

Annual report of the Public Health Department / Zanzibar Protectorate.

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ZANZIBAR GOVERNMENT

AC. 104



ANNUAL
MEDICAL AND SANITARY REPORT
FOR THE
year ended 31st December, 1940

PRICE: Shs. 3/50



ZANZIBAR PROTECTORATE

**Annual Report of the Medical
Department**

*With the Compliments of the Senior
Medical Officer-in-Charge, Medical
and Sanitary Services.*

The Senior Medical Officer-in-Charge, Medical and Sanitary Services, would be grateful if recipients requiring future annual reports would be so good as to intimate their wishes in writing before the end of 1941. In view of the necessity for economy in the use of paper, future reports will not be sent unless a written request for them is received.

OFFICE OF THE
SENIOR MEDICAL OFFICER-IN-CHARGE,
MEDICAL AND SANITARY SERVICES,

Zanzibar, 25th March, 1941.

Sir,

I have the honour to submit for the information of His Excellency the British Resident and for transmission to the Right Honourable the Secretary of State, the Medical Report on the Health and Sanitary Conditions of the Zanzibar Protectorate for the year 1940, together with the Returns, etc., appended thereto.

I have the honour to be,

Sir,

Your obedient servant,

W. H. HART,

*Senior Medical Officer-in-Charge,
Medical and Sanitary Services.*


THE HONOURABLE,
CHIEF SECRETARY TO THE GOVERNMENT,
ZANZIBAR.

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SECTION I.

GENERAL REVIEW.

Staff.—Dr. S. W. T. Lee, the Senior Medical Officer-in-Charge left the Protectorate for the mainland in January with the Field Ambulance Company. His duties were carried out by Dr. C. E. Roberts, who was in charge of the department until June, when he too had to proceed to the mainland for active service. During the period of his absence and until the arrival of Dr. W. H. Hart in September, Dr. E. J. Blackaby was in charge of the department. The duties of the Medical Officer of Health were entrusted to Dr. R. S. Taylor, a private medical practitioner, who volunteered for service during the war. The post of Pathologist was filled by one of the medical officers who was already on the establishment.

At the end of the year measures to prevent the entry of Yellow Fever in Zanzibar were being considered. This was on account of an outbreak of Yellow Fever in the Sudan and the occurrence of a single case in the Belgian Congo, about which there was a Conference of representatives of Health Services in Nairobi.

Zanzibar is fortunate in that it is not in direct contact with the mainland and that all traffic can be controlled fairly easily. So far we have relied on the mainland ports and aerodromes for our control, but that is no longer advisable with the possible approach of Yellow Fever to those ports.

SECTION II.

GENERAL DISEASES.

The diseases treated at the Government Hospitals and Dispensaries during the year are grouped in percentages of cases treated in the following table:—

	Per cent.
Endemic, Epidemic and Infectious diseases ...	16
Nervous system	2
Respiratory system	7
Digestive system	25
Skin and cellular tissue	28
External causes	8
Others	14
Total ...	100

The number of cases and deaths due to Epidemic, Endemic and Infectious diseases are shown as follows:—

Total number.	Epidemic, Endemic and Infectious Diseases.	Deaths.
104,624	16,519	81

SECTION III.

COMMUNICABLE DISEASES.

(a) Mosquito or Insect-Borne Diseases.

ZANZIBAR.

During 1940 in the township the usual anti-malarial measures were maintained. In the protective belt around the town, slight extensions, to include breeding grounds, were made in the Tunguu direction, in the flooded areas south-east of Walezo and around Mtoni.

During the heavy rain in April-May the fall was heavy and irregular. This meant much surging and receding in the flooded areas, which added to the difficulty of control. Extra labour had to be employed to cope with the overgrowth of grass, bush, etc., in order that searchers and oilers could get at the breeding grounds. The recreation ground in town—always an extensive breeding place of anopheline when flooded—was an especial difficulty.

