

## **Report / Department of Public Health, Tasmania.**

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1947

TASMANIA

# DEPARTMENT OF PUBLIC HEALTH



## REPORT

OF THE

SECRETARY FOR PUBLIC HEALTH,  
TASMANIA

FOR THE

YEAR ENDED 31ST DECEMBER, 1947

*Presented to both Houses of Parliament by His Excellency's Command.*



TASMANIA:

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## ANNUAL REPORT, 1947.

Department of Public Health,  
Hobart, 1st October, 1948.

SIR,

I HAVE the honour to present the Annual Report of the Department of Public Health for the year ended the 31st December, 1947, and in doing so desire to acknowledge the valued co-operation of the members of the Directorate, whose reports are submitted separately under the various Sections set out below, together with vital statistics supplied by the Deputy Commonwealth Statistician:—

- Section I.—Report of Director of Public Health:
- Section II.—Report of Director of Hospital and Medical Services:
- Section III.—Report of Director of Tuberculosis:
- Section IV.—Report of Director of Mental Hygiene:
- Section V.—Vital Statistics supplied by the Deputy Commonwealth Statistician.

It will be noted from a comparison of the tables and appendices attached that the activities of the Department continue to expand, and that the various services are proving of benefit and assistance to the community generally.

During the year, a number of new positions were created within the Department, including a Nutrition Officer (Miss M. G. Rouse) and a School Medical Officer (Dr. A. E. Wilmot), but there has been considerable difficulty in providing sufficient trained staff for the Government Medical, Child Welfare and School Nursing Services.

Leave of absence was granted to Dr. James Tremayne to enable him to accept a Fellowship offered by the National Health and Medical Research Council, and Dr. C. L. Park was seconded to the Commonwealth for a period of twelve months to assist with the organisation of the medical services proposed under the Commonwealth Social Services legislation,

In February, 1947, an Officers' Conference was held in Sydney, to consider hospital and medical questions following the Referendum results and the proposal of the Commonwealth to amplify these services; this Department being represented by Dr. B. M. Carruthers (Director of Hospital and Medical Services) and Dr. C. L. Park (Director of Public Health).

In May, 1947, a Ministers' Conference was held in Melbourne for the purpose of considering resolutions submitted by the Officers' Conference, and Tasmania was represented by the Hon. Robert Cosgrove (Premier), Hon. A. J. White (Minister for Health), Dr. B. M. Carruthers (Director of Hospital and Medical Services), and Mr. P. A. Driscoll (Secretary for Public Health). As a result of this Conference, many resolutions have been embodied in Commonwealth and State legislation.

During the year, the Department took over the Mothercraft Home from the Child Welfare Association, and assumed responsibility for the staffing, training, and maintenance of this institution, as it had been found impossible for the Association to carry on the work on a voluntary basis owing to the enormous increase in the cost involved.

A further notable event was the opening of the Sanatorium at Perth, to provide for additional accommodation for tuberculosis patients, and it is proposed to extend the facilities of this institution at an early date.

### STAFF.

I should like to take this opportunity of expressing my appreciation of the valued services rendered by officers of the Department during the year.

My sincere thanks are also tendered to officers of other Government Departments for advice and assistance so readily given on many occasions.

I have, &c.,

P. A. DRISCOLL,  
Secretary for Public Health.

The Hon. the Minister for Health.



# SECTION I.—REPORT OF THE DIRECTOR OF PUBLIC HEALTH FOR THE YEAR ENDED 31ST DECEMBER, 1947.

## VITAL STATISTICS.

**Population.**—The figures given in the Statistician's Report show that the population at the end of the year 1947 totalled 268,554, of whom 135,715 were males, and 132,839 females. The natural increase amounted to 4777. Hobart City had a mean population of 57,352, whilst Hobart Suburbs (which term includes Glenorchy, Bellerive, Lindisfarne, and Kingston) had a mean population of 20,139, giving a total for Hobart District of 77,491. Launceston City and Suburbs had a mean population of 40,937, giving a total population for urban districts in Tasmania of 118,428. Rural divisions totalled 139,391. This gives a mean population for the whole State of 257,819.

**Births.**—The number of births in the State totalled 7140, being an annual rate per 1000 persons living of 27.69. This is a considerable increase on the average for the previous 10 years, which was 22.14. Comparing the urban districts with rural divisions, it is seen that the annual rate in the urban districts was 26.8 per 1000, whilst that for rural divisions was 28.4.

**Deaths.**—The number of deaths reached a total of 2363, being an annual rate of 9.17 per 1000 persons living. This compares favourably with the average death rate for the previous ten years, which was 10.04.

**Principal Causes of the General Mortality.**—The ten principal causes of death were:—

Cause of Death.	Number of Deaths.	Death Rate per 100,000 Persons Living.
1. Heart disease (organic) .....	665	258
2. Cancer (all forms) .....	298	116
3. Diseases of nervous system .....	247	96
4. Diseases of respiratory system .....	191	74
5. External causes (violent or accidental deaths) .....	174	67
6. Diseases of genito-urinary system .....	154	60
7. Infective and parasitic diseases .....	152	59
8. Diseases of first year of life .....	128	50
9. Tuberculosis (all forms) .....	107	42
10. Diseases of digestive tract .....	102	40

**Maternal and Infant Mortality.**—The number of deaths of infants under one year, which is usually taken as one of the guides to the health of the community, was the most favourable that the State has recorded. Deaths numbered 195, and the annual rate per 1000 births was 27.3. This compares favourably with the average rate for all States in the Commonwealth, which was 28.5 per 1000 births. Analysing the rate for various parts of the State, it is seen that the urban districts had a slightly better showing than the rural divisions, in that the annual rate was 27 per 1000 births in the former, and 28 per 1000 in the latter. In the urban districts, also, the rate varied between the Hobart District and Launceston City and Suburbs; that for Hobart being 31 per 1000 births as against 18 per 1000 in Launceston City and Suburbs. It is a little uncertain why this difference occurred, particularly as it is noted that in 1945 Hobart District had an annual rate of only 18 per 1000 as compared with 27 in Launceston City and Suburbs.

**Pre-natal Deaths.**—Everywhere the infant mortality rate for the first week and the first month of life is very much higher than for the subsequent eleven months. Tasmania, in 1947, was no exception to this, inasmuch as the infant mortality rate for the first month of life was 20.7 per 1000, whilst for the subsequent 11 months it was only 6.6 per 1000. This difference is common to both urban districts and rural divisions, and points to the need for an intensive campaign to reduce pre-natal deaths, if the infant mortality is to be prematurely lowered. Looking at the causes of pre-natal deaths, it is found that the greatest number is caused by premature births, which this year were responsible for 80 deaths, whilst injury at birth caused an additional 27 deaths. Authorities in other countries consider that, of the 107 deaths due to these causes, at least 50 per cent might be obviated by better pre-natal attention, coupled with improved methods of midwifery and facilities for handling premature births.

## LEGISLATION.

**Public Health Act.**—During the year, the Public Health Act, 1935, was amended in order to provide that the Minister should have power to permit a dwelling to be erected, even if there was not available access to a public street either by direct frontage of not less than 20 feet, or by a right-of-way not less than 20 feet in width.

**Places of Public Entertainment Act.**—Section 27 of the Principal Act was amended by extending the power to make regulations for the registration of places of public entertainment, the transfer of registration, cancellation or suspension of registration, the establishment of a registration authority, and provision for a prescribed quota of the British Empire films. The regulation providing for the refusal of registration or transfer of registration was amended by setting out certain conditions under which registration should not be refused.

**Registration of Mothercraft Nurses.**—Legislation to register Mothercraft Nurses was enacted during the year. It sets out that the Director of Public Health shall keep a register of Mothercraft Nurses, the qualifications for registration, the conditions required for acquiring certificates of registration, and for cancellations and suspensions, and gives power to make regulations prescribing all matters required or permitted by the Act to be prescribed in order to carry out or give effect to the Act.

**Food and Drugs Act.**—The Principal Act was amended as follows:—The definition of "sale" under Section 4 was deleted, and a new definition substituted. Section 30 was amended to ensure that, where an inspector procures a sample of food bought at its current market value, the purchase is a "sale" within the meaning of the Act. Section 54 was amended to provide a defence to a person charged under the Act where some other person is responsible for the commission of the offence. An additional clause setting out the conditions under which a warranty may be pleaded as a defence was included, as well as another clause setting out the nature of offences in relation to warranties and to certificates of analysis.



The amendments to regulations apply to regulations 5 and 13, relating to the labelling of preparations containing D.D.T.; and regulation 17, to ensure that, where a standard for any food or drug is prescribed without an express stipulation forbidding the addition of any matter, there shall be implied a stipulation that added matter shall not be included. An additional regulation (No. 32) was also prescribed to cover standard for canned, dried food and the labelling of such.

#### PUBLIC HEALTH ADMINISTRATION.

Appendix I. contains the report of the Government Analyst, and Appendix II. the report of the Chief Health Inspector.

#### NOTIFIABLE INFECTIOUS DISEASES.

**Diphtheria.**—The return of infectious diseases shows that there has been a decline in the number of cases of diphtheria; 64 only being notified, as compared with 256 in 1946, and 403 in 1945. There were no deaths from this cause. It is clear that the campaigns for immunisation against this disease are beginning to have a marked effect on its incidence; only 13 cases being notified in the Hobart District, and 14 in Launceston and Suburbs.

Immunisation against diphtheria is carried out in the Hobart schools by agreement with the City Health Department, which finds the fees paid to the medical officers. The Department provides nursing assistance, and organises the arrangements. It also supplies local authorities with diphtheria toxoid free of cost, and immunisation has been carried out in 29 municipalities, resulting in complete courses being given to 3157 children.

At the Child Welfare Centre at Moonah, immunisation against diphtheria has been carried out throughout the year, and 109 children completed their course of three injections.

**Scarlet Fever.**—One hundred and eighteen cases were notified, the largest number occurring in Hobart district, where there were 52 cases. The disease was of a mild type, and was not responsible for any deaths.

**Tuberculosis.**—Two hundred and seven cases of Tuberculosis (all forms) were notified, and, out of the 49 municipalities, there were only 11 from which no notifications were received. The full report will be found in Section III. (Report of Director of Tuberculosis).

**Typhoid Fever.**—The fact that 9 cases were notified indicates that there is a tendency for this disease to recur, which may be taken as an indication that environmental sanitation is defective. Cases were reported from 7 different municipalities and the number is a considerable increase on the previous year, when 2 cases only occurred.

**Acute Anterior Poliomyelitis.**—As compared with 1946, when 98 cases occurred, the 1947 returns show only one isolated case, indicating that the minor epidemic of the previous year had completely exhausted itself prior to the winter of 1946.

**Other Diseases.**—Sporadic cases only of other infectious diseases were notified, including 8 of Cerebro-spinal Meningitis, as compared with 23 cases in 1946.

Municipality	1947		1946		1945	
	Notified	Deaths	Notified	Deaths	Notified	Deaths
Hobart District	13	0	52	0	52	0
Launceston and Suburbs	14	0	106	0	106	0
Other Municipalities	37	0	98	0	445	0
<b>Total</b>	<b>64</b>	<b>0</b>	<b>256</b>	<b>0</b>	<b>603</b>	<b>0</b>

The notifications for the year numbered 222. Comparative figures for the years 1946 and 1947 are shown in Table B.

TABLE B.

Disease	1947		1946		1945	
	Notified	Deaths	Notified	Deaths	Notified	Deaths
Scarlet Fever	118	0	118	0	118	0
Tuberculosis	207	0	207	0	207	0
Typhoid Fever	9	0	2	0	2	0
Acute Anterior Poliomyelitis	1	0	98	0	98	0
Cerebro-spinal Meningitis	8	0	23	0	23	0
Diphtheria	64	0	256	0	403	0
Other Infectious Diseases	37	0	98	0	445	0
<b>Total</b>	<b>336</b>	<b>0</b>	<b>603</b>	<b>0</b>	<b>1195</b>	<b>0</b>



TABLE A.

*RETURN showing Number of Cases of each Notifiable Infectious Disease notified to the Department of Public Health during the Year 1947, together with Comparative Figures of the Aggregate of such Diseases for the Years 1946 and 1947.*

