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CITY COUNCIL OF PRETORIA

FORTY-NINTH

Annual Report

OF THE

Medical Officer of Health

FOR THE

YEAR 1952-1953

WALLACHS' PTA.—13184—22/2/54.

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CITY COUNCIL OF PRETORIA

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Introductory Letter.

YOUR WORSHIP THE MAYOR,

and MEMBERS OF THE CITY COUNCIL, PRETORIA.

I have the honour to present the Forty-ninth Annual Health Report of the City of Pretoria.

Once more I am glad to say that in general, good health conditions have been maintained throughout the City.

Because of our rapidly growing population it is, however, essential that we make adequate provision for all health services and housing in good time. The Council has kept this matter before it, and efforts are being made to extend both European and non-European Housing Schemes. The non-European Housing problem is a tremendous one, and requires a great deal of careful planning, not only in Pretoria, but on a nation-wide basis. To my mind, native housing is so important, that it might well play a big part in shaping the future development of South Africa.

This year has again shown a slight increase in all birth rates.

The European infantile mortality rate, which is maintaining a steady downward trend, is the second lowest ever recorded.

The infantile mortality rate for Bantus is the lowest ever recorded. As reported on previous occasions, these figures are not quite accurate, in spite of the fact that greater efforts are now being made to ensure better registration of Bantu births and deaths. In spite of the fact that better registration of births has by itself to some extent resulted in a lower and incidentally more accurate infantile mortality rate, there has genuinely been a decrease in the number of infant deaths. Like amongst Europeans, it is pleasing to note the steady decline in the infantile mortality rate amongst the Bantu.

This year, too, has shown a decrease in deaths from Tuberculosis amongst Europeans and non-Europeans.

I am, however, still of the opinion that Tuberculosis is the most important infectious disease, particularly amongst non-Europeans, with which this country has to cope. It is possible that the use of the new drugs has brought down the death rate for this year, but we cannot rely upon this as a method of combatting the disease it can only be a part of the general campaign.

We do not yet know what the real value of these new drugs will be in time to come.

We have extended our Tuberculosis clinic services throughout the native areas and also in the centre of town.

It is very difficult to assess the true incidence of the disease amongst Bantus in Pretoria, because so many cases never come to the clinic. It is quite likely that with the extension of the service and the education programme which we are carrying out, more cases will be unearthed and there might be an "apparent" rise in the incidence in the near future.

I wish to thank you Mr. Mayor, the Chairman of the Health Committee and the Councillors for the assistance and support which they gave me throughout the year. It is indeed gratifying to record that the Councillors took a great interest in the health of the City.

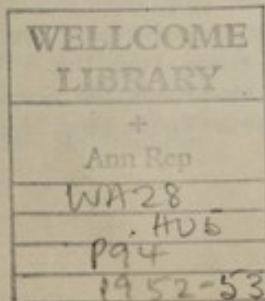
I am also thankful for the help which I received from the Public and the Heads and Sub-Heads of other Departments.

To the staff I am particularly grateful for their efficient, loyal and enthusiastic support.

Once again too, I want to express special thanks to the Press for their very ready help.

H. NELSON,

Medical Officer of Health.



PUBLIC HEALTH COMMITTEE

Councillor L. J. van den Berg (Chairman)
 Councillor D. B. J. van Rensburg (Vice-Chairman)
 Councillor Mrs. M. M. Curson, M.P.C.
 Councillor W. J. Seymore
 Councillor P. J. van der Walt
 Councillor B. M. van Tonder
 Councillor Mrs. C. P. Visse

STAFF OF THE PUBLIC HEALTH DEPARTMENT AS AT 30th JUNE, 1953

H. NELSON, M.A., M.D., Ch.B., B.A.O., D.P.H., D.T.M., F.R.S.I.	Medical Officer of Health
T. LÖTTER, M.B., Ch.B., L.R.C.P. & S., L.R.F.P.S., D.P.H.	Deput Medical Officer of Health
A. PIJPER, M.D., D.Sc.	Consulting Pathologist
J. BARNETSON, M.D., Ch.B., D.T.M. & H. . .	Pathologist (Part Time)
R. E. W. DICKS, M.B., Ch.B., D.P.H. . . .	Superintendent Infectious Diseases Hospital and Medical Officer in charge Venereal Diseases
A. T. B. H. BODENSTAB, M.B., Ch.B., D.P.H., D.T.M. & H.	Assistant Medical Officer of Health
M. VERA BUHRMANN, M.B., Ch.B., D.P.H.	Medical Officer (Child and Maternal Health)
R. BUCHAN, M.B., Ch.B., D.P.H.	Assistant Medical Officer
D. B. LEWIS, B.A., M.B., Ch.B.	Assistant Medical Officer
A. STRATING, M.B., Ch.B., M.Com. (Bestuur en Administrasie)	Assistant Medical Officer
A. A. E. DE KLERK, M.B., Ch.B.	Assistant Medical Officer (Child and Maternal Health)
I. P. MARAIS, B.Sc., Agric., B.V. Sc. . . .	Dr. Med. Vet. (Manager Abattoir)
W. J. WHEELER, B.V. Sc.	Veterinary Officer
W. G. FUNSTON, Cert. R.S.I., Cert. Meat and Other Foods, Trop. Hyg.	Chief Health Inspector.
A. VELTHUYSEN, Cert. R.S.I.	Assistant Chief Health Inspector
J. S. R. MARAIS, Cert. R.S.I., Meat and Other Foods, Trop. Hyg.	Assistant Chief Health Inspector
J. L. COETZEE, Cert. Meat and Other Foods	Assistant Chief Health Inspector (Abattoir)
H. M. DE VAAL, B.Sc. (Appl. and Industr.) Chem.), M.S.A., Chem.I., M.Inst. S.P. . .	Chief Chemist and Analyst
W. A. LOMBARD, M.Sc., M.S.A., Chem.I.	Chemist, Grade II
R. SNYDERS, B.Sc.	Chemist, Grade II
P. J. VAN ROOY, M.Sc.	Chemist, Grade II

SUPERVISING HEALTH INSPECTORS

K. C. J. LUCOUW, Cert. R.S.I.
 N. VORSTER, Cert. R.S.I., Meat and Other Foods, Trop. Hyg.
 W. SCOTT, Cert. R.S.I., Meat and Other Foods (Abattoir)
 R. G. SIEBERT, Cert. R.S.I., Meat and Other Foods, Trop. Hyg.

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 F. J. H. STOCKWELL, Cert. R.S.I., Meat and Other Foods, Trop. Hyg.
 O. A. BERGMAN, Cert. R.S.I., Meat and Other Foods, Trop. Hyg.
 P. R. Q. WILBRAHAM, Cert. R.S.I., Meat and Other Foods, San. Science, Trop. Hyg.
 M. J. C. RAUTENBACH, Cert. R.S.I., Meat and Other Foods, Trop. Hyg.

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R. M. DU TOIT, Cert. R.S.I., Meat and Other Foods
 T. B. NOTHNAGEL, Cert. R.S.I., Meat and Other Foods, Adv. Knowledge, Trop. Hyg.
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 J. C. THERON, Cert. R.S.I., Meat and Other Foods (Abattoir)
 P. T. FURSTENBURG, Cert. R.S.I., Meat and Other Foods, Adv. Knowledge, Trop. Hyg.
 A. DE LA H. SERFONTEIN, Cert. R.S.I., Meat and Other Foods
 T. J. VAN DER HEEVER, Cert. R.S.I., Trop. Hyg., Meat and Other Foods
 J. T. GORDON, Cert. R.S.I., Meat and Other Foods, Trop. Hyg.
 G. M. DU TOIT, Cert. R.S.I., Meat and Other Foods, Trop. Hyg.
 D. S. VAN COLLER, Cert. R.S.I., Meat and Other Foods
 D. S. KOCKS, Cert. R.S.I., Meat and Other Foods, Trop. Hyg.
 C. M. TALJAARD, B.Sc., Hygiene R.S.I., Meat and Other Foods
 P.L.R. VAN HEERDEN, Cert. R.S.I., Meat and Other Foods
 J. J. PIENAAR, Cert. R.S.I., Meat and Other Foods, B.A.
 A. J. COETZEE, Cert. R.S.I., Meat and Other Foods
 J. H. LEACH, Cert. R.S.I., Meat and Other Foods, Trop. Hyg.
 J. KRUGER, Cert. R.S.I., Meat and Other Foods, Trop. Hyg.
 W. N. ODENDAAL, Cert. R.S.I. Meat and Other Foods
 E. C. KUNITZ, Cert. R.S.I., Meat and Other Foods, Trop. Hyg.
 A. C. ENGELBRECHT, Cert. R.S.I., Trop. Hyg.
 D. J. R. HATTINGH, Cert. R.S.I., Trop. Hyg.
 F. K. VERDOORN, Cert. R.S.I.
 H. MELLET, Cert. R.S.I., Meat and Other Foods
 G. VAN LOGGERENBERG, Cert. R.S.I.
 C. J. SMITH, Cert. R.S.I.
 S. J. GOUWS, Cert. R.S.I.

CLERICAL STAFF

Administrative Officer ;

R. BLOEMINK, Cert. R.S.I., Meat and Other Foods, Trop. Hyg., Adv. Knowledge

Chief Clerk;

R. O. R. CARRUTHERS, Cert. R.S.I., Meat and Other Foods, Trop. Hyg.

Senior Clerk;

G. W. CLUBB, Cert. R.S.I., Meat and Other Foods

Second Grade Clerk;

M. ROSSOUW

Junior Clerks;

F. J. DU TOIT, J. C. MYBURGH, F. SCHULTZ

Records Clerks;

M. M. ADENDORFF (Miss), M. B. BURGER (Miss), B.A., U.E.D.

Typists;

D. R. WELTHAGEN, M. E. J. THOMSON, S. A. FLEMING, G. H. VLIELAND, V. U.
 NORVAL, M. J. TOERIEN

HOUSING AND SLUM ELIMINATION

Administrative Officer;

E. J. JAMMINE, Cert. R.S.I., Meat and Other Foods, Adv. Knowledge, Trop. Hyg.

Temporary Housing Manageress : K. S. MARTIN, Diploma Social Administration ;
 Florence Nightingale Foundation Council Diploma for Public Health, Cert. Gen.
 Nursing & Midwif., Certificate for Tropical Diseases, Certificate Mental Hygiene

Assistant Woman Housing Manager: G. F. PIENAAR, Lower Secondary Teachers' Cert.,
 Univ. of Cape Town. R.S.I., Certificate of Competency for Housing Managers
 (Octavia Hill Training)

Assistant Housing Manager : W. A. YATES, B.A. (S.S.), Certificate of Competency for Housing Managers (Octavia Hill Training)

Clerk : R. WEBB (Mrs.)

Acting Assistant Housing Manager : L. MALHERBE (Miss), Dipl. in Social Science.

Typist : J. S. S. VAN DER BERG (Mrs.)

Handyman : S. F. HOLDER

Assistant Caretaker-Fumigator : C. J. ELLIS

LABORATORY ASSISTANT

P. A. BARNARD

DISINFECTING OFFICER

V. J. BESTER

RODENT AND MOSQUITO ERADICATORS

J. P. SCHOLTZ, A. J. VLOK, B. HATTINGH, J. B. VAN WEZEL, L. J. DE LANGE

HEALTH VISITORS

G. S. J. PRETORIUS (Senior), Cert. S.A. Medical Council (Gen. & Midwif.), Cert. R.S.I. Health Visitor and School Nurse, Mothercraft.

E.W. MURRAY, Cert. S.A. Medical Council (Gen. & Midwif.), Cert. R.S.I. Health Inspector, Cert. R.S.I. Health Visitor and School Nurse, Mothercraft.

A. S. SCHULTZ, Cert. S.A. Medical Council (Gen. & Midwif.), Cert. R.S.I. Health Visitor and School Nurse.

D. H. BRONKHORST, Cert. S.A. Medical Council (Gen. & Midwif.), Cert. R.S.I. Health Visitor and School Nurse, Mothercraft.

A. C. M. VAN DER WESTHUIZEN, Cert. S.A. Medical Council (Gen. & Midwif.), Cert. R.S.I. Health Visitor and School Nurse, Mothercraft.

I. L. KOCKOTT, Cert. S.A. Medical Council (Gen. & Midwif.), Cert. R.S.I. Health Visitor and School Nurse, Mothercraft.

J. WINKEL, Health Visitors Certificate (Holland), Social Worker Diploma (Holland), Nursing Diploma (Holland).

S. M. STOLTZ, Cert. S.A. Medical Council (Gen. & Midwif.), Cert. R.S.I. Health Visitor and School Nurse, Mothercraft.

H. M. E. VAN DER MERWE, Midwifery Cert., Mothercraft Cert.

H. C. FICK, Cert. S.A. Medical Council (Gen. & Midwif.), Florence Nightingale Foundation Council Diploma for Public Health, Social Services and Hospital and Training School Administration, Mothercraft.

W. J. VOLSCHEK, Cert. S.A. Medical Council (Gen.), Cert. R.S.I. Health Visitor and School Nurse.

C. E. VAN NIEKERK, Cert. S.A. Medical Council (Gen. & Midwif.), Cert. R.S.I. Health Visitor and School Nurse, Mothercraft.

J. B. KUNITZ, Cert. S.A. Medical Council (Gen. & Midwif.), Cert. R.S.I. Health Visitor and School Nurse, Mothercraft.

V. J. LOYNES, Cert. S.A. Medical Council (Gen. & Midwif.), Cert. R.S.I. Health Visitor and School Nurse, Mothercraft.

S. J. DE VILLIERS, Cert. S.A. Medical Council (Gen. & Midwif.), Mothercraft.

Z. VERMAAK, Cert. S.A. Medical Council (Gen. & Midwif.), Health Visitor and School Nurses' Cert.

P. M. McGEER, S.A. Medical Council (Gen. & Midwif.), Cert. R.S.I. Health Visitor and School Nurse, Mothercraft.

M. S. MINNAAR, S.A. Medical Council (Gen. & Midwif.), Cert. R.S.I. Health Visitor and School Nurse, Mothercraft.

NON-EUROPEAN NURSES

SALMINA HUMA, Cert. S.A. Medical Council (Gen. & Midwif.).
 ANNA NTJA, Cert. Midwife.
 GRACE PHOOKA, Cert. Midwife.
 GLADYS BIKITSHA, Cert. S.A. Medical Council (Gen. & Midwif.).
 GLORIA MOGALE, Cert. Midwife.
 DEBORAH RAMSKIN, Cert. Midwife.
 EUPHEN NDUNA, Cert. S.A. Medical Council.
 GRACE MSIMANG, Cert. Midwife.
 SUSAN MOFOLO, Cert. S.A. Medical Council (Gen. & Midwif.).
 HELEN MAMETSE, Cert. S.A. Medical Council (Gen. & Midwif.).
 KATHERINE MOUNT, Cert. S.A. Medical Council (Gen. & Midwif.).
 FLORENCE KHOZA, Cert. S.A. Medical Council (Gen. & Midwif.).
 FLORINAH MANAMELA, Cert. Midwife.
 MARY MAGODIELO, Cert. Midwife.
 VIOLET MOFALE, Cert. S.A. Medical Council (Gen. & Midwif.).

CLINIC ASSISTANT

C. J. DREYER

NON-EUROPEAN CLINIC ORDELIES

JACOB MOHOHLO	WALTER MATABOGE
JOSEPH MONTIEDI	HENRY SETHKEGE
DANIEL MARABA	IZAK MONGOATO

PUBLIC CONVENIENCE ATTENDANTS

TEN EUROPEANS	FOUR NON-EUROPEANS
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POUNDMASTERS

L. J. BOTHA	C. W. SHORT
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CARETAKER

J. HINDLEY

CITY COUNCIL OF PRETORIA.

FORTY-NINTH ANNUAL REPORT

of the

Medical Officer of Health.

CLIMATIC DATA

Latitude; 25 degrees, 44 minutes, 3 seconds South.

Longitude; 1 hour, 52 minutes, 48 seconds East.

Mean Altitude; 4,480 feet.

Temperature; (Statistics kindly supplied by the Director, Weather Bureau, Pretoria.)

Air Temperatures (°C.)											
Highest Lowest											
Mean Mean Reading Reading Mean Relative											
Max. Min. of Max. of Min. Humidity at											
8 a.m. 2 p.m.											
°C. °C. °C. °C. % %											
Rain fall											
M'ths Da											
1952;											
July	18.5	4.8	23.4	—3.3	78	38	20.3	5			
August	22.3	5.8	27.4	0.1	59	24	0.8	2			
September	24.3	8.1	29.7	2.2	49	22	1.1	3			
October	27.2	12.8	32.1	4.3	56	31	59.3	8			
November	26.4	14.2	33.2	10.2	71	46	143.7	15			
December	26.0	14.9	30.8	12.5	71	52	123.2	19			
1953;											
January	28.8	16.0	33.3	13.2	70	44	144.4	13			
February	26.2	16.1	30.1	11.4	77	58	129.0	13			
March	24.3	12.7	27.9	9.3	81	52	125.4	15			
April	22.7	10.4	25.2	5.7	81	48	57.1	8			
May	21.4	5.5	24.7	0.1	81	32	12.9	2			
June	18.6	1.0	20.7	—2.5	73	25	0.0	0			

AREA OF MUNICIPALITY

The area of Pretoria and suburbs, inclusive of Town Lands, is 70.73 square miles. The Town is built on and between three parallel ranges of quartzite hills running East and West, the soil in the valleys being largely shale.

ANNUAL RATEABLE VALUES — 1952/1953

Land (Lady Selborne and Claremont to erf 36 excluded) ..	£22,948,322
Buildings (Lady Selborne and Claremont to erf 36 excluded)	51,716,705
Land (Lady Selborne)	331,135
Buildings (Lady Selborne)	1,019,150
Land (Claremont)	54,305
Buildings (Claremont)	212,605
	<u>£76,282,222</u>

The values of unrateable properties :—

Land (Lady Selborne and Claremont to erf 36 excluded) ..	£7,172,244
Buildings (Lady Selborne and Claremont to erf 36 excluded)	11,236,006
Land (Lady Selborne)	4,195
Buildings (Lady Selborne)	42,605
Land (Claremont)	3,750
Buildings (Claremont)	64,940
	<u>£18,550,740</u>

The total values therefore were :—

Land (Lady Selborne and Claremont to erf 36 excluded) ..	£30,120,566
Buildings (Lady Selborne and Claremont to erf 36 excluded)	62,979,712
Land (Lady Selborne)	335,330
Buildings (Lady Selborne)	1,061,755
Land (Claremont)	58,055
Buildings (Claremont)	277,545
	<u>£94,832,962</u>

For the year under review the rates imposed were 7d. per £ on land and 1½d. per £ on buildings.

POPULATION

European	136,100
Native	91,300
Asiatic	5,800
Eurafrican	5,300

The population figures are an estimate as at 30th June, 1953, and have kindly been supplied by the Department of Census and Statistics, to whom we are grateful for statistical information so willingly given whenever it is sought.

The Principal Vital Statistics for the year under review corrected for outward transfers are :—

	European	Native	Asiatic	Eur- African	Total Non- European	All Races
Population	136,100	91,300	5,800	5,300	102,400	238,500
Birth Rates	27·16	31·43	41·03	38·49	32·34	29·38
Death Rates	6·18	10·00	6·38	15·09	10·06	7·84
Infantile Mortality per 1,000 live births	28·14	113·94	42·02	112·75	108·70	66·21
Percentage of illegitimate to live births	0·87	35·57	0·84	18·14	32·00	15·58
Death Rate from Tuber- culosis (Pulmonary) per 1,000 population	0·08	0·46	—	0·94	0·46	0·24
Death Rate from Tuber- culosis, all forms, per 1,000 population	0·09	0·60	0·17	0·94	0·60	0·31

BIRTHS

The following births were registered in Pretoria during the year (figures for 1951-1952 in brackets) :—

	European	Native	Asiatic	Eur- African	Total Non- European	All Races
Local Births	3,696 (3,338)	2,870 (2,740)	238 (228)	204 (176)	3,312 (3,144)	7,008 (6,482)
Births where mothers not residents of Pretoria ..	1,110 (909)	—	—	—	842 (772)	1,952 (1,681)
Illegitimate births (included in local births)	32 (60)	1,021 (987)	2 (2)	37 (59)	1,060 (1,048)	1,092 (1,108)
Stillbirths	41 (44)	—	—	—	153 (125)	194 (169)

BIRTH RATES

European	27·16 (25·00)
Native	31·43 (30·34)
Asiatic	41·04 (40·00)
Eurafrican	38·49 (34·51)
All non-European	32·34 (31·10)
All Races	29·38 (27·63)

Rates of natural increase, being the excess of births over deaths in proportion to population, are as follows :—

European	.. .. .	20·98 (18·55)
Asiatic	.. .. .	34·66 (28·42)
Eurafrican	.. .. .	23·40 (21·96)

This year has again shown a slight increase in all birth rates.

DEATHS

(Figures for 1951-1952 in brackets)

	European	Native	Asiatic	Eur-African	Total Non-European	All Races
Local deaths (all ages)	841 (862)	913 (1,193)	37 (66)	80 (64)	1,030 (1,323)	1,871 (2,185)
Deaths of persons not being local residents	339 (374)	—	—	—	557 (709)	896 (1,083)

The "non-local" deaths occurred at :—

	Pretoria and Other Hospitals	Mental Hospital	Leper Institution	Prison	Visitors
European	273 (305)	44 (45)	1 (4)	1 (3)	20 (17)
Non-European	463 (584)	33 (36)	14 (28)	33 (39)	14 (22)

DEATH RATES

European	.. .. .	6·18 (6·46)
Native	.. .. .	10·00 (13·21)
Asiatic	.. .. .	6·38 (11·58)
Eurafrican	.. .. .	15·09 (12·55)
All non-European	.. .. .	10·06 (13·09)
Total All Races	.. .. .	7·84 (9·31)

INFANTILE MORTALITY

(Figures for 1951-1952 in brackets)

	European	Native	Asiatic	Eur-African	Total Non-European	All Races
Local Deaths	104 (101)	327 (375)	10 (32)	23 (14)	360 (421)	464 (522)
Deaths of infants whose mothers had come to the City for confinement, or infants who were brought in suffering from the illness which caused death	41 (47)	—	—	—	121 (150)	162 (197)
	145 (148)	—	—	—	481 (571)	626 (719)

INFANTILE MORTALITY RATES

European	.. .. .	28·14 (30·26)
Native	.. .. .	113·94 (136·86)
Asiatic	.. .. .	42·02 (140·39)
Eurafrican	.. .. .	112·75 (79·55)
All non-European	.. .. .	108·70 (133·91)
All Races	.. .. .	66·21 (80·53)

The European infantile mortality rate, which is maintaining a steady downward trend, is the second lowest ever recorded. The infantile mortality rate for Bantus is the lowest ever recorded. As reported on previous occasions, these figures are not quite accurate, in spite of the fact that greater efforts are now being made to ensure better registration of Bantu births and deaths. In spite of the fact that better registration of births has by itself to some extent resulted in a lower and incidentally more accurate infantile mortality rate, there has genuinely been a decrease in the number of infant deaths. Like amongst Europeans, it is pleasing to note the steady decline in the infantile mortality rate amongst the Bantu.

