a nursing home, referral to a general hospital or to the

406 applications for placement were received in 1958. Of these 212 were placed in nursing homes, and 31 in boarding care (only 5% of the applications). 33 were found to be financially responsible for their own placement or non-residents of Winnipeg were admitted to the Municipal hospitals, and 4 to the Winnipeg General Hospital. 27 were admitted to old folks homes, but many these were to the Jewish Old Folks Home, which has facilities for comparison to a general hospital. 130, or over 58% were placed. Some of these died before placement, some refused placement home placement and in many the family reconsidered and sole arrangements were made outside. In addition to the above, re-admissions were processed.

A register of occupancy of all Boarding Care and Nursing Homes is maintained in the department, and this is brought up to date daily by the clerk assigned to the Nursing Home Supervisors.

Each home is visited regularly by the Nursing Supervisors under the operator in maintaining good nursing standards. All incidents or unusual incidents must be reported to the Health Department under the regulations of the By-law. These reports are indicative needs for improved nursing service. All staff are reported to the Health Department and supervision maintained to ensure adequate staffing.

The nutritionist of the department spends much of her time in the homes. She acts as a consultant on nutrition, giving advice on meal planning and preparation. Regular visits are made to the homes to see the meals are served and give advice.

CHILD CARE SERVICES

- 24 -

Child care services continue to occupy a considerable portion of the time and personnel of the City of Winnipeg Health Department. These services

All public patients in nursing homes who are residents of Winnipeg receive medical supervision by physicians of the department. They are visited regularly every 7-10 days and at any time in between if indicated. Laboratory specimens are now collected and are examined at the Provincial Laboratory through arrangements made during the year. There are frequent referrals of patients to the facilities of the out-patient departments of the Winnipeg General and St. Boniface Hospitals. Patients are moved to the general hospitals and to the Municipal hospitals when the move seems advisable.

By arrangements with the Sanatorium Board of Manitoba, a mobile x-ray unit visits each nursing home at periodic intervals to x-ray all staff and patients. The last such survey was made in the spring of 1958.

6) Immunization of pre-school and school age children

7) Licensing and supervision of Day Nurseries and Nursery Schools

MEDICAL CARE

Maternal and Infant Health

The Health Department provides medical care to indigent persons under certain circumstances. The first group are those Winnipeg residents who are public patients in nursing homes. These people are cared for by physicians of the department and all medication is supplied by the pharmacy of the Municipal Hospitals. (26.3 per

Medically indigent persons at home who can get about are referred to the outdoor departments of the Winnipeg General Hospital and St. Boniface Hospital for all medical care. This is comparable to visiting the doctor's office. It is the most desirable place to carry out a medical consultation, as both facilities and records assist the physician to render his best service. However, in some emergencies, just as in private practice, a house visit is required. Sometimes this is recommended after a visit by a public health nurse, or by a nurse of the V.O.N. At other times the call comes directly to the Health Department as an emergency. In these circumstances home visits are made by physicians of the department. 1,513 home calls were made during 1958.

out a more effective follow-up program for premature infants.

In 1958, public health nurses conducted an average of 9 classes for expectant mothers each week. A total of five hundred and thirty-four (534) pregnant women attended.

All public patients in nursing homes who are residents of the department receive medical supervision by physicians of the department. They are visited regularly every 7-10 days and at any time between if indicated. Laboratory specimens are now collected and examined at the Provincial Laboratory through arrangements during the year. There are frequent referrals of patients to the facilities of the out-patient departments of the Winnipeg General and St. Boniface Hospitals. Patients are moved to the out-patient departments and to the Municipal Hospitals when the move is advisable.

By arrangements with the Sanatorium Board of Manitoba a mobile unit visits each nursing home at periodic intervals to x-ray staff and patients. The last such survey was made in the spring of 1928.

MEDICAL CARE

The Health Department provides medical care to indigent persons in certain circumstances. The first group are those Winnipeg residents who are public patients in nursing homes. These people are cared for by physicians of the department and all medication supplied by the pharmacy of the Municipal Hospitals.

Medically indigent persons at home who can not afford to be cared for by the out-patient departments of the Winnipeg General Hospital and St. Boniface Hospital for all medical care. This category includes visiting the doctor's office. It is the most desirable place to carry out a medical consultation, as both the patient and records assist the physician to render his best service. However, in some emergencies, just as in private practice, a visit is required. Sometimes this is recommended after consultation by a public health nurse, or by a nurse of the V.O.N. Other times the call comes directly to the Health Department in emergency. In these circumstances home visits are made by physicians of the department. 1,513 home calls were made during 1928.

CHILD CARE SERVICES

Child care services continue to occupy a considerable portion of the time and personnel of the City of Winnipeg Health Department. These services include:

- 1) The follow-up care of newborn infants, particularly premature babies
- 2) Classes for expectant mothers
- 3) Child Health Conferences
- 4) Follow-up of accidents reported by the Poison and Accident Centre,

Children's Hospital

- 5) Medical appraisal and supervision of the health of the school child
- 6) Immunization of pre-school and school age children
- 7) Licensing and supervision of Day Nurseries and Nursery Schools

Maternal and Infant Health

Five thousand, eight hundred and ninety-two (5,892) births occurred to Winnipeg residents in 1958. Four maternal deaths occurred. There were one hundred and fifty-five (155) deaths of infants under one year of age (26.3 per 1,000 live births) and of these one hundred and twenty-three (123) (20.9 per 1,000 live births) were under one month.

The public health nurses made eleven thousand, one hundred and thirty-five (11,135) home visits to children under one year to give advice and demonstrations to mothers about general care and feeding. Improved cooperation with private physicians and hospitals also enabled the public health nurse to carry out a more effective follow-up program for premature infants.

In 1958, public health nurses conducted an average of 9 classes for expectant mothers each week. A total of five hundred and thirty-four (534) pregnant women attended.

CHILD CARE SERVICES

Child care services continue to occupy a considerable portion of the staff and personnel of the City of Winnipeg Health Department. These services

1) The follow-up care of newborn infants, particularly premature babies

2) Classes for expectant mothers

3) Child Health Conferences

4) Follow-up of accidents reported by the Police and Accident Centre

5) Hospital's Hospital

6) Medical examination and supervision of the health of the school child

7) Immunization of pre-school and school age children

8) Licensing and supervision of day nurseries and nursery schools

Infant and Child Health

Five thousand, eight hundred and ninety-two (5,892) births occurred in

the residents in 1958. Four maternal deaths occurred. There were one

and fifty-five (55) deaths of infants under one year of age (28.5 per

live births) and of these one hundred and twenty-three (123) (30.3 per

live births) were under one month.

The public health nurses made eleven thousand, one hundred and thirty-

five (15,355) home visits to children under one year of age and their

one to mothers about general care and feeding. Improved cooperation with

a physician and hospital also enabled the public health nurses to carry

more effective follow-up program for premature infants.

In 1958, public health nurses conducted an average of 9 classes for

and mothers each week. A total of eleven hundred and thirty-four (1,134) pregnant

attended.

Child Health Conferences

Ten Child Health Centres provide weekly services to children under school age not receiving medical care due to economic or geographic reasons. In addition to having their child's health appraised by qualified paediatricians, the parents receive advice and anticipatory guidance from both doctors and public health nurses on feeding, normal growth and development, and minor behaviour problems. Children with correctable defects are referred to hospital clinics or private physicians for the necessary care. The follow-up of defects found at these Centres is carried out by the public health nurses through home or telephone visits. In 1958, one thousand, eight hundred and thirty-nine (1,839) children were reviewed at these Centres.

An extensive program of immunization against smallpox, diphtheria, whooping cough, tetanus, and poliomyelitis is carried out at the Child Health Centres. In 1958, twenty-nine thousand, six hundred and six (29,606) inoculations were given.

Follow-up of Poison Control Cases

One hundred and forty-five (145) visits to cases of poison were made by public health nurses in 1958. This service is carried out in cooperation with the Poison and Accident Control Centre at the Children's Hospital. The purpose of the visit is not only to obtain more detailed information about the cause of the accident but also to institute educational measures that might prevent future accidents from occurring because of carelessness, ignorance, or neglect.

School Health Services

Continued efforts have been directed towards concentrating medical and nursing time on school children presenting health problems that might effect their educational progress. This is being brought about by the gradual elimination of the routine physical examination and improved and frequent liaison with the

child's private physician, or hospital clinic.

