

Annual report of the Director of Medical Services / Barbados.

Contributors

Barbados. Department of Medical Services.

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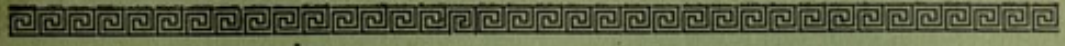
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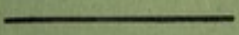
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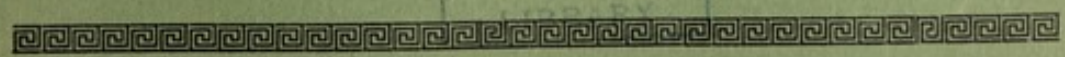
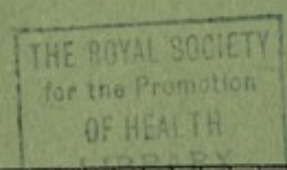
ANNUAL REPORT

OF THE

DIRECTOR OF MEDICAL SERVICES

FOR THE YEAR

1956-57



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BARBADOS

ANNUAL REPORT

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DIRECTOR OF MEDICAL SERVICES

FOR THE YEAR

1956-57

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Sir,

I have the honour to submit for your information the Report of the Department of Medical Services for the year 1956/57. A copy of this report is also forwarded for transmission to His Excellency the Governor.

I have the honour to be,

Sir,

Your obedient servant,

M. A. BYER

Director of Medical Services.

DEPARTMENT OF MEDICAL SERVICES

Causes and House,
100 West,
Hartford, I,
Hartford.

21st December, 1927

21

I have the honour to submit for your information the Report of the Department
of Medical Services for the year 1926/27. A copy of this report is also forwarded for
transmission to His Excellency the Governor.

I have the honour to be,

Sir,

Your obedient servant,

M. A. HYER

Director of Medical Services.

The Honorable
Minister of Social Services,
Government House,
Hay Street,
St. Michael.

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Mrs. U. M. Watson, Matron, General Hospital, (see office)

Miss J. Smart, Principal Sister Tutor, General Hospital

Mrs. E. Chadley

Dr. F. N. Graham

Dr. A. L. Smart

Dr. C. B. Vaughan

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ANNUAL REPORT OF THE DIRECTOR OF MEDICAL SERVICES FOR THE YEAR
1956-57

Part I. MEMBERSHIP OF COMMITTEES

GENERAL BOARD OF HEALTH

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Hon. D. H. L. Ward, M.L.C.
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F. C. Goddard, Esq., M.C.P.
W. L. Haynes, Esq.
V. W. A. Chase, Esq.
Dr. A. L. Stuart
Dr. E. Cochrane
Dr. M. A. Byer, Director of Medical Services (*ex officio*)
The Director of Highways & Transport
Dr. F. N. Grannum, M.B.E., Acting Senior
Medical Officer of Health
Dr. A. G. Friend, W.D.O. Consulting Sanitary Engineer
W. A. Abrahams, Esq., Government Chief Public
Health Inspector
T. F. King, Esq., B.A. - *Clerk.*

Advisers attending
by invitation.

GENERAL HOSPITAL ADVISORY COMMITTEE

Dr. J. Baeza - *Chairman*
R. M. Cave, Esq.
Mrs. J. A. Martineau
Mrs. E. E. Bourne, M.C.P.
E. D. Mottley, Esq., M.C.P.

MENTAL HOSPITAL VISITING COMMITTEE

Hon. Dr. C. H. St. John, M.L.C. - *Chairman*
Dr. J. Baeza
Mrs. W. A. Redhead
Mr. H. Waite
Mr. V. B. Vaughan, M.C.P.
Mr. M. D. Symmonds

VISITING COMMITTEE OF THE LAZARETTO

Dr. M. A. Byer, Director of Medical Services - *Chairman*
Dr. F. N. Grannum
The Rev. J. W. Clementson - *Chaplain*
Mr. C. B. Allamby
Miss Eunice Gibson
Mrs. F. A. Bishop, M.B.E.
Mrs. W. Terajewicz
Mrs. W. A. Redhead
Sister May Teresa, C.J.G.S.
Mr. C. E. Edwards, Superintendent - *Secretary*

GENERAL NURSING COUNCIL

Dr. M. A. Byer - *Chairman (Ex officio)*
Mrs. G. M. Watson, Matron, General Hospital, (*ex officio*)
Miss I. Stuart, Principal Sister Tutor, General Hospital
Mrs. E. Chandler
Dr. F. N. Grannum
Dr. A. L. Stuart
Dr. C. B. Vaughan.

BOARD OF MEDICAL ASSESSORS

Dr. M. A. Byer — *Chairman*
 Hon. Dr. C. L. St. John, M.L.C.
 Hon. Dr. H. G. Massiah, M.L.C.
 Dr. C. B. Vaughan

BOARD OF DENTAL ASSESSORS

Dr. M. A. Byer — *Chairman*
 Hon. H. G. Massiah, M.L.C.
 Dr. L. K. Nicholls
 Dr. E. W. Storey.

Part II. STAFF

2. Whole-time members as at 31st March, 1957:—

Director of Medical Services —

M. A. Byer, M.B., Ch.B.(Edin.), M.P.H. (Harvard)

Senior Medical Officer of Health (Acting)

F. N. Grannum, M.B.E., M.B., Ch.B.(Edin.), D.T.M.&H.(Eng.) M.P.H. (Harvard)

Health Officer (Port)

F. N. Grannum, M.B.E., M.B., Ch.B. (Edin.), D.T.M. & H. (Eng.) M.P.H. (Harvard)

Chief Public Health Inspector — W. A. Abrahams, Esq., M.R.S.H.

Assistant to Chief Public Health Officer — S. J. Sealy, Esq., A.R.S.H.

Office Superintendent — Capt. R. A. Sealy

Clerical — 9

Technical — 9

Nursing — 1

Other — 3

BARBADOS GENERAL HOSPITAL

Medical Superintendent — T. G. Humby, M.R.C.S.(Eng.), L.R.C.P. (Lond.)

Surgeon Specialist

A. G. Leacock, Esq., M.B., B.Chir., M.Chir, (U.Camb.), F.R.C.S. (Eng.)

Specialist Physician — (Vacant)

Specialist Radiologist — Edith Smith, M.B., B.S. (U. Punjab), D.M.R.E. (Camb.)

Specialist Anaesthetist — (Vacant)

Assistant Anaesthetist — B. S. Skinner, M.R.C.S.(Eng.), L.R.C.P.(Lond.)

Surgical Registrar — (Vacant)

Medical Registrar — (Vacant)

Medical Officer Grade 'A' — W.E. Cooper, M.B., Ch.B. (U. Lond.)
 (1 vacant)

Medical Officer Grade 'B'

H. A. H. Melville, M.B., B.Ch.(U. Wales), D. Obstet. R.C.O.G.

W.S. Snow, L., L.M., R.C.P. (Irel.), L., L.M., R.C.S. (Irel.)

L. B. Bannister, M.B., B.S. (U. Lond.)

House Officers — Dr. D. A. Weatherhead
 (3 vacant)

Steward and Secretary — W. C. Goodman, Esq., M.B.E.

Matron - Mrs. G. M. Watson

Assistant Matron - Miss E. K. Walters

Principal Sister Tutor - Miss I. Stuart

Sister Tutor - (Vacant)

Departmental Sisters - Miss E. M. Skinner, Miss B. St. Hill,
Miss N. Turner, Mrs. J. Bishop (Acting) (1 vacant).

Physiotherapist - (Vacant)

Radiographers - Miss J. B. Edwards, Miss R. Feldman

Clerical - 13

Nursing - 270

Technical - 14

Other - 243

MENTAL HOSPITAL

Medical Superintendent

Lt. Col. R. M. Lloyd-Still, M.R.C.S. (Eng.), L.R.C.P. (Lond.)

Assistant Medical Superintendents

W. Terajewicz, M.D. (U. Cracow)

J. T. Murray-Aynsley, M.R.C.S. (Eng.), L.R.C.P. (Lond.)

Matron - Miss E. McKerchar

Assistant Matron and Sister Tutor - Miss M. Connell

Head Male Nurse - A. E. Lewis, Esq.

Steward - V. Carter, Esq.

Clerical - 3

Nursing - 112

Technical - 0

Other - 39

LAZARETTO

Superintendent - C. E. Edwards, Esq.

Surgeon - W. Terajewicz, M. D. (U. Cracow)

BACTERIOLOGICAL AND PATHOLOGICAL LABORATORY

Bacteriologist and Pathologist

J. E. Walcott, M.B., Ch.B. (U. Glasgow), D.T.M. & H. (Eng.)

Assistant Bacteriologist and Pathologist

Mary Bools, M.B., B.Ch., B.A.O. (N.U. Irel.)

Clerical - 1

Technical - 3

Other - 1

HEALTH CENTRES

Enmore

Medical Officer of Health - E. Cochrane, M.B., Ch.B. (U. Glasgow) D.P.H. (Lond.)

Senior Public Health Nurse - Miss A. Walters

Enmore - Cont'd.

Laboratory Supervisor

V. A. A. Archer, B.Sc (McGill), M.Sc. (Toronto), F.C.I.C., F.R.I.C.

Radiographer - Miss A. Vanstone

Clerical - 3

Nursing - 4

Technical - 3

Other - 6

Speightstown

Medical Officer of Health

C. G. Terrell, O.B.E., M.B., Ch.B. (U. Edin.), D.T.M. (L'pool)

Senior Public Health Nurse - Miss M. Mayers

Clerical - 1

Nursing - 4

Technical - 1

Other - 2

St. Philip

Medical Officer of Health - (Vacant)

Senior Public Health Nurse - Miss M. Barrett

Clerical - 1

Nursing - 4

Technical - 1

Other - 2

MATERNITY HOSPITAL

Matron - (Vacant)

Miss D. Sargeant (Acting)

Clerical - 1

Nursing - 13

Technical - 0

Other - 23

3. Part-time members as at 31st March, 1957:-

Assistant Health Officer (Post)

D. O. S. Payne, L.R.C.P. (Edin.), L.R.C.S. (Edin.), L.R.F.P.S. (Glas.)

School Dentists - Dr. F. M. O. Alleyne, Dr. J. A. Smith, D.D.S.

BARBADOS GENERAL HOSPITAL

Visiting Surgeons - Dr. A. L. Stuart, Dr. H. L. Massiah, Hon. Dr. A. S. Cato, M.L.C.

Assistant Visiting Surgeons - Dr. G. S. Emtage, Dr. H. C. Rogers, (1Vacant)

Ophthalmic Surgeon

Hon. C. H. St. John, M.L.C., M.B., B.S. (U. Lond.), M.R.C.S. L.R.C.P., D.O.M.S.,
R.C.P.S. (Eng.)

Assistant Ophthalmic Surgeon

A. A. Gibbons, M.B., Ch.B. (U. Edin.), D.O.M.S., R.C.P.S. (Eng.), D.T.M. (L'pool)

Ear, Nose and Throat Surgeon - A. O. W. F. Trieloff, M.D., L.M.C.C.

Assistant Ear, Nose and Throat Surgeon

F. G. Reader, M.R.C.S. (Eng.), L.R.C.P. (Lond.)

Dental Surgeon - Eric W. Storey, D.D.S.

MATERNITY HOSPITAL

Visiting Obstetrician - F. G. Reader, M.R.C.S.(Eng.), L.R.C.P. (Lond.)

Tuberculosis Officer

D. O. S. Payne, L.R.C.P.(Edin.), L.R.C.S.(Edin.), L.R.F.P.S. (Glas.)

4. Changes in Staff:-

Dr. F. N. Grannum who had acted as Director of Medical Services on several occasions, retired from the active service on 9th June, 1956, after twenty years in this Department. Dr. Grannum joined the Staff at the General Hospital in 1926, and continued to work at the institution until he was appointed to the post of Parochial Medical Officer, St. Andrew in 1927. In 1936 Dr. Grannum left his parochial duties which were combined with a busy private practice and moved into the newly created post of Sanitation Officer. In this office he made substantial contributions to the cause of sanitation. His work as Local Secretary of the Royal Sanitary Institute and his interest in the training of Sanitary Inspectors have both played a large part in the improvement of standards in Sanitation. In 1947 the term Sanitation Officer was replaced by that of Senior Medical Officer of Health. Since his retirement Dr. Grannum has continued to serve the Department in a dual capacity as Health Officer (Port) and Acting Senior Medical Officer of Health.

Dr. M. A. Byer, Medical Officer of Health, Northern Area, was appointed Director of Medical Services on 10th June, 1956, and was granted six months vacation leave from 1st July to 31st December, 1956. During his absence Dr. Grannum again acted as Director of Medical Services. Dr. Byer resumed duty on 1st January, 1957.

Dr. F. Cochrane, Medical Officer of Health, St. Michael, acted as Senior Medical Officer of Health in conjunction with his duties as Medical Officer of Health from 1st July to 31st December, 1956.

Dr. C. G. Terrell, who was in charge of the B.C.G. Campaign was appointed Medical Officer of Health, Northern Area, on 15th March, 1957.

Part III. LEGAL

5. No new legislation was enacted during the year. The following Bills which have received the sanction of the Legislature still await proclamation:-

1. The Local Government Bill
2. The Public Health Bill
3. The Public Assistance Bill.

These Bills provide the authority necessary for making available to the community, the preventive diagnostic and curative services of modern medicine. Progress in this field faces not only the problems raised by scientific and technical inadequacies, but also vigorous organised resistance to change. Statesmanship and a spirit of co-operation will be required, if the great benefits of medical science are to be brought effectively to the service of the people.

Part IV. VITAL STATISTICS

6. The problem of population is one of the most pressing of the problems which face Barbados today. Population problems are affected not only by the incidence of disease, but also by the supply of food, by the availability of resources and by the state of education and technology. The need therefore for consideration of these problems on the broad front of health, agriculture, education and social services must be recognised. All of these should work together if the patterns of population growth are to keep pace with our resources and legitimate aspirations in respect to standards of living. The trends indicated in the vital statistics for this year indicate that these patterns may already be taking shape.

7. The population, as estimated by the Registrar, for 1956 was 229,579. Of this number, 105,670 were males and 123,909 were females. The natural increase, i.e. the difference between births and deaths, was 4,652. This increase has to a very large extent been offset by the excess of the Departures - 29,944 over the Arrivals - 25,758; a difference of 4,197.

8. The natural increase for the last ten years is shown in the following table:-

1947	...	3,221
1948	...	3,539
1949	...	3,378
1950	...	3,744
1951	...	3,793
1952	...	4,105
1953	...	4,307
1954	...	5,032
1955	...	4,706
1956	...	4,652

9. A fall in the Birth Rate from 33.14 in 1955 to 30.88 in 1956 is recorded. This fall is probably associated with the departure of large numbers of workers to the United Kingdom. It is also likely that the efforts of the Family Planning Association are taking effect.

10. The Birth Rates per 1,000 of the population for the last ten years calculated on the mean population are as follows:-

1947	...	31.71
1948	...	32.48
1949	...	31.06
1950	...	30.74
1951	...	31.83
1952	...	33.59
1953	...	33.05
1954	...	33.63
1955	...	33.14
1956	...	30.88

11. A Crude Death Rate of 10.59 as compared with 12.60 for 1955 represents another very healthy index. This is the lowest death rate recorded for the ten year period. The Crude Death Rates per 1,000 of the population, calculated on the mean population, for the last ten years are as follows:-

1947	...	16.25
1948	...	15.65
1949	...	14.56
1950	...	12.85
1951	...	14.06
1952	...	14.68
1953	...	13.36
1954	...	11.29
1955	...	12.60
1956	...	10.59

12. The Infant Mortality Rate of 97, when compared with 134 for 1955, indicates a very marked improvement in those conditions which are so accurately reflected in this very sensitive statistical indicator. A high Infant Mortality Rate has been one of the unsatisfactory features of child life in Barbados for a long period of time. Many factors are associated with these high rates; among them are:-

- (1) Inadequate knowledge of the basic principles of child care;
- (2) Poverty - with which is associated seasonal employment. The agricultural labourer has 4 - 5 months of under-employment during which the infants subsist on very inadequate foods;
- (3) Housing conditions, which are unsatisfactory in three main aspects:-
 - (a) overcrowding chiefly in relation to the number of occupants per room;
 - (b) the absence of pipe borne water from many of the homes;
 - (c) unsatisfactory sanitary accommodation.
- (4) Inadequate opportunities for ante-natal care;
- (5) Inadequate numbers of Child Health Clinics.

Any one of these factors, or all of them acting together, may have tended to keep these rates up. The very welcome downward trend which is shown in the following table is attributable therefore, NOT to any one of these factors, but rather to the overall improvement in all or in several of these directions, which has been taking place.

13. The Infant Mortality Rate - i.e. the number of deaths of infants under one year per 1,000 live births, for the past ten years is as follows:-

1947	...	172
1948	...	153
1949	...	135
1950	...	125
1951	...	136
1952	...	146
1953	...	139
1954	...	109
1955	...	134
1956	...	97

14. The Maternal Mortality Rate of 3.39 as compared with 2.63 for 1955 indicates the need for wider and better maternity services. Plans for the upgrading of sections of certain Almshouses to that of District Hospitals with Maternity Wards are already well advanced.

15. The principal vital statistical data for the year ended 31st December, 1956 are as follows:-

Estimated end of year population	...	229,579
Estimated mean population	...	229,346
Births registered	...	7,082
Birth Rate per 1,000 of the population	...	30.88
Deaths registered	...	2,430
Death Rate per 1,000 of the population	...	10.59
Infant Mortality Rate	...	97
Maternal Mortality per 1,000 live births	...	3.39
Still birth rate per 100 live births	...	1.86

16. The following table compares the three main rates with those for other territories:-

Rate	Barbados	Trinidad	Jamaica	British Guiana
Births per 1,000 population	30.88	36.9	37.26	42.3
Deaths per 1,000 population	10.59	9.6	9.51	11.3
Infant Mortality per 1,000 live births	97	63.9	54.2	68.5

Tables showing a summary of the Causes of Death in each parish and in age-groups for the whole Island are given in Appendices VI to VIII.

17. The population on the 31st December, 1956, was computed as follows:—

Estimated population 31st December, 1955	...	229,113
Excess of births over deaths	...	4,652
		233,765
Less excess of Emigration over Immigration	...	4,186
Population at 31st December, 1956	...	229,579

	Males	Females	Persons
Immigration	14,539	11,219	25,758
Emigration	17,173	12,771	29,944
Arrivals by air	11,966	8,613	20,579
Departures by air	12,837	8,925	21,762

Part V. HEALTH AUTHORITIES

18. Until the Bills referred to in Part III — Legal — are proclaimed, the General Board of Health continues to be the Central Health Authority. The Board meets once each month and is concerned mainly with the approval of plans for the division and sale of land under the Public Health Act of 1908.

19. The Local Health Authorities are the Boards of Commissioners of Health for each of the eleven (11) parishes. These Boards are appointed by the Vestries of the parishes. The Vestries also appoint Parochial Medical Officers who are responsible for the Medical Care of the poor in each parish, for whom both in-patient care in the Alms-houses and out-patient care are provided.

20. Details of Poor Relief are set out in Appendices II and III.

Part VI. WHO-UNICEF ASSISTANCE

THE B.C.G. CAMPAIGN

Dr. C. G. Terrell, O.B.E., Medical Officer of Health in charge of B.C.G. Centre.

General Operations

21. This Campaign commenced operations on 16th January, 1956, under the direction of Dr. R. G. Lampart who had been temporarily seconded by the Government of Jamaica to the World Health Organisation.

The field staff consisted of two teams of two Nurses each and one Nurse in each team had previously undergone a course of training in British Guiana.

The office staff consisted of one Clerk and one Clerk-typist.

Two station wagon cars fitted with loud speakers were supplied and were constantly on the road and gave excellent service during the course of the campaign. One of these cars and certain other necessary equipment including a new refrigerator were supplied by UNICEF, and their contribution also included a cinema unit consisting of a projector and motor with a set of films, and this was in constant use and was much appreciated especially in the country districts by the many thousands who attended the talks and cinema shows given throughout the Island.

After establishing the necessary contacts – including talks and film demonstrations, the work of the campaign commenced with the schools in St. Michael and these and the schools in three other of the parishes in the southern end of the Island were completed before the Easter Holidays at the end of March.

After the schools closed, work started for the general public in the parish of St. Michael and this and the parish of Christ Church were completed by the end of April.

Dr. Lampart left Barbados towards the end of April and from that time onwards the campaign has been under my direction.

Schools

From the beginning of May, work again reverted to the schools' programme for the nine remaining parishes and these were all completed by the middle of June.

The total number of schools was 155 – and of these 123 were Government Primary Schools and the remainder, 32 Secondary Schools.

Out of an estimated school population by the Department of Education of 40,038 school children, a total of 37,117 or 93% were tested during the period of the schools' programme and all the negatives vaccinated.

This satisfactory figure for the school children has been further improved on considerably during the progress of the campaign for the general public in the parishes and many children who were absent at the time their schools were tested have subsequently been tested at the village centres nearest to their schools, but for convenience these were recorded and included with the figures for the general public in that locality.

Apart from this, a considerable number of private schools were located both in the country and the towns and in Bridgetown alone the children in twenty-seven (27) of these schools – not previously recorded – were tested and the negatives vaccinated during the last month of the campaign.

General Public

After the completion of the schools, work was again concentrated on the programme for the general public, and a start was made on June 25th with the parish of St. George and this work continued uninterruptedly through the nine remaining parishes until the last one – St. Lucy – was finally completed on January 19, 1957.

In all these districts as many suitable centres as possible were selected so as to bring them within as easy range of access as practicable to the people and altogether a total of 293 centres were established throughout the island and it is certain that not even the smallest hamlet or tenantry was omitted from the scheme.

The Clinics at these centres were all freely and repeatedly advertised by loud speakers, Rediffusion, press notices and by lectures and cinema shows at the more important centres.

