

Medical Officer's annual report [to] Durban Corporation.

Contributors

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DURBAN CORPORATION



MEDICAL OFFICER'S REPORT

FOR THE

Municipal Year ended 31st July, 1913.

DURBAN:

P. Davis & Sons, Limited, Printers, West and Saville Streets.
1914.



MEDICAL OFFICER'S REPORT

FOR THE

Principal Year ended 31st July 1917

DURBAN

Printed by the Durban City Council, Durban, Natal, South Africa

1917

VITAL STATISTICS - POPULATION.

The following tables are supplied by the Borough Police Department

MEDICAL OFFICER'S REPORT

Municipal Buildings,

Durban.

1st August, 1913.

To HIS WORSHIP THE MAYOR

AND COUNCILLORS OF THE BOROUGH OF DURBAN.

GENTLEMEN,—

I have the honour to submit to you the Annual Report of the Health and Sanitary Conditions of the Borough of Durban for the year ended 31st July, 1913.

During the last three months of the past Municipal Year I was absent on leave in Europe. Dr. Adams, Tuberculosis Medical Officer, was appointed Acting Medical Officer of Health during my absence, and carried out the various duties in a manner to give complete satisfaction to all concerned.

This Annual Report has been compiled by Dr. Adams and Mr. R. Walker of this Department, to whom my thanks are due for their highly appreciated services.

I have the honour to be, Gentlemen,

Your obedient Servant,

P. MURISON, M.D., B.Sc., D.P.H.,

Medical Officer of Health.

MEDICAL OFFICER'S REPORT

Municipal Buildings,

Durban.

1st August, 1912.

To His Worship the Mayor

and Corporation of the Borough of Durban.

Gentlemen,

I have the honor to submit to you the Annual Report of the Health and Sanitary Conditions of the Borough of Durban for the year ended 31st July, 1912.

During the last three months of the past Municipal Year I was absent on leave in Europe. Mr. Adams, Temporary Medical Officer, was appointed Acting Medical Officer of Health during my absence, and carried out the various duties in a manner to give complete satisfaction to all concerned.

This Annual Report has been compiled by Mr. Adams and Mr. H. Walker of this Department, to whom my thanks are due for their highly appreciated services.

I have the honor to be, Gentlemen,

Yours obedient servant,

F. MERRISON, M.D., B.Sc., D.P.H.

Medical Officer of Health.

VITAL STATISTICS.—POPULATION.

The following tables are supplied by the Borough Police Department:—

Summary of Census taken 19th March, 1913

WARD	EUROPEANS		COLOURED		INDIANS		NATIVES		TOTAL		GRAND TOTALS
	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	
No. 1	2,372	1,811	72	49	1,166	573	5,591	90	9,201	2,523	11,724
No. 2	2,486	1,991	177	192	597	301	2,349	106	5,609	2,590	8,199
No. 3	3,342	3,304	102	156	158	66	2,050	120	5,652	3,646	9,298
No. 4	1,524	1,050	426	492	2,739	1,278	1,943	203	6,632	3,023	9,655
No. 5	3,142	3,249	74	100	604	385	2,058	230	5,878	3,964	9,842
No. 6	1,598	1,269	172	207	6,046	3,451	3,546	305	11,362	5,232	16,594
No. 7	3,087	3,203	81	120	395	251	1,553	158	5,116	3,732	8,848
	17,551	15,877	1,104	1,316	11,705	6,305	19,090	1,212	49,450	24,710	74,160
	33,428		2,420		18,010		20,302		74,160		

Comparison

	1909	1910	1911 Government Census	1913
Europeans ...	27,327	30,030	31,896	33,428
Coloured ...	1,960	2,089	} 19,535	2,420
Indians ...	15,057	16,131		18,010
Natives ...	15,900	16,489		20,302
	60,244	64,689	69,187	74,160

For Public Health purposes the "Coloured" population is included with the European, and the Birth-rates, Death-rates, etc., shown in this Report as European are calculated on the combined figures.

BIRTHS.

1.—TABLE SHOWING MONTHLY DISTRIBUTION OF ALL BIRTHS
FOR RACE AND SEX, 1912-13.

MONTHS.	MALES.			FEMALES.			TOTALS.		
	Europeans	Natives	Asiatics	Europeans	Natives	Asiatics	Europeans	Natives	Asiatics
1912									
August ...	57	6	22	36	5	23	93	11	45
September ...	41	6	36	43	8	24	84	14	60
October ...	47	7	52	56	4	33	103	11	85
November ...	36	6	21	24	2	29	60	8	50
December ...	43	3	12	37	4	16	80	7	28
1913									
January ...	52	4	34	47	7	24	99	11	58
February ...	31	4	30	33	6	23	64	10	53
March ...	42	2	22	29	3	18	71	5	40
April ...	47	7	27	49	8	43	96	15	70
May ...	44	3	35	53	5	26	97	8	61
June ...	46	3	31	40	2	30	86	5	61
July ...	42	3	41	40	4	41	82	7	82
Totals ...	528	54	363	487	58	330	1,015	112	693

Comparison

1909	1910	1911	1912
European	27,457	27,696	27,428
Coloured	1,860	1,860	1,860
Indians	18,097	18,131	18,010
Natives	15,000	17,758	20,303
	60,414	64,445	74,100

For Public Health purposes the "Coloured" population is included with the European, and the birth-rate, death-rate, etc., shown in this report as European are calculated on the combined figures.

BIRTHS

1--TABLE SHOWING MONTHLY DISTRIBUTION OF ALL BIRTHS FOR EACH SEX, 1912

Month	Males			Females		
	Births	Deaths	Ratio	Births	Deaths	Ratio
1912						
August	47	8	5.875	53	11	4.818
September	41	8	5.125	54	14	3.857
October	47	7	6.714	50	11	4.545
November	36	6	6.000	39	8	4.875
December	43	3	14.333	40	7	5.714
1913						
January	52	4	13.000	54	11	4.909
February	51	4	12.750	50	10	5.000
March	42	3	14.000	44	5	8.800
April	47	7	6.714	49	10	4.900
May	44	3	14.667	47	8	5.875
June	40	3	13.333	40	5	8.000
July	42	3	14.000	41	7	5.857
Totals	528	54	9.778	530	112	4.732

2.—TABLE OF BIRTHS OCCURRING AMONGST NON-RESIDENTS
IN MONTHS.

European	1910-11	69.
Native	1911-12	147.
Asiatic	1912-13	106.

Aug.		Sept.		Oct.		Nov.		Dec.		Jan.		Feb.		Mar.		April.		May.		June.		July.		Total.	
M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
6	7	1	1	8	3	4	3	6	2	7	1	3	2	7	1	6	8	8	4	4	6	4	4	64	42

European Birth Rate (gross)	28.3 per 1,000
European Birth Rate (corrected) for non-residents	25.4 per 1,000
Asiatic Birth Rate	38.5 per 1,000
Native Birth Rate	5.5 per 1,000
Birth Rate, England and Wales, 1912	23.8 per 1,000

3.—TABLE SHOWING TOTAL REGISTERED EUROPEAN BIRTHS
AND BIRTH RATES FOR THE PAST SEVEN YEARS.

	1907	1908	1909	1910	1911	1912	1913	1913
No of Births	968	971	919	907	952	1030	1015	909
Birth Rate	30.7	33.3	31.4	28.5	27.7	28.3	28.3	25.4

(Corrected)

4.—TABLE SHOWING LEGITIMATE AND ILLEGITIMATE BIRTHS,
EXCLUDING IMPORTED BIRTHS, 1912-13.

	Males.	Females.	Total.
Legitimate	450	434	884
Illegitimate	14	11	25
Totals	464	445	909

MARRIAGES CONTRACTED IN DURBAN BOROUGH, 1912-13.

During the past Municipal Year 514 European marriages were contracted in Durban. The following table shows the distribution as to domicile of contracting parties:—

Of whom one party domiciled in Durban.		Of whom both parties domiciled in Durban.		Of whom neither party domiciled in Durban.	
M.	F.	M.	F.	M.	F.
14	41	432	432	27	27

Gross Marriage Rate for Durban	14.3 per 1,000
Corrected Marriage Rate for Borough	13.6 per 1,000

TABLE OF BIRTHS OCCURRING AMONGST NON-RESIDENTS

12 MONTHS

1910-11 100
1911-12 147
1912-13 106

Age	Inf.	1 yr.	2 yr.	3 yr.	4 yr.	5 yr.	6 yr.	7 yr.	8 yr.	9 yr.	10 yr.	11 yr.	12 yr.	Total
M	1	1	1	1	1	1	1	1	1	1	1	1	1	1
F	1	1	1	1	1	1	1	1	1	1	1	1	1	1

European Birth Rate (per 1,000)
European Birth Rate (constant for non-residents)
Native Birth Rate
Birth Rate, England and Wales 1912

TABLE SHOWING TOTAL REGISTERED EUROPEAN BIRTHS AND BIRTH RATES FOR THE PAST SEVEN YEARS

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TABLE SHOWING EUROPEAN BIRTHS REPORTED IN 1912

Total	European	Native
894	491	403
23	11	12

ALPHABETICALLY BY DISTRICT IN 1912

During the past Municipal Year 611 European marriages were registered in London. The following table shows the distribution as to districts of each district (partially):

Of whom one party domiciled in London		Of whom both parties domiciled in London		Of whom neither party domiciled in London	
M	F	M	F	M	F
14	41	423	432	17	27

Crude Marriage Rate for London 14.3 per 1,000
Corrected Marriage Rate for London 13.6 per 1,000

DEATHS.

1.—TABLE SHOWING RACE AND SEX DISTRIBUTION OF DEATHS
DURING THE PAST YEAR.

Race.	Male.	Female.	Total.
European	174	137	311
Native	104	25	129
Asiatic	133	102	235
Totals	411	264	675

2.—AGE DISTRIBUTION OF DEATHS (EUROPEANS).

	Male.	Female.	Total.
Under 1 year	48	20	68
1—5 years	21	12	33
5—10 „	3	3	6
10—15 „	1	3	4
15—20 „	—	1	1
20—25 „	7	7	14
25—35 „	18	16	34
35—45 „	21	19	40
45—55 „	15	14	29
55—65 „	19	16	35
65—75 „	12	11	23
75—85 „	7	11	18
85 and over	2	4	6
Totals	174	137	311

3.—TABLE SHOWING CHIEF STATISTICS OF DEATHS OF ALL
RACES IN THE BOROUGH DURING THE PAST FIVE YEARS.

Race.	1908-09	1909-10	1910-11	1911-12	1912-13
European ...	254	210	301	362	311
Native ...	120	88	109	110	129
Asiatic ...	316	274	305	296	235
Totals ...	690	572	715	768	675
European rate per 1,000 ...	8.7	6.6	8.7	9.9	8.7
Native do.	7.5	5.3	6.1	6.0	6.4
Asiatic do.	21.0	17.0	17.9	16.9	13.0

4.—TABLE FOR COMPARISON SHOWING RECORDED DEATH RATES
PER 1,000 IN ENGLAND AND WALES IN 1912.

England and Wales	13.3 per 1,000 of pop.
95 Great Towns, including London	14.6 „
146 Smaller Towns	13.0 „
England and Wales, less the 241 Towns	12.1 „
London	14.3 „

DEATHS

1.—TABLE SHOWING RACE AND SEX DISTRIBUTION OF DEATHS DURING THE PAST YEAR

Race	Male	Female	Total
European	174	187	361
Native	101	25	126
Asiatic	125	105	230
Totals	400	307	707

2.—AGE DISTRIBUTION OF DEATHS (EUROPEANS)

Under 1 year	Male	Female	Total
1—5 years	48	50	98
5—10	51	12	63
10—15	5	8	13
15—20	1	3	4
20—25	—	1	1
25—30	7	7	14
30—35	18	10	28
35—40	21	10	31
40—45	15	14	29
45—50	15	10	25
50—55	15	10	25
55—60	15	11	26
60—65	7	11	18
65—70	2	4	6
70—75	—	—	—
75—80	—	—	—
80 and over	—	—	—
Totals	174	187	361

3.—TABLE SHOWING CHIEF STATISTICS OF DEATHS OF ALL RACES IN THE BOROUGH DURING THE PAST FIVE YEARS

Race	1908-09	1909-10	1910-11	1911-12	1912-13
European	254	216	201	202	211
Native	120	88	100	110	129
Asiatic	218	274	202	200	232
Totals	592	572	503	512	572
European rate per 1,000	8.7	6.6	8.7	9.9	8.7
Native do.	7.5	2.2	8.1	6.0	6.4
Asiatic do.	21.0	17.9	17.9	16.9	13.0

4.—TABLE FOR COMPARISON SHOWING REGISTERED DEATH RATES PER 1,000 IN ENGLAND AND WALES IN 1912

England and Wales	12.7 per 1,000 of pop.
25 Great Towns, including London	14.5
110 Smaller Towns	13.0
England and Wales, less the 251 Towns	12.1
London	14.3

5.—TABLE SHOWING MONTHLY DISTRIBUTION OF DEATHS
AMONGST RESIDENTS (EUROPEANS), 1912-13.

MONTHS.	MALES.	FEMALES.	TOTAL.
1912.			
August ...	11	12	23
September ...	10	7	17
October ...	15	8	23
November ...	12	15	27
December ...	17	17	34
1913.			
January ...	15	9	24
February ...	16	11	27
March ...	14	9	23
April ...	19	6	25
May ...	11	14	25
June ...	14	19	33
July ...	20	10	30
Totals ...	174	137	311

TABLE SHOWING MONTHLY DISTRIBUTION OF DEATHS
AMONGST RESIDENTS KURUPPAKAL 1912-13

Month	Males	Females	Total
1912			
August	11	12	23
September	10	7	17
October	15	8	23
November	12	15	27
December	17	17	34
1913			
January	15	9	24
February	16	11	27
March	14	9	23
April	16	6	22
May	11	14	25
June	14	19	33
July	20	10	30
Total	174	137	311

CHART 1

Chart showing Death Rate of the different Races during the past ten years:—

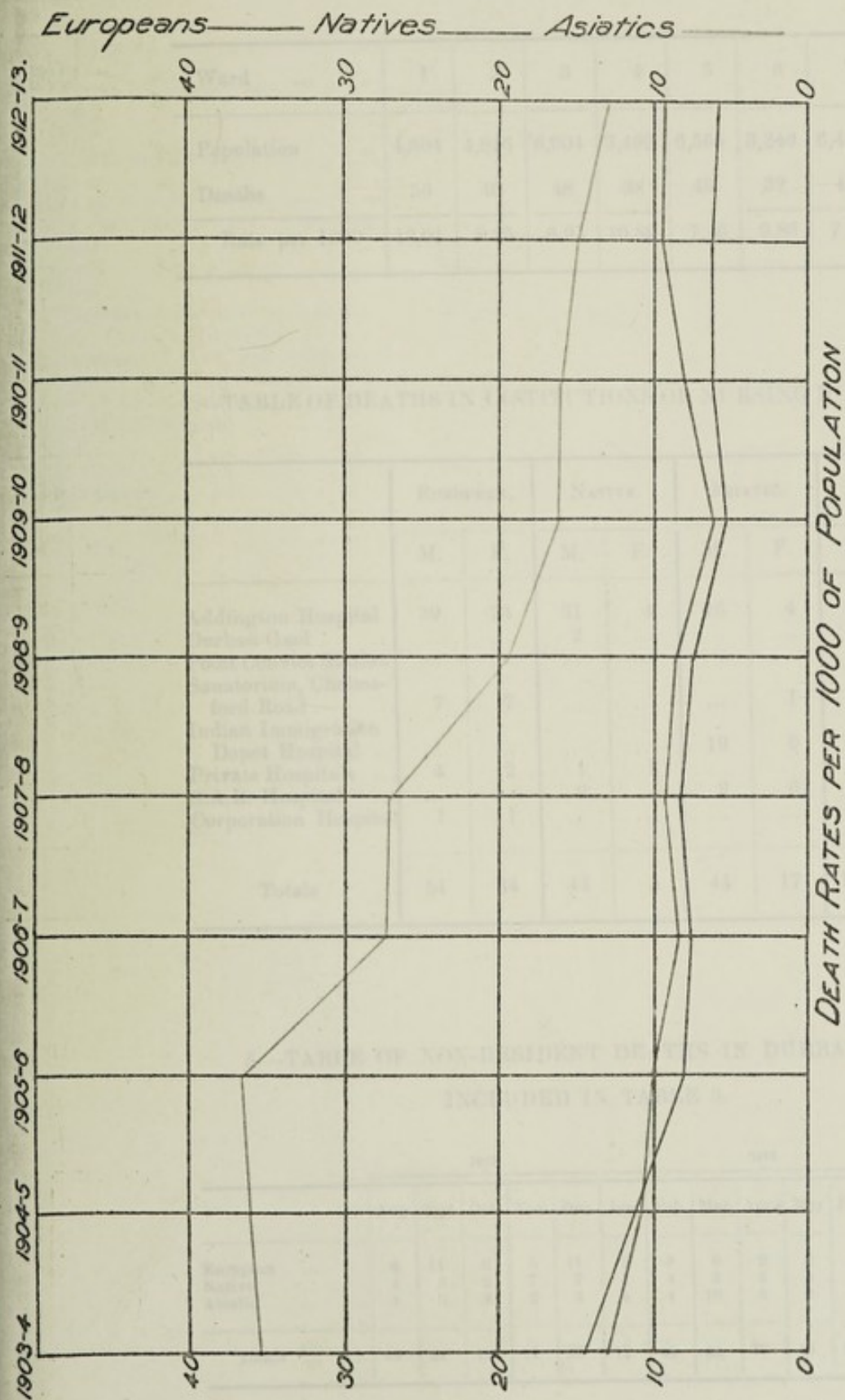
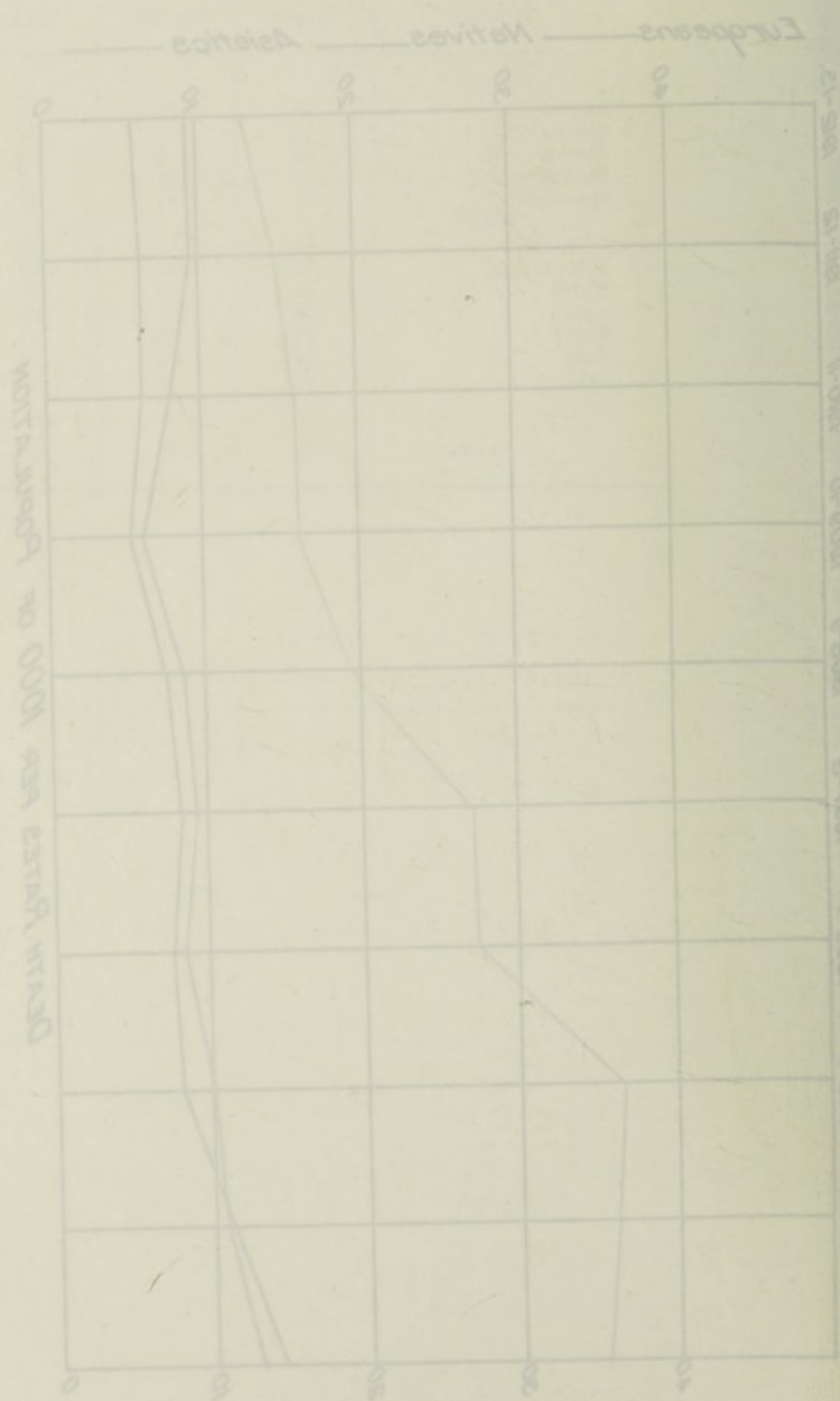


CHART I

Chart showing Death Rate of the different Races during the past ten

Years:—



6.—TABLE SHOWING WARD DISTRIBUTION OF EUROPEAN
DEATHS, 1912-13.

Ward ...	1	2	3	4	5	6	7	Total
Population ..	4,304	4,846	6,904	3,492	6,565	3,246	6,491	35,848
Deaths ...	56	40	48	38	49	32	48	311
Rate per 1000	13.01	8.25	6.95	10.89	7.46	9.86	7.39	8.7

7.—TABLE OF DEATHS IN INSTITUTIONS OR NURSING HOMES, Etc.

	EUROPEAN.		NATIVE.		ASIATIC.		TOTAL.	
	M.	F.	M.	F.	M.	F.	M.	F.
Addington Hospital	39	24	31	4	16	4	86	32
Durban Gaol ...	...	...	2	...	...	...	2	...
Point Convict Station	...	...	...	...	...	...	...	...
Sanatorium, Chelmsford Road	7	7	...	...	...	1	7	8
Indian Immigration Depot Hospital	...	...	...	...	19	6	19	6
Private Hospitals	4	2	1	1	...	...	5	3
S.A.R. Hospital	...	...	9	...	9	6	18	6
Corporation Hospital	1	1	...	...	...	...	1	1
Totals	51	34	43	5	44	17	138	56

8.—TABLE OF NON-RESIDENT DEATHS IN DURBAN NOT
INCLUDED IN TABLE 3.

	1912.					1913.							Total
	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	April	May	June	July	
European	6	11	6	5	11	7	8	6	9	8	8	11	96
Native	4	2	2	7	7	1	4	5	5	5	3	4	49
Asiatic	3	8	4	2	5	4	4	10	3	2	9	6	60
Totals	13	21	12	14	23	12	16	21	17	15	20	21	205

9.—TABLE SHOWING CAUSES OF NON-RESIDENT DEATHS.

	European	Native	Asiatic	Total.
Dysentery	2	2	—	4
Enteric Fever	10	1	—	11
Malaria	1	—	—	1
Venereal Diseases	—	2	—	2
Septic Diseases	3	—	—	3
Phthisis	13	15	17	45
Other Forms of Tuberculosis	—	9	4	13
Influenza	1	—	—	1
Cancer	10	2	1	13
Dis. of Birth and Development	—	—	1	1
Old Age	—	—	1	1
Diseases of Nervous System	3	2	5	10
Diseases of Heart and Circulatory System	14	2	4	20
Pneumonia	1	1	7	9
Bronchitis	4	1	—	5
Other Diseases of Respiratory System	4	1	3	8
Diarrhœa, Catarrh, Enteritis	10	—	2	12
Other Diseases of Liver and Alimentary Track	6	6	3	15
Diseases of Urinary System	5	1	3	9
Diseases of Child-birth	2	—	—	2
Accident	—	2	4	6
Suicide	3	—	2	5
All other Causes	4	2	3	9
Totals	96	49	60	205

2.—TABLE SHOWING CAUSES OF NON-RESIDENT DEATHS.