TABLE OF INFANTILE MORTALITY RATE FOR ALL RACES SINCE 1926-1927

Year	European	Native	Asiatic	Eur-African	All Non-European	Total for All Races
1926-27	48.48	385.51	101.26	246.37	315.31	137.49
1927-28	61.30	483.51	166.67	163.26	256.04	153.79
1928-29	57.85	451.12	140.19	168.83	328.88	143.86
1929-30	51.77	422.48	88.80	141.17	297.92	126.94
1930-31	68.33	573.68	142.86	222.23	362.07	148.42
1931-32	59.41	794.87	112.00	179.48	459.80	153.48
1932-33	68.44	742.42	158.54	123.08	429.27	157.99
1933-34	68.13	621.40	121.74	244.68	415.93	152.60
1934-35	51.26	347.00	62.50	122.64	222.00	95.91
1935-36	77.67	585.94	152.67	140.19	374.49	149.53
1936-37	52.66	450.24	107.38	112.36	269.49	99.42
1937-38	63.57	457.14	105.26	209.88	303.35	116.21
1938-39	50.95	348.53	86.85	118.18	230.24	93.94
1939-40	43.84	349.67	136.90	146.34	255.39	88.92
1940-41	62.60	376.34	93.48	121.95	245.32	96.84
1941-42	53.30	353.84	86.42	264.70	253.06	96.10
1942-43	47.34	329.48	81.97	101.12	223.30	80.07
1943-44	47.94	304.99	70.71	204.08	216.64	77.80
1944-45	33.98	289.69	86.49	105.26	206.45	63.50
1945-46	34.02	215.24	25.77	115.39	159.35	61.17
1946-47	25.90	235.16	54.73	116.29	178.27	53.78
1947-48	33.16	138.78	61.80	224.14	127.30	52.78
1948-49	33.65	203.06	82.47	200.00	170.77	60.97
1949-50	32.34	181.97	75.47	85.23	165.83	92.97
1950-51	28.98	151.51	43.48	58.82	136.93	77.94
1951-52	30.26	136.86	140.39	79.55	133.91	80.53
1952-53	28.14	113.94	42.02	112.75	108.70	66.21

The causes of infantile deaths in Europeans were as follows :—

	1952-1953	1951-1952
Congenital causes	12 (Rate 3.25)	11 (Rate 3.29)
Diarrhoeal diseases	13 (Rate 3.52)	11 (Rate 3.29)
Bronchitis and pneumonia	14 (Rate 3.80)	9 (Rate 2.70)
Infectious diseases	1 (Rate 0.27)	1 (Rate 0.30)
Other causes	17 (Rate 4.60)	19 (Rate 5.69)
Prematurity	40 (Rate 10.84)	42 (Rate 12.58)
Injury at birth	7 (Rate 1.89)	8 (Rate 2.40)
Total European Infant Deaths	<u>104</u>	<u>101</u>

The causes of infantile deaths in non-Europeans were as follows :—

	1952-1953	1951-1952
Congenital causes	20	36
Diarrhoeal diseases	101	126
Bronchitis and pneumonia	96	129
Infectious diseases	12	9
Other causes	30	18
Prematurity	78	84
Injury at birth	13	12
Malnutrition	10	7
Total non-European Infant Deaths	<u>360</u>	<u>421</u>

The table given hereunder indicates the number of non-European births and infant deaths during the year under review in the various non-European residential areas :—

Native:

Marabas Location		Bantule Location		Atteridgeville Location		Hercules Area		Town	
Births	Deaths	Births	Deaths	Births	Deaths	Births	Deaths	Births	Deaths
47	5	188	25	348	27	1,970	233	317	37

Asiatic:

Asiatic Births	Location Deaths	Hercules Births	Area Deaths	Town Births	Deaths
130	6	49	3	59	1

Eurafrican:

Cape Location		Hercules Area		Town	
Births	Deaths	Births	Deaths	Births	Deaths
78	12	121	10	5	1

CAUSES OF DEATH AT AGE 1 AND UNDER 5 YEARS FOR VARIOUS RACES

Europeans:

Twenty-three deaths were recorded under this age group :—

Diphtheria	3
Tuberculosis (Central Nervous System)	1
Cancer	1
Leukaemia	2
Encephalitis (non-Epidemic)	1
Cerebral Embolism	1
Disease of the circulatory system	1
Accidental poisoning	1
Accidental burns	3
Accidental mechanical suffocation	2
Accidental drowning	4
Accidental crushing	1
Anaesthetic accident	1
Unknown or unspecified cause	1
	<hr/> 23

Natives:

Two hundred and fourteen deaths were recorded under this age group —

Whooping Cough	2
Diphtheria	5
Tuberculosis (Pulmonary)	4
Tuberculosis (Central Nervous System)	5
Tuberculosis (Lymphatic System)	1
Tuberculosis (Genito—Urinary System)	1
Tuberculosis (Other Organs)	1
Tuberculosis (Acute Miliary)	1
Septicaemia	1
Measles	2
Cancer	1
Malnutrition	25
Pellagra	3
Encephalitis (non-Epidemic)	2
Acute Bronchitis	2
Broncho Pneumonia	54
Lobar Pneumonia	3
Pneumonia unspecified	2
Diarrhoea and Enteritis	89
Nephritis	1
Accidental Burns	6
Unknown or unspecified cause	3
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Asiatics:

Three deaths were recorded in this age group :—

Pneumonia Unspecified	1
Cerebro Spinal Meningitis	1
Tuberculosis (Acute Miliary)	1
	<hr/> 3

Eurafricans:

Ten deaths were recorded in this age group :—

Pellagra	1
Malnutrition	1
Diarrhoea and Enteritis	6
Broncho Pneumonia	2
	<hr/> 10

PRINCIPAL CAUSES OF DEATH IN PERSONS FIVE YEAR AND OVER

The principal causes of death were :—

	Europeans		Non-Europeans	
	1952-1953	Yearly Average for 5 years	1952-1953	Yearly Average for 5 years
Cancer	129	112.6	26	22.6
Heart Disease	177	162.0	53	43.8
Bronchitis and Pneumonia (all forms)	65	52.8	101	96.2
Influenza	1	1.2	—	1.6
Typhoid Fever	1	0.2	4	3.6
Tuberculosis (Pulmonary)	10	12.2	41	78.6
Diabetes	11	8.2	3	2.6
Apoplexy	63	61.2	21	15.8
Disease of Kidneys	21	27.2	9	18.2
Disease of Arteries	29	19.6	18	13.0
Disease of Liver and Gallbladder	15	13.2	7	5.8
Diseases of Pregnancy and the Puerpal state	2	0.6	2	3.0
Old Age	9	15.4	5	10.0
Suicide	10	10.8	5	5.0
Accidents	36	32.8	36	43.2
Other Infectious Diseases	3	8.6	14	26.8
Other Causes	132	117.6	98	98.6

This year too has shown a decrease in death from Tuberculosis amongst Europeans and non-Europeans. It is possible that the use of the new drugs has brought down the death rate for this year but a reliance cannot be placed on this method of combatting the disease, it can only be a part of the general campaign. The real value of the new drugs will only be known in time to come.

It is difficult to assess the true incidence of the disease amongst Bantus in Pretoria because so many cases never come to the clinic. It is quite likely that with the extension of the service and the education programme which we are carrying out, more cases will be unearthed and there might be an "apparent" rise in the incidence in the near future.

DETAILS OF CAUSES OF DEATH — FIVE YEARS AND OVER

(In all the following tables the figures for 1951-1952 are shown in brackets)

1. CANCER:

Europeans: 129. Death rate 0.95 per 1,000 population.

Site of disease :—

Buccal cavity and pharynx	6	(4)
Digestive organs and Peritoneum	51	(49)
Respiratory Tract	16	(13)
Uterus	9	(11)
Other female genital organs	3	(—)
Breast	12	(10)
Male genital organs	5	(11)
Male and Female urinary organs	1	(7)
Brain and other parts of the nervous system	3	(5)
Skin	5	(1)
Bones	1	(3)
Other and unspecified organs	17	(12)
TOTAL	129	(126)

Death Age:

Under :—

40 Years	40-50	50-60	60-70	70-80	Over 80	Total
4 (10)	14 (15)	29 (20)	42 (32)	27 (34)	13 (15)	129 (126)

Non-Europeans:

Site of disease :—

Natives:

Buccal cavity and pharynx	1	(—)
Digestive organs and Peritoneum	10	(14)
Respiratory tract	2	(2)
Uterus	2	(6)
Breast	1	(2)
Other female genital organs	—	(—)
Male and female urinary organs	3	(2)
Brains and other parts of the nervous system ..	1	(1)
Skin	1	(—)
Bones	—	(—)
Other and unspecified organs	1	(—)

Asiatics:

Buccal cavity and pharynx	—	(1)
Digestive organs and Peritoneum	1	(3)

Eurafricans:

Digestive organs and Peritoneum	1	(1)
Breast	1	(—)
Respiratory tract	1	(—)
Male genital organs	—	(1)
Other and unspecified organs	—	(1)
TOTAL	26	(34)

2. DISEASES OF THE HEART: Death rate per 1,000 European population : 1·30 (1·54).

Europeans 177 (205).

Non-Europeans 53 (55). Natives 41. Asiatics 4. Eurafricans 8.

3. BRONCHITIS AND PNEUMONIA:

Europeans 65 (61).

Non-Europeans 101 (123). Natives 94. Asiatics 2. Eurafricans 5.

4. INFLUENZA:

Europeans 1 (3).

Non-Europeans — (2).

5. TYPHOID FEVER:

Europeans 1 (—).

Non-Europeans 4 (3). Natives 3. Eurafrican 1.

6. TUBERCULOSIS (PULMONARY):

Europeans 10 (13).

Non-Europeans 41 (111). Natives 36. Eurafricans 5.

7. DIABETES:

Europeans 11 (9).

Non-Europeans 3 (4). Natives 1. Eurafricans 2.

8. APOPLEXY:

Europeans 63 (64).

Non-Europeans 21 (19). Natives 16. Asiatics 4. Eurafrican 1.

9. DISEASES OF THE KIDNEYS:

Europeans 21 (23).

Non-Europeans 9 (19). Natives 7. Asiatic 1. Eurafrican 1.

10. DISEASES OF ARTERIES:

Europeans 29 (15).

Non-Europeans 18 (8). Natives 8. Asiatic 1. Eurafricans 9.

11. DISEASES OF THE LIVER AND GALL BLADDER:

Europeans 15 (16).
Non-Europeans 7 (7). Natives 7.

12. DISEASES OF PREGNANCY AND THE PUERPERAL STATE:

Europeans 2 (1).
Non-Europeans 2 (6). Native 1. Asiatic 1.

13. OLD AGE:

Europeans 9 (5).
Non-Europeans 5 (12). Natives 5.

14. SUICIDE:

Europeans 10 (10).
Non-Europeans 5 (9). Natives 5.

15. HOMICIDE:

	Europeans	Natives	Asiatics	Eurafricans
By Firearms	—	2	—	—
„ Cutting or piercing instruments	1	7	—	1
„ Other unspecified means ..	1	4	—	1

16. ACCIDENTS:

Europeans 37.
Non-Europeans 36.

	Europeans		Natives		Asiatics		Eurafricans	
	1952-53	1951-52	1952-53	1951-52	1952-53	1951-52	1952-53	1951-52
On Railways	1 (1)	2 (3)	—	—	—	—	—	—
By Motor, road vehicles (excluding motor cycles)	17 (14)	19 (24)	2 (—)	—	1 (1)	—	—	—
„ Motor cycles	2 (1)	—	—	—	—	—	—	—
„ Pedal cycles	2 (—)	2 (—)	—	—	—	—	—	—
„ Road transport (not motor)	—	—	—	—	—	—	—	—
„ Burns (not conflagration)	2 (1)	2 (4)	—	—	—	—	—	—
„ Electric current	—	—	—	—	—	—	—	—
„ Mechanical suffocation	1 (1)	—	—	—	—	—	1 (—)	—
„ Drowning	—	—	—	—	—	—	—	—
„ Firearms	—	—	—	—	—	—	—	—
„ Injury by cutting or piercing instruments ..	—	—	—	—	—	—	—	—
„ Fall	8 (4)	1 (2)	—	—	—	—	—	—
„ Crushing	1 (3)	2 (1)	—	—	—	—	—	—
„ Anaesthetic	1 (1)	—	—	—	—	—	—	—
„ Poisonous gases	—	—	3 (5)	—	—	—	—	—
„ Poisoning (not by gas)	1 (2)	1 (1)	—	—	—	—	—	—
„ Other and unspecified accidents	1 (1)	—	—	—	—	—	—	—
TOTAL	37 (34)	32 (51)	2 (—)	—	2 (—)	—	2 (3)	—

DETAILS OF INFECTIOUS DISEASES NOTIFIED DURING THE YEAR

In writing up this section of the report the figures for Pretoria and the recently incorporated area of Hercules are given separately. This is done deliberately because Hercules includes Lady Selborne Native Location and other districts where sanitary and other health conditions are on the average much lower than those of the rest of Pretoria.

Note.—All figures for 1951-52 are shown in brackets. For tables showing district distribution, age incidence and seasonal distribution, see pages at end of report.

This report should be read in conjunction with the section dealing with the Isolation Hospital.

PRETORIA — EXCLUDING HERCULES

Typhoid Fever:

	Europeans	Non-Europeans	Total
Local cases	5 (16)	9 (10)	14 (26)
Imported cases	47 (20)	195 (159)	242 (179)
Deaths in local cases	— (0)	1 (2)	1 (2)

Local Cases:

There was again a decrease in the incidence of local cases particularly amongst the Europeans. This year's figure is the lowest ever recorded in Pretoria (excluding Hercules). The previous lowest was in 1947 when 19 cases (11 Europeans and 8 non-Europeans) were notified.

The non-European cases were 6 Bantus, 2 Eurafricans and 1 Asiatic. One of the Bantus died.

Twelve of the cases were treated in Hospital and 2 (1 European and 1 Eurafrican) were treated at home.

There were no milk-borne outbreaks.

In tracing the sources of infection, 18 suspects were tested for the possible carrier state, all with negative result.

Two of the Bantu cases were from a private compound. The Phage type of the organisms in these two Bantus was untypable and this may point to a common source of infection, the origin of which could not be traced.

The two Eurafricans were from the same premises, one being a secondary infection.

Result of Phage Typing during the Year:

Type A	0
Type E1	2
Untyped strains	2
No culture obtained	9
Typing not done	1
	<hr/> 14

Tests Carried Out for the Typhoid Fever Carrier State:

	No. of Persons Vi-tested	Blood found Vi-positive	Stool and Urine found Positive
Typhoid fever investigations ..	18	—	—
Prospective employees at dairies	485	38 (8%)	—
Other food handlers.. .. .	44	2	—

For Dairy Typhoid Testing, see under Section dealing with control of dairies and milk supplies.

Typhoid Carrier Camp:

Number of inmates on 1/7/1952	3
Number admitted during year	18
	<hr/> 21
Number discharged during year	18
	<hr/> 3
Still in camp on 30/6/1953	3

Imported Cases:

Of the imported cases 15 (5 Europeans and 10 Bantus) were Pretoria residents who contracted the disease outside the Municipal area. One Bantu was reported from a Government Institution and two Bantus were from Valkfontein Municipal Location which lies outside the Municipal boundaries. The balance, 42 Europeans and 182 non-Europeans, were cases admitted to hospital from outside the Municipal area.

TUBERCULOSIS:

	Europeans	Non-Europeans	Total
Local cases	35 (32)	79 (118)	114 (150)
Imported cases	16 (20)	113 (124)	129 (144)

Of the 79 non-European local cases, 74 were Bantus, 4 Eurafricans and 1 an Asiatic.

Local Cases:

The various forms in which the disease occurred :—

	Pulmonary	Meningitic	Miliary	General	Glandular	Primary Complex	Total
Europeans ..	31	1	1	—	—	2	35
Non-Europeans	63	3	1	2	2	8	79
	<hr/> 94	<hr/> 4	<hr/> 2	<hr/> 2	<hr/> 2	<hr/> 10	<hr/> 114

The distribution of the non-European cases was as follows :—

Atteridgeville Location	28	Marabastad	2
Bantule Location	18	Asiatic Bazaar	1
Cape Location	8	Various Compounds	6
Military Location, Voortrekker- hoogte	4	Others	12

Of the 114 cases, 33 died during the year. Twenty-seven (9 Europeans, 1 Asiatic and 17 Bantus) died in Pretoria and 6 Bantus had left Pretoria and died elsewhere.

Eight Europeans and 9 non-Europeans were notified only at death. One European and 14 non-Europeans died within three months and 1 non-European within six months of notification. Five Europeans and 19 non-Europeans gave histories of tuberculosis in their families. Three non-Europeans gave histories of being contacts of known cases.

How Notified:

Twenty-six notifications were received from the Pretoria General Hospital and the Isolation Wards, 13 were from the weekly returns of the Registrar of Births and Deaths, 10 were notified by private practitioners, 62 by the Municipal Tuberculosis clinics and other municipal clinics and three from other sources.

Sanatorium Treatment:

During the year 29 cases (4 Europeans and 25 non-Europeans) were admitted to Sanatoria. (Three Europeans and 8 non-Europeans were from Pretoria, 1 European and 15 non-Europeans from Hercules and 1 non-European from Vlaktefontein.)

Imported Cases:

The imported cases were :—

- Imported infections : 23 (8 Europeans, 2 Eurafricans, 1 Asiatic and 12 Bantus). These were patients who contracted the disease prior to coming to live in Pretoria. Of these, 3 Bantus have since died.
- Cases notified from Government Institutions : 8 (2 Europeans and 6 Bantus), Weskoppies Mental Hospital 1 European and 5 Bantus, Pretoria Gaol 1 Bantu and Central Prison 1 European. Of these, 1 European and 6 Bantus have since died.
- Vlaktefontein Municipal Location : 3 Bantus.
- Cases admitted to Hospital from outside the Municipal area : 6 Europeans and 89 non-Europeans.

POLIOMYELITIS:

	Europeans	Non-Europeans	Total
Local cases	6 (28)	— (1)	6 (29)
Imported cases	9 (19)	3 (4)	12 (23)
Deaths in local cases	— (2)	— (—)	— (2)

Local Cases:

All the cases were removed to the Isolation Wards. Three had mild paretic attacks and two were non-paralytic. All five made complete recoveries. The sixth case had a paralysis of the right leg which required after treatment. The final result is unknown as this family has left Pretoria.

Five of the cases were males aged 7, 8, 5, 7 and 9 years and one was a female of 11 years.

Three of the cases were from unsewered premises and three from sewerage premises.

SCARLET FEVER:

	Europeans	Non-Europeans	Total
Local cases	162 (153)	— (—)	162 (153)
Imported cases	7 (6)	— (—)	7 (6)

Local Cases:

Five of the cases were adults, 109 were scholars and 48 were children of pre-school age. Forty-seven of the cases were removed to the Isolation wards, 5 to the Military Hospital at Voortrekkerhoogte and 110 were treated at home. There were 15 secondary cases.

DIPHTHERIA:

	Europeans	Non-Europeans	Total
Local cases	27 (32)	23 (14)	50 (46)
Imported cases	39 (45)	54 (60)	93 (105)

Local Cases:

The non-European cases were one Eurafrican, 4 Asiatics and 18 Bantus. Seven of the cases died (1 European, 1 Asiatic and 5 Bantus). They had never been immunised. Six of the cases were adults, 20 were scholars and 24 were children of pre-school age. Thirty-six of the cases were removed to the Isolation wards, 8 to the Military Hospital and 6 were treated and isolated at home. There were 6 secondary cases.

Thirty-seven of the cases had never been immunised, 12 had been immunised previously and one case, an adult, gave a history of having had diphtheria before as a child when 4 years old.

MENINGOCOCCAL MENINGITIS:

	Europeans	Non-Europeans	Total
Local cases	6 (8)	2 (2)	8 (10)
Imported cases	3 (4)	1 (3)	4 (7)

The non-European cases were 1 Asiatic and 1 Bantu. The Asiatic case died. All the cases were removed to Hospital.

OTHER INFECTIOUS DISEASES NOTIFIED:

	Local		Imported	
	European	Non-European	European	Non-European
Encephalitis	2	—	2	—
Brucellosis	1	1	1	—
Erysipelas	5	—	1	—
Puerperal Fever	3	—	—	2
Ophthalmia Neonatorum	—	1	—	—
Malaria	—	—	1	—
Typhus	—	—	1	—
Leprosy	—	—	1	—

HERCULES AREA**TYPHOID FEVER:**

	Europeans	Non-Europeans	Total
Local cases	6 (2)	36 (21)	42 (23)
Imported infections	— (—)	4 (3)	4 (3)
Deaths in local cases	1 (1)	5 (1)	6 (2)

Local Cases:

In contrast to Pretoria the incidence in Hercules has increased, 42 cases as against 23 last year. Six of the cases (1 European and 5 Bantus) died. Thirty-eight of the cases were removed to hospital and 4 were treated at home.

Distribution of Cases:

	Europeans	Non-Europeans
Location area	—	32
Daspoort Estate	5	1
Daspoort	1	—
Pretoria Gardens	—	1
Market Garden Plots	—	2
	6	36

The majority of cases occurred in the location area. During the year town water has been laid on to this area but the majority of the premises have not yet been connected to this supply.

The area is unsewered, and overcrowding and gross insanitary conditions contribute to the high incidence of typhoid in this location. The cases from Daspoort Estate (5 Europeans and 1 Bantu) and the 2 cases from the Market Garden Plots were probably water-borne infections, as the wells in this area are liable to pollution through irrigation furrows. In tracing the sources of infections, 9 suspects were tested for the possible carrier state. The reports on blood specimens of three were positive for the Vi-agglutination test. Further stool and urine examinations for the presence of *B. Typhosus* were, however, negative. In each of five houses there were 2 cases and in 4 of these the second was a secondary infection. In one house there were 3 cases and in another family there were 6 cases. Altogether there were 11 secondary cases.

Phage-typing:

The following types were found in the Hercules area :—

Type A	.. .. .	6
Untyped strains	.. .. .	5
No culture obtained	.. .. .	23
Typing not done	.. .. .	8
		<hr/> 42

Imported Infections:

Four Bantus in the location area contracted their infection outside the Municipal area.

TUBERCULOSIS:

	Europeans	Non-Europeans	Total
Local cases	— (2)	94 (113)	94 (115)
Imported infections	— (—)	25 (31)	25 (31)

Of the 94 non-European local cases, 87 were Bantus, 6 Eurafricans and 1 an Asiatic.

Local Cases:

The various forms in which the disease occurred :—

	Pulmonary	Meningitic	Miliary	General	Glandular	Primary Complex	Total
Europeans	—	—	—	—	—	—	—
Non-Europeans	88	1	2	1	1	1	94

All the cases were from the location area. Of the 94 local cases 36 (3 Eurafricans and 33 Bantus) died during the year, 33 in Pretoria and 3 elsewhere. Sixteen were only notified on death, 16 died within three months, 1 within six months and 3 within nine months of notification. Seventeen of the cases gave a history of tuberculosis in the family. Eight gave histories of being contacts of known cases.

How Notified:

By Tuberculosis and other clinics	.. .. .	35
„ Lady Selborne Government Health Centre	.. .. .	33
„ Registrar of Births and Deaths Returns	.. .. .	10
„ Private Practitioners	.. .. .	8
„ Pretoria Hospital and Isolation Hospital	.. .. .	7
„ Other Sources	.. .. .	1
		<hr/> 94

Imported Infections:

Twenty-five non-Europeans in the location area had contracted the disease prior to coming to live here. Eleven have since died.

POLIOMYELITIS:

One case was notified in a European male aged 2 years. The patient who was removed to the Isolation wards had a mild non-paralytic attack.

SCARLET FEVER:

	Europeans	Non-Europeans	Total
Local cases	16 (20)	— (—)	16 (20)
Imported cases	— (—)	— (—)	— (—)

One of the cases was an adult, 5 were scholars and 10 were children of pre-school age. One of the cases was removed to the Isolation wards and 15 were treated at home. There was one secondary case.

DIPHTHERIA:

	Europeans	Non-Europeans	Total
Local cases	18 (26)	39 (49)	57 (75)
Imported cases	— (—)	— (—)	— (—)

The non-European cases were 3 Europeans and 36 Bantus. Seven of the cases died (4 Eurafricans and 3 Bantus). They had never been immunised. One of the cases was an adult, 14 were scholars and 42 were children of pre-school age. Thirty of the cases were removed to the isolation wards and 27 were treated at home. There were 2 secondary cases. Fifty of the cases had never been immunised. Seven had been immunised previously.

MENINGOCOCCAL MENINGITIS:

	Europeans	Non-Europeans	Total
Local cases	2 (—)	6 (—)	8 (—)
Imported cases	— (—)	— (—)	— (—)

There were 4 deaths (1 European and 3 Bantus).

OTHER INFECTIOUS DISEASES NOTIFIED:

	Local		Imported	
	Europeans	Non-Europeans	Europeans	Non-Europeans
Encephalitis	—	2	—	—
Puerperal Fever	—	1	—	—

STATISTICAL ANALYSIS OF INFECTIOUS DISEASES FOR PRETORIA INCLUDING HERCULES

TYPHOID FEVER:

	Europeans	Non-Europeans	Total
Local cases	11 (18)	45 (31)	56 (49)
Imported cases	47 (20)	199 (162)	246 (182)
Deaths in local cases	1 (1)	6 (3)	7 (4)
Attack rate: Local cases	0.08 (0.13)	0.44 (0.31)	0.23 (0.21)
Death rate: Local cases	% 9.09 (5.56)	13.33 (9.68)	12.5 (8.16)

Results of Phage-typing:

Type A	6
Type E1	2
Untyped strains	7
No culture obtained	32
Typing not done	9
	<u>56</u>

TUBERCULOSIS:

	Europeans	Non-Europeans	Total
Local cases	35 (34)	173 (231)	208 (265)
Imported cases	16 (20)	138 (155)	154 (175)
Attack rate: Local cases	0.26 (0.25)	1.69 (2.28)	0.87 (1.13)

The various forms in which the disease occurred:—

	Pulmonary	Meningitic	Miliary	General	Glandular	Primary Complex	Total
Europeans ..	31	1	1	—	—	2	35
Non-Europeans	151	4	3	3	3	9	173
	<u>182</u>	<u>5</u>	<u>4</u>	<u>3</u>	<u>3</u>	<u>11</u>	<u>208</u>

POLIOMYELITIS:

	Europeans	Non-Europeans	Total
Local cases	7 (32)	0 (5)	7 (37)
Imported cases	9 (19)	3 (4)	12 (23)
Deaths in local cases	0 (2)	— (—)	— (2)

SCARLET FEVER:

	Europeans	Non-Europeans	Total
Local cases	178 (173)	— (—)	178 (173)
Imported cases	7 (6)	— (—)	7 (6)

DIPHTHERIA:

	Europeans	Non-Europeans	Total
Local cases	45 (58)	62 (63)	107 (121)
Imported cases	39 (45)	54 (60)	93 (105)

MENINGOCOCCAL MENINGITIS:

	Europeans	Non-Europeans	Total
Local cases	8 (8)	8 (2)	16 (10)
Imported cases	3 (4)	1 (3)	4 (7)

OTHER INFECTIOUS DISEASES:

	Local		Imported	
	Europeans	Non-Europeans	Europeans	Non-Europeans
Encephalitis	2	2	2	—
Brucellosis	1	1	1	—
Erysipelas	5	—	1	—
Puerperal Fever	3	1	—	2
Ophthalmia Neonatorum	—	1	—	—
Malaria	—	—	1	—
Typhus	—	—	1	—
Leprosy	—	—	1	—

INFECTIOUS DISEASES HOSPITAL

This hospital provides accommodation in separate blocks for 50 Europeans and 20 non-European patients.

As in previous years Diphtheria cases accounted for the largest number of admissions, and this will unfortunately continue to happen until parents can be made to realise that immunisation affords the only safeguard for their children against this dangerous infection.

Another problem which had to be faced throughout the year, was that of providing accommodation for cases of Pulmonary Tuberculosis.

The position, however, regarding Europeans has eased somewhat, and it is hoped that this summer, the typhoid wards, which are at present being used for Tuberculosis, will once again be opened for the reception of typhoid fever cases.

An acute shortage of beds for non-European tuberculosis cases still exists.

The incidence of infectious disease in Pretoria otherwise was normal, with a good recovery rate, while complications were seldom encountered.

Total Admissions:

Five hundred and forty-five (565) of whom 339 (384) were Europeans and 206 (181) non-Europeans.

(Figures for last year are given in brackets.)

