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The Corporation

OF

The City of Cape Town.



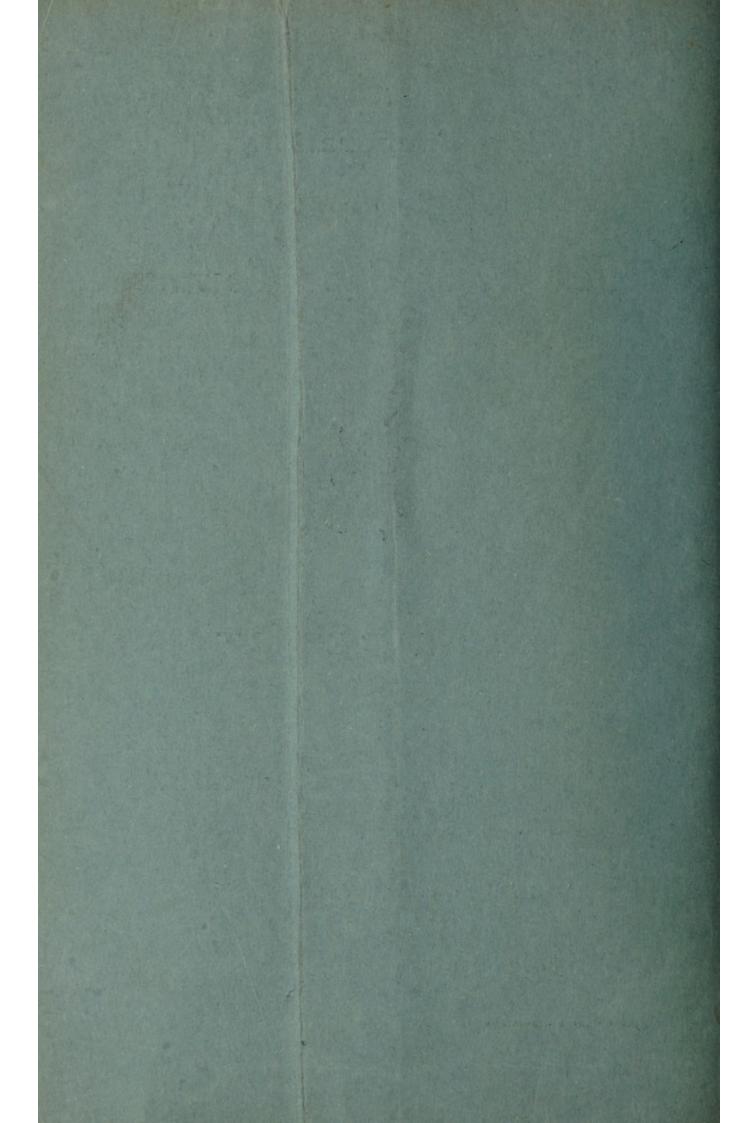


ANNUAL REPORT

OF THE

Medical Officer of Health,

For the year ended 30th June, 1940.



The Corporation

OF

The City of Cape Town.





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Report of the Medical Officer of Health

FOR THE YEAR ENDED 30TH JUNE, 1940.

TO HIS WORSHIP THE MAYOR AND COUNCILLORS OF THE CITY OF CAPE TOWN.

Madam and Gentlemen.

I have the honour to present the annual report on the health and social conditions of the City of Cape Town for the year 1939-40, together with an account of the work of the City Health Department during the year. Certain particulars are given of work carried out in Cape Town by other bodies.

Vital Statistics.

The general death rate and the infant mortality rate (all races) continued their trend of decline, being lower than in any previous year except 1936-37.

The European birth rate was the highest for eight years with the exception of 1937-38, and the European rate of natural increase (excess of births over deaths) was the highest for eight years. The non-European birth rate was the lowest for nineteen years.

The non-European birth rate was 2.5 times as great as the European, the general death rate 2.1 times, the infant mortality rate 3.0 times, and the rate of natural increase 2.9 times. 57 per cent. of non-European deaths occurred in persons under 25 years of age, as compared with 16 per cent. in Europeans.

These great contrasts are mainly due to the depressed social and economic conditions of the non-Europeans, which operate through undernourishment, bad housing and overcrowding, and low cultural standards.

Infectious Diseases.

The mortality rate from enteric fever was lower than in any previous year.

The incidence of diphtheria, which was unusually high in the previous two years, abated considerably in the year under report. The number of cases was still above the average, but as regards mortality from the disease the year was one of the lowest on record.

The prevalence of whooping cough, which began in November, 1938, continued until January, 1939, when it abated considerably. Of the 70 deaths in the year under report (all but 5 in children under five years old), only 4 were European. Measles was at its lowest ebb, and caused no deaths in the year.

Cerebrospinal fever continued to be unduly prevalent, though to a less extent than in the previous year; but as the result of the discovery of the sulphonamide treatment the case mortality was much reduced. Overcrowding is considered to be the chief cause of this disease; and only 2 of the 30 cases reported (including Langa) were in Europeans.

The mortality from respiratory diseases (bronchitis and pneumonia) in Europeans was the lowest on record, and in non-Europeans lower than in any former year except 1936-37. These diseases constitute one of the greatest causes of death. Their mortality rate for the year in non-Europeans was seven times as great as in Europeans, and in children under two years old eleven times.

Diarrhocal diseases also rank high amongst the causes of death; and they, too, have shown a great improvement in recent decades. In the year under report they caused more deaths than in the previous year. Their mortality rate in non-Europeans was eight times as great as in Europeans, and in children under two years old four times.



Tuberculosis.

The prevalence of tuberculosis continues to be very high compared with that in other South African cities, and the mortality rate for the year in non-Europeans was six times as great as in Europeans. A full-time tuberculosis officer is in charge of the operations of the department for the combating of this disease. Since the end of the year under report commodious new administrative and clinic premises have been brought into use for the accommodation of his branch, and his staff has been increased to 7 nurse-visitors; but the efficiency of the work of this branch is still greatly impaired by the shortage of hospital accommodation. Since the end of the year 24 additional beds have been brought into use for this purpose at Rentzkie's Farm Hospital, but it has not been possible to make a start with the projected new sanatorium-hospital.

Venereal Diseases.

These diseases continue to be very prevalent in Cape Town, especially in non-Europeans. The Council's scheme for combating them is based on the provision of free treatment, and a venereal disease officer devotes the whole of his time to this work. He is assisted at the clinics by a full-time medical officer, a number of part-time medical officers, and 6 nurse-visitors and orderlies. Three treatment centres are maintained, at which 27 medical sessions are held per week. The maternal and child welfare branch cooperates substantially in this side of the work of the Department. The hospital accommodation for venereal diseases is insufficient, and there is a need for more treatment centres.

Considerable attention is paid to the follow-up of cases who default in their attendance at the clinics, and more use is being made through the magistrates of the compulsory

powers in this respect conferred by the Public Health Act.

Maternal and Child Welfare.

The staff of this branch of the Department includes 3 full-time medical officers, a number of part-time medical officers, and 34 health visitors with 2 non-European assistant health visitors. Thirteen welfare centres are maintained, at which 57 medical (or dental) sessions are held per week, including infant consultations, pre-natal clinics, school clinics and dental clinics. The new attendances at the infant consultations during the year of children under one year of age amounted to 53 per cent. of the number of registered births (Europeans 41, non-Europeans 59); and the new attendances at the pre-natal clinics amounted to 37 per cent. of the number of registered births (Europeans 16 and non-Europeans 46).

The Council's first nursery school was opened at Salt River during the year under report. It is a new building specially designed for the purpose, and provides accom-

modation for 40 coloured children.

Departmental Institutions.

Particulars in regard to the hospitals of the Department will be found in the body of this report. At the infant consultations and the pre-natal, school, dental, tuberculosis and venereal disease clinics, the new cases attending during the year numbered 26,799, and the total attendances at these medical sessions amounted to 205,803. Adding also the attendances at the venereal disease clinics for "intermediate treatment," at the welfare centres for test feeds, remedial exercises, dinners and milk meals, and at the nursery school, the total attendances were 390,746. There were also 2,025 new cases and 23,435 attendances at the out-patient department of the native hospital at Langa location.

Sanitary Inspection.

The departmental staff of health inspectors numbers 39. Also under the supervision of the chief health inspector are 18 rateatchers, 8 public washhouses with 17 attendants, and 37 public sanitary conveniences with 115 attendants.

Housing.

The housing situation in Cape Town is characterized by a grave shortage of dwellings for the poorer classes, especially non-Europeans. It is satisfactory to note that the Council's programme of new buildings is now under way. During the year under report 516 houses and flats were completed at Alicedale and Bloemhof, and building has since been progressing rapidly.

The shortage of houses for the poor, especially coloured and native, is a main cause of existing slum conditions, and the most important contribution to public health and social improvement that the Council can make is the provision of dwellings in sufficient

numbers and at rentals which the tenants are able to pay.

Acknowledgments.

I desire to acknowledge the assistance I have received from the staff of the City Health Department and the support accorded me by the Chairman and members of your Health Committee and other members of the Council.

I am, Madam and Gentlemen,

Your obedient servant,

T. SHADICK HIGGINS,
B.Sc., M.D.Lond., M.R.C.P., D.P.H.;
Fellow of the Royal Sanitary Institute.
Professor of Public Health in the University of Cape Town.

Medical Officer of Health.

City Health Department, 12, Keerom Street, Cape Town. May, 1941.

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MUNICIPALITY OF THE CITY OF CAPE TOWN.

LEADING STATISTICS, YEAR ENDED 30TH JUNE, 1940.

	Europea	an, Non-European.	All races.	European.
Area: 48,753 Acres.				
Total population	163,13	5 159 678	322,813	-
Population (excluding the tive location of Langa)	a- 163,11	0 153,640	316,750	-
	A	A	A	В
Birth rate	18-6	1 46-40	32.09	18.83
Death rate	9-3	8 19.88	14.47	9-77
Infant mortality rate	40.9	6 123.91	99.14	40.81
Tuberculosis death rate	0.0	39 4 • 25	2.42	0.73
Enteric incidence rate	0.1	9 0.22	0.20	_
Enteric death rate	0.0	0.03	0.01	0.01

All the above rates are annual and expressed as per 1,000 population of each class, except the infant mortality rate, which is expressed as per 1,000 births occurring during the year. The figures for the Langa native location are excluded from these rates.

A. Corrected for outward transfers.

B. Corrected for outward and inward transfers.

REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR ENDED 30TH JUNE, 1940.

SECTION I.—NATURAL AND SOCIAL CONDITIONS.

PHYSICAL GEOGRAPHY.

Cape Town is situated at the northern end of the Cape Peninsula. The Peninsula lies off the west coast of the mainland of South Africa, extending from north to south a distance of about 33 miles and attaining a maximum width of about ten miles. Its average width east and west may be estimated at five miles. The northern half of its eastern side is connected with the mainland by a wide low-lying sandy isthmus, known as the Cape Flats, which separates Table Bay to the north-west from False Bay to the south-east. The narrowest part of the isthmus measures about twelve miles from sea to sea.

The backbone of the Peninsula is a mountain range which extends from Table Mountain (3,495 ft.) at its north end to Cape Point at the south. The land slopes from the mountains to the sea or, where the isthmus joins the Peninsula, to the Cape Flats. While much of the Peninsula area lies at heights of over 1,000 ft., most of the isthmus does not reach 100 ft., and a rise of sea level would convert the Peninsula into two islands nearly equal in area.

There are three principal formations functioning in the simple geological* structure of the Peninsula: viz., (1) the Table Mountain Sandstone Series, beneath which is found (2) the granite, intruding into (3) a series of dark-coloured fine-grained sediments called

the Malmesbury Slate Series.

The Malmesbury Series is found at the northern end of the Peninsula and constitutes the mountain mass known as Signal Hill and Lion's Head (except the summits) and also Devil's Peak. It forms the foundation of Green and Sea Point, Cape Town proper, Woodstock and Salt River, and Mowbray. In some places the beds of clay resulting from the weathering of this rock extend to a depth of several yards, and they are used extensively for brick-making.

The Table Mountain Series constitutes the higher part of Table Mountain, and almost the whole southern two-thirds of the Peninsula, where its lowest beds descend below

sea level.

The granite forms the basement of nine-tenths of the Peninsula area. It constitutes the lower slopes of Table Mountain south of Sea Point on the western side and south of Rondebosch on the eastern side.

Resting on the lower slopes of the mountains is a talus apron consisting of a mixture

of sand, clay and boulders.

From the bottom of the slope below the face of Table Mountain there extends down to Table Bay a bed of alluvial deposits, on which a good deal of old Cape Town is built. At the shore of the Bay there is a considerable area of land that has been reclaimed from

the sea by the deposit of town refuse.

The Cape Flats are covered with a layer of sand varying in depth and containing in places a few feet beneath the surface a layer of ferruginous rock sometimes called "Cape laterite" and known locally as "ironstone gravel." The laterite consists of limonitic matrix which encloses sand, clay and rock fragments. It varies in thickness from a few inches up to say ten feet and generally rests on a few feet of sandy clay, which in turn lies upon the underlying hard rock, which may be either granite or slate.

The greater part of the Municipality is built upon the Malmesbury slate or granite, the sandy Cape Flats, and alluvial deposits. On the coast of False Bay the town from Muizenberg to Kalk Bay is built on the Table Mountain sandstone or on the talus and

sand dunes covering the sandstone slopes.

The City of Cape Town consists of a central portion, which before the City extension of 1913 constituted the whole Municipality and is sometimes known as Cape Town proper or central Cape Town (Wards 2-7), and a chain of suburbs on either hand. The central portion lies in the amphitheatre which, extending down to Table Bay towards the northeast, is backed on the other sides by the precipitous face of Table Mountain and its outlying masses, Devil's Peak on the east and Lion's Head and Signal Hill on the west. It therefore lies between the mountain and the sea, and, unlike the centre of most cities, is not surrounded by its suburbs.

^{*} The geological particulars in this section are taken from "Chapman's Peak" Guide Book of International Geological Congress, XV Session, South Africa, 1929, by Andrew Young, D.Sc.

The suburbs extend beyond this amphitheatre on either hand. To the west, the marine suburbs, known as Green Point, Sea Point, Clifton, Camps Bay and Bakoven (Ward 1 and part of Ward 4) lie along the Atlantic sea board for a distance of about six miles curving with the coast in a southerly direction. They are on the seaward slopes of Signal Hill and Lion's Head.

To the east the "Southern Suburbs" (Wards 8-10 and 12-15) extend around Devil's Peak and are stretched for about sixteen miles along the road and suburban railway line which after rounding Devil's Peak pass along the eastern side of Table Mountain in a southerly direction to the shore of False Bay. Woodstock and Salt River (Wards 8 and 9), next to Cape Town proper, slope down to Table Bay, and at the other end Muizenberg, St. James and Kalk Bay (Ward 14) lie on the False Bay coast. The string of suburbs between, known successively as Observatory, Mowbray, Rosebank, Rondebosch, Newlands, Claremont, Kenilworth, Wynberg, Plumstead, Diep River, Heathfield, Retreat and Lakeside, lie on the eastern slopes of the mountain range, and, to a greater extent, on the Cape Flats below them. The Municipality extends over the Flats to a varying depth up to $4\frac{1}{2}$ miles, and the parts on the Flats contain a number of scattered townships and estates, some of which are served by the Cape Flats railway, which forms a loop lying in a more easterly position than the suburban line.

There is an extension of the Municipality beyond Salt River in a north-easterly direction on the Flats bordering Table Bay. This (Ward 11) includes the suburbs of Maitland, Brooklyn, Rugby and Kensington, which, together with other townships lying outside the municipal area of the City and following the main road to the north, are known as the "Northern Suburbs."

AREA.

The area of the extended Municipality, on 30th June, 1940, amounted to 48,753 acres (76 ·2 sq. miles). On 4th October, 1939, an area of about 101 acres was added to the Municipality at Westlake Golf Club. The length of the main road passing through the Municipality from the boundary at Bakoven to that of Kalk Bay is about twenty-five miles.

CLIMATE.

Cape Town is situated Lat. 33° 56′ S., Long. 18° 30′ E. Its climate is largely determined by the fact that during the summer season the prevailing winds are south-easterly and in the winter season north-westerly; and that the western shore of the Cape Peninsula is washed by a cold current from the Antarctic.

There is an average of nearly three thousand hours o' bright sunshine per year, and the temperature is very equable. The rainy season is in the winter, but occasional showers occur in the summer also.

The parts of the Municipality on the two seaboards are much frequented by holiday-makers from other parts of the country. To the attractions of the climat are added the great natural beauties of the Peninsula and its neighbourhood.

The meteorological readings taken by the City Health Department at the City Hospital, Portswood Road, for the year under review and for previous years will be found in Tables T to X, on pages 136 to 140.

From the point of view of public health Cape Town belongs definitely to the temperate zone, and tropical diseases, except in imported cases, are entirely absent. The state of health and the mortality statistics of the European part of the population are much the same as in a healthy European town.

SOCIAL AND ECONOMIC CONDITIONS.

One-half of the Cape Town population of over three hundred thousand consists of whites, or "Europeans." The other half is commonly designated as "non-European." Eight-ninths of these non-Europeans are of the mixed race known as Cape Coloured, and the remainder consists of Natives and Indians, who are both comparatively newcomers.

The Cape Coloured are largely the descendants of the slaves of earlier days, whose emancipation was completed in 1835. Their ancestors of the eighteenth century and earlier were mainly Europeans, Hottentots, blacks from Mozambique, Madagascar and other parts of Africa, and East Indians from the Dutch East Indies. In more recent years they have received additions from European, Bantu and other stocks.

There is one section of the Cape Coloured, Moslem in religion, known as "Malays," who are more immediately descended from the Dutch East Indians. Though they possess a larger infusion of this strain they are much mixed with the other elements present in the Cape Coloured generally.

The social and economic conditions of the Cape Coloured are on the whole unsatisfactory. A part of them have skilled trades and earn good wages but the majority are unskilled labourers and many of the men earn less than 30s, a week when in full work. The position is aggravated by the large size of the families, but the family income is eked out when possible by earnings brought in by the wife and children. The measures taken for the prevention and relief of distress are inadequate, and there is no compulsory insurance against sickness and unemployment. There is much undernourishment, and housing accommodation is expensive and bad. The social and cultural level is low. The principle of compulsory education does not apply to non-Europeans, and, though there are some good Coloured schools, the general level of schooling is low, and there is a lack of discipline in adolescents and a serious problem caused by Coloured delinquency. The illegitimacy rate is high and venereal disease is rife. The social contrast between the Europeans and Cape Coloured can be expressed by the statement that whereas in the whites it is only a small minority that belong to the depressed classes, in the Coloured it is the majority. The same contrast is seen in housing conditions; it is a small minority of Europeans who live in slum conditions, but a majority of the Coloured.

The natives constitute only one-tenth of the non-Europeans. They live in the Council's native location, or as ordinary non-European residents in the City (where they are mostly slum dwellers), or in unsanitary shacks on the Cape Flats, or on their employers' premises. The segregation prescribed by the Natives (Urban Areas) Act is by no means completely enforced, for the reason that the houses in the location are too few to accommodate the population to be housed. Many of the natives are men from the native territories who still retain their link with the territories and commonly return there eventually; but there is an increasing population of detribalized natives who are permanently resident in Cape Town and live here with their families. Their social and economic conditions are on the whole worse than those of the coloured people.

The Indians are less than 4,000 in number. They are nearly all traders, and they are better off than the Cape Coloured. Some of them are making good progress in business and becoming well-to-do.

The European population is in complete contrast with the non-European in every respect. It is a well-to-do community, and it differs from the population of a European town in that it includes only a small proportion of people of the labouring class. There is, however, a section with a working-class status, and a fringe who have sunk to the same social and economic level as the coloured people.

There are parts of the City where the inhabitants are mainly non-European, and other parts that are exclusively occupied by Europeans and their non-European servants. The various sections of the community, however, are to a great extent intermingled, and there is nothing approaching complete segregation of the races. The geographical disposition of white and coloured is very much the same as that of well-to-do and poor in a European town. In the operations under the Housing Act the estates for Europeans are separate from those for non-Europeans, and this will contribute to progressive residential separation. The provision of a native location has the same effect.

Striking contrasts are presented by the vital statistics of the different races, which will be found in the next section of this report.

SECTION II.—VITAL STATISTICS.

For births and deaths and the corresponding rates, the year under report consists of the 52 weeks ended 28th June, 1940. The rates are corrected to the basis of a year of 365 days. Births and deaths are attributed to the date of registration.

Unless the contrary is stated, all statistics in this report are exclusive of the Langa native location, which has a rapidly changing population.

The births and deaths statistics are stated variously as :-

"Crude" or "uncorrected"; including all births and deaths registered during the year as having occurred in Cape Town.
 "Corrected for outward transfers"; which is the foregoing (1) after the deduction

(2) "Corrected for outward transfers"; which is the foregoing (1) after the deduction of deaths in Cape Town of persons who were not Cape Town residents and births in Cape Town to mothers who were not Cape Town residents.

(3) "Corrected for outward and inward transfers"; which is the foregoing (2) after the addition of deaths of Cape Town residents in parts of the Union outside of Cape Town and births in parts of the Union outside of Cape Town to mothers who were Cape Town residents.

Information as to outward transfers is available from the local returns for both Europeans and non-Europeans; but in regard to inward transfers the information is supplied by the Director of Census and Statistics, Pretoria, and is available in respect of Europeans only.

POPULATION.

The estimated population of the Municipality exclusive of Langa location at the middle of the year under report (31st December, 1939) is calculated from the figures for the 1936 census, together with the census figures for 1931 as regards Europeans and the census figures for 1926 as regards non-Europeans. It is as follows:—

Race.			Males.	Females.	Persons.
European			78,153	84,957	163,110
Native (not Langa) Asiatic Other Coloured	::	::	7,291 2,610 65,297	2,819 1,120 74,503	10,110 3,730 139,800
Non-European			75,198	78,442	153,640
All Races			153,351	163,399	316,750

The rates for the year 1939-40 in this report are based on the above figures, and the births and deaths at the native location of Langa are excluded.

The estimated 1939-40 population for each ward is shown in Table J on page 126.

The population of Langa location for the year 1939-40, based on the average of an enumeration made at the end of each month, was as follows:—

European.	Coloured.	Native.	All Races.
25	-	6,038	6,063

The estimated population of the whole Municipality, including Langa location, for 31st December, 1939, is as follows:—

European.	Non-European.	All Races
163,135	159,678	322,813

BIRTHS.

The births and birth rates for the Municipality of Cape Town in the year 1939-40 are shown in Table F, on page 122.

The birth rates and rates of natural increase per 1,000 population were as follows :-

	Birth rate.	Rate of natural increase.			
European	 18.83	9.06	corrected for	outward	and inward
Coloured	 46.87	26.96	corrected for	outward	transfers.
Native (not Langa)	 39.48	17.56	,,,	,,	,,
Asiatic	 47.58	34.68	11	"	**
All non-Europeans	 46.40	26.52	,,	,,	,,
All races	 32.09	17.62	"	"	"

The non-European birth rate was $2\cdot 5$ times as great as the European (corrected for outward transfers). The ratio was $2\cdot 5$ for Coloured, $2\cdot 1$ for Natives and $2\cdot 6$ for Asiatics.

In Table G, on page 123, the annual birth rate and rate of natural increase for 27 years are set out in years and quinquennia.

As compared with the previous year the European birth rate (corrected for outward and inward transfers) showed an increase of 4.0 per cent., and the non-European (corrected for outward transfers) a decrease of 0.6 per cent.

The natural increase of the non-European population (i.e., the excess of births over deaths) was $2\cdot7$ times as great as that of the European population (corrected for outward transfers); expressed as per 1,000 population it was $2\cdot9$ times as great (Coloured $2\cdot9$, Natives $1\cdot9$, Asiatics $3\cdot8$).

In Table E, on page 121, the births and still-births, in wards, are tabulated by race and legitimacy and the births by sex.

The number of male births per 100 female births (corrected for outward transfers) was 108·3 amongst Europeans and 105·1 amongst non-Europeans.

The percentage of illegitimate to total births (corrected for outward transfers) was 5.0 amongst Europeans and 21.8 amongst non-Europeans. The corresponding figures for former years will be found in Table G, on page 123.

The number of still-births registered as having taken place in Cape Town during the year was 409, including 98 European and 310 non-European, and 1 of unknown race. Corrected for outward transfers the number was 373 (85 European, 287 non-European, and 1 of unknown race)

3,244 births (1,859 European and 1,385 non-European) and 183 still-births (74 European and 109 non-European) took place in maternity homes and other institutions within the Municipality. Corrected for outward transfers the births in institutions were 2,651 live births (1,459 European and 1,192 non-European), and 139 still-births (58 European and 81 non-European). This is equivalent to a percentage of 26.2 of all live births (corrected for outward transfers), the percentage being 48.2 amongst Europeans and 16.8 amongst non-Europeans.

Statistics based on birth notifications will be found in Table M, on page 129.

Births in the Langa location are not included in the foregoing figures. Particulars

regarding these will be found in Table S. on page 135.

For the purpose of comparison statistical particulars as to births in the Union of South Africa, in other towns, and in England and Wales, are set out in Table K, on page 127.

DEATHS.

The deaths and death rates for the Municipality of Cape Town for the year 1939-40 are shown in Table F, on page 122. The death rates per 1,000 population were as follows:-

European	 9.77	corrected	for	outward	and inward	transfers.
Coloured	 19.92	corrected	for	outward	transfers.	
Native (not Langa)	 21.92	,,	,,	,,,	,,	
Asiatic	 12.90		,,	,,		
All non-Europeans	 19.88		**	11	.,	
All races	 14.47					

The non-European death rate was 2.1 times as great as the European (corrected for outward transfers). The ratio was 2·1 for Coloured, 2·3 for Natives and 1·4 for Asiatics.

The European death rate (corrected for outward and inward transfers) was 3.5 per cent. less than that of the previous year and 7.1 per cent. less than that of the previous quinquennium. The non-European rate (corrected for outward transfers) was 8.3 per cent. less than that of the previous year and 12.2 per cent less than that of the previous quinquennium. Except for 1936-37 the rate for all races was the lowest on record for the City. In Table G, on page 123, the annual death rate for 27 years is set out in years and quinquennia.

Causes of Mortality.

In Tables A1, A2, A3 and A4, on pages 94 to 116, the deaths for the year will be found fully classified for cause, race, sex, age and ward. A shorter classification by cause and race is set out in Table B, on page 117; and in Table C, on pages 118 and 119, the rates of mortality from a short list of causes are shown by race with corresponding figures for the preceding ten years.

The following extract from Table C (1939-40) shows which are the greatest recorded causes of death in Europeans and non-Europeans respectively :-

Death rate per 1,000 population.

Europeans.		Non-Europe	ans.	
Heart and arteries	. 3.59	Tuberculosis		4.25
Cancer		Bronchitis and pneum	nonia	3.71
Tuberculosis	. 0.73	Heart and arteries .		2.62
Bronchitis and pneumonia	. 0.53	Diarrhoea and enterit		
Violence	. 0.49	Congenital malformati		
Nephritis	. 0.41	"diseases of early in	fancy"	
Congenital malformations and	d	Cancer		0.67
"diseases of early infancy '		Nephritis		
Diabetes	. 0.26	Violence		
Diarrhoea and enteritis .	. 0.26	Syphilis		0.53
All causes	. 9.77	All causes .		19.88

The contrast between the races is largely due to two factors, viz., (1) the prominence in non-Europeans of deaths from causes associated with bad social and economic conditions, and (2) the difference in the age constitution of the two populations. Thus tuberculosis, and bronchitis and pneumonia, which are fostered by bad conditions of life, cause more mortality in non-Europeans than in Europeans, where they are far exceeded by circulatory diseases and cancer. The same influence operates in diarrhoeal diseases, measles and whooping cough. As regards the age factor, bronchitis and pneumonia, diarrhoea and enteritis, measles, whooping cough and the conditions in the "congenital" category, chiefly affect young children; and the large corresponding death rates in non-Europeans are in part due to the mere fact that there is a greater proportion of young children in the non-European population than in the European. (The figures for infant mortality in Table H, on page 124, afford a comparison between the races free from the distortion caused by difference in age constitution.) Similarly cancer, circulatory diseases and diabetes occur especially in middle and old age, and the prominence of the mortality rates from these diseases in Europeans is mainly due to the larger proportion of people of such age in the European population. In other words a larger proportion of non-Europeans die before reaching the age when they are most liable to develop such diseases (see page 13).

In Table J, on page 126, the deaths by race are classified according to place of residence (wards).

In Table K, on page 127, the death rates for the Union of South Africa, in certain other towns, and in England and Wales, are set out for purposes of comparison.

Deaths in Langa native location are not included in the foregoing figures. Particulars regarding these will be found in Table A4, on page 116, and Table S, on page 135.

DEATHS IN INSTITUTIONS.

In Table L, on page 128, the deaths which took place in various institutions are set out.

Of the total deaths in Cape Town (uncorrected) 35.9 per cent. took place in institutions (47.3 per cent. of all European deaths and 29.2 per cent. of all non-European deaths).

After correcting for outward transfers the percentage of deaths occurring in institutions was $28\cdot6$ ($41\cdot2$ per cent. of European deaths and $22\cdot3$ per cent. of non-European deaths). Correcting also for inward transfers $42\cdot1$ per cent. of European deaths took place in institutions.

SEASONAL VARIATION.

The seasonal variation in mortality is shown in Table D, on page 120, where the deaths for the year 1939-40, classified for certain causes and by race, are set out according to the month of registration.

SEX.

The death rates (per 1,000 population) during the year under review are shown in the following table according to sex:—

Race.	Uncor	rected.		ted for transfers.	Corrected for out- ward and inward transfers.		
	Males.	Females.	Males.	Females.	Males.	Females.	
European Native (not	13 -34	9 -31	10.76	8 -10	11-27	8.40	
Langa)	22 - 56	33 -07	18.57	30.58			
Asiatic	16.90	5 -37	16.14	5.37			
Other Coloured	25.05	18.84	22 -68	17 -50			
Non-European	24 - 54	19 -15	22 .07	17 -78			
All Races	18 -83	14 -04	16 -31	12 -75			
Native (Langa)			14 -62	20 -63	1710		

It will be seen from the above figures that in Europeans the male death rate (corrected for outward and inward transfers) was $34 \cdot 2$ per cent. greater than the female; and in non-Europeans the male death rate (corrected for outward transfers) was $24 \cdot 1$ per cent. greater than the female (Asiatics, $200 \cdot 0$, Coloured $29 \cdot 6$; in Natives the male death rate was $39 \cdot 3$ per cent. less, than the female).

AGE AT DEATH.

The number of deaths at various ages are summarized in the following table :-

	No	o. of death	я.	Percentage of all deaths.			
	Male.	Female.	Total.	Male.	Female.	Total.	
A. Europeans:							
Under 1 year	83	42	125	9 -45	5.90	7 -86	
Over 1 and under 5 years	30	17	47	3 -42	2 .39	2.96	
,, 5 ,, 25 ,,	41	45	86	4.67	6.32	5.41	
,, 25 ,, 65 ,,	376	274	650	42 -82	38 -48	40 -88	
,, 65 years	348	334	682	39 -64	46 -91	42 -89	
Total European deaths	878	712	1,590	100 -00	100 -00	100 -00	
B. Non-Europeans :							
Under 1 year	504	377	881	30 -47	27 -08	28 -92	
Over 1 and under 5 years	241	246	487	14 -57	17 -67	15 -99	
,, 5 ,, 25 ,,	166	198	364	10 -04	14 .23	11 -95	
,, 25 ,, 65 ,,	580	421	1,001	35 -07	30 -24	32 -86	
" 65 years	163	150	313	9.85	10.78	10 -28	
Total Non-European deaths	1.654	1,392	3,046	100 -00	100 -00	100 -00	

A. Corrected for outward and inward transfers.

B. Corrected for outward transfers.

From the foregoing figures it will be seen that the deaths under 5 years of age constitute 10.8 per cent. of all deaths in Europeans, as compared with 44.9 per cent. in non-Europeans; and that the deaths under 25 years of age constitute 16.2 per cent. of all deaths in Europeans as compared with 56.9 per cent. in non-Europeans.

Statistics for infant and maternal mortality will be found in the next section.

SECTION III.—MATERNAL AND CHILD WELFARE. A.—STATISTICAL.

(Maternity and Child Welfare Officer: Dr. E. Mary Broome.)

INFANT MORTALITY.

The deaths of infants under one year old for the Municipality of Cape Town in the year 1939-40, and the corresponding rates, are shown in Table F, on page 122. The infant mortality rates per 1,000 births were as follows:—

and the second s						and inward transfers.	transfers.
Coloured	* *			TOT	OHO WOLLE	CLOSEDACEO.	
Native (not Langa)		185.9	4.5	**	33	***	
Asiatic		33.9	23	>>	"	**	
All non-Europeans		 123.9	31	,,	33	11	
All wages		99-1		14.0	1	122	

The non-European infant mortality rate was $3 \cdot 0$ times as great as the European (corrected for outward transfers). The ratio was $3 \cdot 0$ for Coloured, $4 \cdot 5$ for Natives and $0 \cdot 83$ for Asiatics.

The European infant mortality rate (corrected for outward and inward transfers) was 2.7 per cent. less than that of the previous year and 9.1 per cent. less than that of the previous quinquennium. The non-European rate was 0.3 per cent. greater than that of the previous year and 5.2 per cent. less than that of the previous quinquennium. Except for 1936-37 the rate for all races was the lowest on record for the City. In Table G, on page 123, the annual infant mortality rate for 27 years is set out in years and quinquennia.

The death rate for 1939-40 of children between one and two years old, per 1,000 survivors of those born in the previous year, was 9.5 for Europeans and for non-Europeans 50.4, or 5.3 times as great.

The causes of infant mortality, both for children under one year old and children between one and two years old, are set out in Table H, on page 124, which shows the improvement that has taken place over a series of years. The chief causes of mortality are respiratory and diarrhoeal diseases, together with developmental diseases in children under one year old and infectious diseases in children between one and two years old.

Amongst European infants in the year under report 42·7 per cent. of the deaths under one year old occurred in the first week of life, and 52·4 per cent. in the first month (four weeks). Amongst non-European infants the percentages were 20·1 in the first week and 28·0 in the first month. In Table I, on page 125, the deaths of infants under one year old are classified by race according to age at death and cause of death.

The variation in the annual mortality rate of infants under four weeks old is shown in the following table for five quinquennial periods:—

							European.	Non-European.
Five	years	ended	30th	June	1918	 	39-0	65.9
"	,,,	"	,,	,,	1923	 	29.9	54.2
. 11	,,	,,	,,	11	1928	 	24.0	48.9
,,	"	***	**	11	1933	 	24.8	48-4
"	,,	"	**	,,	1938	 	23 · 2	34.7
Year		,,	,,	,,	1939	 	22.8	39.0
**		,,	,,	"	1940	 	21.5	34.7

The next table shows for the year under report the difference in infant mortality as between legitimate and illegitimate infants (corrected for outward transfers):—

	European.	Non- European.	All Races.
Number of legitimate births	2,875	5,562	8,437
	107	616	723
	37 · 2	110·8	88·7
Number of illegitimate births	152	1,548	1,700
	17	265	282
	111·8	171·2	165·9

In Table J, on page 126, the infant mortality by race will be found classified according to place of residence (wards).

In Table K, on page 127, the infant mortality rates of certain other towns, the Union of South Africa, and England and Wales, are set out for purposes of comparison.

Infant deaths in the Langa native location are not included in the foregoing figures. Particulars regarding these will be found in Table A4, on page 116 and Table S, on page 135.

MATERNAL MORTALITY.

The following table shows the number of deaths of women which occurred in the year 1939-40 from causes associated with pregnancy and the puerperium, classified for causes and race, and the corresponding mortality rates per 1,000 live births (corrected for outward transfers):—

		Deaths.		Maternal mortality rates per 1,000 live births.					
+	Eur.	Non-E.	All Races.	Eur.	Non-E.	All Races.			
Puerperal septicæmia	2	11	13	0.66	1.55	1.28			
Abortion, ectopic gestation and other accidents of preg- nancy Puerperal albuminuria and	1	3	4	0.33	0.42	0 -39			
convulsions	1	2	3	0.33	0.28	0.30			
other accidents of labour	1	10	11	0.33	1.41	1 -09			
Other puerperal conditions	-	_	1	-	-	-			
All causes, other than puer- peral septicæmia	3	15	18	0.99	2 -11	1 .78			
Total	5	26	31	1 -65	3 -66	3 -06			

In the following table the annual mortality rates (per 1,000 live births) for the Municipality are shown for a series of years (corrected for outward transfers):—

		Puerpe	ral Septi	cæmia.	O	Other Causes.			All Causes.			
		Eur.	Non-E.	All Races.	Eur.	Non-E.	Ail Races.	Eur.	Non-E.	All Races		
1914-15 to 19	918-19	 0 -59	1.30	1.02	2 -13	3 -55	2.98	2 .72	4 - 85	4 -00		
1919-20 to 19	923-24	 1.76	1 .20	1-40	2 -84	2 -16	2 -41	4.60	3 - 36	3 -81		
1924-25 to 19	28-29	 1.03	1 -71	1.48	1 -74	3 - 73	3 07	2.77	5 -43	4 - 56		
1929-30 to 19	33-34	 0.94	1.27	1.17	3.04	3 -12	3.10	3 -98	4 - 40	4 - 27		
1934-35 to 19	38-39	 0.96	1.39	1.26	2-43	3-30	3.05	3.38	4-49	4.32		
1938-39		 0.35	0.86	0.71	3 -16	3.87	2.95	3.51	3-73	3-66		
1939-40		 0.66	1-55	1.28	0.99	2-11	1.78	1.65	3.66	3.06		

MATERNAL AND CHILD WELFARE. B.—ADMINISTRATIVE.

Perhaps the most notable event in the work of this branch was the opening in November, 1939, of the first municipal nursery school in Shelley Street, Salt River. It is for non-European children and plans are under consideration for a nursery school for Europeans.

It is found that in supervising the health of young children a serious gap occurs between babyhood and the school-going period. Through the welfare centres and health visitors an effort is made to keep in touch with children after the first year of life, but there still remains much to be done for children below school age, especially the very poor.

The nursery school, therefore, is a valuable addition to the work of this branch. Though it necessarily caters only for a limited number, it is possible to select from children known to the health visitors or attending the centres those who are considered most likely to benefit from regular attendance at the nursery school.

A site at Maitland has been selected for the proposed nursery school for European children, and similar institutions will probably be an essential part of the Council's housing schemes.

There has been an increase in attendances of both European and Coloured at the pre-natal clinics and infant consultations during the year. This has been especially the case at the Athlone centre, which is the nearest to the Council's housing scheme, where many new dwellings have come into occupation. It is hoped to include welfare centres as part of housing developments in this neighbourhood.

The small centre, opened in March, 1939, to serve non-Europeans living in the congested area in and around Second Avenue, Claremont, soon outgrew the rooms available at the Janet Bourhill Day Nursery and in October, 1939, a newly-built four-roomed cottage was rented in Wesley Street, Claremont, to serve as a branch welfare centre. Two infant sessions a week have been held here, and in February, 1940, arrangements were made to supply dinners for needy mothers and pre-school children as at the larger centres. The response to the work carried out at this small centre continues to be most encouraging.

There has been some difficulty in filling vacancies on the staff of health visitors and a Coloured nurse was appointed in August, 1939, from among students taking the course for the health visitor's certificate. She worked on a part-time basis as assistant to the health visitors for four months. The experiment was successful, and in May, 1940, a full-time Coloured assistant nurse was appointed to work in outlying parts of the Athlone area (Rylands and Belgravia Estates). This nurse, who is a certificated midwife, is available to attend confinements where no other suitable midwife is obtainable, and she also acts as assistant to the European health visitor in that district. The value of such a worker has amply proved itself, and it is hoped that, where suitable trained Coloured nurses are forthcoming, the appointment of such assistants to serve the Coloured community in other areas may be possible.

A Native nurse was appointed on 13th December, 1939, to act as assistant health visitor at Langa native location. The nurse appointed holds the general nursing, midwifery and health visiting qualifications.

NOTIFICATION OF BIRTHS.

The Regulations re Early Notification of Birth's (made by the Minister of Public Health in 1920) require the notification of births in the Municipality within twenty-four hours.

During the year 1939-40 the number of births (and still-births) notified was 11,673, as follows:—

Notified by	midwives and nurse	es (e	other than	exte	rn or i	ntern	institut	ional	
cases)		4.5							6,583
Notified by	doctors								8
Notified by	institutions (extern	or	intern)						4,705
Notified by	parents and others								221
Notified by	health visitors								156

There were 155 births notified in Langa native location.

In Table M, on page 129, the births (and still-births) notified as having taken place in the Municipality during the year are classified by ward according to the manner in which the mothers were attended.

The following is a summary of the table :-

Attended.						Births.	Percentage.
In private houses:							
By private doctors			**		 	841	7.7
By private midwive	8:						
Certificated					 	3,262	29.8
Uncertificated					 	2,561	23.4
By public midwives	or	midwife	stude	ents	 	1,354	12.4
No doctor or midwif	e				 	86	0.8
No information					 	95	0.9
						8,199	75.0
							-
In institutions:							
Public institutions					 	1,959	17.9
Private nursing hom	es				 	788	7.1
						2,747	25.0
						-	-

The extern births attended by certificated private midwives continue to increase in proportion to those attended by uncertificated women. Nine years ago (1930-31) 80 per cent. of midwife births (extern) were attended by uncertificated midwives.

The public institutions in which most confinements have taken place are the Peninsula Maternity Hospital, the Booth Memorial Hospital and Vrede Oord, and St. Monica's Home, Public extern midwifery is done from the Peninsula Maternity Hospital, Vrede Oord and St. Monica's Home.

SUPERVISION OF MIDWIFERY.

Pursuant to the Government regulations made under the Public Health Acts a list of midwives practising in the municipal area is kept by the City Council. No person may practise midwifery whose name is not on the list. The Council is empowered, subject to confirmation, to refuse to place on the list or to remove from the list the name of any person whose practising it considers to be prejudicial to the public health.

The transactions on the list of midwives during the year are shown in the following table:—

Midwives.	Certif	icated.	Uncert	Total.	
	Eur.	Non-E.	Eur.	Non-E.	
On the list 30th June, 1939	107	43	13	43	206
Added to list during 1939-40	34	6	_	1	41
Removed from list during 1939-40 by resolution of Council	-	_	_	_	_
Removed from list during 1939-40, having ceased to practise in the Municipality	20	6	1	4	31
On list 30th June, 1940	121	43	12	40	216

Applications to be added to the list refused by resolution-nil.

In recent years the proportion of certificated midwives practising in Cape Town has steadily increased.

One of the health visitors is appointed as supervisor of midwives. She made 1,834 visits during the year, including 901 visits to midwives in their own homes.

Fifteen midwifery inspections were held at the welfare centres, at which the total attendances of midwives numbered 236. These were all conducted by the supervisor, and usually under the supervision of a medical officer.

In 60 cases midwives were required to attend for special interview by a medical officer and in 24 cases midwives were reprimanded by letter.

Four women (non-European) were prosecuted for practising midwifery when their names were not on the City Council's list. One of them (G.W.) was previously listed as a midwife and had had her name removed.

G.W. .. £10 or one month. .. Sentence suspended for three years.

S.H. .. £5 or three weeks. .. Fine paid.

D.S. .. £10 or one month .. Sentence suspended for three years.

J.A. .. £10 or six weeks .. Term of imprisonment served.

ASSISTED MIDWIFERY.

Five confinements, all in indigent persons, were undertaken by the full-time non-European nurse-assistant.

During the year the Council paid the fees of private midwives attending indigent persons in 15 cases, and in 5 other cases part-fees were paid by a voluntary fund at the disposal of the Department.

Fees to medical practitioners called in by midwives to indigent confinement cases in emergency were paid in 51 cases, the total disbursement amounting to £41 17s. 6d.

Six maternity baskets are kept in the Department for use in indigent cases. They have been in constant use during the year.

Films.

In addition to films belonging to the Department, films have been hired from the Union Health Department for showing to the midwives at the periodical inspections, and also to mothers attending the welfare centres.

Non-European certificated midwives have had the advantage this year of attending a post-graduate course in Cape Town arranged by the non-European Nursing League.

NURSING AND MATERNITY HOMES.

Private nursing and maternity homes may be carried on only if registered by the Secretary for Public Health, and are to be conducted in accordance with the regulations made by the Minister under the Public Health Act. The inspections of such premises are made by the City Health Department on behalf of the Secretary for Public Health, to whom reports of the inspections are sent. This work is undertaken by the Deputy Medical Officer of Health through the maternal and child welfare branch of the Department. One of the health visitors is appointed as assistant inspector of nursing homes in addition to her other duties.

On June 30th, 1940, there were 31 registered nursing or maternity homes in the municipal area, as follows:

				F	remises.	Beds.
General		 	 		17	335
Maternity		 	 		11	174
Combined-		 	 		. 3	
General		 	 			18
Maternit	y	 	 			25
					-	
					31	552

During the year ended 30th June, 1940, 4 registered premises, viz., 2 general (18 beds) and 2 maternity (5 beds) were closed. Four new premises were registered, viz., 2 general (27 beds) and 2 maternity (24 beds).

Two applications for registration of maternity homes were refused on the ground of

The assistant inspector made 107 visits of inspection to nursing and maternity homes. These include inspections made to maternity homes under the Children's Act at the request of the Commissioner of Child Welfare.

Full reports were sent to the Secretary for Public Health in respect of 30 premises reported on by the assistant inspector, as follows:

-				e new ications.	Registered. premises.
General	 	 	 	2	10
Maternity	 - 10	 	 	3	13
Combined	 	 	 	-	2

PUERPERAL FEVER.

Reported cases of this notifiable disease are investigated by the Maternal and Child Welfare branch. Cases are admitted to the City Hospital.

The cases of puerperal fever reported in the year 1938-40, corrected for imported cases

and misdiagnosis, numbered 79 (18 European and 61 non-European).

The number of deaths amongst the 79 Cape Town cases was 13 (2 of the 18 European cases and 11 of the 61 non-European). The number of Cape Town deaths from the disease registered during the year was the same.

The mortality from this cause for a series of years, expressed as a rate per 1,000 live

births, is shown on page 15.

Attendance at Confinement.—54 of the cases were confined at home and 25 in hospitals. Of the 54 at home 20 were attended in labour by midwives only, 13 by doctors only, and 11 by doctors and midwives: 10 were unattended (9 being abortions)

Condition of Child.—40 of the cases supervened upon the birth of a living child and 37 of a dead foetus (in 2 cases no information). Of the 37 cases following delivery of a dead

foetus, 16 were of a dead viable foetus and 21 of a non-viable foetus.

Primiparae.—29 of the cases were reported as primiparae (i.e., women in their first confinement) and 48 multiparae (in 2 cases no information).

Treatment.—48 of the cases (corrected for misdiagnosis and imported cases) were treated in the City Hospital, 4 in the Peninsula Maternity Hospital, 4 in Groote Schuur Hospital, 1 in Valkenberg Mental Hospital, and 1 in the Volkshospitaal; the remaining 21 were treated at home.

There was one case at the Langa native location (fatal).

THE WORK OF THE HEALTH VISITORS.

There are in this branch of the Health Department 28 health visitors whose time is devoted to maternity and child welfare, besides the chief health visitor, the supervisor of midwives, the social welfare investigator and one health visitor in charge of the school clinics, one of work in connection with diphtheria prophylaxis, and one of the nursery school. There is also one non-European nurse-assistant and at the Langa Location one native assistant health visitor.

The health visitors' duties usually have as their starting point the visiting of mothers with newborn infants. Where the mother was attended at confinement by a trained midwife the visit is postponed until after the tenth day, but mothers attended by uncertificated persons are visited as soon as possible after the infant's birth in order to see that all is well with mother and babe. The health visitor gives advice as to the care and feeding of the baby and invites the mother to attend the centre as soon as she is able to do so. As far as possible the health visitor keeps in touch with mother and child during the whole period until the child goes to school. Expectant mothers known to the department are also visited and advised to attend the pre-natal clinic unless they are under the

regular care of their own doctor. Expectant mothers applying for grants under Section 18 of the Factories Act 1918 are referred to this department by the Factory Inspectors, and are reported on and advised.

Visits are also made to cases of puerperal fever, ophthalmia, pneumonia, measles and whooping cough, and advice is given as to nursing and other precautions to be taken.

Each health visitor assists at sessions at the welfare centre in her own district.

The following table shows the number of visits made during 1939-40 and previous years by the health visitors and the social welfare investigator (including the visits made by the tuberculosis health visitors and the V.D. nurse visitors):—

Classification of Visits.				Nu	mber of	Visits.				
Classification of Tierre.	1939-40	1938-39	1937-38	1936-37	1935-36	1934-35	1933-34	1932-33	1931-32	1930-3
Visits to houses where										-
births have occurred Subsequent visits to	10,731	10,516	9,580	10,272	10,416	9,360	9,822	9,649	10,029	10,510
houses where births have occurred Visits to houses where	38,914	34,792	34,862	35,642	32,774	32,399	34,741	35,558	31,951	34,334
deaths under 5 years of age have occurred	1,326	1,315	1,213	815	859	729	736	457	466	226
Visits to expectant mothers	3,190	2,966	2,547	2,862	2,595	2,480	2,200	2,278	1,713	1,381
fants Special follow-up visits	3,593 3,861	3,516 3,639	3,252 3,833	2,899 4,434	3,097 4,207	3,091 3,890	3,253	3,123	3,166	3,229
Visits to cases of tuber- culosis	11,482	9,900	8,683	8,989	8,142	6,547	6,087	6,624	6,265	6,450
Visits re cases of puer- peral fever	97	85	70	75	107	109	239	74	69	96
Visits re measles Visits re whooping cough	2 55	42	227 26	8 39	16 250	324 51	97 18	8 76	56 34	125
Visits re diarrhoea	42	27	14	20	21	56	310	11	37	23
Visits re chicken-pox Visits re ophthalmia	22	19	3	16	18	10	26	18	26	24
neonatorum	700 454	579 481	726 526	698 495	650 670	919 754	765 344	845 309	927 461	1,058
Visits re pneumonia Visits re trachoma	13	5	19	6	8	15	2	12	13	11
Visits re influenza	104	3 188	47 29	27	22	22 42	8	22	264	* 268
Visits re other diseases Visits re diphtheria im-										
munization	2,221 1,123	2,337 1,254	2,272 1,270	1,823	1,240	1,220 2,171	2,686 1,976	1,756	1,666	1.118
Visits re midwives	424	479	403	330	284	288	146	161	138	6
Visits to school children	811	851	1,048	791	1,273	1,248	815	1,098	567	
Visits to shope and factories	325	135	142	180	75	57	73	147	165	189
Visits to nursing homes	115	85	41	41	33	27	40	31	29	45
Visits re verminous persons	39	25	1	2	11	6	30	3	10	15
Visits re dental treat-	361	268	110	153	165	141	218	258	273	191
House-to-house visita-	5,308	4,446	2,637	1,831	970	642				
Visits re venereal disease	5,364	4,597	3,996	312	514	635	5,067	5,731	4,216	4.00
Other visits	1,329	1,118	644	954						4,23
Investigator	2,668	2,890	3,528	3,075	3,581	3,056	2,195	4,309	3,373	4,54
Total visits	94,683	86,699	81,749	77,976	73,758	70,289	71,894	73.676	67,348	68,593
Complaints referred to Chief Health Inspector	52	38	30	22	27	60	12	9	27	28

PROTECTED INFANTS.

The health visitors make periodic visits to foster homes (under the Children's Act) to supervise those children under ten years, known as protected infants, who are in the care of foster parents. 3,593 such visits were made by the health visitors, and there were 390 new protected infants registered during the year. Reports on these children are submitted every three months by the Medical Officer of Health to the Commissioner of Child Welfare.

This supervision of children in foster-homes is one of the most difficult aspects of the health visitors' work. Many parents, and especially unmarried mothers who are working, cannot afford to pay very much for their children placed with foster-mothers, and fre-

quently payment lapses altogether. Foster-mothers in such circumstances usually do all they can to supply the needs of children in their care, and a baby in a foster-home is often adopted by its foster-parents when payments lapse. On the other hand, cases of neglect or ill-treatment by foster-parents do occur, and it is often difficult to find suitable homes for foster-children who are in poor condition.

The cottage home at the Alicedale municipal housing estate, rented for the purpose by a voluntary committee, has provided for several such children since 28th March, 1940, and it is hoped that another assisted foster-home may be opened shortly.

SOCIAL WELFARE INVESTIGATOR.

Many cases come to the notice of medical officers and health visitors which require advice and guidance from the social and moral standpoint, especially in connection with the unmarried mother. Such cases are referred to the social welfare investigator, who is specially appointed for this work.

A record of work done during the year 1939-40 by the social welfare investigator is given below :-

New cases investigated		 	 	759
Visits to institutions		 	 510	
Visits to cases		 	 1,375	
Visits to Government	t Offices	 	 183	
Other visits		 	 600	
Total visits		 	 	2,668
Office consultations		 	 	1.154

MATERNAL AND CHILD WELFARE CENTRES.

Thirteen maternal and child welfare centres are maintained, at which 65 medical (or dental) sessions are held each week. A medical (or dental) officer attends at each of these sessions, except that at 9 of them the medical officer attends only twice a month. This is equivalent to 60½ sessions actually held per week by medical (or dental) officers (besides diphtheria immunization sessions and attendances of anæsthetists at dental sessions). The details as at 30th June, 1940, are shown in the following table :-

Address of centre.		ant con tations.		Pre-natal clinics.			Dental clinics.*			School clinics.†	
	E.	n-E.	В.	E.	n-E.	В.	E.	n-E.	В.	B.	
12, Keerom Street, Cape Town Aspeling Street, Cape Town St. James Street, Woodstock Norfolk Road, Maitland Good Hope Village Hall, Brooklyn Native Hospital, Langa Lawrence Road, Athlone Station Road, Claremont Wesley Street, Claremont Lansdowne Hall, Lansdowne Town Hall, Wynberg Retreat Road, Retreat Church Hall, Kalk Bay	2 1(1) 3 1 1(1) 1(1) 1 1(1) 1 1(1) 1 1(1)(4)	2 5 3 2 (1)(5) 3 1 2(1)(1) 1 2 	i(¹)	i i i(*)	1 1(%)	3(2) 1 2(3) 1 	i	2	3	2(*) 4(*) 4(*) 4(*) 4(*) 5(*) 5(*) 5(*)	
Total sessions per week	1(7)	24	1	11	3	8	1	2	51	5	

- E.—European; n-E.—non-European; B.—both.
- Including dental clinics for school children.

Other than dental.

Moved from 2nd Avenue, Claremont, in October, 1939.

- Session held weekly, but medical officer attends only twice a month.
- Two of these sessions are run concurrently.
 These two sessions are run concurrently.

(*) These two sessions are run concurrently.
 (*) i.e., session held fortnightly.
 (*) Natives only.
 (*) This weekly session is a pre-natal clinic as well as an infant consultation.
 (*) The weekly toddlers' clinic is held in rotation at Woodstock (twice a month), and Maitland and Wynberg (once a month each).
 (*) One general, one ophthalmic. All the other school-clinic sessions are general.
 (*) Two school clinic sessions held fortnightly on the same afternoon.

Of the 60½ weekly sessions as shown above, 23 were ordinarily conducted by fulltime medical officers and the remainder by part-time medical or dental officers. The pre-natal sessions at Langa native hospital are undertaken by the hospital medical officers. When full-time medical officers were engaged on other work (particularly diphtheria-immunization sessions) or were on leave, their place was taken by part-time medical officers.