Causes of Death	Native	Alien	Total
Typhoid	2	—	2
Scarlet Fever	10	—	10
Diphtheria	1	—	1
General Diseases	—	2	2
Epilepsy	3	—	3
Cholera	13	17	30
Other Forms of Tuberculosis	—	4	4
Infarction	1	—	1
Measles	10	—	10
Dis. of Birth and Development	—	1	1
Id. Age	—	1	1
Diseases of Nervous System	3	—	3
Diseases of Heart and Circulatory System	14	2	16
Neuritis	1	—	1
Trachitis	4	—	4
Other Diseases of Respiratory System	4	—	4
Scarlet, Catarrh, Erysipelas	10	—	10
Other Diseases of Liver and Alimentary Tract	6	—	6
Diseases of Urinary System	5	—	5
Diseases of Child-birth	2	—	2
Violent	—	4	4
Indis.	3	—	3
Other Causes	4	—	4
Total	60	20	80

CHART 2.

Table of Columns showing the European Monthly Deaths for past five years:—

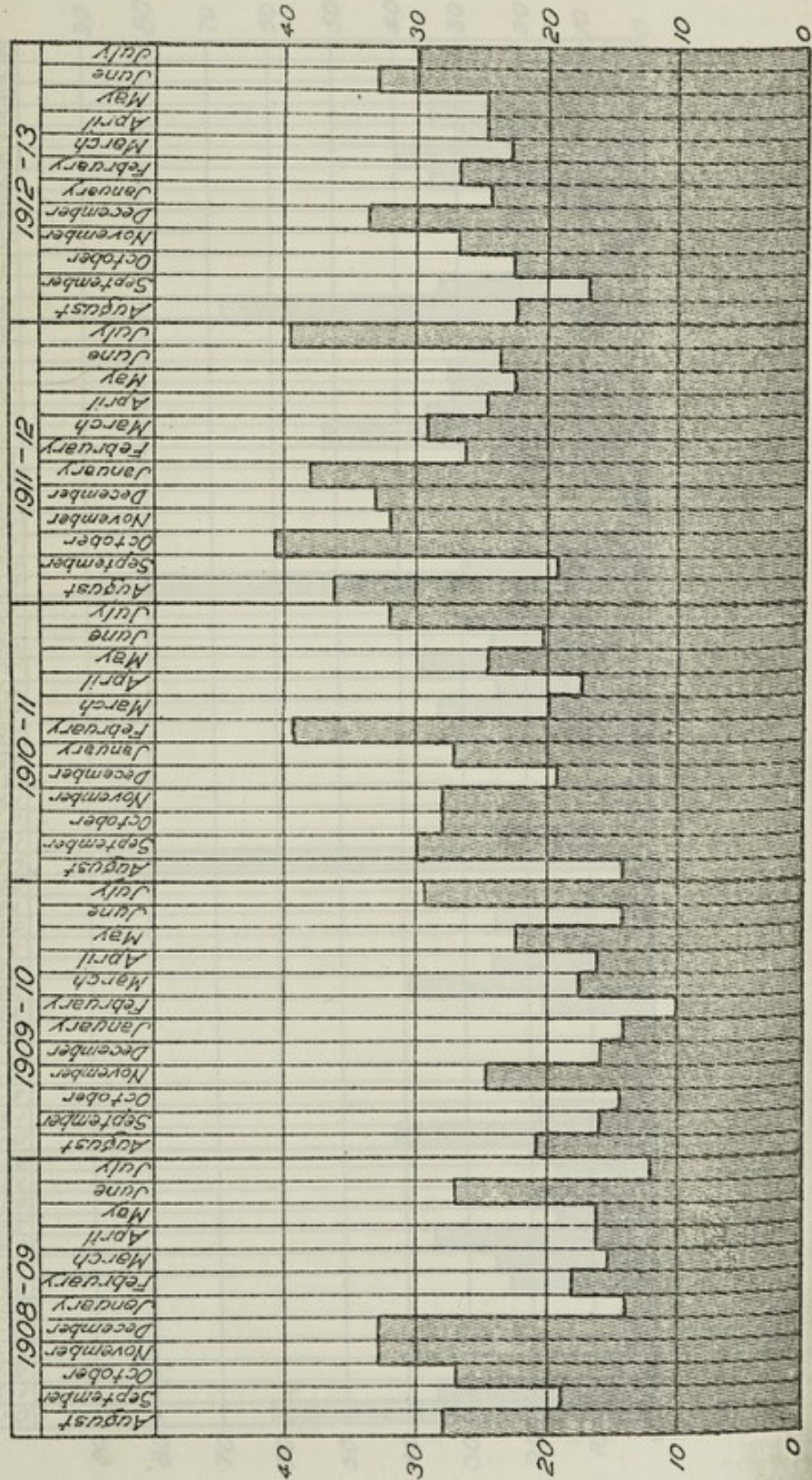


CHART 2

Table of Columns showing the European Monthly Deaths for past five years—

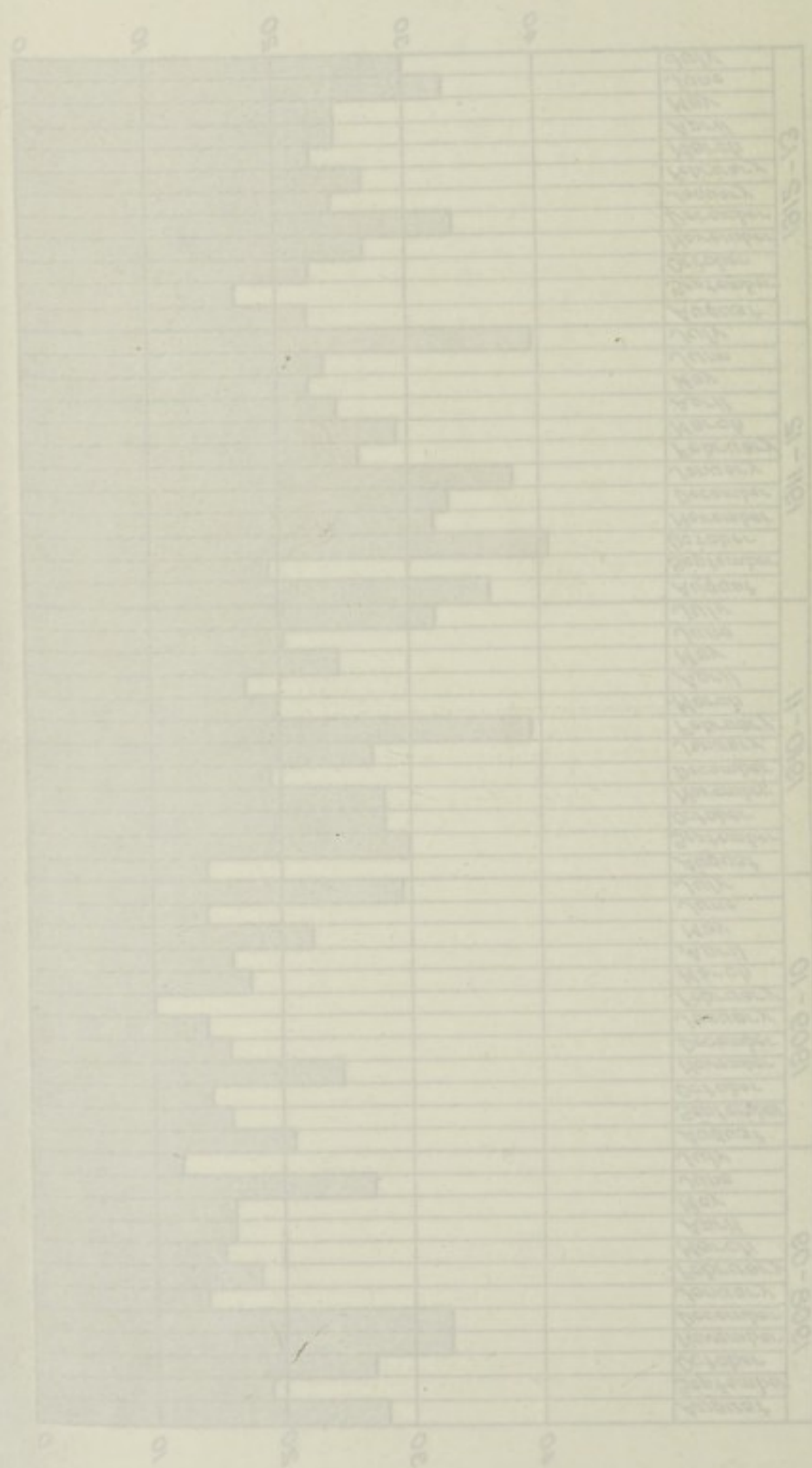


CHART 3.

Table of Columns showing the European Total Deaths occurring at various ages during the past five years:—

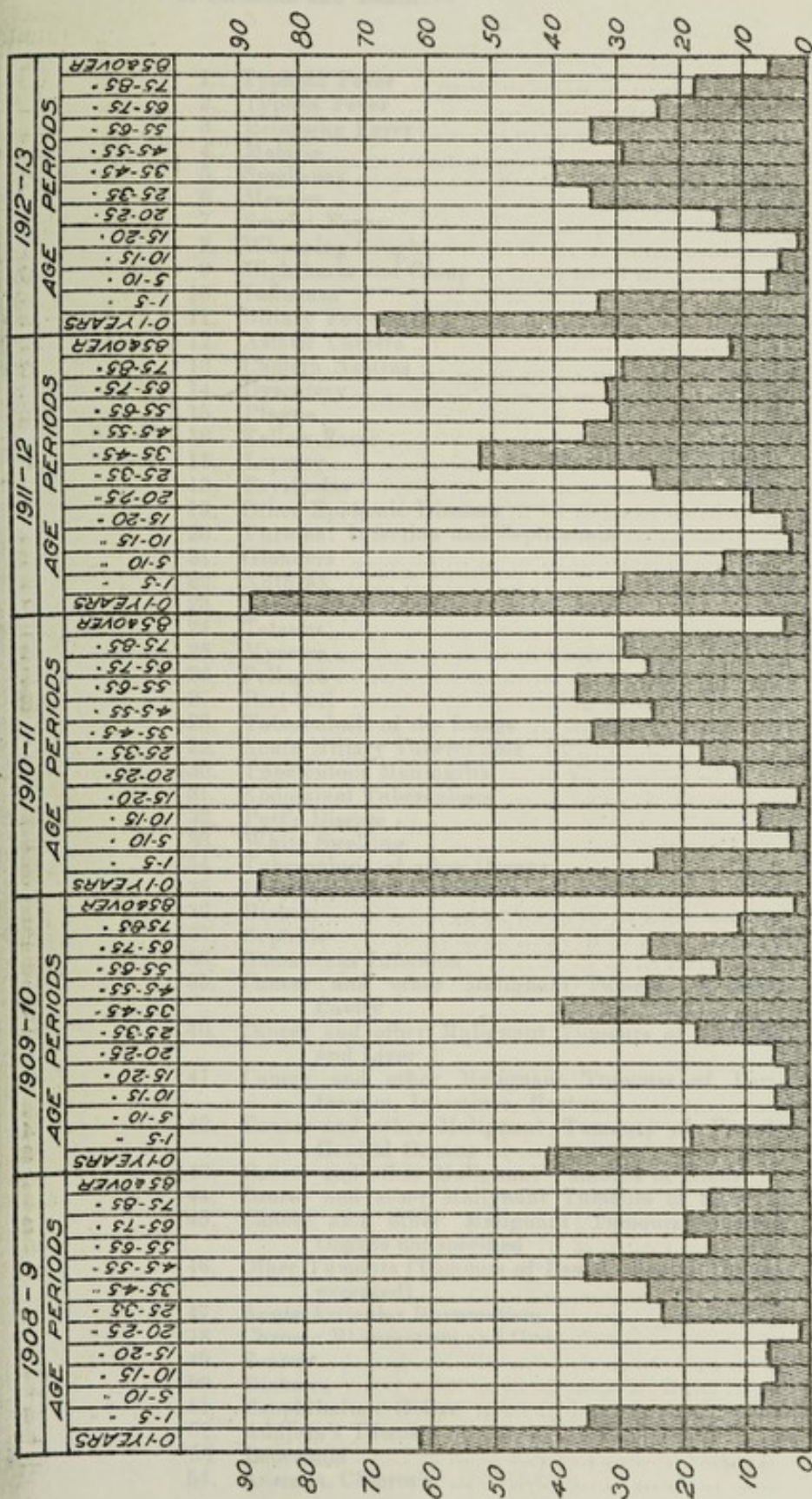
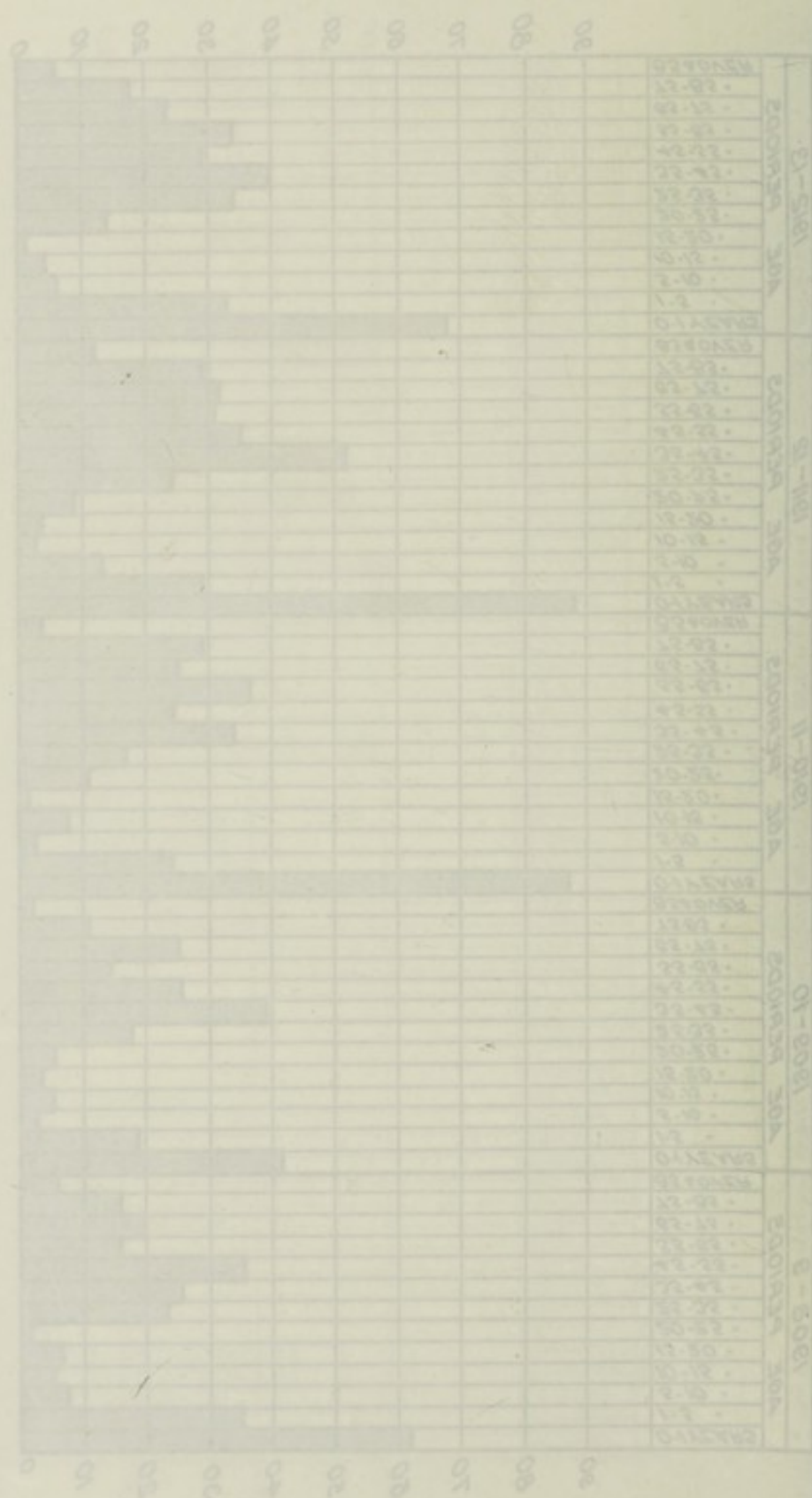


CHART 3

Table of Columns showing the Number of Total Deaths occurring at various ages during the past five years —



CLASSIFICATION OF DEATHS.

Deaths classified according to the International Classification of Causes of Sickness and Death:—

	Europeans.	
	1911-12.	1912-13.
1. Typhoid Fever	7	11
2. Typhus Fever	—	—
3. Relapsing Fever	—	—
4. Malaria	—	—
5. Small-pox	2	—
6. Measles	5	7
7. Scarlet Fever	—	—
8. Whooping Cough	1	2
9. Diphtheria and Croup	10	11
10. Influenza	5	6
11. Biliary Fever	—	—
12. Asiatic Cholera	—	—
13. Cholera Nostras	—	—
14. Dysentery	5	3
15. Plague	1	—
16. Yellow Fever	—	—
17. Leprosy	—	—
18. Erysipelas	1	—
19. Other Epidemic Diseases	1	—
20. Purulent Infection and Septicæmia	1	2
21. Glanders	—	—
22. Anthrax	—	—
23. Rabies	—	—
24. Tetanus	3	1
25. Mycoses	—	—
26. Pellagra	—	—
27. Beri-beri	—	—
28. Tuberculosis of the Lungs	23	18
29. Acute Miliary Tuberculosis	1	—
30. Tuberculous Meningitis	1	1
31. Abdominal Tuberculosis	1	—
32. Pott's Disease	—	—
33. White Swelling	—	—
34. Tuberculosis of other Organs	—	—
35. Disseminated Tuberculosis	—	—
36. Rickets	—	—
37. Syphilis	—	—
38. Gonococcus Infection	—	—
39. Cancer and other Malignant Tumours of Bucal Cavity	3	3
40. Cancer and other Malignant Tumours of Stomach and Liver	10	3
41. Cancer and other Malignant Tumours of Peri- toneum, Intestines, Rectum	3	3
42. Cancer and other Malignant Tumours of Female Genital Organs	4	4
43. Cancer and other Malignant Tumours of Breast ...	—	3
44. Cancer and other Malignant Tumours of Skin ...	1	1
45. Cancer and other Malignant Tumours of other Organs not specified	1	3
46. Other Tumours (Tumours of Female Genital Organs excepted)	—	—
47. Acute Articular Rheumatism	1	—
48. Chronic Rheumatism and Gout	—	—
49. Scurvy	—	—
50. Diabetes	5	3
51. Exophthalmic Goitre	—	—
52. Addison's Disease	—	1
53. Leucæmia	—	—
54. Anæmia, Chlorosis	1	—

CLASSIFICATION OF DEATHS

Deaths classified according to the International Classification of Causes of Diseases and Death.

Europeans		
1911-12	1912-13	
11	7	1 Typhoid Fever
—	—	2 Typhus Fever
—	—	3 Relapsing Fever
—	—	4 Malaria
—	3	5 Small-pox
—	5	6 Measles
—	—	7 Scarlet Fever
3	1	8 Whooping Cough
11	10	9 Diphtheria and Croup
9	5	10 Tetanus
—	—	11 Bilious Fever
—	—	12 Asiatic Cholera
—	—	13 Chinese Cholera
3	5	14 Dysentery
—	1	15 Typhus
—	—	16 Yellow Fever
—	—	17 Erysipelas
—	1	18 Erysipelas
—	1	19 Other Erysipelas Diseases
2	1	20 Purulent Infection and Septicæmia
—	—	21 Glanders
—	—	22 Anthrax
—	—	23 Rabies
1	3	24 Tetanus
—	—	25 Mumps
—	—	26 Polio-myelitis
—	—	27 Pertussis
13	23	28 Tuberculosis of the Lungs
—	1	29 Acute Miliary Tuberculosis
1	1	30 Tuberculous Meningitis
—	1	31 Adrenal Tuberculosis
—	—	32 Pott's Disease
—	—	33 White Swelling
—	—	34 Tuberculosis of other Organs
—	—	35 Disseminated Tuberculosis
—	—	36 Echinococcus
—	—	37 Syphilis
—	—	38 Gonorrhoea
—	—	39 Cancer and other Malignant Tumours of Head
2	2	40 Cancer and other Malignant Tumours of Stomach
—	—	41 Cancer and other Malignant Tumours of Liver and Gall
3	10	42 Cancer and other Malignant Tumours of Pancreas
—	2	43 Cancer and other Malignant Tumours of Esophagus
—	1	44 Cancer and other Malignant Tumours of Duodenum
4	1	45 Cancer and other Malignant Tumours of Stomach
3	1	46 Cancer and other Malignant Tumours of Skin
1	1	47 Cancer and other Malignant Tumours of other Organs not specified
—	—	48 Other Tumours (Tumours of Female Genital Organs excepted)
—	1	49 Acute Arterio Sclerosis
—	—	50 Chronic Rheumatism and Gout
—	—	51 Nerve Diseases
8	5	52 Diabetes
—	—	53 Respiratory Glands
1	—	54 Adipose Disease
—	—	55 Intoxication
—	1	56 Acute Chorea

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55. Other General Diseases	—	—
56. Alcoholism (Acute or Chronic)	2	6
57. Chronic Lead Poisoning	—	—
58. Other Chronic Occupation Poisonings	—	—
59. Other Chronic Poisonings	—	—
60. Encephalitis	—	—
61. Simple Meningitis	3	1
61a. (Including Cerebrospinal Fever)	—	—
62. Locomotor Ataxia	—	1
63. Other Diseases of Spinal Cord	5	—
64. Cerebral Haemorrhage, Apoplexy	16	10
65. Softening of Brain	1	—
66. Paralysis without specified cause	—	5
67. General Paralysis of Insane	—	—
68. Other Forms Mental Alienation	2	—
69. Epilepsy	—	1
70. Convulsions (Non-Puerperal)	—	—
71. Convulsions of Infants	5	5
72. Chorea	—	—
73. Neuralgia and Neuritis	—	—
74. Other Diseases of Nervous System	—	—
75. Diseases of Eyes and their Annexa	—	—
76. Diseases of the Ears	1	1
77. Pericarditis	1	—
78. Acute Endocarditis	1	1
79. Organic Diseases of Heart	38	18
80. Angina Pectoris	1	—
81. Diseases of Arteries, Atheroma, Aneurysm	3	4
82. Embolism and Thrombosis	1	2
83. Diseases of Veins (Varices, Haemorrhoids, Phlebitis, etc.)	—	1
84. Diseases of Lymphatic System (Lymphangitis, etc.)	—	—
85. Haemorrhage; Other Diseases of Circulatory System	1	—
86. Diseases of Nasal Fossae	—	—
87. Diseases of Larynx	1	2
88. Diseases of Thyroid Body	1	—
89. Acute Bronchitis	3	5
90. Chronic Bronchitis	4	3
91. Broncho-Pneumonia	8	2
92. Pneumonia	3	8
93. Pleurisy	—	1
94. Pulmonary Congestion, Pulmonary Apoplexy	—	1
95. Gangrene of the Lung	—	—
96. Asthma	2	1
97. Pulmonary Emphysema	—	—
98. Other Diseases of Respiratory System (Tuberculosis excepted)	2	1
99. Diseases of Mouth and Annexa	3	—
100. Diseases of Pharynx	—	2
101. Diseases of Oesophagus	—	—
102. Ulcer of Stomach	1	3
103. Other Diseases of Stomach (Cancer excepted)	1	3
104. Diarrhoea and Enteritis (under 2 years)	52	36
105. Diarrhoea and Enteritis (over 2 years)	6	7
106. Ankylostomiasis	—	1
107. Intestinal Parasites	1	—
108. Appendicitis and Typhlitis	3	2
109. Hernias, Intestinal Obstructions	4	2
110. Diseases of the Intestines	1	—
111. Acute Yellow Atrophy of the Liver	—	—
112. Hydatid Tumour of Liver	—	—
113. Cirrhosis of Liver	2	1
114. Biliary Calculi	1	—
115. Other Diseases of Liver	1	2