The area distribution was :—

Pretoria Municipal Area		Other Areas	
Europeans	Non-Europeans	Europeans	Non-Europeans
193 (234)	104 (91)	146 (150)	102 (90)

PULMONARY TUBERCULOSIS:

Ninety-five (67) patients were admitted. Of these 80 (53) were Pretoria residents and 15 (14) were living outside the Municipal area.

Pretoria		Other Areas	
Europeans	Non-Europeans	Europeans	Non-Europeans
24 (27)	56 (26)	7 (8)	8 (6)

One (4) of the Europeans and 2 (8) of the non-Europeans died.

PNEUMOTHORAX REFILLS:

The practice of treating pulmonary tuberculosis by the induction of artificial pneumothorax or artificial pneumoperitoneum having been superseded to a certain extent by the newer chemotherapeutic methods, no inductions and very few refills were given during the year. All but one of last years patients have achieved clinical cure and no longer attend the refill clinic. The figures for the year were :—

Pneumothorax refills 52 (148). Pneumoperitoneum refills 37 (94).

DIPHTHERIA:

173 (185) patients, almost a third of the total number of patients admitted, were treated during the year.

Pretoria		Other Areas	
Europeans	Non-Europeans	Europeans	Non-Europeans
35 (51)	36 (35)	38 (42)	64 (57)

Of the total number of patients 87% (95%) were under the age of ten years, and of this group 64% (60%) were less than five years old.

A marked difference in case fatality rates of Europeans and non-Europeans was again noted when all the cases were taken into consideration, but there was practically no difference in the case fatality rates of Pretoria natives and rural Europeans. Without exception all deaths could be attributed to one of two causes, either late admission to hospital or marked virulence of the disease as evidenced by the appearance of severe peri-glandular oedema of the tissues of the neck. All deaths occurred in children under the age of ten years.

Case Fatality Rates:

	Cases	Deaths	Rate
Pretoria Europeans	35 (51)	3 (1)	8.5% (1.9%)
Europeans from other areas ..	38 (42)	5 (5)	13.1% (11.9%)
Pretoria Natives	36 (35)	5 (11)	13.9% (31.4%)
Natives from other areas	64 (57)	21 (24)	32.8% (42.1%)
Total European case fatality rate		10.9%	(6.4%)
Total non-European case fatality rate		26.00%	(38.04%)

During the year six European diphtheria carriers from Pretoria were discovered and treated, in addition to three carriers from rural areas who had been sent in as cases of diphtheria.

TRACHEOTOMY OPERATIONS:

European : 10 with one death.
Non-Europeans : 3 with one death.
Total : 13 (12). 2 (1).

SCARLET FEVER:

The total number of cases treated was 46 (36) all Europeans, and mainly in the five to fifteen years age group.

Distribution:

Pretoria 40 (32). Other areas 6 (4).
There were no complications and no deaths.

TYPHOID FEVER:

The total number of cases treated was 53 (35) of which 47 (23) were Europeans and 6 (12) non-Europeans.

Distribution:

Pretoria 14 (16). Other areas 39 (19).

Two patients had complicating pneumonia, and two severe bowel haemorrhage. There were no deaths in the series.

Case Fatality Rates:

European	Nil (4.3%)
Non-European	Nil (8.3%)
Combined	Nil (5.7%)

ACUTE ANTERIOR POLIOMYELITIS:

18 (44) Europeans and 2 (7) non-Europeans were admitted.

Distribution:

Pretoria 7 (29). Outside areas 13 (22).

There were 2 (2) European deaths, both in patients from the country. Of the 18 patients surviving, six required further treatment in an Orthopaedic hospital.

Case Fatality Rates:

Europeans	11.1% (4.5%)
Non-Europeans	Nil (28.5%)

MEASLES:

10 (32) Europeans and 5 (8) non-Europeans were admitted.

Distribution:

Pretoria 10 (28). Other areas 5 (12).

Complications:

Seven of the patients had broncho-pneumonia.

Case Fatality Rate: Nil.

GERMAN MEASLES:

5 (9) Europeans were admitted. There were no complications or deaths.

WHOOPING COUGH:

5 (8) Europeans and 1 (2) non-Europeans. All admissions were because of complicating broncho-pneumonia. There were no deaths.

EPIDEMIC PAROTITIS (Mumps):

Ten (18) Europeans and 1 (4) non-Europeans were admitted.

Complications:

Epididymo-orchitis 5. There were no deaths.

MENINGOCOCCAL MENINGITIS:

Eight (6) cases were admitted, seven (6) of them being Europeans. There were no deaths.

VENEREAL DISEASES:

It was necessary for various reasons to admit 5 (7) Europeans and 10 (3) Natives.

PUERPERAL SEPSIS:

1 (—) European and 1 (2) natives were admitted from Pretoria. Both recovered.

CHICKEN POX:

6 (9) Europeans and 5 (4) natives required isolation. There were no deaths.

ERYSIPELAS:

3 (1) elderly Europeans, all suffering from facial erysipelas recovered.

OTHER ADMISSIONS:

Included leprosy 4. Post infective encephalitis 3. Brucellosis 1. There were no deaths.

OBSERVATION CASES:

65 (63) cases sent in as suffering from acute infectious disease, were found to be wrongly diagnosed. They included two persons suffering from sub-arachnoid, hæmorrhage, two cases of laryngo-tracheo-bronchitis both requiring to be Tracheotomised, and a case of perforated appendix. The sole death in this group was a native child seven years old from tetanus.

The following tables "A" and "B" show the total number of cases treated including their distribution, and the deaths from the various diseases :—

TABLE "A"

Disease	Europeans		Non-Europeans	
	Local	Imported	Local	Imported
Pulmonary Tuberculosis	24 (27)	7 (8)	56 (26)	8 (6)
Diphtheria	35 (51)	38 (42)	36 (35)	64 (57)
Diphtheria carriers	6 (—)	3 (—)	— (—)	— (—)
Scarlet Fever	40 (32)	6 (4)	— (—)	— (—)
Typhoid Fever	12 (10)	35 (13)	2 (6)	4 (6)
Acute Anterior Poliomyelitis ..	7 (25)	11 (19)	— (4)	2 (3)
Measles	7 (21)	3 (11)	3 (7)	2 (1)
German Measles	2 (8)	3 (1)	— (—)	— (—)
Whooping Cough	1 (2)	4 (6)	— (1)	1 (1)
Epidemic Parotitis	6 (14)	4 (4)	1 (4)	— (—)
Meningococcal Mening	6 (3)	1 (3)	— (—)	1 (—)
Venereal Diseases	5 (3)	— (4)	2 (1)	8 (2)
Puerperal Sepsis	1 (—)	— (—)	1 (—)	— (2)
Chicken Pox	6 (6)	— (3)	2 (3)	3 (1)
Erysipelas	2 (1)	1 (3)	— (—)	— (—)
Other admissions	1 (3)	4 (4)	— (—)	3 (5)
Observation cases	32 (28)	26 (25)	1 (4)	6 (6)
	193 (234)	146 (150)	104 (91)	102 (90)

TABLE "B"

Disease	Pretoria	Other Areas	Total	Deaths
Pulmonary Tuberculosis	80 (53)	15 (14)	95 (67)	3 (12)
Diphtheria	71 (86)	102 (99)	173 (185)	34 (41)
Diphtheria carriers	6 (—)	3 (—)	9 (—)	— (—)
Scarlet Fever	40 (32)	6 (4)	46 (36)	— (—)
Typhoid Fever	14 (16)	39 (19)	53 (35)	— (2)
Acute Anterior Poliomyelitis ..	7 (29)	13 (22)	20 (51)	2 (4)
Measles	10 (28)	5 (12)	15 (40)	— (3)
German Measles	2 (8)	3 (1)	5 (9)	— (—)
Whooping Cough	1 (3)	5 (7)	6 (10)	— (1)
Epidemic Parotitis	7 (18)	4 (4)	11 (22)	— (—)
Meningococcal Mening	6 (3)	2 (3)	8 (6)	— (2)
Venereal Diseases	7 (4)	8 (6)	15 (10)	— (—)
Puerperal Sepsis	2 (—)	— (2)	2 (2)	— (—)
Chicken Pox	8 (9)	3 (4)	11 (13)	— (—)
Erysipelas	2 (1)	1 (3)	3 (4)	— (—)
Other admissions	1 (3)	7 (9)	8 (12)	— (2)
Observation cases	33 (32)	32 (31)	65 (63)	1 (—)
	297 (325)	248 (240)	545 (565)	40 (67)

SPECIAL DISEASES CLINICS:

TUBERCULOSIS SECTION

A. EUROPEANS:

The work of the European Clinic has increased and extended considerably in the past year. There has been an increase in the number of control X-rays, and blood sedimentation, sputum and tuberculin tests. (See attached table.)

Home treatment has been undertaken on a much larger scale and the results are very gratifying. European patients adapt themselves easily to the regime laid down and as strict isolation of cases as possible is being practised at home. The new methods of treatment have in some cases given spectacular results.

Good relationship has been maintained with the South African National Tuberculosis Association. This Organisation has helped a number of our patients in many ways, particularly where the breadwinner has been incapacitated. Their efforts have in many cases helped to relieve economic difficulties which so often go with this illness.

The Union Government Department of Social Welfare has also been very helpful by giving disability grants. Special assistance has been given to patients who are cured of tuberculosis and schemes to help these patients have been inaugurated.

Our hospital accommodation is still inadequate.

It is true that in selected cases home treatment may nowadays achieve the same results as sanatorium treatment, but in many cases patients cannot be treated at home, especially when there are children living in the same building.

Clinic Hours:

Fridays : 2-4 p.m. at the Special Disease Clinic Building in the General Hospital grounds.

B. NON-EUROPEANS:

The picture of tuberculosis amongst the non-European is still very gloomy. This is mainly because of generally poor social, economic and other environmental conditions under which the Bantu and Coloureds live.

Overcrowding, physical stress and malnourishment are most important facts in tuberculosis. Lady Selborne Location for non-Europeans which was only incorporated into Pretoria four and a half years ago, and where these conditions prevail, is an example of this. It has the highest incidence of Tuberculosis in Pretoria. The uncontrolled squatter "camps" round Pretoria are also responsible for a large percentage of tuberculous. These camps, where shocking hygienic conditions and overcrowding exist, are outside the control of this Municipality. Under such conditions the spread is rapid, and unfortunately very little can be done because of the lack of isolation facilities. Fortunately some of the homes have a separate room available for the patient. Notwithstanding all this, present day home treatment, particularly amongst the more intelligent non-Europeans, has given very good results.

With the less intelligent it is not so easy. Often after initial treatment when they feel "better" they discontinue bed treatment, in spite of all our efforts at "education."

Wherever necessary T.B. sufferers are given one or two pints of milk per day. This is supplemented by rations consisting of a certain amount of mealie meal and meat. If necessary these rations are further supplemented with other foodstuffs by the S.A. National Tuberculosis Association. Through the Social Welfare Department, pensions and disability grants, are given and patients are exempted from paying taxes. The Union Government Department of Native Affairs is responsible for pensions and unfortunately great difficulties are often experienced in obtaining pensions for tuberculosics. The time between the application for the pension and the actual payment is far too long. The pension is also totally inadequate, particularly for patients in urban areas.

The help of the social workers of the Native Affairs Department of the Municipality is greatly valued. They have assisted us in obtaining pensions and maintenance grants.

In spite of this gloomy report the position appears to be more hopeful than it was last June and efforts are being made to improve housing conditions and to get additional sanatorium beds.

Tuberculosis clinics are held at the following centres :—

1. Central clinic which is at our Special Diseases building at the Hospital looks after cases from Lady Selborne, the Cape Coloured Location, centre of town, suburbs and from residents in the Peri-Urban and other areas outside Pretoria.
The hours are from 1.30–5 p.m. on Tuesday afternoons.
2. Atteridgeville clinic which is situated in the Polyclinic building at Atteridgeville.
The hours are from 2–4.30 p.m. on Wednesday afternoons.
3. Bantule Clinic which is held in a section of the Administrative building.
The hours are from 2–4 p.m. on Thursday afternoons.
4. Lady Selborne Clinic, which was recently started in a section of the Administrative building of the Native Affairs Department.
Hours are from 1.30–4.30 p.m. on Thursday afternoons.

CLINIC RETURNS : TUBERCULOSIS SECTION.

(Figures for last year are given in brackets)

	Europeans Central		Non-Europeans Central		Non-Europeans Central (Outside)		Atteridgeville Non-European		Lady Selborne Non-European		Bantule Non-European	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
A. MEDICAL EXAMINATIONS												
1. New cases	27 (28)	15 (14)	15 (57)	9 (46)	58 (—)	47 (—)	16 (11)	10 (12)	45 (Clinic only started his year)	23 (—)	9 (9)	6 (4)
2. Old cases	197 (116)	174 (90)	114 (187)	69 (80)	300 (—)	188 (—)	297 (101)	251 (86)	188 (—)	123 (—)	55 (72)	44 (48)
3. New contacts	73 (85)	115 (29)	34 (115)	28 (146)	55 (—)	40 (—)	58 (73)	80 (118)	136 (—)	176 (—)	24 (59)	58 (77)
4. Old contacts	126 (111)	164 (149)	87 (182)	84 (172)	56 (—)	44 (—)	245 (268)	440 (423)	40 (—)	54 (—)	211 (205)	344 (325)
5. Suspected cases	66 (34)	71 (52)	83 (140)	52 (75)	153 (—)	53 (—)	20 (13)	25 (18)	65 (—)	36 (—)	4 (21)	3 (18)
TOTAL	489 (374)	539 (394)	333 (681)	242 (527)	622 (—)	372 (—)	636 (466)	806 (657)	474 (—)	412 (—)	303 (366)	445 (472)
B. PATIENTS ATTENDING THE FOLLOWING CLINICS AND WHO WERE HOME VISITED BY HEALTH VISITORS AND NURSING STAFF												
1. New cases	42 (26)	14 (15)	8 (3)	4 (2)	— (—)	— (—)	1 (3)	4 (2)	29 (—)	11 (—)	2 (7)	1 (2)
2. Old cases	365 (245)	214 (154)	207 (166)	189 (106)	2 (—)	2 (—)	48 (47)	46 (33)	323 (—)	242 (—)	50 (65)	37 (56)
3. New contacts	69 (40)	72 (57)	11 (18)	12 (11)	— (—)	— (—)	1 (—)	12 (34)	106 (—)	122 (—)	25 (69)	36 (97)
4. Old contacts	996 (752)	1,369 (926)	1,007 (979)	1,339 (1,080)	17 (—)	28 (—)	716 (781)	1,199 (1,113)	774 (—)	1,028 (—)	296 (369)	436 (478)
5. Suspected cases	11 (13)	4 (5)	16 (12)	57 (34)	2 (—)	1 (—)	6 (—)	4 (6)	32 (—)	36 (—)	— (6)	— (1)
TOTAL	1,483 (1,076)	1,673 (1,157)	1,249 (1,178)	1,601 (1,233)	21 (—)	31 (—)	772 (859)	1,265 (1,188)	1,264 (—)	1,439 (—)	373 (516)	510 (634)

		Europeans Central	Non-Europeans Central	Non-Europeans Central (Outside)	Atteridgeville Non-Europeans	Lady Selborne Non-Europeans	Bantule Non-Europeans
C. SPECIAL INVESTIGATIONS:							
1. (a)	No. of cases sent for X-ray (new) ..	205 (211)	83 (303)	163 (—)	113 (76)	128 (—)	11 (16)
	(b) No. of cases sent for X-ray (old) ..	302 (165)	69 (123)	110 (—)	70 (36)	148 (—)	29 (—)
2. (a)	Sputum tests T.B. (+) ..	76 (20)	75 (52)	117 (—)	23 (—)	145 (—)	— (2)
	(b) Sputum tests T.B. (—) ..	376 (129)	151 (161)	285 (—)	58 (7)	200 (—)	— (—)
3. (a)	Tuberculin tests (+) ..	21 (—)	4 (8)	5 (—)	8 (—)	6 (—)	— (—)
	(b) Tuberculin tests (—) ..	23 (2)	2 (—)	3 (—)	18 (—)	5 (—)	— (3)
4.	Blood Sedimentation Rates ..	286 (47)	99 (7)	205 (—)	66 (—)	200 (—)	— (—)
D. No. OF HOMES VISITED ..		930 (703)	788 (616)	16 (—)	585 (654)	883 (—)	178 (276)

Note.—The figures shown in brackets under the heading "Non-Europeans Central" included "Non-Europeans Central Outside" for last year.

VENEREAL DISEASES

These clinics are conducted by two of the Council's Medical Officers.

ACCOMMODATION:

- (a) **Central Clinics:** These are held in the Special Diseases Clinic Building situated in the General Hospital grounds.
- (b) **Atteridgeville:** The venereal diseases section of the Polyclinic at Atteridgeville Native Location.
- (c) **Bantule Clinic:** This is held in a section of the Administration Buildings in Bantule Native Location.

CLINIC HOURS:

- Mondays:** 10.30 a.m. to 12.30 p.m. and 2 p.m. to 4 p.m. — Non-European males and females.
 - Tuesdays:** 8.30 a.m. to 10 a.m. — European males. 11 a.m. to 12.30 p.m. — Non-European males and females (Bantule).
2 p.m. to 4 p.m. — European females and children.
 - Wednesdays:** 9 a.m. to 10 a.m. — European females and children. 4 p.m. to 6 p.m. — Non-European males only.
 - Thursdays:** 11 a.m. to 12.30 p.m. — Non-European males and females (Atteridgeville).
2 p.m. to 4 p.m. — Non-Europeans males and females.
 - Fridays:** 9 a.m. to 10 a.m. — European females.
5 p.m. to 6 p.m. — European males.
- Urgent cases are seen by appointment outside these hours.

NON-EUROPEAN SERVICES:

The Central clinics continue to have a large attendance with an increase in the number of cases of gonorrhoea presenting themselves for treatment, although total attendances have dropped slightly due to more intensive methods of treatment being adopted.

At Bantule, while fewer cases have been found, the patients have attended very consistently and there are very few defaulters now, with the result that attendance figures exceed those of last year.

In Atteridgeville the number of male patients has declined considerably as they prefer to attend the late clinic in town rather than lose a day's work, but the females are, as in Bantule, increasing in numbers and reporting regularly for treatment.

The system of issuing of free railway warrants to natives resident within a 20-mile radius of Pretoria continues with the assistance of the Union Department of Health.

EUROPEAN SERVICES:

The figures show a decline in the number of new cases of all types of venereal disease occurring in both males and females. The tendency for more Europeans to receive treatment from their family practitioners is undoubtedly responsible for this drop; it cannot be ascribed to a decrease in the incidence of venereal disease in Pretoria.

The routine examination of children committed to places of safety and orphanages as well as of the inmates of the Armstrong Berning Tehuis has been continued.

An analysis of the cases examined follows:—

CENTRAL EUROPEAN CLINIC

(Figures for 1951-52 are given in brackets)

Nature of Disease	Number of New Cases		Number of All Attendances		1952-1953 Total	(1951-1952) Total
	M.	F.	M.	F.		
Syphilis:						
(a) Primary or Secondary	3 (6)	1 (7)	117 (128)	63 (166)	180	(294)
(b) Tertiary	2 (9)	4 (12)	133 (106)	225 (340)	358	(446)
(c) Of Central Nervous System	2 (2)	— (5)	55 (19)	20 (50)	75	(69)
(d) Congenital	— (4)	12 (15)	34 (94)	494 (416)	528	(510)
Gonorrhoea	31 (19)	6 (39)	183 (95)	24 (124)	207	(219)
Others	23 (45)	233 (254)	46 (60)	313 (417)	359	(477)
TOTAL	61 (85)	256 (332)	568 (502)	1139 (1513)	1,707	(2,015)

		1952-1953		1951-1952	
		M.	F.	Total	Total
(a)	Number of New Cases Examined	61 (85)	256 (332)	317	(417)
(b)	Number found free from V.D.	19 (45)	190 (280)	209	(325)
(c)	Number of persons attending Clinic	208 (232)	563 (710)	771	(942)
(d)	Number of Attendances Paid	568 (502)	1,139 (1,513)	1,707	(2,015)
(e)	Number Discharged as Defaulters, unable to trace	3 (23)	7 (28)	10	(51)
(f)	Number Note A's Resident Magistrate Warnings	4 (36)	17 (51)	21	(87)
(g)	Number of Visits by Clinic Staff to Defaulters and Contacts.. ..	3 (29)	7 (100)	10	(129)

CENTRAL NON-EUROPEAN CLINIC

(Figures for 1951-52 are given in brackets)

Nature of Disease	Number of New Cases		Number of All Attendances			
					1952-1953	(1951-1952)
Syphilis:	M.	F.	M.	F.	Total	Total
(a) Primary or Secondary	344 (414)	201 (223)	4,020 (4,536)	1,902 (2,025)	5,922	(6,561)
(b) Tertiary	502 (369)	304 (271)	6,627 (6,242)	3,936 (3,766)	10,563	(10,008)
(c) Of Central Nervous System	12 (19)	1 (9)	178 (309)	100 (173)	278	(482)
(d) Congenital	64 (68)	77 (70)	486 (766)	1,058 (838)	1,544	(1,604)
Gonorrhoea	473 (404)	20 (51)	2,703 (2,481)	167 (244)	2,870	(2,725)
Others	272 (348)	106 (108)	693 (784)	300 (268)	993	(1,052)
TOTAL	1,667 (1,622)	709 (732)	14,707 (15,118)	7,463 (7,314)	22,170	(22,432)

		1952-1953		(1951-1952)	
		M.	F.	Total	Total
(a)	Number of New Cases Examined	1,667 (1,622)	709 (732)	2,376	(2,354)
(b)	Number found free from V.D.	270 (348)	103 (108)	373	(456)
(c)	Number of Persons attending Clinic	6,115 (6,063)	3,039 (3,063)	9,154	(9,126)
(d)	Number of Attendances Paid	14,707 (15,118)	7,463 (7,314)	22,170	(22,432)
(e)	Number Discharged as Defaulters and unable to trace	1,168 (1,319)	484 (805)	1,652	(2,124)
(f)	Number Note A's and Resident Magistrate Warnings	643 (915)	295 (605)	938	(1,520)
(g)	Number of Visits by Clinic Staff to Defaulters and Contacts	762 (1,440)	321 (550)	1,083	(1,990)

BANTULE

(Figures for 1951-52 are given in brackets)

Nature of Disease	Number of New Cases		Number of All Attendances			
					1952-1953	(1951-1952)
Syphilis:	M.	F.	M.	F.	Total	Total
(a) Primary or Secondary	2 (5)	8 (8)	22 (17)	160 (22)	182	(39)
(b) Tertiary	12 (12)	38 (30)	264 (144)	736 (756)	1,000	(900)
(c) Of Central Nervous System	— (4)	— (5)	— (9)	— (4)	—	(13)
(d) Congenital	— (8)	5 (13)	10 (69)	116 (149)	126	(218)
Gonorrhoea	1 (4)	— (8)	2 (5)	— (17)	2	(22)
Others	— (32)	— (33)	— (41)	— (45)	—	(86)
TOTAL	15 (65)	51 (97)	298 (285)	1,012 (993)	1,310	(1,278)

		1952-1953 (1951-1952)			
		M.	F.	Total	Total
(a)	Number of New Cases Examined	15 (65)	51 (97)	66	(162)
(b)	Number found free from V.D.	— (27)	— (30)	—	(57)
(c)	Number of Persons attending Clinic ..	102 (100)	367 (368)	469	(468)
(d)	Number of Attendances Paid by these people	298 (285)	1,012 (993)	1,310	(1,278)
(e)	Number Discharged as Defaulters who were unable to be traced	8 (56)	35 (69)	43	(125)
(f)	Number of Note A's and Resident Magistrate warnings	14 (62)	21 (63)	35	(125)
(g)	Number of Visits paid by Clinic Staff to Defaulters and Contacts	14 (108)	21 (138)	35	(246)

ATTERIDGEVILLE

(Figures for 1951-52 are given in brackets)

Nature of Disease	Number of New Cases		Number of All Attendances		1952-1953 Total	(1951-1952) Total
	M.	F.	M.	F.		
Syphilis:						
(a) Primary or Secondary ..	1 (9)	28 (20)	25 (78)	332 (195)	357	(273)
(b) Tertiary	7 (58)	86 (107)	113 (118)	1,919 (1,440)	2,032	(1,558)
(c) Of Central Nervous System	— (6)	— (8)	— (7)	— (12)	—	(19)
(d) Congenital	1 (11)	13 (31)	39 (141)	411 (386)	450	(527)
Gonorrhoea	— (20)	— (15)	— (21)	46 (27)	46	(48)
Others	— (17)	— (33)	— (35)	— (38)	—	(73)
TOTAL	9 (121)	127 (214)	177 (400)	2,708 (2,098)	2,885	(2,498)

		1952-1953 (1951-1952)			
		M.	F.	Total	Total
(a)	Number of New Cases Examined	9 (121)	127 (214)	136	(335)
(b)	Number found free from V.D.	— (18)	— (28)	—	(46)
(c)	Number of Persons Attending Clinic ..	69 (131)	1,065 (967)	1,134	(1,098)
(d)	Number of Attendances Paid	177 (400)	2,708 (2,098)	2,885	(2,498)
(e)	Number Discharged as Defaulters, unable to trace	— (17)	5 (31)	5	(48)
(f)	Number Note A's and Resident Magistrate Warnings	45 (118)	528 (289)	573	(407)
(g)	Number of Visits by Clinic Staff to Defaulters and Contacts	51 (192)	591 (429)	642	(621)

INSPECTION OF NURSING HOMES, CONVALESCENT HOMES AND HOSPITALS

Nursing Homes, Convalescent Homes and those Hospitals in the City which are not under the jurisdiction of the Provincial Administration were again regularly inspected by us on behalf of the Union Health Department. The Pretoria General Hospital and the Andrew McColm Hospital are the two Provincial Administration Hospitals over which we exercise no control.

No new institutions were established during the year. The general supervision and management of these institutions are on the whole satisfactory.

Institutions for European Maternity Cases:

There are two Nursing Homes and one Hospital with 35, 9 and 85 beds respectively for European maternity cases.