Nevertheless, the incidence of malaria was one of the lowest years on record—less than half that of 1937 and 1938, and almost half that of 1939. The figures are those supplied each year by the Government Hospital, and their experience corresponds to that of practitioners in town. At the same time, the malaria was of rather a virulent type.

The following are figures showing (A) number of breeding places found in town, (B) catches of adult mosquitoes in control stations which have been standard for some years, and (C) figures of malaria cases.

(A)				
		Culicine.	Stegomyia.	Anopheline.
"A" District	...	265	307	77
"B" District	...	110	286	18
"C" District	...	29	650	18
"D" District	...	121	1,072	19
"E" District	...	88	763	64
"F" District	...	101	418	19
Total ...		714	3,496	215

In the half mile controlled strip outside the town boundary.

Culicine.	Stegomyia.	Anopheline.
501	693	637

(B)

Six control stations (huts and houses on the boundaries of the town) kept under observation showed catches of adult mosquitoes as follows:—

Anopheline.	Culex.	Stegomyia.	Rainfall inches.
90	1,882	60	74.26

(C)

Cases of malaria notified from the Government Hospital, Zanzibar, are six hundred and one.

PEMBA.

Anti-malarial work in Pemba continues to show good results from the draining of swamps, especially at Wete and Mkoani. Permanent, deep, contour drains and other contour drains have been laid together with deep central drains in addition to the planting of casuarina trees and filling and levelling.

In Chake Chake the large swamp is being dealt with by keeping out sea water, oiling, cultivation and planting of casuarina and eucalyptus trees and by contour and other drains.

(b) Epidemic Diseases.

There were no outbreaks of any particular disease during the year.

Four cows in the Government controlled dairies died of Anthrax in November. There is no information of the disease having existed previously in Zanzibar, and efforts failed to trace the source of infection. In conjunction with the Agricultural Department, every precaution was taken to prevent the spread of the disease among the cattle and to the human population. No further cases have occurred among cattle, and no cases among human beings.

Tuberculosis.—The number of cases notified was one hundred and twenty-six, of which one hundred and fifteen were infections of lungs, six of bones and joints and five of other parts. The figure is slightly higher than in previous years. The control of tuberculosis must be difficult so long as overcrowding of houses, and in houses, continues. This refers both to the stone-built town area and to parts of the native areas.

Small-pox Vaccination.—In addition to vaccination of passengers from ships, five thousand two hundred and forty-seven persons were vaccinated in the town and two hundred and eighty-nine in the rural districts of Zanzibar and six hundred and forty-nine persons in Pemba.

Yellow Fever.—Precautions against the spread of the disease reported late in the year in the Sudan are being taken in 1941.

(c) Helminthic Diseases.

Ancylostomiasis.—The villagers continued to dig pit latrines in various districts and on completion were issued with concrete latrine tops. One hundred and forty-two latrine tops have been issued. This work was encouraged by visits of sanitary inspectors to village boards, and also by talks to the people.

By arrangement with the Department of Agriculture, endeavours were made to get all squatters on Government plantations to provide latrines for their dwellings. In this connexion three hundred and twenty-five tops were supplied.

Schistosomiasis.—The reports show that the infecting snails have been exterminated in the village pond at Muyuni mentioned in last year's report.

SECTION IV.

VITAL STATISTICS.

(a) Estimated Population.

Estimated population for the whole Protectorate was two hundred forty-three thousand and seven hundred. This cannot be considered to be accurate owing to the registration of births and deaths being incomplete.

(b) Births and Deaths.

There were two thousand two hundred and seventy-nine in Zanzibar and two thousand three hundred and ninety-one in Pemba registered births and two thousand four hundred and forty-nine in Zanzibar and one thousand one hundred and forty-six registered deaths in Pemba. As the registration is incomplete, rates would be quite inaccurate.

There were nine thousand seven hundred and seventy-six immigrants and eleven thousand nine hundred and thirteen emigrants.

(c) Infantile Mortality.

Registered figures were four hundred and ten. This is not accurate.