Schedule (No. 2) is attached showing the results obtained from the general public in the eleven parishes and the figures are on the whole disappointing.

Despite intensive propaganda efforts it was found rather difficult to stimulate interest and the highest percentage of the general public tested in any parish was St. Peter with a figure of 54.9.

The parish of St. Michael which has by far the largest population was the first to be undertaken by the campaign in March, 1956, and yielded only 21.1 per cent. This figure was not considered to be sufficiently satisfactory and as a resurvey of Bridgetown and this parish showed areas which had not been fully covered previously it was decided

to do it over again in February and March this year by establishing many fresh centres, and as a result the percentage figure for St. Michael has been increased to 33.2.

Observations on Centres

It is my considered opinion, now that St. Michael has been done over again, and the fact that the value of B.C.G. vaccination has been freely advertised and brought to the notice of everyone in the island, that very few – if any – of the general public who were willing to accept our recommendations have missed the opportunity of their test, and that any further efforts for them at the present time would not be successful.

This does not of course apply to the children who are far better contacted in the schools and there is ample scope for valuable work by a continuation of a modified B.C.G. scheme for the benefit of large numbers of younger children who have entered school since the completion of the main schools' campaign.

Chest X-Ray Survey

Altogether about eight thousand of the selected positive reactors to the test and for the most part over fifteen (15) years of age have taken advantage of the card entitling them to a free X-Ray, and there were approximately twice as many men as women who reported. The pictures have been done on miniature 4" x 5" films at Enmore Health Centre and have been read by the Medical Officer of Health in charge of St. Michael's Health Centre.

Out of the eight thousand read only eleven cases have shown evidence of tuberculosis and been notified, i.e. 0.138%.

Recently a check up of the cards of all the school children has been undertaken and a list of the names and addresses of all children who showed a plus thirteen millimetre or vesicular reaction has been prepared.

There are seven hundred names on this list, and as far as possible it is intended to have them all X-Rayed.

Complications

No complications have been reported from the tuberculin test.

In March of last year there were two cases of skin rashes following B.C.G. vaccination and neither of these responded to anti-histamine drugs – both lasted for about six weeks and it is possible this was only a coincidence.

No cases of axillary adenitis with or without suppuration has been reported.

Supplies

Supplies of P.P.D. and B.C.G. vaccine arrived from the Patzcuaro Laboratory, Mexico, regularly every three weeks and usually on schedule – on a few occasions more recently, and following some alterations in the air transport schedules the supplies were delayed en route for up to two days and re-forwarded from Trinidad. This was reported to Mexico and to UNICEF and following this we had no further trouble.

Observations

Disappointment has elsewhere been recorded over the inadequate numbers of the general public who came forward for testing.

There is undoubtedly a strong morbid fear of tuberculosis in the minds of the people although it would be more correct to describe this as fear of discovery that an individual was suffering from this disease, which is always associated in their minds with enforced isolation and estrangement from their friends and families.

This misguided obsession was quite a serious obstacle in the way of greater success and it was found to be essential to omit as far as possible any reference to tuberculosis in the talks and even to the term anti-tuberculosis campaign, and to concentrate only on the protection against tuberculosis factor.

Conversion Rate

This was undertaken during the last month of the campaign with a target figure of about 10 per cent of the school children previously tested. Four thousand two hundred children were retested, these showed a Conversion Rate of 83.2%.

Records

With a view to the integration of B.C.G. vaccination into the general health services all relative information about the school children has been recorded on individual cards.

Suggestions For Future Operations

Since the school programme last year there have been large numbers of new entries of younger children into all the schools, and these, and all previous negative reactors in each school should be tested and the negative vaccinated.

The suggestion - if adopted for the schools - would involve a complete round of the island again and it would be a formidable programme requiring much preliminary organisation and effort. It would, however, appear that any continuation of the B.C.G. campaign would not be fulfilling its main object in projecting the children unless this was done.

The final figure for all those tested during the course of the campaign is 88,366 which works out at about 45.8 per cent of the potential population of Barbados eligible for testing.

SCHEDULE NO. 1

Ages	Tested	Positives	Negative Vaccinated	Negative not Vaccinated	Read	Not Read
0 - 6 ..	17,167	1,694	13,452	33	15,179	1,988
7 - 14 ..	31,112	9,545	19,835	49	29,429	1,683
15 + ..	40,087	26,073	8,177	44	34,294	5,793
Total ..	88,366	37,312	41,464	126	78,902	9,464

SCHEDULE NO. 2

PARISH	Total Population	Less 10% for under 1 and over 55 yrs.	No. of School children tested	Balance General public for testing	No. of General public tested	Percentage of General Public tested
St. Michael ...	76,437	68,794	12,454	56,340	18,686	33.2
Christ Church ...	24,963	22,467	5,253	17,214	5,618	32.6
St. Philip ...	14,876	13,389	3,494	9,895	3,941	39.8
St. George ...	14,409	12,969	2,790	10,179	3,164	31.1
St. John ...	10,096	9,087	1,930	7,157	3,270	45.7
St. James ...	11,297	10,168	2,047	8,121	3,728	45.9
St. Thomas ...	8,486	7,638	1,875	5,763	2,683	46.6
St. Joseph ...	7,712	6,941	1,453	5,488	2,187	39.9
St. Andrew ...	7,581	6,823	1,672	5,151	2,538	49.1
St. Peter ...	9,127	8,215	2,461	5,754	3,159	54.9
St. Lucy ...	7,816	7,035	1,688	5,347	2,275	42.5
TOTAL ...	192,800	173,526	37,117	136,409	51,249	37.6

Total No. of tests 88,366

THE AEDES AEGYPTI CAMPAIGN

*W. A. Abrahams, Esq., Government Chief Public Health Inspector,
William Jurawan, Esq., WHO Public Health Sanitarian.*

22. The Staff consists of 33 aegypti inspectors under 11 senior inspectors and 5 assistant supervisors all under a Chief Supervisor and the WHO Consultant.

Closed houses posed a serious problem during the sugar crop season and many houses were left uninspected. Efforts were made to contact the owners and the law was quoted and explained in many instances. Persuasion, however, secured the treatment of many premises.

Transportation presented some difficulty. Two vehicles - a WHO truck and a Government jeep were utilised to move the Staff around. The aegypti Inspectors were given a bicycle allowance but there was very often recourse to foot or bus travel. This entailed delays and drop in output and often hurried work.

Two cars, one at Enmore, Bridgetown, and the other at Speightstown, were on a shared basis. WHO personnel utilised one as was convenient. Much time was lost in awaiting early transport to visit project work in the localities. The Chief Supervisor is allowed mileage allowance for his car but he is very frequently engaged in other health duties.

Co-operation. Owners and occupiers were slow to allow inspections and treatment by Inspectors. "There is no Yellow Fever here" they often exclaimed and shut the gate on them. Insistence and education on the law requirements have improved this situation.

Parochial co-operation was also very often sought. The clearing of backyards of tins, tyres, etc., was a recurring factor. Dumping on streets for long periods and disused dumps were often causes of aegypti breeding.

Boats beached for 2 or 3 months during the rainy season, when fishing was out, received special attention. Breeding was often found in these and disused boats.

Maritime vessels in inter-island trade were regularly inspected and treated in the stream before entering port. No aegypti was reported in these for the year.

Identification of aegypti found has been carefully insisted on for confirmation by the Chief Inspectors and Supervisors. All doubtful and difficult cases were finally identified by WHO Adviser.

Materials. 75% W/W D.D.T. provided by WHO was the principal insecticide used in a 5% strength.

SUMMARY

- (1) Storage of water is common in rural areas far from standpipes.
- (2) The island is within range of endemic Yellow Fever areas. The population is highly receptive.
- (3) External and internal communications are fast and good.
- (4) The Government is pledged to observe the Quarantine Regulations and have agreed with PASB/WHO to eradicate aegypti.
- (5) Three completed Check Cycles show 39 localities out of 95 negative. Positive localities show a marked reduction towards negative attainment at the end of the year's 4th Check Cycle.

THE PUBLIC HEALTH LABORATORY - HEALTH CENTRE, ENMORE

23. The establishment of this Laboratory forms part of the agreement with the World Health Organisation for the extension of the Public Health Services.

The present staff:-

Mr. V. A. A. Archer, M.Sc., B.Sc., F.C.I.C., F.R.I.C., Counterpart Laboratory Supervisor

Mr. C. McL. Pest, Senior Technician

Mr. W. A. Johnson, Junior Technician

Miss E. Piley, Junior Technician

Mrs. DeC. Sealy, Junior Technician

Mr. C. L. Ishmael, Glassware, sterilisation and utilities

The WHO Laboratory Adviser, Major John Cebel, arrived on 10th March, 1957, on a twelve month assignment. He will be responsible for the training of the staff and for the organisation of the work of the Laboratory. The specific function of this Laboratory is that of relieving the Hospital Laboratory of the routine testing of blood for Syphilis - now approximately 2,000 tests per month - examination of slides for Tuberculosis, milk and water examinations and other public health laboratory procedures.

PUBLIC HEALTH ENGINEER

24. The Regional Committee of the World Health Organisation, in response to representations of the needs of the Caribbean area has appointed a Public Health Engineer who is based in Barbados and is available for consultation and advice on the request of Health Departments of the British Territories. The officer appointed is Dr. Albert G. Friend, Ph.D., and his office address is c/o Enmore Health Centre, St. Michael, Barbados.

Dr. Friend arrived in Barbados in May. The assistance which his training and experience will bring to this area is greatly appreciated.

Part VII. INSTITUTIONS AND HEALTH CENTRES

THE GENERAL HOSPITAL

Dr. T. G. Humby, Medical Superintendent,

Mr. W. C. Goodman, M.B.E., Secretary and Manager.

Improvements

25. The new mechanical laundry at Stockton was completed and opened on 25th June, 1956. In the initial stages much difficulty was experienced in getting the boiler to function satisfactorily but this difficulty now appears to have been overcome. A further problem is the excessive wear and tear of the linen and clothing and it is hoped that it will be possible to get expert advice on this problem.

Funds were provided for the conversion of the old laundry and sewing room into two additional wards to accommodate 30 beds and for the purchase of the equipment for these wards. Funds were also made available to provide 7 additional rooms in the pay wards and to purchase the equipment necessary for the full use of the operating theatre in the Tercentenary Ward. This action was taken to endeavour to reduce the large number of patients on the waiting list. At the end of the year the structural alterations had been completed but all of the equipment ordered from abroad had not been received.

Accommodation

The accommodation of the Hospital at the end of the year was as follows:—

	Males	Females	Children	Total
5 Medical Wards	52	56	—	108
6 Surgical Wards	66	76	—	142
2 Ophthalmic Wards	13	14	—	27
2 Fever Wards	19	19	—	38
1 Maternity Ward	—	9	10	19
1 Children's Ward	—	—	28	38
2 Pay Wards 'A' and 'E' ...	11	12	—	23
2 Tercentenary Pay Wards, 'B' and 'C'	8	8	—	16
1 Pay Ward 'D', Ophthalmic	2	3	—	5
22 Wards	171	197	48	416

Further information can be found in Appendices XXII to XXV.

GOVERNMENT BACTERIOLOGICAL AND PATHOLOGICAL LABORATORY

Dr. J. E. Walcott, Acting Government Bacteriologist and Pathologist.

Administrative

26. The post of Government Bacteriologist and Pathologist remained vacant throughout the year. J. E. Walcott, Esq., M.B., Ch.B. (Glas.), Chemical Pathologist acted as Government Bacteriologist and Pathologist for the period under review.

Mr. W. A. Johnson was seconded from Enmore Public Health Laboratory for training from the 1st of May.

Buildings and Equipment

No structural alterations were carried out during the year. The several additions of up-to-date equipment call for no special comment.

General

There was again an increase in the total number of examinations over those of previous years. The increase was most marked in the number of serological examinations and in the number of examinations of sputum for tuberculosis.

A. Helminthology and Protozoology

Faeces. 71 specimens of faeces were examined for ova of pathogenic helminths and 48 specimens for the vegetative or cystic forms of *E. histolytica*.

The following list gives the names of the pathogenic helminths with the respective numbers of specimens in which ova were found:—

<i>Ascaris lumbricoides</i> ...	1
<i>T. trichiura</i> ...	6
Hookworm ...	1
	<u>8</u>

Vegetative forms of *E. histolytica* were observed in one specimen of faeces.

Blood films for malarial parasites. Blood films from 6 different persons were taken and a search made for malarial parasites. No parasites were observed in any of the films. Judging from the negative results of these blood films examined at the Government Bacteriological Laboratory it may be said that Barbados continued to be free from malaria during the period under review.

Blood films for microfilariae. It must be conjectured that the number of suspected cases of filariasis must have been very few during the year, as blood films from only one person were sent in to be examined for microfilariae. Negative results were obtained in the films submitted.

3. Serology and Kahn tests on cerebro-spinal fluids.

Serological and cerebro-spinal fluid reactions for syphilis. 16,361 specimens of blood serum were subjected to the V.D.R.L. flocculation test for syphilis with the results shown in the following table:—

(a) Blood sera

Reactions	No. of specimens giving such reactions
Positive ...	3,414
Weakly Positive ...	1,356
Negative ...	11,591
	<u>16,361</u>

(b) Cerebro-spinal fluids

132 specimens of cerebro-spinal fluid were subjected to the standard Fahn test. The results obtained are given in the following table:—

Reactions	No. of specimens giving such reactions
Positive ...	20
Negative ...	112
	<u>132</u>

Agglutination tests

Organism	Positive	Negative	Total
B. typhosus (<i>Salmonella typhosa</i>) ...	86	221	307
B. paratyphosus A (<i>S. paratyphi</i> A) ...	1	306	307
B. paratyphosus B (<i>S. paratyphi</i> B) ...	0	307	307
	<u>87</u>	<u>834</u>	<u>921</u>

Cf the 86 positive tests for B. typhosus (*S. typhosa*) seven were repetition tests. Again *S. typhosa* was found to be the main infecting organism, for with the exception of one positive test for *S. paratyphi* A, B. typhosus (*S. typhosa*) was the infecting organism in the other cases in which a positive agglutination test was obtained.

One specimen of serum was subjected to an agglutination test for abortus fever and one to a similar test for undulant fever. In each test the result was negative.

A presumptive and differential test for infectious mononucleosis was carried out on a specimen of serum.

C. Bacteriological Examinations

Sputum. There was a marked increase again this year in the number of specimens of sputum examined. 1,728 specimens were examined by the staining of films and of these 135 were found to be positive.

Of the positive tests 72 were repetition tests.

30 of the above-mentioned total number of specimens were cultured.

Throat and nasal swabs for C. diphtheriae. Smears from 148 swabs, which were obtained almost entirely from throats, were cultured and the resulting growths were then examined by the staining of films for *C. diphtheriae*.

Positive findings were obtained from the growths of 9 of the 148 swabs.

Smears from noses and throats for organisms other than C. diphtheriae. Only one smear was cultured for organisms other *C. diphtheriae*.

Nasal and skin smears for Myco. leprae. 12 smears made from nasal or skin scrapings, but mainly from nasal scrapings were stained and examined for *Myco. leprae*.

Negative findings were obtained in all of the smears.

Urethral, cervical and conjunctival smears. 93 genital and extragenital smears were stained and examined for gonococci. Twelve were considered to be positive.

Urine. 70 specimens were cultured.

The centrifuged deposits of 51 other specimens were examined microscopically after having been stained. A special search for tubercle bacilli was made in 8 of the specimens, but no tubercle bacilli were observed in any of the 8 specimens.

Faeces. 11 specimens of faeces were cultured and the resulting growths were then examined for typhoid or paratyphoid bacilli or for dysentery bacilli. No dysentery bacilli and no typhoid or paratyphoid bacilli were isolated from the growths.

Pus and other miscellaneous materials. Examination (a) by staining of films of 22 specimens of pus and 4 specimens of fluid from the pleural, abdominal and joint cavities and (b) by the culturing and staining of culture films made from the growths of 42 specimens were carried out. The sera from the genital sores of only 5 different persons were subjected to a dark-ground examination for *T. pallidum* with positive findings in the serum from one person.

The non-existence of yaws in this colony continued apparently for the year as no probable case was sent in for investigation.

Search was made but with negative results for tubercle bacilli in films made from the cerebro-spinal fluid of 14 cases and from the pleural and abdominal fluid of 14 cases. Pus from 7 other cases was also searched for tubercle bacilli with positive findings in a case of cervical adenitis.

Films made from the cerebro-spinal fluid of 27 cases were stained and examined for organisms other than tubercle bacilli with the finding of pneumococci in the films from six of the cases.

9 different specimens of cerebro-spinal fluid were cultured.

1 specimen of milk was cultured. No growth of *Salmonella* or of *Shigella* organisms was obtained.

1 specimen of cocoanut meal was cultured, but no pathogenic organisms grew.

252 antibiotic and 11 sulpha sensitivity tests were carried out on culture growths.

Specimens of blood from 22 persons were cultured with negative findings in the specimens for *Salmonella* organisms.

Water. 21 specimens of water from the public water supply of the Island were tested and considered to be bacteriologically suitable for domestic use. 2 other specimens from a private source were also tested.

Vaccines. The number prepared and delivered during the year was 27. They were all autogenous.

D. General Clinical Pathology

Urine. Chemical or chemical and microscopical examinations were carried out on 187 specimens of urine and in addition 207 specimens were each subjected only to a microscopical examination.

The diastatic index of 1 specimen of urine was estimated.

61 specimens with positive findings in 14 underwent the Ehrlich diazo test.

The Friedman test for the products of pregnancy was carried out on 17 specimens of urine. The results obtained continued to be very accurate.

19 specimens of urine, into which vaginal swabs had been dropped were examined for *Trichomonas*. Three were found to be positive.

The composition of one calculus, passed per urethram, was determined.

Blood. The haemoglobin was estimated in 1,091 specimens of blood and the counting of the red corpuscles and of the white blood corpuscles was carried out on 792 and 1,099 specimens respectively.

Blood films from 891 persons were obtained and a differential white cell count for each person was made from the same films after they had been stained. Observations were reported on the types and staining reactions of the red cells as seen in stained films from 9 persons.

The blood of 11 persons were examined for the sickling of the red blood corpuscles.

The number of platelets in 1 specimen was counted and the colour index of each of 40 specimens was calculated.

The red blood corpuscles of 1 person underwent a fragility test.

19 specimens of faeces were tested for occult blood.

The amounts of urea, of glucose, of acid phosphatase, of bilirubin, of creatinine and of total protein were estimated in 295, 83, 15, 5, 1 and 4 specimens respectively.

The coagulation time, the bleeding time, the diastatic index and the sedimentation rate of 10, of 4, of 2 and 954 specimens respectively were determined.

The Van den Bergh reaction of 4 specimens of serum was observed.

The A B O group of the blood of each of 1,028 persons was determined. The persons were divided up between the 4 major groups in the following numbers:—

Group	A	...	233 persons
"	B	...	195 "
"	AB	...	35 "
"	C	...	565 "
			1,028 "

In addition to the above groupings 565 specimens of blood were cross-matched.

The Rh group was determined in 721 specimens, 673 specimens being D positive and 48 D negative.

Cerebro-spinal fluids. The number of white cells per cubic millimetre was counted in 142 specimens and tests for the excess of globulin were carried out on 121 specimens.

The predominating type of cell was determined in 27 specimens.

The amounts of chlorides, of glucose and of protein were estimated in 69, 70 and 89 specimens respectively.

Red blood corpuscles were especially searched for in 1 specimen.

The colloidal gold test was carried out on 94 specimens. 84 gave no reaction, whilst 6 gave curves in the paretic zone and 4 in the tabetic zone.

Miscellaneous. The number of spermatozoa per millilitre was counted in 2 specimens of semen.

The testing of 1 fractional test meal (Rehfuss) was carried out.

13 specimens of fluid from the pleural and abdominal cavities were stained and examined for the predominating type of cell and in addition 4 specimens of fluid from the pleural and abdominal cavities were examined for malignant cells.

E. Pathological Histology

The total number for the year of tissue sections examined and on which reports were issued was 239. Of these 76 showed evidence of the existence of malignant changes.

F. Fungoid Diseases

Scrapings from the skins of 7 persons were examined for any fungoid disease. Positive findings were obtained in the scrapings from two persons.

H. Medico-Legal Investigations

Specimens composed of smears, swabs, garments and knives, numbering in all 28, were examined.

A more detailed list is given below:—

Smears examined for spermatozoa	...	15
Garments examined for spermatozoa	...	2
Tumour examined as to whether it was foetal		
or not		1
Articles examined for blood	...	5
Garments examined for human blood and for		
agglutinogens in stains	...	5
		28

Further statistics are available in Appendix XXVI.

THE MENTAL HOSPITAL

Dr. R. M. Lloyd-Still, Medical Superintendent.

27. *Population.* The total number of patients in residence on 31st December, 1956, was 715 (286 males and 429 females) as against 720 (292 males and 428 females) on 31st December, 1955.

The average number in residence during the year was 716. The highest number of patients recorded during the year was 738 on the 21st September and the lowest 699 on the 26th February.

415 patients (181 males and 234 females) of whom 67 - 16.1 per cent Certified, 59 - 14.2 per cent Voluntary, 274 - 66.0 per cent Temporary and 13 - 3.1 per cent sent from the Courts for observation, were admitted during the year as against 434 in 1955, (185 males and 249 females), 77 - 17.7 per cent Certified, 83 - 19.1 per cent Voluntary, 269 - 60.0 per cent Temporary and 13 - 2.9 per cent on observation,

368 (161 males and 206 females) were discharged during the year. The number comprised 120 permanently discharged, 127 discharged after a trial period of usually two to three months, 52 who afterwards returned from trial and 12 discharged from observation. The remaining 57 patients were still on trial at the end of the year.

Of the 13 patients who were sent for observation, 4 were later Certified and (1) was still under observation at the end of the year.