Institutions for Non-European Maternity Cases:

There are 12 beds in the maternity section of the Pretoria General Hospital and 70 beds at present in the Holy Cross Nursing Home which is situated in Lady Selborne Location for non-European maternity cases. All cases are treated free of charge at this institution. The City Council of Pretoria pays a fixed annual grant towards the running cost of the Holy Cross Nursing Home.

There is still an urgent need for providing additional accommodation for midwifery cases, especially for non-Europeans. Confinements among non-Europeans are often conducted under unsatisfactory conditions in overcrowded homes.

As in previous years, persons in charge of Hospitals and Nursing Homes have been most co-operative and agreeable to bring about such changes and improvements as were considered necessary.

CHILD WELFARE ACTIVITIES

The staff at the moment consists of two medical officers devoting all their time to Ante-Natal and Child Welfare activities with the part-time assistance of three others. The European Health visiting personnel consists of 18. The non-European staff consists of 9 nurses and 4 midwives.

In conjunction with the Technical College a training course for the non-European nurses for the certificate Health Visitors and School Nurses is being run.

During the year no major changes were made. Three additional European Child Welfare Clinics were opened. This brings the total number of clinics up to 29.

Recreational Work:

The Youth Club at Danville is working under extremely difficult circumstances. The lack of a suitable centre, lack of adult help and of finances may force us to abandon this effort.

In an effort to do educational work a Doll Adoption Scheme was started. A small group of girls, 10 in number, between the ages of 7 and 9 were selected from some homes in Danville. Through the generosity of some members of the public these girls were taken to select dolls for themselves in one of the Department stores. These dolls are kept at the clinic while the girls are being trained in all aspects of mothercraft. They are not considered fit to have the dolls permanently until such time as we are satisfied that they are capable of looking after them in the way that we would like mothers to care for their babies.

During the nine months since the scheme was started these girls have shown considerable progress not only in knowledge but in general behaviour and also personality development. This is a scheme well worth expanding, but as the units must be kept small and it demands time, attention and devotion from the adults working with them the expansion must of necessity be slow.

For three years we have tried to alter the old Council building at Hercules into a suitable clinic building. Up to date all our efforts have been unsuccessful and we are still conducting the clinics under unnecessarily difficult circumstances. Delay is due to the difficulties in getting the final plans approved by the Union Health Department.

EUROPEAN STATISTICS:

A. Home Visits by Health Visitors:

(Figures for 1951-1952 in brackets)

	First Visits	Subsequent Visits	Number of Sick Children Visited	Total Visits
1952-53 ..	3,493 (3,195)	8,047 (8,989)	961 (1,888)	12,503 (14,072)

As can be seen from figures more babies were born and about 300 more first visits were made. For the rest there is very little change in the figures compared to those of the previous year. It appears, however, that fewer visits were made to sick children. The reason for this is not clear.

B. Detailed Clinic Attendances:

(Figures for 1951-1952 in brackets)

	First Attendances 1952-1953	Re-Attendances 1952-1953	Total Attendances 1952-1953	Seen by Doctor 1952-1953
Central (Tuesday) ..	48 (69)	865 (781)	913 (850)	709 (601)
Central (Wednesday) ..	68 (65)	888 (735)	956 (800)	— (—)
Central (Friday) ..	62 (73)	835 (655)	897 (728)	— (—)
Bloed Street ..	60 (67)	946 (692)	1,006 (759)	9 (—)
West End ..	95 (76)	1,439 (1,401)	1,534 (1,477)	229 (316)
Proclamation Hill ..	41 (37)	600 (820)	641 (857)	85 (125)
Isacor ..	34 (37)	587 (746)	621 (783)	— (—)
Gerina ..	101 (74)	903 (778)	1,004 (852)	— (—)
Villieria 24th Ave. ..	93 (110)	922 (962)	1,015 (1,072)	227 (217)
Villieria 30th Ave. ..	72 (79)	539 (535)	611 (614)	— (—)
Wonderboom South ..	85 (97)	786 (942)	871 (1,039)	146 (227)
Mayville ..	96 (80)	841 (677)	937 (757)	— (—)
Capital Park ..	71 (90)	761 (980)	832 (1,070)	— (—)
Hatfield ..	70 (54)	796 (532)	876 (586)	— (—)
New Muckleneuk ..	66 (59)	739 (555)	805 (614)	— (—)
Sunnyside (Tuesday) ..	16 (—)	130 (—)	146 (—)	— (—)
Sunnyside (Wednesday) ..	133 (91)	1,232 (686)	1,365 (777)	— (—)
Riviera ..	48 (50)	632 (528)	680 (578)	97 (87)
Salvokop ..	12 (10)	250 (373)	262 (383)	— (—)
Danville ..	48 (62)	972 (851)	1,020 (913)	338 (384)
Defence Reserve ..	4 (7)	210 (171)	177 (178)	— (—)
Armstrong Berning ..	31 (41)	240 (366)	271 (407)	63 (68)
Arcadia ..	94 (63)	926 (761)	1,020 (824)	— (—)
Showgrounds ..	11 (10)	411 (344)	422 (354)	— (—)
Hercules ..	176 (185)	3,467 (3,846)	3,643 (4,031)	1,017 (1,228)
Booysens ..	73 (61)	1,073 (1,452)	1,146 (1,513)	— (—)
Mountain View ..	54 (63)	642 (528)	696 (591)	— (—)
*Pretoria Gardens ..	74 (—)	739 (—)	813 (—)	— (—)
*Riefontein North ..	50 (—)	373 (—)	423 (—)	— (—)
	1,886 (1,714)	23,744 (21,719)	25,630 (23,433)	2,911 (3,237)

These figures show very little change.

* These clinics were only opened this year.

C. European Ante-Natal Clinics:

(Figures for 1951-52 in brackets)

	Central 1952-1953	Danville 1952-1953	Hercules 1952-1953	Total 1952-1953
No. of new cases ..	352 (344)	43 (49)	113 (127)	508 (520)
Total attendances ..	1,848 (1,713)	387 (328)	654 (629)	2,889 (2,670)

Three European Ante-Natal clinics are conducted. Our general impression is that the expectant mothers are becoming more aware of the value of proper Ante-Natal care. The attendance at the exercise classes is increasing.

The Pretoria Dental Clinic is providing special facilities for the expectant mother. We are still, however, experiencing considerable difficulty in convincing the patients that dental treatment during pregnancy is both safe and necessary.

DENTAL CLINIC ATTENDANCES:

No. of cases which attended Dental Clinic 147

D. IMMUNIZATION CLINICS

(Figures for 1951-1952 in brackets)

No. of cases immunized against Diphtheria	972 (604)
No. of cases immunized against Whooping Cough	709 (343)

After the marked decline which was noticed during 1950-1951 there is a decided increase in the attendances at the Immunization Clinics. This can probably be because the association of immunization with the development of Poliomyelitis is fading in the public mind.

Now that it has been proved to the satisfaction of most doctors that Whooping Cough immunization has real value one hopes that the prejudice against it will disappear from the professional as well as the lay mind.

MIDWIFERY SUPERVISION

(Figures for 1951-1952 in brackets)

No. of midwifery bags inspected	77 (84)
Special visits to midwives	18 (27)
Visits to midwifery cases	4 (3)
Visits to maternity homes	19 (28)

Some difficulty has been experienced in the supervision of registered unqualified midwives. Apart from local difficulties it appears that the regulations under which we have been working for all these years are *ultra vires*. Our co-operation with the Union Department of Health and the Nursing Council has, however, been very cordial and it is hoped that uniform and more satisfactory regulations will soon be available.

NON-EUROPEAN CHILD WELFARE

Clinics are still conducted in the three areas. Atteridgeville, Bantule and the Compound.

New clinics were not opened but a steady increase in the work has made the appointment of an additional non-European nurse and a non-European midwife essential. As non-European housing has become such an acute problem we were forced to provide accommodation for our staff in Bantule.

HOME VISITS

(Figures for 1951-1952 in brackets)

	Compound			Atteridgeville Natives	Bantule Natives
	Natives	Asiatics	Eurafricans		
First visits to newly born infants (1951-1953)	140 (112)	203 (213)	90 (100)	436 (426)	256 (271)
Subsequent visits (1952-1953)	698 (968)	1,830 (2,038)	1,209 (1,987)	7,297 (7,454)	3,822 (337)
Visits to sick children (1952-1953)	34 (36)	58 (89)	93 (76)	238 (224)	333 (309)
No. of sick children visited (1952-1953)	24 (28)	52 (66)	47 (78)	175 (165)	276 (303)

CHILD WELFARE CLINIC ATTENDANCES

(Figures for 1951-52 in brackets)

	Compound			Atteridgeville Natives	Bantule Natives
	Natives	Eurafricans	Asiatics		
First attendances 1952-1953	717 (724)	127 (182)	86 (122)	372 (380)	282 (200)
Re-attendances 1952-1953	2,705 (2,566)	2,350 (2,932)	1,664 (1,664)	10,737 (9,812)	6,185 (4,676)
Seen by doctor 1952-1953	655 (594)	898 (954)	336 (382)	3,286 (2,890)	648 (622)

The attendance at the Native Child Welfare Clinic at the Compound is out of all proportion to the small number of births in the area. 140 First visits were paid to native babies in this area, whereas 717 first visits were paid and the re-attendances amounted to 2,705 and 655 children were seen by the doctor at this particular clinic. These figures are an indication of the large number of cases from the Peri-Urban Areas who are being attended to at this clinic.

During the year we came to a satisfactory arrangement with the Peri-Urban Areas Health Board in connection with the treatment of non-European patients from their area. Accurate records will now be kept of such attendances at each clinic and the Peri-Urban Areas Health Board will make a small financial contribution accordingly.

To cope with the abnormal Peri-Urban influx it was necessary to appoint a part-time Medical Officer to assist at the Ante-Natal clinics.

ANTE-NATAL CLINICS

(Figures for 1951-1952 in brackets)

	Compound		Atteridgeville Natives	Bantule Natives	Total
	Natives	Eurafricans and Asiatics			
No. of cases reporting at clinic 1952-1953..	1,500 (948)	162 (147)	464 (448)	233 (290)	2,359 (1,833)
No. of attendances 1952 1953	4,852 (3,928)	851 (739)	3,051 (2,560)	1,456 (1,575)	10,210 (8,802)

As in the case with the European Ante-Natal figures there is a steady increase in the attendance at these clinics and at some centres the increase is very marked indeed. This is due to the fact that no other service of this nature exists inside Pretoria or in the Peri-Urban Areas and also because the non-European is beginning to appreciate the value of Ante-Natal care and proper help and facilities at the confinement.

MIDWIFERY

Housing conditions at Bantule are on the whole so crowded that very few deliveries can be conducted in the homes of the patients. Most of them are therefore referred to the General Hospital or the Little Flower Mission.

At the Compound our District Midwifery Services has been stopped entirely because the demand for it was very small and because there are 4 private midwives in practice.

In Atteridgeville an additional midwife had to be appointed and they did 259 deliveries on district.

IMMUNIZATION CLINICS

(Figures for 1951-52 in brackets)

No. of cases immunized against Diphtheria	316 (1,291)
No. of cases immunized against Whooping Cough	263 (275)

The drop in the number immunized is because last year several school groups were immunized.

The incidence of Diphtheria amongst non-Europeans is decidedly on the increase.

FEEDING SCHEMES

The feeding of school children, pre-school children and infants has been maintained as in the past. The feeding of the school child has, however, become increasingly difficult because the subsidy has remained fixed at 1½d. per head, whereas all the ingredients have risen substantially in price.

At the infants' feeding scheme where we are not limited to the same extent, valuable work is being done. Several children with Tuberculosis in the initial stages are being fed there during the afternoon and come to get their half pint of milk during the morning. The group is still too small to draw any definite conclusions but we think that it has helped in the treatment of the tuberculosics.

In general, malnutrition amongst infants has practically disappeared from Bantule where this infant feeding scheme is conducted.

HEALTH EDUCATION

Included in our health educational programme at the Child Welfare and Ante-Natal centres the following lectures were included :-

- (1) "What can we do for Mental Health?"
- (2) "Fairplay." (Dealing with Child Welfare.)
- (3) "Die Wenslikheid om die Vyfjarige Skool-toe te stuur."
- (4) "Voorgeboortelike Versorging."
- (5) "The Physical Growth and Development of the Normal Child."
- (6) "Voorbereiding vir die Kraam deur Oefeninge."

Requests by non-Europeans for the use of the hall in Atteridgeville clinic for concerts and functions are increasing and it shows that this hall fills a real need.

PRETORIA DENTAL CLINIC

For the period April, 1952, to March, 1953

1. GRANTS-IN-AID:

As a result of recommendations put forward by a sub-Committee appointed to go into the finances of the Clinic, the Union Department of Health increased its grant from £2,500 to £3,100 per annum. The City Council also increased its grant from £1,750 for Europeans and £700 for non-Europeans—which grant had previously to be shared equally with the University Dental Hospital—to £3,100 per annum. £700 of this grant is specially ear-marked for non-Europeans. The Transvaal Education Department gave a further £544 in respect of services rendered to Country School Children thus bringing its grant up to £6,044 per annum.

2. DENTAL SURGEONS:

The establishment as at present is five dental officers. One is serving in a temporary capacity and one part-time dental surgeon is in charge of the Orthodontic Department.

Three full-time dental surgeons are employed on services for school children as also half the time of a fourth the other half being utilised for Ante- and Post-Natal cases and for the Pre-School children. The fifth dentist is fully employed on non-European services.

3. SCHOOL SERVICES:

The result of the school inspections shows :—

No. of Schools at which inspections were conducted	.. ..	49
No. of children examined	.. ..	26,844
No. of children examined requiring treatment	.. ..	17,374
No. of Indigent Children examined	.. ..	16,302
No. of Indigent Children examined requiring treatment	.. ..	12,617
No. of Indigent Children examined requiring no treatment	.. ..	3,685

Statistics for the Boys High, Girls High, Clapham High, Seuns Hoër and Meisies Hoër Schools are not included in the above figures, as the necessary information was not supplied by these schools.

MORNING CLINICS (at Clinic):

No. of Clinics held	.. ..	27
No. of Children treated	.. ..	1,092
No. of teeth extracted	.. ..	1,429

TREATMENT OF SCHOOL CHILDREN: COMPARATIVE TABLE.

Period	No. Children Examined	No. New Patients Treated	No. of Re-visits	No. Discharged Treatment Completed	No. Casuals Discharged Treatment Completed	No. of Fillings	No. of Extractions	Total Operations
Nov. 1945	11,911	3,055	2,769	292	—	2,044	3,343	7,335
Oct. 1946								
Nov. 1946	18,278	4,671	8,055	788	976	7,903	3,313	20,169
Oct. 1947								
Nov. 1947	18,253	5,275	5,371	1,174	497	6,382	6,360	17,814
Oct. 1948								
Nov. 1948	2,969	7,158	5,003	1,310	484	8,778	6,788	19,929
Oct. 1949								
Nov. 1949	1,355	3,825	1,730	500	186	3,192	4,097	9,153
Mar. 1950								
Apr. 1950	23,637	6,087	5,834	1,453	437	8,663	7,155	20,785
Mar. 1951								
Apr. 1951	24,363	6,847	7,137	1,300	540	9,976	8,385	22,888
Mar. 1952								
Apr. 1952	26,844	9,181	7,875	1,581	441	11,692	10,639	27,827
Mar. 1953								

GOLD INLAYS AND PROSTHETICS

Forty-eight gold inlays were done for school children and twenty-seven partial plates were supplied.

THE MOBILE DENTAL UNIT

The Unit was used for extraction services at ten schools. These schools were visited two or three times and on completion, of these sub-Clinics daily sessions for conservative treatment were organised (i.e., from 14th March).

No. of Children treated	.. .. .	3,499
No. of teeth extracted	.. .. .	4,334
No. of Fillings done..	.. .. .	81
No. of Total operations	.. .. .	4,524

The Meerhof Chronic Sick Home was visited on four occasions.

No. of Children treated	.. .. .	102
No. of Fillings done..	.. .. .	63
No. of Teeth extracted	.. .. .	31

5. ORTHODONTIC SERVICES:

Twenty-eight Orthodontic appliances were supplied to patients during the period under review. Seven appliances were repaired. The demand for orthodontic treatment is steadily increasing.

6. ANTE- AND POST-NATAL DEPARTMENT:

It has been found that many of the patients referred to the Clinic by the City Health Department fail to report for treatment.

7. PRE-SCHOOL CHILDREN:

This Department is run in conjunction with the Ante- and Post-Natal Department and is under the care of the same operator. Appointments are well kept and this section is showing great progress.

8. NON-EUROPEANS:

The Pre-School and Adults Departments show a marked increase in attendances and also in treatments.

EUROPEAN

1ST APRIL, 1952 TO 31ST MARCH, 1953	PATIENTS					EXAMINATIONS.	TREATMENTS					Total Operations	
	ADMITTED			DISCHARGED			Fillings	Root Therapy	Pro- phylaxis	Extrac- tions	Other Treatments		
	New	Re-visits	Total	Treatment Completed	Casuals								Total
Pre-School Children	236	201	437	61	13	74	335	—	4	336	7	849	
School Children	9,181	7,875	17,056	1,581	441	2,022	11,692	46	102	10,639	454	27,827	
Non-Government Schools	107	193	300	45	5	50	338	6	3	93	16	560	
Ante- and Post-Natal	153	211	364	48	4	52	349	2	27	241	41	798	
TOTAL	9,677	8,480	18,157	1,735	463	2,198	12,712	54	136	11,309	518	30,034	

NON-EUROPEANS

Pre-School Children	727	206	933	32	—	32	213	—	—	507	291	1,475
School Children	1,072	67	1,139	5	7	12	46	—	—	1,209	62	1,993
Adults	6,611	713	7,324	—	—	—	64	—	3	9,623	162	10,360
TOTAL	8,410	986	9,396	37	7	44	323	—	3	11,339	515	13,828

PRETORIA NURSERY SCHOOLS

There have been no new developments as regards Nursery Schools in Pretoria. The position remains as reported in the previous Annual Report.

MEDICAL EXAMINATIONS CONDUCTED BY MEDICAL OFFICERS IN THE HEALTH DEPARTMENT

A total of 564 such Medical examinations were conducted. This figure includes Medical examinations of persons entering the Municipal service, special Medical examinations under the Workmen's Compensation Act or for Pension Fund or other purposes.

ABATTOIR AND MEAT SUPPLIES

Slaughtering Statistics

Animals Slaughtered:

	1952-1953	1951-1952
Oxen	43,049	39,811
Cows	10,832	10,815
Bulls	613	209
Calves	2,510	2,747
Sheep	135,860	73,040
Goats	2,509	4,586
Pigs	20,444	28,765
	<u>215,817</u>	<u>159,973</u>

Carcases, Organs, Condemned for all Causes:

	Cattle	Calves	Sheep and Goats	Pigs
Carcases	1,317	37	1,087	495
Quarters	146	—	140	—
Livers	6,973	—	38,297	—
Lungs	3,052	—	898	—
Plucks	677	—	3,350	699
Heads	2,602	—	—	118
Tongues	85	—	—	118
Hearts	47	—	—	—
Kidneys	351	—	—	—
Spleens	2,512	—	—	—
Tripes	2,515	—	—	—
Intestines	2,512	—	37,064	—
Tails	58	—	—	—
Udders	26	—	—	—
Viscera	1,483	—	1,087	—

Imported Meat Examined:

	Examined	Condemned	Detained for Cold Storage Treatment
Beef Carcases	3,295	1	186
Beef Quarters	14	—	—
Sheep Carcases	3,200	—	—
Pork Carcases	1,013	11	—
Pork Quarters	2	—	—

Total Condemnations:

	1952-1953		1951-1952	
	Percentage	Weight	Percentage	Weight
Cattle	2.413	362.003 Tons	2.260	322.980 Tons
Calves	2.270	1.289 Tons	2.584	1.584 Tons
Sheep and Goats	0.785	16.365 Tons	0.329	4.382 Tons
Pigs	2.421	25.587 Tons	0.320	45.185 Tons
		<u>405.544 Tons</u>		<u>374.131 Tons</u>

Diseases Encountered:
Cysticercosis:

		1952-1953			
		Total No.	Incidence %	% Condemned	% Detained
Cattle	.. ..	3,196	5.865%	1.302%	4.563%
Pigs	.. ..	421	2.059%	1.555%	0.504%

		1951-1952			
Cattle	.. ..	3,602	7.085%	1.430%	5.655%
Calves	.. ..	1	0.030%	—	0.030%
Pigs	.. ..	904	3.142%	2.290%	0.852%

Organs for cysticercosis affected cattle detained for cold storage treatment :—

Tongues 2,484. Tails 2,484. Livers 1,956. Hearts 2,445.

Tuberculosis:

		1952-1953		
		Total Incidence	% Generalised No. of C/S Cond.	% Localised
Cattle	.. .. .	37 or 0.067%	0.049%	0.018%
Pigs	.. .. .	169 or 0.826%	0.249%	0.577%
		1951-1952		
Cattle	.. .. .	41 or 0.080%	0.047%	0.033%
Calves	.. .. .	1 or 0.036%	0.036%	—
Pigs	.. .. .	338 or 1.175%	0.351%	0.824%

Condemnations other than for Measles and Tuberculosis:

Diseases	Cattle	Qrts.	Afftd. Organs	Veal C/S	Sheep C/S	Sheep Qrts.	Afftd. Organs	Goat C/S	Pork C/S
Actinomycosis	1	—	32	—	—	—	—	—	—
Anaemia	1	—	—	—	26	—	—	—	—
Botriomycosis	—	—	—	—	—	—	—	—	4
Carcinoma	2	—	—	—	—	—	—	—	—
Caseous Lymphadenitis	—	—	—	—	228	122	5,831	2	—
Def. Bleeding	11	—	—	—	2	—	—	—	—
Dermatitis	—	—	—	—	—	—	—	—	1
Echinococcus Gen. ..	—	—	—	—	2	—	—	—	2
Emaciation	63	—	—	13	596	—	—	15	23
Emphysema	9	6	—	—	—	—	—	—	—
Enteritis	—	—	—	—	—	—	—	—	—
Ext. Bruising	153	102,051 lbs.	—	1	24	68 lbs.	—	3	872 lbs.
Follicular Mange ..	—	85	—	—	14	—	—	—	18
Gangrene	42	16	—	—	3	—	—	—	21
Hepatitis	4	—	—	—	—	—	—	—	—
Immaturity	—	—	—	5	—	—	—	—	—
Jaundice	13	—	—	1	43	—	—	1	—
Malignant Tumours ..	4	—	—	—	1	—	—	—	—
Melanosis	—	—	—	—	10	—	—	—	—
Moribund	11	—	—	—	93	—	—	1	—
Multiple Abscesses ..	56	40	—	—	4	—	—	—	8
Multiple Haemorrhages	—	—	—	—	—	—	—	—	4
Navil Ill.	—	—	—	29	—	—	—	—	—
New Growths	3	—	—	—	—	—	—	—	—
Oedema	1	—	—	—	—	—	—	—	—
Peritonitis	31	—	—	—	1	—	—	—	18
Pleuritis	5	—	—	1	3	—	—	—	5
Pleurisy and Peritonitis	92	—	—	—	—	—	—	—	1
Pyæmia	5	—	—	1	—	—	—	—	—
Sarcosporidiosis	2	—	—	—	—	—	—	—	2
Septic Mastitis	5	—	—	—	—	—	—	—	—
Septic Metritis	22	—	—	—	8	—	—	—	—
Septic Nephritis	7	—	—	1	5	—	—	—	—
Septic Orchitis	—	—	—	—	—	—	—	—	9
Septic Pneumonia ..	23	—	—	6	12	—	—	—	4
Pericarditis	2	—	—	—	—	—	—	—	—
Uraemia	2	—	—	—	—	—	—	—	—

All cold storages, wholesale and retail butcher shops were inspected by the Assistant Chief Health Inspector as a follow up inspection and check on imported meat being submitted for inspection and stamping at the City Abattoir.

SLAUGHTERING STATISTICS FOR HORSES

No. Slaughtered:

Horses 1,217. Donkeys 453.

Condemnations:

Diseases	Horses	Donkeys
Emaciation	6	2
Def. Bleeding	1	—
Ext. Bruising	1	—
Enteritis	1	—

Weights of Condemned Horse and Donkey Meat:

3,642 lbs. or 1·821 Tons.

SLAUGHTERING STATISTICS FOR POULTRY

Fowls	Chickens	Turkeys	Ducks	Geese	Mus. Ducks	G. Fowls	Pigeons	Bantams
48,498	1,488	2,687	2,422	42	369	12	35	9

Diseases Encountered	Fowls	Turkeys	Ducks	Chickens
Carcinoma	1	—	—	—
Dead Poultry	90	2	1	19
Dermatitis	2	—	—	—
Emaciation	7	1	—	—
Egg-bound	31	—	—	—
Enteritis	12	—	—	—
Ext. Bruising	6	—	—	—
Gne. T.B.	2	—	—	—
Gangrene	18	6	—	—
Hepatitis	6	—	—	—
Internal Abscesses	4	—	—	—
Mal. Tumors	3	—	—	—
Jaundice	1	—	—	—
Mult. Abscesses	5	—	—	—
New Growths	39	—	—	—
Moribund	—	1	—	—
Nodular Tapeworm	8	—	—	—
Peritonitis	2	—	—	—
Sick Fowls	9	—	1	—
Pigmentation	2	—	—	—
Tumors	1	—	—	—

SLAUGHTERING STATISTICS FOR RABBITS

No. of Rabbits Slaughtered: 255.

MEAT SUPPLIES:

With the exception of a period of 9 weeks from the end of October to the beginning of January there were full supplies of meat during the year, and even during the worst weeks in that period there were fairly adequate supplies of mutton available. The number of cattle slaughtered increased from 50,835 in 1952 to 54,494 for the year under review while the number of sheep increased from 73,040 to 135,860. The decrease in the numbers of pigs slaughtered is due entirely to lack of consumer demand when adequate supplies of beef and mutton are available, as there are always large numbers of pigs offered for which permits cannot be obtained.