The next table shows the attendances (classified for race) made at the infant consultations (including pre-school children), pre-natal clinics, school clinics and dinners, held at the centres during the year 1939-40:—

		co	Infant naultatio	ns.		natal nics.		iool iica.	and nun	
Centre.	Race.	Fir	ances.	Total attend-	Attend	lances.	Atten	dances.	Attend	dances.
		Under 1 year.	Over 1 year.	ances.	First.	Total.	First.	Total.	Adults.	Chil- dren.
12, Keerom St., Cape Town.	Eur. Non-Eur. Total	213 458 671	96 149 245	4,635 7,965 12,600					55 3,266 3,321	130 8,867 8,997
Aspeling Street, Cape Town.	Eur. Non-Eur. Total	16 951 967	8 357 365	802 17,436 18,238	13 891 904	37 3,652 3,689			141 3,975 4,116	511 18,929 19,440
Woodstock	Eur. Non-Eur. Total	386 453 839	152 215 357	9,585 10,496 20,081	202 369 571	977 1,416 2,393	724 655 1,379	2,177 1,401 3,578	316 6,482 6,798	658 16,089 16,747
Maitland	Eur. Non-Eur. Total	166 398 564	60 121 181	2,689 7,433 10,122	84 354 438	281 1,362 1,643	85 128 213	184 318 502	227 2,585 2,812	579 7,361 7,940
Brooklyn	Eur. Non-Eur. Total	71 71	34 34	2,423 2,423	33 - 33	162 — 162	87 87	228 — 228		
Langa	Eur. Non-Eur. Total	170 170	9 9	1,629 1,629	52 52	533 533				
Athlone	Eur. Non-Eur. Total	32 667 699	20 510 530	487 10,845 11,332	13 602 615	107 3,011 3,118	1 394 395	3 1,236 1,239	3,269 3,273	10 9,878 9,888
Station Road, Claremont.	Eur. Non-Eur. Total	127 178 305	47 82 129	2,942 4,364 7,306	88 329 417	236 969 1,205	79 198 277	332 955 1,287	99 1,713 1,812	140 3,962 4,102
Wesley St., Claremont*	Eur. Non-Eur. Total	223 223	105 105	6,475 6,475					684 684	4,827 4,827
Lansdowne	Eur. Non-Eur. Total	73 144 217	32 90 122	2,609 3,635 6,244			47 16 63	97 35 132	473 1,013 1,486	746 9,326 10,072
Wynberg	Eur. Non-Eur. Total	154 388 542	55 184 239	2,755 6,505 9,260	57 376 433	196 1,280 1,476	68 142 210	159 375 534	22 2,505 2,527	104 5,511 5,615
Retreat	Eur. Non-Eur. Total	49 370 419	30 109 139	1,344 6,854 8,198	21 358 379	67 1,727 1,794	30 127 157	426 764 1,190	3,152 3,160	7,708 7,721
Kalk Bay	Eur. Non-Eur. Total	6 35 41	4 19 23	172 1,301 1,473						
Total	Eur. Non-Eur. Total	1,293 4,435 5,728	538 1,950 2,488	30,443 84,938 115,381	511 3,331 3,842	2,063 13,950 16,013	1,121 1,660 2,781	3,606 5,084 8,690	1,345 28,644 29,989	2,891 92,458 95,349

* Moved from 2nd Avenue, Claremont, in October, 1939.

Figures for dental clinics, whether for school children or for mothers and pre-school children, are not included in the above table.

INFANT CONSULTATIONS.

In visiting the health visitors invite the mothers to bring their infants to the welfare centres for advice as to feeding and care and for medical supervision, and periodical attendance is encouraged for children up to school age.

The infant consultations are primarily for preventive and educational purposes. They are not intended for the treatment of disease, but minor ailments are dealt with and cases of illness are referred either to the family doctor or, in cases of poverty, to the hospitals and dispensaries.

A medical officer is in attendance and certain of the health visitors of the district are present.

As in previous years valuable assistance has been given by voluntary workers at the welfare centres, who attend regularly at one or more sessions a week and assist with the clerical work at the centres.

Students from the Social Science Department of the Cape Town University and from the Buxton Pre-School Teachers' Training Centre act as clerical assistants at the centres, as part of the practical work of their course. Nurses taking the health visitors' course at the Technical College, and the mothercraft course at the Buxton Home, also carry out practical work at the centres during their training. In addition, doctors taking the course for the Diploma of Public Health, have attended for observation at the centres.

At the end of the year under review 39 infant consultations were being held weekly. They are enumerated in the table on page 20. During the year 8,216 children were registered as new cases, and the total attendances of children at the infant consultations numbered 115,381. Details are shown in the table on page 21.

Of the 8,216 children registered as new cases 5,728 (1,293 European and 4,435 non-European) were under one year of age at the time of their first attendance, and 2,488 (538 European and 1,950 non-European) were over one year of age at that time.

Of the new cases registered, 237 were of children resident outside the Cape Town area, viz., under one year of age, Europeans 66, non-Europeans 91; over one year of age, Europeans 13, non-Europeans 67. The new cases registered within the City (excluding attendance at the Langa centre) were as follows:—

		European.	Non-European.
Under one year of age	 	 1,227	4,174
Over one year of age	 	 525	1,874

These first attendances under one year of age amounted to 53 per cent. of the registered births (41 per cent. in the case of Europeans and 59 per cent. in the case of non-Europeans).

These figures do not include infants who attended the consultations of the South African Mothercraft Training Centre. The work done at these consultations during the year ended 30th June, 1940, is shown in the following table kindly supplied by the Matron:—

Voluntary Centre.	No. of Sessions in the year.	No. of new cases (infants).	Total attendances (infants).	Total attendances (toddlers).
Bowwood Road, Claremont Sea Point	150 50 24	637 166 31	4,316 2,187 401	709 350 241
Camps Bay	12	24	203	59

The addition of these figures considerably increases the percentage of European infants who attended infant consultations. Expectant mothers are also given interviews at Bowwood Road (42 during the year 1939-40). See also page 80.

Toddlers' Sessions.—These sessions are for European children between 2 and 5 years. Attendances are by appointment, and the doctor and nurse are able to give constructive advice more adequately than at the ordinary welfare sessions, at which it is impossible to regulate the number of cases attending. A session is held every fortnight at the Salt River centre and monthly at the Maitland and Wynberg centres. The attendances during the year were as follows:—

			First attendances at toddlers' clinic.	Total attendances.
Woodstock	 	 	 54	376
Maitland	 	 	 19	194
Wynberg	 	 	 34	231
			107*	801
			-	

^{*} Of these 57 were first attendances at the welfare centres.

Instructional Test Feeds.—Medical officers frequently recommend nursing mothers to attend for special instruction in feeding their infants, and for this purpose a special hour is set aside weekly at each centre, apart from the ordinary medical session, so that there are no distractions for mother or nurse. During the year 2,779 mothers attended with their infants for instructional test feeding (1,050 European and 1,729 non-European). These were made up from the different centres as follows:—

					Eur.	Non-Eur.
Keerom Stre	eet		 	 	132	117
Aspeling Str	eet		 14.4	 	10	390
Woodstock			 	 	318	261
Maitland			 	 	123	112
Brooklyn			 	 	30	_
Langa			 	 		76
Athlone			 	 	31	318
Claremont (S	Station	Road)	 	 	115	91
Claremont (2						87
Lansdowne			 		95	64
Wynberg			 	 	104	94
Retreat			 	 	68	102
Kalk Bay			 	 	24	14
				-	1,050	1,729
					1,000	1,120

Infant consultations are also held by the hospital authorities at the Peninsula Maternity Hospital and St. Monica's Home for the babies born in the maternity practice of these institutions.

The number of attendances at the infant consultations is shown in the following table over a period of years:—

Centre.	1939-1940	1938-1939	1937-1938	1936-1937	1935-1936
Keerom Street	12,600	11,696	12,830	11,486	11,754
Aspeling Street	18,238	17,592	17,623	20,305	20,464
Woodstock	20,081	17,982	16,284	17,682	19,866
Maitland	10,122	10,729	10,632	10,518	9,999
Brooklyn	2,423	2,279	2,157	1,767	2,244
Langa	1,629	1,234	1,402	1,512	1,258
Athlone	11,332	8,654	8,092	8,489	7,393
Claremont (Station Rd.)	7,306	9,461	9,396	8,060	8,659
Claremont (2nd Ave.)	6,475	1,963			
Lansdowne	6,244	6,255	6,152	5,438	5,716
Wynberg	9,260	8,331	8,613	7,612	8,743
Retreat	8,198	7,279	7,301	7,927	7,261
Kalk Bay	1,473	662			
Totals	115,381	104,117	100,482	100,796	103,357

Dried milk for children who cannot be fed by their mothers is supplied at the centres under the direction of the medical officers and cost prices are charged, but in cases of poverty it is supplied at part-cost or free. Such medicines as may be ordered are supplied on similar terms.

In the year ended 30th June, 1940, 1,743 new cases were supplied with dried milk and 52,616 lbs. were issued. The cost of the dried milk was £3,310 16s. 9d. The amount paid by mothers in respect of dried milk and medicines was £1,324 19s. 0d.

At page 25 reference is made to the provision of meals and of free milk for children under school age.

Immunization against Diphtheria.—Sessions for immunization injections are held at, and in connection with, the welfare centres. Particulars will be found at page 31. These are not included in the statistical details given in the present section. One health visitor devotes the whole of her time to this work.

PRE-NATAL CLINICS.

There has been an increase in attendances at the pre-natal clinics during the year under review, and at the end of June, 1940, there were 13½ weekly medical sessions being held at 9 of the welfare centres. These are enumerated in the table on page 20.

Treatment is given at the pre-natal clinics with a view to the prevention of congenital syphilis (see page 60).

In cases of poverty expectant mothers are invited, on the recommendation of the medical officer, to attend for free dinners at the welfare centres, where meals are also provided for pre-school children (see page 21).

Where in-patient treatment is required for diseases associated with pregnancy medical officers may recommend women for admission to the Peninsula Maternity Hospital or, in the case of non-European mothers, to St. Monica's Home, where the Corporation pays an annual subsidy for the service. Close co-operation exists between this branch of the Health Department and these maternity hospitals, and thanks are due to the matrons and staff in this respect.

During the year 3,842 expectant mothers were registered as new cases at the prenatal clinics, and the total attendances numbered 16,013. Details are shown in the table on page 21.

Of the new cases registered, 53 were of expectant mothers resident outside the Cape Town municipal area (13 European and 40 non-European). The new cases resident within the City, exclusive of the clinic at Langa, numbered 3,737 (European 498, non-European 3,239). That is to say, the number of new cases attending the municipal pre-natal clinics amounted to 37 per cent. of the number of registered live births (16 per cent. for European and 46 per cent. for non-European). It is to be noted that pre-natal clinics are also held by the Peninsula Maternity Hospital and St. Monica's Home for their maternity cases.

The majority of midwives working within the municipal area are co-operating to an increasing extent with the pre-natal clinics.

The number of attendances at the pre-natal clinics is shown in the following table over a period of five years:—

Centre.	1939-1940	1938-1939	1937-1938	1936-1937	1935-1936
Aspeling Street	 3,689	3,955	3,441	3.295	2,883
Woodstock	 2,393	2,185	2,511	2.418	2,339
Maitland	 1.643	1,388	1,223	1.396	1.171
Brooklyn	 162	53			
Langa	 533				
Athlone	 3.118	2,356	1.740	1.922	1,723
Claremont (Stn. Rd.)	 1,205	1,252	1.121	1.049	1,051
Wynberg	 1,476	1.383	1.129	1.316	1,004
Retreat	 1,794	1,589	1,329	1,374	1,141
Totals	 16,013	14,161	12,494	12,770	11,312

The pupil midwives from Vrede Oord attend the pre-natal clinics at Aspeling Street as part of their training.

DENTAL CLINICS.

Four weekly dental sessions are (30th June, 1940) held for nursing and expectant mothers and pre-school children, three at the Woodstock centre and one at the Wynberg centre. Two of the sessions at Woodstock are for non-Europeans and one for Europeans; and the session at Wynberg deals with Europeans by appointment in the first part of the session, and later with non-Europeans.

No charge is made for extractions and fillings, but free dentures are not ordinarily supplied. A voluntary fund is, however, maintained for the supply of dentures at a low cost to women attending the clinic who would otherwise be unable to obtain them. These dentures are fitted by the Council's dentists who conduct the clinic and the amounts paid by the women cover the cost of material and of the services of the dental mechanics.

Below is a table of the work done at the dental clinic for mothers and pre-school children during the year 1939-40:—

		Е	uropes	ın.	Non	-Euro	pean.		Total.	
		Adults	Children	Total	Adults	Children	Total	Adults	Children	Total
	First	170	420	590	808	1,060	1,868	978	1,480	2,458
ATTENDANCES.	Other	227	124	351	556	58	614	783	182	965
	Total	397	544	941	1,364	1,118	2,482	1,761	1,662	3,423
Extractions (1)	Attendances	195	443	638	1,049	1,103	2,152	1.244	1,546	2,790
Dataceons (*)	Teeth	1,055	1,996	3,051	8,227	7,957	16,184	9,282	9,953	19,235
Fillings	Attendances	18	69	87	1	8	9	19	77	96
rinings	Teeth	26	113	139	3	12	15	29	125	154
Scalings	Attendances	1	-	1	-	-	-	1	-	1
Dressings	Attendances	-	1	1	-	1	1	-	2	2
Diedauge	Teeth	-	1	1	-	1	1		2	2
Attendances for examination		25	31	56	25	6	31	50	37	87
Attendances for interview		1	-	1	1	-	1	2	-	2
Persons refused treatment		1	-00	1	1	-	1	2	-	2
Attendances for dentures		156	-	156	287	-	287	443	-	443
Persons supplied with dentures	Full sets	25	-	25	45	-	45	70	-	70
(included above,	Half sets (upper or lower)	5	-	5	3	-	3	8	-	8

(1) All extractions were under general anaesthetic.

For school children's dental clinics see page 26.

PROVISION OF DINNERS AND MILK MEALS.

At ten of the centres (see table on page 21) dinners for indigent expectant mothers and pre-school children are served daily except Saturdays and Sundays. The value of these dinners in combating malnutrition is shown by the improvement seen in the health of mothers and children receiving a course of these meals.

In the year under review the number of dinners given amounted to 125,338. Details are shown in the table on page 21.

In the calendar year 1940 the cost amounted to 3.0d. per dinner. This figure includes the cost of food, extra staff engaged on account of the dinners, and fuel at two centres. It does not include current for the electric stoves at the other centres, nor the wages of the ordinary members of the staff who may assist in connection with the dinners. The services of the mothers themselves are utilized as much as possible.

In accordance with arrangements made with the School Board, who are responsible for the distribution of free milk to school children under the scheme of the Dairy Industry Control Board, free milk is distributed to poor children under school age at the infant welfare centres. The distribution is made every week-day, and the children consume the milk at the centres. During the year under review, the attendances of children for milk numbered 35,610 and the milk consumed amounted to 2,136 gallons (not including the municipal nursery school).

Breathing and Remedial Exercise Classes.

These classes are conducted by a trained physio-therapist for European and non-European pre-school children.

During the year 44 sessions (for both races) were held at the Woodstock centre, where the new cases numbered 115 and the total attendances 552. At the Aspeling Street centre 50 sessions (for both races) were held, where the new cases numbered 12 and the total attendances 510.

SCHOOL CLINICS.

By arrangement with the Provincial Administration school clinics are held during school terms at the City Council's welfare centres. General school clinic sessions with a medical officer in attendance are (June, 1940) held weekly at Woodstock, fortnightly at Athlone, Claremont, Lansdowne, Wynberg and Retreat, and fortnightly on the same afternoon at Maitland and Brooklyn. A weekly ophthalmic clinic is held at Woodstock. Dental clinics for school children are held three times a week at Woodstock and three times a fortnight at Wynberg. One health visitor is specially appointed to supervise the work of the school clinics.

Dental treatment is provided for school children at the Cape Town Free Dispensary of the Cape Hospital Board. The total available dental facilities are inadequate.

Spectacles are supplied by a local firm of opticians at cheap prices to children for whom they have been ordered at the ophthalmic clinic. The charge is reduced or remitted in cases of indigency.

Children found to require other specialist attention are referred to the out-patient department of the hospitals.

Admission to convalescent homes has been obtained for many children suffering from under-nourishment and debility. A large number of children attending the clinics are found to be suffering from the effects of underfeeding.

The work done during the year ended 30th June, 1940, is shown in the Table on page 21, and is further analysed in the following figures:

	Ophthalmic school elinic.			Genera	lschool	elinie.	Dental school clinic.		
	Eur.	Non- Eur.	Total.	Eur.	Non- Eur.	Total.	Eur.	Non- Eur.	Total.
Number of new cases : Cape Town residents Residents outside Cape	250	233	483	790	1,328	2,118	1,098	1,552	2,650
Town Total attendances Number of sessions held Children fitted with spec-	38 447	27 347	65 794 36	43 3,159	4,737	7,896 159	1,366	1,762	3,128
tacles: Full-paying Part-paying Free	119 23 56	82 24 42	201 47 98	Tee	th extra	eted			12,338

DAY NURSERIES.

The following crèches, or day nurseries, are maintained in Cape Town :-

- (1) By the Cape Town Board of Aid at corner of Roeland Street and Harrington Street, Cape Town, in connection with its shelter for European families (see page 85). This day nursery is for European children. Its capacity is 50. No charge is made for attendance.
- (2) By the Cape Town Board of Aid at Tafelberg House, Canterbury Street, Cape Town, in connection with its shelter for non-European families. This day nursery is for non-European children. Its capacity is 100. No charge is made for attendance.
- (3) By the A.C.V.V. at the Social Centre and European Working Girls' Home, 41, Salt River Road, Salt River. This day nursery is for European children. Its capacity is about 40. Since the end of the year under report it has moved into larger new premises.
- (4) By the Vroue Sending Bond at the Training School for Coloured Christian Social Workers, 109, Harrington Street, Cape Town. This day nursery is for non-European children. Its capacity is 20.
- (5) By the Janet Bourhill Institute, Claremont. This is an institute for the promotion of the health and social welfare of the poor non-European residents in the locality. It is not yet built, but a start has been made with a club for girls, and also a day nursery in a cottage adjoining the institute site, at corner of Hereford Street and Albert Road, near Second Avenue, Claremont. The day nursery makes provision for over 35 non-European children whose mothers go out to work, though the average attendance does not exceed 30.

NURSERY SCHOOLS.

There is a pre-school training centre, with a demonstration and practice nursery school, at the Lady Buxton Home, Claremont (Society for the Protection of Child Life). The training centre, under the control of the Director, receives a limited number of full-time students, not accepting more than twelve each year. The nursery school is attended by 30 European children, who all pay full fees, viz., four guineas a term (four terms a year). The staff of the nursery school consists of a qualified superintendent, assisted by students of the training centre. The other staff at the training centre is a secretary and a domestic science teacher. The staff and the parents of the children meet a few times a term as an association to discuss questions concerning the pre-school child. The Union Education Department pays a substantial annual grant to the institution. The premises were built by the Society with the assistance of the Department.

A nursery school for 40 non-European children is maintained by the Marion Institute, 124, Chapel Street, Cape Town. The children are provided with meals. A qualified kindergarten teacher attends voluntarily four days a week, two unqualified teachers (both non-Europeans) are employed and help is also given by other workers.

At the Liberman Institute, Muir Street, Cape Town, a nursery school is held for 96 non-European children. The facilities are restricted owing to lack of means. The nursery-school teacher is unqualified, but works under the guidance of Mrs. Batson, of the Cape Town University, and is assisted by voluntary workers. The children receive the allowance of half a pint of State-aided milk a day through the Cape School Board, but no other meals. No charge is made for attendance. Hours 9 a.m. to 1 p.m.

At the Board of Aid day nurseries (see above) nursery school supervision is given to the children of pre-school age by staff with teaching qualifications. Meals are provided.

There are also private nursery schools for pre-school children on an unsubsidized economic basis, pre-school classes at certain private schools, and at least one public school with a nursery-school class.

Since the end of the year under report the City Health Department has built and opened in Salt River a nursery school for non-European children.

Municipal Nursery School—The first nursery school provided by the Council was opened during the year in premises built for the purpose in Shelley Street, Salt River. It is for non-European children. A health visitor, with qualifications and experience in nursing, school teaching and Froebel methods, is in charge as superintendent. The Department has the benefit of a voluntary advisory committee of representatives of bodies interested in nursery school work.

The following is the superintendent's report up to 30th June, 1940.

The non-European nursery school was first opened on November 15th, 1939. It is for children who have not yet started school and whose life is largely spent in the streets. Admission is restricted to children whose age is between 3 and 6 years, with certain reasonable exceptions.

Admission at first was chiefly on recommendation from welfare centre and health visitor and was confined to Salt River area of necessity. It was necessary also to make definite choice of children where the majority was in need and only a few could benefit.

Accommodation provided comfortably for 40 but a margin of 45 to 50 allows for unavoidable absences. It was thought wiser to develop gradually and only 15 were admitted on the first day. Of these all were in need of better food, 10 were physically defective or retarded, and the rest of more comfortable circumstances but in need of social contact or with home difficulties.

Diet was carefully planned from the first and the children have a midday meal which includes meat, cheese or fish, fresh vegetables and fruit every day. They receive milk with light food, such as bread and butter just after arrival and before leaving. One pint of milk per day per head is given (including the half-pint of State-aided milk allowed to school children).

Special attention is paid to the forming of good habits and clean behaviour. Baths are given when necessary, but the standard of cleanliness is high and verminous heads not common. Each child is examined by the superintendent upon arrival, treated for minor ailments, sent to the welfare centre or excluded according to necessity. Special cases are examined by the visiting medical officer weekly. Each one changes into a suit of overalls.

The daily programme includes free play in the garden, individual self-expression through apparatus and handcrafts, and two hours' rest on stretcher beds. The hours are from 8.30 a.m. to 3.30 p.m. on five days a week.

Improvement in most respects has been gradual; the most noticeable change is seen in the children's bearing. Sullenness and suspicion have given way to open looks and cheerful friendliness. After eight months it is possible to see a substantial gain in weight and height, and considerable improvement in muscle tone in the majority.

Infection during this period was limited to 12 cases of whooping-cough and a few cases of scabies. There are now 50 names on the register and the average attendance is 40 in the warm weather and 32 in the cold.

The importance of contact with the parents is understood and visits to the homes are made by the health visitor and superintendent. Meetings have been held at the school for the parents, where talks are usually given by the superintendent or by a member of the committee.

A small payment for the child is required wherever possible. This is graded according to income scale, from 6d. per day down to 1d., with some specially recommended exceptions. The average income at present from this source is 10s. weekly.

The staff employed at the opening of the school consisted of a reliable coloured cook and two young untrained coloured girls, besides the superintendent.

There are now 6 young coloured girls in process of being trained as nursery maids, lectures being given by the medical staff and superintendent.

The attendances at the nursery school up to 30th June, 1940, amounted to 4,284, as shown in the following table:—

Period. 1939.			New	entrants.	Totals on register.	Average attendances for the month.
November				24	24	16
December 1940.	**	5		24	24	16
January				19	30	25
February				10	39	31
March				4	42	35
April				4	46	38
May		١		4	50	31
June				-	50	32

OPHTHALMIA NEONATORUM AND GONORRHOEAL OPHTHALMIA.

For the purpose of notification ophthalmia neonatorum is taken to mean a purulent inflammation of the eyes of an infant beginning within twenty-one days after birth, whether it is due to infection with gonococcus or not. Cases of inflammation of the eyes beginning after the twenty-first day of life are not regarded as ophthalmia neonatorum, but if due to gonococcal infection are notifiable as gonorrhoeal ophthalmia.

The number of cases of these diseases reported in the year 1939-1940, corrected for imported cases and misdiagnosis, was 241 (29 European and 212 non-European).

Of these 241, 13 were cases not in the newly-born (all non-European), being at the time of onset aged 22, 23 days, $1\frac{1}{2}$, 2, $4\frac{1}{2}$, months 2, 2, 3, 3, 3, 15, 23 and 30 years respectively.

The number of Cape Town cases of true ophthalmia neonatorum notified during the year was therefore 228, comprising 29 European and 199 non-European.

Of these 228 cases, 57 were born in institutions, 170 at home (in one case no information). Of the 170 home confinements, 14 were recorded as having been attended by doctors and 147 by midwives only; 9 were unattended.

The reason why ophthalmia neonatorum is a notifiable disease is that the Medical Officer of Health may ensure so far as possible that the cases shall receive efficient treatment. The disease is recognized as being an important cause of blindness or injury to sight if treatment is not undertaken, while on the other hand the cases respond well to efficient treatment. Every case has therefore been visited by the health visitor at the earliest possible moment after being reported, and many have been seen by the lady medical officer. In-patient treatment has been supplied by the Groote Schuur Hospital in every case where it has been advisable. In 42 cases in-patient treatment has been secured, 40 in the Groote Schuur Hospital, 1 in the City Hospital and 1 in the Peninsula Maternity Hospital. In the other 186 cases 4 patients received out-patient treatment at the Groote Schuur Hospital, 1 at the Peninsula Maternity Hospital and 1 at the Cape Town Free Dispensary. 180 were treated at home, of which 150 were attended to by nurses from the district nursing organisation of the Cape Hospital Board.

It is to be recorded that the health visitors reported 97 of the cases as "slight," and 130 as "moderate" or "grave" (in one case no information).

In addition to the above figures there were at the Langa location 4 native cases of ophthalmia (at the time of onset aged 1, 9, 14 and 18 days).

Efforts were made to see all children after the completion of the treatment, and the results, including the Langa cases (all complete recoveries), were as follows:—

Eyes completely		ered	 	219
Cases of blindnes	88		 	-
Sight damaged			 	2
Died before reco	very		 	5
Lost trace of			 	5
No information			 	1
				232

SECTION IV.—INFECTIOUS AND OTHER DISEASES.

The cases of compulsorily notifiable disease reported in Cape Town during the year 30th June, 1940, are shown in Table N, on page 130.

No cases were reported of the following notifiable diseases: Asiatic cholera, smallpox, plague, glanders, anthrax, rabies, trypanosomiasis, yellow fever, lead poisoning.

In the Tables on pages 131 to 133 the notified cases (corrected) are classified by race and :—

(Table O) in age and sex groups.

(Table P) in months, according to date of notification.

(Table Q) in wards.

The number of cases notified in a series of past years is set out in Table R, on page 134, and similar information as to deaths from these and certain other infectious diseases will be found in Table C, on pages 118 and 119.

Other statistical details as to deaths from infectious diseases are contained in Table A, at page 96, and in Tables B and D, on pages 117 and 120.

CORRECTED NOTIFICATION AND DEATH RATES PER 1,000 POPULATION FROM ENTERIC FEVER, DIPHTHERIA and SCARLET FEVER.

		Enterio	fever.			Dipht	heria.		1	Scarlet	Fever.	
Year.	Notifie	ations	Dec	ths	Notific	ations	Dec	aths	Notifie	ations	Des	aths
	Eur.	Non- Eur.	Eur.	Non- Eur.	Eur.	Non- Eur.	Eur.	Non- Eur.	Eur.	Non- Eur.	Eur.	Nor Eur
1914–15	3.13	2.89	0.26	0.30	1.94	0.82	0.20	0.29	0.98	0·13 0·10	0.03	
1915–16 1916–17	1.90	1.92	0.16	0.41	1.91	0.53	0.12	0.17	0.60	0.05	_	-
1917-18	2.20	1.58 2.40	0.13	0.42	1.22	0.31	0.03	0.13	1-65	0.23	-	-
1919-20	3.46	2·50 3·78	0.22	0.52	1·30 0·75	0.45	0.08	0.15	2.84	0.29	0.03	=
921-22	1.98	2.48	0.20	0.50	0.86	0.22	0.08	0.07	0.94	0.11	_	_
1923-24	1.12	1.04	0.11	0.23	1.51	0.55	0.08	0.12	0.24	0.03	=	_
1925-26	0.78	1.05	0.07	0.18	1.60	0.48	0.07	0.12	1.15	0.08	=	0.0
1926-27	1·02 0·84	1.26	0.08	0.22	1-25	0.54	0.08	0.11	1.76	0.05	0.02	0.0
1928-29	0.76	0.86	0.10	0.22	1.23	0.45	0.10	0.09	1.93	0.16	0.01	0.0
1930-31	0.71	0.84	0.09	0.19	1.38	0.76	0.06	0.09	3·11 0·87	0 32 0 14	0.01	-
1932-33	0.21	0.23	0.02	0.04	1.00	0.57	0.06	0.05	0.85	0.14	=	=
1934-35	0.22	0.36	0.04	0.07	1.61	1.00	0.06	0.14	1.55	0.10	0.01	0.0
1936-37	0.22	0.67	0.01	0.09	1.45	0.84	0.01	0.08	2.98	0.20	0.02	0.0
1937–38 1938–39	0.37	0.28	0.03	0.03	3.36	1.56	0.12	0.31	0.51	0.05	_	-

ENTERIC OR TYPHOID FEVER.

The cases of this disease reported in the year 1939-40, corrected for misdiagnosis and imported cases, numbered 69 (35 European and 34 non-European); equivalent to an incidence rate of 0.22 per 1,000 population (0.22 European and 0.22 non-European).

The number of deaths amongst the 69 cases was 5 (1 European and 4 non-European), giving a case mortality of $7 \cdot 2$ per cent. ($2 \cdot 9$ European and $11 \cdot 8$ non-European).

The total deaths from enteric fever registered in the year as belonging to Cape Town was the same, equivalent to a death rate of 0.01 per 1,000 population (0.006 European and 0.026 non-European).

There were no cases at the Langa native location.

The figures for 26 years are given in the table on page 29. In the year under report the mortality from enteric fever (all races) and the incidence in non-Europeans were the lowest on record for Cape Town.

The monthly distribution of the notifications is shown in Table P, on page 132. 38 cases (i.e., more than half) were notified in the four months (January-April) following midsummer.

The cases occurred in 54 houses, in 50 of which (including one institution) there was one case each, in 1 two cases, in 2 three cases, and in 1 eleven cases.

The ward distribution is given in Table Q, on page 133. Eleven of the 14 cases in Ward 7 were in one house.

The age and sex distribution is shown in Table O, on page 131.

Three of the cases (European), notified in January, 1940, though developing the disease in Cape Town, acquired the infection at Kimberley in the course of an outbreak there. There were also other cases that had acquired the infection outside Cape Town. Every year there are a number of cases which have been infected elsewhere but are counted as Cape Town cases because they have fallen ill while living in Cape Town.

Of the 121 (uncorrected) Cape Town patients, 108 were treated at the City Hospital and 4 in other hospitals.

Amongst the cases from outside Cape Town that were treated in the City Hospital was a case of meningitis caused by infection with B. paratyphosus B (from Mulder's Vlei, C.P.). All the other cases treated at the City Hospital were B. typhosus infections. Paratyphosus infection is extremely rare in Cape Town.

DIPHTHERIA.

The cases of this disease reported in the year 1939-40, corrected for misdiagnosis and imported cases, numbered 416 (286 European and 130 non-European). This is equivalent to an incidence rate of 1.31 per 1,000 population (1.75 European and 0.84 non-European).

The number of deaths from the 416 cases was 29 (9 European and 20 non-European), giving a case mortality of 6.8 per cent. (3.1 per cent. European and 15.4 per cent. non-European). The case mortality of Europeans and non-Europeans presents a striking contrast.

The total deaths from diphtheria registered in the year as belonging to Cape Town numbered 24 (5 European and 19 non-European), equivalent to a death rate of 0.08 per 1,000 population (0.03 European and 0.12 non-European).

18 of the 19 non-European deaths were of children under 10 years old, and 16 under 5 years old. Of the 5 European deaths, 2 were of adults, 2 in the age-group 5-10 years, and 1 in the age-group 1-2 years.

There was one case of diphtheria in the Langa native location (non-fatal). It is excluded from the above figures.

The figures for 26 years are given in the table on page 29, from which it will be seen that there was considerable abatement of the unusual prevalence that obtained in the previous two years.

Other particulars will be found in Tables N to R, on pages 130 to 134.

23 of the cases occurred in institutions, viz., 8 at the City Hospital for Infectious Diseases in Ward 2 (one doctor, 6 nurses and one wardmaid), 2 each at Groote Schuur Hospital, Woodstock Hospital and Valkenberg Mental Hospital, one at the Somerset Hospital, and 8 in five other institutions (in three of which there were 2 cases each). The other cases occurred in 367 houses, in 346 of which there was one case each, in 18 two cases each, in 2 three cases each and in 1 five cases.

Of the 622 (uncorrected) Cape Town patients, 568 were treated in the City Hospital,

and 2 in other hospitals.

Diphtheria Carriers.—14 patients were admitted to the City Hospital as diphtheria carriers (not counted in the figures above), and in 81 cases which were admitted as diphtheria the diagnosis was changed to "diphtheria carrier." Four other persons, who were not admitted to hospital, were also reported as diphtheria carriers. Amongst the City Hospital patients counted as cases of diphtheria there were 8 in which the infection was nasal, one in which it was in the ear, and one on the finger.

In one case admitted as diphtheria from Langa native location the diagnosis was

changed to "diphtheria carrier.

Of the patients from outside the City area, one was admitted as a diphtheria carrier; in 6 cases admitted as diphtheria the diagnosis was changed to "diphtheria carrier," and one case admitted for another disease was found to be a diphtheria carrier also.

DIPHTHERIA IMMUNIZATION.

During the year ended 30th June, 1940, free diphtheria immunization was carried out by the Child Welfare branch of the Department as in previous years, in child welfare centres, schools and institutions. During the unusual diphtheria prevalence in the two years 1937-39 there had been an increase in the number of children immunized, but with the decline in the disease in 1939-40 the numbers immunized fell again (to 4,962).

Though the principal aim in propaganda has been to persuade parents to have their children immunized as soon after the first birthday as possible, a large proportion of the children immunized have been of school age. Sessions have been held at schools and other institutions where application has been made for them. In schools the children immunized have been drawn as far as possible from those who are under 10 years of age; that is, from those who are most susceptible to diphtheria, and the Schick test has been omitted prior to inoculation.

The material used has been mainly alum-precipitated toxoid of Burroughs Wellcome, Parke Davis, and the South African Institute of Medical Research. The dosage employed during the year under report was 0-2 c.c. or 0.5 c.c. at the first injection and

0.5 c.c. at the second injection, four weeks later.

A small quantity of toxoid-antitoxin floccules (Burroughs Wellcome) and anatoxine

(S.A.I.M.R.)—three injections—has also been used.

The work done during the year ended 30th June, 1940, is shown by the following figures:—

figures :-							
Number of sessions:	schools						33
	institution	ns					1:
7.00	clinics		**			**	63
210	camics						
First-series protective	inoculatio	ns:-					10
* ******** P	First.	Seco	nd.	Third.	N	o. of Per	sons.
	4,937	4,3	22	33		4,937	
Second-series protection	ve inoculat	ions :-					
	First.	Seco 28		Third.	No.	of Pers	one.
Persons immunized :				-			
	Age.		Euroj		No	n-Europ	ean
	0 - 1		7			90	
	1 — 2		25			370	
	2 - 3		16			282	
	3 - 4		11			258	
	4 - 5			9	**	246	
	5 - 6	* *	10	0		198 218	
	$\frac{6}{7} - \frac{7}{8}$		9.0			239	
	$\frac{7}{8} - \frac{8}{9}$	* *	29			192	
	9 - 10	**	. 27			145	
	$\frac{3}{10} - \frac{10}{11}$		25			126	
	$\frac{11}{11} - \frac{12}{12}$		10			26	
	12 and ov			5		10	
	Age not re			3		21	
			2,54	1		2,421	
			-	_		2.368	
	At schools	ione			**	229	
	At institut At child w		entres			2,365	
						4,962	
Injections given :-				(DW)		2.235	
Al	um-precipi	tated t	oxoid	(DW)		4,280	
	11 11		"	(PD)		2,681	
The state of the s	, , , , , , , , , , , , , , , , , , ,	win O.		SAIMR)		116	
	xoid-antite	oxin no	coures 			49	
						9,361	-
Persons Schick-tested	:-	27	- time	Not re	ad	Total.	-
	Positive.		ative. 15		acl.	84	

SCARLET FEVER.

The cases of this disease reported in the year 1939-40, corrected for misdiagnosis and imported cases, numbered 135 (124 European and 11 non-European); equivalent to an incidence rate of 0.43 per 1,000 population (0.76 European and 0.07 non-European).

There were no deaths from scarlet fever.

There were no cases at the Langa native location.

The cases occurred in 119 houses, in 107 of which (including 5 institutions) there was one case each, in 9 two cases, in 2 three cases, and in 1 four cases.

Other particulars will be found in the table on page 29 and in Tables N to R, on pages 130 to 134.

Of the 144 (uncorrected) Cape Town cases 105 were treated in the City Hospital.

ERYSIPELAS.

The cases of this disease reported in the year 1939-40, corrected for misdiagnosis and imported cases, numbered 68 (29 European and 39 non-European). There was one death (European).

The cases occurred in 68 separate houses (including 4 institutions), there being no secondary household cases.

Other particulars will be found in Tables N to R, on pages 130 to 134.

Of the 74 (uncorrected) Cape Town cases, 23 were treated in the City Hospital and 4 in other hospitals.

There was one case at the Langa native location.

Cases (Corrected) and Deaths from Cerebrospinal Fever, Acute Poliomyelitis, and Infective Encephalitis.

	Cer	ebrospi	nal fev	er.	Act	te poli	omyelit	Infective encephali			litis.	
Year.	Cas	108.	Den	Deaths.		Cases.		aths.	Cases.		Deaths.	
	Eur.	Non- Eur.	Eur.	Non- Eur.	Eur.	Non- Eur.	Eur.	Non- Eur.	Eur.	Non- Eur.	Eur.	Non Eur
1915-16 1916-17 1917-18 1918-19 1919-20 1920-21 1921-22 1922-23 1923-24 1924-25 1925-26 1926-27 1927-28 1928-29 1929-30 1930-31 1931-32 1932-33 1933-34 1934-35 1936-37 1937-38 1938-39 1938-39 1939-40	2 2 6 3 3 4 4 4 4 2 6 4 10 39 30 14 4 7 7 8 3 5 1 7		- 1 3 - 3 3 - 4 2 5 5 6 18 16 8 3 3 5 5 3 3 1 7 2 1 1		4 3 3 2 1 3 1 - 1 2 8 4 11 5 - 4 8 11 7 4 8 11 7 4 8 11 7 4 8 11 7 4 8 11 7 4 8 11 7 4 8 11 7 4 8 11 7 4 8 11 7 4 8 11 7 4 8 11 7 4 8 11 7 7 4 8 1 7 7 4 8 1 8 1 7 7 7 8 7 8 7 8 7 8 7 8 7 8 7 8	5 1 2 2 1 1 1 1 1 - - - 4 1 6 5 - - 4 3 1 4 3 2 2 2 2 2 2 2 2 2 3 1 4 3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1 1 2 - 1 - 1 2 1 3 1 - 1 - 2 4	2 1 -1 1 1 -1 -1 2 -2 -3 	3 5 3 5 6 6 6 8 7 4 1 7 4 2 8 4 1 4 - 2	1 - 1 4 5 10 5 3 3 4 2 2 4 - 3 3 3 4 2 2 3	2523364353-5-2222-1	1 - 1 4 4 4 7 7 5 5 3 3 3 - 2 2 1 1 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1

CEREBROSPINAL FEVER.

The Cape Town cases of this disease reported in the year 1939-40, corrected for misdiagnosis and imported cases, numbered 26 (2 European and 24 non-European). Amongst these were 8 deaths (1 European and 7 non-European).

The total deaths from cerebrospinal fever registered in the year as belonging to Cape Town were the same, equivalent to a death rate of 0.03 per 1,000 population (0.06 European and 0.05 non-European).

To these are to be added 4 native cases at the Langa location, of which one was fatal.

There were 6 cases (including one at Langa)—non-Europeans aged under one year (2), 1-2 years (1), 2-3 years (2) and 4-5 years (1)—which were not removed to the City Hospital. They were all fatal very shortly after they were notified, and the diagnosis in these cases must be accepted with considerable reserve. In none of them was there any bacteriological confirmation of diagnosis.

Amongst the 25 cases (belonging to Cape Town, including Langa) which were admitted to the City Hospital there were only 3 deaths.

Counting also cases from outside the Cape Town municipal area and one imported case, the cases admitted to the City Hospital (diagnosis confirmed) numbered 35, and amongst these there were 6 deaths. It is to be noted that out of a total of 135 cases admitted to the City Hospital under the diagnosis of cerebrospinal fever only 35 proved to be suffering from the meningococcal infection.

There was one family in which two cases of the disease occurred, the father, aged 28 years (died), and the only child, aged 2 years (recovered), both beginning on the same day. All the other cases occurred in separate households.

Other particulars will be found in the table on page 32 and in Tables N to R on pages 130 to 134. From Table P it will be seen that in Cape Town the disease was mainly confined to the colder months of the year, only one case occurring in the five months November, 1939, to March, 1940.

Of the 98 (uncorrected) Cape Town cases 90 were admitted to the City Hospital.

ACUTE POLIOMYELITIS.

The cases of this disease reported in the year 1939-40, corrected for misdiagnosis and imported cases, numbered 16 (5 European and 11 non-European). There were no deaths.

Seven of these cases were treated in the City Hospital and 2 in other hospitals, and 7 were not removed to hospital.

One of the cases (E.F. 10) was recorded as a case of polio-encephalitis.

In 13 cases the onset of the illness was recent at the time of notification, in two cases the onset had been several months previously, and in one case particulars were not obtainable.

There were 2 cases (cousins) in which infection was associated. The first of these (E.F. 9) became ill on 29th February, 1940. She was known to have been in contact with her cousin (E.F. 5) on 27th February and 6th March, and the cousin became ill on the evening of 7th March. These two cases were not removed to hospital. All the other cases were in separate houses (including one institution, the Alexandra) and the source of infection was not traced.

All the cases were under fifteen years old, 13 under ten, 11 under five, and 6 under two.

There were no cases at the Langa native location.

Other particulars will be found in the table on page 32 and in Tables N to R on pages 130 to 134.

Of the 17 (uncorrected) Cape Town cases 7 were admitted to the City Hospital and 2 to other hospitals.

INFECTIVE ENCEPHALITIS.

The cases under this heading reported in the year 1939-40, corrected for misdiagnosis and imported cases, numbered 5 (2 European and 3 non-European). One case was fatal.

Two were treated at the City Hospital, 2 at other hospitals and one was not removed to hospital. The cases all occurred in different houses, no source of infection being traced.

There were no cases at the Langa native location.

Other particulars will be found in the table on page 32 and in Tables N to R on pages 130 to 134.

Of the 10 (uncorrected) Cape Town cases 8 were admitted to the City Hospital and 2 to other hospitals.

INFLUENZA AND PNEUMONIA.

In the year 1939-40, the corrected number of notified cases of pneumonia was as follows: influenzal pneumonia, 53 (23 European and 30 non-European); acute primary pneumonia, 533 (100 European and 433 non-European). Further details will be found in Tables N to R on pages 130 to 134.

The deaths from influenza since the great epidemic of 1918, and from bronchitis and pneumonia, are shown in the following table:—

1	Europe No. 864 2	Rate.	No.	pean.		pean.			72		No	n-
1918-19 1919-20 1920-21 1921-22 1922-23 1923-24 1924-25	864		No.	Rate.		European.		Non- European.		European.		pean.
1919-20		9 -33	-	100000000000000000000000000000000000000	No.	Rate.	No.	Rate.	No.	Rate.	No.	Rate.
1920-21 1921-22 1922-23 1923-24 1924-25	2		2,893	36 -41	47	0.51	216	2 -72	239	2 -58	229	2 -88
1921-22 1922-23 1923-24 1924-25		0.02	5	0.06	39	0.40	203	2.52	71	0.74	385	4 -77
1922-23 1923-24 1924-25	1	0.01	18	0.22	42	0.42	237	2.91	89	0.89	418	5 -13
1923-24 1924-25	5	0.05	10	0.12	43	0.42	197	2 -36	112	1.09	379	4 - 54
1924-25	6	0 -06	5	0.06	39	0.37	222	2.58	91	0.86	407	4 .72
1005 05	3	0.03	3	0.03	32	0.30	185	2.07	92	0.85	445	4 .98
1925-26	25	0.22	30	0 -32	29	0 -26	148	1.59	58	0.52	323	3 -46
	13	0.12	22	0 -23	26	0.23	213	2.25	70	0.63	269	2 .84
1926-27	13	0.11	18	0.18	40	0.35	255	2.62	84	0.74	387	3 -96
1927-28	20	0.16	52	0 -46	39	0.30	305	2.69	96	0.75	509	4 -49
1928-29	23	0.18	33	0.28	40	0.31	217	1.87	93	0.71	390	3 - 56
1929-30	32	0.24	29	0.24	36	0.27	221	1.86	65	0.49	338	2 -84
1930-31	9	0 -06	26	0.21	46	0.33	201	1.61	58	0.42	345	2 .77
1931-32	30	0.22	43	0.34	35	0.25	218	1 -74	100	0.72	403	3 -22
1932-33	12	0.08	18	0.14	20	0.14	157	1.22	71	0.50	385	3 -00
1933-34	8	0.06	9	0.07	30	0.21	170	1.29	61	0.42	346	2 .63
1934-35	30	0.20	27	0.20	29	0.20	278	2.06	114	0.77	482	3 - 57
1935-36	36 13	0.24	32 17	0.23	19		193	1.37	92 57	0.60	453	2 - 23
1936-37 1937-38	24	0.08	24	0.12	35	0.00	132 252		80	0.51	317 465	3 - 19
1020 20	15	0.09	15	0.10	30	0.22	170	1.73	79	0.50	446	2 -99
1939-40	17	0.09	12	0.10	20	0.19	131	0.85	66	0.41	438	2.86

Corrected for outward transfers, and from 1924-25 inclusive for European inward transfers.

The non-European mortality rate from bronchitis and pneumonia is far greater than the European. In 1939-40 it was seven-fold, and that this is not merely the result of the difference in age constitution is shown by the fact that in children under one year old the non-European mortality rate from these diseases was 9 times as great as the European, and in children between one and two years old, 17 times (see Table H on page 124).

The deaths from bronchitis and pneumonia occur largely amongst children, and in non-Europeans this is much more so than in Europeans. The following figures for deaths from bronchitis and pneumonia in 1939-40 show a remarkable contrast between Europeans and non-Europeans:—

Under 5 years old All other ages	 	 18 68	433 136
Total	 	 86	569

From Table H it will be seen that in recent years there has been an improvement in the infant mortality from these causes.

The seasonal character of mortality from bronchitis and pneumonia will be seen in Table D on page 120. The greatest mortality was registered in the quarter following midwinter (July to September, 201) and the least in the quarter following midsummer (January to March, 133).

TYPHUS FEVER.

The 4 Cape Town cases recorded were all regarded as suffering from tick-bite fever, and were originally notified as such; they all showed local lesions which were considered to be caused by tick-bites. In one case there was evidence that the tick-bite occurred at Klipfontein, Cape Flats.

They were all European adults (M. 35 and 69; F. 19 and 42). One was treated at the City Hospital and 3 were not removed to hospital.

One of these cases died. The patient was a man of 69, and a previous cardiac lesion was regarded as contributary to his death.

It being doubtful whether tick-bite fever is included within the meaning of "typhus fever," some medical practitioners do not treat it as being notifiable. As a result only a proportion of the cases of tick-bite fever that occur are notified.

There were no cases of epidemic typhus, and no cases at the Langa native location.

There were 3 cases (E.M. 65, C.M. 10 and C.F. 14) admitted to the City Hospital under the diagnosis of enteric fever from outside the municipal area (Retreat, Pinelands and Elsie's River), which proved to be cases of mild typhus-like disease without evidence of tick-bite. They were regarded as probably cases of endemic (murine) typhus. All recovered.

LEPROSY.

One case of leprosy was notified, on 13th February, 1940, in the person of a coloured female aged 21, living at Lansdowne (Ward 13). The first sign of the disease was stated to have been about $2\frac{1}{2}$ years before, when she was living at Lansdowne. Since that time she had lived at three addresses, all at Lansdowne. The source of infection was not traced. The patient was removed to the Conradie Home and thence to Pretoria.

MALTA FEVER.

One case of this disease was notified on 24th October, 1939, in the person of a European male aged 13, living in Ward 6. The patient went to a farm in South-West Africa (near Mariental) in December, 1938, for 6 weeks. In April, 1939, he spent 6 days on a farm at Montagu, C.P. At the end of July, 1939, he had abdominal symptoms and was in bed for twelve days with a swinging temperature, after which appendicectomy was performed. At the beginning of October he became ill again with a temperature fluctuating daily between 99° and 102°, spleen and liver slightly enlarged. Vesicular eruption on abdomen. No joint symptoms. Agglutination reaction to Br. melitensis 1/20++, 1/100+++, 1/500++. Not removed to hospital. Recovery. Patient drinks freely of raw cow's milk at home and at boarding school (in Cape Town), and did so at Mariental and Montagu. No history of consumption of goat's milk.

TRACHOMA.

There were 16 Cape Town cases of this disease notified during the year as follows :-

Coloured male aged 23, Ward 5. Onset 8 months ago when living at Prince Albert, C.P. Out-patient at Cape Town Free Dispensary.

Coloured male aged 31, Ward 8. Onset in childhood, when living at Oudtshoorn, C.P. Outpatient at Groote Schuur Hospital.

Coloured male aged 5, Ward 11. Onset 5 years ago, when living in Cape Town. In-patient at Groote Schuur Hospital.

European male aged 30, Ward 15. Onset some years age, when living in Cape Town. Outpatient at Groote Schuur Hospital.

European male aged 21, Ward 12 (in military camp). Onset some months ago, when living at Parow, C.P. In-patient at Military Hospital, Wynberg.

Coloured male aged 42, Ward 11. Onset some years ago, when living in Cape Town. Outpatient at Groote Schuur Hospital.

Coloured male aged 15, Ward 9. Onset some years ago, when living in Cape Town (?). Outpatient at Groote Schuur Hospital.

Coloured female aged 15, Ward 11. Onset 2 years ago, when living at Montagu, C.P. Inpatient at Groote Schuur Hospital.

Coloured male aged 32, Ward 4. No information. Out-patient at Groote Schuur Hospital. European male aged 24, Ward 2 (in military camp). Date of onset unknown. Patient had been in the Permanent Defence Force for 3½ years, living in camp and barracks.

Coloured female aged 60, Ward 9. Onset when resident at Ladismith, C.P., date unknown. In-patient at Groote Schuur Hospital.

Coloured male aged 7, Ward 11. Onset four years ago, when resident in Cape Town. Inpatient at Groote Schuur Hospital.

Chinese female aged 25, Ward 13. Onset six months ago, when resident in Cape Town. Outpatient at Groote Schuur Hospital.

Coloured male aged 30, Ward 15. Onset said to have been ten days before notification. Resident in Cape Town. In-patient at Groote Schuur Hospital.

Italian male aged 31, Ward 1. No information. Out-patient at Groote Schuur Hospital.

Nine cases of trachoma from the following districts in the Cape Province were reported, all as having been admitted as in-patients to Groote Schuur Hospital: Windermere, Wellington, Bonnievale, Piquetberg, Carnarvon, van Rhynsdorp, Kuruman, Beaufort West and De Aar.

All the notifications received were from ophthalmic specialists or the hospitals.

MEASLES AND WHOOPING COUGH.

In the following table the number of deaths from measles and whooping cough, together with the corresponding rates, are shown for a series of years:—

		M	easles.		Whooping Cough.					
Year.	Des	iths.	Rate pe	er 1,000 ation.	Dec	aths.	Rate per 1,000 population.			
	Eur.	Non-E.	Eur.	Non-E.	Eur.	Non-E.	Eur.	Non-E		
1914-15	1	1	0.01	0.01	16	72	0-20	0.95		
1915-16	2	_	0.02	_	2	2	0.02	0.03		
1916-17	20	147	0.23	1.90	12	20	0.14	0.26		
1917-18	1	7	0.09	0.09	10	40	0.11	0.51		
1918-19	3	2 12	0.03	0.03	7	22	0.08	0.28		
1919-20	9	12	0.01	0-15	10	29	0.10	0.36		
1920-21	2	27	0.02	0.33	16	41	0.16	0.50		
1921-22	_	-	_	-	-	5	-	0.06		
1922-23	3	21	0.03	0.24	8	25	0.08	0.29		
1923-24	20	116	0.19	1.30	21	69	0.19	0.77		
1924-25	1	2	0.01	0.02	4	10	0.04	0.11		
1925-26	-	6	_	0.06	5	20	0.04	0.21		
1926-27	9	38	0.08	0.39	7	26	0.06	0.27		
1927-28	3	12	0.02	0.11	21	74	0.16	0.66		
1928-29	9	9	0.07	0.08	11	32	0.08	0.28		
1929-30	3	17	0.02	0.14	6	15	0.04	0.13		
1930-31	_	17	_	0.14	9	58	0.06	0.47		
1931-32	8	39	0.06	0.31	8	44	0.06	0.35		
1932-33	_	_			10	32	0.07	0.25		
1933-34	3	23	0.02	0.17	1	19	0.01	0.14		
1934-35	6	80	0.04	0.59	5	19	0.03	0.14		
1935-36	3	_	0.02	_	10	178	0.07	1.26		
1936-37		4	_	0.03	3	23	0.02	0.16		
1937-38	6	65	0.04	0.45	-	20	1	0.14		
1938-39	1	7	0.01	0.05	1	81	0.01	0.54		
1939-40	-				4	66	0.02	0.43		

Corrected for outward transfers, and from 1924-25 inclusive for European inward transfers.

MEASLES.

Measles in Cape Town was at its lowest ebb in the year 1939-40, when there were no deaths registered from this cause.

Ten cases of measles were treated in the City Hospital.

WHOOPING COUGH.

The prevalence of whooping cough, which began in November, 1938, continued through the first seven months of the year under report, when it abated considerably. In the seven months July, 1939, to January, 1940, there were 65 whooping-cough deaths registered, and only 5 in the following five months, February to June, 1940.

There were 70 deaths in 1939-40 (4 European and 66 non-European). Of these, 69 were in children under ten years old, 65 under five, 50 under two, and 29 under one.

Three of the 4 European deaths were in children under one year old.

As will be observed, the mortality was mainly confined to non-Europeans. 48 of the non-European deaths occurred in the five wards: 12, 6, 7, 11 and 15

the non-European deaths occurred in the five wards: 12, 6, 7, 11 and 15.

Other information will be found in Tables A, B and C, on pages 96, 117 and 118.

There was one death from whooping cough in the Langa native location.

13 cases of whooping cough were treated in the City Hospital.

DIARRHOEAL DISEASES.

The deaths from diarrhoea and enteritis in the year 1939-40 (corrected for outward transfers) were certified and classified as follows:—

Code Number.			Eur.	Non-Eur.	All Races.
456 Diarrhoea and	d enteritis	(under			
2 years)			33	311	344
457 Diarrhoea and	l enteritis (2 years			
and over)			9	19	28
014 Cholera nostr	as		_	-	
015 Dysentery, ar	moebic		-	4	4
016 Dysentery, be	acillary		2	2	4
017 Dysentery, of	her		-	1	1
			_		
Tota	1		44	337	381
-/			-	anne 1	

This is equivalent to a death rate of $1 \cdot 21$ per 1,000 population ($0 \cdot 27$ European and $2 \cdot 20$ non-European).

Thus the non-European death rate from diarrhoeal diseases was eight times as great as the European. In order to eliminate the distortion due to the difference in age-constitution, reference may be made to the infant mortality from these diseases (see Table H, on page 124). In infants under one year old the non-European mortality rate from diarrhoea and enteritis was four times as great as the European, and in children between one and two years 4·5 times.

That diarrhoea and enteritis are chiefly diseases of children is shown by the figures set out above. From Table H it will be seen that in recent years there has been a reduction in deaths from diarrhoea, but that in 1938-39 the diarrhoeal mortality in children under one year old was greater than in the preceding three years. The position in children between one and two years old is similar.

The seasonal incidence of the diarrhoeal mortality will be seen in Table D on page 120. The deaths in the six months December, 1939—May, 1940, numbered 281 as compared with 92 in the other six months of the year.

CANCER.

The number of deaths (corrected for outward transfers) certified during the year as being due to cancer or malignant disease was 272 (122 males and 150 females), of which 170 (75 males and 95 females) were of Europeans and 102 (47 males and 55 females) were of non-Europeans.

The death rates for cancer per 1,000 population concerned (corrected for outward and inward transfers for Europeans and for outward transfers for the whole population and for non-Europeans) were:

For the whole population . . . 0.86 (males 0.80; females 0.92). For Europeans . . . 1.10 (males 0.98; females 1.22). For non-Europeans . . . 0.67 (males 0.63; females 0.69).

From the foregoing figures it will be observed that the recorded rate of mortality from this disease amongst Europeans was greater by 64 per cent. than amongst non-Europeans.