Careful screening of children for medical examinations is carried out by the public health nurses. A medical questionnaire filled out by all the parents of Grade VII pupils, a medical questionnaire filled out by pupils in Grade X, and a medical form filled out by the private doctors of children entering Winnipeg schools for the first time, are used as important media in the screening process. In 1958, six thousand, nine hundred and thirty-four (6,934) pupils in Winnipeg schools were examined by school doctors. Approximately fifty per-cent (50%) of these children had defects requiring further medical attention.

Regular screening for possible defects in vision and hearing is carried out by public health nurses. A public health nurse does routine hearing tests on all Grade IV pupils and any other children in the schools who are referred by teachers, parents, or nurses because of suspected hearing loss. In 1958, seven thousand, one hundred and sixty-one (7,161) children were given a hearing test. Three hundred and fifty-four (354 or 4.9%) of these children had a hearing loss requiring further medical attention. All children with organic hearing loss were referred to the Child Guidance Clinic for educational supervision.

Routine vision tests are carried out by the public health nurses on pupils in Kindergarten or Grade I, Grade IV, VII, and X. Children with vision defects whose parents cannot afford private attention are referred to the Eye Clinic at Children's Hospital. In 1958, one thousand, and fifty-nine (1,059) children were examined at this clinic. Four hundred and four (404) of these children had glasses prescribed.

In 1958, with the cooperation of the Health Department, the Winnipeg School Board set up two classes for visually handicapped children. Before placement, each visually handicapped child was reviewed by a special committee composed of School Administrators, Health Department Officials, Ophthalmologists, and the Psychiatrists of the Child Guidance Clinic. Only children with $1/3$ or

a private physician, or hospital clinic.

Careful screening of children for medical examinations is carried out

public health nurses. A medical questionnaire filled out by all the

of Grade VII pupils, a medical questionnaire filled out by pupils in

A, and a medical form filled out by the private doctors of children enter-

mining schools for the first time, are used as important media in the

ing process. In 1958, six thousand, nine hundred and thirty-four (6,934)

in Winnipeg schools were examined by school doctors. Approximately fifty

and (50%) of these children had defects requiring further medical attention.

Regular screening for possible defects in vision and hearing is carried

public health nurses. A public health nurse does routine hearing tests on

Grade IV pupils and any other children in the schools who are referred by

ers, parents, or nurses because of suspected hearing loss. In 1958, seven

and, one hundred and sixty-one (7,161) children were given a hearing test.

hundred and fifty-four (354 or 4.9%) of these children had a hearing loss

requiring further medical attention. All children with suspected hearing loss were

referred to the Child Guidance Clinic for educational supervision.

Routine vision tests are carried out by the public health nurses on

in Kindergarten or Grade I, Grade IV, VII, and X. Children with vision

whose parents cannot afford private attention are referred to the Eye

at Children's Hospital. In 1958, one thousand, and fifty-nine (1,059)

ten were examined at this clinic. Four hundred and four (404) of these

ten had glasses prescribed.

In 1958, with the cooperation of the Health Department, the Winnipeg

Board set up two classes for visually handicapped children. Before

ment, each visually handicapped child was reviewed by a special committee

and of School Administrators, Health Department Officials, Ophthalmologists,

less vision with correction, who were not able to progress favourably in the regular classes were recommended for placement. In 1958, twenty-four (24) children were recommended.

In addition to vision and hearing handicaps the Health Department has also given considerable attention to school children with heart murmurs, endocrine disturbances, and convulsive disorders.

Since the City Health Department established a diagnostic cardiac clinic in the Children's Hospital, two hundred and thirty-four (234) school children have been reviewed. One hundred and thirty-five (135) of these children have been "de-labeled" as cardiacs. A definite diagnosis and plan of treatment has been made for ninety-nine (99) other children. Of these ninety-nine (99), four have had surgical treatment, eighteen others have had special tests such as catheterizations of the heart.

A registry for handicapping conditions in school children has been set up in the Central Office, City Hall. In 1958, two hundred and sixty (260) diagnosed heart cases were registered. One hundred and thirty-two (132) of these cases have congenital heart disease and one hundred and twenty-eight (128) have rheumatic heart disease. In the majority of these cases, no restriction of school activities has been necessary.

In 1958, the City Health Department on written authorization of the family doctor, supplied a daily dose of four hundred thousand (400,000) units of penicillin to one hundred and eleven (111) school children diagnosed as rheumatic heart cases.

In addition to cardiac, vision and hearing conditions, the central registry in 1958 also included detailed information on twenty-eight school children with diabetes and fifty school children with epilepsy. An annual review of the medical condition and the educational progress of these children is carried out.

During 1958, protection against Diphtheria, tetanus, and smallpox was offered to all children in Kindergarten or Grade I, and pupils in other grades who had not received primary or reinforcing inoculations. Poliomyelitis vaccine

lation with correction, who were not able to progress favorably in the

r classes were recommended for placement. In 1958, twenty-four (24)

en were recommended.

In addition to vision and hearing handicaps the Health Department has

given considerable attention to school children with heart murmurs, endocrine

dances, and convulsive disorders.

Since the City Health Department established a diagnostic cardiac clinic

Children's Hospital, two hundred and thirty-four (234) school children have

reviewed. One hundred and thirty-five (135) of these children have been de-

clined as cardiac. A definite diagnosis and plan of treatment has been made

for ninety-nine (99) other children. Of these ninety-nine (99), four have had

all treatment, eighteen others have had special tests such as catheteriza-

tion of the heart.

A registry for handicapping conditions in school children has been set

up in the Central Office, City Hall. In 1958, two hundred and sixty (260) diagnosed

cases were registered. One hundred and thirty-two (132) of these cases have

been heart disease and one hundred and twenty-eight (128) have rheumatic

disease. In the majority of these cases, no restriction of school activities

is necessary.

In 1958, the City Health Department on written authorization of the family

, supplied a daily dose of four hundred thousand (400,000) units of penicillin

for one hundred and eleven (111) school children diagnosed as rheumatic heart cases.

In addition to cardiac, vision and hearing conditions, the Central registry

also included detailed information on twenty-eight school children with

epilepsy and fifty school children with epilepsy. An annual review of the medical

and the educational progress of these children is carried out.

During 1958, protection against diphtheria, tetanus, and smallpox was

was administered with parental approval to high school students in 1958. On the completion of this program, approximately 100% of the school population had received primary inoculations against poliomyelitis.

To improve the school health program regular meetings were held between School Administrators and the Official of the Health Department. In addition, the Consultant on Child Care Services spoke at a School Board Meeting and attended several principal-teacher meetings. Members of the Nursing Division interpreted the various school health services at the teachers' convention, principal-teacher meetings, and parent-teacher meetings.

In-service education programs on matters relating to school health were held throughout the year with school physicians and public health nurses.

Day Nurseries and Nursery Schools

In 1958, the Health Department licensed and supervised six Day Nurseries caring for approximately one hundred and sixty-five (165) children and fourteen Nursery Schools caring for approximately four hundred and ten (410) children. Due to the number of working mothers, there has been an increased number of applications to operate Day Nurseries. These institutions according to the Welfare By-law may care for three or more children for a period in any day exceeding three hours. A number of applications were refused in 1958 because the regulations under the Welfare By-law could not be met.

PHYSICAL EXAMINATIONS OF SCHOOL CHILDREN

1. Total number of children examined by medical examiners	6,934
2. Total number of children with one or more defects	3,328
3. Total number of parents invited to physical examination	4,297
4. Total number of parents present at physical examination	2,522

administered with parental approval to high school students in 1958. On the
tion of this program, approximately 100% of the school population had re-
primary inoculations against poliomyelitis.

To improve the school health program regular meetings were held between
Administrators and the Official of the Health Department. In addition,
Assistant on Child Care Services spoke at a School Board Meeting and attended
principal-teacher meetings. Members of the Nursing Division interpreted
school health services at the teachers' convention, principal-teacher
meetings, and parent-teacher meetings.

In-service education programs on matters relating to school health were
throughout the year with school physicians and public health nurses.

Nurses and Nursery Schools

In 1958, the Health Department licensed and supervised six day nurseries
for approximately one hundred and sixty-five (165) children and fourteen
schools caring for approximately four hundred and ten (410) children. The
number of working mothers, there has been an increased number of applications
for day nurseries. These institutions according to the Welfare By-law may
three or more children for a period in any day exceeding three hours.
of applications were refused in 1958 because the regulations under the
By-law could not be met.