CONDEMNATIONS:

In spite of the significant decrease in the percentage incidence of Cysticercosis in cattle the total percentage of beef condemned rose from 2·260 per cent. to 2·413 per cent. and the total weight by nearly 40 tons. This is due entirely to increased condemnation for bruising.

Bruising and injuries to stock involving condemnation of the meat are due to two main factors :—

- Horns, which accounts for about 75 per cent. of injuries.
- Inadequate transport facilities.

The figures given for the losses due to this cause are for condemnation after slaughter and do not include loss by death during transit which is also considerable. This loss is to a large extent preventable and can be reduced to insignificant proportions. It is surprising therefore that the State Department of Agriculture and the Meat Board are not doing more in the way of preventive propaganda.

The further decline in the incidence of Cysticercosis in cattle is, regrettably, not due to improved farming hygiene. As reported last year this decline is again due to proportionally increased supplies from clean areas such as Southern Bechuanaland, as these figure, kindly supplied by the District Representative of the Meat Board, show.

PERCENTAGE OF CATTLE RECEIVED FROM VRYBURG AREA

		1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
1951-1952	.. .. .	—	12	12	20
1952-1953	.. .. .	20	20	20	35

ABATTOIR CHARGES

The new scale of charges for abattoir facilities came into operation in June of this year, and whilst it is less than the Council asked for, the increased revenue will probably be sufficient to wipe out the deficit in the abattoir accounts for the coming year.

BY-PRODUCTS:

The new bleeding chamber came into operation during the year. The increase in the amount of blood recovered for manufacture of blood meal has been far greater than was anticipated with the result that further equipment will have to be purchased in order to make the best use of the raw material available.

The Price Controller has also granted an increased price for all controlled abattoir by-products other than bone meal. In the case of Carcase Meal the price is graded according to quality which is an incentive for production of a better product and incidentally obtaining more revenue from this source.

In the revised draft regulations for Slaughtering and Meat Inspection now being considered by the Union Health Department an attempt has been made to clarify the question of ownership of abattoir by-products.

IMPROVEMENTS AND ADDITIONS TO THE ABATTOIRS:

During the year the Council agreed to the appointment of a Consulting Engineer to advise on the question of improvements to the existing facilities in order to make the present abattoirs serve the needs of the City for a further period of 10-15 years. Capital and even essential maintenance expenditure have been sharply curtailed for the past ten years or more as it was argued that such expenditure was not warranted in view of the general agreement that Pretoria should have a new abattoir on a site further removed from the centre of the city. Now that it has become apparent that capital funds for such an undertaking will not be forthcoming the long overdue improvements and additions may be effected.

CONTROL OF DAIRIES AND MILK SUPPLIES

INTRODUCTION:

Although we are still acutely aware of the difficulties in eradicating diseases like Tuberculosis and Contagious Abortion in cattle and of the continual danger of an outbreak of Typhoid, the scheme for compulsory pasteurisation of all milk consumed in Pretoria which was approved of by the City Council many years ago, has not yet received the blessing of the Provincial Administration. It is hoped that the Commission of Enquiry into our proposed compulsory legislation for pasteurisation, which was appointed last year, will commence to hear evidence in the near future, and that our pasteurisation By-laws will be promulgated without further delay.

There are at present 5 private concerns in Pretoria pasteurising approximately 80 per cent. of the milk consumed. These concerns are only too willing to improve their plants and to give the best possible service. With the increasing trend for producers to move further away from the City, the keeping quality of milk pasturised by these plants is as good as ever before and the danger of an outbreak or spread of a milk-borne disease is eliminated.

There has been much talk about the newer process of heat treated milk, namely sterilization of milk. One plant is already operating in this country. We are making a special study of the digestibility, flavour and food value of this sterilized product before we will be able to give our final opinion.

During the year under review, a midsummer drought during January and February was experienced resulting in a temporary shortage of milk. To supplement this shortage we were reluctantly compelled to allow the introduction of industrial milk under temporary permit. This milk was pasteurised. It is hoped that this unsatisfactory position will be prevented in future by increasing the number of producers in areas further afield.

On the 3rd September, 1952, Dr. T. Veenstra was appointed to the vacant post of Assistant Veterinary Officer.

DAIRY LICENCES:

During the year 366 applications for dairy licences from producers, producer-distributors, milk shops and tearooms selling milk in sealed containers only, were dealt with. Details of licences dealt with :—

	New	Surrendered	Renewals Refused	New Applicants Refused	Transferred	New Applicants Pending	Increase or Decrease
Producers ..	57	36	—	4	10	4	+21
Producer-Distributor	2	3	—	—	—	—	— 1
Distributors ..	9	9	—	—	5	—	—
Tearooms ..	28	5	—	—	3	—	+23
TOTAL ..	96	53	—	4	18	4	+43

SITUATION OF PREMISES

The 366 licensed dairy premises were situated as follows :—

	In Mun. Area	Within 10 miles	11-25 miles	26-50 miles	51-75 miles	76-100 miles	101-150 miles	151-200 miles	Over 200 miles	Total
Producers ..	3	23	70	23	6	10	72	25	—	232
Producer-Distributors	7	6	1	—	—	—	—	—	—	14
Distributors ..	83	—	—	—	—	—	—	—	—	83
Tearooms ..	37	—	—	—	—	—	—	—	—	37
TOTALS ..	130	29	71	23	6	10	72	25	—	366

A further increase will be noticed in the number of producers who are from over 101-150 miles from the City. This is because more farmers in the Carolina area are introducing dairying into their system of farming. The collecting depot at Carolina has been extended to meet the increased supplies.

MILK SUPPLIES:

No. of premises where milk is produced	246
Approximate number of cows kept (in milk)	10,185
Approximate number of cows kept (dry)	4,921
Approximate number of gallons produced daily	18,598

ESTIMATED TOTAL DAILY GALLONAGE CONSUMED AS AT 30th JUNE, 1953

	Gallons per day
From Producers	17,963
From Producer-Distributors	635
Imported (Industrial Milk during shortage)	300
TOTAL	18,898

There was a slight increase in the daily gallonage consumed.

PERSONNEL EMPLOYED IN MILK TRADE:

Employed by	Europeans	Natives	Total
Producers	271	1,187	1,458
Producer-Distributors	16	52	68
Distributors	194	466	660
TOTAL	481	1,705	2,186

TYHPOID TESTING OF DAIRY EMPLOYEES:

The voluntary free testing for the carrier state of Typhoid was continued as in the past. The following data are for persons handling milk only.

	Producers	Producer-Distributors	Distributors	Total
Dairies which submitted employees	7	5	31	43
Dairy employees tested	71	34	342	447
European employees tested	2	2	56	60
Non-European employees tested	69	32	286	387
Europeans Vi positive	Nil	Nil	Nil	Nil
Non-Europeans Vi positive	9	4	13	26
Percentage European Vi positive	Nil	Nil	Nil	Nil
Percentage Non-European Vi positive	—	—	—	6.7%

DAIRY INSPECTIONS:

Regular inspections of all premises of producers and producer-distributors were again undertaken. With ever increasing number of farmers in the Carolina and Lydenburg areas it is becoming more and more difficult to maintain strict control due to distances.

The veterinary inspection of all herds was maintained by the Veterinary Officer and the Assistant Veterinary Officer. Most farmers are making use of this service and are now regularly seeking advice in regard to problems like mastitis, feeding, diseases generally and hygiene.

PARTICULARS OF INSPECTIONS**INSPECTION OF DAIRIES (PRODUCERS AND PRODUCER-DISTRIBUTORS):**

During day milking	236
During early morning milking	91
At other times	1,491
Contraventions dealt with	728

HERD INSPECTIONS (VETERINARY OFFICERS):

Number of animals inspected	7,324
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INSPECTIONS OF MILK DEPOTS:

During day	1,427
During early morning	50
Night inspections	Nil
Contraventions dealt with	397

DISTRIBUTION AND STREET INSPECTIONS:

During day	669
During early morning	371
Contraventions dealt with	75
Other inspections and enquiries	131
Complaints dealt with	47
Written notices served	146
Notices complied with	85

MILK SAMPLING:**1. BACTERIOLOGICAL EXAMINATION OF MILK SAMPLES:**

- (a) **Plate Counts** (samples taken under Dairy By-laws, standard not more than 200,000 micro-organisms per m.l. and no B. coli in 0.01 m.l. milk).

Samples taken	391
Conforming to legal standard	198
Containing excess micro-organisms (warnings issued)	35
Containing excess micro-organisms (prosecuted)	—
Containing excess B. coli (warnings issued)	84
Containing excess B. coli (prosecuted)	—
Containing excess B. coli and micro-organisms (warnings issued)	73
Containing excess B. coli and micro-organisms (prosecuted)	1
Total number of warnings issued	192
Total number of prosecutions	1

- (b) **Breed Smear Counts** (done by Laboratory Assistant):

Number of milk samples taken	19,906
These samples were classified as follows:—	
Very good	4,309
Good	5,045
Fair	5,182
Unsatisfactory	5,370

19,906

Daily samples of all milk supplied to the pasteurisation plants were taken and examined by the above method and recorded in order to keep a check on the standard of hygiene on farms. It is hoped to extend this work to the smaller receiving depots. Only bulk samples from the receiving depot at Carolina could be examined.

(c) **Presumptive Coliform Tests:**

Number of samples examined	.. .. .	1,870
Number of samples positive	.. .. .	508
Number of samples negative	.. .. .	1,362

These samples were taken from the pasteurisation depots only and serve the purpose of giving us an indication of the standard of hygiene maintained by the various producers.

(d) **Mastitis Test:**

No individual cows were examined, but all milk samples of herds taken for the Breed Smear Counts were also examined for mastitis. The farmers concerned were then informed during the subsequent herd inspection whether there was an indication of the presence of mastitis amongst their cows. We could not try to undertake the elimination of the disease in individual herds but farmers were given the necessary advice.

2. CHEMIC ANALYSIS:

(Samples taken under the Food, Drugs and Disinfectants Act.)

Samples taken	.. .. .	505
Satisfactory	.. .. .	332
Unsatisfactory (warnings)	.. .. .	151
Deficient in Milk Fat	.. .. .	14
Deficient in Solids not Fat	.. .. .	135
Deficient in Fat and Solids not Fat	.. .. .	2
Bad samples (prosecuted)	.. .. .	22
Made up as follows:—		
Deficient in Milk Fat and Solids not Fat	.. .. .	—
Deficient in Milk Fat	.. .. .	5
Deficient in Solids not Fat	.. .. .	—
Adulterated (added water)	.. .. .	15
Adulterated (added water). Forwarded to Union Health	.. .. .	2

3. DISC SEDIMENT TEST FOR VISIBLE DIRT:

Samples tested	.. .. .	1,129
Satisfactory	.. .. .	912
Not quite satisfactory (warnings)	.. .. .	204
Very unsatisfactory (severe warnings)	.. .. .	4
Final warnings	.. .. .	9
Prosecutions	.. .. .	—

4. PHOSPHATASE TEST FOR PASTEURISED MILK:

Samples tested	.. .. .	1,565
Satisfactory pasteurised	.. .. .	1,457
Slightly under pasteurised	.. .. .	74
Grossly under pasteurised	.. .. .	34

5. BIOLOGICAL TESTS OF MILK:

26 Samples of milk from producers were inoculated into guinea pigs. None of these were positive for T.B. and only one was positive for C.A. The facilities for biological tests are very limited.

6. MISCELLANEOUS TESTS:

Eleven samples of milk were subjected to the ring test for C.A. Of these four proved positive and two suspicious and five were negative.

After discussing these problems with the farmers it was found that when there was any suspicion of C.A. in a herd, most farmers went in for vaccination.

GENERAL REMARKS:

The Government is proceeding with the Interim Tuberculosis Scheme about which we reported last year. Few Farmers, however, are availing themselves of the facilities. Most farmers who had their entire herd tested for Tuberculosis refused or were not interested in further tests. Only one farmer who supplies milk to Pretoria applied for attestation under this scheme.

Until a price incentive for milk from accredited herds is given, farmers will not be interested in producing Tuberculosis free milk.

Many farmers are now making use of artificial insemination and improvement of dairy herds is assured.

ANIMAL POUNDS AND DIPPING TANKS:

The details of animals impounded in the two pounds are as follows :—

	No. of Animals Impounded	Pound Fees and Sales	Grazing
Hercules	938	£273 15 10	£46 15 6
West End	575	£219 17 1	— — —

No dipping tanks were in use during the year.

RECORD OF THE WORK OF THE HEALTH INSPECTORS

There are 42 Health Inspectors on the Staff. The work is divided into the following sections :—

1. District Health Inspectors.
2. Slum Clearance and Housing.
3. Foods.
4. Pest Control.
5. Dairies.
6. Abattoirs.
7. Infectious Diseases.

Each section is not, however, a watertight compartment and every Inspector in practice immediately attends to any unhygienic circumstance whether it is the direct concern of his section or not.

For the greater part of the year under review, the staff was well below the authorised establishment and in addition it was necessary to second relief staff to the Abattoir for the whole period.

It is pleasing to record once again that the usual high standard of hygiene has been maintained throughout the City, particularly in regard to establishments engaged in the preparation, handling and distribution of foodstuffs.

DISTRICT HEALTH INSPECTORS:

Each Inspector has an area allotted to him and he is responsible for the maintenance of a high standard of hygiene in his area. Private dwellings, factories, hairdressing saloons, fruit and food stores, hotels, boarding houses and every type of premises are under his constant supervision. When necessary, he consults with any of the "Specialist" sections.

He is responsible to ensure that before a licence is granted all matters pertaining to such a licence conform to all health requirements.

As a result of a system introduced during the year considerable improvement has been brought about in regard to newly licensed premises. If the premises for which an application for a licence is received is not up to the required standard, the Chief Licence Officer is advised accordingly and furnished with a complete list of the work to be done before the issue of a licence can be recommended.

The Chief Licence Officer advises the applicant accordingly, at the same time informing him not to proceed with the work unless and until he is officially advised that the Council is prepared to grant a licence. Should the Council be prepared to grant the licence he is informed of the fact and requested to advise the Department when the work is completed. If, after inspection, the work has been completed satisfactorily, the licence is issued.

This enables applicants to prepare themselves for the work required to be done and also prevents them spending money unnecessarily in the event of a licence being refused for reasons other than structural.

The following is a list of the types and numbers of licensed premises dealt with during the year. These premises were all inspected at regular intervals :—

	European	Non-European
Bakers and Confectioners	30	3
Butchers	108	33
Hotels	23	—
Tearooms and Restaurants	257	72
Native Eating Houses	6	13

Food Purveyors	312	228
Fishmongers	7	—
Fruiterers	349	162
Bioscope Tearooms	1	—
Hawkers and Pedlars	27	137
Mineral Water Factories	6	2
Grain Millers	3	—
Boarding and Lodging Houses	337	—
Launderers	9	8
Cobblers	73	19
Theatres	13	4
Public Halls	13	—
Market Stalls	57	—
Cycle Dealers	82	32
Billiard Rooms	3	2
Poulterers	28	—
Second-hand Dealers	37	4
Workshops	249	4
Milk Shops	36	—
Tannery	1	—
Fumigators	2	—
Woodsawyers	4	—
Brick Burners	1	—
Ice Cream Factories	2	—
Pawnbroker	1	—
Milk Producers	176	—
Dairies and Distributors	85	6
Hairdressers	98	15
Offal Dealers	1	—
Bio Operators	24	6
Undertakers	5	—
Turkish Baths	1	—

PLANS:

Every plan submitted to the City Council is carefully scrutinised. The Department does not approve of any plan unless it meets with modern health requirements. The difficulties and delays of the past are now avoided to a large extent by the ready co-operation of the Architects, many of whom discuss their schemes with us before drawing up and finally submitting plans. This has assisted in ensuring modern equipment in establishments engaged in the catering and food trades and better hygienic facilities in shops generally.

The following table summarises the plans examined during the year under review :—

BUILDING PLANS

Month	No. of Plans First Submission	No. of Plans re-submissions	Preliminary Plans	Plans sub- mitted by Architects	Total
July, 1952	209	90	9	5	313
August, 1952	203	100	11	6	320
September, 1952	139	64	6	1	210
October, 1952	179	111	13	5	308
November, 1952	131	92	11	2	236
December, 1952	86	52	2	—	140
January, 1953	133	62	2	5	202
February, 1953	158	74	3	3	238
March, 1953	154	59	6	5	224
April, 1953	177	67	4	4	252
May, 1953	165	66	3	4	238
June, 1953	160	49	—	1	210
TOTAL	1,894	886	70	41	2,891

EARLY MORNING AND EVENING INSPECTIONS

Each District Health Inspector carries out routine early morning inspections on at least one morning per month, in addition to late evening or night inspections as and when required.

The following is a table of the types and numbers of extra hour inspections referred to above which have been undertaken during the year.

EARLY MORNING INSPECTIONS

Type of Inspection	Total No. of Inspections	Satisfactory	Unsatisfactory Inti- mations Given or Written Notices Served	Evening Inspections
Food Delivery Vehicles	572	397	175	2
Butcher Shops	619	435	184	—
Restaurants and Tearooms	327	191	136	4
Bakers and Confectioners	56	34	22	—
Milk Depots	198	164	34	—
Hotels and Boarding Houses	20	12	8	—
Native Eating Houses	13	8	5	—
Nuisances—re-inspected	22	12	10	—
Green Grocers	41	24	17	—
Keeping of Animals	40	27	13	3
Provision Stores	58	49	9	—
Miscellaneous	20	16	4	1
TOTAL	1,986	1,369	617	10

The following is a summary of work done by the District Health Inspectors in regard to Rodent, Mosquito and Fly Control.

PEST CONTROL REPORT

Inspections by District Inspectors

Year 1952-1953

Rodents:

1. Complaints investigated	338
2. Premises inspected and advice given	2,814
3. Notices and intimations to use traps or poison	2,112
4. Notices served requiring rodent proofing of premises	113
5. Notices served under 3 & 4 above, complied with	93
6. Existing buildings made rodent-proof	99
7. New Rodent-proof buildings completed	48
8. Prosecutions for failure to comply with regulations	1
9. Accumulations of rubbish or lumber likely to harbour rodents cleaned up or removed	2,172
10. No. of rodents seen killed or reported killed	5,540
11. Ratproof animal food bins provided	45
12. Matters referred to Pest Control	49
13. Matters concerning rodent control referred to other departments	—

Mosquitos:

1. Complaints investigated	132
2. Inspections made	1,935
3. Notices and intimations given	940
4. Notices served under (3) above complied with	48
5. Prosecutions for failure to comply with regulations	4
6. Breeding places eliminated	333
7. Advice given re mosquito control	968

Flies:

1. Complaints investigated	118
2. Inspections made	1,624
3. Notices and intimations given	1,001
4. Notices served under (3) above complied with	73
5. Prosecutions for failure to comply with regulations	6
6. Breeding places eliminated	205
7. Advice given re fly control	890

In all, the District Health Inspectors carried out 49,387 inspections and issued 18,209 verbal and written warnings during the year.

FOOD SECTION

This Section is responsible for ensuring that all food produced, handled or distributed on every type of premises ranging from the more elaborate licensed hotels to the smallest native eating houses are hygienically handled, prepared or distributed. Regular samples are taken of

public water supplies, both at the source and in the course of distribution throughout the City, water in swimming baths, and all types of foodstuffs, ranging from condiments to prepared meats. These are analysed chemically and/or bacteriologically. Where any sample is found to be below standard, a warning or a prosecution follows.

Large quantities of foodstuffs, which were found to be unfit for human consumption, were condemned. A Health Inspector is in daily attendance at the early morning market.

The degree of co-operation between the Department and food vendors is so high that unsound foodstuffs are seldom found exposed for sale; the vendor examines his stocks at regular intervals and surrenders to us any unsound foodstuffs he may find.

A total of 283 consignments of foods were seized or surrendered and the following quantities were condemned as unfit for human consumption :—

Jam	5,872 lbs.	Pickles	1,366 jars
Fish (fresh)	3,380 lbs.	Sauces	
Confectionery	6,619 lbs.	Mayonnaise	
Dried Fruits	677 lbs.		
Cereals	334 lbs.	Meat	10,250 tins
Fresh and prepared meats ..	653 lbs.	Fruit	
Dressed Poultry	244 lbs.	Vegetables	
Butter	371 lbs.	Fish	
Cheese	1,133 lbs.	Milk	645 packets
Green Mealies	51 bags	Cereals	
Eggs	30 doz.	Bananas	
			199 Crates

The following Food Samples were taken for Chemical and Bacteriological analysis :—

Chemical:

Article	No. of Samples	Satisfactory	Unsatisfactory
Mealie Meal	11	11	—
Flour	5	5	—
Pepper	2	2	—
Rice	3	2	1
Ice Cream	129	111	18
Minced Meat	38	36	2
Beef Sausages	86	80	6
Fruit Drinks	5	4	1
Sugar	15	15	—
Currants	6	6	—
Dates	3	3	—
Raisins	6	6	—
Sultanas	1	1	—
Dried Peaches	4	4	—
Prunes	3	3	—
Cheese	—	—	1
Pork Sausages	8	6	2
Boerwors	4	3	1
Dripping	3	3	—
Polony	4	4	—
Tapioca	1	1	—
Cocoanut	3	3	—
Tea	1	1	—
Icing Sugar	3	3	—
Coffee	6	6	—
Spices	17	15	2
Mixed Dried Fruit	3	3	—
Sago	3	3	—
Lard	1	1	—
Barley	1	1	—
Grain Flour	1	1	—
Pea Flour	1	1	—
Bakers' Scones	1	1	—
Mosala	1	1	—
Lentils	1	1	—
	384	350	34

Bacteriological:

Ice Cream	146	107	39
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Water samples taken include those from the City's Water Supplies at various points, also at swimming baths and from wells and boreholes used for domestic purposes within the Municipal area.

No. of Samples	Satisfactory	Unsatisfactory	Not satisfactory for use unless chlorinated
267	135	100	32

Of 30 boreholes and wells tested 29 were found to be unsatisfactory. Notices were served on the owners of these properties to connect up to the Municipal water supply system.

In the enforcement of the Foods, Drugs and Disinfectants Act and other legislation pertaining to food for human consumption, 4 prosecutions were instituted and 63 written warnings were issued.

MUNICIPAL MARKET

Daily inspections of all produce on the early morning Municipal Market were carried out and the following quantities of fruit and vegetables were condemned.

Baskets.. .. .	20	Sugarbags	760
Bundles	59	Pockets	7,609
Lots	103	Punnets	280
Trays	483	Crates	441
Bags	588	Boxes	2,926

In addition there were 42 dozen eggs, 1,127 watermelons, 172 pumpkins and 125 sweetmelons seized and condemned as unfit for human consumption.

Dressed Poultry Examined:

Number examined	3,882
Number condemned	239
Percentage condemned	6.1%

Game (Antelope):

Number examined	466
Number condemned	10
Percentage condemned	2.1%

Game (Birds):

Number examined	517
Number condemned	32
Percentage condemned	6.1%

Hares:

Number examined	12
Number condemned	Nil

This section carried out 4,111 inspections and issued 830 verbal and written warnings during the year.

PEST CONTROL SECTION

This section is responsible for all anti-rodent, anti-mosquito and anti-bilharzia control throughout the City. Active measures for the destruction of rodents and mosquitoes throughout the City are regularly undertaken on Municipal property, and where necessary, assistance or advice is given on private premises. Mosquito breeding is kept down by dressing banks of streams and spruits, cutting away vegetation, draining of vleis, grading furrows and spraying breeding places which cannot be otherwise treated. Advice is given on the removal or eradication of bats, fleas, ants and all insect pests. 27 Natives and 5 Europeans other than Health Inspectors, are employed on this section. Wherever necessary, specimens of rodents, mosquitoes, snails and other likely vectors of disease are sent for examination. This section did 11,290 inspections during the year ended 30th June, last.

Anti-Mosquito Control Measures:

The normal anti-mosquito measures like clearing vegetation from spruits and furrows, drainage of swampy areas and the straightening and levelling of furrows were maintained and, where practicable, seepage furrows were converted into sub-soil drains. These drains have functioned satisfactorily and have considerably reduced maintenance work on furrows.

The South African Institute for Medical Research carried out a mosquito survey in various Urban and Peri-urban areas during the year with a view to collecting as much information as possible on the density, distribution and ecology of the culicine mosquito population of the Union of South Africa. We assisted them with this work in this area.

Trap breeding units, each unit consisting of a bamboo pot, a glass jar and a rusty tin, were set out in various parts of the City. All the larvae collected from these trap units, other artificial containers and natural water sources were submitted to the S.A.I.M.R. for identification. In addition adult mosquitos were collected from private dwellings, gardens and other premises. Altogether 3,053 larvae specimens and 90 adult mosquitos were submitted and the identification of these specimens were as follows :—

[illegible]

The *Aedes Aegypti* were identified from two collections of larvae from two different nurseries in the Fountains Valley.

It will be observed that no *Anopheles* mosquitos were found amongst all these specimens.

During the summer months weekly patrolling and spraying of all water courses were carried out and 272 gallons of M. 25 (D.D.T. Emulsion) were used.

This emulsion has proved to be a very effective larvicide.

Forty-seven holes and depressions capable of holding water and creating breeding places for mosquitos were filled in.

With the co-operation of market gardeners it was again possible to maintain mosquito control measures on their premises which are within the Municipal area.

Complaints about mosquitos were not numerous. In all 185 complaints were received and investigated.

Rodent Eradication:

Work in this field has been greatly simplified since the discovery of an anti-coagulant rodenticide, "Warfarin."

Results have been so good that this means of eradicating rodents has been used almost exclusively.

Trapping has only been used in premises where, after investigation, it was felt that a nuisance might arise from offensive smells from decomposing carcases.

"Warfarin" has the advantage that rodents take the bait freely and if the containers in which the bait is set is replenished regularly it gives fair protection against rodents establishing themselves in any premises as newcomers feed from the bait and are quickly destroyed.