The variation in cancer mortality rates during the past ten years is shown in Table C, on page 118.

The parts of the body affected in deaths from cancer, and other facts, are shown in Table A, on pages 98 to 101.

CITY HOSPITALS.

(Medical Superintendent of Hospitals: Dr. J. F. Wicht.)

The hospitals for infectious diseases provided by the City Council are two in number, the City Hospital, Portswood Road, Cape Town, and Rentzkie's Farm Isolation Hospital, Koeberg Road, Maitland.

The one medical and nursing staff operates the two hospitals, under the same medical superintendent and matron.

The staff of the City Hospital, Portswood Road, is shown on page 92, where the nurses, domestics, etc., who are in residence at Rentzkie's Farm Hospital are included under the heading of City Hospital.

CITY HOSPITAL FOR INFECTIOUS DISEASES, PORTSWOOD ROAD.

The hospital is situated near the North Gate of the Docks and is bounded on the south-western side by the Green Point Sports Ground. The New Somerset Hospital, forming the north-eastern boundary, is separated from the hospital by a road. The north-western boundary is a piece of ground laid out in tennis courts by a sports club, while Portswood Road forms the south-eastern boundary. The total area of the hospital ground is 7% acres.

The hospital buildings comprise the following (30th June, 1940):

Medical superinténdent's residence.

House physicians' cottage.

Administrative block, comprising administrative offices, matron's quarters, quarters for two resident medical officers, maids' quarters, hospital kitchen and stores.

Nurses' home, including lecture room and kitchen.

Quarters for male native servants, forming the first floor of a block which on the ground floor comprises garages, workshop, and accommodation for disinfecting and removal staff.

Dispensary and drug store.

Block comprising laundry, disinfecting station and garages.

Two cottages for ambulance drivers.

Stores.

Gatekeeper's lodge.

Wood-and-iron building furnished as a billiard room for patients.

Two-storey ward block (100 beds): non-European tuberculosis.

Three two-storey ward blocks (each 66 beds): European tuberculosis, European diphtheria, non-European diphtheria.

Single-storey ward block (24 beds): European scarlet fever.

Single-storey ward block (12 beds): various diseases, all races. An operating theatre is included in this block.

Two-storey block of two-bed wards (32 beds): various diseases, all races.

Wood-and-iron single-storey block of two-bed wards (8 beds): various diseases, all races.

Two single-storey wards for venereal diseases (24 beds)—separate accommodation for Europeans and non-Europeans, male and female. (A V.D. clinic also adjoins the hospital.)

X-ray and clinic block for tuberculosis, comprising X-ray room, dark room, office, clinic room, waiting room and dressing cubicles.

The first buildings were erected in 1899 and were occupied by the military authorities during the Boer War until 1902, when the hospital was resumed by the Municipality and opened for the isolation and treatment of infectious diseases. It has since been gradually extended. In June, 1940, the old scarlet fever block (24 beds) was evacuated for alterations and extensions. In April, 1940, the 8-bed wood-and-iron block was equipped as a billiard room for patients. Further extensions are under consideration.

Cases of the following infectious diseases are ordinarily admitted to the hospital: enteric fever, diphtheria, scarlet fever, purperal fever, cerebrospinal fever, poliomyelitis, and infective encephalitis. Special cases of other infectious diseases are admitted. The hospital is also used for the accommodation of tuberculosis (chiefly pulmonary) and venereal diseases.

The medical staff (June 30th, 1940) consists of medical superintendent, two resident medical officers and two house physicians. The house physicians are changed every six months.

One of the Union Government buildings at Rentzkie's Farm is equipped by the Council for 25 cases of tuberculosis (non-European), and one of the other buildings equipped for nurses' quarters. Since the end of the year the Council has equipped another Union Government building at Rentzkie's Farm for 24 cases of tuberculosis (non-European).

During the year under report a daily average of 356 beds were occupied in the City Hospital, including the above-mentioned accommodation at Rentzkie's Farm. They were made up of 165 European (including 69 of tuberculosis) and 191 non-European (including 97 of tuberculosis). They include the following beds (daily average) occupied by cases from outside the municipal area; 32 European (including 13 of tuberculosis) and 26 non-European (including 14 of tuberculosis).

A six months' course for a registrable certificate in infectious-disease nursing for nurses who hold the certificate of general training was instituted in 1929, and lectures are given at weekly intervals by the Medical Superintendent. In addition to this a scheme is in operation by which nurses who are undergoing their general training in Cape Town are taken on for periods of three months, during which time they receive instruction in the principles of fever nursing.

Visits to patients are allowed twice weekly (on Wednesdays and Sundays). Children under 16 years are not allowed and visitors to the infectious blocks remain outside the ward and converse with the patients through the windows. In cases of dangerous illness near relatives are allowed to enter the ward, and special precautions are taken to avoid infection.

X-RAY DEPARTMENT AND CLINICAL ROOM.

This is a single-storey block consisting of an X-ray room with dark room and film store, a terrazzo-lined clinical room, a small record room fitted with viewing boxes, three dressing cubicles and a waiting hall. Lavatory accommodation is provided for patients and staffs. The clinical room or refill room is large enough to be used as a minor theatre for operations such as internal pneumolysis, and is provided with handbasin and sink. There is no separate sterilizing room, but a terrazzo shelf is provided to hold an electric sterilizer in which instruments are boiled. The size of the room and the absence of a steam sterilizer make it unsuitable for major surgery, such as thoracoplasty and phrenic evulsion, and these operations are performed in the main operating theatre of the hospital. The X-ray plant, which comprises separate instruments for radiography and fluoroscopy, is operated by a qualified radiographer.

Patients from the tuberculosis clinics as well as hospital patients are X-rayed here. The skiagrams of the clinic patients are sent to the tuberculosis officer and those of hospital patients are read by the Medical Superintendent of Hospitals. Routine radiography of in-patients is not done, as this is considered wasteful in cases where there is advanced disease, but in early cases, and in those undergoing special treatment, frequent skiagrams are taken. The clinic is controlled by the Medical Superintendent and is conducted for out-patients as well as for in-patients. In this building a clinic for pneumothorax treatment is conducted on modern lines.

In addition to the giving of refills follow-up work is done, patients whose refills have been discontinued being encouraged to attend for re-examination. Patients are screened before and after each refill.

Clinics are held during the morning hours from 10 a.m., Europeans on Tuesdays and Thursdays, non-Europeans on Mondays and Fridays. The European clinics are much larger than the non-European as the latter are often unsuitable for collapse therapy, and even when suitable are often unwilling to undergo treatment. Most of the patients attending for refills have had the pneumothorax induced in the wards of the City Hospital or at Nelspoort Sanatorium, but a few have been taken over from other hospitals or from private practitioners. Occasionally, patients who attend for refills are visitors on holiday in Cape Town or are passengers on a ship which calls at the Docks. Although some physicians have recommended the induction of pneumothorax in ambulatory patients, this is never carried out at our clinic. Patients are always warded and are kept in bed for at least 14 days after the induction. It is our practice to give a refill on the day after induction, and to increase the interval between each refill by a day until a seven-day interval is reached. At this stage the patient is taken to the clinic in a wheeled chair and screened or X-rayed. It is then possible to decide on the course to be taken, and also to determine if there are adhesions which should be cauterised. If the patient's condition permits he continues to attend the clinic for his refills and is screened before and after each injection of air, careful attention being paid to the degree of collapse, the presence of fluid, and the position of the mediastinum. It has been observed, as Burrell pointed out, that mediastinal displacement is often associated with persistent loss of weight. If necessary, fluid exudates are aspirated, but the usual practice is to leave serous fluid unless it is interfering with the pneumothorax. If the fluid becomes turbid and contains polymorphs and tubercle bacilli it is considered wisest to withdraw it and allow the lung to re-expand, as there is a tendency in these cases for pyogenic infection to follow. In aspirating fluid exudates the Rotunda, a three-way syringe, is recommended, as it can also be used for washing out the pleural cavity. Clear serous fluids are withdrawn by the Burrell aspirator, which works by gravity and can be used in association with the pneumothorax apparatus when air replacements are given. As a rule pneumothorax patients are offered treatment at Nelspoort Sanatorium, and most of them avail themselves of the offer. In some cases patients who are unwilling to go to Nelspoort or who are awaiting admission to the sanatorium are allowed to return home and attend as out-patients. Special record books are kept for out-patients, and full details of each refill are entered. When the patient goes to the sanatorium the book is sent by post to the Medical Superintendent of that institution and is returned to the City Hospital when the patient is discharged.

The operation of internal pneumolysis (adhesion cutting) is carried out by a visiting surgeon in the clinical room, which is darkened for the purpose. Occasionally patients are sent from Nelspoort Sanatorium for the operation. In addition to frequent clinical and X-ray examinations the blood sedimentation test (Westergreen's method) is carried out on all pneumothorax patients.

The radiographic and other work done at the X-ray clinic block during the period under review is set out below:—

ews .	100				
The second	200	n. ++	- marin	ance	
1.00	281	45.04	испри	annee	5 .

Out-patients							1,727	
In-patients							1,522	0.010
Examinations and	treatn	nents						3,249
Skiagrams							1,396	
Screenings							3,023	
Consultations							124	
Refills							1,064	
Aspirations							53	
Mantoux test							163	
Blood sedime	ntation		7.				194	
Neo-hydrol in		8					5	
Myocrisin inje	ection						1	
Col-calcium in							4	
Solganal injec							7	
Mirror test							1	
Internal pneu							14	
Explorations							3	
Bronchoscopy							3	
Uroselectan e							1	
Bismuth-meal	exami	natio	n		**		1	0.0==
New cases (not 1	revious	dv a	ttended	the	hospital	OF		6,057
tuberculosis c					*			59

DENTAL CLINIC.

A dental clinic for tuberculosis patients has been equipped in one of the tuberculosis blocks and is attended by a dental surgeon. The first session was held on 11th January, 1939. Up to 30th June, 1940, 244 patients were attended and 463 teeth were extracted (one patient for examination only).

OPERATING THEATRE.

The hospital operating theatre was used on 55 occasions as follows:-

Appendicectomy									2
Empyema									1
	**		1.1	**	***	**			1
Enterectomy		* *				+ +	* *		1
Fistula in ano									2
Haemorrhoids									1
Adenoma of bre	ast								1
Osteotomy									3
Perforated typho	oid ul	cer							2
Perionychia									3
Phrenie crushing	and	inject	ion						2
Phrenic evulsion									1
Thoracoplasty									1
Thoracopiasey			1.1		* *			***	0.0
Tonsillectomy		* *							35
									-
									55

These figures do not include the operations of tracheotomy and intubation of the larynx, which are carried out in special rooms attached to the diphtheria wards.

The operation of tracheotomy for laryngeal diphtheria was performed on 47 occasions with 32 recoveries. The following figures in connection with the operation show the higher mortality amongst the non-European patients:—

Recovered . Died		 ::	::	Eur. 16 4	non-Eur. 16 11
	Total	 		20	27
Percentage morta	lity	 		20%	41%

The rather high death rate in laryngeal diphtheria is due to the fact that many of the cases were of an advanced nature with membrane extending into the trachea and bronchi. In a previous report (1933-34) reference was made to this fact and it appears that a severe form of tracheobronchial diphtheria continues to prevail in Cape Town. It is possible in some cases that the gravity of the patients' condition may be due to neglect of the disease in its early stage.

CEREBROSPINAL MENINGITIS.

Thirty-five cases of cerebrospinal fever were admitted during the period covered by this report, and there were 7 deaths.* Two patients were still under treatment at the end of the year. These figures compare favourably with those of previous years, e.g.

Year.		Total.	Died.	Under treatment at end of year.
1936-37	* **	 14	10	1
1937-38		 15	8	2
1938-39		 38	12	4

The slight improvement in 1938-39 was due to the introduction of modern methods in treatment, and the improvement is more definite in the figures for 1939-40.

The credit belongs mainly to the sulphonamide group of drugs, and it is interesting and instructive to review the therapeutic history of the disease.

Prior to Quincke's discovery of lumbar puncture in 1895, the treatment of cerebrospinal fever was purely expectant. After this, lumbar puncture was performed for diagnosis and to relieve intra-cranial pressure. A few years later Flexner's antimeningo-coccal serum became available, and in treating the disease intrathecal injections of polyvalent or, in typed cases, monovalent serum were given. Some authorities advised that the serum should be given intravenously and intramuscularly as well as intrathecally. Serum was administered mainly by the lumbar and cisternal routes but some physicians injected it into the ventricles of the brain, and a special trephining needle was devised for use in adults. In children the ventricles were reached by way of the fontanelle.

The results of treatment were, on the whole, uncertain, and although many severely ill patients made rapid recovery there were many disappointments and chronic cases with hydrocephalus were frequently seen. The death rate was extremely high in infants under a year old, many of whom died suddenly while serum was being injected, and the progressively purulent form was recognized as being highly fatal at any age.

Later Ferry produced an antitoxic serum which appeared to give better results in individual cases, but the general mortality rate was not markedly improved.

The next contribution to the therapeutics of the disease was by Hoyne, of the Cook County Hospital, Chicago, who claimed a high recovery rate by using massive doses of serum intravenously. He showed good results with both the antibacterial serum and the antitoxin, but preferred the latter. Lumbar puncture was performed for diagnosis and sometimes it was repeated to relieve pressure, but serum was not given intrathecally.

This treatment was adopted in the City Hospital and the impression was formed that it was an improvement on the intrathecal method. It was observed that recovery took place in cases of the progressively purulent type of the disease. Previously this type had proved invariably fatal.

The next development was the introduction of the sulphonamides. The first to be used was a sulphanilamide which was manufactured under the name of Prontosil. The earliest Prontosil was known as Prontosil rubrum and was given parenterally. It was followed by Prontosil album, which was in tablet form and was given by mouth. It was customary to combine prontosil treatment with serum therapy, and the results were promising, but in a short time prontosil and the sulphanilamides were replaced by another sulphonamide, sulphapyridine, usually known by its trade name M & B 693. This drug has revolutionized the treatment of cerebrospinal fever. Even severe cases in which the patients are practically moribund react rapidly to its influence, and the mortality during infancy is no longer higher than at any other age. Although recovery often follows the use of sulphapyridine when it is given at a late stage of the disease, to ensure the best results it should be given early and in full doses.

^{*} One of the 7 deaths was of a patient admitted to the hospital in the previous year (1938-39).

An interesting memorandum has been issued by the English Ministry of Health (1940) and commenting on it the author of a leading article in the British Medical Journal makes the following statement: "We have well-grounded confidence in our ability to cure the disease in a great majority of cases. It is certain that early clinical intervention is nearly always successful, and that to treat a doubtful case as if it were not doubtful at all is wise. . . . The disease is now a true medical emergency. As soon as cerebrospinal fever is suspected on clinical grounds a full dose of sulphapyridine should be given without waiting for lumbar puncture. The practitioner should give the dose pending the admission of the case to hospital and should send a note stating the amount, route and time of administration of the drug.'

The dosage followed in the City Hospital is that recommended by Banks, who has done valuable pioneer work in this field. The following table shows the scheme of dosage during the first two to three days :-

Age period in years	 	0	2	5	10	15+
Daily amount in grammes	 	3	41	6	71	9

It should be noted that the daily amount is divided into six 4-hourly doses, e.g., the amount for an adult consists of six doses of 11 grammes, totalling 9 grammes. The doses for the other age periods are easily calculated. Banks recommended that the first two doses be increased by a quarter of a gramme in children under five years of age and by half a gramme above that age. He called these the loading doses and their purpose is to accelerate the action of the drug. It is essential that the patient should receive the drug regularly every four hours and he should be awakened at night for the purpose.

The course of treatment should be divided into three parts: an initial period of 2 to 3 days as indicated in the table, a middle period and a final period each of 2 days, when two-thirds and one-third, respectively, of the initial doses are given every four hours. The total sulphonamide given to an adult by this scheme is 36-50 grammes.

In patients who are deeply comatose or unable to swallow or who are vomiting, the first two loading doses may be given intravenously in the form of the sodium solution of sulphapyridine, and in an adult each of these doses may be as much as two grammes. In ordinary cases the drug should be administered by mouth. Sulphonamides should not be given intrathecally, and injury to the cord may follow the intrathecal injection of the highly alkaline sodium-sulphapyridine. The toxic effects of the sulphonamides are well known, but fortunately the severe and fatal complications of chemotherapy are rare. Vomiting is sometimes caused by sulphapyridine, and when this is intractable a change should be made to sulphanilamide. Although too great a fluid-intake acts adversely by reducing the concentration of sulphonamide in the cerebrospinal fluid adults should take at least 2-3 pints, together with glucose, in the 24 hours. Comatose patients should receive fluid and glucose by the intravenous route.

In addition to the reliable results given by sulphonamide therapy there are two other striking features in comparison with serotherapy—the relatively low cost of treatment and the ease with which it is given. In serum treatment frequent lumbar puncture was necessary, and the attention given to each case took up much of a medical officer's time. The price of serum is so high that the amount used in a single case might be well over £10. With sulphonamide therapy the cost is only a few shillings per case and except in severe cases the nurse gives the drug by mouth, a single diagnostic lumbar puncture being performed by the medical officer. In some of the severe cases serum therapy was combined with drug treatment, but it appears that serum is not necessary and further it should be emphasized that the giving of serum does not make up for timid dosing with sulphonamide.

HOSPITAL STATISTICS.

There were 1,997 admissions to hospital during the year (1,002 Europeans and 995 non-Europeans). Ten cases were admitted twice during the year, and 14 other cases admitted in previous years were again admitted during the year under review.

The average daily number of patients in the hospital (exclusive of Rentzkie's Farm hospital) for a series of years is as follows :-

1923-24 62 · 9	1924-25 69 · 6	$1925-26 \\ 107 \cdot 7$	$1926-27$ $125\cdot 5$	1927-28 151·7	1928-29 156-2	1929-30 159·1	1930-31 204 · 3
1931-32 238 · 2	$^{1932 \text{-} 33}_{245 \cdot 3}$	$^{1933-34}_{256\cdot 7}$	1934-35 263 • 4	$^{1935 \text{-} 36}_{280 \cdot 2}$	1936-37 268 • 4	1937-38 267-4	1938-39 362 · 3
1020.40							

331.4

Details in regard to cases treated are shown in Table 1 (immediately below) and Tables 2 and 3 (on pages 45 and 46).

Table 1.—Number of persons treated in the City Hospital, for the period July 1st, 1939, to June 30th, 1940, classified according to the wards of the City, etc., to which they belonged.

		der ment t, 1939.	Admi	itted.	Disc	harged.	D	led.	treat	der tment th, 1940.	Total		D	ay Unit		
Wards, etc.	E	0	Е	0	В	0	В	0	Е	0	ad- mitted persons		E		0	Total.
	M. F.	M. F.	M. F.	M. F.	M. F	. M. F.	м. г.	M. F.	M. F.	M. F.		M.	F.	M.	F.	
1 Sea Point 2 Harbour 3 West Central 4 Kloof 5 Park 6 East Central 7 Castle 8 Woodstock 9 Salt River 10 Mowbray 11 Maitland 12 Rondebosch 13 Claremont 14 Kalk Bay 15 Wynberg Langa located From ships From outside the Municipality	9 2	- 4 3 2 3 2 5 2 10 14 6 10 5 8 8 11 2 1 5 3 4 8 7 4 8 11 1 1 - 15 10	23 31 13 30 2 2	12 12 19 21 3 86 41 50 30 44 14 25 9 5 26 23 41 47 18 36 21 13 29 36 14 3 5 1 10 -92 86	15 1 20 5 23 6 22 6 4 35 6 45 45 6 20 3 39 3 10 1 37 3 16 1 32 3 75 8	39 10 37 19 1 17 30 3 35 15 3	1	- 24 3 1 6 4 6 1 1 5 2 6 3 8 1 4 6 4 6 1 1 1 5 2 1 1 1 5 1 1 1 5 1 1 1 1 1 1 1	2 7 2 3 13 7 6 - 14 17	4 4 4 4 4 6 3 6 8 6 9 7 9 9 2 2 2 1 1 1 6 4 3 4 4 4 4 3 3 - 3 - 1 7 10 85 72	67 82 26 86 87 54 200 99 159 127 75 132 116 129 60 137 7 7 47	1,882 910 34 1,515 1,964 1,782 673 1,899 3,263 1,202 2,037 1,107 1,896 816 677 5,074	2,045 1,101 1,097 1,067 1,625 1,63 2,571 2,374 2,477 2,352 2,63 1,932 1,159 1,908 6,709 31,321	142 1,110 1,737 1,722 89 3,923 3,604 1,633 1,560 577 2,121 1,883 1,855 479 531 289 5,330	781 750 798 1,259 2,262 4,783 2,626 2,188 416 1,528 3,438 1,840 606 2,621 506 7 4,354	4,850 3,871 2,569 5,593 4,220 12,113 7,156 8,221 9,345 4,642 8,038 7,221 7,515 8,424 974 21,467

E-Europeans.

O-Others, or non-Europeans.

CITY ISOLATION HOSPITAL, RENTZKIE'S FARM.

This hospital is situated at Rentzkie's Farm, in Ward 11, and is primarily intended for smallpox and other formidable epidemic diseases. There is no permanent resident staff except the caretaker, with labourers. The hospital comprises a brick-built block accommodating 12 patients, and an old wood-and-iron building intended for 32 patients.

Adjacent to the hospital is the Union Health Department's isolation hospital and quarantine station, for use in connection with port health administration and for other purposes, which provides accommodation for 52 patients and 87 contacts, in addition to a wood-and-iron emergency block for 24 patients. This institution is administered by the City Health Department.

One of the hospital blocks of the quarantine station is used by the City Health Department for 25 non-European cases of pulmonary tuberculosis, and one of the contact blocks as nurses' quarters. A second hospital block has been opened for similar cases since the end of the year under report.

The cases treated at Rentzkie's Farm during the year are classified in the tables on page 47.

LANGA NATIVE HOSPITAL.

At Langa location the native residents are provided with free medical attention at a modern hospital of 24 beds and out-patient department, and are also visited in their own homes by a nurse or medical officer if required. A new out-patient department and clinic has been built, and has been brought into use since the end of the year under report.

The matron resides at the hospital with a European sister and has on her staff 4 native nurses (general or midwifery trained) and 3 native male orderlies.

One of the native nurses, qualified in midwifery, operates a midwifery service for the location women in their own homes. The confinement fee is 11s. The medical officer holds a pre-natal clinic, attended also by the midwife.

The appointment of part-time medical officer is held by Dr. T. Jones, and the hospital is under the general control of the Medical Superintendent of Hospitals.

The activities of the hospital for the year ended 30th June, 1940, are shown by the following figures:—

Daily average number of in-pa	atien	its					15.87		
In-patients admitted							403		
New out-patients							2,025		
							23,435		
Attendances by out-patients	1								
Visits to patients at their hon	ies t	у:					920		
Doctor									
Nurse							1,278		
Midwifery service:									
Confinements attended (exte	rn)					129		
							2,006		
	* *				10000		-		
Pre-natal clinic (weekly):							52		
New cases				**			533		
Total attendances							555		
Infant consultations (weekly)):						The same of		
New cases							179		
Total attendances							1,629		
Lotur accordances : .									
The diagnosis in in-patients was	as f	follows	:						
110		2	Pleurisy						5
Influenza		20	Asthma				**		6
	4	12	Diseases of	of stoma	ch				2
m t t t t		1	Diarrhoea	and en	teritis,	dysen	tery	* * *	26
Syphilis		7	Diseases of						4
Gonorrhoea		1	Diseases of		generati	ve or	gans		1
		1	Confineme	ent					2
Challed Market and Company of the Co	1 . 3	21	Abortion			**		1.1	6
		8	Diseases d						10
	4.4	6	Diseases		-				10
		1	Mastitis	of oldin					2
		1	Diseases of		**	***		**	1
		2	Prematuri					**	1
No. Acti		9	Old age Burns		0.0		**	**	13
D'		4	Injuries						76
Diseases of eye		1	Starration				**	**	3

The home addresses of the in-patients were as follows:—

Paralysis
Diseases of heart

apoplexy

Diseases of nose

Bronchitis and pneumonia

Arterio-sclerosis, cerebral haemorrhage,

Langa location				 	 363
Elsewhere in Cape	Town	Municipa	lity	 	 19
Extra-municipal				 	 19
No fixed abode				 	 2

Starvation

Doubtful or indefinite

Admitted with mother

3

34 17

403

44 in-patients and 238 out-patient attendances were Workmen's Compensation Act cases.

Total O N neest, Under teeste June 39th, E. M. F. O. N. F. 12211-0 80401641--1-418111111--4010 11 , y. lat, 1939. N. F. Society for one included by two shorts of society for an of diplation on the standard by two shorts of society for one of diplation on the standard by the society of society for one of diplation on the standard by the society of society for one of diplation on the standard by the stand Disease

Hada 188 Herard Hill Hausser a

REPORT OF THE MEDICAL OFFICER OF HEALTH.

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8,692 2 301 105

Total.

9,100

CASES TREATED IN THE CITY ISOLATION HOSPITAL, RENTZRIE'S FARM, FOR THE PERIOD JULY 1ST, 1939, TO JUNE 30TH, 1940.

ı			F.	Ш	1
ı	Day units.	0.	M.	8,588 2 105	8,695
ı	Di	B.	F.	1111	1
l		-	W.	301	405
	Total	admitted		12 12 7	74
ı	int,		E.	1111	1
i	atme h, 19	0	M.	81-11	60
ı	Under treatment, June 30th, 1940.		1	1111	1
ı	Und	E.	M.	-111	
i			E.	1111	1
ı	d.	0	M. F.	1112	11
ı	Died.		E.	1111	1
ı		E.	M.	01	01
			F.	1111	1
-	rged.	0.	M.	355	
	Discharged.		E.	1111	- 45
ı	Q	ы	M.	04	12
ı			E.	1111	1
ı	ted.	0	M.	1 1 1 2	69
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ı	9		P.	1111	1
ı	atme	0	M.	ā	-
	Under treatment, July 1st, 1929.		M. F. M. F.	1111	1
	Und	E	M.	& 	23
				::::	2
				:::::	
	- Consistent	STORE		oints	:
	Disease	Sur common)		Tuberculosis, pulmonary Tubercular bones and joints Searlet fever No bacilli found*	Totals

(!) Two of these cases were transferred from City Hospital.
(?) Two of these cases were transferred from City Hospital.
(?) Four of these cases were transferred to City Hospital. . Admitted as enteric fever carrier.

CABLE 2.

	These	oreal.	73	575	CI	412	396	445	2111	268	0003	899	998	172	737	190	30	1,052	9,100
	E																		1
	0.	E.	_	1	1	1	-	1	1	1	1	1	1	1	1	1	-	1	
Day units.		M.	73	575	04	412	1,396	1,445	210	268	1,003	567	866	172	735	190	30	751	8.695
Da		F.	1	1	1	1	1	1	i	1	1	-	1	1	1	1	1	1	1
	E.	M.	1	1	1	1	1	1	-	1	1	101	1	1	21	1	1	301	405
Total	persons.		1	03	-	G Q	123	80	00	-	60	+	11	-	9	-	1	17	74
40.		E.	1	1	1	1	1	1	1	1	1	J	1	1		1	1	1	1
atme h, 19	0.	M.	1	1	-	-	4	00	1	1	01	01	01	-	60	1	1	01	60
Under treatment, June 30th, 1940.	-3	E.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Und	E.	M.	1	Ī	1	1	1	1	1	1	1	-	1	1	1	1	1	1	-
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Died.	,	F.	1	1	1	1	1	1	1	1	1	1	1	1	E	1	1	1	1
	E.	M.	1	1	1	1	1	1	-	1	1	1	1	1	-	1	1	1	0.5
		F.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Discharged.	0.	M.	-	00	1	1	00	10	09	-	eo	03	6	1	00	1	-	4	45
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ted.	0.	M.	-	01	-	01	120	00	01	-	00	00	11	-	14	-	-	10	69
Admitted	.,	F.	1	1	1	1	I	1	1	1	1	1	1	1	I	1	1	1	1
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reatm t, 193	0	M.	1	01	1	-	00	10	-	-	60	01	-		01	1	1	01	23
Under treatment, July 1st, 1939.		H	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Und	E.	M.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
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			**				:			:		:			:	:	:	ity	
	etc.		**		**			::			:		**		**			micipal	
	Wards, etc.				la		In	**	**	**					**			the Mu	Totals
				2. Harbour	3. West Central									14. Kalk Bay	15. Wynberg	Not allocated	Langa location	From outside the Municipality	Tota
		7		44						1	-	_	_	-		E I		4	

CLEANSING STATION.

The cleansing station at 116, Aspeling Street, Cape Town, which was opened on 19th September, 1938, is a new building comprising a main room with office, disinfestor room, and two suites, each consisting of undressing room, bathroom with two baths, and dressing room. The disinfestor apparatus is an electric oven with thermometer and thermostat, in which the patients' clothing is deverminized with hot air.

The cleansing station is in charge of a superintendent, who works under the supervision

of a medical officer and has two non-European assistants.

The work done from 1st July, 1939, to 30th June, 1940, is shown in the table below. It will be seen that it consisted chiefly in the treatment of scabies, which is more prominent in Cape Town than pediculosis:

	F	irst At	tendance	es.	To	tal At	tendane	es.
Persons.	Scabies.	Body Lice.	Head Lice only.	Total.	Scabies.	Body Lice.	Head Lice only.	Total.
Children under 16 years of age :								
European boys	124	3	4	131	577	3	6	486
European girls	130	-	15	145	426		15	441
Non-European boys	993	-	4	997	4,427		4	4,431
Non-European girls	1,009	-	14	1,023	3,983	-	15	3,998
Total children	2,256	3	37	2,296	9,313	3	40	9,356
Adults:			- 3					
European males	62	10	4	72	210	11	-	221
European females	74	-	3	77	181		4	185
Non-European males	176			176	567	-		567
Non-European females	404		2	406	1,025	-	2	1,027
Total adults	716	10	5	731	1,983	11	6	2,000
Total Persons:								
European	390	13	22	425	1,294	14	25	1,333
Non-European	2,582		20	2,602	10,002	-	21	10,023
All Races	2,972	13	42	3,027	11,296	14	46	11,356

A.B. - Some of the cases of scattles were infested also with lice.

AMBULANCE AND DISINFECTING STATION.

This is situated in the grounds of the City Hospital, Portswood Road. There is garage accommodation, in which are housed (beside other departmental cars) three ambulances for the removal of cases of infectious disease, two vans for the transport of infectious and disinfected bedding, and one van for the distribution of supplies to the hospitals and clinics.

The disinfecting station comprises two Equifex steam disinfectors.

The ambulance and disinfecting service is staffed by two removal officers, three motor drivers and two labourers. This staff is also responsible for the disinfecting of houses and other premises for infectious diseases and other conditions. A mechanic, assisted by a labourer, is in charge of the disinfecting station, and supervises the machinery of the hospital laundry. The disinfection of bedding, etc., for the City Hospital is also done at the disinfecting station.

There is another Equifex steam disinfector at Rentzkie's Farm Hospital provided for the needs of that hospital but available in emergency for the purposes of the City health administration.

The work done during the year by the ambulance and disinfecting service is indicated by the following figures:—

	re journeys eturn).		Dis	infections.		destroyed.
	To other	Pren	nises.	Arti	cles.	destr
To City Hospital.	hospitals or premises.	For tuber- culosis.	For other infectious diseases.	For tuber- culosis.	For other infectious diseases.	Articles
1,622	75	855	1,131	386	2,857	92

The distance covered during the year by the vans and ambulances was 57,429 miles.

SECTION V.—TUBERCULOSIS.

(Tuberculosis Officer: Dr. W. L. HOOLE.)

The new cases of this disease reported in the year 1939-40, corrected for misdiagnosis and imported cases, numbered 1,277. They are classified in the following table, where the corresponding rates per 1,000 population are shown:—

		N	otified cas	es.	Inc	cidence rat	es.
Race.	Sex.	Pulmon- ary.	Other forms.	All forms.	Palmon- ary.	Other forms,	All
European	Male Female	89 69	16 12	105 81	1 ·14 0 ·81	0 ·20 0 ·14	1 ·34 0 ·95
	Total	158	28	186	0.97	0 -17	1 -14
Non-European	Male Female	508 402	101 80	609 482	6 ·74 5 ·11	1 ·34 1 ·02	8 -08 6 -13
	Total	910	181	1,091	5 .91	1 -17	7.08
All Races	Male Female	597 471	117 92	714 563	3 ·88 2 ·87	0 ·76 0 ·56	4 ·64 3 ·44
	Total	1,068	209	1,277	3 -36	0.66	4 .02

The deaths from tuberculosis and the corresponding death rates are shown in the next table :—

		Deaths			1	Death rate	
Race.	Sex.	Respira- tory system.	Other forms.	All forms.	Respira- tory system.	Other forms,	All forms,
*European	Male Female	53 41	14 11	67 52	0 ·68 0 ·48	0·18 0·13	0·86 0·61
	Total	94	25	119	0.58	0.15	0.73
Native (not Langa)	Male Female	30 22	4 3	34 25	4·13 7·82	0·55 1·06	4 ·68 8 ·88
	Total	52	7	59	5 .16	0 -69	5 .85
Asiatie	Male Female	5 1	2	7 1	1 ·92 0 ·90	0.77	2 ·69 0 ·90
	Total	6	2	8	1.61	0.54	2 ·15
Other Coloured	Male Female	258 230	53 43	311 273	3 ·96 3 ·10	0·81 0·58	4 ·77 3 ·68
	Total	488	96	584	3 .50	0-69	4 -19
Non-European	Male Female	293 253	59 46	352 299	3 ·91 3 ·23	0·79 0·59	4 ·70 3 ·82
	Total	546	105	651	3 .56	0 -69	4 .25
All Races	Male Female	342 291	73 57	415 348	2 ·24 1 ·79	0·48 0·35	2·71 2·13
	Total	633	130	763	2.00	0.41	2 -42
Natives (Langa)	Male Female	16 10	1	17 10	3 ·96 5 ·03	0·25 —	4 ·21 5 ·03
	Total	26	1	27	4 -32	0 -17	4 -49

[•] Corrected for outward and inward transfers. All other figures corrected for outward transfers only

The tuberculosis death rate in non-Europeans was $6 \cdot 2$ times as great as in Europeans (corrected for outward transfers). The ratio was $6 \cdot 1$ for Coloured, $8 \cdot 5$ for Natives (not

Langa) and 3.1 for Asiatics.

In Europeans the tuberculosis death rate amongst males was 1.4 times as great as amongst females. In non-Europeans the ratio was 1.2 and there are interesting contrasts in the sex-mortality in the different non-European races, especially the reverse ratio in natives, both in the location and elsewhere. This may be partially explained by the greater exodus of sick men, who, by their sovereignty in the home and by the aid of the Department of Native Affairs, have less difficulty in following the harmful tradition of going up-country in the hope of recovery. In the absence of a system by which the death rates can be corrected for inward transfers, the deaths of many emigrating non-Europeans year after year are not officially acknowledged by Cape Town; i.e., the position is even worse than is indicated by the figures published.

The age distribution of the deaths is shown in Table A, on page 96. From tuberculosis of the respiratory system 97.0 per cent. of the European deaths and 84.2 per cent. of the non-European deaths were in persons over 15 years old. From other forms of tuberculosis 9 of the 25 European deaths and 65 per cent. of the non-European deaths were in children under 5 years old (and 81 per cent. of the non-European deaths were in

children under ten years old).

The notifications of cases of non-pulmonary tuberculosis during the year under review, corrected for imported cases and errors of diagnosis, are classified below accord-

ing to the parts of the body affected :-

				Euro	opean.	Non-E	propean.	Total.
				Male.	Female.	Male.	Female.	
Meninges			 	9	6	34	32	81
Abdominal*			 	_	2	6	6	14
Bones and joint	ts		 	3	2	40	24	69
Glands			 	1	2	4	4	11
Genito-urinary	ystem		 	_	-	_	1	1
Other organs			 	2	-	1	-	3
Disseminated			 	1	-	16	13	30
	Т	otal	 	16	12	101	80	209

^{*} Includes tabes mesenterica and tuberculosis of bowels, peritoneum and abdominal or mesenteric glands.

The deaths from non-pulmonary tuberculosis registered during the year (corrected for outward transfers) are similarly classified below according to death certification:—

		Euro	opean.	Non-E	uropean.	
		Male.	Female.	Male.	Female.	Total.
Tuberculosis,	meningeal	10	6	36	30	82
.,	abdominal	1	1	3	4	9
,,	of bones and joints	_	2	4	_	6
	of lymphatic system	_	-	_	-	_
"	of genito-urinary system	1	1	_	2	4
	of other organs	1		-	-	1
,,	disseminated	1	1	16	10	28
	Total	14	11	59	46	130

The annual death rates from tuberculosis, corrected for outward transfers, are shown for 27 years in the following table:—

							Death rate per 1,000 population.					
							European.	Non- European.	All Races.			
. 8	vears	ended	30th	June,	1916	 	1.04	4.69	2.82			
,	"	,,	,,	,,	1921	 -	0.88	4.47	2.53			
5	- 33	11	11	11	1926	 	0.79	4.09	2.28			
5			,,	,,	1931	 	0.74	4.75	2.62			
5	11	**	11	11	1936	 	0.84	4.99	2.82			
	year o	ended	30th .	June,	1937	 	0.55	4.18	2.30			
	,,	,,		**	1938	 	0.82	4.76	2.72			
	- 11	**	11		1939	 	0.77	4.77	2.70			
1	**	,,		1.	1940	 	0.69	4.25	2.42			

Other particulars will be found in Tables A to D on pages 96 to 120, G to K on pages 123 to 127, and N to S on pages 130 to 135.

PROVISION OF TREATMENT.

The in-patient accommodation available for cases of pulmonary tuberculosis includes the following (30th June, 1940):—

At the City Hospital, Portswood Road, and Rentzkie's Farm, 66 beds for Europeans and 125 for non-Europeans (increased to 148 by the provision of 24 more beds at Rentzkie's Farm since the end of the year under report). During the year the average (daily) number of Cape Town cases of tuberculosis in these hospitals was 56 Europeans and 104 non-Europeans.

At Nelspoort Sanatorium a varying number. During the year the average (weekly) number of Cape Town cases at the sanatorium was 35 Europeans and 33 non-Europeans.

At the Native Hospital, Langa, a varying number. During the year the average number of Cape Town cases there was 3 (all natives).

At the Duinendal Settlement a varying number. During the year the average (monthly) number of Cape Town cases was 9 (all Europeans). There are 20 beds available.

The Sunshine Home for Children, Bellville, a holiday home for European children in a depressed state of health, especially tuberculosis contacts, provides accommodation for 30. During the year 81 children were admitted; average length of stay 97 days.

The same class of case is admitted to the Eaton and McGregor Convalescent Homes of the Cape Hospital Board. During the year the following cases were admitted to these homes from the tuberculosis clinic:

			No.	Average length of stay.
McGregor Home : European children	 	 	 16	41 days.
Eaton Home: Coloured children	 	 	 66	40 ,,
Coloured adults	 	 	 20	13 ,,
European adults	 	 	 14	26 ,,

Provision for more than 250 surgical cases of tuberculosis is made in the hospitals of the Cape Hospital Board (see page 78), the Maitland Cottage Homes (see page 79), and St. Joseph's Home, Philippi (see page 80).

Two clinic centres for tuberculosis are maintained by the City Health Department, at 50 Newmarket Street, Cape Town (replaced since the end of the year under report by the new centre at Chapel Street, Cape Town), and Church Street, Wynberg.

Part of the approved expenditure on these services is repaid to the Council by the Union Health Department and the Provincial Administration.

The anti-tuberculosis branch of the City Health Department is under the direction of a full-time tuberculosis officer, whose office, with that of his tuberculosis health visitors and clerical staff and the almoner of the Tuberculosis Care Committee, is at the clinic centre in Cape Town. Since the end of the year under report the number of tuberculosis health visitors has been increased from 6 to 7.

The X-ray examinations of patients from the clinics are made at the City Hospital, Portswood Road. Here the Medical Superintendent (Dr. J. F. Wicht) also conducts a clinic for special cases, particularly those who have undergone artificial pneumothorax as in-patients at the City Hospital or Nelspoort Sanatorium and require periodical refills. This clinic is held on four mornings a week. The attendances of out-patients during the year totalled 1,727 (see page 40); these are not included in the figures given in the following section.

ANTI-TUBERCULOSIS CENTRES.

Six medical sessions are held per week (all at 2 p.m.), four by the Tuberculosis Officer and two by part-time consultants, as follows:—

			Cape Town.	Wynberg.
Europeans	 	 	Tuesday	Monday
Non-Europeans, female	 	 	Wednesday	Friday
male		 	Thursday	Wednesday

The Tuberculosis Officer is also prepared to see new cases any morning by arrangement with the practitioner, employer, health visitor or teacher.

During the year there were 9,530 attendances at the clinics, and 2,085 persons attended for the first time; the details are shown in the following table:—

			1939	-1940.		1938-1939.				
Clinic.	Race.	Attendances.		New Cases.		Attendances.		New Cases.		
Canto	1111001	Males.	Fe- males.	Males.	Fe- males.	Males.	Fe- males.	Males.	Fe- males.	
Newmarket Street	European Others	892 2,963	653 2,190	156 608	139 606	895 2,530	755 1,857	158 516	170 555	
	Persons	3,855	2,843	764	745	3,425	2,612	674	725	
	Totals	6	,698	1,	509	6,0	37	1,3	199	
Church Street	European Others	260 1,120	322 1,130	41 247	44 244	308 1,169	334 1,001	49 207	45 267	
	Persons	1,380	1,452	288	288	1,477	1,335	256	312	
	Totals	2,	832	-	576	2,8	12	5	68	

The European attendances decreased by 165 and the non-European increased by 846. The European "new cases" decreased by 42 and the non-European increased by 160.

The total number of medical sessions was 302; 2,234 of the attendances were made outside session hours.

As the main object is diagnosis, the aim is to restrict attendances of those already passed as non-tuberculous and to increase the number of first attendances ("new cases") in the search for early or unrecognized disease.

The new cases attending the clinics during the year under report are classified in the following table :—

			Europ	eans.			N	on-Eu	ropean	18.	
Persons attending for first time.	Adı	ults.	Chil	dren.	Total.	Ad	ults.	Chil	dren.	Total.	Total.
Notified: Accepted Observation Not accepted	м. 52 1	F. 29 1	M. 2	F. 2 -	85 2 4	м. 234 16 34	F. 141 12 28	м. 23 5 2	F. 39 7 5	437 40 69	529 42 73
	54	33	2	2	91	284	181	30	51	546	637
Suspects: Notified Observation Non-tuberculous	14 7 40 61	8 6 44 58	2 5 11 18	1 1 7	25 19 102	74 30 97 201	43 44 89	11 17 23 51	8 16 26	136 107 235 478	16: 126 33: 624
Contacts: Notified Observation Non-tuberculous	- 3 17 20	2 5 38 45	- 4 38	2 3 31 36	4 15 124 143	6 9 60 75	10 16 165	12 36 166	10 40 151	38 101 542 681	45 116 666 824
Total	135	136	62	47	380	560	548	295	302	1,705	2,08

The visits made by the tuberculosis health visitors were 1,584 (primary) and 11,482 (total), as compared with 1,640 and 9,900 in the previous year.

The City Council provides bread and milk as additional nourishment for indigent cases of tuberculosis. The ordinary daily allowance for a patient is 1lb. bread and 1 pint milk. 336 new cases were put on this allowance during the year, and the cost of the supplies was £1,404 19s. 3d.

NOTIFIED CASES.

Of the 637 persons who during the year presented themselves for examination as the result of notification 73 $(11\frac{1}{2}\%)$ were found to be non-tuberculous.

SUSPECTS.

Out of the 624 suspects examined, 126 remained on observation. Many of these are children in poor condition and often known to be exposed to frequent infection from an open parental case; in others a diagnosis has not been reached owing to their failure to complete instructions. Deplorably few children were sent for investigation by teachers, who often have a greater influence than the parents and more discernment and opportunity in picking out the ailing child. This also applies to employers in the home, office and factory; their obligations are not fulfilled by dismissal alone. Several cases were reported by trade unions who were issuing sick-pay and were anxious that the beneficiary should secure sanatorium treatment as the quickest means of recovery. During the year arrangements were made with the Assistant Director of Medical Services for suspect cases to be referred from the recruiting depots. The only case found in this way came from thirty miles outside the municipal area. Moreover it has not prevented known cases from entering the army: the department has been able to procure the discharge of some of these infectious cases. Much trouble and unnecessary expenditure results from this folly: it cannot be over-emphasized that enlistment under these circumstances is totally unwarranted and a general disservice to all.

CONTACTS.

At present, contacts are not being examined in sufficient number nor in a comprehensive manner. Only 824 were examined during the year, representing 108 per 100 deaths as compared to the pre-war figure of 178 in England. In the previous year the figure was 98 per 100 deaths.

Compared to the general incidence amongst Europeans of 1·14 per 1,000, an incidence of 28 per 1,000 was found amongst the contacts examined. In non-Europeans, the incidence amongst contacts was 55·8, compared to a general incidence of 7·08 per 1,000.

This is a clear indication of the paramount importance of the infectivity of tuberculosis as a cause of spread compared to abetting factors such as bad housing, malnutrition and poverty. This particularly applies to a population where racial susceptibility has not been overcome. The value of improved housing is not to be belittled, as it would facilitate the more adequate isolation of the infectious case. In a recent statistical study (D'Arcy Hart and Payling Wright) it was shown that overcrowding was the one environmental factor which had the closest relationship to the incidence of pulmonary tuberculosis, i.e., escape from massive infection is less likely. Every worker in the anti-tuberculosis field is impressed by the large number of the poorest people who fail to become tuberculous, however poor and overcrowded their homes, however damp and odorous, if they have not lived or are not living in contact with an open case. On the other hand, there are many whom a good environment has failed to protect in the face of open infection. It is not because they have money in the bank that the rich avoid the disease but because they have not got tuberculosis in the home. The menace of the positive-sputum case is further emphasized by the amount of connubial tuberculosis in Cape Town. This is now acknowledged to be by no means as uncommon as was thought thirty years ago.

It is a profitable civic duty to demand that the non-Europeans should not be asked to make these immense annual sacrifices until such time as nature overcomes a racial susceptibility. It may be sure, but it is too slow, too distressing and too expensive. They must at least be given the chance of hospital treatment, by which their prospects are always improved and the risk to their children reduced. It has happened that a father whilst awaiting admission has had to watch his child slowly dying of tuberculous meningitis, knowing full well that he is responsible for this harrowing and remorseless end.

Tuberculous Meningitis.—In the 81 local cases of this condition notified during the year an open case of pulmonary tuberculosis was known or found to have been living in contact with the deceased in 23 (i.e., 28·4%). The infecting agents were mainly father (5), mother (5) and friend (6).

Laboratory Examinations.—The anti-tuberculosis section wishes to acknowledge the accuracy and promptitude with which the Union Health Department provide this service free of cost.

Sputum e	xaminati	ons.		Wasser	mann re	action	
Positive Negative	::	::	451 776	Positive Doubtful Negative			8 7 59
		-	1,227				74

HOSPITALIZATION.

Of the 1,068 local pulmonary cases notified during the year only 399 were admitted to institutions set apart for the treatment of tuberculosis, i.e., 37 per cent.

No improvement of incidence and mortality figures can be expected whilst the beds available are so niggardly inadequate. There are often a hundred sick and infectious persons anxiously awaiting admission, and many more that should be admitted if willing. Even when accorded preference, the general hospitals have to keep infectious cases in their wards for weeks at the expense of eminently curable emergency cases such as pneumonia. Moreover, vacancies are so rare that only a long chain of desperately ill and neglected cases are admitted, with the result that the hospital physicians have little chance of constructive work and the prospects of the few early cases found at the clinic are jeopardised as their admission is postponed because they can still stand up.

The total number of Cape Town cases of pulmonary tuberculosis admitted to institutions during the year are as follows :—

	Eur	opean	Non-E	Total.	
	Males.	Females.	Males.	Females.	Total.
City Hospital and Rentzkie's					
Farm	54	54	156	109	373
Nelspoort Sanatorium	37	23	45	22	127
Langa Hospital	_	_	19	9	28
Duinendal Settlement	25	-	-	-	25
Totals	116	77	220	140	553

Last year figures were given to show that the chances of immediate survival were twice as great for those who accepted hospital treatment for 3 months or more as for those who refused or were unable to secure it.

In an analysis of the 1,091 (170 children) local pulmonary cases notified from 1st July, 1938, to 30th June, 1939, only 205 (21 children), in whom the diagnosis was established beyond doubt, were known to be alive in Cape Town on 30th June, 1941.

Of these 184 adult survivors, 125 were ex-hospital patients, and 8 were under consultant care in nursing homes; the remaining 51 had relied on domiciliary treatment only. One-third of the original total went to hospital and provided 125 survivors, whilst the two-thirds did not go to hospital and provided only 51 survivors.

Regarding race, the original number of notifications of pulmonary disease in adults was 172 Europeans and 749 non-Europeans; the known survivors living in Cape Town were:—

					Eur.	non-Eur.			
Ex-hospital	and nu	arsing h	ome	 	 68	65			
Domiciliary				 	 6	45	Total	184	

At this time, although there were over four times as many non-Europeans needing beds, the accommodation was almost equally divided between the two groups.

This analysis also demonstrated the prevalence of emigration, and the great difficulty of supervision of a population many of whom are frequently changing their homes, their jobs and their names.

Although inadequate, the better hospitalization of the European is reflected in a survival rate of 43 per cent., compared to the non-European of 15 per cent. Although other factors are involved, the significance of this comparison cannot be misconstrued. Moreover, compare the assault by these infectious adults in the home on the children. There were over four times as many non-European foci, but the incidence in non-European children was over 15 times as great (298 to 19). For, although many are the victims of social conditions, all are the victims of some positive-sputum case and the majority will in turn endanger others.

NOTIFICATION.

The sources of the notifications received during the year under report (including extra-municipal cases and cases in which the diagnosis was revised) were as follows:—

Private practitioners					 		787	
Consultants					 		22	
Croote Sabuur Hasnita	1							809
Groote Schuur Hospital Cape Town Free Disper	1		**	* *	 	* *	202	
					 		124	
Wynberg (Victoria) Hos			**		 		28	
Woodstock Hospital			**		 		23	
Langa Hospital					 		32	
Valkenberg Mental Hos	pitai	* * *	**		 		15	
Maitland Cottage Home	88				 		16	
Other hospitals and ins	stitution	18			 		64	
Charles Daniel							-	504
City Health Departmen	it:							
Anti-tuberculosis e		**			 		106	
City Hospital					 ***		55	
Medical officer for	poor re	lief			 		52	
Other clinics					 		7	3223
D . II 000							-	220
Port Health Officer	12				 		8	
Immigration Officer					 		2	
		-					-	10
Magistrate, Police and	District	Surge	eons		 			43
From public mortuaries					 	5		10
Transferred from other	tuberen	losis e	linies .					
Cape Divisional Co			mines .				7	
Others				1.	 		13	
Others		**	2.5		 		10	20
								20
								1 000
								1,606

It is apparent that notification is inadequate and in some cases unwarrantably delayed. Attention should be drawn to the footnote on every notification certificate stating that "all forms of tuberculosis are notifiable which are clinically recognisable apart from reaction to the tuberculin test." No surgeon has notified a case of ischio-rectal abscess, which is pathognomonic of tuberculosis; some of these cases reach us months later with established disease in the lungs. No tuberculosis of the eye or the skin has been notified; in children these are often valuable diagnostic signals of recent tuberculous infection, and a regime of good hygiene and good nutrition for six months would diminish the chances of the development of tuberculous meningitis and crippling bone disease.

The ideal is to examine every notified case. An arbitrary analysis of the primary notifications (uncorrected) shows the degree and reasons of failure:—

	Local.	Others.	Total,	
Attended clinic Failed to attend	756 692	21 137	777 829	Only 52 per cent. of local notifications attended.
Hospitals	254	120	374	
Too ill	117)	_	117	
Died before notification First advice through death	95	=	95	302
returns	90 }	15	105	
Refusals	69	-	69	
Under private care	34	2	36	
Untraceable Moved out of area on notifi-	19	-	19	
cation	14	-	14	
	1,448	158	1,606	

Although over a hundred more notifications were received the total number of accepted cases was almost the same as last year: there was a decrease of pulmonary cases and an increase of surgical tuberculosis, which was due to improved notification. The most deplorable implication of this table is the large number of persons (302) who allow them-

selves, or were allowed, to become hopelessly ill before the diagnosis was brought to official notice. Apathy and the lack of positive health are so usual that the inability to work arouses no consternation in the non-European; in many cases it certainly does not lead them to consult a doctor; for a few it eventually becomes an advantage to be friendless as well as destitute, for they then appeal to the Board of Aid, who refer them to the clinics, where they are found in an earlier stage.

Tuberculosis Register.

The total number of persons known by the Department to be suffering from tuberculosis and to be living in the municipal area on 30th June, 1941, was:—

		Non-pul-		Pulmonary c	ases at work
District (not wards).	Pulmonary.	monary (chiefly bones and joints).	Total.	After hospital treatment.	Never had hospital treatment.
Sea Point—Harbour	126	24	150	15	21
Gardens, etc	160	46	206	60	20
District Six-Vredehoek	315	51	366	51	11
Woodstock—Salt River	327	54	381	47	16
Athlone—Kensington	320	84	404	76	18
Lansdowne-Claremont	168	60	228	11	4
Wynberg—Clovelly	185	65	250	47	25
Total	1,601	384	1,985	307	115

This figure (1,601) is the minimal number of pulmonary cases; there are a very large number undiagnosed, undiscovered or lost sight of. From the annual crop of over 1,000 to be notified in the following twelve months, it is safe to assume that half of them now have established disease, say 500: this brings the number of pulmonary cases to 2,101.

More than 75 per cent. of these are infections, and if there are five house-contacts to each case, there are at least 7,500 persons known to be living in the shadow of consumption.

NELSPOORT SANATORIUM.

The Nelspoort Sanatorium, providing accommodation for 174 patients, is on the Karroo at an elevation of about 3,260 ft. above sea-level, and on the main railway line at a distance of 371 miles from Cape Town. It is a Union Government institution and there is an advisory committee, which includes the Mayor, the Town Clerk and the Medical Officer of Health of Cape Town. Paying-patients are received at a charge of 12s. 6d. a day. Part-paying and free patients are received on the application of local authorities on the basis of 10s. a day for European patients, and 7s. 6d. for non-Europeans. The cost, after deducting part payments made by patients, is met as to 50 per cent. by the Union Government and as to 25 per cent, each by the Provincial Administration and local authority concerned.

During the year ended 30th June, 1940, there were 127 admissions of Cape Town municipal patients. Of these admissions 24 were of patients who had had a previous period of treatment in the institution, the number of new cases being 103.

3 of the patients admitted were part-paying and 124 free.

The monthly average number of Cape Town municipal patients in the sanatorium during the year 1939-40 was $67\frac{1}{2}$ (Europeans $34\frac{3}{4}$, non-Europeans $32\frac{3}{4}$) as compared with the total number of patients amounting to $155\frac{1}{4}$ (Europeans $93\frac{1}{4}$, non-Europeans 62).

The selection of municipal cases for admission to Nelspoort Sanatorium is made, as to clinic patients by the Tuberculosis Officer, and as to in-patients at the City Hospitals by the Medical Superintendent of Hospitals.

The cases admitted to Nelspoort are classified below according to the stage of the disease:—

			-1	I	п	III	Total
Europeans :	Male Female	::	::	10 7	15 11	12 5	37 23
Non-Europeans :	Male Female			10 7	24 8	11 7	45 22
All Races				34	58	35	127

Almost every case sent to Nelspoort is improved by the expert control, beneficial regime and superb climate. Yet the sanatorium staff is considerably handicapped by the pressure on beds, for two reasons: (1) The local shortage leads to the recommendation of advanced cases for which the institution was never intended and for whom unduly prolonged treatment is necessary: only 27 per cent. of the admissions from Cape Town could be classified as early cases. (2) With the high admission rate, the average duration of stay is detrimentally shortened.

CARE COMMITTEE FOR TUBERCULOSIS PATIENTS.