Municipality.	Diphtheria.	Typhoid Fever.	Scarlet Fever.	Tuberculosis (All Forms).	Puerperal Fever.	Puerperal Pyrexia.	Cerebro-Spinal Meningitis.	Acute Anterior Polio-myelitis.	Enteric Fever.	Bacillary Dysentery.	Total, 1947.	Total, 1946.
1 Beaconsfield ...	1	...	13	8	...	...	1	...	...	...	23	21
2 Bothwell ...	...	...	...	2	...	...	...	...	...	...	2	1
3 Brighton ...	...	...	2	1	...	...	...	...	...	...	3	4
4 Bruny ...	...	...	1	1	...	...	...	...	...	...	2	5
5 Burnie ...	6	...	...	5	...	...	2	...	...	...	13	29
6 Campbell Town ...	...	...	2	1	...	...	...	...	...	...	3	2
7 Circular Head ...	...	...	3	1	...	...	...	...	...	...	4	13
8 Clarence ...	1	...	5	6	...	...	...	...	...	...	12	24
9 Deloraine ...	2	...	...	...	...	...	1	...	...	...	3	18
10 Devonport ...	3	...	4	10	...	...	...	...	...	...	17	29
11 Esperance ...	...	...	...	2	...	...	...	...	...	...	2	1
12 Evandale ...	2	...	...	1	...	...	...	...	...	...	3	3
13 Fingal ...	1	...	...	4	...	...	...	...	...	...	5	1
14 Flinders ...	...	...	...	1	...	1	...	...	...	...	2	8
15 George Town ...	...	...	...	...	...	...	...	...	...	...	...	3
16 Glamorgan ...	...	...	...	...	...	...	...	...	...	...	...	5
17 Glenorchy ...	6	1	10	13	...	...	...	...	...	...	30	50
18 Gormanston ...	...	...	...	...	...	...	...	...	...	...	...	4
19 Green Ponds ...	...	...	...	1	...	...	...	...	...	...	1	...
20 Hamilton ...	...	1	...	...	...	...	...	...	...	...	1	3
21 Hobart ...	13	1	52	59	...	1	1	...	...	...	127	216
22 Huon ...	...	...	2	2	...	...	...	1	...	...	5	6
23 Kentish ...	...	...	...	1	...	...	...	...	...	...	1	17
24 Kingborough ...	2	...	2	4	...	...	...	...	...	...	8	11
25 King Island ...	...	...	1	...	...	...	...	...	...	...	1	4
26 Latrobe ...	2	2	...	2	...	...	...	...	...	...	6	28
27 Launceston ...	14	2	8	36	...	...	1	...	...	...	61	154
28 Lilydale ...	...	1	...	...	...	...	...	...	...	...	1	19
29 Longford ...	...	...	2	3	...	1	1	...	...	1	8	8
30 New Norfolk ...	2	...	3	15	...	...	...	...	...	...	20	18
31 Oatlands ...	2	...	...	2	...	...	...	...	...	...	4	2
32 Penguin ...	...	...	...	1	...	...	...	...	...	...	1	7
33 Port Cygnet ...	...	...	...	1	...	...	...	...	...	...	1	1
34 Portland ...	...	...	...	1	...	...	...	...	...	...	1	3
35 Queenstown ...	...	...	...	4	...	...	...	...	...	...	4	5
36 Richmond ...	...	...	...	1	...	...	...	...	...	...	1	2
37 Ringarooma ...	...	1	2	...	...	...	...	...	...	...	3	25
38 Ross ...	...	...	...	...	...	...	...	...	...	...	...	6
39 Scottsdale ...	1	...	...	1	...	...	...	...	...	...	2	25
40 Sorell ...	...	...	...	1	...	...	...	...	...	...	1	2
41 Spring Bay ...	...	...	...	1	...	...	...	...	...	...	1	1
42 St. Leonards ...	...	...	1	2	...	...	...	...	...	...	3	11
43 Strahan ...	...	...	...	...	...	...	...	...	...	...	...	...
44 Tasman ...	...	...	...	1	...	...	...	...	...	...	1	1
45 Ulverstone (Leven) ...	5	...	...	2	...	...	...	...	...	...	7	19
46 Waratah ...	...	...	1	...	...	...	...	...	...	...	1	1
47 Westbury ...	...	...	4	4	...	...	1	...	1	...	10	9
48 Wynyard (Table Cape) ...	1	...	...	2	...	...	...	...	...	...	3	13
49 Zeehan ...	...	...	...	4	...	...	...	...	...	...	4	3
TOTALS.....	64	9	118	207	...	3	8	1	1	1	412	841

# VENEREAL DISEASES.

The notifications for the year numbered 222. Comparative figures for the years 1946 and 1947 are shown in Table B.

TABLE B.

*RETURN showing Notifications of Venereal Diseases during the Years 1946 and 1947.*

	1946.			1947.		
	Males.	Females.	Total.	Males.	Females.	Total.
Gonorrhoea .....	195	30	225	139	13	152
Primary syphilis .....	15	5	20	15	9	24
Secondary syphilis .....	8	1	9	17	10	27
Tertiary syphilis .....	9	6	15	6	7	13
Congenital syphilis .....	...	...	...	2	1	3
Serological positive syphilis .....	...	...	...	1	2	3
Lymphogranuloma venereum .....	2	...	2	...	...	...
TOTALS.....	229	42	271	180	42	222



## SCHOOL MEDICAL SERVICE.

A full-time School Medical Officer for the North-West Coast was appointed on the 28th July. On the 31st August, Dr. T. W. George, School Medical Officer for the southern part of the State, resigned on account of ill health, but has been able to devote a small part of his time to the work. Sister J. M. Lee, Hobart, resigned her position because of a change of residence, and Sister R. M. Heard was appointed part-time officer for the southern district. Sister G. E. Wadley was appointed to carry out the work in part of the Launceston district.

The number of children examined by medical officers reached a total of 20,699, which is the highest recorded in the last three years. Of this number 10,034, or 48.4 per cent, were found to have some defect requiring attention. The main defects, as usual, were dental caries, and next in order of frequency were unhealthy tonsils and adenoids, defects of posture, skin diseases, endemic goitre, and anaemia. In addition, 1260 children were notified as being under weight for age.

The school sisters made 96,989 contacts with children, as set out hereunder:—

New children .....	8,375
Revisions .....	26,655
Others .....	16,349
Follow-up contacts .....	17,112
Cases requiring first aid .....	28,498
<b>TOTAL</b> .....	<b>96,989</b>

The Education Department provides glasses free of cost where parents are unable to meet the expense involved. On the West Coast the Mount Lyell Company provides a special fund which enables families of staff members to obtain a grant up to £20 for treatment by an oculist when required.

Lunches of the Oslo variety are provided daily for 50 children at the Cressy School at a cost of 6d. per head. A winter canteen was instituted by the Country Women's Association at St. Marys, and is now carried on by this school. A similar scheme is in operation at the Exeter Area School. At the Lansdowne Crescent School, Hobart, the Mothers' Club provides cocoa at recess time, at a weekly charge of 6d. per child.

## SCHOOL DENTAL SERVICE.

The School Dental Service has been very short of staff, and three centres only have been operating throughout the whole of the year. Two of these are the static centres—Hobart and Launceston—and one the Mobile Centre which is at work on the North West Coast. Although applications have been called to fill vacant posts, success has not been achieved. At the moment, it is hoped that six dental surgeons will come to this state from Great Britain. The Mobile Dental Clinic which has been on order for some time, should be ready for work soon, but will obviously require staff.

During the year, Mr. C. F. Scott resigned, and Mr. W. H. Lean was appointed to replace him.

During the school holidays, two Dental Inspectors visited King Island, and one Flinders Island. At both these places, not only school children, but adults, were treated. St. Mary's was also visited in the latter part of the year by the Dental Inspector from Launceston, and St. Helens and Bicheno Centres were visited by Inspectors from Hobart.

During the year there were 6240 new visits, and 6304 repeat visits, making a total of 12,544. The treatments ordered were as follows:—

1. Treatments .....	11,532
2. Fillings .....	2,971
3. Extractions .....	13,738
4. Cleanings .....	1,061
<b>TOTAL</b> .....	<b>29,302</b>

## MATERNAL WELFARE AND CHILD HEALTH.

Staff difficulties have been present throughout the year but, despite this, several new centres have been opened on a part-time basis. The number in operation throughout the State at the end of 1947 was 58, including 1 pre-natal centre and 4 mobile units. The staff comprised 31 Child Welfare Sisters and 3 Mothercraft Nurses. Applications continue to be received from time to time for the services of a nurse, and these are met as far as possible with the staff at our disposal.

The pre-natal centre continues to attract an increasing number of expectant mothers, and this is due, to a certain extent, to the fact that it is possible to give individual attention to the problems of the mothers and, in particular, to give continued medical supervision. The number of attendances at this centre was 1168, the number of visits paid to homes of expectant mothers 1609, and the number medically examined 575.

The four mobile centres work in the districts of Sorell and Norfolk in the south, and Smithton and Ulverstone in the North-West. These centres are able to provide for visits to the homes of parents in those districts far removed from static centres.

The total number of attendances at all clinics throughout the year was 119,227, and the total visits to homes 38,145. The visits to homes are of major importance and, compared with visits by the mothers with their infants to the centres, have a relatively greater value, because of the insight obtained into the actual conditions under which the mother has to bring up her family. Incidentally, greater help can be given on the social side of the work where home conditions are well known.



*Mothercraft Home.*—During the year, the Mothercraft Home was taken over by the Department, and now comes under the control of this Section. A visiting committee is in constant touch with the work of the Home, and the expenditure in connection with it falls on the Government. Since the building was taken over from the Child Welfare Association, some improvements have been effected, both structurally and in

connection with the internal equipment. The staff comprises a matron, 4 staff nurses, and 21 trainees. There are 11 registered nurses undergoing courses of four months' training for their Infant Welfare Certificates; and, in addition, 10 mothercraft nurses who spend a longer period (12 months), but who have had no previous nursing experience.

TABLE C.

*SUMMARY of Work Performed by Child Welfare Sisters during the Year 1947.*

No. of Centres.	Visits to Individual New-born Babies.	Subsequent Visits to Mothers.	Visits to Expectant Mothers.	Total Visits to Homes.	Individual Babies Attending Centres.	Total Attendances at Centres by Babies.	Total Attendances at Centres by Expectant Mothers.	Total Attendances at Centres.
58 (Including 1 Pre-natal Centre and 4 Mobile Units)	5987	29,835	2323	38,145	14,353	117,374	1853	119,227

*Pre-natal Centre.*

	Attendances at Centre.	Visits to Homes.
Pre-natal .....	872	1321
Post-natal .....	157	258
Casual .....	139	30
<b>TOTAL</b> .....	<b>1168</b>	<b>1609</b>

TABLE D.

*INFANTILE Mortality.*

Number of Deaths under One Year in Tasmania for the last 20 Calendar Years.

	Year.																			
	1928.	1929.	1930.	1931.	1932.	1933.	1934.	1935.	1936.	1937.	1938.	1939.	1940.	1941.	1942.	1943.	1944.	1945.	1946.	1947.
Deaths.. .....	300	256	242	219	185	187	189	231	227	202	195	203	176	255	224	226	199	159	207	195

*Infantile Mortality Rate (Deaths per 1000 Births).*

Year.	Tasmania.	N.S.W.	Victoria.	Queensland.	South Australia.	Western Australia.	New Zealand.	North. T'ry.	Aust. Cap. Ter.	Aust.
1929.....	53.1	56.6	47.2	46.1	40.9	56.2	34.1	18.9	19.6	51.1
1930.....	50.6	49.8	46.5	40.2	48.3	46.7	34.5	70.4	24.4	47.2
1931.....	46.0	43.5	44.5	36.6	36.5	41.5	32.2	83.3	37.3	42.1
1932.....	41.2	41.1	43.0	40.3	36.6	44.6	31.2	75.9	26.5	41.3
1933.....	41.1	39.3	40.4	42.6	31.9	36.8	31.6	94.6	53.4	39.5
1934.....	42.3	46.4	44.6	40.6	35.6	40.9	32.1	68.1	7.5	43.6
1935.....	51.8	39.4	41.2	37.8	34.9	40.2	32.3	83.3	47.3	39.8
1936.....	49.6	43.5	42.3	36.3	31.1	42.2	31.0	26.6	25.3	41.1
1937.....	41.7	40.7	36.7	35.6	33.1	37.5	31.2	30.3	14.5	38.1
1938.....	39.7	41.8	34.2	41.2	30.5	33.8	35.6	58.8	35.0	38.3
1939.....	40.6	41.0	35.6	34.7	34.8	40.7	31.1	65.2	23.9	38.1
1940.....	35.2	39.0	39.5	35.3	35.5	46.5	30.2	46.2	7.0	38.7
1941.....	49.0	43.8	36.2	30.1	32.5	35.3	29.7	83.3	16.4	39.7*
1942.....	42.2	40.1	41.8	34.8	39.5	36.8	28.7	43.5	25.5	39.5*
1943.....	40.4	36.2	35.8	37.8	36.7	32.6	31.3	75.0	18.6	36.3*
1944.....	38.3	30.7	33.0	31.3	29.0	32.7	30.1	22.5	23.4	31.3*
1945.....	27.5	30.6	28.0	29.8	28.0	29.6	28.0	55.6	12.4	29.4*
1946.....	30.2	30.2	27.2	29.3	27.1	31.1	26.1	30.3	19.3	29.0*
1947.....	27.3	29.8	26.3	30.8	24.3	30.9	(a)	43.5	19.9	28.5*

(a) Not available. \* Excludes New Zealand.



TABLE E.

TABLE showing the Principal Causes of Death of Children under 1 Year of Age in Tasmania in each Year from 1938 to 1947.

Causes of Death and Classification Number.	1938.	1939.	1940.	1941.	1942.	1943.	1944.	1945.	1946.	1947.
8. Scarlet Fever, &c. ....	...	...	...	...	...	...	...	...	...	...
9. Whooping Cough ....	...	...	...	25	1	2	8	1	...	4
10. Diphtheria and Croup ....	1	2	...	2	1	...	1	2	1	...
Other Epidemic Diseases ....	2	2	2	...	5	2	3	1	2	3
12. Tetanus ....	...	...	...	...	...	...	...	...	...	...
14a. Tubercular Meningitis ....	...	2	...	1	1	...	1	...	2	...
30. Syphilis ....	3	1	...	...	...	...	...	1	...	1
35. Measles ....	...	...	...	...	2	...	...	1	...	...
86. Convulsions ....	5	3	2	2	1	2	...	1	...	1
106. Bronchitis ....	1	1	...	3	1	1	3	1	1	1
107. Broncho-pneumonia ....	24	20	21	23	32	22	24	10	16	20
108, 109. Pneumonia ....	4	4	2	5	7	10	3	4	2	2
119. Gastro-Enteritis, Diarrhoea, and Enteritis ....	4	2	3	2	7	13	5	4	2	2
Other Diseases of the Stomach ....	...	3	...	2	...	...	...	...	...	...
157. Congenital Defects ....	22	31	21	18	17	20	24	20	21	19
158. Debility, Marasmus ....	17	13	11	18	10	14	7	5	3	3
159, 160. Premature Birth and Injury at Birth ....	70	80	76	105	89	82	87	81	110	107
161. Other Diseases of Early Infancy ....	27	21	27	33	33	41	14	15	26	18
Other Causes ....	15	18	11	16	17	17	19	12	22	14
Total .....	195	203	176	255	224	226	199	159	207	195
Infantile Mortality Rate (per 1000 Births) ...	39.7	40.6	35.2	40.0	42.2	40.4	38.3	27.5	30.2	27.3
Total Births .....	4907	5004	4994	5206	5305	5597	5200	5785	6847	7140

TABLE F.

(Showing Ages and Causes of Death under One Year—1947).