(d) Main Causes of Deaths in Hospitals.

Endemic, Epidemic and Infectious Diseases ...	81
Nervous system	23
Respiratory system	30
Digestive system	25
Skin and cellular tissues	19
External cause	15
Others	190
Total	383

SECTION V.

HYGIENE AND SANITATION.

GENERAL MEASURES OF SANITATION.

(a) Sewage Disposal.

Zanzibar Town.—Thirty-seven new septic tanks were installed during the year, resulting in the abolition of sixty sullage and twenty-five cess pits. One public latrine was built at Miembeni.

The conversion of pit latrines to water flushed closets is gradually proceeding in the stone-built areas of the town, but owing to war conditions progress has been delayed.

(b) Scavenging and Refuse Disposal.

The services continued to be carried out in a satisfactory manner. Considerable progress was made in levelling and reclaiming land by controlled dumping at the Kikwajuni quarry, low lying ground near the Hollis Road, and also an area below sea level at Saateni. Preparations were made to render the large tidal basin near the Wireless Station suitable for filling by controlled dumping.

(c) Drainage.

Owing to the increased cost of materials, caused by war conditions, and difficulties in obtaining supplies, the construction of new drainage works was considerably retarded. However, approximately one thousand yards of new closed drains were laid in Zanzibar town and three hundred and fifty yards of open drains. Fifty-eight houses were connected to the public drains.

In Pemba drainage (apart from anti-malarial drainage) was done on a small scale, and some flush latrines were installed.

(d) Water Supplies.

The water supplies of both Zanzibar and Pemba continue to be satisfactory.

(e) Rural Sanitation.

Rural Dispensary Attendants have been trained in rudimentary sanitation work, and they inspect houses and their surroundings, etc., in their areas, and make weekly reports on the work done and recommendations. These are examined by the District Medical Officer and referred to the authority concerned when necessary. Already a distinct improvement is noticeable.

(f) School Hygiene.*Zanzibar and Pemba Schools.*

In Zanzibar there are ten rural schools with nine hundred and six pupils on the roll of attendance. The examination was carried out during the four weeks previous to Ramadhan, and the attendance of pupils was smaller than usual owing to children going to Pemba for the clove picking. Nevertheless seven hundred and fifty-four were examined, representing eighty-three per cent of the children.

In the examination the points particularly looked for were nutrition—on the whole good—considering the economic position of the parents, but capable of improvement, as instanced by the much better physique and nourishment of the boys at Dole School, who have a well balanced diet and regular routine.

Vaccination amongst the children is popular and approximately eighty per cent of the children are vaccinated.

Dental caries is present in about twenty per cent of the children and is present mostly in those children whose parents have objected to dental treatment for their children.

Diseases of the nose, ear and throat are not common. Occasionally otitis media and grossly enlarged tonsils are encountered. Combined with a lack of cleanliness, wax is common.

Eye diseases met with include Xerophthalmia due to avitaminosis and trachoma which is much more common among Arab than African children.

Heart Disease is not common and in most cases is secondary to anæmia.

Occasional cases of Bronchitis were met with, but no case of important lung disease was seen.

Routine examination of the Zanzibar and Pemba girls' schools was carried out during the year.

In Pemba the health of the school children showed no change from previous years.

The Wete boys' school was remarkable for its standard of cleanliness.

(g) Measures Taken to Spread the Knowledge of Hygiene and Sanitation.

Measures against disease in general in the rural districts were restricted by withdrawal of staff on the outbreak of war.

Towards the end of 1940 propaganda was started and a short talk on Helminthic Diseases was given by the Information Bureau, this will be followed up by talks on other diseases prevalent in the country, and later by talks on general health, diet and proper living.

Village health boards continue their work under the guidance of visiting Sanitary Inspectors.

SECTION VI.

PORT HEALTH WORK AND ADMINISTRATION.