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116	Other Diseases of Liver	1	1
115	Biliary Calculi	1	1
114	Cystitis of Liver	2	2
113	Hydatid Tumors of Liver	—	—
112	Acute Yellow Atrophy of the Liver	—	—
111	Diseases of the Intestines	1	1
110	Intestinal Catarrhes	2	2
109	Intestinal Obstructions	2	2
108	Appendicitis and Typhilitis	1	1
107	Intestinal Parasitoses	1	1
106	Acute Intestinalitis	1	1
105	Chronic Intestinalitis	1	1
104	Disorders and Enteritis (over 2 years)	38	38
103	Disorders and Enteritis (over 2 years)	38	38
102	Disorders of Stomach	1	1
101	Disorders of Stomach (acute excepted)	1	1
100	Disorders of Stomach	2	2
99	Disorders of Mouth and Anus	1	1
98	Other Diseases of Respiratory System (Tuberculosis excepted)	2	2
97	Pulmonary Empyema	—	—
96	Asthma	2	2
95	Gangrene of the Lung	1	1
94	Pulmonary Congestion, Pulmonary Apoplexy	1	1
93	Pleurisy	1	1
92	Pneumonia	3	3
91	Hepato-Pneumonia	3	3
90	Chronic Bronchitis	4	4
89	Acute Bronchitis	3	3
88	Diseases of Thoracic Body	1	1
87	Diseases of Larynx	1	1
86	Diseases of Nasal Cavity	1	1
85	Hemorrhages; Other Diseases of Circulatory System	1	1
84	Diseases of Lymphatic System (Leucorrhoea, etc.)	—	—
83	Diseases of Yaws (Syphilis, Hemorrhoids, Ecthyma, etc.)	1	1
82	Diseases of Yaws (Syphilis, Hemorrhoids, Ecthyma, etc.)	2	2
81	Rubella and Typhoid	1	1
80	Diseases of Arteries, Arteriosclerosis, Aneurysm	3	3
79	Angina Pectoris	1	1
78	Organic Diseases of Heart	38	38
77	Acute Endocarditis	1	1
76	Pericarditis	1	1
75	Diseases of the Kidney	1	1
74	Diseases of Uterus and their Anus	—	—
73	Other Diseases of Urinary System	—	—
72	Nephritis and Nephrosis	—	—
71	Chorea	2	2
70	Convulsions of Infants	2	2
69	Convulsions (Non-Epileptic)	—	—
68	Epilepsy	1	1
67	Other Forms Mental Abnormalities	2	2
66	General Paralysis of Insane	—	—
65	Paralysis without specified cause	2	2
64	Softening of Brain	1	1
63	Cerebral Hemorrhages, Apoplexy	10	10
62	Other Diseases of Spinal Cord	6	6
61	Locomotor Ataxia	—	—
60	(Including Cerebrospinal Fever)	3	3
59	Simple Meningitis	1	1
58	Encephalitis	—	—
57	Other Chronic Poisonings	—	—
56	Other Chronic Poisonings	—	—
55	Chronic Lead Poisoning	—	—
54	Alcoholism (Acute or Chronic)	2	2
53	Other General Diseases	6	6

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116.	Diseases of Spleen	—	—
117.	Simple Peritonitis (Non-Puerperal)	2	—
118.	Other Diseases of Digestive System (Cancer and Tuberculosis excepted)	1	2
118a.	Abscess of Liver	3	7
110.	Acute Nephritis	2	—
120.	Bright's Disease	14	12
121.	Chyluria	—	—
122.	Other Diseases of Kidneys and Annexa	—	—
123.	Calculi of Urinary Passages	1	—
124.	Diseases of Bladder	2	1
125.	Diseases of the Urethra, Urinary Abscess	—	—
126.	Diseases of Prostate	2	2
127.	Non-Veneral Diseases of Male Genital Organs	—	1
128.	Uterine Hæmorrhage (Non-Puerperal)	—	—
129.	Uterine Tumour (Non-Cancerous)	—	—
130.	Other Diseases of Uterus	—	—
131.	Cysts and other Tumours of Ovary	—	—
132.	Salpingitis and other Diseases of Female Genital Organs	—	1
133.	Non-Puerperal Diseases of Breast (Cancer excepted)	—	—
134.	Accidents of Pregnancy	—	2
135.	Puerperal Hæmorrhage	—	1
136.	Other Accidents of Labour	1	2
137.	Puerperal Septicæmia	1	—
138.	Puerperal Albuminuria and Convulsions	1	2
139.	Puerperal Phlegmasia, Alba Dolens, Embolus, Sudden Death	1	—
140.	Following Child-Birth (not otherwise defined)	—	—
141.	Puerperal Diseases of Breast	—	—
142.	Gangrene	—	—
143.	Furuncle	—	—
144.	Acute Abscess	—	—
145.	Other Diseases of Skin and Annexa	1	—
146.	Diseases of Bones (Tuberculosis excepted)	—	—
147.	Diseases of the Joints (Tuberculosis and Rheumatism excepted)	—	—
148.	Amputations	—	—
149.	Other Diseases of Organs of Locomotion	—	—
150.	Congenital Malformations (Still-Births not included)	4	4
151.	Congenital Debility, Icterus and Sclerema	12	17
152.	Other Diseases peculiar to Early Infancy	—	—
153.	Lack of Care	—	—
154.	Senility	10	9
155.	Suicide by Poison	2	1
156.	Suicide by Asphyxia	—	—
157.	Suicide by Hanging or Strangulation	—	1
158.	Suicide by Drowning	—	—
159.	Suicide by Firearms	2	1
160.	Suicide by Cutting or Piercing Instruments	1	1
161.	Suicide by Jumping from High Places	—	—
162.	Suicide by Crushing	—	—
163.	Other Suicides	—	—
164.	Poisoning by Food	—	—
165.	Other Acute Poisonings	—	1
166.	Conflagration	—	—
167.	Burns (Conflagration excepted)	—	—
168.	Absorption of Deleterious Gases (Conflagration excepted)	—	—
169.	Accidental Drowning	5	4
170.	Traumatism by Firearms	1	1
171.	Traumatism by Cutting or Piercing Instruments	—	—
172.	Traumatism by Fall	1	1
173.	Traumatism in Mines or Quarries	—	—

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116	Diarrhoea of spleen	—	—
117	Simple Typhoid (Non-Purulent)	2	—
118	Other Diarrhoea of Digestive System (Typhoid and Typhoid excepted)	1	2
118a	Abdominal Diarrhoea	3	7
119	Acute Dysentery	2	—
120	Bright's Disease	14	12
121	Gastritis	—	—
122	Other Diarrhoea of Kidneys and Anuresis	—	—
123	Calculus of Urinary Passages	1	—
124	Diarrhoea of Bladder	2	1
125	Diarrhoea of the Urinary, Urinary Abdomen	—	—
126	Diarrhoea of Prostate	2	2
127	Non-Veneral Diarrhoea of Male Genital Organs	1	1
128	Veneral Gonorrhoea (Non-Purulent)	—	—
129	Stricture (Non-Purulent)	—	—
130	Other Diarrhoea of Uterus	—	—
131	Cysts and other Tumours of Uterus	—	—
132	Salpingitis and other Diarrhoea of Female Genital Organs	1	—
133	Non-Purulent Diarrhoea of Breast (Typhoid excepted)	—	—
134	Accidents of Lactation	2	—
135	Purulent Mammary	1	1
136	Other Accidents of Lactation	2	—
137	Purulent Mastitis	1	—
138	Purulent Abscesses and Carcinomas	1	2
139	Purulent Phlegmons, Abscesses, Carbuncles, Boils	—	—
140	Following Child-Birth (not otherwise defined)	1	—
141	Purulent Diarrhoea of Breast	—	—
142	Gonorrhoea	—	—
143	Paronychia	—	—
144	Acute Abscess	—	—
145	Other Diarrhoea of Skin and Annular	1	—
146	Diarrhoea of Bones (Typhoid excepted)	—	—
147	Diarrhoea of the Joints (Typhoid and Rheumatism excepted)	—	—
148	Arthralgia	—	—
149	Other Diarrhoea of Joints of Limbs	—	—
150	Gonorrheal Arthralgia (Still-Births not included)	4	4
151	Gonorrheal Arthralgia, Tetanus and Strabismus	12	17
152	Other Diarrhoea peculiar to Early Infancy	—	—
153	Lack of Care	10	—
154	Scalds	2	9
155	Scalds by Poison	—	—
156	Scalds by Arsenic	—	—
157	Scalds by Boiling or Steaming	1	1
158	Scalds by Boiling	—	—
159	Scalds by Freezing	2	1
160	Scalds by Cutting or Piercing Instruments	1	1
161	Scalds by Burning from High Power	—	—
162	Scalds by Burning	—	—
163	Other Scalds	—	—
164	Poisoning by Food	—	—
165	Other Acute Poisonings	1	—
166	Cholera	—	—
167	Scalds (Contagious excepted)	—	—
168	Arthralgia of Infants (Contagious excepted)	—	—
169	Arthralgia (Contagious)	4	—
170	Tetanus by Poison	1	1
171	Tetanus by Cutting or Piercing Instruments	—	—
172	Tetanus by Fall	1	1
173	Tetanus in Males or Females	—	—

		Europeans.	
		1911-12	1912-13.
174.	Traumatism by Machines	—	1
175.	Traumatism by other Crushing (Vehicles, Railways, Landslides, etc.	4	4
176.	Injuries by Animals	—	1
177.	Starvation	—	—
178.	Excessive Cold	—	—
179.	Effects of Heat	1	—
180.	Lightning	—	—
181.	Electricity (Lightning excepted)	—	—
182.	Homicide by Firearms	—	—
183.	Homicide by Cutting or Piercing Instruments	—	—
184.	Homicide by other means	—	—
185.	Fractures (cause not specified)	1	1
186.	Other External Violence	—	1
187.	Ill-defined Organic Disease	—	—
188.	Sudden Death	1	—
189.	Cause of Death not specified or ill-defined	7	4
Totals		362	311

1. Typhoid	1
2. Enteric Fever	1
3. Diphtheria	1
4. Scarlet Fever	1
5. Measles	1
6. Whooping Cough	1
7. Tetanus	1
8. Malaria	1
9. Venereal Diseases	1
10. Puerperal Fever	1
11. Syphilis	1
12. Pathosis	1
13. Other Forms of Tuberculosis	1
14. Other Infectious Diseases	1
15. Influenza	1
16. Cancer	1
17. Diseases of Heart and Blood-vessels	1
18. Old Age	1
19. Diseases of Nervous System	1
20. Diseases of Respiratory System	1
21. Paratyphoid	1
22. Bronchitis	1
23. Other Diseases Respiratory System	1
24. Diarrhoea, Colic, Cholera	1
25. Other Diseases of Alimentary Tract	1
26. Diseases of Circulatory System	1
27. Diseases of Child Birth	1
28. Diseases of Reproductive System	1
29. Accidents	1
30. Homicide	1
31. Suicide	1
32. Execution	1
33. All other Causes	1

EUROPEAN DEATHS—ARRANGED ACCORDING TO
MONTHS AND CERTAIN DISEASES

Diseases.	August.	September.	October.	November.	December.	January.	February.	March.	April.	May.	June.	July.	Total 1912-13	Total 1911-12.
1. Plague	0	0	0	0	0	0	0	0	0	0	0	0	0	1
2. Smallpox	0	0	0	0	0	0	0	0	0	0	0	0	0	2
3. Dysentery	0	0	0	2	0	0	0	0	0	0	0	1	3	5
4. Enteric Fever	0	0	0	2	3	3	1	0	1	0	0	1	11	7
5. Diphtheria	0	0	0	1	0	1	1	3	0	1	3	1	11	10
6. Scarlet Fever	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7. Measles	0	1	1	3	0	1	0	0	1	0	0	0	7	5
8. Whooping Cough	0	0	0	1	0	0	1	0	0	0	0	0	2	1
9. Tetanus	1	0	0	0	0	0	0	0	0	0	0	0	1	3
10. Malaria	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11. Venereal Diseases	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Puerperal Fever	0	0	0	0	0	0	0	0	0	0	0	0	0	1
13. Septic Diseases	0	0	0	0	0	1	1	0	0	0	0	0	2	1
14. Phthisis	2	3	3	0	3	1	0	1	1	0	2	2	18	23
15. Other Forms of Tuberculosis	0	0	0	0	0	0	1	0	0	0	0	0	1	3
16. Other Infectious Diseases	0	0	0	0	0	0	0	0	0	0	0	0	0	2
17. Influenza	0	0	0	0	0	0	1	1	0	2	1	1	6	5
18. Cancer	4	1	0	1	2	2	2	0	1	2	3	2	20	22
19. Diseases of Birth and Development	2	2	1	2	3	1	1	1	1	3	1	3	21	16
20. Old Age	2	0	0	0	2	1	2	0	0	1	1	0	9	10
21. Diseases of Nervous System	0	1	1	2	1	0	2	2	1	2	5	6	23	32
22. Diseases of Heart and Circulatory System	5	1	2	0	1	2	2	3	3	3	3	1	26	47
23. Pneumonia	0	3	2	0	0	0	0	1	1	2	0	1	10	11
24. Bronchitis	0	1	0	0	0	1	0	1	2	0	0	3	8	7
25. Other Diseases Respiratory System	1	0	0	1	0	0	1	0	1	0	2	0	6	6
26. Diarrhœa, Catarrh, Enteritis	0	0	9	1	9	5	6	3	4	4	3	2	46	58
27. Other Diseases of Liver and Alimentary Track	2	2	1	3	2	1	2	1	2	1	3	2	22	24
28. Diseases of Urinary System	0	1	0	2	3	1	1	2	2	1	1	1	15	21
29. Diseases of Child-Birth	1	1	0	0	2	0	1	0	0	0	2	0	7	3
30. Diseases of Reproductive System	0	0	0	0	0	0	0	2	0	0	0	0	2	0
31. Accidents	1	0	1	3	0	1	1	0	3	2	1	2	15	13
32. Homicide	0	0	0	0	0	0	0	0	0	0	0	0	0	0
33. Suicide	1	0	0	1	0	1	0	1	0	0	0	0	4	5
34. Execution	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35. All other Causes	1	0	2	2	3	1	0	1	1	1	2	1	15	18
TOTALS	23	17	23	27	34	24	27	23	25	25	33	30	311	362

1.—NATIVE DEATHS ARRANGED ACCORDING TO MONTHS AND CERTAIN DISEASES.

Diseases.		August	September	October	November	December	January	February	March	April	May	June	July	Total	Total
														1912-13	1911-12
1.	Plague ...	0	0	0	0	0	0	0	0	0	0	0	0	0	6
2.	Small Pox ...	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	Dysentery ...	0	3	0	0	2	0	0	0	0	0	2	1	8	3
4.	Enteric Fever ...	0	0	1	1	1	0	0	1	2	0	1	0	7	3
5.	Diphtheria ...	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	Scarlet Fever ...	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	Measles ...	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	Whooping Cough ...	1	0	0	0	0	0	0	0	0	0	0	0	1	0
9.	Tetanus ...	0	0	0	0	6	0	0	0	0	0	0	0	0	2
10.	Malaria ...	0	0	0	0	0	0	0	0	0	0	0	0	0	1
11.	Venereal Disease ...	0	0	1	0	0	0	0	0	0	0	0	1	2	6
12.	Puerperal Fever ...	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13.	Septic Diseases ...	0	0	0	0	1	0	0	1	1	0	1	0	4	1
14.	Phthisis ...	0	0	0	1	0	1	1	0	1	0	0	1	5	5
15.	Other forms of Tuberculosis ...	1	1	0	0	0	0	0	0	0	0	0	0	2	0
16.	Other Infectious Diseases ...	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17.	Influenza ...	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18.	Cancer ...	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.	Diseases of Birth and Development ...	0	1	1	0	1	0	0	2	1	2	0	1	9	4
20.	Old Age ...	0	0	0	0	0	0	0	0	0	0	1	0	1	1
21.	Diseases of Nervous System ...	0	0	1	0	1	0	0	1	2	0	0	0	5	4
22.	Dis. of Heart & Circulatory System ...	0	1	0	1	0	1	0	0	0	1	3	0	7	8
23.	Pneumonia ...	1	2	3	5	2	0	0	3	0	1	1	0	18	20
24.	Bronchitis ...	0	0	0	0	0	0	0	1	0	0	0	2	3	5
25.	Other Dis. of Respiratory System ...	0	0	0	0	0	0	0	0	0	0	0	1	1	2
26.	Diarrhoea, Catarrh, Enteritis ...	0	2	4	3	1	4	1	2	1	2	2	0	22	14
27.	Other Dis. of Liver and Alimentary Track ...	0	0	1	1	0	0	0	0	2	0	0	0	4	1
28.	Diseases of Urinary System ...	0	0	0	1	0	2	1	2	0	1	0	0	7	3
29.	Diseases of Child Birth ...	0	1	0	0	0	0	0	0	0	0	0	0	1	0
30.	Diseases of Reproductive System...	0	0	0	0	0	0	0	0	0	0	0	0	0	0
31.	Accident ...	0	1	3	1	1	0	0	2	4	0	3	1	16	9
32.	Homicide ...	0	0	0	1	0	0	0	0	0	0	0	0	1	3
33.	Suicide ...	0	0	0	0	0	0	0	0	0	0	0	0	0	1
34.	Execution ...	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35.	All Other Causes ...	1	0	2	0	0	1	0	0	0	1	0	0	5	6
Totals ...		4	12	17	15	10	9	3	15	14	8	14	8	129	110

1.—NATIVE DEATHS ARRANGED ACCORDING TO MONTHS AND CERTAIN DISEASES.

Disease	January	February	March	April	May	June	July	August	September	October	November	December	Total
1. Phlegm	0	0	0	0	0	0	0	0	0	0	0	0	0
2. Small Pox	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Dysentery	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Bilious Fever	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Diarrhoea	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Scarlet Fever	0	0	0	0	0	0	0	0	0	0	0	0	0
7. Measles	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Whooping Cough	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Tetanus	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Malaria	0	0	0	0	0	0	0	0	0	0	0	0	0
11. Venereal Disease	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Puerperal Fever	0	0	0	0	0	0	0	0	0	0	0	0	0
13. Spina Disease	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Phtisis	0	0	0	0	0	0	0	0	0	0	0	0	0
15. Other forms of Tuberculosis	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Other Infectious Diseases	0	0	0	0	0	0	0	0	0	0	0	0	0
17. Indigestion	0	0	0	0	0	0	0	0	0	0	0	0	0
18. Cancer	0	0	0	0	0	0	0	0	0	0	0	0	0
19. Diseases of Birth and Development	0	0	0	0	0	0	0	0	0	0	0	0	0
20. Old Age	0	0	0	0	0	0	0	0	0	0	0	0	0
21. Diseases of Nervous System	0	0	0	0	0	0	0	0	0	0	0	0	0
22. Diseases of Heart & Circulatory System	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Pneumonia	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Bronchitis	0	0	0	0	0	0	0	0	0	0	0	0	0
25. Other Diseases of Respiratory System	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Diarrhoea, Catarrh, Enteritis	0	0	0	0	0	0	0	0	0	0	0	0	0
27. Other Diseases of Liver and Alimentary Tract	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Diseases of Urinary System	0	0	0	0	0	0	0	0	0	0	0	0	0
29. Diseases of Cold Blood	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Diseases of Reproductive System	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Accident	0	0	0	0	0	0	0	0	0	0	0	0	0
32. Homicide	0	0	0	0	0	0	0	0	0	0	0	0	0
33. Suicide	0	0	0	0	0	0	0	0	0	0	0	0	0
34. Execution	0	0	0	0	0	0	0	0	0	0	0	0	0
35. All Other Causes	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	412	17	10	9	21	14	24	12	10	12	10	12	170

ASIATIC DEATHS ARRANGED ACCORDING TO MONTHS AND CERTAIN DISEASES.

Diseases.	August	September	October	November	December	January.	February	March	April	May	June	July	Total, 1912-13.	Total, 1911-12.
1. Plague	0	0	0	0	0	0	0	0	0	0	0	0	0	15
2. Small Pox	0	0	0	0	0	0	0	0	0	0	0	0	0	1
3. Dysentery	0	0	2	0	0	0	1	0	1	0	0	1	5	3
4. Enteric Fever	0	0	1	0	0	0	0	0	0	0	0	0	1	0
5. Diphtheria	0	0	0	0	0	0	0	0	2	0	0	0	2	0
6. Scarlet Fever	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7. Measles	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Whooping Cough	0	0	0	0	0	0	0	0	0	0	0	0	0	2
9. Tetanus	0	0	0	1	2	0	0	0	0	0	1	0	4	1
10. Malaria	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11. Venereal Disease	0	0	0	1	0	0	0	0	0	0	1	2	4	3
12. Puerperal Fever	0	0	0	0	0	0	0	0	0	0	0	0	0	4
13. Septic Diseases	0	0	0	0	0	1	0	0	2	0	0	0	3	4
14. Phthisis	3	2	7	2	0	2	2	1	1	2	3	1	26	49
15. Other forms of Tuberculosis	1	0	0	1	1	0	0	0	0	1	0	1	5	5
16. Other Infectious Diseases	1	0	0	0	0	0	0	0	0	0	0	0	1	0
17. Influenza	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18. Cancer	0	0	0	0	0	1	0	0	0	0	0	0	1	5
19. Diseases of Birth and Development	6	5	4	2	0	2	0	1	0	3	2	4	29	19
20. Old Age	0	0	0	0	0	2	2	2	0	0	0	0	6	4
21. Diseases of Nervous System	2	1	4	1	1	3	2	0	2	2	1	1	20	14
22. Dis. of Heart and Circulatory System	2	1	4	0	2	1	1	2	1	2	2	1	19	7
23. Pneumonia	4	2	2	2	3	2	1	1	3	2	2	2	26	33
24. Bronchitis	2	0	5	2	2	2	1	1	4	0	2	0	21	18
25. Other Dis. of Respiratory System	0	0	0	0	0	1	0	1	0	0	1	0	3	3
26. Diarrhœa, Catarrh, Enteritis...	1	8	7	3	2	2	3	2	5	2	2	1	38	47
27. Other Diseases of Liver and Alimentary Track	1	0	0	0	0	0	0	0	1	0	0	0	2	16
28. Diseases of Urinary System	1	0	0	1	0	0	0	1	0	1	1	0	5	6
29. Diseases of Child-Birth	1	0	0	0	0	0	1	1	0	0	0	0	3	1
30. Dis. of Reproductive System	0	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Accidents	0	0	1	0	0	0	1	2	4	0	0	0	8	15
32. Homicide	0	0	0	0	0	0	1	0	0	0	0	0	1	0
33. Suicide	0	0	1	0	0	0	0	0	0	0	0	0	1	3
34. Execution	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35. All other Causes	0	0	0	0	0	1	0	0	0	0	0	0	1	17
36. Leprosy	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Totals	25	19	38	16	12	21	17	15	24	16	18	14	235	296

COMPARATIVE TABLE OF DEATHS RESULTING FROM PHTHISIS, PNEUMONIA, AND DIARRHOEAL
DISEASES, 1912-13.

DISEASE.	EUROPEANS.																	ASIATICS.						NATIVES.						GRAND TOTAL.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																				
	0-1		1-5		5-10		10-15		15-20		20-25		25-35		35-45		45-55		55-65		65-75		75-85		85 & over		Total.		Child- ren.		Adults.		Total.		Child- ren.		Adults.		Total.		All Races.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
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TABLE 4.—SHOWING INFANTILE DEATHS IN DURBAN FOR THE
PAST FIVE YEARS.