Causes of Death and Classification Number.	Under 1 week.	1 week and under 1 month.	1 month and under 3 months.	3 months and under 6 months.	6 months and under 1 year.	Total under 1 year.
6 Cerebro-Spinal Meningococcal Meningitis ....	...	...	1	...	1	1
9 Whooping Cough ....	...	...	3	1	4	4
30d Congenital Syphilis ....	...	1	...	...	1	1
33a Influenza with Respiratory Complications ....	...	...	1	...	1	1
33b Influenza without Respiratory Complications ....	...	...	...	1	1	1
64 Diseases of the Thymus Gland... ..	1	...	2	1	4	4
73c Other Anemias... ..	...	...	1	...	1	1
80a Intra-Cranial Abscess... ..	...	...	...	1	1	1
81a Simple Meningitis ....	...	...	1	...	1	1
86 Convulsions ....	...	...	...	1	1	1
99 Other Diseases of the Arteries... ..	1	...	...	...	1	1
106a Acute Bronchitis ....	...	...	...	1	1	1
107 Broncho-Pneumonia ....	3	2	6	3	6	20
108 Lobar Pneumonia ....	...	...	1	...	1	2
112 Asthma ....	...	...	...	1	1	1
119 Diarrhoea and Enteritis (under 2 years) ....	...	...	2	...	2	2
122b Intestinal Obstruction ....	1	...	...	...	1	1
157a Congenital Hydrocephalus... ..	1	1	...	...	2	2
157c Congenital Malformations of the Heart ....	3	1	1	3	...	8
157d Monstrosities ....	...	...	...	1	1	1
157f Other Congenital Malformations ....	4	2	1	1	...	8
158 Congenital Debility ....	...	1	1	1	...	3
159 Premature Birth ....	27	3	...	...	...	80
160 Injury at Birth ....	27	...	...	...	...	27
161a Asphyxia, Atelectasis... ..	9	2	...	...	...	11
161c Hemorrhagic Conditions of the Newborn ....	1	1	...	...	...	2

TABLE F—continued.

Causes of Death and Classification Number.	Under 1 week.	1 week and under 1 month.	1 month and under 3 months.	3 months and under 6 months.	6 months and under 1 year.	Total under 1 year.
161f Icterus Neonatorum ....	...	...	1	...	...	1
161g Other Diseases peculiar to First Year of Life ....	2	2	...	...	...	4
165 Infanticide ....	1	...	...	...	...	1
182 Accidental Mechanical Suffocation ....	...	...	1	...	...	1
195c Lack of care of the new-born... ..	1	...	...	...	...	1
200b Unknown or Unspecified ....	1	...	...	...	...	1
TOTAL.....	130	18	13	19	15	195

TABLE G.

Comparative Figures of Principal Causes of Death under One Year during 1943-1947.

Causes of Death.	1943.	1944.	1945.	1946.	1947.
Whooping Cough.....	2	8	1	...	4
Convulsions .....	2	...	1	...	1
Bronchitis .....	1	3	1	1	1
Broncho-Pneumonia.....	22	24	10	15	20
Pneumonia .....	10	3	4	2	2
Diarrhoea and Enteritis ...	13	5	4	2	2
Congenital Debility .....	14	7	5	3	3
Syphilis .....	...	...	1	...	1
Malformations .....	20	24	20	21	19
Prematurity and Injury at Birth .....	82	87	81	110	107
Other Diseases of Early Infancy .....	41	14	15	26	18



## APPENDIX I.

REPORT OF GOVERNMENT ANALYST FOR THE  
YEAR ENDED 31st DECEMBER, 1947.

The following tables show the various materials examined and tested, and the sources of the samples respectively:—

Table I.—Materials examined—

Foods	534
Petroleum products	359
Alcoholic liquors	258
Soils	91
Waters	82
Toxicological examinations	73
Plant nutrition specimens	53
Animal nutrition specimens	37
Human milks	49
Fertilisers and pesticides	17
Hydrometers and thermometers	18
Soap and cleaning materials	10
Paints and building materials	16
Disinfectants and preservatives	8
Paper and textiles	6
Drugs and medicines	4
Miscellaneous	19
<b>Total</b>	<b>1634</b>

Table II.—Sources of samples—

<b>State Departments:</b>	
Department of Agriculture	250
Department of Public Health	273
Public Works Department	10
Police Department	18
Transport Commission (Railways)	9
Supply and Tender Department	22
Forestry Department	12
Department of Labour and Industry	3
Education Department	1
Premier's Department	1
<b>Commonwealth Departments:</b>	
Department of Trade and Customs	655
Department of Commerce and Agriculture	73
Commonwealth Health Laboratory	9
Department of the Navy	4
Postmaster General's Department	1
Council for Scientific and Industrial Research	1
City Councils and Local Authorities	43
Child Welfare Centres and Mothercraft Home	61
Hospitals and Institutions	25
Tasmanian Museum	1
Private Firms and Persons	162
<b>Total</b>	<b>1634</b>

*Food and Drugs Act Analyses.*

The following table shows the results of examination of official food samples submitted by inspectors under the provisions of the Food and Drugs Act:—

Foodstuff.	Number of Samples Received.	Number Below Standard.
Baking powder	3	1
Butter	1	1
Cereal products, including pastry and pudding mixtures	9	2
Cocoa-malt beverage	1	1
Coffee	3	1
Cheese (tinned)	1	1
Cream	3	1
Custard powder	6	1
Cornflour	2	1
Essences and food colours	2	1
Fish (canned)	3	1
Fish paste	11	6
Flour (self-raising)	2	1
Fruits (canned and fresh)	2	1
Honey	3	1
Ice cream	1	1
Jams and jellies	2	1

Foodstuff.	Number of Samples Received.	Number Below Standard.
Jelly crystals	2	1
Junket tablets	2	1
Margarine	1	1
Meat extract	4	1
Meat and malt extract	1	1
Meat (canned)	7	1
Meat (suspected horse-flesh)	1	1
Meat and vegetables (canned)	5	1
Milk	63	14
Sauces	15	4
Sausages	6	4
Spices and condiments	7	1
Soup (canned)	4	1
Spreads and savouries	12	1
Soda water	3	1
Summer drinks	7	2
Vinegar	3	1
Tea	1	1
Vegetables (canned and pickled)	8	3
Vegetables (fresh)	1	1
<b>Total</b>	<b>208</b>	<b>43</b>

The number of samples submitted showed an increase over the previous year. The percentage of samples not conforming to standard was also higher than in 1946, being 20.6 per cent against 14.4. Some of the outstanding deficiencies are described below.

*Milk.*

Of the fourteen samples of milk which did not conform to standard, four were watered, seven were below the standard of composition but not watered, and three were below standard but too sour for the determination of added water. Since the close of the year milk sampling activities have been greatly increased, resulting in the detection of many adulterated samples. The freezing point method, using the Hortvet cryoscope, remains in an unassailable position for the detection of watering. Many substandard milks, the product of inferior herds and inadequate feeding, have been found. These were shown by the cryoscopic test to have normal freezing points.

*Miscellaneous Food Infringements.*

One tomato sauce contained a considerable amount of apple, a tomato chutney contained undeclared colouring matter and another was fermented. Two samples of sausages contained excess of starch and two others an excess of both starch and preservative (sulphite).

A summer drink labelled "Raspberry Juice—made from the choicest Tasmanian raspberries" was found to consist of carbonated and acidulated water, with no more than a flavouring, if any, of raspberry. It was also artificially coloured without declaration on the label, and contained added phosphoric acid.

Two samples of canned processed peas were not labelled as required "Dried peas—soaked and processed." In addition they were artificially coloured, which is not permitted in processed peas.

*Soils.*

Of 91 samples of soil examined, 39 were submitted by various branches of the Department of Agriculture and 27 by private persons, chiefly orchardists and farmers. Samples were also received from the Forestry Department (12) and the Soils Division of the Council of Scientific and Industrial Research (7).

*Waters.*

In all, 82 samples of water were examined, mainly for the Department of Public Health, Public Works Department, and local authorities, as to their suitability for human consumption. Other samples were examined for branches of the Department of Agriculture (12), private persons (15) and other Departments. In a number of cases advice was given regarding suitable treatment for softening and other purification.

*Toxicology and Police Investigations.*

Twenty-five specimens were received in connection with twelve cases of real or suspected human poisoning. The poisons found were as follows:—strychnine 1, strychnine



and quinine 1, arsenic 1, chloral 1, alcohol 1, kerosene 1. Six cases gave negative results.

Forty specimens and 3 baits were examined in connection with a number of cases of real or supposed poisoning of animals. It is a common occurrence for persons who suspect that their animals have died from poisoning to send in specimens without first having an examination made by a veterinary surgeon. The importance of having seriously sick or dead animals examined by a veterinarian before submitting specimens for analysis, if at all possible, has been repeatedly stressed to stock owners and the police. The large proportion of negative cases shows that suspicion is frequently ill-founded.

One specimen was submitted in connection with alleged doping of a race horse.

#### *Animal and Plant Nutrition.*

Thirty-seven (37) specimens were examined for the Veterinary Branch of the Department of Agriculture in connection with problems of animal nutrition and deficiency diseases. Copper and cobalt, and in some cases molybdenum, determinations were made on liver and blood samples.

Fifty-three (53) specimens were examined for the Agronomy and Plant Pathology Divisions of the Department of Agriculture in connection with plant nutrition experiments. Of these, 37 samples of potato tops and tubers involved determinations of calcium, magnesium, potassium, phosphoric acid and iron.

#### *Miscellaneous Analyses for State Departments.*

These included human milks for Child Welfare and Infant Health Clinics (49), oils for Transport Department (Railways) (9), disinfectants for the Supply and Tender Department (8) and branding fluid.

#### *Commonwealth Departments.*

Work under this head showed a considerable increase compared with the previous year. The total number of samples was 743, an increase of 80 compared with 1946. Samples examined for the Department of Trade and Customs numbered 655, or 170 more than the total for the previous year. Most of these were samples of petroleum products such as fuel oil, petrol, kerosene, and lubricating oil in connection with the levy of import duties, and alcoholic liquors tested for spirit strength to ascertain the excise duty or export drawback. A number of miscellaneous materials such as textiles, paper and alloys were examined for purposes of tariff classification. The Department of Commerce and Agriculture submitted 73 samples, mainly butter and dried milk products.

#### *Local Authorities.*

Forty-three (43) samples were submitted by local authorities. These consisted almost entirely of milks and waters.

#### *Private Firms and Persons.*

One hundred and sixty-two (162) samples were submitted by various private firms and persons. These consisted mainly of waters, soils, and specimens in connection with the poisoning of animals.

#### *Information and Advice, Investigational, Committees, &c.*

A considerable amount of time has been spent in giving information and advice in response to numerous enquiries by departmental officers and members of the public.

During the year a number of meetings of the Food Standards Committee were attended. The following matters among others were considered—artificial colouring of tinned fish with annatto, the vitamin fortification of soft drinks, standards and labelling of fruit juice cordials, summer drinks, cider and fruit wines, use of 1-propoxy-2-amino-4-nitrobenzene as a substitute for saccharin, use of phosphoric acid and lactic acid in soft drinks, and standards for berry fruits.

At the end of the year an investigation into the composition of berry fruits was commenced. A start was made on a survey of the composition of the principal locally grown jam and beverage fruits—raspberries and blackcurrants.

#### *Conclusion.*

It is desired to express appreciation of the services rendered by the staff of the laboratory during the year.

H. E. HILL, F.A.C.I., A.R.I.C.,

Government Analyst.

#### APPENDIX II.

#### REPORT OF THE CHIEF HEALTH INSPECTOR FOR THE YEAR ENDED 31st DECEMBER, 1947.

#### *Staff.*

Early in the year, Mr. H. T. D'Alton resumed duty after being on loan to the Commonwealth in connection with the processing and packing of food for the armed forces in the late war. With increased work being allotted to the staff, approval has been given to the appointment of another Health Inspector to cope with the required duties. It is expected that the appointment will be made in the near future.

#### *Routine Sanitary Surveys and General Inspections.*

Visits of inspection have been made to all municipal districts throughout the State. In the course of these visits, work of an educative and practical character has been carried out. This included sanitary surveys of districts, comprising reports on water supplies, sanitary and garbage services, drainage, offensive trades, public buildings, schools, licensed and food premises.

Under this organisation, the sanitation of each municipal district is recorded for future reference, and action taken for necessary improvements as circumstances require.

Details of inspections made in the course of these surveys are set out hereunder:—

	Number of Inspections.	Improvements Required.
Bacteriolytic tanks, &c.	1427	297
Bakehouses	130	80
Butchers' shops	176	82
Buildings and plans (private)	117	74
Buildings and plans (public)	57	43
Boarding houses, restaurants, tea-rooms	97	44
Dairying premises	230	124
Disinfection and fumigation	8	...
Domestic inspections	75	28
Drainage	238	101
Food premises	345	70
Garbage tips	42	8
Hospitals, including plans and site	15	7
Infectious diseases	4	...
Licensed premises	173	65
Miscellaneous	181	49
Offensive trades	258	93
Places of public entertainment	243	144
Reserves, beaches, grounds	65	36
Saleyards	15	2
Sanitary depots and services	67	15
Schools	217	73
Scallop depots	9	6
Sewerage schemes	8	1
Subdivisions of land	34	3
Water supplies and samples	48	4
Cemetery sites	4	1

In addition to recommendations made to local authorities, 179 orders were served for the improvement of existing conditions. With one exception, these were complied with. In this instance legal proceedings were instituted, with the result that the defendant was found guilty, and fined £1 with £3 4s. 6d. costs.

#### *Public Health Act.*

With a view to remedying anomalies and meeting changed conditions in modern sanitation, amendments to the above Act and Regulations have been prepared and will be submitted for approval in the coming year.

#### *Infectious Diseases.*

As outbreaks of Infantile Paralysis occurred in mainland States during the year, steps were taken to acquaint local authorities and Inspectors of precautions necessary should an outbreak of the disease occur in this State. Fortunately, this did not happen.



*Offensive Trades Regulations—Swine-keeping.*

In order to improve the conditions under which pigs were being kept and sold for trade, instructions to local authorities were issued for the enforcement of these regulations, with the result that a greater number of these premises were registered after the required improvements had been effected.

*Installation of Bacteriolytic Tanks.*

Owing to increased shortages of iron for making sanitary pans, and difficulties being experienced in obtaining suitable persons for the clearing of the pans, several local authorities made enquiries regarding the establishment of bacteriolytic tank schemes to replace pan removals. Advice has been tendered and inspections carried out of the areas concerned, in order that preliminary arrangements may be instituted for installation of the tanks after having received the necessary approval of the Director of Public Health. A total of 626 applications for the construction of new bacteriolytic tanks were approved during the year.

*Food and Drugs Act.*

Sections of this Act were amended in order to clarify the procedure laid down in connection with food sampling consequent on the dismissal of a charge laid for the adulteration of alcoholic spirits. Amended regulations have been drafted for improving the standards of fruit cordials and syrups and the setting up of standards for berry fruits and pulp.