Only 14 premises were cyano-gassed.

Regular weekly inspections of Municipal premises were carried out by the Pest Control Inspectors and field staff. 1,505 rodents were known to be destroyed. 5,540 rodents are known to have been killed on private premises.

Cockroach Control:

The few complaints received were investigated and advice or assistance was given.

The necessary equipment and staff is still not available and it was therefore not possible to embark on a large-scale anti-cockroach campaign; but wherever the infestation appeared to be heavy in stormwater drains, specially where gulleys were situated in close proximity to food-stores or cafes, the drains were sprayed with a solution of D.D.T. and B.H.C. and the treatment proved effective.

Fly Breeding:

Only 118 complaints in regard to fly nuisance were lodged with the Department. This resulted in 1,624 inspections and in most cases the nuisances were abated. Eight prosecutions for permitting fly breeding had to be instituted.

Spraying with a combination of D.D.T. and B.H.C. has again given good results in controlling fly breeding. At the Municipal Compost pits the destruction of fly larvae and almost complete absence of adult flies was very noticeable.

Fly breeding was found in lawn clippings at several parks, and sports grounds and after treatment with D and B solution fly nuisance in the affected areas decreased.

General:

Complaints about infestations of ticks, tampan and bugs were few.

In instances where it was reported that dwellings had become tick infested it was found without exception, that domestic animals were allowed free access to the dwellings and there was evidence that the ticks had been carried into the houses by the animals.

Several premises were sprayed with D and B solution for the destruction of ticks and the results were satisfactory.

The following are summaries of the work done by this section in regard to rodent eradication and mosquito control :—

RODENT ERADICATION PEST CONTROL SECTION

Premises inspected and contraventions dealt with	339
Contraventions abated	339
Notices served	—
Intimations given	339
Premises re-inspected.. .. .	1,245
Complaints dealt with and advice given	290
New impervious floors laid in grain, flour, forage and other stores	—
Floors repaired or walls or roofs made rat proof in flour, grain or forage stores	16
Non-rat proof grain, forage or other stores demolished	1
Accumulations of rubbish or lumber likely to harbour rats cleaned up or removed	299
Poison baits set on Townlands	5,322
Number of baits taken	2,800
Rat holes on Townlands, etc., gassed	1
Premises in town gassed	14
Number of animals found under suspicious circumstances and sent for bacteriological examination	—
Miscellaneous Inspections	1,347
Night Inspections	—
Number of Rodents destroyed on Municipal premises	1,505
TOTAL INSPECTIONS FOR YEAR	3,213
NUMBER OF PROSECUTIONS FOR FAILURE TO COMPLY WITH REGULATIONS	—

MOSQUITO CONTROL Pest Control Section

Premises inspected and contraventions dealt with	66
Contraventions abated	68
Notices served	—
Intimations given	66
Premises re-inspected.. .. .	58
Complaints dealt with and advice given	53
Check up of dams cleared of weeds	891
Check up of dams sprayed	552
Check up on irrigation furrows cleared	2,564
Check up on irrigation furrows sprayed.. .. .	1,860
Check up on drainage of swampy areas	340
Check up on spraying of swampy areas	133
Holes and depressions filled in	47
Houses sprayed for mosquito control	—
Number of specimens identified	—
Special investigations carried out for identification of mosquitos	201
Inspections carried out in connection with malaria notification ..	12
Miscellaneous Inspections	1,362
Night Inspections	—
Early Morning Inspections	—
TOTAL INSPECTIONS FOR YEAR	8,073
NUMBER OF PROSECUTIONS FOR FAILURE TO COMPLY WITH REGULATIONS	—

**THE FOLLOWING IS A SHORT SUMMARY OF THE INSPECTIONS MADE BY
THE DISTRICT HEALTH INSPECTORS, SLUM AND HOUSING, FOODS AND PEST
CONTROL SECTIONS DURING THE YEAR**

Total inspections made	71,353
Nuisances dealt with	20,784
Nuisances abated (including unabated Nuisances carried over from the previous year)	20,420
Complaints dealt with	3,339
Licences approved	3,164
Licences refused	42
Samples of water taken	267
Samples of foodstuffs taken	384
Visits of enquiry re infectious disease	3,346

Matters Referred to Other Departments:

Chief Licence Officer	60
Chief Traffic Officer	1
City Electrical Engineer	5
City Engineer	220
Director of Parks and Recreation	23
Non-European Affairs Department	71
City Treasurer	1
Town Clerk	3
Fire Department	1
Town Planning	2

ABATTOIR, DAIRIES AND INFECTIOUS DISEASES SECTIONS

Full detailed accounts on the activities of these sections will be found elsewhere in this report.

LEGISLATION AND PROSECUTIONS

The City's Public Health By-laws dealing with the keeping of poultry was amended during the year. In effect this amendment will enable, subject to certain conditions, small numbers of poultry to be kept on smaller pieces of ground than formerly.

At the close of the year new By-laws for the control of butchers premises, fishmongers premises, boarding houses, hotels, restaurants and similar premises were in the hands of the Council's Legal Advisors. The promulgation of these By-laws will ensure more modern and better control of these types of establishments.

During the year there were 109 prosecutions instituted by the Department for contraventions of various health By-laws. This resulted in fines totalling £391 10s. 0d. being imposed.

The following table is an analysis of the prosecutions :—

PROSECUTIONS FOR THE YEAR ENDED 30th JUNE 1953.

NATURE OF OFFENCE	Number of cases before Magistrate's Court	Number found not guilty	Number Cautioned and discharged	Number withdrawn	Paid admission of guilt	Number found not guilty	Fines imposed
1. Transferring milk from one container to another in the streets .. .	2	1	—	1	—	—	£5 0 0
2. Exposing foodstuffs to contamination .. .	2	—	—	—	2	—	£4 0 0
3. Dirty condition of Restaurants, Bakeries and Tea Rooms .. .	5	1	—	—	4	—	£12 0 0
4. Failure to provide temporary builder's latrines .. .	14	9	—	1	4	—	£35 0 0
5. Receiving milk from unlicensed premises .. .	2	1	1	1	—	—	.. .
6. Introducing milk without a licence .. .	8	5	3	1	2	—	£25 10 0
7. Deficiency in milk fat .. .	12	2	—	5	4	1	£32 0 0
8. Hawking milk .. .	1	1	—	—	—	—	£1 0 0
9. Failure to comply with notice .. .	20	5	2	5	9	1	£45 0 0
10. Exposing unsound foodstuffs for sale .. .	4	2	—	—	2	—	£30 0 0
11. Milk bottles not covered .. .	1	—	—	—	1	—	£1 0 0
12. Excess Micro Organisms and B. Coli in milk .. .	3	2	—	1	—	—	£15 0 0
13. Dirty milk delivery baskets .. .	1	—	—	1	—	—	.. .
14. Sleeping in storeroom communicating with kitchen of Restaurant .. .	1	—	—	—	1	—	£2 0 0
15. Added water to milk .. .	9	7	—	—	2	—	£109 0 0
16. Conveying Bread uncovered .. .	4	3	—	—	1	—	£27 0 0
17. Visible dirt in milk .. .	3	1	1	1	1	—	£2 0 0
18. Contravention of Second-hand Dealers' By-laws .. .	2	1	—	1	—	—	£25 0 0
19. Keeping cows without permits .. .	4	4	1	—	—	—	£8 0 0
20. Fly breeding .. .	8	1	—	1	3	3	£8 0 0
21. Mosquito breeding .. .	1	1	—	—	—	—	£1 0 0
22. Milk delivery without overalls .. .	2	1	—	—	1	—	£4 0 0
TOTAL .. .	109	48	8	19	37	5	£391 10 0

SLUM CLEARANCE AND HOUSING

Pretoria is not a city with a large percentage of slum dwellings, but in common with all major local authorities in the Union, it has a housing shortage. For this reason we have refrained from embarking upon a large-scale programme of slum elimination, and in order to ensure that the families most in need of healthy homes are suitably accommodated, we have embarked upon modified slum clearance work undertaken in collaboration with the Housing Section. Families living under slum conditions are given high priority for rehousing within the Council's various housing schemes and the premises from which they are removed are dealt with in terms of the Slums Regulations.

High priority in regard to rehousing is also given to families where serious social problems exist. The selection of families to be rehoused is made by a special sub-committee appointed by the Council to allocate houses.

We have, however, been faced with many difficulties the principal one being an insufficiency of houses especially for the lower-income group, who cannot afford the high rents which are being demanded to-day.

As in the past years, very few houses have been erected in Pretoria by private enterprise for the lower-income groups. This aggravates the shortage further and places the responsibility on the Central Government, the Province and Local Authorities for such housing accommodation.

The City Council of Pretoria has for this reason endeavoured to obtain funds from the National Housing and Planning Commission in order to embark upon large-scale house building programmes. Three separate schemes have been approved and include the following:—

- The erection of 150 economic houses for selling purposes. These houses are of varied designs and will be built on individual stands or in small groups dispersed throughout the City. The intention is to cater for the needs of the middle income group. It is anticipated that the houses will cost approximately £2,400.
- The erection of 100 economic houses at Hercules.
- The erection of 200 low-cost economic houses at Danville. These houses, including outbuildings, will cost about £1,850.

A start has already been made with the erection of 25 of these low-cost economic houses at Danville, and although funds were available by the Housing Commission for the building of economic houses in accordance with (a) above, it was decided that at this stage a greater need would be served if these funds were to be used for the construction of additional low-cost houses. This means that 75 low-cost economic houses will be constructed before the end of March, 1954. The erection of these houses is proceeding satisfactorily and it is expected that the first group will be sold and occupied by the end of September, 1953.

In order to promote the principle of home-ownership and to make it as easy as possible for would be purchasers, the Council advances the usual deposit and transfer duties on behalf of the purchaser who repays it over a period of 10 years.

This enables a low cost economic house at Danville to be purchased with a minimum deposit of only £10.

In addition to this purchasing scheme 200 of the 500 sub-economic houses at Danville have been converted into an economic selling scheme. This will enable tenants who have progressed from the sub-economic to the economic stage, to purchase their own homes. In this scheme the Council has made the conditions of sale even easier and it is possible for these houses to be purchased upon payment of a nominal deposit of 11/- to cover the cost of stamps and the printing of the contracts. Home ownership is an important factor in rehabilitation. It starts with the removal of families from slums or bad environments to healthy homes, helping them to build up their socio-economic positions until finally they can attain a measure of security and independence through buying their own homes.

All this rehabilitation work includes the handling of social welfare problems, working in co-operation with other welfare organisations, administration of the finances of improvident families, assisting them to get medical attention and hospitalization, providing clothing and arranging for food rations for destitute families.

We are also trying to collect as many books as possible to establish small libraries at Proclamation Hill and Danville. The response to our appeal for books has so far been very satisfactory, and we hope that this venture will help to encourage the profitable use of leisure time.

The absence of community centres makes it very difficult to undertake many other projects which we have in mind. It is hoped that later on when financial circumstances permit, community centres will be established.

SLUM ELIMINATION

We have refrained from getting demolition orders in terms of the Slums Act No. 53 of 1934 as amended, because of the housing shortage. We have, however, had the co-operation of owners in practically every instance where we considered that premises should and could be demolished.

We have where necessary applied our Slums Regulations for having structurally defective premises suitably repaired, for preventing overcrowding and the occupation for living and sleeping purposes of outbuildings, storerooms, stables, and other such-like structures. In this connection, 205 notices were served during the year. Considerable improvements were effected on premises so dealt with. During the year 27 major slums and 25 minor slums were demolished. In addition 25 premises were demolished for other reasons such as for rebuilding or reconstruction schemes. A total of 77 dwellings, comprising 345 rooms were demolished during the year.

The re-occupation of unsatisfactory premises was prohibited in 120 cases.

One hundred families, comprising 433 persons were taken out of unsatisfactory and unhealthy dwellings and accommodated in good Council homes. All this work is done in close co-operation with the housing section. Further statistics appended to this report indicate the type and extent of the work undertaken by the Slums Section during the year.

ACTION TAKEN IN TERMS OF THE PRETORIA MUNICIPAL SLUMS REGULATIONS DURING THE YEAR ENDED 30th JUNE, 1953

LETTERS SENT			
Prohibiting Re-occupation	Prohibiting Overcrowding	Referred to Other Departments	Notices served for Major Structural Repairs
120	85	25	24

Demolition and Conversion Permits:

Considered by National Housing and Planning Commission			
	Approved	Refused	Still Under Consideration
(a) Demolition Permits	47	14	1
(b) Conversion Permits	5	2	—

Considered by City Council in Terms of Section 16 of the Housing Act No. 35 of 1920			
	Approved	Refused	Still Under Consideration
(a) Demolition Permits	12	—	—
(b) Conversion Permits	1	—	—

Dwellings actually demolished : 77 comprising 345 Rooms.

Business and other premises demolished : 13.

TOTAL NUMBER OF PREMISES ACTUALLY BEING DEALT WITH IN TERMS OF SLUMS REGULATIONS AS AT 30th JUNE, 1953

Major Slums	262
Minor Slums	339
Overcrowded Premises	195
Outbuildings Occupied	154
TOTAL	950

REHOUSING STATISTICS IN CONJUNCTION WITH SLUM ELIMINATION PROGRAMME — YEAR ENDED 30th JUNE 1953.
NUMBER OF APPLICANTS BROUGHT BEFORE HOUSING SUB-COMMITTEE FOR REHOUSING.

Total Considered by Committee		Old Age Pensioners				Ordinary Families		Total Number of Cases Brought Before Committee				Number of Cases Rehoused for Public Health Reasons	
		Approved		Refused				Approved		Refused			
Families	Persons	Families	Persons	Families	Persons	Approved	Refused	Families	Persons	Families	Persons	Families	Persons
253	1,134	10	36	1	4	182	820	192	856	61	278	100	433

NON-EUROPEAN HOUSING

Except in so far as health is concerned, the actual rehousing of non-Europeans falls under the Non-European Affairs Department.

No slum clearance in non-European areas was undertaken as this would have rendered the occupants homeless.

A start has been made with the provision of further houses for natives but nothing has been done in regard to Coloureds and Asiatics. The slum conditions under which these latter two communities live make it imperative that early consideration be given to the establishment of suitable townships and housing for them. Many of them are forced by unscrupulous landlords to pay high premiums or "key-money" for accommodation in addition to very high rents for most unsatisfactory premises.

The Council is, however, pursuing a policy of providing houses for natives as quickly and as cheaply as possible, and during the past year has concentrated on developing Vlakkfontein, an area to the east of Pretoria set aside for natives.

The following is a brief history of its development.

A House-building Committee, to pursue both European and non-European housing programmes, was established in October, 1951. On the 30th April, 1952, an inspection of the existing experimental non-European housing scheme at Vlakkfontein was made by members of this Committee together with members of the Non-European Affairs Committee and other interested Councillors. Heads of Departments and other Municipal Officials were present. This experimental scheme was known as the "Lapa System" and comprised 24 rondavel type houses. At this inspection the Medical Officer of Health was requested to go into the question of building houses for natives at Vlakkfontein. The Medical Officer of Health as convener called together heads of other departments to make a study of the whole problem.

On the 7th May, 1952, the first meeting of this Committee took place in the office of the Medical Officer of Health. A series of eight meetings, each lasting about three hours, were subsequently held.

On the 11th June, 1952, as convener of the inter-departmental Committee, the Medical Officer of Health submitted a comprehensive report to the House-building Committee for consideration. (Note.—This report is too lengthy for inclusion in this annual report, but is available at the office of the Medical Officer of Health.) In addition to making recommendations in connection with the development of Vlakkfontein, recommendations were made in regard to the existing locations of Atteridgeville and Bantule. Summarised, this report recommended the following in connection with Vlakkfontein :—

- (i) That a completely *economic housing scheme* be undertaken for selling/letting purposes, and that the cost of each house should not exceed £200. On this basis a native could purchase his own home (with leasehold right to the land) at a monthly repayment of approximately £2 11s. 8d. spread over 30 years.

This would include cost of water, rubbish removal, sanitation and other services.

- (ii) That the following services be provided :—

- (a) A *water reticulation* scheme whereby the residents would obtain water from convenient communal points. It was hoped that when funds would become available water could be piped to individual houses.
- (b) Originally, individual pit latrines were recommended, but this scheme had to be abandoned and it was later agreed to provide *pit latrines* at each home. This unfortunately raised the monthly payment by about 4/-.
- (c) A rubbish removal service to each home.
- (d) Communal ablution blocks. Funds were not available for the provision of bathrooms to each house. In any case, a survey was made of the use to which the shower baths provided at the Atteridgeville location were put, and it was found that very few residents used this apartment for ablution purposes.

- (iii) That *other services* including administrative blocks, wash-houses, cemeteries and other facilities be provided.
- (iv) That only main roads be tar-macadamised and subsidiary roads "graded," and suitable stormwater drainage be provided.
- (v) That street lighting be provided throughout, and individual owners who could afford the cost of installation be permitted to connect up.
- (vi) That a "horse shoe" type of lay-out be adhered to. In this system a group of about 24 houses are built so as to form a horse-shoe with a large area of ground in the centre ; this keeps the children off the streets, as it gives them adequate play ground.

(vii) That the following schemes be considered :—

- (a) Natives to erect their own houses according to a "site-and-service" scheme, whereby the site, essential services and building materials would be supplied by the Council. The dwelling to be built in accordance with minimum Municipal requirements and under strict supervision.
- (b) Natives would be allowed to erect their own homes, entirely at their own cost and submit plans in the ordinary way.
- (c) Natives would be allowed to purchase houses built for them by the Council, on a "lease-hold hire-purchase ownership scheme."

(viii) That :—

- (a) The Council build 1,000 houses at Vlakfontein in accordance with the details set out in the report and that these houses be sold to natives with a lease-hold right of 30 years on a hire-purchase scheme over a period of 30 years. The selling price of the houses to be based on the price as set out in the report or at the price laid down by the Union Native Affairs Department, the National Housing and Planning Commission and the Administrator of the Transvaal.
- (b) A letting-scheme as set out in the report be adopted for those natives who do not wish to build or purchase and that the rentals be charged in accordance with the figures as detailed in the report or in accordance with the rental agreed upon by the National Housing and Planning Commission and the Union Native Affairs Department and the Administrator of the Transvaal. (Note.—The monthly rental worked out at a figure somewhat higher than the hire purchase monthly repayment figure, as it included maintenance charges.)
- (c) The Council set aside 300 plots for "owner-builder" purposes, the number to be increased if the scheme proves to be a success and that "owner-building" be permitted in accordance with the recommendations in this report.
- (d) The Council permit squatting for "owner-builders" at Vlakfontein but that not more than 300 families would be permitted to squat at any one time.

The report was considered by the Committee and on the recommendation of the Medical Officer of Health it was resolved that out of internal revenue the sum of £2,400 be allocated for the construction of 12 experimental houses at Vlakfontein, and that only native labour under the supervision of Mr. H. Kux, Principal of the Vlakfontein Native Industrial School, be used for this purpose. On the 18th August, 1952, work commenced and these houses were completed at a cost of £183 each, excluding administration cost, plant and equipment. The houses were based on one of the plans of the National Housing Commission. Each house was about 530 square feet in area, built of 4½-inch brick walls externally and provided with ashcrete floors. They were unceiled and internally bagged with 10 per cent. cement and externally pointed to windowsill height, thereafter lime-washed and treated with a special waterproofing agent. There were no internal doors and a stove was not provided.

This experiment was regarded as a success and the Council then decided to proceed immediately with the erection of 250 similar houses with certain slight modifications and improvements.

The scheme was under the direct supervision of Mr. Kux, who was temporarily seconded to the Council and later appointed in a permanent capacity.

Application was made to the National Housing Planning Commission to proceed with the building of 2,000 houses. A loan of only £100,000, however, was approved for the erection of a further 500 houses. Only native labour was used and despite difficulties in connection with inadequacy of water supplies due to absence of a piped supply, rain and absence of roads which impeded transportation, especially during rainy weather, the following progress was made as at 30th July, 1953 :—

Houses:

Number of houses up to (various stages)—

Foundations dug	410
Footings built up	340
Window sill height	288
Wall plate height	279
Roofing completed	152
Handed over for occupation	100

Labour:

Total of workers employed at scheme : 273.

Labourers	178
Buildings workers	90
Foremen	2
Clerks	2
Storeman	1

REMARKS

Water:

Water for all building operations is supplied by water wagon. The temporary pipe line in being dug up and the available piped water used by the location.

Cement Blocks:

Ash-cement blocks are being used for all internal walling of houses. Although there is no saving in labour, costs are reduced on material (1 block 4d., 6 bricks 7½d., and bagging, amounting to £4 10s. 0d. per house).

Estimated Progress and Completion of 750 Houses:

Taking the building progress up to the end of June, 1953, an approximate equivalent of 204 houses has been completed. The output with the present labour force is 3 houses per day.

To complete the remaining 546 houses would therefore take 182 working days or 8 months and 6 days. Allowing for the Xmas holidays the last house would be completed on March 20th, 1954.

Cost Per House:

An approximate interim guide of the present cost per house is:—

Daily average salary and wage bill (for 3 houses)	£207
Material cost per house (including waste percentage) £112	£336
Total daily expenditure	£543
Cost per house	£181

Note.—Since this report was written over 1,000 houses have been completed and the cost has come down to £165 per house. It seems as though this can be still further reduced.

WATER SUPPLIES

As previously stated the demand for water has increased tremendously year by year as the table set out hereunder shows:—

1929-1930	4.2	million gallons per day
1934-1935	7.4	" " "
1939-1940	8.78	" " "
1945-1946	13.8	" " "
1946-1947	14.2	" " "
1947-1948	14.52	" " "
1948-1949	15.254	" " "
1949-1950	15.963	" " "
1950-1951	16.973	" " "
1951-1952	17.766	" " "
1952-1953	17.921	" " "

The water is drawn from five sources; three direct from dolomitic springs; and the balance from Rietvlei and the Rand Water Board. During the period under review the following quantities of water were drawn from these sources:—

Rand Water Board	3,085.710	million gallons
Springs (Fountains)	1,498.087	" "
Sterkfontein Springs	511.030	" "
Rietvlei Springs	505.540	" "
Rietvlei Filters	941.364	" "

25.1 million gallons were consumed on a peak day, during November last.

SANITARY AND RUBBISH REMOVAL SERVICES

The following quantities of refuse were removed during the year:—

Bin Services	191,000	cubic yards
Special and Coupon Service	19,463	cubic yards
Sanitary Pail Service	5,219,500	gallons
Vacuum Tanks	14,534,800	gallons

REPORT ON SEWAGE PURIFICATION WORKS AND
CHEMICAL LABORATORIES: 1952-53

Table I gives the following particulars:—

- Daily average sewage flow.
- Screenings removed from 1 inch mechanically raked bar screens and not cut up by disintegrator pump—disposed of by burial.
- Grit removed from grit channels, mechanical detritor, screen chambers, sumps and meter channels—disposed of by dumping.
- Rainfall as measured at the Sewage Works
- Purified effluent pumped to the Power Station for use as cooling water.

The designed capacity of the Works is 6 million gallons per day. The daily average sewage flow figure for the year (6,877,000 gallons) thus represents an appreciable overload on the purification plant.

The re-use of purified effluent as cooling water by the Power Station makes it necessary to maintain a high standard of purity in the final effluent. This cannot be done with a large overload on the plant, and for this reason the establishment of a new works on the Council's farm Rooiwal, which was purchased specifically for this purpose, is a matter of extreme urgency.

Sewage Purification:

(1) *Fixed two-stage versus single filtration in 12 ft. deep filters.* Table II gives the comparative results for a further year's operation of the above two processes. These results are almost identical with those of last year, and thus confirm the findings of these processes in 1951, viz., that two-stage filtration in 12 ft. deep filters is 50 per cent. more efficient per cubic yard of media than single filtration in filters of the same depth.

(2) *Jenks bio-filtration.* The operation of the 5 ft. deep Jenks bio-filter and of 6 ft. deep single filters treating the same sewage was continued for purposes of comparison. However, during 1952, the recirculation ratio of the Jenks process was reduced from 3:1 to 2:1. The analytical results are given in Table III.

The load applied to the Jenks bio-filter per cubic yard of media was 3.3 times that of the single filters. In general, the Jenks effluent was inferior in purity to the effluent produced by the single filters. On the year's operation, therefore, it appears that the 5 ft. deep Jenks bio-filter, with 2:1 recirculation, is capable of nearly 3 times the purification per cubic yard compared with single filtration in 6 ft. deep filters. This applied to the treatment of weak domestic sewage to 100 per cent. stability.

The standard of purity of both effluents was below that of the previous year.

Re-use of Effluent as Cooling Water:

The pumping of purified effluent to the Power Station for use as cooling water commenced in October, 1952. The volumes pumped each month are given in Table I.

The sand filters have not been completed, and until these are in operation, well settled humus tank effluent is being delivered. Before being pumped, this effluent is chlorinated with 2-3 parts per million of chlorine in order to kill slime-forming bacteria which cause trouble in the condenser tubes.

Digested Sludge:

During the year 4,200 cubic yards of digested sludge were removed from the drying beds.

Laboratory Services:

Analytical work is carried out for 7 Municipal Departments, and a total of 3,638 samples were analysed during the year, which represents an increase of 35 per cent. over the figure for the previous year.

Water Supply:

Minor occurrences of "red water" were experienced with the Rand Water Board water. Chemical treatment is being carried out at two reservoirs to prevent corrosion in the distribution pipes.