DIVISION OF CHILD MEDICAL SERVICES

ACCIDENTS REVIEWED

Total number accidents reported by Principal and Nurse 1,105

<u>COMMUNICABLE DISEASES IN SCHOOL CHILDREN</u>	<u>1957</u>	<u>1958</u>
Total number of chickenpox	146	82
Total number of measles	387	147
Total number of mumps	60	61
Total number of scarlet fever	37	327
Total number of whooping cough	8	1
Total number of poliomyelitis	2	18

REPORT ON HEALTH INSPECTION OF SCHOOL CHILDREN BY PUBLIC HEALTH NURSES

Pupils examined in Health Service Rooms by nurses 23,690

Exclusion from school 4,117

Miscellaneous 2,488

Pediculosis 171

Skin conditions 573

Suspect communicable disease 885

Treatments given 16,040

Classroom Inspections by school nurse 2,040

General 1,828

Acute Communicable 212

Conference re pupil (with pupil, parent, teacher, etc.) 91,403

Health education 2,222

Home visits to school children made by nurses (exclusive of communicable disease visits) 8,212

PHYSICAL EXAMINATIONS OF SCHOOL CHILDREN

1. Total number of children examined by medical examiners 6,934

2. Total number of children with one or more defects..... 3,928

3. Total number of parents invited to physical examination 4,297

4. Total number of parents present at physical examination 2,522

DIVISION OF CHILD MEDICAL SERVICES

CASES REVIEWED

Total number of cases reported by Principal and Nurse 1,132

REPORT ON HEALTH INSPECTION OF SCHOOL CHILDREN BY PUBLIC HEALTH NURSES

Pupils examined in Health Service Rooms by nurses 23,690

Exclusion from school 4,117

Miscellaneous 2,488

Pediculosis 171

Skin conditions 273

Suspect communicable diseases 882

Treatments given 16,040

Classroom inspections by school nurses 2,040

General 1,828

Acute Communicable 212

Reference to pupil (with pupil, parent, teacher, etc.) 21,403

With education 2,222

Home visits to school children made by nurses (exclusive of communicable disease visits) 8,212

PHYSICAL EXAMINATIONS OF SCHOOL CHILDREN

Total number of children examined by medical examiners 6,934

Total number of children with one or more defects 3,928

Total number of patients invited to physical examination 4,237

Total number of patients present at physical examination 2,522

DIVISION OF CHILD MEDICAL SERVICES

OCULIST'S REPORT

Number of clinics held	221
Number of children examined: New	496
Re-examined	563
	1,059
1. Refractions completed	580
2. Refractions not completed	291
3. Refractions not needed	22
4. Returned for observation	166
Completed Refractions	580
Not needing glasses	136
Glasses prescribed	404
No change in prescription	40
Children found with 1/3 or less of normal vision with glasses.	3
Glasses discontinued	5
Out-Patient Consultations	1,305
Referred to Orthoptic Clinic	32

AUDIOMETRY REPORT

Number of children tested	7,161
First tests	5,920
Re-tests	1,241
Number of defects	354
Teachers and others tested	47

DIVISION OF CHILD WELFARE

CHILD'S REPORT

Number of children held 221
Number of children examined: Examined 1,029
Re-examined 363
1. Refractions completed 580
2. Refractions not completed 291
3. Refractions not needed 22
4. Returned for observation 166
Completed Refractions 580
Not needing glasses 136
Glasses prescribed 404
No change in prescription 40
Children found with 1/3 or less of normal vision with glasses 3
Glasses discontinued 2
One-Facient Consultations 1,305
Referred to Ophthalmic Clinics 32

Summary

Number of children tested 7,161
First tests 2,920
Re-tests 1,121
Number of defects 352
Teachers and others tested 17

DIVISION OF PUBLIC HEALTH NURSING

Personal Services to Patients by Public Health Nurses
(Including visits and instruction by telephone from District Office)

Health:	Newborn	5,389
	Under 1 year	5,746
	Pre-school children	10,509
	School children	8,212
	Adults	7,595
Pre-Natal		805
Post-Natal		5,312
Attendance at Pre-Natal Classes		3,309
Morbidity: Tuberculosis		1,460
	Acute Communicable	287
Unclassified: Not found		4,407
	Not taken under care	108
	Special activity	673
No. visits made for poison control prevention		<u>133</u>
	TOTAL	53,945

CHILDREN EXAMINED FOR FRESH AIR CAMPS

Camp Morton	249
Salvation Army	215
C.G.I.T.	116
Y.M.C.A.	204
Y.W.C.A.	150
Y.M.H.A.	170
United Church	247
Logan Neighbourhood House	90
Lakeside Camp	180
Norquay Neighbourhood House	51
Shaarey Zedek	196
Talmud Torah	60

DIVISION OF PUBLIC HEALTH

Personal Services to Patients by Public Health Nurses
(Including visits and instruction by telephone from District Office)

Health: Newborn.....	5,389
Under 1 year.....	5,746
Pre-school children.....	10,509
School children.....	8,212
Adults.....	7,592
Pre-Natal.....	802
Post-Natal.....	5,312
Attendance at Pre-Natal Classes.....	3,309
Morbidity: Tuberculosis.....	1,460
Acute Communicable.....	287
Unclassified: Not found.....	4,407
Not taken under care.....	108
Special activity.....	673
No. visits made for poison control prevention.....	123
TOTAL.....	57,945

CHILDREN EXAMINED FOR TUBERCULAR DISEASE

Camp Morton.....	249
Salvation Army.....	212
C. G. I. T.....	116
Y. M. C. A.....	204
Y. W. C. A.....	150
Y. K. M. A.....	170
United Church.....	247
Logan Neighborhood House.....	90
Lakeside Camp.....	120
Norway Neighborhood House.....	21
Shawnee Hotel.....	122
Talman Town.....	60

DIVISION OF PUBLIC HEALTH NURSING

Child Health Centres

No. of Child Health Centres	10
No. of Child Health Centre sessions held	494
No. of new babies admitted	1,839
Infants	1,340
Pre-school	499
Total attendance at sessions	36,135
Infants	12,530
Pre-school	23,605
No. of doctors' consultations and examinations	5,686
Infants	3,221
Pre-school	1,465
No. of home visits re child hygiene (birth registrations, etc)	21,644
No. of immunizations by doctors at Child Health Centres	29,606

ATTENDANCE AT CHILD HEALTH CENTRES

Harrow	4,840 for 15 afternoons
St. Matthews	4,048 for 13 afternoons
St. Judes	3,743 for 13 afternoons
Sparling	1,127 for 13 afternoons
St. Andrews	3,406 for 14 afternoons
Holy Trinity	2,557 for 13 afternoons
Chalmers	2,419 for 12 afternoons
Mount Carmel Clinic	1,747 for 13 afternoons
Robertson House	3,973 for 12 afternoons
Stella Mission	1,746 for 12 afternoons

DIVISION OF PUBLIC HEALTH NURSING

Child Health Centres

No. of Child Health Centres	10
No. of Child Health Centres held	494
No. of new babies admitted	1,839
Infants	1,310
Pre-school	499
Total attendance at sessions	36,195
Infants	12,530
Pre-school	23,605
No. of doctors' consultations and examinations	5,686
Infants	3,221
Pre-school	1,465
No. of home visits re child hygiene (birth registrations, etc)	21,644
No. of immunisations by doctors at Child Health Centres	29,606

ATTENDANCE AT CHILD HEALTH CENTRES

Harrow	4,840 for 15 afternoons
St. Matthews	4,048 for 15 afternoons
St. James	3,743 for 15 afternoons
Spitaling	1,127 for 15 afternoons
St. Andrews	3,406 for 15 afternoons
Holy Trinity	2,527 for 15 afternoons
Chalmers	2,149 for 15 afternoons
Mount Carmel Clinic	1,747 for 15 afternoons
Robertson House	3,713 for 15 afternoons
Stella Mission	1,746 for 15 afternoons

VICTORIAN ORDER OF NURSES SERVICES SUMMARY FOR THE YEAR 1958

Total number of new cases 2,341

Nursing Care Visits:

Pre-Natal	93
Post-Natal	35
Newborn	549
Infant	120
Pre-school	96
School	69
Adult	37,079

Total Nursing Care visits 38,041

Health Instruction Visits:

Pre-Natal	49
Post-Natal	515
Newborn	504
Infant	542
Pre-school	32
School	22
Adult	546

Total Health Instruction visits 2,210

Not Seen 607

On behalf of patient 28

TOTAL 40,886

VICTORIAN ORDER OF NURSES SERVICES SUMMARY FOR THE YEAR 1958

number of new cases

ing Care Visits:

93	Pre-Natal
35	Post-Natal
249	Newborn
120	Infant
96	Pre-school
89	School
37,079	Adult

Total Nursing Care visits 38,041

Instruction Visits:

49	Pre-Natal
212	Post-Natal
204	Newborn
242	Infant
32	Pre-school
22	School
244	Adult

Total Health Instruction visits 2,210

.....