	Male.	Female.	Total.
Infantile Deaths during 1912-13	48	20	68
Registered Births		909	
Infantile Deaths		68	

This equals 74.8 infantile deaths per 1,000 births, and represents the "Infantile Mortality Figure" for Durban, 1912-13.

The following table shows the Infantile Mortality figure for England and Wales during 1912:—

All England and Wales	95
95 Great Towns, including London	101
146 Smaller Towns	99
England and Wales, less the 241 towns	86
London	90

TABLE I.—INFANTILE DEATHS GROUPED ACCORDING TO AGES
IN WEEKS AND MONTHS.

	Under 1 Week	1-2 Weeks	2-3 Weeks	3-4 Weeks	Total under 1 month	1-2 Months	2-3 Months	3-4 Months	4-5 Months	5-6 Months	6-7 Months	7-8 Months	8-9 Months	9-10 Months	10-11 Months	11-12 Months	Total under 1 year
Deaths	16	3	1	2	22	3	3	9	3	2	6	5	6	4	3	2	68
Previous Year	12	4	3	2	21	6	9	5	4	10	5	5	2	7	7	6	87

TABLE 2.—INFANTILE DEATHS GROUPED ACCORDING TO
MONTHLY INCIDENCES.

	1912					1913							Total
Months	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	April	May	June	July	
Deaths	2	3	8	6	8	3	5	6	8	7	6	6	68
Previous Year	7	9	12	14	9	8	8	3	6	1	3	7	87

TABLE 3.—MONTHLY DISTRIBUTION OF SOME OF THE MORE
COMMON CAUSES OF INFANT DEATHS.

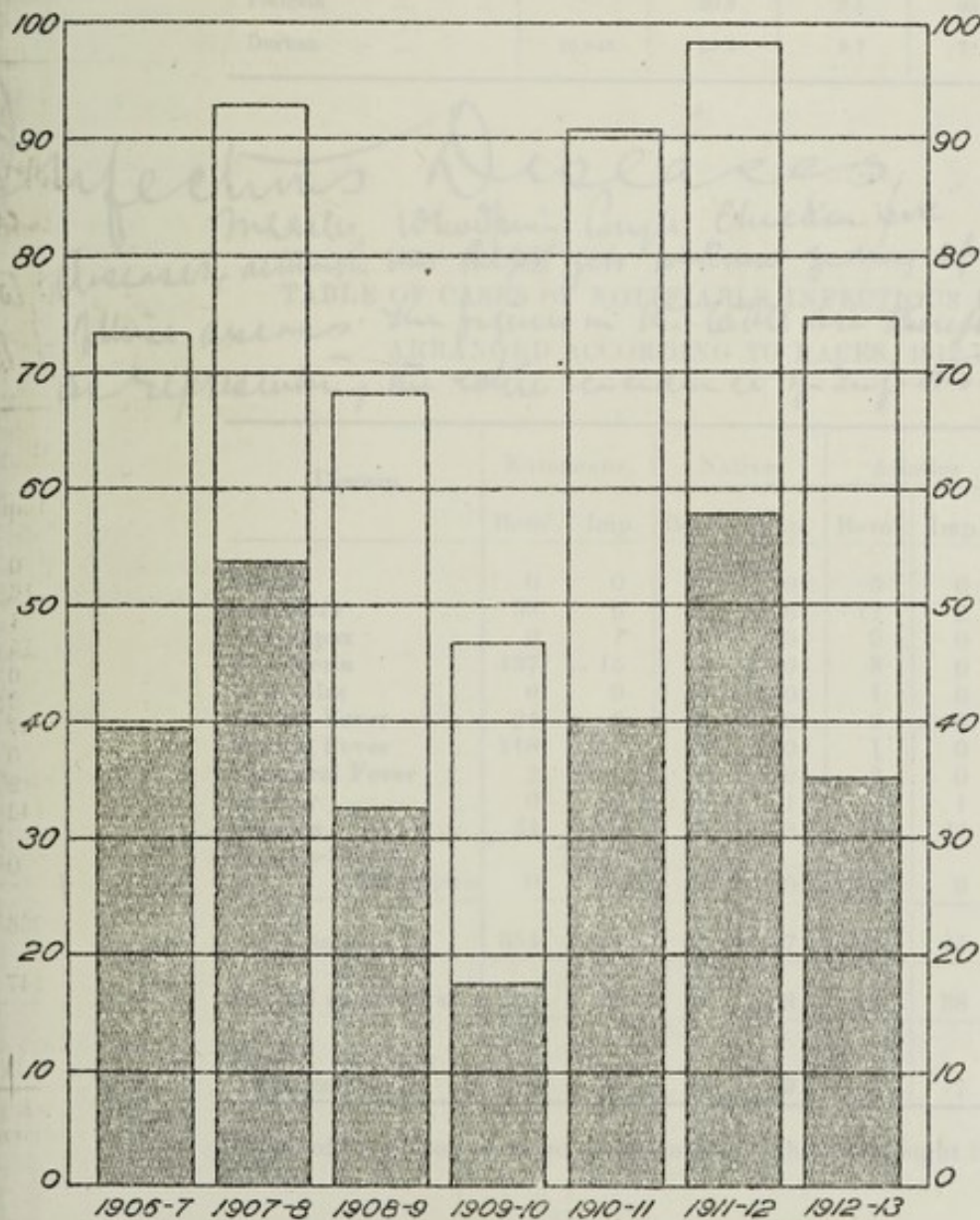
	1912					1913							Total.
Months	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	April	May	June	July	
Premature Birth	2	1	1	2	2	0	1	0	0	1	0	1	11
Congenital Debility	0	1	0	0	1	1	0	0	0	1	1	1	6
Enteritis	0	0	6	1	5	0	1	2	2	2	1	1	26
Gastric Catarrh	0	0	0	0	0	1	0	1	1	2	0	0	3
Marasmus	0	0	0	0	0	0	0	0	0	2	1	0	3

TABLE 4.—SHOWING INFANTILE DEATHS IN WARDS FOR THE PAST FIVE YEARS.

YEARS.	WARDS.							TOTAL.
	1	2	3	4	5	6	7	
1908-9	13	6	10	10	7	6	10	62
1909-10	6	9	5	7	7	4	3	41
1910-11	12	13	9	16	11	9	16	86
1911-12	13	8	14	12	10	11	19	87
1912-13	6	5	8	16	10	10	13	68

INFANTILE MORTALITY. CHART.

The following columns and table exhibit the Infantile Mortality Figure for the past seven years :—



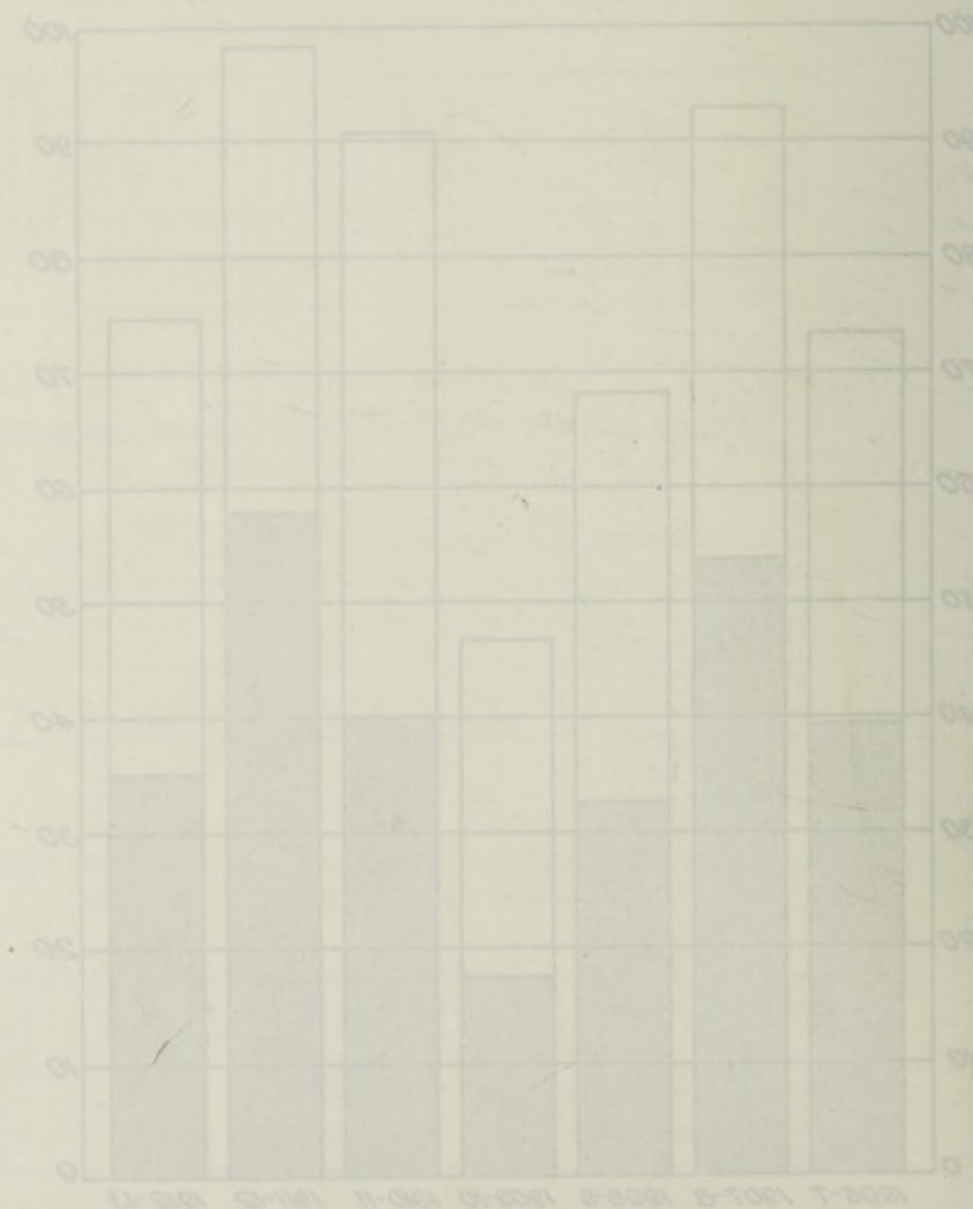
The shaded portions of the columns represent the proportion of infantile deaths due to diseases of the Alimentary Tract.

TABLE 4—SHOWING INFANTILE DEATHS IN WARDS FOR THE
PAST FIVE YEARS.

Year	Wards							Total
	1	2	3	4	5	6	7	
1908-9	18	6	10	10	7	2	10	63
1909-10	6	9	5	7	7	4	3	41
1910-11	12	13	9	10	11	9	18	82
1911-12	18	8	14	12	10	11	19	87
1912-13	6	5	8	10	10	10	18	69

INFANTILE MORTALITY
CHART.

The following columns and table exhibit the Infantile Mortality Figure
for the past seven years:—



The shaded portion of the columns represent the proportion of infantile
deaths due to diseases of the Alimentary Tract.

	YEAR.						
	1906-7	1907-8	1908-9	1909-10	1910-11	1911-12	1912-13
No. of Infant Deaths ...	67	89	62	41	86	87	68
Infantile Mortality Figure ...	69.2	91.7	67.3	45.4	90.3	98.5	74.8

The following Table shows the comparative rates (Europeans) from the Principal Towns of South Africa:—

	Population	Birth Rate.	Death Rate.	Infantile Mortality.	Phthisis Death Rate.
Johannesburg ...	129,601	33.25	12.51	99.53	0.37
Capetown ...	31,872	23.19	10.29	102.84	0.91
Pretoria ...	...	30.3	9.5	95.17	0.2
Durban ...	35,848	25.4	8.7	7.8	0.5

Infectious Diseases
measles, whooping cough, chicken pox are not infectious diseases, although this Dept gets to know of any special incidence of these diseases. The figures in the table are therefore not to be taken as representing the whole incidence of Inf. Dis. in the Borough

Disease.	Europeans.		Natives		Asiatics		Total	
	Boro'.	Imp.	Boro'.	Imp.	Boro'.	Imp.	Boro'.	Imp.
Plague ...	0	0	0	0	0	0	0	0
Dysentery ...	33	6	21	8	17	2	71	16
* Smallpox ...	0	1	0	0	0	0	0	1
Diphtheria ...	137	15	0	0	8	0	145	15
Erysipelas ...	6	0	0	0	1	0	7	0
Scarlet Fever ...	24	3	0	0	0	0	24	3
Enteric Fever ...	118	57	12	0	1	0	131	57
Puerperal Fever ...	2	0	0	0	2	0	4	0
Leprosy ...	0	0	0	1	1	1	1	2
Phthisis ...	34	62	19	38	54	42	107	142
Cerebro-Spinal Meningitis	0	0	0	0	0	0	0	0
Totals	354	144	52	47	84	45	490	236
Treated in Hospital	130	71	34	38	51	38	215	147
Treated at home or privately	224	73	18	9	33	7	275	89

* Case of Small-pox occurred outside of Borough, and brought in for treatment.

Year	No. of Infant Deaths					
	1906-7	1907-8	1908-9	1909-10	1910-11	1911-12
Infant Mortality Ratio	60.1	51.7	67.5	45.4	50.3	58.3
Per 1,000	60	50	61	41	50	58

The following Table shows the comparative rates (Per 1,000) from the Principal Towns of South Africa:—

Town	Population	Birth Rate	Death Rate	Infant Mortality Ratio	Infant Mortality Per 1,000
Johannesburg	170,000	27.52	12.31	44.7	44.7
Cape Town	117,000	24.19	10.58	43.6	43.6
Port Natal	30,000	30.7	12.3	40.1	40.1
Durban	51,000	22.4	8.7	38.8	38.8

Infant Mortality
 Table of Cases of Notifiable Infectious Diseases
 as reported in the Table for the year 1912.
 Arranged according to date 1912.

Disease	European		Native		Total	
	Pop.	Rate	Pop.	Rate	Pop.	Rate
Typhoid	0	0	0	0	0	0
Dysentery	27	0	21	8	48	71
Cholera	0	0	0	0	0	0
Typhus	107	15	0	0	107	15
Erysipelas	0	0	0	0	0	0
Scarlet Fever	24	3	0	0	24	3
Diphtheria	118	17	0	0	118	17
Whooping Cough	7	0	0	0	7	0
Measles	0	0	1	1	1	1
Polio	34	0	28	34	62	107
German-Spanish	0	0	0	0	0	0
Smallpox	0	0	0	0	0	0
Total	344	26	47	34	391	206
Treated in Hospital	130	71	24	25	154	147
Treated at home or elsewhere	214	71	23	25	237	80

* Case of Smallpox occurred outside of Hospital, and brought in for treatment.

TABLE SIMILAR TO THE FOREGOING FOR COMPARISON CONTAIN-
ING NUMBER OF NOTIFICATIONS OF PREVIOUS YEAR, 1911-12.

Disease.	Europeans		Natives.		Asiatics.		Total.	
	Boro'.	Imp.	Boro'.	Imp.	Boro'.	Imp.	Boro'.	Imp.
Plague ...	2	0	10	0	16	0	28	0
Dysentery ...	59	10	12	7	12	7	83	24
Smallpox ...	25	0	4	2	7	0	36	2
Diphtheria ...	118	12	0	0	0	0	118	12
Erysipelas ...	7	1	0	0	1	0	8	1
Scarlet Fever ...	11	1	0	0	0	0	11	1
Enteric Fever ...	82	27	8	1	3	2	93	30
Puerperal Fever ...	0	0	0	0	3	0	3	0
Leprosy ...	1	0	1	0	6	1	8	1
Phthisis ...	53	62	32	19	93	50	178	131
Cerebro-Spinal Meningitis	0	0	2	0	0	1	2	1
Totals ..	358	113	70	29	141	60	568	203
Treated in Hospital	115	48	35	17	73	50	223	115
Treated at home or privately	243	65	36	12	68	10	345	88

771

DYSENTERY.

The following table shows the cases notified and deaths registered during the past six years:—

Year.	1907-8.	1908-9.	1909-10.	1910-11.	1911-12.	1912-13.	
						Borough	Imported
Cases	101	72	80	153	107	71	16
Deaths	35	15	15	27	28	16	4

Case Mortality, 22.535 per cent.

Incidence per 1,000 of population, .957 (all Races).

RACE AND SEX DISTRIBUTION.

	Male.	Female.	Total.	Deaths.
European ...	16	17	33	3
Native ...	20	1	21	8
Asiatic ...	14	3	17	5
Totals ...	50	21	71	16

TABLE SIMILAR TO THE FOLLOWING FOR COMPARISON CONTAIN-
ING NUMBER OF NOTIFICATIONS OF PREVIOUS YEAR 1911-12

Disease	Europeans		Natives		Asiatics		Total	
	Home	Abroad	Home	Abroad	Home	Abroad	Home	Abroad
Plague	2	0	10	0	10	0	28	0
Dysentery	50	10	12	7	12	7	62	24
Smallpox	23	0	4	2	7	0	30	2
Leishmaniasis	118	12	0	0	0	0	118	12
Erysipelas	7	1	0	0	0	0	7	1
Scarlet Fever	11	1	0	0	0	0	11	1
Diphtheria	62	27	8	1	9	2	71	29
Paratyphoid Fever	0	0	0	0	0	0	0	0
Leptospirosis	1	0	1	0	1	0	2	1
Cholera	52	62	32	10	42	20	94	82
Measles	0	0	2	0	2	0	2	0
Totals	328	118	70	14	84	20	412	138
Treated in Hospital	117	48	32	17	49	16	166	63
Treated at home or privately	211	70	38	12	35	4	246	75

DYSENTERY

The following table shows the cases notified and deaths registered during
the past six years:

Year	1907-8	1908-9	1909-10	1910-11	1911-12	1912-13
Cases	101	72	80	163	107	71
Deaths	82	12	15	27	23	4

(Case Mortality, 25.55 per cent.)
(Incidence per 1,000 of population, 507 (all races).)

RACE AND SEX DISTRIBUTION

	Male		Female		Total	
Europeans	10	10	17	17	27	27
Natives	20	20	1	1	21	21
Asiatics	14	14	2	2	16	16
Totals	44	44	20	20	64	64

WARD DISTRIBUTION.

Wards ...	1	2	3	4	5	6	7	Imported.	Total.
European	4	11	0	4	3	4	7	6	39
Native	5	0	4	3	0	8	1	8	29
Asiatic	6	0	0	1	0	9	1	2	19
Totals	15	11	4	8	3	21	9	16	87

The houses of 61 were provided with water closets, and at 5 the pail system was in use.

NUMBER OF ROOMS IN INFECTED HOUSES.

Rooms.	1	2	3	4	5	6	7	Over 7	Institutions.	Totals.
European	6	1	1	9	6	3	3	3	1	33
Native	14	0	0	0	0	0	0	0	3	17
Asiatic	11	0	0	0	0	1	0	0	4	16
Totals	31	1	1	9	6	4	3	3	8	66

AGE DISTRIBUTION—EUROPEAN.

Age	0-5	5-10	10-15	15-20	20-25	25-35	35-45	45-55	55-65	65-75	Totals
Male	5	1	0	1	1	2	2	3	1	0	16
Female	4	3	2	0	0	3	3	1	0	1	17
Totals	9	4	2	1	1	5	5	4	1	1	33

COLOURED RACES.

	Adults.	Children.	Total.
Natives	20	1	21
Asiatics	15	2	17

SANITARY CONDITIONS.—The structural and sanitary conditions of buildings and surroundings at the houses where the cases resided were:—

Good.	Fair.	Poor.	Bad.	Total.
13	32	16	5	66

CLEANLINESS.—So far as cleanliness of the interior of the dwellings and their surroundings was concerned, they might be classed as:—

Clean.	Fair.	Dirty.	Total.
21	27	15	66

The residences were not found of

4 Natives, and
1 Asiatic.

The following Chart shows graphically the monthly notifications of Dysentery for the past seven years:—

WARD DISTRICT

Wards	1	2	3	4	5	6	7	8	Total
European	4	11	0	4	3	4	7	6	55
Native	2	0	4	3	0	2	1	5	20
Asiatic	0	0	0	1	0	0	1	2	10
Total	12	11	4	8	3	7	9	13	67

The houses of 51 were provided with water closets, and at 5 the full system was in use.

NUMBER OF ROOMS IN INFECTED HOUSES

Rooms	1	2	3	4	5	6	7	8	9	10	Total
European	0	1	1	0	0	0	0	0	0	0	2
Native	1	0	0	0	0	0	0	0	0	0	1
Asiatic	1	0	0	0	0	0	0	0	0	0	1
Total	2	1	1	0	0	0	0	0	0	0	4

AGE DISTRIBUTION—EUROPEANS

Age	0-5	5-10	10-15	15-20	20-25	25-30	30-35	35-40	40-45	45-50	50-55	55-60	60-65	Total
Male	0	1	0	1	1	1	1	1	1	1	1	1	1	10
Female	0	1	1	0	0	0	0	0	0	0	0	0	0	17
Total	0	2	1	1	1	1	1	1	1	1	1	1	1	27

COLOURED RACES

	Adults	Children	Total
Natives	10	1	11
Asiatics	10	2	12

EXISTING COINHABITANTS.—The structural and sanitary condition of buildings and surroundings at the houses where the cases occurred were:—

Good	Fair	Poor	Total
12	10	5	27

CLEANLINESS.—As for the cleanliness of the interior of the dwellings and their surroundings was ascertained, they might be classed as:—