The number of deaths were 52 (25 males and 27 females) as against 44 (28 males and 16 females) in 1955.

The main causes of death were as follows:-

	1956	1955
(1) Myocardial Degeneration		
Arterio Sclerosis ...	20	14
(2) Pulmonary Tuberculosis ...	3	1
(3) General Paralysis of the		
Insane (G.F.I.) ...	3	4

Health. The general health of the patients remains very satisfactory. There were no cases of Typhoid during the year, and only one (1) new case of Tuberculosis was notified amongst the female patients in addition to two admissions who were notified prior to their arrival in the Hospital. On the male side there were no new cases notified.

The death rate was higher than in 1955 and 1954 but still lower than any other year since 1938. The majority of deaths occurred amongst the elderly population. The average age was 61 (56 in 1955). The number of deaths which took place during the last ten (10) years are as follows:-

1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956
99	92	82	83	70	64	60	58	35	44	52

Staff. The Medical Superintendent went on long leave from the 12th April to the 6th October. During his leave he visited a number of Mental Hospitals in the United Kingdom and Psychiatric Clinics and Mental Hospitals in Austria, Denmark, Sweden and Norway and discussions were held with various Psychiatrists on different forms of treatment and Psychotic problems.

At Claybury Mental Hospital in Essex seven (7) Male Nurses (three (3) on Scholarships, four (4) on Study Leave) and one (1) Female Nurse belonging to this Hospital were interviewed and personal problems were discussed. They were all reported on as being very satisfactory in their work and play; one is Captain of the Cricket Team. The Head Male Nurse reported very favourably on their work. At the time of my visit Male Nurse Lesloyd Williams was expected to join them very soon.

Dr. W. Terajewicz acted as Medical Superintendent during this period and Dr. F. G. Reader was employed on a part-time basis and acted as Assistant Medical Superintendent.

Male Nurse Lesloyd Williams and Female Nurse Chlorine Holder were selected for training in the United Kingdom for R.M.N. Certificates. They both left to take up their appointments on the 2nd September.

Male Nurses - Frederick Wilson and Ashton Odle and Female Nurses - Ruby Elms, Sheila Nurse and Fraulein Larrier succeeded in gaining entrance to Mental Hospitals in the United Kingdom. They were all granted three (3) years Study Leave for this purpose.

The year has seen the retirement of two Senior Officers who have given long, faithful and efficient service to the Hospital: Miss Florence Gooding and Mr. Errold Hope.

Mr. Errold Hope in particular has been of invaluable help to me since my arrival in 1949. He has co-operated enthusiastically with innovations and his personal knowledge of the patients and their habits and his sound advice were of great assistance. He exercised tact with Staff and relatives alike and I had every confidence in him.

Accommodation. For the accommodation of patients there are 35 dormitories holding 380 beds and 411 single rooms. Males 320 - Females 471. (Total accommodation 791).

Treatment. In addition to rest, sedation, and psychotherapy, modern physical methods, i.e. E.C.T. and Insulin Sub-Coma treatment have been employed on an extensive scale with good results.

Electro-Convulsive Therapy (E.C.T.) is usually given two or three times a week but in some cases daily or even several times a day. Intensive E.C.T. (a succession of shocks 15 - 20 at one second intervals) has been used on a large number of patients. During the year 126 female admissions plus 40 chronic patients were treated along with 88 male admissions and 32 chronic patients. Total number of patients treated during the year were 286 as against 327 in 1955.

A Cerebral Stimulator Apparatus is useful in the treatment of certain Psycho-neuroses and Depressive and Alcoholic States; also it is helpful in those cases having E.C.T., when it is important to avoid confusion and memory loss. This apparatus delivers a pulsed unidirectional current of low potential, infinitely variable from 0-20 milliamps at pulse peaks.

A New Ectron Machine has been purchased which combines E.C.T. with Cerebral Stimulator and on which the Glissando method can be used. This gives a graded tonic convulsion without clonus; the risk of fracture is minimised.

Insulin Sub-Coma Treatment has been given chiefly to patients who have relapsed after E.C.T. or have failed to respond, and the results have been very successful.

This treatment is usually given for two months daily except Sundays and is sometimes combined with E.C.T. Gradually increasing doses of Insulin are given until the patient is in deep sopor but short of Coma. Termination by intravenous glucose is seldom required.

Altogether 43 female and 32 male patients have been treated.

Tranquillising Drugs: Serpasil has been more or less discarded. Pacatal (Warner) has been used fairly extensively with satisfactory results. On occasions it is combined with Chlorpromazine. We endeavour to follow the dictum that Pacatal acts best on those of pyknic build and Chlorpromazine on persons of asthenic build, but still our chief reliance is on E.C.T. and Insulin Coma combined with Occupational Therapy and Psychotherapy commenced as soon as possible.

Cases of Dementia Paralytica and Cerebral Syphilis continue to be treated with 10,000,000 units of Penicillin (10 day course). Patients with positive blood kahn and negative C.S.F. receive appropriate treatment.

Cases of Neurosyphilis are decreasing yearly.

Deaths from Neurosyphilis for the last eleven (11) years are as follows:—

1945	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956
23	20	22	15	20	13	11	9	7	4	4	3

Less than ten (10) years ago this was the main cause of Death.

Male -- Kahn Test on Blood and C.S.F. — 184

Positive Bloods — 42 — 22.8%

Positive C.S.F. — 6 — 3.3%

Female — Kahn Test on Blood and C.S.F. — 203

Positive Bloods — 38 — 18.2%

Positive C.S.F. — 2 — 1%

There were no Transorbital Leucotomy operations performed during the year.

Cases of Pulmonary Tuberculosis continue to be treated with Streptomycin and Isoniazid or Para-Amino-Salicylic Acid. Progress is checked by X-Ray investigations every three months as well as by blood sedimentation rate examinations and sputum tests more frequently if needed. New cases comprised one (1) female case which was notified during the year as well as two (2) female admissions which were notified prior to admission. No male cases were notified during the year. The death rate continues to be very low — modern treatment is showing good results.

Occupational Therapy. Male patients now attend the Female Occupational Therapy Department and work under the supervision of the Female Nurse thus releasing a Male Nurse for other duties. Prizes were won at the Annual Agricultural Exhibition in December. Those patients who, in the outside world, follow a particular trade (e.g. Carpentry, etc.) are encouraged to continue in this trade during convalescence.

Recreation. A happy atmosphere is preserved among the patients by a full programme of planned recreational activities. The Male Patients continue to play cricket and matches are arranged between them and the Nurses. Ball games for the Female Patients are also arranged. An extensive net-work of Rediffusion speakers brings music and light programmes to all parts of the Wards throughout the day. On Bank Holidays a Steel Band is engaged for patients dances. Card Games and Dominoes take priority in the patients' choice of Indoor Games, while those who are able play Table Tennis. Every Sunday and Bank Holiday Patients are taken Sea-bathing, if the weather permits, and they eagerly look forward to these outings. During the year, Cinema Shows, Police Band Concerts, Salvation Army Concerts and Concerts by other visiting Artists have been staged regularly and have contributed greatly to the contented attitude of the patients. Many patients have ground parole and seldom abuse their privilege.

Farm

Weather. The rainfall for the year was 50.83 inches as compared with 55.32 inches for the previous year.

Cattle. At the beginning of the year there were 29 cows, 11 heifers and 6 calves on the Farm. During the year 23 calves were born, 2 cows and 18 calves were slaughtered and 2 heifers were sold.

The supply of milk to the Institution for the year was good and during the months of January, February and March we were able to supply the Maternity Hospital with 1,006 pints of milk and the General Hospital with 150 pints during the month of January.

The incidence of Mastitis in the dairy herd on the Farm has been considerably reduced during the year under review. During the last quarter of the year the cattle had to be sprayed regularly with Cammotox against ticks.

The number of Bull Services (inseminations) paid for during the year ending 31st December was 151.

Ten (10) Prizes were awarded in the Cattle Section at the Annual Exhibition.

Pigs. At the end of December there were 56 pigs on the Farm. During the year 44 pigs were slaughtered and 23 young sows sold.

A boer was kept on service throughout the year, and the number of Boar Services paid for was 106.

Sheep. During the month of March, 4 ewes and 1 ram were purchased for the Farm, the numbers have increased and at the end of December there were 14 sheep on the Farm. The number of Services paid for by the end of December was 37.

Vegetables. There was an increase in the supply of vegetables to the Hospital during the year, this was due to an increase in the acreage of land under vegetables. The purchasing of vegetables from outside is now negligible.

The new area (1¼ acres) which is under garden crops has been completely enclosed with barbed wire.

Three (3) prizes were awarded in the Vegetable Section at the Annual Exhibition.

During the year 350 banana clumps, 40 dwarf coconut plants and 24 paw-paw plants were planted.

A new Fan Mill was installed in the Vegetable Garden in the month of March in place of the one destroyed by Hurricane Janet in September 1955. Pipe lines were extended throughout the new area during the month of February.

Owing to the lack of funds the overhead irrigation spray-lines were not purchased; consequently, the new area was not fully irrigated.

During the month of February three plots were enclosed with barbed wire as grazing paddocks for the cattle; these paddocks proved successful and later in the year two more paddocks were erected. An overhead tank was erected during the month of April in order to supply drinking water for the cattle.

One of the paddocks was planted to elephant grass and then interplanted with pangola grass throughout the area. The pangola grass is well established and the cows seem to enjoy it, and there is a tendency for the milk to go up when the cows are in this paddock. The grass has stood up well to grazing.

The irrigation equipment which was installed on the Farm in April of last year for boosting up the fodder production failed in March and was repaired. It again failed in April and it was taken out and repaired at the Foundry. It was again re-installed on the 30th May, 1956.

Through the kind services of the Director of Agriculture who loaned us an irrigation unit we were able to continue to irrigate the Fodder plots.

About 450 Casuarina Plants have been planted around the paddocks during the latter part of the year.

Buildings. The Female Isolation Ward was completed and occupied during the year. This is a very good two storey building with a verandah in the rear facing the sea. Tubercular Patients are housed upstairs and patients with contagious disease are placed on the ground floor.

No other buildings have been erected during the year but windows have been made in the back wall of certain wards and in the Occupational Therapy Department to give the patients a lookout. Some bars have been removed and replaced by B.R.C. Metal. All remaining bars will be removed eventually when money is available. A wall has been lowered in the only closed Female Ward by several feet to give a more open appearance. Other than this the usual programme for maintenance and upkeep of existing buildings was carried out.

Visitors. During the year many persons visited the Hospital and were as usual complimentary in their remarks. The official visitors were His Excellency the Governor, Dr. M. A. Pyer, Director of Medical Services, and Dr. F. N. Grannum, Acting Director of Medical Services.

Many persons visited the Hospital in an unofficial capacity. Among these were Mrs. Strauss of the L.C.C., Dr. David Tinward M.D., and Dr. Irma Drooz M.D., both Psychiatrists of New York City, Mr. Frank McFall, U.S. Ambassador to Finland, John Des Brisany of Toronto Telegram, Margaret de Mille Kaplan, C. D. Garvin, Commissioner of Prisons, England and Wales, Joan Fontaine, Christopher Teitze M.D., Demographer, E. B. Strauss, M.D., Consultant Psychiatrist to St. Barts Hospital.

It is extremely gratifying to read the remarks which are recorded in the Visitor's Book.

Remarks. This has been a satisfactory year for the Mental Hospital, and the community at large appear to show confidence in the improved standard of Psychiatric service that is now offered in Barbados.

Over four hundred (400) patients were admitted during the year of which only 16.1 per cent were certified. This is the lowest percentage recorded so far. Previous to the New Mental Health Act of 1952, one hundred per cent (100%) were under Certification or on Remand from the Courts.

The population at the end of the year was five (5) less than the previous year.

Results of discharges were evaluated as follows:—

- Recovered i.e.* — Patients who are socially re-adjusted to their normal prepsychotic state.
- Much Improved* — Those patients who have not attained complete re-adjustment at all levels but are approaching this state and will ultimately be able to adapt themselves completely to their environment.
- Improved* — Patients who have come to terms with their symptoms or those in whom some but not all symptoms have disappeared.
- Not Improved* — Patients who can be looked after at home and whose relatives press for their discharge.

The principle of allowing even greater latitude in the matter of closed doors in the Hospital is being vigorously pursued, and at present there are only two (2) in the whole Hospital in which the entrances have to be kept locked during the day. In accordance with this principle bars are being removed from windows and replaced by B.R.C. Metal, except in the Infirmary Wards where windows are just left vacant after the removal of bars.

There were no escapes or suicides during the year under review.

I wish to record my thanks to the Director of Education who is always willing to co-operate in arranging intelligence tests for prospective candidates for the Nursing Staff.

Selection has been much assisted by the results of these tests and by selecting candidates from the top groupings. A very good type of young nurse has been employed who shows considerable promise and on the whole amply justify the new method.

As a further result of my recommendations made after my visit to the Islands of the Windward and Leeward Group in 1955, to suggest improvements and alterations to existing mental facilities, the Visiting Psychiatrist to the Mental Hospital, Antigua, came on a short visit to study administration here and the Steward in charge of the Mental Hospital, Grenada, was detailed for three (3) months training and a Female Nurse from St. Vincent is at present completing her six (6) months training.

In conclusion I wish to thank my colleagues Dr. W. Terajewicz, who carried out my duties in a satisfactory manner as Medical Superintendent, during my absence on long leave, and Dr. J. Murray-Aynsley for their able assistance and also Miss E. McKerchar, the Matron, and Miss M. Connell, the Assistant Matron and Sister Tutor, for their help and co-operation.

Mr. V. E. Carter now designated as Steward continues to carry on his arduous duties in a most satisfactory manner.

Finally, I would like to tender my most grateful thanks to all the other members of the Hospital Staff for their very great help and co-operation during the year.

Further information is available in Appendices XXVII and XXVIII.

THE LEPER HOSPITAL

28. The general health of the patients remains satisfactory. Sulphetrone and Dadps treatment continues to be used with marked benefit to the patients.

Forty-three (43) discharged patients presents themselves at regular intervals for examination and remain in good physical condition.

The following statistics are of interest:-

No. of inmates in residence on 1st January, 1956	23
New admissions	—
Re-admissions on compassionate grounds ...	—
Discharges	3
Deaths	3
In residence on 31st December, 1956 ...	17
In residence on 31st December, 1946 ...	44
In residence on 31st December, 1936 ...	74

THE MATERNITY HOSPITAL

29. The training of midwives continued during the year. Seven trained nurse-pupils completed training and all were successful in the final examination. Eleven untrained pupils sat the final examination and two passed; the nine failures re-sat later and three passed, six failed in Anatomy and Physiology. One has since resigned and the other five will re-sit later.

The ante-natal and post-natal clinics continue to perform efficient work. Attendances are increasing and the patients show great interest in health education lectures. The breast feeding clinic is well attended and the mothers are taking an active interest in the care of their babies.

The following statistics record the work of the Hospital:-

Admissions ...	...	594
Deliveries ...	...	505
Maternal deaths ...	...	-
Neo-natal deaths ...	...	7
Stillbirths ...	...	13
Ante-natal attendances ...	...	4,458
Post-natal attendances ...	...	276
Dental benefits ...	...	174
Kahn tests ...	...	697
Positive kahns (% positive 14%)	...	95

The number of mothers benefiting by institutional midwifery care in hospital and almshouse is as follows:-

Maternity Hospital ...	505
General Hospital ...	523

Almshouses:

St. Michael ...	630
St. George ...	66
St. Lucy ...	66
Others ...	173

No. attended by the Christ Church Parish Midwife 25

Approximately twenty-six per cent (26%) of births takes place in institutions.

HEALTH CENTRE, SPEIGHTSTOWN

Dr. C. G. Terrell, O.B.E., E.D., Medical Officer of Health.

STAFF

Medical Officer of Health

30. Dr. M. A. Byer was appointed Director of Medical Services on 10th June, 1956.

Acting Medical Officers of Health

Dr. A. E. Ward assumed part-time duties as Acting Medical Officer of Health on the 12th June, 1956, and continued in this post until 22nd August, 1956, when he was appointed Parochial Medical Officer of St. Michael.

Dr. T. J. Gilmore assumed part-time duties as Acting Medical Officer of Health on the 2nd July, 1956, and continued in this post for the remainder of the year.

Visitors to the Health Centre during the period included:-

Lady Arundell	-	Wife of His Excellency the Governor
Dr. E. L. Stuart	-	University College of the West Indies
Miss Margaret Hagood	-	Population Expert, United Nations Technical Assistance Administration
Miss Patricia Strauss	-	Laboratory M.P. for W.H.O.
A party of nurses	-	Barbados General Hospital, under the Supervision of Miss Ilene Stuart, Sister Tutor

Mr. John P. M. Pinker-

ton ... - Colonial Office, London

Dr. Eglenton Garcia - W.H.O., P.A.S.B., Ecuador

A class of seventeen students ... - Housecraft Centre, under the supervision of Miss F. Chandler

Dr. Mario Chaves... - Dental Officer, P.A.S.B., W.H.O.

	Jan.	Feb.	Mar.	Apr.	May	Jun.	July	Aug.	Sep.	Oct.	Nov.	Dec.	TOTAL
New Patients ...	288	254	299	293	198	226	242	166	214	219	218	108	2,725
V.D.R.L. Tests ...	376	287	216	187	245	331	283	210	282	272	254	132	3,075
Positive V.D.R.L.	92	87	86	50	70	112	77	67	89	85	62	26	903
New Syphilis Cases	34	36	25	18	34	32	30	18	26	23	19	10	305
New Gonorrhoea Cases	48	23	20	22	28	15	24	6	25	28	30	28	297
New Chancroid Cases	-	2	1	-	-	1	2	1	1	-	-	-	8
Ante-Natal Cases ...	42	56	32	29	43	39	34	48	48	53	52	26	502
Infants Registered	62	34	36	54	43	48	58	31	30	45	30	36	507
Penicillin Injections	721	697	587	395	483	515	699	389	518	586	524	242	6,356
Bismuth Injections	32	17	18	43	14	19	7	1	3	-	3	-	157
A.T.S. Injections ...	11	28	17	16	4	2	22	19	22	23	18	20	202
Insulin Injections	147	113	166	161	220	243	211	167	179	180	144	130	2,065
*D.T.P.P. Immunisations ...	425	363	268	85	94	127	167	132	123	156	131	110	2,181
Home Visits ...	27	19	39	43	68	34	71	66	80	51	60	48	606

*D.T.P.P. - Diphtheria, Tetanus, Pertussis Prophylactic.

ANALYSIS OF SYPHILIS CASES

	Jan.	Feb.	Mar.	Apr.	May	Jun.	July	Aug.	Sep.	Oct.	Nov.	Dec.	TOTAL
<i>Early Syphilis</i>													
Primary ...	-	1	1	-	-	-	-	-	-	-	-	-	2
Secondary ...	2	1	3	-	-	2	1	2	1	-	-	-	12
Early Latent ...	5	5	4	6	6	10	9	5	11	12	9	4	86
<i>Late Syphilis</i> ...	24	25	10	11	21	16	19	11	14	11	10	6	178
<i>Congenital Syphilis</i>	3	4	7	1	7	4	1	-	-	-	-	-	27

Total Syphilis Cases for year ... 305

The results of "Screening for Syphilis" are shown at Table I

Table I

	St. Lucy	St. Peter	St. James	St. Andrew	St. Thomas	St. Joseph	TOTAL
No. of Applicants ...	659	817	441	194	119	3	2,233
					Other Parishes		24
							<u>2,257</u>

Table II

Table II shows the results of screening by V.D.R.L.

	Total No. Screened	Total No. of persons with Positive V.D.R.L.	Percentage Positive
	2,205	305	13.8

Table III

Infant Clinic

(To show number of occasions on which mothers attended before delivery)

Number Of Attendances	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Mothers	78	90	71	61	55	44	34	16	10	6	7	6	1	22

Table IV

Table IV shows the period of gestation at date of 1st attendance

Months ...	2nd	3rd	4th	5th	6th	7th	8th	9th
Mothers ...	15	46	70	87	111	91	44	10

Table V

Table V shows the age groups to which the expectant mothers belong

Age Group							
10-14	15-19	20-24	25-29	30-34	35-39	40-45	45+
4	101	141	107	59	46	15	2

Table VI

Table VI shows the 'number of this pregnancy' for each of the mothers

Number of this Pregnancy	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	11th	12th	13th	14th	15th	16th
Mothers	104	72	60	65	47	38	20	20	17	14	8	5	1	1	1	1

Table VII

The results of the V.D.R.L. done for mothers attending this Clinic are shown in table VII. 17.9% Positive as compared with 14.1% for last year.

Negative	Positive	Test not done
372	81	

Table VIII

Table VIII shows the number of visits done.

Before Delivery	After Delivery
62	273

Table IX

Table IX shows the outcome of the pregnancies.

Live Births

Male	Female	Twins	Abortions	Miscarriages	Still Births
217	212	9	2	7	8

Table X

Infant Clinic

Table X shows age at which infants first came to the Clinic.

Less than one month	one month	two months	three months	six months	eight months	nine months	ten months	one year	over one year
82	279	160	103	36	13	13	13	8	55

Table XI

Table XI shows the age/weight of infants on first attendance

Weight in Lbs.			Age at 1st attendance in months						
			1	2	3	4	5	6	7
4	...	...	5	-	-	-	-	-	-
5	...	...	17	1	1	-	-	-	1
6	...	...	17	6	1	2	2	-	-
7	...	...	32	6	1	2	-	1	-
8	...	...	56	10	4	2	-	1	-
9	...	...	75	25	8	1	1	4	1
10	...	...	57	30	16	3	3	2	-
11	...	...	28	33	15	4	3	3	1

Table XI - *Concluded*

Weight in Lbs.		Age at 1st attendance in months						
		1	2	3	4	5	6	7
12	...	14	33	16	8	2	2	1
13	...	5	14	12	4	5	1	3
14	...	2	4	9	6	5	3	4
15	...	-	3	7	4	7	5	-
16	...	-	1	6	3	3	2	6
17	...	-	-	1	-	2	3	1
18	...	-	-	1	1	4	1	8
19	...	-	-	-	-	-	-	-
20	...	-	-	-	-	-	-	3

Table XII

Table XII shows the condition of infants at first attendance

Full Term		Premature	
Healthy	Puny	Healthy	Puny
735	96	9	12

Table XIII

(To show abnormalities)

	None	Umbilical Hernia	Supernumerary Digits	Other
No. of Children	676	145	3	24

Table XIV

Table XIV shows the number of infants who were breast fed at first attendance.