 28

TOTAL 40,251

CHILD DENTAL SERVICES BRANCH

After a year of operation under the guidance of a full time Director many changes and improvements have been made in the City of Winnipeg's Child Dental Services. The success of this project has been the result of a combined effort on the part of the school nurse, the teachers and staff of the Winnipeg School District No. 1, and the agencies providing funds for expansion and development.

During the year the Division undertook a dental inspection program for a selected group of children. A mobile dental unit was introduced for use in schools where a concentration of indigent children were known to attend, and a second two chair dental clinic and administrative office was established in the North Nursing District. A dental survey of some 1400 children of all ages was conducted with the sample including children from the three income groups (low, medium, and high) in order to obtain information on the over-all dental health picture.

The Dental Division played an active part in the promotion and organization of Dental Health Week. Consultant service was offered to the Municipal Hospitals and the School for Retarded Children. A booklet, "Aids in the Prevention of Tooth Decay" was prepared for distribution and two reports of surveys conducted were prepared - "Survey of Winnipeg School Children's Dental Health 1958", and "A Dental Health Report on Retarded Children in Greater Winnipeg".

Staff: The Division's staff includes one director, three clerks, ten part-time dentists, one full-time dental assistant (RN) and four part-time dental aides.

Dental Treatment: The program was limited in complete dental coverage to the extent of facilities available for indigent to pre-schoolers, Kindergarten, and Grade I children, Social Welfare children, plus dental emergency treatment for the older indigent age group. The demands on this scheme far exceed the present resources. The Clinic remained open during the summer holidays on a near capacity basis which helped to relieve the rush for emergency dental work at the opening of school in the fall.

School Dental Examinations:

School dental examinations included children in Kindergarten, Grade I, and Grade II with a total of 5,312 children being examined. Notifications of dental requirements were sent home with the children, as well as a questionnaire to the parents of Kindergarten and Grade I children as to whether they were under dental supervision or required assistance under the City's indigent dental clinic service. The fall school term dental examinations were conducted in the North and East Nursing Districts (25 schools, 4,140 children). The 1957 survey showed 19% of Grade I children eligible for City Dental Services, the increase to 28% in 1958 is accounted for in that the two other Nursing Districts are not fairly represented. (2,479 Grade I examined, 692 approved)

CHILD DENTAL SERVICES

After a year of operation under the guidance of a full time dental services officer, many changes and improvements have been made in the City of Winnipeg's dental services. The success of this project has been the result of a planned effort on the part of the school division, the health department and the dental services officer, and the agencies providing funds for expansion and development.

During the year the Division undertook a dental inspection program for a selected group of children. A mobile dental unit was introduced for use in schools where a concentration of indigent children were known to attend, and two dental clinics and a dental services officer were established in North Winnipeg District. A dental survey of some 1,000 children of all ages was conducted with the sample including children from the three income groups w, median, and high) in order to obtain information on the over-all dental picture.

The Dental Division played an active part in the promotion and organization of Dental Health Week. Consultant services was offered to the Hospital, the Division of Health Services, and the School for Handicapped Children. A booklet, "Dental Health Week" was prepared for distribution and two reports on the Division of Health Services were prepared - "Survey of Winnipeg Children's Dental Health 1955" and "A Dental Health Report on Handicapped Children in Greater Winnipeg".

The Division's staff includes one director, three clerks, ten part-time dentists, one full-time dental assistant (D.A.) and four part-time dental aides.

Dental Treatment: The program was limited in complete dental coverage to the extent of facilities available for indigent pre-school children, kindergarten, and Grade I children. Social Welfare children plus dental emergency treatment for the older indigent age group. The demands on this system far exceed the present resources. The Clinic remained open during the summer holidays on a near capacity basis which helped to relieve the rush for emergency dental work at the opening of school in the fall.

School Dental Examinations: School dental examinations included children in kindergarten, Grade I, and Grade II with a total of 1,100 children being examined. Most cases of dental requirements were met with the children, as well as a questionnaire to the parents of kindergarten and Grade I children as to whether they were under dental supervision or required assistance under the City's indigent dental clinic service. The full dental term dental examinations were conducted in the North and East Nursing Districts (25 schools, 1,100 children). The 1955 survey showed 10% of Grade I children eligible for City Dental Services. The increase to 25% in 1956 is accounted for in that the two other Nursing Districts are not fairly represented. (2,100 Grade I examined, 532 approved).

TABLE I

SCHOOL DENTAL INSPECTIONS 1958
(Number of children)

Grade	Examined	No noticeable Caries	Attending Dentist	Request Treatment	Nurses Approval
Kindergarten	1,438	389	985	296	275
Grade I	2,479	464	1,563	791	692
Grade II	1,395	190	-	-	-
TOTAL	5,312	1,043	2,548	1,087	967

Definition of Criteria:

No noticeable caries - caries treatment alone completed or never needed.

Attending dentist - no caries defect or no reply to the questionnaire by the parent.

Request treatment - answer to questionnaire by the parent.

Approval for treatment - School nurse identifies children who are classified as indigent.

Clinical Treatment Service

The Department of Health provided dental treatment for indigent and under-privileged children up to the age of 16 years. Limitations of the extent of coverage was necessary to obtain the maximum of return from the funds provided. Emphasis was placed on comprehensive dental treatment for children up to Grade I and children on Social Welfare. The demands for service on the clinics only allowed for 37% of the children to be dentally completed to the date of their last appointment.

TABLE II

SUMMARY OF DENTAL TREATMENT GROUPS 1958
(Number of Children)

	Pre-school	Kindergarten	Grade I	Grade II	Older Ages	Total
No. Patients	90	274	809	285	973	2,431
No. completions	47	125	336	108	295	911

During the year, 2,431 children were treated in the course of 5,112 clinic attendances. Of this number, 911 patients received complete dental caries care.

TABLE I

SCHOOL DENTAL INSPECTIONS 1952
(Number of children)

Examinations	No. not inspected	Attending Dentist	Request Treatment	Nurses Approval
1,438	389	985	304	275
2,439	464	1,883	791	575
2,392	190	-	-	-
2,392	1,043	2,348	1,027	967

tion of Criteria:

- Classifiable caries - caries treatment alone completed or never needed.
- Classifiable caries - no caries defect or no reply to the questionnaire by the parent.
- Classifiable caries - answer to questionnaire by the parent.
- Classifiable caries - School nurse identifies children who are classified as indigent.

cal Treatment Service

The Department of Health provided dental treatment for indigent children up to the age of 15 years. Limitations of the ex- of coverage was necessary to obtain the maximum of return from the funds. Emphasis was placed on comprehensive dental treatment for children up to the age of 15 years. The demand for service on the clinic allowed for 75% of the children to be dentally completed to the date of their appointment.

TABLE II

REMARKS ON DENTAL TREATMENT GROUPS 1952
(Number of children)

Pre-school Kindergarten Grade I Grade II Under Age Total	Patients	Examinations	Completed	Not Completed
2,431	275	109	336	133
2,431	275	109	336	133

During the year, 2,431 children were treated in the dental clinic attendance. Of this number, 911 patients received complete dental

Analysis of Clinical Services

X-rays (single films)	308
Extractions - Deciduous Teeth.....	2,341
- Permanent Teeth	672
Anaesthetic (local)	3,576
Fillings - Amalgams - single surface	3,472
- multiple surface	2,171
- Synthetic or plastic	198
- Cement linings	2,367
- Cement fillings	234
- Prophylaxis	58
Refused appointments (non-co-operative)	54
Cancelled appointments	158
Failed appointments	450
No. of Dentist 3 hour sessions	1,439
(includes time spent in school inspections)	

Dental Clinics

- 2 Chair Clinic - School Board Offices
- 2 Chair Clinic - William Whyte School
- 1 Mobile Unit - servicing LaVerendrye and David Livingstone Schools.

Dental Surveys

1. Winnipeg School Children's Dental Health 1958

The purpose of this survey was to establish immediate data and information on the Dental Health of the school children of Winnipeg. Previous to the survey, little information was available and few records were kept. It was necessary to obtain some base line material upon which to establish a dental program. The aspects of economy was a necessary consideration in conducting the survey and the utilization of staff to a maximum. Schools selected included representation from the three income groups.