The voluntary Care Committee works in close co-operation with the City Health Department. Office and storage accommodation is provided at the municipal anti-tuberculosis centre, and the salary and motor car allowance of the almoner employed by the Committee are paid by the City Council. Other funds are provided by the King George V. Silver Jubilee Fund, the Christmas Stamp Fund and the Community Chest.

The work done is indicated by the following statistics:-

					31st	march,	31st De	
	and the same					Non-E.	Eur.	Non-E
Families helped by p	ayment of	of rent			 18	91	13	35
,, ,, n	naintenan	ice grants			 11	11	4	31
,, ,, re	ent and	maintenan	ce gra	ints	 3	29	5	21
,, ,, p.	ayment e	of foster-m	other		 1	3	1	4
,, ,, pi	rovision	of clothing	and	blankets		168	1	102
No. of articles of clot					 1,	228	. 6	337
,, blankets distril					 1000	32		26
Almoner :-								
Visits paid					 1	872	6	58
Interviews given						556	5	24
New cases handle	.1					122		80

Of the above disbursements from 1st April to 31st December, 1940, the Community Chest paid the rent for 33 families, maintenance grants for 26, rent and maintenance for 4 and the payment of foster-mothers for 5; the Silver Jubilee Fund paid the rent for 15 families, maintenance for 2 cases and rent and maintenance for 22; and the Christmas Stamp Fund paid maintenance grants for 7 children.

The Duinendal Tuberculosis Settlement is also maintained by the Care Committee. As from 1st March, 1940, the City Health Department undertook the payment of rent for the families of tuberculous patients who would otherwise have been in distress owing to the breadwinner being in an institution or unable to work. During the ten months ended 31st December, 1940, 56 families (European 6, non-European 50) were assisted in this way, the expenditure amounting to £403 14s. 2d.

SECTION VI.—VENEREAL DISEASES.

(Venereal Disease Officer : Dr. C. K. O'Malley, M.C.)

The deaths certified in the year 1939-40 as being due to syphilis (corrected for outward transfers) numbered 91 (10 European and 81 non-European); and from genereal paralysis of the insane 13 and tabes dorsalis 4 (2 European and 15 non-European). The sum of these figures is equivalent to a death rate per 1,000 population of 0.07 for Europeans (or 0.10 if corrected for inward transfers) and 0.63 for non-Europeans.

The mortality rate from these conditions (all races) in 1939-40 was 28 per cent. greater than in 1938-39, but 24 per cent. less than the mean of the ten years 1929-39 (see Table C

on page 118).

Of the 81 non-European deaths certified as due to syphilis, 38 were of children under one year old and 44 under five years. Of the 10 European deaths, 1 was of a child under one year old and the remainder adults. Of the adult deaths 32 were of males and 14 of females. All the 17 deaths from G.P.I. and tabes were in the age-groups above 25 years; 16 were males and 1 female.

There were 2 deaths certified as due to gonorrhoea.

The Council's scheme for the treatment of venereal disease includes (a) municipal treatment centres, (b) in-patient treatment at the City Hospital, and (c) follow-up of defaulting patients. Part of the approved expenditure on these services is repaid to the Council by the Union Health Department, which also provides free the special drugs used in the treatment of these diseases.

The staff of this branch of the Department, under the control of the Venereal Disease Officer, is shown at page 92 (not including the staff of the V.D. wards at the City Hospital). The Venereal Disease Officer is assisted at the clinics by a full-time medical officer,

several part-time medical officers, four nurse-visitors and two orderlies.

The clinical control of the V.D. wards is under the Venereal Disease Officer. There are 24 beds in these wards, which are occupied by cases requiring treatment that cannot well be given under out-patient conditions or which for special reasons need to be segregated. During the year under report the cases of venereal disease that were admitted numbered 235, as follows:—

	From		From outsid Municipal	
European:				
Children-Male	 3		_	
Female	 7		2	
Adults- Male	 51		25	
Female	 13		2	
Total Europeans	 	74		29
Non-European :				
Children-Male	 4		_	
Female	 12		1	
Adults— Male	 43		22	
Female	 67		8	
Total non-Europeans		126		31
Total: All races		200		60

Of the 60 non-municipal cases, 25 (male adults, 20 European and 5 non-European)

were from ships in the port.

There are three centres for the treatment of venereal disease, viz., at the City Hospital, Portswood Road, Cape Town, at Spencer Road, Salt River, and at Church Street, Wynberg. At these, 27 medical sessions a week are held as follows (30th June, 1940):

		Eur	ropean	Non-	European
		Males.	Females.	Males.	Females.
City Hospital centre	 	2	2	2	3
Salt River centre	 	3	1	2	6
Wynberg centre	 	1	1	1	3

Of the 27 medical sessions, 16 are conducted by full-time medical officers and 11

by part-time medical officers.

Besides the full-time non-medical staff (4 nurse visitors, 2 male orderlies and 2 clerks), part-time assistance at the clinics is given by 3 male orderlies who also work in the V.D. wards at the City Hospital, and certain of the clerical staff of the Department.

Expectant mothers infected with syphilis are also treated at the pre-natal clinics

held at the maternal and child welfare centres.

The work done at the clinics in the year 1939-40 is set out in the tables on pages 60 and 61. 3,483 new cases reported at the three treatment centres, a decrease on the figure (3,809) for the previous year. If we include cases seen at the pre-natal clinic a total of 4,212 for new cases is obtained.

The total attendances at the three treatment centres numbered 46,208, or 50,758

including the pre-natal clinics.

The figures are shown more concisely in the following table :-

Type of disease.	Euro- pean.	Non- Euro- pean.	Total.	No. of consultations	50,758 15,870 21,085
Primary and secondary	150	004	014	No. of intramuscular injec-	The same of
syphilis Tertiary syphilis	150 95	1,229	1,324	No. of specimens for Wasser-	17,594
Syphilis of the C.N.S.	4	19	23	mann reaction (V.D. clinics)	7,223
Congenital syphilis	19	269	288	No. of specimens for Wasser-	
Gonorrhoea	331	578	909	mann (pre-natal clinics)	7,264
Other venereal diseases Non-venereal diseases	29 178	84 510	113 688	No. of smear examinations for gonococci	5,771
Undiagnosed	9	44	53	No. of operations	3
				No. of sessions held during	
Totals	815	3,397	4,212	the year	1,353

The figure given for "intermediate" treatments refers to irrigations carried out by male patients under the direction of the orderlies, for which purpose the three treatment centres are open daily, and irrigations of female patients carried out by the nurses, who attend specially for this purpose. The male intermediate treatments numbered 15,561 (European 7,786 and non-European 7,775, all adults). The female "intermediate" treatments were as follows:—

European Non-European	 	 	 Adults. 40 2	Children. 55 212	Total. 95 214
			-	MANAGEM .	-
			42	267	309

As compared with the previous year the attendances for irrigations were reduced by more than a half. This is attributable to the use of sulphapyridine in treatment.

Follow-up of defaulters.—The four nurses on the staff follow up female defaulting atients by home visitation. Male defaulters are dealt with by the delivery of warning letters by the district health inspectors. This work is much hampered by the fact that many patients cannot be traced. Its extent and result are shown by the following figures:

Home visits to female defaulting patients	 	 	4,241
Patients who returned	 	 	2,021
Letters to male defaulting patients	 	 	1,128
Patients who returned	 	 	373

During the year 22 defaulters were referred to the Magistrate for action under the Public Health Act.

The home visits made by the nurse-visitors numbered 5,364.

An analysis of the new cases attending the Cape Town treatment centres (3,483) is made below.

1. Race European	Delo	"-			Cases.	Rate per 1,000 popu- lation.
Non-European	1. H	Race .	European	 	 769	
2. Sex Male				 	 2,714	17 -6
Female					3,483	11 .0
Female	2. 8	lex .	Male	 	 2.112	13 -7
3. Disease Syphilis 1,722 5·4 Gonorrhoea 907 2·9 Other venereal diseases 113 0·3 Non-venereal diseases 688 2·2 Cases undiagnosed 53 0·2						8.4
Gonorrhoea					3,483	11.0
Gonorrhoea	3. I	Disease	Syphilis	 	 1,722	5.4
Other venereal diseases						2.9
Non-venereal diseases 688 2 · 2 Cases undiagnosed 53 0 · 2						
Cases undiagnosed						
3,483 11-0						
3,483 11.0						
					3,483	11.0

The following table shows the new cases at the Cape Town venereal disease clinics over a period of years :—

Year end 30th Jun	Total new cases.	Population.	Rate per 1,000 population.
1929	 2,987	256,995	11 -6
1930	 3,316	262,192	12 -6
1931	 3,423	267,337	12 -8
1932	 3,408	273,118	12.5
1933	 3,617	279,469	13.0
1934	 4,126	286,708	14.4
1935	 3,746	293,249	12.8
1936	3,598	293,180	12.1
1937	 3,971	300.800	13.2
1938	 4,007	308,429	13.0
1939	 4,537	315,398	14.4
1940	 4,212	322,813	13.1

225	i	-express	N N	T		1		T	290	793	332	528	38
Routis blox tests pregns	Wome	9 (1)180	d	+	1	1		-	ot 051	100	0 19	9	1 15
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		meat examinations.	8 12 12 12 12 12 12 12 12 12 12 12 12 12	798	25 12 15 15 15 15 15 15 15 15 15 15 15 15 15		88 - 188 - 1	190	111211	1-	-,,,,,	-	1111
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suffered	190	Mast venereal disease	01112411	99	81118111	47	111109111	04	111111	-	111111	,	11111
patients		Jonorrhoea only.	72,292-8	304	58 1 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	490	18,121,1	113	111111	1	11111	1	11111
which	- 14	-pattents with bot liseases-included i		15	200110011	28	(1120)	01 04	11111	-	11111	-	
es fron				53	01-0+0±28	155	1 - 60 60 60 00 00 00	8	11111	1	111111	1	11111
Diseas	ens.			15	-111401-1	00		L	111111	1	111111	1	11111
		Syphills, terriary.	50 1 1 4 5 1 1	167	9 # 1 1 8 8 1 1 H P	315	40118811	184	127 1 1	120	* 1 1 Z 1 1	62	91181
		Sypbills, primary.	84 - 189 - 8	088	12:12:4	390	0 41 188 10	133	111111	-	111711	1	
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		Fotal attendances.	34 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	12,906	6,106 1,327 1,327 1,113	23,200	25 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	10,102	91.181.1	971	\$ 1 1 8 1 1	426	9118
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11	1.1.1	1	1	1.1		1	1	111111	1	11	1111	1	1.1	1.1.1.7	-	11	0.0	1	01101	-	111111	-	0-11	23
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11	111		1	11		1	1	111111	1	1.3	1111		1.1	1.1.1.1	-	1.1	1111	1		1		1	H81 - 1500	814
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Brooklyn (Pre-natal clinic)				Athlone pre				Claremont (pre-natal clinic)		Wynberg (pre-natal clinic)			Retreat (pre-natal clinic)			*Peninsula Maternity (pre-natal clinic).			*St. Monlea clinic)		*Vrede Oord (pre-natal clinic)	ALL COLUMN	TOTALS	

* These are voluntary clinics supplied with Government drugs through the Corporation.

SECTION VII.—SANITARY ADMINISTRATION.

HEALTH INSPECTORS.

On 30th June, 1940, the staff of health inspectors consisted of the chief health inspector, the assistant to the chief health inspector, 5 divisional health inspectors, 20 health inspectors, 5 assistant health inspectors, and 1 learner health inspector; besides 2 health inspectors for dairies and 3 rodent inspectors. A meat inspector for the inspection of dead meat imported into the Municipality is also attached to the Department.

A native was appointed on 6th November, 1939, to act as assistant to the health inspector at Langa native location.

For sanitary inspection the Municipality is divided into five divisions, each of which is sub-divided into districts (26 in all). In each division the inspector in charge has no district of his own, and he is responsible for the work of the district inspectors in his division. The two dairy inspectors undertake the inspection of cowshed premises supplying milk to Cape Town, including those in the country, and the work of the rodent inspectors is also separate from the divisional system. All the inspectors work under the control of the chief health inspector, who, with his assistant, is also responsible for the municipal washhouses and the public sanitary conveniences.

The work of the district health inspection staff includes the investigation of notified cases of infectious disease (except tuberculosis, pneumonia, ophthalmia, trachoma, puerperal fever, and diseases notifiable by school teachers, such as measles and whooping cough); the inspection of dwelling houses, shops, food places and vehicles, stables and other places where animals are kept (except licensed cowsheds); inspections concerning the licensing and regulation of licensed, registered and regulated trades, and of theatres and other places of amusement and camping sites; the inspection of courts, lanes, alleys, open land, refuse tips, and standing water; the inspection of municipal washhouses and sanitary conveniences; investigations into social conditions in connection with remission of fees for treatment in municipal hospitals and the granting of permits to buy State-aided butter, etc. The divisional inspectors are responsible for the taking of samples under the Food, Drugs and Disinfectants Act, and the dairy inspectors milk samples for bacteriological examination.

The rodent inspectors deal with the rat-proofing of buildings, the destruction of town and veld rodents, and the prevention of mosquitoes. The district inspectors are also concerned in this work.

The meat inspector undertakes the inspection and stamping of meat killed outside and brought into the municipal area.

The inspections recorded as made by the health inspectors (other than the meat inspector and rodent inspectors) during the year ended 30th June, 1940, were as follows:—

Inspections made:

ADDRESS ASSESSED 1								
Public markets					 			1,773
Butchers' shops					 			11,980
Dealers' and general d	lealers'	shops	(food)	 			18,868
Dealers' and general de	alers' s	hops (r	10 foo	d)	 			4,047
Fish and poultry shops					 			2,441
Bakers' shops (without					 			454
					 			1,191
Milk shops (purveyors								4,419
Ice-cream purveyors ar					 			1,037
Tea shops								1,637
Cafés								1,980
Restaurants								1,851
								1,629
Residential hotels and					 			1,592
Aerated-water manufac								222
Other places where foo								646
Hawkers' premises						* *		2,394
77 1 1					**	**	* *	1,349
Butchers' carts and car					 	**	**	357
Milk-delivery vehicles					 		* *	1.547
White					 	* *		200
** *					 * *	* *	4.4	88
* * * * * * * * * * * * * * * * * * * *					 **	* *		37
					 * *		**	
Ice plants and freezing					 		**	473
Tents					 **			113
Sideshows					 4.4	**		65
Theatres and bioscopes					 			556

Common le	odging houses		**		**		**		130 478
Tenement	houses				9.				6,989
	se inspections	4.4	**						46,252
Hairdresser	18						++		1,981
Laundries		V12		++					369
	akers and uph			**					356
Courts lan	ries and workp es and alleys	laces		* *	**	**			2,967
Open land	os and anoys			**	**	**	17.5	7.7	4,161 2,126
Piggories	11 11			11	11		11	**	82
Horse stab	les								7,694
Dairy stab	les					-			4,231
Cattle deal	ers' premises							10.0	34
Visits made	e in connection	with in	fectio	us disea	180				2,416
Hackney e	arriages	* *					4.4	4.	5
	rater, catchpits,					0.0			612
	emises re plans						++		280
Public sani	tary convenien	ces				1.5	4.0		4,245
Washhouse	8				**	**	++	**	533 282
	ided butter								1,873
	8								4,039
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									155,081
Particulars in c	onnection with v	isita rec	corded	in the c	thous is	unnectio	ma :-		
	remises where					ection	with re	dent	122
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Proceedings be Verbal not Written re Formal wr Written notices fotal notices s Verbal not Request no Formal no	gun by: ices quest notices itten notices Total pro s following ver erved: ices otices tices	ceeding	s begraices						2,086 45 5,724 7,855 726 2,086 46 6,494 1,881
Proceedings be Verbal not Written re Formal wr Vritten notices s Verbal not Request no Formal no Final notice	gun by: ices quest notices itten notices Total pro s following ver erved: ices otices tices	ceeding	s begraices						2,086 45 5,724 7,855 726 2,086 46 6,494 1,881 10,507
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Proceedings be Verbal not Written re Formal wr Vritten notices so Verbal not Request re Formal not Formal notices so Verbal notices so Verbal notices so Verbal not re Formal notices so Verbal not re Formal notices so Verbal notices so Verbal not re Formal notices so Verbal notices	gun by: ices quest notices itten notices Total pro s following vererved: ices otices tices tices Total Total f items includ Sea Point Harbour West Central Kloof Park East Central Castle Woodstock Salt River Mowbray Maitland	ceeding bal not	s begraices	855 no	otices	were a	us follo	ows:-	2,086 45 5,724 7,855 726 2,086 46 6,494 1,881 10,507 645 851 288 1,221 873 2,350 1,472 1,679 1,375 786 1,743
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Stopped drains
Defective water fittings
Unauthorized structures
Undrained premises
Structural defects to premises
Other defects

STABLE PREMISES.

The Municipal Regulations empower the Council to prohibit the use for the keeping of animals of any stable, cowshed, pigsty, kraal, etc., which in its opinion is "unfit, undesirable or objectionable by reason of its locality, construction or manner of use." The Council may also restrict the number or kind of animals to be kept at any such premises. During the year ended 30th June, 1940, the Council prohibited the further use of 6 stable premises (equine) for the keeping of animals.

Previously, since 1929, the Council had prohibited the use of 85 stable premises.

Many others had been closed without formal action by the Council.

These figures do not include dairy stables that have been closed by order of the Council.

In the last annual report details were given of a census of equine stables in the municipal area made in 1939. This showed that, apart from 751 animals in 8 stables kept by the South African Railways and Harbours Administration and the City Council there were 422 stables, in which 1,947 animals were kept by 660 persons. 230 stables (728 animals) were recorded as insanitary, and 96 (482 animals) as "medium."

Further progress has not been made with the proposal to provide sanitary communal stables in which people who depend on the use of horses for their living (such as hawkers) may obtain accommodation at a small rental.

ANTI-RODENT OPERATIONS.

Plague is endemic in veld rodents over a large part of the rural areas of South Africa. In 1923-24 and in succeeding years in order the number of human cases of plague in the Union were 372, 112, 71, 75, 39, 65, 145, 71, 22, 31, 39, 290, 253, 52, 70 and 77. The Union Health Department reports that in the year 1939-40 the human cases in the Union numbered 47 (5 European and 42 non-European), of which 15 were in the Cape Province (Calvinia 2, Uitenhage 2, Glen Grey 9, Middelburg 1, Mafeking 1), 28 in the Orange Free State and 4 in the Transvaal. The human deaths numbered 26.

The sandy Cape Flats are infested with gerbilles and other veld rodents, but plague infection in rodents has not approached nearer to Cape Town than the Ceres basin and the van Rhynsdorp district near the Olifants River towards its mouth. There has been no outbreak of plague in Cape Town since about 1901, when there was an epidemic which spread from the infection of rats in the Port. At that time many parts of the country were also affected. And until 1938, when a few human cases occurred in Port Elizabeth and rats were found to be plague-infected in that city, there has been no infection of rats in South Africa for many years.

In view of this position an anti-rodent staff is maintained in the City Health Department, consisting of the 3 rodent inspectors (increased from 2 to 3 as from 1st January, 1940) and 18 rateatchers. This staff devotes itself to the rat-proofing of buildings and the destruction of rodents, especially rats and veld rodents. Rattus rattus, both rattus and alexandrinus, and Rattus norvegicus are found in the business centres and old houses of the city, Rattus rattus frugivorus in the suburbs, and Rattus norvegicus on the sea beaches and in the banks of streams, etc. Systematic destruction of gerbilles is carried out in the unbuilt-on part of the municipal area on the Cape Flats, stretching from Table Bay to False Bay; and this is supported by similar work carried on by the Cape Divisional Council on the Cape Flats more to the east.

In town attention is given chiefly to the rat-proofing of premises which attract, harbour and nourish rats, and the destruction of rats in infested premises. In the granting of trading licences for grocers' shops and the like rat-proofing has been insisted on. Many wooden floors in such premises have been replaced by concrete. Rat-proofing has been required in accordance with the Union Government Regulations in the erection of new shops and stores or alterations, additions, etc.

The work done during the year under review is indicated by the following figures:

Inspections by Rodent Inspectors:

Re rodents Re mosquitoes					 6,672 4,706	
Inspections re rodents Inspections re mosquit Visits made to lands ar	oes	by oth	er ins	pectors		11,378 108 612
Re rodents		::		::	 55,013 12,604	67,617

Number o	f notices	served	by	Rodent	Inspectors:
and the second					

Verbal notices Written notices	::		W.	::	 46 259	
Number of rodents	caught	and	destroyed	1:		305
Brown rats					 6,002	
Black rats					 4,891	
Gerbilles					 182	
						11.075

The figures given above as to rodents destroyed include only the number of animals whose dead bodies were actually recovered. There is no reason to doubt that many more were destroyed by the methods employed.

The above figures do not include certain inspections made and notices served by the district health inspectors in connection with rodents.

The rodents destroyed and recovered are shown in the following table :-

RODENTS CAUGHT AND DESTROYED.

Year ende 30th Jun	Brown rats.	Black rats.	Gerbilles.	Total.
1926	 8,409	1,206	3,430	13,045
1927	 8,716	1,282	1,537	11,535
1928	 7,651	1,352	816	9,819
1929	 6,803	1,388	414	8,605
1930	 5,297	1,631	510	7,438
1931	 3,982	1,918	770	6,670
1932	 4,103	2,017	634	6,754
1933	 3,939	2,556	929	7,424
1934	 3,839	2,690	1,321	7,850
1935	 3,257	3,597	543	7,397
1936	 3,757	3,240	610	7,607
1937	 3,642	4,030	619	8,291
1938	 3,793	6,063	585	10,441
1939	 4,407	5,376	514	10,297
1940	 6,002	4,891	182	11,075

MOSQUITOES.

One of the rodent inspectors specializes also in anti-mosquito work. He investigates local prevalences of mosquitoes discovered through complaints or otherwise, and controls permanent anti-mosquito measures in the Black River valley. Two of the ratcatching staff under his supervision devote the whole of their time to oil-spraying of waters where mosquitoes are bred. The number of inspections, etc., is shown under the previous heading.

The chief prevalence of mosquitoes is in those parts of the southern suburbs which are within a mile or two of the sewage disposal works at Athlone.

The nuisance is worst during the early part of the rainy season before the weather has become cold. The mosquitoes are almost exclusively Culex. Anopheles and Aēdes are not found.

Other particulars on this subject were given in the annual report for 1934-35.

Mosquito prevalence is liable to occur in any part of the Municipality through breeding taking place in local collections of water. It is by no means confined to the summer.

Trapped street catchpits are apt to cause trouble, and their treatment with larvicide is undertaken by the City Engineer's Department.

CAMPING.

Camping on private sites within the municipal area has been kept under observation by the health inspectors. During the year 1939-40 17 applications for the erection of tents, etc., were received, of which 14 were approved and 3 refused. Of the 14 approved, 10 were for occupation by 106 persons; the other 4 were for meetings only.

FOOD, DRUGS AND DISINFECTANTS ACT.

In terms of Government Notice No. 1572 of 1932, the Minister of Public Health added the Municipality of the City of Cape Town to the list of local authorities empowered under Government Notice No. 666 of 1930 to administer the Food, Drugs and Disinfectants Act in respect of (a) perishable articles mentioned or defined in the Regulations under the Act and (b) flour, meal, bread and any other article of food not packed or sold in a sealed package. The number of samples to be examined for the Municipality in the Government Chemical Laboratory free of charge was fixed at 607 by Government Notice No. 295 of 1937 as from 26th May, 1937.

Sampling duty is undertaken by the five divisional health inspectors.

The following is a record of the samples taken during the year ended 30th June, 1940:—

			- HARRIST HOLES				
Nature of sample.	No. of samples.	No action taken.	Letter sent.	Warning notice sent.	Summons applied for.	Total.	Genuine
Milk	401	_	10	3	35	48	353
Cream	. 2	-		-	_	_	2
Butter	. 5	-	-	-	-	-	5
Cheese	. 3	_	-	-	_	_	3
Ice cream .	. 40	-	-	1	9	10	30
Mixed coffee .	. 2	-	-	_	1	1	1
Coffee	1	_	_		1	1	-
Admixture con			365				
taining coffe	e 1		-	-	-	_	1
Minced meat .	40	-	-	1	5	6	36
Sausage	. 56	_	-	_	3	3	53
Boer wors .	7		-	-			1
Polony	. 13	_	-	-	3	3	10
Liver polony .	1		-	-			1
Brawn	0	-	-	_	_	-	2
Bacon	1	_	-			_	1
Dripping	0			-		_	8
Vegetable fat .	1 3 1	-	-		_	-	1
Flour	1		-	-	-	-	1
Boer meal .	1	_	_	_	_		1
Maize meal .				-		-	1
Rolled oats .	4	_	_	-		-	1
Rice	0	-	-	_	-	-	2
Sweets	1	-	-	-	-	-	1
Total .	. 587	_	10	5	57	72	515

Of the 57 summonses in respect of samples taken during the year ended 30th June, 1940, 5 were not heard until after the end of that year. 15 cases in respect of samples taken in the previous period were heard in the year under report. 67 cases were therefore heard during the year, and are included in the list of prosecutions at page 72.

The results of analysis of the samples of milk taken were as follows :--

Percentage of milk fat.	No. of samples.	Percentage of milk- solids-not-fat.	No. of samples.
1.0-1.4	1	6.0-6.4	2
1.5-1.9	3	6.5-6.9	1
2.0-2.4	8	7.0-7.4	5
2.5-2.9	19	7.5-7.9	6
3.0-3.4	102	8.0-8.4	16
3.5-3.9	156	8.5-8.9	234
4.0-4.4	67	9.0-9.4	134
4.5-4.9	26	9.5-9.9	3
5.0-5.4	10		
5.5-5.9	. 7		
6.3	1		
6.7	1		

SALE OF MILK AND ICE CREAM.

The last substantial amendment of the Cape Town Dairy Regulations was made on 30th April, 1936. The old regulations prohibited any person from carrying on the business of dairyman, purveyor of milk or cowkeeper within the Municipality unless (1) he was licensed by the Council as a purveyor of milk, and (2) any premises within the municipal area used by him as a dairy, milkshop or cowshed were licensed. The licences were annual and the Council had the power to refuse any application for a licence if the conditions were unsatisfactory. No licence was required under the old regulations by cowkeepers whose premises were outside the municipal area and who supplied milk to retail dairymen in Cape Town, but under the amendments now in force the principle of annual licensing by the City Council is extended to them also; and any retailer selling milk from cowshed premises outside the municipal area is required to hold an annual permit to do so issued by the Council. Milk delivery vehicles must be approved annually and certificated.

The regulations also prohibit any person carrying on the business of manufacture or vendor of ice cream on any premises or conveyance unless such premises or conveyance are licensed. The licences are annual and applications may be refused if conditions are unsatisfactory.

The number of dairy premises licensed* for the sale of milk in the Municipality at 30th June, 1940, was as follows:—

	In the mun	icipal area.	Outside the municipal area.			
	30th June, 1939.	30th June, 1940.	30th June, 1939.	30th June, 1940.		
Cowsheds Milkshops	46 122	44 121	154	158		

* Including certain premises in use but not licensed at the date stated.

In September, 1928, when a special report on the subject was considered, there were 146 licensed cowkeepers' premises in the municipal area. 119 of these have been closed, and there are 17 others that have since been opened and remain in use. All the cowsheds are in the Southern Suburbs and Ward 11.

Two inspectors provided with transport devote all their time to the inspection of cowsheds, including those outside the Municipality from which milk is sent into Cape Town. Milkshops and ice-cream premises are under the inspection of the general health inspectors. During the year under report, the inspections made were as follows:—

Dairy stables	 	 	 	 4,231
Milkshops	 	 	 	 4,419
Milk delivery vehicles	 	 	 	 1,547
Ice-cream premises	 	 	 	 1,037
Ice-cream vehicles				37

In the following table the figures for dairies refer to the calendar year 1940 and those for ice cream to the year ended 30th June, 1940:—

	Cowshed	Cowshed premises.		Manufac-
	In the munici- pal area.	Outside the muni- cipal area.	Milkshop premises.	and vend- ors of ice cream.
Applications for licences received Applications cancelled Licences not granted	50 45 — 5	178 170 7 1	135 122 9 4	525 509 16

Of the 509 persons licensed to make or sell ice cream only 22 were licensed for its manufacture. The remainder were licensed only for selling ice cream not made on the premises. The 22 licensed for the manufacture of ice cream include 3 who have a large wholesale trade.

Milk samples taken by the City Health Department are examined in the Union Health Laboratory, Cape Town (for total bacteria and coliform bacilli according to the technical procedure prescribed in the Municipal Dairy Regulations and for tubercle bacilli by inoculation).

As far as possible samples for bacteria and coliform bacilli are taken from each purveyor of milk about once in nine months, and in the following table the results of the examination of such routine samples are set out. When unsatisfactory reports are received repeat samples are commonly taken from the same source. In order to give a better reflection of the general position the results of such repeat samples are omitted from the table:—

Samples of Milk Tested for Total Bacteria and Coliform Bacilli: Year ended 30th June, 1940.

	N	ımber	of be	cteris	per	o.o.	No	colif	orm b	acilli :	in :	
		Not	more	than		More						o-0001.
Milk samples taken at	30,000	100,000	200,000	200,000	1,000,000	1,000,000.	1 e.e.	0.1 e.e.	0.01 e.e.	0.001 e.e.	0.0001 e.e.	Coliform bacilli present in 0.0001
Cowshed premises	7	11	6	1	1	2	1	4	8	4	7	4
On delivery to retailer by cowkeeper (cowshed in Municipality)	3	5	3	1	_	_	-	2	5	3	1	1
On delivery to retailer by cowkeeper (cowshed out- side Municipality)	57	58	35	19	3	8	1	17	62	45	32	23
On milk round of cowkeep- er supplying retail cus- tomers (cowshed in Muni- cipality)	21	14	8	1	-	_	2	5	11	15	6	5
On milk round of cowkeep- er supplying retail cus- tomers (cowshed outside Municipality)	5	15	2	2	_	1	_	2	6	10	6	1
In retailer's shop or depôt	43	40	29	27	14	9	5	7	36	37	34	43
On milk round of retailer	9	9	7	7	-	2	3	-	8	8	7	8
Totals	145	152	90	58	18	22	12	37	136	122	93	85

Samples of Milk Tested for Tubercle Bacilli: Year ended 30th June, 1940.

						Positive.	Negative.	Total.
Samples taken from mixed m	ilk o	of herd	:					
Cape Town cowkeepers .						_	8	8
Outside cowkeepers .						2	21	8 23
Samples taken on round:							100	
Cape Town cowkeepers						_	-	-
Outside cowkeepers						_	-	-
Samples taken in course of de	elive	rv to r	etailers	depôt	8:			
Cape Town cowkeepers						<u> </u>	_	-
Outside cowkeepers						-	37	37
Total						2	66	68

In addition to the above routine samples, 11 samples from individual cows were taken to follow up the routine samples reported as positive. These were all found to be negative.

TEA SHOPS, CAFÉS, RESTAURANTS AND EATING-HOUSES.

Municipal regulations provide for the annual licensing of these premises and the controlling of their equipment and management. Applications for licences are considered by the responsible committee after report by the Medical Officer of Health. The following is an analysis of the applications dealt with during the year ended 30th June, 1940:—

	Restaurants.	Tea shops.	Cafés.	Eating- houses.
1. Applications received	128	293	40	53
(without conditions)	75	203	26	18
(subject to conditions) 4. Number under item 3 later reported	51	88	14	33
as having complied with conditions	41	59	12	18
5. Refusal of licences recommended	-	2		_
6. Applications withdrawn	2	_		2

REGISTERED TRADES.

Mattress-Makers, Laundries, Barbers and Hairdressers:

Government Regulations regarding mattress-makers and upholsterers (Government Notice No. 1384 of 1938) prohibit any person from carrying on those trades unless registered annually by the Council. The municipal regulations prohibit any person from carrying on any laundry "by way of trade or for purposes of gain," unless registered annually by the Council. The municipal regulations also prohibit any person from carrying on the trade or business of a barber or hairdresser unless registered by the Council.

In the following table the figures for mattress-makers and laundries refer to the calendar year 1940 and those for hairdressers to the year ended 30th June, 1940:—

		Mattress- makers and Upholsterers.	Laun- dries.	Barbers and Hairdressers.
Applications received	 	 30	21	72
Registration certificates issued	 	 28	16	55
Registration refused	 	 -	1	1
Applications withdrawn	 	 2	4	16

As at 30th June, 1940, the number of registered barbers' or hairdressers' premises was 349.

TRADE LICENCES.

The Licenses Consolidation Ordinance No. 19 of 1930, as amended, provides that a certificate must be obtained from the Council before a licence is issued to trade as a general dealer, fresh produce dealer, baker, butcher, restaurant (etc.) keeper, hawker, pedlar, motor garage, or mineral water manufacturer or dealer, and further that no application for such certificate shall be considered unless the Medical Officer of Health shall have reported that the premises are fit and suitable for the purpose, and that he knows of no reason why the licence should be refused on the grounds of public health. All applications for certificates are referred by the responsible committee to the Medical Officer of Health for report, and the consequent inspections involve a considerable amount of work on the part of the health inspectors. The licences, which are designed for revenue purposes, must be renewed annually, but the Council's certificate is only required when they are issued for the first time or transferred. Under the Council's regulations, however, hawkers and pedlars must be licensed annually.

The following is an analysis of applications for certificates dealt with during the year ended 30th June, 1940:—

	General dealers.	Fresh produce dealers.	Butchers.	Bakers.	Hawkers.	Pedlars.	Motor garages.	Mineral water dealers.	Mineral water man- ufacturers.
1. Applications received	1,037	154	106	4	1,178	46	57	37	4
mended (without conditions) 3. Granting of licences recom-	518	82	35	-	595	30	35	24	2
mended (subject to conditions) 4. Number under item 3 later re- ported as having complied with	487	66	64	3	372	10	19	13	2
conditions	395	54	52	2	288	7	14 2	11	2
5. Refusal of licences recommended 6. Applications withdrawn	23	54 3 3	3	1	92 119	3	1	=	-

When referring to hawkers, item No. 4 to read "number under items 3 and 5 later reported suitable."

INSPECTION OF MEAT AND OTHER FOODSTUFFS.

The inspection of meat from animals killed at the municipal abattoir is under the control of the Veterinary Officer, and is reported on in the Mayor's Minute. No animals may be slaughtered elsewhere in the Municipality, and all meat from animals slaughtered outside the City and brought in for consumption must be deposited at one of the depôts appointed by the Council. There it is inspected and stamped by the meat inspector attached to the City Health Department.

The following is a return of meat from animals slaughtered outside the City and brought in for sale within the municipal area during the period 1st July, 1939, to 30th June, 1940:—

Description	Inspected.	Passed.	Condemned	Condemn	ed entirely.
Description.	Inspected.	Passed.	partly.	Amount.	Percentage.
Carcases of Beef	33	31	_	2	6.06
Carcases of Mutton	9,361	9,360	_	1	0.01
Carcases of Veal	3	3	_	-	_
Carcases of Pork	27,775	26,991	686	98	0.35
Parts of Beef	209	209	-	-	1
Parts of Mutton	4,775	4,775	-		-
Parts of Veal	92	92	-	-	-
Parts of Pork	19	19			-
Ox Heads	1	- 1	I	1	
Ox Hearts	1	-		1	
Ox Tongues	1	-	-	1	
Ox Livers	-1	-	-	1	
Ox Lungs	1		-	1	100
Sheep and Goats' Plucks	3,243	3,230	_	13	0.40
Livers	28,069	26,217	-	1,852	6.60
Pigs' Plucks \ Lungs (prs.)	28,069	25,684	-	2,385	8.50
Hearts	28,069	27,747	-	322	1.15
				7 1 1 77	

The following return shows the imported meat condemned at the depôts appointed by the Council, classified under the various diseases for which it was condemned, during the period 1st July, 1939 to 30th June, 1940:—

Description.	Total.	Abscess.	Bruised.	Cirrhosis.	Cysts (Hydatid).	Emaciation.	Inflammation.	Jaundice.	Measles.	Moribund.	Nephritis.	Pneumonia.	Putrefaction.	Pyaemia.	Tuberculosis.
Carcases of : Beef	0														
Markey	2				-	-	=	-	-	7	1	-		-	2
Pork	784	8	6			5	_	3	71	1	1	_	-	1	689
Oxen:	101	13	0	-			-		"1				-		000
Heads	1	-	_	_	_	_	_	-	_	_		-	-	-	1
Hearts	i	_	-				- 2		-			_		0	î
Tongues	1	-	-	-		_	2	-	_	_	-	_	-	-	i
Livers	1	-	-	-	_	_	-	-	-	-	-	_	-	-	1
Lungs	1	-	-	-	-	_	_	-	_	-	_	-	-	-	1
Sheep & Goats:										-				1-7	100
Plucks	13	-	-	-	12	-	=	-	-	-	-	1	-	-	-
Pigs:															
Hearts	322	4	-	-	160	-	68	3	70	1	-	5	1	-	10
Livers	1,852	4	-	215	1,472	-	71	3	70	1	-	5	1	-	10
Lungs	2,385	4	-	-	170	-	2,121	3	70	1	-	5	1	-	10

The following carcases with slight infestation with cysticercus were discovered and interned in cold storage for the prescribed time:—

Removed from	Measl	y Beef.	Measly Pork.				
	Carcases.	Weight (lbs.).	Carcases.	Weight (lbs.).			
Municipal abattoir Cape Town depôts	562	315,646	6 9	746 1,003			
Total	562	315,646	15	1,749			

Export rejects:

8,665 carcasses of mutton, weighing approximately 346,600 lbs., which had been killed at Gouda, C.P., for export to England and rejected as below grade, were sent to Cape Town for local consumption. They are included in the foregoing tables of meat inspected.

Food inspection by health inspectors:

The following foodstuffs were condemned as unfit for human consumption as the result of ordinary inspections by the health inspectors or the meat inspector, other than inspections of imported meat, during the year ended 30th June, 1940:—

Meat.		Weight	(lbs.)	Fruit and Vegetab	les.			Wei	ght (lbs.)
Meat			745			ght (lbs.)	Mixed fruit		267
Bacon			408	Apples		14,475	Nectarines		35
Ham			952	Avocado Pears		396	Oranges		6,725
Biltong	-		25	Bananas		775	Pawpaws		4,486
Sausage	casings		32	Cherries		1,320	Peaches		3,460
				Custard apples		330	Pears	144	11,185
Poultry an	d Game.			Dates		1	Pineapples		50
Turkeys			165	Egg fruit		400	Plums	4.4	3,808
Geese			76	Figs		10,059	Quinces		250
Ducks			177	Gooseberries	**	420	Walnuts		15
Fowls			5,223	Grapes		1,240	Artichokes	++	200
Rabbits			9	Grape fruit		15,015	Beans (green)	4.4	13,835
				Grenadillas		3,045	Butle leaves	4.0	2
Fish.				Guavas		730	Cabbages	++	1,882
Fish	100	100	225	Lemons		23,725	Carrots		120
Preserve	ed fish		4,751	Lietchies	4.6	20	Cauliflowers		2,100
Oysters			50	Melons		585	Cucumbers		360

B	ruit and Vegetable	s—c	ontd.	Other pro	visions.					Weigh	ht (lbs.)
			ight (lbs.)			Weight	(lbs.)	Meal			60
	Lettuces		160	Tinned	ham		925	Samp		100	35
	Marrows		250	Tinned	brawn		42	Lentils			10
	Mixed vegetable	8	257	Tinned	fish		1,054	Sago			3
	Onions		25,500	Cheese	-		1,377	Mazena			10
	Peas		7,979	Butter			113	Cake			12
	Potatoes		186,128	Milk (ee	ondensed)		965	Biscuits			17
	Potatoes (sweet)		280	Eggs			156	Tamarind			2
	Pumpkins		410	Jam			371	Tinned fru	it		10
	Radishes	-	50	Sweets			758	Pickles and	deli	cacies	77
	Squashes		3,625	Sugar			302	Other tinne	d foo	ds	4,718
	Tomatoes		2,785	Bread			55				
	Turnips		800	Rice			13				

CASES BEFORE THE MAGISTRATE.

The following table gives particulars of cases heard by the magistrates in the year ended 30th June, 1940, at the instance of the City Health Department. In most of the cases there were two or more separate counts: the counts are not enumerated in the table. In some cases more than one person was summonsed for the same offence; if any one accused was fined or reprimanded the case is recorded in the table accordingly, notwithstanding that the other accused may have been discharged:—

		Nu	mber	of cas	es.						
Nature of offence.	Total.	Fined.	Suspended sentence.	Repri- manded.	Summons withdrawn.	Dis- charged.	No of persons summonsed.	Total	fine	hes.	
Dwelling-house premises in insanitary condition (excluding the keeping of animals)	13(1)	8	1	2	1	1	14	£16	0	0	
Keeping animals illegally or so as to cause nuisance	5	2			1	2	5	4	0	0	
Insanitary conditions at food premises:		-				-				٠	
Butchers' shop premises	3 15(²)	10	=	=	=	5	3 23	19	0	0	
transport or delivery of foodstuffs: Meat Milk Other foodstuffs Selling foodstuffs in contravention of the Food, Drugs and Disinfectants Act:	4 30 18	3 28 17	Ξ	==	- 1	1 2 —	4 36 30	58 11	0 0 2	0 0 6	
Milk Ice cream Coffee Sausage, minced meat, etc.	45 9 2 11	40 9 1 10	==	1 1 -	2 - 1	_ _ _	50 9 2 11	118 29 5 24	10 0 0	0000	
Selling, etc., diseased, unsound or unwhole- some foodstuffs Trading as hawker without licence Dwelling-house premises used as a wash- house without being registered by the	1	1	=	=	-	Ξ	2 2	2	0 10	0	
Council	10 6 20	10 5 13	=	=		=	10 6 25	8 3 41	10 5 0	0 0 0	
Practising midwifery in contravention of Regulations under the Public Health Act Neglect of children (Children's Act)	4 2	2(1)	2 2	=	-	=	4 2	5	0	0	
Total	199	162	6	5	9	17	238	£352	17	6	

⁽¹⁾ Amongst these cases are one including a count for keeping general dealer's shop in insanitry condition, and one including a count for obstructing health inspector in performance of his duty.

⁽¹⁾ Amongst these cases is one including a count for keeping poultry on premises so as to cause nuisance.

^(*) One of these cases was sentenced to £10 fine or 6 weeks imprisonment, and served the term of imprisonment (fine not shown in last column).

PUBLIC SANITARY CONVENIENCES.

The following is a list of the public sanitary conveniences open at 30th June, 1940, together with the number of attendants employed :-

		1110			Atte	endants.
Chalet.					Male.	Female.
Bakoven					2	1
Camps Bay Beach					2	1
The Camp, Camps Bay					1	-
Castle Bridge					2	2
Castle Street					3	
Claremont					2	100
Claremont Park			0.0		1	1
De Waal Park					2	1
Dock Road					2	
Early Morning Market,		wrv	Road		2	1
Gardens					2	i
Green Point Common					1	_
0 1 0					2	2
Hanover Street		100			2	ĩ
Jurgens Park					2 2	
					2	1
Kalk Bay Keurboom Park					1	
Ladies' Rest Room, Pa	rade					2
McGregor Street					9	-
Maitland				• • •	9	0.000
					2	1
Muizenberg Beach					2	9
					9	ī
Museum, Cape Town Observatory, Station	Road	(on	ened	27th	~	1
4		(op		21011	9	1
Riebeek Square					2	1
Rochester Estate, Salt					2	i
St. Andrew's Square	Terrer				2	1
St. James Beach					ĩ	1
0 1 70 75 1			**		2	1
Sea Point			* * *		2	2
Sea Point Swimming P	Pool (Col	loure	4)		-	1
Searle Street					2	1
Three Anchor Bay					-	1
Trafalgar Park				***	9	1
Victoria Walk (opened 1			1010	**	ĩ	1
Woodstock		mary,	, 1340)			2
117 1			- : :		2 2	1
Wynberg	**				-	1
37 chalets					63	24
	attend	ante			11	34
	shift at				1	5
Night	-amin at	centa	11108		1	1
					75	40
					10	40

In general the conveniences shown as being staffed by one attendant are open from 8 a.m. to 6 p.m., and those with two from 7 a.m. to 11 p.m. The Castle Street convenience is open twenty-four hours a day, and those at the Early Morning and Salt River Markets are open all night on certain days of the week. The two night-shift attendants mentioned above staff the two market chalets at night.

In August, 1939, a six-day week was instituted for the chalet attendants, and at the end of the year under report there were 16 additional relief attendants (as shown above) appointed to make this possible.

MUNICIPAL WASHHOUSES.

There are eight municipal washhouses, at each of which there is a caretaker in charge, and one assistant (except that at Hanover Street and Hout Street there are two assistants and at Kalk Bay no assistant). With the exception of Hanover Street they are supplied with cold water only and the drying and bleaching are done in the open air.

All except Kalk Bay are equipped with electric irons. At the Hanover Street wash-house the washing troughs are supplied with steam, and "hydro-extractors," drying

chambers, ironing machines and electric irons are provided.

Extensions to the Claremont washhouse were completed by 18th September, 1939. They included the enlargement of the washing room, bringing the number of tubs from 50 to 68, the provision of an ironing room with 68 places provided with electric irons, and the addition of storage facilities for laundry goods and a mess room for the washerwomen.

At the Hout Street washhouse there is also an installation of baths and showers.

The charges made for washing are as follows:—At Platteklip, Mowbray and Claremont, 3d. per day; at Hout Street, Wynberg and Salt River, 4d. per day; at Kalk Bay 6d. per day. The charge for ironing (including use of electric iron) is 1d. per hour. At Hanover Street the charges are 3d. for two hours and 3d. for each additional hour up to a maximum of 1s. 6d. per day (including ironing facilities).

The charges for the use of the baths at Hout Street are as follows:—Hot water baths, adults 3d., children 2d.; cold water baths 1d.

The attendances and takings at the washhouses (including ironing rooms) during the year ended 30th June, 1940, were as follows:—

			A	ttendances.	Money £	ta 8.	ken.
Hanover Street	 		 	16,998	568	16	9
Platteklip	 	 	 	9,221	128	14	0
Mowbray	 		 	9,054	138	19	0
Claremont	 	 	 	15,905	150	6	9
Kalk Bay	 		 	3,005	75	2	6
Hout Street	 	 	 	9,393	186	4	4
Wynberg	 	 	 	8,272	184	16	10
Salt River	 	 	 	4,472	70	4	8
				76,320	£1,503	4	10
							_

The attendances and takings at the Hout Street slipper baths during the year ended 30th June, 1940, were as follows:—

			Hot	baths.	Cold baths.		
			Atten- dances.	Money taken.	Atten- dances.	Money taken.	
				£ s. d.		£ s. d.	
Adults		 44.0	 13,390	167 7 6	145	12 1	
Children		 	 558	4 13 0	56	4 8	
	Total	 	 13,948	172 0 6	201	16 9	

FREE BURIALS.

The Public Health Act places upon the City Council the responsibility for the removal and burial of the body of any destitute person, or any dead body which is unclaimed or of which no responsible person undertakes the burial. The cost falls upon the City Council, although it may be legally recovered from any responsible person who is able to pay. Practically all such burials undertaken by the Council are of the bodies of persons whose relations are unable to pay, and very little is recovered. Each year a contract is given out to an undertaker to carry out this work for the Council. In the year ended 30th June, 1940, the number of such burials was 338.

DRAINAGE, SEWERAGE AND SCAVENGING.

STORMWATER DRAINAGE.

A great part of the Municipality, being built on the slopes at the foot of the mountain, is well placed for drainage, but on parts of the Flats the natural drainage is bad and in the wet season the ground water level over a considerable area is very near the surface. In some portions there is standing water during much of the winter, but this is being gradually overcome by the extension of the drainage system.

The town is sewered on the "separate" system, stormwater being taken by separate channels to the nearest natural outfall, whether the sea, or the Liesbeek and Black Rivers and their tributaries, which drain the "southern suburbs" north of Kenilworth and flow into Table Bay as the Salt River. South of Kenilworth the streams discharge into a series of vieis.

SEWERAGE.

Except a few outlying areas the whole of the built-up part of the Municipality is

provided with waterborne sewerage.

The sewage from the area of the old municipalities of Cape Town and Green and Sea Point (Wards 1-7) is discharged into the sea near Green Point lighthouse by means of a submerged steel outfall at a depth of 55 ft. below sea level approximately 2,000 ft. from the shore.

The sewage from wards 8-13 (Woodstock, Salt River, Maitland, Mowbray, Rondebosch and Claremont) is treated at the disposal works and sewage farm at Athlone, from which the effluent passes into the Black River.

From the Wynberg area (Ward 15) the sewage is treated by broad irrigation near

Zeekoe Vlei.

The sewage from the Kalk Bay—Muizenberg area (Ward 14) is discharged on the sand dunes on the False Bay shore about two miles from Muizenberg.

In the Camps Bay area, including Clifton and Glen Beach, the sewage passes into treatment tanks from which the effluent is discharged to the sea by a short submerged

outfall.

Sewerage extensions are well in hand at Athlone, Plumstead, Diep River and Muizenberg North (Lakeside). Surveys and plans for the sewerage of Kensington, Rugby and Heatherton are completed, and surveys are in progress for the drainage of the Lansdowne—Crawford area.

PAIL CLOSETS.

The City Engineer's Department undertakes the weekly collection of stercus in the outlying unsewered areas. In parts of the Cape Flats this work is carried out with great difficulty owing to the lack of roads. The men and wagons have to plough through heavy sand and bush, and, in winter, through water, to reach isolated places for the purposes of collecting. In these circumstances the work is carried out in the day time. Elsewhere it is done at night. A charge of 7s. 6d. is made for the first installation of a pail but no charge for removals and renewals. Extra removals are given on special payment of sixpence per removal.

The stercus collected in the various districts is buried in trenches on municipal land at Vyge Kraal, the old sewerage farm at Wynberg Flats, or Prince George Drive, Retreat, or passed into the sewers at depositing depôts at Maitland and Kenilworth.

The number of premises from which stereus was being removed at 30th June, 1940, is shown by the following figures:—

Woodstock and Salt River	. 21
Maitland and Brooklyn	
Kensington	. 728
Added areas, Mowbray to Claremont	. 3,908
Claremont	. 49
Wynberg	. 1,213
Muizenberg and Retreat	. 607
	6,833

At Plumstead, Diep River, Muizenberg, Clovelly and Kalk Bay, the O'Brien dry earth closet is in use, the service, including removals, being undertaken by a private firm as contractors to the Corporation. Householders are required to provide the closets, and the removals are paid for by the Corporation. Ordinary pail closets are not allowed in these districts. There are 315 premises provided with this service.

Slop-water removal services are undertaken by the Corporation at Plumstead, Diep

River, Lakeside and Kalk Bay.

HOUSE REFUSE REMOVALS.

The removal of house refuse is carried out by the Cleansing Branch of the City Engineer's Department as follows:—

In Cape Town proper, every weekday, and on Sundays also in certain congested parts and on payment at certain other premises.

In Green and Sea Point, every weekday between the Main Road and the sea; and on Sundays at certain business premises on payment. Above the Main Road four times a week, but hotels and boarding houses every weekday.

Woodstock and Salt River, from Cape Town to Station Road, Observatory, four

times a week, but certain business premises every weekday.

The southern suburbs from Mowbray to Heathfield and the Maitland ward, three times a week, and certain business premises every weekday.

Muizenberg—Kalk Bay, four times a week, but hotels, boarding houses and certain business premises every weekday, and certain hotels on Sunday during the summer season on special payment.

Clifton, Camps Bay and Lakeside, three times a week.

Added areas on the Cape Flats, twice a week.

During the year 1940, the quantity of refuse removed averaged 7,024 cubic yards per week.

The house refuse is disposed of by controlled tipping.

HOUSING.

Fundamentally the housing conditions in Cape Town are similar to those of western European towns. The bulk of the City consists of houses built of brick or stone, served by water-carriage sewerage and a municipal water supply. The streets and back-lanes are well constructed. It is only in certain of the outlying estates on the Cape Flats that wood-and-iron houses are found and such services are not provided. Owing to poverty and the housing shortage there are a few thousand non-Europeans living in unauthorized insanitary shacks in the outskirts of the municipality, often hidden in the bush.

But though the bulk of the population lives in houses that were well constructed and are normally serviced, there is gross overcrowding in many of these as a result of poverty

and the shortage of houses.

Reference has frequently been made to the overcrowded and insanitary conditions under which much of the coloured population and certain of the poorest of the Europeans are living. Houses that afford reasonable accommodation for one family only are sublet to several families, and in many cases whole families are living in single rooms. In a survey (1931) of an area in central Cape Town inhabited by a population of 45,855, of whom 91 per cent. were non-Europeans, more than one-half of the population were found to live in single-room lettings (see Annual Report for 1932): and in an area in Woodstock and Salt River (1933), inhabited by a population of 21,952, of whom 64 per cent. were non-Europeans, the proportion living in single-room lettings was about one-third. Reference may be made to the report on coloured housing in Cape Town made by Mr. C. W. Cousins, Director of Census, based on the data obtained in the 1921 census (see Annual Report of the Medical Officer of Health for 1923-24). Subletting and over-crowding, the direct result of the housing shortage, are the main cause of slum conditions in Cape Town.

The number of new dwelling houses built in the Municipality (abstracted from the City Engineer's returns) as compared with the growth of population is shown in the follow-

ing table :-

Year.		Estimated increase in population.	Buildings for human habi- tation com- pleted (dwellings).	Year.	Estimated increase in population.	Buildings for human habi- tation com- pleted (dwellings).	
1915			3,980	123	1929	 5,570	1,773
1916			4,110	103	1930	 5,700	1,320
1917			4,240	99	1931	 5,640	1,564
1918			4,380	69	1932	 6,000	1,102
1919			4,500	91	1933	 6,150	1,068
1920			4,680	139	1934	 6,270	1,711
1921			5,340	210	1935	 6,430	1,937
1922			4,950	308	1936	 6,570	1,320
1923			5,080	425	1937	 6,730	1,272
1924			5,220	561	1938	 6,870	1,033
1925			5,380	335	1939	 7,040	1,431
1926			5,320	444	1940	 7,190	1,970
1927			5,070	675			
1928			5,450	846	Total	 143,860	21,929

The building reflected in the table set out above, with the exception of the non-European housing operations of the City Council, has had very little effect in relieving the shortage of non-European houses. The houses built have been in the main for the better-off classes of the community. It is because private enterprise is not meeting the housing needs of the poor that the obligation to undertake housing schemes has fallen upon the City Council.

During the year ended 30th June, 1940, under the sub-economic scheme, the City Council completed 258 flats for non-Europeans in the Bloemhof rehousing estate (Ward 6) at a cost of £129,000, and 258 cottages for non-Europeans at Alicedale, Athlone, at a cost

of £137,452. In the same year the Citizens' Housing League Utility Company built 244 houses for Europeans in the Epping Garden Village (outside the Cape Town municipal area), under the economic scheme, at a cost of £73,200.

This brings the figures from 1920 to 30th June, 1940, for public housing operations in Cape Town and suburbs to 4,210 houses and flats, as follows:—

	European.	Non-E	luropean.	
	Economic. 1	Economic.	Sub-economic.	Total.
Within Cape Town municipal area: City Council	990 602	930 26	1,316	3,236 628
	1,592	956	1,316	3,864
Outside Cape Town municipal area: C.H.L. Utility Co	566	_		566
	2,158	956	1,316	4,430

Since the end of the year 1939-40 building by the City Council has continued at Bloemhof and at Athlone, and started at Schotsche Kloof (Ward 3) and Kalk Bay.

No houses were reported under the Slums Act in 1939-40.

SECTION VIII.—HOSPITALS AND MEDICAL SERVICES.

The hospital services of Cape Town and the Cape Division are provided by several different agencies, as follows:—

The Cape Hospital Board, financed chiefly by the Provincial Administration and the local authorities (mainly the Cape Divisional Council and the Cape Town City Council), maintains the general hospitals, certain special hospitals, convalescent homes, the Cape Town Free Dispensary, and the district nursing service.

The Union Government (Department of the Interior) maintains the mental hospital and the institution for mental defectives. These serve a wider area than Cape Town and the Cape Division.

The Provincial Administration maintains the chronic sick hospital, which also serves a wider area than Cape Town and the Cape Division.