During the year two hundred and eighty-eight ships and nine hundred and two dhows arrived in Zanzibar as compared with five hundred and twenty-five ships and two thousand seven hundred and twenty-seven dhows in 1939. These ships carried nine thousand seven hundred and seventy-six immigrants and eleven thousand nine hundred and thirteen emigrants.

Two hundred and thirteen aeroplanes arrived and two hundred and thirteen left. These aeroplanes carried seventy-three immigrants and sixty emigrants.

One motor vessel was claytonized and a deratization certificate issued, and one steamship was issued with a deratization exemption certificate after inspection.

In December a ship arrived with cases of measles, and as a precautionary measure the passengers who were contacts were removed to Quarantine Island. These cases were from a contingent of the Army and were isolated in order to prevent the spread of the disease amongst the forces.

Two thousand six hundred and three persons embarking on ships were vaccinated, and three thousand seven hundred and seventy persons disembarking were vaccinated before landing.

Quarantine Island.

Certain structural repairs were carried out in the bungalows, disinfection room and store.

The station was occupied in December by suspected passengers during their quarantine period.

SECTION VII.

WOMEN'S CLINICS AND MATERNITY AND CHILD WELFARE.

A. ZANZIBAR.

The new cases seen at the Women Out-patient Department have been four thousand seven hundred and forty-seven with a total attendance of forty thousand six hundred and seventy-seven.

Incidence of Diseases in Order of Frequency.—Malaria, Hookworm, Digestive system diseases, Respiratory system diseases, Venereal Diseases.

Minor operations performed were one hundred and twenty-two.

SPECIAL CLINICS.

1. *Ante-natal Clinic.*—One hundred and forty-three new cases of pregnancy attended the clinic, the total number of attendances being one thousand and fifteen. The attendance of patients is fairly regular throughout pregnancy.

The opening of the Seyyida Matuka Maternity Home took place in July, and since then the number of Hospital deliveries has increased. There is, so far, ample accommodation for private and general cases. It is hoped that the ideal conditions attending the confinements and lying-in periods will result in a much larger number of deliveries in the near future. An analysis of deliveries show that out of a total of eighty-five deliveries fifty-eight were drawn from the ante-natal clinic.

Total deliveries	...	...	85	Normal confinements	...	...	55
Abnormal presentation	...	...	6	Forceps deliveries	...	...	10
Premature labour	...	...	8	Eclampsia	...	...	3
Cæsarian section	...	...	3	Normal Removal Placenta	...	...	3
Puerperal sepsis	...	...	3	Maternal deaths	...	...	6
Infant deaths	...	...	15				

2. *Infant Welfare Clinic.*—Attendance under one year one thousand five hundred and forty-three and between two and five years one thousand four hundred and sixty-seven—a total of three thousand and ten.

3. *Genito Urinary Clinic.*—The work has been increased during the year.

4. *Diabetic Clinic.*—The attendances were at about the same level as in 1939.

B. ZANZIBAR RURAL DISPENSARY WORK.

Mkokotoni.—New cases eight hundred and sixty-nine—total attendances three thousand two hundred and fifteen. Diseases in order of frequency: Yaws, Ancylostomiasis, Malaria, Ulcers.

The attendances at this dispensary keep up a very good average, and the presence of an ayah to carry on the work with women from day to day no doubt accounts for it.

Selem.—New cases four hundred and fifty-two—total attendances three thousand and forty-five. Diseases in order of frequency: Ancylostomiasis, Yaws, Malaria. An ayah is also stationed here and is making herself useful.

Mwera.—New cases three hundred and seventy-five—total attendances two thousand one hundred and seventy-six. Diseases in order of frequency: Ancylostomiasis, Malaria, Yaws.

C. SPECIAL INCIDENCE.

On July 9th, 1940, a Maternity Hospital at Zanzibar was opened. The name "Seyyida Matuka" was given to the hospital with His Highness the Sultan's consent. The hospital has twelve beds and is open to all communities, a large ward with six beds for those unable to pay subordinate fees and four private beds. On the ground floor is accommodation for special and septic cases.