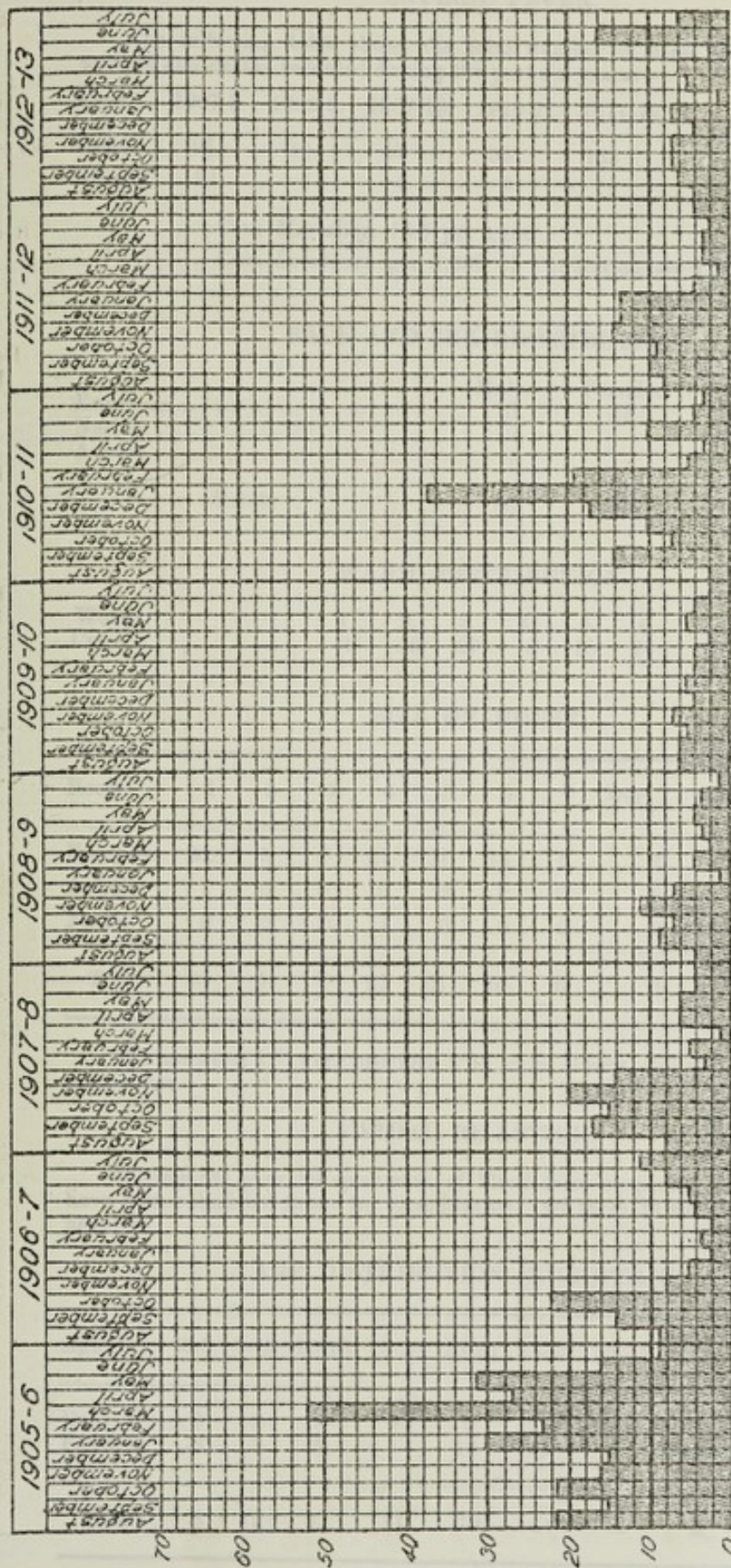
Clean	Fair	Poor	Total
21	21	15	57

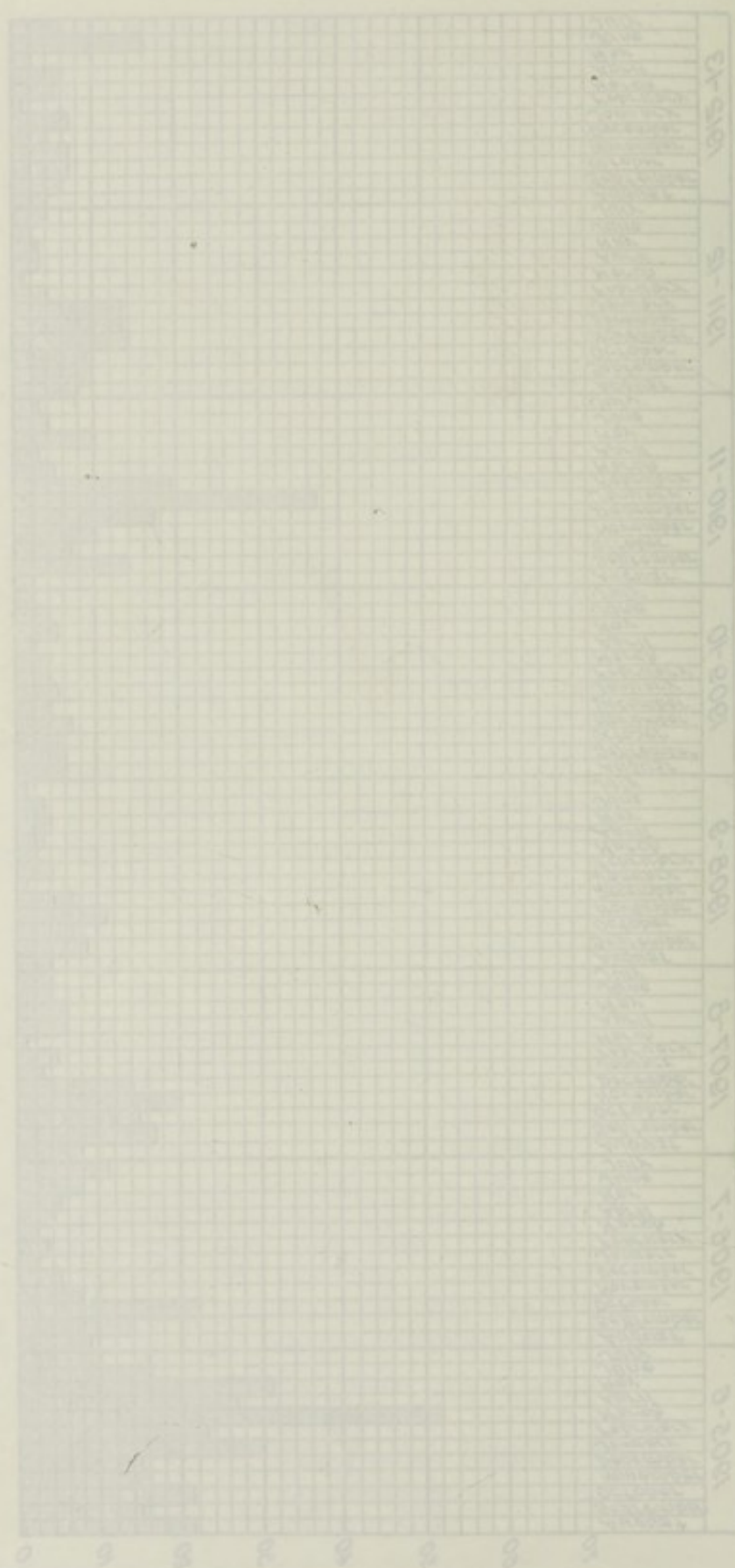
The remainder were not found of

1 Native and
1 Asiatic.

The following table shows briefly the monthly notification of dysentery for the past seven years:—

DYSENTERY NOTIFICATIONS.





ENTERIC FEVER.

The following table shows the total number of cases of Enteric Fever notified and deaths recorded during the past six years:—

Year	1907-8.	1908-9.	1909-10.	1910-11	1911-12	1912-13	
						Borough	Imported
Cases	95	43	45	55	123	131	57
Deaths	12	4	4	4	18	8	11

Case Mortality, 14.5 per cent.

Case Incidence per 1,000 of Population = 1.766 (All Races).

RACE AND SEX DISTRIBUTION.

	Male.	Female.	Total.	Deaths.
European	70	48	118	11
Native	12	—	12	7
Asiatic	1	—	1	1
Totals	83	48	131	19

WARD DISTRIBUTION.

Wards.	1.	2.	3.	4.	5.	6.	7.	Impt.	Total.
Cases	37	10	27	8	15	24	10	57	188

SIZE OF HOUSE.

Rooms	1	2	3	4	5	6	7	Over 7	Institution.	Total.
European	31	5	7	21	21	14	6	6	6	117
Asiatic	7	0	0	0	0	0	0	0	1	8
Native	0	0	0	1	0	0	0	0	0	1
Totals	38	5	7	22	21	14	6	6	7	126

The houses of 123 were provided with water closets, and at 3 the pail system was in use.

WIDAL RE-ACTION.

During the year 89 specimens of blood from suspected cases of Enteric have been submitted to me for examination. Of these 26 were positive and 63 negative.

AGE DISTRIBUTION—EUROPEANS.

Age	...	0-5	5-10	10-15	15-20	20-25	25-35	35-45	45-55	55-65	Total.
Male		0	7	6	7	9	29	11	1	0	70
Female		3	5	5	4	10	15	5	1	0	48
Totals		3	12	11	11	19	44	16	2	0	118

SANITARY CONDITIONS.—The sanitary conditions existing at houses where cases resided were:—

Good.	Fair.	Poor.	Bad.	Total.
45	65	13	3	126

CLEANLINESS.—So far as cleanliness of the dwellings and the surroundings was concerned they might be classed as:—

Clean.	Fair.	Dirty.	Total.
87	33	6	126

The residences were not found of

- 1 European, and
- 4 Natives.

Monthly Distribution

SANITARY CONDITION.—The sanitary conditions existing at houses where cases occurred were:—

Good	Fair	Poor	Total
10	65	13	88

CLEANLINESS.—So far as cleanliness of the dwellings and the surroundings was concerned they might be classed as:—

Clean	Fair	Dirty	Total
87	33	6	126

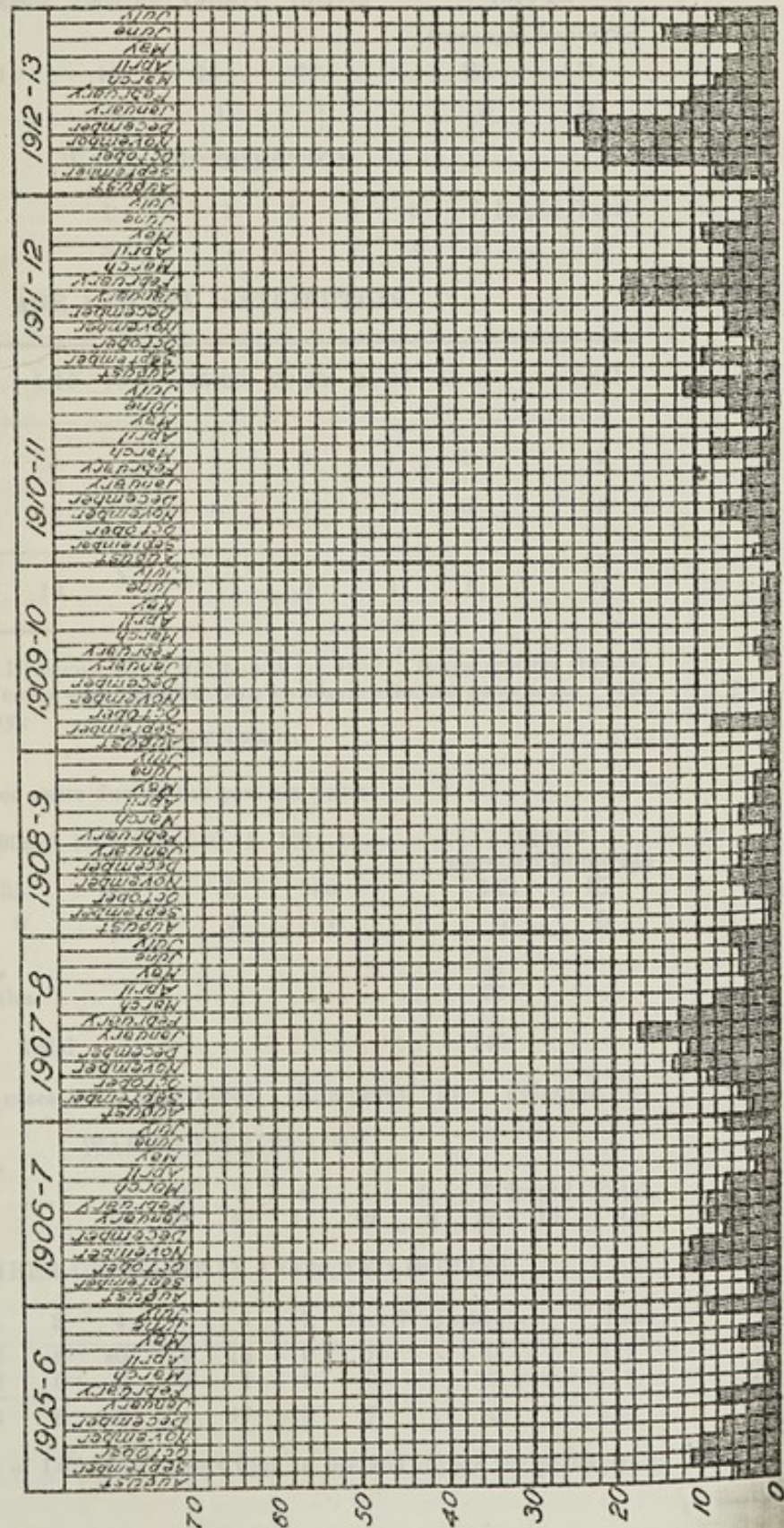
The residences were not found to

1 European, and
4 Native.

Monty Robertson

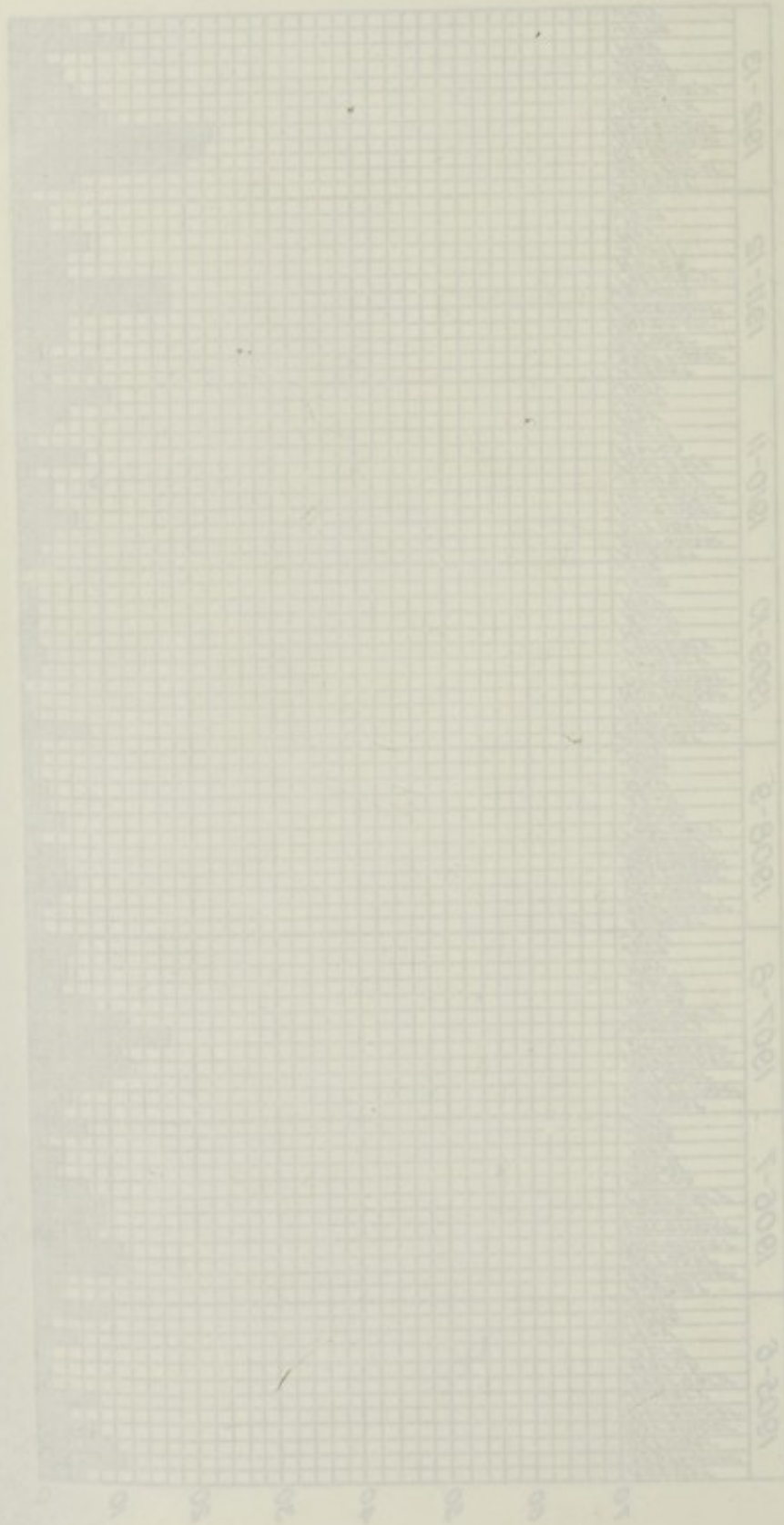
The subjoined Chart shows the Monthly Distribution of Enteric during the past seven years:—

ENTERIC FEVER NOTIFICATIONS.



The enclosed chart shows the Monthly Distribution of Malaria during the past seven years.

EXTENSIVE FEVER NOTIFICATIONS



SCARLET FEVER.

The following table shows the cases notified and deaths from Scarlet Fever registered during the past six years:—

Year.	1907-8	1908-9	1909-10	1910-11	1911-12	1912-13	
						Borough Imported	
Cases	21	11	10	14	12	24	3
Deaths	0	0	0	0	0	0	0

WARD DISTRIBUTION.

Wards	1	2	3	4	5	6	7	Imptd.	Total.
Cases	3	1	7	—	4	3	6	3	27

AGE AND SEX DISTRIBUTION.

Age	Under 5	5-10	10-15	15-20	20-25	25-35	50-55	Total
Male	1	5	3	1	0	1	1	12
Female	1	9	5	0	0	0	0	15
Totals	2	14	8	1	0	1	1	27

Of these cases 16 occurred in the month of July. Investigation showed the majority of the cases were infected from children who had come from "up-country" on holiday.

DIPHTHERIA.

Table of notified cases during the past six years:—

Year	1907-8	1908-9	1909-10	1910-11	1911-12	1912-13	
						Borough Imported	
Cases	37	35	62	46	130	145	15
Deaths	2	0	6	2	11	11	0
Males						51	
Females						94	
Total						145	

RACE.—The cases were distributed:—Europeans, 131; Coloured, 6; Asiatics, 8.

WARD DISTRIBUTION.

Wards	1	2	3	4	5	6	7	Imptd.	Total.
Cases	19	20	42	11	19	9	25	15	160

NUMBER OF ROOMS IN INFECTED HOUSES.

Rooms.	1	2	3	4	5	6	7	Over 7	Institution.	Total.
*European	3	2	6	40	54	16	9	7	0	137
Asiatic	5	2	0	0	0	1	0	0	0	8
Totals	8	4	6	40	54	17	9	7	0	145

In the houses of 140 water closets were in use and in five the pail system was in use.

SCARLET FEVER

The following table shows the cases notified and deaths from Scarlet Fever reported during the past six years:—

Year	1907-8	1908-9	1909-10	1910-11	1911-12	1912-13
Cases	21	11	10	14	12	24
Deaths	0	0	0	0	0	0

WARD DISTRIBUTION

Wards	1	2	3	4	5	6	7
Cases	3	1	7	1	4	3	3
Deaths	0	0	0	0	0	0	0

AGE AND SEX DISTRIBUTION

Age	Under 5	5-10	10-15	15-20	20-25	25-30	30-35	35-40	Total
Males	1	0	2	1	0	1	1	1	12
Females	1	0	2	0	0	0	0	0	12
Totals	2	0	4	1	0	1	1	1	24

Of these cases 10 occurred in the month of July. Investigation showed the majority of the cases were infected from children who had been taken "up-country" on holiday.

DIPHTHERIA

Table of notified cases during the past six years:—

Year	1907-8	1908-9	1909-10	1910-11	1911-12	1912-13
Cases	27	22	23	16	100	142
Deaths	2	0	2	2	11	11
Males	14	11	12	8	51	51
Females	13	11	11	8	49	91
Totals	27	22	23	16	100	142

RACE.—The cases were distributed:—European, 131; Coloured, 11; Asiatic, 0.

WARD DISTRIBUTION

Wards	1	2	3	4	5	6	7
Cases	19	20	22	11	12	9	25
Deaths	1	0	0	0	0	0	0

NUMBER OF HOUSES IN INFECTED HOUSES

Number	1	2	3	4	5	6	7	Over 7	Total
Infected	2	2	2	2	2	2	2	2	16
Deaths	0	0	0	0	0	0	0	0	0
Totals	2	2	2	2	2	2	2	2	16

In the houses of 140 white children were in use and in five the full system was in use.

MONTHLY DISTRIBUTION OF CASES AND DEATHS.

	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	March.	April.	May.	June.	July.	Total.
Cases	10	6	4	2	4	4	12	14	17	15	45	27	160
Deaths	0	0	0	1	0	1	1	3	0	1	3	1	11

AGE DISTRIBUTION OF CASES.

Age	0—5	5—10	10—15	15—20	20—25	25—35	35—45	55—65	TOTAL
* European Males	9	28	7	1	0	0	4	0	49
European Females	22	37	10	2	4	7	5	1	88
Asiatic Males	2	0	0	0	0	0	0	0	2
Asiatic Females	3	1	1	0	0	1	0	0	6
TOTALS	36	66	18	3	4	8	9	1	145

* Includes six Coloured cases.

SANITARY CONDITIONS.—The sanitary conditions existing at houses where cases resided were:—

Good.	Fair.	Poor.	Bad.	Total.
43	70	30	2	145.

CLEANLINESS.—So far as cleanliness of the dwelling and surroundings was concerned they may be classed as:—

Clean.	Fair.	Dirty.	Total.
101	27	17	145

DIPHThERIA.

This disease has again been unusually prevalent from January to the end of the Municipal Year. While it has never assumed epidemic proportions it has been fairly wide-spread, and has considerably increased the work and responsibility of this department. Most of the patients affected were European children, and fortunately the majority of the cases were mild. Indeed it is that very feature which is held by the majority of the medical practitioners to be responsible for the continued prevalence of the disease.

All the members of the medical profession have now fallen into line in their reliance on the bacteriological method of diagnosis for doubtful or suspicious cases, and although for a time this greatly increased the number of cases notified, by bringing to light many which would otherwise have passed unrecognised, it has enabled the Department to get to the root of the matter at once.

With the precautions which are laid down regarding the isolation of patients, there is very little fear of spread of infection from a known case of the disease, but an unrecognised and unsuspected case is always a possible source of danger to those who come into contact with the patient.

MONTHLY DISTRIBUTION OF CASES AND DEATHS

	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March	April	May	June	July	Total
Cases	10	0	4	2	4	4	12	14	17	18	43	27	180
Deaths	0	0	0	1	0	1	1	3	0	1	2	1	11

AGE DISTRIBUTION OF CASES

Age	0-5	5-10	10-15	15-20	20-25	25-30	30-35	35-40	40-45	45-50	TOTAL
European Males	2	28	7	1	0	0	0	4	0	42	
European Females	22	37	10	2	4	7	5	1	1	98	
Asiatic Males	2	0	0	0	0	0	0	0	0	2	
Asiatic Females	2	1	1	0	0	1	0	0	0	5	
TOTAL	36	65	18	3	4	7	5	5	1	142	

* Includes six colored cases.

SANITARY CONDITIONS.—The sanitary conditions existing at houses where cases resided were:

Good	Fair	Poor	Total
45	10	30	145

CLEANLINESS.—So far as cleanliness of the dwelling and surroundings was concerned they may be classed as:

Good	Fair	Dirty	Total
101	37	17	145

DIPHTHERIA.

This disease has again been unusually prevalent from January to the end of the Municipal Year. While it has never assumed epidemic proportions it has been fairly widespread, and has considerably increased the work and responsibility of this department. Most of the patients affected were children, and fortunately the majority of the cases were mild. Indeed it is that very feature which is held by the majority of the medical practitioners to be responsible for the continued prevalence of the disease.

All the members of the medical profession have now fallen into line in their reliance on the bacteriological method of diagnosis for doubtful or serious cases, and although for a time this greatly increased the number of cases notified by bringing to light many which would otherwise have passed unobserved, it has enabled the Department to get to the root of the matter.

With the precautions which are laid down regarding the isolation of patients, there is very little fear of spread of infection from a known case of the disease, but an unrecognized and unreported case is always a possible source of danger to those who come into contact with the patient.

TUBERCULOSIS.

TABLE 1.

YEAR.	EUROPEANS.				NATIVES				ASIATICS.			
	All Tuber- culosis.		Phthisis.		All Tuber- culosis.		Phthisis.		All Tuber- culosis.		Phthisis.	
	Deaths.	Rate per 1,000 of Pop.	Deaths.	Rate per 1,000 of Pop.	Deaths.	Rate per 1,000 of Pop.	Deaths.	Rate per 1,000 of Pop.	Deaths.	Rate per 1,000 of Pop.	Deaths.	Rate per 1,000 of Pop.
1906-07	30	95	22	7	36	2.20	23	1.1	82	5.10	61	3.80
1907-08	21	70	18	6	29	1.48	23	1.77	80	5.06	75	4.74
1908-09	20	68	14	4.8	20	1.25	13	0.82	58	3.85	51	3.39
1909-10	19	59	18	5.6	8	.49	6	.36	34	2.11	31	1.92
1910-11	21	61	18	5.2	7	.46	2	.11	28	1.64	25	1.47
1911-12	26	71	23	6.3	5	.27	5	.27	54	3.09	49	2.8
1912-13	19	53	18	5.0	7	.34	5	.25	31	1.72	26	1.44

TABLE 2.—DEATHS FROM ALL FORMS OF TUBERCULOSIS
SINCE 1906.