Breast Fed	Weaned
707	142

Table XV

Table XV shows the sleeping habits.

	Sleeps with Mother	Sleeps in separate Cot	No information
No. of Infants	738	74	43

Table XVI

Table XVI shows the record of other children in the home.

No. of other children now alive at Baby's Home	No. of Infants attending Clinic from such Homes	No. of other children who have died in Baby's Family	No. of Infants attending Clinics from such Homes
0	125	0	—
1	135	1	23
2	167	2	49
3	178	3	56
4	177	4	433
5	139	5	56
6	167	6	63
7	154	7	366
8	138	8	46
9	98	9	62
10	98	10	66
11	45	11	36

Table XVII

Table XVII shows the number of Mothers "At home" and those who "Work away from home"

No information	Mother at Home	Mother work away from home
98	507	106

Table XVIII

Immunisations

Completed	Started but not completed	Not yet started
411	315	101

Table XIX

(To show number of attendances)

Less than 4	4 - 8	8 - 12
421	313	121

A Child Health Clinic, an Ante-natal Clinic, and a V.D. Clinic have been started in St. Andrew.

These Clinics form part of the service of the Health Centre. Three Health Nurses from this Centre visit St. Andrew on Friday mornings. The patients from the V.D. Clinic with reactive results are referred to the Health Centre for treatment, since facilities at St. Andrew are inconvenient.

The total number of infants registered from August to December is 99.

The total number of Ante-natal cases registered from September to December is 30.

STUDENT NURSES PROGRAMME

From the 2nd July, 1956, to the 11th August, 1956, twelve Student Nurses from the Barbados General Hospital were sent to the Health Centre for a period of two weeks each.

During that period we strived to get them familiar with the aims of Public Health Nursing. These students were given experience in the Clinical work of the Centre, with especial emphasis on Health Education in the infant, pre-natal and V.D. Clinics. Through Home Visits they learned something of the environmental conditions of their patients.

We hope that these nurses, when taking care of hospitalized patients will now have a better understanding of their needs.

TRANSPORT

The Station car is serviced every month by the Department of Highways and Transport.

Mileage covered on Sanitation work with the Government Sanitary Inspector, Northern Area - 5,209 miles i.e. an average of 434 miles per month.

Mileage covered on transport to and from the General Hospital with samples of blood for V.D.R.L., messages for Government Offices and other business with the Treasury - Weekly Pay Sheets etc., Drugs and supplies from Drug Stores in Bridgetown - 2,624 miles an average of 219 miles per month.

Mileage covered on Health Visiting with the Public Health Nurses - 2,129 miles, an average of 177 miles per month. Total number of visits to homes - 606.

The addition of a Clinic Nurse to the Staff has made it possible for one of the Public Health Nurses to visit each day of the week.

Total mileage covered by car - 11,345 miles.

GOVERNMENT SANITARY INSPECTOR'S REPORT

Three hundred and twenty-two visits were carried out with the Chief Sanitary Inspectors and Staffs of the six northern parishes.

These visits include:-

1. Investigations of notified cases of infectious diseases.
2. Aedes aegypti Eradication Campaign.
3. B.C.G. Campaign.
4. Environmental Sanitation.

AEDES AEGYPTI ERADICATION CAMPAIGN

(SECOND CYCLE)

Parish	Houses			Date of Commence-ment	Total No. of Deposits Treated with D.D.T.
	Total No.	Inspected	Positive		
St. Lucy ...	2,323	2,295	44	3.1.56	7,426
St. James ...	3,474	2,855	68	3.1.56	10,063
St. Joseph ...	2,054	1,538	2	3.1.56	13,609
St. Andrew ...	1,977	1,405	3	1.2.56	15,719
St. Peter ...	2,819	2,136	35	13.2.56	9,097
St. Thomas...	2,573	2,415	16	21.2.56	12,856
	15,220	12,644	168		68,770

(THIRD CYCLE)

Parish	Houses			Date of Commence-ment	Total No. of Deposits Treated with D.D.T.
	Total No.	Inspected	Positive		
St. Joseph ...	2,426	1,680	4	3.4.56	15,053
St. Lucy ...	2,363	2,118	15	16.4.56	6,737
St. James ...	3,530	3,311	41	16.4.56	10,402
St. Andrew ...	1,837	1,296	2	22.5.56	12,202
St. Peter ...	2,832	2,316	16	4.6.56	9,099
St. Thomas...	2,603	1,494	15	14.6.56	17,901
	15,591	13,215	93		81,394

(FOURTH CYCLE)

Parish	Houses			Date of Commence-ment	Total No. of Deposits Treated with D.D.T.
	Total No.	Inspected	Positive		
St. Joseph ...	2,431	1,833	2	3.7.56	11,598
St. Lucy ...	2,366	2,301	9	16.7.56	7,105
St. James ...	3,637	3,450	30	25.7.56	28,257
St. Andrew ...	2,116	1,712	1	10.8.56	11,610
St. Peter ...	2,867	2,474	10	3.9.56	10,204
St. Thomas...	2,656	2,527	8	24.9.56	23,158
	16,073	14,297	60		91,932

(FIFTH CYCLE)

Parish	Houses			Date of Commence-ment	Total No. of Deposits Treated with D.D.T.
	Total No.	Inspected	Positive		
St. Joseph ...	2,257	2,150	2	2.20.56	14,515
St. Lucy ...	2,367	2,194	6	29.10.56	7,257
St. Andrew ...	2,032	1,903	1	12.11.56	13,425
St. James ...	3,718	3,561	8	12.11.56	34,504
St. Peter ...	2,898	2,532	1	20.12.56	11,071
St. Thomas (Commenced in January, 1957)	—	—	—	—	—
	13,272	12,340	18		80,772

HEALTH CENTRE, ST. MICHAEL

Dr. E. Cochrane, Medical Officer of Health.

31. The increase in the work of this Centre is clearly shown by comparing the figures for total attendances in 1955, when the Health Centre began to function, with those of 1956.

	1955	1956
Total Attendances	16,953	71,952

In January 1956, the Child Health Clinic was started. In February a third out-patient T.B. Clinic was added to the two existing Clinics. In August, an ante-natal Clinic was opened.

Throughout the year, chest x-rays were taken of all persons referred by the B.C.G. Teams and were reported on by the Medical Officer of Health.

Tuberculosis Clinic

	Males	Females
First Attendances	60	44
Of these seventy-two (72) were notified as cases of active tuberculosis.		
Contacts ...	209	246
Repeat attendances	692	476

Three afternoon sessions were held each week, two by the Tuberculosis Officer, Dr. D. O. S. Payne, and one by the Medical Officer of Health.

V.D. Clinic

One session weekly for males was held by Dr. A. E. Ward until 1st October, 1956, when he was appointed Parochial Medical Officer, St. Michael. The male session was then taken over by the Medical Officer of Health. The weekly session for females was under the direction of Dr. C. L. Hutson.

No. of first attendances:

	Males	Females
Syphilis ...	851	869
Gonorrhoea ...	1,477	705
Other V.D. ...	36	6

In May 1956, the V.D.R.L. test replaced the Kahn test hitherto used.

A total number of seven thousand, four hundred and seventy-eight (7,478) specimens of blood were taken and forwarded to the Laboratory, Barbados General Hospital, for testing.

Total treatment:

	Antibiotics	N.A.B. and Bismuth
	20,546	7,183

The use of arsenicals was gradually abandoned and, by the end of the year, had been replaced by antibiotics.

The number of patients failing to take the full course of treatment or to return for further examination was investigated by analysis of the records of eight hundred and twenty-six (826) male patients, who had positive V.D.R.L. tests.

Age-groups of 826 male patients:

0 - 10 years ...	16
11 - 20 " ...	46
21 - 30 " ...	328
31 - 40 " ...	250
41 - 50 " ...	110
51 - 60 " ...	58
61 and over ...	18

No. completing course of treatment ... 724

No. not completing course of treatment 102

It is satisfactory to record that 87.3 per cent completed the course of treatment.

On the other hand the percentage of patients returning for a follow-up test was disappointing.

Of three hundred and eighty-seven (387) patients due to return two hundred and seventy-two (272) did so, of whom two hundred and fifty (250) were positive and twenty-two (22) negative, while one hundred and fifteen (115) (29.7 per cent) were insufficiently interested in the state of their health to take the trouble to go to the Centre for a repeat test.

The X-ray survey carried out as part of the B.C.G. Campaign afforded an opportunity of investigating the occurrence of other conditions of the heart and lungs besides tuberculosis.

It was noticed that a significant proportion of persons in the older age-groups showed evidence of damage to the heart. Towards the end of the year, routine X-rays were taken of persons having a positive V.D.R.L. and it was evident that cardiovascular syphilis was by no means uncommon in the 30-60 years age-group.

Child Health Clinic

From small beginnings, this grew so rapidly as to threaten to outstrip the Health Centre Staff facilities.

New Cases	Repeat	Triple Antigen Injections	Vaccinations
203	716	365	51

Ante-natal Clinic

This was commenced in August 1956, and by the end of the year, fourteen (14) cases had been enrolled.

Domiciliary Visiting. A total of two hundred and thirteen (213) home visits were paid by the Public Health Nurses. This total falls far short of the figure we hoped to reach, but the greatly increased volume of work at the Centre meant that a Public Health Nurse could only be away for short periods of time.

(Vaccinations.) A qualified Public Vaccinator was in daily attendance:

Primary Vaccinations	Re-Vaccinations	T.A.B.	Yellow Fever
1,924	5,896	681	66

X-ray Department

Routine

Total X-rays	...	...	5,625
Large films	...	1,272	
Miniature films		4,353	

Of the five thousand, six hundred and twenty-five (5,625) persons x-rayed, three thousand, two hundred and twelve (3,212) were emigrants to the United States of America, the United Kingdom and other countries.

In addition to this not inconsiderable routine work, all persons referred by the B.C.G. Teams had to be dealt with.

B.C.G. Campaign

Total X-rays	...	...	6,824
Reported negative for T.B.	...	6,221	
Deferred for 3 months	...	403	
Returned after 3 months	...	327	
Referred for large films	...	197	
Returned for large films	...	192	
Total positive for T.B.	...	10	
Total X-rays in 1956	...	12,449	

The volume of work handled during 1956 strained the resources of the Health Centre to the utmost. Only the high standard of efficiency and devotion to duty of the Public Health Nurses and Public Vaccinator, the Radiographer and her staff, and the clerical staff prevented the Centre curtailing some of its activities.

HEALTH CENTRE, SIX CROSS ROADS

32. This Health Centre was officially opened on 15th March, 1957.

In the absence of a resident Medical Officer of Health, Dr. E. Cochrane, Medical Officer of Health, Enmore, visited this Centre regularly every week, in order to co-ordinate the work of the several sections. All cases requiring special investigation were referred to him during these visits. His assistance during this early stage in the development of the Health Services in the area has been greatly appreciated.

The administration of the Centre, certification of vouchers, etc., are all under his supervision.

The activities of the Centre include V.D., Child and Maternal Health, School Medical and Diabetic Clinics. In addition Home Visiting, Classes for Midwives and Health Education for school children were started. A weekly session is held by the Family Planning Association which has been granted the use of a room in the Centre.

THE PRISON HOSPITAL

33. The incidence of disease at this Institution has been low. The general health of the prisoners was satisfactory. Repairs and re-decoration of the Doctor's office and hospital section, which were undertaken during the year, have improved greatly the appearance of this section.

THE GOVERNMENT INDUSTRIAL SCHOOLS

34. The Visiting Physician and Dental Surgeon attended regularly during the year. The health of the boys and girls was good.

THE NIGHTINGALE HOME FOR CHILDREN

35. The high standard of institutional care for which this Institution is recognised has been well maintained. The Parochial Medical Officers are responsible for the medical care of the children. The health of the children was good.

PAROCHIAL ALMSHOUSES

36. The medical care of the poor in the parishes was efficiently carried out by the Churchwarden, Guardians and Parochial Medical Officers.

The maintenance of the buildings and equipment was satisfactory.

VOLUNTARY AGENCIES

37. The co-ordinating influence of the Barbados Council of Women in the field of Child Care, which is exercised through Clinics in several parts of the Island, has been very effective. Government Grants for these Clinics are now administered through the Council, instead of through each Clinic separately. It has therefore been possible for several of these Clinics to pool their resources in respect to Nursing Service and transport.

Clinics were held regularly at The Baby Welfare League, The St. Lawrence Child Health Centre, the St. Philip Baby Welfare Centre, the Christ Church Baby Welfare League and the Children's Goodwill League.

NURSING SERVICES

38. The General Nursing Council functioned throughout the year.

The Barbados Nurses' Association operates an employment bureau and administers a Government Grant of \$4,108 under the supervision of the Director of Medical Services.

Part VIII. GENERAL AND COMMUNICABLE DISEASES

39. Figures in this part of the Report and the statistical tables in the Appendices refer to the calendar year 1956.

General Diseases

	1955		1956	
	Deaths	% of total	Deaths	% of total
Diseases of Circulatory System ...	420	14.54	441	18.15
Diseases of Early Infancy ...	567	19.63	366	15.06
Diseases of Nervous System and Sense Organs ...	311	11.01	339	13.95
Diseases of Respiratory System ...	390	13.50	255	10.49
Senility and Ill-defined conditions ...	259	8.97	235	9.67
Cancer and Other Tumours ...	218	7.55	209	8.59
Infective and Parasitic Diseases ...	229	7.90	172	7.08
Diseases of Digestive System ...	228	7.89	141	5.80

More detailed information is given in the Appendices to the Report and special attention is drawn to the eight major causes of death as classified under the Intermediate International List of Causes of Death. These statistics are shown for 1952-56.

Communicable Diseases

40. *Enteric Fever.* 88 cases were reported as compared with 78 in 1955.

Cf these 7 died or 7.9%.

Parish	No. of Cases	
	1955	1956
St. Andrew ...	2	2
Christ Church ...	5	5
St. George ...	14	7
St. James ...	13	3
St. John ...	2	2
St. Joseph ...	—	2
St. Lucy ...	1	1
St. Michael ...	28	64
St. Peter ...	2	2
St. Philip ...	4	—
St. Thomas ...	7	—
Total ...	78	88

41. *Tuberculosis*

	WHOLE ISLAND			ST. MICHAEL		
	Cases notified	Deaths		Cases notified	% of Whole	Deaths
1955	123	52		79	64.2	34
1956	88	43		63	71.6	23

The Chest Clinic at the St. Michael's Infirmary which has 40 beds, now under the supervision of the Medical Officer of Health, St. Michael, offers greatly improved opportunities for treatment with modern chemotherapy. Instead of 12 discharges against

advice in 1955, all in very unsatisfactory condition, there were 19 discharges during 1956 all on the advice of the Doctor in charge and in good condition.

Forty (40) beds are also available at the General Hospital. These are divided into two wards in a new wing of the Hospital, and the same opportunities for treatment with modern chemotherapy are available to these patients who are under the care of the Tuberculosis Officer.

The Medical Officer of Health, St. Michael, and the Tuberculosis Officer are jointly responsible for the very large Tuberculosis Clinics at the Enmore Health Centre. These Clinics give free x-ray examinations to all patients and contacts and treatment for ambulatory cases.

The general outlook in respect to Tuberculosis has been very greatly improved during the year under review.

42. *Diphtheria.* 7 cases with 5 deaths were notified as compared with 12 cases with 1 death in 1955. The continued appearance of this disease points to the need for early immunisation of ALL children attending Infant Clinics. The Triple Vaccine against Diphtheria, Whooping Cough and Tetanus is available at all Clinics, and every effort is being made to encourage mothers to protect their children.

43. *Venereal Diseases.* Of the 47 deaths caused by syphilis, or 1.9% of total deaths, 18 occurred within the first year of life and 4 occurred from the first to the fourth year. Improved venereal diseases services based on the overall Health Centre Service will reduce the incidence of this disease. Health Education Services will encourage more cases to come for treatment. Modern drugs of proven value make treatment easy for the patient and ensure cure in a very high percentage.

44. *Leprosy.* No case was reported. There was 1 death. This disease is no longer considered a problem in the community. Statistics under that part of this Report dealing with the Leper Hospital are of interest.

45. *Tetanus.* 21 deaths as compared with 22 for 1955. Of this number 15 were infants under one year of age. These infant deaths in the rural areas point clearly to the need for maternity beds in district hospitals which will be able to hold the confidence of the people in the rural areas.

46. *Cerebro-spinal Meningitis.* 6 cases and 4 deaths were reported.

47. *Malaria.* The Colony remained free from Malaria and anopheline mosquitoes were not found. Disinsectisation of schooners and aircraft continues routinely.

48. *Whooping Cough.* 23 deaths occurred. Of this number 19 were infants under 1 year of age.

49. Details of the incidence of communicable diseases by parishes are available in Appendix V. The parish of St. Michael may be considered as Urban and the remainder Rural.

Part IX. QUARANTINE

50. No quarantine diseases were reported during the year.

51. During the year an intensive campaign was carried out against the *Aedes aegypti* mosquito, especially in the Port area and at Seawell Airport.

52. Rat destruction in and within the City limits of Bridgetown continued. In this work the Department co-operates with the Chamber of Commerce and the Agricultural Society.

53. *Smallpox vaccinations.* 11,119 persons, including 1,129 infants, were protected by vaccination during the year. This does not include the numerous vaccinations done by medical practitioners from whom no returns are submitted. The response to infant vaccination is now very satisfactory. Over 90% of the infants attending the Clinic at the Health Centres are vaccinated.

54. Plans for the Deep Water Harbour — of which Pelican Island will form a part — required the removal of the Quarantine Station. A new building was therefore erected at Needham's Point for the New Quarantine Station.

Part X. GENERAL SANITATION

55. The eleven Parochial Boards of Commissioners of Health were responsible for the administration of General Sanitation and Hygiene in their respective parishes. The several Boards of Commissioners continued to co-operate in the carrying out of the *Aedes aegypti* Campaign. Parochial expenditure is shown in Appendix I.

56. The General Board of Health continued to exercise supervision over the sanitation and hygiene of the island but much of its time was given to the division and sale of land. The Inspectors of the General Board of Health were occupied mainly in the supervision of the *Aedes aegypti* Campaign, and the work is summarised in Appendices XXVIII and XXIX.

57. *Water supplies.* Close touch was kept with the Waterworks Department during the year and the water supply was always pure, wholesome and adequate.

58. *Housing.* During the year the Housing programme was continued. New houses are being erected in several areas. A target of 400 houses a year is being aimed at.

Part XI. FOOD SUPPLIES AND NUTRITION

59. The nutrition of the population was maintained at a satisfactory level and staple foods were in good supply throughout the year. Fish was in good supply.

60. *School meals.* The milk and biscuit school meal to elementary school children worked satisfactorily during the year.

Part XII. SCHOOL HEALTH

61. There is no organised school medical service but free dental and visual treatment is given by two part time dentists and the Visiting Ophthalmic Surgeon of the General Hospital.

62. During the year, 6,983 children received dental care and 612 children were treated for visual defects and 273 provided with spectacles free.

Part XIII. HEALTH EDUCATION

63. Instruction in Hygiene and Sanitation is given by school teachers to their pupils in the Elementary Schools.

64. The annual course of training for Sanitary Inspectors was given by the Medical Officers of Health and the British West Indies Board of Examiners of the Royal Society for the Promotion of Health conducted examinations for Public Health Inspectors and Health Visitors in British Guiana in 1956.

65. Four Public Health Inspectors were selected for training at the West Indies School of Public Health, Jamaica, for which funds from the West Indies Training Scheme were provided.

66. One nurse from the General Hospital was selected to undergo additional training in the United Kingdom leading to U.K. qualifications and post-graduate experience.

Part XIV. MEDICAL REGISTRATION ACT; DRUGGISTS ACT; THERAPEUTIC SUBSTANCES ACT AND DANGEROUS DRUGS ACT DUTIES

67. The Board of Medical Assessors under the Chairmanship of the Director of Medical Services continued to perform their duties during the year.

68. The Dangerous Drugs Act, 1936-3 and the Therapeutic Substances Act, 1949, operated under the Director of Medical Services.

Part XV. VISITS

69. During the year visits were paid for departmental discussions by the following:-

Dr. R. Lewthwaite, O.B.E., Director of Colonial Medical Research
 Professor A. C. Fraser of Colonial Medical Research Committee
 Sir Charles Dodd, Chairman of the Colonial Products Council
 Mr. W. F. Dawson, Member of the Research Department of the Colonial Office and Secretary of the Council
 Dr. Mario Chaves, Dental Health Consultant of PASB/WHO
 Dr. Ian Grant, Chairman, British Medical Association
 Dr. V. Keating, Lecturer in Anaesthesia, University College of the West Indies
 Mr. H. Annamunthodo, F.R.C.S., Lecturer in Surgery, University College of the West Indies
 Dr. P. F. de Caires, Chief, Division of Public Health, World Health Organisation
 Miss Ione Ripley, Nursing Consultant, World Health Organisation
 Mr. R. Llewelyn Davies, Director, Division of Architectural Studies, Nuffield Foundation
 Mr. R. Miles, F.R.C.S., of the University College of the West Indies
 Dr. W. R. Cole, Radiologist, University College of the West Indies
 Dr. H. McD. Forde, Lecturer in Medicine, University College Hospital of the West Indies.