A European Nursing Sister is in charge and a trained midwife is on duty day and night.

In September a new Isolation Block was opened. This building has four beds, each in separate cubicles, and equipment, etc., is so arranged that each patient has complete isolation if required.

At Selem a female ward has been opened and a senior girl of the ayah class was stationed there to attend these patients and the female clinic.

Also at Mkokotoni a senior girl of the ayah class has been placed. Both these girls are doing extremely well, and the work at this clinic has improved, fully justifying these changes.

D. PEMBA HOSPITALS.

A new maternity ward was opened at Chake Chake, Pemba. Women's Clinics, on much the same lines as in Zanzibar, were started there by a Woman Medical Officer who was stationed at Chake Chake during the year.

The number of new cases of women and children seen at Chake Chake Hospital was two thousand eight hundred and thirty-two.

There were twenty-eight confinements, of which twenty-two were normal deliveries.

SECTION VIII.

HOSPITALS AND DISPENSARIES.

(a) Hospitals.

CASES ADMITTED:

Europeans	...	...	...	57
Asiatic and African in Hospitals	...	...	...	4,125
African in sub-dispensaries	...	...	...	177
Total	...	...	...	4,359

OUT-PATIENT ATTENDANCES:

Hospitals	...	...	...	247,385
Sub-dispensaries	...	...	...	174,270
Total	...	...	...	421,655

NEW CASES:

Europeans	...	...	...	310
Asiatic and African in Hospitals	...	...	...	56,806
African in sub-dispensaries	...	...	...	48,149
Total	...	...	...	100,265

SURGICAL OPERATIONS:

Major	...	...	...	...	486
Minor	...	...	...	...	2,908
Total ...					3,394

(b) Dispensaries.

Zanzibar District.

Name.	New cases.	Attendances.
School Clinic ...	1,840	4,256
Mkokotoni and Chaani ...	3,297	6,691
Selem and Mangapwani ...	2,623	9,088
Makunduchi ...	2,926	12,227
Mwera ...	2,721	7,791
Kizimbani and Dole ...	2,150	3,518
Bububu ...	420	1,180
Bweleo ...	971	3,469
Kizimkazi ...	2,615	8,415
Chwaka and Uzini ...	2,359	5,162
Tunguu ...	1,514	4,217
Mbiji ...	537	781
Mwembeladu ...	3,318	15,121

Pemba District.

Mzambarani ...	1,803	5,620
Matangatwani ...	2,438	7,985
Kinazini ...	2,410	3,966
Stambuli ...	2,109	5,122
Ole ...	1,884	6,430
Kengeja ...	3,062	9,073
Kangani ...	2,176	4,484

An outbreak of conjunctivitis was reported at Nungwi during the year. Immediate measures were taken to prevent the spread of infection. A Dispenser was stationed there for about eleven days, and ninety cases were treated and cured.

Tumbatu Island was visited during the later part of the year. Five cases of illness were treated on the island, and it was arranged that the Dispenser stationed at Mkokotoni should visit the island once a month.

Vital statistics for the last three months of 1940 were:—

Births.			Deaths.			
Male.	Female.	Total.	Infantile.		Others.	Total.
			Male.	Female.		
62	60	112	3	1	43	47

(c) Venereal Disease Clinic.

There are no special Venereal Disease Clinics as such in the Protectorate. Patients are treated with others, thus avoiding advertisement of their complaints.

Two thousand and thirty cases in all were treated at Hospitals and Dispensaries during the year.

(d) Annual Report of the Pathological Laboratory.