	1906-7	1907-8	1908-9	1909-10	1910-11	1911-12	1911-12	Total Deaths for 7 Years.	Annual Average Mortality.
European,	30	21	20	19	21	26	19	156	22
Native,	36	29	20	8	7	5	7	112	16
Asiatic,	82	80	58	34	28	54	31	367	52
Totals,	148	130	98	61	56	85	57	635	90

PHTHISIS.

TABLE 3.—DISTRIBUTION OF NOTIFIED CASES AND DEATHS
IN WARDS, 1912-13.

Wards ...	1	2	3	4	5	6	7	Imported.	Total
No. of Cases...	4	4	10	5	4	5	2	62	96
Deaths ..	3	5	0	2	3	2	3	13	31

TUBERCULOSIS

TABLE I

Year	Europe				Asia				Africa			
	All Tuberculous		Tuberculous		All Tuberculous		Tuberculous		All Tuberculous		Tuberculous	
	per 100,000	per 100,000	per 100,000	per 100,000	per 100,000	per 100,000	per 100,000	per 100,000	per 100,000	per 100,000	per 100,000	per 100,000
1902-03	30	35	32	37	30	35	32	37	30	35	32	37
1907-08	31	36	33	38	31	36	33	38	31	36	33	38
1908-09	30	35	32	37	30	35	32	37	30	35	32	37
1909-10	19	23	20	24	19	23	20	24	19	23	20	24
1910-11	21	26	22	27	21	26	22	27	21	26	22	27
1911-12	26	31	27	32	26	31	27	32	26	31	27	32
1912-13	19	23	20	24	19	23	20	24	19	23	20	24

TABLE 2—DEATHS FROM ALL FORMS OF TUBERCULOSIS

SINCE 1900

1900-1901 to 1912-13										Annual Average Mortality
Total Deaths for 7 Years										
European	30	31	32	33	34	35	36	37	38	
Native	30	31	32	33	34	35	36	37	38	
Asiatic	30	31	32	33	34	35	36	37	38	
Total	148	150	152	154	156	158	160	162	164	

TUBERCULOSIS

TABLE 3—DISTRIBUTION OF NOTIFIED CASES AND DEATHS

IN WARREN, 1912-13

Wards	...	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
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TABLE 4.—AGE AND SEX DISTRIBUTION OF NOTIFIED CASES.

Under 1	1—5	5—10	10—15	15—20	20—25	25—35	35—45	45—55	55—65	65—75	75—85	Total.										
M	F	M	F	M	F	M	F	M	F	M	F	M	F									
Cases	0	0	0	0	0	0	1	2	4	7	9	0	6	2	1	0	2	0	0	0	23	11
Deaths	0	0	0	0	0	0	0	3	0	5	1	1	5	0	1	1	1	0	0	0	8	10

NATIVES.

TABLE 5.—DISTRIBUTION OF NOTIFIED CASES AND DEATHS IN WARDS, 1912-13.

Wards	1	2	3	4	5	6	7	Imported.	Total.
Cases notified	4	3	2	4	1	5	0	38	57
Deaths	4	0	1	0	0	0	0	15	20

ASIATICS.

TABLE 6.—DISTRIBUTION OF NOTIFIED CASES AND DEATHS IN WARDS, 1912-13.

Wards	1	2	3	4	5	6	7	Imported.	Total.
Cases Notified	6	3	0	11	2	32	0	42	96
Deaths	10	1	0	7	0	8	0	17	43

TABLE OF NOTIFICATIONS ARRANGED IN MONTHS AND RACES.

	Europeans.		Natives.		Asiatics.		TOTAL.	
	Boro.	Imp.	B. ro.	Imp.	Boro.	Imp.	Boro.	Imp.
1912								
August	5	6	2	2	6	2	13	10
September	5	8	0	3	7	0	12	11
October	3	8	2	3	10	6	15	17
November	6	2	4	9	4	4	14	15
December	0	3	1	2	0	3	1	8
1912								
January	1	2	1	4	3	10	5	16
February	1	1	0	2	4	3	5	6
March	3	2	2	3	2	6	7	11
April	4	5	2	3	5	3	11	11
May	1	9	2	0	4	4	7	13
June	3	6	2	2	4	1	9	9
July	2	10	1	5	5	0	8	15
Total	34	62	19	38	54	42	107	142

TABLE 4.—AGE AND SEX DISTRIBUTION OF NOTIFIED CASES

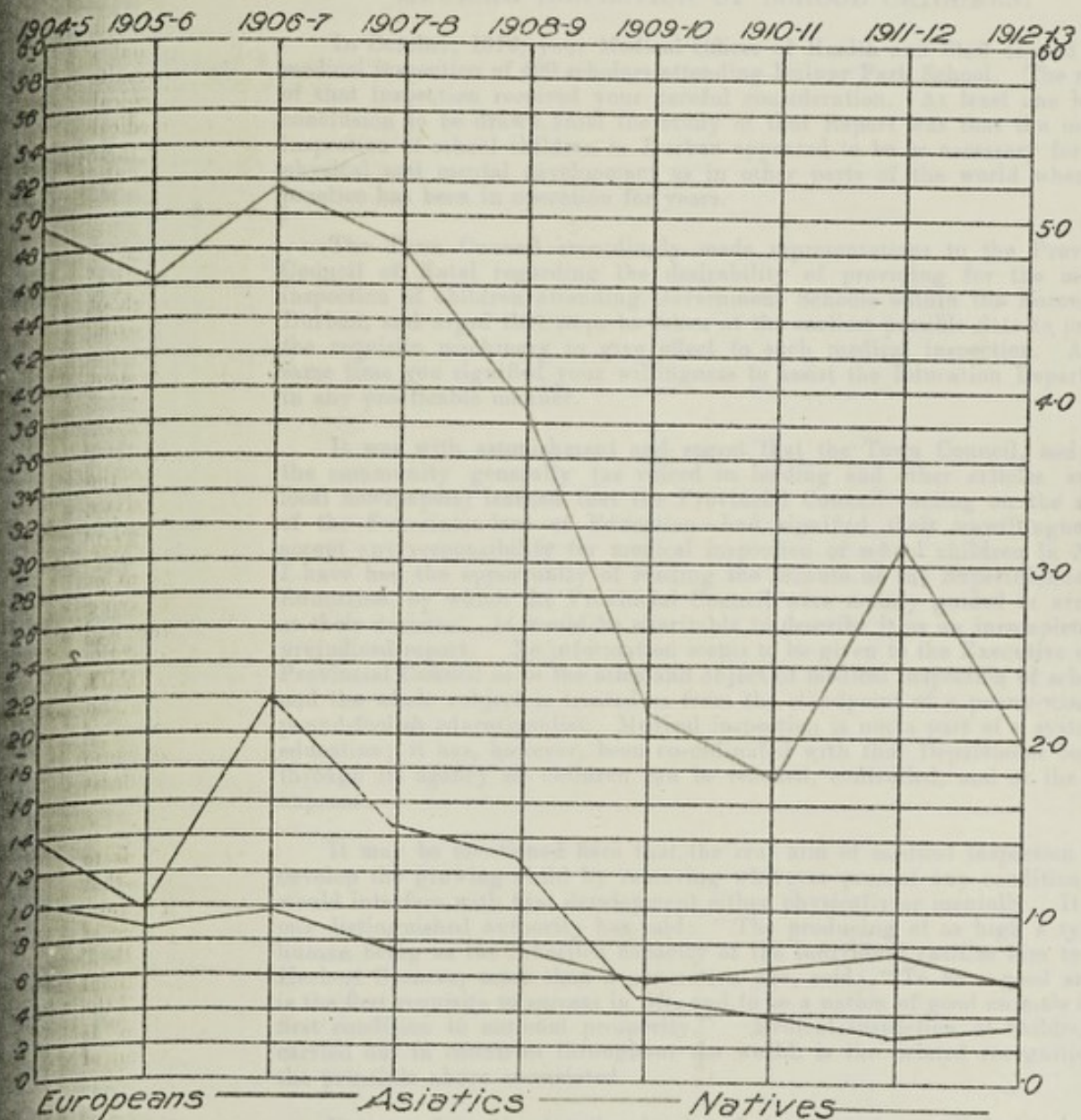
Age	Sex											
	M	F	M	F	M	F	M	F	M	F	M	F
Under 15	0	0	0	0	0	0	0	0	0	0	0	0
15-24	0	0	0	0	0	0	0	0	0	0	0	0
25-34	0	0	0	0	0	0	0	0	0	0	0	0
35-44	0	0	0	0	0	0	0	0	0	0	0	0
45-54	0	0	0	0	0	0	0	0	0	0	0	0
55-64	0	0	0	0	0	0	0	0	0	0	0	0
65-74	0	0	0	0	0	0	0	0	0	0	0	0
75-84	0	0	0	0	0	0	0	0	0	0	0	0
85-94	0	0	0	0	0	0	0	0	0	0	0	0
95-104	0	0	0	0	0	0	0	0	0	0	0	0
105-114	0	0	0	0	0	0	0	0	0	0	0	0
115-124	0	0	0	0	0	0	0	0	0	0	0	0
125-134	0	0	0	0	0	0	0	0	0	0	0	0
135-144	0	0	0	0	0	0	0	0	0	0	0	0
145-154	0	0	0	0	0	0	0	0	0	0	0	0
155-164	0	0	0	0	0	0	0	0	0	0	0	0
165-174	0	0	0	0	0	0	0	0	0	0	0	0
175-184	0	0	0	0	0	0	0	0	0	0	0	0
185-194	0	0	0	0	0	0	0	0	0	0	0	0
195-204	0	0	0	0	0	0	0	0	0	0	0	0
205-214	0	0	0	0	0	0	0	0	0	0	0	0
215-224	0	0	0	0	0	0	0	0	0	0	0	0
225-234	0	0	0	0	0	0	0	0	0	0	0	0
235-244	0	0	0	0	0	0	0	0	0	0	0	0
245-254	0	0	0	0	0	0	0	0	0	0	0	0
255-264	0	0	0	0	0	0	0	0	0	0	0	0
265-274	0	0	0	0	0	0	0	0	0	0	0	0
275-284	0	0	0	0	0	0	0	0	0	0	0	0
285-294	0	0	0	0	0	0	0	0	0	0	0	0
295-304	0	0	0	0	0	0	0	0	0	0	0	0
305-314	0	0	0	0	0	0	0	0	0	0	0	0
315-324	0	0	0	0	0	0	0	0	0	0	0	0
325-334	0	0	0	0	0	0	0	0	0	0	0	0
335-344	0	0	0	0	0	0	0	0	0	0	0	0
345-354	0	0	0	0	0	0	0	0	0	0	0	0
355-364	0	0	0	0	0	0	0	0	0	0	0	0
365-374	0	0	0	0	0	0	0	0	0	0	0	0
375-384	0	0	0	0	0	0	0	0	0	0	0	0
385-394	0	0	0	0	0	0	0	0	0	0	0	0
395-404	0	0	0	0	0	0	0	0	0	0	0	0
405-414	0	0	0	0	0	0	0	0	0	0	0	0
415-424	0	0	0	0	0	0	0	0	0	0	0	0
425-434	0	0	0	0	0	0	0	0	0	0	0	0
435-444	0	0	0	0	0	0	0	0	0	0	0	0
445-454	0	0	0	0	0	0	0	0	0	0	0	0
455-464	0	0	0	0	0	0	0	0	0	0	0	0
465-474	0	0	0	0	0	0	0	0	0	0	0	0
475-484	0	0	0	0	0	0	0	0	0	0	0	0
485-494	0	0	0	0	0	0	0	0	0	0	0	0
495-504	0	0	0	0	0	0	0	0	0	0	0	0
505-514	0	0	0	0	0	0	0	0	0	0	0	0
515-524	0	0	0	0	0	0	0	0	0	0	0	0
525-534	0	0	0	0	0	0	0	0	0	0	0	0
535-544	0	0	0	0	0	0	0	0	0	0	0	0
545-554	0	0	0	0	0	0	0	0	0	0	0	0
555-564	0	0	0	0	0	0	0	0	0	0	0	0
565-574	0	0	0	0	0	0	0	0	0	0	0	0
575-584	0	0	0	0	0	0	0	0	0	0	0	0
585-594	0	0	0	0	0	0	0	0	0	0	0	0
595-604	0	0	0	0	0	0	0	0	0	0	0	0
605-614	0	0	0	0	0	0	0	0	0	0	0	0
615-624	0	0	0	0	0	0	0	0	0	0	0	0
625-634	0	0	0	0	0	0	0	0	0	0	0	0
635-644	0	0	0	0	0	0	0	0	0	0	0	0
645-654	0	0	0	0	0	0	0	0	0	0	0	0
655-664	0	0	0	0	0	0	0	0	0	0	0	0
665-674	0	0	0	0	0	0	0	0	0	0	0	0
675-684	0	0	0	0	0	0	0	0	0	0	0	0
685-694	0	0	0	0	0	0	0	0	0	0	0	0
695-704	0	0	0	0	0	0	0	0	0	0	0	0
705-714	0	0	0	0	0	0	0	0	0	0	0	0
715-724	0	0	0	0	0	0	0	0	0	0	0	0
725-734	0	0	0	0	0	0	0	0	0	0	0	0
735-744	0	0	0	0	0	0	0	0	0	0	0	0
745-754	0	0	0	0	0	0	0	0	0	0	0	0
755-764	0	0	0	0	0	0	0	0	0	0	0	0
765-774	0	0	0	0	0	0	0	0	0	0	0	0
775-784	0	0	0	0	0	0	0	0	0	0	0	0
785-794	0	0	0	0	0	0	0	0	0	0	0	0
795-804	0	0	0	0	0	0	0	0	0	0	0	0
805-814	0	0	0	0	0	0	0	0	0	0	0	0
815-824	0	0	0	0	0	0	0	0	0	0	0	0
825-834	0	0	0	0	0	0	0	0	0	0	0	0
835-844	0	0	0	0	0	0	0	0	0	0	0	0
845-854	0	0	0	0	0	0	0	0	0	0	0	0
855-864	0	0	0	0	0	0	0	0	0	0	0	0
865-874	0	0	0	0	0	0	0	0	0	0	0	0
875-884	0	0	0	0	0	0	0	0	0	0	0	0
885-894	0	0	0	0	0	0	0	0	0	0	0	0
895-904	0	0	0	0	0	0	0	0	0	0	0	0
905-914	0	0	0	0	0	0	0	0	0	0	0	0
915-924	0	0	0	0	0	0	0	0	0	0	0	0
925-934	0	0	0	0	0	0	0	0	0	0	0	0
935-944	0	0	0	0	0	0	0	0	0	0	0	0
945-954	0	0	0	0	0	0	0	0	0	0	0	0
955-964	0	0	0	0	0	0	0	0	0	0	0	0
965-974	0	0	0	0	0	0	0	0	0	0	0	0
975-984	0	0	0	0	0	0	0	0	0	0	0	0
985-994	0	0	0	0	0	0	0	0	0	0	0	0
995-1004	0	0	0	0	0	0	0	0	0	0	0	0
1005-1014	0	0	0	0	0	0	0	0	0	0	0	0
1015-1024	0	0	0	0	0	0	0	0	0	0	0	0
1025-1034	0	0	0	0	0	0	0	0	0	0	0	0
1035-1044	0	0	0	0	0	0	0	0	0	0	0	0
1045-1054	0	0	0	0	0	0	0	0	0	0	0	0
1055-1064	0	0	0	0	0	0	0	0	0	0	0	0
1065-1074	0	0	0	0	0	0	0	0	0	0	0	0
1075-1084	0	0	0	0	0	0	0	0	0	0	0	0
1085-1094	0	0	0	0	0	0	0	0	0	0	0	0
1095-1104	0	0	0	0	0	0	0	0	0	0	0	0
1105-1114	0	0	0	0	0	0	0	0	0	0	0	0
1115-1124	0	0	0	0	0	0	0	0	0	0	0	0
1125-1134	0	0	0	0	0	0	0	0	0	0	0	0
1135-1144	0	0	0	0	0	0	0	0	0	0	0	0
1145-1154	0	0	0	0	0	0	0	0	0	0	0	0
1155-1164	0	0	0	0	0	0	0	0	0	0	0	0
1165-1174	0	0	0	0	0	0	0	0	0	0	0	0
1175-1184	0	0	0	0	0	0	0	0	0	0	0	0
1185-1194	0	0	0	0	0	0	0	0	0	0	0	0
1195-1204	0	0	0	0	0	0	0	0	0	0	0	0
1205-1214	0	0	0	0	0	0	0	0	0	0	0	0
1215-1224	0	0	0	0	0	0	0	0	0	0	0	0
1225-1234	0	0	0	0	0	0	0	0	0	0	0	0
1235-1244	0	0	0	0	0	0	0	0	0	0	0	0
1245-1254	0	0	0	0	0	0	0	0	0	0	0	0
1255-1264	0	0	0	0	0	0	0	0	0	0	0	0
1265-1274	0	0	0	0	0	0	0	0	0	0	0	0
1275-1284	0	0	0	0	0	0	0	0	0	0	0	0
1285-1294	0	0	0	0	0	0	0	0	0	0	0	0
1295-1304	0	0	0	0	0	0	0	0	0	0	0	0
1305-1314	0	0	0	0	0	0	0	0	0	0	0	0
1315-1324	0	0	0	0	0	0	0	0	0	0	0	0
1325-1334	0	0	0	0	0	0	0	0	0	0	0	0
1335-1344	0	0	0	0	0							

INFECTIOUS DISEASES HOSPITAL.

During the year under review, 14 cases of Diphtheria, 5 cases of Scarlet Fever, 3 cases of Measles, and 2 cases of Chickenpox were removed for treatment to one or other of the Hospitals belonging to the Department. When it is considered that the Hospital is situated in a remote and isolated position, and that the cases that are removed to our Hospital are treated there under considerable drawbacks, the results are very satisfactory.

DEATH RATE FROM TUBERCULOSIS.

Chart showing the Death Rate per 1,000 from Tuberculosis amongst Europeans, Asiatics and Natives during the past nine years :—



DEATH RATE FROM TUBERCULOSIS

Chart showing the Death Rate per 1,000 from Tuberculosis amongst European Asiatics and Natives during the four nine years.



INFECTIOUS DISEASES HOSPITAL.

During the year under review, 14 cases of Diphtheria, 6 cases of Scarlet Fever, 3 cases of Measles, and 7 cases of Chicken-pox were removed for treatment to one or other of the Hospitals belonging to the Department. When it is borne in mind that only such cases are removed as are lodged in hotels or boarding-houses, or where the conditions render any attempt at effective isolation impossible, it will be seen that the need for a proper institution for the isolation of infectious diseases is growing more urgent. At the present time a good many infectious cases are treated at home under conditions of isolation which can only be regarded as unsatisfactory, and the cases that are removed to our Hospital are treated there under considerable drawbacks.

MEDICAL INSPECTION OF SCHOOL CHILDREN.

In October, 1912, your Medical Officer of Health and Staff carried out a medical inspection of 400 scholars attending Bulwer Park School. The results of that inspection received your careful consideration. At least one logical conclusion to be drawn from the study of that Report was that the medical inspection of school children in Durban appeared to be as necessary for their physical and mental development as in other parts of the world where the practice has been in operation for years.

The Town Council accordingly made representations to the Provincial Council of Natal regarding the desirability of providing for the medical inspection of children attending Government Schools within the Borough of Durban, and urged that steps be taken at the earliest possible date to provide the requisite machinery to give effect to such medical inspection. At the same time you signified your willingness to assist the Education Department in any practicable manner.

It was with astonishment and regret that the Town Council, and later the community generally (as voiced in leading and other articles in the local newspapers) learned that the Provincial Council—acting on the advice of the Superintendent of Education—had signified their unwillingness to accept any responsibility for medical inspection of school children in Natal. I have had the opportunity of reading the Minute of the Superintendent of Education, by which the Provincial Council were mainly guided in arriving at their decision. It would be charitable to describe it as an incomplete and prejudiced report. No information seems to be given to the Executive of the Provincial Council as to the aims and object of medical inspection of scholars, and the whole subject is treated as from the standpoint of a penny-wise and pound-foolish educationalist. Medical inspection is not a part of a system of education; it has, however, been co-ordinated with that Department because through its agency all children can be reached, controlled, and at the least expense.

It may be mentioned here that the real aim of medical inspection is to develop the growing child by removing wherever present any condition that would interfere with that development either physically or mentally. It is as one distinguished authority has said: "The producing of as high a type of human being as the inherited capacity of the individual entitles him to be." Herbert Spencer, more than a generation ago, said: "To be a good animal is the first requisite to success in life, and to be a nation of good animals is the first condition to national prosperity." Medical inspection of children as carried out in countries throughout the world, is the belated recognition of the principle above enunciated.

But even from an educational point of view there is a good deal to be said in favour of the medical inspection of children during their school careers. By such a process, numerous cases of minor ailments are discovered in every school; ailments which parents and others would not consider worth the attention of a doctor, and which condition acts as an obstruction to the child's education, and consequently to their after efficiency as citizens. It is the boast of education departments that their work is the making of men and women.

INFECTIOUS DISEASES HOSPITAL

During the year under review, 14 cases of Diphtheria, 6 cases of Scarlatina, 9 cases of Measles, and 7 cases of Chicken-pox were removed for treatment to one or other of the Hospitals belonging to the Department. When it is borne in mind that only such cases are removed as are judged to be of a serious nature, or where the conditions render any attempt at effective isolation impossible, it will be seen that the need for a proper institution for the isolation of infectious diseases is growing more urgent. At the present time a good many infectious cases are treated at home under conditions of isolation which can only be regarded as unsatisfactory, and the cases that are removed to our Hospital are treated there under considerable drawbacks.

MEDICAL INSPECTION OF SCHOOL CHILDREN.

In October, 1912, your Medical Officer of Health and Sanitary carried out a medical inspection of 400 scholars attending Holway Park School. The results of that inspection received your careful consideration. At least one logical conclusion to be drawn from the study of that Report was that the medical inspection of school children in London appeared to be as necessary for their physical and mental development as in other parts of the world where the practice has been in operation for years.

The Town Council accordingly made representations to the Provincial Council of Natal regarding the desirability of providing for the medical inspection of children attending Government Schools within the Borough of Durban, and urged that steps be taken at the earliest possible date to provide the requisite machinery to give effect to such medical inspection. At the same time you signified your willingness to assist the Education Department in any practicable manner.

It was with astonishment and regret that the Town Council, and later the community generally (as voiced in leading and other articles in the local newspaper) learned that the Provincial Council—acting on the advice of the Superintendent of Education—had signified their unwillingness to accept any responsibility for medical inspection of school children in Natal. I have had the opportunity of reading the Minutes of the Superintendent's Education, by which the Provincial Council were mainly guided in arriving at their decision. It would be desirable to describe it as an incomplete and prejudiced report. No information seems to be given to the Executive of the Provincial Council as to the aims and object of medical inspection of scholars, and the whole subject is treated as from the standpoint of a penny-wise and pound-foolish educationist. Medical inspection is not a part of a system of education; it has, however, been co-ordinated with that Department because through its agency all children can be reached, controlled, and at the last, examined.

It may be mentioned here that the real aim of medical inspection is to develop the growing child by recognizing wherever present any condition that would interfere with that development either physically or mentally. It is as one distinguished authority has said: "The producing of as high a type of human being as the inherent capacity of the individual enables him to be." Herbert Spencer, more than a generation ago, said: "To be a good animal is the first requisite to success in life, and to be a nation of good animals is the first condition to national prosperity." Medical inspection of children is carried out in countries throughout the world, in the belief that recognition of the principles above enunciated.

Just now from an educational point of view there is a good deal to be said in favour of the medical inspection of children during their school career. If such a process, numerous cases of latent ailments are discovered in every school; ailments which parents and others would not consider worth the attention of a doctor, and which condition acts as an obstruction to the child's education, and consequently to their after efficiency as citizens. It is the best of education departments that their work is the making of men and women.

I should consider that the throat conditions found in pupils attending Bulwer Park School were such as to prevent the scholars so affected making the most of the educational facilities afforded them, or alternatively causing it to be a more laborious and exhausting process to acquire the same knowledge.