TABLE III

COMPOSITION OF SURVEY SAMPLE WINNIPEG SCHOOL CHILDREN 1958

Schools	Total sample size		
	Males	Females	Total
A low income	78	73	151
B low income	165	137	302
C medium income	242	242	484
D high income	151	186	337
E high income	75	68	143
TOTAL	711	706	1,417

Winnipeg School Children's Dental Health 1938

The purpose of this survey was to establish immediate data and information on the dental health of the school children of Winnipeg. Previous to the survey, little information was available and few reports were kept. It was necessary to obtain some base line material upon which to establish a dental program. The object of the survey was a necessary consideration in conducting the survey and the utilization of staff to a maximum. Schools selected included representation from the three income groups.

TABLE III
COMPOSITION OF SURVEY SAMPLE
WINNIEP SCHOOL CHILDREN 1938

Total sample size		Total		Schools	
High income	Low income	High income	Low income	High income	Low income
121	102	73	137	171	302
137	102	262	186	137	102
102	102	92	102	102	102

TABLE IV
DENTAL STATISTICS 1958

DENTAL INDEX	AGES 6 - 8		AGES 9 - 11		AGES 12 - 14	
NO. OF PERSONS EXAMINED	436		443		479	
	Total	%	Total	%	Total	%
1. No Dental Defects	46	10.55	39	8.80	39	8.14
2. No Caries Defect	76	17.43	75	16.93	79	16.45
3. Visited Dentist	297	68.11	347	78.33	370	77.2
4. Decid. Tooth Mortality	225	51.65	131	29.50		
5. Perm. Tooth Mortality	11	2.52	59	13.22	143	30.27
6. Perm. & Decid. Teeth Needing Restoration	1932	Avg. 4.43	1252	Avg. 2.82	1536	Avg. 3.206
7. Space Maintainer	2	.0004	2			
Caries Free Children						
		%		%		%
8. Deciduous Teeth	38	8.71	132	29.79	411	
9. Permanent Teeth	130	29.81	15	3.88	11	2.29
10. Perm. & Decid. Teeth	28	6.42	8	1.70	10	2.09
11. D.M.F. Teeth	875	Avg. 2.006	1767	Avg. 3.88	3417	Avg. 7.13
12. Def. Teeth	2673	6.113				
13. D.M.F. plus def. teeth	3548	8.139				

2. Retarded Children's School Dental Health Report

A questionnaire was used to gain general information from the child's parent or guardian, and a dental examination was conducted for the children attending the school. The results were turned over to the authorities of The Retarded Children's School for future reference and planning.

TABLE IV
DENTAL STATISTICS 1928

INDEX	AGES 6 - 8	AGES 9 - 11	AGES 12 - 14
PERSONS EXAMINED	Total 148	Total 143	Total 143
1. Decid. Teeth	146	140	139
2. Permal. Teeth	78	75	79
3. Decid. Teeth	297	287	287
4. Permal. Teeth	235	231	231
5. Decid. Teeth	11	13	13
6. Permal. Teeth	197	197	197
7. Decid. Teeth	197	197	197
8. Permal. Teeth	197	197	197
9. Decid. Teeth	197	197	197
10. Permal. Teeth	197	197	197
11. Decid. Teeth	197	197	197
12. Permal. Teeth	197	197	197
13. Decid. Teeth	197	197	197
14. Permal. Teeth	197	197	197
15. Decid. Teeth	197	197	197
16. Permal. Teeth	197	197	197
17. Decid. Teeth	197	197	197
18. Permal. Teeth	197	197	197
19. Decid. Teeth	197	197	197
20. Permal. Teeth	197	197	197
21. Decid. Teeth	197	197	197
22. Permal. Teeth	197	197	197
23. Decid. Teeth	197	197	197
24. Permal. Teeth	197	197	197
25. Decid. Teeth	197	197	197
26. Permal. Teeth	197	197	197
27. Decid. Teeth	197	197	197
28. Permal. Teeth	197	197	197
29. Decid. Teeth	197	197	197
30. Permal. Teeth	197	197	197
31. Decid. Teeth	197	197	197
32. Permal. Teeth	197	197	197
33. Decid. Teeth	197	197	197
34. Permal. Teeth	197	197	197
35. Decid. Teeth	197	197	197
36. Permal. Teeth	197	197	197
37. Decid. Teeth	197	197	197
38. Permal. Teeth	197	197	197
39. Decid. Teeth	197	197	197
40. Permal. Teeth	197	197	197
41. Decid. Teeth	197	197	197
42. Permal. Teeth	197	197	197
43. Decid. Teeth	197	197	197
44. Permal. Teeth	197	197	197
45. Decid. Teeth	197	197	197
46. Permal. Teeth	197	197	197
47. Decid. Teeth	197	197	197
48. Permal. Teeth	197	197	197
49. Decid. Teeth	197	197	197
50. Permal. Teeth	197	197	197
51. Decid. Teeth	197	197	197
52. Permal. Teeth	197	197	197
53. Decid. Teeth	197	197	197
54. Permal. Teeth	197	197	197
55. Decid. Teeth	197	197	197
56. Permal. Teeth	197	197	197
57. Decid. Teeth	197	197	197
58. Permal. Teeth	197	197	197
59. Decid. Teeth	197	197	197
60. Permal. Teeth	197	197	197
61. Decid. Teeth	197	197	197
62. Permal. Teeth	197	197	197
63. Decid. Teeth	197	197	197
64. Permal. Teeth	197	197	197
65. Decid. Teeth	197	197	197
66. Permal. Teeth	197	197	197
67. Decid. Teeth	197	197	197
68. Permal. Teeth	197	197	197
69. Decid. Teeth	197	197	197
70. Permal. Teeth	197	197	197
71. Decid. Teeth	197	197	197
72. Permal. Teeth	197	197	197
73. Decid. Teeth	197	197	197
74. Permal. Teeth	197	197	197
75. Decid. Teeth	197	197	197
76. Permal. Teeth	197	197	197
77. Decid. Teeth	197	197	197
78. Permal. Teeth	197	197	197
79. Decid. Teeth	197	197	197
80. Permal. Teeth	197	197	197
81. Decid. Teeth	197	197	197
82. Permal. Teeth	197	197	197
83. Decid. Teeth	197	197	197
84. Permal. Teeth	197	197	197
85. Decid. Teeth	197	197	197
86. Permal. Teeth	197	197	197
87. Decid. Teeth	197	197	197
88. Permal. Teeth	197	197	197
89. Decid. Teeth	197	197	197
90. Permal. Teeth	197	197	197
91. Decid. Teeth	197	197	197
92. Permal. Teeth	197	197	197
93. Decid. Teeth	197	197	197
94. Permal. Teeth	197	197	197
95. Decid. Teeth	197	197	197
96. Permal. Teeth	197	197	197
97. Decid. Teeth	197	197	197
98. Permal. Teeth	197	197	197
99. Decid. Teeth	197	197	197
100. Permal. Teeth	197	197	197

United Children's School Dental Health Report

A questionnaire was sent to each parent or guardian, and a dental examination was conducted for the children in the school. The results were turned over to the authorities of the United Children's School for future reference and planning.

TABLE V

AGE GROUP REPORT OF DECIDUOUS AND PERMANENT TEETH
(Number of Children)

Age	Total Examined	<u>Deciduous</u>				<u>Permanent</u>			
		Caries	Filled	Lost	to be Lost	Caries	Filled	Lost	to be Lost
6	8	7	-	2	2	4	-	-	-
7	9	6	1	3	2	4	-	1	-
8	4	3	-	-	-	2	1	-	-
9	4	2	1	2	1	3	1	-	1
10	5	3	-	-	4	4	2	1	2
11	11	1	-	-	2	10	2	5	4
12	8	2	1	-	1	8	3	2	2
13	5	1	-	-	-	5	3	1	2
14	5	-	-	-	1	4	1	2	3
15	3	-	-	-	-	3	-	1	-
16	2	1	-	-	-	2	1	2	1
17	3	-	-	-	-	2	1	2	2
18	2	-	-	-	-	2	1	2	1
69		26	3	7	13	53	16	19	18

These children are in urgent need of dental attention. The presence of some fillings and premature loss of both deciduous and permanent teeth indicates that some dental work has been attempted. The sample of children used represents a select group of retarded children and the findings represent only a minimum of dental requirements of this unfortunate segment of the population. It is fair to assume that those children less fortunate in not being able to attend this institution would show an equally bad or worse report.

DENTAL HEALTH WEEK - April 12th - 19th, 1958.

Considerable time was spent in assisting the promotion of Dental Health Week. The city schools took an enthusiastic interest in the project. Material used in the classrooms up to Grade VI was written by the Dental Division staff - a Dental Playlet and a Tooth Care Diary.