The City Council maintains the City Hospitals for Infectious Diseases, including tuberculosis and venereal diseases; the native hospital at Langa; the centres and clinics for tuberculosis, venereal diseases and maternal and child welfare; a domiciliary medical service; and the health visitor service. The Council's expenditure on infectious disease institutions and services are subsidized by the Union Government (Department of Public Health) and the Provincial Administration, which also bear part of the cost of treatment of tuberculosis patients sent by the City Council to Nelspoort Sanatorium, an institution of the Union Health Department. The Union Health Department provides certain accommodation in Cape Town for cases and contacts of formidable epidemic diseases.

Certain smaller hospitals are maintained by voluntary organizations, some of which receive financial assistance from the Government and local authorities.

The following table shows the number of beds that are available in the hospitals and convalescent homes in and near Cape Town.

Hospitals and Convalescent Homes of the Cape	Hospita	al Boar	d		1,296
Valkenberg Mental Hospital				* *	1,886
Alexandra Institution (for mental defectives)					729
Conradie Home (hospital for the chronic sick)		4.4			714
City Hospitals for Infectious Diseases					613*
Langa Native Hospital					24
Hospitals and Homes provided by voluntary org	ganizati	ons			314
Private nursing homes					464

Including bads in wards provided by the Union Health Department for cases and contacts
of formidable epidemic diseases.

CAPE HOSPITAL BOARD.

The Cape Hospital Board serves the areas of the Cape Town Municipality and of the Cape Divisional Council with the urban areas included therein. It is composed of twenty-two members, of whom five are appointed by the Administrator, three by the honorary medical staff, seven by the local authorities (including three Cape Town City Council representatives), six by the registered contributors, and one by the University of Cape Town. The Board obtains its funds from voluntary sources, the Provincial Government, and the local authorities concerned. In the year ended 31st December, 1939, the expenditure of the Board amounted to £280,895, of which £157,578 was contributed by the Provincial Administration, and £80,088 by local authorities, viz., £41,281 by the Cape Divisional Council, £38,000 by the City Council, £242 by the Simon's Town Municipality, £85 by the Durbanville Municipality and £480 by the Goodwood Municipality. In addition, the City Council contributed £1,725 towards the maintenance of an ambulance service for the removal of street accident cases, etc.

The patients treated by the hospitals and other services controlled by the Cape Hospital Board are drawn from districts without as well as within the City of Cape Town. The extent of the work is very briefly shown in the following statistical tables extracted

rom the annual report of the Board for the year 1939-40 :-

Comparative Table of Beds available and In-Patients treated (Calendar Year 1939).

						Pat	lents.							Fi V	Pe	roentage	٥.
Institution.	Nomi- nal Roll of Beds.	Rem ing hosp at 3 Dec.,	in dtal	Admi dur 190	ing	Total treats		Disch dur 193	ing	Di- dur 190	ing	Rem ing hos at : Dec.,	in pital	Total.	Free.	Part-paying.	Paying not less than 7/6 per day.
		E.	C.	E	C.	E.	C.	E.	C.	E.	C.	E.	C.		1		day.
Groote Schuur Hospi- tal, P.P. Block	77	16	-	492	-	508	-	465	-	28	-	15	-	508	-	-	100-00
Groote Schuur Hospi- tal, Main Block Somerset Hospital Woodstock Hospital	628 72 64	256 31	272 27	5,685 989	5,172 652 631	5,941	5,444 652 658	5,400 941	4,820 539 580	301 45	370 57 53	240 34	254 56 25	11,385 652 1,678	77-10 84-66 40-52	14·11 1·54 12·87	8-79 13-80 46-61
Mowbray and Ronde- bosch Hospital	54	20	12	623	328	643	340	591	311	29	11	23	18	983	37-13	23 - 70	39-17
Wynberg (Victoria) Hospital False Bay Hospital	105 28	32 15	52 15	942 351	1,243 377	974 366	1,295 392	895 334	1,133	46 14	105 24	33 18	57 8	2,269 758	65·09 59·10	11.77 16.89	23-14 24-01
Peninsula Maternity Hospital Lady Michaelis Ortho-	40	13	26	463	1,112	476	1,138	462	1,100	3	13	11	25	1,614	1.12	95-66	3-22
paedic Home	40	21	19	57	61	78	80	62	56	-	1	16	23	158	68-99	27-85	3-16
Totals	1,108	404	423	9,602	9,576	10,006	9,999	9,150	8,899	466	634	390	466	20,005	62-11	20-24	17-65
Eaton Convalescent Home McGregor Convalescent	80	17	57	471	962	488	1,019	473	957	2	-	13	62	1,507	81-62	18-31	0.07
Home Princess Alice Home of	36	45	-	404	-	449	-	408	-	-	-	41	-	449	57-24	42-76	-
Recovery	72	36	44	20	30	56	74	26	29	-	-	30	45	130	86-92	13-08	-
Totals	188	98	101	895	992	993	1,093	907	986	2	-	84	107	2,086	76-70	23 - 25	0.05

E.-Signifies Europeans.

C .- Signifies Coloured.

Table of Daily Units, Daily Average of Patients and Daily Average Cost of Patients (Calendar Year 1939).

A service of the service of the	Total	number o	f Daily un	its.	Daily a		Average daily		
Institution.	In-pa	tients.		Out-patients (attendances).		ber tients.	cost per in-patient.		
	1939.	1938.	1939.	1938.	1939.	1938.	1939.	1938.	
Groote Schuur Hospital, P. P. Block Groote Schuur Hospital, Main	5,825	2,427	-	-	15-96	12:90	15/1-66	16/4-7	
Block 3. Somerset Hospital	205,556 13,234 23,799	175,942 10,059 23,646	102,651 805 15,016	77,979 4,926 15,068	563-17 36-26 65-20	482-03 295-85 64-78	14/8·24 10/8·49		
5. Mowbray and Rondebesch Hos- pital 6. Wynberg (Victoria) Hospital 7. False Bay Hospital 8. Peninsula Maternity Hospital	17,573 35,899 10,379 14,188	17,101 36,387 9,718 14,421	1,753 11,465 3,397 19,248	1,704 10,537 2,496 17,382	48-14 98-35 28-44 38-87	46 · 85 99 · 69 26 · 62 39 · 50	11/0·85 10/3·29 8/0·76	9/9.0	
9. Lady Michaelis Orthopaedie Home 0. Eaton Convalescent Home	14,200 28,425	14,739 24,446		17,002	38 · 91 77 · 88	40-38 66-98	5/1·43 3/2·46	5/2·0 3/7·2	
1. McGregor Convalescent Home 12. Princess Alice Home of Re-	12,145	11,417 27,216	_		33 · 27 73 · 28	31-28 74-56	3/9-07	3/6-4	
3. Cape Town Free Dispensary. 4. C.H.B. District Nursing Organization	20,140		60,204 104,982	65,737 103,273	-	14.00	4/3:00	0/0:0	

The work of the District Nursing Organization is of great importance in the local health scheme. On 31st December, 1939, there were 26 district nurses and a superintendent engaged in it. Nineteen of the district nurses work in the area of the Cape Town Municipality.

A subsidized midwifery service providing qualified maternity services in the sparsely inhabited areas comprised in the Cape Hospital districts is also maintained by the Board. The work is in charge of a supervisor and 9 midwives were employed in this work at the 31st December, 1939. This service is mainly outside the municipal area.

MENTAL HOSPITALS.

The Valkenberg Mental Hospital receives mentally disordered patients, as well as non-European mentally defective. The accommodation is for 899 Europeans and 987 non-Europeans (Coloured).

The Alexandra Institution receives European mental defectives. The accommodation

is for 729.

Both institutions serve a large area outside of Cape Town.

CHRONIC SICK HOSPITAL.

The chronic sick hospital for Cape Town and the western part of the Cape Province is maintained by the Provincial Administration. It is known as the Conradie Home and is situated at Pinelands, outside the Cape Town municipal area. It comprises 714 beds, and is reserved for the indigent chronic sick of all races. The able-bodied aged are not admitted. At 30th June, 1940, the patients numbered 518 (Europeans: males 137, females 86; non-Europeans: males 158, females 137).

HOSPITAL SERVICES OF CITY HEALTH DEPARTMENT.

These are detailed in this report at pages 37 to 47.

DOMICILIARY MEDICAL SERVICE.

The City Council provides medical attention in their own homes for indigent sick persons needing such service. The work is carried out by a full-time medical officer appointed in the City Health Department. The appointment is for a period of six months and is intended for junior practitioners who have completed house appointments in the general hospitals. Arrangements for the supply of medicines, etc., are made with the Cape Town Free Dispensary and the Woodstock Hospital, and with local chemists. This work is carried out in co-operation with the District Nursing Organization.

The visits made by the medical officer during the year ended 30th June, 1940, were

as follows :-

Ward	1		 19	Ward	10	 16
,,	2		 53	,,	11	 79
,,	3		 60	**	12	 276
**	4		 111	,,	13	 90
"	5		 43	,,,	14	 96
,,,	6		 364	,,	15	 119
,,	7		 206			
,,	8		 130	Total		 1,815
33	9		 153			-

In the previous year the number of visits was 2,100.

Under the City of Cape Town Additional Poor Relief Ordinance, No. 5 of 1932, the Provincial Administration has hitherto paid the Council part-refund of one-half of the cost of this service.

Pursuant to Section 16 of the Finance Act, No. 27 of 1940, the Union Health Department took over the responsibility for this part-refund, with effect from 1st April, 1940. The corresponding part-refund of expenditure on surgical appliances and fares to hospital for indigent persons is from the same date made by the Union Department of Social Welfare.

HOSPITALS AND HOMES MAINTAINED BY VOLUNTARY ORGANIZATIONS.

Maitland Cottage Homes.

An institution of the Invalid Children's Aid Committee of the Cape Town Society for the Protection of Child Life. Non-European orthopaedic cases (children), chiefly tuberculous. Five pairs of semi-detached cottages adapted for 110 patients. Cases dealt with in the year 1939-40:—

In residence	at	beginni	ng of	year	 	86
Admitted					 	32
Discharged					 	12
Died					 	-
In residence	at	end of	vear		 	106

The accommodation was increased from 88 to 110 during the year under report. Government grants under the Children's Act are available for some of the inmates.

The Invalid Children's Aid also employs two full-time lady officials, who co-ordinate the local orthopaedic work, and are assisted by voluntary workers. They work in conjunction with the orthopaedic clinic (out-patient department) of the Groote Schuur Hospital, and the in-patient facilities at the Princess Alice Home, the Lady Michaelis Home, the Maitland Cottage Homes and St. Joseph's Home. In 1940 these officials between them made 1,486 home visits and attended 47 clinic sessions.

St. Joseph's Home for Chronic Invalid Children, Philippi.

Maintained by the Pallottini Sisters (R.C.). Built in 1937 and accommodates 60 children, mostly tuberculous cripples. Cases dealt with in the year 1939-40:—

In residence	at	beginn	ing of	year	 	58
Admitted					 	25
Discharged					 	10
Died					 	3
In residence	at	end of	vear		 	70

An extension of this institution is at present under construction. In the meantime the old accommodation, which the present buildings had replaced, has been brought into use again.

Government grants under the Children's Act are available for some of the inmates. The home is administered in close co-operation with the Invalid Children's Aid.

Sunshine Home for Children, Bellville.

A holiday home of the Christmas Stamp Fund, for European children in a depressed state of health, especially tuberculosis contacts. 30 beds. Close co-operation with City Health Department. In the year 1939-40 81 children admitted: average period of residence, 97 days. New buildings to accommodate 60 children are under construction.

Duinendal Tuberculosis Settlement.

A settlement on the Cape Flats for European male cases of tuberculosis (gift of Capt. W. D. Hare, M.P.) maintained by the Cape Town Care Committee for Tuberculosis Patients. Twenty beds. Close co-operation with the City Health Department. City Council makes a contribution of 2s. 6d. a day for municipal cases. Cases dealt with:—

					t March, 1940.	1st April, 1940, to 31st December, 1940.
Admitted				 	 29	20
Discharged				 	 22	23
In residence at	end	of peri	od	 	 16	13

South African Mothercraft Training Centre, Bowwood Road, Claremont.

This institut on of the Society for the Protection of Child Life has wards (15 cots) for European infants suffering from dietetic disorders and also (4 beds) for nursing mothers need ng in-patient treatment as such. During the year 1939-40 105 of the 182 infants admitted were Cape Town residents (average stay 17.7 days), and 65 of the 92 nursing mothers admitted were Cape Town residents (average stay 11.8 days). Of the total of 274 patients, 173 paid full fees, 60 paid reduced fees, and 41 were non-paying patients.

The centre is a training school for mothercraft (Athlone) and nursery (Good Hope) nurses. During the year 24 registered nurses and midwives took the former certificate, and 8 young women, not trained nurses, the latter. (See also page 22.)

St. Monica's Maternity Home, 182, Bree Street, Cape Town.

Under the auspices of the Diocesan Board of Missions (E.C.). Provides maternity services for non-Europeans, both intern and extern. Midwifery training school for non-Europeans. Normal accommodation for 22 patients, including a small pre-maternity ward for patients needing observation and treatment. Cases of this nature are referred from the municipal pre-natal clinics, the City Council making a grant of £250 per annum for this service.

During 1940 547 cases were attended, 368 in-patients and 179 out-patients.

Sixteen pupil-midwives entered for training, and 15 passed the examination of the South African Medical Council.

Pre-natal clinics and an infant-welfare clinic are held for patients of the institution.

Booth Memorial Hospital and Vrede Oord (Salvation Army).

The Booth Memorial Hospital at Upper Orange Street, Cape Town, provides 31 beds, chiefly for maternity cases, but taking also a few gynaecological and child cases. Four beds are reserved for free cases from rescue homes (The Rest and the Mary Rolt), and the remainder are for paying cases.

At Vrede Oord, which is also a rescue home (see page 87) there are wards for non-European maternity cases containing 13 beds. A few paying cases are received but most

of the mothers are from the rescue home.

These hospitals are a training school for midwives (European). The students undertake extern midwifery, and while on this work live at Vrede Oord.

The particulars for the year 1939-40 are as follows :-

Booth Memorial (pean):		 	 492
Other cases				 	 62
(Paying cases	523,	rest fre	ee)	 	 554
Vrede Oord (with Intern mater Maternity cas	nity c	ases (p	aying		132 386
					 518

During the year under report weekly pre-natal clinic sessions were instituted both at the Booth (for Europeans) and Vrede Oord (non-Europeans). At the latter expectant mothers are treated for syphilis.

Magdalena Huis.

At this rescue home (see page 88) there is a maternity ward of 3 beds. During the year 1939-40 35 births were reported.

SECTION IX.—SOCIAL SERVICES.

Social welfare in Cape Town is administered by many different agencies, including the Union Government, the Provincial Administration, the local authorities, statutory boards, and voluntary associations. The last-mentioned are subsidized in varying degrees by the Union Government, Provincial Administration and local authorities.

OLD AGE PENSIONS.

Old age pensions are payable to persons over the age of 65 (males) and 60 (females), subject to a means test, up to a maximum (in Cape Town) of £3 10s. 0d. a month for Europeans and £1 15s. 0d. for Cape Coloured. Natives and Indians are not eligible. The Union Government operates the scheme through the Treasury. Exact figures concerning old age pensions in Cape Town are not obtainable: on a rough estimate, the number of pensioners in the registered areas of Cape Town and Wynberg is 12,000, and the annual disbursements to them £300,000.

PENSIONS FOR BLIND PERSONS.

Under the Blind Persons' Act, 1936, pensions are payable to blind persons over the age of 19, subject to a means test, up to a maximum of £3 a month for Europeans and £2 for Cape Coloured. Natives and Indians are not eligible. On a rough estimate, the number of pensioners in the two magisterial areas is 375, and the annual disbursements £10,000.

UNION DEPARTMENT OF SOCIAL WELFARE.

The Department of Social Welfare has kindly supplied the following information about its work in Cape Town:

(a) Under the Children's Act, 1937, grants for committed children living in private families (including foster children) amounting to £29,000 per annum are paid to 246

European families and 673 non-European families.

(b) Under the Invalidity Scheme 329 European persons are receiving pensions amounting to £9,195 p.a. Such grants are, subject to a means test, payable to persons over 16 years old who are physically and permanently unfit to engage in any occupation, up to a maximum of £2 10s. 0d. a month. Non-Europeans are not eligible.

(The information under (a) and (b) embraces the Cape Town, Wynberg, Simonstown,

Bellville and Durbanville areas.)

(c) The following certified hostels, certified and non-certified institutions, and crèches are being subsidized by the Department :-

	No.	Total inmates.	Government contributions.
Europeans.			
Certified hostels	3	35	£118 per month.
Hostel for low wage earners		Average 32	£216 for year ended 30th June, 1940.
Certified institutions	7	334	£494 per month.
Non-certified institutions		22	£37 per month.
Crèches		Average 26·6	£114 for year ended 30th June, 1940.
Non-Europeans. Certified hostels	1	62	£177 per month.
Certified institutions		243	
			£256 per month.
Non-certified institutions	1	3	£3 7s. 6d. per month.
Non-certified institutions at			
special rates	2	99	£140 per month.
Crèches	2	Average 24.6	£207 for year ended 30th June, 1940.

- (d) Subsidies are paid by the Department in respect of the following:-
 - (1) Salaries of social workers in the employ of private welfare organizations on a 75 per cent. basis. Ten such social workers are subsidized in Cape Town, and from 1st July, 1939 to 30th June, 1940, an amount of £1,181 0s. 1d. was paid by the Department in respect of these workers.
 - (2) Grants-in-aid were paid in respect of the undermentioned institutions :—

Suid-Afrikaanse Weeshuis £36 per annum. .. S.A. National Council for the Blind . . £200 per annum. Marion Institute for Coloured people

£182 19s. 0d.

(Building grant) Cape Town Civilian Blind Society ... £4,536 for year ended 30/6/1940.

(e) The Department conducts a probation service in Cape Town, consisting of nine officers. Their duties are: (1) to assist the courts in regard to juvenile delinquents and "children in need of care" (i.e., non-delinquents): (2) to exercise supervision over children released from statutory institutions or placed by the courts under the supervision of the probation officer; and (3) generally to supervise and guide the work of private child and other social welfare agencies.

SUBSIDIES BY PROVINCIAL ADMINISTRATION.

In addition to subsidies under the Poor Relief and Charitable Institutions Ordinance No. 4 of 1919, as amended, the Provincial Administration paid the following subsidies for the year 1939 to Social Welfare institutions:—

			£
Cape Town and Suburban Ladies' Benevolent Societ	у	 	600
Salvation Army, for rescue and other work		 	300
Duinendal Settlement for Tuberculosis Patients		 	200
Nazareth House		 	200
Princess Christian Home, Mowbray		 	200
St. John Ambulance Association		 	200
Home for Aged Nurses, Claremont		 	150
Magdalena Huis, Claremont		 	150
St. Joseph's Home, Phillippi		 	150
Stakesby Lewis Hostel for Coloured People		 	125
South African Women's Industrial Union		 	120
Deaf and Dumb Committee, Cape Town		 	100
Sunshine Home for Children, Bellville		 	100
Y.W.C.A. "Rest Home," Muizenberg		 	100
Cape Town Diocesan Home for Friendless Girls		 	100
Institution for the Training of Coloured Social Worke	rs	 	75
Service Dining Rooms		 	75
Mothers' Clinic, Observatory		 	25

£2,970

SUBSIDIES BY CITY COUNCIL.

For the year 1939 the City Council paid subsidies to social-welfare organizations as follows :-

Under the Poor Relief and Charitable Institutions Ordinance No. 4 of 1919, as amended:

					£
Cape Town General Board of Aid				 	 14,627
Society for Protection of Child Life				 	 2,986*
All Saints' Home				 	 603
Civilian Blind Society, Cape Town				 	 756
St. Monica's Home				 	 550
St. John's Hostel				 	 496
Holy Cross Orphanage, Parow				 	 321
House of Mercy, Leliebloem				 	 354
Afrikaanse Christelike Vrouens Verei	niging			 	 165
St. Francis' Home				 	 86
Athlone School for the Blind				 	 89
Noodlenigings Vereniging v. d. Groo	te Kerk	, Kaa	pstad	 	 98

£21,131

*Subject to adjustment.

Note.—Equal subsidies have hitherto been payable by the Provincial Administration to the agencies set out in the above list. Under sec. 16 of the Finance Act, No. 27 of 1940, this responsibility was transferred from the Provincial Administration to the Union Department of Social Welfare as from 1st April, 1940.

r the Cape Municipal Ordinance No. 10 of	1912:					£
Salvation Army						1,000
Ladies' Benevolent Society						400
Nazareth House						275
Cape Town Diocesan Home for Friendle	ss Girls					250
Liberman Bequest Social Club						250
St. John Ambulance Association						250
Ladies' Christian Home						200
St. Joseph's Home, Philippi						200
Young Men's Christian Association			1 337	0.00		200
Young Women's Christian Association						200
Young Women's Christian Association (Coloured					125
Stakesby Lewis Hostel			.,			175
St. Mary's Dominican Convent						150
Coloured Social Workers' Training Cent						150
Marion Institute for Coloured Girls						128
A.C.V.V. Day Nursery						100
Cape Province Society for Mental Hygie						100
Cape Town Lads' Hostel						100
Louis Botha Hostel				**		100
Magdalena Huis Rescue Home						100
M. D. L. TI		**				100
Mothers' Clinic						100
TT I O I						100
						78
St. George's Orphanages						71
Service Dining Rooms		200	***			50
Cape Town Council for Combating V.D.						50
Die Nannie Huis			**		**	50
S.A. National Council for Child Welfare		**				
Sunshine Home for Children	**					50
Princess Christian Home						30
Social Service Association of S.A					**	25
Sailors' Home		* *		**		15
Cape Jewish Aged Home				10.00		14

PREVENTION AND RELIEF OF DISTRESS.

Reference has been made above to the payment by the Union Government of old age pensions, pensions for the blind, pensions under the invalidity scheme, and grants for committed children.

There is no national scheme of compulsory insurance against sickness or unemployment.

Committed Children.

The following information for the year ended 30th June, 1940, has been supplied by the General Secretary of the Cape Town Society for the Protection of Child Life.

Government grants in respect of children in Cape Town and district committed under the Children's Act, 1937, are given at the discretion of the Commissioners of Child Welfare (i.e., the Magistrates) in consultation with the Society.

In 1939 a revision in the rates of these grants, hitherto not exceeding £2 10s. 0d. a month for European children and £1 5s. 0d. for non-European, was made by the Department of Social Welfare, according to which the amount granted depends on whether families live in cities, towns or rural areas, as defined by the Department. The new maximum monthly grants payable are as follows:—

For children living with parents or near relatives.

	Euro	peans.	Non-Europeans (other than Natives).			
	One child	Two or more	One child	Two or more		
	subsidized.	children, each.	subsidized.	children, each		
Cities	£2 10 0	£1 17 6	17s. 0d.	12s. 6d		
Towns	£2 5 0	£1 15 0	15s. 0d.	12s. 6d		
Rural areas	£2 0 0	£1 10 0	12s. 6d.	10s. 0d		

For children placed with foster parents:

		Europeans, per child			Non-Europeans, per chile			
Cities		 	£2	10	0	£1	5	0
Towns		 	£2	5	0	£1	2	6
Rural areas		 	£2	0	0	£1	0	0

Not more than three foster children will be allowed in one family, and the total number of children (including foster children) must not exceed six.

Native cases are dealt with by the Department of Native Affairs, who make any necessary application for grants to the Department of Social Welfare.

In the magisterial areas of Cape Town, Wynberg, Simon's Town, and Bellville, these grants (except for children committed to institutions) are administered by the Society, and during the year under report the money paid out by the Society amounted to £27,234 14s. 3d. Maintenance orders for 681 children were granted, 3,014 renewed, 497 cancelled and 70 refused, the total number of committed children under the care of the Society during the year being 3,249 (938 European and 2,311 non-European). The maintenance money is administered partly as mothers' pensions, for mothers of children whose fathers have died or are unable to support them, so that the home can be kept together by the natural guardian of the child; and partly as grants for children placed with foster mothers.

Non-Support.

The Non-Support officers at the Magistrate's Court administer money paid by fathers who are ordered by the Court to make regular payment in support of their children. The fathers are required to make their payments to those officers instead of to the mothers personally. During the year ended 30th June, 1940, £25,459 6s. 5d. was received from the fathers by the office of the Cape Town Magistrate, and an amount of £197 5s. 0d. was received by the Simon's Town Magistrate in respect of the part of his magisterial area that falls within the Cape Town Municipality. The Wynberg Magistrate received approximately £6,043 6s. 8d. in respect of the whole of his area, which is not entirely within the Cape Town Municipality.

Relief Works.

During the period under review an average of 277 men have been employed on relief works maintained by the City Council. The total expenditure of the Council under this heading in the year 1940 was £23,864 2s. 3d., of which £22,228 9s. 3d. was paid in wages. The Government repaid to the Council £9,455 9s. 6d. in the form of subsidy.

BOARD OF AID.

Poor relief in the City of Cape Town is administered by the Cape Town General Board of Aid instituted under the Poor Relief and Charitable Institutions Ordinances of 1919 and 1924. The Board consists of nine members, including the Mayor of Cape Town and three members of the City Council; together with co-opted members.

Its funds are provided by the Provincial Administration and the City Council, supplemented to a small extent by voluntary donations. Under Section 16 of the Finance Act No. 27 of 1940 the responsibility of the Provincial Administration in this matter was transferred to the Union Department of Social Welfare as from 1st April, 1940.

The Secretary of the Board of Aid has kindly supplied the following statistics for the calendar years 1939 and 1940:—

		1939.		1940.			
		£ s.	d.		£ s.	d.	
Income from voluntary sources Subsidy from Provincial Administra-		216 0	0	Marie and	284 0	0	
tion		1,627 0	0	15,	440 0	0	
Subsidy from City Council Expenditure on relief (exclusive	14	1,627 0	0	15,	440 0	0	
of administration costs)	21,618 0 0			22,	0		
	Street	and	Wood- stock and Maitland office	Street		stock an	
Cases (families) on books at end of year		355	372	851*	340	318	
Reports by Board's visitors	2,858	3.075		2,776		3,724	
Food orders issued (including meat		and the same		CONTRACTOR OF	and the same		
orders) Average number of cases dealt with	21,313	15,504	15,443	20,249	14,816	14,735	
daily		72	80	57	69	71	

^{*}Includes 173 applicants who receive a cash grant only and 232 applicants whose orders are posted.

The Board of Aid maintains shelters for families who are homeless through lack of means for paying rent. In the shelter for Europeans, at 87, Roeland Street, Cape Town, there is accommodation for 12 families, representing about 60 persons. The non-European shelter families were moved in April, 1940, into the new institution, Tafelberg House, Canterbury Street, Cape Town. This excellent building provides accommodation for 30 families, representing 150 people, and also for a day nursery (see below). No rent is charged for accommodation in these shelters, and one-half of the family earnings is retained by the Board in trust, and released when the family leaves, in order to make possible the satisfactory resumption of normal housekeeping.

In connection with its rehabilitation work, the Board of Aid rents 33 cottages in the Council's Coloured housing estate at Bokmakirie. These are occupied by families who live under the supervision of the Board, and pay their rent to the Board. This represents a stage in rehabilitation above life in the shelter, but below normal house-keeping. There is no corresponding provision for Europeans.

In connection with the European shelter the Board of Aid maintains a day nursery at cor. Roeland Street and Harrington Street, Cape Town, where there is accommodation for 50 European children; and at Tafelberg House a day nursery for 100 non-European children. These day nurseries (including meals) are for indigent persons, and no charge is made (see page 26).

FOOD SUPPLIED BY CITY HEALTH DEPARTMENT.

Free dinners are provided at ten welfare centres on Mondays to Fridays inclusive to nursing and expectant mothers and children under school age who are found by the medical officers to be suffering from under-nourishment caused by poverty. The figures for the year under report are given on pages 21 and 25. The dinners given numbered 125,338 (mothers 29,989, children 95,349). To these figures are to be added 4,284 dinners supplied to children at the municipal nursery school (see page 28).

Free milk is also provided at the welfare centres for necessitous children under school age. This is supplied without cost to the Council under the scheme of the Dairy Industry Control Board by arrangement with the School Board. The milk meals are consumed at the centres. During the year the attendances for milk meals numbered 35,610 and 2,136 gallons of milk were consumed. To these figures are to be added 4,284 milk meals supplied from the same source to children at the municipal nursery school (see page 28).

Dried milk for bottle-fed infants is issued at the welfare centres. The mothers are charged cost price if they can afford to pay: otherwise the dried milk is supplied at a reduced price or free. In the year ended 30th June, 1940, 1,743 new cases were supplied, and 52,616 lbs. of dried milk were issued. The cost was £3,310 l6s. 9d., and the takings from mothers for dried milk and medicines amounted to £1,324 l9s. 0d. (see page 23). As a result of this provision no suckling infant in the municipality need lack an adequate diet on account of poverty.

The City Council also provides bread and milk as additional nourishment for indigent cases of tuberculosis. The ordinary daily allowance for a patient is 1 lb. bread and 1 pint milk. 336 new cases were put on this allowance during the year, and the cost of the supplies was £1,404 19s. 3d.

SUMMARY OF SOCIAL WELFARE AGENCIES.

Much of the Social Welfare work in Cape Town is undertaken by voluntary agencies, either unassisted or with the help of grants from the City Council, the Department of Social Welfare, or the Provincial Administration. A considerable part of the voluntary funds are provided by the Community Chest of the Cape Peninsula, which systematizes the raising of such funds and their distribution to the voluntary agencies affiliated to it. In the year 1939 the Community Chest made grants and advances to member societies amounting to £10,240, and received repayment of advances amounting to £321.

The following is a summary of the social welfare agencies serving the municipal area of Cape Town.

RESIDENTIAL INSTITUTIONS

(other than those for the sick and defective and rescue and preventive homes).

FOR DESTITUTE FAMILIES.

The work of the Board of Aid in this respect is shown on page 85.

FOR CHILDREN.

The Emergency Home (Lady Buxton Home) is maintained by the Society for the Protection of Child Life in the same grounds and under the same technical staff as the Mothercraft Training Centre (see page 80). There is accommodation for 26 European children. The cases admitted are children who cannot for the time being be accommodated at home; for instance, during the mother's illness. The length of stay is usually not more than three months, except for children admitted pending adoption: 4 of the beds are allocated to the latter purpose. During the calendar year 1940 102 children were admitted to the home (full-paying 8, part-paying 21, free 73).

Orphanages and Homes for European Children.

Nazareth House; All Saints' Home; Marsh Memorial Homes, Rondebosch; Good Shepherd Home, Claremont; Cape Jewish Orphanage; Salesian Institute; Salesian Agricultural School, Lansdowne; Die Kindersendinghuis, Cape Town; Graceville Girls' Home, Woodstock (Salvation Army); St. John's Hostel; South African Orphanage; St. George's Orphanage, Rosebank; S.A. Railways and Harbours Children's Home, Rondebosch; Die Kindersendinghuis, Durbanville; German Orphanage, Philippi. Total accommodation, 1,420; inmates at 30th June, 1940, 1,260.

Orphanages and Homes for Coloured Children.

St. George's Orphanage, Claremont; St. Francis Home, Athlone; Heatherdale Orphanage for Coloured Girls, Athlone; Holy Cross Orphanage, Parow; Jonkersdam Volkskerk, Faure. Total accommodation 450; inmates at 30th June, 1940, 439. There is a great lack of orphanage accommodation for non-Europeans.

FOR THE AGED AND INFIRM.

Dorkas Tehuise; Nazareth House; Ladies' Christian Home; Cape Jewish Aged Home; Rogelim Tehuis; Princess Christian Home, Mowbray; Home for Aged Nurses, Claremont; Brown and Annie Lawrence Home, Pinelands. All these homes are for Europeans. The combined accommodation is 373.

HOSTELS FOR PERSONS OF SMALL INCOME.

For Europeans.—Y.M.C.A. (Long Street, and Louis Botha House, Observatory); Y.W.C.A., Long Street; Young Women's Hostel, Bree Street (Salvation Army); A.C.V.V. Tehuis, Salt River; Sailors' Home, Prestwich Street; Workmen's Metropole, Prestwich Street (Salvation Army). The combined accommodation is 310.

For Non-Europeans.—Workmen's Metropole, Prestwich Street (Salvation Army); Stakesby Lewis Hostels, Canterbury Street (for coloured) and Harrington Street (for natives); Y.W.C.A., Hanover Street; St. Columba's Home for Natives, Searle Street (Society of St. John the Evangelist). The combined accommodation is 228.

RESIDENTIAL INSTITUTIONS FOR DEFECTIVE PERSONS

(other than the sick, convalescent and mentally disordered and defective).

Athlone Blind School, Faure.—A residential school for blind non-European children.

Accommodation for 109 children.

Dominican School for the Deaf, Tuin Plein.—A residential school for deaf European children. Accommodation for 25 children. A few day children also taken.

Dominican School for the Deaf, Witteboom.—A residential school for deaf non-European children. Accommodation for 200 children. A few day children also taken.

The Jan Kriel Home and School for Epileptics, Kuils River.—A residential school for epileptic European children. Accommodation for 55 pupils. Most of the children are of sub-normal type.

DAY NURSERIES AND NURSERY SCHOOLS.

Day nurseries and nursery schools are referred to on pages 26 and 27.

RESCUE AND PREVENTIVE HOMES.

Cape Town Diocesan Home for Friendless Girls, Chapel Street.

This institution, under English Church auspices, is for the reception of homeless and destitute young women, including expectant mothers and remand-home cases sent in by the Police. They are left in the home until permanent arrangements can be made for them. The expectant mothers remain until about three months after their confinement, for which they are sent to St. Monica's Home or the Peninsula Maternity Hospital.

During the year 1940 7 European girls and 52 non-European were admitted. Four of the European and 14 of the non-Europeans were "preventive" cases.

A resident nursery, under the name of the St. Agnes' Home for Babies, is maintained as part of the same institute, where the babies of mothers who are or have been in the home are cared for. In general the mothers are at work and contribute towards the cost of the nursery. The monthly average of babies (European and non-European) in the nursery during 1940 was 14.

Vrede Oord, Tuin Plein.

This is a Salvation Army maternity and rescue home for non-Europeans. Accommodation 27. The confinements are attended in the home and 13 of the 27 beds are set aside for maternity hospital purposes (see page 81). In the case of unmarried mothers admission is arranged during pregnancy and the mother remains in the home with the baby for three months, during which time she is employed in the home. During the year under report 152 women were admitted, of whom 125 were free and 27 paid maternity fees. A V.D. clinic for inmates is provided in the home.

The Rest, Tuin Plein.

This is a Salvation Army home for the reception of destitute European expectant mothers. Accommodation 25. For their confinement the mothers are sent to the Booth Memorial Hospital of the Salvation Army. They are admitted during pregnancy and remain with their babies for three months after confinement, being kept employed during that time. During the year under report 47 women were admitted, of whom 24 were free and 23 paid maternity fees.

Magdalena Huis, Paradise Estate, Claremont.

This institution, under the auspices of the Dutch Reformed Church, is for the reception of European unmarried mothers. The confinements are attended in the home. The full fees are £5 for the confinement and £2 a month during the stay in the home. The mothers are required to stay for at least six months and are kept employed. Some stay longer for the sake of their babies, and the further prolonged stay is then free of charge. During the year under report 35 patients were admitted, of whom 12 were full-paying, 21 part-paying and 2 free.

Mary Rolt Hostel, Station Road, Mowbray.

This institution is for the reception of European unmarried mothers. For their confinement the mothers are sent to the Booth Memorial Hospital. The hospital fee is usually paid by the patient, but if she is unable it is paid by the hostel. No fees are charged by the hostel. The mothers are required to remain in the home with their babies for six months. They do the domestic work of the home and are given instruction in mothercraft. During the year ended 30th June, 1940, 10 girls were admitted and 10 discharged, leaving 6 girls in the hostel at the end of the year, in addition to 4 babies.

A resident nursery is maintained as part of the institution for the babies of mothers who have left the home and are at work. The average number of babies in the nursery was 5. The mothers contribute to the cost of the nursery.

Die Nannie Huis, 53, Jordaan Street.

This is a home of reception for destitute non-European mothers and babies, including a proportion of expectant mothers, who are sent for confinement to one of the maternity hospitals. There is accommodation for 22 mothers and children. The home offers asylum to destitute cases for whom no other refuge can be found. The mothers work in a laundry on the premises. There were 223 admissions in the year.

House of Mercy and St. Joseph's Home, Leliebloem, Woodstock.

This is a resident institution for non-European girls, under the care of the All Saints' Community (English Church). The House of Mercy is for rescue purposes, the girls, who are between the ages of 12 and 18, being mostly delinquent. The St. Joseph's Home is for preventive purposes, the girls, aged 2 to 16, having been admitted from bad homes, etc. From St. Joseph's the girls attend Zonnebloem School. The House of Mercy girls attend night school on the premises.

The following are the figures for the year ended 30th June, 1940 :-

			House of 1	House of Mercy.		Home.
			Committed.	Private.	Committed.	Private
Admitted			13	1	1	3
Discharged			9	4	1	1
In residence at end of year		34*		26*	26*	
Accommodatio			35		26	

^{* 2} girls transferred during the year from St. Joseph's Home to the House of Mercy.

At the House of Mercy the reason for the 16 admissions were immorality (8); theft (5); uncontrollability (2); destitution (1).

House of Bethany, Plumstead.

This resident institution, under the care of the Sisters of Bethany (English Church), receives European girls presenting similar problems. They attend school in the home. 7 girls were admitted during the year ended 30th June, 1940, and 7 left, leaving 31 in residence.

Place of Safety and Detention.

This institution is maintained by the Society for the Protection of Child Life. It was previously at Newlands House, Newlands, but during the year under report it has been moved to "Tenterton," Wellington Avenue, Wynberg, for Europeans (November, 1939) and "Sandown," Broad Road, Wynberg, for non-Europeans (February, 1940). At "Tenterton" there is accommodation for 36 European children and 14 babies, and at "Sandown" for 55 non-European children and 15 babies.

Children are admitted on an order given by the Court, when the Department of Social Welfare pays 2s. 6d. per day per coloured child, and 3s. per day per European child. Private cases are accepted only under very exceptional circumstances. The children usually stay about two or three weeks, but sometimes longer, according to the nature of the enquiry being held.

The admissions during the calendar year 1940 numbered 1,230 (European 250, of which 17 were private cases; coloured 980, of which 54 were private cases).

Tokai Reformatories (Union Education Department).

These institutions are composed of two separate institutions; one for 180 European youths of 16 years and over, removed 1½ miles from the Cape Coloured institution, of which one section is for 100 boys of under 16, and the other section houses 260 youths of 16 years and over.

All these institutions receive delinquents ordered to reformatories by commissioners of child welfare under Act 31 of 1937 (Children's Act).

The senior coloured institution is considerably overcrowded although important increase has been provided during 1939 in the dining-room, bathroom and lavatory accommodation.

Thirty to 40 per cent. of the coloured pupils are from Cape Town but less than 10 per cent. of the Europeans.

The Europeans are given scholastic and trade courses up to the National Junior Technical Certificate, Std. VIII. Their trades include carpentry and cabinet making, bricklaying and plastering, sheet metal work and plumbing, upholstering, motor mechanics, painting and agriculture.

The institutions for the coloured pupils provide schooling up to the Preliminary Technical Certificate Std. VII, and their vocational courses include house painting, tailoring, bootmaking, bricklaying and plastering, agriculture and dairy farming as well as housework.

The District Surgeon of Wynberg visits regularly and examines pupils very thoroughly on admission as well as on discharge, besides his monthly individual inspections.

Dental services have been provided for the Europeans. It is hoped to extend this facility also to the non-Europeans during next year. A medical orderly at each institution attends to all ailments in isolation sick bays, but cases requiring expert attention are removed to certain Peninsula hospitals. The diet scales in use have been approved by the Union Department of Public Health.

Notwithstanding the healthy outdoor life and participation in Peninsula sports league competitions and tournaments, pupils receive twenty minutes physical training daily.

Not the Courts but the Reformatories Board has the jurisdiction of deciding on the length of stay of any pupil, and this depends entirely on his behaviour and general adjustment. On the average this period is approximately twenty months.

As far as circumstances allow the discharged pupils, both European and Coloured are drafted back to the towns and districts from where they have been sent.

Cape Town Lads' Hostel, Mount Pleasant, Lansdowne Rd., Claremont (Social Services of South Africa).

This institution receives European males aged from 16 to 23 years, all committed (delinquent and problem cases). The inmates mostly go out to work. They usually stay in the hostel for 2 or 3 years. There is accommodation for 22, and the number of inmates averages about 16, of whom about half come from Cape Town.

Mountain View Hostel, Military Road, Retreat.

This institution receives non-European boys, aged from 9 to 16 years, all convicted (first offences) and sentenced. They remain in the home until released from sentence. The inmates number 60, of whom more than half come from Cape Town.

Social Farm, Rondebosch (Salvation Army).

This is an institution for the social rescue of European men. Most of them are voluntary inmates, only a few being committed. They work on the farm and in the dairy and are provided with quarters, clothing, food, etc., and pocket money. The number of inmates is usually from 20 to 25.

ORGANIZATIONS PROVIDING CHARITABLE ASSISTANCE IN CASH OR KIND.

Reference has been made above to old age pensions, pensions for the blind, pensions under the invalidity scheme, grants for committed children, the Cape Town Board of Aid and food provided by the City Health Department.

There are also a number of voluntary agencies providing assistance in cash or kind, including the following: Cape Jewish Board of Guardians; Governor-General's Fund (Cape Town area); Cape Town and Suburban Ladies' Benevolent Society; St. Vincent de Paul; Eaton Trust; Nicholl's Memorial Fund; Social Services of South Africa;

Rhoda Smith Relief Fund; Fairhaven Work Party (exclusive of work auxiliary to the national military effort); Cape Town and Suburban Clothing Guild; British Empire Service League, Cape Town Branch. The disbursements of these organizations in the year under report amounted to £17,629:

Service Dining Rooms, 89 Roeland Street.

These are established to provide cheap meals for the poor. For 3d. a dinner can be bought consisting of meat, vegetables and rice, with a slice of bread and a cup of tea; and for 1d. a bowl of soup and a slice of bread, or a cup of tea and bread with jam or butter. There is accommodation for eating these meals on the premises, separate for Europeans and non-Europeans. In the year 1939-40 40,228 3d. meals and 97,704 1d. meals were sold (total 137,932—Europeans 24,733, non-Europeans 113,199). The takings are less than the cost of provisions, and the deficit, together with the rest of the expenses, are met by donations, etc. Free tickets, paid for by private subscriptions, are given to the very poor, including 102 non-European school children selected by the principals of five schools who are supplied daily with a bowl of soup and a slice of bread.

RECREATIONAL AND CULTURAL INSTITUTIONS, SETTLEMENTS.

(E=Europeans; non-E=non-Europeans; M=males, F=females.)

These include the following: Gordon's Institute, Woodstock (young E.M); Y.M.C.A., 44 Long Street (young E.M); Y.W.C.A., 76, Long Street (young E.F); Seamen's Institute, Alfred Street (E. and non-E.M); Cape Town City Mission, Rutger Street (non-E); Hyman Liberman Institute, Muir Street (non-E.); Janet Bourhill Institute (non-E); Marion Institute, Chapel Street (non-E); Eoan Group (young non-E); Training School for Coloured Christian Social Workers (Vroue Sending Bond), 109 Harrington Street (non-E.F).

ADVISORY AND PROPAGANDA BODIES.

These include the following: Society for the Protection of Child Life, 127 Bree Street (E. and non-E.); Cape Province Society for Mental Hygiene, 127 Bree Street (E. and non-E.); Child Guidance Clinic (University of Cape Town), Rhodes Avenue, Mowbray (E. children); Mothers' Clinic, 354 Main Road, Observatory (E. and non-E.F); Care Committee for Tuberculosis Patients, and Cape Province Tuberculosis Council, 18 Keerom Street (E. and non-E.); Cape Town Civilian Blind Society, 43 Salt River Road, Salt River (E. and non-E.); League of Friends of the Blind, P.O. Box 1396, (non-E.); Cape Town and District Deaf and Dumb Association, 25 Church Street, Woodstock (E. and non-E.); Social Services of South Africa, Cape Town Branch, Magistrate's Court, Cape Town (E. and non-E.); A.C.V.V., 14 Derwent Road, Tamboer's Kloof (E.); British Empire Service League, Cape Town Branch, 58 Burg Street (E. and non-E.); Hebrew Helping Hand Association, 5 Wandel Street (Jewish); Cape Co-ordinating Council of Social Welfare Organizations, Social Science Department, University of Cape Town (E. and non-E.).

STATE-AIDED MILK AND BUTTER SCHEME.

Butter.

The City Health Department has continued to administer the sale in Cape Town of State-aided butter in accordance with the Government scheme under the Dairy

Industry Control Board.

Until June, 1939, the number of holders of permits to buy State-aided butter continued to increase and the weekly sales of butter reached and remained at over 25,000 lbs. The Union Government then decided to limit their commitments under this heading. On 2nd June, 1939, the prices of the State-aided butter were increased from 6d., 5d. and 4d. a lb., for the first, second and third grades, to 8d., 7d. and 6d.; and the maximum for one family reduced from 2½ lbs. to 2 lbs. Until that time the European and Cape Coloured families eligible to receive permits were those with an income not exceeding 6s. a day (42s. a week), or, under special circumstances, 8s. a day. The wage limit for the Cape Coloured was then reduced to 4s. a day (28s. a week) for families consisting of two persons and 5s. a day (35s. a week) for families consisting of three or more persons. For Europeans the wage limit remained unchanged.

The Council negotiated with the Government with a view to avoiding the hardship which this discrimination against the Cape Coloured would entail, but without avail, and the withdrawal of butter permits from the Coloured families that were excluded by the new wage limit was carried out during August and September, 1939. The effect was to reduce the weekly sales of State-aided butter in Cape Town by twenty per cent. Furthermore, on instructions from the Government no additional butter permits have since been issued. During the year the number of permits in force has fallen from 17,588

to 15,055.

The weekiy amount of State-aided butter that may be bought is 2 lb. for families of four persons or more, and 1 lb. for smaller families.

A careful watch is kept on the situation in order to avoid abuse. During the year the health inspectors made 1,873 house visits in the course of their investigations.

The privilege of buying State-aided butter is not extended to Natives and Indians.

The butter sales take place every Friday evening at 13 depôts of the City Health Department. The wholesale firms supplying the butter are paid by the Council at the actual retail price, and the subsidy is paid by the Dairy Control Board. The cost of the service to the City Council is repaid by the Control Board at the rate of ½d. per lb. of butter sold.

The weekly sales were as follows:-

1939.		lbs.	1939.		lbs.	1940.		lbs.
July	7	25,942		b.f.	410,413		b.f.	757,7231
	14	25,724	November	10	20,3441	March	8	21,010
	21	24,971		17	20,300		15	20,9161
	28	24,881		24	20,452		21	20,245
August	4	24,2921	December	1	20,374		29	20,382
	11	23,877		8	20,234	April	5	20,509
	18	23,6801		15	20,1331		12	20,581
	25	22,905		22	20,455		19	20,535
September	1	22,414	1940.	29	20,376		26	20,444
and the second	8	22,352	January	5	19,6441	May	3	20,376
	15	21,9881		12	20,384		10	20,285
	22	21,6361		19	20,4301		17	20,1391
	29	21,251		26	20,630		23	20,087
October	6	21,497	February	2	20,5891		30	20,129
	13	21,347		9	20,561	June	7	20,449
	20	20,579		16	20,615		14	20,1081
	27	20,516		23	20,834		21	20,1051
November	3	20,558	March	1	20,953		28	20,4281
		410,413			757,7231			1,104,454

The sales at the individual depôts were as follows :-

Depôt.				lbs.
Old Drill Hall, Cape Town		 	 	368,392
†12, Keerom Street, Cape Town	n	 	 	17,066
*Woodstock Town Hall		 	 	199,4751
*Maitland Town Hall		 	 	65,5541
†Brooklyn Village Hall		 	 	13,0881
Mowbray Town Hall		 	 	21,811
Athlone Welfare Centre		 	 	101,015
Rondebosch Town Hall		 	 	19,170
Claremont Town Hall		 	 	80,7261
Lansdowne Welfare Centre		 	 	43,866
*Wynberg Town Hall		 	 	130,6181
Retreat Welfare Centre		 	 	29,8291
Municipal Office, Muizenberg		 	 	13,831
				1,104,454

^{*} Separate accommodation for Europeans and non-Europeans.

The proportion of the three grades of butter sold is determined by the supplies available. The sales were as follows:—

1st grade	 	 	 	 263,748
2nd grade	 	 	 	 716,208 124,498
3rd grade	 	 	 	 124,400
				1,104,454

Thirty charitable institutions in Cape Town are allowed to purchase State-aided butter totalling 1,859 lbs. a week.

[†] For Europeans only.

Milk.

The supply of surplus milk at cheap rates to school children is undertaken on behalf of the Dairy Industry Control Board by the School Board for the Cape Division. The milk is delivered to the various primary schools, and a half-pint per day supplied to each child on week-days (i.e. Mondays to Fridays, inclusive) when the school is open. The charge per child is 2s. per quarter, but this may be reduced or remitted in cases of poverty.

The dairymen supplying the milk have been paid by the Dairy Industry Control Board

at 1s. 11d. per gallon.

During the year ended 30th June, 1940, the milk thus supplied at the schools within the Cape Town municipal area amounted to 93,561 gallons for European schools and 254,137 for Coloured schools; 10,381 Europeans and 28,537 Coloured children received their half-pint of milk daily.

The payments collected during the year ended 30th June, 1940, were £797 ls. 10d. from European schools, and £707 l4s. ld. from Coloured schools.

SECTION X.-STAFF OF CITY HEALTH DEPARTMENT.

The full-time staff as at 30th June, 1940, was as follows:-

Medical Officer of Health.
Deputy Medical Officer of Health.
Assistant Deputy Medical Officer of Health.
Administrative Officer.
Clerks, 19.

Maternal and Child Welfare Officer.

Deputy Maternity and Child Welfare Officer.

Assistant Maternity and Child Welfare Officer.

Assistant Maternity and Child Welfare Officer.

Chief Health Visitor.

Health Visitors, 31 (1 vacancy).

Non-European assistant health visitors, 2.

Supervisor of Midwives.

Social Welfare Investigator.

Superintendent of Cleansing Station.

Clerks, 3.

Storeroom assistants, 2.

Domestics, 17.

Labourers, 2.

Juvenile assistants in day nursery, 6.

Venereal Disease Branch.
Venereal Disease Officer.
Assistant Venereal Disease Officer.
Nurse-visitors, 4.
Orderlies, 2.
Clerks, 2.
Labourers, 2.

Tuberculosis Branch.
Tuberculosis Officer.
Health Visitors, 6.
Clerks, 3.
Domestic.

Health Inspectors' Branch.
Chief Health Inspector.
Assistant Chief Health Inspector.
Health Inspectors, 35.
Learner Health Inspector.
Meat Inspector.
Native Assistant Health Inspector.
Clerks, 2.
Attendants at Municipal Washhouses, 17.
Ratcatchers, 18.
Labourers, 2.
Attendants at Public Sanitary Conveniences,

CITY HOSPITALS, INCLUDING AMBULANCE AND DISINFECTION SERVICES. Medical Superintendent of Hospitals. Resident Medical Officer. Junior Resident Medical Officer. House Physicians, 2. Pharmacist. Assistant Pharmacist. Clerk. Matron. Assistant Matron. Sisters, 14. Staff Nurses, 9. Student Nurses, 12. Probationer Nurses, 34. Radiographer. Venereal Disease Orderlies, 3. Porters and telephone operators (male), 7 Kitchen supervisors, 2. Laundry supervisor. Seamstresses, 3. Engineer. Mechanie. Electrician. Removal and Disinfection Officers, 2. Ambulance Drivers, 2. Native servants (male), 38. Domestics, 35. Labourers, 7 Caretaker, Rentzkie's Farm Hospital.

NATIVE HOSPITAL, LANGA.

Matron.
Sister.
Native nurses, 4.
Native Orderlies, 3.
Domestics, 3.
Labourer.

Domichiary Medical Service.

Medical Assistant.

GENERAL.

Messenger. Cleaners (male), 2. Chauffeurs, 9. A half-time medical officer is engaged at the Langa native hospital.

The Department also engages the services of part-time medical and dental officers for 42 medical sessions and 9 dental sessions per week; and of a physiotherapist for one session a week.

At the City Hospital consulting specialists and surgeons are called in when required.

CHANGES IN PERSONNEL.

Medical Staff.

Dr. Rachel Rabkin, who had acted in a temporary capacity from 1st April, 1939, was appointed as junior Resident Medical Officer at the City Hospital for Infectious Diseases on 6th May, 1940.

Dr. L. Stern was appointed as assistant medical officer for poor relief on 1st August, 1938, and was succeeded on 1st February, 1939, by Dr. H. Meyer, who resigned on 25th March, 1940, and was succeeded by Dr. C. I. Kaplan.

The positions of senior and junior house physicians at the City Hospital for Infectious Diseases were held by Dr. Mary H. Judd and Dr. J. Ware from 1st August, 1939, to 31st January, 1940, and Dr. J. Ware and Dr. W. Wilkie from 1st February, 1940.

Health Visitors.

Mrs. C. Birkby retired on pension on reaching the age of superannuation on 13th April, 1940, after completing 19½ years of service.

Mrs. C. L. Ball and Miss D. V. Moore resigned on 15th August, 1939, and 31st October, 1939, respectively.

Miss J. Wareham, Miss G. E. J. Devis and Miss F. A. Slabber entered the service on 1st November, 4th November, 1939, and 17th June, 1940.

Hospital Pharmacists.

Mr. E. R. Shipman was appointed as Assistant Pharmacist at the City Hospital for Infectious Diseases on 1st November, 1939.

MEMBERS OF STAFF ON ACTIVE SERVICE.

The following members of the staff proceeded on active service on the date shown :-

									1940.
Dr. A. Stewart		Deputy	Assis	tant	Medical	Offic	er of He	alth	27th May.
Dr. E. D. Cooper		Resider	nt Me	dical	Officer,	City	Hospita	1	25th May.
R. Buchanan		Health	Inspe	etor					25th May.
J. C. Theron			"						25th May.
R. D. H. Hiddlesto	n		**						3rd June.
A. J. Farquharson			,,						3rd June.
S. Fraser			,,						3rd June.
R. P. Humphreys			**						26th June.
S. J. Webb		Clerk							23rd May.
B. C. Doran									26th June.
A. J. V. Martheze		Porter,	City 1	Hospi	ital				20th May.
M. J. Swart		Orderly	, City	Hos	pital				27th May.
A. D. Manielle		Ratcat	cher						1st June.
C. B. Hart		,,							17th June.
E. S. Lindebaum		Orderly							3rd June.
N. J. H. Hayes		Assista	nt, Mu	ınicip	al Was	hhous	e		17th June.