A. PARASITOLOGY.

BLOOD:					Positive.	Negative.	Total.
Malaria	...	...	...	...	2,734	4,837	7,571
Fæces	...	...	...	...	4,537	2,359	6,896
Urine	...	...	...	...	804	310	1,114

B. SEROLOGY.

KAHN TEST:							
Blood	...	...	...	...	809	1,259	2,068
Cerebro-spinal fluid	...	...	...	...	11	21	32
COLOIDAL GOLD TEST:							
Cerebro-spinal fluid	...	...	...	...	—	—	7
AGGLUTINATION TEST:							
Bact. typhosum	...	...	...	...	22	55	77

C. BACTERIOLOGY.

BLOOD CULTURES:							
Typhoid	...	...	...	...	—	—	—
Streptococci	...	...	...	...	2	14	16
Anthrax (cows)	...	...	...	...	1	2	3
FÆCES:							
Bact. typhosum	...	...	...	...	—	46	46
B. dysenteriae—Flexner	...	...	...	...	5	73	78
URINE CULTURES.							
SPUTUM:							
Micobact. tuberculosis	...	...	...	...	172	481	653
Smears, etc., for Gonococci	...	...	...	...	213	138	351
Other cultural and general examinations	...	...	...	...	—	—	323
VACCINES:							
Gonococcal	...	...	1,650 m.l.				
T.A.B.	...	...	500 m.l.				
Fowl typhoid	...	...	7,525 m.l.				
Antozenous	...	...	50 m.l.				
Water examinations (bacteriological)	...	...	...	...	—	—	40
Rats examined	...	...	...	...	—	—	932

D. BIOCHEMISTRY.

Blood Sugar tolerance tests	...	...	...	...	—	—	4
„ „ single examination	...	...	...	...	—	—	725
„ „ Urea	...	...	...	...	—	—	19
„ „ Van den Bergh's reactions	...	...	...	...	—	—	4
Fractional test meals	...	...	...	...	—	—	18
Urine (urea, sugar, albumen, etc.)	...	...	...	...	—	—	823
Cerebro-spinal fluids (chlorides, sugar, etc.)	...	...	...	...	—	—	20

E. GENERAL.

Blood sedimentation	...	...	...	...	—	—	10
Blood (cell counts, hæmoglobin, etc.)	—	—	201
Blood (grouping)	—	—	28

F. HISTOLOGY.

Specimens sectioned	—	—	13
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G. AUTOPSIES.

Death due to Natural causes	4		
„ „ „ Knife injuries	3		
„ „ „ Accident	4		13
„ „ „ Burns	2		

H. MEDICO-LEGAL.

Material from sixteen cases was examined and reported on	—	...			—	—	16
--	---	-----	--	--	---	---	----

Total examinations 22,101

(e) Training of Local Medical and Health Personnel.

Some dislocation of training occurred at the beginning of the year due to the war. Several members of the sanitary personnel, Rural Dispensary Attendants and Hospital staff joined the Field Ambulance. Rural Dispensary Attendants were replaced by retired Rural Dispensary Attendants. Two of the seven Sanitary Inspectors under training were transferred to the rural dispensaries, where their sanitary training has been of the greatest value; two joined the Field Ambulance, leaving three Sanitary Inspectors who are still being trained.

The training of probationer Hospital Attendants, and probationer Hospital Nurses continued, and an examination was held in December at which fourteen passed. It is now becoming possible to weed out undesirables, and when some have passed their third year examination they will be selected for promotion to staff appointments. From these fourth-year Hospital Attendants Rural Dispensary Attendants will also be selected to replace unsatisfactory personnel as they become available.

One candidate was taken on to be trained locally as a Dispenser.

Another student has been sent to the Mulago Medical School, Uganda (making two in all), in order to qualify as an Assistant Medical Officer.

An Arab who was sent to Beirut some years ago to train as a Dental Surgeon has taken up his duties and will eventually be posted to Pemba, where a dental clinic is being prepared.

A Woman Assistant Medical Officer reported for duty at the end of the year and is working in the Zanzibar Women and Child Welfare Department.

During the year a maternity ward in Zanzibar and another in Pemba (Chake Chake) have been built, and four girls in Zanzibar and two in Pemba are being trained as midwives.

TABLE I.
FINANCIAL.