*Food Samples.*

Two hundred and thirty samples of food were procured and submitted to the Government Analyst for examination. Frequent samples of water from swimming pools were also taken with a view to ascertaining if the chlorination of the water was being carried out satisfactorily, so as to prevent possible ill effects from contamination. Legal proceedings were taken in one instance in respect of adulterated sausages, and warnings issued in connection with cordials, milk, sausages, and soap found under standard.

*Mutton Bird Industry.*

An inspection of the buildings and equipment used in connection with the mutton bird industry at Flinders and

adjacent islands was carried out by Inspector Dalton during April. It was found that, owing to shortages of materials and manpower during the war period, conditions throughout had deteriorated. Orders have been served on occupiers for the purpose of effecting the necessary improvements.

*Restaurants, Tea Rooms, &c.*

A follow-up inspection of these premises during the year showed that improvements had occurred in regard to the general conditions, and also in respect to the replacement of damaged crockery, glassware, and cooking utensils, consequent on the supply of these articles being more plentiful.

*Carriage and Delivery of Carcase Meat.*

Attention was given to the condition of vehicles used, and clothing worn by employees engaged in the conveyance of carcase meat from the mainland and local depots to the retail shops. Improvements in this respect, as well as the more efficient covering of the meat, were ordered, and have since been given effect to.

*Places of Public Entertainment Act.*

Frequent visits were made by Inspectors to places of public entertainment, with a view to enforcing the regulations in respect to sanitary and seating accommodation, overcrowding, cinematograph cabinets and projector apparatus, and fire risks.

In order to consolidate the Building Regulations, Regulations of the Fire Brigade Board, and Places of Public Entertainment Regulations, a panel of officers representing the Hobart City Council, Hobart Fire Brigade Board, and this Department, has been engaged in consolidating these, with the object of prevention of overlapping from these sources.

*Conclusion.*

In conclusion, it is desired to thank Council Clerks and Local Inspectors for their co-operation and assistance. As in past years, the Inspectorial Staff has given loyal and conscientious service throughout the year.

H. H. PARKER, M.R.S.I.,

Chief Health Inspector.

## SECTION II.—REPORT OF DIRECTOR OF HOSPITAL AND MEDICAL SERVICES FOR THE YEAR ENDED 31ST DECEMBER, 1947.

*HOSPITALS.**Public Hospitals.*

The work of the public hospitals continues to increase and expand, due chiefly to all treatment, both in-patient and out-patient, being free of charge. There has been a general increase in the number of in-patients, but there is a tremendous increase in the number of attendances at the Out-Patients' Department:—

	1946.	1947.
Royal Hobart Hospital	90,990	107,894
Launceston General Hospital	67,323	74,418

This increase has necessitated a greatly augmented staff, but the greatest difficulty experienced is that the present out-patient accommodation in all public hospitals is totally inadequate for the number of patients treated.

The facilities for treatment at all public hospitals have been increased, especially as regards specialist treatment, and the fact that both the Royal Hobart Hospital and the Launceston General Hospital are now recognised by the

Royal Australian College of Surgeons as post-graduate training schools, proves that the services given are of a very high standard.

*Staff (Medical).*—The number of honoraries, part-time visiting specialists and resident medical officers has been considerably increased at both major base hospitals, and to a lesser extent at the minor base hospitals.

The policy of the appointment of a General Superintendent to major base hospitals has been adopted. He administers the hospital, while the medical and surgical divisions are directed by special officers each possessed of higher degrees. The standard of all hospitals has thus been considerably improved by a closer liaison between all departments, and much more efficient administration.

To encourage post-graduate study, two officers were this year granted leave of absence on full pay to undertake post-graduate studies on the Mainland. This is now a definite policy, and it is hoped that each year more officers will be granted study leave.



The bi-annual visit of the Consultant Plastic Surgeon has proved most successful, and results obtained most satisfactory. Special reference must be made to the number of cases of hare-lip and cleft palate in the State. The results obtained in this section have been most outstanding. Cases are referred by doctors from all parts of the State.

The specialist service has been further extended by the appointment of a Consultant Neurologist, who also visits the State twice yearly, each visit being of approximately one week.

The Chief Tuberculosis Officer from the Repatriation Department also visits the major base hospitals at regular intervals.

Every specialty is now catered for at the Royal Hobart and Launceston General Hospitals, and the minor base hospitals are visited by the Specialists at regular fixed intervals. Pathological Departments have been extended in all hospitals.

*Staff (Nursing).*—Again the position as regards nursing staff has been very acute, owing to a greater number of nurses being required due to the increased number of patients accommodated at and attending hospitals, and also to the reduction of working hours. Fortunately, to date, no hospitals have had to close due to lack of staff, but a considerable amount of overtime has had to be worked to enable some hospitals to carry on. The greatest difficulty that concerns the hospitals is the lack of a sufficient number of young ladies coming forward as trainees. Every effort has been made to induce girls to enter the profession. Doctors and Sisters have visited large schools, given talks and demonstrations to the elder girls, and followed by group inspection of Hospitals. Good results have been obtained from this approach, but still the numbers are below those required. To assist in overcoming this shortage Nursing Aids are employed, and it is hoped, in the near future, to have a definite practical course arranged for such assistants and, after they have completed a year's satisfactory training, to have them registered as Aids under the Public Health Department.

Post-graduate scholarships have been granted in the last two years by the Florence Nightingale Memorial Committee, enabling nurses to proceed overseas for specialised courses in administration and teaching. Further assistance has been promised by this Department, to enable this post-graduate work to be further developed, and assistance given for such studies both on the Mainland and Overseas.

More males are now entering the nursing profession, and all those who have graduated to date have taken up special work such as theatre supervisors, technicians in the pathological and X-ray departments, tuberculosis and V.D. nursing.

Specialist services within the hospitals are expanding, there being a considerable increase in the number of dietitians, tutor sisters, radiographers, &c. Clinical photography is now being undertaken at major base hospitals.

The obstetric unit at the Royal Hobart Hospital, which opened three years ago with only fourteen beds, has now expanded and can accommodate up to seventy patients. Early ambulation has been instituted in this section; patients now getting up on the fifth day. Special lounges and dining rooms have been furnished for the patients when up, and also special nurseries and babies' bathrooms constructed, where mothers are taught how to bathe, feed and care for their infants, so that on discharge they are fully acquainted with and capable of the management of their babies.

*Equipment.*—Considerable new equipment has been added to all hospitals, and particular mention must be made of most up-to-date X-ray equipment which has been installed in all hospitals.

*Costs.*—The average daily cost of patients has increased considerably, owing to increased staff, higher salaries and wages, increased cost of commodities, drugs, and equipment. The daily average cost for the year ended December, 1947, was 24s. 8-61d. The Commonwealth contribution of 6s. per day per patient does not now bear the same relation to the total cost per day as it did in the years on which the rate was computed. Representation has been made for the benefit rate to be increased, but so far without result.

*Buildings.*—The building programme has not advanced as rapidly as was anticipated, owing to the shortage of labour and materials. Burnie Public Hospital and Nurses' Home is now in course of construction, and plans have been prepared for a complete new Hospital and Nurses' Home at Devon Public Hospital, Latrobe. Renovations and repairs with slight alterations have been carried out at many hospitals, most of which were long overdue, owing to inability to have same carried out during the war and immediate post war years.

#### Private Hospitals.

TABLE H.

*Return showing Number of Private Hospital Licences Issued, and Private Hospitals Exempted from Applying for a Licence, during the Years 1946 and 1947.*

	LICENCES ISSUED								HOSPITALS EXEMPTED							
	Medical, Surgical & Lying-in		Medical and Surgical only		Lying-in only		Total		Medical, Surgical & Lying-in		Medical and Surgical only		Lying-in only		Total	
	1946.	1947.	1946.	1947.	1946.	1947.	1946.	1947.	1946.	1947.	1946.	1947.	1946.	1947.	1946.	1947.
Hobart. ....	1	...	...	1	4	4	5	5	1	1	1	1	...	...	2	2
Launceston ..	...	...	...	...	3	2	3	2	...	...	2	2	...	...	2	2
Country .....	7	7	...	...	10	10	17	17	...	...	1	1	...	...	1	1
Total...	8	7	...	1	17	16	25	24	1	1	4	4	...	...	5	5



## BUSH NURSING.

The Bush Nursing Service has continued to render much needed and very efficient service in country districts. Unfortunately, there has been great difficulty in obtaining nursing staff, and one small centre has had to be closed. There are, however, twenty-three centres functioning, and the work again this year shows a considerable increase in all departments, as indicated in Table I. One of the outstanding features is the number of maternity cases attended—329 for the year. This service is greatly appreciated, as it means that mothers are nursed in their own district rather than being transferred to some hospital, where their families are unable to visit them. It is worthy of note that in one centre triplets were born, and were cared for until discharge, by which time they had attained their normal weight.

Ante-natal services continue to increase, and child welfare work is maintained at a high standard.

New premises are in course of erection at St. Helens, Oatlands, and Gladstone, the two former with hospital beds, and it is hoped that all these will be functioning within the next year. The

centre at Redpa, formerly administered by the Local Council, has been taken over by the Department, and is performing very useful work.

The work of the Northern Bush Nursing Association is greatly appreciated, and they have rendered very great assistance in the furnishing of centres, granting of equipment, and assistance in providing transport for nurses.

Plans have been prepared for the enlargement of Flinders Island and Ouse Bush Nursing Centres.

The standard of equipment has been still further improved, and all centres with maternity beds have been supplied with anaesthetic machines, and most centres with X-ray apparatus.

Owing to the increased work, most centres with accommodation for patients have had their staff increased, there being two trained nurses and domestic assistance. Many married nurses have willingly given their services during periods when trained staff were unavailable. The nursing duties at all centres have been carried out at a very high level, and much preventive and educational work has been carried out in the districts where centres function.

TABLE I.

*Summary of Work Performed in Bush Nursing Centres during the Year 1947, together with Comparative Figures for the Years 1943 to 1946.*

Centre.	Visits to Centre.	Visits to Patients.	Nursing Days.	Maternity Cases.	Pre-natal Visits.	Child Welfare Visits.	Visits to Schools.	Mileage.	Hospital Beds.	Remarks.
Alonnah	85	141	320	4	37	94	13	3,549		
Avoca	453	460	44		51	161	11	1,375		
Cape Barren Island	870	113	231	3	36	132	9	217		
Cygnat	218	21	991	81	79	897		118		
Flinders Island	312	4	523	15	64	183	14	707		
Grassy, King Island	607	291			5	806	11	3,533		
Lilydale	196	484			33	653	2	5,452		
Mole Creek	295	253			6	92	21	596		Open from May
Oatlands	178	26	366	34	51	462	5			Surgery only from August
Ouse	173	5	1,400	87	68	163	2			
Redpa	226	124	70	3	20	78	5	1,448		Open from April
Ringarooma	364	331	1	1	80	345	9	2,678		
Rosebery	4,586	898	10	2	308	579		3,229		
Rossarden	1,578	562			78	309	9	2,440		
Sorell	481	4	526	38	157	379	3			
Southport	254	10	104	5	80	55	3	35		Closed from 10.7.47
Storeys Creek	1,020	543	4		87	84	8	1,616		
Strahan	1,042	745			115	207	5	2,233		
Swansea	338	5	301	27	60	543	2	56		
Tasman	338	50	413	19	37	200	1	2,561		
Triabunna	267	65	124	9	64	333	3	242		Closed 30.9.47 to 13.11.47
Tullah	795	408			31	62	6	609		
Waratah	1,366	750	3	1	94	99	12	2,812		
<b>TOTAL</b>	<b>16,042</b>	<b>6,293</b>	<b>5,431</b>	<b>329</b>	<b>1,641</b>	<b>6,916</b>	<b>154</b>	<b>35,506</b>	<b>45</b>	
1943: 21 centres	12,735	8,041	3,207	192	1,321	7,026	250	32,610	39	
1944: 20 centres	11,877	5,967	2,840	170	1,346	7,783	191	25,781	39	
1945: 21 centres	10,504	5,756	3,972	272	1,209	7,163	213	29,649	39	
1946: 23 centres	13,287	5,883	4,887	306	1,542	6,072	199	30,396	49	



## GOVERNMENT MEDICAL SERVICE.

The work of the Government Medical Service continues to expand; Evandale Municipality having come into the scheme during the year. Application has also been received for a service to be established in the Fingal Municipality, but finality has not yet been reached in this matter.

There have been several changes in the officers attached to this service during the year, but the medical officers now engaged are all men of wide experience and high qualifications. Salaries have been increased during the year, and as soon as further officers are available facilities will be granted for post-graduate study.

TABLE J.  
SUMMARY of Work Performed by Government Medical Officers during the Year 1947,  
together with Comparative Figures for the Year 1946.

District.	Population.	Date of Commence- ment of Service in District.	Number of Attendances upon Patients, showing Location of Attendance (excluding Workers' Compensation and Midwifery Cases which are shown separately).				Number of Attend- ances upon Work- ers' Compensation Cases.		Number of all Attend- ances.		Mileage Covered.	
			Resi- dence.	Surgery.	Hospital.	TOTAL.	TOTAL.		1947.	1946.	1947.	1946.
							1947.	1946.				
Esperance ...	1,121	11.3.38	1,637	1,063	46	2,801	3	2	2,805	1,658	8,157	6,728
Evandale ...	1,962	1.7.47	730	837	...	1,567	6	...	1,578	...	4,184	...
Flinders ...	750	1.5.38	867	788	173	1,828	14	9	1,852	1,696	9,216	8,592
Glamorgan- Spring Bay	1,694	18.5.38	494	1,024	137	1,655	6	10	1,688	1,394	9,988	9,615
George Town...	1,070	5.1.40	1,217	1,362	130	2,709	...	...	2,709	1,606	14,059	7,984
Hamilton...	3,125	1.5.38	1,481	2,769	196	4,446	16	14	4,489	4,329	18,325	15,253
Kingborough- Bruny ...	5,405	1.3.38	2,939	3,599	20	6,558	93	26	6,652	1,982	14,401	14,917
King Island ...	1,500	1.9.38	572	4,657	363	5,592	58	67	5,689	6,525	5,381	6,592
New Norfolk...	8,000	9.8.46	1,546	7,585	487	9,618	45	...	9,685	1,673	22,535	4,691
Penguin ...	2,880	13.7.38	1,034	2,402	...	3,436	6	...	3,442	3,675	7,798	7,602
Port Cygnet...	2,890	1.7.40	1,287	3,007	30	4,324	33	6	4,394	3,171	9,568	7,902
Portland ...	1,400	14.6.39	1,939	3,109	...	5,048	35	21	5,084	4,858	6,625	6,916
Ringsbrook ...	4,849	1.1.40	861	2,757	34	3,652	50	50	3,702	3,769	9,988	10,563
Scottsdale...	2,754	5.8.39	1,410	3,992	1,444	6,846	51	13	6,898	5,912	11,953	10,692
Sorell... ..	2,373	1.12.38	1,383	2,747	235	4,365	40	40	4,417	3,100	7,426	9,479
Tasman ...	1,330	21.4.38	823	787	89	1,699	8	...	1,715	1,664	10,076	9,098
Totals ... ..	43,103	...	20,270	42,490	3,384	66,144	464	258	66,794	47,012	170,180	136,624



There is very close liaison between these officers and the nearest major base hospital, so that full advantage can be taken of specialties available at those hospitals. Practically every district served by Government Medical Officers has also a bush nursing centre or cottage hospital, which works in close co-operation with the doctor. This leads to a very high standard of work, both as regards health education, prevention of and treatment of disease.