TABLE I

Month	Sewage Flow	Screenings	Grit	Rainfall at Sewage Works Inches	Effluent to Power Station
	Daily Average gallons	Cubic Feet per million gallons	Cubic Feet per million gallons		Total for Month gallons
1952—					
July ..	6,567,000	14	3.5	0.94	—
August ..	6,462,000	19	3.6	0.03	—
September	6,514,000	22	3.7	0.01	—
October	6,434,000	23	3.7	0.95	22,800,000
November	7,069,000	22	3.4	4.85	30,240,000
December	7,519,000	20	3.2	4.83	27,360,000
1953—					
January ..	7,615,000	18	4.2	4.69	50,070,000
February	7,283,000	18	3.6	5.24	37,460,000
March ..	6,974,000	19	3.7	4.01	51,800,000
April ..	6,827,000	19	3.7	1.90	39,300,000
May ..	6,915,000	19	3.2	0.41	52,050,000
June ..	6,345,000	21	3.6	Nil	51,010,000
Year 1952-53	6,877,000	20	3.6	27.86	362,090,000

TABLE II—(Continued).
COMPARATIVE RESULTS FOR FIXED TWO-STAGE AND SINGLE STAGE OPERATION—(Continued).

RESULTS IN PARTS PER MILLION	Jan.	Feb.	Mar.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	AVERAGES			Year
												Jan. Mar.	May. Aug.	Sept. Dec.	
AMMONIACAL	SETTLED SEWAGE	38	45	55	50	60	55	45	53	50	35	46	53	46	48
	F.P.	35	35	45	45	55	50	40	53	30	20	38	48	37	41
	F.S.	10.0	13.8	12.5	21.3	25.0	21.3	13.8	20.0	22.5	4.0	12.1	20.3	14.1	16.7
NITROGEN	SIN.	9.4	11.3	17.5	22.5	25.0	18.8	13.8	14.4	10.0	5.0	12.7	20.0	10.0	14.2
	F.P.	35	35	45	45	50	45	40	53	30	20	38	45	37	40
	F.S.	10.0	13.8	12.5	20.0	25.0	21.3	12.5	20.0	22.5	4.0	12.1	19.7	14.1	15.7
ALBUMENOID	SIN.	9.4	11.3	17.5	22.5	25.0	18.8	13.8	14.4	10.0	5.0	12.7	20.0	12.7	15.1
	SETTLED SEWAGE	7	8	6	8	8	8	6	8	5	6	7	8	7	8
	F.P.	3.0	3.2	2.4	2.8	3.2	3.2	3.2	3.4	2.8	2.0	2.9	3.1	2.7	2.9
NITROGEN	F.S.	1.6	1.8	1.2	1.6	2.4	2.0	1.8	1.8	1.2	1.6	1.5	2.0	1.5	1.7
	SIN.	1.6	2.4	2.8	2.4	2.4	2.0	1.6	2.3	1.6	1.4	2.3	2.1	1.7	2.0
NITRITE	F.P.	2.1	2.3	1.8	2.4	2.0	2.0	3.2	2.0	1.5	1.2	2.1	2.4	1.6	2.0
	F.S.	1.1	1.0	1.0	1.3	1.8	1.4	0.8	1.3	1.2	0.8	1.0	1.3	1.1	1.2
	SIN.	1.3	1.3	0.6	1.5	1.6	1.4	0.9	1.3	1.1	0.6	1.1	1.3	0.9	1.2
NITRATE	F.P.	1.1	1.0	0.6	1.2	1.2	0.9	0.9	0.6	0.4	1.2	0.9	1.1	0.8	0.9
	F.S.	0.7	0.6	0.6	0.8	0.8	2.3	1.0	1.3	1.2	0.5	0.6	1.2	1.0	1.0
	SIN.	0.6	0.6	0.5	0.8	0.8	1.2	0.8	0.7	0.4	0.5	0.6	0.9	0.6	0.7
RELATIVE STABILITY	F.P.	4.0	7.5	7.4	5.3	1.8	2.6	0.4	0.6	1.6	1.8	6.3	2.5	1.2	3.0
	F.S.	13.1	22.4	24.4	16.7	14.2	17.7	19.0	16.2	8.8	9.5	20.0	16.9	14.7	16.9
	SIN.	13.1	19.4	22.0	14.2	14.2	18.8	19.2	18.2	27.1	9.6	18.2	16.6	19.8	18.2
(METHYLENE BLUE) PER CENT.	F.P.	100	100	100	100	100	100	100	75	50	100	100	100	80	93
	F.S.	100	100	100	100	100	100	100	100	100	100	100	100	100	100
	SIN.	100	100	100	100	100	100	100	100	100	100	100	100	100	100
SUSPENDED SOLIDS	F.P.	39	43	60	61	51	63	53	38	40	43	47	60	40	49
	F.S.	17	25	40	33	27	26	21	18	21	20	27	27	20	24
	SIN.	18	28	34	36	26	27	21	29	23	26	27	28	28	28

NOTE.—H.T.E. = Humus Tank Effluent.
E.F. = Effluent Filtered in Laboratory.
F.P. = Fixed Primary
F.S. = Fixed Secondary.
SIN. = Single Stage.

TABLE III
COMPARATIVE RESULTS FOR JENKS BIO-FILTRATION ON 5 FT. FILTER AND SINGLE STAGE ON 6 FT. FILTERS
AT PRETORIA, 1952. 24 HOUR SAMPLING.

RESULTS IN PARTS PER MILLION		Jan.	Mar.	Apr.	May	June	July	Aug.	Sept.	AVERAGES		
										Jan.- May	June- Sept.	Year
DOSAGE : GALLS./CU.YD./DAY	SINGLE JENKS	110 286	111 351	108 361	104 329	102 324	92 364	86 331	91 347	108 332	93 342	101 337
LOADING ('O.A.' x DOSAGE) LOADING (STRENGTH x DOSAGE) 100s	SINGLE SINGLE	3,410 517	3,330 549	3,996 659	3,744 573	3,774 576	3,312 573	2,924 494	3,276 560	3,620 575	3,322 551	3,470 563
MEAN AIR TEMP. DURING SAMPLING °F.	..	75	72	64	58	53	52	56	61	67	56	61
OXYGEN	RAW SEWAGE..	62	59	70	59	65	83	68	70	63	72	67
	SETTLED SEWAGE ..	31	30	37	36	37	36	34	36	34	36	35
	F.B.E. SINGLE JENKS	12.3 16.5	15.4 15.9	19.5 16.4	19.2 16.4	23.0 16.7	21.3 31.0	19.7 19.3	16.3 16.6	16.8 16.3	20.8 20.9	18.7 18.6
	H.T.E. SINGLE JENKS	9.3 14.6	11.3 10.6	13.2 14.7	12.4 13.8	15.0 13.4	13.9 16.6	12.7 16.2	11.8 13.1	11.5 13.4	13.3 14.3	12.4 14.1
	E.F. SINGLE JENKS	6.0 10.5	8.5 9.0	10.8 11.8	8.6 10.6	11.0 11.0	8.0 12.7	9.2 11.9	8.2 10.9	8.5 10.5	9.1 11.6	8.8 11.5
" STRENGTH "	RAW SEWAGE..	838	844	993	862	929	1,107	968	1,018	884	1,006	945
	SETTLED SEWAGE ..	470	495	610	551	565	623	574	615	532	594	563
	F.B.E. SINGLE JENKS	167 239	220 225	284 286	296 318	320 327	284 545	267 364	235 314	242 267	276 388	259 327
	H.T.E. SINGLE JENKS	135 220	175 195	216 265	219 289	243 289	202 364	186 325	183 274	186 242	204 313	195 278
	E.F. SINGLE JENKS	96 174	141 176	186 232	174 252	188 253	132 308	146 274	139 247	149 209	151 271	150 240
5 DAY	RAW SEWAGE..	294	296	333	354	347	384	447	389	319	442	381
	SETTLED SEWAGE ..	189	196	208	251	229	212	238	219	211	225	218
	F.B.E. SINGLE JENKS	23.0 27.3	26.1 26.8	39.7 23.4	24.3 28.2	29.4 30.9	25.9 63.9	42.1 50.9	34.1 34.2	28.2 26.4	32.9 44.9	30.6 35.7
	H.T.E. SINGLE JENKS	15.7 22.4	18.1 19.0	27.6 18.8	22.2 23.2	26.8 23.3	22.2 32.7	27.9 42.5	25.0 22.9	20.9 20.8	25.5 30.3	23.2 25.6
	E.F. SINGLE JENKS	6.5 9.9	9.2 8.8	13.4 5.2	6.7 10.5	10.5 10.7	9.2 15.8	13.7 12.0	8.4 8.4	8.9 8.6	10.5 11.7	9.7 10.2

TABLE III—(Continued).
COMPARATIVE RESULTS FOR JENKS BIO-FILTRATION—(Continued).

RESULTS IN PARTS PER MILLION		Jan.	Mar.	Apr.	May	June	July	Aug.	Sept.	AVERAGES		
										Jan.- May	June- Sept.	Year
AMMONIACAL	RAW SEWAGE...	35	42	50	45	48	50	50	55	43	51	47
	SETTLED SEWAGE...	27	37	45	35	45	42	43	47	36	44	40
NITROGEN	F.B.E. SINGLE JENKS	6.9	10.8	15.0	17.5	16.7	10.6	10.4	12.2	12.5	12.4	12.5
		12.5	16.7	22.5	30.0	30.8	36.2	33.0	30.0	20.4	32.5	27.7
	H.T.E. SINGLE JENKS	6.9	10.8	15.0	17.5	16.2	10.6	10.0	12.2	12.6	12.2	12.4
		12.5	16.7	22.5	30.0	30.8	36.2	32.5	30.0	20.4	32.4	26.4
	E.F. SINGLE JENKS	6.9	10.8	15.0	17.5	16.2	10.0	10.0	10.9	12.6	11.8	12.2
		12.5	16.7	22.5	30.0	29.1	36.0	31.6	30.0	20.4	31.7	26.1
ALBUMENOID	RAW SEWAGE...	9.0	9.0	9.0	10.0	9.0	12.0	9.0	11.0	9.2	10.2	9.7
	SETTLED SEWAGE...	5.0	5.0	5.0	4.5	6.0	5.0	5.0	5.5	4.8	5.4	5.1
NITROGEN	F.B.E. SINGLE JENKS	1.8	2.3	3.0	4.0	3.2	3.4	3.3	2.8	2.8	3.2	2.9
		2.6	2.3	3.0	2.8	2.7	7.5	2.8	3.1	2.7	4.0	3.3
	H.T.E. SINGLE JENKS	1.5	1.8	2.5	2.3	3.0	2.3	1.9	1.8	2.0	2.2	2.1
		2.3	2.0	2.3	2.3	2.4	6.0	2.3	2.3	2.2	3.2	2.7
NITRITE NITROGEN	E.F. SINGLE JENKS	0.7	0.8	1.3	1.3	1.4	1.0	0.9	1.1	1.1	1.1	1.1
		1.7	1.3	1.8	1.6	1.6	2.8	1.5	1.3	1.6	1.8	1.7
NITRATE NITROGEN	SINGLE JENKS	0.4	0.5	0.7	0.7	0.8	1.0	0.9	0.7	0.6	0.9	0.8
		0.9	0.7	1.2	0.7	0.9	0.5	0.9	1.1	0.9	0.9	0.9
RELATIVE STABILITY (METHYLENE BLUE) PER CENT.	SINGLE JENKS	8.4	9.1	8.1	9.3	8.8	10.3	13.3	10.3	8.7	10.7	9.7
		11.3	11.4	8.8	9.3	9.5	3.4	1.1	1.9	10.1	3.8	8.1
SUSPENDED SOLIDS	H.T.E. SINGLE JENKS	100	100	100	100	100	100	100	100	100	100	100
		97	92	94	96	97	95	92	84	93	92	93
	E.F. SINGLE JENKS	100	100	100	100	100	100	100	100	100	100	100
		100	100	100	100	100	100	100	100	100	100	100
	F.B.E. SINGLE JENKS	60	58	83	65	132	158	64	64	67	105	86
		28	19	34	40	47	44	35	30	30	39	35
	H.T.E. SINGLE JENKS	42	39	43	36	44	106	71	44	42	66	54
		28	23	19	19	22	20	31	18	22	23	23

NOTE.—SINGLE = Single stage filtration in 6 ft. filters; JENKS = Recirculation (2 : 1) on 5 ft. filter.
SETTLED SEWAGE = Primary Dortmund Tank Effluent, applied to single stage filters.
F.B.E. = Filter Bed Effluent. H.T.E. = Humus Tank Effluent. E.F. = Effluent, filtered in Laboratory through Whatman's No. 12.

NON-EUROPEAN MEDICAL SERVICES

A. Report on Clinic Services for non-Europeans.

B. Report on Native Influx Control.

(i) Urban Services.

(ii) Peri-urban Services.

A. CLINIC SERVICES:

As in the past the following clinics are conducted exclusively for urban and peri-urban non-Europeans at various centres in the City.

	Compound Clinic	Bantule Clinic	Atteridgeville Clinic	Special Diseases Clinics Pretoria Hospital
Number of Child Welfare Clinics per week	3	2	4	—
Number of Venereal Diseases Clinics per week	—	1	1	4
Number of Ante- and Post-Natal Clinics per week	2	1	1	—
Number of Tuberculosis Clinics per week	—	1	2	1
Number of General Out-patient Clinics per week (including Atteridgeville School Clinic)	2	2	8	—

As in previous annual reports further details regarding Child Welfare, Venereal Diseases, Tuberculosis and Ante-Natal and Post-Natal clinics appear elsewhere under the respective headings.

OUT-PATIENT CLINIC RETURNS FOR THE YEAR:

(In column showing Totals, figures for 1951/1952 where available are shown in brackets.)

	Compound	Atteridgeville	Bantule	Total	
1. Number of new cases seen	1,118	3,018	921	5,057	(5,238)
2. Number of repeat attendances ..	339	1,054	537	1,930	(1,980)
3. Number of Wasserman tests done	62	254	105	421	(439)
4. Number of positive Wasserman reaction	22	69	46	137	(127)
5. Number of Eye Smears taken ..	2	3	3	8	(8)
6. Number of Eye Smears revealing Gonococci	1	0	0	1	(1)
7. Number of Urethral and Cervical Smears taken	0	7	0	7	(9)
8. Number of Urethral and Cervical Smears revealing gonococci ..	0	1	0	1	(1)
9. Number of cases dressed at Clinics	480	3,782	9,260	13,522	(8,863)
10. Number of dressings done	1,060	9,040	13,286	23,386	(19,662)
11. Number of cases referred to Ante-Natal Clinics	29	15	19	63	(43)
12. Number of Cases referred to Dental Clinics	41	92	42	175	(111)
13. Number of Cases referred to Venereal Diseases Clinics ..	23	69	46	138	(133)
14. Number of Cases referred for X-ray Examinations	10	34	14	58	(102)
15. Number of Cases referred to Tuberculosis Clinics	3	7	4	14	(13)
16. Number of Cases referred to Hospital Out-patient Departments	35	99	28	162	(114)
17. Number of Cases referred to Casualty	22	31	26	79	(67)
18. Number of Cases admitted to Hospital	13	16	12	41	(43)

In the above table the figures for Atteridgeville include school children referred to the Clinic by the School Health Visitor.

The clinics for non-European Municipal Employees have, as in the past, been held in the mornings (except Sundays and Public Holidays) at the Municipal Compound Clinic in Proes Street. Records for 1952/1953 and for the previous two years show the following :—

	1952-1953	1951-1952	1950-1951
1. Number injured on duty and treated at the Compound Clinic	897	744	768
2. Number injured on duty and referred to the General Hospital or Private Practitioners	75	80	84
3. Number injured off duty and treated at the Compound Clinic	987	816	876
4. Number injured off duty and treated at the General Hospital	144	78	84
5. Number of sick treated at the Compound Clinic ..	2,908	2,267	2,844
6. Number of sick referred to the General Hospital ..	228	205	216
7. Total number medically examined at the Compound Clinic	4,587	4,498	4,562
8. Total number of attendances at the Compound Clinic	17,280	14,915	15,000

B. NATIVE INFLUX CONTROL:

(i) Urban Services:

	1952-1953	1951-1952
Number of Natives examined :		
(a) New Cases	9,446	12,141
(b) Return Cases	36,605	36,747
	<u>46,051</u>	<u>48,888</u>
Number of Natives Vaccinated	613	1,175
Number of Natives infested with Lice	2,017	2,542
(a) Head and Body Lice	28	11
(b) Crab Lice	1,989	2,531
Number of Natives temporarily unfit for employment because of—		
1. Suspected Venereal Diseases	115	150
(a) Gonorrhoea	63	56
(b) Primary Syphilis	18	28
(c) Secondary Syphilis	24	39
(d) Tertiary Syphilis	10	27
2. Dental Decay	114	171
3. Tapeworms	29	10
4. Roundworms	1	—
5. Scabies	6	1
6. Leprosy	1	—
7. Minor Ailments	19	2
	<u>285</u>	<u>334</u>
Number of Natives permanently unfit for hard work and fit only for light or domestic work because of :—		
1. Senility with or without minor ailments	149	181
2. Obesity	15	42
3. Valvular disease of the heart	2	2
4. Skeletal deformities and amputations	31	38
5. Unclassified ailments	8	4
	<u>205</u>	<u>270</u>

Numerous other minor transient and permanent conditions and defects were also found on medical examination. The natives were referred to the various Out-patient departments of the General Hospital, Pretoria, for the necessary treatment if such treatment could be beneficial.

(ii) Peri-Urban Services:

	1952-1953	1951-1952
1. Number of Natives examined :		
(a) New Cases	3,352	3,423
(b) Return Cases	9,154	8,860
	<u>5,802</u>	<u>5,437</u>
2. Number of Natives Vaccinated	3,352	3,423
3. Number of Natives infested with—		
(a) Head and Body Lice	13	42
(b) Crab Lice	61	65
4. Number of Natives referred to Dental Clinic	299	378

5. Number of Natives found unfit for immediate employment because of :—

(i) Suspected Venereal Disease :—								
(a)	Primary Syphilis	..	..	..	..	..	12	40
(b)	Secondary Syphilis	..	..	..	..	..	19	61
(c)	Tertiary Syphilis	..	..	..	..	..	11	13
(d)	Urethral Discharge	..	..	..	..	..	29	65
(ii) Tuberculosis : Pulmonary							17	16
	Other Forms	..	..	..	..	..	5	5
(iii)	Scabies	..	..	..	..	..	9	6
(iv)	Leprosy	..	..	..	..	..	2	6
(v)	Tapeworm	..	..	..	..	..	3	7
(vi)	Bilharzia	..	..	..	..	..	1	0
(vii)	Senility	..	..	..	..	..	16	0

Numerous other diseases were found and patients were advised to go to the appropriate clinics for further attention and treatment.

The following is a comparative survey from Clinic Records of illnesses and injuries met with during the year at outpatients clinics at the municipal locations.

	Ateridgeville School Clinic		Ateridgeville General Out-patient Clinic		Compound General Out-patient Clinic		Bantule General Out-patient Clinic	
	Approximate percentage of total diseases		Approximate percentage of total diseases		Approximate percentage of total diseases		Approximate percentage of total diseases	
	Total	1952/53 (1951-52)	Total	1952/53 (1951-52)	Total	1952/53 (1951-52)	Total	1952/53 (1951-52)
1. Respiratory Diseases	10	22%	22	440	36	353	8	330
Lobar Pneumonia	164	(17.8%)	130	73	137	36	139	50
Bronchial Catarrh	56		68	3	53	4	60	7
Bronchitis (Acute and Chronic)	—		1	3	—	1	1	1
Bronchiectasis	6		7	7	3	353	7	330
Pleurisy	57	22%	73	440	36	353	50	330
Influenza	9		3	7	4	19.1%	6	21.4%
Laryngitis (Acute and Chronic)	6		3	3	1	(20.3%)	—	—
Tracheitis	1		3	3	6		2	
Whooping Cough	—		18	3	1		1	
Broncho-pneumonia	4		7	7	4		4	
Pulmonary Tuberculosis (including contacts with symptoms)	2		25	7	11		6	
Asthma, Hay Fever, etc.	102		82	25	89		46	
Minor Respiratory Ailments	—		1	1	—		—	
Lung Abscess	—		—	—	—		—	
2. Skin Diseases	225	11.8%	148	148	180	9.7%	146	9.4%
3. Eye Infections	121	9.3%	83	122	61	10.6%	67	12.7%
Conjunctivitis (Acute and Chronic)	56	(10.1%)	39	83	43	3.3%	88	5.7%
Other Conditions	—		—	—	18	(4.3%)	21	(8.2%)
4. Ear, Nose and Throat Infections	61		41	313	28		18	
Otitis Media (Acute and Chronic)	134	(24.3%)	94	178	61	11.2%	144	15.1%
Tonsillitis (Acute, Sub-Acute and Chronic)	—		—	—	—	(12.5%)	72	(12.7%)
Other Conditions	—		—	—	—		—	
5. Gastro Intestinal Ailments	79	11.7%	148	300	139	15%	80	14.6%
(Including Helminthias Infections)	144	(11.4%)	152	148	139	(16.5%)	147	(13.7%)
Constipation	109	5.7%	108	108	106	5.7%	41	2.65%
6. Bone Diseases	4	0.21%	2	2	2	(7%)	—	—
6a. Deficiency Disorders (Nutritional)	105	(4.2%)	96	2	59	0.11%	66	4.3%
7. Deficiency Disorders (Nutritional)	13	0.7%	19	4	18	3.2%	21	1.46%
8. Nervous Disorders	6	0.32%	17	19	5	(2%)	5	0.35%
9. Heart Diseases	—		—	—	—	(0.62%)	—	—
10. Joint and Muscular Conditions	38	2.9%	95	149	80	0.27%	96	6.2%
Rheumatism	15	(2.9%)	50	53	26	4.3%	20	(5.5%)
Fibrositis	3		4	26	1	(4.5%)	2	
Joint Infections	—		—	—	—		—	
11. Marked Dental Clinics	50	2.6%	42	42	41	2.2%	49	3.2%
12. Acute Infectious Fevers	20	1.05%	27	42	15	2.3%	13	0.84%
13. Abscesses and Boils	40	(1.4%)	27	27	32	(2.6%)	21	(1.5%)
14. General Debility	15	0.79%	25	25	24	(1.1%)	18	1.16%
15. Venereal Disease	13	0.7%	46	25	29	(1.2%)	47	3.0%
16. Congenital Abnormalities	—		2	46	—	(1.6%)	—	—
17. Urinary Disorders	20	1.05%	55	2	47	2.5%	26	1.7%
18. Menstrual Disorders	36	(2.33%)	82	55	127	(1.6%)	60	(1.4%)
19. Diseases of Genital Organs	11	0.58%	114	82	108	(4.7%)	26	(3%)
Mastitis	—		6	5.1%	7	(5.4%)	7	(3.5%)
20. Acute and Chronic Lymphadenitis	26	1.4%	22	6	25	0.11%	18	0.5%
21. Non-Pulmonary Tuberculosis	—		22	22	2	1.35%	1	1.16%
22. Tumours	5	0.26%	13	22	2	(1.7%)	3	(0.71%)
23. Urticaria	14	0.74%	3	3	10	(0.07%)	1	(0.08%)
24. Diabetes	—		2	13	11	(0.54%)	4	(0.24%)
25. Haemorrhoids	—		2	7	1	(0.56%)	—	—
26. Diseases of Blood Vessels	—		3	2	4	(0.37%)	1	0.07%
27. Blood Deficiency Diseases	—		15	3	5	(0.22%)	4	0.3%
28. Diseases of Liver and Spleen	10	0.53%	12	15	14	(0.56%)	6	0.4%
29. Diseases of Ductless Glands	1	0.05%	2	12	3	(0.46%)	—	—
30. Hernia	1	0.05%	3	2	1	(0.06%)	—	—
31. Alcoholism	—		11	3	4	(0.13%)	1	0.07%
	—		—	11	—	(0.49%)	3	0.19%

Table No. 1

BIRTHS (ALL RACES) FOR THE YEAR ENDED 30th JUNE, 1953

	EUROPEAN		NATIVE		ASIATIC		EURAFRICAN	
	Legitimate Male	Illegitimate Female	Legitimate Male	Illegitimate Female	Legitimate Male	Illegitimate Female	Legitimate Male	Illegitimate Female
July ..	135	4	29	15	7	6	6	2
August ..	130	5	61	35	17	10	3	1
September ..	161	3	43	26	10	7	5	4
October ..	186	—	122	66	15	9	3	—
November ..	133	1	87	36	6	13	8	1
December ..	188	—	79	37	5	6	12	—
January ..	146	—	46	23	16	7	6	—
February ..	122	2	45	25	7	8	7	2
March ..	108	2	109	56	14	9	5	—
April ..	199	1	78	47	10	10	6	5
May ..	142	2	64	38	9	10	8	—
June ..	190	1	139	74	13	14	7	—
TOTALS	1,840	21	927	478	129	107	78	22

BIRTHS TO NON-RESIDENTS

STILLBIRTHS (LOCAL RESIDENTS)

	EUROPEAN		NON-EUROPEAN		EUROPEAN		NON-EUROPEAN	
	Male	Female	Male	Female	Male	Female	Male	Female
July ..	—	1	9	2	46	33	8	5
August ..	1	3	10	7	36	36	43	31
September ..	2	—	7	7	38	46	15	11
October ..	3	1	6	7	67	49	54	47
November ..	3	2	8	6	48	42	50	50
December ..	2	3	5	5	56	52	31	29
January ..	—	2	6	7	51	41	12	20
February ..	3	—	5	6	56	30	31	21
March ..	2	—	7	6	29	19	28	29
April ..	2	2	4	4	65	66	66	59
May ..	2	3	6	8	42	41	42	35
June ..	1	3	7	8	59	62	68	57
TOTALS	21	20	80	73	593	517	448	394