Part XVI. CONFERENCES

70. The Acting Director attended the conference of Directors of Medical Services and Senior Medical Officers in Jamaica from 7th to 17th April, 1956.

Part XVII. FINANCE

71. The following financial statement of expenditure and revenue is for the year 1956-57:-

Director of Medical Services	...	...	154,568.20
General Hospital	...	...	1,148,078.42
Mental Hospital	...	...	494,096.82
Lazaretto	...	...	50,629.26
Board of Health	...	...	13,973.45
Government Bacteriologist and Pathologist			24,002.54
Health Centres	...	...	121,672.46
Maternity Hospital	...	...	33,798.69

Grants

Barbados Nurses' Association	...	...	4,108.13
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Revenue

General Hospital	...	...	67,884.06
Mental Hospital	...	...	19,576.09

M. A. BYER,
Director of Medical Services.

APPENDIX I

PAROCHIAL EXPENDITURE ON SANITATION FOR 1956-57

Parish	Amount
St. Michael ...	309,440.21
Christ Church ...	46,720.69
St. George ...	14,033.06
St. Phillip ...	15,988.38
St. John ...	10,258.37
St. James ...	19,411.64
St. Thomas ...	9,371.80
St. Peter ...	23,287.21
St. Lucy ...	15,138.09
St. Joseph ...	11,257.97
St. Andrew ...	12,040.67
TOTAL ...	486,948.09

APPENDIX II

STATISTICS OF POOR RELIEF FOR ALL PARISHES FROM 1957-58 TO 1956-57 INCLUSIVE

YEAR	Number receiving any kind of poor relief	Number receiving Medical Relief	Number visited in their homes	Number receiving Medical Relief in Hospitals
1957-58	18,700	18,700	1,124	1,124
1958-59	21,212	1,442	1,200	1,124
1959-60	26,242	1,650	1,350	1,350
1960-61	21,023	1,822	1,212	1,212
1961-62	21,308	1,918	1,310	1,310
1962-63	27,075	1,952	1,420	1,420
1963-64	17,110	1,900	1,460	1,460
1964-65	22,272	2,004	1,532	1,532
1965-66	28,120	1,630	1,775	1,775
1966-67	35,220	1,535	1,777	1,777
1967-68	40,151	240	1,711	1,711
1968-69	10,220	1,900	1,400	1,400
1969-70	17,000	1,900	1,400	1,400
1970-71	18,711	1,900	1,400	1,400
TOTAL	26,127	18,700	1,124	1,124

APPENDIX III

COST OF SANITATION FOR 1956-57

1956-57	1,124
1957-58	1,124
1958-59	1,124
1959-60	1,124
1960-61	1,124
1961-62	1,124
1962-63	1,124
1963-64	1,124
1964-65	1,124
1965-66	1,124
1966-67	1,124
1967-68	1,124
1968-69	1,124
1969-70	1,124
1970-71	1,124
TOTAL	1,124

APPENDIX II

COST OF PAROCHIAL POOR LAW ADMINISTRATION, 1956-57

BARBADOS.

PARISH	Number receiving any kind of Poor Relief	Number receiving Medical Relief	Number receiving Cash Relief	Number receiving Relief in Kind	Number in Almshouse (Destitute)	Number receiving Medical Relief in Almshouse	Number buried at Parish expense	Total cost of Relief
St. Michael ..	18,411	9,038	4,123	5,994	434	1,663	202	709,348.15
Christ Church ..	1,980	1,606	469	1	101	101	13	70,805.20
St. George ..	497	349	121	19	103	132	6	37,545.17
St. Philip ...	2,330	1,930	574	14	93	250	9	82,069.36
St. John ..	2,215	2,004	225	42	27	160	6	40,457.71
St. James ..	779	360	469	16	31	237	23	38,213.97
St. Thomas ..	632	625	159	-	47	49	7	33,094.44
St. Peter ..	768	519	278	2	23	87	3	37,783.15
St. Lucy ..	1,027	783	315	-	26	307	8	38,516.84
St. Joseph ..	545	429	225	17	38	60	5	24,458.35
St. Andrew ..	773	773	206	3	13	71	5	22,928.30
TOTAL ..	29,957	18,416	7,164	6,108	935	3,117	287	1,135,220.64

APPENDIX III
STATISTICS OF POOR RELIEF FOR ALL PARISHES FROM 1937-38 TO 1956-57 INCLUSIVE

YEAR	Number receiving any kind of Poor Relief	Number receiving Medical Relief	Number visited in their homes	Number receiving Medical Relief in Almshouse	Number receiving Cash Relief	Number in Almshouse for non-medical reasons	Number buried at Parish Expense	Total Cost of Relief
1937-38	22,760	18,981	1,577	3,211	6,080	787	475	207,754.49
1938-39	23,902	19,376	836	1,815	6,290	744	453	209,646.98
1939-40	23,385	18,390	1,728	3,624	6,517	710	390	232,649.25
1940-41	26,171	21,037	1,769	3,977	7,092	911	400	251,297.56
1941-42	24,881	19,049	1,259	3,381	6,773	966	500	274,866.71
1942-43	21,319	15,438	1,823	3,335	5,536	843	445	289,339.67
1943-44	20,240	15,781	1,482	3,162	4,980	839	434	316,102.16
1944-45	17,971	13,478	1,305	3,066	4,828	768	379	331,363.68
1945-46	15,913	11,503	1,181	2,968	4,581	777	303	350,591.93
1946-47	20,160	11,226	1,175	2,854	5,182	737	309	438,637.12
1947-48	19,351	11,534	1,177	2,847	5,826	791	316	525,893.89
1948-49	19,626	12,182	1,469	3,005	5,815	748	370	540,688.93
1949-50	19,478	11,695	800	2,890	5,810	865	352	598,320.00
1950-51	19,964	12,010	824	3,063	5,632	819	360	617,116.05
1951-52	21,337	12,963	852	3,043	5,630	908	392	665,693.01
1952-53	21,608	13,399	776	2,792	5,628	971	425	761,172.28
1953-54	22,861	14,815	735	3,033	5,702	1,014	381	787,338.97
1954-55	26,127	15,188	658	2,934	5,792	1,093	369	848,560.42
1955-56	28,999	17,556	627	3,595	6,906	1,074	503	1,010,239.33
1956-57	29,957	18,416	711	3,117	7,164	935	287	1,135,220.64

APPENDIX IV

Annual Report for the Health Officer (Port) for the year 1956

Dr. A. V. Greaves, Health Officer (Port), had agreed to continue in the post until the 9th January, 1956. On account of the death of Dr. J. P. O'Mahony, Director of Medical Services on the 6th January, 1956, he continued in post. He was assisted by Dr. F. N. Grannum who was subsequently appointed as Health Officer (Port) on the 21st June, 1956.

2. Dr. A. V. Greaves was granted 34 days vacation leave with effect from the 20th June to the 24th July, 1956, the effective date of his resignation. During this period Dr. E. W. Roberts assisted Dr. Grannum in the duties.

3. Dr. F. N. Grannum, Health Officer (Port), was appointed to act as Director of Medical Services during the absence of Dr. M. A. Byer, Director of Medical Services, who was on vacation leave from the 1st July to 31st December, 1956 and Dr. E. W. Roberts assisted Dr. Grannum during that period.

4. Dr. D. O. S. Payne, Assistant Health Officer (Port), was granted 14 days vacation leave with effect from the 24th December, 1956, to the 16th January, 1957. During this period Dr. A. W. St. John acted as Assistant Health Officer (Port).

SHIPPING

5. During the year 1956, 1,023 ships were admitted to the port of Bridgetown representing a total nett tonnage of 2,166,602 tons.

This tonnage was apportioned as follows:—

Steam and Motor vessels	— 738 vessels	— 2,152,550 tons
Sailing ships	— 285 "	— 14,052 "

6. The appended table shows the figures for the past 5 years.

Year	Number of Ships	Net Tonnage
1952	1,041	2,147,127
1953	1,043	2,108,652
1954	1,068	2,056,527
1955	1,089	2,304,436
1956	1,023	2,166,602

7. The total number of passengers landing in the colony was 5,179 and those intransit 40,717 (stopped temporarily special cruise passengers * 12,391).

AIRCRAFT

8. 1,856 aircraft arrived in Barbados during the year. They carried a total of 31,343 passengers of which 20,579 landed in the colony and 10,764 were intransit.

This compares with 1,609 aircraft in 1955 which carried a total of 25,089 passengers. Of these 17,547 landed in the colony and 7,542 were intransit.

(F. N. GRANNUM)

Health Officer (Port)

* These passengers are included among those intransit.

Return of Shipping for Year 1955

MERCHANT SHIPPING

Classes of Vessels	Nationality	Number of Vessels	Nett Tonnage
Steam and Motor Vessels	British	402	933,772
	French	23	214,883
	Norwegian	72	208,688
	American	32	204,980
	Italian	31	167,848
	Dutch	52	164,600
	Swedish	13	37,864
	Panamanian	9	34,545
	German	26	31,619
	Liberian	10	23,238
	Argentinian	1	4,639
	Greek	1	4,308
	Danish	3	4,105
	Costa Rican	4	864
	Cuban	1	750
	Brazilian	3	540
	Honduran	1	45
		684	2,037,360
Tankers	British	11	17,087
	German	9	5,240
	Liberian	7	8,691
	Cuban	4	2,612
		31	33,630
Sailing Vessels	British	247	12,792
	French	5	293
		252	13,085
TOTAL MERCHANT SHIPPING		967	2,084,075

Return of Shipping Entering Port

Classes of Vessels	Nationality	Number of Vessels	Nett Tonnage
Yachts ...	British	16	398
	American	9	296
	Liberian	1	106
	Venezuelan	1	62
	Swedish	2	57
	French	2	35
	Austrian	1	8
	German	1	5
		33	967
Warships ...	British	10	43,924
	American	12	31,611
		22	75,535
Training Ships ...	American	1	6,025
		1	6,025
TOTAL OTHER SHIPPING ...		56	82,527
TOTAL MERCHANT SHIPPING ...		967	2,084,075
TOTAL OTHER SHIPPING ...		56	82,527
TOTAL SHIPPING FOR YEAR 1956 ...		1,023	2,166,602

AIRCRAFT 1956

Nationality			Aircraft
British	---	---	1,445
Canadian	---	---	147
Venezuelan	---	---	70
Dutch	---	---	5
American	---	---	69
French	---	---	120
TOTAL ---			1,856

Note: 20 (2) cases of aircraft accidents are reported in which the aircraft involved was not of Great Britain and were not reported.

Nationality	Aircraft	APPROXIMATELY 10% OF THE TOTAL									
		British	Canadian	Venezuelan	Dutch	American	French	Other	Unidentified	Other	Unidentified
British	1,445	1,445	147	70	5	69	120	---	---	---	---
Canadian	147	---	147	---	---	---	---	---	---	---	---
Venezuelan	70	---	---	70	---	---	---	---	---	---	---
Dutch	5	---	---	---	5	---	---	---	---	---	---
American	69	---	---	---	---	69	---	---	---	---	---
French	120	---	---	---	---	---	120	---	---	---	---
Other	---	---	---	---	---	---	---	---	---	---	---
Unidentified	---	---	---	---	---	---	---	---	---	---	---
TOTAL	1,856	1,856	---	---	---	---	---	---	---	---	---

NOTE: 20 (2) cases of aircraft accidents are reported in which the aircraft involved was not of Great Britain and were not reported.

TABLE 1

APPENDIX V

CASES OF NOTIFIABLE DISEASES FOR THE YEAR 1956

DISTRIBUTION OF CASES BY PARISHES

DISEASES	St. Michael	Christ Church	St. George	St. Philip	St. John	St. James	St. Thomas	St. Peter	St. Lucy	St. Joseph	St. Andrew	Total
Cerebro-spinal Meningitis ...	4	-	-	1	-	-	-	-	1	-	-	6
Cholera ...	-	-	-	-	-	-	-	-	-	-	-	-
Diphtheria ...	5	1	1	-	-	-	-	-	-	-	-	7
Enteric Fever ...	64	5	7	-	2	3	-	2	1	2	2	88
Leprosy ...	-	-	-	-	-	-	-	-	-	-	-	-
Plague ...	-	-	-	-	-	-	-	-	-	-	-	-
Poliomyelitis ...	-	-	-	-	-	-	-	-	-	-	-	-
Smallpox ...	-	-	-	-	-	-	-	-	-	-	-	-
Tuberculosis ...	63	7	4	-	4	3	2	2	1	2	-	88
Typhus Fever ...	-	-	-	-	-	-	-	-	-	-	-	-
Yellow Fever ...	-	-	-	-	-	-	-	-	-	-	-	-

Note: Six (6) cases of Meningitis were notified. No confirmation of Meningococcal infection in any of these cases has been obtained.

APPENDIX VI

CAUSES OF DEATHS ARRANGED IN PARISHES BY GROUPS FOR THE YEAR 1956 ACCORDING TO THE INTERNATIONAL STATISTICAL
CLASSIFICATION SIXTH REVISION, 1948, INTERMEDIATE LIST OF 150 CAUSES.

BARBADOS.

CAUSE GROUPS																									
	St. Michael		Christ Church		St. George		St. Philip		St. John		St. James		St. Thomas		St. Peter		St. Lucy		St. Joseph		St. Andrew		All Parishes		Total
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
I	45	26	13	9	4	6	8	7	12	5	5	4	4	4	3	2	2	1	5	3	4	...	101	71	172
II	31	65	9	25	5	4	4	10	6	7	4	9	5	4	2	6	3	3	1	1	2	...	71	138	209
III	7	14	5	2	2	5	...	3	6	1	1	4	3	...	...	...	...	...	...	...	...	...	31	33	64
IV	5	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	10	6	16
V	4	9	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	7	12	19
VI	61	81	15	28	14	12	14	12	4	10	10	9	4	6	10	9	5	9	7	6	6	...	151	188	339
VII	74	106	13	33	10	16	6	14	15	15	17	20	6	14	7	15	7	14	8	15	10	6	173	268	441
VIII	56	50	13	22	15	8	9	7	3	3	7	2	8	8	7	11	5	11	2	1	5	2	130	125	255
IX	25	27	6	5	5	11	7	3	10	7	3	3	2	6	4	...	2	2	3	4	4	2	71	70	141
X	11	12	4	2	...	3	1	...	2	2	2	1	...	...	...	2	1	1	2	1	1	1	24	25	49
XI	...	6	...	8	...	...	...	1	...	4	...	1	...	...	...	3	...	...	...	1	...	...	...	24	24
XII	...	4	...	1	...	...	...	...	1	1	1	...	...	2	2	1	...	...	...	...	...	...	5	9	14
XIII	...	2	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	5	6
XIV	4	3	1	1	2	1	1	1	3	...	1	1	...	1	...	...	...	...	...	...	...	...	13	7	20
XV	76	59	15	18	20	18	15	14	16	7	7	12	13	10	15	15	10	5	6	5	4	6	197	169	366
XVI	35	97	11	23	3	6	6	14	1	2	3	3	5	6	1	3	...	1	1	3	5	8	69	166	235
XVII	4	1	1	...	1	...	1	...	3	...	3	...	...	...	2	...	3	...	1	1	...	...	17	1	18
XVIII	14	1	2	2	3	1	1	...	1	...	3	4	1	3	...	...	1	1	1	1	...	2	27	15	42
TOTAL, ALL GROUPS																									
	452	565	108	181	85	94	74	86	84	66	67	73	52	64	55	68	39	49	41	46	41	39	1,098	1,332	2,430

APPENDIX VII - Continued
CAUSES OF DEATHS ARRANGED IN AGE GROUPS FOR THE YEAR 1946 ACCORDING TO THE INTERNATIONAL STATISTICAL CLASSIFICATION,
SIXTH REVISION, 1948, INTERMEDIATE LIST OF 150 CAUSES

[illegible]

CAUSES OF DEATHS ARRANGED IN PARISHES FOR THE YEAR 1956 ACCORDING TO THE INTERNATIONAL STATISTICAL CLASSIFICATION
SIXTH REVISION, 1948, INTERMEDIATE LIST OF 150 CAUSES

Intermediate List Number	CAUSE GROUPS	Detailed List Numbers	St. Michael		Christ Church		St. George		St. Philip		St. John		St. James		St. Thomas		St. Peter		St. Lucy		St. Joseph		St. Andrew		All Parishes		
			M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	Total
A 1	Tuberculosis of respiratory system ...	001-008	12	11	3	2	..	3	2	2	2	1	..	..	1	..	..	1	1	1	..	..	..	..	20	22	42
A 2	Tuberculosis of meninges and central nervous system ...	010	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 3	Tuberculosis of intestines, peritoneum and mesenteric glands ...	011	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	1	..	1
A 4	Tuberculosis of bones and joints ...	012, 013	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 5	Tuberculosis, all other forms ...	014-019	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 6	Con genital syphilis ...	020	7	2	..	2	..	..	1	1	4	2	..	..	1	1	..	..	..	..	1	..	..	..	14	8	22
A 7	Early syphilis ...	021	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 8	Tabes dorsalis ...	024	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 9	General paralysis of insane ...	025	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	..	..	2
A 10	All other syphilis ...	022, 023	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 11	Gonococcal infections ...	026-029	7	5	2	1	..	..	1	1	3	..	1	1	1	..	..	..	..	..	..	..	..	15	8	23	23
A 12	Typhoid fever ...	030-035	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	1
A 13	Paratyphoid fever and other Salmonella infections ...	040	2	3	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	2	5	7	7
A 14	Cholera ...	041, 042	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 15	Brucellosis (undulant fever) ...	043	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 16	(a) Bacillary dysentery ...	044	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	2
A 17	(b) Amoebiasis ...	045	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	..	..	2
A 18	(c) Other unspecified forms of dysentery ...	046	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 19	Scarlet fever ...	047, 048	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 20	Streptococcal sore throat ...	050	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 21	Erysipelas ...	051	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 22	Septicæmia and pyæmia ...	052	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 23	Diphtheria ...	053	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	1
A 24	Whooping cough ...	055	1	..	1	..	..	..	..	..	..	..	2	2	..	..	..	..	1	..	..	..	..	..	5	..	5
A 25	Meningococcal infections ...	056	..	3	3	..	..	..	2	1	..	2	1	1	1	1	1	1	..	..	1	1	2	10	13	23	23
A 26	Plague ...	057	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	3	1	4	4
A 27	Leprosy ...	058	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 28	Tetanus ...	060	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	1
A 29	Anthrax ...	061	6	1	..	2	1	..	1	1	2	..	1	1	..	..	..	..	..	..	2	2	..	13	8	21	21
A 30	Acute poliomyelitis ...	062	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 31	Acute infectious encephalitis ...	080	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 32	...	082	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1

CAUSES OF DEATHS ARRANGED IN PARISHES FOR THE YEAR 1956 ACCORDING TO THE INTERNATIONAL STATISTICAL CLASSIFICATION
SIXTH REVISION, 1948, INTERMEDIATE LIST OF 150 CAUSES

Intermediate List Number	CAUSE GROUPS	Detailed List Numbers	St. Michael		Christ Church		St. George		St. Philip		St. John		St. James		St. Thomas		St. Peter		St. Lucy		St. Joseph		St. Andrew		All Parishes	
			M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
A 30	Late effects of acute poliomyelitis and acute infectious encephalitis ...	081, 083	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 31	Smallpox ...	084	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 32	Measles ...	085	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 33	Yellow fever ...	091	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 34	Infectious hepatitis ...	092*	1	1	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 35	Rabies ...	094	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 36	Typhus and other Rickettsial diseases ...	100-108	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 37	Malaria ...	110-117	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 38	Schistosomiasis ...	123	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 39	Hydatid disease ...	125	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 40	Filariasis ...	127	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 41	Ankylostomiasis ...	129	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 42	(a) Tapeworm (infestation) and other cestode infestations ...	126	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	(b) Ascariasis ...	130, 0	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		124, 128	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
A 43	(c) Other diseases due to helminths ...	130.1, 130.2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	(a) Lymphogranuloma venereum ...	037	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	(b) Granuloma inguinale, venereal ...	038	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	(c) Other and unspecified venereal diseases ...	039	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	(d) Food poisoning infection and intoxication ...	049	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	(e) Relapsing fever ...	071	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	(f) Leptospirosis icterohæ morrhagica (Weil's disease) ...	072	4	..	1	..	1	..	..	1	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..
	(g) Yaws ...	073	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	(h) Chickenpox ...	087	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	(i) Dengue ...	090	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	(j) Trachoma ...	095	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	(k) Sandfly fever ...	096.7	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	(l) All other diseases classified as infective and parasitic ...	110-138	1	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	2
A 44	Malignant neoplasm of buccal cavity and pharynx ...	140-148	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2
A 45	Malignant neoplasm of oesophagus ...	150	7	5	..	..	..	..	..	..	..	..	1	..	..	..	..	..	1	1	..	..	..	..	7	16

CAUSES OF DEATHS ARRANGED IN PARISHES FOR THE YEAR 1936 ACCORDING TO THE INTERNATIONAL STATISTICAL CLASSIFICATION
SIXTH REVISION, 1948, INTERMEDIATE LIST OF 150 CAUSES