Deaths in Cape Town of non-Residents (Outward Transfers) are excluded from the Table proper and shown separately. Deaths of European Cape Town Residents which occurred outside the Municipality (Inward Transfers) are included in the sections for age-periods but not in the sections for wards. (52 weeks ended 28th June, 1940.) AS TO CAUSES, RACE, SEX, AGE-GROUPS AND WARDS. TABLE A1. DEATHS FOR THE YEAR ARRANGED

Deaths in Cape Town of Non-20.00 00.00 H-04 00 H 00.0 330 103 Residents (Excluded from foregoing columns). pi, , 01 010 22 21:0 428 122 333 700 850 185 386 3,046 35 7.2 282 128 22 98 22 28 222 28 88 55 2,532 2,104 4,636 Per-889 TOTALS 1,392 00.00 00 288 25 =1 250 28 # S 250 500 83.1 22 912 878 . 9 98 99 99 300 0100 20 23 355 88 318 60 SS 55 232 1.1 00 1 01 1 1.1 1 1 00 1 to to 11 120 85 and upwards 1:1 1 1 - 1 111 111 47 -1 -21+ 10 11 01.1 01.01 1.31 0.4 B. B. 1.1 200 N. 257 133 172 99.0 34 38 75 to 85 10:01 1 1 00 N. 111 01.1 10 m 10 800 AGE-GROUPS: CORRECTED FOR INWARD AND OUTWARD TRANSPIRES IN THE CASE OF EUROPEANS BUT CORRECTED FOR OUTWARD TRANSPIRES ONLY IN THE CASE OF NON-BURDPEANS. 1.1 00 00 - 1 1.1 10.00 10.00 00.03 ni, 121 65 to 75 101 881 120 000 20 N 59 203 800 00-00 134 000 99 50 40 15 1 100 55 to 65 225 101 1 -+0 22 5 × 999 1 1 1 1 1-01 - 00 1 182 323 22 82 N. 455 60.00 23 27 33 45 to 55 à 148 10 00 1:1 0010 1 1 H. - 00 -1.1 현모 10 2 1-10 1.1 21-- 1 143 98 1 1 00.0 01 1 10 01 014 00.03 014 10 1 000 40 01-88 35 to 45 134 +8 2100 10 81 × 22 200 94.00 125 00.04 20 = P= 00 HO 991-W.Fr 0110 1.1 25 to 35 118 00.00 1 -65 00 94 0 69.4 01 43 22 167 22 817 35 145 2 2 0100 100 0110 22 88 1-00 15 × 11 10 to 15 1000 - 23 11 93 M. 8 110 91 N. +0.04 1.01 -1 1 1.00 HE 1 1 1.1 1.00 1.1 もの 2 111 -104 1 00 10 1.1 1.1 23 200 N. 8 008 1 00 #13 22 653 98 011-110 682 Total under 4 1-13 113 1 00 == 10 OH 277 212 91.99 00 0-- 00 92 858 M. 1.00 1.1 110 HØ 0110 101 210 -33 113 10 2 1 1 1.1 10 98 22 M. 200 94 1.1 × 22 150 1 00 110 1 00 00.00 1 04 11 E. 09 2 1.1 917 1.1 1.3 --03 1 10 1.1 1.1 01-4 1-199 587 419 185 o to M 1 00 1 01 827 99 to 1 92 315 0110 1 00 00 00 1 00 E. 36 (P. 88 014 99 -00 E 0.15 12 N. 0 140 MO. aid aio' MO. sio 20 Mic MO. MO. 100 Race. -Rheumatism, Discases of Nutrition, of Endo-crine Glands and Other General Discases Other Diseases of the Digestive System XV.-Diseases of Early Infancy L-Infectious and Parasitic Diseases Diseases of the Blood and Blood-Forming Diseases of Pregnancy and Puerperal State ... Skin Diseases of the Respira-tory System ... Malformaof the Circula-Non-Venereal Disease of the Genito-Urinar System and Annexa. XVII.-Deaths from Violence Diseases of the Si and Cellular Tissue SUMMARY CAUSE OF DEATH. Poisonings Diseases of the and Organs of pur and Totals, all Races Diseases of t System a -Congenital XVIII.-Ill-defined Malignant Totals XVI.-Old Age Chronic Organs VIII VIII XIII. VI. XII Ė X E K

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T NOT		F. 3	00 gg	901-	09 PH	11	1.1	01-#	00	95	-0	413	1.1	1.1	1.1	04=	400	-1	1.1	1.1	842	116
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SUMMARI	CAUSE OF DEATH.		L.—Infectious and Parasitic Diseases	IIMalignant and Other Tumours	III.—Rheumatism, Diseases of Nutrition, of Endo- erine Glands and Other General Diseases	IV.—Diseases of the Blood and Blood - Forming Organs	VChronic Poisonings .	VI.—Diseases of the Nervous System and Sense Organs	VIIDiseases of the Circula- tory System	VIII,-Diseases of the Respira- tory System	IX.—Diseases of the Digestive System	X.—Non-Venereal Diseases of the Genito-Urinary System and Annexa	XIDiseases of Pregnancy and Puerperal State	Sine	XIIIDiseases of the Bones and Organs of Loco- motion	XIVCongenital Malforma-	XV.—Diseases of Early Infancy	XVI,—Old Age	XVII Deaths from Violence	XVIII.—Ill-defined Diseases	:	Totals, all Races

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014	27	Tuberculosis of Other Bones and Joints	n		-	12		-	-		-		_			_	-	-	-		-	-	-	-	-	-		-	-	_		-

CAUSE OF DEATH.	Race.	Se Po	ta int	bo	Ar- our 2	Ce	est		oof 4	Pa		Es Ce	ast D-		atle	We	od-	Se Ri	BUT alt ver	Mo	T F		dt-	Rot		Cla	re-	K	alk ay	b	/yn- erg 15	ea Reder A dre U	esi- itial d- sses n- cer-	TO)TA
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I. INPECTIOUS AND PARASITIC DISEASES.																																			
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149	56	III. RHEUMATISM, DI- SEASES OF NUTRI- TION, OF ENDOCRINE GLANDS AND OTHER GENERAL DISEASES. Rheumatic Fever	CE	-	-	-		- 10	-	-	-	1	-	_	1	-	-		-						-			-	_	-	1	2	3	-
150a	92	Rheumatic Affections	€0.	-	-	-	-		-	-	-	1	1	1	2	- 2	1	- 3	5 045	1	4 2	-	2 -	1 -	-	-	- 1	-	-	-	6	5	11	1-
150b	93a	of the Heart Other Rheumatic Affec	() E.	-	-		-	-	1	1	1	-	-	-	3	2	-	- 2		2	2	1	2 -	3 -	-	-	-	1 1	-	-	10	14	24	
151	-95b	tions of the Heart Chronic Rheumatism	(E	-	-	-	-		-	-	-	-	-		-	-	1	-	-	-	-			-	-	1	-	-		1	1	3	3	
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153	50	Diabetes	{E		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	1		-	0 4		1	- 6	1	-	14	29	43	
154	60	Scurvy	{E	-	-	-	-	-	-		1	-	-	-	-	-	-	-	-	-	3	2	3 -	3 -	-	2	-	-	-	-	8	13		
155	61	Beri-Beri	{E		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			-	-	-	-	-	-	-	-	-	1	
156	62	Pellagra	{E				- 1	-			1.1	11	1.1	10	-				1.1		-			-	-		-	1.1	-	-	1.1	-	111	
157	53	Rickets	{E		-		- 3	1.1	1.1	- 1	. 3	1.1	-		-			1	-	-	-	-		-	1	-	-	-	100	-	-	- 3	- 4	
158	64	Osteomalacia	{E		1.1		-	-	1.1		-	1.1				-	-	1 1		-	-	-		-	-	-	-	-	-	-		-	1.1	-
159	65	Diseases of the Pitui- tary Gland		-	1.1	1.1			11					1.1			-	-	171	-	-	-		-	-	-			101	-	- 171	7		
160	66a	Simple Goltre	{E		1.1	-			1.1			1.1				- 1	-	111			-	-			-	1	-		111	1.1	1.1	1	1	
161	66b	Exophthalmic Goitre			-	-		-	1.1		-		-		-	-			1	-	1	-	1 :		-	-	-	-	-	-		3 1	31	1
162	600	Myxodema, Cretinism			-	-		-		-	1 1		1.1	-	-:		1.1	1.1	11			-			-	17	-	1.1	-		11		1.1	1
163		Tetany	{E		-	-	-	-	1.1	-	-					-	1.1	-		-		-				-	-	-	-	-	11	1.1		1
164	66e	Other Diseases of the Thyroid and Para- thyroid Glands			131				-			-	-	-	-	-	-	-		-	-	-			-	1	-		111	-	-	-	1.1	1
165	67	Diseases of the Thy- mus Gland	1 30		1 -	=				- 1			-,								-	-				-			-		-1	-1	-	-
166	68	Diseases of the Adrenals (Addison's Disease)	SE		-		-	-	-	-	-	-	-		-	-	-	- 1		-	-,	-			-	-	-		-	1.1	- 1	-	-	
167	60	Other General Diseases	1 78			:		-	-	-	-	-	1	-	-			1.	-	-,	-					-	-	-	-		-1	111	-	
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TOUT WAS	CAUSE OF DEATH.	Race.	Po	ea int	be	ar- our 2	ti	est en- ral 3		oof 4		ark 5	C t	ast en- ral 6		astle 7	st	ood- oek 8	R	alt iver	br	ay 0	Mai lan 11	d	Rond bosel 12		lare mon 13	t .	Kalk Bay 14	b	yn- erg 15	dre t ase	ntial d- esses Un- cer- ned.			sons.
-	II (mut)		M	F	M	F.	M	F.	М.	F.	M.	F.	M	. F.	M	F.	М	F.	M.	F.	M.	F.	М.	F.	М. 1	7	M. I	3	f. F.	M.	F.	M.	F.	M.	F.	Per
	II. (cont.). Cancer of the Respi- ratory Organs	{E.	-	-1	-1	-	1	-	_1	-	-1	-	-	-,	-	-	-	3 1		-	1	1	-1	-	-	1	1 -	1	1 -	- 1	- 2		-	11 2		18
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ı	Cancer of the Other Fe- male Genital Organs	{E.	-	-	-	-	-	-	-	-	-	-	1	1	-	-	=	1	-	-	1.1	2	-	-	-	2 :		1 -	-1	-	1	=	-	-	7 4	7 4
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۱	Cancer of the Male Genito-urinary Organs	{E.	2		1.1	-	-	-	1	1.1	- 60	1.1	-	-	1 1	-	-	-	-	5	1	-	-	-	1 -		1 -	-	1	1	-	1	-	10	-	10
Ì	Cancer of the Skin	{E.	-	1 1	-	-	-	-	-	-	-	11	-	-	1.1	-	-		1	-	-	0.75	-				1 -	-	-	-	-	-	-	2	-	2
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b	Non-malignant Tu- mours: Other Sites	{E. (0.	-	-	-	-		1	-	-	-	-	1	-	1	-	=	-	-	1	-	-	1		2 -	-	1	-	-	-	-	-	=	3	3	5
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	Pellagra	{E. o.	-	-	-	-	=	-		-	-	-	-	-	-	=	-	-	-	-	-	-	- :		-	-	-	-	=	=	-	=	-	-	-	-
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Se	Other Diseases of the Thyroid and Para- thyroid Glands			-	-	-		-	-	-	-		-	-	-	-	-	-	-	-	-	-	-			-	-	-	-	-	-	-	-	-	-	
	Diseases of the Thy-	fE.	-		-	-		-	-		-		-	-	-			-	-	-	-	-				-	+	1	-	-	-	-	-	-	-,	
3	Diseases of the Adrenals (Addison's Disease)	1000		-	1	-	-		-	1 1	-		-	-	1 1	1	-	-	-	-	-	-			-	-	-	1	-	-	-	-	-	-	-	-
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	Other General Diseases Totals for III.			-	-	-	-	-	-	- 1	- 4	- 2	-	-	-	-	-1	-	- 0	- 1	-	-			-	-	1 -	-	-	- 3	- 5	-	-	24	41	1 05
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Dea:	is-						AGE	BOP	EAN	s Bt	ORI	ORR	ED I	FOR I	OR	OUT	WAR	DT	TWAI RANS S.	ED T	RAN S ON	SFEI LY	RS IN	HR HR	CASI	E O	OF				TOT	ALS	3.
Code No.	Code No.	CAUSE OF DEATH.	Race.	0 to		1 0		2 to	0	Tota unde 5	er	5 to		10 to		5 to 25		5 to	4	to 5	45	5	55 6	5	65 75	5	75 6		85 and up- ward	is.		Dankons	ersons-
	8	TIT THERETON OF THE	-	24.		201.	F.	Di.	F .	DL.	F .	M.	-	34. E	-	d. F	. 31	-	. M.		24.	A.	- AL	-	A4.		31.	ь.	201.		M. 1	- 9	4
00	70a	IV. DISEASES OF THE BLOOD AND BLOOD- FORMING ORGANS. Purpura	{ E.	- 3	- 0	-	-	-	-	- 3	- 0	-	-	-	-		-	-	-	-	-			-	-	-	-	-	-	-	-	- 3	-7
01	70b	Haemophilia	{E.	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
02	71a	Pernicious Anaemia	{E.	-	1.1	-		-	-	-	-	-	-	-					1 -	1		1.1	-	-	1	1	-	1	-	100	1	4	5
03	71b	Other Anaemias and Chlorosis	{E.	-	-	-	-	-	-	-	-	-	-	-	-	-	1 -	:	-	1	-	-	-	1	1.1		-	-	=	-	-	2	21
04	724	Leucaemla	{E	1	-		-		-	1		-	1	=	-	-			2 -		1		1.1	1.1		111	1	111	=		2	3	57
005	72b	Lymphadenoma— Hodgkin's Disease	{E	-	-	-	=	-	-	-		1.1	1	=	-	1			1 -	1 -	-	-		1 -	1.1	-	-	11	-	-	- 2	2	64.00
206	73	Diseases of the Spleen (not due to Malaria)	{ o	-	-		-	-	-	-	-	-	1.1	=	-	-	- :		: :	-	-		-	17	-	-	-		-	-	-	-	
207	74	Other Diseases of the Blood and Blood- forming Organs	{E			-	11	-		1111	=	1.1	1.1	-	-	-	-	-	: :	-			1,1				-	1.1	-			-	1.1
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250	75	V. CHRONIC POISONING Alcoholism (excluding Alcoholic Cirrhosis of Liver)	100	-				1.1	1.1	-		-	1.1	-	-		1.1	-		-			-	1.1					1.1			1.1	100
251	76	Chronic Poisoning by other Organic Sub- stances	{}		-	11	12	-	-	=		1.1	-	-	-	-	-	-	- :	: :	-	-	-	-	-				-	1.1		-	- 1
252	a 77	a Chronic Lead Poisonin	E { }	S	=	-	-	-	-	-			0	-	-	-	-	-	-		-	-		-	-	-	-	-	-		-	-	1.1
252	ь 77	Chronic Poisoning by other Mineral Sub stances	137	g 0	-	-	-	-	-	11		1.1		-	-	-		-				-			1.1	100	-	11	11	11	-	-	10 a a
		Totals for V.	130	B	-				=	1	-	=	=	-		-	-	=	-		-	E	E	=	1	=	E	-	100	-	-	E	
300	n 78	VI. DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS Cerebral Abscess .		E	-				1 -		1 -	-	-	-			-	-	1		1 -	1	-	-		-	-	-	-	-	1	2	
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30	1 79	phalitis Simple Meningitis .	. 5	E		2						-	-	-	-	1	-	-	-	1		1 -		-	-	1 -	-	-	-	-	3	-	2
805	2 80	Locomotor Ataxia (Tabes Dorsalis)	. 1	O. E. O.					2	1		2 -	-	-	-	-	-	-	-		.			1 -	-	1	-	-	-	-	9	-	
30	8 8	Other Diseases of th	e s	E									-	-	-	-	-	-	-	-	1		1	1 -	-	-	2 -	-	-	-	1		
30	4a 8	2a Cerebral Haemorrhag	oe s			-	-							-	-	-	-	-	-	1	2		1	1 -	-		-	-	-	111	2 2	3 1	
30	4b 8	2a Apoplexy (Lesion Unstated)		E		-	-	-				-		-	-	-	-	-	-	-						-	-		-	-	-1	-	-
30	5 8	2b Cerebral Embolism ar Thrombosis	nd f	E.	-	-	-	-						-	-	-	-	-,	-,	-		1					1 1		4 -		1 4	5	
30	6 8	2c Hemiplegia	- 18	E.	-	-	-	-	-	:				-	-	-	-	-			1		1 -		1	1 -	-	-	-	1:	1	2 2	
30	7 8	2d Other Paralyses Unstated Origin	of s	E.	-	-	-	-	-					-		1.1	-	-		-					1 -		-	1-	1 -	1	-	1	
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30		In annihim				-	-	-	-					-	-	-	-	-	3	-	- :	-			1 -	-	-		-	-	-	4	
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31		6 Infantile Convulsio (under 5 years)		E. 0.	20.00	2 3	-4	- 2	2	1 :	3	2 -		-	-	-		1.1		-	-		-		-	-	-	11		-	3	2	
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	De	Other Diseases of t rde Nervous System	1	E. O.	-	-	1	101	-	1 .	1 .	1 :		-			2 -	_1	1 1	-	- :		-	1 -		2 -	1 _	1 -	1 -	101	5		
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3		Diseases of the Ear a Mastoid Sinus]	E. 0.	- 0	-4	7	2	-	1	0	7	2	2 -	-	1	-	1.1	-	-	- :				-	-	-		=	-	1 5		
		VII. DISEASES OF T	HE)	E. O.	3 13	10	1 4	5	5	5 :	6 22	20	1 -	8 -	-	1	1	8	7 3	3 7	5 2	3 5	22	4 6	4	4 02	5 -	2	5 -	=	28 58	32 40	
3	50 (CIRCULATORY SY TEM. Pericarditis		E.	- 1	- 2	-	-	-	-	-				-	-	-	1	-	-	1	1 .	-	1	1 -		-		1 -	-	3 4		

AUSE OF DEATH.						T		: C	ORR	ECTE	D- F			ARI	TR	ANSI	PERS	BUT	NO	T F	on I	ew.A	RD T	CRA?	SPE	RS.				-	Allo Resi ienti Ad- iress	d. T	OT	ALS
AUSE OF DEATH.	Race.	Se Poi	int	bo	-	t	est en- ral 3		loof 4		ark 5	ti	-	7	tle	8	k	Salt Rive 9	r 1	10		ind 11	bo	sch 2	mo 1:	nt	Kal Ba 14	У	Wy bern 10	n-	Un- ascer aine	d.		
W Dave		М.	F.	M.	F.	M	F.	M	F.	M.	F.	M.	F.	М.	F.	M.	F	ol. 1	. N	· F	. M	F.	M.	F.	М.	F.	31.	F.	М.	F.	26. 1		-	-
V. DISEASES OF THE BLOOD AND BLOOD- FORMING ORGANS, SUPPURS	ſE.	-	-	-	-	-		-	-	-	-	1	-	-	-	-	-	-				-	-	-	-		-	-	-	-	-	-	-4	- 3
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450	115	IX. DISEASES OF THE DISESTIVE SYSTEM. Diseases of the Buccal Cavity	{E. O.		-	11	-				1.16	-		-	-	-	-	-			-	-		1.1		11	110		1.1			1.1	1.1	1.1
451	115	Diseases of the Pharynx and Tonsils	{Е. О.	1.1	1111	ī	1	-	1.1	1	1	-	-	-	1.1	-	ī	-		-	- 1	1	=	1.1	-				100	11	11	1	1	1010
452	116	Diseases of the Ocso- phagus	{ E.	-	-	-	-	-	-	=	=	1 1	-	-	-	-	-	-	0	-	-	-	-	-	-	1	3	-	-	1	-	2	-	- 10
453	117a	Ulcer of the Stomach	{B. O.	-		=	-	-	-	-	-	-	-		-	1	-	1	-	5	1	2	-	4 2	-1	-	-	1	- 1	-	-	5 11	2	13
454	117ь	Ulcer of the Duodenum	{E. O.	-	-	-	-	-	-	-		-	1 -	-	-	-	-	2	-1	-1	-	1	-	3 1	=	1	-	-1	1 1	=		5	-1	56
455	118	Other Diseases of the Stomach (excluding Cancer)	{ E. O.	1.1	-1			-	1.1	1.1	ī	11	1.1	1.1				- 4	1.1	1.1		-		- 1	1 -	1	-		1.1	-	111	1	-,	1
456	119	Diarrhoea and Enter- itis: Under 2 years	{Е. О.	14 125			2 48	-		21 169	12 142		1.1	1.1	0	111	- 1	-	0	1.1		-		-	1.1	-	-	1.1	1.1			21 169		
457	120	Diarrhoea and Enter- itis: 2 years and over	{E. 0.	-	1.1	11	11	5	9	- 5	-9	-	1	1	1		1	1.1	1.1	4.40	1	-	-	1.1	1	1	- 25	_1	- 2		1.1	207	8 12	10 19
458	121	Appendicitis	{Е. О.	-	1.1	-		11		1.1	1.1	-	-	-	1.1	-1	1 3	2	1	1.1	1	3	-	1 2	-	2		1.1	8.46	1.1	11	8	3	11 7
459	122a	Hernia	{E. O.	-1	101		-	-	1 1	-1	1.1	=		=	100	-	-	_1	1.1	1	-	1	-	3		1	1	_1	1.1	1	1.1	9 3	1	10
460	122b	Intestinal Obstruction	{Е. О.	- 3	1	2		1	1 1	2 4	1		1.1	1	-	1			1	1	-	-1	1 2	2	3	2	1 1	2	11		11	9 10	6	15 16
461	123	Other Diseases of the Intestines	{Б.	1.1	1	-	1.1	-	1.1	1.1	-1		1.1	1.1	1.1	-	-	101		1.1			-1	3	1	1	-	1.1	1.1	-	1.1	4	1 2	5 22
462	124a	Cirrhosis of the Liver:	{ E.		1.1	-	1.1	-		-	-	-	1.1	1.4	11	1.1	-	1 1	1.1	1.1	1	1		1	1	1	-	1.1	1.1			3	2	5
463	124b	Cirrhosis of the Liver : Not returned as Al- coholic	{E. O.	-1		-1	11	-		2	- 1	-1	11		11	1.15		1	-1	1	1.1	-1		1		4	1.1	1.1	-1		1.1	4	1 94	7.6
464	125	Acute Yellow Atrophy	{Е. О.		11		-		1 1	1.1	1.1		1.1	1.1	1.1			-	1.1	1.4		11	-			-	-	1.40				-		1.1
465	125	Other Diseases of the Liver	{ E. O.	1	-	-	1		-	1	-1	-		-	-	-	-	-	- 1	-	-	-1	-	-	-	-	-	-	-	-	6.1	- 2	-1	3
466	126	Biliary Calculi	{E. O.		1.1	11				1010	17.0		11	1 1	1.1	11			1.1		1.		-	11		-	2		-	-	-	-	2	2
467	127	Other Diseases of the Gall Bladder and Ducts	{ Б.	-	-	-				-	- +	-1	-	1	1.1	1-1		-	1.1		1-1		-	-	1 1	3	1	-			1	3 2	3	6 3
468	128	Diseases of the Pancreas	{E.	-	-	-	-	-	-	-		-	-	-	-	-	-	-	-	-	1	-	- 1	1	1	2	-	-	-	=	-	3	2	5
469	129	Peritonitis without stated cause	{E. 0.	1.1	1.1	1.	1.1		1		1		1.3	-1	-	2	-	-		-1			=	-	-	-	:	-				2	3	3 2
		Totals for IX	{ E. O.	14	10 97	46	3 49	-6	1 9	23 183	14 155	-2	-1	-4	1	-3	5	3 4		4 8	3 2	7 5	2 3	19	7	20	7	5	2	2	1	83	44 7	127
		X. NON-VENEREAL DI- SEASES OF THE		-			П								Ī				Ī						1								Ì	1
500	130	GENITO - URINARY SYSTEM AND ANNEXA Nephritis: Acute	{E. O.	- 3	- 2	- 2	- 3	- 5	1 1	10	1	- 5	-	1		- 0	-	-		- 3	100		-	1	-	2	-	-	-	-1	-11	3 91	1 14	4
501	131	Nephritis : Chronic	{E.	-	-		- 1	-	1	-	1	-	-	1	-	1	1	1 0	1	2 6	1 2	4 5	5 5	10	6	10	5	2	6	-	2		28	58 58
502	132	Nephritis: Not other- wise defined	100		1	11	1.1	-	-	-	1	-			-		- 1	.0.	-	-		- 3	-	-	0		-	1	1	1		2 6	2 1	41.
503	133 a b	Other Diseases of the Kidneys and Annexa	SE.	2	- 1	- 4	- 1	1.1	-	2 5	- 2			1.1	1 4	1.1	1.1	1.1	- 1	1 1		1 2	I Carrie	1		1	1.1	1	1	1.1	. T.	6 9	1 3	7
504	134 a b c	Calculi of the Urinary	{ E.		+ -	-		1:1		-				-		1.1				-	1-1	-	-	1 1		1		-	1.4		111	1	-	1
505	135 a b	Diseases of the Bladder				11		1.1		11		1.1	11	1.1	1.4		11		1.1	1.4	-1	-	1.1	11	- 1		101	-		1 1	1.4	101	-1	-1
503	136 a b	Diseases of the Urethra Urinary Abscess, etc.	{E		1.1					1 1		-	1 1			11		1.1	1.1	1 1			-			-			11	1.1		++	-	- 1
507	137	Diseases of the Prostate	1000		1.1	1.1		1.1	11			-	1.1		11	1.1						- 2	-	1	1.1	3 22	-	1	1.1	1		6 5	1	6
508	138	Diseases of the Male Genital Organs							1.1		1.1	1.1	-	1.1		1 1	11	1.1	-	1 1	1.1	-	-	11			11		11	11			1	1-1
509	139	Diseases of the Ovary	{E		1.1			-		1. 1.	-	-	-	. +		1.1	1.1	4 4		1.1			-	-	-		-	-	11		1.1			
510	1390	Diseases of the Fallo- plan Tubes and Pel- vic Abscess	{E			-	7.	100	1 1		-	(8.4	1	1.		1010	- 3	-	- 1	-	1		1	100	10	-		-				-	1	1 4
511	139	Diseases of the Uterus	1070				1 .		100	1-	-	-	1 1		- 1	-	-			-	1				1		-		1	-			1	1
512	139	Diseases of the Breast (non-puerperal)	(E	-			- 1	10	1	1-		173						-	-	-	1.1				-		-		-	-	-			-
-	_	, and the same	100	-	L	1													-	-			-		1				-		6			

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C.	AUSE OF DEATH.	Bace.	P	Sea Poin 1	E	Har bot 2	ar	We Ce tri	n- al	Kle 4			5	Ci ti	ast en- ral 6	100	stle	ste	8	Riv	ver	Mov bra: 10	y	land 11	1	Ronde bosch 12		nont 13	Ba 1	4	be 1	n- rg	dres Un asc tain	ses i- er- ed.	M 18		- No.
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D	X. DISEASES OF THE DIGESTIVE SYSTEM. diseases of the Buccal Cavity	{}	i		-	-	-	-	-		1 1			1 1	1 -	1.1		1.1	-			1.1	-	-	-			-		1.1	-	-	1.1	-	1.1	-	
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U	licer of the Stomach	{	E	-	-	1		1	-	1	1	-	-		-	1 -	1 -	-	-	-	-	- 2	1 1	- 04	-	1 :		1 -	-	-	1			-	11	2	
	licer of the Duodenum	{	E. O.	-	-	-	-	-	-	1.1	0	-	-	-	2 -	-	1 -	-	-	1	1	-	1 1	-	-	1		1 -	-	-	- 2	1.1	-	-	5	1	
0	Other Diseases of the Stomach (excluding Cancer)		E. O.	1	1.1	-		-	-	-	-	-	-	1	-	-	-	-	-	=	1.1	1.1	1.1	-		-			1.7				-		_1	-1	
	Diarrhoea and Enter- itis: Under 2 years		E. O.	-		1	-	-	2 -	5	5 -	4 3	2 -	ī	9 1	4 1	6 1	1	2 8	7 5	1	2	- 2	5 11	13	40	35	29 2	3 5	-	9 23	12	=	-1	21 169	12	THE OWNER OF THE OWNER, THE OWNER
I	Diarrhoea and Enter- itis: 2 years and over		E. O.	-	1	-	-	1	1	1 -		1 -	-				1	5 -	1	1.1	-	1.1	1.1	1	2	1	4	1 -	2 -	1 -	1	-	1	-	7		
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	Other Diseases of the Gall Bladder and Ducts	4 1	E.	1	-	1 -			1	-	-	1	-	-	1.1	-	-	-	1	-	1	-	1 -	-	-	1 -	1	-			: -	17.	-	-	3 2	27	-
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513	139d	X. (cont.). Other Diseases of the Female Genital Or- gans	{ E. O.		1.1	1.1		-		11		-	11	1.1					11	11	1.1	11		1.1			-	11		-		1.1		1.1
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550	140	XI. DISEASES OF PREG- NANCY AND PURE- FERAL STATE. Post-Abortive Sepsis	ſE-	-			-	-	-		-				-			-	1	-	- 1			-	1.1				-	-			1 1	1
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558	143	Other Accidents of Pregnancy	{ E. { O.	-	1 1	1.1		-	- 1		-	-		-		-	-	11		1.1	1 1					1.1	1.1	11		10	1.1	1.1	-	-
554	144 a b	Puerperal Haemorrhage	{E.	-	1.1	1.1		4 .		-	-	-	-		-	-	-1	~	-1	1.1	-1	1 1	11		-1	111	-	-	-			1.1	-4	-4
555		Puerperal Sepsis	{E.		-	1.1	-	-	11	-	-	-	-	-	-1	=	-4		1 3	-	2	-	-	1.1	1.1	1.1	1.1	100		10	-	1.1	1 10	10
556	146	Puerperal Albuminuria and Convulsions	{E.	-	-	-	-	-	-		-	-	-	-	-	-	1	-	-	-	-1	-	-		-	1.0	-	-		-	-	-	1 2	1 2
557	147	Other Toxaemias of Pregnancy · · ·	{E.	-	-	111	-			1.1	- 1	-	-	-	1 1	-	-		111	-	1.1	1.1	1.1		1.1	111	1.1	-	1.1	111	-		111	=
558	148 a b	Puerperal Phiegmasia Alba Dolens and Sudden Death	{ E.	-	- 1	-	1	N.C.		11	- 1	-	1.1	-			1.1	111	1 1	-	- 1	-		-	-	-		-	1.1	-	-	-		-
559	149	Other Accidents of Childbirth	{E. O.		-			-		-	-	-			1.1	1.1	- 1		2 2	=	3	-		-	1018	-	-	111	1.1	-	-	=	2 6	20
560	150	Other or Unspecified Conditions of the Puerperal State	{E. O.				6.4	171			-	1.1	1 1	1 1	1.1	-11	11	1.1	1 1	0	-		-	-	-	-	-	111		-	-	-	-	-
561	150	Puerperal Diseases of the Breast	{E.				1.1	1.1	1.1		-	=		+ +	1.1		1.1	1.1		-	-	-		-	-	-	-	-		1.1	-	11	-	-
		Totals for XL	{E.	=	-	-	-	-	-	-	-		-	=	-1	-	1 8		5 7	=	- 9	-	=	-	-1	=	-	=	-	=	=	2	6 26	6 26
600	151	XII. DISEASES OF THE SKIN AND CELLULAR TISSUE. Carbuncle	(E.	- 1	-			-	11			1.1		-					-	-			-	-	-	1		-	-		-	1	-	1
601	152	Cellulitis—	10.	-	-		1	-	-	-	1	-	-	-	-	-	-		1	-	-	-	-	-	-	-	-	-	-	1	-	1	2	3
602	153	Acute Abscess Other Diseases of the	\ (E.	- 0	-	-	-	-	1 1	-	-	-	-	-	-	1	1	-	-	-	-	-	1	-	-	-	-	-	-	-	-	1	1	1
		Skin and its Annexa Totals for XII	(O.	-	-1	-	1	-	-	- 2	1	-	-	-	-	-	1	-	- 1	-	-	-	-	-	-	1	-	-	-	1	-	2	3	5
-		XIII. DISEASES OF THE BONES AND ORGANS OF LOCOMOTION.	10.	3	2	-	-	-	-	3	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	2	5
650	154	Acute Infective Osteo- myelitis and Perio- stitis	{Е. О.	-	-	-	=	-		-	-	1 1	1.1	-1	=	-	-	=	-	1	-	=	-	-	=	-	-	-	-	-	=	- 2	-	- 2
651	155	Other Diseases of the Bones	{E.	=	-	-	=	-	-	-	-	-	-	2	-	-	-	-	-	1	=	-	-	-	-	-	-	-	-	-	-	3	-	3
652	156a	Diseases of the Joints	{E. 0.	-	1	-	=	-	-	-	1	-	-	-	-	-	-	=	2	-	-	-	=	-	-	-	=	-	-	-	-	-	-1	1
653	156b	Diseases of the Other Organs of Locomo- tion	{E.	-		-		-1		- 1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-		-	-	-1	1	1
		Totals for XIII	{E.	-	-1	=	-	-1	-	-1	-1	=	-	- 3	-	-	=	=	=	-2		-		=		-	1	=	=	=	=	-6	1 1	1 7
700	157a	XIV. CONGENITAL MALFORMATIONS. Congenital Hydroce- phalus	{E. O.	11	-	-			1	1.1	1								-		-	-	-		-	-	-	-		=	-	-	1	1
701	157b	Spina Bifida and Menin- gocele	{E. (0.	2	1	-				2	1		1.1		-			1.1	-	-	-	-	-	-	-	-	-	-	-	-	-	2	1	3
702	157e	Congenital Malforma- tion of Heart	{E. O.	98 99	3 6		-	-		2 3	3 6	-	-	-	-	-	-	=	-	-	-	-	-	-	-	-	-	-	-	-	-	2 3	3 6	5
703	157 d e	Other Congenital Mal- formations	{E. O.	2 3	_1			1.1	-	2 3	1		1.1	-			-	-	-	1	-	-	-	-	-	-	-	-				3 4	1	4
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750	158	XV. DISEASES OF EARLY INFANCY. Congenital Debility	{E. O.	1	-	7	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1
751	159	Premature Birth	{E.	8 26 83		-	-	-	-	26 83	12 59		-	-	-	-	-	-	-	-				-		-	-		-	-	-	26		38
752	160	Injury at Birth	{O. {E. O.			111		1 11		83 4 12	2		-	-	-	-	-	-	-		-	-	-	-	-	-	-	-	-	-	-	83	591	
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	CAUSE OF DEATH.	Race.	P	Sea oint		Har bou 2		Wei Cer tra 3	al la	Klo 4		Par 5		Cer tra 6	n-	7	tle	stor 8	ok	9	er	Mo bri	ay 0	lar 1	l l	1	ch 2	100	ant.	B: 1	ay 4	1	rg 15	dre tai:	d- ssee lu- cer- ned.			Persons.
-	Y (-	N	1. F		M1.	-	М.	F	М.	F.	31.	F.	М.	F	M.	F	M.	F	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	М.	F.	M.	Y.	201.	F.	20.	F.	
	X. (cowt.). Other Diseases of the Female Genital Or- gans	{E		:		-	-	-	-		-	-		-	-	- 1	-	1.1	- 1		-	-	-				-	-		1 1	-	-	-		1.1	-		
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	Ectopic Gestation	{	B. 1	-	-	=	-	-		-	-	101	-	-	1	-	-	1.1	-	-	-			-	-	-	-	-	-	=		-	-	1.1	-	-	1	-
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	Puerperal Phiegmasia Alba Dolens and	15	E.	-	-	-		1.1	-			-	-	-	3	-	-	-	-	+	- 13		-	1.1	-	10	-	-	-	101	-	-	-	-	131	-	-	-
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	SKIN AND CELLULAR TISSUE. Carbuncle	5	E. O.	-	-		-	-		1		-	-				-	1.1		1.1		-	-	1 1	+ 1	-	-		-		-		-	-		1	-	1
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	Other Diseases of the Skin and its Annex	5	E.	-			-			-	1 1	- 1	-	-1	1	1.1	- 1	-		-	-			-1	-1	-	1.1	1	1.1	-	1.1	=		-	-	- 2	1	1 3
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	NIII. DISEASES OF THE BONES AND ORGANS		0.					-	-				-	-								_	H							-	-							-
	OF LOCOMOTION. Acute Infective Osteomyelitis and Periostitis	: {	E.	-	-		-	-	-		-	-	-	-	-	1	131		- 1	- 1		-	-	-	-	-		-	-	-	-	-,	-	-	-	- 2	-	- 9
5	Other Diseases of the	5		-		- 1	-		-	-	-	-	-	-	-	- 1				- 1	-	1 1	-	-	-	5	-	-	1.1	-	-	-	-	-	-	-3	=	- 3
54	Bones		E. O.		-	-		-	-	-			101	-		-	1.1			-			- 1		-				11	1 1	-	171	17	-		-	-1	- 1
1	Diseases of the Other Organs of Locomo						-	-	-	-	-	-	-	-	-	-	-		-	-			1		-	-	-	+	-	-	1	-		-	-	-		1
	Organs of Locomo- tion	100	0.00	-	_	-	-	-		-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-,		-	-	1	1	1 1 7
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74	Malformations. Congenital Hydroce phalus		E. O.	-	1.1	=	-	-	-		-	-	-	-	-	-				1.1	1.1	-	-	-	-		-		-	-	_1		-	-	-	-	_1	1
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	XV. DESEASES OF EARLY INFANCY.	7									T	T												-		-								-	-	1	-	,
P	Congenital Debility .					-		1	1.1	1	-	1 1	-	-	-			-	- 9	1		-	1	1 13	1	,	-	4	2	1 3	1	-	1	1	1	26	12	38
0	Premature Birth	1	E. O.	-	-	-		-	3	4		-	-	19	7	6	3	5	2404	5	3			3 3	-	17	12	15	- 22	-	-	8	1	-	1	83	59	141
	Injury at Birth	1	E.	-	-	1	-	-	-	1	-		13	-	5	-	-	1	-	2	-	-	-	-	-	3	-	1	1	2	1-	1	i		-	12		11

cat	ath ssift- tion						AG	E-GE OPE	ANS	BU	Cos	CORE	TED	FOR	FOR	01	D A	ARD	TR	ANSI	D Tr	ON	FERS LY I	IN T	HE (CASE	OF				1	от	A
code mo:	International Code No.	CAUSE OF DEATH.	Race.			1 5	2	-	to	un	otal der 5	1	to 0	1	to 5	2	to 5	3	to 5	35	5	45	5	55 to 65		5 to		5 to 85	п	85 and ap-	8		-
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8	16)	XV. (conf.). Other Diseases peculiar to Early Infancy	{E.	5 16	3 11	-	- 1	-	-	5 16		-	-	-	-	-	- 1	-	-	-	-	-	-		=	1:	-	=	=	1:	5	11	
		Totals for XV	{E.	36	17	-	=	-	-	-	17		-	-	=	-	=	-	-		=	=	=			1	-	=	-	-	-	17	
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0	162	Old Age	{E. 0.	=	-	1 1	-	-	-		-	-	-	=	-	-	-	-	=	-	-	=	- :		-	1 1		5 3	9			13	
		XVII. DEATHS FROM VIOLENCE.								-	-	70.7					-																
1	163- 171	Suicide	{E. ⊙.	-	=	-	=		-	-		-	-	=	-	101	-	6	1 1	1	-	-1	= .	2 1	1		-	-	1.1	-	11	3 1	1
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1-	184- 186, 194	Accidental Injury other than men- tioned below	{E. O.	1.1	1.1	1.1	111	2	1.1	2	11	-1	11	1.1	11	1 2	-1	3	_1	1 4			-	1 1		-1	11	1	11	11	7	3	1
	176	Attack by Venomous	{E- 0.	-	-	-	=	-	-	-	-	-	-	-	-	-	-	-	-	-1			: :	=	=	-	-	-	1.1	-	-	-	-
	177	Food Poisoning	{E.	-	-	- 1	1.1	-	1.1	-	-	1.1	-	-		-	-	-	-	-				-	=		-	-	-	-	-	-	-
5	178	Accidental Absorption of Irrespirable or Poisonous Gases	{E. O.	-	1	1.1	1.1	-	1.1	101	1	11		1.1			-			-	-	-	-	-	11	1.1	111	-	-	-	1	1	
	179	Other Acute Accidental Poisoning (Not by Gas)	{E. O.	-	-		-1	-	-	-	-1		-	-	-		-	-	=	- 2	=	- :	: -	-	-		-	=	=	=	- 04	-1	-
	180	Conflagration	{E.	-	-	-	-	-	-	-	-	-	-1	=	-1	-	-	=	=	20.0	=		: :	-	-	-	-	=	-	-	-	- 2	-
3	181	Accidental Burns	{E.	-	-1	1	=	-1	1 2	1 2	1 3	-	-1	-	-,1	-	-	-	-	-	-	- :	: :	1	-	-	-	-	-	-	1 2	2 5	
	182	Accidental Mechanical Suffocation	{E. O.	-1	=	-	=	-	-	-1		-		=	-	-	-	=	-	-	-	- :	=	-	-	=	-	-	-	-	-	-	-
,	183	Accidental Drowning	{E.	-	-	1	- 1	-1	-	1	-,	-,	-1	-	-	1 2	-	-	-	-	-	1 -	-	-	-	-,	-	-	-	-	3 4	-3	
5-1	186	Accidental Injury by Railway, Road and Other Transport	{E. O.		1.1	171	-	2		2	-	35	- 1	1 2	-1	710	-1	3 3	2	2 9	2	6 -		1	3 1	2	3	1	=	-	34	6 5	43
5	187	Cataclysm	{E. O.	-	-	-	=	-	-	-	-	-	-	-	-	-	-	=	=	-	-	- :		11	=	-	-	-	-	-		-	11
7	188	Injury by Animals	{E.	-	=	-	-	-	-	-	-	-	-	-	-	-	-	-	0000		-	- :	-	-	-	-	-	-	-	-	-	-	-
8	189	Hunger and Thirst	{E.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	=	-	-	=	100	-	-	-		-	-
9	190	Excessive Cold	{E.	-	-	-	-	-	-	1		-	-	-	-	-	-	-	-	-	-	-		-	-	-		-	-	-	-	-	-
0	191	Excessive Heat	{E. (0.	-	-		-	-	-	-	_	-	-		-	-	-	-	-	-	-	-		-	_	-	1		-	-	-	-	-
1	192	Lightning	JE.	-		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-				-	-	-	-	-	-	-		-	-
2	193	Electricity (Lightning	(0.	-	-	-	_	_	-	-	-	-	-	-	-	1	-	-		-	-1			-	-	-	-	-	-	-	-	-	-
	194	Excepted)	(B.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-			-	-		-	-	-	-	1	1	-
	194	Killed in Riot	(O.		1						-	1 1		-		-	-	- 1	-	-		-		-	- 1	-	-	-	-	-	-	-	1
	195	Violent Deaths of Un- stated Nature (Open	{E. (O. ∫E.		-		-	-	-	-	-	-	-	-	-	-	-		-	-	-	-		-	-	-	-	-	-	-	-	-	
7	196	Verdict) Wounds of War	{ E.	-	- 1		1 1	-		-	-	-	-	-		-	1		-	1000				-		-	-	-	-	-	-	-	-
	197	Execution of Civilians	{ o. ∫ E.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-	-	-	-	-	-	-	-
	197	by Belligerent Armies Judicial Execution	10.	-	-	-	-	-	-	-	-	-	-	-	-	111	-	-	-	-	-	-		-	-	-	1	-	=	-	1	=	-
-	198	Totals for XVII	{ 0.	-	=	=	-	-	-	-	=	-	-	-	-	-	=	- 10	-	=	-	-	-	=	-	-		=	=	-	-	=	-
		XVIII. ILL-DEFINED	{ ö.	4	3	i	2	2	2		7	7	4	3	3	10	4	10	6	18	1			7 5	6 3	3 2	-	-	-	=	63 72	16 27	79
		DISEASES,	-	1												30%	1	7.0						1					-				
	199	Sudden Deaths	{ o.	1	-	17	1-	-		-	=	-	-	=	-	-		-1	-	-	=	-1	1 -	=	-	-	-	-	-	-	- 2	-1	
51	200	Cause of Death Un- stated or Ill-defined	{E.	1	-4	-	1 = 2		-1	1 8	-	-	-	-	-	=	=	-	-	1	1	=		2 -1	1	1	-	-		-	10	1 8	1
		Totals for XVIII	{E.	1	-4	-	=	-	-1	1 8	-	-	=	=	-	-	=	1	-	-,	1	1	1	2 -	-,	-	=	-	=	=	5	918	

h fi- n.	13/13-14						w	ARD	s : 4	Con	RECT	ED :	FOR	Out	(WAI	BD T	CRAN	ESFE	RS E	UT	NOT	FOR	Inv	VARI	o Ta	ANS	FER	s.			_		ea Re	esi-	TO	DTA	LS.
Code No.	CAUSE OF DEATH.	Bace.	Pol	nt 1	bo	ar-	We Ce	n- al	KI	oof	Pa		Ce	al al		tle		iek	SaRiv	ver	Mo bra		Ma iar 1	nd		ich	Cla mo			ilk- ay 4	be	yn- erg. 15	dre U	stial d- sses n- rer- ned.			Persons,
9		_	M.	F.	М.	F.	М.	F.	М.	F.	М.	F.	М.	F.	М.	F.	М.	¥.	M.	F.	М.	F.	М.	F.	М.	F.	М.	F.	M.	F.	М.	F.	M.	F.	M.	¥.	
61	XV. (cont.). Other Diseases peculiar to Early Infancy	{ E. O.	=	-	-	-	-1	=	-	-	1	1	-4	-,	-	- 04	- 2	-	2	1	-	-	1	1	- 2	- 1	1	-	-	-1	- 2	- 2	-	-	3		8
	Totals for XV	{E.	-	-	1		-	-	1	-	1	=	1	1	-		2	2	7	4	3	2	6		1	-	6	- 2	2	-	-	2	-	-		17	-
	XVI, OLD AGE.	10.	-	-	1	2	1	2	7	3	-	-	16	16	7	5	8	2	9	3	4	3	-4	4	23	15	18	-8	9	11	12	-8	-	_1	119	83	202
62	Old Age	SE.	1	-	-1	-	-	-	-	1	2	-	-	2	-	-1	-	1		1	-1	-	3	-	-	1	2 1	3	-	-	-	3	-	-	10	13	23
		{E.	-	-	-	-	-	-	1	1	-	-	-		-	2	-	-	_1	-		-	-	1	3	92	1	_1	-	-	3	4		-		11	
	XVII. DEATHS FROM VIOLENCE,																																				
63- 71	Sulcide	{ E.	3	-	-	-	-	_1	-	-	1	-	- 2	-		-	1		-	=	1	_1	-	-	3	-	1	-1	1	-	-	-	-	-1	10		13
72- 75	Homleide	{ E.	-,	1	- 92	-	-	-	=	-	-	-,	1 3	-	1	-1	1	-1	-1	Ξ	-	-	1 2	-,	-	-	-	-	-	-	-,	-	1	- 2	5	1	6
84-	Accidental Injury	(0.	1													ľ								i							1		5		10		23
94	other than men- tioned below	{ o.	1	-	1		11	-	1.1	1.1	-	-	1		1	1	1	1	1	-	-	1.1	1	-	-	-	3	_1	10	-	1	101	1	1.1	11		10
76	Attack by Venomous	₹E.	-	-	-,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	=	-	-	-	-	-	-	-	-,	-	-
77	Animals	€ 0.	-	-	-	-	-	-	1		-	-	-	-	_	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			-	-	-	-
78	Accidental Absorption of Irrespirable or	€ 0.	-	1	-		-	1	1	1	1	-		1	-	1	1 1	-	-	-	-	-	-	-	-	-	-	-		-	- 1	-	1	-	1	1	2
79	Poisonous Gases Other Acute Accidental	10.	-	-	-	-	-	-	-	-		-	-		-	-	-	-		-		-	-	-		-	-				1				1	-	1
	Poisoning (Not by Gas)	{ E.	-	-	-	-	-1	-	-	-	-	=	1	=	-	1	-	=	Ξ	-	-	-	-	-	-	-	-	-	-		-	-	-	-	2	1	3
80	Conflagration	{ E.	-	-		-	-	-	-	-	-	-	-	=	-	=	-	-	-	-	1.1	-	-	-	=	-	-	-	-	1 1	-	- 2	-	-	-		- 2
81	Accidental Burns	CE.	-	-	-	-	-	-	-	1	1	1	-	-		-	-	-		-	-	-	-		-	-	-	_	-	-	-	-	-	-	1	24	3
82	Accidental Mechanical	(O.		_	-	-	-	-				_	-	_		_1		-1	-		-			-	-	-			_		-1	-	-		-	-	7
	Suffocation	10.	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-	-	-	1	-	-		-	-	-	-	-	-	1	-	1
83	Accidental Drowning	{ E. O.	-	-	1	1	-	-	-	-	-	-	-	1	-	=	=	-	1	=	-	-	-	=	-	-	-	-	1	1	-	-	1	-	4	3	7
86	Accidental Injury by Railway, Road and Other Transport	{E. O.	2 -	2	1	-1	1		1		2	-1	4 3	-	1 3	- 2	-3		3	1.1	2 -	2	4 3	1	914	-	3 4	-	-1	-	4 6	-	1	-	31 30	5	31 35
87	Cataclysm	{ E.	=	-	-	-	=	-	-	=	-	=	=	=	=	=	=	-	-	-	-	-	=	=	=	=	-	=	-	-	-	-	-	-	-	=	-
88	Injury by Animals	SE.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
89	Hunger and Thirst	{ 0. { E. 0.	-	-	-	-	1	-	1.1	-	-	-	-	-	-	-	-	-	-		-	=	-	-	-	-	-	-	-	-	-	-	-	-	-	-	=
90	Excessive Cold	30		-	-	_		_	-	_	-	-	-	-	_	-	-	-	-	-	-	-	-	-	_	-	-	-	-	-	-	-	-	-1	-	-1	-
00		{ o.		-	-	-	-	-	-	-	-			_	-	-		-	_		_											-			-		-
91	Excessive Heat	{ O.	-	-	=	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
92	Lightning	{ E. O.	-	1.1	-	-	-	-	-	-	-	-	-	-	-	-	-	1 1	-	-	-	-	-	-	-	-	-	-	-	=	-	-	-	1.1	-	-	-
93	Electricity (Lightning Excepted)	{ E. O.		-	-	-	-	-	-	-	=	=	-	=	-	=	101	-1	-	-	-	=	1	-	_1	-	-	1.1	-	=	=	-	-	-	1	1	1
94	Neglect-Infants	{ E.	-		-	-	-			-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
94	Killed in Riot	{ E. O.		-	-	-	-	-	-	_	-	-	-	-	_	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
95	Violent Deaths of Un- stated Nature (Open	CE.	-	-	-	-	-			-	-	1	-	-	-	-	-		-	-	_	_	1 1		-	-	-	-	-			-	-	-	-	-	-
104	Verdict) ,.	10.	-	-	-	-	-	-	-		-	_	_						-	-						_	-	-							-		-
196	Wounds of War	{ E.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
197	Execution of Civilians by Belligerent Armies	{ E.		-	=	-	-	1 1	-	-	-	1	-	-	-	-	1.1	1.1	-	-	-	-	-	-	-	-	1 1	-	-	-	-	-	-	-	-	-	-
198	Judicial Execution	{ E.	=	-	-	-	-	-		-	-	-	-	-	-	-		-	-	-	-	-	-	-	-	-			-			-	-	-	-	-	-
1	Totals for XVII	{ E.	6	4	2 5	- 2	1 2	1	1	1	7	1 2	5	1	2 4	- 6	2 4	-4	5	-	3	3	5 7	1 3	7.5	1 3	4 9	2	1 2	-1	5	- 02	2 8	- 3		15	73 19
3	XVIII. ILL-DEFINED	. 0.	-	-	-	-	-	-	-	-	-																			-	-		7				
199	Diseases, Sudden Deaths	{ E.	-	-	-	1	-	-	1.1	-	-	-	-	-	-	=	- 1	=	-	-	-	-	1 1	-	-	-	-	-	-	1 1	-	-	-	-	-	-	Ξ
000	Cause of Death Un-	SE.	-	1	-		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1 1	-	-	-	-	1		-	- 0	1	-	-	-	2	1	3
1	stated or Ill-defined Totals for XVIII	(O.	-	-	-	-	1	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	3	-	-	-	1	-	-	-	1	-	-	-	2	1	10
	Total for Avill	{ 6.	-	-	-		1	-	-	-	-	- !	1	-	1	-	-	1		-	-	-	3	-	1	3	-	-	1	2	2	2	-	-	10	8	18

TABLE A2. DEATHS OF ASIATICS CLASSIFIED AS IN TABLE A1 (Included in Table A1)

I 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 10 30	CAUSE OF DEATH. Typhoid fever Whooping cough	0 t		1 2 M.	2	2 8		Tot			8			51				-							1			8	5			
I 30 I 31 I 33	30	Typhoid fever Whoosing cough	M.	F.	M.		100				1		10	,	2:		25 35	5	35 43	5	45	-	65	5	71	5	75 85	5	up war	nds			Persons
I 30 I 31 I 33	30	Typhoid fever Whooping cough				F .	М.	F.	M.	F.	М.	F.	M.	F.	М.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M	F.	M.	F.	
I 30 I 31 I 33	30	Whooping cough		- 1	7	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	100	-	-
I 31		Account the street of mount	-	1	-	-	-	-		1	-	-	-	-	-	-	-	-			-	-	-	-	-	-		-	-	-	-	1	1
I 33	31	Tuberculosis of respi- ratory system	-	-	_	_			-		-		1	_	-1	-	_	1	2	-	-		1		_	_	_	-	4	-	- 5	1	6
130		Tuberculosis of central									18		1					1															
130		nervous system	-	-	-	-	=:	-	-	-	1	-	-	-	-	-00	-	-		-	-	=	-	-	-		=	-	-	-	1		1
II 10	29	Tuberculosis of verte- bral column		-	-		-	-	-		-	-	-	-	-	-	-	_	-	-	-	-	-		_		1	-1			1		1
	01	Cancer of the digestive																													100		
-		organs and peri-												_			_		1				2								- 0	_1	9
II 100	06	Cancer of the breast				-					13				-	-			_^	-		1	-						=		-	1	1
		Cancer of other or un-																															
II 121	0.1	specified organs	-	-	-	-		-	-	-	17	-	-	-	-		-		-	-	1	-	-	-	-	-	*		-		1		3
11 12	21	Non-malignant tum- ours : other sites	-	-	-	-	-		-	-	-	-	-	-	-	-	-	-	-	4	1	-	-	-	-			-	-	-	1	-	3
III 153		Diabetes	-	-	-	-		-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1	-	-	-	-	1	-	-	3	-	3
III 15	57	Rickets Diseases of the adrenals	-	-	-	1		-	-	1	-	-	-	-	-	-	-	-	-	-	-		-	-	-		-	-	-	-	-	1	3
111 100	00	(Addison's disease)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	100	-	-	-	-	-	-	-	-	-	-	-	1	-	1
IV 200	05	Lymphadenoma-																															
VI 31		Hodgkin's disease Infantile convulsions	-	-	-				-		1	-	-	-	1	-	-	-	7	-				-	-	-	-	- 1	-		1		3
41 31	**	(under 5 years)	-	-	1	-	-	1	1	-		-	-	-	-	-	-	-	-	-	-	-	-		-		-	-	-		1	-	1
VII 355	52	Chronic endocarditis																															
Direct St		and valvular disease of the heart	-	-	-	-			-	-	-		_	-				1	- 1	-	_	-	_	-		_	_		-	-	- 1	1	2
VII 35	55	Other diseases of the								15									1												100		17
	-	myocardium	-	-	1-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	=	-	-	-	-	-	-	-	1	3	1
VII 35	26	Disease of the coro- nary arteries-an-									1																						
		gina pectoris	-	-	-	-	-	21	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	1	-	1
VII 35	59a	Arterio-sclerosis with-																														19	
		cerebal haemor-	1-	-	-	-	-	12	-	-	14	-	2	-	-	-	-	-	-	-	_	-	- 3	-	2	-	1	-		-	6	-	6
VII 359	59b	Arterio-sclerosis with			1																												
		other cerebral vas-	-								-											_	-								1		,
VII 35	59c	cular lesion		1	-					1	10	10		1	5					170													-
		out record of cere-	-																												7 10		-
VIII 400	-0.	bral vascular lesion Bronchitis, chronic	4 -	1		10		-			1	13		-									-	-	1						1	-	1
		Broncho-paeumonia	1-	-	1		-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	î				-			-	2		2
VIII 40	05	Pneumonia, lobar	-	-	-	-	-	-	-	1-	-	-	-	-	-	-	+	-	-	-	1	-	-	-	-	3	-	-	-	-	1	-	1
VIII 41	12	Other diseases of the respiratory system	-	-	-	_	-	-		-	-	-		-		_	-	_		-			-	_									
IX 45	59	Hernia		-	-	-	-	-	1	-	-	-	-	12	2	-	-	-	-	-		-	-	-	1		-	-	-		2	-	2
X 50	01	Nephritis, chronic	-	-	-	-	-	-	-	1-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	-	-	-		2	-	2
X 50	07	Diseases of the pros-	1	1		-			1	1	-	-		-	-	-	-	-		-	1	-	_	-	1			-		-	1	-	
XV 75		Premature birth	2	-	-	-	-	-	0	-	-	-	-	+	+	-		-	-	-	-	-	-	+	+		-	-	-	-	2		2
XV 75	52	Injury at birth	1	1	-	-	**	-	1	. 1	1 19	-		-	-	-	-	-	-	-		=	-	-	-		-	-	-		1	1	2
XVII 85		Homicide	-				-		150		1	-					6	-					-	-	1			-			1		1
00		Totals		-2	-	-	-	-	-	-		-	-					2	8	-	- 5		10	-	-		-	-		-	42	-	8