All officers of this service are well equipped with surgical instruments, and also X-ray apparatus, anaesthetic machines and small laboratory equipment.

A further medical officer's residence has been completed at St. Helens, and it is hoped to have a residence available at an early date at Evandale and Tasman.

Detailed information in respect of the services rendered during the year is summarised in Table J on page 15.

B. M. CARRUTHERS, M.B., F.R.San.I.,

Director of Hospital and Medical Services.

### APPENDIX III.

#### REPORT OF THE NURSES' REGISTRATION BOARD FOR THE YEAR ENDED 31st DECEMBER, 1947.

##### *Personnel of Board.*

Chairman: Dr. B. M. Carruthers, Director of Hospital and Medical Services.  
Superintendent, Royal Hobart Hospital (Dr. P. Braithwaite).  
Superintendent, Launceston General Hospital (Dr. C. Craig).  
Dr. T. C. Butler.  
Miss J. O. Brown, Matron, Royal Hobart Hospital.  
Miss C. I. Skirving, Matron, Launceston General Hospital.  
Miss B. L. Campbell, Matron, Devon Public Hospital.

##### *Board Meetings.*

The Board held five ordinary meetings and one special meeting during the year.

##### *Legislation.*

The Nurses' Registration Act was amended to provide for the registration of Child Welfare and Tuberculosis Nurses. The regulations were also amended in this direction.

##### *Training Schools.*

Training schools registered.—General, 9; midwifery, 6; mental, 1; child welfare, 2; tuberculosis, 1.

##### *Trainees.*

Applications for training.—General, 150; midwifery, 101; child welfare, 18.  
Commenced training.—General, 153; midwifery, 86; mental, 4; child welfare, 26.  
Completed training.—General, 61; midwifery, 72; mental, 4; child welfare, 14.  
Resigned before completion of training.—General, 99; midwifery, 15; child welfare, 1.  
In training as at 31.12.47.—General, 317; midwifery, 56; mental, 19; child welfare, 12.

##### *Examinations.*

##### *Educational examinations for intending trainees—*

Number held	3
Number of candidates	16
Results:	
Passed	3
Failed	13

##### *Examinations for the registration of nurses—*

Number held	3
	General. Midwifery. Mental.
Number of candidates	74 67 2
Results:	
Passed	68 61 2
Failed	6 6 0

##### *Registration of Nurses.*

	General. Midwifery. Mental.
Applications approved	303 169 5
Registrations renewed	645 299 35
Total registrations as at 31.12.47	784 349 37

##### *Number of individual persons registered as at 31.12.47—*

General certificate only	502
Midwifery certificate only	71
Mental certificate only	33
General and midwifery certificates	278
General and mental certificates	4

##### *General.*

It is interesting to note that the number of registrations during 1947 was 477, compared with 318 in 1946 and 266 in 1945. However, the shortage of nurses is still acute. Most of the nurses who have registered have been either visiting nurses, whose average stay has been a few weeks only; or nurses from other States, who have come to Tasmania for midwifery and/or child welfare training. Many of these remain for a short period to serve in hospitals where they can obtain further practical work in the course they have just completed.

During the year much thought has been given to methods of obtaining further trained staff, and inducing young ladies to take up nursing as a profession. Applications were first made to the Immigration Department for trained and partially trained nurses from Great Britain. The number obtained in this direction was few, and representation was then made for trained nurses from displaced personnel of Europe. This field has only recently been explored, but it is hoped it will yield improving results in the near future. Conferences between the Board and the Education Department have been held with the object of including in the school curriculum subjects pertaining to nursing, so that girls may be encouraged during their last year at school to become interested in, and attracted to, the nursing profession.

Consideration has also been given to the training of student nurses to ensure that, while the academic side of training is not neglected, the practical side receives much more attention.

B. M. CARRUTHERS, Chairman.  
P. A. DRISCOLL, Secretary.



## APPENDIX IV.

REPORT OF ST. JOHN'S PARK FOR THE YEAR  
ENDED 30TH JUNE, 1948.

## Statistics.

Number resident, 30.6.47	336
Admissions during the year	228
Total	564

## Less—

Discharges	159
Died	51
	210

Patients resident, 30.6.48	354
----------------------------	-----

## Admissions.

Admissions totalled 228 (165 males and 63 females). These figures show a decrease compared with those for the previous year, when 287 persons (192 males and 95 females) were admitted.

## Discharges.

There were 159 discharges (114 males and 45 females). These figures show a decrease compared with those for 1946/47 when 172 (108 males and 64 females) were discharged.

## Mortality.

The number of deaths was 51 (36 males and 15 females). The average age of the people who died in the Institution was 76.05 years.

## Daily Average.

The daily average number of inmates was 345.32 (213.02 males and 132.30 females), compared with 327.01 (200.05 males and 126.96 females) for the previous year.

## Revenue.

The revenue received from all sources amounted to £19,636 15s. 10d., which was £6,330 16s. 9d. more than that collected the previous year.

## Expenditure.

The total expenditure for the upkeep of the Institution was £58,610 17s. 2d., being an increase of £7,567 1s. compared with the previous year. The net cost was £38,974 1s. 4d.

## Gross and Net Cost of Maintenance.

There was an increase in the gross cost, but the net cost was slightly reduced, as shown hereunder:—

	£	s.	d.
Gross daily cost per inmate, 1947/48	0	9	3.29
Gross daily cost per inmate, 1946/47	0	8	6.63
Net daily cost per inmate, 1947/48	0	6	2.01
Net daily cost per inmate, 1946/47	0	6	3.88
Gross weekly cost per inmate, 1947/48	3	4	11.03
Gross weekly cost per inmate, 1946/47	2	19	10.41
Net weekly cost per inmate, 1947/48	2	3	2.07
Net weekly cost per inmate, 1946/47	2	4	3.16

## Thanks for Donations.

On behalf of the inmates of St. John's Park, I desire to thank all those kind persons who again so generously provided gifts of money and goods for their comfort during the year.

## Devotional.

During the year, the spiritual welfare of the inmates was given every attention by the various denominations, services being held regularly at the Institution.

L. WOODHOUSE, Managing Secretary.

SECTION III.—REPORT OF DIRECTOR OF TUBERCULOSIS FOR THE YEAR ENDED  
31ST DECEMBER, 1947.

During the year steady progress has been maintained in all activities, and the statistics appended hereto present a fairly complete statement regarding cases of Pulmonary Tuberculosis, with which this branch of the Department is mainly concerned.

## ACCOMMODATION FOR PATIENTS.

With the completion of additional wards at the Tasmanian Sanatorium, and the opening of the Perth Sanatorium for male patients, the average length of time between notification and admission to sanatoria was short, and it can be claimed that during 1947 very few patients were unable to obtain a bed in a Sanatorium.

The present tendency is to encourage patients to remain in sanatoria for treatment over longer periods, and this practice necessarily requires a larger number of beds being available, but difficulty has been experienced in persuading patients to accept this advice, and 20 patients were discharged for domestic or temperamental reasons, and 6 recalcitrant patients refused to enter sanatoria for treatment.

## DISCOVERED CASES.

The number of pulmonary cases notified during the year was 170—88 males and 82 females.

These cases were distributed throughout the State as follows:—Launceston and North-East, 49; North-West Coast, 22; Hobart and Southern Tasmania, 93; and West Coast, 6. Tables setting out particulars of age and sex distribution, mode of discovery, occupation, &c., are attached. Significant figures are those contained in the group over 44 years of age, both as regards cases discovered and deaths, and indicate that this group requires a more careful supervision than has hitherto been considered necessary.

*Mode of Discovery.*—The Mass X-ray was responsible for discovering 46 cases, and the Chest Clinics 30 cases, thus demonstrating the great value of these methods. With regard to the Mass X-ray Units, however, it has to be remembered that the discovered cases have been detected from persons who voluntarily submit themselves for examination, and this illustrates the desirability of some legislation being introduced for the compulsory examination of all persons over the age of 14 years.

A number of recommendations submitted for the consideration of the National Health and Medical Research Council were approved, including—



- (1) That legislation be introduced by all States to enable Public Health authorities to restrain the recalcitrant patients, e.g. the sputum positive careless patient, and the chronic alcoholic; and
- (2) That examination be ordered of known infectious cases, and all individuals who are suspected of being infectious cases but persistently refuse investigation.

*Family History.*—The findings in the matter of family history are also significant, and this supports the attempt to segregate the active cases, even though it is borne in mind that it is quite possible there is a predisposition to Tuberculosis in certain families who have inherited a poor power of resistance against the disease.

#### GENERAL.

The Commonwealth Director of Tuberculosis (Dr. H. Wunderly), the Principal Repatriation Medical Officer (Dr. Ken Smith), and the Chief Tuberculosis Officer for the Repatriation Department (Dr. A. Pennington) conferred with the State Director of Tuberculosis (Dr. T. H. Goddard) and the Government Architect (Mr. C. D. Rose) concerning projected new buildings, and it was decided to proceed at an early date with the erection of a Sanatorium at New Town, comprising 220 beds (40 beds to be reserved for repatriation cases and 30 for bone and joint patients), and also a Sanatorium at Launceston, comprising 110 beds (10 beds to be reserved for repatriation cases).

Agreement was also reached regarding the setting up of a Thoracic Surgery Centre at Vaucluse Hospital, and an arrangement made for Dr. A. Pennington to treat pneumolysis cases for civilians in addition to repatriation patients.

Consideration has also been given to the use of B.C.G. vaccine, and it is reported that this agent is being used on a voluntary basis for the vaccination of Mantoux negative nurses and medical students, and for children who are compelled to live in infected households.

Streptomycin is also being used to a limited extent in accordance with the recommendations of the Streptomycin Committee.

The distribution of the booklet "What You Should Know About Tuberculosis" is proceeding satisfactorily, and eventually it is hoped this booklet will have reached every home in Tasmania. The facilities provided by Radio and Cinema for the dissemination of information regarding the disease are being widely used.

#### SUPERVISION OF NURSES.

*Royal Hobart Hospital.*—All members of the staff, trained and untrained, who are Mantoux negative are subjected to three-monthly tests and, if there is no loss of weight, are X-rayed six-monthly. Trainees who commence with positive Mantoux, or who have changed and have normal B.S.R. and X-ray N.A.D., are X-rayed and have B.S.R. taken three-monthly.

During the year 11 members of the staff changed from negative to positive. Of these, 3

trainees were in their first year, 2 in their second, 1 in her third, and 1 in her fourth, whilst 4 were members of the trained staff.

Of the 51 new probationers who commenced in the general wards during 1947, 5 gave initial positive reactions and 1 changed Mantoux. Of the new probationers who commenced in the obstetric wards, 12 gave initial positive reactions and 2 changed Mantoux.

Of the 34 members of the trained staff who commenced during the year, 17 gave initial positive reactions and 3 changed Mantoux.

In all, 6 members of the staff had extended sick leave of three months. Three trainees and 2 members of the trained staff had two-monthly X-ray, B.S.R. and examination by doctor. All proved satisfactory.

No cases of pleurisy with effusion occurred among the nurses during the year.

*Launceston General Hospital.*—Seven trainees, 2 members of the trained staff and 2 medical orderlies gave initial positive reactions. Both the Sisters were trained at other hospitals, where apparently no records were kept.

Seven trainees changed to positive in repeated tests; 2 being in their first year, 4 in their second, and 1 in her third.

#### TUBERCULOSIS ALLOWANCES.

Payments continued to be paid to sufferers, from money provided by the Commonwealth Government. During the year, allowances for man and wife were increased from 15s. to 25s. per week, plus 5s. for each child; whilst the rate of 10s. per week remained the same as previously for single persons.

As at the 31st December, 1947, 160 persons were receiving allowances under the above-mentioned scheme; 86 of these having dependants. The average rate of payment was £1 15s. per week.

It is hoped that payments will be still further increased in the coming year.

#### NOTIFICATIONS.

During the year 207 cases of Tuberculosis were notified to the Department of Public Health—170 pulmonary and 37 non-pulmonary.

The municipalities from which they came will be found under Table A. in Section I. (Report of Director of Public Health).

TABLE K.

*Return showing Age and Sex Distribution, Mode of Discovery, Predominant Symptom on Discovery, Stage on Discovery, Occupation, and Family History of Cases of Pulmonary Tuberculosis Notified during the Year 1947.*

#### Age and Sex Distribution.

Group	Males	Females	Total
Under 15 years ...	...	2	2
15 years and under 25 years ...	19	27	46
25 " " 35 " ...	21	21	42
35 " " 45 " ...	14	12	26
45 years and over ...	34	20	54
TOTAL ...	88	82	170



*Mode of Discovery.*

By chest clinics (examined because they were contacts)	22
By chest clinics (not as contacts)	8
By public hospitals	47
By private physicians	47
By mass X-ray examinations	46
<b>Total</b>	<b>170</b>

*Predominant Symptom on Discovery.*  
(103 Cases.)