SUMMARY

The City of Winnipeg Health Department's Dental Program is designed primarily for pre-school and school children. Improvement in dental health conditions is attempted by making use of known control measures and to reduce the complications of dental disease by encouraging early and regular dental care. The City provides dental clinics for indigent and under-privileged children with a staff of dentists equivalent to three full-time dentists. Sufficient dental personnel is not available to provide comprehensive dental treatment for all indigent children.

Dental defects in children is one of the most perplexing of all school health problems. A large portion of dental caries expected to occur in children can be prevented. Loss of teeth and impaired mouth function are largely the result of neglect. The solution to the problem of neglect is education of the parent and child in the use of preventive and control measures.

ANNUAL REPORT - 1958I N S P E C T I O N S B R A N C H

Dairy	Principal Inspector	R. Bentham	Cert. R. San. 1
Food	" "	R. C. Morrow	D.V.M., C.S.I. (C)
Housing	" "	G. W. Kelly	Cert. R. San. 1, C.S.I. (C)
Sanitation & Hygiene	" "	A. Cross	Cert. R. San. 1. C.S.I. (C)
Laboratory	Senior Technician	H. Robinson	Cert. R. San. 1
Chief Health Inspector		E. J. Rigby	D.V.M., B.S.A. C.S.I. (C)

The shortage of inspectors mentioned in the 1957 report continued for most of the year. The shortage tended to curtail the activities of the Branch to some extent. Early in December four inspectors, who had successfully completed the course for sanitary inspectors were hired. This course conducted at the Manitoba Vocational Institute was a co-operative effort of this department, the Provincial Department of Health and the Department of Education and was financed under a National Health Grant. J. M. Sisler, B.S.A. M.Sc. of this department was appointed director of the course. On the completion of the course Mr. Sisler returned to this department for a short time, then resigned to accept a position with the Manitoba Department of Health and Public Welfare.

HOUSING DIVISION:

During the year particular attention was given to the enforcement of regulations respecting "rooming houses". In order to facilitate the work and make for more uniform enforcement a proposal to license "rooming houses" was made. This proposal is being given serious consideration, but no decision on the proposal had been made at the close of the year.

Pursuant to a request received representatives of the department attended meetings of the Urban Renewal Board. The department co-operated with the Board in conducting surveys and making pertinent information concerning housing and factories available for the use of the Board. In December one experienced inspector was loaned to the Urban Renewal Board for an indefinite period.

Welfare Institutions, particularly nursing homes continued to effect improvements. Several such homes provided more suitable day room facilities, an increased supply of hot water and improved lighting for the patients.

DIVISION OF SANITATION AND HYGIENE

One inspector, experienced in the use of firearms, was commissioned to shoot pigeons, before 7 a.m. wherever it was determined that the pigeons were creating a nuisance. Some 5,000 pigeons were destroyed and there has been an appreciably lessening in the number of complaints received respecting nuisances created by pigeons.

INSPECTIONS BRANCH
(CONT'D)

Routine inspection of workshops and factories continued. Improvements were effected in lighting and ventilation in many premises.

Swimming pools were kept under constant supervision to ensure that satisfactory standards were maintained. Attendance at the pools indicates that there are not sufficient swimming pools in the area to accommodate all persons that desire to make use of such pools.

MILK INSPECTION

An adequate supply of fresh milk of good quality continued throughout the year. While there was a decrease in the number of milk producers there was an increase in the volume of milk shipped. The net result was that the average quantity of milk shipped by each producer was greater than in previous years.

The Federal Department of Agriculture continued the policy of eradicating tuberculosis from the cattle population and have now succeeded in reducing the incidence of that disease to a very low figure. A policy aimed at similarly eradicating Brucellosis from the cattle population was begun during the year. These efforts will reduce the chances of persons becoming afflicted with Undulant Fever as well as being of immeasurable value to the cattle owner.

FOOD DIVISION

The introduction of new methods in the processing, packaging and distribution of food stuffs, together with the tendency of many people to use pre-cooked or ready-to-eat foods has altered the role of the food inspector to some extent. The past year has seen an increase in the number of super markets and the introduction of evening shopping. There has also been an increase in the number of liquor outlets and in the number of persons patronizing restaurants. The general "tone" of restaurants has shown improvement and generally restaurants are observing good food handling practices.

The volume of business done by caterers showed an increase and in several instances it was necessary to require individual caterers to either curtail their volume of business or enlarge their quarters so as to relieve the apparent overcrowding.

Bakeries and sausage factories came in for considerable attention, as in several instances changes had to be made in equipment, and in the plant to adequately take care of the increased volume of business. The increased use of stainless steel, plastics and new methods in cleaning and housekeeping have all tended to improve the sanitary conditions of these premises.

The activities of the various divisions are outlined in more detail in the following reports.

E. J. Rigby, D.V.M.

CHIEF HEALTH INSPECTOR.

House inspection of workshops and factories continued. Elements were effected in lighting and ventilation in many premises.

Swimming pools were kept under constant supervision to ensure satisfactory standards were maintained. Attendance at the pools was that there are not sufficient swimming pools in the area to satisfy all persons that desire to make use of such pools.

INSPECTION

An adequate supply of fresh milk of good quality continued about the year. While there was a decrease in the number of milk cans there was an increase in the volume of milk shipped. The net was that the average quantity of milk shipped by each producer was greater than in previous years.

The Federal Department of Agriculture continued the policy of eradicating tuberculosis from the cattle population and have now succeeded in reducing the incidence of that disease to a very low figure. A policy of similarly eradicating Brucellosis from the cattle population was during the year. These efforts will reduce the chances of persons becoming infected with Undulant Fever as well as being of immeasurable value to the owner.

DIVISION

The introduction of new methods in the processing, packing and distribution of food stuffs, together with the tendency of many people to use cooked or ready-to-eat foods has altered the role of the food inspector to some extent. The past year has seen an increase in the number of super stores and the introduction of evening shopping. There has also been an increase in the number of liquor outlets and in the number of persons patronizing restaurants. The general "tone" of restaurants has shown improvement and really restaurants are observing good food handling practices.

The volume of business done by caterers showed an increase and several instances it was necessary to require individual caterers to either all their volume of business or enlarge their quarters so as to relieve apparent overcrowding.

Bakeries and sausage factories came in for considerable attention in several instances changes had to be made in equipment, and in the adequately take care of the increased volume of business. The increased use of stainless steel, plastic and new methods in cleaning and housekeeping all tended to improve the sanitary conditions of these premises.

The activities of the various divisions are outlined in more detail in the following report.

E. J. Rigg, D.V.M.

INSPECTIONS BRANCHFOOD DIVISIONAnnual Report (Jan. - Dec.) 1958

	<u>Inspections</u>	<u>Contacts</u>
Abattoirs -----	3	14
Bakeries -----	489	88
Beer Parlors -----	208	85
Bottling plants -----	15	10
Candy Manufacturers -----	48	7
Canteens and hotel kitchens -----	185	44
Caterers -----	142	56
Cereal Mills -----	29	13
Dance Halls -----	144	20
Fish-filleting, Cold Storage etc ---	40	70
Frozen Food Locker Plants -----	17	10
Ice cream parlors -----	15	7
Ice Houses and Depots -----	13	6
Pickle and Vinegar Factories -----	14	19
Poultry slaughterhouses -----	49	87
Producer's Markets, Vegetable Stalls-	47	22
Restaurants -----	3,909	1,042
Retail Food Stores, Grocers, Butchers etc	3,499	504
Sausage Factories -----	131	68
Wholesale-groceries and vegetables --	139	22
Vehicles -----	75	17
Fires in Food Establishments -----	52	107
Vending Machines -----	69	1
Glass Wash Service -----	3	1
Special Calls -----	31	
Processing plants -----	20	
Miscellaneous -----	5	
TOTAL	9,391	2,320

Complaints ----- 338

Notices

Verbal--- 4,867
Written -- 547

Infectious disease calls ----- 148

Samples Examined -- Food ----- 1,125

Plans Examined ----- 136

Plans Approved ----- 42

Condemnations

Baked goods	478 lbs.	Dairy Products	452 lbs	Poultry	533 lbs.
Candy	15,681 "	Prop. Medicine	210 "	Fruit & Veg.	4,644 "
Canned goods	1,215 "	Fish	1,485 "	Sugar	58 "
Cereals	559 "	Meat	2,388 "	Miscellaneous	40 "

Rejected Food Stuffs ----- Rice ----- 36,552 lbs.