Intermediate List Number	CAUSE GROUPS	Detailed List Numbers	St. Michael		Christ Church		St. George		St. Philip		St. John		St. James		St. Thomas		St. Peter		St. Lucy		St. Joseph		St. Andrew		All Parishes	
			M		F		M		F		M		F		M		F		M		F		M		F	
			Total		Total		Total		Total		Total		Total		Total		Total		Total		Total		Total		Total	
A 46	Malignant neoplasm of stomach	151	7	13	4	7	2	2	4	1	4	2	2	1	3	1	2	2	2	2	1	2	2	27	56	
A 47	Malignant neoplasm of intestine, except rectum	152, 153	1	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	4	5	
A 48	Malignant neoplasm of rectum	154	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	3	2	
A 49	Malignant neoplasm of larynx	161	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
A 50	Malignant neoplasm of trachea, and of bronchus and lung not specified as secondary	162, 163	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
A 51	Malignant neoplasm of breast	170	1	9	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
A 52	Malignant neoplasm of cervix uteri	171	1	14	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	
A 53	Malignant neoplasm of other and unspecified parts of uterus	172-174	1	4	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	
A 54	Malignant neoplasm of prostate	177	2	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
A 55	Malignant neoplasm of skin	190, 191	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
A 56	Malignant neoplasm of bone and connective tissue	196, 197	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
A 57	Malignant neoplasm of all other and unspecified sites	155-160, 164, 165, 175, 176, 178-181, 192-195, 198, 199	8	11	2	6	1	1	1	1	2	2	1	1	1	1	1	1	1	1	1	1	1	16	23	
A 58	Leukaemia and aleukaemia	204	1	1	1	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
A 59	Lymphosarcoma and other neoplasms of lymphatic and haematopoietic system	200-203, 205	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
A 60	Benign neoplasms and neoplasms of unspecified nature	210-239	1	3	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	
A 61	Nontoxic goiter	250, 251	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
A 62	Thyrototoxicosis with or without goiter	252	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
A 63	Diabetes mellitus	260	1	12	1	1	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	
A 64	(a) Beriberi	280	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	(b) Pellagra	281	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	(c) Scurvy	282	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	(d) Other deficiency states	283-286	3	1	4	1	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	
A 65	(a) Pernicious and other hyperchromic anaemias	290	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	(b) Iron deficiency anaemias (hypochromic)	291	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	

CAUSES OF DEATHS ARRANGED IN PARISHES FOR THE YEAR 1956 ACCORDING TO THE INTERNATIONAL STATISTICAL CLASSIFICATION SIXTH REVISION, 1948, INTERMEDIATE LIST OF 150 CAUSES

Intermediate List Number	CAUSE GROUPS	Detailed List Numbers	St. Michael		Christ Church		St. George		St. Philip		St. John		St. James		St. Thomas		St. Peter		St. Lucy		St. Joseph		St. Andrew		All Parishes		Total
			St. Michael		Christ Church		St. George		St. Philip		St. John		St. James		St. Thomas		St. Peter		St. Lucy		St. Joseph		St. Andrew		All Parishes		
			M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
A 65	(c) Other specified and unspecified anæmias	292, 293	4	2	..	..	1	..	1	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	8	2	10
A 66	(a) Asthma	241	..	1	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	1	1	2
	(b) All other allergic disorders, endocrine, metabolic and blood diseases	240, 242-245, 253, 254, 270-277, 287-289, 294-299	3	1	..	..	2	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	4	3	7	
A 67	Psychoses	300-309	3	7	..	..	1	..	1	..	..	1	..	..	..	..	..	..	..	..	..	..	..	4	9	13	
A 68	Psychoneuroses and disorders of personality	310-324	1	1	..	..	1	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..	..	3	2	5	
A 69	Mental deficiency	325	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	1
A 70	Vascular lesions affecting central nervous system	330-334	57	74	13	26	13	12	14	13	1	10	10	9	4	3	10	9	4	9	4	5	6	4	136	174	310
A 71	Nonmeningococcal Meningitis	340	1	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	2	1	3	
A 72	Multiple sclerosis	345	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	
A 73	Epilepsy	353	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	1	..	4	2	6	
A 74	Inflammatory diseases of eye	370-379	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
A 75	Cataract	385	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
A 76	Glaucoma	387	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
A 77	(a) Otitis externa	390	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
	(b) Otitis media and mastoiditis	391-393	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	
	(c) Other inflammatory diseases of ear	394	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
A 78	(a) All other diseases and conditions of eye	380-384, 386, 388, 389	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	(b) All other diseases of the nervous system and sense organs	350-352, 354-357, 360-369, 395-398	2	5	1	2	..	..	..	..	3	..	..	..	..	3	..	..	..	..	2	..	1	8	11	19	
A 79	Rheumatic fever	400-402	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	1	3	4	
A 80	Chronic rheumatic heart disease	410-416	3	1	..	..	1	..	2	..	..	..	..	..	..	..	1	..	..	..	..	..	..	4	4	8	
A 81	Arteriosclerotic and degenerative heart disease	420-422	21	32	5	8	4	9	..	4	2	..	10	16	1	6	2	2	..	4	5	9	4	1	54	91	145
A 82	Other diseases of heart	430-434	15	11	..	4	3	..	2	1	..	5	1	1	1	2	..	..	1	1	..	1	1	27	24	51	

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Intermediate List Number	CAUSE GROUPS	Detailed List Numbers	St. Michael		Christ Church		St. George		St. Philip		St. John		St. James		St. Thomas		St. Peter		St. Lucy		St. Joseph		St. Andrew		All Parishes		
			St. Michael		Christ Church		St. George		St. Philip		St. John		St. James		St. Thomas		St. Peter		St. Lucy		St. Joseph		St. Andrew		All Parishes		
			M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	Total
A 83	Hypertension with heart disease ...	440-443	19	28	1	11	..	2	2	1	3	..	1	1	1	..	1	1	2	..	1	1	2	..	31	47	78
A 84	Hypertension without mention of heart ...	444-447	6	5	3	4	..	..	..	1	..	..	1	..	1	1	1	..	3	..	1	1	3	..	16	13	29
A 85	Diseases of arteries ...	450-456	10	27	2	4	2	4	2	5	9	13	2	2	2	5	3	10	5	6	2	2	1	2	38	80	118
A 86	Other diseases of circulatory system ...	460-468	..	2	1	1	..	1	..	..	1	..	..	..	..	..	1	..	..	..	..	..	1	2	6	8	
A 87	Acute upper respiratory infections ...	470-475	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	2	
A 88	Influenza ...	480-483	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
A 89	Lobar pneumonia ...	490	6	8	1	1	3	1	5	3	..	1	..	..	..	1	..	1	1	1	..	1	..	18	15	33	
A 90	Bronchopneumonia ...	491	33	29	11	16	10	6	2	3	1	2	6	2	8	5	9	4	6	1	1	4	2	85	81	166	
A 91	Primary atypical, other and unspecified pneumonia ...	492, 493	3	5	1	2	1	..	2	..	1	..	..	..	..	..	..	..	2	..	..	..	..	8	9	17	
A 92	Acute bronchitis ...	500	..	2	..	..	..	..	..	..	1	..	1	..	..	..	1	2	..	1	..	..	..	3	5	8	
A 93	Bronchitis, chronic and unqualified ...	501, 502	5	4	..	..	..	..	..	1	..	..	..	..	..	3	..	..	..	..	..	..	..	5	8	13	
A 94	Hypertrophy of tonsils and adenoids ...	510	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
A 95	Empyema and abscess of lung ...	518, 521	1	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	2	..	..	..	1	1	1	2	
A 96	Pleurisy ...	519	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	1	
A 97	(a) Pneumoconiosis ...	523	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
	(b) All other respiratory diseases ...	511-517, 520, 522, 524-527	7	..	..	3	1	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	..	9	4	13	
A 98	(a) Dental Caries ...	530	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
	(b) All other diseases of teeth and supporting structures ...	531-535	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
A 99	Ulcer of stomach ...	540	2	1	1	..	..	..	..	..	..	..	..	..	..	..	1	..	..	1	..	..	..	4	3	7	
A 100	Ulcer of duodenum ...	541	2	2	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	4	2	6	
A 101	Gastritis and duodenitis ...	543	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	2	2	2	
A 102	Appendicitis ...	550-553	..	..	..	..	..	..	..	..	2	..	..	..	..	..	1	..	..	..	..	..	..	3	..	3	
	Intestinal obstruction and hernia ...	560, 561, 570	2	3	..	2	..	4	..	..	..	1	..	..	..	2	..	..	..	..	2	..	1	4	13	17	
A 103	(a) Gastro-enteritis and colitis between 4 weeks and 2 years ...	571.0	11	12	2	2	5	5	4	..	8	3	3	2	2	2	1	..	2	1	..	3	1	39	30	69	
A 104	(b) Gastro-enteritis and colitis, ages 2 years and over ...	571.1	1	2	1	..	..	..	..	1	..	..	..	1	..	..	..	..	..	..	..	..	..	2	4	6	
	(c) Chronic enteritis and ulcerative colitis ...	572	..	2	..	..	..	..	1	..	..	1	..	..	..	1	..	..	..	..	..	..	1	2	4	6	
A 105	Cirrhosis of liver ...	581	2	1	1	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	3	3	6	6	
A 106	Cholelithiasis and cholecystitis ...	584, 585	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	

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Intermediate List Number	CAUSE GROUPS	Detailed List Numbers	St. Michael		Christ Church		St. George		St. Philip		St. John		St. James		St. Thomas		St. Peter		St. Lucy		St. Joseph		St. Andrew		All Parishes		
			M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	Total		
A 106		536-539, 542, 544, 545, 573-580																									
A 107	Other diseases of digestive system	582, 583, 586, 587.	5	3		1	2	2			1					1							2		10	8	18
A 108	Acute nephritis	590	1	1			1				1	2								1					3	4	7
A 109	Chronic, other and unspecified nephritis	591-594	3	7	2	2		1			1		1	1				1		1			1	1	9	14	23
A 110	Infections of kidney	600	3	3																		1			3	4	7
A 111	Calculi of urinary system	602, 604		1	1																				1	1	2
A 112	Hyperplasia of prostate	610	1		1																				2		2
A 113	Diseases of breast	620, 621																									
A 114	(a) Hydrocele	613																									
	(b) Disorders of Menstruation	634																									
	(c) All other diseases of the genito-urinary system	601, 603, 605-609, 611, 612, 614-617, 622-633, 635-637, 640-641	3					1	1				1					1							6	2	8
A 115	Sepsis of pregnancy, childbirth and the puerperium	681, 682, 684.				2				1																3	3
A 116	Toxæmias of pregnancy and the puerperium	642, 652, 685, 686, 643, 644,		2		2					2			1												7	7
A 117	Haemorrhage of pregnancy and childbirth	670-672				3					1							2								6	6
A 118	Abortion without mention of sepsis or toxæmia	650																									
A 119	Abortion with sepsis	651				1					1															2	2
A 120	(a) Other complications of pregnancy, childbirth and the puerperium	645-649, 673-680, 683																1								5	5
	(b) Delivery without complications	687-689, 660																									

APPENDIX VIII - Continued

APPENDIX VIII - Continued

CAUSES OF DEATHS ARRANGED IN PARISHES FOR THE YEAR 1956 ACCORDING TO THE INTERNATIONAL STATISTICAL CLASSIFICATION
SIXTH REVISION, 1948, INTERMEDIATE LIST OF 150 CAUSES

Intermediate List Number	CAUSE GROUPS	Detailed List Numbers	St. Michael		Christ Church		St. George		St. Philip		St. John		St. James		St. Thomas		St. Peter		St. Lucy		St. Joseph		St. Andrew		All Parishes		Total
			M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
A 137	(c) All other ill-defined causes of morbidity	780-787 788.1-788.7 788.9 789-792 795	17	12	4	4	3	3	2	1	1	..	3	3	2	4	1	..	..	..	1	2	2	1	36	30	66
AE 138	Motor vehicle accidents	E810-835	1	1	1	..	..	..	..	..	..	..	..	..	..	..	2	..	..	..	..	..	1	..	5	1	6
AE 139	Other transport accidents	{E800-802	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	3	..	3	
AE 140	Accidental poisoning	E840-866	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
AE 141	Accidental falls	E870-895	1	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	2	..	2	
AE 142	Accident caused by machinery	E900-904	..	..	..	..	1	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	2	..	2		
AE 143	Accident caused by fire and explosion of combustible material	E912	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
AE 144	Accident caused by hot substance, corrosive liquid, steam and radiation	E916	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
AE 145	Accident caused by firearm	E917, 918	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
AE 146	Accidental drowning and submersion	E919	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
AE 147	Foreign body entering eye and adnexa	E929	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
	Foreign body entering other orifice	E920	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
	Accidents caused by bites and stings of venomous animals and insects	E923	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
	Other accidents caused by animals	E927	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
		E928	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
	All other accidental causes	E910-911, E913-915 E921-922, E924-926, E930-965 E970-979	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	1	..	..	3	..	3	
AE 148	Suicide and self-inflicted Injury		..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	1	..	1	
AE 149	Homicide and injury purposely inflicted by other persons (not in war)		..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	1	..	1	
AE 150	Injury resulting from operations of war	E980-985 E990-999	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	

CAUSES OF DEATHS ARRANGED IN PARISHES FOR THE YEAR 1956 ACCORDING TO THE INTERNATIONAL STATISTICAL CLASSIFICATION
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Intermediate List Number	CAUSE GROUPS	Detailed List Numbers	St. Michael		Christ Church		St. George		St. Philip		St. John		St. James		St. Thomas		St. Peter		St. Lucy		St. Joseph		St. Andrew		All Parishes		
			M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	Total		
"N" CODE. ALTERNATIVE CLASSIFICATION OF ACCIDENTS, POISONINGS, AND VIOLENCE (NATURE OF INJURY)																											
AN 138	Fracture of skull ...	N800-804	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	1	..	2	1	3
AN 139	Fracture of spine and trunk ...	N805-809	1	..	..	1	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	3	..	3	
AN 140	Fracture of limbs ...	N810-829	3	1	..	1	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	1	..	3	4	7
AN 141	Dislocation without fracture ...	N830-839	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
AN 142	Sprains and strains of joints and adjacent muscle ...	N840-848	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
AN 143	Head injury (excluding fracture) ...	N850-856	2	..	..	..	..	1	..	..	..	..	2	..	..	..	..	..	..	..	1	..	..	6	..	6	
AN 144	Internal injury of chest, abdomen and pelvis	N860-869	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	
AN 145	Laceration and open wounds ...	N870-908	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	1	..	..	..	..	2	2	
AN 146	Superficial injury, contusion and crushing with intact skin surface ...	N910-929	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
AN 147	Effects of foreign body entering through orifice	N930-936	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	
AN 148	Burns ...	N940-949	3	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	3	1	4	
AN 149	Effects of poisons ...	N960-979	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
AN 150	All other and unspecified effects of external causes ...	N950-959 N980-999	2	..	2	1	2	..	..	..	..	..	1	3	1	2	..	..	..	..	1	..	..	8	7	15	
TOTAL NUMBER OF DEATHS ...			452	566	108	181	85	94	74	86	84	66	67	73	52	64	55	68	39	49	41	46	41	39	1,098	1,332	2,430

APPENDIX IX

MAJOR CAUSES OF DEATH IN ACCORDANCE WITH THE INTERMEDIATE
INTERNATIONAL LIST OF CAUSES OF DEATH

1956

1946 Census population: Urban - (Bridgetown, St. Michael 76,437
Rural - 116,363

CLASSIFICATION	Total No. of Deaths	Urban Deaths	Per 100,000	
			Urban Rate	Rural Rate
VII Circulatory System	441	180	235	224
XV Early Infancy	366	135	177	199
VI Nervous System and Sense Organs	339	142	186	169
VIII Respiratory System	255	106	139	128
XVI Senility and Ill-defined conditions	235	132	173	89
II Neoplasms	209	96	126	97
I Infective and Parasitic Diseases	172	71	93	87
IX Digestive System	141	52	68	76

APPENDIX X

BARBADOS.

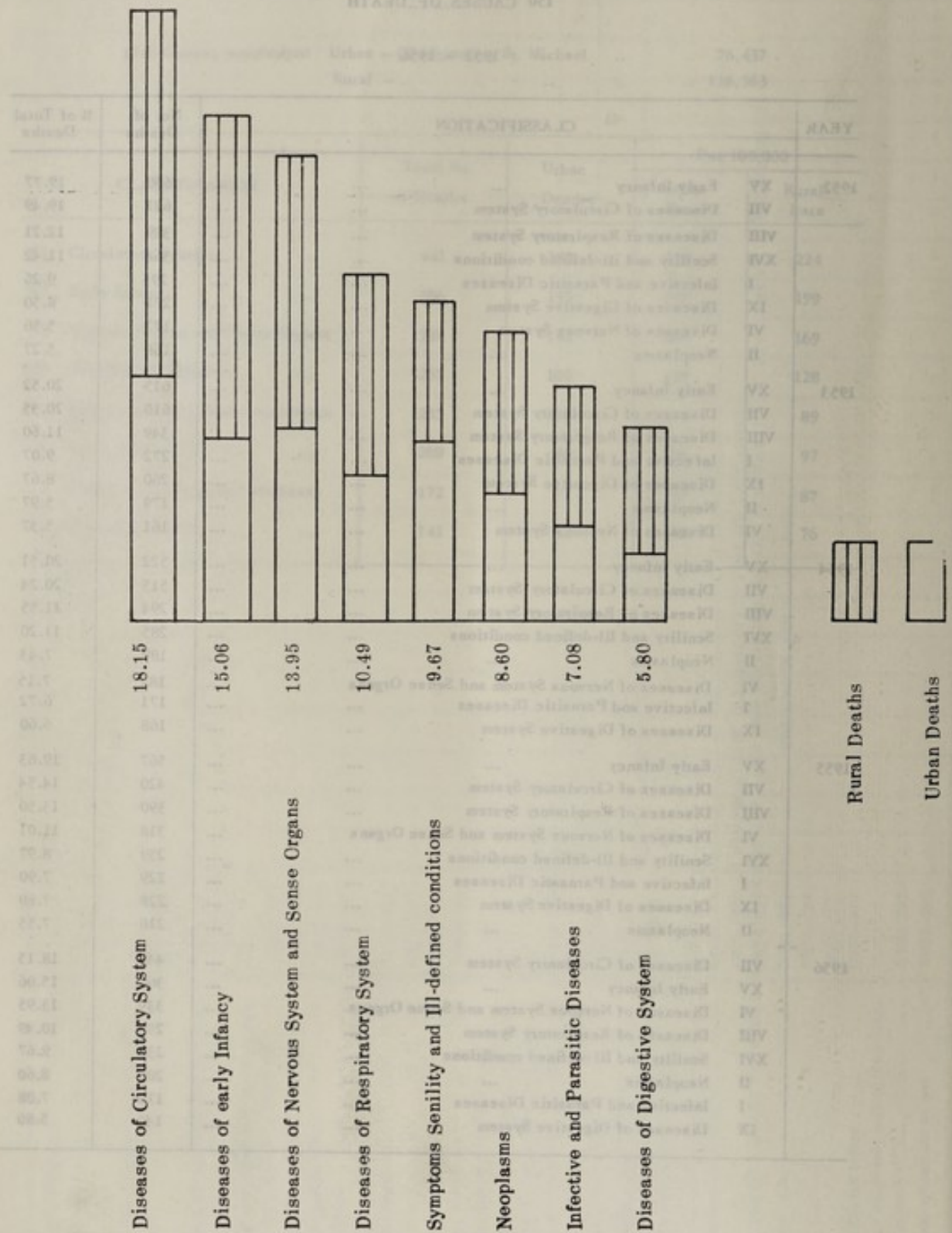
MAJOR CAUSES OF DEATH IN ACCORDANCE WITH THE INTERNATIONAL STATISTICAL
CLASSIFICATION, SIXTH REVISION, 1948, INTERMEDIATE LIST OF
150 CAUSES OF DEATH

1952 - 1956

YEAR	CLASSIFICATION	No. of Deaths	% of Total Deaths
1952	XV Early Infancy ...	630	19.77
	VII Diseases of Circulatory System ...	621	19.49
	VIII Diseases of Respiratory System ...	389	12.21
	XVI Senility and ill-defined conditions ...	364	11.42
	I Infective and Parasitic Diseases ...	295	9.26
	IX Diseases of Digestive System ...	271	8.50
	VI Diseases of Nervous System ...	177	5.56
	II Neoplasms ...	168	5.27
1953	XV Early Infancy ...	615	20.52
	VII Diseases of Circulatory System ...	610	20.35
	VIII Diseases of Respiratory System ...	349	11.60
	I Infective and Parasitic Diseases ...	272	9.07
	IX Diseases of Digestive System ...	260	8.67
	II Neoplasms ...	179	5.97
	VI Diseases of Nervous System ...	161	5.37
1954	XV Early Infancy ...	522	20.51
	VII Diseases of Circulatory System ...	515	20.24
	VIII Diseases of Respiratory System ...	294	11.55
	XVI Senility and ill-defined conditions ...	285	11.20
	II Neoplasms ...	189	7.43
	VI Diseases of Nervous System and Sense Organs ...	182	7.15
	I Infective and Parasitic Diseases ...	171	6.72
	IX Diseases of Digestive System ...	168	6.60
1955	XV Early Infancy ...	567	19.63
	VII Diseases of Circulatory System ...	420	14.54
	VIII Diseases of Respiratory System ...	390	13.50
	VI Diseases of Nervous System and Sense Organs ...	318	11.01
	XVI Senility and ill-defined conditions ...	259	8.97
	I Infective and Parasitic Diseases ...	229	7.90
	IX Diseases of Digestive System ...	228	7.89
	II Neoplasms ...	218	7.55
1956	VII Diseases of Circulatory System ...	441	18.15
	XV Early Infancy ...	366	15.06
	VI Diseases of Nervous System and Sense Organs ...	339	13.95
	VIII Diseases of Respiratory System ...	255	10.49
	XVI Senility and ill-defined conditions ...	235	9.67
	II Neoplasms ...	209	8.60
	I Infective and Parasitic Diseases ...	172	7.08
	IX Diseases of Digestive System ...	141	5.80

APPENDIX XI

PRINCIPAL CAUSES OF DEATHS AS A PERCENTAGE OF TOTAL DEATHS 1956



APPENDIX XII - Continued

CAUSES OF DEATHS OF INFANTS UNDER 1 YEAR ARRANGED IN AGE GROUPS FOR THE YEAR 1956 ACCORDING TO THE INTERNATIONAL STATISTICAL CLASSIFICATION, SIXTH REVISION, 1948, INTERMEDIATE LIST OF 150 CAUSES.