Cough	50
Haemoptysis	23
Pleurisy with effusion	11
Loss of weight	10
Pneumonia	3
Pain in chest	2
Asthma	1
Dyspnoea	1
Fever	1
Laryngitis	1

*Stage on Discovery.*

Minimal	52
Moderately advanced	69
Far advanced	27
Undetermined	22
<b>Total</b>	<b>170</b>

*Occupation.*

Household duties	49
Labourer	27
Ex-military service	10
Clerk	9
Pensioner	6
Mental hospital inmate	5
Shop assistant	5
Nurse	4
Farmer	3
School teacher	3
Schoolgirl	3
Telephonist	3
Barman	2
Bootmaker	2
Chef	2
Electrician	2
Policeman	2
Postal assistant	2
Tailor	2
Bookbinder	1
Bookmaker	1
Butcher	1
Carpenter	1
Hairdresser	1
Hospital attendant	1
Laundress	1
Painter	1
Printer	1
Textile worker	1
Yardman	1
Other	18
<b>Total</b>	<b>170</b>

*Family History.*  
(40 Cases.)

Mother was a notified case in 4 instances.  
 Father was a notified case in 5 instances.  
 Brother was a notified case in 11 instances.  
 Sister was a notified case in 5 instances.  
 Husband was a notified case in 2 instances.  
 Wife was a notified case in 1 instance.  
 Son was a notified case in 3 instances.  
 Daughter was a notified case in 2 instances.  
 Brother-in-law was a notified case in 1 instance.  
 Uncle was a notified case in 2 instances.  
 Aunt was a notified case in 1 instance.  
 Grandmother was a notified case in 1 instance.  
 Niece was a notified case in 1 instance.  
 Cousins (2) were notified cases in 1 instance.

## DEATHS.

TABLE L.

*Return showing Deaths from Pulmonary Tuberculosis during the Year 1947.*

Group	Males	Females	Total
Under 15 years ...	3	1	4
15 years and under 25 years ...	2	14	16
25 " " " 35 " ...	10	14	24
35 " " " 45 " ...	9	6	15
45 years and over ...	24	10	34
<b>TOTAL</b> ...	<b>48</b>	<b>45</b>	<b>93</b>

There were 13 deaths from non-pulmonary Tuberculosis—2 Abdominal, 7 Bone, and 4 Renal.

## TREATMENT.

TABLE M.

*Return showing Treatment Centres of Cases of Pulmonary and Non-Pulmonary Tuberculosis during the Year 1947.*

*Pulmonary.*

Tasmanian Sanatorium	89
Ward 20, Launceston General Hospital	14
Perth Sanatorium	5
Lachlan Park Hospital	4
Royal Hobart Hospital	11
Repatriation Hospital	18
Own homes (including a number who remained at home on the advice of the physician who supervised their domiciliary treatment, and 6 who refused sanatorium treatment, although beds were available for them)	29
<b>Total</b>	<b>170</b>

*Non-Pulmonary.*

Royal Hobart Hospital:	
Bone and Joint	17
Genito-Urinary	3
Launceston General Hospital:	
Bone and Joint	6
Genito-Urinary	2
Devon Public Hospital:	
Genito-Urinary	1
Own homes:	
Miscellaneous	8
<b>Total</b>	<b>37</b>

TABLE N.

*Tasmanian Sanatorium—Return showing Admissions, Discharges and Deaths during the Year 1947.*

	Males	Females	Total
In residence on 31.12.46	27	47	74
Admitted during year—			
Early	8	22	30
Moderately ill	37	48	85
Advanced	22	18	40
	67	88	155
Total in residence	94	135	229
Discharged—			
Quiescent	13	14	27
Improved	27	39	66
Not improved	13	14	27
	53	67	120
Died	12	18	30
	65	85	150
In residence on 31.12.47	29	50	79

Average length of stay—138 days.



TABLE O.

*Tasmanian Sanatorium—Return showing Treatments, &c., Carried Out during the Year 1947.*

New artificial pneumothorax cases	26
A.P. refills	524
Pneumoperitoneal refills	14
X-ray examinations (including staff)	534
B.S.R. examinations	398
Thoracoplasty	11
Phrenic crush	17
Pneumolysis	6

## CHEST CLINICS.

TABLE P.

*Particulars of Work Performed by Chest Clinics during the Year 1947.*

## First Examinations.

	Hobart.	Launceston.
People referred to Chest Clinics from Mass X-ray for further investigation	255	116
People referred by doctors because of suspicious symptoms		
Contacts of known cases examined for first time	364	366
People examined at Chest Clinics and admitted to Sanatorium	89	44
Cases of Tuberculosis discovered in contacts examined	11	11
Cases of Tuberculosis discovered in contacts under observation	7	

## Re-examinations.

Cases and observation cases	1339	865
Contacts	1255	472

## Treatments and Investigations.

Pneumothorax refills	356	345
X-ray examinations (films)	696	899
X-ray examinations (screenings)	229	
Gastric lavages	26	
B.S.R.'s	501	30
Sputum examinations	624	282

## Visits to Homes by Clinic Sisters.

First visits	101	49
Re-visits	794	331
Special visits (after-care)	9	

## Total Attendances—Old and

New Cases

	6334	3034
--	------	------

## MASS X-RAY EXAMINATIONS.

*Hobart Unit.*—The total number of persons who presented themselves during the year for X-ray on the miniature films in the Hobart Survey was 10,665.

TABLE Q.

*Return showing Results of Large X-ray Film Examination of Persons Recalled—Hobart Survey.*

Group.	No. of Persons.
Persons passed on large films (no abnormality discovered)	156
Persons with non-tuberculous conditions (see Table R)	76
Persons with previously diagnosed tuberculosis:—	
Not healed	—
Healed	5
Persons with tuberculous lesions requiring no action:—	
Healed primary tuberculosis	26
Healed secondary tuberculosis	1
Persons with newly discovered "significant" tuberculous lesions (see Table S):—	
Notified for treatment	25
Notified for observation	8
Total	297

TABLE R.

*Return showing Non-Tuberculous Conditions in Mass Radiography—Hobart Survey.*

Condition.	No. of Cases.
Basal fibrosis	4
Bronchiectasis	2
Bronchitis	10
Broncho-pneumonia	1
Cardiac	4
Consolidation of unknown origin	2
Dextrocardia	1
Enlarged thyroid	2
Fibrosis of lung	9
? Hydatid	2
Hydatid of lung	1
Hernia of liver	1
? Malignant of lung	1
Old rib resection	1
Pleural effusion	1
Raised right dome	3
Rib abnormality	4
Scoliosis	21
Secondary malignant	1
Thickened pleura	5
Total	76

TABLE S.

*Return showing Newly Discovered "Significant" Tuberculous Lung Lesions in respective Age Groups—Hobart Survey.*

Group	Treatment			Observation		
	Males	Females	Total	Males	Females	Total
Age						
Under 14	—	—	—	—	—	—
14 to 19	5	3	8	—	—	—
20 to 24	—	1	1	—	—	—
25 to 34	5	5	10	1	—	1
35 to 44	2	—	2	3	2	5
45 to 54	1	—	1	2	—	2
55 and over	2	1	3	—	—	—
Total	15	10	25	6	2	8

*Mobile Unit.*—The total number of persons who presented themselves during the year for X-ray on the miniature films in the Mobile Unit Survey was 22,597.

TABLE T.

*Return showing Results of Large X-ray Film Examination of Persons Recalled—Mobile Unit Survey.*

Group.	No. of Persons.
Persons passed on large films (no abnormality discovered)	274
Persons with non-tuberculous conditions (see Table U)	149
Persons with previously diagnosed tuberculosis:—	
Not healed	1
Healed	7
Persons with tuberculous lesions requiring no action:—	
Healed primary tuberculosis	36
Healed secondary tuberculosis	13
Persons with newly discovered "significant" tuberculous lesions (see Table V.):—	
Notified for treatment	22
Notified for observation	31
Total	533



TABLE U.

*Return showing Non-Tuberculous Conditions in Mass Radiography—Mobile Unit Survey.*

Condition.	No. of Cases.
Atelectasis	2
Basal fibrosis	8
Bronchiectasis	3
Broncho-pneumonia	1
Cardiac	12
Chronic bronchitis	12
Congenital cardiac	2
Consolidation of unknown origin	1
? Cyst of lung	1
Dextrocardia	2
Diaphragmatic hernia	1
Enlarged thyroid	1
Fibrosis of lung	13
Hernia of abdominal organ	1
Hydatid of lung	4
? Hydatid of lung	2
? Mediastinal tumor	1
? Neoplasm	1
Old pleurisy	1
Old silicosis	1
Organised pleural effusion	2
Raised right dome	4
Rib abnormality	14
Scoliosis	47
Silicosis	6
? Sub-phrenic tumor	1
Thickened pleura	4
? Tumor of lung	1
<b>Total</b>	<b>149</b>

TABLE V.

*Return showing Newly Discovered "Significant" Tuberculous Lung Lesions in respective Age Groups—Mobile Unit Survey.*

Group	Treatment			Observation		
	Males	Females	Total	Males	Females	Total
Age						
Under 14 ...	—	—	—	—	1	1
14 to 19 ...	—	2	2	—	—	—
20 to 24 ...	—	1	1	1	—	1
25 to 34 ...	2	1	3	2	3	5
35 to 44 ...	7	3	10	5	4	9
45 to 54 ...	3	—	3	5	—	5
55 and over ...	2	1	3	8	2	10
<b>Total</b>	<b>14</b>	<b>8</b>	<b>22</b>	<b>21</b>	<b>10</b>	<b>31</b>

## STAFF.

It is desired to again express appreciation of the support and co-operation of members of the staff during the year.

T. H. GODDARD, M.B.,

Director of Tuberculosis.

#### SECTION IV.—REPORT OF DIRECTOR OF MENTAL HYGIENE FOR THE YEAR ENDED 31ST DECEMBER, 1947.

During 1947 psychiatric clinics were conducted at the four major general hospitals and the Public Health Department. In all, 1839 patients were seen. Psychiatric clinical work at the Royal Hobart Hospital and Launceston General Hospital having increased, it has been necessary to utilize the services of an assistant at both hospitals.

The indications are that psychiatric services will be increasingly in demand at the larger general hospitals. In Hobart there would appear to be a need for a full time psychiatric clinic. It is to be hoped that, in the rebuilding of the new Out-patients' Department at the Royal Hobart Hospital, some provision will be made for such a clinic where the services of various State psychiatric medical officers could be utilized as assistant out-patient psychiatrists. This would not only give them the opportunity of follow-up of their own cases discharged from Lachlan Park or Millbrook, but would give those medical officers extra mural interests and would bring them into closer contact with general medicine.

In the event of extensions being made at the various general hospitals, it is suggested that special psychiatric wards be included. It is impossible to divorce mental from physical illness. The two frequently overlap and it is desirable to have close co-operation between these two branches of medicine.

The Minister for Health recently announced that plans for the erection of a completely new mental hospital are nearing completion. It is

to be hoped that these plans may be put into operation in the near future, because until such time it is impracticable to do much in creating an institution for the care and control of mental defectives. When the existing hospital has been eventually vacated, it is intended to demolish the older obsolete buildings, but to retain the newer and more structurally sound buildings for conversion into an Institution for Defectives.

As there is at present no provision for dealing with the apparently insane, it is proposed to introduce legislation for the setting up and control of a Reception House, whereby patients could be admitted for observation and treatment before being committed to the Lachlan Park Mental Hospital. This would mean in many instances patients would be discharged from the Receiving House without having to be declared actually insane and move on to Lachlan Park proper. It is recommended that the Receiving House be in the proximity of the new Hospital. It would merely necessitate two of the proposed new wards being set aside for this particular purpose. Consideration could be given to the advisability of setting up a northern Receiving House at Launceston attached to the General Hospital. It could be controlled by a medical officer experienced in psychiatry, who could in addition perform duties as psychiatrist to that Hospital.

Possibly one of the most pressing of administrative and social problems encountered during the year was the hospitalisation and eventual



disposal of elderly patients. This problem has become more accentuated during the past few years owing to the following factors:—

- (1) Inability of private rest homes to carry on owing to shortage of staff and increased costs.
- (2) Lack of domestic help in private homes.
- (3) Unsatisfactory housing situation and limitation in size of houses recently built.

Unfortunately too many of such patients are disposed of by means of admission to Lachlan Park simply because no other institution is available for their reception. It is a reflection on existing society that, merely because of weakening of mental faculties due to old age, elderly people are certified to a mental hospital with the prospect of being so confined for the rest of their lives. The immediate answer to this problem is to extend St. Johns Park or the Home for Invalids, possibly both.

Plans are in hand and a grant has been made for the purchase of an electroencephalograph for the use of the Division of Mental Hygiene. It is expected that this would be housed at the Royal Hobart Hospital or some other central place in Hobart, and that patients requiring recordings would be transported there. An Officer of the Department has spent a month in Sydney learning the general running of an electroencephalographic unit, with a view to establishing such a unit in Tasmania.

During the year 22 lectures on mental hygiene were given by officers of the Division to various organisations.

#### Summary of Patients Seen during the Year 1947.

	Number of Sessions.	Total Number of Patients Seen.
Public Health Department, Hobart	—	300
Royal Hobart Hospital	53	878
Launceston General Hospital	33	464
Devon Public Hospital, Latrobe	9	122
Spencer Public Hospital, Wynyard	4	35
Other Centres	—	40
<b>Total</b>	—	<b>1839</b>

The following reports are appended:—

Appendix V.—Summary of Patients Seen by the Psychologist during the Year 1947.

Appendix VI.—Report of the Chairman, Mental Deficiency Board.

Appendix VII.—Report of the State Psychological Clinic.

Appendix VIII.—Report of Lachlan Park Hospital, New Norfolk.

Appendix IX.—Report of Millbrook Psychopathic Home.

CHARLES R. D. BROTHERS, M.D., M.R.A.C.P.,  
Director of Mental Hygiene.

#### APPENDIX V.

##### Summary of Patients Seen by the Psychologist during the Year 1947.

	Number of Visits.	Total Number of Patients Seen.
Public Health Department, Hobart	—	222
Royal Hobart Hospital Clinic	46	33
Other Centres in Hobart	33	138
Launceston and Launceston General Hospital	28	40
Devon Public Hospital, Latrobe	10	15
Spencer Public Hospital, Wynyard	8	23
Other Centres	5	—
<b>Total</b>	—	<b>471</b>

#### APPENDIX VI.

##### REPORT OF THE CHAIRMAN, MENTAL DEFICIENCY BOARD, FOR THE YEAR ENDED 31ST DECEMBER, 1947.

As will be seen from the figures, an increasing number of defectives is coming under the care and control of the Board, a total of 153 being so placed at the end of the year.