ABLE A2. DEATHS OF ASIATICS CLASSIFIED AS IN TABLE A1 (Included in Table A1)

																	WA	RD	8.													All cat Re den A	est- atial	то	TA
No.	CAUSE OF DEATH.	Se Poi	int.	Ha box	ur	We Cer tr	n-	Kle		Par 5		Ce tr	al	Cas 7	tle			SaRi	ver	Mora bra	LY.		nd	bo	nde- sch 2	me	are- ont 3	B	alk ay 4	be	yn- irg 5	U	n- cer- ned.		
		M.	F.	M.	F.	М.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
10	Whooping cough	-	ten.	-		-	-	-	-	141	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	**	-	-	-	-	-	-	1
30	Tuberculosis of respi- ratory system	-		1										,		,		,								- 1							-	5	1
31	Tuberculosis of central			^										-		-				1															
33	nervous system	-	-	-	-	-			-		-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-	-	1	-	-	-	1	-
00	Tubercolosis of verte- bral column			-	_						-	_		1	_	_	-	-	_		_	_	-	-			_		-					1	-
01	Cancer of the digestive													-					-																
	organs and peri-					٠,						٠,					-																	3	
06	Cancer of the breast		I		-	- 1						- 1		-	-	-		_ '	1			В											-	-	1
9	Cancer of other and																																	1	
1	unspecified organs Non-malignant tum-	-	173	-	-	-			-	-				-	-	-	-		-	1	-			-		-		-		5		-	-	1	-
3 1	ours : other sites	-	-	-	-	-			-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	1	-
	Diabetes	-	-	-					-	-	-	1	-	1	-	-	-	-	-	-	-		-	-	-	1	-	-	-	-			-	3	-
	Rickets Diseases of adrenals						-		-	-			-				-		-		-		-	-	-			-							1
	(Addison's disease)		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-
5	Lymphadenoma— Hodgkin's disease										-		2				-																	1	
1	Infantile convulsions									-	-							-			7	1												13	
	(under 5 years)	-	-	-	-	-	-	-	-	-	=	-	-	-	-	-	-	+0	-	+	-	1	-	-	-	-	-	-	-		-	-	-	1	-
2	Chronic endocarditis- and valvular disease																																		
	of the heart	-	-	-	-	1		-	-	-	-	-	1	-	-	-		-	-	-	-	-	-	-	-	-	-	-	-	-	-	- 1	- 1	1	
55	Other diseases of the																					3				- 1								1	-
6	myocardium Disease of the coronary										-			-	-					-					-									*	
	arteries-angina pec-																						3											-	
000	toris	-	-	15	-	+	-	1			-	-	-	-	-	77	-	-	-		=	-	-	-	-	-	-	-	-	-		-		1	
A PARK	cerebral haemor-																																		
	rhage	-	-	-	-			-	-	.=	=	2	-	-	-	-	-	-	-	-		1	-	-		3	-	-	-					6	
OND.	Arterio-sclerosis with other cerebral vas-																																		
	cular lesion	-	-	-	-	-		-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-
9c	Arterio-sclerosis with- out record of cere-															-																			
	bral vascular lesion		-	-	-	1		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			-		-	-	1	-	1	-
Sa	Bronchitis, chronic	-	-	-	-	1		-	=	-	-	-	-	-	-	-	-	-		-	-		-	-	-	-	-	-	-		- 1	-1		1	
5	Broncho-pneumonia Pneumonia, lobar	-	-	-	-					-	-	-	-	1		-	-	-	-		-	-1	-	-1		-	-		-	-	-		-	2	
9	Hernia	-	-	-	-	-		1	-	-	-	-	100	1	-	16.	-	-	-	-	44	-	-	-	-	-	-	-	-	-	-	-	-	20	-
	Nephritis, chronic	-	-	-	-	-		-	-	=	-	-	-	-		=			-	1			-	-	-	-	-	1	-	=		5	-	2	
	Diseases of the prostate Premature birth	-	E		B	-				-	_	1	-	-				1	-	-	-	-		-	E	-			-	-		-	-	2	
2	Injury at birth	-	-	-	-		-	1	-	-	-	-	1	-	-	4	-	-		-	-	-	-	-	-	44	-	+	-	-	-	-	-	1	1
59-	Homicide	-	-	-	-	-	-	-	-	-	200	-	-	-	-	-	-	-	-	-	-	A		-		-	-	-	-	-	-	7	-	1	
74	The second second											0																							

TABLE A3. DEATHS OF NATIVES (NOT RESIDENT IN LANGA) CLASSIFIED AS IN TABLE A1 (Included in Table A1)

Sec-																																	
Asont.	No.	CAUSE OF DEATH.	0 5		1 1		2 t		Tot und 5	ler	5 10	0	15	-	15 25		25 35		35 45		45 50	5	55 t 65		75	8	to 5	u wa	nd ip- irds		-	Persons.	Deaths in C
			M.	F.	М.	F.	М.	F.	M.	F.	М.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M. I	. M	F.	M	F.			M.	F.	-	M.
																									1	1	1						
I	10	Whooping cough Diphtheria		1	1	1	-	1	1	3						-	-	-					-		15	=	-	-	3	1	0	4	
1	12	Influenza (with pul- monary complica-																								1			-		1		
1	15	tions specified) Dysentery, amoebic	-	-	-	-	=	-	=	-	-	-	- 4	-	1	-	-	-	1	-	-	-	-	-	1 =	-	-	-	-	2	-	2	-
Î	16 29	Dysentery, bacillary	=	-		-	2	-	=	-		-	-	=		3	-		-	3	1				1=	-	3	1=	-	1	-	1	
Î	30	Tuberculosis of respi-				-					-	-		-									1		1	-		1		1		1	
I	31	ratory system Tuberculosis of cen-		~	-	3	١,	3	1	6	1	1	-	1	3	6	10	3	10	5	5			-	-	-	-	-	-	30	22	52	9
1	32	tral nervous system Tuberculosis of intes-		-	1			1	1	1	-	1	-	-	-	-	-	-	-	-	-	-	7	-	-	-	-	-	-	1	2	3	-
1	38	tines and peritoneum Tuberculosis of other	13	-	5	-	-	-	-		-		-	-			-		-	1	-	-			15	-	-	-	=		1	1	-
1	39	Acute disseminated	-		-	-	-	-	-	-	-		-	-		-	-	-	-	-	-	-	-	-	-	-	-	7	=	-	-	-	1
1	40	tuberculosis Chronic disseminated	-1	-	-	+	-	-	1	-	-	-	204	-	-	-	1	-	-	-	-	-		-	-	-	-	-	2	2	-	2	-
-	100	tuberculosis	-	-	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-	-	-	-	1	-	1	-
i	42 45	Syphilis Purelent infection—	2	-	-		-	-	2					-	1	-		1	2	-	2	-	-	-	-	-	-	-	-	7	1	8	-
		septicaemia (non- puerpecul)	-	-	-	-	-		-	_			_		15		1					_	-	1.	12					1		1	
11	101	Cancer of the digestive organs and perito-																															
II	121	neum	in	-	-	-	-	4	-	-	-	-	-	-	-	-	1	-	-	-	2	-		-	-	-	-	-	-	3	-	3	1
	19581	mours; other sites	-	-	-	-	-	-	-	-	-		-	-	+	-	-	-	-	-	-	-	+	- 7	-	-	-	-	-	-	-		1
Ш	150a	of the heart	-	-	-	-	-	-	-	-	-		-	-		_	1	-	_	-	-	-	-		-	-	-	-	-	1	-	7	-
IV	200	Purpura Haemophilia	-	-,			-		1	-1		-		-			1		-						1=	-	-	5	-	1	-	1 2	-
VI	310	Epilepsy Diseases of the ear and	-	-	1	-	-	-	-	=	-	-		-	1		-	-	-	-	-	-		-	-	-		-	-	î	-	ĩ	+
	100	mastoid sinus	-	-	-	-	-	1	-	-1	-	-	-			-	-	-	-		-	- 1		-	-	-	-	-	-	-	1	1	-
VII	351	Pericarditis Acute endocarditis	-	-	13	-	-	-	-	-	-	-	8					1	1			-1	-		-	-		-		1	1	00	3
VII	352	Chronic endocarditis and valvular disease																													1		
VII	353	of the heart		-	1	15		-	-	-	-						=	-	-	-	2		- 1	-	1	E	-	-	-	2	-	2	1
VII	355	Other diseases of the myocardium																1	0													1	
VII	356	Disease of the coronary															-	-	2						10	10		-		2	1	3	
		arteries — angina pectoris			-	-	-		-	3	-	-		_	_	-	_	-	-		1	-			-	-	-	-	-	1	-	1	-
VII		Other diseases of the heart			-				-	12	-			_			1	_			1		-			2				9		0	
	358	Aneurysm Other diseases of the		-	-		-	-	-		-	-	-	-	-	-	-	-	-	-	15		-	-	-	-			-	-7	-	-	1
VIII	1000	arteries Bronchitis, acute		13	-				- 1	3	-	=	-	-			-	-		1	-				-	-		-	-	-	1	1	-
VIII	40da	Bronchitis, chronie	1	-	-		-	-	1	-	-	-	-									1			1				-	1	2	6	
VIII	404	Broncho-pneumonia		. 9	2	3		1	7	13	=	1	-				1	-	-					-	-			-	-	9	14	23	3
VIII	407	Pneumonia, lobar Empyema	1	-	-			-	- 1	1	-	=	-	1			1	_1	1		3				-	-	-	-	-	6	1	8	2
VIII	412	Pulmonary congestion Other diseases of the		-		-	-	-		-	-	-	-	-	-	-	-	-!	1	-		-			-	-	=		-	1	-	î	-
		respiratory system	-	-	-	-		-		-	-	-	-	-	-		-	-	1			-		-	-	-	-	=	-	1	-	1	1
		Diseases of the pharynx and tensils	-		1		-	-	1	-	-	-	-	-	-	_	-	-	-	-	33		- 0	. 2	-	-	-	-	-	1	-	1	-
IX	453	Ulcer of the stomach Ulcer of the duodenum	-	-	-			-	-	-	-	-	-		-	3	1	-1	1		- 2		-	1 3	-	-	-		-	3		3	
IX	156	Diarrhoea and enter- itis : under 2 years	10	10	3	4			13	14			_					_							-						14		
IX	457	Diarrhoea and enter- itis: 2 years and over																												10			
IX	460 463	Intestinal obstruction	-		1	13	-	-		-	-	-	-	=	-		-	-	B		1	-		-	-	-	=		-	1	-	1	-1
LA	100	Cirrhosis of the liver: not returned as al-																															
X	500	Nephritis, acute			-	-	-,	-	-1	-		1	3	-		=	-					-	- :	13	1	=	-			1	-1	- 2	1
XXX	501	Nephritis, acute Nephritis, chronic Nephritis: not otherwise	-		-	-	-	-	1	-	-	***	-	-	-	-	-	-	1	-		-	-!	1 -	1	-	-	=1	-	î	2	3	1
X	503	defined Other diseases of the	-	-	-		-	-	-	-	-	-		-	-	-	-	-		-	1		- 1-	-	-	-	-	-	-	1	-	1	-
	554	kidneys and annexa	1	-		-	-	-	1	-	-		3	-	-	-	-	-		-	1	-		-	-				-	2	-	0	1
XI	559	Puerperal haemorrhag Other accidents of	-					-	-		-	-		-	- 1	1	-	-		-				-	-				-	-	1	1	-1
XII	602	childbirth Other diseases of the	-	-	**		-			7	-	-	-	-	-	-	-	-		-	7	-	-	-	-				-	-	-	-	-
XIV	702	skin and its annexs Congenital malformation	-	1	-	-	1	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-		-	-	1		-	-	-	1	1	-
	TO DE	Communitat delifter			-	-	-	-	-	-	-		-	-			-	-		-	-			-	-	-		-	-	-	-	-	-
XV	750 751 752 758	Premature burth	7	4		-		-	7		-		-	-			-	-	-		-		11.	1	-					7	4	11	
XV	753	Other diseases peculiar	5	1	-	-	-	-	. 3		-		-	-	-	-	-		-	-		-	-1-					-	-	5	3		-
	859-	to early infancy Homicide	-	1	-	-	-	-		1	-	10	-	-	- 2	1	-	-	-	1		-	11:		-		-		-	- 2	1	1 2	1 :
XVII	562 566	Other scute accidental																		1													
XVII		poisoning(not by gas) Accidental burns			-	-		-		-	-	-	-	-	=		-	-	1	-	-				-				-		-		-
XVII	869	Accidental mechanical													-														-	-	1	1	-
XVII	871-	Accidental injury other	1		17		7	-	1														-1-	1				-	-	1		3	- 1
	182	than mentioned be-				1											1		-	- 1	-									1	_	1	3
	483,																		7											1		1	
XVII		Accidental injury by railway, road and																						1									
VVII		other transport		-	-		-	**			1	1	1	-	-		1	-	4	-	-					-	-	-	-	7	1	8	3
XVII	100	Violent deaths of un- stated nature (open																						1									
		verdict)	-		-	-	-		-		-	-	-	90	-	-	-	-		-	-	-	- 1 -	-	-	-	-	-	-	-	-	-	1 -
MAN	951	Cause of death un-																															
ZAIII	951	Cause of death un- stated or ill-defined Totals	1	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-1-	-	-	-	-	-	-	1	-	1	-

TABLE A3. DEATHS OF NATIVES (NOT RESIDENT IN LANGA) CLASSIFIED AS IN TABLE A1 (Included in Table A1)

Code	CAUSE OF DEATH.															w	AR	DS.														A ca R dei	fot ilo- ted. esi- ntial		OTA	LS.
No.		Se Poi	int	Ha box	ur	We Cer tra	n- al	Klo 4		Pa	rk	Ea Ce tr	m-		stle	stc	ood- ook 8	Ri	alt ver	br	ay 0		nd	Rot bos		me	ont	B	alk ay	be	yn- rg 5	no.	n- cer- ned.			nons.
		and the last		M.	F.	М.		M.	F.	M.	_				-		F.	Descripti		2000	F.			M.			F.						F.	M.	F.	2
10 11 12	Whooping cough Diphtheria Influenza (with pul-	-	1 1	1.1		-	1 1	1.1	-	-	1 1	1.1	-	1.1	-	-	1.1	-	-	-	-	-	- 2	-	1	1.1	-	-	-	1.1	-	-	1	-	1	1
15	monary complica- tions specified) Dysentery, amoebic	-		1	-	1	1 1	-	-	=	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1	-	-	-	1	2		2
16	Dysentery, bacillary	-	1	-	-	1.1	1 1	1	-	-	-	-	-	-	-	=	-	-	-	-	-	-1	-	î	-	-	-	-	10	- +	1	=	-	1	-	1
30	Tuberculosis of respi- ratory system	2	1	2	1	00	1	4	1	-	-	0	2	00	3	92	-	-	-	-	=	4	3	7	6	-	-	1	4	1	-	1		30	22	52
31	Tuberculosis of the cen- tral nervous system Tuberculosis of intes-	-	-	-	-	-	-	-	-	-	7	-	-	-	1	-	-	-	-	-	-	-	-	-	-	1	1	-	-		-	-	-	1	2	3
39	tines and peritoneum Acute disseminated	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-	-	-	1	-	-	-	-	-	1	1
40	tuberculosis Chronic disseminated	-	-	1	-	-	-	-	-	-	-		-	-	-	-	-	-	-	-	-	-	-	1	-		-	**	-		-	-		2	-	2
42 45	tuberculosis . Syphilis Purulent infection —	-	-	-	1 1	1 1	1	2	-	-	-	1	-	-	1 1		1.1	-	-	-	1 1	3	-	1	-	-	-	1	-	-	1	-	-	7	1	8
40	septicaemia (non- puerperal)	-	-	-	-	-	-	-	_	1	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	_	-	-	-	-	-	-	-	1	-	1
101	Cancer of the digestive organs and perito-									1						188	18					100														
150a		-	1-	-		-	-	-	-	-	-	-	-	-	-	-	1		-	-	-	1		1	-	1		-				-	-	3		3
200 201	of the heart Purpura Haemophilia	100	=	-	-	- 1	-	1	-	=	=	-	-	-	=	-	1	-	-	-	-	=	-	-	-1	-		-			=	=	3	1	-1	1 2
310 315	Epilepsy Diseases of the ear and	-	-	-	-	-	+	-	-	-	-	-	-	-	-	-	-	-	-	-	-	+	-	-	=	-		1	-		-	-	-	1	-	1
350	mastoid sinus Pericarditis	-	-	-	-		-	1 1	-1	-	-	1	-	-		-		-	-	-	1	-	-	-	-	=	-	1	-	3	-	-	-	2	- 1	2 2
351 352	Acute endocarditis Chronic endocarditis and valvular disease	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1		-		-	-			-	-		1	1	2
355	of the heart Other diseases of the	-	-	-	-	-	-:	-	1	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-		-	-	-	27	-	2
356	myocardium Diseases of the coronary	-	-	-	-	-	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-		-	1	-	1	1		-				-	2	1	3
357	arteries — angina pectoris Other diseases of the	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	*	-	-	+	-	-	-	-	-	-	-	1	-	1
362	heart Other diseases of the	-	-	-	-	-	-	1	-	-	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-		-	-	-	17	-	2
402	Bronchitis, acute	-	1	-	-	-	-	+	-	9	7	-	-	-	-	-	7	-	-	-	-	1	2	-	2 1		1	-	-	=	-	-	-	1	5	5
4038 404	Bronchitis, undefined	0.3	-	-	- 1	-	113		=	-	1	-	-1	- 2	- 2	=	1 1	-	=,	1 1	3	8	- 2	-	-	- 2	-3	-	=	1	-	=		1	14	1 21
405	Broncho-pneumonia Pneumonia, lobar	1	-	1	-	101	+ 1	1	-	-	-	i	-	1	-	- 1	-	-	-	-	- 1	-		1	1	2	1	-	=	-	1	-	-	0	2	8
409	Pulmonary congestion Other diseases of the	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-	1	-		-	1
451	respiratory system Diseases of the phar-	-	-			-				-	-	-	-	-	-	-	-					_				-								1		1
453 454	ynx and tonsils Ulcer of the stomach. Ulcer of the duodenum	-	-	1	-			1		101	010	-	-	-	-	-	-	+	=	-	-		-	1	=	-1	-	-	-	-	-	-		3	-	3
456	Diarrhoea and enter- itis (under 2 years)				-	1	-		-			_	-	1	1	-	-	-	_	-	-	3	4	6	4	1	4	1	1	-		-	-	13	14 1	27
460 500	Intestinal obstruction Nephritis, acute	-	-	-	-	-	-	-	-	-	1 1	-1	-	-	-	-	-	-	-	-	-		-	-	- 2	=	-	-		1	1	-	-	1	1 2	2 3
501	Nephritis, chronic Nephritis, not other-	-		-	-	-	-			-	1	_	-	- 1	-	1	-	-		_	-		44	-	-					-	-	-	-	1		1
503	Other diseases of the kidneys and annexa	-	-	-	-	-		-		_	-		_	_	-	-	-	-	-	-	-	4	-	-	-	-	-	1	-	-	-	1	-	0		2
554 602	Puerperal haemorrhage Other diseases of the	-	-		-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-												1	1
750	skin and its annexa Congenital debility	-	-	-	-	0	-	-		-	-	1	-	-	-	1	-	-	=	=	=	1	-	-4	- 2	2		=				-	-	1 -	-	1
751 752 753	Premature birth Injury at birth Other diseases peculiar	-	1 1	-	-	-	8	-	-	1	-	-	1	-	-	-	=	1	-	-	-	-	-	1	-	1	-	2	-1		-		-	75		6
859-	to early infancy	-	-	1 3	-	-	-	-	-	101	-	1	1	-	=	-	-	-	=	-	-	-		-		-	-	-			-			2 -	1	2
862 866	Other acute accidental																																	1		,
868	poisoning (not by gas) Accidental burns	-	-	-	-	-1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-		-	+	1			-1	1	i
869	Accidental mechanical suffocation Accidental injury, other	-	-	-	-	-	-	-	-	-	+	-	-	-	-	-	-	_	-	-	-	-	-	1	-	-	-	-	-	-	-	-		1 -	1	1
875 882	than mentioned be-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	- 1	-	-		1 -	-	1
883 895 876	Applicants Industry by																						1											1		
876- 881	Accidental injury by railway, road and other transport	-	-	_	1	-	-			-	-	1	-	1	-	-	-	1	-	-	-	1	-	1	-		-	1	-	-	-	1 -	-	7	1	8
951	Cause of death un- stated or ill-defined	-	-	-	_	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	- .		- -		-	1 -	1	1
	Totals	2	1	5	3	6	1	10	4	-	-	12	5	10	7	2	-	2	1	-	-	20	15	31	25	16	11	10	10	4	3	5 -	- 13	15 8	6 22	1
)	Commence of the last of the la		1000					-	- 1											_		1	_	_	_	-	-	-	_	-	-	1	1	1	1	-

TABLE A4. DEATHS OF NATIVES RESIDENT IN LANGA CLASSIFIED AS IN TABLE A1 (Excluded from Table A1)

				_									AG	в б	nov	Pš.	(YE	ARS)				_					_	_			гот	ALS	,
Sec-	Code No.	CAUSE OF DEATH.	0 1		1 t		2 to 5	w	otal nder 5	F	5 to		10 1		15 to 25		35		35 1 45		55		63	5	71	5	75 8		88 an Uj war	d p- ds	M.I		Persons.
	-		30.	200	31.	F.	M. F.	-	I. F	- 1	31.	F	M.	-	31.	F .	М.;	F -	М.	F-	201.	F.	м.	F.	М.	-	70.	F.	M.	F.	-	F .	-
1		Whooping cough Meningococcal cerebro- spinal meningitis	-	-	-	-	1 -		1 -	1			-	-	-	-	-	-		-	-		-	-	1	-	-	1 1			1	-	1
1	30	Tuberculosis of respira-				0									3		.1		3												10	10	26
1	31	tory system Tuberculosis of central nervous system	-	-		-				-					1	-	-	-		-	-		_			-	-	-			1	-	1
ıl	100	Syphills Cancer of other or un- specified organs	-					1						-	-	-	-	-			-	-	_	1		-		-	-	-	1	-	1
IV VI VI	301	Leucaemia Simple meningitis Diseases of the ear and		1	-		1 -	1	-	1		- 1	7	-	1.1	-	-	1	-	-		-	-	-	1.1	-		-	- 1		1	-	1
VII VII VII	353	mastoid sinus Pericarditis Acute myocarditis Arterio-sclerosis with	-	1	111							-	1	111	111		111	1		1111	1	111	1	111	data	111		100	111	111	2	1	1 1
VIII	402	cerebral haemorrhage Bronchitis, acute Bronchitis, chronic	-	1	1	111		-	1 1	1	100		111	111		1 1 1	111		1 (1)		177.1	1 1 1	-		111	- 1 -	1111	1010	111	111	1 1 1	-1	1 2 1
	403t 404 405	Bronchitis, undefined Broncho-pneumonia Pneumonia, lobar	1	2	3	2	1	1	8	5	1 1	1	111	111	1 1 1	111	111	1 1 1	- 2	-	111	1 1 1	111	-	1	-	1 1 1	111	111	111	8 3	6 1	14 4
1X		Diarrhoea and enter- itis (under 2 years) Diarrhoea and enter-		4	5	3			11	7	-		-	-	-	1 1		-	-	-	1000	-	-	-	-	-	-	-	1	1	11 2	7	18
X X XI		itis (2 years and over) Nephritis, acute Nephritis, chronic Puerperal sepsis	1	1	1 1	193	i -		1	-	-	1.1	111		1010101	111	1	- 1	1	11	1	1		++	111	-	111	111	111	1	21	-1	2 2 1
XI	556	Puerperal albuminuria and convulsions	-	-	-	-			-	-			-	-				-		-	-	1		-	-	-	-	-	-	-	-	1	1
XII	602	Other diseases of the skin and its annexa		1	-	-				1				1	-	1 1	-		-	-	-	1	-	-	1	-	1 1	-	-	-	-	1	1
XV XV XV	752	Premature birth Injury at birth Other diseases peculiar	1	1	-	-				1	-	-	-	-	-	-	1.1	-		7	1.1	-	1-1		-	-	-	-	-	-	-	3	3
XVII		to early infancy	-	-	=	-	0 3		-	-	3	-			1	-	-	-	2	1	-	-	-	-	-	-	=	-	-	-	2	=	2
XVII		Accidental burns	1	-	-	**			-	-	1	1		-	-	-	-	-	-	-	44	-	-	-	-	-	-	-	-	-	1	1	2
XVII	871 875 882 883	than mentioned below		-	-	-				-			-	-	-	+	1		-	-	-	-	4	-	-	-	-	-	4	-	1	-	1
XVII	895		-	-	-	-				-		-	-	-	-	-	-	-	1	-	_	-	1	-	-	-	1	-	-	-	1	-	1
		Totals	-	-	-	7	7	2	29	23	1	-4	-	-	4	4	4	-2	_	-4	-6	2	- 2	1	- 2	-	-1	-	=		-	41	100
		10000				_		-															-	1		1		1		7			

Table B.—Deaths Classified for Causes and Race: 1939-40.

(European corrected for inward and outward transfers, non-European for outward only.)

Death Classifi-	Di	Euro-	Native		Other	Non-	Total	Native
eation Code No.	Diseases.	pean.	(not Langa).	Asiatic.	Coloured.	European.	all Races.	(Langa).
001-002	Enteric fever	1	_	-	3	3	4	_
003	Typhus fever	-	-	-		-	_	-
006-007	Smallpox	100	2000	-	-	-	-	-
000	Measles	-		-	-		-	
010	Whender and	-4	-	1	61		70	=
011	Diphtheria	5	4	-	18	66 19	70 24	1
012-013	Influenza	17	2		10	12	29	E
015-017	Dysentery (all forms)	2	2		5	7	9	1000
018-020	Plague	_	_	_	-	_	_	-
022 and 045	Purulent infection-septi-							
	caemia, and erysipelas,	10				120	100	
023	(non-puerperal)	10	1	-	14	15	25	-
024	Encephalitis lethargica	1	=	=	-	-	1	- 1
025	Meningococcal meningitis	î			7	7	8	1
029	Tetanus	_	1		2	3	3	
030	Tuberculosis, respiratory		100		- 38		Street Park	100
091	system	94	52	6	488	546	640	26
031	Tuberculous meningitis	16	3	1	62	66	82	1
032-040	Other tuberculous diseases	9	4	1	34	39	48	
040	Syphilis	10	8		73	81	91	1
302 and 308,	Syphilis	10			1.3	51	01	
Sec. VI	General paralysis of the in-							THE ST
The state of the state of	sane : tabes dorsalis	6	_	-	15	15	21	-
047	Malaria	1	-	2000	1	1	2	
Rest of Sec. 1	Other infectious and para-		H ME L					
100-109	Sitic diseases	3 179	-	-	2	2	5	7
100-109	Cancer, malignant disease Rheumatic fever	3	3	5	94 20	102 20	281	1
153	Diabetes	43		3	18	21	23 64	
Rest of Sec. III	Other general diseases	8		2	8	10	18	=
304а.в305	Cerebral haemorrhage, em-				1			
	bolism and thrombosis	11	-	-	12	12	23	
Rest of Sec. VI	Other diseases of the ner-							
Ball I	vous system and sense	40			00			-
150 and 350-357	organs Heart disease	43 297	13	1	68 195	71	114	2 3
358	Aneurysm	5	13	4	4	212	509	
359 A.B.C	Arterio-sclerosis	276		8	170	178	454	1
Rest of Sec. VII	Other circulatory diseases	9	1	****	8	9	18	
402-403в	Bronchitis	20	10	1	120	131	151	4
404-406	Pneumonia (all forms)	66	31	3	404	438	504	18
413	Miners' phthisis (silicosis)							
414	without tuberculosis Miners' phthisis (silicosis)		-		-	-	-	-
414	with tuberculosis	1		1	-	-10	1	F alter
Rest of Sec. VIII	Other respiratory diseases	30	3		21	24	54	
453-454	Peptie ulcer	10	4	_	15	19	29	_
456	Diarrhoea, etc. (under 2 yrs.)	33	27		284	311	344	18
457	Diarrhoea, etc. (over 2 yrs.)	10		-	19	19	29	3
458	Appendicitis	11	-		7 7	7	18	
462-463 464-467	Cirrhosis of liver Other diseases of liver, etc.	12		-	8	8	19 14	=
Rest of Sec. IX	Other diseases of liver, etc.	45	2	2	21	25	70	
500-502	Acute and chronic nephritis	66	6	2	95	103	169	4
Rest of Sec. X	Other genito-urinary diseases		1		1000			
	(non-venereal)	16	2	1	19	22	38	-
555	Puerperal sepsis	1		-	10	10	11	1
Rest of Sec. XI	Other diseases of pregnancy	-			15	10	01	6
700-753	and puerperal state Congenital malformations	5	1	100	15	16	21	1
1507100	and diseases of early in-							
	fancy	66	19	4	192	215	281	5
800	Senility	23	_	_	20	20	43	-
850-858	Suicide	14	-	-	4	4	18	-
859-899	Other violence	65	14	1	80	95	160	6
120-122, Secs. IV, V, XII							1	
and XIII	Other defined causes	29	4	2	27	33	62	3
950-951	Causes ill-defined or un-	- 3		-	100	30	-	
		7	1	The same of	17	18	25	
	known		4	200	200	10	20	
		1.590	221	48		3.046	4.636	100

Table C. -Dath Rates per 1,000 Population for 1939-40 and Ten Previous Years by Causes and Race. (European corrected for inward transfers, non-European for outward only.)

	management and and	-			mandament from the same and the									
DISEASE.	- 2	Race.	1929. 1930.	1930.	1931.	1932.	1933.	1934.	1935.	1936.	1937.	1939.	Mean for 10 years.	1939. 1940.
Enteric fover	N B	Eur. Non-E.	0.06	0.06	0.00	50-0 60-0	0.01	0.04	0.02	0.00	0.03	0.01	0.03	0.01
Measles	N. B.	Eur. Non-E.	0.02	0.14	0.06	1.	0.02	0.04	0.03	0.03	0.04	0.01	0.02	11
Scarlot fever	Eur.	E.	0.01	0.01	11,	11)	11	0.01	0.02	0.02	0.01	11	0.00	11
Whooping cough	: N.E.	Eur. Non-E.	0.04	0.06	0.06	0.07	0.01	0.03	0.07	0.02	0-14	0.01	0.04	0.02
Diphtheria	: NE	Eur. Non-E.	0.10	90.0	0.00	0.00	0.04	0.06	0.07	0.01	0.12	0.13	0.07	0.03
Influenza	: NE	Eur. Non-E.	0.24	0.06	0.33	0.08	90.0	0.20	0.24	0.08	0.15	0.00	0-14 0-18	0.10
Purulent infection—septicaemia, and erysipelas, (n puerperol)	(non- Eu	Eur. Non-E.	0.19	0.10	0.10	90.0	0.02	0.07	0-17	0.11	0.12	0.08	0.10	0.06
Acute anterior poliomyelitis	: NE	Eur. Non-E.	0.05	0.03	11	0.01	1.1	0.01	11	0.01	0.03	11	0.01	11
Encephalitis lethargica	Eur.	Ei.	0.05	0.03	0.04	0.01	11	0.01	0.01	0.01	0.01	0.01	0.01	0.01
Meningococcal meningitis	: NE	Eur. Non-E.	0.00	0.02	0.02	0.04	0.02	0.02	0.01	0.00	0.01	0.01	0.02	0.01
Tuberculosis, respiratory system	Eu	Eur. Non-E.	0.59	4.09	0.68	0.83	0.84	3.99	3.85	3-60	4.05	4.04	0.69	3.56
Tuberculosis, other forms	: No Eu	Eur. Non-E.	0.00	0.10	0.15	0.13	0.08	0.10	0.13	89.0	0.14	0.10	0-11	0.15
Syphilis	: No	Eur. Non-E.	0.05	0.00	0.07	0.07	0.06	0.08	0.07	0.07	99.0	0.05	0.07	0.06
General paralysis of the insane: tabes dorsalis	Eu	Eur. Non-E.	0.08	0.06	0.01	90.0	0.02	0.03	0.05	0.05	0.02	0.00	0.04	0.04
Cancer, malignant disease	Eu	Eur. Non-E.	1-21	1.31	1.22	1.24	1.31	1.26	1.40	1.31	1.51	1.34	1.31	1.10
				۱										

Table C.—Continued.

DISEASE.	Race.	1929.	1930.	1931.	1932.	1933.	1934.	1935.	1936.	1937.	1938.	Mean for 10 years.	1939.
Rheumatic fever	. Eur. Non-E.	0.05	0.00	0.12	0.08	0.07	0.06	0.05	0.05	0.08	0.03	0.07	0.02
Diabetes	Eur. Non-E.	0.58	0.32	0.02	0.36	0.01	0.32	0.37	0.29	0.36	0.23	0.28	0.26
*Ceretral hæmorrhage, embolism and thrombosis	Eur. Non-E.	0.25	0.34	0.59	0.90	0.51	0.18	80.0	0.12	0.14	80.0	61-1	0.02
*Arterio-selerosis	. Eur. Non-E.	0.66	0.43	0.49	0.36	0.60	1.11	1.25	1.08	1.20	1.20	0.95	1.70
Heart disease	Eur. Non-E.	1.83	1.83	1.43	1.55	1.56	2.12	1.97	2.19	2.05	1.82	1.84	1.38
Bronchitis and pneumonia	Eur. Non-E.	0.76	4.39	0.97	6.92	3.92	5.63	4.57	3.44	4.92	4.12	0.75	3.71
Diarrhora and enteritis	Eur. Non-E.	3.42	2.94	3.72	0.35	3.50	0.29	2.49	0.21	0.15	0.16	2.72	2.15
Acute and chronic nephritis	Eur.	0.52	0.45	0.46	0.39	0.50	0-65	0.55	0.55	0.43	0.46	0.50	0.41
Puerperal sepsis	Eur. Non-E.	0.01	0.04	0.01	0.01	0.01	0.03	0.03	0.01	0.01	0.01	0.05	0.01
Other diseases of pregnancy and puerperal state	Eur. Non-E.	0.06	0.06	0.09	0.05	0.06	0.03	0.04	0.02	0.04	0.06	0.05	0.03
Congenital malformations and diseases of early infancy .	Eur. Non-E.	0.58 2.11	0.58 2.05	0.53	0.35	0.32	0.46	1.54	0.45	0.36	0.37	0.44	0.41
Senility	Eur. Non-E.	0.31	0.17	0.51	0.45	0.31	0.18	0.17	0.51	0.13	0.32	0.26	0.14
Violence	Eur. Non-E.	0.53	0.62	09-0	0.52	0.44	0.58	0.47	0.44	0.40	0.45	0.50	0.49
Other diseases	Eur. Non-E.	2.10	1.84	2.13	1.80	1.36	2.19	1.55	1.31	1.50	1.53	1.58	1.46
Тотаь	Eur. Non-E.	10.99	24.08	11.00	10.33	9.44	111-13	10.88	9.87	10.59	21-69	10.47 23.28	9-77
					1			-					

*There has been some variation in the allocation of deaths as between these two causes.

Table D.—Deaths by Causes and Race according to date of registration: 1939-40.

(European corrected for inward and outward transfers, non-European for outward only.)

			_	_	_	_								
Diseases.	Race.	July. (4 weeks).	August (5 weeks).	September (4 weeks).	October (5 weeks).	November (4 weeks)	December (4 weeks).	January (5 weeks).	February (4 weeks).	March (4 weeks).	April (5 weeks).	May (4 weeks).	June (4 weeks).	Year (52 weeks.)
Enteric fever	Eur.		-	-	_	-		1		-		1	=	1
Measles	Non-E.	-	=	1	1	-	-	-	1	=	-	=	=	3
	Non-E.	-	=	-	-	-	-	-	_	-	-	-	-	
Scarlet fever	Eur. Non-E.	-	=			-		-	-		=	=	=	=
Whooping cough	Eur.	-	-	-	-	2	-	1	-	1	-	-	-	4
Diphtheria	Non-E. Eur.	11	17	10	10	1	4	5	13	2	1	1	=	66 5
Influenza	Non-E.	3	3	-	2 3	1 2	1 2	2	1	1	1	2	2	19
	Non-E.	2	1	1	-	2	-	1	1		2	1	3 2	17
Purulent infection—septi- caemia, and erysipelas,	Eur. Non-E.	2	1	1 3	-	=	-	2	- 9	1	3	1 3	3 2	10
(non-puerperal)			1	0				1	-		3	0	-	10
Acute anterior poliomye- litis	Eur. Non-E.	=	=		-	-		=			-		=	-
Encephalitis lethargica	Eur. Non-E.	1			-	-	-		-	-	-	-	-	1
Meningococcal meningitis	Eur.	-		1		-	-	-	-	=	-	=		-1
Tuberculosis, respiratory	Non-E. Eur.	6	3 7	3 5	7	1 9	7	8	9	9	5	12	10	7 94
system	Non-E.	39	42	42	58	48	38	57	51	45	51	38	34	546
Tuberculosis, other forms	Eur. Non-E.	3 8	3 4	9	12	3 6	3 7	8	10	10	1 13	3	3 7	25 105
Syphilis	Eur. Non-E.	1 5	10	6	-8	1 3	7	1 8	1	1	1	-	2	10
General paralysis of the	Eur.	1	1	-0	1	-	-	2	3	.8	10	6	6	81
insane : tabes dorsalis Cancer, malignant disease	Non-E.	14	22	10	5 13	15	12	16	19	7	18	12	21	15 179
Rheumatic fever	Non-E. Eur.	8	12	7	11	6	6	17	4	7	8	9	7	102
	Non-E.	5	6		2	1	2		1		1	1 2	1	20
Diabetes	Eur. Non-E.	2 2	7 5	4	3 2	4		1 2	2	2 3	5 3	6	7 3	43 21
Cerebral haemorrhage,	Eur.	ĩ	1	2	-		1	-	2	1	1	1	1	11
embolism and throm- bosis.	Non-E.			3	1	2			1			4	1	12
Arterio-selerosis	Eur. Non-E.	24 15	20 12	21 6	24 14	17	19	24 21	29 24	12	27	27	32	276
Heart disease	Eur.	24	38	28	25	31	18	17	30	20 14	6 24	18	23 26	178 297
Bronchitis and pneumonia	Non-E. Eur.	19	15	23 14	17	13	14	27	16	16	12	14	26 6	212 86
Diarrhoea and enteritis.	Non-E.	47	69	55	67	52	38	54	39	26	43	42	37	569
	Eur. Non-E.	15	13	7	3 13	20	3 26	59	50	36	5 56	9 26	3 9	330
Acute and chronic nephritis	Eur. Non-E.	13	6	9 5	10 16	5	2 4	3 5	7 7	3 6	6	3	6	62
Puerperal sepsis	Eur.	-	-			1	-		-	-	9	-	6	96
Other diseases of preg-	Non-E. Eur.		1	2	_	1	1	1	3	1	-	-	2	10
nancy, childbirth and the puerperal state.	Non-E.	1	2	2	-	1		1	2	-	4	-	3	16
Congenital malformations	Eur.	5	3	7	6	8	7	4	3	8	5	5	5	66
and diseases of early infancy.	Non-E.	17	24	25	21	14	14	18	9	16	19	19	19	215
Senility	Eur.	1	-	2	1	1	3	2	2	2	4	4	1	23
Violence	Non-E. Eur.	7	8	6	8	3	3	9	2 4	7	3 7	11	6	20 79
All causes	Non-E. Eur.	7 126	10 152	7 138	8	4	6	7	15	11	13	5	6	99
All causes	Non-E.					140 225		124 311	275					1590 3046
		THE PARTY											-	

-	Table E.		Registered Births and	red B	rths	0.00	Still-Births	irths	for t	the ye	year 19	1939-1940 classified	940 c	lassif	ied as	to	Race,	Sex,	Legitimacy	imacy	and '	Wards.	ds.
_				94	RUBOPRAN	rs.				OT	HER TH	OTHER THAN BUROPEAN	ROPEAN	1.5			Toware			STILL BIRTHS	INTHS.	1	
	WARDS.	LEGITIMATE.	-	ILLEGITIMATE	MATE.	-	TOTALS.		LEGITIMATE		ILLEGITIMATE	MATE		TOTALS			OI WILL		EUROPEAN	PEAN.	CUROPEAN.	THAN PEAN.	TOTAL STELL BIRTHS
		Males.	Females	Males. Pemales	_	Males. F	cmales	Total	Malos. P	Pemales.	Males.	Females.	Males.	Pemales.	Total	ni	0	Total.	Legit.	megit.	Legit	megit.	
	1. Sea Point	143	127	03	-	145	128	07.0	23	6	60	60	15	120	101	273	27	300	9	1	1	1	9
	2. Harbour	13	22	00	+	16	85	1	47	36	17	17	64	53	1117	44	111	161	-	1	-	4	9
	3. West Central	2	4	-	-	9	5	=	68	69	60	15	16	84	175	=	175	186	-	1	9	1	7
	4. Kloof	84	7.5	9	10	06	80	170	144	121	99	55.00	200	174	374	170	374	544	10	1	11	01	24
-	5. Park	12	89	10	7	85	72	154	16	16	10	60	56	19	45	154	45	199	2	1	1	-	9
	6. East Central	7.4	999	10	4	19	70	149	448	397	88	115	536	512	1,048	149	1,048	1,197	1	1	30	10	47
1	7. Castle	13	00	1	-	13	6	01	329	281	81	76	410	357	767	61	767	789	01	1	16	1	25
	8. Woodstock	128	113	19	9	147	119	266	188	194	47	39	235	233	468	266	468	734	20	91	-	1	14
	9. Salt River	184	136	+	00	188	144	60 60	184	144	60	45	221	189	410	335	410	742	9	-	13	10	25
-	10. Mowbray	1117	118	0	+	100	122	244	.37	65	15	10	52 20	69	111	244	111	355	9	1	4	00	13
	II. Maitland	137	153	0.5	1	139	153	292	202	179	57	80	259	259	518	292	819	810	-	1	12	10	59
	12. Rondebosch	82	87	-	01	83	89	172	444	405	104	115	548	520	1,068	172	1,068	1,240	60	1	65	00	40
-	13. Claremont	198	215	œ	10	206	220	423	2333	321	87	76	420	397	817	426	817	1,243	16	1	31	1-	54
-	14. Kalk Bay	53	37	-	-	57	38	38	127	114	51	52	178	166	344	96	344	439	01	1	10	10	01
_	15. Wynberg	186	150	03	17	188	157	345	304	344	28	98	389	430	819	245	819	1,164	11	1	28	14	53
	Not allocated (unascertained addresses).	1	1	13	19	13	61	6.0	1	1	-	01		61	61	01 00	01	34	1	1	1	1	őı
	Total	1,494	1,381	80	107	1,574	1,453	3,027	2,883	2,679	191	787	3,644	3,466	7,110	3,027	7,110	10,137	85	00	204	83	373*
-	Excluded from above figures																						
_	(1) Births in Cape Town which																			Ī			
	did not belong thereto	194	204	20.0	19	8 2 8	60 61	=	99	40	99	88	106	86	204	441	204	615	120	-	=	12	. 36
	(2) Langa location	-	1	1	1	-	-	-	202	36	10	12	10	48	000	-	80	84	1	1	01	01	4
1				-	1		1	1	1		-	1	1	-	ı						١	١	

Corrected for outward transfers,

* Including one of unknown race.

Table F.—Births, Deaths, Natural Increase, and Infant Deaths, and corresponding rates, for the year 1939-40.

	Births	hs.	Deaths.	ths.	Natural Increase	Increase.	Death:	Deaths under one year old.
Race.	Number.	Rate.	Number.	Rate.	Number.	Rate.	Number.	Rate.
Europeans: uncorrected corrected for outward transfers	3,468 3,027 3,063	21.32 18.61 18.83	1,829 1,525 1,590	11.24 9.38 9.77	1,639 1,502 1,473	10.08 9.23 9.06	158 124 125	45.6 41.0 40.8
Natives (not Langa): uncorrected corrected for outward transfers	430 398	42.65 39.48	257	25·49 21·92	173	17.16	53	179-1
uncorrected	179 771	48.12	50 48	13.44	129	34.68	9 9	33.5
uncorrected	6,705	48.09	3,031	21.74	3,674	26.35 26.95	837	124·8 122·6
All non-Europeans: uncorrected corrected for outward transfers	7,314 7,110	47.74	3,338	21 · 79 19 · 88	3,976	25.95 26.52	920 881	125·8 123·9
All Races: uncorrected	10,782	34-13	5,167	16.36	5,615	17-77	1,078	100.0
Natives resident at Langa location	83	13.78	100	16.60	-17	-2.82	27	325.3

All rates are per 1,000 population except the infant mortality rate, which is per 1,000 births.

	2 57	18		777777777777777777777777777777777777777		872988888829		01 09 00 01 01
	osis Death forms), grocefed to Transfer	Total		34 60 04 03 04 04 04 04 04 04 04 04 04 04 04 04 04		24 04 04 04 00 04 04 04 04 04 04 04		00 00 00 00 00 00 00 00 00 00
	Tubercu.osis Deaths adi ortus), Rates corrected for Outward Transfers,	Non- Eur.		4040 400 40 44 40 4 4 40 4 00 0 4 4 4 4		4404000444+++		4 60 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
	Tube Rate Outsy	Bur.		11011000000000000000000000000000000000		8558888888888		1.04 0.88 0.79 0.74
	Fever Rates, ed for Fransfers.	Total.		844446654486441865511148846888		440044886660000		0.25 0.34 0.20 0.14 0.06
	Enteric Fever Death Rates, corrected for Outward Transfers.	Non- Eur.		**************************************		00000000000000000000000000000000000000		0.28
	Enteric Death correct Outward	Eur.		000000000000000000000000000000000000000		000000000000000000000000000000000000000		0.19 0.23 0.08 0.04
	cted	Infant Mortal- ity Rates.				54554554555555555555555555555555555555		
	es corrected ad Outward ers.	Natural In- crease Rates.		Fall Harrison		8448468448686		
1913.	European Rates or for Inward and O Transfers.	Death Rates.				5565655141865655777755555777755555555555555555555		
100	Europ for In	Birth Rates.				88818618818888		
s since	ra.	Total,		244-25-25-25-25-25-25-25-25-25-25-25-25-25-		888888888888888888888888888888888888888	LUSIVE.	170 -18 164 -02 144 -15 134 -67 119 -01
Rates	Infant Mortality Rates.	Non- Eur. T		25		\$2582447585858 \$2582447585858 \$25825447585858	28 INCL	218 -61 17 211 -71 10 181 -58 14 169 -35 13 147 -16 11
	Infant	Bur.		285252182882188821888254484 88141846464888484464681888		88 60 174 60 60 174 60 60 60 60 60 60 60 60 60 60 60 60 60	1927	95 07 2 90 84 2 71 91 11 10 77 11 10 64 11
Statistic	2	Total.	WYNBERG WARD.	852147748298854869747489999999999999999999999999999999	WARD	251222222222 25122222222222 2612222222222	S FROM	16.96 16.61 17.07 16.02
Vital	Natural Increase Rates.	Non- Eur. T	NBERG	\$6996718696997786866669696969696969696969696969	WYNBERG	882828282828888 8688262628888	ARD A	18 67 16 04 12 92 24 04 14 95
and	Natura	Bur.		######################################	1000	110111018074786 8654788867448868	NBERG W.	15 24 11 28 11 28 7 29 11
		Total.	EXCLUDING	28 88 8 2 2 4 2 4 2 4 2 4 2 4 2 4 2 4 2	INCLUDING	45564656444	WYNI	19-39 20-07 17-62 17-86 16-82
pulations	eath Rates prected for ward Transfers	Non- Eur. T	ALITY E.	28000000000000000000000000000000000000	ALITY D	8947988588888888888888888888888888888888	UDING	27-15 29-54 96-67 1-16-98 1-17-18-98
Popu	Death corner Outward 7	Bur.	CIPAL	05542486666666666666666666666666666666666		00000000000000000000000000000000000000	INCLUDIN	10 01 01 01 01 01 01 01 01 01 01 01 01 0
0.0		Total.	MUNICIP	242234238444244448488448488888888888888	MUNICIE	######################################	GURES	18 41 17 17 17 17 17 17 17 17 17 17 17 17 17
-Estimated	egitimate Birth percentage of Total Births.	Non-		######################################		######################################	24	8 2 2 2 2 2 8 2 5 5 5 3
-Est	llegitimate Births, percentage of Total Births.	Bur.		**************************************		80000000000000000000000000000000000000	UBNNI	6 - 96
9		Total,		146888888888888888464		24 65 25 65 65 65 65 65 65 65 65 65 65 65 65 65	QUINQUENNIAL	3
600	Birth Rates	Non-		651841688641686614868641688686661188668866		444665001188 444665001188 444665001188 444665001188		47 48 47 44 19 59 48 90 48 90
Table	Birth	Eur.		88548488888888888888888888888888888888		5787865748659578 687966548669578 687966548		28 07 26 71 21 49 21 48 18 17
		Total.		151, 50 177, 64 177, 6		246, 259 21 -71 253, 350 21 -67 253, 350 21 -67 264, 600 29 -62 264, 600 29 -62 270, 650 17 -53 270, 650 17 -63 270, 840 17 -74 300, 710 18 -62 316, 750 18 -61		11111
	Estimated Populations.	Non- Eur. T		74,456 74,456 74,456 74,456 74,456 74,456 74,756 74		113,590 1116,490 1119,490 1119,500 1125,500 1125,500 114,190 1		1 1 1 1 1
	Esti	Eur. E		76,946 88,240 88,240 100,588 100,588 100,580 100,58		128,740 183,290 183,290 183,550 184,570 144,730 144,730 144,740 144,740 144,740 144,740 144,740 144,740 156,440 156,440 156,440 156,440 156,440 156,440 156,440 156,440 166,44		11111
		. 4				* : : : : : : : : : : : :		3 2 2 3 3
	June			1913-1914 1914-1916 1916-1916 1916-1916 1916-1922 1922-1923 1922-1923 1922-1923 1922-1923 1923-1923 1923-1933 1933-1933 1933-1933 1933-1933 1933-1933 1933-1933		1927-1928 1928-1929 1928-1939 1938-1931 1938-1934 1938-1936 1938-1937 1938-1939 1938-1939 1938-1939		1915-1914 1915-1916 1916-1017 1925-1922 1925-1922 1925-1926 1926-1927 1931-1932 1931-1932 1933-1936
	Periods, June			Yest Days		1		(*) Quinquendum
				E C				ëë

(4) From 8th September, 1913 to 20th June, 1914.
(5) From 8th September, 1913 to 20th June, 1914.
(7) From 8th September, 1913 to 20th June, 1916.
(8) The Next of Lie limenar september, 1913-19) is excluded, the figures shown being the mean of the other four years of the pring years, and are corrected for the year 1919-20 and previous years, and are corrected for natural decrease.

The figures in italies (1918-19) represent rates of natural decrease.

The populations and 1926 and 1936 for Non-Europeans.

Table H.-Infant Mortality Rates per 1,000 Births by Causes and Race.

(Corrected for outward transfers.)

INFANTS UNDER ONE YEAR OF AGE.

-	-									-			_			
Death classification number (See Table A)	006-	011.	030-	040.	04	12.	402-	406.	43	56.		51 & 53.				
Cause of death.	infec	mon tious ases.		culous ases.	Sypl	hillis.	a:	chitis nd nonia.	0.1	rhora nd ritis.		elop- ntal uses.	disc	aneous nacs inder)		tal tality uses).
Year.	Eur.	Non- Eur.	Eur.	Non- Eur.	Eur.	Non- Eur.	Eur.	Non- Eur.	Eur.	Non- Eur.	Eur.	Non- Eur.	Eur.	Non- Eur,	Eur.	Non- Eur.
1914-1915 1915-1916 1915-1917 1917-1918 1918-1919 1918-1919 1918-1920 1920-1921 1922-1923 1923-1924 1924-1925 1925-1926 1926-1927 1927-1928 1928-1929 1928-1939 1930-1931 1931-1932 1932-1933 1933-1934 1934-1955 1935-1936 1935-1936 1935-1936 1935-1937 1937-1938 1937-1938 1938-1939 1939-1940	5-9 5-4 5-2 5-4 5-2 5-4 5-2 5-2 5-4 5-2 5-2 5-2 5-2 5-2 5-2 5-2 5-2	12-6 10-8 12-10-4 13-9 13-9 13-9 14-4 13-9 14-4 23-6 4-4 23-6 4-4 23-6 4-1 23-6 5 4-1 23-6 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	1.7 1.85 4.52 0.98 0.44 0.44 0.44 0.47 0.77 1.77 0.77 0.71 0.71 0.71 0.71 0.7	######################################	0.4 0.4 1.76 1.68 0.4 0.4 1.6 0.4 1.7 0.9 1.7 1.9 1.4 0.8 0.8 0.8 0.4 0.9 1.7 1.8 0.9 1.7 1.8 0.9 1.7 1.8 0.9 1.7 1.8 0.9 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7	5-9 7-6 8-2 12-1 7-7-7 11-9 9-6 9-7-8 110-7 114-5 114-5 9-6 8-6 9-7-8 7-8 7-8 7-8 7-8 7-8 7-8 7-8 7-8 7-8	11 · 3 9 · 7 14 · 0 5 · 7 19 · 9 13 · 9 15 · 4 10 · 8 4 · 2 9 · 9 11 · 5 14 · 4 11 · 0 8 · 2 9 · 2 12 · 9 5 · 3 9 · 9 11 · 5 12 · 9 8 · 8 14 · 1 10 · 8 9 · 8 14 · 1 10 · 8 12 · 9 14 · 9 15 · 9 16 · 9 17 · 9 18 ·	48 · 5 43 · 8 56 · 4 77 · 3 61 · 0 53 · 3 56 · 2 57 · 7 44 · 46 · 5 62 · 5 43 · 4 44 · 4 47 · 6 40 · 4 40 · 7 40 · 3 36 · 3 36 · 1	31 · 0 29 · 4 23 · 7 35 · 9 25 · 6 22 · 4 23 · 6 22 · 4 23 · 6 22 · 7 25 · 0 27 · 7 25 · 0 27 · 7 25 · 0 27 · 7 25 · 0 27 · 16 19 · 2 3 · 15 · 3 15 · 3 11 · 7 11 · 8 11 · 1 9 · 9 9	63 ·6 57 ·6 57 ·6 57 ·6 57 ·6 57 ·6 59 ·6 44 ·6 50 ·7 62 ·9 54 ·6 50 ·7 62 ·9 54 ·4 42 ·4 42 ·4 42 ·4 43 ·4 43 ·4 43 ·4 43 ·4 33 ·4 33 ·6 33 ·6 33 ·6 33 ·6 33 ·6 33 ·6 33 ·6 33 ·6 34 ·6 34 ·6 34 ·6 35 ·6 36 ·6	33 ·1 24 ·6 35 ·6 28 ·6 21 ·9 32 ·9 32 ·9 22 ·4 20 ·1 21 ·2 22 ·3 23 ·7 16 ·7 21 ·7	58-5 51-4 53-0 49-2 41-0 48-0 49-2 48-0 40-6 35-8 39-9 41-3 36-7 40-6 28-5 28-5 28-5 28-7 31-0 27-9	17 · 2 · 12 · 7 · 12 · 7 · 12 · 7 · 12 · 7 · 12 · 7 · 12 · 7 · 12 · 7 · 13 · 9 · 13 · 14 · 7 · 9 · 3 · 11 · 10 · 3 · 11 · 10 · 3 · 11 · 6 · 9 · 9 · 8 · 6 · 8 · 9 · 8 · 6 · 8 · 3 · 9 · 8 · 6 · 8 · 3 · 8 · 6 · 5 · 8 · 3 · 8 · 3 · 8 · 6 · 5 · 8 · 3 · 8 · 3 · 8 · 6 · 5 · 8 · 3 · 8 · 3 · 8 · 6 · 5 · 8 · 3 · 8 · 3 · 8 · 6 · 5 · 6 · 5 · 6 · 5 · 6 · 5 · 6 · 5 · 6 · 5 · 8 · 3 · 8 · 3 · 8 · 3 · 8 · 6 · 5 · 6 · 6	32 ·1 26 ·2 36 ·9 30 ·6 98 ·1 29 ·0 32 ·4 26 ·5 30 ·7 18 ·0 18 ·0 16 ·5 21 ·3 17 ·8 16 ·4 20 ·5 11 ·7 11 ·7	100 · 4 79 · 1 96 · 2 79 · 1 114 · 6 81 · 5 101 · 5 69 · 6 71 · 9 65 · 2 67 · 4 60 · 3 61 · 2 65 · 0 65 · 1 48 · 8 34 · 8 45 · 1 45 · 2 41 · 0 42 · 1 41 · 0	224 4 189 3 226 7 200 7 200 9 297 8 183 8 231 7 173 3 196 4 187 3 173 9 186 6 156 6 150 6 155 8 167 7 145 8 145 7 145 7 128 9 128 9 128 9
Quinquennium *1916-1917 to 1920-1921 1921-1922 to	3-3	6.6	1 -7	2 -2	1:1	9-9	12 -3	55 -1	28 -1	58 - 7	29-0	47 -2	15-2	32 -1	90 -8	211 -7
1925-1926 1926-1927 to 1930-1931	2-4	4.6	0.9	2-4	1.0	8-7	9.6	53-4	23-9	54-4	23 0	39 -7	11-3	22.8	71 -9 62 -7	181 -6
1931-1932 to 1935-1936	2.0	5.5	1.1	4-4	0.8	10-6	7-4	41-3	11-0	39 -9	20 -0	31 -6	7-5	13-9	49-6	147-2

Year of influenza epidemic 1918-1919 excluded (4 years only).
 City extended by incorporation of Wynberg 1927-1928.