INSPECTION REPORT

FOOD DIVISION

Annual Report (Jan. - Dec.) 1938

General

Inspections

14	3	Alcoholic
88	1,482	Bakeries
85	208	Beer Parlors
10	15	Baking Plants
7	18	Candy Manufacturers
14	185	Canteens and Hotel Kitchens
36	115	Caterers
13	29	Cereal Mills
20	111	Dance Halls
70	10	Fish-Flitting, Cold Storage etc.
10	17	Frozen Food Locker Plants
7	15	Ice Cream Parlors
6	13	Ice Houses and Depots
13	14	Jams and Vinegar Factories
87	19	Portly Slaughterhouses
22	17	Producers' Markets, Vegetable Stalls
1,042	3,909	Restaurants
304	2,259	Retail Food Stores, Grocers, Butchers
68	131	Sausage Factories
23	179	Wholesale-groceries and vegetables
17	75	Vehicles
109	22	Firms in Food Establishments
1	69	Washing Machines
1	3	Glass Wash Service
	31	Special Cakes
	20	Processing Plants
	2	Miscellaneous
2,330	9,391	TOTAL

Complaints --- 338

Notices

Verbal --- 1,507
Written --- 243

Infectious disease calls --- 118

Samples Examined --- Food --- 1,155

Plans Examined --- 134 Plans Approved --- 12

Examinations

Baked Goods --- 12,681
Candy --- 12,681
Dry Products --- 12,681
Food Medicines --- 12,681
Ice Cream --- 12,681
Liquor --- 12,681
Meats --- 12,681
Milk --- 12,681
Poultry --- 12,681
Seafood --- 12,681
Vegetables --- 12,681
Wine --- 12,681

I N S P E C T I O N S B R A N C HDAIRY DIVISIONJanuary to December - 1958

		<u>Inspections</u>	<u>Contacts</u>
<u>COUNTRY:</u>	Milk Producers.....	3,374	1,290
	Prospective Producers.....	145	38
	Milk Haulers.....	555	--
<u>CITY:</u>	Pasteurization Plants (10 licensed).	81	2,726
	Ice cream Manufacturers.....	249	
	Counter Freezers.....	563	
	Butter Plants.....	55	
	Cheese Plants.....	99	
	Vehicles-Delivery.....	86	
	Cans Inspected.....	1,607	
<u>SAMPLES</u>	Water.....	57	
<u>TAKEN:</u>	Milk Retail.....	1,502	
	Milk Shippers.....	26,187	
	Cream.....	625	
	Ice cream.....	711	
	Bottles for Sterility.....	65	
	Special Samples.....	1,144	
<u>GENERAL:</u>	Special Calls.....	1,218	
	New Permits Issued.....	39	
	Cancellations.....	113	
	Complaints.....	7	
	Temperatures Taken.....	6,214	
	Samples Tested.....	1,625	
	Letters Sent Re: Premises.....	1,077	
	Notices Sent Re: Quality of Milk....	7,625	

INSPECTIONS BRANCH

BACTERIOLOGICAL LABORATORY

January to December - 1958

<u>WATER ANALYSIS</u>	Standard Plate Count.....	2,734
	Presumptive Test.....	2,734
	Confirmed Test.....	812
<u>MILK & CREAM</u>	Standard Plate Count.....	2,156
	Babcock Test.....	2,067
	Coliform Test.....	2,154
	Phosphatase Test.....	2,157
	Resazurin Test.....	26,106
<u>ICE CREAM</u>	Standard Plate Count.....	576
	Coliform Test.....	708
<u>MILK BOTTLES</u>	Bacterial Test.....	65
<u>DIAGNOSTIC</u>	Diphtheria Swabs.....	301
	Sputa for T.B.	1
	Smears for G.C.	1
	Urinalysis.....	328
<u>TOTAL TESTS</u>		42,900

George Kelly,
Principal Inspector,
Housing Division

INSPECTIONS

BACTERIOLOGICAL LABORATORY

January to December - 1928

2,701	Standard Plate Count	WATER ANALYSIS
2,704	Presumptive Test	
812	Confirmed Test	
2,156	Standard Plate Count	MILK & CREAM
2,067	Bacteriologic Test	
2,154	Coliform Test	
2,157	Phosphate Test	
2,106	Acidimetric Test	
576	Standard Plate Count	ICE CREAM
708	Coliform Test	
65	Bacteriologic Test	MILK BOTTLES
301	Microscopic Exams	DIAGNOSTIC
1	Spoke for T.B.	
1	Spoke for U.C.	
328	Urinalysis	
42,900		TOTAL TESTS

Y E A R 1 9 5 8HOUSING DIVISION - WINNIPEG HEALTH DEPARTMENT

Inspections and reinspections: 6,826

Complaints attended to: 1,394

Notices Issued:

Verbal warnings: 2,376

Notices, close-up or renovate: 136

Other formal notices: 1,379

Premises placarded "Unsanitary": Dwellings, 57; attics only, 20; cellars only, 6

Violations or defects remedied
during the year under orders from
the Division

Police Court Summonses issued:
28

Overcrowding remedied: 52 families
Damp or dark cellars vacated: 29 cellars
Unsatisfactory attics vacated: 29 attics
Dirty buildings cleansed throughout:
176 buildings
Fly screens and/or storm sash provided:
120 buildings
Bed bugs exterminated: 72 buildings
Cockroaches exterminated: 45 buildings
Rats or mice exterminated:
57 residential properties
Defective plumbing repaired: 211 buildings
Additional plumbing installed to comply
with roominghouse regulations:
324 roominghouses
Hot water provided: 111 buildings
Walls, ceilings, floors repaired:
198 buildings
Redecorated: 273 buildings
Leaky roof repaired: 41 buildings
Defective eavestroughing renewed:
57 buildings
Sufficient heat provided: 298 buildings
Defective cellars repaired: 73 cellars
Defective heating equipment renewed:
56 buildings
Gas stoves removed from bedrooms:
145 rooming houses
Floor covering renewed: 70 buildings
Miscellaneous defects remedied:
335 buildings

Roominghouse Regulations..... 11
Heating By-law..... 4
Refusal of entry to
health inspector..... 2
Owner rented out a
condemned house..... 1
Failure of tenants to vacate
condemned houses..... 2
Bed bug infestation..... 2
Smoke nuisance, burning of
tires in furnace..... 1
Water supply shut off..... 1
Defective furnace..... 1
Defective hot water tank..... 1
Lack of fly screens..... 1
Garbage nuisance..... 1

28

Convictions..... 12
Dismissals..... 1
Withdrawals..... 15

28

Total fines, including costs
of Court, \$209.60

George Kelly,
Principal Inspector,
Housing Division

YEAR 1928

HOUSING DIVISION - WINNIPEG HEALTH DEPARTMENT

Inspections and re-inspections: 6,836
Complaints attended for: 1,394
Notices issued: 2,376
Verbal warnings: 136
Notices, close-up or removal: 1,379
Other formal notices: 1,379

Premises placed "Unsanitary": Dwellings, 57; flats only, 30; cellars only, 1		Violations or defects remedied during the year under orders from Housing Division:	
Police Court summonses issued: 28		Overcrowding remedied: 52 families	
Roominghouse Regulations: 11		Damp or dark cellars vacated: 29 cellars	
Health by-law: 1		Unsanitary flats vacated: 29 flats	
Refusal of entry to health inspector: 2		Unsanitary buildings cleaned throughout: 1	
Owner rented out a condemned house: 1		Fly signs and/or signs each provided: 136 buildings	
Failure of tenants to vacate condemned houses: 2		Bed bugs exterminated: 73 buildings	
Bed bug infestation: 2		Cockroaches exterminated: 45 buildings	
Smoke nuisance, burning of: 1		Rats or mice exterminated: 57 residential properties	
Climb in furnace: 1		Defective plumbing repaired: 211 buildings	
Water supply shut off: 1		Additional plumbing installed to comply with roominghouse regulations: 324 roominghouses	
Defective furnace: 1		Hot water provided: 111 buildings	
Defective hot water tank: 1		Walls, ceilings, floors repaired: 198 buildings	
Lack of fly screens: 1		Re-roofed: 273 buildings	
Garbage nuisance: 1		Leaky roof repaired: 41 buildings	
Total fines, including costs of Court, \$209.60		Defective gas-eating equipment renewed: 27 buildings	
Total fines, including costs of Court, \$209.60		Sufficient heat provided: 298 buildings	
Total fines, including costs of Court, \$209.60		Defective cellars repaired: 73 cellars	
Total fines, including costs of Court, \$209.60		Defective heating equipment renewed: 58 buildings	
Total fines, including costs of Court, \$209.60		Gas shoves removed from bedrooms: 145 rooming houses	
Total fines, including costs of Court, \$209.60		Floor covering renewed: 70 buildings	
Total fines, including costs of Court, \$209.60		Miscellaneous defects remedied: 1,052 buildings	