The subject of medical inspection of school children should again be brought before the Provincial Council. The fact that since their decision in May, 1913, medical inspection has been started in the Transvaal under Government auspices, and the further likelihood of another South African Province other than Natal following that lead shortly. It may be that the Provincial Council may see the necessity of at least keeping this Province on an equality with that of other Provinces in the Union, by following in their footsteps.

DISINFECTING STATION.

The following is a summary of the work performed at the Disinfecting Station during the past year:—

DISINFECTIONS.

Month	Houses or Rooms	Mattresses	Blankets	Sheets	Articles of Clothing	General Articles	Totals
1912							
August	60	156	434	213	1252	1180	3295
September	57	89	191	91	784	591	1803
October	63	77	90	85	862	656	1833
November	65	76	128	167	722	816	1974
December	67	81	141	169	941	769	2168
1913							
January	52	76	95	71	559	538	1391
February	44	57	93	66	510	485	1255
March	49	80	142	118	746	692	1827
April	66	87	157	197	1194	898	2599
May	69	92	143	190	919	1075	2488
June	79	110	525	326	1116	1363	3519
July	98	145	141	317	1675	1771	4147
Totals	769	1126	2280	2010	11,280	10,834	28,299
Previous Year's Work	782	1191	1975	1570	11,536	13,232	30,286

PUBLIC BATHS.

The following Table shows the Washing done at the Disinfecting Station for the Public Baths, West Street, during the past year:—

Months.	Towels.	Ladies' Costumes.	Drawers.	Ladies' Sheets.	Plain Sheets.	Totals.
1912						
August	4070	70	—	78	5	4223
September	4200	33	115	52	6	4406
October	4790	69	130	79	10	5078
November	5760	143	98	19	—	6020
December	6120	37	140	63	10	6370
1913						
January	6630	52	105	28	9	6824
February	6420	30	120	32	6	6608
March	5980	106	280	47	11	6424
April	5840	36	50	49	16	5991
May	4100	58	—	37	6	4201
June	3390	50	—	32	14	3486
July	3990	56	55	59	16	4176
Totals	61,290	740	1093	575	109	63,807
Previous Year's Work	82,480	759	1390	548	124	85,301

I should consider that the strict conditions found in public attending Halver Park School were such as to prevent the school as a whole making the most of the educational facilities afforded them or alternatively causing it to be a more laborious and exhausting process to acquire the same knowledge.

The subject of medical inspection of school children should again be brought before the Provincial Council. The fact that since their decision in May, 1913, medical inspection has been started in the Provincial under Government auspices, and the further likelihood of another South African Province after them (not following that lead) should be noted. It may be that the Provincial Council may see the necessity of at least keeping this Province on an equality with that of other Provinces in the Union by following in their footsteps.

DISTRICT STATION.

The following is a summary of the work performed at the District Station during the past year:

DISTRICT STATION.

Month	Boys	Girls	Matrons	Students	Students	Students	Students	Students
1912								
August	80	128	484	413	1180	1180	1180	1180
September	57	80	101	91	101	101	101	101
October	57	77	90	80	101	101	101	101
November	53	76	100	107	107	107	107	107
December	57	87	141	100	100	100	100	100
1913								
January	53	76	85	71	100	100	100	100
February	44	57	85	65	100	100	100	100
March	40	80	142	110	100	100	100	100
April	50	87	147	107	100	100	100	100
May	50	87	147	107	100	100	100	100
June	50	110	153	100	100	100	100	100
July	50	144	141	147	100	100	100	100
Total	700	1180	2280	2010	1180	1180	1180	1180
Previous Year's Work	700	1180	2280	2010	1180	1180	1180	1180

PUBLIC HEALTH.

The following Table shows the Work done at the District Station for the Public Health, West Street during the past year:

Month	Boys	Girls	Matrons	Students	Students	Students	Students	Students
1912								
August	4000	70	115	100	100	100	100	100
September	4200	20	115	100	100	100	100	100
October	4700	60	140	100	100	100	100	100
November	5700	140	140	100	100	100	100	100
December	6100	37	140	100	100	100	100	100
1913								
January	6700	25	140	100	100	100	100	100
February	6100	30	140	100	100	100	100	100
March	6000	700	140	100	100	100	100	100
April	6800	30	140	100	100	100	100	100
May	4100	20	140	100	100	100	100	100
June	3000	20	140	100	100	100	100	100
July	3000	20	140	100	100	100	100	100
Total	61,000	740	1000	1000	1000	1000	1000	1000
Previous Year's Work	61,000	740	1000	1000	1000	1000	1000	1000

OCEAN BEACH BATHING ENCLOSURE AND SWIMMING BATHS.

The following Table shows the Washing done during the past year at the Disinfecting Station in connection with the Ocean Beach Bathing Enclosure and Swimming Baths:—

Months.	Towels	Ladies' Costumes.	Gent's Costumes.	Drawers.	Totals.
1912					
August ...	16280	1579	6360	1530	25749
September ...	9680	725	5255	1705	17365
October ...	9860	787	4260	1680	16587
November ...	12700	890	5470	2910	21970
December ...	17100	1407	9290	3190	30987
1913					
January ...	18440	1870	8140	1750	30200
February ...	18360	1826	8300	1340	29826
March ...	11920	995	6100	3750	22765
April ...	8820	1212	4790	3905	18727
May ...	12080	1286	5520	3370	22256
June ...	10540	1085	5330	1670	18625
July ...	18250	1870	7950	1105	29175
Totals ...	164,030	15,532	76,765	27,905	284,232
Previous Years Work (at Enclosure only)	130,080	11,956	69,970	13,719	225,725

Number of Towels washed at Disinfecting Station for Public Lavatories and other Corporation Departments, 1,440.

INFECTIOUS DISEASES: PAIL SERVICE.

The following Table shows the number of Infectious Diseases Pails supplied and dealt with at cases of Enteric Fever and Dysentery where sewerage is not connected up or available:—

Months.	Pails.
1912.	
August ...	—
September ...	4
October ...	6
November ...	—
December ...	3
1913.	
January ...	—
February ...	—
March ...	4
April ...	13
May ...	11
June ...	—
July ...	—
Total ...	41
Previous year's work ...	85

OCEAN BEACH BATHING ENCLOSURE AND SWIMMING BATHS

The following Table shows the Washing done during the past year at the Bathing Station in connection with the Ocean Beach Bathing Enclosure and Swimming Baths:

Months	Wash	Ladies' Enclosure	Gent's Enclosure	Downs	Total
1912					
August	10280	1878	6880	1280	27748
September	9680	728	5228	1788	17388
October	9880	787	4280	1680	16527
November	12700	680	5470	2010	21070
December	17100	1407	9280	4180	30967
1913					
January	16410	1870	8180	1780	36240
February	16280	1820	6280	1340	35680
March	17280	807	4780	1720	33787
April	6820	1412	4780	2807	16737
May	15880	1288	5280	3070	32528
June	10880	1087	5280	1870	19097
July	16280	1870	7880	1482	36512
Totals	161080	12502	74787	17962	266331
Previous Year	150180	11580	60970	18718	241548

Number of Towels washed at Bathing Station for Public Enclosures and other Corporation Departments, 1440

INFECTIOUS DISEASES - PAID SERVICE

The following Table shows the number of Infectious Diseases Paid supplied and dealt with at rates of Honor, Extra and Discretionary when coverage is not provided up to available:

Months	Paids
1912	
August	1
September	1
October	0
November	0
December	0
1913	
January	0
February	0
March	4
April	18
May	11
June	0
July	0
Total	44

Previous year's total 80

1913 - 1914

Table of Cases of NOTIFIABLE INFECTIOUS DISEASES
arranged according to Races.

Disease.	Europeans		Natives.		Asiatics.		Total.	
	<u>B.</u>	<u>I.</u>	<u>B.</u>	<u>I.</u>	<u>B.</u>	<u>I.</u>	<u>B.</u>	<u>I.</u>
Cholera	-	-	-	-	-	-	-	-
Dysentery	51 33	9	18 21	7	12 17	4	83 81 71	24 20 16
Erysipelas	-	-	-	-	-	-	-	-
Scarlet fever	113 137	11	2 0	-	1 8	-	118 116 145	12 11 15
Smallpox	8 6	-	-	-	1 1	-	9 7	-
Typhoid Fever.	57 24	7	1 0	-	- 0	-	58 24	7 3
Typhus	88 118	49 57	21 12	11	3 1	2	112 131	30 32 57
General	-	-	-	-	-	-	4	-
Measles	-	-	1	-	3	3	4 1	3 2
Scarlet	32 34	49 62	14 19	19 38	93 32 54	50 52 42	178 78 107	131 120 142
Styphoid	-	-	-	-	-	-	0	-
Others:	358 354 349	173 144 125	70 52 57	29 47 37	141 84 52	60 45 61	588 490 458	203 236 223 = 681
Admitted in Hospital.	130 138	71 73	34 39	38 31	57 35	38 53	223 215 212	115 147 157
Discharged at home privately:	211	52	18	6	17	8	246	66

422 inpatients

ABATTOIR.

Reference to the accompanying Tables will show that a considerable quantity of meat and viscera was condemned as unfit for human food and subsequently destroyed. When it is borne in mind that only about a third of the town's meat supply is prepared in this Abattoir, the urgent need for Municipal control and supervision of the whole of the meat supply of the Borough will be at once apparent, and the decision of the Council to erect a proper Abattoir, with modern methods of working and management is amply justified.

It is unfortunate that the erection of the new Abattoir at Congella has made disappointingly slow progress.

Killed and prepared at the Municipal Abattoir from August 1, 1912, to July 31, 1913:—

Month	Cattle	Calves	Sheep	Tripes	Heads	Sets Feet	Sets Trotters
1912							
August ...	261	3	402	142	...	...	...
September ...	506	8	736	138	...	...	...
October ...	428	6	996	132	4	23	...
November ...	115	1	1539	57	1	1	85
December ...	191	2	2129	67	2	2	...
1913							
January ...	554	5	2227	114	5	4	...
February ...	593	1	2153	99	...	...	...
March ...	662	17	1061	151	17	17	...
April ...	1190	1	2134	243	...	1½	18
May ...	1139	2	1971	221	1	1	...
June ...	1013	2	1952	156	...	2½	24
July ...	983	2	2137	157	2	2	27
Totals ..	7615	50	19,437	1657	32	54	154

Brought to the Abattoir for sale:—

Month	Carcases of Beef	Carcases of Mutton	Carcases of Pork	Carcases of Veal
1912				
August ...	6	...	274	...
September ...	10½	...	375	...
October ...	...	...	246	...
November ...	2	26	336	...
December ...	...	9	138	...
1913				
January ...	...	...	108	...
February ...	...	...	80	...
March ...	...	...	195	...
April ...	23	...	46	1
May ...	...	...	190	1
June ...	...	...	229	...
July ...	...	...	297	...
Totals ...	41½	35	2514	2

Sheep sold on leg during year, 1,485.

ABATTOIR

Reference to the accompanying Tables will show that a considerable quantity of meat and viscera was condemned as unfit for human food and subsequently destroyed. When it is borne in mind that only about a third of the town's meat supply is produced in this Abattoir, the urgent need for Municipal control and supervision of the whole of the meat supply of the Borough will be at once apparent, and the decision of the Council to erect a proper Abattoir with modern methods of working and management is amply justified.

It is unfortunate that the erection of the new Abattoir at Conyngham has made disappointingly slow progress.

Killed and prepared at the Municipal Abattoir from August 1, 1912, to July 31, 1913:—

Month	Cattle	Calves	Sheep	Pigs	Hens	Geese	Other
1912							
August	301	3	403	142	...	...	...
September	300	3	388	138	...	...	...
October	428	6	308	132	4	...	...
November	115	1	1510	57	1	...	...
December	191	2	2120	57	2	...	...
1913							
January	554	5	2127	114	3	...	...
February	323	1	2126	99	...	...	...
March	882	17	1001	131	17	...	...
April	1190	1	4184	243	14	...	...
May	1139	2	1971	221	1	...	...
June	1012	2	1971	176	...	...	...
July	982	2	2127	157	2	...	...
Totals	7616	50	19,487	1667	35	54	124

Brought to the Abattoir for sale:—

Month	Number of Feet	Carcases of Mutton	Carcases of Pork	Carcases of Veal
1912				
August	6	...	374	...
September	101	...	573	...
October	...	...	514	...
November	3	35	530	...
December	...	9	138	...
1913				
January	...	...	108	...
February	...	...	80	...
March	...	...	195	...
April	23	...	46	...
May	...	...	190	...
June	...	...	228	...
July	...	...	207	...
Totals	411	35	1914	...

Sheep sold on leg during year 1,465.

Carcases, Viscera, etc., condemned and destroyed being unfit for human food:—

Month	Carcases of Beef	Qrs. of Beef	Carcases of Veal	Q s. of Veal	Carcases of Mutton	Qrs. of Mutton	Carcases of Pork	Qrs. of Pork.
1912								
August ...	...	...	...	...	...	...	19	...
September ...	...	...	...	...	...	...	25	...
October ...	...	...	...	...	...	...	15	...
November ...	...	...	...	...	...	...	33	...
December ...	3	...	...	...	...	...	7	...
1913								
January ...	1	...	...	...	...	...	2	...
February ...	2	...	...	...	18	4	2	...
March ...	1	...	...	...	15	...	23	...
April ...	3	...	...	...	42	...	9	...
May ...	9	3	...	...	31	...	17	...
June ...	8	...	...	...	52	...	15	...
July ...	1	4	...	...	8	...	20	...
Totals ...	28	7	...	...	166	4	192	...

Diseases necessitating seizure and condemnation:—

	Beef	Mutton	Pork
Tuberculosis ...	14	..	...
Sarcoma ...	1	...	...
Injury ...	1	...	...
Moribund ...	2	...	...
Malignant Edema ...	...	1	...
Cysticercus Cellulosæ ...	...	...	192
Hydremia and Emaciation ...	10	165	...
	28	166	192

Months	Heads	Tongues	Lungs	Hearts	Livers	Spleens	Stomachs	Intestines	Kidneys
1912									
Aug.	...	...	...	...	...	...	...	...	...
Sept.	...	...	33	33	33	...	...	...	...
Oct.	...	...	59	59	59	...	...	...	...
Nov.	...	...	57	57	57	...	...	...	...
Dec.	...	...	...	...	...	...	...	...	...
1913									
Jan.	...	...	39	32	39	...	1	30	...
Feb.	3	2	79	12	400	5	5	1877	17
March	5	...	22	18	123	...	4	854	4
April	4	...	41	11	195	...	6	1782	8
May	9	6	91	10	359	7	9	1405	12
June	21	12	142	23	331	19	19	1835	19
July	2	2	48	4	381	2	2	2045	3
Totals	44	22	601	259	1977	33	46	9828	63

Curious, Vicious, etc., condemned and destroyed being sent for human food:—

Month	Curious of Food	Curious of Food	Curious of Food	Curious of Food	Curious of Food	Curious of Food	Curious of Food
1912							
August	...	...	...	...	...	...	...
September	...	...	...	...	...	...	...
October	...	...	...	...	...	...	...
November	...	...	...	...	...	...	...
December	...	...	...	...	...	...	...
1913							
January	...	...	...	...	...	...	...
February	...	...	...	...	...	...	...
March	...	...	...	...	...	...	...
April	...	...	...	...	...	...	...
May	...	...	...	...	...	...	...
June	...	...	...	...	...	...	...
July	...	...	...	...	...	...	...
Total	28	7	...	...	...	...	...

Diseases necessitating cures and condemnation:—

Month	Food	Food	Food	Food	Food	Food	Food
1912							
August	...	...	...	...	...	...	...
September	...	...	...	...	...	...	...
October	...	...	...	...	...	...	...
November	...	...	...	...	...	...	...
December	...	...	...	...	...	...	...
1913							
January	...	...	...	...	...	...	...
February	...	...	...	...	...	...	...
March	...	...	...	...	...	...	...
April	...	...	...	...	...	...	...
May	...	...	...	...	...	...	...
June	...	...	...	...	...	...	...
July	...	...	...	...	...	...	...
Total	28	7	...	...	...	...	...

Month	Food	Food	Food	Food	Food	Food	Food
1912							
August	...	...	...	...	...	...	...
September	...	...	...	...	...	...	...
October	...	...	...	...	...	...	...
November	...	...	...	...	...	...	...
December	...	...	...	...	...	...	...
1913							
January	...	...	...	...	...	...	...
February	...	...	...	...	...	...	...
March	...	...	...	...	...	...	...
April	...	...	...	...	...	...	...
May	...	...	...	...	...	...	...
June	...	...	...	...	...	...	...
July	...	...	...	...	...	...	...
Total	44	32	606	228	1917	21	40

The Viscera were condemned being affected with either of the following diseases:—

Tuberculosis.	Echinococcus Veterinorum.
Actinomycosis.	Sarcoma.
Distoma Hepaticum.	Cysticercus Tenuicollis.
Tinea.	Pyæmic Abscess.
Aesophagastomum.	Columbianum.

Work done in the Municipal BACTERIOLOGICAL LABORATORY. 1st Aug. 1913 to 31 July 1914.

	Positive.	Negative.	Total.
<i>Spina for</i> Tubercle Bacilli	67	227	294
<i>Swabs for</i> Diphtheria Bacilli	34	131	165
<i>Blood for</i> Widal Reaction for Enteric	155	563	718
<i>Urine for</i> Bilharzia	26	63	89
<i>Blood films for</i> Malaria	0	5	5
<i>Pus for</i> Gonococci	0	3	3
<i>Spleen smears for</i> Plague, Human	0	3	3
<i>Spleen & Smears for</i> " Rat	0	86	86
<i>Pus for</i> Cocci	0	1	1
Totals	282	1,085	1,367

* Examination by anti-formin method.

TOTAL EXAMINATIONS.

1905-6.	1906-7.	1907-8.	1908-9.	1909-10.	1910-11.	1911-12.	1912-13.
12,898	5919	137	187	226	323	1970	1367.
*	*					*	

*Chiefly Plague Examinations.

Food examinations. Meat exposed for sale, condiments, fish, tinned foods, fruits &c. Bread, kitchen meal, pork,

STAFF

The constitution of the Staff is as follows.—

Medical Officer of Health	...	...	...	...	P. Murison
Chief Inspector of Nuisances	...	...	...	...	W. C. Daugherty
Special Sanitary Inspector	...	...	...	...	R. Walker
Assistant Inspectors of Nuisances	...	...	...	...	J. Kendall Thos. Hyslop W. Thomson J. Wood A. Kelso. F. W. Holmes W. G. Smith W. G. Pearce
Typist	...	...	...	...	I. Stewart
Clerk	...	...	...	...	A. M. McIver
2nd Clerk	...	...	...	...	F. W. Burne
Superintendent, Disinfecting Station	...	...	...	...	E. Schulthess
Assistant Disinfecter	...	...	...	...	C. D. Morning

TUBERCULOSIS BUREAU

Tuberculosis Medical Officer	...	...	...	...	B. Adams
Nurse	...	...	...	...	A. Twamley

ABATTOIR

Director	...	...	...	...	W. G. Barnes
Inspector	...	...	...	...	R. McDonald

P. MURISON, M.D., B. Sc., D.P.H.

Medical Officer of Health.

Durban Municipal Tuberculosis Bureau.

REPORT BY TUBERCULOSIS MEDICAL OFFICER

From the opening of the Bureau at the beginning of May, 1911, up to the end of that Municipal Year (July 31st, 1911) 302 persons, during the Municipal Year to July 31st, 1912 848 persons presented themselves for examination, and during last Municipal Year 673 persons were examined, making 1,823 in all. These I have divided into four classes:—

- ✓ A. EUROPEAN, which have included among other races, American, German, Scandinavian, Dutch and Russian.
- B. COLOURED, which have included Mauritian, St. Helenas, West Indians, Cape Malays, and Half-castes of various degrees, British and Native, Indian and Cape.
- C. NATIVE, mostly Zulus, occasional Basuto and Griqua.
- D. ASIATIC, mainly Indians, but a few Chinese.

Of these 1,823 persons there were:—

A. Europeans	847
B. Coloured	126
C. Native	266
D. Asiatic	584

Divided in years as follows:—

CLASS	1911 (Three Months)	1911-1912	1912-1913
A	160	352	335
B	33	51	42
C	14	127	125
D	95	318	171

Durban Municipal Tuberculosis Bureau.

REPORT BY TUBERCULOSIS MEDICAL OFFICER

From the opening of the Bureau at the beginning of May, 1911, up to the end of that financial year (July 31st, 1912) 518 persons presented themselves for examination, and during that period 513 persons were examined, making 1,031 in all. These I have divided into four classes:

- A. EUROPEAN, which have included among other races, American, German, Scandinavian, Dutch and Russian.
- B. COLOURED, which have included Malaysians, St. Helena, West Indians, Cape Malays, and Half-breeds of various degrees, British and Native Indian and Cape.
- C. NATIVE, mostly Natives, occasional Boers and Griquas.
- D. ASIATIC, mostly Indians, but a few Chinese.

Of these 1,031 persons there were:

A. Europeans	417
B. Coloured	128
C. Native	280
D. Asiatic	64

Divided in years as follows:

Class	1911	1911-1912	1912-1913
A	180	222	205
B	25	51	42
C	14	127	126
D	60	218	171

The figures of attendances month by month are as follows:—

TOTAL NUMBER OF PERSONS EXAMINED.

Months.	Europeans.	Coloured.	Natives.	Asiatic.	Total.
1911 3 months May, June, July	160	33	14	95	302
1911-1912	352	51	127	318	848
1912					
August ...	27	2	14	16	59
September ...	35	6	6	16	63
October ...	29	5	11	18	63
November ...	27	3	13	8	51
December ...	13	2	5	9	29
1913					
January ...	30	1	9	19	59
February ...	6	3	7	8	24
March ...	17	5	6	10	38
April ...	29	5	13	11	58
May ...	36	4	10	24	74
June ...	37	0	18	19	74
July ...	49	6	13	13	81
Totals for year 1912-13	335	42	125	171	673
Grand Total	847	126	266	584	1823

Among these 1,823 persons 470 have been found suffering from Pulmonary Tuberculosis; 143 during the last Municipal Year, and 327 previous to last Municipal Year. I have found signs of healed Tuberculosis of the lungs, and other forms of Tuberculosis, but these cases are not included in these figures.

These 470 cases were distributed as follows:—

TOTAL NUMBER OF CASES OF PULMONARY TUBERCULOSIS

Months.	Europeans.	Coloured.	Natives.	Asiatic.	Total.
1911 3 months May, June, July	70	13	7	26	116
1911-12	96	14	42	59	211
1912					
August ...	6	0	1	5	12
September ...	9	2	2	1	14
October ...	7	0	3	2	12
November ...	7	2	5	3	17
December ...	1	0	3	1	5
1913					
January ...	3	0	3	8	14
February ...	1	0	0	1	2
March ...	6	1	0	3	10
April ...	7	0	5	2	14
May ...	9	1	2	6	18
June ...	8	0	3	1	12
July ...	7	1	3	2	13
Totals for year 1912-13	71	7	30	35	143
Grand Total	237	34	79	120	470

The figures of attendance month by month are as follows:—

TOTAL NUMBER OF ERRORS EXAMINED

Month	Europeans	Coloured	Natives	Asiatic	Total
1911	100	27	14	65	206
1911-1912	221	51	157	218	647
1912	27	2	14	10	53
Jan	25	4	6	10	45
Feb	20	2	10	10	42
Mar	27	3	12	8	50
Apr	13	3	9	9	34
1913	30	1	0	10	41
Jan	6	3	7	8	24
Feb	17	2	0	10	29
Mar	20	2	13	11	46
Apr	20	4	10	20	54
May	37	0	10	17	64
June	49	0	13	13	75
As for year	225	42	128	171	566
Total	647	124	508	564	1843

Among these 1,851 persons 476 have been found suffering from Taberculosis; 141 during the last financial year, and 335 persons in the equal year. I have found signs of latent Tuberculosis in the lungs, and forms of Tuberculosis, but these cases are not included in these figures.