Infants from 1 to 2 years of age. *

Death classification number (See Table A.)	006-	011.	030-	040.	04	12.	402-	406.	45	16.	700-71 75					10
Cause of death.		mon tious cases.	Tuber		Sypl	hillis.	Bron- ar pneur		Diari ar ente	id	Deve mer disco	ital	Miscell dise (rema	3.505	mor	otal tality suses).
Year.	Eur.	Non- Eur.	Eur.	Non- Eur.	Eur.	Non- Eur.	Eur.	Non- Eur.	Eur.	Non- Eur.	Eur.	Non- Eur.	Eur.	Non- Eur.	Eur.	Non- Eur.
1924-1925 1925-1926 1926-1927 1927-1928 1928-1929 1929-1930 1930-1931 1931-1932 1932-1933 1933-1944 1934-1955 1935-1936 1936-1937 1937-1938 1938-1939 1938-1939	0.4 0.5 3.2 2.3 4.6 3.0 7.7 2.2 1.6 3.0 1.6 0.4	1 · 9 3 · 8 8 · 6 8 · 3 4 · 9 3 · 8 7 · 2 6 · 8 2 · 5 3 · 6 8 · 2 4 · 9 8 · 2 4 · 9 8 · 2 4 · 9 8 · 2 4 · 9 8 · 2 6 · 6 8 · 3 6 · 4 6 · 6 6 · 4 6 · 6 6 · 6	0.5 0.9 1.8 0.7 0.7 0.4 1.7 1.2 0.7 1.2 1.2	6.758024069195257.99 6.88585857757.99	0.4	2-2 0-5 0-5 1-0 0-8 2-0 2-5 1-2-8 1-7 1-2-7 1-2-7 1-2-5	2 · 2 · 7 · 4 · 6 · 5 · 6 · 7 · 4 · 8 · 3 · 1 · 5 · 6 · 7 · 4 · 8 · 8 · 4 · 1 · 8 · 7 · 4 · 8 · 7 · 4 · 8 · 7 · 4 · 8 · 7 · 1 · 1 · 1 · 1 · 1 · 1 · 1 · 1 · 1	22 ·8 31 ·4 35 ·9 36 ·9 27 ·9 25 ·8 21 ·9 26 ·6 19 ·0 25 ·3 30 ·4 22 ·2 17 ·4 22 ·6 24 ·0 19 ·3	8 4 5 5 5 5 7 3 2 2 2 3 3 2 2 2 3 4 2 6 6 2 5 7 8 3 3 2 2 3 3 4 3 6 6 5 7 8 5	39 -5 32 -7 33 -2 23 -6 24 -6 23 -4 19 -5 26 -0 12 -2 25 -9 19 -4 12 -7 15 -0	0.0 0.4 0.4 0.4 0.4	0 · 3 0 · 5 0 · 3 0 · 8 1 · 1 0 · 4 0 · 4 0 · 2 0 · 8 0 · 7 0 · 7 0 · 7 0 · 3	2 7 2 8 8 2 7 4 4 5 5 5 1 9 2 2 2 3 3 5 5 5 3 2 2 3 3 5 5 5 3 3 2 2 3 3 5 5 5 3 3 3 3	7.5 5.3 7.0 9.8 10.2 7.8 6.8 6.1 7.5 6.1 7.5 6.1	13 · 7 13 · 7 16 · 5 20 · 1 15 · 3 9 · 1 10 · 5 13 · 5 13 · 3 12 · 1 12 · 9 10 · 2 11 · 7 7 · 3 9 · 5	80 -9 80 -7 93 -3 85 -7 75 -9 70 -2 64 -5 79 -7 47 -3 73 -5 68 -7 56 -6 50 -4
Quinquennium 1926-1927 to 1930-1931 1931-1932 to 1935-1936	2.8	6-4	1:1	6-9 7-5	-	1:1	3-3	28·9 24·8	4.8	24·3 19·2	0·3 0·2	0-6	2.9	8·6 7·3	15 ·2 12 ·4	70 -7 67 -4

^{*} The rate for the year is calculated on the births (less the deaths under one year) in the previous year.
City extended by incorporation of Wynberg 1927-1928.

Table I.—Deaths of Infants under 1 Year of Age, Classified by Causes, Race and Age.

CORRECTED FOR OUTWARD TRANSFERS. 1939-1940.

						0	RRE	CIL) FO	n C	UTW	ARL	, IR	ANSI	EEES	. 1:	939-	1940								
EUROPEAN. Total corrected for outward and inward transfers.	Persons	1	1	02	1	1	-	1	1	1	1	1	20	01	10	57	11	1	88	9	00	1	1	13	125	125
ROP Il corr outwa	-	1	1	-	1	1	1	1	1	1	1	1	Oil	-	00	10	9	1	22	94	09	1	1	00	92	100
EU Tota for dinwa	M	1	1	01	1	-	-	1	-	-	1	1	62	-	f=	14	9		56	7	10	1	1	10	1 52	88
rear	Persons	11	11	00 1-	100	-1	11	11	- 83	-8	1-	17	4.00	61.75	10 203	219	201	14	145	16 6	-1 00 10	1"	11	35	124	1,005
OTA	4	11	11	-5	1	111	00	111	-	100	111		08.00	- 23	8.8	25	10.0	1 1.40	123	04.00	100	111	111	00 10	60 417-	419
TOTAL Under one year	N	11	11	90	-	-1		11	12	H 50	1-	17	200	31	113	125	00		856	401	100	1-	11	200	5082	-
Under 12 months	04	11	11	1+	11	11	11	11	00	11	1-	11	11	100	04.00	12	11	111	111	11	11	1=	11		00.00	2
ediaom II	=	11	11	100	100	11	01	11	-1-	1-	11	11		1 20	16	13	11	1.1	11	11	11	11	11		+ 00	200
10 months Under	10	11	11	- 04 I	11	11		11	1+	1-	11	11	1-	100	0110	1 53	11	1-	11	11	11	11	11	HIG	900	7.4
Under 9 months.	0	11	11	1-	1-	11	1-	11	100	1-	11	1-	11	101	12	e 52	04	11	11	11	11	11	11	04-9	10.4	6.9
Under 8 months.	œ	11	11	104	11	11	11	11	11	1-	11	1-	04	100	-8	-8	1.1	11	11	11	11	11	11		800	520
Under 7 months.	-	11	11	10	11	11	11	11	1-	1-	11	1-		10	14	97	11	1-	11	11	11	11	11	100	100 E	7.0
Under 6 months.	10	11	11		11	11	11	11	1-	100	11	11	11	14	10	19	11	1-	11	1.1	11	11	11	-11-	1-1-	9.0
Under 6 months.	9	11	11	100	11	11	00	11	1-	1-	11	11	11	10-	13	181	11	11	1.1	11	1.1	11	11	- 00	019	15
Under 4 months.	+	11	11	1-	11	11	1 01	11	1-	1-	11	1-	1-	1+	191	75 P	11	1-	-1	11	11	11	11	19	+10	89
Under S months.	97	11	11	01	11	11	11	11	1-		11	11	11	10-	02 03	01 ==	1-	100	11	11	11	11	11	0410	a5	20
Over + weeks and under 2 months.	04	11	11		11	11	11	11	11	100	11	11	08	9	15	0010	1-	01	80	11	1	11	11	9	10	57
Total under 4 weeks.	1	11	11	11	11	71	11	11	11	22	11	1.1	0.0		122	100	= 00	-0	34	166	26	11	11	00 88	292	315
Under 4 weeks.	4	11	11	11	11	11	11	11	11	1-	11	11	11	101	-10	11	1-	11	123	11	1-	11	11	00	24.1	53
Under 3 weeks.	03	11	11	11	11	11	11	11	11	100	11	11	1-	1-	11	1-	-1	11	101	11	104	11	11	100	98	84
Under Sweeks	01	11	11	11	11	-1	11	11	11	100	11	11	11		1-	11	04 04	1-	154	11		11	11	100	0.88	35
Total under I week.	-	11	11	11	11	11	11	11	11	10	11	11	1-	11	10	00	00+0	-10	88	16	9 01	11	11	25.0	53	230
Under 7 days.	1-	11	11	11	11	11	11	11	11	1-	11	11	11	11	100	11	11	11		1-	11	11	11	11	-142	10
Under exab 0	0	11	11	11	11	11	11	11	11	11	11	11	11	11	1-	1-	11	11	00 4	11		11	11	1-	+ 00	22
Under 5 days.	2	11	11	11	11	11	11	11	11	1-	11	11	11	11	1-	11	-1	11	-19	11		11	11	0.00	18.4	63
Under 4 days.	4	11	11	11	11	11	11	11	11	11	11	11	1-	11	1 04	11	00.00	11	90		100	11	11	1.1	10 21	26
Under 3 days.	60	11.	11	11	11	11	11	1.1	11	11	11	11	11	11	11	11	04	11	12	-	03	11	11	1-	14.3	17
Under 2 days.	01	11	11	11	11	11	11	11	11	100	11	H	11	11	11	11	1-	104	20.02	01.00	-4	11	11	-10	-=	21
Under Cab.	-	11	11	11	11	11	11	11	11	100	11	11	11	11	11	1-	00-4		120	01 01	0113	11	11	0910	62	96
RACE.		Bur. Non-E.	Eur. Non-E.	Eur. Non-E.	Eur. Non-E.	Bur. Non-E.	Eur. Non-E.	Eur. Non-E.	Eur. Non-E.	Ear. Non-E.	Eur. Non-E.	Eur. Non-E	Bur. Non-E.	Eur. Non-E.	Eur. Non-E.	Eur. Non-E.	Bur. Non-E.	Eur. Non-E.	Bur. Non-E.	Bur. Non-E.	Bur. Non-E.	Eur. Non-E.	Eur. Non-E.	Eur. Non-E.	Eur. Non-E.	Races
		:	:	:		:	geal	ninal		:	:	:	:	:	sm	ritts	:	:	:	:	llar .	(Bull	:	:	:	
18		:	:	-		:	menin	abdon	other	:	:	gitis	:	:	Il for	ente	50	bility	rth.	4	ned a	werly	ants	:	:	
DISEASE.				000 S	9		ceis,	osis,	osis,			nenin	one	2	da, a	a and	matic	al de	re bi	t bir	r infa) uo	- Inf	nses	ALS	
IIG		Measles	Scarlet fever	Whooping cough	Diphtheria	Erysipelas	Tuberculosis, meningeal	Tuberculosis, abdominal	Tuberculosis, forms.	Syphilis	Rickets	Simple meningitis	Convulsions	Bronchitis	Pneumonia, all forms	Diarrhoea and enteritis	Congenital malformations	Congenital debility	Premature birth	Injury at birth	Other diseases peculiar to early infancy	Suffocation (overlying)	Neglect — infants	Other causes	TOTALS	
notineation .o.v.	0	800	600	010	011	220	031	032	030,033 to 040	042	157	100	311	402 to 403A	404 to 406	456	700 to	750	751	752		4	883			
		_	_	_	_		_																_			-

	ber (all per risons	Non- Bur.	96-0	2.02	3 -05	6 - 49	1	4.67	90-9	4 -63	4 -57	2.31	4 -95	10 to	4 -02	3 -75	3 -91			4 -25
	Death rates from Tuber- culoss (all Forms) per 1,000 person	Eur. N	0.35	98-0	1-21	0-49	0.32	1	1-46 8	1 -49	1.87	0-48	0.83	0.55	-	0.16	0.71	+	1	0.73
		Non- Eur.	0 9	10 0	13 1	43 0	1	0 001	78 1	1 08	35 1	0 9	0 25	97 0	-	0 000	65 0	-	-	651 0
	Deaths from Tuberculosis (All Forms).	Eur. N	1	-	1	10	1-	4	01	10	8	1-	101	1	10	-	01	01	1 1-	119
		Non- Eur.	37 04	76-92	125 71	106-95	41-11	116-41	103 .00	81.20	92-601	117.12	133 -20	149-81	158-00	174-42	109-89	+	-	123-91
9-40	Infant Mortality (per 1,000 Births).		1		101		1	1	10					1					-	100
1930		- Bur.	1 29 30	9 22 -73	1	17-65	2 32 47	53 -69	45 -45	11-91	5 60 -24	3 28 -69	11:41	11-63	2 44 -60	0 42-11	93 -19	1 9		18.01
ity,	Deaths under I year of Age.	Non- Eur.	1 00	1	01	3 40	100	8 122	1 79	88	9 45	7 13	9 69	160	125	4 60	8 90	00	1	1881
Je C	-	Bur.			1					120	08		653		19			-		125
of th	Natural Increase rates per 1,000 Persons	Non- Eur.	4.50	17.48	21.38	34.88	18.43	20- 72	29 - 59	26.39	31 -96	25 -77	21.00	20.71	30 -83	33 -11	30 -25			26.52
rds	The second second second	Eur.	90 00	3.36	1	7.58	3 -33	11-41	1.46	13-46	14 21	16-9	16-87	4-97	14-69	6-97	11.38			90-6
Wa	Natural Increase (Excess of Births over Deaths).	Non- Bur.	=	8	16	231	34	611	454	283	245	67	263	583	453	194	503			4,064
rate	Na. Inc (Ex Big over I	Eur.	150	13	1-	20	41	85	01	172	207	101	198	83	257	43	192			1,473
epa	rates er ersons.	Non- Eur.	4.18	12-60	19 -73	21 -59	5-96	19-97	20.40	16-91	21.52	16 -92	20.36	17 -23	24 -77	25-60	10-61			19.88
the s	Death rates 1,000 Persons	Bur.	10 -22	8-01	14 -50	8 -93	21.6	8-59	14-57	2.36	8 -58	9.83	17.11	8.60	99-6	8-43	20-6			9.77
for	Peatins.	Non- Bur.	13	67	84	143	11	437	313	183	165	7	255	485	364	150	316	34		3,046
ites	Dea	Eur.	206	31	12	92	113	99	65	16	125	143	16	109	169	550	153	48	59	1,590
c Ra	matr ercent. Total	Non- Eur.	00.00	29-02	21-71	20 -14	28 -89	10 -37	29-42	18 -38	20-00	22.52	26 -45	19-05	19 -95	29-94	88-02			21 -77
atisti	Hegitimate Births, Percent- age of Total Births.	Bur.	1.10	16-51	18.18	6-47	5.84	9-04	4.55	01-6	3-61	3-69	89-0	1.74	3.05	5-26	19-2			5-020
al S	E. E.	Non- Eur.	0	34	88	109	13	2003	157	98	22	500	137	219	163	103	171	01		1,548
Vita	Illegitimate Birtha.	Bur.	00	1-	08	11	0	6	-	52	12	0	01	00	13	10	6	980		152
and	Birth rates per 000 Persons.	Non- Eur.	89-88	30-07	41-11	29-92	24 -39	47 -88	40 - 00	43 -33	53.48	42 -69	41 -35	37 -95	19-99	12-89	49 -26			07-97
ions	Birth rates per 1,000 Persons.	Eur.	13 -65	11-37	13 -29	16-51	12.50	20.01	16-03	20 -82	22 -79	16-77	24-14	13-57	24.36	15.39	20-45			18.83
oulat		Non- Eur.	61	117	175	374	45	-	767	897	410	111	518	1,068	817	344	819	01		011,7
-Pop	Births.	Eur.	573	#	11	170	154	149 1,048	83	266	335	244	202	172	425	88	345	350	98	3,063
Table JPopulations and Vital Statistic Rates for the separate Wards of the City, 1939-40.	0.	Total.	23,324	7,780	5,309	16,966	14,206	29,414	16,762	23,643	22,298	17,193	24,689	40,928	32,270	14,763	33,587			316,750
rable	Calculated Populations on the 31st December, 1939.	Non- Eur.	8,118	3,901	4,269	6,641	1,850	21,947	15,386	10,830	7,687	2,607	12,561	28,000	14,733	8,575	16,672			153,640
-	Pol on Dece	Bur.	20,206	8,879	830	10,325	12,356	7,467	1,376	12,813	14,611	14,586	12,128	12,706	17,537	6,188	16,915		-	011,591
			:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	sus	D.B.O
	WAXDS.		Point	Janoq	West Central	10	:	East Central	e	Woodstock	River	rbray	fland	12. Rondebosch*	emont	k Bay	nberg	Not allocated	A. Inward Transfers	B. City of Cape Town 163,110 153,640 316,750 3,063 7,110 18-83
			I. Ses Point		S. Wes	4. Kloof	5. Park	6. East	7. Castle	8. Woo	9. Salt River	10. Mowbray	11. Maitland	12. Rot	13. Claremont	14. Kalk Bay	15. Wynberg	Not	A. Inwa	8. City
			-	-	-		-	1			-	71		1	-1		-	-	-1,	

Corrected for cutward transfers.

Exclusive of Langa location.
 A. These figures refer to European births and deaths belonging to Cape Town, but which occurred outside the municipality.
 Exclusive of all figures relative location of Langa (which is shown separately in Table 8 on page 133) but inclusive, so far as the European population is concerned, of population in the Barbour and C. Exclusive of the 36 European births (inward transfers), in regard to which information as to the legitimacy is not available.

1939.40.	All Forms of Tuberculosis; Death Rate.	NE E N A C NE	0.36	: : : : : : : : :	123.91 0.69 5.85° 2.15 4.19 4.25	0.41 2.8 1.7 4.8	255.39 0.11 0.87 1.37 1.33 0.94	0.31 5.49 4.94 4.67	468.03 0.27 0.612 0.00 0.00 0.60	144.23 0.41 0.73 0.73	0.08 0.54* 1.82 1.43 0.59	: : : : : : : :	557.142 0.093 0.613	204.03 0.24 2.26	491.38* 0.25 0.67*	282.05 0.52 0.93* 3.53 0.97	587.0 0.4 6.8	0.19 1.67 1.02 4.66	0.40 4.5 3.5	269.16 1.02 0.97	1.15 4.65 14.52		0.72 s	Other Coloured. S Crude or uncorrected. Standardized to standard million of England and Wales for 1901.
for the Year 1939-40.	y Rate.	C	:		122.57 15	145.1	146.34 20	18.81	40	14	129.00	75.00	55		46	185.19 28	25	93.13	126.7	187.50 20	431.82	:	-	I. prected. to standard
for t	Infant Mortality Rate.	A	:		33.90	115.6	136.90	60.09	119.05	103.44	83.33	37.03			:	41.67	:	181.2		111.111	125.00	:	:	Coloured de or une idardized
tistic Rates for Various Centres	Infan	N	:		185.925	547.4	349.67	280.34	464.20	145.49	576.004	677.77				340.284	:	216.2	328.8	281.12	283.95	:	:	
) snoi		E	49.48	:	40.96	47.3	43.84	62.32	39.92	41.71	63.03	66.85	41.84	32.92	50.39	52.21	62.7	44.67	73.6	53.81	75.63	52.08	57.00	= Mixed and
or Var		NE	:	:	19.88		11.16	;	8.25	10.75	11.07	:	8.933	20.97	11.002	7.78	32.3		:	s 19.23 a	:	:	:	ο "
ates fo	te.	0	:	:	19.92	20.2	12.66	25.94	12.68	:	15.71	14.91	:		:	23.53	:	23.34	21.11	40.00 2	43.59	:	:	cation.
stic R	Death Rate.	A	:	:	12.90	17.5	18.21	1 21.40	15.79	50 11 -05	10.91	8 6.51	:	:	:	10.00	:	12.38	:	12.00 =	29.63	:	-:	sfers. of mines Langa le
Statis	Q	N	80	-	8 21.92	21.9	3 10.45	47.64	7 8.14	5 10.75	5 10.90	89.68	3.5			7 7.44	:	2 13.88	4 31.32	2 19.09	2 21.52	:	:	utward transfers. A = Asiatic. Inclusive of mines. Including Langa location.
KVital Sta	-	E	9.403	:	0 9.38	10.2	6 7.43	8.14	6 5.87	7 8.853	9 6.65	9.863	33 4.732	7 5.98	24 7.35	7.97	8.6	10.52	12.24	1 6.12*	11.82	8.54	11.43	for outw
		NE	:		7 46.40	:	3 13.46	:	5.46	14.17	8.39		5.03	29.97	13.32	9	25.3	00	71	3 26.61	:	:	-	corrected
Table	ite.	0		:	8 46.87	46.9	1 27.33	8 49.98	6 36.62	1	5 44.29	9 35.08		:		0 31.76	-	8 50,18	43.2	0 55.33	6 37.61	:	:	shown are or N = Native.
T	Birth Rate.	A		:	847.58	46.2	4 50.71	2 77.38	52 55.26	10-01	04 54.55	4 58.69		;	-	64 80.00		4 16.88		2 54.00	6 59.26	:	:	lities she N = rison.
		N		:	1 39.48*	14.4	7 8.64	4 63.62	9 4.752	6 63.54	6 14.404	8 4.34			0	5 18,464		7 19.44	36.3	1 24.92	4 23.56			municipa 938. se and pu
		M	25.29	:	18.61	20.3	. 26.87	h 23.14	. 31.29	. 30.96	. 24.56	. 33.08	. 31.73	. 19.52	. 25.30	32.95	. 17.6	21.17	. 21.8	. 33.31	19.54	1 15.13	13.43	for the pean. r year live of mix
		· Centre.	Union of South Africa (1939)	Johannesburg	Cape Town	Durban	Pretoria	Port Elizabeth	Springs	Germiston	Benoni	Krugersdorp	Brakpan	Bloemfontein	Boksburg	Roodepoort	East London	Pietermaritz.	Kimberley	Vereeniging	King William's Town	England and Wales (1)	County of Lon- don (1)	The rates for the municipalities shown are corrected for outward transfers. E = European. N = Native. Calendar year 1938. Inclusive of m * Inclusive of m * Inclusive of m * Including Lan.

Table L.-Deaths in Institutions, 1939-40.

INSTITUTION.	Tot Dea	al ths.	belong	aths ring to Town.	belong Cape	hs not ging to Town Transfers).
	Eur.	Non-E.	Eur.	Non-E.	Eur.	Non-E.
Groote Schuur Hospital	312	335	205	224	107	111
City Hospital	85	224	50	181	35	43
Valkenberg Mental Hospital	61 50	71 73	36 40	33 49	25 10	38 24
Somerset Hospital	2	113	2	88	-	25
Woodstock Hospital	39	36	27	24	12	12
Peninsula Maternity Hospital	.7	52	7	42	10	10
Volkshospitaal	44 38		25 31		19	_
Mowbray and Rondebosch Hospital	31	7	22	6	9	1
St. Joseph's Sanatorium	25	_	18	-	7	-
Tamboers Kloof Nursing Home	19	16	10	75	9	-
City Isolation Hospital, Rentzkie's Farm Monte Rosa Nursing Home	17	10	9	15	-8	1
Hof St. Nursing Home	15	_	8		7	-
Clarendon Nursing Home	14	-	13	_	1	-
Mowbray Nursing Home	12	1	11	1	1	-
Booth Memorial Hospital	13 13		10	-	3	11111
Alexandra Institution	13		13		100	=
Diakones Hospital	13	-	10		3	-
Cape Jewish Aged Home	13		13	-	-	7 .
Cape Town Gaol	1	10	1	3		7
St. Monica's Home	-6	-0	-6	6		
Nazareth House	5		5			
Notley Nursing Home	5	-	4		1	=
Kenilworth Nursing Home	5	-	3	-	2	
Cambridge Nursing Home	5 4		4		1	
Brentwood Nursing Home	4		3		i	
Baveno Nursing Home	4		4			=
"Vrede Oord"	-	4	-	4	-	-
Camp Ground Nursing Home	4 3		3		1	_
Inverugie Nursing Home	3		2 2		i	_
Airemount Nursing Home	3		3	-		
Princess Christian Home	3	-	3	-	-	=
Trafalgar Nursing Home	2	-	1	-	1	-
Eaton Convalescent Home	2 2		2		2	
Biblis Nursing Home	ĩ		1		-	=
Sister Nannie's Home		1	-	1	-	
Longroyd Nursing Home	1		1	-		-
St. Columba's Home	1		=	1	1	=
The Rest, Tuin Plein	i		1		_	-
Lady Michaelis Home	_	1	-	1	-	=
Delherbe Nursing Home	1	1	1	-	-	- 1
House of Correction	100	1				1
Totals	904	952	628	679	276	273
Institutions in other parts of the Union of South Africa:						
General Hospitals			11			
Nursing Homes			3			
Mental Hospitals			7 3			
Chronic Sick Hospitals			17			
Lock and Isolation Hospital			1			
Totals			42			
Langa Hospital	705	36	1	31		5
Langa Hospital		80		01	-	

Deaths of Langa residents are included in this table.

Table M.—Births and Still-Births Notified, Classified as to attendance at Confinement and as to Home Address of Mother, 1939-1940 (1st July, 1939, to 30th June, 1940).

i	Contract Contract	No. of Concession, Name of Street, or other Designation, Name of Street, or other Designation, Name of Street,									_				_
	ed from	Non- Resi- dents	10	. 17	90	-	01	Ш	27	241	33	64	00	183	671
	Excluded from foregoing columns.	Langa	1	1	1	1111-	11	1	20	26	1	1	1	-	35
	-	Total of Wards	841	3,262	2,561	8 185 757 33 371	86	381	334	1,126	95	+	19	788	10,946
		Not Allo-	*	01	1	-01-	90 22	-	1	1	-	1	1	1	108
		15 Wyn- berg	175	395	374	00 22	o	107	39	110	6	1	-	96	1,243
		14 Kalk Bay	53	106	276	111	11	9	10	34	t-	01	01	26	541
		13 Clare- 1 mont	86	414	473	11197	13	41	7	133	4	1	00	109	1,336
ı					-									30.0	
		Ronde bosch	69	604	374	01 01	65	56	335	116	7	-	-	78	1,340
	HIX.	Mait- land	101	230	359	1111	9	19	100	III	10	1	61	6	886
	THE	Mow- bray	53	129	202	11111	11	8	00	43	01	1	1	64	343
	WARDS OF THE CITY.	9 Salt River	83	234	197	101	01	81	16	105	4	1	-	19	786
	WAF	8 Wood- stock	58	264	131	11511	01 01	19	61	116	6	1	01	24	162
		7 Castle	39	276	68	152	04	01	38	76	13	1	01	1	808
		6 East Central	63	381	75	01 03 15	01	60	31	147	16	1	-	42	1,272
			- 00	27	-	41.8 91	11	4.7	10	34	01	1	1	21	204
		5 Park							-						
1	0.00	4 Kloof	65	16	114	-83	01	4	48	46	6	-	1	73	594
		West Central	=======================================	45	90	1924	11	01	-	23	-	1	1	1	218
١		Har-	10	46	65	168	11	0	9	18	4	-	-	13	178
ı		Sea Point	27	18	1	-1111	11	38	00	16	04	1	Ī	188	298
ı			. :	any a	:	ğ:::j::	::	:	:		:	:	:	:	:
	137		:	ing 8 ending	:	tal tal ospita	::	tal	:	ospita	п	:	80		:
	CLASSIFICATION			chud		rives (or midwife students) from: Booth Memorial Hospital St. Monica's Home Peninsula Maternity Hospital District nurse-midwives Vrede Oord, Tuin Plein		ined in institutions: Booth Memorial Hospital		Peninsula Maternity Hospital	Vrede Oord, Tuin Plein		Other public institutions	Private nursing homes	
	TCAT		:	ersons	.: b	rives (or midwife stud Booth Memorial Hoo St. Monica's Home Peninsula Maternity District nurse-midwi Vrede Oord, Tuin P	lwife	tution	St. Monica's Home	atern	Tuit	Hais	o inst	Sing	MIS.
	SSIF		tors	dwiv	Uncertificated	Memonica's nica's nla M nurs Dord,	r mid	Memo	nica's	ala M	Oord,	Magdalona Huis	publi	unu (TOTALS
	CLA		doe doe	ivate midwiv non-medical confinement): Certificated	ncerti	ooth Mor whinsu	otor o	od in	. Mon	nins	opea	agdal	ther	rivate	
			Private doctors	Private midwives non-medical pers confinement): Cortificated	U	Midwives (or midwife students) from: Booth Memorial Hospital St. Monica's Home Peninsula Maternity Hospital. District nurse-midwives Vrede Oord, Tuin Plein	No doctor or midwife No information	Confined in institutions : Booth Memorial Hos	St	P	V	W	0	P	
L				7-217-1		PARTIES NAMED IN	-						T		-

Births actually occurring in the Langa native location are excluded from the above table. They numbered 155,

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	Corrected No. from ships in port.	111	1-14 4 31- 33	om ships.
	Corrected No. of extra- municipal cases.	10	00 18888 1870 1888 1888 1888 1888 1888 1	= 2. = 4. Excluding cases from ships.
1939, to 30th June, 1940.	Addition for diagnosis.	6		8. = 2. 9. = 4. 10. Exclud
30th Ju	Deduction for diagnosis.	00	80-808-111111 -18	a. spital itside in the
, 1939, to	Extra- municipal cases uncorrected.	7	128 35 38 38 38 114 114 38 45 9 115 117 118 118 118 118 118 118 118 118 118	nga locatior I to City Ho ital from ou from ships
Notifiable Disease reported 1st July,	Corrected cuses, Langa location.	9	- - - 4	Excluding Langa location. Cases admitted to City Hospital or other hospital from outside Cape Town or from ships in the port.
e reporte	Corrected number of cases.	10	416 135 79 68 68 68 68 16 7 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ro F.
le Diseas	Addition for diagnosis.	4	23 28 12 1 m m m	Town from iffering from to the disease
Notifiab	Deduction of imported cases.	60		3. Arrived in Cape Town from outside already suffering from the disease. 4. Diagnosis changed to the disease named.
Cases of	Deduction for diagnosis.	61	25 12 × 25 × 1 88 9 9 9 9 9 9 9 9 9 9 9	3. Arrived in outside alre the disease. 4. Diagnosis of named.
Table N.—Cases	Uncorrected.	1	623 144 175 121 177 10 10 10 11,228 246 15 530 54 54 204 3,455	Town Langa. g from
Ta			Diphtheria Scarlet fever Puerperal fever Enteric fever Erysipelas Cerebrospinal fever Acute poliomyelitis Infective encephalitis Typhus fever (endemic) Leprosy Malta fever Ophthalmia Trachoma Acute primary pneumonia Influenzal pneumonia Influenzal pneumonia Intherculosis, respiratory system. Tuberculosis, other forms Tuberculosis, other forms	Notifications re Cape Town cases received, including Langa Found not to be suffering from the disease as notified.

	1	- 6	t a	111110-11111111	-			- 1	tals.	346 147 382 382 382 382 382 44 101 101 101 101 101 101 101 101 101
网络教育	Leprosy.	o.	M. P.		- 1				1	25 25 25 25 25 25 25 25 25 25 25 25 25 2
	2	-	F.	11111111111111	1		4	0	1	821888888888888888888888888888888888888
100000		gi	K	remain man	1		Totals	-	×	i i
		-	tal.	14141014111111	10		118	B.	. F.	8558488420511001 8
9-4	Infective Encephalitis.	o.	F.	1111111-11111	01				M	811812888888110
193	Infec		N N		1=		ver.	-	15	11114111111111
S,	24	18	M. F		-		Malta Fever.	0	M. F.	111111111111111111111111111111111111111
ino	7	1	E	01-00000401-1111	18		Mal	E.	. F	1111111111111111
19	Cerebrospinal Fever.	0.	a.					3	tal. M	11111010110111
\ge	Cereb	_	F. M	11111111111111	- 17		Fever se).		F.	
P		Ni Ni	M.		04		Typhus Fever (endemic).	0	M.	111111111111111111111111111111111111111
an	_	6	tal.	**************************************	8		Typ	ağ	М. Р.	111111111111111111111111111111111111111
Sex	Erysipelas.	0.	I. F.	01-01 1-401/2000 1	16 23			4	Te l	111010000101111
, ie	Ery		P. M		18 1		Trachoma.	0.	. F.	11111441141111
Rac		80	N.	01 1 1 mm m 00 00 1 1 1 1 1 1 1 1 1	11		Traci		F. M	111414041111111
to	rer.	4	ta .		5 135			E	M.	111-10011111111
as	Scarlet Fever.	0	M. F	1	9		ir.	- 1 1	ta.	11111488411111 5
Pa ed	Scarle	20	Di.		63		Puerperal Fever.	E. 0	200	0 1111100000111111
Infectious Disease classified as to Race, Sex and Age-groups, 1939-40. E.—Europeans. O.—Non-Europeans.		100	M	000-1000-00-1111	6 61	ł	-		tal. F	00 00 1 00 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1
clas	4	2	tal.	887556800111111	8 416		mla.	-	F.	8 8 8 1 1 1 1 1 1 1 1 1 1 8
se .	Diphtheria.	0	M. P.	+0800101-11111	62 68		Ophthalmia	0.	M.	8101101111111
us Diseas	Dipl	E.	P.	19200457001111	158	ı	do	ii.	24	51 1 1 1 1 1 1 1 1 1 1 1 1 1 5
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TABLE QNotification of Infectious Disease	Wards of the City, etc.		11111111111111111		Imported Cases: Diveloped outside Municipal area. Direct Remorals (Gases removed to hospitals and Municipal area): From outside Municipal area From ships in the Docks.		Wards of the City, etc.				Imported Cases: Diversiphed Cases: Diversiphed Ones Overseas Diver Removals (Cases removed to Nonecipal Area) From contade Municipal area From ships in the Docks	
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Table R.-Notification of Infectious Disease for a series of years, classified as to Race

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Diseases.	Race.	1921	1922	1923	1924	-	1926	1927	1928	1929	1930	1931	1932	1933	1934	-	-	1937	-	1
		1922.	1923.	1924.		1926.	1927.	1928	1929	1930	1931.	1932.	1933.		1935.			1938.	-	1
Scarlatina or Scarlet fever	Eur. Non-E.	97	47	26 3	50	129	123	228 6	154 10	260	425 40	121	121	103	229 14	596 34	458 28	113	81	Ľ
Diphtheria or Membranous eroup.	Eur. Non-E.	89 18	121 24	163	209	180 46	186 87	162 62	162 70	166 54	189 93	120 67	142 73	192 106	238 136	189 122	223 119		537 233	21
Enterie or Typhoid fever	Eur. Non-E.	204 207	180 141	121 93	79 94	87 100	117 123	109 135	100 100	87 94	97 103	71 98	30 30	52 47	33 49	30 43	34 96	58 41	14 37	
Erysipelas	Eur. Non-E.	25 6	31 6	16 10	20 12	15 14	45 24	35 34	43 26	33 32	41 30	40 28	28 41	37 30	44 50	51 42	43 31	33 28	30 36	
Puerperal fever	Eur. Non-E.	7 17	11 15	8 15	9 24	9 36	10 35	20 38	29 54	16 53	19 43	16 52	22 49	26 48	24 67	22 74	13 51	19 51	22 62	
Ophthalmia	Eur. Non-E.	11 29	9 22	15 28	18 59	27 101	22 113	27 135	25 122	50 208	50 227	53 199	47 218	30 190	38 259	39 227	42 215	24 213	35 181	
Cerebrospinal fever	Eur. Non-E.	5	4 3	3 2	6 19	4 21	10 39	39 183	30 101	14 48	4 18	7 25	8 22	3 17	5 20	1 9	7	3 15	5 33	
Acute poliomyelitis	Eur. Non-E.	1	-1	1	1	=	2	8 4	4	11 6	5 5	=	4 4	8 3	11 14	1 3	7 2	4 2	2 9	
Infective encephalitis	Eur. Non-E.	5	2	5 4	6 5	6 10	6 5	8 3	7 5	4 3	1 4	9 2	2 4	2	8 3	4 3	1 3	4 4	2	
Leprosy	Eur. Non-E.	2 3	-6	-4	=	1 2	-1		-4	1 3	1 1	1 4	- 2	- 2	1 1	-	-3	1 2	-1	
Typhus fever (endemic)	Eur. Non-E.	=	1	=	=	3	1	11	1	1	2	_4	2	4	=	2	_4	1	6	
Smallpox	Eur. Non-E.		=	=	-	=	Ξ	=	=	Ξ	=	=	=	=	=	-	=	=	=	
Influenza	Eur.		18	22	189	67	61	132	166	990	co.	+101								Ē
	Non-E.		2	24	284	161	133	327	349	238 348	69 171	+140	1000							
Pneumonia, all forms*	Non-E. Non-E.	63 97	72 111																	
Pneumonia,	Eur. Non-E.		72										19 31	13 31	45 82	56 64	29 41	37 74	17 50	
Pneumonia, all forms*	Eur. Non-E. Eur. Non-E.		72	6	284	25	41	327	62	348	24	†140 41								
Pneumonia, all forms* Influenzal pneumonia Acute primary	Eur. Non-E. Eur. Non-E.		72	6 13 23	284 28 52 76	25 61 83	41 63 89	327 45 121 84	62 78	54 80 58	24 38 84	†140 41 91 98	77	59	138	148	103	96	103	
Pneumonia, all forms* Influenzal pneumonia Acute primary pneumonia	Eur. Non-E. Eur. Non-E. Eur. Non-E.		72	6 13 23	284 28 52 76	25 61 83	41 63 89	327 45 121 84	62 78	54 80 58 302	24 38 84	†140 41 91 98	77	59	138	148 465	103	74 96 466	103 420	
Pneumonia, all forms* Influenzal pneumonia Acute primary pneumonia Cholera	Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur.	97	72	6 13 23 68	284 28 52 76	25 61 83	41 63 89	327 45 121 84	62 78 91 386	54 80 58 302	24 38 84	1140 41 91 98 334	77 253 — —	59	138	148 465 —	103 376	74 96 466	103 420 —	
Pneumonia, all forms* Influenzal pneumonia Acute primary pneumonia Cholera	Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E.	97	72 111	6 13 23 68 — — — — —	284 28 52 76 203 —	25 61 83 186 — — — —	41 63 89 285	327 45 121 84 396	62 78 91 386	54 80 58 302	24 38 84	1140 41 91 98 334 ——————————————————————————————————	31 77 253 — — — —	59 294 — —	138	148 465 —	103 376	74 96 466 — —	103 420 — — —	
Pneumonia, all forms* Influenzal pneumonia Acute primary pneumonia Cholera Plague Anthrax Glanders	Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E.	97	72 111	66 13 23 68	284 28 52 76 203 —	25 61 83 186 —	133 41 63 89 285 —	327 45 121 84 396 — — —	349 62 78 91 386 — — — 1	54 80 58 302	24 38 84 289 — —	1140 41 91 98 334 ——————————————————————————————————	31 77 253 — — — — — — — —	31 59 294 — — — — — —	82 138 566 — — —	148 465 — — — —	103 376 — — — — — — — — — — — — — — — — — — —	74 96 466 — — — —	103 420 — — — — —	
Pneumonia, all forms* Influenzal pneumonia Acute primary pneumonia Cholera Anthrax Glanders Rabies	Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Eur. Non-E.	97	72 111	66 13 23 68	284 28 52 76 203 —	25 61 83 186	133 41 63 89 285 —	327 45 121 84 396 — — —	349 62 78 91 386 — 1 — — —	54 80 58 302	24 38 84 289 — —	1140 41 91 98 334 ——————————————————————————————————	31 77 253 — — — — — — — — — —	31 59 294 — — — — — — —	82 138 566 — — — —	148 465 — — — —	103 376 - - - - -	74 96 466 — — — —	103 420 — — — —	
Pneumonia, all forms* Influenzal pneumonia Acute primary pneumonia Cholera Plague Anthrax Glanders	Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur.	97	72 1111	6 13 23 68 — — — — — — — — — — — — — — — — — —	284 28 52 76 203 —	25 61 83 186	41 63 89 285	327 45 121 84 396	349 62 78 91 386 — 1 — — —	54 80 58 302	24 38 84 289 — — — — —	1140 41 91 98 334 ——————————————————————————————————	31 77 253 — — — — — — — — —	31 59 294 — — — — — — — — — — — 1	82 138 566 — — — — — — — — — —	64 148 465 — — — — —	103 376 - - - - -	74 96 466 — — — — —	103 420 — — — — —	
Pneumonia, all forms* Influenzal pneumonia Acute primary pneumonia Cholera Plague Anthrax Glanders Rabies Malta fever	Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Eur. Non-E. Eur.	97	72 1111	6 13 23 68 — — — — — — — — — — — — — — — — — —	284 28 52 76 203 —	25 61 83 186	133 41 63 89 285	327 45 121 84 396 ———————————————————————————————————	349 62 78 91 386	54 80 58 302	24 38 84 289 — — — — —	1140 41 91 98 334 	31 77 253 — — — — — — — — — — — — — — — — —	31 59 294 — — — — — — — — — — — 1	82 138 566 — — — — — — — — — —	64 148 465 — — — — —	103 376 - - - - -	74 96 466 — — — — — — — — — — —	103 420 ———————————————————————————————————	
Pneumonia, all forms* Influenzal pneumonia Acute primary pneumonia Cholera Plague Anthrax Glanders Malta fever Yellow fever Trachoma	Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E.	97	72 1111	6 13 23 68 — — — — — — — — — — — — — — — — — —	284 28 52 76 203 —	25 61 83 186 — — — — — — — — — — — — — — — — — — —	133 41 63 89 285	327 45 121 84 396 ———————————————————————————————————	349 62 78 91 386 1 3	348 54 80 58 302 	24 38 84 289 — — — — — — — — —	140 41 91 98 334 	31 77 253 — — — — — — — — — — — — —	31 59 294 — — — — — — — — — — — — — — — — — — —	82 138 566 — — — — — — — — — — — — — — — — — —	64 148 465 — — — — — — — — — —	41 103 376 	74 96 466 — — — — — —	50 103 420 — — — — —	
Pneumonia, all forms* Influenzal pneumonia Acute primary pneumonia Cholera Plague Anthrax Glanders Malta fever Yellow fever Trachoma Lead poisoning	Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Eur. Non-E. Eur. Eur. Non-E. Eur. Non-E. Eur.	97	72 1111	6 13 23 68 — — — — — — — — — — — — — — — — — —	284 28 52 76 203 —	25 61 83 186 — — — — — — — — — — — — — — — — — — —	133 41 63 89 285	327 45 121 84 396 ———————————————————————————————————	349 62 78 91 386 1 3	348 54 80 58 302 	24 38 84 289 — — — — — 1 1 1	140 41 91 98 334 	31 77 253 — — — — — — — — — — — — —	31 59 294 — — — — — — — — — — — — —	82 138 566 — — — — — — — — — — — — —	64 148 465 — — — — — — — — — — — — — — — — — — —	41 103 376 — — — — — — — — — — — — — — — — — — —	74 96 466 — — — — — — — — — — — — — — — — —	50 103 420 ———————————————————————————————————	
Pneumonia, all forms* Influenzal pneumonia Acute primary pneumonia Cholera Plague Anthrax Glanders Walta fever Yellow fever Trachoma Lead poisoning Tuberculosis,	Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur. Non-E. Eur.	97	72 1111	6 13 23 68 — — — — — — — — — — — — — — — — — —	284 28 52 76 203 —	25 61 83 186 — — — — — — — — — — — — — — — — — — —	133 41 63 89 285	327 45 121 84 396 ———————————————————————————————————	349 62 78 91 386 1 3	348 54 80 58 302 	24 38 84 289 — — — — — 1 1 1	140 41 91 98 334 	31 77 253 — — — — — — — — — — — — —	31 59 294 — — — — — — — — — — — — — — — — — — —	82 138 566 — — — — — — — — — — — — —	64 148 465 — — — — — — — — — — — — — — — — — — —	41 103 376 — — — — — — — — — — — — —	74 96 466 — — — — — — — — — — — — — — — — —	50 103 420 ———————————————————————————————————	11 9 9

All figures corrected for imported cases and misdiagnosis.
City extended by incorporation of Wynberg, 1927-28.
* Not separately classified until 1923-1924.
† 1st July—18th December, 1931.

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* Not including I European birth (male legitimate.)

NOTIFICATION OF INFECTIOUS DISEASE.

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Natives.	Diphtheria. Erysipelas. Cerebrospinal Influenzal fever. pneumonia. 1	4	1
	Cerebr	M.	7
	pelas.	M. F. M. F.	1
	Erysi	M.	
	heria.	E.	-
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	Tuberculosis, Tuberculosis, respiratory other system.	F.	4
	Tuber of fo	M.	-
	ulosis, atory em.	E.	14
	Tubere respir syst	W.	32 23

Excluded from the above are one case of tuberculosis of the respiratory system (native female) and one case of cerebrospinal fever (native male) who contracted the disease outside the municipal area, being already ill on arrival in Langa location. Included are two patients admitted to the City Hospital for another disease who proved to be cases of tuberculosis of the respiratory system.

Deaths in Langa location hospital, 36 (Natives: 24 males, 12 females.)

Table T.-BAROMETRICAL READINGS, 1939-1940.

CORRECTED FOR ALTITUDE, TEMPERATURE, INDEX ERROR, CAPACITY AND CAPILLARITY.

		THE RESERVE OF THE PARTY OF THE	
ate years, ith June,	, 1920 , 1920 , 1920 , 1928 , 1925	1911 1921 1921 1921 1916 1916	7161/1/21
Lowest and date r thirty-three yes aly, 1906, to 30th 1939.	13th, 29th, 13th, 6th, 14th, 24th,	17th, 4th, 13th, 19th, 11th,	13,
Lowest and date for thirty-three years, 1st July, 1906, to 30th June 1939.	28.924 29.753 29.694 29.727 29.831 29.754	29 - 757 29 - 002 29 - 002 29 - 008 29 - 058	28.924
	1924 1912 1913 1921	1917 1923 1908 1927 1915	921
rt and date y-three yea 6, to 30th J 1939.	26th, 1 8th, 1 8th, 1 24th, 1 13th, 1	30th, 1 9th, 1 11th, 1 20th, 1 3rd, 1 22nd, 1	26/8/1921
Highest and date for thirty-three years, lst July, 1906, to 30th June 1939.	30 - 737 30 - 984 30 - 691 30 - 563 30 - 569 30 - 569	30 - 500 30 - 945 30 - 608 30 - 508 30 - 641 30 - 663	30.984
			940
Date	5th 10th 11th 12th 10th	20th 9th 17th 29th 19th 19th	29/4/1940
Lowest.	30.071 30.022 29.932 30.000 30.028	29 - 972 29 - 797 29 - 837 29 - 646 29 - 878 29 - 992	29.646
9			
Date.	14th 1st 25th 18th 3rd 4th	lst 18th 23rd 7th 5th 26th	25/9/1939
Highest.	30 - 544 30 - 530 30 - 552 30 - 388 30 - 388 30 - 388	30 · 327 30 · 244 30 · 366 30 · 514 30 · 486 30 · 486	30.552
Average for thirty-three years, 1st July, 1906, to 30th June, 1939.	30.245 30.282 30.282 30.222 30.187	30-113 ¹ 30-113 30-161 30-266 30-285 30-285	30-208
Mean.	30 332 30 288 30 262 30 195 30 189 30 183	30 · 153 30 · 106 30 · 143 30 · 223 30 · 235 30 · 315	30.220
	::::::	:::::	:
	:::::	:::::	:
Month.	1939. er : : : : : : : : : : : : : : : : : : :	1940.	
	July August September October November December	January February March April May June	Year

1 Taking for January, the average of 32 years.

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				2	Maximum Th	Thermometer	1					Minimum Thermometer	Thermome	ter.			
Month.		Mean at 8 a.m.	Average for 33 years, 18t July, 1906, to 30th June, 1939.	Mean	Average for 33 years, 1st July, 1906, to 30th June, 1939.	Highest	Date.	High fo lst July Ju	Highest and date for 33 years, 1st July, 1906, to 30th June, 1939.	ate 30th	Mean	Average for 33 years, 1st July, 1906, to 30th June, 1939.	Lowest.	Date.	Lo lst Jul	Lowest and date for 33 years, lst July, 1906, to 30th June, 1939.	date 0. 30 19.
		do	do	do	do	do		Ao			di o	do	H o		do		
1939 July	:	55.28	50.780	64.76	63-423	77.6	28th	85.3	30th.	1927	49-01	47.326	44.0	8th & 13th		5th.	1907
August	:	53.23	52-676	64.03	64-388	77.9	10th	8.06	24th,	1918	47.50	47.078	8.04	2nd	35.5	25th,	1926
September	:	26.50	55.381	69.77	65-980	92.1	28th	92.1	28th,	1939	49-75	49.710	44.0	lst	39.8	4th,	1921
October	:	61.03	57-287	72.15	70-313	0.28	30th	95.6	31st,	1915	52.86	52.426	45.8	lst	43.0	6th, 8thand 20th, 1926and 1st. 1928	hand 26an 1928
November	::	64-45 67-41	62.892	76.46	74.262	91.1	26th 14th	100.3	25th, 25th,	1927	54.89	55.445	52.0	15th 19th & 21st	44.0	15th, 30th,	1924
1940																	
January	:	67.92	66.435	81.73	80.400	92.9	13th	102.3	27th,		59.10	59-340	51.7	22nd	42.5	7th,	1918
February March	: :	61.51	63-337	76.43	78.681	94.0	1st 10th &	103.8	14th,	1924	59.08	59-416	54.0	10th & 11th 8th		28th, 1928 25th 1916and	1928
							17th									30th.	1928
April	:	58.30	58.930	70-45	73.341	93.1	10th	102.9	lst,		51.83	54-125	48.1	4th	40.8	28th,	1928
day	:	55.05	55.238	65.28	68.358	78.9	23rd	95.5	3rd,	1932	49.11	54.392	43.1	lst	40.3	19th,	192
June	:	53-35	52.805	64.18	62-546	6.62	5th	85.7	22nd,	1912	47.38	48-923	40.3	21st	36.2	4th,	1928
Year	:	60.02	58-912	72.17	71.634	04.0	1.9.40	102.0	14 /0 /1004	1000	20.00	20.001	0 07	01 /0 /1010	000	100	moon in it

HUM Mean Saturation 100. 78.45 80.55 72.83 74.32 66.45 66.45 68.65 79.66 86.39
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					T	ible	WEART	H TEMPE	RATURE,	Table WEARTH TEMPERATURE, 1939-1940.		
			Month.				Range at one foot.	Range at one foot, 33 years, 1st July, 1996, to 30th June, 1939	Range at two foet. °F.	Range at two feet, 33 years, lat July, 1906, to 30th June, 1939	Range at four feet. °F.	Range at four feet, 33 years, 1st July, 1906, to 30th June, 1939
July	:	:	1939.	:	:	. :	54.3 to 58.9	49.2 to 64.0	55-5 to 60-1	54.0 to 61.3	60-8 to 62-1	53.0 to 62.9
August	st	:	:	:	:	;	53.9 to 59.9	50.9 to 62.0	56.9 to 60.2	53.8 to 62.0	59.9 to 61.3	55.0 to 62.0
September	mber	:	:	:	:	.:	58.4 to 67.3	50.9 to 67.2	59.6 to 66.0	55.0 to 66.0	61.1 to 64.4	57.0 to 65.5
October	yer	:	:	:	:	:	65.1 to 72.2	57-1 to 75-9	66.0 to 71.8	58.0 to 72.5	65.0 to 69.4	56.8 to 73.8
November		:	:	:	:	:	66.9 to 78.3	59.3 to 83.0	69.8 to 76.8	60.5 to 79.7	69.8 to 73.1	60.8 to 76.2
December	nber	:	:	:	:	:	75.9 to 80.1	63.0 to 83.8	76.8 to 79.0	60.5 to 80.5	73.5 to 76.5	63.8 to 81.4
January	ury	:	1940.	:	:	;	74.7 to 82.3	66.7 to 84.0	77.2 to 81.2	66.8 to 82.0	76.2 to 78.8	66.2 to 82.5
February	nary	:	:	:	:	:	75.0 to 81.8	66.9 to 86.9	78.9 to 81.7	68.9 to 82.9	78.8 to 79.2	68.0 to 81.4
March		:	:	:	:	:	73.0 to 79.9	63.7 to 81.0	75.0 to 79.9	65.2 to 80.7	75.9 to 78.9	67.9 to 80.2
April	:	:	:	:	:	:	62.0 to 73.0	58.9 to 76.6	66.7 to 75.0	63.0 to 76.3	70.9 to 75.9	62.2 to 76.1
May	:	:	:	:	:	:	59.0 to 61.9	53.0 to 74.4	62.0 to 65.8	58.0 to 74.6	65.3 to 70.2	61.0 to 74.0
June		:	:	:	:	:	51.0 to 60.2	51.2 to 64.1	55.6 to 62.3	56.0 to 66.0	60.2 to 65.2	59.1 to 67.4
			Year	:	:	:	51.0 to 82.3	49.2 to 86.9	55.5 to 81.7	53.8 to 82.9	59.9 to 79.2	53.0 to 82.5



			Table		XBRIGHT	HT SUNSHINE,		1939-1940.	940.		
Month.	p.	Total	Total Hours.		Most in one day and date.	lay and date.	Average for 33 years. 1st July, 1906, to 30th June, 1939.	age for 33 years. ily, 1906, to 30th June, 1939.	Most i	n one day e July, 1906,	Most in one day and date for 33 years. 1st July, 1906, to 30th June, 1939.
		Hours.	Minutes.	Hours.	Minutes.	Date.	Hours.	Minutes.	Hours.	Minutes.	Date.
July		196	15	6	00	24th	183	43	10	02	24th, 1908
August	:	172	30	6	45	16th	204	70	10	500	29th, 1932
September	:	202	20	6	30	27th	214	10	11	30	15th, 1926
October	:	235	10	10	00	10th	271	18	13	00	13th, 1931
November	:	300	10	13	00	25th and 26th	291	58	13	53	28th, 1906
December	:	338	15	13	30	17th	327	44	13	45	5th, 1915
January		368	10	13	15	11th	342	61	13	90	11th, 1907
February	:	291	55	12	45	1st and 6th	289	40	13	002	6th, 1932
March .	:	292	00	111	45	10th	278	35	12	90	4th, 1908, and 1st, 1931
April .	:	204	02	11	00	2nd	221	49	10	45	8th, 1916, 3rd and 10th,
May .		180	35	6	22	10th	198	38	10	00	18t, 1908, and 1st, 1909
June .		174	45	6	45	23rd	991	93	0.	30	5th, 1908
	Year	2,965	00	13	30	17/12/1939	2,992	48	13	45	5/12/1915
	-	-	-	-	-	The second secon				-	Contract of the last of the la