I N S P E C T I O N S B R A N C HDIVISION OF SANITATION AND HYGIENEANNUAL REPORT 1958Licensed:Inspections

Billiard parlors	124
Bowling Alleys	32
Dance Halls	1
Dog Kennels	13
Hatcheries, & Pet Shops	47
Junk yards	109
Laundries	108
Massage Premises	76
Poultry Keepers	20
Roller Skating Rinks	5
Second-hand Stores	289
Soap Manufacturing	10
Stables-board, feed and sale	12
Tanneries & Hide curing	14
Undertaking Parlors	16

TOTAL 876Unlicensed:OFFICES, WORKSHOPS & FACTORIES 6,715

Comfort Stations	68
Community Clubs	15
Garbage & Refuse	3,479
Lanes, streets, yards & vacant lots	1,716
Schools	9
Swimming Pools	439
Wading Pools	18
Workmen's Closets	1,968

Miscellaneous 887TOTAL 6,599Total Number of Inspections 14,190Interviews 1,772

Estimated value of repairs \$19,908

Prosecutions 1

Complaints 1027

Notices:

Verbal 3738

Letter 125

Informal 232

Specification 44

Mandatory 69

Water Samples 590

INSPECTIONS BRANCH DIVISION OF SANITATION AND HYGIENE

ANNUAL REPORT 1927

Licensed:

Inspections

Billiard parlors	12
Bowling alleys	32
Barber shops	1
Toy concerns	13
Hatcheries, & pet shops	47
Bank yards	109
Launderies	108
Massage parlors	76
Poultry keepers	20
Roller skating rinks	2
Second-hand stores	209
Soap manufacturing	10
Shed, board, feed and sale	12
Tanneries & hide curing	14
Unlicensed parlors	15
TOTAL	876

Unlicensed:

OFFICES, WORKSHOPS & FACTORIES

Comfort Stations	68
Community Clinics	12
Garage & Refuse	3,479
Kitchens, streets, yards & vacant lots	1,716
Schools	9
Swimming Pools	439
Wading Pools	18
Workmen's Clubs	1,768
Miscellaneous	987

TOTAL

Total Number of Inspections	1,100
Interviews	1,712
Estimated value of repairs	\$29,908
Prescriptions	1027
Complaints	1027

Notices:

Verbal	3738
Letter	122
Formal	232
Special	44

INSPECTIONS BRANCH
DIVISION OF SANITATION AND HYGIENE
Annual report 1958
(Cont'd)

Defects discovered and dealt with:

Cleanliness, lack of	210
Common Drinking Cups	66
Covered Waste Receptacles	17
Drinking facilities (water)	19
Garbage & Refuse	917
Gas installations	2
Heating: Lack of	149
" Furnaces & Equipment	8
" Chimneys, ducts & Piping	1
Lanes, streets, yards & vacant lots	894
Lighting: Artificial or Natural	21
Noises	3
Plumbing: Lack of	26
" Defective	104
" Illegally installed	17
" Insufficient	67
" Dirty Fixtures	120
" Lack of legible signs	38
" No water supply	11
" No hot water	8
Pigeons or Poultry, illegal	95
Privacy, lack of	2
Rest Rooms, Lack of	19
" " Dirty	10
" " Furnishings	9
" " Matron, lack of	-
Rodents, rats	105
" Mice, other	23
Smoke, dust, fumes, odours	337
Soap & towels, lack of	48
Stables	1
Structural defects: Roofs	12
Eavestroughing & R.W.L.	13
Cellars, floors, walls	36
Screen doors & windows	4
Storm doors & windows	1
Swimming Pools, Wading Pools	69
Unlawful occupation	-
Ventilation	37
Vermin: Roaches, other	52
Workmen's Closets	184
Miscellaneous	429
Total defects & irregularities	4,184

A. Cross,
Principal Inspector
Sanitation & Hygiene.

INSTRUCTIONS BRANCH
DIVISION OF SANITATION AND HYGIENE
Annual Report 1958
(Cont'd)

Defects discovered and dealt with:

210	Cleanliness, lack of
66	Common Drinking Cans
17	Covered Waste Receptacles
19	Drinking facilities (water)
917	Garbage & Refuse
2	Gas installations
149	Heating: Lack of
8	"
1	"
94	Landscaping, yards & vacant lots
21	Lighting: Artificial or Natural
3	Noises
26	Pipefitters: Lack of
104	"
17	"
67	"
120	Dirty Fixtures
38	Lack of legible signs
11	No water supply
8	No hot water
92	Pigeons or Poultry, illegal
2	Privacy, lack of
19	Rest Rooms, lack of
10	"
9	"
-	"
108	Robberies, etc.
23	"
37	Smoke, dust, fumes, odors
48	Soap & towels, lack of
1	Stables
12	Structural defects: Roofs
13	Streetsweeping & R.M.I.
36	Cellars, floors, walls
4	Screen doors & windows
1	Storm doors & windows
67	Swimming Pools, bathing pools
-	Unlawful occupation
37	Ventilation
22	Vermin: Rats, other
128	Workmen's Classes
128	Miscellaneous
4,124	Total defects & irregularities

A. Gross,
Principal Inspector
Sanitation & Hygiene

CITY HEALTH DEPARTMENT

Summary of Expenditures, 1958
(to nearest dollar)

(a) Personal Services	\$355,121
(b) Outside Services	69,600
(c) Materials, Supplies and Repairs	57,624
(d) Equipment, additions & replacements	2,318
(e) Fuel, water, light and power	273
(f) Other expenses	1,504
(h) Auto Expenses	<u>16,259</u>
	<u><u>\$502,699</u></u>

Expenditures by Branches, 1958
(to nearest dollar)

	<u>Service</u>	<u>Total</u>	<u>Personal</u>	<u>Other</u>
Cl-1	Administration & Statistics	\$28,686	\$25,811	\$ 2,875
Cl-2	Communicable & Other Diseases	91,722	32,139	59,583
Cl-3	Inspection Services & Laboratory	110,964	97,068	13,896
Cl-4	Child Medical Services	37,599	3,789	33,810
Cl-5	Child Dental Services	43,324	17,929	25,395
Cl-6	Public Health Nursing	188,116	177,513	10,603
Cl-7	National Health Grants (City's Share)	<u>2,288</u>	<u>872</u>	<u>1,416</u>
	Totals	<u><u>502,699</u></u>	<u><u>355,121</u></u>	<u><u>147,578</u></u>

.....

Gross Cost per Capita \$1.97

CITY HEALTH DEPARTMENT

Summary of Expenditures, 1958
(to nearest dollar)

(a)	Personal Services	\$355,121
(b)	Outside Services	69,600
(c)	Materials, Supplies and Repairs	27,624
(d)	Equipment, additions & replacements	2,518
(e)	Fuel, water, light and power	275
(f)	Other expenses	1,204
(h)	Auto Expenses	16,222
	<u>Total</u>	<u>\$472,564</u>

Expenditures by Branches, 1958
(to nearest dollar)

Service	Total	Personal	Other
Administration & Statistics	\$28,486	\$25,211	\$3,275
Communicable & Other Diseases	91,722	32,132	59,590
Inspection Services & Laboratories	110,964	97,068	13,896
Child Medical Services	37,322	3,989	33,333
Child Dental Services	43,324	17,929	25,395
Public Health Nursing	188,116	177,513	10,603
National Health Grants (City's Share)	2,288	872	1,416
<u>Totals</u>	<u>\$472,564</u>	<u>\$355,121</u>	<u>\$117,443</u>

Gross Cost per Capita \$1.97

CITY HEALTH DEPARTMENT

Summary of Expenditures, 1958
(to nearest dollar)

(a) Personal Services	\$67,955
(b) Outside Services.	5,556
(c) Materials, Supplies and Repairs . .	1,060
(d) Equipment, Additions & Replacements	6,392
(h) Auto Expenses	<u>3,139</u>
	<u>\$84,102</u>

Expenditures by Projects, 1958
(to nearest dollar)

	<u>Service</u>	<u>Total</u>	<u>Personal</u>	<u>Other</u>
Cl-7(1)	Dental Services	\$7,298	-	\$7,298
Cl-7(2)	Registry for Handicapped children	6,129	\$ 1,554	4,575
Cl-7(3)	Assistance to Health Services . . Health Inspections	53,172	49,355	3,817
Cl-7(4)	Assistance to Health Services . . Public Health Nurses	<u>17,503</u>	<u>17,045</u>	<u>458</u>
	Totals	<u>\$84,102</u>	<u>\$67,954</u>	<u>\$16,148</u>