		1940.	
		£	£
A. EXPENDITURE—MEDICAL DEPARTMENT.			
Personal Emoluments	...	25,197	
Other Charges:			
General Stores	...	1,423	
Drugs, Dental and Surgical Requisites	...	3,740	
Maintenance of Patients	...	4,487	
Passages	...	947	
Sanitation Labour	...	1,374	
Grants to Lepers	...	123	
Miscellaneous Services	...	4,915	42,206
B. EXPENDITURE—MUNICIPALITY.			
Personal Emoluments	...	2,596	
Other Charges:			
Equipments and Stores	...	183	
Sanitation Labour	...	4,148	6,927
C. REVENUE.			
Hospital Fees, Sale of Drugs, etc.	...	1,724	
Contribution from other dependencies towards the Quarantine Services	...	2,475	4,199

TABLES II AND III.

Return of Diseases and Deaths for the Year 1940.

DISEASES	Remaining in Hospital at end of 1939	Yearly Admissions	Total Cases Treated	Total Deaths	Remaining in Hospital at end of 1940	All Cases including both In- and Out- Patients
1. Enteric Group—						
(a) Typhoid fever	...	11	11	4	...	23 ✓
(b) Paratyphoid fever	...	2	2	1	...	4
2. Typhus fever	...	...	...	...	...	...
3. Relapsing fever	...	...	...	...	...	...
4. Undulant fever	...	...	...	...	...	...
5. Small-pox	...	...	...	...	...	...
6. Measles	...	3	3	...	...	16
7. Scarlet fever	...	...	...	...	...	...
8. Whooping cough	...	1	1	...	...	181
9. Diphtheria	...	1	1	...	...	3
10. Influenza—						
(a) With respiratory complications	...	3	3	...	...	55
(b) Without respiratory complications	...	8	8	...	...	328
11. Cholera	...	...	...	...	...	...
12. Dysentery—						
(a) Amœbic	...	2	2	...	...	6
(b) Bacillary	...	11	11	3	3	22 ✓
(c) Unclassified	...	8	8	1	1	31 ✓
13. Plague—						
(a) Bubonic	...	...	...	...	...	...
(b) Pneumonic	...	...	...	...	...	...
(c) Septicæmic	...	...	...	...	...	...
14. Acute poliomyelitis	...	1	1	...	...	2
15. Encephalitis lethargica	...	...	...	...	...	...
16. Cerebro-spinal fever	...	...	...	...	...	...
17. Rabies	...	...	...	...	...	...
18. Tetanus	...	5	5	3	...	10
19. Tuberculosis of the respiratory system	27	97	124	42	20	266 ✓
20. Other tuberculous diseases	3	12	15	4	...	39 ✓
21. Leprosy	47	17	64	5	54	71
22. Venereal diseases—						
a) Syphilis	2	49	51	2	4	766 ✓
(b) Gonorrhœa	5	72	77	...	6	1,139 ✓
(c) Other venereal diseases	...	13	13	...	...	125 ✓
23. Yellow fever	...	...	...	...	...	...
24. Malaria—						
(a) Benign tertian	2	50	52	...	1	1,127 ✓
(b) Subtertian	1	146	147	2	4	1,222 ✓
(c) Quartan	...	2	2	...	...	10 ✓
(d) Unclassified	3	119	122	6	1	5,696 ✓
25. Blackwater fever	...	8	8	2	...	19
26. Kala-azar	...	...	...	...	...	...
27. Trypanosomiasis	...	...	...	...	...	...
28. Yaws	...	29	29	...	...	4,209 ✓
29. Other protozoal diseases	...	...	...	...	...	3
30. Ancylostomiasis	8	105	113	10	6	11,095 ✓
31. Schistosomiasis	...	7	7	...	...	472 ✓
32. Other helminthic diseases	...	1	1	...	...	69
33. Other infectious and/or parasitic diseases	1	51	52	5	6	316
34. Cancer and other tumours—						
(a) Malignant	...	12	12	4	...	33 ✓
(b) Non-malignant	2	23	25	...	2	103 ✓
(c) Undetermined	...	2	2	0	...	31 ✓
35. Rheumatic conditions	3	28	31	0	1	865 ✓
36. Diabetes	5	36	41	2	3	108 ✓
37. Scurvy	...	...	...	...	...	2
38. Beri-beri	...	...	...	...	...	4
39. Pellagra	...	...	...	...	...	...
Carried forward	109	935	1,044	96	112	28,471

TABLES II AND III.—(Contd.)