Intermediate List Number	CAUSE GROUPS	Detailed List Number	Total Under 1 Year																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																												
			Under 1 Day		1 Day		2 Days		3 Days		4 Days		5 Days		6 Days		7-13 Days		14-20 Days		21-28 Days		Total Under 28 Days		28 Days to 2 Months		2 Months		3 Months		4 Months		5 Months		6 Months		7 Months		8 Months		9 Months		10 Months		11 Months		Total																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																
			M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M

N.B. Causes from which no deaths occurred are omitted.

APPENDIX XIII

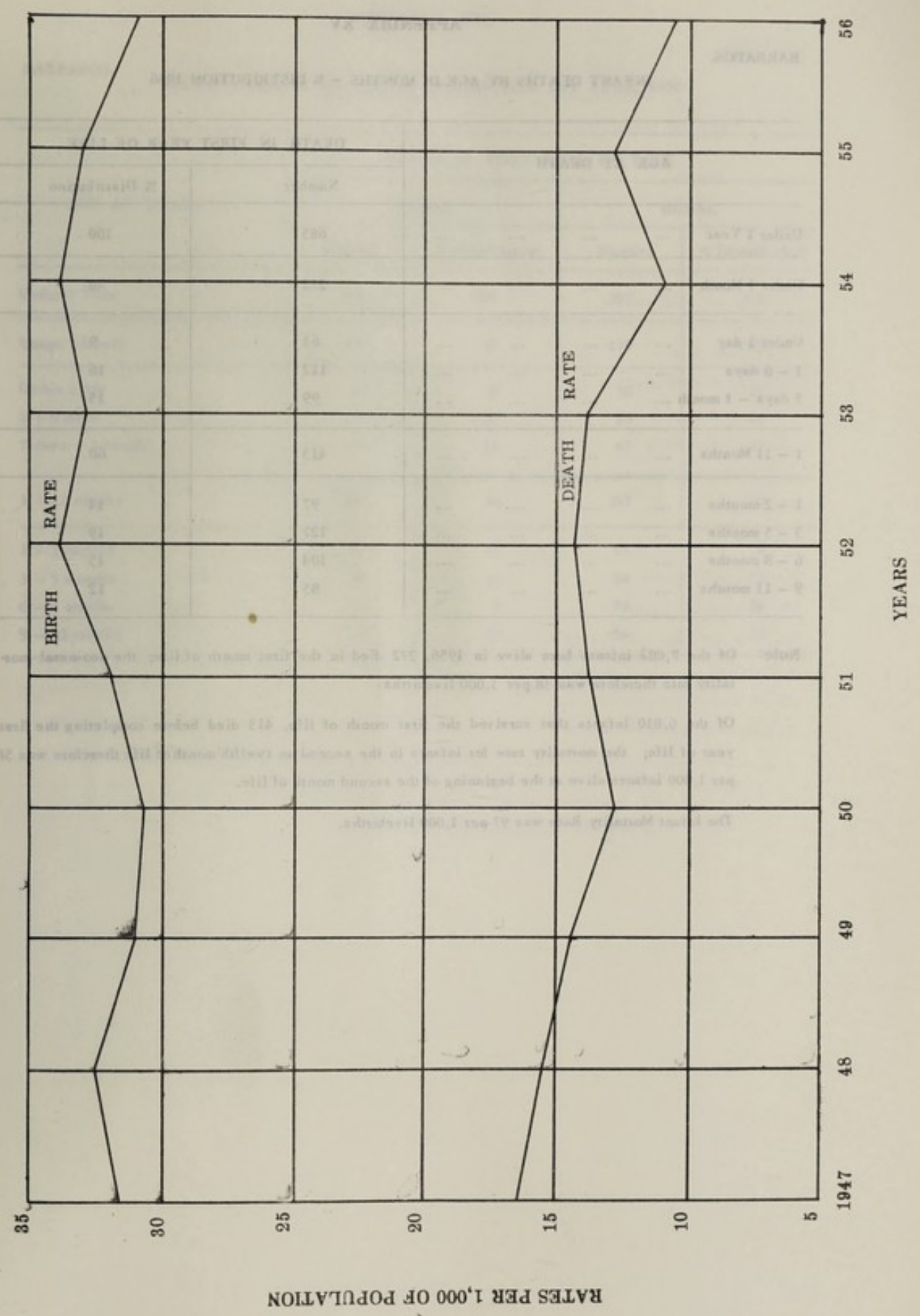
DEATHS OF INFANTS UNDER 1 YEAR ARRANGED IN PARISHES FOR THE YEAR 1956 ACCORDING TO THE INTERNATIONAL STATISTICAL CLASSIFICATION SIXTH REVISION, 1948,
INTERMEDIATE LIST OF 150 CAUSES.

BARBADOS.

	St. Michael		Christ Church		St. George		St. Philip		St. John		St. James		St. Thomas		St. Peter		St. Lucy		St. Joseph		St. Andrew		All Parishes					
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	Total	
Under 1 day	14	9	4	7	3	2	1	3	5	1	1	..	2	..	2	4	..	2	..	..	1	..	33	28	61			
1 Day - 6 Days	30	17	4	7	8	4	9	3	5	1	3	4	2	2	3	3	3	1	2	2	1	1	67	45	112			
7 Days - 1 Month	18	14	2	4	2	6	6	7	3	4	..	1	2	8	6	2	4	..	3	1	3	3	49	50	99			
Total under 1 Month	62	40	10	18	13	12	16	13	13	6	4	5	6	10	8	9	7	3	5	3	5	4	149	123	272			
1 Month - 2 Months	18	14	4	10	7	1	4	1	5	4	2	5	3	3	2	1	1	2	3	5	1	1	50	47	97			
3 Months - 5 Months	18	21	3	5	6	6	5	4	10	2	3	7	8	3	7	6	1	3	3	2	1	3	65	62	127			
6 Months - 8 Months	15	11	4	5	6	5	5	5	6	6	5	2	5	4	3	5	3	..	2	3	2	2	56	48	104			
9 Months - 11 Months	12	17	11	2	6	4	3	3	2	5	4	..	1	1	2	3	3	2	1	1	1	1	46	39	85			
Total under 1 Year	125	103	32	40	38	28	33	26	36	23	18	19	23	21	22	24	15	10	14	14	10	11	366	319	685			

APPENDIX XIV

BIRTH AND DEATH RATES, PER 1,000 OF THE POPULATION FOR PERIOD 1947-56.



APPENDIX XV

BARBADOS.

INFANT DEATHS BY AGE IN MONTHS - % DISTRIBUTION 1956

AGE AT DEATH	DEATH IN FIRST YEAR OF LIFE	
	Number	% Distribution
Under 1 Year	685	100
Under 1 Month	272	40
Under 1 day	61	9
1 - 6 days	112	16
7 days - 1 month	99	15
1 - 11 Months	413	60
1 - 2 months	97	14
3 - 5 months	127	19
6 - 8 months	104	15
9 - 11 months	85	12

Note: Of the 7,082 infants born alive in 1956, 272 died in the first month of life; the neo-natal mortality rate therefore was 38 per 1,000 livebirths.

Of the 6,810 infants that survived the first month of life, 413 died before completing the first year of life; the mortality rate for infants in the second to twelfth month of life therefore was 58 per 1,000 infants alive at the beginning of the second month of life.

The Infant Mortality Rate was 97 per 1,000 livebirths.

APPENDIX XVI

BARBADOS.

INFANTS DEATHS BY AGE IN MONTHS FOR THE YEAR, 1956

AGE AT DEATH	DEATH IN FIRST YEAR OF LIFE			
	URBAN		RURAL	
	Number	% Distribution	Number	% Distribution
Under 1 Year	288	100	397	100
Under 1 Month	102	35	170	43
Under 1 day	23	8	38	10
1 - 6 days	47	16	65	16
7 days - 1 month	32	11	67	17
1 - 11 months	126	44	287	72
1 - 2 months	32	11	65	16
3 - 5 months	39	14	88	22
6 - 8 months	26	9	78	20
9 - 11 months	29	10	56	14

APPENDIX XVII

BARBADOS.

CAUSES OF DEATH IN THE FIRST YEAR OF LIFE
 NUMBER OF DEATHS: % DISTRIBUTION FOR THE YEAR, 1956

CAUSE OF DEATH	Deaths in First Year of Life	
	Number	% Distribution
All Causes	685	100
Pre-natal and natal causes	294	42.9
Premature birth	136	19.9
Congenital malformations	12	1.8
Injury at birth	14	2.0
Congenital debility	82	11.9
Other diseases peculiar to the first year of life	17	2.5
Syphilis	18	2.6
Tetanus	15	2.2
Respiratory Diseases	143 (a)	20.8
Gastro-intestinal Diseases	66 (b)	9.6
Epidemic and other communicable diseases	23	3.4
Malnutrition	69	10.1
All other specified causes	84	12.3
Ill-defined and unknown causes	6	.9

(a) Pneumonia and other Respiratory Diseases.

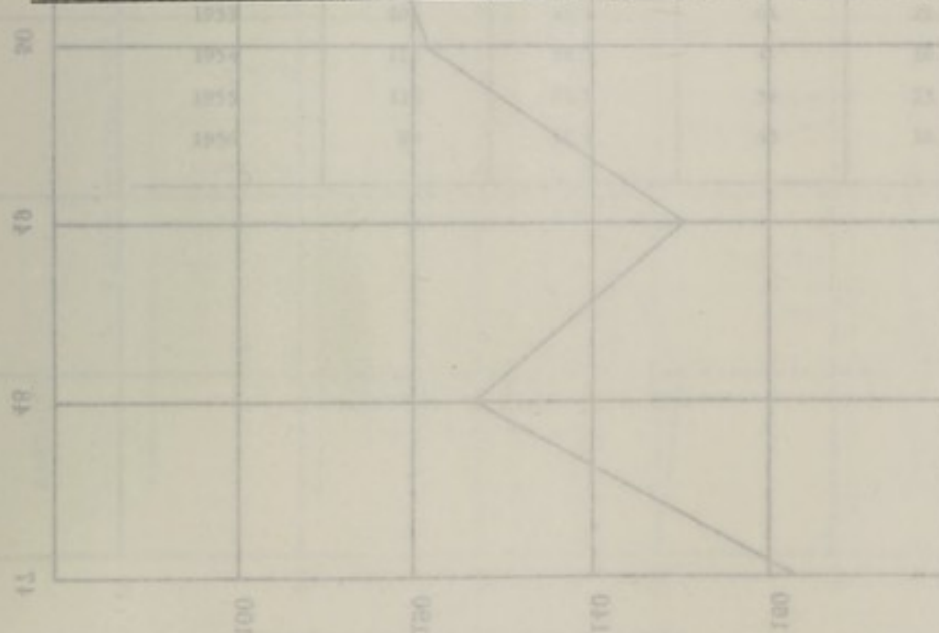
(b) Chiefly Gastro-enteritis.

APPENDIX XVIII

BARBADOS.

CAUSES OF DEATH IN THE FIRST YEAR OF LIFE
 NUMBER OF DEATHS: % DISTRIBUTION FOR THE YEAR, 1956

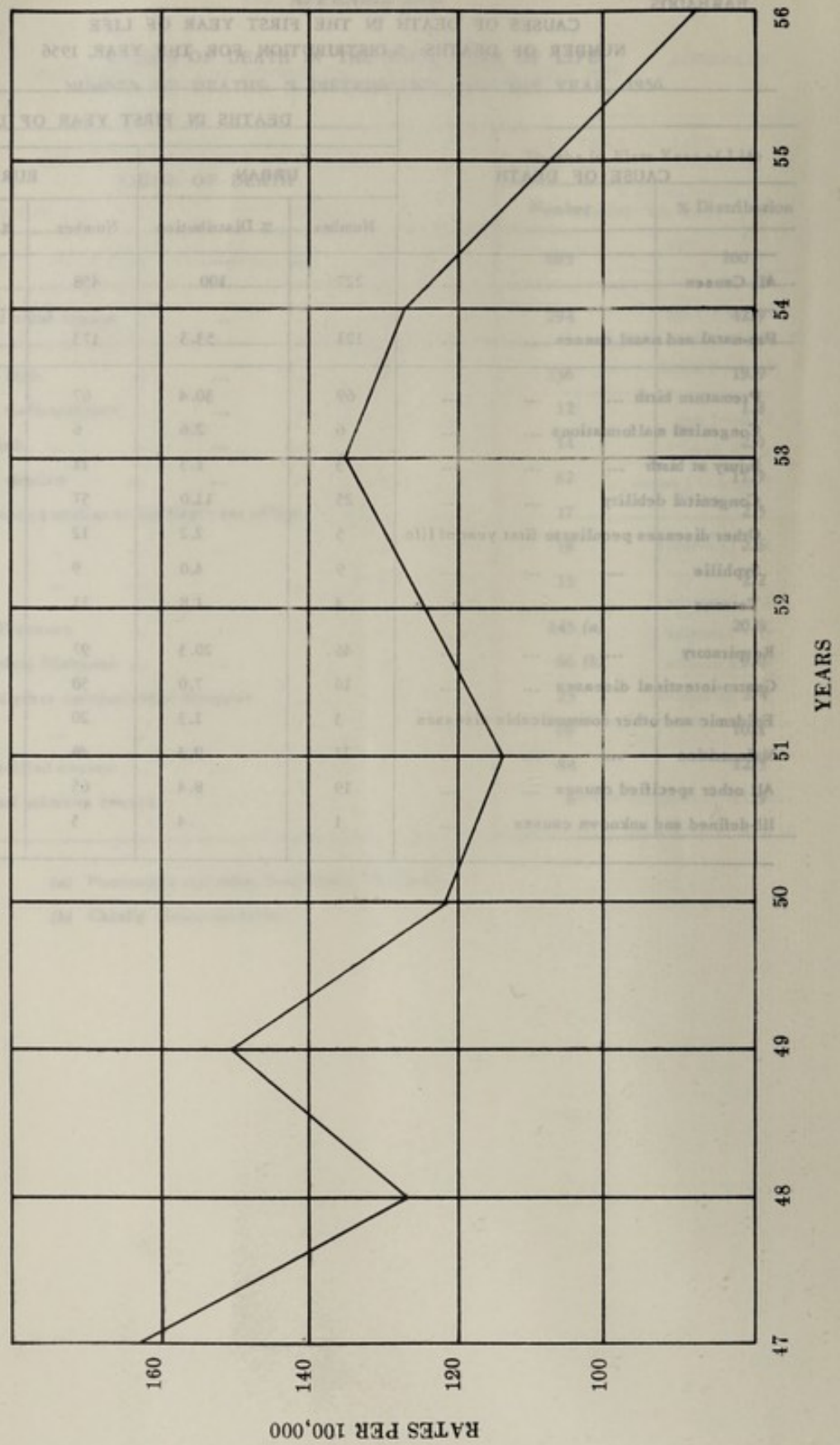
CAUSE OF DEATH	DEATHS IN FIRST YEAR OF LIFE			
	URBAN		RURAL	
	Number	% Distribution	Number	% Distribution
All Causes	227	100	458	100
Pre-natal and natal causes	121	53.3	173	37.8
Premature birth	69	30.4	67	14.6
Congenital malformations	6	2.6	6	1.3
Injury at birth	3	1.3	11	2.4
Congenital debility	25	11.0	57	12.5
Other diseases peculiar to first year of life	5	2.2	12	2.6
Syphilis	9	4.0	9	2.0
Tetanus	4	1.8	11	2.4
Respiratory	46	20.3	97	21.1
Gastro-intestinal diseases	16	7.0	50	10.9
Epidemic and other communicable diseases	3	1.3	20	4.4
Malnutrition	21	9.3	48	10.5
All other specified causes	19	8.4	65	14.2
Ill-defined and unknown causes	1	.4	5	1.1



RATES PER 100,000

APPENDIX XIX

INFANT MORTALITY RATES PER 1,000 LIVE BIRTHS, 1947-56



APPENDIX XX

BARBADOS.

Tuberculosis: *Deaths and Death Rate per 100,000 Population*

YEARS	No. of Deaths	Death Rate per 100,000 pop. (estimated)
1930-34	111 (mean)	62.6
1935-39	115 "	60.3
1940-44	122 "	60.7
1945-49	116 "	55.9
1950-54	76 "	35.9

Tuberculosis: *Cases, Deaths, Morbidity and Mortality Rates per 100,000 of the estimated Population for period 1947-56*

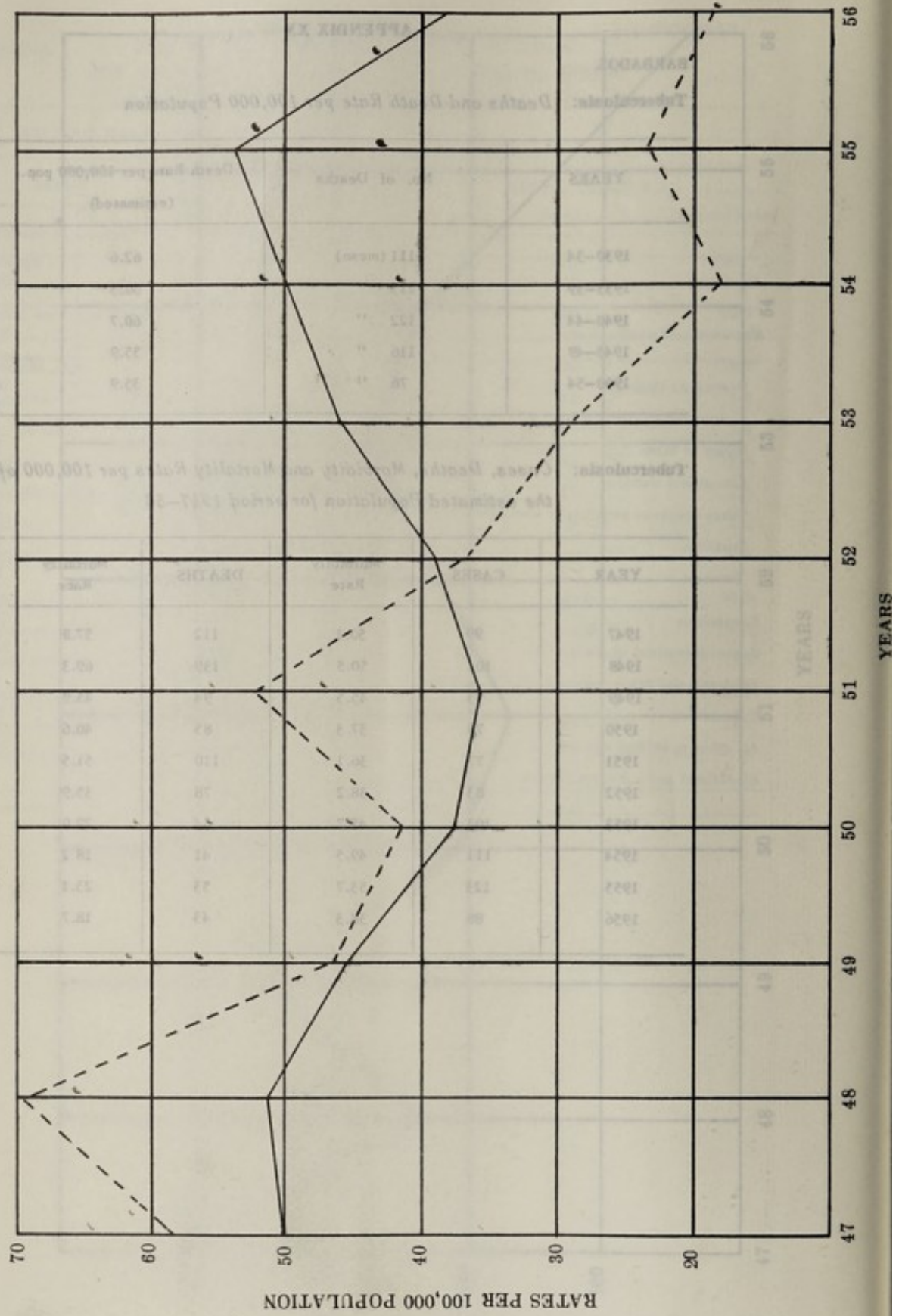
YEAR	CASES	Morbidity Rate	DEATHS	Mortality Rate
1947	99	50.1	112	57.8
1948	101	50.5	139	69.3
1949	93	45.5	94	45.9
1950	78	37.3	85	40.6
1951	77	36.1	110	51.5
1952	83	38.2	78	35.9
1953	101	45.7	64	29.0
1954	111	49.5	41	18.2
1955	123	53.7	53	23.1
1956	88	38.3	43	18.7

RATES PER 100,000 POPULATION

APPENDIX XXI

TUBERCULOSIS, MORBIDITY AND MORTALITY RATES PER 100,000 ESTIMATED POPULATION FOR PERIOD 1947-56

— MORBIDITY
 --- MORTALITY



Barbados General Hospital

A. TABLE SHOWING THE ADMISSIONS FOR THE FIVE YEARS ENDED ON 31ST MARCH, 1957.

Year.	Xr. Church	St. John	St. Philip	St. Joseph	St. George	St. Thomas	St. James	St. Peter	St. Andrew	St. Lucy	Total from out Parishes	St. Michael	Seamen	Other Non- Residents	Grand Total
1952-53 ...	1,102	311	521	258	607	494	390	332	233	210	4,558	5,317	23	60	9,858
1953-54 ...	1,277	334	566	249	853	559	389	383	266	342	5,218	5,908	17	69	11,212
1954-55 ...	1,279	357	566	269	871	584	482	421	341	311	5,481	5,703	18	59	11,261
1955-56 ...	1,244	325	558	295	844	548	417	329	375	245	5,180	4,956	8	29	10,173
1956-57 ...	1,035	306	452	262	628	444	423	296	289	267	4,402	4,424	15	25	8,866

B. STATISTICAL TABLE OF INDOOR DEPARTMENT FOR THE FIVE YEARS ENDED ON 31ST MARCH, 1957.

ADMISSIONS			DISCHARGES										DEATHS			NUMBER TREATED				MORTALITY			
.YEAR	Male	Female	Total	Daily Average	Resident	Cured	Relieved	No Result	Incurable	Total	DAYS			Male	Female	Total	Average Stay of Deaths	No. of Persons in Hospital at end of previous year	No. of Admissions	Total under Treatment	Rate of Mortality	No. of Deaths within 48 Hours	Rate of Mortality Ex- clusive of These
											Stay of Discharges	Longest Stay Hospital	DAYS										
1952-53 ...	4,471	5,387	9,858	334	5,039	2,912	1,114	75	9,140	15	685	387	317	704	8	337	9,858	10,195	6.9	56	6.3		
1953-54 ...	5,169	6,043	11,212	379	6,075	3,220	1,137	78	10,510	9	871	365	287	652	10	351	11,212	11,563	5.6	36	5.3		
1954-55 ...	5,215	6,046	11,261	396	5,345	4,213	869	89	10,516	13	1,231	357	331	688	10	401	11,261	11,662	5.9	34	5.6		
1955-56 ...	4,658	5,515	10,173	431	4,457	4,144	859	45	9,505	16	1,154	399	340	739	13	458	10,173	10,631	6.9	20	6.8		
1956-57 ...	3,965	4,901	8,866	394	5,620	1,980	582	54	8,236	18	1,031	326	261	587	12	386	8,866	9,252	6.3	18	6.1		

Outpatients - There were 98,741 attendances recorded in the Out-Patient Department during the year. Of this number 25,778 were new cases and 72,963 were After-Attendances.