Table No. 2

DEATHS OF EUROPEAN CHILDREN UNDER 5 YEARS OF AGE FOR THE YEAR ENDED 30th JUNE, 1953

	24 Hours and Under		Over 24 Hours to 1 Week		Over 1 Week to 1 Month		Over 1 Month to 3 Months		Over 3 Months to 6 Months		Over 6 Months to under 12 Months		Total Infantile Mortality		1 Year to 2 Years		Over 2 Years to 3 Years		Over 3 Years to 4 Years		Over 4 Years to 5 Years		Total Under 5 Years	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Diphtheria	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1	2
Tuberculosis, Pulmonary	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—
Tuberculosis, Central Nervous System ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cancer, Other and Unspecified Forms ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Malnutrition	—	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—
Leukaemia	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Encephalitis, Non-Epidemic, Other Forms	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cerebral Embolism ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Convulsions	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Heart Disease, Rheum.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia, Broncho ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia, Unspecified	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diarrhoea and Enteritis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Intestinal Obstruction	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Congenital Hydrocephalus	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Spina Bifida and Meningocele	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Congenital Malformation of Heart	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cystic Disease of Kidney	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Stated Congenital Malformations ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Premature Birth ..	13	8	2	7	—	—	—	—	—	—	—	—	2	2	—	—	—	—	—	—	—	—	2	2
Injury at Birth ..	1	3	1	2	1	—	—	—	—	—	1	1	22	17	—	—	—	—	—	—	—	—	22	17
Atelectasis	1	2	5	1	—	—	—	—	—	—	—	—	3	5	—	—	—	—	—	—	—	—	3	5
Other Diseases, First Year of Life ..	—	—	—	—	—	—	—	—	—	—	—	—	6	3	—	—	—	—	—	—	—	—	6	3
Accidental Poisoning ..	—	—	—	—	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	1	1
Accidental Burns ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Accidental Mechanical Suffocation	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Accidental Drowning	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Accidental Crushing ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Anaesthetic Accidents	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Deaths, Unknown Causes	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
TOTALS	16	14	19	12	2	2	4	5	5	7	9	7	4	56	48	5	5	3	3	4	3	—	68	59

Table No. 3

DEATHS OF NON-EUROPEAN CHILDREN UNDER 5 YEARS OF AGE FOR THE YEAR ENDED 30th JUNE, 1953

	24 Hours and Under		Over 24 Hours to 1 Week		Over 1 Week to 1 Month		Over 1 Month to 3 Months		Over 3 Months to 6 Months		Over 6 Months, under 12 Months		Total Infantile Mortality		1 Year to 2 Years		Over 2 Years to 3 Years		Over 3 Years to 4 Years		Over 4 Years to 5 Years		Total Under 5 Years	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
NATIVES																								
Whooping Cough ..	—	—	—	—	—	—	—	1	—	—	1	—	1	1	1	—	—	—	—	—	1	2	2	2
Diphtheria ..	—	—	—	—	—	—	—	—	—	—	1	—	—	1	3	—	—	1	—	—	—	3	3	3
Tetanus ..	—	—	—	—	—	—	—	—	—	—	—	—	2	1	—	—	—	—	—	—	—	2	1	1
Tuberculosis, Pulmonary ..	—	—	—	—	—	—	—	—	—	—	2	—	—	2	1	—	1	2	—	—	—	2	4	4
" Central Nervous System ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	—	—	—	3	—	4	1	1
" Lymphatic System ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	—
" Genito-urinary System ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	—
" Other Organs ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—
" Acute Miliary ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Septicaemia ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Congenital Syphilis ..	1	—	3	1	2	—	—	2	1	1	—	—	7	4	—	—	—	—	—	—	—	7	4	4
Measles ..	—	—	—	—	—	—	—	—	—	—	1	—	—	1	—	—	—	—	—	—	—	1	2	2
Cancer, Male Genital Organs ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Malnutrition ..	—	—	—	—	—	—	—	2	1	—	2	3	3	5	7	6	5	5	1	1	—	16	17	17
Pellagra ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	2	—	—	—	—	—	1	2	2
Encephalitis, Other Forms (non-Epid.) ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—
Meningitis (non-Meningococcal) Other Forms ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Bronchitis ..	—	—	—	—	—	—	—	—	—	—	1	—	1	—	—	—	—	—	—	—	—	1	1	1
Broncho Pneumonia ..	—	—	1	—	8	4	5	4	12	13	20	16	46	37	19	16	9	2	3	2	—	73	64	64
Lobar Pneumonia ..	—	—	—	—	—	1	—	—	—	—	1	—	1	1	2	—	—	—	—	—	1	1	4	4
Pneumonia Unspecified ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	1	1
Septic Sore Throat ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diarrhoea and Enteritis ..	—	—	—	—	4	4	10	9	22	12	19	14	55	39	34	34	6	10	1	1	3	99	84	84
Acute Nephritis ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Diseases of Skin ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Congenital Malformation of Heart ..	—	—	—	—	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1	—	—
Other Stated Congenital Malformations ..	—	—	—	—	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1	—	—
Unspecified Congenital Malformations ..	—	—	2	—	—	—	—	—	—	—	—	—	2	1	—	—	—	—	—	—	—	2	1	1
Congenital Debility ..	—	—	1	—	—	—	—	1	—	—	—	—	1	1	—	—	—	—	—	—	—	1	1	1
Premature Birth ..	14	15	9	12	8	2	1	—	—	—	—	—	33	36	—	—	—	—	—	—	—	33	36	36
Injury at Birth ..	5	—	5	2	—	—	—	—	—	—	—	—	10	2	—	—	—	—	—	—	—	10	2	2
Atelectasis ..	—	2	2	3	—	—	—	—	—	—	—	—	2	8	—	—	—	—	—	—	—	2	8	8
Other Diseases, First Year of Life ..	1	—	1	—	1	—	—	—	—	—	—	—	3	—	—	—	—	—	—	—	—	3	—	—

24 Hours and Under	Over 24 Hours to 1 Week		Over 1 Week to 1 Month		Over 1 Month to 3 Months		Over 3 Months to 6 Months		Over 6 Months to 12 Months		Total Infantile Mortality	1 Year to 2 Years		Over 2 Years to 3 Years		Over 3 Years to 4 Years		Over 4 Years to 5 Years		Total Under 5 Years				
	M	F	M	F	M	F	M	F	M	F		M	F	M	F	M	F	M	F	M	F			
Accidental Burns ..	—	—	—	—	—	—	—	—	—	—	—	1	1	3	—	1	—	—	—	5	1			
Other Deaths, Unknown Causes	—	1	3	—	1	1	—	2	2	2	1	—	7	6	1	1	—	—	1	—	8			
TOTALS ..	21	18	29	19	27	22	17	22	38	30	47	37	179	148	73	64	21	27	9	10	8	2	290	251

DEATHS OF NON-EUROPEAN CHILDREN UNDER 5 YEARS OF AGE FOR THE YEAR ENDED 30th JUNE, 1953

ASIATICS

Bacillary Dysentery ..	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
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EURAFRICAN

LORD KIRK																							
Measles
Malnutrition
Pellagra..
Broncho Pneumonia
Lobar Pneumonia	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Acute Bronchitis..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diarrhoea and Enteritis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Unspecified Congenital	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Malformation ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Premature Birth	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Injury at Birth	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Atelectasis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Other Deaths, Unknown	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Causes	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
<hr/>																							
TOTALS	..	1	2	3	4	2	1	—	1	5	2	2	9	14	4	5	—	1	—	—	—	13	20

Table No. 4

DEATHS OF EUROPEANS, FIVE YEARS OF AGE AND OVER, WITHIN THE MUNICIPAL AREA FOR THE YEAR ENDED 30th JUNE, 1953

	5-10 Years		10-15 Years		15-20 Years		20-25 Years		25-30 Years		30-40 Years		40-50 Years		50-60 Years		60-70 Years		70-80 Years		Over 80 Years		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
Infectious and Parasitic Diseases	—	1	1	—	—	—	—	—	—	—	1	2	—	1	—	2	5	1	1	—	—	—	1	8
Cancer and Other Tumours	—	—	—	—	—	—	—	—	1	2	—	1	7	7	11	18	18	24	14	13	5	8	56	73
Diseases of Nutrition ..	1	—	—	—	—	—	1	—	1	—	—	1	1	—	—	2	1	3	1	2	1	—	7	8
Endocrine Glands ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diseases of Blood and Blood Forming Organs ..	—	—	—	—	1	—	—	—	—	—	—	—	1	—	1	—	1	—	1	—	1	—	6	—
Diseases of Nervous System and Sense Organs ..	1	—	—	—	—	—	1	—	2	—	—	1	1	11	5	10	6	8	14	20	9	11	38	63
Diseases of Circulation ..	3	1	—	—	—	—	—	—	3	—	4	4	10	7	26	14	43	14	32	29	18	27	136	100
Diseases of Respiratory System	—	—	—	—	1	—	—	—	—	—	1	4	6	5	8	4	21	6	12	7	5	10	58	37
Diseases of Digestive System	—	—	—	—	—	—	1	—	—	—	1	1	3	3	2	—	5	—	2	1	3	3	16	9
Non-Veneral Diseases of Urinary and Genital System	—	—	1	—	—	—	—	—	—	—	—	—	2	3	3	1	4	1	4	2	1	3	16	10
Diseases of Pregnancy and Childbirth ..	—	—	—	—	—	—	—	—	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	2
Diseases of Organs of Movement	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	—
Congenital Malformations	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Senility	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1
Suicide	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	3	5	4	5
Homicide	—	—	—	—	—	—	—	—	—	—	1	—	5	—	1	—	1	—	—	—	—	—	10	—
Accidents	—	—	1	—	5	1	3	—	2	—	3	—	5	2	3	—	3	—	1	1	3	4	29	8
Unknown or Unspecified Causes	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1	1
TOTAL	5	2	3	1	9	3	7	2	6	7	15	15	42	39	61	51	109	58	83	75	49	72	389	325

Table No. 5

DEATHS OF NATIVES, FIVE YEARS OF AGE AND OVER, WITHIN THE MUNICIPAL AREA FOR THE YEAR ENDED 30th JUNE, 1953

	5-10 Years		10-15 Years		15-20 Years		20-25 Years		25-30 Years		30-40 Years		40-50 Years		50-60 Years		60-70 Years		70-80 Years		Over 80 Years		Total		
	Q		M		F		M		F		M		F		M		F		M		F		M		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Infectious and Parasitic Diseases	3	4	—	—	4	1	1	1	3	3	1	7	4	8	—	6	3	4	—	1	1	—	—	37	17
Cancer and Other Tumours	—	—	—	—	—	—	—	—	—	2	—	2	1	2	1	4	1	5	1	2	2	—	—	17	6
Diseases of Nutrition ..	—	1	—	—	1	—	—	—	—	—	—	—	1	1	—	1	1	—	—	—	—	—	—	3	3
Endocrine Glands ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diseases of the Nervous System and Sense Organs	—	1	—	—	—	—	—	—	1	1	—	2	2	6	3	2	1	3	2	1	—	—	1	15	11
Diseases of the Circulatory System ..	—	1	—	—	1	1	—	—	1	1	—	2	5	2	3	6	4	6	4	6	5	3	3	27	27
Diseases of the Respiratory System	4	6	1	1	1	1	—	—	4	3	4	9	2	8	6	10	13	9	—	8	6	4	1	57	44
Diseases of the Digestive System	1	3	—	1	—	—	1	2	—	—	2	1	2	1	2	2	3	3	1	1	—	—	—	12	14
Non-Veneral Diseases of the Urinary and Genital Systems ..	—	1	—	—	—	—	—	—	1	—	2	—	—	—	—	—	1	—	—	2	1	—	—	5	3
Diseases of Pregnancy and Childbirth ..	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1
Diseases of the Skin and Cellular Tissues ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Diseases of the Joints..	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Senility	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Suicide	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Homicide	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2
Accidents	—	1	2	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2
Open Verdict	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	5
Unknown or Unspecified Causes	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	12
TOTALS	9	18	3	2	11	3	10	13	21	7	40	18	44	14	35	27	32	11	19	18	10	7	234	138	

Table No. 6

INFANTILE MORTALITY: EUROPEAN: CAUSES OF DEATH AND MORTALITY RATES FOR THE YEAR ENDED 30th JUNE, 1953

	Infectious Diseases		Diarrhoeal Diseases		Bronchitis Pneumonia		Congenital Causes		Other Causes		Prematurity		Injury at Birth		Total Deaths		Total Births		Mortality Rate per 1,000 Live Births				Total Rates	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F		
Central Area	—	—	1	2	2	1	1	—	—	2	8	7	1	—	13	12	273	267	47.62	44.94	46.30	—		
Pretoria West	—	—	—	1	—	1	1	2	3	2	4	3	1	2	9	11	301	295	29.90	37.29	33.56	—		
Leper and Mental Hospitals and Defence Reserves	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	—	5	8	200.00	—	76.92	—		
Salvokop	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1	18	29	—	34.48	21.28	—		
Voortrekkerhoogte	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	30	41	—	24.39	14.08	—		
Eastern Suburbs	1	—	—	—	1	3	2	—	3	—	4	2	—	—	11	5	413	388	26.63	12.89	19.98	—		
Northern Suburbs	—	—	1	4	2	1	2	—	2	2	4	4	1	1	12	12	573	541	20.94	22.18	21.54	—		
Hercules	—	—	3	—	2	1	1	3	2	—	2	1	—	1	10	6	248	266	40.32	22.56	31.13	—		
TOTAL MALES	1	—	5	—	7	7	7	—	11	—	22	—	3	—	56	—	1,861	—	30.09	—	—	—		
TOTAL FEMALES	—	—	—	8	—	—	5	—	6	—	18	—	4	—	48	—	1,835	—	26.16	—	28.14	—		

Table No. 7
 INFANTILE MORTALITY: ALL NON-EUROPEAN RACES: DISTRICT INCIDENCE FOR THE YEAR ENDED 30th JUNE, 1953

	Infectious Diseases		Diarrhoeal Diseases		Bronchitis Pneumonia		Congenital Causes		Other Causes		Prematurity		Injury at Birth		Total Deaths		Total Births		Mortality Rate per 1,000 Live Births				Total Rates
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	F		
NATIVE																							
Marabas	1	—	—	—	1	—	—	—	—	1	1	—	1	—	—	—	4	1	19	28	210.53	35.71	106.38
Bantule	1	—	6	5	4	1	—	—	1	5	—	2	—	—	—	—	12	13	95	93	126.32	139.78	132.98
Atteridgeville ..	—	—	1	—	3	4	—	—	3	3	1	8	1	1	2	—	11	16	165	183	66.67	87.43	77.59
Hercules	2	6	40	32	41	32	12	5	8	4	24	14	7	—	1	5	135	98	970	1,000	139.18	98.00	118.27
Town	—	—	6	2	1	2	—	1	2	1	7	13	1	1	—	—	17	20	156	161	108.97	124.22	116.72
TOTAL : MALE ..	4	—	53	—	50	—	12	—	14	—	33	—	10	—	3	—	179	—	1,405	—	127.40	—	—
FEMALE	—	6	—	39	—	39	—	6	—	14	—	37	—	2	—	5	—	148	—	1,465	—	101.02	113.94
ASIATIC																							
Location	1	—	—	2	2	—	1	—	—	—	—	—	—	—	—	—	4	2	77	53	51.95	37.74	46.15
Hercules	—	—	2	—	1	—	—	—	—	—	—	—	—	—	—	—	3	—	25	24	120.00	—	61.22
Town	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	29	30	—	33.33	16.95
TOTAL : MALE ..	1	—	2	—	3	—	1	—	—	—	—	—	—	—	—	—	7	—	131	—	53.44	—	—
FEMALE	—	—	—	2	—	—	—	—	—	—	—	1	—	—	—	—	—	3	—	107	—	28.04	42.02
EURAFRICAN																							
Location	—	—	1	3	—	1	—	—	1	1	1	2	—	—	1	1	8	31	47	—	129.03	170.21	153.85
Hercules	1	—	1	—	1	2	1	—	—	—	1	2	—	1	—	—	5	5	65	56	76.92	89.29	82.64
Town	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	4	1	—	1,000.0	200.00
TOTAL : MALE ..	1	—	2	—	1	—	1	—	1	1	2	—	—	—	1	—	9	—	100	—	90.00	—	—
FEMALE	—	—	—	3	—	3	—	—	—	1	—	5	—	1	—	1	—	14	—	104	—	134.62	112.75
ALL NON-EUROPEANS																							
Location	3	—	8	10	10	6	1	—	5	10	3	12	2	1	3	1	35	40	387	404	90.44	99.01	94.82
Hercules	3	6	43	32	43	34	13	5	8	4	25	16	7	1	5	143	103	1,006	1,080	134.91	95.37	114.95	
Town	—	—	6	2	1	2	—	1	2	1	7	15	1	1	—	—	17	22	189	192	89.95	114.58	102.36
TOTAL : MALE ..	6	—	57	—	54	—	14	—	15	—	35	—	10	—	4	—	195	—	1,636	—	119.19	—	—
FEMALE	—	6	—	44	—	42	—	6	—	15	—	43	—	3	—	6	—	165	—	1,676	—	98.45	108.70

Table No. 8

DEATHS IN INSTITUTIONS OF PERSONS NOT RESIDENT IN PRETORIA FOR THE YEAR ENDED 30th JUNE, 1953

	0-1 Years		1-5 Years		5-10 Years		10-20 Years		20-40 Years		Over 40 Years		Total Europeans		Total Non-Europeans	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
PRETORIA AND OTHER HOSPITAL																
European ..	27	14	3	4	1	3	8	3	18	12	116	64	173	100	—	—
Non-European ..	53	65	48	50	5	13	9	12	63	37	74	34	—	—	252	211
MENTAL HOSPITAL																
European ..	—	—	—	—	—	—	—	—	2	—	19	23	21	23	—	—
Non-European ..	—	—	—	—	—	—	—	1	10	—	18	4	—	—	28	5
LEPER ASYLUM																
European ..	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	—
Non-European ..	—	1	—	—	—	—	1	—	3	4	4	1	—	—	8	6
PRISONS																
European ..	—	—	—	—	—	—	—	—	1	—	—	—	1	—	—	—
Non-European ..	—	—	—	—	—	—	1	—	24	—	8	—	—	—	33	—
VISITORS																
European ..	—	—	—	—	—	—	—	—	1	—	7	12	8	12	—	—
Non-European ..	1	1	—	1	—	—	1	—	4	—	3	3	—	—	9	5
TOTAL :	27	14	3	4	1	3	8	3	22	12	142	100	203	136	—	—
EUROPEAN	54	67	48	51	5	13	12	13	104	41	107	42	—	—	330	227
NON-EUROPEAN	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

Table No. 9

NOTIFICATION OF INFECTIOUS DISEASES: LOCAL CASES: ALL RACES: FOR THE YEAR ENDED 30th JUNE, 1953

EUROPEANS

	0-1 Yea		1-5 Years		5-10 Years		10-20 Years		20-40 Years		Over 40 Years		Totals	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Typhoid Fever	—	—	—	—	1	1	3	2	1	2	1	—	6	5
Malta Fever	—	—	—	—	—	—	—	—	1	—	—	—	1	—
Scarlet Fever	—	—	25	—	39	54	14	22	2	1	—	—	80	98
Diphtheria	2	—	10	8	8	9	2	2	1	3	—	—	23	22
Erysipelas	—	—	—	1	—	—	—	—	—	—	1	3	1	4
Poliomyelitis	—	—	1	—	5	—	—	1	—	—	—	—	6	1
Infective Encephalitis	—	—	—	1	—	—	—	—	—	—	1	—	—	2
Cerebro-Spinal Meningitis	—	1	—	1	—	1	2	—	—	—	1	—	4	4
Tuberculosis	2	1	1	—	1	—	—	1	4	7	13	5	21	14
Puerperal Fever	—	—	—	—	—	—	—	1	—	2	—	—	—	3

NON-EUROPEANS

Typhoid Fever	—	—	4	1	7	6	7	6	9	5	—	—	27	18
Malta Fever	—	—	—	—	—	—	—	1	—	—	—	—	—	1
Diphtheria	1	3	13	17	7	14	1	3	—	3	—	—	22	40
Infective Encephalitis	—	—	—	2	—	—	—	—	—	—	—	—	—	2
Cerebro-Spinal Meningitis	1	—	—	1	—	1	1	2	1	—	1	—	4	4
Tuberculosis	1	2	11	10	6	5	6	8	43	27	43	11	110	63
Ophthalmia Neonatorum	1	—	—	—	—	—	—	—	—	—	—	—	1	—
Puerperal Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	1

Table No. 10

NOTIFICATION OF INFECTIOUS DISEASES: IMPORTED CASES: ALL RACES: FOR THE YEAR ENDED 30th JUNE, 1953

EUROPEANS															
Typhoid Fever
Typhus Fever
Malta Fever
Malaria..
Scarlet Fever
Diphtheria
Leprosy
Erysipelas
Poliomyelitis
Cerebro-Spinal Meningitis
Infective Encephalitis
Tuberculosis
NON-EUROPEANS															
Typhoid Fever
Diphtheria
Poliomyelitis
Cerebro-Spinal Meningitis
Tuberculosis
Puerperal Fever

Table No. 11

DISTRICT DISTRIBUTION OF NOTIFIED INFECTIOUS DISEASES FOR THE YEAR ENDED 30th JUNE, 1953

	Race	Infective Encephalitis		Cerebro-Spinal Meningitis		Tuberculosis		Typhoid Fever		Diphtheria		Scarlet Fever		Erysipelas		Polio-myelitis		Ophthalmia Neonatorum		Puerperal Fever		Malaria Fever	
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Central Area
Pretoria West
Leper and Mental Hospitals, Prison and Defence Reserve
Voortrekkerhoogte
Eastern Suburbs
Salvokop
Northern Suburbs
Hercules
Marabas
Bantule
Atteridgeville
Asiatic Bazaar
Cape Location
Municipal Compound and Hostel

Table No. 12

INCIDENCE OF INFECTIOUS DISEASES FOR THE YEAR ENDED 30th JUNE, 1953

			Typhoid Fever	Typhus Fever	Malta Fever	Malaria	Scarlet Fever	Diphtheria	Erysipelas	Pollomyelitis	Infective Encephalitis	Cerebro-Spinal Meningitis	Tuberculosis	Ophthalmia Neonatorum	Puerperal Fever	Leprosy
July—																
European	..	Resident	—	—	—	—	8	4	—	1	—	—	4	—	1	—
		Imported	1	—	—	—	—	—	—	1	—	2	22	—	—	—
Non-European		Resident	3	—	—	—	—	2	—	—	—	—	14	—	—	—
		Imported	7	—	—	—	—	5	—	—	—	—	12	—	—	—
August—																
European	..	Resident	1	—	—	—	11	1	—	—	—	1	1	—	—	—
		Imported	2	—	—	—	1	1	—	1	—	—	2	—	—	—
Non-European		Resident	—	—	—	—	—	3	—	—	1	—	12	1	1	—
		Imported	6	—	—	—	—	1	—	—	—	—	11	—	—	—
September—																
European	..	Resident	—	—	—	—	17	2	—	—	1	2	1	—	—	—
		Imported	1	—	—	—	—	—	—	—	—	—	3	—	—	—
Non-European		Resident	1	—	1	—	—	3	—	—	—	1	15	—	—	—
		Imported	6	—	—	—	—	1	—	—	—	1	11	—	2	—
October—																
European	..	Resident	1	—	—	—	24	2	—	—	—	—	1	—	1	—
		Imported	6	—	—	—	—	2	—	—	—	—	—	—	—	—
Non-European		Resident	1	—	—	—	—	3	—	—	—	4	18	—	—	—
		Imported	5	—	—	—	—	5	—	—	—	—	10	—	—	—
November—																
European	..	Resident	1	—	1	—	15	2	1	—	—	—	6	—	—	—
		Imported	15	—	1	—	2	2	—	1	—	—	—	—	—	—
Non-European		Resident	3	—	—	—	—	4	—	—	—	1	11	—	—	—
		Imported	9	—	—	—	—	5	—	—	—	—	12	—	—	—
December—																
European	..	Resident	2	—	—	—	9	—	—	2	—	—	2	—	—	—
		Imported	6	—	—	—	—	—	—	1	—	—	—	—	—	—
Non-European		Resident	6	—	—	—	—	—	—	—	—	1	11	—	—	—
		Imported	11	—	—	—	—	1	—	—	—	—	9	—	—	—
1953																
January—																
European	..	Resident	3	—	—	—	5	3	—	1	—	4	6	—	—	—
		Imported	3	—	—	—	—	4	1	2	2	—	—	—	—	—
Non-European		Resident	11	—	—	—	—	11	—	—	—	1	18	—	—	—
		Imported	49	—	—	—	—	5	—	—	—	—	18	—	—	—
February—																
European	..	Resident	—	—	—	—	19	13	1	—	—	1	3	—	—	—
		Imported	1	—	—	—	—	2	—	1	—	—	1	—	—	—
Non-European		Resident	7	—	—	—	—	11	—	—	—	—	12	—	—	—
		Imported	14	—	—	—	—	5	—	3	—	—	9	—	—	—
March—																
European		Resident	1	—	—	—	16	6	—	—	—	—	3	—	—	—
		Imported	2	1	—	1	—	13	—	1	—	1	1	—	—	—
Non-European		Resident	4	—	—	—	—	9	—	—	1	—	18	—	—	—
		Imported	53	—	—	—	—	5	—	—	—	—	17	—	—	—
April—																
European	..	Resident	2	—	—	—	21	9	—	—	1	—	1	—	1	—
		Imported	3	—	—	—	1	6	—	—	—	—	2	—	—	—
Non-European		Resident	1	—	—	—	—	4	—	—	—	—	16	—	—	—
		Imported	15	—	—	—	—	9	—	—	—	—	8	—	—	—
May—																
European	..	Resident	—	—	—	—	19	1	—	2	—	—	2	—	—	—
		Imported	5	—	—	—	1	4	—	1	—	—	2	—	—	—
Non-European		Resident	1	—	—	—	—	8	—	—	—	—	19	—	—	—
		Imported	10	—	—	—	—	7	—	—	—	—	7	—	—	—
June—																
European	..	Resident	—	—	—	—	14	2	3	1	—	—	5	—	—	—
		Imported	2	—	—	—	2	5	—	—	—	—	3	—	—	1
Non-European		Resident	7	—	—	—	—	4	—	—	—	—	9	—	—	—
		Imported	14	—	—	—	—	5	—	—	—	—	14	—	—	—