DISEASES	Remaining in Hospital at end of 1939	Yearly Admissions	Total Cases Treated	Total Deaths	Remaining in Hospital at end of 1940	All Cases including both In- and Out- Patients
Brought forward ...	109	935	1,044	96	112	28,471
40. Other diseases—						
(a) Nutritional ...	3	19	22	...	4	447 ✓
(b) Endocrine glands and general ...	...	3	3	...	1	68
41. Diseases of the blood and blood-forming organs	1	19	20	1	1	362
42. Acute and chronic poisoning ...	...	17	17	6	...	73
43. Cerebral hæmorrhage ...	...	7	7	3	1	15
44. Other diseases of the nervous system ...	13	61	74	13	12	946
45. Trachoma ...	...	9	9	...	...	126 ✓
46. Other diseases of the eye and annexa ...	6	59	65	...	4	7,458 ✓
47. Diseases of the ear and mastoid sinus ...	...	9	9	...	...	1,549
48. Diseases of the circulatory system—						
(a) Heart diseases ...	4	36	40	20	3	115
(b) Other circulatory diseases ...	2	100	102	7	7	446
49. Bronchitis ...	1	72	73	1	3	3,859 ✓
50. Pneumonia—						
(a) Broncho pneumonia ...	...	27	27	7	...	73 ✓
(b) Lobar pneumonia ...	2	118	120	18	4	247 ✓
(c) Otherwise defined ...	...	2	2	...	...	30 ✓
51. Other diseases of the respiratory system ...	1	43	44	4	2	2,420
52. Diarrhoea and enteritis—						
(a) Under two years of age ...	...	2	2	...	...	135
(b) Over two years of age ...	1	28	29	2	...	639
53. Appendicitis ...	...	13	13	...	3	27
54. Hernia and intestinal obstruction ...	7	146	153	10	14	419
55. Cirrhosis of the liver ...	1	12	13	...	1	48
56. Other diseases of the liver and biliary passages ...	...	23	23	4	2	92
57. Other diseases of the digestive system ...	1	165	166	9	5	12,906 ✓
58. Nephritis (all forms)—						
(a) Acute ...	...	9	9	...	...	41
(b) Chronic ...	...	15	15	3	2	40
59. Other non-venereal diseases of the genito-urinary system ...	11	290	301	9	10	1,720
60. Diseases of pregnancy, child birth and the puerperal state—						
(a) Abortion ...	...	12	12	2	4	51
(b) Ectopic gestation ...	...	1	1	...	...	2
(c) Toxæmias of pregnancy ...	...	6	6	2	...	15
(d) Other conditions of the puerperal state ...	2	142	144	10	3	409
61. Diseases of the skin, cellular tissue, bones and organs of locomotion ...	78	1,072	1,150	19	72	28,602
62. Congenital malformations and diseases of early infancy—						
(a) Congenital debility (children under 1 year) ...	...	2	2	2	...	6
(b) Premature birth ...	...	4	4	3	...	8
(c) Injury at birth ...	...	...	...	...	...	...
(d) Others ...	...	2	2	...	...	6
63. Senility ...	91	296	387	104	115	669
64. External causes—						
(a) Suicide ...	...	1	1	...	...	1
(b) Other forms of violence ...	24	408	432	15	26	8,604
65. Ill-defined causes ...	5	170	175	13	20	3,312
66. Ante-natal and child welfare consultations ...	...	4	4	...	...	167
Total	363	4,359	4,722	383	431	104,624
Examinations	...	...	...	...	...	590
GRAND TOTAL	363	4,359	4,722	383	431	105,214