APPENDIX XXIII

BARBADOS.

OPERATIONS PERFORMED AT THE BARBADOS GENERAL
HOSPITAL DURING THE YEAR, 1956

Major operations (inclusive of E.N.T.)	...	...	1,808
Minor operations (not including those performed in the Outpatient Department)	...	...	1,618
Eye Operations	...	...	160
Anaesthetics Administered	...	...	3,258

APPENDIX XXIV

BARBADOS.

BARBADOS GENERAL HOSPITAL, X-RAY DIAGNOSTIC DEPARTMENT

No. of X-ray examinations from April 1956 to March, 1957 ... 7,467

	No. of Private Patients	508
	No. of Public Patients	6,959
	No. of Patients in Hospital	1,898
	No. of Patients outside Hospital	5,569
	CLASSIFICATION	
	No. of Fluoroscopic Examinations	134
	No. of Bones and Joints	4,679
	No. of Barium Meals	99
	No. of Barium Enemas	17
	No. of Urinary Tracts (K.U.B's)	65
	No. of I.V. Pyelographies	47
	No. of Gall bladders (straight)	57
	No. of Cholecystographies	47
	No. of Abdomens (straight)	54
	No. of Pregnancies	109
	No. of Lungs	2,026
	No. of Hearts and Aortas	20
	No. of Accessory Nasal Sinuses	72
	No. of Dentals	19
	No. of Foreign Bodies	118
	No. of Tomographs	30
	No. of Retrograde Pyelographies	1
	No. of Cholangiograms	1
	No. of Urethrograms	4
	No. of Bronchograms	2
	TOTAL	7,467

X-RAY THERAPY DEPARTMENT

	No. of Patients	121
	No. of Private Patients	49
	No. of Public Patients	72
	No. of Deep X-ray Treatments	189
	No. of Superficial Treatments	245
	Total No. of Treatments	434
	No. of Follow-up Inspections of Patients	395

APPENDIX XXV

BARBADOS

BACTERIOLOGICAL DEPARTMENT

ANALYSIS OF ALL EXAMINATIONS FOR THE YEARS 1934 AND 1952-56

NATURE OF EXAMINATION		Total 1934	Total 1952	Total 1953	Total 1954	Total 1955	Total 1956
Agglutination reaction	B. typhosus (S. typhosa) ...	145	178	321	200	390	307
	B. paratyphosus A. (S. paratyphi A) ...	115	158	321	200	390	307
	B. paratyphosus B. (S. paratyphi B) ...	115	158	321	200	390	307
	B. paratyphosus C. (S. paratyphi C) ...	17	0	0	0	0	0
	Sh. dysenteriae. (Sh. Flexner) ...	1	0	0	0	0	0
	Br. abortus, Br. melitensis & heterophile reactions ...	0	14	20	15	24	4
Serological & C-S Fluid reaction for Syphilis		1,146	8,932	10,857	11,279	12,875	16,493
Skin reaction for Lymphopathia venereum and smear for leishmaniasis ...		0	3	0	2	4	0
Sera for T. pallidum ...		5	17	11	7	8	5
Blood Smears	Malaria parasites ...	26	19	15	8	11	6
	Microfilariae ...	7	10	3	7	0	1
	Anaplasma, Piroplasma and Eimeria, etc. ...	2	0	0	0	0	0
	Trypanosomes ...	1	0	0	0	0	0
	Blood counts, etc. ...	62	1,974	3,064	3,291	4,296	3,935
Glucose, Calcium, Urea, Uric Acid, etc. in the blood		0	420	475	447	295	407
Coagulation time of blood, bleeding time and sedimentation rate ...		0	553	1,274	652	966	970
Compatibility of bloods & blood groupings ...		4	903	1,479	1,916	2,507	2,314
Occult blood in faeces & stomach contents, free HCL in stomach & test meals ...		116	264	168	40	30	20
Helminthic ova & amoebae of dysentery ...		173	264	263	96	158	119
Tissue sections ...		39	287	331	309	324	239
C-S Fluid for Cellular content, excess of globulin, tubercle bacilli & other organisms, etc. ...		1	306	375	340	572	654
Tubercle bacilli in faeces & calf's liver scrapings		0	2	0	0	0	0
Miscellaneous	Sputa ...	230	447	844	882	1,325	1,728
	Pus ...	30	104	62	32	25	29
	Smears for gonococci ...	130	782	900	724	607	93
	Smears for Myco. leprae ...	27	70	58	24	18	12
	Urine for tubercle bacilli or other organisms	22	25	58	82	67	51
	Pleuritic, synovial or abdominal fluid ...	4	19	24	59	41	37
	Nose & Throat smears ...	8	9	7	8	12	1
Bacteriological Analysis of water ...		11	22	19	24	6	23
Milk examinations & aerated sweet drinks ...		2	0	0	2	4	2
Autogenous vaccines prepared ...		4	36	44	25	33	27
Cultural Examinations	Throat swabs for C. diphtheriae ...	37	124	172	889	190	148
	Synovial fluid ...	1	1	0	0	0	0
	Faeces ...	20	16	10	44	16	11
	C-S Fluid ...	1	4	1	4	10	9
	Urine ...	11	43	19	86	101	70
	Blood ...	1	34	0	21	11	22
	Sputum ...	1	0	0	0	0	30
	Yeast ...	13	0	0	0	0	0
	Pus ...	0	15	18	61	226	305
Rats, etc. ...		382	0	0	0	0	0
Fungoid Diseases ...		4	1	14	10	10	7
Urine - Chemical & microscopical examination		835	666	936	556	603	476
Friedman test for pregnancy ...		0	23	42	28	18	17
Medico-legal investigations ...		82	27	34	50	23	28
		3,821	16,930	22,560	22,620	26,586	29,214

APPENDIX XXVI

DIAGNOSIS OF PATIENTS AT MENTAL HOSPITAL FOR THE YEAR 1956

DIAGNOSIS	FEMALE		MALE	
	Total	%	Total	%
Behaviour Disorder ...	3	.70	1	.35
Epileptic Psychosis ...	10	2.33	3	1.05
Manic-Depressive ...	40	9.32	33	11.54
Mental Deficiency ...	30	6.99	49	17.11
Melancholia (Involuntal) ...	2	.47	—	—
Pre-Senile Dementia ...	10	2.33	—	—
Psychoneurosis ...	6	1.40	—	—
Parkinson's Disease ...	1	.23	—	—
Senile and Arterio Sclerotic Dementia ...	43	10.02	14	4.89
Secondary Dementia ...	11	2.56	10	3.49
Schizophrenic States ...	252	58.50	156	54.55
Acute Hallucinosis ...	—	—	—	—
TOXIC PSYCHOSIS				
(a) Acute Toxic Psychosis ...	2	.47	5	1.55
(b) Chronic Alcoholism ...	—	—	4	1.40
(c) Malnutrition ...	5	1.17	—	—
ORGANIC PSYCHOSIS				
(a) Dementia Paralytica ...	9	2.10	4	1.40
(b) Cerebral Syphilis ...	3	.70	5	1.55
(c) Encephalitis ...	—	—	—	—
(d) Tabo Paresis ...	2	.47	2	.70
No appreciable Disease ...	—	—	—	—
	420		286	

APPENDIX XXVII

POPULATION STATEMENT, MENTAL HOSPITAL, FOR YEARS 1952-56

YEAR	Population at Beginning of Year			ADMISSIONS												DEATHS			Out on Trial at end of Year						DISCHARGES												Total Population at end of Year						Difference						
				Temporary				Voluntary				Certified													On Remand				Total Admissions																				
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T																
	1952	286	416	702	55	93	148	11	16	27	47	37	84	29	17	46	142	163	305	26	34	60	17	6	23	33	34	67	27	39	66	14	32	46	1	—	—	27	16	43	102	121		223	281	420	701	- 1	
1953	281	420	701	62	134	196	21	29	50	50	36	86	12	4	16	145	203	348	21	37	58	28	29	57	18	59	77	46	34	80	9	17	26	—	—	11	16	27	12	3	15	96	129	225	281	428	709	+ 8	
1954	281	428	709	109	150	299	44	32	76	45	27	72	4	5	9	202	214	416	16	19	35	20	36	56	51	63	114	40	54	94	32	27	59	2	4	19	14	33	5	6	11	149	166	315	298	421	719	+ 10	
1955	298	421	719	99	162	261	40	43	83	38	39	77	8	5	13	185	249	434	28	16	44	26	44	70	46	82	128	38	47	85	15	26	41	6	3	9	23	19	42	9	5	14	137	182	319	292	428	720	+ 1
1956	292	428	720	104	172	276	35	24	59	34	33	67	8	5	13	181	234	415	25	27	52	28	29	57	23	48	71	36	47	83	38	43	81	5	7	12	25	27	52	7	5	12	134	177	311	286	429	715	- 5

APPENDIX XXVIII

Government Chief Public Health Inspector's Report for 1956-57

During the period 1st April, 1956 to 31st March, 1957, the work done by the Inspectors' Department (Inspection Field Force and Subordinate Staff) is classified under the following headings:-

- (1) *Aedes aegypti* mosquito eradication programme
- (2) Quarantine and Port Sanitation
- (3) Miscellaneous.

The programme for the eradication of the *Aedes aegypti* mosquito has been given priority over all other phases of the work which is being done by the Field Force.

The re-organisation of the services provided for the divisions of the Island into three areas—The Northern, Southern and the City of Bridgetown; these areas were further sub-divided into ninety-five (95) localities.

Results at the end of the second cycle of treatment under the re-organised Units Scheme were highly satisfactory in general and gave promise of greater improvement.

During the year under review much progress has been noted in all the locality. During the first quarter there were eighteen (18) localities negative and during the second quarter, thirty-two (32).

For the quarter ending 31st December, thirty-nine (39) localities inspected were found negative and for the quarter ending 31st March, fifty five (55).

It can be clearly seen by this that progress has been steady even despite the circumstances which arose from time to time due to unforeseen difficulties.

Difficulties presented themselves in the form of refusals by householders to allow inspection and treatment of water receptacles to be carried out by Inspectors of the Staff; the finding of many premises closed, and also absenteeism from one cause or another.

Another factor which had an adverse effect on the progress of the work was the improper disposal of disused tins, coconut shells, and the various odds and ends which form breeding places for *aedes* mosquitoes. More co-operation from the public is desired in the matter of proper disposal of discarded tins, coconut shells, etc., which are potential sources of breeding in any community.

The incidence of breeding has been considerably reduced in all localities, and at the end of the period under review the index in many of the parishes was under 1%.

Quarantine and Port Sanitation

In the port of Bridgetown four hundred and one (401) ships comprising chiefly of schooners, yachts and motor vessels entered the Careenage during the year. Each arrival was boarded, and in the case of those arriving from the neighbouring West Indian Islands, treated in midstream before being allowed to berth alongside in the Careenage.

This treatment (contact spraying with D.D.T.) which is a regular feature, is carried out as a precautionary measure against the invasion of mosquitoes of the genera *Aedes* and *Anopheles*.

Other treatment carried out was the residual spraying of thirty-nine (39) vessels and the treatment of fifty-nine (59) water containers aboard fourteen (15) other vessels with solutions of wettable D.D.T. Powder.

Wherever it was found practical, fumigation was carried out on the various schooners which were berthed in the Careenage. Under the Port Regulations vessels should be treated every three months, but this is not always practicable as many of these vessels due for fumigation might not be in the Island at the time. Only twenty-one (21) of these were fumigated. The number of vessels which can be treated by sulphur fumigation is rapidly being reduced owing to the fact that many of them are being fitted with

marine engines and it is felt that the fumigation operations carried out had an adverse effect on some of the fittings of these engines. Complaints have been received from many schooner captains with regards to this and it has had to be discontinued until some other form of treatment less harmful to the engines is available

Rat destruction work continues unabated in the Port area and certain other areas of the City. The following summary of the work done is submitted for information:-

Number of rats caught in traps	1,233
Number of rats certified to have been destroyed by poison baits laid	529
Number of rats certified to have been destroyed by fumigation	184
Number of mice destroyed by poison baits, trapped and fumigation	245
Number of poison baits laid	10,334

Miscellaneous

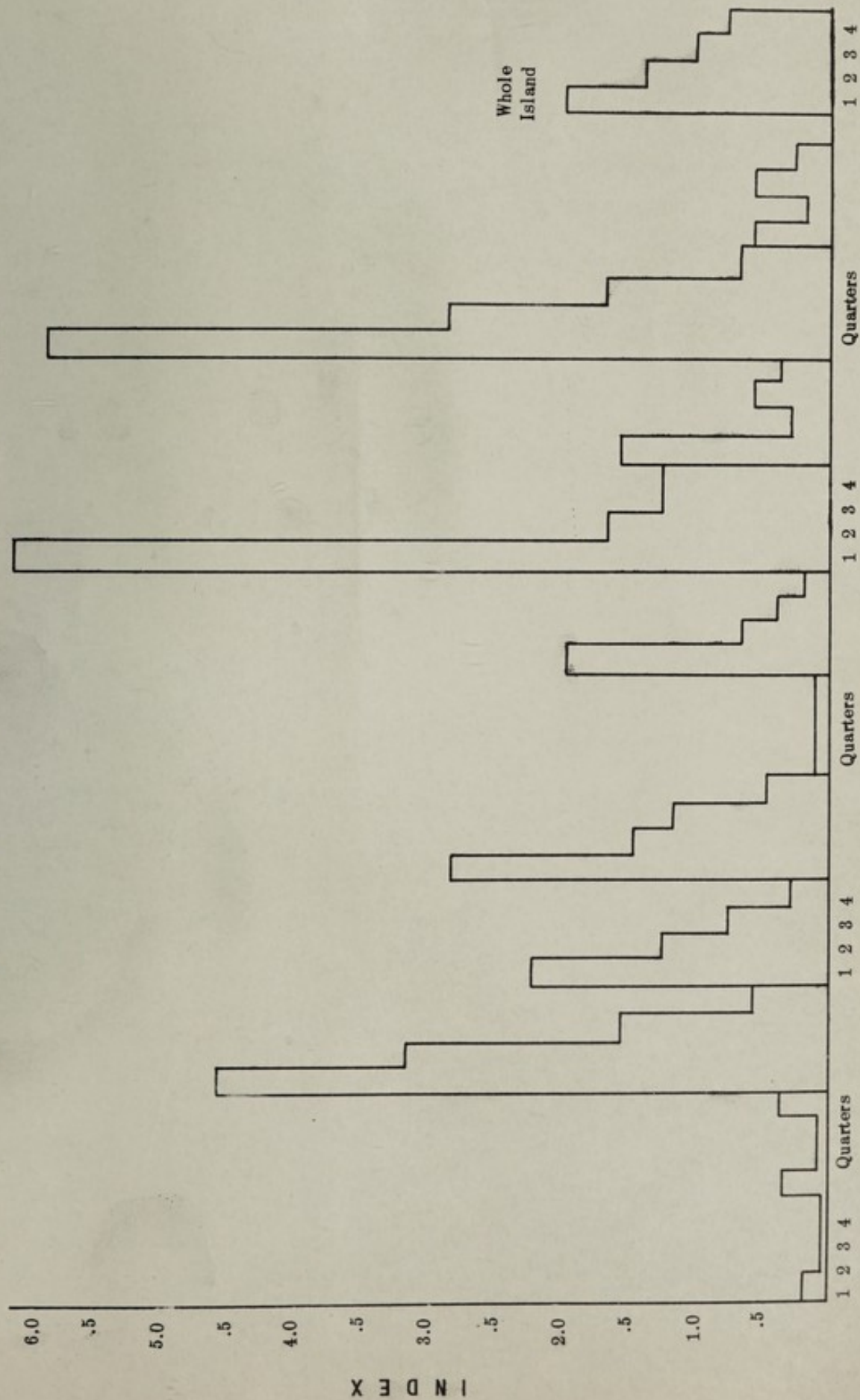
Under this head it may be mentioned that complaints about the prevalence of flies, mosquitoes and/or other nuisances in any of the parishes, which were referred to this Department, were immediately forwarded to the parochial Authority concerned and any technical assistance required from this Department in the abatement of these was proffered as soon as possible.

APPENDIX XXIX

AEDES AEGYPTI ERADICATION CAMPAIGN 1956

BARBADOS

A X G S J O L M E P T



series engines and it is true that the development of the series engines is the lineage of these engines. The series engines were developed from this and it has had no other development but that which has been available.

The development of the series engines in the U.S. area and the following series of the series engines in the U.S. area are as follows:

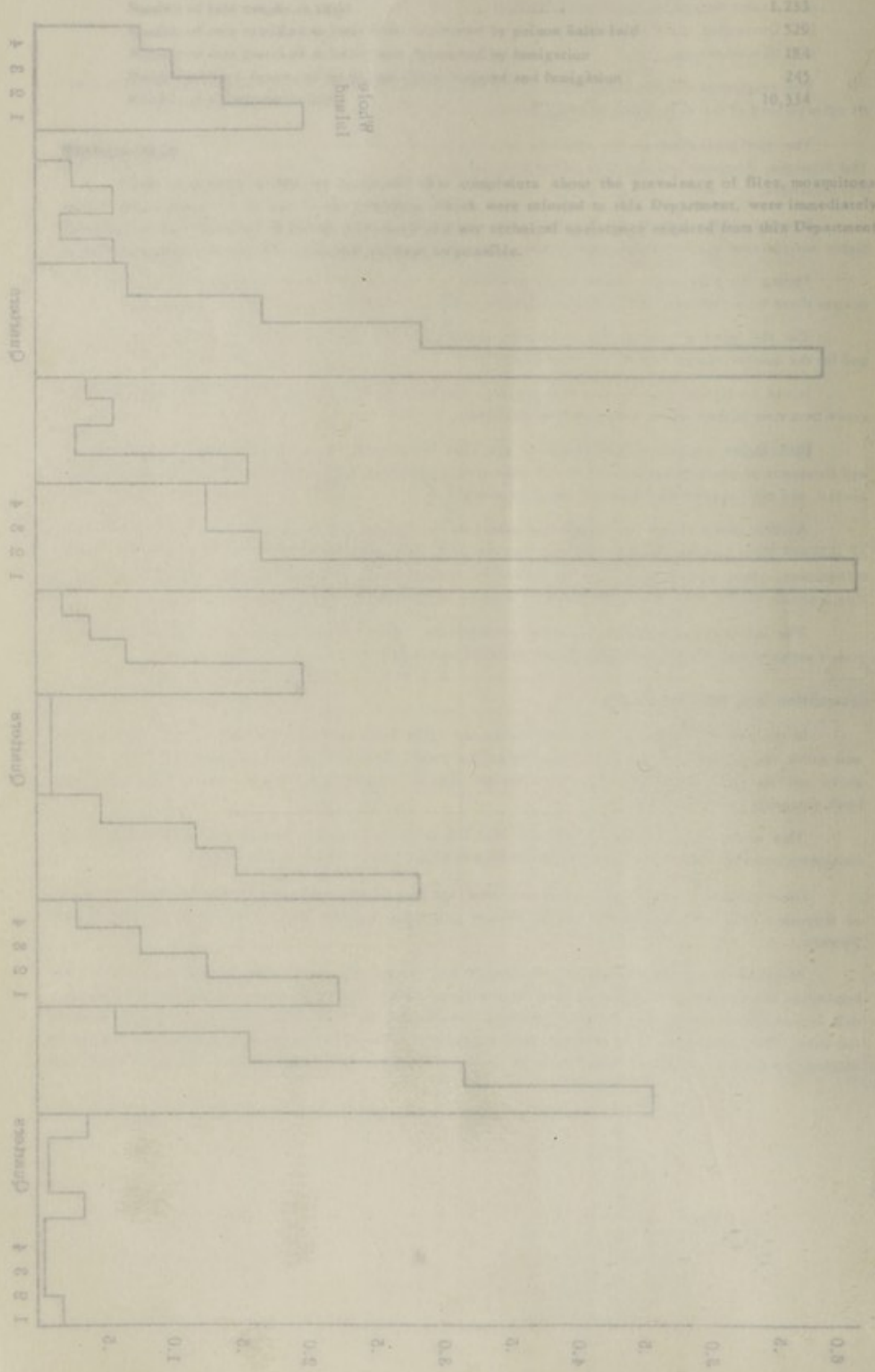


TABLE 1. SERIES ENGINES IN THE U.S. AREA