The chief problem facing the Board at the present time is the question of institutional accommodation for these defectives, and, although plans are in hand for the extension of the institution at New Norfolk so that a further 10 to 12 male mental defectives may be housed there, this will not entirely meet the requirements of the Board. It is felt that, until the Board can have its own institution under the control of a qualified medical superintendent, little will be achieved in the way of effective social rehabilitation for defectives and the prevention of defective children from becoming social problems. At the present time, there is still no institution for the care, control and education of mentally defective children, and there appears to be little prospect of obtaining one until after the new Mental Hospital has been built.

Occupational therapy is limited in scope, and it is felt that the provision of a large institution where all defectives could be housed would simplify this problem, since the children's school-rooms could be utilized later in the day for therapy for adults.

Another matter raised by the Board was the question of pensions paid to defectives. The Board agreed that in principle defectives should be encouraged where possible to earn an independent even if limited income. Most of those in institutions received pensions through the institutions, and the Board discussed the desirability of continuing this policy or whether it was more desirable that defectives should be paid for the work performed by them within the institution. It was finally decided, however, that the matter be left in abeyance until such time as a permanent and separate institution for mental defectives could be obtained.

#### Summary.

For the year ended 31st December, 1947, there was a total of 153 patients under the Board's control, apart from a large number known to be mentally defective, but not brought under active control because they are already in institutions such as St. John's Park or are adequately cared for by relatives at home.

The increasing number of defectives being notified to the Board and placed under some form of legal control is a further indication of the fact that their employment in the community is becoming increasingly difficult. More labour is available and, with higher wages, employers will not be prepared to put up with the difficulties contingent upon employing certified defectives or defectives who, though not certified, still require a disproportionate amount of care and supervision in their work. This trend was forecast in the report last year and the forecast would appear to be borne out. It is felt, however, that with early training along the right lines, it would be possible to rehabilitate more of these defectives and return them to community life than is at present possible.

CHARLES R. D. BROTHERS, M.D., M.R.A.C.P.,  
Chairman.

#### APPENDIX VII.

##### REPORT OF THE STATE PSYCHOLOGICAL CLINIC FOR THE YEAR ENDED 31ST DECEMBER, 1947.

During the year 1947, a total of 219 new cases, apart from a number of old cases, was examined by the State Psychological Clinic. Of these 135 were males and 84 females. The classification of these cases is shown below:—

Vocational guidance was given to 9 male patients. Emotional guidance was given in the case of 8 males and 5 females, a total of 13.



Of the remainder who were examined, 28 males and 19 females were found to be of normal or superior intelligence. Forty-six males and 28 females were of inferior intelligence. Those who were classified as mentally defective were 35 males and 26 females. A further 9 males and 6 females were ascertained to be imbeciles. Amongst the cases noted above, 13 were referred by the Court, Gaol, Magistrates, or Probation Officers, and 4 by the Children's Court. The work of the Clinic was carried out at Hobart, Launceston, Latrobe, and Wynyard.

CHARLES R. D. BROTHERS, M.D., M.R.A.C.P.,  
Director of Clinic.

#### APPENDIX VIII.

#### REPORT OF LACHLAN PARK HOSPITAL FOR THE YEAR ENDED 30TH JUNE, 1948.

The year closed with 648 patients resident in the Hospital and 78 on Trial Leave. There were 725 certified insane on the hospital books and 1 voluntary boarder.

A feature of the year was the increased use of physical methods of treatment, not only in recent admissions, but in chronic and disturbed patients, with much benefit to the latter.

Occupational Therapy has been extended in the Male Division and the Red Cross Society has provided instructors in Craft Work for returned servicemen and others.

Unfortunately Female Occupational Therapy has been restricted considerably by the loss of the instructor, Miss McCulloch, who has however found time to visit periodically and so this work has not altogether ceased. So far it has not been possible to obtain a full-time female Occupational Therapist.

Considerable progress has been made in repainting the interiors of buildings, due largely to the appointment of two extra painters.

A new sewerage system has been almost completed but two wards are still un-sewered.

WILLIAM J. FREEMAN, M.R.A.C.P., Chairman.  
J. J. DWYER.  
W. R. C. RYAN.  
CHARLES R. D. BROTHERS, M.D., M.R.A.C.P.

Minor repairs have been carried out to buildings by the artisan staff but the main defects, described in previous reports, still remain. An entirely new hospital is an urgent requirement.

The shortage of nurses has been eased somewhat by the appointment of a number of English and Baltic immigrants, and of several trained psychiatric nurses from other States of the Commonwealth. The position, however, is still far from satisfactory. There is an increasingly acute shortage of trained psychiatric nurses and, unless more young women can be induced to do the course of training, there will soon be insufficient experienced nurses for the safe management of the wards.

Great credit must be given to the senior members of the nursing staff who have stood by the hospital through a very difficult period, though some are not in good health and a number are approaching retiring age.

The Assistant Sub-Matron resigned during the year and it is with regret that I report that the Matron is on Sick Leave.

The Male Division is by comparison well staffed but a number of attendants have left during the year for more remunerative jobs.

The state of buildings on the hospital Farm is generally unsatisfactory and unhygienic and efforts are being made to have this rectified.

The Canteen was completed during the year and it has been a decided asset to both patients and visitors. Members of the Hobart Auxiliary serve in the Canteen in an honorary capacity on Sundays.

As usual the Hobart, Launceston, and North-West Coast Auxiliaries have contributed very generously to the welfare of patients. Their members cannot be praised too much for their zeal and energy in providing comforts, clothing and other extras. Their valuable work is much appreciated by the patients.

Appended are the Statistical Tables for the Year 1947/48. A Table showing the Length of Residence of Patients has been omitted because it is considered that the figures obtainable do not present a true picture of the facts. This is because a number of patients go out on trial leave for short periods, perhaps for a week-end, thus making their period of residence discontinuous.

J. R. V. FOXTON, Medical Superintendent.

Official Visitors, Lachlan Park Hospital, 1948.

TABLE 1.

Table showing Admissions, Re-Admissions, Discharges and Deaths during the Year 1947-48.

	Males.	Females.	Total.	Males.	Females.	Total.
In Hospital on 30th June, 1947.....	...	...	...	312	351	663
Admitted for first time during 1947-48.....	52	58	110			
Admitted for second or more times during 1947-48.....	10	16	26			
Returned from Trial Leave during 1947-48.....	43	28	71			
Total Admitted and Returned.....	...	...	...	105	102	207
Total under care during 1947-48.....	...	...	...	417	453	870
Discharged from Hospital, 1947-48—						
Recovered.....	6	0	6			
Improved.....	6	3	9			
Unimproved.....	3	2	5			
Allowed out on Trial Leave.....	73	70	143			
Deaths.....	29	30	59			
Total discharged or died.....	...	...	...	117	105	222
Remaining in Hospital on 30th June, 1948.....	...	...	...	300	348	648

TABLE 2.

Table showing number of Patients Proceeding on, Returning from, and Discharged from Trial Leave during the Year 1947/48.

	Males.	Females.	Total.	Males.	Females.	Total.
On trial leave on 30.6.47.....	...	...	...	23	30	53
Proceeded on trial leave during 1947/48.....	...	...	...	73	70	143
Total on trial leave during 1947/48.....	...	...	...	96	100	196
Returned to hospital from trial leave during 1947/48.....	43	28	71			
Discharged from trial leave during 1947/48.....	17	27	44			
Died whilst on trial leave.....	3	...	3	63	55	118
Remaining on trial leave on 30.6.48.....	...	...	...	33	45	78



TABLE 3.

Table showing the Manner in which Patients were Admitted during the Year 1947-48.

How Admitted.	Males.	Females.	Total.
Private Order.....	42	68	110
Justice's Order .....	2	0	2
Magistrate's Order .....	6	3	9
Governor's Warrant.....	4	0	4
Voluntary Boarders.....	8	3	11
Re-admit. from trial leave	43	28	71
	105	102	207

  

First Admission.....	52	58	110
Second " .....	8	9	17
Third " .....	1	5	6
Fourth " .....	1	2	3
Fifth Admission and over...	...	...	...
Returned from trial leave	43	28	71
	105	102	207

TABLE 4.

Table showing the Form of Mental Disorder on Admission for 1947-48, and the Form of Mental Disorder of Patients in Hospital on 30th June, 1948.

Form of Mental Disorder.	Admissions.			Remaining in Hospital.		
	Males.	Females.	Total.	Males.	Females.	Total.
I. Congenital Mental Deficiency:						
(a) With Epilepsy .....	3	3	6	13	12	25
(b) Without Epilepsy.....	14	8	22	105	87	192
II. Insanity occurring later in Life:						
1. Insanity with Epilepsy .....	1	2	3	7	11	18
2. Dementia Paralytica .....	2	...	2	6	1	7
3. Gross Brain Lesions .....	1	...	1	2	...	2
4. Alcoholic Psychosis.....	3	...	3	2	1	3
5. Toxic Confusional or Exhaustive Psychosis .....	1	2	3	...	1	1
6. Manic Depressive Psychosis.....	7	11	18	22	58	80
7. Involutional Melancholia .....	1	9	10	1	8	9
8. Schizophrenia .....	8	11	19	70	71	141
9. Paraphrenia and Paranoid Psychoses.....	2	4	6	22	28	50
10. Paranoia .....	1	...	1	6	6	12
11. Dementia—						
(a) Senile .....	14	22	36	10	37	47
(b) Presenile .....	...	1	1	2	2	4
(c) Secondary or Terminal.....	...	...	...	30	25	55
12. Hysteria .....	...	...	...	...	...	...
13. Psychopathic Personality .....	4	1	5	...	...	...
14. Huntingdon's Chorea .....	...	...	...	1	...	1
15. Parkinsonism .....	...	...	...	1	...	1
TOTAL ...	62	74	136	300	348	648







TABLE 7.

Table showing in Quinquennial Periods the Ages of Patients Admitted to and Discharged from the provisions of the Mental Hospitals Act, and of those that Died during the Year 1947/48, and of those remaining in hospital on 30th June, 1948.

Ages.	New Admissions.			Discharges from the Provisions of Act.									Deaths.			Remaining in Hospital at 30th June, 1948.							
				From Trial Leave.	From Hospital.			Total Discharges.															
	Males.	Females.	Total.		Males.	Females.	Total.				Re-covered.	Re-lieved.	Unim-proved.										
								Males.	Females.	Total.				Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	
Under 5 years .....	3	1	4	...	...	...	...	...	...	...	...	...	...	...	...	...	1	5	6				
5 yrs. and under 10...	1	1	2	...	...	...	...	...	...	...	...	...	...	...	...	...	11	3	14				
10 " " 15...	2	1	3	...	...	...	...	...	...	...	...	...	...	...	...	...	5	6	11				
15 " " 20...	...	5	5	1	1	2	...	...	...	...	...	...	1	1	2	1	13	10	23				
20 " " 25...	5	2	7	...	1	2	2	1	1	2	...	...	3	2	5	...	5	12	17				
25 " " 30...	5	5	10	1	5	6	...	...	2	1	3	...	2	2	3	8	11	1	2	3	16	18	34
30 " " 35...	4	4	8	2	5	7	...	...	1	1	...	...	3	5	8	...	1	1	26	20	46		
35 " " 40...	3	2	5	2	2	4	...	...	...	...	1	...	1	3	2	5	...	...	28	24	52		
40 " " 45...	7	1	8	1	...	1	1	1	1	...	1	1	...	1	4	...	3	3	29	29	58		
45 " " 50...	5	7	12	1	3	4	1	1	...	...	...	...	2	3	5	5	...	5	27	28	55		
50 " " 55...	2	8	10	2	3	5	...	...	...	...	...	...	2	3	5	1	2	3	25	27	52		
55 " " 60...	5	6	11	4	2	6	2	2	1	...	1	...	7	2	9	1	3	4	34	30	64		
60 " " 65...	4	8	12	1	...	1	...	...	...	...	...	...	1	...	1	...	2	2	29	34	63		
65 " " 70...	5	4	9	...	2	2	...	...	1	1	1	...	1	3	4	4	5	9	21	32	53		
70 " " 75...	2	5	7	1	1	2	...	...	...	...	...	...	1	1	2	5	1	6	8	35	43		
75 " " 80...	3	7	10	1	...	1	...	...	...	...	...	...	1	...	1	3	4	7	8	20	28		
80 " " 85...	5	6	11	...	1	1	...	...	...	...	...	...	...	1	1	5	4	9	5	13	18		
85 " " 90...	...	...	...	...	1	1	...	...	...	...	...	...	...	1	1	...	1	1	1	2	3		
90 " " 95...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...	...		
Unknown.....	1	...	1	...	...	...	...	...	...	...	...	...	...	...	3	...	3	8	...	...	8		
Totals .....	62	74	136	17	27	44	6	6	3	9	3	2	5	32	32	64	29	30	59	300	348	648	

TABLE 8.

Table showing the Causes of Deaths during the Year 1947/48.

Causes of Deaths.	Males.	Females.	Total.
<b>Diseases of the Nervous System—</b>			
Dementia Paralytica .....	2	—	2
Epilepsy .....	2	2	4
Idiocy .....	1	—	1
Progressive Bulbar Atrophy .....	—	1	1
Cerebral Haemorrhage.....	1	3	4
Involutional Melancholia.....	2	—	2
<b>Diseases of the Cardio-Vascular System —</b>			
Arteriosclerosis .....	7	1	8
Coronary Occlusion .....	4	—	4
Myocardial Degeneration .....	2	—	2
Hyperpiesia .....	1	—	1
<b>Diseases of the Respiratory System—</b>			
Broncho-pneumonia.....	4	13	17
Pulmonary Tuberculosis .....	—	1	1
<b>Diseases of the Digestive System —</b>			
Ulcerative Colitis .....	—	1	1
Prolapse of Rectum .....	—	1	1
Carcinoma of Pancreas .....	—	1	1
Carcinoma of Gall Bladder.....	—	1	1
<b>Other Diseases—</b>			
Senility .....	3	3	6
Mycosis Fungoides .....	—	1	1
Carcinoma of the Breast .....	—	1	1
Totals.....	29	30	59



TABLE 9.