These 476 cases were distributed as follows:—

TOTAL NUMBER OF CASES OF PULMONARY TUBERCULOSIS

Month	Europeans	Coloured	Natives	Asiatic	Total
1911	20	13	7	30	70
1911-1912	90	14	42	50	196
1912	0	0	1	2	3
Jan	0	0	2	1	3
Feb	7	0	3	2	12
Mar	7	2	2	3	14
Apr	1	0	3	1	5
1913	3	0	3	8	14
Jan	1	0	0	1	2
Feb	0	1	0	2	3
Mar	7	0	3	2	12
Apr	0	1	2	0	3
May	0	0	3	1	4
June	7	1	3	1	12
As for year	71	7	30	35	143
Total	227	24	70	160	481

470 cases of Pulmonary Tuberculosis may be divided as follows:—

A. EUROPEAN.

Resident in Borough on July 31, 1913 ...	66	On July 31, 1912	60
Died in Borough before August 1, 1913 ...	44	Before August 1, 1912	25
Examined and left the Borough before August 1, 1913	127	Before August 1, 1912	81
Total	237		166

B. COLOURED.

Resident in Borough on July 31, 1913 ...	10	On July 31, 1912	12
Died in Borough before August 1, 1913 ...	16	Before August 1, 1912	10
Examined and left the Borough before August 1, 1913	8	Before August 1, 1912	5
Total	34		27

C. NATIVE.

Resident in Borough on July 31, 1913 ...	3	On July 31, 1912	1
Died in Borough before August 1, 1913 ...	9	Before August 1, 1912	6
Examined and left the Borough before August 1, 1913	67	Before August 1, 1912	42
Total	79		49

D. ASIATIC.

Resident in Borough on July 31, 1913 ...	17	On July 31, 1912	16
Died in Borough before August 1, 1913 ...	33	Before August 1, 1912	22
Examined and left the Borough before August 1, 1913	70	Before August 1, 1912	47
Total	120		85

This gives totals of:—

			During Year 1912-1913
Cases in Borough, July 31, 1913 ...	96	July 31, 1912 ...	89
Deaths in Borough to Aug. 1, 1913 ...	102	Aug. 1, 1912 ...	63
Examined and left the Borough to Aug 1, 1913	272	Aug. 1, 1912 ...	175
Totals	470		327

RESIDENT.—The number of cases of Pulmonary Tuberculosis actually residing in the Borough varies, but keeps between 90 and 100. In spite of the additional cases discovered, there are no more actually resident in the Borough than last year. There is a large number of cases who only come to Durban for a short time—that is, during the winter months—who go “up-country” at the onset of the warmer weather.

DEATHS.—A smaller number of Bureau cases have died in the Borough during this year; 40 have been recorded, compared with 63 last year.

A. EUROPEAN ...	11	developed disease in Borough,	8	imported, total	19
B. COLOURED ...	6	“	“	“	7
C. NATIVE ...	1	“	“	“	3
D. ASIATIC ...	9	“	“	“	11
Totals	27		13		40

Out of 40 deaths 13 had the disease when they came to Durban.

470 cases of Pulmonary Tuberculosis may be divided as follows:—

A. EUROPEAN.

Resident in Borough on July 31, 1912	66	On July 31, 1912	66
Died in Borough before August 1, 1912	44	Before August 1, 1912	44
Examined and left the Borough before August 1, 1912	157	Before August 1, 1912	157
Total	267		267

B. COLOURED.

Resident in Borough on July 31, 1912	10	On July 31, 1912	10
Died in Borough before August 1, 1912	10	Before August 1, 1912	10
Examined and left the Borough before August 1, 1912	8	Before August 1, 1912	8
Total	28		28

C. NATIVE.

Resident in Borough on July 31, 1912	2	On July 31, 1912	2
Died in Borough before August 1, 1912	2	Before August 1, 1912	2
Examined and left the Borough before August 1, 1912	67	Before August 1, 1912	67
Total	71		71

D. ASIATIC.

Resident in Borough on July 31, 1912	47	On July 31, 1912	47
Died in Borough before August 1, 1912	33	Before August 1, 1912	33
Examined and left the Borough before August 1, 1912	70	Before August 1, 1912	70
Total	150		150

This gives totals of:—

Cases in Borough, July 31, 1912	66	July 31, 1912	66
Died in Borough to Aug. 1, 1912	107	Aug. 1, 1912	107
Examined and left the Borough to Aug. 1, 1912	273	Aug. 1, 1912	273
Total	446		446

REMARKS.—The number of cases of Pulmonary Tuberculosis actually residing in the Borough varies, but stays between 50 and 100. In spite of the additional cases themselves, there are no more actually resident in the Borough than last year. There is a large number of cases who only come to London for a short time—that is during the winter months—when the "up-country" at the onset of the warmer weather.

DEATHS.—A smaller number of British cases have died in the Borough during this year; 40 have been recorded, compared with 61 last year.

A. EUROPEAN	11	Developed disease in Borough	8	Imported, total	10
B. COLOURED	6	"	"	"	7
C. NATIVE	1	"	"	"	4
D. ASIATIC	9	"	"	"	11
Total	27				32

Out of 20 deaths 13 had the disease when they came to London.

LEFT THE BOROUGH.—Ninety-seven cases this year have been examined, and left the Borough before the expiration of the Municipal Year.

Included under this heading are residents in the environs of the Borough, who work in the Borough, but attend the Bureau regularly, although they do not show in the figures as actually residing in the Borough.

ATTENDANCES OF "OLD" PATIENTS.

May, June, July, 1911	152
1911-1912	1,095
1912.—August	76
September	88
October	73
November	88
December	65
1913.—January	79
February	29
March	52
April	76
May	80
June	86
July	72
Total for 1912-1913	864
Grand Total	2,111

Fewer "Old Patients" have attended this year than last, but, as was pointed out last year, these figures denote attendances of persons suffering from Tuberculosis, as patients with other diseases are referred to medical practitioners or hospitals.

NUMBER OF VISITS PAID TO PATIENTS' HOMES.

Months.	Tuberculosis Medical Officer.	Nurse.	Indian Health Visitor.		Total.
			A	B	
1911	115	247	61	16	439
May, June, July					
1911-12	326	1248	1243	203	3020
1912	27	93	73	64	257
August					
September					
October					
November					
December					
1913	14	111	90	36	251
January					
February					
March					
April					
May					
June	15	145	89	99	348
July					
1912-13	225	1,456	972	772	3,425
Grand Total	666	2,951	2,276	991	6,884

A. Visits to actual patients.

B. Visits to employers of labour and others in search of Indian and Native patients.

LEFT THE HOSPITAL - Zoster - was given this year have been examined, and left the hospital before the expiration of the Hospital Year. Included under this heading are residents in the environs of the hospital, who work in the hospital, but attend the Hospital regularly, although they do not show in the figures as actually residing in the hospital.

ATTENDANCE OF OLD PATIENTS

Month	1911-1912		May, June, July, 1911	
	Native Patients	Total	Native Patients	Total
July	12	12	12	12
August	12	12	12	12
September	12	12	12	12
October	12	12	12	12
November	12	12	12	12
December	12	12	12	12
January	12	12	12	12
February	12	12	12	12
March	12	12	12	12
April	12	12	12	12
May	12	12	12	12
June	12	12	12	12
July	12	12	12	12
Total for 1911-1912	144	144	144	144
Grand Total	144	144	144	144

For "Old Patients" have attended this year but not in any of the last year, these figures denote attendance of persons suffering from chronic diseases, or patients with other diseases not referred to medical personnel or hospital.

NUMBER OF VISITS PAID TO PATIENTS' HOMES

Month	1911-1912		1910-1911	
	Native Patients	Total	Native Patients	Total
July	115	115	115	115
August	115	115	115	115
September	115	115	115	115
October	115	115	115	115
November	115	115	115	115
December	115	115	115	115
January	115	115	115	115
February	115	115	115	115
March	115	115	115	115
April	115	115	115	115
May	115	115	115	115
June	115	115	115	115
July	115	115	115	115
Total for 1911-1912	1380	1380	1380	1380
Grand Total	1380	1380	1380	1380

A. Visits to actual patients.
B. Visits to employees of hospital and others in vicinity of hospital and Native Patients.

An increased number of visits have been made this year (3,425) at the homes of patients, barracks, etc.

The homes of the European patients are for the most part highly satisfactory, but we have been able to assist patients to sleep on their own verandahs; further, I have gained a considerable insight into the unsatisfactory and at times exceedingly bad conditions under which the large Indian and Native population live. As my Department works in the closest touch with the Medical Officer of Health and the Sanitary Department, every room occupied by a "consumptive" is disinfected before use by another person, and several instances of overcrowding and insanitary conditions have brought about the destruction or repair of unsuitable dwellings.

EUROPEAN CASES.—Seventy-one cases of Pulmonary Tuberculosis among Europeans have been examined this year.

Of these 71 cases:—

There were born in the Borough	3
Lived more than 20 years in the Borough	4
Lived between 5 and 20 years in the Borough	14
Under 5 years in the Borough	7
Under 1 year in the Borough	43

of who 38 had been resident in the Borough under three months.

Again of the 71 European cases:—

There developed the disease in the Borough	21
--	----

Imported into the Borough, 50—

From other parts of South Africa	27
From Great Britain and elsewhere	23

It will be noted that very few European cases develop the disease in the Borough, and it is the rarest thing to find "contact" cases as is done in the Dispensaries in Great Britain, for the European cases here are drawn from a different class. The housing accommodation in the Borough is on the whole eminently satisfactory, and totally different to that which obtains in the larger towns of Great Britain. Further, the climatic conditions tend to the living of a more open air life. The Tuberculosis Medical Officer here sees practically every notified case of "Phthisis" irrespective of the social status of the patient, and I am thankful to be able to state that the heartiest co-operation exists with the Medical Practitioners, who promptly notify cases and frequently call in the Tuberculosis Medical Officer in the capacity of consultant.

COLOURED CASES.—Very few cases among Coloured people have been brought to light this year.

INDIAN CASES.—The majority of the Indian patients were notified by the Hospitals. The average Indian takes no notice of his ill-health until he is absolutely unfit for work, and when examined is usually found in the last stages of "Consumption." Even then he does not realise his condition, or if he does, puts the blame on "Allah" or "Swami," and leaves his case in his hands. In consequence it is difficult to really benefit the lower classes of Indians. I am pleased to say that some of the more enlightened Indians have made most satisfactory progress on European lines of treatment.

NATIVE CASES.—As in former years the Natives, as soon as the diagnosis of "Phthisis" is made, usually leave the Borough. Very few Natives have their homes in Durban, and, as soon as they are sick and unable to work, are anxious to get back to their kraals. Their resisting power to the disease seems to be very small, although I have occasionally examined a Native in whom I have found disease of long standing.

An increased number of visits have been made this year (7438) at the houses of patients, hospitals, etc.

The homes of the European patients are for the most part highly satisfactory, but we have been able to assist patients to sleep on their own verandahs; further, I have gained a considerable insight into the unsatisfactory and at times exceedingly bad conditions under which the large Indian and Native population live. As my Department works in the closest touch with the Medical Officer of Health and the Sanitary Department, every room occupied by a "consumptive" is inspected before use by another person, and several instances of overcrowding and insanitary conditions have brought about the destruction of rooms of unsuitable dwellings.

EUROPEAN CASES. Seventy-one cases of Pulmonary Tuberculosis among Europeans have been examined this year.

Of these 71 cases:
There were born in the Borough 5
Lived more than 20 years in the Borough 4
Lived between 5 and 20 years in the Borough 14
Lived 5 years in the Borough 7
Lived 1 year in the Borough 31

Of whom 33 had been resident in the Borough under their medical

Again of the 71 European cases:

Thirty developed the disease in the Borough 31
Imported into the Borough 40
From other parts of South Africa 27
From Great Britain and elsewhere 23

It will be noted that over two European cases develop the disease in the Borough, and it is the rather long to find "consumptive" cases as is shown in the following in Great Britain, for the European cases have not shown from a different class. The housing arrangements in the Borough is on the whole extremely satisfactory, and results different to that which obtains in the large towns of Great Britain. Further, the climatic conditions tend to the curing of a more open air life. The Tuberculous Medical Officer has been practically every patient case of "Tuberculosis" in the Borough, and the best of the patient, and I am confident to be able to state that the best cooperation exists with the Medical Officer, who promptly notifies cases and for greatly call on the Tuberculous Medical Officer in the respect of consumption.

COLORED CASES. Very few new young colored people have been brought to light this year.

INDIAN CASES. The majority of the Indian patients were notified in the Borough. The average Indian takes an average of six months to be definitely cured the work, and when examined is usually found in the last stage of "consumption." When then he does not receive the treatment, or if he does not take the place on "Albion" or "Nourish," and leaves his case in his hands. In consequence it is difficult to recall in detail the heavy claims of Indian. I am pleased to say that some of the more intelligent Indian have made most satisfactory progress on European lines of treatment.

NATIVE CASES. As in former years the Native as well as the diagnosis of "Tuberculosis" is made, usually from the Borough. Very few Natives have been found in the Borough, and as they are not able to walk, are often to get back to their homes. Their condition seems to be in some ways to be very small, although I have occasionally examined a few in whom I have found disease of long standing.

TREATMENT.

Treatment on Sanatorium lines modified to suit their home conditions is prescribed to most of the patients, and these patients report weekly or monthly, as the case may be, to be weighed and if necessary examined. In this way I keep in touch with all the cases of Pulmonary Tuberculosis who continue to reside in the Borough. A good number of the patients on my lists spend only part of the year in Durban. During the hotter months they go to the Uplands of Natal, Orange Free State, and elsewhere.

Tuberculin treatment has not been used this year. I am of opinion that it would in many cases be prejudicial for patients to remain in Durban during the hot weather for the purpose of receiving this form of treatment. With regard to the cases who can stay in the Borough for the whole year, they do not seem to require any special treatment, as they keep in good health and full work month after month, and I fail to see what more can be gained by Tuberculin injections.

In spite of the claims made by the supporters of this form of treatment, I note that in America its use is decreasing, and the opinion of some of the leading London physicians is entirely averse to its use.

Unfortunately no further steps have been taken by the Council to provide either Hospital or Sanatorium accommodation. The former has been partially met by the admission of cases into the Government or Indian Depot Hospitals. The need for the latter is in many instances badly felt. There is no place in Natal especially provided for Tuberculous patients, hence many are forced to seek accommodation in the "up-country" farms, hotels, and boarding-houses, which are not suitable for the systematic treatment of persons suffering from Pulmonary Tuberculosis, and where they are frequently a source of danger to those with whom they come in contact owing to the lack of proper supervision.

NOTIFICATIONS OF "PHTHISIS."—During the past year 249 cases have been notified as suffering from "Phthisis," of which I notified 71, the Medical Practitioners 64, and the Hospitals 114.

I have kept in touch with all the cases notified by the Medical Practitioners and the Hospitals, and the 178 cases are distributed as follows:—

Transferred to Bureau, included in Bureau figures	48
Died in Hospitals, or before notification	71
Left the Borough from Hospitals, or before notification	49
Not found (insufficient address given)	1
Still in Hospital, or under private medical attention at end of year	9
Total	178

From the statistics of the Medical Officer of Health's Department, the 249 notifications are divided as follows, as compared with two previous years:—

Year.	Europeans.		Natives.		Asiatics.		Total.	
	Borough	Imported	Borough	Imported	Borough	Imported	Boro.	Imp.
1910-11	69	44	7	16	55	52	181	112
1911-12	53	62	32	19	93	50	178	131
1912-13	31	63	19	38	54	42	107	142

It will be noted that the total number of Borough cases notified (107) is considerably lower than in previous years, and even this figure is probably higher than it should be, if it were possible to definitely fix the onset of Pul-

TREATMENT.

Treatment on Sanatorium lines modified to suit their home conditions is prescribed to most of the patients, and these patients report weekly or monthly as the case may be to be required and is necessary arranged. In this way I keep in touch with all the cases of Pulmonary Tuberculosis who continue to reside in the Home. A good number of the patients on my list spend only part of the year in the Home. During the better months they go to the Islands of Nantux, Otago, Pigeon, and elsewhere.

Tubercular treatment has not been used this year. I am of opinion that it would in many cases be prejudicial for patients to remain in Durban during the hot weather for the purpose of receiving this form of treatment. With regard to the cases who can stay in the Home for the whole year, they do not seem to require any special treatment, so long as they keep in good health and full work month after month, and I fail to see what more can be gained by Tubercular treatment.

In spite of the claims made by the supporters of this form of treatment, I note that in America its results are disappointing, and the opinion of some of the leading London physicians is entirely adverse to its use.

Unfortunately no further steps have been taken by the Council in providing either Hospital or Sanatorium accommodation. The former has been partially met by the admission of cases into the treatment or Isolation Hospital. The need for the latter is in many instances badly felt. There is no place in Natal especially provided for Tubercular patients, however many are found in work accommodation in the "up-country" farms, hotels, and boarding-houses, which are not suitable for the systematic treatment of persons suffering from Pulmonary Tuberculosis, and where they are frequently a source of danger to those with whom they come in contact owing to the lack of proper supervision.

NOTIFICATIONS OF "PHTHISIS."—During the past year 219 cases have been notified as suffering from "Phtisis," of which I notified 71, the Medical Practitioners 64, and the Dispensary 14.

I have kept in touch with all the cases notified by the Medical Practitioners and the Dispensary, and the 149 cases are distributed as follows:

Transferred to Home, included in Home figures	48
Still in Hospital, or before notification	71
Left the Hospital, or before notification	49
Not found (insufficient address given)	1
Still in Hospital, or under private medical attention at end of year	8
Total	178

From the statistics of the Medical Officer of Health's Department, the 219 notifications are divided as follows, as compared with two previous years:

Year.	Europeans		Natives		Asiatics		Total	
	Borough	Imported	Borough	Imported	Borough	Imported	Borough	Imported
190-11	69	44	7	19	55	33	121	112
1911-12	58	62	32	19	39	50	178	137
1912-13	31	63	19	39	61	42	102	142

It will be noted that the total number of Borough cases notified (137) is considerably fewer than in previous years, and even this figure is probably less than it should be, as it were possible to ascertain by the end of February that the total number of Borough cases notified (137) is

monary Tuberculosis, but Indian and Native patients in particular are very vague as to the commencement of their disease. The number of imported cases (142) is high, but it must be borne in mind that a large number of cases are sent in from all parts of Natal to the Government and Indian Depot Hospitals. Numbers of indentured Indians suffering from "Phthisis" are sent in to the Depot Hospital to await their return to India, and these cases are all notified, and not infrequently die in the Hospital, thus showing in our Borough figures.

ASSISTANCE TO PATIENTS.

Flasks and disinfectants have been supplied as in previous years.

Pamphlets printed in English, Zulu, and Indian languages have been distributed, including a new illustrated leaflet obtained from Lovedale College, Cape Province.

The Benevolent Society has assisted several patients with food and money for rent.

Medicines when especially indicated have been given to necessitous patients.

LABORATORY WORK.

294 specimens of Sputum have been examined this year, and Tubercle Bacilli found in 67 cases. The "Antiformin" method has been introduced and used in every instance when a negative result was obtained by ordinary methods. In two sputa has this method been the means of identifying the Tubercle Bacillus, when it could not be demonstrated by the usual methods.

OTHER MISCELLANEOUS WORK.

For the whole of this year I have carried out several duties, previously undertaken by the Medical Officer of Health.

I have examined and passed as fit for duty, or treated if sick:—

274 Policemen (including 7 night visits).
38 Firemen.

I have in addition attended at the Police Station on many occasions in cases of assault, accidents, or sickness of persons in the cells.

Further, I have examined 56 men who were applying for the posts of Motormen for the Tramway Department, and had to visit and report on several Tram accidents both to employees and the travelling public.

I gave a course of six Lectures to an Ambulance Class of Police and Firemen.

I have examined and written reports on all the Laboratory specimens examined this year. The number examined is by far the highest yet recorded (with the exception of years when Plague specimens were examined) owing to the amount of Diphtheria, and the regulations governing the return to school of children suffering from this disease.

I paid 53 visits to the Epidemic Hospitals, and saw in the Office or visited 72 cases of Infectious Disease other than "Phthisis."

I vaccinated on 14 days, and spent 10 days examining the children of Bulwer Park School with the Medical Officer of Health, and subsequently helped in drawing up the report.

money. Tuberculosis, but Indian and Native patients in particular are very anxious as to the treatment of their disease. The number of reported cases (112) is high, but it must be borne in mind that a large number of cases are sent in from all parts of Natal to the Government and Indian Dispensaries. Numbers of Indian patients suffering from "Tuberculosis" are sent to the Government Hospital to await their return to India, and these cases are all notified, and not infrequently die in the Hospital, thus showing in our hospital figures.

ASSISTANCE TO PATIENTS

Books and pamphlets have been supplied as in previous years. Pamphlets printed in English, Zulu, and Indian languages have been distributed, including a new illustrated leaflet obtained from Liverpool College, Cape Province. The Government Hospital has supplied several patients with food and money for rent. Medicines have especially indicated have been given to necessitous patients.

LABORATORY WORK

201 specimens of Sputum have been examined this year, and Tubercle bacilli found in 67 cases. The "Antituberculin" method has been introduced and used in every instance where a negative result was obtained by ordinary methods. In two cases the test method gave the means of identifying the Tubercle bacillus, when it could not be demonstrated by the usual methods.

OTHER MEDICAL WORK

For the whole of this year I have retained out several patients, previously undertaken by the Medical Officer of Health.

I have examined and passed or not for duty, or treated if sick.

274 Patients including 7 night visits.

25 Women.

I have in addition attended at the Police Station on many occasions in cases of sexual weakness, or sickness of persons in the cells.

Further, I have examined 86 men who were applying for the post of policeman for the Transvaal, Natal, and Cape, and had to give and report on several of them, including both in employees and the travelling public.

I gave a course of six lectures to an Ambulance class at Police and Prison.

I have examined and written reports of all the laboratory specimens examined this year. The number examined is by the report and recorded with the exception of cases where I have specimens sent to the Government Hospital, and the specimens sent to the Government Hospital for examination from this district.

I paid 50 visits to the Government Hospital, and 20 to the Police or Prison. 12 cases of Tuberculosis (other than "Tuberculosis").

I remained on 14 days, and spent 10 days examining the children of the Police Force, and the Medical Officer of Health, and subsequently helped in drawing up the report.

The Medical Officer of Health left Durban at the end of April, 1913, on six months' leave of absence, and since that time I have attended to all matters pertaining to his Department, and endeavoured to keep my Sub-Department up to full efficiency.

In conclusion, I wish again to express my satisfaction in the work of the Bureau Nurse, Sister Twamley. While my time has been occupied in the miscellaneous work above recorded, she has been of great assistance to me in looking after the work of the Bureau. She has paid 200 more visits than last year, and successfully kept in touch with the European and Coloured patients.

The Indian Health Visitor and Interpreter has paid over 500 more visits than last year, to employers of labour, barracks, etc., searching for Indian and Native cases, and kept me informed of the condition of the actual patients attending the Bureau. His intelligent knowledge of the work has proved most useful to me.

BASIL ADAMS, M.D.,

Tuberculosis Medical Officer.

The Medical Officer of Health left Boston at the end of April, 1913, on six months' leave of absence, and since that time I have attended to all matters pertaining to his Department, and endeavored to keep my Sub-Department up to full efficiency.

In conclusion, I wish again to express my satisfaction in the work of the Bureau Nurse, Sister Twiss. While my time has been occupied in the miscellaneous work above recorded, she has been of great assistance to me in looking after the work of the Bureau. She has paid 250 more visits than last year, and successfully kept in touch with the foreign and colored patients.

The Indian Health Visitor and Interpreter has paid over 500 more visits than last year, to employers of labor, farmers, etc., searching for Indian and Native cases, and kept me informed of the condition of the actual patients attending the Bureau. His intelligent knowledge of the work has proved most useful to me.

MABEL ADAMS, M.D.,

Tuberculosis Medical Officer.