Table showing Numbers of patients treated by Physical Methods and Results of Treatment.

Nature of Treatment	Complete Remission			Marked Improvement			Slight or Temp. Improvement			Not Improved			Totals		
	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total
Electro-Shock Therapy :—															
Recent Cases .....	9	7	16	1	6	7	...	3	3	...	2	2	10	18	28
Chronic Cases .....	...	6	6	14	7	21	38	5	43	8	4	12	60	22	82
Insulin Shock Therapy .....	5	3	8	7	2	9	8	2	10	4	1	5	24	8	32
Combined Insulin and Electro-Shock Therapy .....	2	8	10	...	2	2	...	...	...	...	...	...	2	10	12
* Malarial Therapy .....	...	...	...	...	...	...	1	...	1	2	...	2	3	...	3
Pre-Frontal Leucotomy (performed at Royal Hobart Hospital) .....	...	1	1	5	...	5	1	...	1	2	...	2	8	1	9
† Penicillin... ..	...	...	...	1	...	1	...	...	...	...	...	...	1	...	1
Totals ...	16	25	41	28	17	45	48	10	58	16	7	23	108	59	167

\* All were cases arrested many years ago with Malarial Treatment, who were deteriorating. All subsequently died.

† Congenital cerebral syphilis; too early to estimate full amount of improvement.

TABLE 10.

Statistical Record.

	Males	Females	Total
Population of Tasmania as at 31-12-47.....	135,715	132,839	268,554
Proportion of Certified Insane per 1000 of population (including patients on trial leave).....	2.446	2.951	2.699
Proportion of Admissions of Certified Insane per 10,000 of population (not including patients returned from trial leave).....	4.568	5.571	5.064

TABLE 11.

Financial Statement.

	YEAR ENDED—				
	30.6.44.	30.6.45.	30.6.46.	30.6.47.	30.6.48.
Average daily number of patients .....	645.4	651.78	657.36	656.36	658.47
Gross cost for year .....	£78,436	£81,949	£98,227	£105,332	£124,897
Fees received .....	£10,217	£9503	£9619	£9566	£9363
Other revenue .....	£168	£329	£270	£178	£185
Gross cost per head per day .....	6/7.7d.	6/10.5d.	8/2.2d.	8/9.48d.	10/4.38d.
Net cost per head per day .....	5/9.1d.	6/0.7d.	7/4.3d.	7/11.73d.	9/6.86d.
Farm—					
Loss and profit .....	(profit) £175	(profit) £11	(loss) £261	(profit) £833/4/6	...



## APPENDIX IX.

REPORT OF MILLBROOK PSYCHOPATHIC HOME  
FOR THE YEAR ENDED 30TH JUNE, 1948.

During the year 253 were admitted to the Home for treatment, a slight increase on the number for the previous year. At times it was found necessary to defer admissions for a short time owing to shortage of nursing staff but room was always found for urgent cases.

Inconvenience is caused because of the absence of properly planned treatment rooms for the newer physical treatments. This means that the small staff is used uneconomically and an unnecessary strain is placed upon them because treatments must be carried out simultaneously in different parts of the building. Treatment can only be centralised when patients of only one sex

happen to be receiving Insulin Therapy—an infrequent occurrence.

During the year the Housekeeper resigned and to date it has not been possible to fill the position. This creates an added burden for the nursing staff.

I would like to take this opportunity of thanking Sister G. McShane who, though in indifferent health, has helped us through several temporary shortages in the nursing staff.

It is with great pleasure that I report the conferring of the O.B.E. on the Matron, Miss D. McKendrick, by His Majesty The King on the occasion of his last birthday. Miss McKendrick has played an important part in the growth and success of this institution and, more important, in helping in the recovery of its patients.

J. R. V. FOXTON, Medical Superintendent.

TABLE 12.

## MILLBROOK PSYCHOPATHIC HOME.

Statement showing Form of Mental Disorder on Admission for year ended 30th June, 1948.

Diagnosis—	Males.	Females.	Total.
Anxiety Neurosis .....	37	47	84
Involuntional Melancholia .....	15	38	53
Schizophrenia .....	4	12	16
Manic Depressive Psychosis .....	7	11	18
Hysteria .....	8	10	18
Reactive Depression .....	25	17	42
Confusional Psychosis .....	...	1	1
Paranoia .....	1	...	1
Senile Dementia .....	...	1	1
Gross Brain Lesion .....	1	...	1
Parkinsonism .....	1	...	1
Tabs Dorsalis .....	1	...	1
Psychopathic Personality .....	8	3	11
Epilepsy .....	1	4	5
<b>TOTAL .....</b>	<b>109</b>	<b>144</b>	<b>253</b>

TABLE 13.

## MILLBROOK PSYCHOPATHIC HOME.

Financial Statement.

	YEAR ENDED—				
	30.6.44	30.6.45	30.6.46	30.6.47	30.6.48
Average Daily No. Patients .....	25.93	32.61	32.24	24.93	24.26
Gross Cost for Year .....	£4,401	£6,221	£8,801	£8,943	£9,249
Fees Received .....	£3,245	£4,589	£4,968	£3,276	£3,044
Gross Cost per Head per Day .....	9/3.4d	19/5.5d	14/11.5d	19/7.86d	20/10.03d
Net Cost per Head per Day .....	2/5.3d	2/8.9d	8/0.5d	12/3.45d	13/11.73d



# SECTION V.—VITAL STATISTICS SUPPLIED BY THE DEPUTY COMMONWEALTH STATISTICIAN.

## Statistical and General.

### Population:

Estimated on the 31st December, 1947—

Males	135,715
Females	132,839
<b>Total</b>	<b>268,554</b>

Mean population, 1947 (for whole year)—

Males	129,694
Females	128,125
<b>Total</b>	<b>257,819</b>

Mean population, 1946 (for whole year) .... 252,207

Increase for year ..... 5,612

The mean population of the State, as shown by the figures, reveals an increase of 5,612.

### Australian Birth-rate for the Year 1947 per 1000 Persons Living.

(As compared with the previous year and a year in the previous decade.)

	1933.	1946.	1947.
New South Wales	16.99	22.83	23.24
Victoria	15.60	23.05	23.06
Queensland	18.14	24.79	25.66
South Australia	15.32	24.89	25.24
Western Australia	17.95	24.56	25.58
Tasmania	19.93	27.15	27.69
Northern Territory	15.23	12.50	25.32
Australian Capital Territory	14.43	32.61	38.75
<b>Australia</b>	<b>16.78</b>	<b>23.62</b>	<b>24.06</b>

### Death Rate for 1947 per 1000 Persons Living.

(As compared with the previous year and a year in the previous decade.)

	1933.	1946.	1947.
New South Wales	8.58	9.70	9.53
Victoria	9.59	10.63	10.44
Queensland	8.84	9.77	9.15
South Australia	8.44	10.17	9.61
Western Australia	8.64	9.64	9.39
Tasmania	9.60	10.11	9.17
Northern Territory	12.55	5.21	5.96
Australian Capital Territory	4.19	5.16	5.62
<b>Australia</b>	<b>8.92</b>	<b>10.00</b>	<b>9.69</b>

## Deaths in Relation to Disease.

The following return shows the number and causes of deaths during the year 1947, also the death-rate per 10,000 persons living (mean population 257,819), as contrasted with the previous year, 1946 (mean population estimated at 252,207).

Cause of Death.	Number of Deaths, 1946.	Death Rate per 10,000 persons.	Number of Deaths, 1947.	Death Rate per 10,000 persons.
<b>General Diseases—</b>				
Typhoid Fever	...	...	...	...
Malaria	...	...	...	...
Smallpox	...	...	...	...
Measles	2	1	...	...
Scarlet Fever	...	...	2	1
Whooping Cough	...	...	4	2
Diphtheria and Croup	6	2	...	...
Influenza	9	4	4	2
Dysentery	...	...	1	...
Syphilis	8	3	15	6
Tubercular Diseases	118	4.7	107	4.2
Rheumatic Fever, Rheumatism, and Gout	21	8	10	3
Cancer, all forms	296	11.8	298	11.6
Dietic Diseases and Industrial Poisoning	...	...	...	...
Other General Diseases	117	4.6	90	3.4
<b>Total General</b>	<b>577</b>	<b>22.9</b>	<b>531</b>	<b>20.6</b>
<b>Local Diseases—</b>				
Diseases of Nervous System	281	11.1	247	9.6
Diseases of Circulatory System	729	28.9	748	29.0
Diseases of Respiratory Organs	236	9.4	191	7.4
Diseases of Digestive Organs	112	4.4	102	4.0
Diseases of Genito-Urinary System	180	7.1	154	6.0
Diseases of Puerperal Origin	18	7	14	5
Diseases of the Skin	6	2	3	1
Diseases of Bones and Malformations	28	1.2	26	1.0
Diseases of Early Infancy	139	5.5	128	5.0
<b>Total Local Diseases</b>	<b>1729</b>	<b>68.5</b>	<b>1613</b>	<b>62.6</b>
<b>Deaths Produced by External Causes—</b>				
Accident or Negligence	162	6.5	145	5.6
Homicide	1	...	3	1
Suicide	23	9	26	1.0
<b>Total External Causes</b>	<b>186</b>	<b>7.4</b>	<b>174</b>	<b>6.7</b>
<b>Ill-defined—Not Specific Diseases—</b>				
Old Age	55	2.2	40	1.6
Ill-defined Diseases	2	1	5	2
<b>Total Ill-defined Diseases</b>	<b>57</b>	<b>2.3</b>	<b>45</b>	<b>1.8</b>
<b>Total Deaths, All Causes</b>	<b>2549</b>	<b>101.1</b>	<b>2363</b>	<b>91.7</b>



## DEATHS from Tuberculosis during the last Ten Years.

	Number.										Death Rate per 100,000 Persons living.									
	1938.	1939.	1940.	1941.	1942.	1943.	1944.	1945.	1946.	1947.	1938.	1939.	1940.	1941.	1942.	1943.	1944.	1945.	1946.	1947.
Tuberculosis of Respiratory System (No. 13) .....	107	102	85	96	108	93	81	93	97	87	45	43	36	40	45	38	39	39	39	34
Other forms of Tuberculosis (Nos. 14-22) .....	16	24	18	14	21	20	24	23	21	20	7	10	8	6	9	8	10	9	8	8
Totals .....	123	126	103	110	129	113	105	116	118	107	52	53	44	46	54	46	43	47	47	42

## RETURN showing the Number of Deaths from Typhoid during the last Ten Years under Age Groups.

Year	Under 5.		5-10.		10-15.		15-20.		20-25.		25-30.		30-35.		35-40.		40-45.		45-50.		50-55.		55-60.		60-65.		65 and over.		Total all Ages.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1938...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
39...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
40...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
41...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
42...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
43...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
44...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
45...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
46...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
47...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...

## Typhoid Fever.

Year, 1947.

Number of cases notified

Number of deaths, year 1947 (calendar) —

Males

Females



*Scarlet Fever.*

Year.	Cases.	Deaths.	Death rate per 10,000 population.	Cases per 100 persons living.	Deaths per 100 cases notified.	Death % of Cases.
1925 ... ..	288	3	·1	1·34	10·4	1·0
1926 ... ..	188	1	·05	·88	5·3	0·5
1927 ... ..	91	2	·1	·43	22·0	2·2
1928 ... ..	190	1	·05	·88	5·3	0·5
1929 ... ..	314	2	·1	1·44	6·4	0·6
1930 ... ..	485	8	·4	2·20	16·5	1·6
1931 ... ..	265	...	...	1·18	...	...
1932 ... ..	417	5	·2	1·84	12·0	1·2
1933 ... ..	370	4	·2	1·61	10·9	1·1
1934 ... ..	362	4	·2	1·58	11·0	1·1
1935 ... ..	302	1	·05	1·32	3·3	0·3
1936 ... ..	478	6	·3	2·07	12·6	1·3
1937 ... ..	412	2	·1	1·76	4·9	0·5
1938 ... ..	123	...	...	·52	...	...
1939 ... ..	162	...	...	·68	...	...
1940 ... ..	240	1	·04	1·00	4·2	0·4
1941 ... ..	127	1	·04	·53	7·9	0·8
1942 ... ..	72	...	...	·30	...	...
1943 ... ..	92	1	·1	·38	10·9	1·1
1944 ... ..	149	...	...	·61	...	...
1945 ... ..	260	...	...	1·04	...	...
1946 ... ..	231	...	...	·92	...	...
1947 ... ..	118	2	·1	...	...	...

*Diphtheria.*

Year, 1947.

Number of cases notified ... .. 64

Number of deaths, year 1947 (calendar)—

Males

Females

Year.	Cases.	Deaths.	Death rate per 10,000 population.	Cases per 100 persons living.	Deaths per 100 cases notified.	Death % of Cases.
1925 ... ..	473	13	·6	2·19	27·5	2·7
1926 ... ..	347	6	·3	1·62	17·1	1·7
1927 ... ..	507	10	·5	2·38	19·7	2·0
1928 ... ..	908	18	·8	4·21	19·8	2·0
1929 ... ..	488	18	·8	2·24	36·9	3·7
1930 ... ..	573	20	·9	2·59	34·9	3·5
1931 ... ..	589	19	·8	2·62	32·3	3·2
1932 ... ..	455	17	·8	1·96	37·4	3·7
1933 ... ..	706	16	·7	3·14	22·3	2·2
1934 ... ..	491	22	·9	2·14	44·8	4·5
1935 ... ..	537	24	1·0	2·34	44·7	4·5
1936 ... ..	575	20	·9	2·49	34·8	3·5
1937 ... ..	305	12	·5	1·30	39·3	3·9
1938 ... ..	343	10	·4	1·46	29·2	2·9
1939 ... ..	365	14	·6	1·53	38·4	3·8
1940 ... ..	366	18	·8	1·53	49·2	4·9
1941 ... ..	401	25	1·0	1·67	62·3	6·2
1942 ... ..	291	11	·5	1·21	37·8	3·8
1943 ... ..	370	15	·6	1·53	40·5	4·1
1944 ... ..	442	10	·4	1·80	22·6	2·3
1945 ... ..	403	9	·4	1·62	22·3	2·2
1946 ... ..	256	6	·2	1·02	23·4	2·3
1947 ... ..	64	...	...	...	...	...





Number of cases notified